

Statement of Rachel Criswell, MD, MS to the Joint Standing Committee on Judiciary

May 1, 2023

LD 1619 and 1343 Ought to Pass

Senator Carney, Representative Moonen, and members of the joint standing committee on Judiciary, thank you for the opportunity to testify today.

My name is Dr. Rachel Criswell, and I am a full-spectrum family physician practicing in central and northern Maine. I hold a Medical Degree and Masters of Science in Biomedical Research from Columbia University, and I completed my residency here in Maine. Prior to becoming a physician, I worked as a humanitarian aid worker and researcher in maternal and child health, family planning, and abortion care around the globe.

My colleagues have discussed the rich evidence that supports the safety and clinical appropriateness of the proposed legislation. I would like to highlight the impact this legislation will make to pregnant people and clinicians.

In my practice, I deliver prenatal care, provide abortions, manage miscarriages, catch babies, and care for families as they grow. My work involves a lot of joy, and it also involves helping people navigate some of the most challenging moments of their lives. The current status of abortion care in Maine makes it difficult for me to care for my patients in the ways that they deserve.

I have been trained to provide abortions later in pregnancy, and yet I have had to refer a patient to New Hampshire at 24 weeks who sought an abortion for lethal fetal anomalies. Rather than calling a trusted colleague to refer a different patient who had miscalculated her pregnancy at 28 weeks, all I could offer her instead was a list of phone numbers for the clinics in the few states where she could receive care.

Consider what it feels like as a physician to send a patient into the unknown like this. Not only are these moments challenging, they are time sensitive, and added barriers such as travel, inter-state referrals, and hotel costs add further unnecessary delays. As a family doctor, I take pride in knowing my patients well and being a bridge for them to the medical community. This becomes nearly impossible when patients are forced to travel out of state for care.

LD1619 and 1343 offer a chance to re-imagine these scenarios: what if you could have your abortion at a clinic in your home town by a clinician whom your doctor knows? It does not take a lot of imagination to consider how much safer you might feel if you could have your care here in Maine. Please vote ought to pass to make care simpler, more compassionate, and safer for pregnant individuals who need it most.

Rachel Criswell  
Mount Vernon  
LD 1619

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