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LD 1619 Testimony

Zachary Norris, MPAS, PA-C

Senator Carney and Representative Moonen, Honorable Members of the Joint Standing Committee on Judiciary, my name is Zachary M Norris, MPAS, PA-C, and I am a resident of Winslow. I am here to testify in opposition to LD 1619.

I am a Physician Assistant, and as a healthcare provider, I have sworn to do no harm in my practice of medicine. Terminating a life by way of my medical skills, knowledge, and license is harm as I understand it.

To that end, a common defense of abortion is that the mother's life may be at risk, and harm will come to her without abortion. Terminating the life of an unborn child to protect ones own life or health is a very difficult and personal decision, and I envy no person that has had to tackle that choice. But LD 1619 is not introducing life-saving abortions; medical necessity is already included in Maine law under Title 22, §1598, which allows for abortions to protect the mother's life or health. This bill does not give added protection to the health of women.

When I treat a pregnant mother, I am treating two patients, for the unborn child is exposed to everything the mother is. They are both connected *and* separate. Each has their own DNA, and yet one is contained within the other. They share blood supply, yet may have different blood types. Many people defend abortion as being a right of the mother, but this defense does not take into account this separate being that is being formed within her. A fetus is not just a bundle of cells. As early as six weeks gestation, when the fetus is half the diameter of a quarter, the beating of heart tissue can be seen on ultrasound. By 12 weeks, at 2 ½ inches, the fingernails, and nose and toes are forming. By 24 weeks, the baby can hear, and suck her thumb, and even respond to the voice of mom and dad. At this point they are considered medically viable. This is not just a bundle of cells.

LD 1619 allows healthcare providers to deem an abortion necessary for any reason in their own medical judgment, regardless of viability of the unborn. In any circumstance other than the mother seeking to terminate the pregnancy, medical professionals would fight for the life of a 24 week unborn child; mom and baby would both be considered patients. Just because the baby is unborn, does not mean they are not alive, not feeling, not interacting with their world, not a human. I don't understand how a provider can justify actively terminating the life of one patient at the preference of another. This is harm.

LD 1619 must not be allowed to pass.

Respectfully,

Zachary M Norris