I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.

2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.

3. The "grandfathering" of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Sincerely,
Rose Abell
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations.

To view a full list of people who have signed this letter, click here:
https://progressnc.actionkit.com/constituents/24.8OWmb1/
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https://progressnc.actionkit.com/constituents/25.VCTphl/
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https://progressnc.actionkit.com/constituents/29.TgU72z/
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https://progressnc.actionkit.com/constituents/30.RMdkg49/
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https://progressnc.actionkit.com/constituents/31.i1fYDH/
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https://progressnc.actionkit.com/constituents/48.3s0ubw/
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I was very encouraged to see these regulations be sensible and not designed to destroy the medical infrastructure necessary for the full range of women's health support.

Shel Wilson Anderson
Durham, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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As a woman, a friend, sister and aunt - I WANT and NEED to protect my health and safety and that of the women I know and love. Safe and accessible abortion care is part of healthcare for women.

Woodsherry Anderson
Winston Salem, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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I will not lie to my friends and family for the government. And I will always support the right to make personal decisions...this is not and never will be the governments business...it comes across as an emotional rape, and I am convinced we now have perverts in government who have found a legal way to suppress and objectify women, yet again.

Deb Fine Bair
Sanford, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Chelsea Ruth Barnes
Raleigh, NC
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sara bausch
Durham, NC
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LAWRENCE BENNETT
BOCA RATON, FL
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Kathleen Bentley
Baltimore, MD
This is to submit my comments regarding the proposed rules recently announced early in December 2014.

I object to a number of the provisions and am requesting a review by the legislature.

There should be significant penalties for violations of the rules. I didn’t see any penalties in my reading.

I am also concerned that a number of people affiliated with abortion facilities, such as Planned Parenthood, and specific clinics were involved in adopting new rules. This would seem to favor the clinic operators and not the patients and general public.

10A NCAC 14E .0310, line 10 & 11 – A transfer agreement to a local hospital should be mandated. An attempt to set up such an agreement should not be in compliance.

10A NCAC 14E .0313, line 1-12 – There should be a minimum time in recovery to forestall any rush out the door before the patient is clearly not in danger and without pain.

10A NCAC 14E .0311 (b) – A stringent requirement should be in place to prevent a hasty conclusion

I against abortion in general and would like to see a stop to it. However, when carried out, it should always prioritize patient care, not clinic financials.

Will you please acknowledge receipt of this message. Thanks.

Buddy G Bernard
5123 Wadena Ct
Greensboro, NC 27407
Tel: 336-292-7630
Cell: 336-549-5771
Email: buddyb2@bellsouth.net
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Martha Biggins
Charlotte, NC
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Toria Chavon Boldware
Charlotte, NC
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Samuel V Brewer
Cary, NC
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LINDA BRINKLEY
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I'm a registered nurse. As a healthcare professional, I advocate for evidence-based practice. Please develop DHHS regulations based on the most current evidence about what best fosters patient safety. Please listen to authorities like ACOG. I support abortion access and patient safety. Please do the same.

Laura Elizabeth Britton
Carrboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. 

John Brown
Greensboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Making abortion more difficult to obtain does not prevent abortion, it only hurts and kills women. Focus on family planning efforts that prevent unplanned pregnancies instead of making an already safe medical procedure note cumbersome to obtain.

Myranda Broyles-Lewis
Apex, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <-- ak.wysiwyg=off -->

Mary Bubar
Greensboro, NC
Dear Ms. Pfeiffer:

Under Session Law 2013-366 s.4(c), Part IV. Amend Women’s Right to Know Act, the North Carolina Department of Health and Human Services was authorized to amend rules governing abortion clinics certified by the Department (under G.S. 14-45.1) as suitable for the performance of abortions. Specifically, the Department was authorized to apply any requirement for the licensure of ambulatory surgical centers to the standards applicable to abortion facilities. Public comment has been solicited on the proposed abortion facility regulations.

For more than a decade, Americans United for Life (AUL) has been recognized as a leading authority on comprehensive and medically appropriate regulation and oversight of abortion facilities. Our expertise includes drafting model legislation encompassing medically appropriate health and safety standards for abortion facilities, participating in administrative rule-making proceedings, and defending abortion facility regulations that are challenged in federal and state courts. I have thoroughly reviewed the proposed North Carolina regulations and specifically compared them to nationally recognized standards for ambulatory surgical centers, regulatory schemes in other states, and to abortion facility regulations that have been approved by both state administrative authorities and the courts. Based on that review, I offer the following comments on the need for and appropriateness of health and safety standards for abortion facilities and identify four major deficiencies in the proposed North Carolina rules.

Denise Burke
Vice President of Legal Affairs

Americans United for Life
P  202.683.6107
M 210.710.7234
F 202.683.6137
Web | Email | V-Card

AUL’s number for the Combined Federal Campaign (CFC) is 11416

This email may contain confidential attorney-client communications and/or attorney workproduct. It is intended only for the internal use of the named addressee(s) and staff at Americans United for Life (AUL). It may not be forwarded or distributed in any manner without the express permission of both the addressee(s) and AUL. Anyone improperly or inadvertently receiving a copy of this email or any portion thereof must delete it immediately.
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Daryl Burton
ringold, OK
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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I want to make sure every woman in North Carolina have access to the full range of reproductive health services she needs. Please continue to put health and safety first in this process.

Emily Callen
Raleigh, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Barbara Campbell
Charlotte, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Carol Costello Carlson
Summerfield, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Sara Elizabeth Castellano
Washington, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Manisha Cavendish
Huntersville, NC
Thank you for providing a public comment period for the proposed DHSS rules for certification of clinics for abortion. In the interest of providing safe, reasonable access to abortion for the people of North Carolina, it is important that sites that offer abortion be held to a reasonable standard of safety.

I strongly support the proposed rules which mandate that abortion clinics establish referral agreements to hospitals in the rare occasion that an immediate complication from a surgical abortion is noted in lieu of requiring hospital admitting privileges for the physician at the clinic. Such a requirement would have been unnecessary, given the safety of the procedure.

As noted in the November 2014 issue of Contraception, a peer reviewed medical journal, the rate of maternal mortality from surgical abortion is very low at 0.7/100,000 procedures (Mortality of induced abortion, other outpatient surgical procedures and common activities in the US by Raymond, Grossman, Weaver, Toti and Winikoff). Immediate surgical morbidity which would require more than fluid resuscitation and repeat procedure is likewise quite low. These risks, as suggested by Raymond et al, are on par with those taken by runners of marathons who have a similar death rate from running.

Raymond et al point out that studies in approximately the same years found mortality rates of 0.8-1.7 deaths per 100,000 plastic surgery procedures, 0-1.7 deaths per 100,000 dental procedures, which are in the similar range, or higher, than those for surgical abortion.

US history and data from countries which prohibit abortion show that women will seek abortion in some circumstances. By keeping abortion clinics safe and held to reasonable standards, we will prevent serious injury to young women who would seek out unsafe abortions if necessary.

Strong evidence obtained by multiple studies, but best illustrated by the CHOICE study in the St Louis area, demonstrate that no-cost contraception reduces unintended pregnancies and abortion rate at a population level. In addition, team birth rates fell. (Preventing unintended pregnancies by providing no-cost contraception. Peipert et al. Obstetrics and Gynecology, Dec 2012). This option may be one for the DHSS to consider as well.

--
Nancy Chescheir
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Nancy Cichowicz
Fletcher, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Jeffrey Jay Collins
Chapel Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Barbara Baumberger Crane
Chapel Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Rebecca Davidson
Lillington, NC
I am writing to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Regards,

Richard
Charlotte, NC
Sent from my iPhone
www.voicelessthemovie.com
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Steve Dennis  
Columbia, SC
I want to register my intense support for access to clinics for safe and legal abortions. We are not a free society if women's choices are taken away. Until birth control is perfect and totally accessible to all women, we still need the abortion alternative. It's very frightening to be in a position where you could be forced into bearing an unwanted child that you cannot afford and have no support for but it still happens every day. Older women could be in special danger as well as younger women. Don't send us back to the dark ages where we have to risk our lives to get an abortion!
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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glenn dicker
Chapel Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Gavin Dillard
Black Mountain, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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A politician has no place in telling me how to handle my health needs. I am totally capable of making my own decisions. Put Women's Health first and listen to the medical experts not the politicians.

Donna Louise Dupree
Balsam, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Michael Edwards
Willow Spring, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Michael Ellis Eisenberg
Raleigh, NC
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Regulations should only be made in consultation with women's health experts and abortion providers. 1 in 3 women will have an abortion by the time she is 45. This is not controversial; it is healthcare. Don't let these regulations become a political football. Please.

Sarah Jane Eldred
Durham, NC
I believe it is in the best interest of North Carolina residents to have abortion clinics inspected annually. North Carolina inspects tanning beds annually to see that the timers and beds are in proper working order. It is much more important to confirm that businesses that perform medical procedures are maintained in a safe and sanitary manner.

Sincerely,

Larry Elmore
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Elizabeth Martha Evans
Carrboro, NC
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nick evans
santan valley, AZ
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Chanda Michelle Farley
Canton, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Carol Fly
Austin, TX
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Please keep women and families healthy and safe! Listen to reproductive health providers and make sure ALL options are available!

Chere Force
Maitland, FL
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Elizabeth Freeze
Greensboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Joyce Hendley Gad
Raleigh, NC
Please note my concerns about and objections to the watered-down rules being considered for abortion clinics:

- Since effects of surgical procedures can take a long time to manifest themselves, the record retention requirements should be at least 20 years for those undergoing an abortion. For anyone under 21 having the procedure, records should be retained for at least 20 years from her 21st birthday.

- It is imperative that anyone being transferred to a hospital due to complications of an abortion be accompanied by medical personnel from the clinic - either a nurse or the physician, who can provide important information about what happened that requires the transfer for additional medical treatment. Otherwise, the ambulance and/or hospital are lacking critical information about the patient and the circumstances of the emergency.

When the Legislation was passed in 2013, the Legislature's intent was that abortion facilities would be held to medical standards applicable to any facility doing surgical procedures. The diminishment of the requirements places women in jeopardy and is unacceptable.

While abortion providers are concerned about additional restrictions and increased costs, it is the duty of DHHS to provide maximum protections to all patients. It is the expectation of the people of North Carolina that you amend the proposed rules to fulfill that duty.

Thank you,
Jayne Gallo
5717 Halyard Drive, Youngsville NC 27596
jaynegallo@aol.com

-
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The "grandfathering" of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

- See more at:
  http://prolifeaction.org/hotline/2015/northcarolina/#sthash.C3bM0BaQ.dpuf

Please do the right thing!

Sincerely,

Amanda Gandolf
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Jimmy William Gearhart
Charlotte, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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A. Mara Giddings
Carrboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Please protect women's health and safety by adopting the regulations recommended by medical experts and NOT politicians.

Elizabeth Giles
Hampstead, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Gloria Glasco
Raleigh, NC
To Whom It May Concern:

I am writing to object to express serious concerns about the currently proposed rules for abortion clinics. Chiefly, I object to:
1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Sincerely,
Deb
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Cynthia Greenlee
Durham, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Sally Melissa Greer
Rural Hall, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Jay Gross
Apex, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Kate Charlotte Haemmel
Asheville, NC
Hello,

I want to urge you to stick to the advice of medical professionals and continue to rely on evidence-based medicine in developing regulations that protect women's health and rights. It is women's health that is important and not political agendas.

Sincerely

Helene Hilger
6613 Williams Rd
Charlotte NC
28215

Sent from my iPad
As registered voters of North Carolina:

We are writing to express serious concerns about the currently proposed rules for abortion clinics which are unsafe for women and minors.

Chiefly, we object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Mr. & Mrs. Hillmann
Hi Drexdal,
Could you make sure these comments get to the right people for consideration. Thanks.

Chris Hoke, J.D.
N.C. Department of Health and Human Services
Division of Public Health
Director of Regulatory and Legal Affairs
5605 Six Forks Road
Raleigh, NC  27609
(Office) 919-707-5006
(Fax)     919-870-4829
chris.hoke@dhhs.nc.gov
http://publichealth.nc.gov/

Lipscomb, Lewis D

Mr. Hoke,
I am writing regarding the proposed rules for Certification of Clinics for Abortion.

I have several concerns that are pertinent to safe medical and surgical care of patients in the outpatient setting.

1. It is my understanding that patients typically receive sedative medications prior to and during the surgical abortion procedure. It would be clinically advisable for a board certified anesthesiologist or certified registered nurse anesthetist (CRNA) to administer and monitor the administration of these medications. If this is not a requirement, contrary to the proposal in 10A NCAC 14E.0310 (d) (1), someone on the premises should be certified in Advance Cardiac Life Support (ACLS), rather than Basic Life Support (BLS). The clinic should be equipped with medications and equipment to provide ACLS.

2. The abortion protocol should mandate at least one hour of observation following a surgical abortion on the premises to monitor the patient for anesthetic and surgical complications such as: excessive bleeding, excessive pain, syncope or near syncpe, etc. If the patient has received any controlled substance (narcotic, sedative, or anxiolytic) during the visit, she shall not leave the premises without a driver who is not intoxicated.

3. Elective termination of pregnancy is a major public health problem. It should be mandatory that certain information be shared with DHHS regarding each abortion procedure or abortion medication administration, so that there is a public record that is accessible for study. This should include: the patient’s age, race, marital status, the gestational age, the patient’s prior obstetrical history including the number of prior terminations, the
date of the abortion or medication administration, the type of procedure or medication administered, the county in which the encounter occurred, the patient's county of residence.

4. The clinic providing abortion procedures or abortion medication should be subject to a formal inspection by DHHS officials at least annually, and randomly at the discretion of DHHS officials.

5. Clinics providing abortion must have transfer arrangements with a local hospital, not simply a record of futile attempts to establish such a relationship.

6. Regarding 10A NCAC 14E.0305 (d) should include “or abortion medication”; (e) (3) should include “or abortion medication”, (6) should include “or abortion medication and dosage”

Thank you for your consideration. Please feel free to contact me should you have any questions.

Cordially,

Lewis D. Lipscomb, M.D., FACOG, FACS
Board Certified Obstetrician-Gynecologist

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E-mail correspondence to and from this address may be subject to the North Carolina Public Records Law and may be disclosed to third parties by an authorized state official.
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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hendey hostetter
Chapel Hill, NC
The updated abortion rules are not restrictive. We can't allow the state legislators to get involved with this debate and push an agenda that eliminates safe, legal abortions for women everywhere. Although safety should always be a top concern, easy access to abortions need to remain in tact for women who need them! Yes on the new safety rules.
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

martha J jarrell
Durham, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Shelton L Jenkins  
New Bern, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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kenneth Alan johns
new london, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Sharon Johnson
Raleigh, NC
From: Gordon Scott Jones <bounce@list.progressnc.org>
Sent: Monday, December 22, 2014 1:48 PM
To: Rulescoordinator, Dhsr
Subject: Put Women's Health First

Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Proper, safe birth control benefits the entire population in the long run. Further restriction is simply unconscionable.

Gordon Scott Jones
Raleigh, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Leah Joseph
Leicester, NC
Am I able to come and speak at the meeting?

On Tue, Dec 2, 2014 at 10:07 AM, Rulescoordinator, Dhsr <dhsr.rulescoordinator@dhhs.nc.gov> wrote:

Thank you for your comment on the rules.

I am appalled by the proposed rules for abortion clinics, particularly the following:

*But under the new rules, which are set to go into effect April 1, 2015, three significant rules governing post-operative care have been removed.*

*Women are no longer required to stay at the abortion clinic at least one hour after their abortions to make sure no complications arise, like uncontrolled bleeding. Women just have to be able to walk and they have to have a stable pulse, and whatever bleeding and pain they do experience just has to be "controlled."

*Second, the abortion doctor or a nurse is no longer required to accompany a woman in the ambulance to the emergency room following a botched abortion.*

*Third, abortion doctors are no longer required to do a detailed examination of the aborted fetus' remains, to make sure all "products of*
"conception" have been removed from the woman's uterus. Incomplete abortions can cause septic shock, leading to death in rare cases.

There are no penalties for violations.

This is horrific ignorance of the medical safety of these women, and even more disgusting to me is that a person who had significant input into these proposals is the director of Preferred Women’s Health Clinic on Latrobe Ave in Charlotte which has been closed twice for violations. Why would someone with such disregard for the safety of women be part of a committee making the rules?

I heartily object and want my concerns read and known to the committee.

Sincerely,

Vicky Kaseorg

All Things are possible with God
amazon.com/author/vickykaseorg
VickyKaseorg.BlogSpot.com
Twitter: vicky kaseorg@vickykaseorg
https://twitter.com/vickykaseorg
https://www.facebook.com/pages/Vicky-Kaseorg-Author/344952178879131
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

I was very upset to see on the committee people connected with the abortion industry. These rules do not help the women, or protect them. They protect the abortion clinic, and I believe to the detriment of women.

Sincerely,
Vicky Kaseorg
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

The Republican men feel that they have total control over women's health. THEY ARE WRONG !!!

George Kesselring
Muskogee, OK
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Jan C King
Asheville, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Our emphasis should be on widely available contraception, but a safe, affordable and accessible abortion must be available when contraception fails and the pregnancy is unwanted. Please ignore political arguments in favor of informed medical ones with women's and families' health and survival in mind. Thank you for your consideration.

Allison Lee Kitfield
Concord, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Dona Jean Koeberl
Durham, NC
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Old men should not be able to dictate what kinds of health services young women should have access to.

James & Leslea S Kunz
New Bern, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Janis Lella
Saint Petersburg, FL
Mr. Hoke,

I am writing regarding the proposed rules for Certification of Clinics for Abortion.

I have several concerns that are pertinent to safe medical and surgical care of patients in the outpatient setting.

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3. Elective termination of pregnancy is a major public health problem. It should be mandatory that certain information be shared with DHHS regarding each abortion procedure or abortion medication administration, so that there is a public record that is accessible for study. This should include: the patient’s age, race, marital status, the gestational age, the patient’s prior obstetrical history including the number of prior terminations, the date of the abortion or medication administration, the type of procedure or medication administered, the county in which the encounter occurred, the patient’s county of residence.

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5. Clinics providing abortion must have transfer arrangements with a local hospital, not simply a record of futile attempts to establish such a relationship.

6. Regarding 10A NCAC 14E.0305 (d) should include “or abortion medication”; (e) (3) should include “or abortion medication”, (6) should include “or abortion medication and dosage”

Thank you for your consideration. Please feel free to contact me should you have any questions.

Cordially,
Lewis D. Lipscomb, M.D., FACOG, FACS
Board Certified Obstetrician-Gynecologist
harassing or if you find it objectionable please contact Novant Health, Inc. at 1-800-350-0094 or forward the email to reports@novanthealth.org. Thank you.
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Susan Lovejoy  
Asheville, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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I am not an expert on reproductive health, but I am an expert in my own lived experience, and that experience tells me that it is crucial to North Carolina women and families to only have abortion clinic regulations that are medically necessary.

Maddie Majerus
Boone, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Christine Mandell
Seffner, FL
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Rebecca Mann
Jamestown, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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carol martucci
Willow Spring, NC
To Whom It May Concern,

I was recently made aware of the proposed changes regarding abortion clinic rules. As a young woman that lives in the great state of North Carolina, I would like to express my concern at the revisions that have been put forth.

It especially concerns me that rules regarding post-operative care are being removed, even though these rules have already been in place without restricting access or causing harm to women. I am disturbed that the abortion doctor won’t be required to examine the remains of the fetus in order to make sure that the abortion was complete. The fact that the abortion doctor or nurse won’t be required to accompany the patient in the ambulance, and that there won’t be a required wait time after the procedures does not sound like quality care to me.

I would like to respectfully request that on my behalf, and on the behalf of the other women residing in this state, that the rule revisions be revisited and that the rules already in place will not be removed.

Thank you,
Jessica Mauney
I am writing to express my objection to the current proposed rules for abortion clinics. My chief objections are as follows:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.

2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.

3. The "grandfathering" of abortion clinics that fail to meet building code requirements.

These are serious concerns that affect the health and safety of all abortion clinic clientele. These objections are explained in more detail in a letter perviously submitted by the Pro-Life Action League.

Donna Mauney
To Whom It May Concern,

As a physician who cares for premature infants, many born to mothers as a result of the association of preterm birth with a prior abortion, I ask that DHHS consider requiring that abortion clinics at a minimum meet standards required by other outpatient surgical centers. While the literature clearly demonstrating the association of abortion with a future preterm birth has been ignored or suppressed by many policy bodies, it is unconscionable that abortion clinics are held to a standard lower than that for clinics performing tympanostomy tube placement or breast biopsies. Many in the abortion industry insist that abortion is a benign procedure with no risks or complications. Sadly the reports from a number of high profile abortion clinic cases suggests that this in not the case, especially when these procedures are conducted in an environment that does not require regular inspections and adherence to basic outpatient surgical standards. If DHHS’s duty is to the health and welfare of women in North Carolina, there is no justification for allowing abortion clinics allowed to operate under a lower standard of care than other ambulatory surgical centers (ASC’s). We have ample evidence from clinics in Philadelphia and Texas that a practice environment that does not have reasonable requirements for clinic sanitation, staffing and preparation for emergency activities, enforced by regular inspections, the health and safety of women. Why should women be exposed to abortion clinic services that are held to a standard lower than that required for clinics conducting colonoscopies. There is only one answer and it is that policy makers have been willing to sacrifice the welfare of women in order to support the abortion industry.

The mission of the North Carolina DHHS is to protect "the health and safety of all North Carolinians and provides essential human services." Is the Secretary willing to openly state that it best for the health and safety of North Carolina women that North Carolina abortion clinics be held to lower standards for sanitation, cleanliness, staffing and emergency preparedness than clinics performing colonoscopies? Is Dr. Wos going to announce that it is acceptable that sedation be administered in abortion clinics by the physician performing the abortion? I suspect most women do not know that if anesthesia is being administered anywhere else for a surgical procedure, a separate provider who is certified is required to monitor the effects of sedation and anesthesia. Can colonoscopy clinics and outpatient surgery clinics now be released form this requirement for a separate monitor for anesthesia administration?

I am dumbfounded as a physician that there is no requirement in current DHHS regulations that abortion tissue be examined microscopically. There is clearly risk here that based on the judgment of a provider critical diagnoses might be missed, like incomplete abortions. We don't truly know the real incidence of complications from abortion since they are so variable reported. Abortion is a surgical procedure and women have a right to know the clinic they receive an abortion in has a written agreement with an emergency room to accept them if a complication arises. Why would Public Health officials not require such agreements be in place in order to safeguard patient safety?
We all as medical providers in a variety of facilities are subject to public reporting for an ever increasing number of critical metrics. How can an abortion clinic not be subject to similar public reporting of adverse and concerning outcomes? Further, when a clinic is found to be in violation of prescribed regulations, why are they not subject to the same penalties a private orthopedic clinic would be subject to? Why are multiple, sometimes tens or hundreds of violations required before action other than a 2-3 day interruption of services is instituted?

Abortion is legal. Understood. It needs to be safe. There are women being injured and killed by irresponsible, careless, financially motivated abortion service providers. It is the duty of DHHS to regulate responsibly this type of surgical clinic just as it would any other outpatient surgical clinic. Some are so entrenched in the politics of this issue that they fail to see there are critical, basic safety concerns here. Pennsylvania turned a blind eye to the butcher shop that was the Gosnell clinic. In Texas the Karpen Clinic was injuring women in an unsupervised fashion, was not equipped for emergency care and was killing babies born alive after botched abortion attempts in manners similar to those at the Gosnell clinic.

In the name of good medical practice, public health and a commitment to providing the women of North Carolina the best medical care possible, I ask that the Secretary reconsider the revision of Abortion Clinic rules and reinstate sensible rules that conform to sensible, safe and accepted standards of clinical practice. Thank you.

Sincerely,

Martin J. McCaffrey, MD, CAPT USN (Ret)
Professor of Pediatrics
Department of Pediatrics
Division of Neonatal-Perinatal Medicine
UNC School of Medicine
(919) 966-5063
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

John McGowan

2349 Sandfiddler Road

Corolla, NC 27927
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Sylvia Mcilwain
Charlotte, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations.

Meg McNally
Raleigh, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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kathleen mcwhorter
Palm Harbor, FL
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Esther Lenora Megill
Asheville, NC
To whom it may concern,

I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Please do not further endanger women and minors by allowing lax regulations for the abortion industry.

Thank you for your time,

Timothy
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Ed Mezynski
Pittsboro, NC
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

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2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

Thank you,
Sheri Miller

Sheri Miller
State Director
Concerned Women for America of North Carolina
P.O.Box 472903
Charlotte, NC 28247
Phone:704-562-6017
Website: nc.cwfa.org
Email: director@northcarolina.cwfa.org
Facebook:
Concerned Women for America of North Carolina
Twitter:
@CWA of NC

"You are the light of the world. A city that is set on a hill cannot be hidden"
Matthew 5:14
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <-- ak.wysiwyg=off -->

Kristen Monahan
Raleigh, NC
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

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2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.

3. The "grandfathering" of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Respectfully,

Nilda Monserrate

Sent from my iPad
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Phyllis Mueller
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Mary Mullis
Matthews, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations.  

Shannon Neckes
Miami, FL
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Shelly Nolin
Clayton, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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judith norman
Charlotte, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Kate Ormont
Winston Salem, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Carol W Pelosi
Wake Forest, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

The health of women is best protected when the doctor and the patient decide on treatment options together without interference from the government.

Rebecca Jo Roll M Phifer
Morganton, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Melissa Powers
Winston Salem, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Robert Ray
Cullowhee, NC
Dear DHSR Rules Coordinator,

I am writing as part of the public comment process concerning the proposed amendments and adoptions of rules in Chapter 10A NCAC 14E *Certifications of Clinics for Abortion*. I am **opposed** to any changes that make it harder and more expensive for a woman to receive an abortion. Abortion should be freely available and safe. The state should not create false barriers to women seeking abortion.

Sincerely,
Heather Rayburn
Asheville, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Joel Francis Reed
Mars Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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As a retired family nurse practitioner and clinical researcher, I firmly believe in evidence-based medical practice. Politics has NO place in the exam room, getting between a woman and her health care provider. I am outraged that this is even a topic in our General Assembly, as the professional health care consensus is overwhelming.

Patricia Rieser
Durham, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

kathie roskam
Charlotte, NC
I am writing to object and to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly those concerning minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering in” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

I am a pro-life North Carolinian, but my concerns are not solely for the dying children. I am also concerned for the women who undergo these procedures. They deserve protection under the law, and NOT laws that were twisted to fit the abortion industry's "bottom line," while ignoring BASIC medical facility safety standards.

Thank you for your time and consideration of this matter.

Sincerely,
Deborah Ruiz
353 Howard Blvd Apt 602
Newport, NC 28570
From: DEBORAH RUSCIOLELLI <billdeb@windstream.net>  
Sent: Friday, January 30, 2015 8:49 AM  
To: Rulescoordinator, Dhsr

I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The "grandfathering" of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

- See more at: http://prolifeaction.org/hotline/2015/northcarolina/#sthash.Osla7lRM.dpuf

Thank you,
Debbie Rusciolelli
Waxhaw, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Can't understand what motorcycle safety has to do with womens' rights, unless it is the right to ride a motorcycle! Sounds like off-topic provisions were tacked on, and that is never good.

Richard Ruth
Durango, CO
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

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Regards,
Karen Rutigliano

Sent from my iPhone
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Synonyms for the word trap include trick, ruse, deceive, snare. Targeted Restrictions on Abortion Providers or TRAP laws attempt to undermine family planning by overregulating providers with expensive medically unnecessary site restrictions or forcing abortion providers to obtain hospital admitting privileges when very few are granted. In 1973, legalized abortion became the most significant expression of sovereignty ever granted to a woman. It has been the goal of anti-women’s groups to return us to chattel every since. Although these laws promise to increase safety, the actions of their creators do not reflect the work of health advocacy. On any given morning in Raleigh, TRAP law advocates can be found verbally harassing patients and their partners entering reproductive clinics or providing falsified reproductive health information such as abortion causes breast cancer at a crisis pregnancy center. TRAP laws have been successful at closing clinics in other states; Texas has lost half of their reproductive clinics and for creating insurmountable hardships for girls and women, particularly in rural America. After consulting with a diverse group of medical experts the proposed regulations from DHHS this month appear to be working positively towards a woman’s reproductive health and not against it. Most of the people who spoke in favor of the DHHS ruling on Friday were board certified medical providers and community activists. The three speakers that argued DHHS did not go far enough restricting a reproductive clinics were not medical professionals but local anti-abortion activists; two of who were women. Undeniable, everyone loves one girl or woman out of the three in this country who will use abortion to map their destinies. TRAP laws and their proponents want to curtail that freedom. But in a society that waxes poetic about legitimate rape and merited wage discrimination, a woman who holds another woman down is bound to stay down with her.

Leigh Sanders
Raleigh, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Georgia Schwab
Los Angeles, CA
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Heather A Settle
Durham, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Angela Omega Sherman
Winston Salem, NC
I am writing to let you know my serious concerns about the current proposed rules for abortion clinics. As a teen, I had an abortion without my parents’ knowledge or consent. Due to the abortion, I developed Pelvic Inflammatory disease to the extent that I was hospitalized. Because my parents had no idea that I had had an abortion, and I was reluctant to tell the doctors, I was not diagnosed right away. I was 17 at the time, a minor. Luckily, that episode did not leave me infertile, as I now have 4 wonderful children. Now, the mental scars of the abortion far outweigh the physical, but that doesn’t seem to matter to the pro-abortion lobby that makes millions each year on the fears of young girls, under the guise of “reproductive health”. It terrifies me that one of my daughter’s would go through the same sort of trauma and life threatening side effects that I suffered without me as a parent even knowing. I know that the current proposed rules will not give back the rights of parents to know when their children are having major surgery, but wanted to at least weigh in on the rules that are being proposed that I strongly oppose.

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

Please take a stand for women and teenage girls by leaving these protections in place.

Sincerely,

Randee Sinopoli

Randee Sinopoli <rscarolinaflooring@carolina.rr.com>
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Chris Scott Sistare
Charlotte, NC
I strongly support the passage of the proposed amendments and adoptions of rules in Chapter 10A NCAC 14E 
Certifications of Clinics for Abortion which are in response to enactment of Session Law 2013-366 s.4(c), Part 
IV. Amend Women's Right to Know Act, which became effective on July 29, 2013.

Safe and legal abortions should be available to every woman in North Carolina. Women here in the western 
part of the state are bearing the brunt of the burden when they should not have to contend with such onerous 
restrictions. I grew up prior to passage of Roe v. Wade and know how disastrous illegal abortions can be and 
believe the State of North Carolina needs to keep us moving forward not backward.

Thank you for considering my comments.

Linda Smathers
14 Trevors Trail
Asheville, NC  28806

“Be a lamp, or a lifeboat, or a ladder.” Rumi
To whom it may concern,

I am writing to object to express serious concerns about the currently proposed rules for abortion clinics. Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements. These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League. - See more at: http://prolifeaction.org/hotline/2015/northcarolina/#.dpuf

These rules should always be in the best interest and health of women. And although you are attempting to pass rules that are not, God is the ultimate truth and I pray you would turn to him for answers and wisdom.

Sincerely,

Eliana Smith
I am writing to express serious concerns about the currently proposed rules for abortion clinics. Specifically I object to

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.
3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League with whom I am in agreement.

Elsie Smoluk
Monroe, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Jamie Sohn
Carrboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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FERNANDO SOLER
New Bern, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Your veiled attempts to prevent abortion care are not valid.

Marcia M Soward
Cary, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

Paula Jean Stober
Greensboro, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Matthew Stockstill
Whitsett, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Frank Lee Stroupe
matthews, NC
Dear Ms. Pfeiffer,

Please find attached comments from Physicians for Reproductive Health regarding the proposed Certifications of Clinics for Abortion Rules (10A NCAC 14E .0308, 10A NCAC 14E .0101, .0104, .0109, .0111, .0201, .0202, .0206, .0207, .0302-.0307, .0309-.0311, .0313, and .0315).

Thank you,
Maureen Stutzman

Physicians for Reproductive Health
55 West 39th Street, Suite 1001
New York, NY 10018
646-649-9920
646-366-1897 (Fax)

Web: www.prh.org
Follow us on Twitter: twitter.com/reprodocs
Like us on Facebook: facebook.com/reprodocs

Charity Navigator’s highest-rated reproductive rights organization

The contents of this message, and any attachments, are intended only for the use of the individual(s) or entity(ies) to which they are addressed and may contain information that is confidential. If you have received this message in error, please delete it and any attachments and let the original sender know of the error immediately. Thanks very much.
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Steve Sugarman
Malibu, CA
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Elisa Summerfield-Kiehna
Charlotte, NC
My name is Jennifer Svenstrup, and I live in Arden, NC. I want to voice my support for the comments made by Representative Susan Fisher in a recent press conference regarding proposed abortion legislation.

I feel strongly that women need access to safe abortion, and we don't need legislation that adds additional restrictions. Right now in Western North Carolina a woman must drive to Charlotte, Raleigh, etc. and that is not acceptable. It is difficult to get time off work and have additional travel expenses, etc.

I support that clinics be "grandfathered" in regarding building codes, etc. Finally I just want to express my support for abortion clinics to operate and that further legislative restrictions are unacceptable and just chip away at our rights to access and make it difficult for clinics to operate.

Thank you,

Jennifer Svenstrup
10 Flycatcher Way Unit 202
Arden, NC 28704
828-712-5171
mommasven@gmail.com
From: Diana Szabo [mailto:diaronsza@gmail.com]
Sent: Monday, December 08, 2014 1:52 PM
To: DHSR Webmaster
Subject: ABORTION

I am appalled that the government is even considering re-opening abortion clinics. How can anyone believe that it is not murder of a baby when they insert scissors into the baby's neck and the brains suctioned out. If this is not torture and murder, what would you call it?

Furthermore, Roe vs Wade is based on a lie. Lawyers lied to the Court claiming the Roe of Roe vs Wade was ganged raped and needed an abortion.
This lie resulted in the passage of the abortion law.

Finally, an abortionist doctor, Kermit Gosnell, was charged with First Degree Murder and life in prison. That means that he broke the law, yet that law, that lie still remains on the books and the murder of innocent babies goes on under what is now an invalid law.
Nadine,

I am against the new DHHS rules recently proposed for Abortion Clinics in NC. The committee of six people who helped to revise the rules from the originally proposal, are stakeholders, in that they are all involved in running clinics or have pro-abortion tendencies and leanings. My hope is that enough people complain or object to the proposed rules to have it go to the state congress for revisions that get us back to regulations befiting an outpatient surgical center, of which the 117 licensed centers have more detailed regulations than the state’s 15 abortion clinics.

May God Bless you this day,
David Taylor
Parish Business Manager
St. Francis of Assisi Catholic Church
862 Yadkinville Rd
Mocksville, NC 27028
336-751-2973 ext. 3
336-406-1089 mobile
336-751-9929 fax
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations. <!-- ak.wysiwyg=off -->

James Michael Thomas  
Chapel Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Janet Elois Tice  
Chapel Hill, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Please support women's access to reproductive health and safety. The access to medical care on all levels improves the dignity and self-worth of women seeking to care for themselves.

Kristen Trolenberg
Raleigh, NC
To Whom It May Concern:

I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

Chiefly, I object to:

1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.

2. The removal of the rule that medical or nursing staff must accompany a patient transferred from an abortion clinic by ambulance.

3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Sincerely,
Tarah Tugman
Lenoir, NC

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Sent from Mail2World Mobile
I am writing to object to express serious concerns about the currently proposed rules for abortion clinics.

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1. The drastic reduction in the retention of medical records by abortion clinics, particularly as concerns minors.
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3. The “grandfathering” of abortion clinics that fail to meet building code requirements.

These objections are explained in more detail in a letter previously submitted by the Pro-Life Action League.

Sincerely,

Jackie Tyner

Raleigh, NC

Sent from my iPhone
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Kristi Wagner
Winston Salem, NC
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Virginia Wallace
Durham, NC
To whom it may concern,

I am just now 40 years old and had to undergo my first abortion two weeks ago. I just moved here to NC in June of this year. I do not have the financial capability to support a child, I am disabled at the moment, and I do not, and have never wanted children. Nor do I want to experience childbirth.

I am very pleased at the quality of care that I was able to receive here in this State. It was excellent. I do not take a decision like the one I had to make lightly, but my experience at the clinic I went to in Raleigh was very very good. I felt safe, well taken care of and I am going for my three week follow up in February. I certainly hope that other women will continue to be able to receive the quality of care that I just did. Unexpected pregnancy can be a very scary experience. A woman's choice of Raleigh made me aware of all my options and took very good care of me. My boyfriend was very worried about my safety and I was glad to be able to reassure him of the safety of the procedure being greater than that of actual childbirth. I think it really helped him to relax although he was very conflicted and wanted the child even though I didn't. He was also a drug addict and I don't believe he was thinking clearly at the time. He has since told me that he is glad that I was strong and that he thinks that I made the right decision.

I urge the Department not to be swayed by those intent on imposing medically unnecessary restrictions and reducing access to safe and legal abortion in North Carolina.”

Please keep the rules free from medically inappropriate political interference. They maintain that current abortion practices are safe—less than one percent of patients experience complications, making the procedure safer than childbirth—and common—one in three American women will have an abortion before the age of 45.

“My patients’ safety is my top priority,” said Dr. Gretchen Stuart, a board-certified OB/GYN and the director of Planned Parenthood of Central North Carolina. “I’m proud of the excellent care I provide them.”

North Carolina is one of several states across the country that have enacted TRAP laws—targeted at regulating abortion providers by placing undue burdens on both providers and on women seeking abortion services—in the past few years. Such laws require clinics to meet the standard of ambulatory care centers which perform complicated surgical procedures, or require patients to wait excessive lengths of time before having an abortion.

“Medical experts see these approaches for what they are, attempts to restrict access to abortion,” Stuart said. “They do nothing to advance women’s health. Instead, such targeted regulation increases costs and delays for my patients and for the women of North Carolina.”

Sent from my iPhone
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I urge the Department not to be swayed by those intent on imposing medically unnecessary restrictions and reducing access to safe and legal abortion in North Carolina.”

Please keep the rules free from medically inappropriate political interference. They maintain that current abortion practices are safe—less than one percent of patients experience complications, making the procedure safer than childbirth—and common—one in three American women will have an abortion before the age of 45.

I am against the enacted TRAP laws.

Sincerely,
Amy Walz
521 S 3rd St.
Smithfield, NC 27577
917-721-3164
Dear DHSR Rules Coordinator Nadine Pfeiffer,

I want to protect women’s health and safety, and abortion care already is incredibly safe. The draft regulations proposed by the Department of Health and Human Services were written with extensive input from doctors, health care professionals and reproductive health experts, and they rely on evidence-based medicine. I urge the Department of Health and Human Services to continue to listen to medical experts and support sensible regulations that put women’s health first. The reproductive health centers affected by these draft regulations serve thousands of NC women and families and offer a wide range of essential reproductive health services, including family planning, STD testing and treatment, life-saving cancer screenings and annual well-woman exams. The Department of Health and Human Services must put women’s health and sound medical practices first when considering any changes to the draft regulations.  

Duane Watson  
Rhinebeck, NY
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Our mothers, sisters, and other female relatives and friends deserve the best we can offer.

Lawrence D. Wiedemann
New Orleans, LA
Dear DHSR Rules Coordinator Nadine Pfeiffer,

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Bridget Leanne Welborn  
Raleigh, NC
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Politicians are not Doctors.

Alice Wieting
Burlington, NC
Dear DHSR Coordinator and Representative Earle,

I am appalled by the poor decision of rule changes for NC abortion facilities. It is my understanding that several rules have been removed: the one hour recovery period, fetal remains examination, and no medical personnel with a hospital transport. I have had one emergency D&E and one scheduled for retained miscarriages and my OB/GYN would never have approved such reckless measures in regards to a woman’s safety. There are true risks to this procedure, acknowledged by the American College of Obstetrics and Gynecology, and those done in a hospital setting are more closely supervised. So a woman who cannot afford hospital care is not allowed the same safety requirements?

Upon further research, I am not surprised to find out that sitting on the committee that made these reckless decisions is the owner of a ‘chain’ of abortion facilities, one of which has been shut down repeatedly by DHHS for unclean conditions and violations of safety measures! Why is such an individual deemed qualified to make such important health and safety decisions? Why is such bias allowed in the regulations affecting the protection of the women of North Carolina? And how convenient for him, and others, that these new rules also list no penalties for violations! This self-regulation by such an individual is beyond belief.

I object and would like my concerns made known to the committee.

Sincerely,

Jeannette Wilson
I tried to read the documents on the NC Division of Health Service Regulation, but found the whole site very confusing.

I am writing to express my support for keeping abortion safe and legal in North Carolina. I support reasonable regulations that protect women's safety, but am opposed to any regulation that serves only to create obstacles to women getting abortions.

Sincerely,

Susan Zuckerman
Asheville, NC