

RESPONSE OF CAROL TOBIAS,  
PRESIDENT, NATIONAL RIGHT TO LIFE COMMITTEE

August 4, 2014

QUESTION FROM SENATOR GRASSLEY: *Relating also to the conscience issue, some groups that advocate for abortion have asserted that federal law already requires that hospitals, including private religious hospitals, must perform abortions in circumstances that someone considers to be "emergencies," however that term might be defined under the laws of a given state or under federal regulatory guidance, now or in the future. The federal law that they cite as support for this assertion is the Emergency Medical Treatment and Active Labor Act (EMTALA), Section 1867 of the Social Security Act. Do you agree with this characterization of current federal law?*

We are aware that some pro-abortion groups have adopted this tortured misconstruction of federal law. The law in question, EMTALA [42 U.S.C. 1395dd] requires a hospital to treat a patient, regardless of ability to pay, if she shows up at an emergency room with an “emergency medical condition.” This law explicitly defines “emergency medical condition” to include a condition “placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy,” and it requires the hospital to stabilize the condition before transferring any such patient. The notion that a law that explicitly seeks to protect the “unborn child” from medical jeopardy and that requires hospital personnel to stabilize the conditions of both patients (mother and child), actually requires medical personnel to *kill* that unborn child, is absurd on its face.

Certainly, EMTALA does obligate hospitals to provide emergency treatment for women who are injured while undergoing abortions or attempted abortions, but it does not require health-care providers to violate their consciences by killing one of their patients. The adoption of this interpretation of EMTALA by groups such as the ACLU merely provides another illustration of how far these groups are prepared to go in their attempts to coerce medical personnel into collaborating in the killing of unborn children. S. 1696 would provide these pro-abortion ideologues a much more powerful legal weapon to use for their coercive purposes.