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Opposition to House Bill 258  
House Health Committee  
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I am a family physician who lives and works in Columbus, Ohio. When I moved to Ohio in 2013, it became immediately apparent to me that the women here do not have the same reproductive freedoms that they have in other states. Then and now, women in Ohio must fight through legal, geographic, and financial barriers to obtain safe and legal abortion, a basic part of their reproductive health care and their constitutional right.

As a physician, I vehemently oppose House Bill (HB) 258. It is not only bad medicine but it is also unconstitutional. This bill represents extreme government interference into medicine and would greatly undermine the health of Ohio women and their families. HB 258 would ban abortion after a “fetal heartbeat has been detected,” which can occur as early as six weeks in pregnancy, often before a woman even knows that she is pregnant. Furthermore, cardiac motion at such an early stage is no guarantee of a healthy pregnancy or a healthy baby. This bill would essentially ban abortion in the state of Ohio.

I would like to share a story about a patient I will call Jessica. She was a mother of two and identified herself as a Christian with very conservative views on abortion. After her youngest child was born, she started to use Depo Provera, the injectable contraceptive that is given every three months. However, when her Medicaid was discontinued after the birth of her second child, she was unable to pay for the next doctor’s visit and injection out of pocket. She became pregnant again after the system failed her. She told me that prior to this event in her life, she did not believe in abortion.

However, after long and careful consideration with her partner and her parents, she decided that she could not care for another child. She came to the difficult decision that terminating this pregnancy would be best for the health and wellbeing of her family, and most importantly, the wellbeing of her two young children. We talked at length about her decision and made a plan for her to obtain abortion care. When we spoke, she was five weeks and five days pregnant. Because of Ohio's 24-hour waiting period and Jessica's work schedule, her procedure was scheduled for three days later. If HB 258 were the law, it is likely that she would have been unable to have an abortion in Ohio.

I also recall a patient whom I will call Emily. Emily was a senior at Ohio State University (OSU) with planned to apply to graduate school. Emily had obtained birth control pills from the OSU contraception clinic. She took them correctly and was one of the unlucky 9% of women who become pregnant while taking the birth control pill. When I saw her, she was 8 weeks pregnant. She felt that becoming a parent at this point in her life would likely derail her educational and professional goals. She considered all of her options and decided that abortion was the right decision for her. A woman should be trusted to make the decision to have an abortion since she is the foremost authority on her life and well-being. Ohio politicians should not restrict women's personal autonomy by effectively taking away the ability to have an abortion.

Fortunately for Jessica and Emily, they were able to obtain the health care they needed in our home state of Ohio. But what would you have me tell women like Jessica and Emily if HB 258 becomes law? How am I to explain to a patient that despite her thoughtful, careful decision, politicians in our state have made it a criminal act for any Ohio physician to provide them an abortion? HB 258 would require Ohio physicians to

send their patients in need of abortion out of state for a basic procedure. This policy would not only devastate the health and wellbeing of women and their families across the state but it would also devastate the quality and high standard of Ohio's medical care.

To deny women access to safe, legal abortion care is to ignore the reality of their health care needs. One in four U.S. women will have an abortion by age 45. Abortion is one of the safest outpatient procedures performed in this country. If HB 258 becomes law, only women who can afford to go out of state will be able to safely obtain an abortion – potentially creating a pre-*Roe* setting for Ohio's poorest and most vulnerable women. Women desperate to protect their families will resort to desperate measures. As a physician, my job is to take care of my patients and their health. I was not alive to care for dying women who had attempted self-abortion or sought out illegal abortions in 1972 and I hope that I will not be required to do so in 2017. It is critical to the lives and health of women in Ohio that you vote against HB 258.