



# **THE SATANIC TEMPLE**

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A Comprehensive Guide To  
Abortion Informed Consent  
Statutes Per State

# ABOUT

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This research was conducted as an initiative of The Satanic Temple's Religious Reproductive Rights (RRR) Campaign. The release of this information follows the announcement of TST's [religious abortion ritual](#), which exempts Satanists from fulfilling medically unnecessary and unscientific requirements prior to undergoing abortions in states that have enacted the Religious Freedom Restoration Act (RFRA).

This research is designed to describe the general process of giving informed consent prior to obtaining an abortion, to outline TST's objections to various informed consent statutes, and to give a comprehensive look at each state's individual combination of abortion regulations regarding the informed consent process.

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# INTRODUCTION

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The Satanic Abortion Ritual and  
An Overview of Informed Consent  
Requirements for Abortions



# The Satanic Abortion Ritual and Informed Consent

## The Satanic Abortion Ritual

The Satanic Temple has announced that its religious abortion ritual exempts TST members from enduring medically unnecessary and unscientific regulations when seeking to terminate a pregnancy. This exemption only applies to states that have enacted the Religious Freedom Restoration Act (RFRA). TST members and those sharing our deeply-held beliefs who choose to perform our ritual are not required to undergo mandatory waiting periods, be forced to view sonograms, affirm inaccurate information about abortions, or fulfill other state demands that require them to violate their deeply-held beliefs of bodily autonomy and scientifically-reasoned personal choice. Because these prerequisite procedures contravene Satanists' religious convictions, those who perform the religious abortion ritual—which involves the recitation of TST's Third and Fifth Tenets and a personal affirmation ceremoniously intertwined with the abortion—are exempt from fulfilling these requirements and can receive first-trimester abortions on demand.

States often root their informed consent statutes in regulations that serve no medical purpose, do not offer better outcomes when performed, and assert scientifically-inaccurate information. RFRA legislation exempts Satanists from complying with any informed consent statute that forces them to undermine their sincerely-held religious beliefs. Informed consent requirements vary from state to state, so it is essential to understand the objections a Satanist can make in the state in which they enact the ritual. Such knowledge ensures that Satanists can authentically practice the religious abortion ritual in deference to Satanic beliefs.

## Research Methods

The following information was gathered from current abortion statutes as provided by each state's legislature websites, from reading materials that states publish regarding their unique abortion process, and from the informed consent forms provided by clinics when publicly available on their websites. Some information, such as the reading materials or the informed consent forms, may not be publicly available, depending on the state and/or clinic. In these instances, clinics only distribute such information to patients seeking an abortion. The following information defaults to the rules and regulations each state legislation provides and is elaborated upon alongside other state source materials.

## Introduction to Informed Consent

Informed consent for an abortion process encompasses both prerequisite procedures and a doctor's information that is given to patients regarding abortion processes altogether. What constitutes one giving their informed consent, however, varies from state to state. Some states elaborately map the different phraseology doctors must use and prewrite language into the written materials provided to patients; other states absorb the informed consent process for abortion under their general medical procedure laws. In the latter cases, state legislatures may indicate that freedom to choose either to continue or terminate a pregnancy remains an individual's decision.





# Necessary Steps Informed Consent

## The Medically-Necessary Steps to the Informed Consent Process

The necessary informed consent components for an abortion procedure include the medical disclosures of taking abortion medication or obtaining surgery to terminate a pregnancy. Doctors should carefully describe each abortion method to patients, including expected side effects and potential risks for a particular abortion procedure. Common disclosures of risks include the possibility of infection, heavy bleeding, the continuation of a pregnancy, any reaction to medications, blood clotting problems, a tear in the cervix or uterus, or injury to nearby organs and the bowel. A patient may also need a second surgery, such as a hysterectomy, if certain complications arise. As with any type of medical procedure, doctors must disclose to patients that death is possible. However, life-threatening complications are rare with abortions and are even less probable than the instances of complications that may arise with the continuation of a pregnancy. These disclosures are accompanied by information about post-procedure care, including complications for which a patient may need further treatment.

Upon starting the informed consent process, doctors must confirm that patients are good medical candidates to undergo an abortion. Medical examinations performed at this stage are qualitatively equivalent to a receiving blood test before an appendectomy. Gathering one's medical history and taking the patient's common vitals are routinely performed to ensure patient health. Doctors must perform a pregnancy test to confirm the presence of fetal tissue. Doctors may want to perform an ultrasound prior to the abortion procedure. Sonograms performed to confirm the fetus's gestational age and to affirm that the pregnancy is located inside the uterus are considered medically necessary. The fetus's size affects which abortion method is most safe to use, and those who have an ectopic pregnancy are not considered medically-appropriate candidates for an abortion. In some cases, blood tests are used to confirm a patient's blood type. If a patient's blood test reveals that they are Rh-negative, they may have to obtain another medication called Rhogam prior to an abortion so that any conflict between the blood type of the patient and fetal tissue does not harm the patient post-procedure. Routine STD testing may also be conducted depending on the individual clinic.

These disclosures about the abortion process and prerequisite medical procedures are necessary for an abortion to ensure the health and safety of the patient and are performed by all abortion clinics for all abortion candidates. Patients must have proper information for what to expect during the procedure, how best to perform post-procedure care, and what to do and who to contact if unexpected side effects appear.

# EXEMPTIONS

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Satanic Exemptions to  
Generally-Applicable Informed  
Consent Requirements



# Additions to the Informed Consent Process

## Unnecessary and Unscientific Additions to the Informed Consent Process

States commonly force clinics to add superfluous steps to the informed consent process and include unnecessary and unscientific information in their written materials so that a patient is dissuaded from obtaining an abortion. For every patient, inclusions of this nature offer no apparent medical benefit compared to states that do not require these procedures.

As Satanists believe in bodily autonomy and scientifically-reasoned personal choice, The Satanic Temple religiously objects to the following procedures and inclusions of information because they delay and inhibit the abortion ritual's sincere practice.

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## Procedural Objections

**Mandatory Waiting Periods:** Many states require that a patient waits a certain number of hours between the initial consultation with the doctor and obtaining the actual abortion procedure. Waiting periods range from 18 to 72 hours, often necessitating two distinct clinic visits. This causes an increase in incurred expenses and time off of work or school to accommodate a state's waiting period mandate.

- **Satanic Exemption:** The patient receives no tangible medical benefit from a waiting period. The waiting period is only designed to instill guilt and shame for a patient's decision, and the process delays and, therefore, inhibits a Satanist's ability to practice the religious abortion ritual.

**Being Offered to View the Sonogram and/or Hear the Fetal Tone:** When an ultrasound is performed in some states, doctors may be mandated to offer patients an opportunity to view the sonogram's image and hear the fetal tone. Patients may accept or decline these offers.

- **Satanic Exemption:** The imposition of this law poses no medical benefit. When a doctor removes an inflamed appendix, they do not typically save it and show it to the patient upon waking from anesthesia. The primary reason for this law is to instill guilt and shame as based on a state's arbitrary, religious position that fetal tissue is human life. Under TST's Third and Fifth Tenet, laws suggesting fetal tissue is separate from the person carrying it, and requirements that Satanists fulfill laws serving no medical purpose violates TST's religious beliefs.



**Being Forced to View the Sonogram and/or Hear the Fetal Tone:** When an ultrasound is performed in some states, the legislature may mandate that doctors position images in patient view and audibly play the fetal tone. It is generally not relayed to patients in such circumstances that they may avert their attention, implying it is a requirement to see the sonogram or hear the fetal tone with no logical indication otherwise.

- **Satanic Exemption:** The same reasoning from above applies to this instance. With this law's imposition, Satanists have no choice but to endure a medically-unnecessary procedure rooted in the arbitrary position that fetal tissue constitutes human life. For Satanists, to be forced to affirm and endure the state's arbitrarily-defined position is a violation of the Third and Fifth Tenet.

**Being Forced to Hear A Description of the Sonogram:** Some states require that doctors offer patients a thorough description of the sonogram image. Such descriptions may include but are not limited to: the position of the fetus inside the uterus, the presence of a fetal tone, the number of fetuses, any fetal anomalies, the presence of internal and external fetal organs, and the anatomical characteristics of the fetus.

- **Satanic Exemption:** While it is routine and necessary for a doctor to confirm the pregnancy's gestational period through using a sonogram, such descriptions of the sonogram serve no medical purpose for the information regarding a Satanist's ability to undergo an abortion. The description is designed to dissuade a person from undergoing an abortion by forcing Satanists to contextualize this information as evidence of fetal tissue being human life, which conflicts with their religious beliefs. This information violates the Third and Fifth Tenets and inhibits the authentic practice of the abortion ritual.

**Compulsory Burial or Cremation of Fetal Remains:** In some instances, states may require that expelled fetal tissue is either buried or cremated upon removal. Often, patients incur costs for these services.

- **Satanic Exemption:** Satanists believe that non-viable fetal tissue is part of the person who carries it. As such, state impositions of ceremonial requirements dictating its disposal, barring any plausible medical or sanitary concerns, violates a Satanist's ability to contextualize the termination of a pregnancy on their terms with deference to their own religious beliefs.

**Psychological Evaluations:** Some states require doctors to perform a psychological evaluation of patients prior to abortion procedures. In these instances, doctors gather information about the personal history of the patient to determine in what cases they would have emotional trauma and familial or social difficulties if they undergo an abortion. Doctors must determine these "risk factors" and inform the patient of their possible shortcomings.

- **Satanic Exemption:** It is in contravention to religious liberty laws for the government to determine a person's ability or readiness to partake in religious rituals. In addition, any psychological evaluation delaying the abortion procedure is medically unnecessary for pregnancy termination and implies arbitrary opinions that may conflict with a Satanist's beliefs regarding the context of the religious abortion ritual.





## Informational Objections

**Increased Risk of Breast Cancer:** As a stipulation of informed consent in some states, doctors must inform patients that abortion procedures may cause an increased risk of breast cancer. This information may also be asserted in the state-prepared reading materials and on informed consent forms.

- **Satanic Exemption:** The American College of Obstetricians and Gynecologists, the American Cancer Society, the Collaborative Group of Hormonal Experts in Breast Cancer, and the US National Cancer Institute, among other research institutions, all agree that spontaneous or induced abortion does not increase one's risk of breast cancer. According to the [American Cancer Society](#), this fact is "well established" among the scientific community. Forcing Satanists to acknowledge and affirm this fictional clause as fact violates the Fifth Tenet's affirmation of the best available science, and this information undermines the sincerity of the abortion ritual.

**Life Begins at Conception:** Some states may include information in their reading materials and informed consent forms, or require that practitioners verbally tell patients, that "life begins at conception" and/or that "abortion terminates the life of a whole, separate, unique, living human being."

- **Satanic Exemption:** The idea that life begins at conception is an arbitrary, pseudoscientific position that is rooted in foreign religious doctrine. As Satanists regard fetal tissue as part of the person who carries it, a Satanist may disregard the current or future condition of fetal tissue when making medical decisions that affect their own body. To force a Satanist to regard fetal tissue as the undeniable equivalent to human life contravenes the TST's values of bodily autonomy and the value of science.

**Detrimental Psychological Effects:** The ranges of emotional reactions to an abortion are something to consider. However, some states mandate that patients be informed in written materials and/or verbally by a doctor that an abortion poses a risk of detrimental psychological effects, which include but are not limited to depression, suicide, suicidal ideation, lethargy, and decreased sexual function.

- **Satanic Exemption:** It is commonly accepted among the scientific community that undergoing an abortion does not increase one's risk to experiencing detrimental psychological effects. The American Psychological Association has concluded that obtaining an abortion does not pose a psychological hazard for most women. According to Planned Parenthood's [fact sheet](#), which cites information from various peer-reviewed studies from the scientific community, "The highest quality studies have indicated few, if any, differences in mental health between women who had abortions and those who did not." For a state to mandate that a patient must be told anything other than verifiably-correct medical information is a violation of Satanic beliefs.



**The Exaggeration of an Increased Possibility of Infertility:** Many states require the disclosure that having an abortion tangibly increases one's chances both of infertility and of problems with future pregnancies. The language often used poses infertility and issues with subsequent pregnancies as a real and imminent threat of an abortion.

- **Satanic Exemption:** A rare post-procedure infection of the fallopian tubes and ovaries called pelvic inflammatory disease (PID) after an abortion can be treated with antibiotics. [The National Health Service](#) states that such an infection poses a threat to one's fertility only when it is left untreated by a medical professional. Any responsible practitioner would treat the patient with antibiotics before the infection reaches that stage. Therefore, as PID is rare in the first place, infertility and issues with future pregnancies are not a large concern with doctors who competently understand one's health and adequately treat their patients. For a state to mandate that a patient must be told anything other than verifiably-correct medical information is a violation of Satanic beliefs.

**Fetal Pain at Less than 24 Weeks:** Some states require that patients be informed, either by the doctor or in written materials, that the fetus may feel pain at less than 24 weeks of gestational age. False claims about when the fetus can start to feel pain range from 16 to 22 weeks of gestational age. Some states require patients over a certain gestational period to sign a "fetal pain checklist" where they must acknowledge certain misleading and unscientific characteristics of the fetal nervous system at this stage of pregnancy.

- **Satanic Exemption:** No medical basis exists to the claim that the fetus can feel pain at less than 24 weeks of gestational age. [Live Science](#) reported that studies from various sources have concluded that the neurons connecting the spinal cord to the brain's pain receptors do not develop until 23 to 24 weeks, making it impossible to experience pain earlier. [Some experts](#) even suggest that a fetus cannot consciously perceive a stimulus as pain until the 27th week of gestation. Claims that a fetus can feel pain at any time prior to 24 weeks of gestation have no basis in reality, and for a state to mandate that patients be told anything other than verifiably-correct medical information is a violation of Satanic beliefs.

**Language Indicating that the Fetus is a Separate Entity from the Pregnant Person:** Often the language in state legislature, reading materials, and informed consent forms may refer to the fetus as a "child", "unborn child" and/or a "baby". In some instances, the pregnant patient may be called a "mother."

- **Satanic Exemption:** Under the Third Tenet, Satanists regard fetal tissue as part of the person who carries it. Language that constitutes fetal tissue as human life violates a Satanist's ability to contextualize their abortion in deference to their religious beliefs of bodily autonomy.



**Possibility That a Medical Abortion Can Be Reversed:** Some states require that patients be told either by a doctor or through state-mandated written materials that medical abortions can be reversed if the patient has only taken the first mifepristone pill. This clause may contain a list of agencies patient can contact if they decide to seek medication to reverse their abortions.

- **Satanic Exemption:** The medical abortion reversal process is extremely dangerous. Firstly, the medical abortion reversal procedure poses extreme danger to the health and well being of the patient. [\*The Washington Post\*](#) reported a study about medical abortion reversals that had to be cut short before its completion because many of the patients that received the abortion reversal treatment were sent to the hospital for extreme, life-threatening hemorrhaging. Secondly, it is commonly accepted among the scientific community that upon the first dose of medical abortion medication, deciding to carry the pregnancy to term would often result in threateningly severe defects to the fetus. According to *The Washington Post*, The American College of Obstetricians and Gynecologists states that “claims regarding abortion ‘reversal’ treatment are not based on science and do not meet clinical standards.” For a state to mandate that patients be told anything other than verifiably-correct medical information, especially when such information is dangerous to the well-being of the patient, is a violation of Satanic beliefs.

**Being Offered lists of Alternatives to Abortion, Including Adoption and Parenting, Childbirth, Neonatal, and Perinatal Hospice Services:** In many instances, states require that patients receive information regarding alternatives to abortion, which includes information about carrying a pregnancy to term and parenting or placing the subsequent child up for adoption. This information is often accompanied by the availability of a geographically-indexed list of all of the childbirth, adoption, and neonatal agencies in the state that provide services to those seeking abortions, sometimes free of charge. In some states, if the doctor identifies the fetus as having a lethal anomaly, the doctor must provide resources to the patient about perinatal hospice services, which also includes an index of agencies throughout the state that provide such assistance.

- **Satanic Exemption:** When a Satanist declares that they are undergoing the religious abortion ritual, they are invoking their religious rights to practice their beliefs free from state interference. A Satanist decides to invoke the religious ritual as an expression of their deeply-held beliefs, so the assertion that there are alternatives to undergoing the religious ritual contravenes religious liberty laws and violates a Satanist’s right to exercise their religion without unnecessary and undue burden from the state.

# STATUTES

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## Informed Consent Statutes Per State for Abortion Procedures

Note: RFRA states are preceded by an asterisk.







# Informed Consent Statutes

## \*Alabama

With the reversal of Roe v. Wade, Alabama is enforcing its 2019 ban of abortion. Abortion is no longer legal in Alabama. The informed consent laws are no longer applicable.

## \*Alaska

While no waiting period exists, patients in Alaska must engage in the informed consent process through Alaska's Department of Health's website and print a signature page for submission to the clinic that acknowledges they have read the state-prepared materials before being permitted an abortion. The information provided on the website will also be discussed in person with the patient and doctor. Information included in the written materials pertains to various gestational periods of the fetus with associated characteristics from fertilization to 38 weeks of gestational age with options to view fetal images at every stage. Included information also concerns the risks of pregnancy, emotional and logistical information about carrying a pregnancy to term, the risks of drug use during pregnancy, the importance of establishing paternity, abortion methods and associated risks, the array of emotional reactions to abortion, and birth control methods. The information concludes with a directory of state-prepared resources regarding adoption and behavioral health services. Certain information on this informed consent website asserts the possibility of a breast cancer link, although it concedes that more research is required. Language may refer to the fetus as an "unborn child". Informed consent is not required if the pregnancy was a result of sexual assault or incest.

## \*Arizona

Abortion in Arizona is banned after 15 weeks of pregnancy unless it is necessary to save the patient's life. Arizona requires a waiting period of 24 hours during which patients will be offered a set of reading materials. The reading materials contain images for various gestational stages of the fetus and associated developmental characteristics for every two weeks of gestational age up to 40 weeks. The reading materials also cover the process of obtaining informed consent -- including the affirmation that the patient will receive counseling and an ultrasound -- along with information about abortion methods and associated complications. The materials also discuss the emotional reactions to abortion (although they heavily focus on the negative emotions), assert the possibility of infertility, include information about carrying a pregnancy to term, and conclude with information about child support and neonatal services with an offered directory. Much of this information will also be reasserted by a doctor. Medical information provided to patients also inaccurately asserts that a medical abortion can be reversed. An ultrasound must be performed in which patients are offered to view the image, hear an explanation of the sonogram, and listen to the fetal heartbeat. Arizona's informed consent form requires the patient to guarantee they are not terminating the pregnancy because of the sex or race of the fetus. Language refers to the fetus as an "unborn child".

## \*Arkansas

With the reversal of Roe v. Wade, Arkansas has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.



### California

California does not require a waiting period, nor are there any state-prepared materials. By the discretion of the clinics, patients will be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks. Legislature indicates that the state may not interfere with a patient's right to obtain an abortion prior to viability.

### Colorado

Colorado does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks. Legislature indicates that the state may not interfere with a patient's right to obtain an abortion prior to viability.

### \*Connecticut

Connecticut does not require a waiting period, nor does the state require any specific disclosures mandated by law. That said, clinics will provide patients with information necessary to understand the mechanics of their medical procedure. Legislature indicates that the decision to terminate the pregnancy is solely that of the patient and the patient alone, provided that the physician deems it medically safe to perform the procedure.

### Delaware

Delaware does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks. Legislature indicates that the state may not interfere with a patient's right to obtain an abortion prior to viability.

### \*Florida

After the reversal of Roe v. Wade, Florida has outlawed abortion performed 15 weeks after conception. Florida enforces a 24-hour waiting period. Patients must be offered state-prepared reading materials that discuss the gestational development of the fetus, accompanied by pictures at various stages of pregnancy, as well as a list of agencies offering support for alternatives to pregnancy, and detailed information about the medical assistance benefits for prenatal, neonatal and childbirth care. As part of the informed consent process, patients will be informed by the attending physician about the risks of the proposed abortion procedure. Doctors must perform an ultrasound and communicate the fetus' gestational age to patients. Patients are offered a description of the ultrasound and an opportunity to view the image.



### Georgia

After the reversal of *Roe v. Wade*, Georgia is likely to enforce a ban on abortion 6 weeks after conception. Georgia requires a 24-hour waiting period, during which patients will be offered the opportunity to view state-prepared reading materials. The introduction to these reading materials restates Georgia's law, which will be further reiterated in this section. This is followed by descriptions of the gestational development of the fetus, accompanied by pictures, for every two weeks until the end of the pregnancy. It also includes relevant information about the projected survival of the fetus at various stages of pregnancy. The reading materials transition into various abortion methods and their associated medical risks and side effects. In addition, the materials assert that the fetus is able to feel pain at 20 weeks gestation and that anesthesia is available for the fetus at this stage to alleviate such pain. Paternal responsibility and resources for medical assistance and for the alternatives to abortion, such as adoption and parenting, are provided. The materials focus on a range of emotional side effects, heavily focusing on the possibility of a negative psychological reaction. It is also suggested that counseling prior to an abortion might alleviate one's stress. The reading materials end with the risks of carrying a pregnancy to term and a list of agencies that assist patients in their pregnancy. An additional list of agencies that provide alternatives to abortion is also available. Much of this information will be verbally reiterated by an attending physician. A sonogram must be performed in which the doctor offers the patient an opportunity to hear the fetal heartbeat and view sonogram images. Regardless, a doctor is required to tell a patient if there is a detectable fetal tone. Language may refer to the fetus as an "unborn child" and the pregnant patient as a "mother".

### \*Hawaii

Hawaii does not require a waiting period, nor does the state require any specific disclosures mandated by law. Patients will be given information necessary to understand the mechanics of their medical procedures. Legislature indicates that the decision to terminate the pregnancy is solely the patient's, and the state may not pass legislation to interfere or deny a patient's right to choose the outcome of a pregnancy.

### \*Idaho

With the reversal of *Roe v. Wade*, Idaho will imminently outlaw abortions performed within state lines (as of the date of this publication). The informed consent laws are no longer applicable.

### \*Illinois

Illinois does not require a waiting period. Patients will be given information necessary to understand the mechanics of their medical procedures by the clinics. The legislature indicates that the decision to terminate the pregnancy is solely up to the patient, and the state may not pass legislation to interfere or deny a patient's right to choose the outcome of their pregnancy.

### \*Indiana

With the reversal of *Roe v. Wade*, Indiana has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.



### Iowa

Iowa requires a 72-hour waiting period, during which patients will be given state prepared reading materials. The materials include an index of prenatal, adoption and childbirth services throughout the state. In addition, the materials will explain the benefits to adoption, and the materials will actively encourage the patient to consider adoption over abortion. The last component discusses the various abortion methods with their associated risks and side effects, as well as the possibility of “detrimental psychological effects” regarding abortion. Attending physicians are required to reiterate this information to patients, including descriptions of various risk factors -- physical, psychological, or situational -- that might increase the risk of negative outcomes to one’s abortion. Doctors must perform an ultrasound in which patients will be offered to view ultrasound images, hear a description of the ultrasound, and listen to the fetal tone. Language may refer to the fetus as an “unborn child” or a “child”. Abortion in Iowa is prohibited if there is a detectable fetal tone.

### \*Kansas

In 2019, Kansas ruled that their state constitution implies a right to abortion and cannot be overruled by lawmakers. However, the right to abortion could be removed from the state constitution by Kansas voters in early August if they so choose. Kansas requires a 24-hour waiting period, during which patients will be given a set of reading materials. The reading materials examine the developmental characteristics of a fetus, with images, staged at 2-week increments, until the pregnancy is full term. The materials also twice assert that “abortion terminates the life of a whole, separate, unique, living human being”. Various abortion methods and their associated medical risks and side effects are described. In particular, when talking about the method of abortion, the hysterotomy, it is stated that “the unborn child is killed in the uterus prior to removal”. The reading materials greatly exaggerate the proposed danger of infertility, the effects of future childbearing, and the increased risk of breast cancer. The materials only focus on the inaccurately high probability of negative psychological effects. The risks of carrying a pregnancy to term, the paternal responsibility, and the assertion of adoption as an alternative are also discussed. Attending physicians are required to give patients a directory of resources in Kansas that offer alternatives to abortion. This information will also be reiterated to the patient verbally. An ultrasound must be performed at least 30 minutes prior to the abortion, in which patients are offered an opportunity to view sonogram images and listen to the fetal heartbeat at no additional expense. Language in various resources may refer to the fetus as a “baby” or “unborn child”. Abortion based on gender is prohibited.

### \*Kentucky

With the reversal of Roe v. Wade, Kentucky has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### \*Louisiana

With the reversal of Roe v. Wade, Louisiana has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.





### \*Maine

Maine affirms the right for patients to get abortions in their state legislature. Maine does not require a waiting period. Attending physicians are required to inform patients that they are a certain number of weeks pregnant, while also relaying information about proposed abortion methods and their associated risks. At the patient's request, a resource directory of agencies that offer alternatives to abortion may be provided.

### \*Maryland

Maryland does not require a waiting period and does not have any state prepared materials. No specific disclosures are required; although attending physicians may provide patients with information about the directions for their abortion and the medical risks and side effects of their abortion procedure. The state legislature indicates that Maryland may not interfere with one's decision to terminate a pregnancy before the fetus is viable, if the procedure necessitates a medical emergency, or if the fetus is affected by a fatal anomaly.

### \*Massachusetts

Massachusetts has an amendment to their constitution that affirms the right to get an abortion. Massachusetts does not require a waiting period and does not have state-prepared reading materials. Patients are required to sign an informed consent form that discusses the various abortion methods, with their associated side effects and possible complications, post-procedure care, alternative options (adoption and parenting), and the availability of public assistance. Medically-associated discussions of this information will also be reiterated to the patient by the doctor.

### \*Michigan

Michigan requires a 24-hour waiting period. The Michigan Health Department has created an online module that constitutes the informed consent process, ending with the signing of an informed consent document that is valid for 14 days upon its signature. The consent materials introduce extensive information and resources about how it is illegal to coerce a person into undergoing an abortion. The materials then present various methods of abortion with their medically-associated side effects and risks, maintaining the possibility of complications to future pregnancies. Psychological effects are discussed, acknowledging that negative emotional side effects are rare, but only listing the negatives nonetheless. This section concludes with a statement about resources that proffer alternatives to abortion. The materials then review gestational development with associated characteristics and images of the fetus at various stages and list agencies that supply free prenatal ultrasounds. The materials examine what a patient should expect when receiving prenatal treatment (hypothetically assuming that the patient is going to continue the pregnancy to full term), followed by parenting information that includes child developmental characteristics from birth through high school, state definitions of parenting, and general characteristics of the family. Attending physicians are required to verbally reiterate some of this information. The patient also is required to receive a list of adoption, prenatal and pregnancy-related services. If an ultrasound is performed at any time prior to the abortion, doctors must offer patients an opportunity to view the sonogram and receive a physical image of the ultrasound.



### \*Minnesota

Minnesota has an amendment to their constitution that affirms the right to get an abortion. Minnesota requires a 24-hour waiting period, during which the patient will be offered state-prepared reading materials. The introduction to the reading materials review various legal requirements, which will be illuminated later in this section. The materials then examine the process of conception and the gestational development characteristics of the fetus, accompanied by pictures, every two weeks up until 40 weeks of pregnancy. In this section, it is characteristically unclear as to when the state asserts that the fetus begins to feel pain, but the state is sure to emphasize that a fetus may display certain pain-avoiding characteristics at certain points in the pregnancy. The materials scrutinize methods of abortion with their various side effects and medical risks, maintaining the possibility of complications in future pregnancies. The materials correctly claim there should be no drastic effects on fertility, future childbearing, and the materials posit that breast cancer is not associated with an abortion. Only the negative emotional complications, as well as the assertion that one should talk to a counselor before having an abortion, are analyzed. The reading materials close with proposed risks of childbearing, paternal responsibilities, adoption as an alternative, and an information directory containing contacts for childcare and adoptive services able to assist patients. Attending physicians are required to verbally deliver an overview of the above information. If the patient's fetus has a certain anomaly, the physician must inform the patient of the availability of perinatal hospice services, and the patient must either consent or decline these services as an integral step to the informed consent process. In addition, if the patient's pregnancy is over 20 weeks of gestational age, the doctor must inform the patient of the effectiveness of a fetal anesthetic to alleviate supposed fetal pain). If the patient has a fetus with an anomaly, the doctor must provide information on perinatal hospice services or adoptive services and offer these options as an alternative to abortion. Language may refer to the fetus as an "unborn child".

### \*Mississippi

With the reversal of Roe v. Wade, Mississippi has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### \*Missouri

With the reversal of Roe v. Wade, Missouri has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### \*Montana

Montana requires a 24-hour waiting period for informed consent. The waiting period is extended to 72 hours if a patient elects to receive their reading materials by mail. The reading materials include an index of agencies that offer an alternative to abortion. Attending physicians are required to inform patients of the gestational age of the fetus and proposed medical risks of abortion, including the risk of breast cancer, danger to subsequent pregnancies, and the possibility of infertility. Physicians must also disclose the risks of continuing the pregnancy, alternatives to abortion, paternal responsibilities, and must offer the state prepared reading materials. The reading materials examine the gestational development at two-week increments with drawings, including information about the viability of the fetus at various stages, the possible "detrimental" psychological effects to abortion and adoption, and the risks of carrying a fetus to term. A directory of abortion alternatives will also be provided. Language may refer to the fetus as an "unborn child".



### Nebraska

Nebraska requires a waiting period of 24 hours, during which patients are offered the opportunity to review state prepared materials. The materials begin by examining gestational characteristics, accompanied by images of the fetus at various pregnancy stages with information about fetal survival where applicable. The book transitions into guidelines for a healthy pregnancy. The various abortion methods with their medically-associated side effects and risks are analyzed, including the possibility of a reversal of a medical abortion. The doctor is also required to reiterate that a patient may seek to reverse their abortion if the only the first of the two pills in the medical-abortion regimen has been taken. The materials only focus on the negative complications of abortion, followed by the subsequent dangers of multiple abortions on fertility and carrying a pregnancy to term. Complications to continuing a pregnancy, including psychological complications, conclude the booklet. Patients may also review an index of prenatal, childbirth, and adoption services the state prepared as alternatives to abortion, as well as a secondary list of services to consult about abortion reversals. One hour prior to the abortion, an attending physician must inform the patient about their various risk factors of the procedure, which may include physical, psychological or situational risks. The physician will also ask the patient to ensure that they are not feeling pressured into having an abortion. The physician will inform the patient that terminating a pregnancy presents a higher risk of mental and physical complications than if the patient were to choose to continue the pregnancy. A required ultrasound displays fetal images to the patient while an attendant explains the images and offers the opportunity to hear the fetal tone. Patients are often unaware of their right to decline sensory engagement with the ultrasound. Language may refer to the fetus as an “unborn child”.

### Nevada

Nevada does not require a waiting period and does not have any state-prepared reading materials. The doctor is required to disclose to the patient a certification of pregnancy and by how many weeks, as well as information regarding medical procedures, side effects and risks associated with abortion. The patient will be required to sign a form indicating that they have been given this information by the doctor.

### New Hampshire

New Hampshire does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks.

### New Jersey

New Jersey has an amendment to their state constitution that protects the right to abortion. New Jersey does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks.

### \*New Mexico

New Mexico does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks.



### New York

New York has passed the New York Reproductive Health Act, which protects the right to abortion. New York does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with the associated side effects and medical risks. Legislature indicates that the state may not interfere with a patient's right to choose to obtain an abortion prior to viability.

### North Carolina

North Carolina requires a 72-hour waiting period, during which patients are offered the opportunity to view state-prepared materials. The materials begin by examining gestational characteristics at certain stages of pregnancy, as well as images that accompany the descriptions. The different abortion methods with their associated medical risks and side effects are contrasted, including a convoluted description of the increased risk of premature births in future pregnancies. The materials assert the possibility of depression as a long-lasting side effect to abortion as part of the legislature's mandate to include "possible detrimental psychological effects" to abortion. The materials advocate for the use of birth control while supplying an index of pregnancy outreaches, adoption services, and medical assistance programs designed to help patients continue their pregnancy. The attending physician is required to reiterate this information to the patient, including more detailed information about the alternatives to abortion. The doctor must also provide a list of providers of free ultrasounds and fetal tone services. If a doctor does not have admitting privileges to a local hospital, that information must be communicated to the patient. At least 4 hours before the abortion is performed, the doctor must perform an ultrasound, must display the image in view of the patient (although the patient may avert their eyes), play the fetal tone if present, and provide a simultaneous description of the image. Language may refer to the fetus as an "unborn child," a "child" or a "baby".

### North Dakota

With the reversal of Roe v. Wade, North Dakota has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### \*Ohio

With the reversal of Roe v. Wade, Ohio has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### \*Oklahoma

With the reversal of Roe v. Wade, Oklahoma has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

### Oregon

Oregon has passed post-Roe safe haven legislation that protects the right to abortion. Oregon does not require a waiting period, nor are there any state-prepared materials. By discretion of the clinics, patients may be given information necessary to understand the mechanics of their medical procedure with associated side effects and medical risks.





### \*Pennsylvania

Pennsylvania requires a waiting period of 24 hours, during which patients are given state prepared reading materials. The materials examine gestational characteristics, accompanied by pictures of the fetus, of every two weeks of gestation up to 40 weeks. Included also is any relevant information regarding the fetus' chance of survival outside the womb. Various abortion methods are considered, including their medically-associated risks and side effects, as well as the medically-associated risks of carrying the fetus to term. The materials also discuss the "possible detrimental psychological effects" to abortion. Offered to the patient, along with these materials, is a list of services that offer prenatal, neonatal and adoption care. An attending physician will reiterate these things to the patient verbally, and the doctor will also explore the medical assistance benefits that may be available for childcare, including paternal responsibility. The patient must sign a form indicating they received this information and were offered the chance to review the materials as part of the informed consent process. Language in state legislation may refer to the fetus as an "unborn child".

### \*Rhode Island

Rhode Island has passed the Reproductive Privacy Act, which protects the right to abortion. Rhode Island does not require a waiting period. The patient must be informed of the estimated gestational age of the fetus, the medical nature of the abortion and its appropriate side effects and risks, and any other information the doctor deems necessary for an informed consent. Patients are required to sign consent forms containing a reiteration of the verbal disclosures.

### \*South Carolina

South Carolina requires a waiting period of 24 hours, during which patients will be offered the opportunity to review the state-prepared reading materials and a list of agencies that offer information on alternatives to abortion. The materials examine the system of human genetics, the gestational characteristics of the fetus every two weeks of gestation up to 40 weeks, the risks of carrying a pregnancy to term, the methods of abortion, and their associated risks and side effects. (Third-trimester abortions, if performed for a medical emergency, require both the consent of the patient and, if married, their spouse.) This information will also be verbally reiterated to the patient by a doctor. Although the state does not mandate that ultrasounds are performed at every abortion, if one is performed, the patient must be offered the opportunity to view the image. In addition, if an ultrasound is performed, the abortion may not start sooner than 60 minutes after the completion of the ultrasound.

### South Dakota

With the reversal of Roe v. Wade, South Dakota has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.



#### r\*Tennessee

With the reversal of *Roe v. Wade*, Tennessee has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

#### \*Texas

With the reversal of *Roe v. Wade*, Texas has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

#### Utah

With the reversal of *Roe v. Wade*, Utah has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.

#### Vermont

Vermont does not have a waiting period or state prepared reading materials. Vermont does not require by law any special disclosures that are specific to abortions in order to obtain informed consent. The doctor may still provide information to the patient regarding the specific medical procedure and the risks and side effects one should expect. State legislature guarantees that the government may not pass laws that inhibit one's ability to choose to terminate a pregnancy.

#### \*Virginia

Virginia requires a 24-hour waiting period, during which patients will be given a small pamphlet about informed consent. This pamphlet will discuss the risks of continuing a pregnancy, the process of different types of abortions with their associated medical risks, and the accurate assertion that a legal abortion for an unwanted pregnancy does not pose a psychological hazard in most cases. The informed consent forms are required to contain information about the various abortion procedures and their proposed side effects and medical risks, an alternative to abortion, benefits to abortion, along with a discussion of various legal disclosures. An ultrasound is required 24 hours prior to the abortion. Patients will be asked beforehand if they would like to view the ultrasound, receive a printed copy, and hear the fetal tones. Alternatively, if the patient lives 100 miles away from a clinic, the ultrasound only has to be performed two hours before the abortion procedure takes place.

#### Washington

Washington requires no waiting period. Washington will not impose any mandatory prerequisite procedures or informed consent practices onto their patients outside the normal, medically-accurate consent to the abortion. Legislature asserts that the state shall not enact any law that prohibits a patient's ability to terminate their pregnancy, and if the state, in the future, is to provide resources about the alternatives to abortion, they also must provide equally substantial information on how to obtain abortion resources, as well.



### West Virginia

West Virginia requires a 24-hour waiting period, during which patients will be offered state-prepared reading materials. The introduction of the materials outlines the summary of the booklet, the state's various laws, as well as the availability of an index of adoption and pregnancy-related services. The booklet examines gestational characteristics of the fetus at various stages of development, including information about the survival of the fetus when applicable. Abortion methods and their associated medical risks and side effects are analyzed. The book transitions into discussing the possible psychological effects of abortion, exaggerating and misappropriating the negative psychological effects. The risks associated with childbirth are discussed, asserting the possibility of postpartum depression. The booklet concludes with information regarding the financial assistance available for prenatal and childbirth services. Attending physicians are required, as stated in West Virginia's legislature, to reiterate this information to the patient, including with their summary information about "danger to subsequent pregnancies and infertility" and agencies that offer alternatives to abortion. West Virginia states that it is the patient's decision, in consultation with their physician, if they wish to undergo an ultrasound. If an ultrasound is performed, the patient must be offered the opportunity to view the ultrasound. Language may refer to the fetus as an "unborn child," a "child," or a "baby".

### \*Wisconsin

Wisconsin requires a 24-hour waiting period, during which patients are given a set of reading materials. The reading materials examine the developmental characteristics of the fetus at various gestational ages with accompanying illustrations. Various abortion methods and their associated side effects are presented. The materials accurately assert that abortions with no complications should not increase the possibility of infertility, while it inaccurately asserts that the fetus feels pain at 20 weeks of gestational age. The materials discuss the mostly-negative emotional aspects of abortion. The risks of carrying the fetus to term, paternal responsibilities, and the possibility of adoption as an alternative to abortion are also provided. Various adoption and prenatal services, as well as perinatal hospice services, are also supplied in the reading materials. Attending physicians will reiterate this information to patients verbally. An ultrasound is required before the abortion. The doctor must display the image, explain the ultrasound's findings, and offer the patient the means to hear the fetal heartbeat. A patient may look away from the sonogram's image if they desire. A person is exempt from these regulations if the pregnancy is the result of sexual assault. Language may refer to the fetus at times as an "unborn child" and the pregnant patient as a "mother".

### Wyoming

With the reversal of Roe v. Wade, Wyoming has outlawed abortions performed within state lines. The informed consent laws are no longer applicable.



