

March 7, 2015

To Whom It May Concern:

My name is Dr. Jody A. Elson, MD. I am a licensed and board-certified family physician. Currently I am in private practice in Wichita, Kansas. I obtained my bachelors degree in chemistry with a molecular biology emphasis and health science minor at the University of Nebraska at Kearney. I earned my medical degree at the University of Nebraska Medical Center in Omaha, Nebraska and completed residency training in family medicine at the Via Christi Family Medicine Residency Program in Wichita, Kansas in June 2014.

I am writing to you today in support of SB 95 the "Unborn Child Protection from Dismemberment Abortion Act." As a family medicine resident, I was trained in "full-spectrum" family medicine including surgical obstetrics, and I continue to offer prenatal care in my private practice. I have never performed a dilation and evacuation procedure. However, I have cared for several women who have had a variety of complications in the second trimester of pregnancy requiring termination including intrauterine fetal demise, preterm premature rupture of membranes, severe preeclampsia, and placental abruption to give some examples. These women were all managed by either cesarean delivery or induction of labor.

By enacting this bill, women would be protected from a procedure that when described in detail leaves most people unsettled or perhaps even horrified. The bill stipulates an exception for a "medical emergency" regarding the health of the mother, but it would be rare in deed if ever that a situation would arise in which D&E would be the only treatment option.

The risk of death associated with abortion increases with the length of pregnancy, from one death for every one million abortions at or before eight weeks to one per 29,000 at 16–20 weeks and one per 11,000 at 21 weeks or later.¹ Second trimester abortion is associated with more morbidity and mortality and, for some women, more social or emotional challenges than first trimester terminations². The mortality risk increases by 38 percent for each successive gestational week after eight weeks¹.

Thank you for your time and consideration and for allowing me to share my opinion with you.

Kind regards,



Jody A Elson, MD

¹ Bartlett LA et al., Risk factors for legal induced abortion-related mortality in the United States, Obstetrics & Gynecology, 2004, 103(4):729–737.

² Henshaw SK, Finer LB. The accessibility of abortion services in the United States, 2001. Perspect Sex Reprod Health 2003; 35:16

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Attachment # 8