



Subject:
Date:

Abortion law reform submission requesting Amendments
Tuesday, 4 September 2018 11:12:22 AM

Dear members of the Abortion law reform committee,

I commend the committee on the 'Abortion law reform' bill - a welcome effort to decriminalise the QLD abortions law.

I have the following suggested amendments

that terminations be classified as social or on demand and as terminations which have a medical indication

(SOCIAL TERMINATIONS)

- **medical practitioner may perform a lawful termination on request or on demand by a pregnant woman:**
 - *during the first 14 weeks of pregnancy with provisions made for the woman to access pre and post abortion counselling services.*

(MEDICAL TERMINATIONS)

- **medical practitioner may perform a lawful termination after 14 weeks of pregnancy up to 22 weeks of pregnancy based on a maternal or fetal condition as requested or referred by another medical practitioner:**
 - *if the medical practitioner considers that the termination should be performed, and has consulted with another medical practitioner who also agrees that the termination should be performed (the matters which a medical practitioner must consider include all relevant medical circumstances, the fetal condition diagnosed, the woman's current and future physical, psychological and social circumstances, and the professional standards and guidelines that apply to the medical practitioner in relation to the performance of the termination.*
 - in an emergency circumstance (eg to save the woman's life or the life of another unborn child)
- **A Specialist medical practitioner (Obstetrician Gynaecologist) may perform a lawful termination after 22 weeks of pregnancy based on a maternal or fetal condition as requested or referred by another specialist medical practitioner.**
 - *if the specialist considers that the termination should be performed, and has consulted with another specialist who also agrees that the termination should be performed (the matters which a specialist must consider include all relevant medical circumstances, the fetal condition diagnosed, the woman's current and future physical, psychological and social circumstances, and the professional standards and guidelines that apply to the specialty in relation to the performance of the termination). In most situations terminations after 22 weeks would require the involvement of a tertiary fetal medicine unit for fetocide as*

determined by the specialist. Pre and post termination counselling services should be mandated with options of perinatal palliative care services being offered for lethal/life limiting fetal conditions.

As a maternal fetal medicine specialist I believe there needs to be a thorough process for women undertaking termination after 22 weeks with counselling by a trained person; review by at least two specialist doctors and option of peri-natal palliative care offered for life limiting conditions. The need for fetocide for terminations after 22 weeks invariably involves a fetal medicine specialist at a tertiary centre (this ensures that we do not end up with live babies born and the trauma that causes both parents and staff).

Joseph

Dr Joseph Thomas T MBBS, MD, DipNB, FRANZCOG, DDU, C MFM

