

# Why We Need SB 1564: The Patient Experience



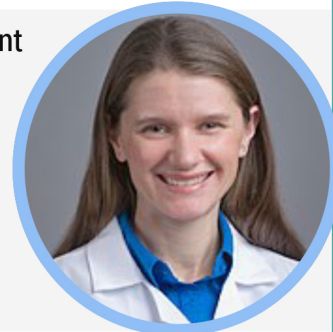
Before the passage of SB 1564, many patients were harmed when their health care providers denied them services and relevant information about their medical circumstances and treatment options.



In 2015, Dr. AuTumn Davidson was called in to the University of Illinois Hospital in the middle of the night to perform an emergency abortion for a patient who was 19 years old and about 19 weeks pregnant. The patient was bleeding heavily due to a potentially life threatening complication called sub-chorionic hemorrhage. She had sought care at two religiously affiliated hospitals, both of which sent her away without counseling her about the option of ending her pregnancy, despite the fact that the patient was bleeding so heavily that one hospital gave her a blood transfusion. At the second hospital, someone whispered that they were not supposed to talk about it, but that if she wanted an abortion, she could go elsewhere. By the time she was admitted at the University of Illinois, her hemoglobin count was half of what it should have been. Her life and health were in jeopardy because providers had denied her the facts she needed.

A reproductive endocrinologist (specializing in infertility treatment) has seen multiple patients treated by practitioners who practice religiously based fertility care that opposes the use of *in vitro* fertilization (“IVF”). These patients were subject to procedures that had little to no chance of resulting in pregnancy when IVF would very likely have achieved the patients’ goal of getting pregnant. In each of these cases, the patients were given treatments that would not be considered standard of care for someone in their circumstances, and were never told that there were treatment options available that would have had a much greater chance of success. In one such case, by the time the patient learned the information she had been denied by the religious practice, her chances of conceiving with her own eggs had been reduced to almost nothing.

Dr. Sabrina Holmquist was scheduled to perform a pregnancy termination for a patient whose fetus suffered from a lethal anomaly. The condition had been diagnosed at a religious hospital, and the patient had been sent to the University of Chicago Medical Center, because the religious hospital would not treat her. However, because a nurse at the referring facility refused, on religious grounds, to transfer the patient’s medical records, Dr. Holmquist was unable to provide the patient the care she sought when she arrived at the University of Chicago Medical Center.



The legislature passed SB 1564 to protect patients from the harm caused by the Health Care Right of Conscience Act. For more information about the experiences of patients before it was enacted, visit [www.aclu-il.org/putpatientsfirst](http://www.aclu-il.org/putpatientsfirst).