## As Amended by House Committee of the Whole

## As Amended by House Committee

Session of 201.

## **HOUSE BILL No. 2218**

By By Representatives Kinzer, Arpke, Billinger, Boman, Brown, Brunk, Calloway, DeGraaf, Donohoe, Fund, Garber, Goico, Goodman, Gregory, Grosserode, Hedke, Henry, Hermanson, Hildabrand, Hoffman, M. Holmes, Howell, Kiegerl, Kleeb, Knox, Landwehr, Mast, McLeland, Meigs, Mesa, Montgomery, O'Brien, O'Hara, Otto, Patton, Peck, Rhoades, Rubin, Ryckman, Scapa, Schwab, Siegfreid, Smith, Suellentrop, Vickrey, Weber, Wetta and B. Wolf

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AN ACT concerning abortion; relating to restrictions on late term abortions; amending K.S.A. 65-445 and repealing the existing section.

Be it enacted by the Legislature of the State of Kansas:

New Section 1. The legislature hereby finds and declares that

(a) Pain receptors (nociceptors) are present throughout the unborn child's entire body by no later than 16 weeks after fertilization and nerves link these receptors to the brain's thalamus and subcortical plate by no later than 20 weeks;

(b) by eight weeks after fertilization, the unborn child reacts to stimuli that would be recognized as painful if applied to an adult human, for example, by recoiling;

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(c) in the unborn child, application of such painful stimuli is associated with significant increases in stress hormones known as the stress response;

(d) subjection to such painful stimuli is associated with long-term

harmful neurodeveolopmental effects, such as altered pain sensitivity and, possibly, emotional, behavioral and learning disabilities later in life;

(e) for the purposes of surgery on unborn children, fetal anesthesia is routinely administered and is associated with a decrease in stress

routinely administered and is associated with a decrease in stress hormones compared to their level when painful stimuli is applied without such anesthesia;

(f) the position, asserted by some medical experts, that the unborn child is incapable of experiencing pain until a point later in pregnancy than 20 weeks after fertilization predominately rests on the assumption that the ability to experience pain depends on the cerebral cortex and requires nerve connections between the thalamus and the cortex. However, recent medical research and analysis, especially since 2007,

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## Balloon Amendments

S<u>e</u>nate Judiciary

Attachment

Prepared by: Jason B. Long

C:\Users\TKiernan\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\M76F2N0G\2218 Balloon amendment 1.odt

the unborn child reacts to touch. By 20 weeks after fertilization

not necessary to experience pain; provides strong evidence for the conclusion that a functioning cortex is

- experience pain; of the cerebral cortex, those with hydranencephaly, nevertheless (g) substantial evidence indicates that children born missing the bulk
- alter pain perception, while stimulation or ablation of the thalamus does; (h) in adults, stimulation or ablation of the cerebral cortex does no
- 11 10 such as the subcortical plate, to fulfill the role of pain processing; different neural elements available at specific times during development, processing in early development differ from those of adults, using (i) substantial evidence indicates that structures used for pain
- 12 13 child is capable of experiencing pain by 20 weeks after fertilization; and (j) consequently, there is substantial medical evidence that an unborn
- 17 16 15 substantial medical evidence indicates that they are capable of feeling in protecting the lives of unborn children from the stage at which (k) it is the purpose of the state to assert a compelling state interest

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- 19 20 18 thereto: New Sec. 2. As used in sections 1 through 3, and amendments
- 27 medicine, drug or any other substance or device to terminate the premature termination of the pregnancy. assault on the pregnant woman or her unborn child, and which causes the the result of natural causes in utero, accidental trauma or a criminal the child after live birth, or to remove a dead unborn child who died as to increase the probability of a live birth, to preserve the life or health of pregnancy of a woman known to be pregnant with an intention other than (a) "Abortion" means the use or prescription of any instrument,

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- function" does not include mental or emotional functions. (b) "Bodily function" means physical function. The term "bodily
- <u>ල</u> "Department" means the department of health and environment.
- day of the woman's last menstrual period. <u>a</u> "Gestational age" means the time that has elapsed since the first

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of a major bodily function. result in her death or in substantial and irreversible physical impairment a claim or diagnosis that the woman will engage in conduct which would function. No condition shall be deemed a medical emergency if based on substantial and irreversible physical impairment of a major bodily necessary to determine gestational age will create serious risk of first determining gestational age to avert her death or for which a delay woman as to necessitate the immediate abortion of her pregnancy without medical judgment, so complicates the medical condition of the pregnant (e) "Medical emergency" means a condition that, in reasonable

she intends to

(f) "Pain-capable unborn child" means an unborn child having reached the gestational age of 22 weeks or more.

(g) "Physician" means a person licensed to practice medicine and surgery in this state.

(h) "Pregnant" or "pregnancy" means that female reproductive condition of having an unborn child in the mother's body.

physician not legally or financially affiliated with the physician such person is a physician and has a documented referral from another will cause a substantial and irreversible physical impairment of a major and proficiency commonly exercised by the ordinary skillful, careful and medical judgment arrived at using and exercising that degree of care, skil and both physicians provide a written determination, based upon a perform or induce an abortion upon a pain-capable unborn child unless to the conditions involved, that: (1) The abortion is necessary to preserve knowledgeable about the case and the treatment possibilities with respect made by a reasonably prudent physician, knowledgeable in the field, and prudent physician in the same or similar circumstances and that would be performing or inducing, or attempting to perform or induce the abortion irreversible physical impairment of a major bodily function. engage in conduct which would result in her death or in substantial and deemed to exist if it is based on a claim or diagnosis that the woman will bodily function of the pregnant woman. No such condition shall be the life of the pregnant woman; or (2) a continuation of the pregnancy No person shall perform or induce, or attempt to

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(b) Except in the case of a medical emergency, a copy of the written documented referral and of the abortion-performing physician's written determination shall be provided to the pregnant woman no less than 30 minutes prior to the initiation of the abortion. The written determination shall be time-stamped at the time it is delivered to the pregnant woman. The medical basis for the determination shall also be reported by the physician as part of the written report made by the physician to the secretary of health and environment under K.S.A. 65-445, and amendments thereto. Such determination shall specify:

(1) If the abortion is necessary to preserve the life of the pregnant woman and the medical basis of such determination, including the specific medical condition the physician believes would cause the death of the pregnant woman; or

(2) if a continuation of the pregnancy will cause a substantial and irreversible physical impairment of a major bodily function of the pregnant woman and the medical basis of such determination, including the specific medical condition the physician believes would constitute a substantial and irreversible impairment of a major bodily function of the

she intends to