

2009 HOUSE HUMAN SERVICES

HB 1371

2009 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. 1371

House Human Services Committee

☐ Check here for Conference Committee

Hearing Date: January 20, 2009

Recorder Job Number: 7278

Committee Clerk Signature

Vicky Crahtree

Minutes:

Chairman Weisz called the hearing to order on HB 1371.

Rep. Grande sponsored and introduced the bill: See Testimony #1.

Rep. Kerzman co-sponsor of the bill: I want to thank Rep. Grande for sponsoring this legislation and that I stand in support of it.

Janne Myrdal, Director for Concerned Women for America of North Dakota: Testified in support. **See Testimony #2.**

Rep. Conrad: I understand an ultrasound costs \$200-\$300.

Janne Myrdal: The latest I heard is it costs \$125. The Fargo clinic will charge a \$125 for the ultra sound if you do not have an abortion. If she has the abortion, the cost is absorbed in the \$500 and up charge for the abortion.

Rep. Conrad: (Inaudible).

Janne Myrdal: I believe in the bill it talks about (inaudible). There are available free ultrasounds in other clinics in Fargo. First Choice Clinic (inaudible).

Rep. Holman: Explain rationale of 24 hour waiting period.

Janne Myrdal: After 20 years of counseling some of these women, there are tremendous emotional pressures (inaudible) if we can save them the grief I've seen in women after they have had an abortion that weren't fully informed is really important.

Rep. Nathe: Is other medical personnel in the room making sure these guidelines are being followed?

Janne Myrdal: According to some testimony, a nurse is in the room. The doctor who performs the abortion usually doesn't arrive until (inaudible).

Rep. Nathe: The way you envision this, is besides the ultra sound operator, someone else would be there, personnel, if she goes this route?

Janne Myrdal: Yes.

Patti Kiloran, RN, Nurse Manager, FirstChoice Clinic (Fargo): Testified in support.

See Testimony #3.

Rep. Conrad: Are saying the doctor denies the patient to see ultra sound?

Patti Kiloran: (Inaudible) medical doctor whether clinically (inaudible).

Stacey Pflieger, Legislative Director to Right to Life: Read testimonies #4, #5, #6 in support of bill. **See Testimonies #4, #5 and #6.**

Dr. Raymond Gruby from Bismarck: Testified in support. Stated the women should have as much information as possible. The more information a person has, the better off you'll be.

Patty Armstrong: Testified in support. I have 10 children. I'm a writer and have done books on women who have had abortions. Women are under pressure. One woman named Stacey, wanted to stop abortion on the table and she was told she couldn't and that it was too late. She found out later it wasn't too late to stop it. You need to provide women with as much information as possible. There is still women today that do not fully understand. People talk about the health facilities that provide abortions as "women's reproductive health", and I think

that is so demeaning to women. Because we have to acknowledge that women are in a crisis, whether you support her right to have an abortion or not, you need to have some compassion and realize she is in a crisis and how can we best help this woman make a decision she is going to live with and that is to provide her with information, which is what the ultra sound bill does. It has been passed in 20 other states.

Christopher Dobson, Executive Director of Catholic Services: Testified in support. **See Testimony #7.**

Tom Freier, representing ND Family Alliance: Testified in support. **See Testimony #8.**

Rep. Conrad: How many adopted or kept by families out of 63,000?

Tom Freier: I don't know what that number is, but one option is adoption when they have options.

NO OPPOSITION:

Chairman Weisz closed the hearing.

2009 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. 1371

House Human Services Committee

☐ Check here for Conference Committee

Hearing Date: January 26, 2009

Recorder Job Number: 7762 2 min. 48 sec.

Committee Clerk Signature

Ticky Crabtree

Minutes:

Chairman Weisz: HB 1371 have no amendments.

Rep. Porter motioned to have a **DO PASS**.

Rep. Hofstad seconded.

Rep. Porter: There was no opposition to the bill and sounded like standard practice. Don't see any reason to not passing it.

Roll Call Vote: 13 yes, 0 no, 0 absent.

Carrier of bill: Rep. Kilichowski

Date: 1-26-09

Roll Call Vote #:

2009 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 137

House HUMAN SERVICES Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken ☒ Do Pass ☐ Do Not Pass ☐ Amended

Motion Made By Rep. Porter Seconded By Rep. Hofstad

Representatives	Yes	No	Representatives	Yes	No
CHAIRMAN ROBIN WEISZ	✓		REP. TOM CONKLIN	✓	
VICE-CHAIR VONNIE PIETSCH	✓		REP. KARI L CONRAD	✓	
REP. CHUCK DAMSCHEN	✓		REP. RICHARD HOLMAN	✓	
REP. ROBERT FRANTZVOG	✓		REP. ROBERT KILICHOWSKI	✓	
REP. CURT HOFSTAD	✓		REP. LOUISE POTTER	✓	
REP. MICHAEL R. NATHE	✓				
REP. TODD PORTER	✓				
REP. GERRY UGLEM	✓				

Total (Yes) 13 No 0

Absent 0

Bill Carrier Rep. Kilichowski

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1371: Human Services Committee (Rep. Weisz, Chairman) recommends DO PASS
(13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1371 was placed on the
Eleventh order on the calendar.

2009 SENATE HUMAN SERVICES

HB 1371

2009 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. HB 1371

Senate Human Services Committee

☐ Check here for Conference Committee

Hearing Date: 03/17/2009

Recorder Job Number: 11110

Committee Clerk Signature

Mary K Monson

Minutes:

Chairman J. Lee Opened the hearing on HB 1371.

Representative Bette Grande District #41. Introduced and spoke in support of HB 1371. See attachments #1&2.

Senator Heckaman How soon after someone finds out that they are pregnant are they able to have an ultrasound?

Grande I think there are far better people here to answer that question but in a book I have says as early as 3 weeks. I will defer to others.

Senator Dever I am curious about the availability of ultrasounds and how much they cost.

Grande I understand that the clinics that perform abortions have ultrasounds there but I also know that FirstChoice in Fargo has them there and they are free. So women do have that option.

Tom Freier ND Family Alliance. Spoke in support of 1371. See attachments #3 &4. Told the stories behind the Faces of Option Ultrasound pictures—the stories are available on that website.

Senator Dever I am curious as to what other states might have legislation related to this.

Freier I think there are 17 states that actually have laws on the books and during this legislative session I think there were other states working on similar legislation.

Janne Myrdal State Director for Concerned Women for America. Spoke in support of 1371.

See attachment #5. Answered the question about price of ultrasounds—if you get an abortion they will give you the ultrasound for free. If you ask for an ultrasound and do not go through with an abortion, it costs 21 dollars. Generally girls do not come into a clinic until they are 4-6 weeks along.

Stacey Pflieger Legislative Director of the ND Right to Life Association. Spoke in support of 1371. See attachment #6. Also listed some other clinics that offer free ultrasounds.

Senator Dever Comment about seeing his grandchild's ultrasound

Christopher T. Dodson ND Catholic Association. Spoke in support of 1371. See attachment #7.

Dr. Raymond Gruby Doctor. Spoke in support of 1371. See attachment #8.

There was no opposition or neutral testimony given.

Chairman J. Lee Closed the hearing on HB 1371.

Senator Dever I move **Do Pass**

Senator Heckaman Second

The Clerk called the role on the motion to **Do Pass. Yes: 6, No: 0, Absent: 0.**

Senator Erbele will carry the bill.

Date: 3/17/09

Roll Call Vote #: _____

2009 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. HB 1371

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken ☒ Do Pass ☐ Do Not Pass ☐ Amended ☐ Rerefer to Appropriations
☐ Adopt Amendment ☐ Reconsider

Motion Made By Sen. Dever Seconded By Sen. Heckaman

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V.Chair	✓		Senator Richard Marcellais	✓	
Senator Dick Dever	✓		Senator Jim Pomeroy	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Erbele

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE (410)
March 17, 2009 4:13 p.m.

Module No: SR-48-5161
Carrier: Erbele
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

HB 1371: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS
(6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1371 was placed on the
Fourteenth order on the calendar.

2009 TESTIMONY

HB 1371

HB 1371

Do to the improvements in technology and constant advancements in medicine, simply offering an ultrasound will allow for a better informed patient. Think about it, when you go to the dentist you get an x-ray of your teeth before you have work done, ultrasounds of kidney stones before removed or laser procedures are done, ultrasounds of gall bladders before surgery, etc. It is considered prudent to educate the patient of what is going on so an informed decision can be made by all parties involved. This bill is meant merely to help women have all the information before they consider before making a very important and difficult decision.

I am here before you unashamed that this bill seeks to lessen the number of babies lost to abortion. If even a few take up the offer to view the ultrasounds and change their minds, well this is a good thing. It is a life or death decision that should not be taken lightly. Let's make sure women have every chance to be informed.

It has been stated that this bill is a duplication of what is already being done, if so... then there will be little problem in following the law, it is said that this is a delay tactic... Well I would say that a delay in a critical decision should be warranted if it saves a life.

Mr. Chairman and members of the committee as the Fargo Forum stated the other day "Choice after all, can mean saying no to an abortion".

Rep. Bette Grande

District 41



512 10th Street, NW Washington, DC 20004-1401
(202) 626-8600 FAX: (202) 737-9189 Website: www.nrlc.org

**WOMAN'S RIGHT TO KNOW:
STATES THAT OFFER ULTRASOUND OPTION
May 16, 2008**

STATE	YEAR ENACTED	DESCRIPTION
ALABAMA ¹ Ala. Code § 26-23A-4 (4);(5)	2002	Pregnant mother has right to view ultrasound, the law also requires abortion clinics and clinics that refer for abortions to have ultrasound equipment.
ARIZONA* A.R.S. § 36-449.03 (D)(4)	1999	An ultrasound must be used for all patients who elect to have an abortion after 12 weeks gestation. The mother must request to view the ultrasound if it is to be shown to her. Then the physician or technician shall review it with her.
ARKANSAS Ark. Stat. Ann § 20-16-602	2003	Abortion clinics who use ultrasound equipment shall inform the pregnant woman she has the option of viewing the ultrasound.
FLORIDA* Fla. Stat. Ann. §390.012 (4)	2005	An ultrasound must be used for all patients who elect to have an abortion after 1 st trimester. The mother must request to view the ultrasound if it is to be shown to her. Then the physician or technician shall review it with her.
GEORGIA Ga. Code Ann. § 31-9A-3(4) Ga. Code Ann. §31-9A-3(2)(C)	2007	In all cases where ultrasounds are performed before an abortion the pregnant mother shall be offered a chance to view the ultrasound and hear the heartbeat. Pregnant mother is told before an abortion of ultrasound services and how to obtain them at no cost.
IDAHO Idaho Code § 18-609 (3)	2007	Abortion clinics who use ultrasound equipment shall inform the pregnant woman she has the option of viewing the ultrasound and obtaining a picture of her unborn baby.
INDIANA** Ind. Code Ann. § 16-34-2-1.1 (F)	2005	Pregnant mother is told 18 hours before an abortion of ultrasound and fetal heart tone services and how to obtain them,

¹ Attorney General has entered a consent agreement declaring Ala. Code § 26-23A-4 (LexisNexis 2007) is subject to medical emergency exception which includes psychological harm. *Summit Med. Ctr. of Ala., Inc. v. Riley*, No. 02-A-1064-N (M.D. Ala. June 25, 2004) (order granting permanent injunction).

STATE	YEAR ENACTED	DESCRIPTION
		upon her request she can view the ultrasound.
LOUISIANA La. Rev. Stat. §40:1299.35.6 (B)(1)(h) La. Rev. Stat. §40:1299.35.2 (C)	2007 1999	Abortionist shall inform the pregnant mother of her option to review and receive an explanation of an obstetric ultrasound image of the unborn child. The abortion doctor shall inform the pregnant mother that she has the option of viewing an ultrasound of her unborn child of twenty weeks gestation or more.
MICHIGAN M.C.L.A. §333.17015 (8)	2006	If an ultrasound is performed on the pregnant mother the abortion clinic shall inform her of the option of viewing the ultrasound and obtaining a picture of her unborn baby. She is told before an abortion of clinics that offer free ultrasounds.
MISSISSIPPI Miss. Code § 41-41-34	2007	Before an abortion is performed, an ultrasound shall be performed on the pregnant woman and the abortion clinic shall inform her of the option to view the ultrasound, and hear the heart tone and obtain a picture of her unborn child.
OHIO Ohio Rev. Code Ann. §2317.561	2008	If an ultrasound is used prior to the performance of an abortion the abortionist shall provide the mother the opportunity to view the active ultrasound and offer to provide her with a physical picture and shall not require any additional charges.
OKLAHOMA §63-1-738.2 (B)(1)(a)(5) Enacted in 2008 §63-1-738.3b	2006 2008	Pregnant mother is told before an abortion of ultrasound and fetal heart tone services and how to obtain them at no cost. At least 1 hour prior to performing an abortion the abortionist must display the ultrasound image.
SOUTH CAROLINA S.C. Code Regs. 61-12 § 301 (C)(2) Enacted in 2008 S.C. Code Ann. §41-41-340(A)(1)(a),(b)	1996 2008	Abortion Clinic Regulations require the abortionist to perform an ultrasound when gestational age is unknown or is estimated to be 14 weeks or older. If an ultrasound is performed the abortionist must inform the pregnant mother of her right to view an ultrasound during or after the ultrasound is performed. No abortion may be performed sooner than 60 minutes after an ultrasound. The woman must certify in writing that she has been informed of her right to view the ultrasound.

STATE	YEAR ENACTED	DESCRIPTION
SOUTH DAKOTA	2008	Pregnant mother is offered chance to view sonogram of her unborn child before an abortion is performed, also reports the number of women who viewed sonogram.
UTAH ^{2**} Utah Code Ann. § 76-7-305.5(5) Utah Code Ann. § 76-7-305 (v)	1996	The department of Health shall provide ultrasounds at no expense to the pregnant mother. The pregnant mother has the right to view an ultrasound at no expense to her upon her request.
WISCONSIN ³ Wis. Stat. Ann. §253.10(3)(c)1(g)	1998	Pregnant mother is told before an abortion of ultrasound and fetal heart tone services and how to obtain them.

* Arizona & Florida have laws that require an ultrasound to be used for abortions after the 1st trimester of pregnancy but the burden is on the mother to make the request to view it.

** Indiana & Utah have laws that place the burden on the pregnant mother to request to view the ultrasound throughout pregnancy.

² Upheld in *Utah Women's Clinic, Inc v. Leavitt*, 844 F. Supp 1482 (D. Utah 1994)

³ Upheld *Karlin v. Foust*, 188 F.3d 446; 1999 U.S. App. LEXIS 18409, on August 9, 1999.



Handwritten note: Same given to Senate.

HB1371 House Health and Human Services Committee- Jan. 20, 2009

Good morning Mr. Chairman and members of the committee. My name is Janne Myrdal, and I am the state director for Concerned Women for America of North Dakota. We urge you to support HB1371. The reason is a simple one. Advances in technology, particularly 3D and 4D ultrasound, are marvelous tools empowering women in crisis pregnancies to make **an informed choice** about whether or not to end the life of their unborn child.

I believe offering an ultra sound is an act of compassion, empowering the woman with the visual information of scientific facts. It is well documented that uninformed choices have led countless post-abortion women to suffer devastating psychological, physical, spiritual, and emotional consequences for the rest of their lives. It is standard medical practice to show people pictures of their x-rays, MRIs, ultrasounds, etc. so they are fully informed. But, currently, abortionists are not showing these pictures to women. The screen is turned away out of the view of the woman. We believe that it is every woman's right to know that she is carrying a living, developing human being.

A Grassfire.org poll revealed that 77 percent of Americans believe women seeking abortions have the right to view an ultrasound and hear the heartbeat of their unborn children.

I would like to read a couple of brief quotes from the United States Supreme Court decisions regarding informed consent:

From *Planned Parenthood v. Danforth*, 428 U.S. 52, 67 (1976): **The decision to abort "is an important, and often a stressful one, and it is desirable and imperative that it be made with full knowledge of its nature and consequences."**

And from *Planned Parenthood v. Casey*, 505 U.S. 833, 822 (1992): **"In attempting to ensure that a woman apprehend the full consequences of her decision, the State furthers the legitimate purpose of reducing the risk that a woman may elect an abortion, only to discover later, with devastating psychological consequences, that her decision was not fully informed."**

Whether you support a woman's right to choose or not, you should support her right to see an ultrasound to help her make a more fully informed choice. Women have a right to have all the information the doctor has. There is no argument to be won here of government intrusion, nor undue duress, just good medical practice as is applied to any other procedure. **An uninformed choice is really no choice at all.** Again, I urge your support of this common sense and pro-woman bill.

CONCERNED WOMEN FOR AMERICA
OF NORTH DAKOTA



TO: House of Representatives – Human Services Committee Members

Robin Weisz – Chairman
Vonnie Pietsch – Vice Chairman
Tom Conklin Kari L. Conrad
Chuck Damschen Robert Frantsvog
Curt Hofstad Richard G. Holman
Robert Kilichowski Michael R. Nathe
Todd Porter Louise Potter
Gerry Uglem

FROM: Patti Killoran, RN
Nurse Manager, FirstChoice Clinic (Fargo)

RE: House Bill No. 1371 – Relating to providing ultrasound services for abortion vulnerable women.

DATE: January 20, 2009

Chairman Weisz and members of the Human Services Committee,

My name is Patti Killoran and I am the Nurse Manager at FirstChoice Clinic, a pregnancy help clinic in Fargo and a satellite clinic in Devils Lake. I am appearing here today to support HB 1371.

FirstChoice Clinic provides vulnerable women with free ultrasound services and also the support and education they need to ensure the health and well being of their baby. We are committed to providing accurate and factual medical information to our clients to let THEM make their best decision and a fully informed decision – I feel ultrasound is part of a women being fully informed regarding her pregnancy. At our clinic in 2008, we had over 2000 client contacts. We provided information on informed consent to the 375 pregnancy test clients who came to us. We provided 231 ultrasound exams. From our 2008 statistics we found 82% of abortion minded women accepted offers of a limited ultrasound exam. We know for sure that 50% of these abortion minded women changed their minds, and chose to carry their pregnancies to term. 8% miscarried and 25% of them we were not able to know their final decision. We can confirm that only 16% stayed committed to their decision of abortion.



Many women cannot make the connection of being told that they are pregnant and the fact that a living being is already formed within them. It is "not real" for many women until they see the fetus with a beating heart that it finally becomes a reality. Denial is a powerful emotion when a pregnancy is not intended or wanted. We receive varying reactions to the images our clients see and we are there to answer questions they may have regarding the pregnancy. Many fathers are also brought to amazement and tears. Another important aspect of ultrasound is the dating of the pregnancy. Many clients are not sure how far along they are, some are much further along in their pregnancy than they realize. We are obligated to inform them of the legal issues involved and the termination procedures at that point in their pregnancies. Viability is also determined, as 25% of all pregnancies do end in miscarriage.

I can honestly add that of the hundreds of ultrasounds I have performed, I have had **only one** person ask me:

"Do I have to look at the screen?"

We need to continue to be educating all women. It's the only way they can make the best informed decision. With today's intelligent women, who are so information savvy, this is the least we can do.

I would encourage the committee to support House Bill number 1371 – offering women ultrasound exams so they can make a truly informed decision regarding their pregnancy is something we can all support.

I would be happy to address any questions or comments from the members of the committee?



#4

North Dakota Right to Life Association

Testimony before the HOUSE HUMAN SERVICES COMMITTEE
House Bill 1371
January 20, 2009 10:30 am

Chair Weisz, members of the committee, I am Stacey Pfliiger, Legislative Director of the North Dakota Right to Life Association. I am here today in support of HB 1371 relating to limitations on the performance of abortion and abortion reporting requirements, also known as the ultrasound bill.

HB 1371, if passed, will give women additional information about their pregnancy which will allow them to make a more informed decision.

Today I have testimony to share with the committee concerning the use of ultrasound technology and how this technology assisted in the decision making process. [See attached.]

I urge the committee to give HB 1371 a **DO PASS** recommendation.

Thank you for the opportunity to testify today. I would be happy to answer any questions the committee may have.

In 2006 there was a world awaiting me. I had just graduated high school and received a full tuition scholarship to attend a division one University in a major city. My dreams were coming true, but it wasn't long before this time that my world seemed like it was crashing down around me...

*Same
given to
Senate.*

Over the course of a year I was threatened, abused and finally raped by a man that was in a power position over me. I had developed post traumatic stress disorder and had begun to self medicate using marijuana. As I look back I can see that during the months that follow my rape I had become a different person. I had withdrawn from the things in life that had once given me joy. I developed an unhealthy relationship with a guy three years older than I, and my use of marijuana had gotten out of control. Although my use started as a way to face sleep with the threat of the horrific recurring nightmares I was experiencing, eventually the drug occupied my entire day propelling myself into a new reality of smoking myself 'sober'. Although I had always been on the honor roll at school, I found myself with a lack of motivation and at times wondered if I would even graduate. I started to receive therapy six weeks after my rape which helped me stay on track to graduate and apply to colleges, but, of course it didn't make everything better. During fights with my boyfriend I would seek refuge with a guy from my high school. He had a tough life too, and it seemed that we could relate.

In July I was facing a positive pregnancy test. At the time I felt like if there was one more thing to go wrong, this was it. Immediately I contacted my boyfriend who without hesitation told me we should have this child aborted. He didn't even give me time to realize or be happy I was pregnant. It was not a time for celebration. He researched and found a clinic in Fargo that would perform the procedure and instructed me to contact them as soon as possible. Two weeks passed before I got an appointment. By the time I could get in I would be twelve weeks pregnant, almost completed with my first trimester.

On the morning of my appointment, I felt so sad. My boyfriend, my mom and I headed to Fargo. We were less than a hundred miles away from my home when the water pump went out of our car and the tire blew out simultaneously. What a sign! At this point I was hysterical. We had to borrow my brother's vehicle to continue this trip. In the mean time, his wife had figured out what was going on and called to plead with me to reconsider what I was doing. I decided to continue to Fargo, although knowing in my heart that I may not go through with my decision.

When I arrived in Fargo, I was greeted by people on the sidewalk outside of the clinic. It was almost too much. I was crying and ashamed to

be entering this cold dark place. I filled out paperwork and went downstairs where they gave me a sonogram to approximate the age of the fetus. The technician did not allow me see the picture, as if what I was carrying with me was not a reality. At this point I decided it was my time to leave. I could look around and see that I was not the same as the dozen others in the room. I made the staff aware of my decision and walked back out of that door.

My boyfriend and I took a walk but someone caught up to us. It was one of the girls from the sidewalk, Alexa. She said she could take us to a clinic where they could help us discuss our options. We went to First Choice. The atmosphere was completely different- it was bright and friendly. They offered to give me a sonogram to determine the age and health of my baby and even printed me a picture of the little one. They also counseled me on my options and educated me on what I should be doing at that point in my pregnancy. It didn't matter to them how we had gotten there, just that they could care for us and help us during a difficult time. For the first time, I felt excited about my growing baby.

In February of 2007 my son Sheldon was born. He weighed 8 pounds and 6 ounces, a big boy, and was welcomed into the world by my family. I entered parenthood without Sheldon's dad who has still been absent, but my experience as a mom could not be greater. Sheldon has saved my life, taken me out of the dark shadows I was once amongst. I have become a stronger, healthier person to his credit. I continue school in Colorado and will graduate after five years of study in 2011 after which I plan to pursue a graduate program. In December of 2008, Sheldon and I accepted a marriage proposal to an amazing guy from my hometown. We plan to become an official family after I graduate.

If it weren't for First Choice Clinic and Alexa, who referred me there, I am not sure I would have such joyous news to report to you today. I can not imagine my life without Sheldon. I am honestly not sure that I would be living one if it wasn't for him. I am eternally grateful for all of the support I have received from both First Choice and Alexa over the past two and a half years. I know that I am among many who have been touched by their work. I hope that they can continue in their mission in 2009 and beyond.

Same given to sister.

After years of combating endometriosis and yearning for a child, my husband and I turned to fertility medication. Imagine our excitement when our doctor informed us of our POSITIVE pregnancy test.

A couple of weeks following our positive pregnancy test, we went in for a very early ultrasound. We were both anxious to go to the appointment and hoped we would hear we were expecting twins following our years of waiting. Imagine our surprise when the ultrasound technician showed us what she found on the screen (remember, we are a young couple uneducated in reading ultrasounds): my heart sank-three black dots. My biggest fear: we had lost the pregnancy as all we 'saw' by our uneducated eyes were a uterus and two ovaries. The technician immediately called in our doctor which scared me even more. Our physician entered the room and before he even had the door closed was smiling from ear to ear. My reaction to that was of total disbelief as I 'knew' I had lost the pregnancy. But instead, our doctor informed us we were expecting TRIPLETS! My emotions went from sadness of losing the pregnancy to being completely overwhelmed at the news.

After our ultrasound we went to meet with the doctor. As he began to explain our high risk pregnancy, one of the explanations the doctor informed us of was 'selective reduction'. I do not recall exactly how 'selective reduction' came up and at the time I hadn't really thought of myself as an abortion prone woman. It didn't take long for us to inform the doctor 'selective reduction' was not an option.

As the weeks passed and the babies grew, we found ourselves having more than seven (7) ultrasounds throughout the pregnancy. Each time we 'saw' our babies, we were amazed at their growth and development. The most exciting was having them measured and weighed, assuring us they were always healthy and growing without complications. At one ultrasound appointment we were told the babies were all girls!

At age 31 weeks 1 day, our three beautiful daughters were born very small, but healthy. In the hours following the delivery, as my husband and I visited about this extraordinary experience, I recall one part of the conversation turning toward our rejection of 'selective reduction' early in the pregnancy. As we talked we always came back to this: IF we had chosen selective reduction from a triplet pregnancy to a twin pregnancy in those early weeks, we would have spent the rest of our life wondering if we had killed our son.

The use of ultrasound technology helped us, even in a high risk situation, make a more informed decision about how to proceed for the health of the babies as well as the health of the mother.



Representing the Diocese of Fargo
and the Diocese of Bismarck

Christopher T. Dodson
Executive Director and
General Counsel

To: House Human Services Committee
From: Christopher T. Dodson, Executive Director
Subject: House Bill 1371
Date: January 20, 2009

*Same given
to Senate.*

The North Dakota Catholic Conference supports House Bill 1371.

House Bill 1371 furthers a legitimate state interest that persons on all sides of the abortion issue should support. Long gone are the paternalistic days of medicine when we allowed doctors to withhold crucial information from a patient before a medical procedure. This legislative body has already found that this is particularly true with regards to abortion when it enacted our existing abortion informed consent requirements.

New techniques and new understandings about the consequences of abortion and pregnancy, however, require improvements in our informed consent law. These laws are concrete and effective steps to protect women's health and ensure that their consent to abortion is as fully informed as possible. These provisions advance what is recognized by the Supreme Court as the state's important and legitimate interest in promoting women's health and protecting life.

For example, ultrasound requirements serve an essential medical purpose in that they can diagnose ectopic pregnancies which, if left undiagnosed can result in infertility or fatal blood loss.¹ An ultrasound furthers informed choice by showing the unborn child as he or she really is, so that a woman has a better understanding of what occurs in an abortion. Moreover, medical evidence indicates that women feel bonded to their children after seeing them on an ultrasound. Researchers go on to argue that once that happens, a woman is less likely to feel ambivalent about her pregnancy and more invested in the health of her unborn child.²

In short, a requirement that a woman be given the opportunity to receive and view an ultrasound is a legally acceptable means of furthering the state's legitimate interest in furthering women's health, ensuring informed consent, and protecting human life. Women deserve nothing less.

We urge a **Do Pass** recommendation on House Bill 1371.

¹ Mayo Clinic, *Ectopic Pregnancy* (2007), available at:
<http://www.mayoclinic.com/health/ectopic-pregnancy/DS00622>

² Joseph C. Fletcher and Mark I Evans, *Maternal Bonding in Early Fetal Ultrasound Examinations*, 105 J. Med. Soc. 1092 (1983), ND 58501
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North Dakota FAMILY ALLIANCE

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A Trusted Voice

Tom D Freier
EXECUTIVE DIRECTOR

House Human Services Committee HB 1371 January 20, 2009

Mr. Chairman and members of the House Human Services Committee, I am Tom Freier, and I represent the North Dakota Family Alliance, and am here to testify in favor of HB 1371.

It is no secret how passionately the NDFA strives to protect the life of the unborn, and at the same taking into account the well being of the mother. This bill addresses the best interests of both the pregnant woman and the baby.

When a pregnancy occurs which at the time may seem unwanted or untimely, an abortion may be one of the options considered. It is at this time the woman needs all the information available to make the most informed decision possible.

If an abortion is considered, the medical procedure requires full disclosure to make that decision, much the same as a hip replacement or bypass heart surgery. What might the recovery time be, what kind of complications might result from the procedure, or could there be lifelong emotional effects? In the case of an abortion, an ultrasound can offer an integral component of that disclosure.

An ultrasound will help women understand their bodies, their pregnancy, and their baby's development. It will aid in prompting women to seek early prenatal care, protecting their own health and the health of the baby. The ultrasound image and heart tone furnish the woman with a real understanding of a new life, and replace the tears of anguish and despair with tears of hope and joy.

As I conclude and ask for your favorable consideration of HB 1371, let me share some stories of hope and joy. Operation Ultrasound has been in existence for 5 years and it is estimated up to 63,000 unborn babies have been saved as a result of the placement of 400 ultrasound machines in 49 states.

Tabatha from Ohio

I was raising two children, a boy and a girl. I had a job I adored, drove a decent car and had my own two bedroom apartment — it wasn't easy, but with my job and support from a friend at work, I was doing it.

Taylor & Dustin from Minnesota

Abortion seemed the only answer

Taylor, the young woman, and her boyfriend, Dustin, asked if they could get some information. When asked by the advocate what it was in regards to, they stated, "An abortion."

Ashley from North Dakota

Ashley released a lot of her emotions. With many words and tears, she told us that she had just begun a new chapter in her life and a baby was not part of her plans. She was very confused and undecided on what to do

You can log on to the link below to read about the great stories each of these individuals have to share about how the viewing of an ultrasound affected them, and their decision to bring their unborn child into this world.

<http://www.heartlink.org/faces/>

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Faces of Option Ultrasound

Five years of Option Ultrasound:

Potential number of babies saved? As high as 63,000.

The value of an ultrasound image? These moms would say, "Priceless!"

Click on the photos below to read stories from moms around the nation.

More info: 5th Anniversary of Option Ultrasound Fact Sheet (pdf)



Alabama



Alaska



Arizona



California



Colorado



Florida



Georgia



Hawaii



Indiana



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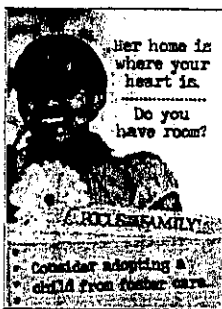


Kentucky



Louisiana

Support the Sanctity
of Human Life



This area is for
Pregnancy Resource
Centers wanting to get
started in the OUP
program or needing
information pertinent
to the program.

Help Focus In the Fight for
Life!



Minnesota



Montana



North Carolina



Giving a gift is easy.
Simply follow our two-
step process for safe,
secure and private
monthly donations.



North Dakota



Nebraska



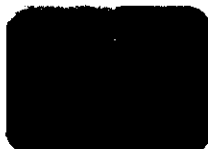
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Our Life Saving Plan

1. We empower Mom to make **A Healthy Choice**.
 - **Ultrasound with Doppler** – a portable model to be used at clinic satellite centers and student health centers.
 - **Personnel** – registered nurses trained in limited ultrasound exams and pregnancy counseling
2. We ensure Mother and Child a strong start through **Earn While You Learn (EWYL)** Educational classes providing ongoing support.
 - **Parenting Information** – helping to be the best parents possible
 - **Adoption Information** – opening up an extraordinary choice
 - **Fatherhood Education** – giving Fathers the opportunity to succeed
 - **Marriage Education** – skills for strong, healthy marriages
3. We help to integrate her Child with her faith family, her church, through **Mentoring Programs** for women and men.
4. We help connect Mother and Child to VITAL services of **The Healthy Child Network**.
5. We help create a **safety net** of career skills, educational opportunities, and child care.
6. We help insure that the Mother and Child have every opportunity that every other child has with **housing assistance and health insurance**.
7. We provide **ongoing life support** for the Mother and Father and their child with a focus on developing character and responsibility.

STRONG START

FOR HEALTHY CHILDREN



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The Goal

Our goal is to empower women in an unexpected pregnancy to make a healthy choice for themselves and their child. Additionally, we seek to provide the support services women need to give their child a strong start in life, the same strong start any other child would have, to further assure that every child is wanted and loved. FirstChoice Clinic is a nonprofit faith based clinic providing education and health services to empower individuals to make life-affirming choices. Our end goal is that abortion will no longer be seen as needed or wanted in our area communities.



The Clinic Difference

FirstChoice Clinic was established in 1984 as a lay counseling agency to help women facing an unplanned pregnancy by providing practical support for women in need. In 1997 the agency, recognizing a need to change, upgraded to a medical clinic.

At present, we have a tremendous opportunity to make a big difference in the lives of women by expanding our Clinic's outreach and developing satellite centers statewide. In doing so, we can provide the most vulnerable expectant mom with access to state of the art ultrasound equipment, a well trained staff and the support and education they need to ensure the health and well being of their baby.



The only way we can make this difference in North Dakota and western Minnesota is with your financial support. By joining with us, you will help to ensure every child has a strong start and all those mothers and fathers will be supported, helping them to make healthy choices.



Women at Risk

Women at risk for abortion are typically students, ages 18-23, or professionals; ages 21-34, either single or married. Since our inception, over 24 years ago, serving over 10,000 women, our approach is to meet with them "where they are at" and offer them our confidential medical services and information free of charge. Our client visits have increased dramatically; in 2007, our clinic will have over 1,200 visits, just scratching the surface of the tremendous need for what we do. Here's what happens when one of those visits occur:

During her ultrasound exam, Allison found out she was 6 weeks along and sees her baby's strong heartbeat. At the end of their last session, Nurse Renae asked Allison what made her decide to carry and Allison said "I told my boyfriend, if I saw a heartbeat, I couldn't abort". Allison is now enrolled in FirstChoice Clinic's Earn While You Learn program where she will meet with one of the Clinic's parent educators every two weeks for the next year and a half for prenatal support, to learn parenting skills and obtain support services for her child and herself.

The FirstChoice Experience

Throughout a mother's pregnancy our well-trained health care professionals work with them through our "Earn While You Learn" program – ensuring they continue to make extraordinary choices for their physical and emotional health. The most important part of our mission is the eternal impact we are often able to impart on those with whom we meet. We see people at a time when they most need the love of God and, by His grace, we are able to share it with them, one at a time:

"I am growing stronger in the Lord every day. I have experienced true freedom and joy and walk in grace. Solomon Ben was born August 9, 2003 and lives with his adoptive parents . . . I know I would have been supported if I had chosen to raise him myself, but if not for the support from the clinic I may have died in my grief. It was the hardest decision I have made, and the best one for me and my son. FirstChoice Clinic saved my life. Because of their support, I gave my life back to the Lord, and now have a heart for needy women who are in the place I once was. I support the clinic with prayers and small financial gifts. I believe if they had such an impact on my life, they can impact and change many lives."

Gladys – chose the extraordinary choice of adoption



"At the time, I had no idea what all was entailed in such a procedure . . . I wondered how I would pay for the abortion . . . and the more I thought about it, the question came to mind, who am I to deny someone else the right to live? God truly blessed me with a great resource in the FirstChoice Clinic – they nurtured me into motherhood . . . Many children are unplanned by their parents, but they are not unplanned by God . . . While there are illegitimate parents, there are no illegitimate children."

Julie – chose to be the best parent possible



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www.teamfirstchoiceclinic.com

Help us provide a helping hand and ensure every child a strong start! It's all a hand up - not a hand out!

Yes, I want to help a child have a strong start in life -- and provide even the most vulnerable expectant mom with state of the art ultrasound equipment, well trained staff, and support and education they need to ensure the health and well being of their baby.

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HB 1371

Chairman Lee and members of the Human Service Committee,

Do to the improvements in technology and constant advancements in medicine, simply offering an ultrasound will allow for a better informed patient. Think about it, when you go to the dentist you get an x-ray of your teeth before you have work done, you receive an ultrasound of your kidney before the stones are removed or laser procedures are done, and ultrasounds of gall bladders are done before surgery. It is considered prudent to educate the patient to what is going on so an informed decision can be made by all parties involved. This bill is meant merely to help women have the best information available before they consider making a very important and difficult decision.

I am here before you unashamed that this bill seeks to lessen the number of babies lost to abortion. If even a few women take up the offer to view the ultrasounds and change their minds, this is a good thing. It is a life or death decision that should not be taken lightly. It is vital to make sure women have every opportunity to be informed.

It has been stated that this bill is a duplication of what is already being done, if so... then there will be little problem in following the law, it is said that this is a delay tactic... Well I would say that a delay in a critical decision should be warranted if it saves a life.

As the Fargo Forum stated the other day "Choice after all, can mean saying no to an abortion".

Thank you,

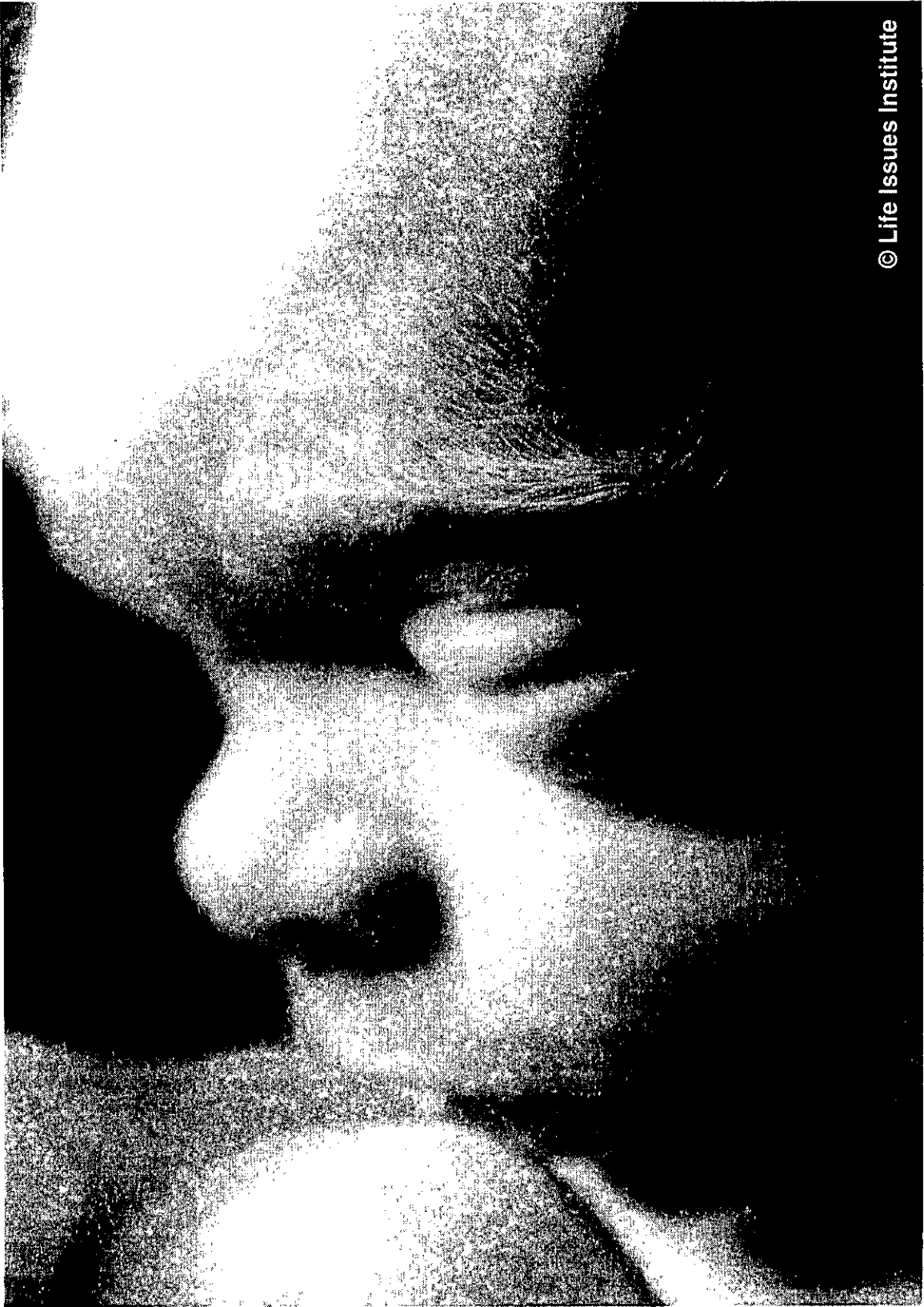
Rep. Bette Grande

District 41

#2



Figure 1: Sixteen weeks from conception



© Life Issues Institute

Figure 2: Twenty weeks from conception

#6



North Dakota Right to Life Association

Testimony before the SENATE HUMAN SERVICES COMMITTEE
House Bill 1371
March 17, 2009

Chairwoman Lee, members of the committee, I am Stacey Pfliiger, Legislative Director of the North Dakota Right to Life Association. I am here today in support of HB 1371 relating to limitations on the performance of abortion and abortion reporting requirements, tagged as the ultrasound bill.

HB 1371, if passed, will give women additional information about their pregnancy which will allow them to make a more informed decision.

Today I have two testimonies to share with the committee concerning the use of ultrasound technology and how this technology affected these women. [See attached.]

I urge the committee to give HB 1371 a **DO PASS** recommendation.

Thank you for the opportunity to testify today. I would be happy to answer any questions the committee may have.

Good morning, Mr. Chairman and Committee members.

I am Dr. Raymond Gruby and support House Bill 1371. My family and I arrived in Bismarck, North Dakota from San Antonio on June 30, 1977. At that time, I began practice in what would become known as the Bone and Joint Center. North Dakota has been an extraordinarily wonderful State to practice medicine, raise a family and meet great people.

One of the most difficult jobs a doctor has is to clearly inform a patient as to what a procedure consists of, the risks, benefits and possible outcome. The idea and practice of informed consent is extraordinarily important for both the patient and the physician. This is where we craft the understanding, trust and covenant of medical care. An elective surgical procedure makes it even more imperative that this person, vulnerable because of significant stress, be given as much information as possible in order to make the correct decision with the best possible outcome immediately after the procedure as well as in years to come.

Likewise when I have described a significant elective surgical procedure to a patient, invariably the patient or spouse has more questions within the next day or several days. Many times after a patient and I would discuss a knee procedure, the wife would call asking all of these questions that this guy forgot to ask. A waiting period of 24 hours is a bit short but quite important in satisfying the questions that will arise after the person receives the necessary information and has time to think.

I would be happy to answer any questions.

Thank you for the work and time that you give to the State of North Dakota and its people.

Raymond Gruby, MD
2520 Domino Drive
Bismarck ND 58503