

**JILL STANEK, R.N.**

Hearing of the House Judiciary Committee Regarding H.R. 962,  
“Born-Alive Abortion Survivors Protection Act”

September 10, 2019, 1:00 p.m.  
HVC-215

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Hon. Steve Scalise, Republican Whip  
Hon. Ann Wagner, Sponsor of H.R. 962  
Hon. Chris Smith, Pro-Life Caucus Chairman  
Honorable Members  
United States House of Representatives  
Minority Hearing on H.R. 962, Born-Alive Abortion Survivors Protection Act  
House Visitor Center, 215  
Washington, DC 20515

Republican Whip Scalise, Congresswoman Wagner, Congressman Smith, and Members of Congress:

When I heard Virginia Governor Ralph Northam, a pediatric neurologist, describe during an interview the process by which doctors determine to shelve unwanted newborns to die, it hit painfully home to me.

He said, quoting, “If a mother is in labor, I can tell you exactly what would happen. The infant would be delivered. The infant would be kept comfortable. The infant would be resuscitated if that’s what the mother and the family desired.”

Governor Northam was right. That *is* exactly what happens. I know because I cared for a dying baby who was on the other side of that decision.

My experience was 20 years ago, but as Governor Northam made clear, it could have happened yesterday. I was a Registered Nurse at Christ Hospital in Illinois, when I learned it committed abortions into the second and third trimesters. The procedure, called induced labor abortion, sometimes resulted in babies being aborted alive.

In the event a baby was aborted alive, he or she received no medical assessments or care but was only given what my hospital called “comfort care”- made comfortable, as Governor Northam indicated.

One night, a nursing co-worker was transporting a baby who had been aborted because he had Down syndrome to our Soiled Utility Room to die – because that’s where survivors were taken.

I could not bear the thought of this suffering child dying alone, so I rocked him for the 45 minutes that he lived. He was 21 to 22 weeks old, weighed about 1/2 pound, and was about the size of my hand. He was too weak to move very much, expending all his energy attempting to breathe. Toward the end he was so quiet I couldn’t tell if he was still alive unless I held him up to the light to see if his heart was still beating through his chest wall.

After he was pronounced dead, I folded his little arms across his chest, wrapped him in a tiny shroud, and carried him to the hospital morgue where we took all our dead patients.

Christ Hospital readily admitted babies there survived abortions. A spokesman told the Chicago Sun-Times (article submitted with testimony) “between 10 percent and 20 percent” of aborted babies “survive for short periods.”

From what I observed, it was not uncommon for a live aborted baby to linger for an hour or two or even longer. One abortion survivor I was aware of lived for almost eight hours.

Of 16 babies Christ Hospital aborted during the year 2000, four that I knew of were aborted alive. Each of those babies – two boys and two girls – lived between 1-1/2 and 3 hours. One baby was 28 weeks’ gestation – 7 months old – and weighed two pounds, seven ounces.

This is the 11<sup>th</sup> time I have been asked to testify regarding babies I knew about who were aborted alive and left to die at Christ Hospital. I’ve testified not only on the federal level but also in legislative committees in Illinois, Colorado, Michigan, and Wisconsin. Christ Hospital has never publicly refuted the incidents I describe in my testimony. It can’t.

A Support Associate told me about accidentally throwing a live aborted baby in the garbage who had been left on the counter of the Soiled Utility Room wrapped in a disposable towel. When she realized what she had done, she started going through the trash to find the baby, and the baby fell out of the towel and on to the floor.

A nurse coworker relayed an incident to me she was involved in where the baby was supposed to have Spina bifida but was born with an intact spine. The nurse told me that what actually happened was that there was an incompletely formed twin who appeared as a mass on his brother’s back during an ultrasound. She said the father came into the Soiled Utility Room to see his son, took one look and saw that he had been involved in aborting his completely healthy baby, and turned and left the room without saying a word.

About an abortion she was involved with, another nurse coworker who told me, “I can’t stop thinking about it.” She had a patient who was just over 23 weeks pregnant, and the reason my coworker couldn’t stop thinking about it is because she was pregnant about the same number of weeks as well.

Her patient was not going to be able to complete her pregnancy to term. The baby was healthy and had up to a 39% chance of survival, according to national statistics. But the patient chose to abort. The baby was born alive. If the mother had wanted everything done for her baby, there would have been a neonatologist, pediatric resident, neonatal nurse, and respiratory therapist present for the delivery, and the baby would have been taken to our Neonatal Intensive Care Unit for specialized care. Instead, the only personnel present for this delivery were an obstetrical resident and my coworker. After delivery the baby, who showed early signs of thriving, was merely wrapped in a blanket and kept in the Labor & Delivery Department until she died 2-1/2 hours later.

Another nurse who worked at Christ Hospital, Allison Baker, testified with me in 2000 before the U.S. House Judiciary Subcommittee on the Constitution.

Allison described walking into the Soiled Utility Room on two separate occasions to find live aborted babies left naked on a scale and the metal counter. She told about the patient that she herself had who didn't know that her baby might be aborted alive and who did not then want to hold him. After he was taken to the Soiled Utility Room she kept asking, "Is he dead yet? Is he dead yet?"

Yet another nurse coworker told me about her aborting patient who didn't realize her baby might be aborted alive. The mother was not only shocked when her little boy was aborted alive, she was also shocked that he didn't appear to have the external physical deformities she had been told he was going to have. The mother screamed for someone to help her baby, and my colleague rushed to call a neonatologist over from the unit.

But after the neonatologist examined the baby, he said that there was nothing he could do because the little guy had been born too early. The mother was so traumatized that my friend had to give her a tranquilizer. The baby had to be held by his grandmother for the half hour that he lived.

Another night, while an abortion was taking place in one room, I needed help with my own full-term delivery a few doors down the hall. I asked for someone to get the nursing assistants for me, but the nurse taking care of the aborting mother and aborted baby told me they were busy. When I asked where they were, she said, "They're wrapping my baby to take to the morgue." "My baby," she said.

I thought about how insane it was that there was no one to help me with my healthy delivery only because they were busy wrapping another baby they had caused to die. Later, at some point during the ensuing hustle and bustle of my patient's delivery of a chubby, pink baby I noticed out of the corner of my eye, as I was passing through the hall to get something, the nursing assistants carrying the small, formerly sickly, now dead baby down the hall to the morgue.

I have been further shocked at the depths people will go to protect abortion. In December 2000 Christ Hospital unveiled its "Comfort Room." So no longer did nurses take live aborted babies to our Soiled Utility Room to die, they took them to the "Comfort Room."

This was a small, nicely decorated room complete with a First Foto machine in case parents wanted pictures of their aborted babies, baptismal supplies if parents wanted their aborted babies baptized, and a foot printer and baby bracelets if parents wanted keepsakes of their aborted babies. There was also a wooden rocker to rock these babies to death. I am submitting photos of the Comfort Room with my testimony.

That's why the word "comfortable," which Governor Northam used, was particularly grating. How far will doctors go to comfort themselves for letting abortion survivors die? Pretty far.

Clearly, little abortion survivors desperately need Congress to pass the Born Alive Abortion Survivors Protection Act, to provide them with legal medical protections and not leave open the decision whether they live or die.

Sincerely,  
Jill Stanek, R.N.