As Reported by the House Civil Justice Committee

133rd General Assembly Regular Session

Am. S. B. No. 27

2019-2020

Senator Uecker

Cosponsors: Senators Terhar, Brenner, Roegner, Huffman, M., McColley, Wilson, Hottinger, Huffman, S., Burke, Coley, Eklund, Gavarone, Hill, Hoagland, Lehner, Obhof Representatives Hambley, Merrin

A BILL

То	amend sections 2317.56, 3701.341, and 3701.79	1
	and to enact sections 3726.01, 3726.02, 3726.03,	2
	3726.04, 3726.041, 3726.042, 3726.05, 3726.09,	3
	3726.10, 3726.11, 3726.12, 3726.13, 3726.14,	4
	3726.15, 3726.16, 3726.95, 3726.99, and 4717.271	5
	of the Revised Code to impose requirements on	6
	the final disposition of fetal remains from	7
	surgical abortions.	8

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 2317.56, 3701.341, and 3701.79 be	9
amended and sections 3726.01, 3726.02, 3726.03, 3726.04,	10
3726.041, 3726.042, 3726.05, 3726.09, 3726.10, 3726.11, 3726.12,	11
3726.13, 3726.14, 3726.15, 3726.16, 3726.95, 3726.99, and	12
4717.271 of the Revised Code be enacted to read as follows:	13
Sec. 2317.56. (A) As used in this section:	14
Sec. 2317.56. (A) As used in this section: (1) "Medical emergency" has the same meaning as in section	14 15

pregnant woman that, in the reasonable judgment of the physician 18 who is attending the woman, so complicates the pregnancy that it 19 necessitates the immediate performance or inducement of an 20 abortion. 21

(3) "Probable gestational age of the <u>zygote</u>, <u>blastocyte</u>, embryo, or fetus" means the gestational age that, in the judgment of a physician, is, with reasonable probability, the gestational age of the <u>zygote</u>, <u>blastocyte</u>, <u>embryo</u>, or fetus at the time that the physician informs a pregnant woman pursuant to division (B)(1)(b) of this section.

(B) Except when there is a medical emergency or medical necessity, an abortion shall be performed or induced only if all of the following conditions are satisfied:

(1) At least twenty-four hours prior to the performance or 31 inducement of the abortion, a physician meets with the pregnant 32 woman in person in an individual, private setting and gives her 33 an adequate opportunity to ask questions about the abortion that 34 will be performed or induced. At this meeting, the physician 35 shall inform the preqnant woman, verbally or, if she is hearing 36 impaired, by other means of communication, of all of the 37 following: 38

(a) The nature and purpose of the particular abortion
procedure to be used and the medical risks associated with that
procedure;

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(b) The probable gestational age of the zygote,42blastocyte, embryo, or fetus;43
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(c) The medical risks associated with the pregnant woman44carrying the pregnancy to term.45

The meeting need not occur at the facility where the

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abortion is to be performed or induced, and the physician47involved in the meeting need not be affiliated with that48facility or with the physician who is scheduled to perform or49induce the abortion.50

(2) At least twenty-four hours prior to the performance or
inducement of the abortion, the physician who is to perform or
induce the abortion or the physician's agent does each of the
following in person, by telephone, by certified mail, return
receipt requested, or by regular mail evidenced by a certificate
of mailing:

(a) Inform the pregnant woman of the name of the physicianwho is scheduled to perform or induce the abortion;58

(b) Give the pregnant woman copies of the published59materials described in division (C) of this section;60

(c) Inform the pregnant woman that the materials given 61 pursuant to division (B)(2)(b) of this section are published by 62 the state and that they describe the zyqote, blastocyte, embryo, 63 or fetus and list agencies that offer alternatives to abortion. 64 The pregnant woman may choose to examine or not to examine the 65 materials. A physician or an agent of a physician may choose to 66 be disassociated from the materials and may choose to comment or 67 not comment on the materials. 68

(3) If it has been determined that the unborn human
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individual the pregnant woman is carrying has a detectable fetal
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heartbeat, the physician who is to perform or induce the
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abortion shall comply with the informed consent requirements in
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section 2919.194 of the Revised Code in addition to complying
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with the informed consent requirements in divisions (B) (1), (2),
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(4), and (5) of this section.

(4) Prior to the performance or inducement of the	76
abortion, the pregnant woman signs a form consenting to the	77
abortion and certifies both all of the following on that form:	78
(a) She has received the information and materials	79
described in divisions (B)(1) and (2) of this section, and her	80
questions about the abortion that will be performed or induced	
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have been answered in a satisfactory manner.	82
(b) She consents to the particular abortion voluntarily,	83
knowingly, intelligently, and without coercion by any person,	84
and she is not under the influence of any drug of abuse or	85
alcohol.	86
(c) If the abortion will be performed or induced	87
surgically, she has been provided with the notification form	88
described in division (A) of section 3726.14 of the Revised	89
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<u>Code.</u>	90
(d) If the abortion will be performed or induced	91
surgically and she desires to exercise the rights under division	92
(A) of section 3726.03 of the Revised Code, she has completed	93
the disposition determination under section 3726.04 or 3726.041	94
of the Revised Code.	95
A form shall be completed for each zygote, blastocyte,	96
embryo, or fetus to be aborted. If a pregnant woman is carrying	97
more than one zygote, blastocyte, embryo, or fetus, she shall	98
sign a form for each zygote, blastocyte, embryo, or fetus to be	99
aborted.	100
The form shall contain the name and contact information of	101
the physician who provided to the pregnant woman the information	102
described in division (B)(1) of this section.	103
(5) Prior to the performance or inducement of the	104

abortion, the physician who is scheduled to perform or induce105the abortion or the physician's agent receives a copy of the106pregnant woman's signed form on which she consents to the107abortion and that includes the certification required by108division (B)(4) of this section.109

(C) The department of health shall publish in English and
in Spanish, in a typeface large enough to be clearly legible,
and in an easily comprehensible format, the following materials
on the department's web site:

(1) Materials that inform the pregnant woman about family 114 planning information, of publicly funded agencies that are 115 available to assist in family planning, and of public and 116 private agencies and services that are available to assist her 117 through the pregnancy, upon childbirth, and while the child is 118 dependent, including, but not limited to, adoption agencies. The 119 materials shall be geographically indexed; include a 120 comprehensive list of the available agencies, a description of 121 the services offered by the agencies, and the telephone numbers 122 and addresses of the agencies; and inform the pregnant woman 123 about available medical assistance benefits for prenatal care, 124 childbirth, and neonatal care and about the support obligations 125 of the father of a child who is born alive. The department shall 126 ensure that the materials described in division (C)(1) of this 127 section are comprehensive and do not directly or indirectly 128 promote, exclude, or discourage the use of any agency or service 129 described in this division. 130

(2) Materials that inform the pregnant woman of the
probable anatomical and physiological characteristics of the
zygote, blastocyte, embryo, or fetus at two-week gestational
increments for the first sixteen weeks of pregnancy and at four134

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week gestational increments from the seventeenth week of 135 pregnancy to full term, including any relevant information 136 regarding the time at which the fetus possibly would be viable. 137 The department shall cause these materials to be published after 138 it consults with independent health care experts relative to the 139 probable anatomical and physiological characteristics of a 140 zygote, blastocyte, embryo, or fetus at the various gestational 141 increments. The materials shall use language that is 142 understandable by the average person who is not medically 143 trained, shall be objective and nonjudgmental, and shall include 144 only accurate scientific information about the zygote, 145 blastocyte, embryo, or fetus at the various gestational 146 increments. If the materials use a pictorial, photographic, or 147 other depiction to provide information regarding the zygote, 148 blastocyte, embryo, or fetus, the materials shall include, in a 149 conspicuous manner, a scale or other explanation that is 150 understandable by the average person and that can be used to 151 determine the actual size of the zygote, blastocyte, embryo, or 1.52 fetus at a particular gestational increment as contrasted with 153 the depicted size of the zygote, blastocyte, embryo, or fetus at 154 that gestational increment. 155

(D) Upon the submission of a request to the department of
health by any person, hospital, physician, or medical facility
for one copy of the materials published in accordance with
division (C) of this section, the department shall make the
requested copy of the materials available to the person,
hospital, physician, or medical facility that requested the
copy.

(E) If a medical emergency or medical necessity compels
the performance or inducement of an abortion, the physician who
will perform or induce the abortion, prior to its performance or
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inducement if possible, shall inform the pregnant woman of the 166 medical indications supporting the physician's judgment that an 167 immediate abortion is necessary. Any physician who performs or 168 induces an abortion without the prior satisfaction of the 169 conditions specified in division (B) of this section because of 170 a medical emergency or medical necessity shall enter the reasons 171 for the conclusion that a medical emergency or medical necessity 172 exists in the medical record of the pregnant woman. 173

(F) If the conditions specified in division (B) of this
section are satisfied, consent to an abortion shall be presumed
to be valid and effective.

(G) The performance or inducement of an abortion without 177 the prior satisfaction of the conditions specified in division 178 (B) of this section does not constitute, and shall not be 179 construed as constituting, a violation of division (A) of 180 section 2919.12 of the Revised Code. The failure of a physician 181 to satisfy the conditions of division (B) of this section prior 182 to performing or inducing an abortion upon a pregnant woman may 183 be the basis of both of the following: 184

(1) A civil action for compensatory and exemplary damagesas described in division (H) of this section;

(2) Disciplinary action under section 4731.22 of theRevised Code.

(H) (1) Subject to divisions (H) (2) and (3) of this
section, any physician who performs or induces an abortion with
actual knowledge that the conditions specified in division (B)
of this section have not been satisfied or with a heedless
indifference as to whether those conditions have been satisfied
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is liable in compensatory and exemplary damages in a civil

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action to any person, or the representative of the estate of any195person, who sustains injury, death, or loss to person or196property as a result of the failure to satisfy those conditions.197In the civil action, the court additionally may enter any198injunctive or other equitable relief that it considers199appropriate.200

(2) The following shall be affirmative defenses in a civil action authorized by division (H)(1) of this section:

(a) The physician performed or induced the abortion under203the circumstances described in division (E) of this section.204

(b) The physician made a good faith effort to satisfy the205conditions specified in division (B) of this section.206

(3) An employer or other principal is not liable in
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damages in a civil action authorized by division (H) (1) of this
section on the basis of the doctrine of respondeat superior
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unless either of the following applies:
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(a) The employer or other principal had actual knowledge
or, by the exercise of reasonable diligence, should have known
that an employee or agent performed or induced an abortion with
actual knowledge that the conditions specified in division (B)
of this section had not been satisfied or with a heedless
indifference as to whether those conditions had been satisfied.

(b) The employer or other principal negligently failed to 217secure the compliance of an employee or agent with division (B) 218of this section. 219

(4) Notwithstanding division (E) of section 2919.12 of the 220 Revised Code, the civil action authorized by division (H) (1) of 221 this section shall be the exclusive civil remedy for persons, or 222 the representatives of estates of persons, who allegedly sustain 223

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injury, death, or loss to person or property as a result of a 224 failure to satisfy the conditions specified in division (B) of 225 this section. 226 (I) The department of job and family services shall 227 prepare and conduct a public information program to inform women 228 of all available governmental programs and agencies that provide 229 services or assistance for family planning, prenatal care, child 230 care, or alternatives to abortion. 231 Sec. 3701.341. (A) The director of health, pursuant to 232 Chapter 119. and consistent with Chapter 3726. and section 233 2317.56 of the Revised Code, shall adopt rules relating to 234 abortions and the following subjects: 235 (1) Post-abortion procedures to protect the health of the 236 pregnant woman; 237 (2) Pathological reports; 238 (3) Humane disposition of the product of human conception; 239 (4) Counseling. 240 (B) The director of health shall implement the rules and 241 shall apply to the court of common pleas for temporary or 242 permanent injunctions restraining a violation or threatened 243 violation of the rules. This action is an additional remedy not 244 dependent on the adequacy of the remedy at law. 245 Sec. 3701.79. (A) As used in this section: 246 (1) "Abortion" has the same meaning as in section 2919.11 247 of the Revised Code. 248 (2) "Abortion report" means a form completed pursuant to 249 division (C) of this section. 250

(3) "Ambulatory surgical facility" has the same meaning as 251 in section 3702.30 of the Revised Code. 252 (4) "Department" means the department of health. 253 (5) "Hospital" means any building, structure, institution, 254 or place devoted primarily to the maintenance and operation of 255 facilities for the diagnosis, treatment, and medical or surgical 256 care for three or more unrelated individuals suffering from 257 illness, disease, injury, or deformity, and regularly making 258 available at least clinical laboratory services, diagnostic x-259 ray services, treatment facilities for surgery or obstetrical 260 care, or other definitive medical treatment. "Hospital" does not 261 include a "home" as defined in section 3721.01 of the Revised 262 Code. 263 (6) "Physician's office" means an office or portion of an 264 office that is used to provide medical or surgical services to 265 the physician's patients. "Physician's office" does not mean an 266 ambulatory surgical facility, a hospital, or a hospital 267 emergency department. 268

(7) "Postabortion care" means care given after the uterus has been evacuated by abortion.

(B) The department shall be responsible for collecting and collating abortion data reported to the department as required by this section.

(C) The attending physician shall complete an individual 274
abortion report for each the abortion of each zygote, 275
blastocyte, embryo, or fetus the physician performs upon a 276
woman. The report shall be confidential and shall not contain 277
the woman's name. The report shall include, but is not limited 278
to, all of the following, insofar as the patient makes the data 279

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available that is not within the physician's knowledge:	280
(1) Patient number;	281
(2) The name and address of the facility in which the	282
abortion was performed, and whether the facility is a hospital,	283
ambulatory surgical facility, physician's office, or other	284
facility;	285
(3) The date of the abortion;	286
(4) If a surgical abortion, the method of final	287
disposition of the fetal remains under Chapter 3726. of the	288
Revised Code;	289
(5) All of the following regarding the woman on whom the	290
abortion was performed:	291
(a) Zip code of residence;	292
(b) Age;	293
(c) Race;	294
(d) Marital status;	295
(e) Number of previous pregnancies;	296
(f) Years of education;	297
(g) Number of living children;	298
(h) Number of zygotes, blastocytes, embryos, or fetuses	299
previously-induced abortions aborted;	300
(i) Date of last induced abortion;	301
(j) Date of last live birth;	302
(k) Method of contraception at the time of conception;	303

(1) Date of the first day of the last menstrual period;	304
(m) Medical condition at the time of the abortion;	305
(n) Rh-type;	306
(o) The number of weeks of gestation at the time of the	307
abortion.	308
(5) (6) The type of abortion procedure performed;	309
(6) (7) Complications by type;	310
(7) (8) Written acknowledgment by the attending physician	311
that the pregnant woman is not seeking the abortion, in whole or	312
in part, because of any of the following:	313
(a) A test result indicating Down syndrome in an unborn	314
child;	315
(b) A prenatal diagnosis of Down syndrome in an unborn	316
child;	317
(c) Any other reason to believe that an unborn child has	318
Down syndrome.	319
(9) Type of procedure performed after the abortion;	320
(9) (10) Type of family planning recommended;	321
(10) (11) Type of additional counseling given;	322
(11) (12) Signature of attending physician.	323
(D) The physician who completed the abortion report under	324
division (C) of this section shall submit the abortion report to	325
the department within fifteen days after the woman is	326
discharged.	327
(F) The appropriate with records report or cortificate	328

(E) The appropriate vital records report or certificate 328

shall be made out after the twentieth week of gestation. 329

(F) A copy of the abortion report shall be made part of330the medical record of the patient of the facility in which theabortion was performed.332

(G) Each hospital shall file monthly and annual reports
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listing the total number of women who have undergone a posttwelve-week-gestation abortion and received postabortion care.
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The annual report shall be filed following the conclusion of the
state's fiscal year. Each report shall be filed within thirty
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days after the end of the applicable reporting period.

(H) Each case in which a physician treats a post abortion
complication shall be reported on a postabortion complication
form. The report shall be made upon a form prescribed by the
department, shall be signed by the attending physician, and
shall be confidential.

(I) (1) Not later than the first day of October of each
year, the department shall issue an annual report of the
abortion data reported to the department for the previous
calendar year as required by this section. The annual report
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shall include at least the following information:

(a) The total number of <u>induced abortions</u> zygotes, 349
blastocytes, embryos, or fetuses that were aborted; 350

(b) The number of abortions performed on Ohio and out-of-351state residents;352

(c) The number of abortions performed, sorted by each of353the following:354

(i) The age of the woman on whom the abortion wasgerformed, using the following categories: under fifteen years356

of age, fifteen to nineteen years of age, twenty to twenty-four 357 years of age, twenty-five to twenty-nine years of age, thirty to 358 thirty-four years of age, thirty-five to thirty-nine years of 359 age, forty to forty-four years of age, forty-five years of age 360 or older; 361 (ii) The race and Hispanic ethnicity of the woman on whom 362 the abortion was performed; 363 (iii) The education level of the woman on whom the 364 abortion was performed, using the following categories or their 365 equivalents: less than ninth grade, ninth through twelfth grade, 366 one or more years of college; 367 (iv) The marital status of the woman on whom the abortion 368 was performed; 369 (v) The number of living children of the woman on whom the 370 abortion was performed, using the following categories: none, 371 one, or two or more; 372 (vi) The number of weeks of gestation of the woman at the 373 time the abortion was performed, using the following categories: 374 less than nine weeks, nine to twelve weeks, thirteen to nineteen 375 weeks, or twenty weeks or more; 376 (vii) The county in which the abortion was performed; 377 (viii) The type of abortion procedure performed; 378 (ix) The number of abortions zygotes, blastocytes, 379 embryos, or fetuses previously performed on aborted by the woman 380 on whom the abortion was performed; 381 (x) The type of facility in which the abortion was 382 performed; 383

(xi) For Ohio residents, the county of residence of the384woman on whom the abortion was performed.385

(2) The report also shall indicate the number and type of
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 the abortion complications reported to the department either on
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 the abortion report required under division (C) of this section
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 or the postabortion complication report required under division
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 (H) of this section.

(3) In addition to the annual report required under
(3) In addition to the annual report required under
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(1) (1) of this section, the department shall make
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(J) The director of health shall implement this section
 and shall apply to the court of common pleas for temporary or
 permanent injunctions restraining a violation or threatened
 violation of its requirements. This action is an additional
 remedy not dependent on the adequacy of the remedy at law.

Sec. 3726.01. As used in this chapter:

(A) "Abortion facility" means any of the following in401which abortions are induced or performed:402

(1) Ambulatory surgical facility as defined in section <u>3702.30 of the Revised Code;</u>

(2) Any other facility in which abortion is legally 405 provided. 406

(B) "Cremation" has the same meaning as in section 4717.01407of the Revised Code.408

(C) "Fetal remains" means the product of human conception409that has been aborted. If a woman is carrying more than one410zygote, blastocyte, embryo, or fetus, such as in the incidence411

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<u>of twins or triplets, each zygote, blastocyte, embryo, or fetus</u>	412
or any of its parts that is aborted is a separate product of	413
human conception that has been aborted.	414
(D) "Interment" means the burial or entombment of fetal	415
remains.	416
Sec. 3726.02. (A) Final disposition of fetal remains from	417
a surgical abortion at an abortion facility shall be by	418
cremation or interment.	419
(B) The cremation of fetal remains under division (A) of	420
this section shall be in a crematory facility, in compliance	421
with Chapter 4717. of the Revised Code.	422
(C) As used in this section, "crematory facility" has the	423
same meaning as in section 4717.01 of the Revised Code.	424
Sec. 3726.03. (A) A pregnant woman who has a surgical	425
abortion has the right to determine both of the following	426
regarding the fetal remains:	427
(1) Whether the final disposition shall be by cremation or	428
interment;	429
(2) The location for the final disposition.	430
(B) A pregnant woman who has a surgical abortion shall be	431
provided with a notification form described in division (A) of	432
section 3726.14 of the Revised Code.	433
Sec. 3726.04. (A)(1) If a pregnant woman desires to	434
exercise the rights under division (A) of section 3726.03 of the	435
Revised Code, she shall make the determination in writing using	436
a form prescribed by the director of health under division (C)	437
of section 3726.14 of the Revised Code. The determination must	438
clearly indicate both of the following:	439

(a) Whether the final disposition will be by cremation or	440
interment;	441
(b) Whether the final disposition will be at a location	442
other than one provided by the abortion facility.	443
(2) If a pregnant woman does not desire to exercise the	444
rights under division (A) of section 3726.03 of the Revised	445
Code, the abortion facility shall determine whether final	446
disposition shall be by cremation or interment.	447
(B)(1) A pregnant woman who is under eighteen years of	448
age, unmarried, and unemancipated shall obtain parental consent	449
from one of the person's parents, guardian, or custodian to the	450
final disposition determination she makes under division (A)(1)	451
of this section. The consent shall be made in writing using a	452
form prescribed by the director under division (B) of section	453
3726.14 of the Revised Code.	454
(2) The consent under division (B)(1) of this section is	455
not required for a pregnant woman exercising her rights under	456
division (A) of section 3726.03 of the Revised Code if an order	457
authorizing the minor to consent, or the court to consent on	458
behalf of the minor, to the abortion was issued under section	459
2151.85 or division (C) of section 2919.121 of the Revised Code.	460
Sec. 3726.041. (A) A pregnant woman who is carrying more	461
than one zygote, blastocyte, embryo, or fetus, who desires to	462
exercise the rights under division (A) of section 3726.03 of the	463
Revised Code, shall complete one form under division (A)(1) of	464
section 3726.04 of the Revised Code for each zygote, blastocyte,	465
embryo, or fetus that will be aborted.	466
(B) A pregnant woman who obtains parental consent under	467
division (B)(1) of section 3726.04 of the Revised Code shall use	468

one consent form for each zygote, blastocyte, embryo, or fetus	469
that will be aborted.	470
Sec. 3726.042. A form used under section 3726.04 of the	471
Revised Code that covers more than one zygote, blastocyte,	472
embryo, or fetus that will be aborted is invalid.	473
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Sec. 3726.05. An abortion facility may not release fetal	474
remains from a surgical abortion, or arrange for the cremation	475
or interment of such fetal remains, until it obtains a final	476
disposition determination made, and if applicable, the consent	477
made, under section 3726.04 or 3726.041 of the Revised Code.	478
Sec. 3726.09. (A) Except as provided in division (B) of	479
this section, an abortion facility shall pay for and provide for	480
the cremation or interment of the fetal remains from a surgical	481
abortion performed at that facility.	482
(B) If the disposition determination made under division	483
(A) (1) of section 3726.04 or 3726.041 of the Revised Code	484
identifies a location for final disposition other than one	485
provided by the abortion facility, the pregnant woman is	486
responsible for the costs related to the final disposition of	487
the fetal remains at the chosen location.	488
Sec. 3726.10. An abortion facility shall document in the	489
pregnant woman's medical record the final disposition	490
determination made, and if applicable, the consent made, under	491
section 3726.04 or 3726.041 of the Revised Code.	492
Sec. 3726.11. An abortion facility shall maintain_	493
evidentiary documentation demonstrating the date and method of	494
the disposition of fetal remains from surgical abortions	495
performed or induced in the facility.	496
Sec. 3726.12. An abortion facility shall have written	497

policies and procedures regarding cremation or interment of	498
fetal remains from surgical abortions performed or induced in	499
the facility.	500
Sec. 3726.13. An abortion facility shall develop and	501
maintain a written list of locations at which it provides or	502
arranges for the final disposition of fetal remains from	503
surgical abortions.	504
Sec. 3726.14. Not later than ninety days after the	505
effective date of this section, the director of health, in	506
accordance with Chapter 119. of the Revised Code, shall adopt	507
rules necessary to carry out sections 3726.01 to 3726.13 of the	508
Revised Code, including rules that prescribe the following:	509
(A) The notification form informing pregnant women who	510
seek surgical abortions of the following:	511
(1) The right to determine final disposition of fetal	512
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remains under division (A) of section 3726.03 of the Revised	513
<u>Code;</u>	514
(2) The available options for locations and methods for	515
the disposition of fetal remains.	516
(B) The consent form for purposes of section 3726.04 or	517
3726.041 of the Revised Code;	518
(C)(1) A detachable supplemental form to the form	519
described in division (B)(4) of section 2317.56 of the Revised	520
Code that meets the following requirements:	521
<u>(a) Indicates whether the pregnant woman has indicated a</u>	522
preference as to the method of disposition of the fetal remains	523
and the preferred method selected;	524
(b) Indicates whether the pregnant woman has indicated a	525

preference as to the location of disposition of the fetal	526
remains;	527
(c) Provides for the signature of the physician who is to	528
perform or induce the abortion;	529
(d) Provides for a medical identification number for the	530
pregnant woman but does not provide for the pregnant woman's	531
printed name or signature.	532
(2) If a medical emergency or medical necessity prevents	533
the pregnant woman from completing the detachable supplemental	534
form, procedures to complete that form a reasonable time after	535
the medical emergency or medical necessity has ended.	536
Sec. 3726.15. A person who buries or cremates fetal	537
remains from a surgical abortion is not liable for or subject to	538
damages in any civil action, prosecution in any criminal	539
proceeding, or professional disciplinary action related to the	540
disposal of fetal remains, if that person does all of the	541
following:	542
(A) Acts in good faith compliance with this chapter and,	543
if applicable, section 4717.271 of the Revised Code;	544
(B) Receives a copy of a properly executed detachable	545
supplemental form described in division (C)(1) of section	546
3726.14 of the Revised Code;	547
(C) Acts in furtherance of the final disposition of the	548
fetal remains.	549
Sec. 3726.16. Except for the requirements of section	550
3705.20 of the Revised Code, no conflicting provision of the	551
Revised Code or conflicting procedure of an agency or board	552
shall apply regarding a person who buries or cremates fetal	553

remains in accordance with section 3726.15 of the Revised Code.	554
Sec. 3726.95. A pregnant woman who has a surgical	555
abortion, the fetal remains from which are not disposed of in	556
compliance with this chapter, is not guilty of committing,	557
attempting to commit, complicity in the commission of, or	558
conspiracy in the commission of a violation of section 3726.99	559
of the Revised Code.	560
Sec. 3726.99. (A) No person shall fail to comply with	561
section 3726.02, 3726.05, 3726.10, or 3726.11 of the Revised	562
Code.	563
(B) Whoever knowingly violates division (A) of this	564
section is guilty of failure to dispose of fetal remains	565
humanely, a misdemeanor of the first degree.	566
Sec. 4717.271. The following applies to a crematory	567
operator that cremates fetal remains for an abortion facility	568
under Chapter 3726. of the Revised Code.	569
(A) A crematory operator shall not do any of the	570
following:	571
(1) Cremate fetal remains without receiving a copy of a	572
properly executed detachable supplemental form described in	573
division (C)(1) of section 3726.14 of the Revised Code;	574
(2) Dispose of the cremated fetal remains by a means other	575
than one of the following:	576
(a) Placing them in a grave, crypt, or niche;	577
(b) Scattering them in any dignified manner, including in	578
a memorial garden, at sea, by air, or at a scattering ground	579
described in section 1721.21 of the Revised Code;	580

<u>(c) Any other lawful manner.</u>	581
(3) Arrange for the disposal of the cremated fetal remains	582
by a means other than one described in division (A)(2) of this	583
section;	584
(4) Arrange for the transfer of the cremated fetal remains	585
for disposal by a means other than one described in division (A)	586
(2) of this section.	587
(B) A crematory operator is not required to secure a death	588
certificate, a burial or burial-transit permit, or a cremation	589
authorization form to cremate fetal remains.	590
Section 2. That existing sections 2317.56, 3701.341, and	591
3701.79 of the Revised Code are hereby repealed.	592
Section 3. Neither of the following shall apply until	593
rules are adopted under section 3726.14 of the Revised Code:	594
(A) The prohibition under section 3726.99 of the Revised	595
Code;	596
(B) The prohibitions under division (A) of section	597
4717.271 of the Revised Code.	598