

Updated: Tighter regulations proposed for state abortion clinics

The Maryland Department of Health and Mental Hygiene (DHMH) has published draft regulations that would more tightly regulate the state's surgical abortion clinics. The regulations would require clinics to follow regulations similar to the ones already governing other outpatient ambulatory surgical centers.

Abortion clinics would have to have emergency procedures in place for taking a woman to a hospital if necessary. They would also have to have emergency equipment in case a patient needs to be resuscitated. In addition, they would have to have programs in place to ensure their equipment is functioning properly.

Nancy Paltell, associate director for respect for life with the Maryland Catholic Conference, said she was "really pleased" with the draft regulations.

For the past seven years, the MCC, legislative lobbying arm of the state's Catholic bishops, has been working for stronger regulations.

During the past legislative session, Stephanie White - the mother of a woman who died while undergoing an abortion - testified with the MCC in favor of a bill that would have provided measures similar to the ones proposed in the draft regulations.

White's daughter died after anesthesia was improperly applied and she was not given supplemental oxygen. Dr. Romeo Ferrer, the doctor who performed the abortion, was stripped of his license following the incident.

"These regulations are going to go a tremendous way toward making sure that the health and safety of women is protected," Paltell said. "They will make sure everyone is properly trained and has the right credentials. These are the standard protocols and policies that make surgical facilities safe."

The general public has until Aug. 19 to comment about the proposed regulations. Paltell said she will be contacting the DHMH to suggest areas where the regulations could be made even stronger.

“One of the concerns we have is with the anesthesia section,” she said. “It only applies to general anesthesia. Stephanie White’s daughter died under moderate sedation – she wasn’t getting general anesthesia. No matter what kind is being administered, it ought to be administered by someone who’s qualified.”

According to a DHMH statement, the draft regulations were released “in response to concerns arising from a site in Elkton, Maryland, where surgical abortions were performed in an unsafe environment, endangering patient health.”

“We believe that these draft regulations reflect the right balance of preserving both safety and access,” the statement said.

According to the DHMH, a review of the board’s public orders from 1991 found five physicians disciplined for violating the standards of care governing surgical abortions.

“According to the disciplinary records,” the statement said, “women died or were seriously injured in each case. Women were harmed by improper administration or monitoring of general anesthesia under the care of three of the five physicians.”

In addition to those disciplinary actions, twice last year the board directed charging documents to three additional physicians “for performing abortions in a manner inconsistent with standards of practice at a site in Elkton.”

“Among other problems identified was lack of an appropriate transfer procedure for a patient needing emergency care,” the statement said. “The draft standards aim to address some of the deficiencies identified in these cases.”

Paltell said the proposed regulations can be supported both by those who consider themselves pro-choice and pro-life.

“We are so pleased they are using the regulations that apply to every other surgery,” she said. “We aren’t singling out abortion. We are giving the same protections to women who are having abortion as to women who are having knee surgery or exploratory outpatient surgery.”

To read the draft regulations, visit <https://tinyurl.com/3vaotd7>.