## Summary of testimony in support of HB 2324

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I stand in support of HB 2324, an act prohibiting an abortion of an unborn human individual with a detectable fetal heartbeat, also known as the "Heartbeat Bill."

While my personal position is that all abortion should be abolished, until that time can come, I support restrictions on abortion when a heartbeat can be detected, which can happen as early as 7 weeks gestation.

I would like to address this matter from a woman's safety perspective. Every week that a pregnancy progresses increases the health and safety risks to women.

Common complications to the abortion process include incomplete abortion, cervical tears, hemorrhaging, infection, and uterine perforation and/or injury to other internal organs should perforation occur. Additional complications include adverse reaction to anesthesia or other drugs. The risk of all of these complications increases with each gestational week and each of them can be life-threatening.

From my personal research tracking and documenting abortion complications, I can attest that the numbers of complications documented by Operation Rescue are just a glimpse through the keyhole at the number that are actually occurring. The abortion industry is shrouded in secrecy and takes great pains to cover up the true number of complications. In areas where reporting is mandatory, I have found that abortion clinics notoriously underreport cases, especially when women self-report to emergency rooms after having left the clinic.

I would like to tell you the story of one woman whose life would have been spared had the language of HB 2324 been enacted in her state.

Alexandra Nunez was a 37-year old single mother of four who went to Robert Hosty for an abortion in her 16-17 week of pregnancy at A-1 Women's Center in Queens, New York. Hosty spent 9 minutes aborting her baby. Near the end of the procedure, she began to bleed uncontrollably. Nunez went into cardiac arrest from loss of blood, no one bothered to administer chest compressions. Hosty waited an hour before calling 911 for help.

My office filed a formal complaint against Hosty with the New York Department of Health. His license revocation documents stated the following:

Paramedics arrived at A-1 Women's Center on Roosevelt Avenue at 4:58 p.m. (almost one hour after the surgery ended.) They saw Patient B [Nunez] on an exam table/chair with her legs open. They saw blood on the floor and blood coming from Patient B. They also saw bloody clothes in the corner. They noted that Patient B was grey and ashen, meaning that she was likely dead. She was cold to the touch. Paramedics never saw or interacted with Hosty. After the abortion, he had left it to his assistant to attempt to revive the patient, who was pronounced dead on arrival at a nearby hospital.

Nunez' tragic experience is not as rare as one might think. Since Kansas has a sordid history of abortionists who have be subject to discipline by the KSBHA for shoddy abortion practices, these health concerns are valid.

Enacting HB 2324 will not only extend legal protections to live human beings who happen to be at an early stage of development, but will also extend health and safety protections to women who would otherwise be placed in ever-increasing jeopardy of suffering serious complications or even death from abortions for every week their pregnancies progress. Please vote to advance HB 2324 for the sake of women and their live and growing babies.