

the access to information about abortion procedures and alternatives has been improved and, two, the woman must wait 24 hours after receiving the information. The amendment also takes new steps to ensure that women have access to information. First, this amendment directs the Department of Health to establish a toll-free telephone number which may be used to obtain oral information or to request printed material. As LB 110 currently stands, the toll-free number is optional. The second new feature is a requirement that the Department of Health and the Department of Social Services conduct a public information program to inform the public about the toll-free number telephone and the information available from the Department of Health. The public information program will help individuals to get the information they need when they want it. This is probably the most important concept that has been offered if the objective of the bill's proponent is to reduce abortions through access to information. As I stated earlier, the amendment requires that information must be offered 24 hours prior to the abortion. That information must be offered by the physician who is to perform the abortion or an agent, the referring physician or an agent, the Department of Health or personnel at a licensed health care facility. The information required 24 hours to the abortion may be given over the phone without a physical examination, just like the E & R amendment, and must include the medical risks associated with abortion procedures commonly used, the probable gestational age of the fetus, the medical risks associated with completing the pregnancy and giving birth, and that the woman has the right to receive the information over the phone or printed materials from the Department of Health and that those materials include information on the gestational development, medical assistance benefits and agencies which offer alternatives to abortions. The information from the Department of Health shall be published within 60 days after the effective date of this act and include geographically indexed materials on public and private agencies and services which may be available and locations where printed materials may be available; information on the probable anatomical, physiological and neurological characteristics of the fetus at two-week gestational increments; objective information describing the methods of abortion procedures commonly employed and the medical risks commonly associated with abortion and, finally, information about the medical risk commonly associated with completing a pregnancy and giving birth. The materials will be available to the woman at no cost and at the cost of printing and postage to anyone else. The