



Herbert Hodes, M.D. FACOG  
Center for Women's Health  
4840 College Boulevard  
Overland Park, Kansas 66211

[www.hodesnauser.com](http://www.hodesnauser.com)

**February 20, 2013**

Members of the House Committee on Federal & State Affairs:

Thank you for the opportunity to speak to you in opposition to **House Bill 2253**. My name is Herbert Hodes, MD. I am a board-certified obstetrician-gynecologist. I am a graduate of the University of Kansas School of Medicine and its Ob-Gyn Residency. I have been licensed to practice medicine and surgery in Kansas since 1970. I have been providing a full range of obstetrical and gynecological medical and surgical services, including abortion services, in my practice for almost 40 years.

I am a Fellow of the American College of Obstetricians and Gynecologists. "**ACOG**" is the nation's leading specialty organization of physicians providing health care for women. ACOG is a private, voluntary organization of approximately **55,000** members, which strongly advocates for quality health care for women and maintains the highest standards of clinical practice. Abiding by the *Code of Ethics* of ACOG, I feel I have an obligation to speak out today against this bill. Passage of **HB 2253** would force me to disregard my patient's needs, and hinder my ability to practice medicine according to the standards and ethics of my medical profession.

I am very concerned that **HB 2253** will reduce access to necessary health care in Kansas and will harm the physician-patient relationship.

Abortion is a highly regulated medical service in Kansas. In order to obtain an abortion in Kansas, a woman must go through a series of formal steps, including receiving state-mandated counseling twenty-four hours in advance of the procedure. In some circumstances, the delay imposed by these requirements could put a woman's health at risk, as in the case of an ectopic pregnancy or premature rupture of membranes; where an abortion needs to be provided immediately to avoid serious complications. Current law has a "medical emergency" exception that applies to each of the abortion laws, so that I can immediately care for a patient in a medical emergency. **HB 2253** would significantly narrow the "medical emergency" exception so that almost no imaginable set of circumstances would come within its purview.

Under this bill, the only situation that would be considered a medical emergency would be a condition that "...so complicates the medical condition of the pregnant woman as to necessitate the immediate abortion of her pregnancy without first determining gestational age to avert her death or for which a delay necessary to determine gestational age will create serious risk of substantial and irreversible physical impairment of a major bodily function..." Determining gestational age typically takes only minutes, with an ultrasound or by questioning the patient. In practice, this "medical emergency" exception would apply only in a situation where a woman is hemorrhaging so severely that she faces imminent death. In every other conceivable situation, the physician will have the time it would take to determine gestational age.

**House Bill 2253** would therefore prevent me from providing critical care in a medical emergency when prompt pregnancy termination is needed to protect a woman's health. This proposed change to existing law is inexplicable, given that its only impact will be to jeopardize the health of Kansas women.<sup>1</sup>

**1. HB 2253 will force physicians to violate their ethical obligations, and force the physician to provide patients with medically inaccurate information**

All patients are entitled to truthful and scientifically accurate information. But **HB 2253** will amend the law to require me to relate to the patient false, misleading, and medically and scientifically inaccurate information. The legislature should not put politics above women's health. According to the *Code of Professional Ethics of the American College of Obstetricians and Gynecologists*: "...the obstetrician-gynecologist must uphold the dignity and honor of the profession, and must present to the patient only the medical facts..."

Among the tools that a physician uses to provide only truthful medical information is reliance on peer-reviewed medical research – this bill misunderstands this critical part of medical practice. Indeed, the bill mandates that physicians provide the following false information to their patients:

- **HB 2253** will require physicians to provide their patients with false information that abortion poses a risk of premature birth in future pregnancies. Peer-reviewed scientific studies have established that this is not true. Legal abortion does not pose a risk to women's future fertility.
- **HB 2253** will require that physicians provide their patients with the false information that abortion poses a risk of breast cancer. This false conclusion has been rejected by major medical institutions across the world. The National Cancer Institute has repeatedly found that, based on a review of the best scientific studies, abortion does not increase the risk of breast cancer.
- **HB 2253** would interfere with patients' access to health care and with the physician-patient relationship. It is bad medicine (and, bad policy) to require physicians to provide patients with inaccurate medical information. The physician's role and duty is to provide patients with sound medical care, based on the patient's medical needs and physician judgment. Physicians should not be turned into government agents in order to persuade patients to make their health care decisions based on the State's values rather than the patient's health care needs and personal values.

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<sup>1</sup> This proposed change is also likely unconstitutional under both the Kansas and U.S. Constitutions. A similar medical emergency exception was included in set of regulations that are currently enjoined by a Kansas state court.

Further, **HB 2253** penalizes physicians who provide a full range of reproductive health care.

As I noted earlier, I provide a full range of reproductive health care to my patients. I provide routine obstetric and gynecological care, I deliver babies and take care of my patients after delivery, I help patients who are experiencing miscarriages--and I provide abortions.

**HB 2253** would impose serious tax penalties on me and my medical practice for providing patients with the care they need and deserve. Additional tax provisions in this bill would wreak havoc with my patient's HSA accounts.

Finally, **HB 2253** also contains many unclear provisions. One of these provisions would prevent me from volunteering at my grandchildren's school because I provide abortion services as part of my medical practice.

In summary, **HB 2253** will undermine patients' ability to make informed decisions because they would be forced to receive incorrect information. It will require a physician to violate his or her ethical obligations. It would penalize any provider who seeks to provide his or her patients with a full range of reproductive healthcare by prohibiting them from participating fully in the community.

I urge this committee to vote against **HB 2253**.

**I eagerly welcome any questions.**

Sincerely,

**Herbert C. Hodes, MD, FACOG**

**Overland Park, Kansas**

