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## WISCONSIN LEGISLATIVE COUNCIL AMENDMENT MEMO

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<b>2015 Senate Bill 179</b>	<b>Senate Amendment 1</b>
<i>Memo published: July 3, 2015</i>	<i>Contact: Brian Larson, Staff Attorney (266-0680)</i>

### **2015 SENATE BILL 179**

The bill prohibits abortion of an unborn child if the probable postfertilization age of the unborn child is 20 or more weeks, except in the case of a medical emergency.

#### **Prohibition on Abortion After 20 Weeks Postfertilization**

Under the bill, no person may perform or induce or attempt to perform or induce an abortion upon a woman when the unborn child is considered capable of experiencing pain, unless the woman is undergoing a medical emergency. The bill specifies that an unborn child is “considered to be capable of experiencing pain” if the probable postfertilization age of the unborn child is 20 or more weeks.

A physician performing or inducing an abortion is required to determine the probable postfertilization age of the unborn child or rely upon such a determination made by another physician, except in the case of a medical emergency. “Probable postfertilization age of the unborn child” means the number of weeks that have elapsed from the probable time of fertilization of a woman’s ovum.

#### **Exception for Medical Emergency; Method of Abortion**

Under the bill, the prohibition on abortion after 20 weeks postfertilization does not apply in the case of a “medical emergency.” This is defined as a condition that, in a physician’s reasonable medical judgment, so complicates the medical condition of a pregnant woman as to necessitate the immediate abortion of her pregnancy to avert her death or for which a 24-hour delay in performance or inducement of an abortion will create serious risk of substantial and irreversible impairment of one or more of the woman’s major bodily functions.

The bill provides that the physician “shall terminate the pregnancy in the manner that, in reasonable medical judgment, provides the best opportunity for the unborn child to survive” when the unborn child is considered capable of experiencing pain and the pregnant woman is undergoing a medical emergency.

### **Reporting Requirement Regarding Method of Abortion**

Under current law, a facility in which an induced abortion is performed must file an annual report with the Department of Health Services (DHS). The bill requires the report to contain, for each abortion performed, the probable postfertilization age of the unborn child. When the unborn child is considered to be capable of experiencing pain, the report to DHS must state whether the method of abortion provided the best opportunity for the unborn child to survive. If such a method was not used, the report must include the basis of the determination that termination of the pregnancy in that manner posed a greater risk either of the death of the pregnant woman or of the substantial and irreversible physical impairment of a major bodily function of the woman than other available methods.

### **SENATE AMENDMENT 1**

The amendment adds an exception to the requirement to terminate the pregnancy in the manner providing the best opportunity for the unborn child to survive, in the case of a medical emergency. Under the amendment, the requirement is changed to more closely match the provision related to DHS reporting regarding method of abortion, described above. That is, the amendment provides that the requirement to terminate the pregnancy in the manner providing the best opportunity for the unborn child to survive, in the case of a medical emergency, will not apply if termination in that manner poses a greater risk either of the death of the pregnant woman or of the substantial and irreversible physical impairment of a major bodily function of the woman than other available methods.

### **BILL HISTORY**

Senate Amendment 1 was offered on June 9, 2015. On the same day, the amendment was adopted by the Senate on a voice vote, and the bill, as amended, was passed on a vote of Ayes, 19; Noes, 14.

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