

the ideas are the same. We've...I think we've opened it up so that the information can get to more women and I think that's the most important thing. I strongly support this amendment and I hope you all take time to look at it and support it too. With that, I'll yield the rest of my time to Senator Rasmussen.

SPEAKER BAACK: Senator Rasmussen.

SENATOR RASMUSSEN: Mr. Speaker, thank you, Senator Day. Appreciate having a little time here. We heard, the last time we were having this debate we did some soul searching and had shared some thoughts and at the end Senator Chambers said now let's return to reality and there are two aspects of reality I want to mention here. One is, in reality, we have informed consent law on the books now. And, two, in reality, no woman skips down to an abortion clinic and gets an abortion within 24 hours. We have an imposed 24-hour waiting period by the sheer fact that you cannot get into the clinics that quickly. The second aspect of reality is to express with you a severe frustration. In standing over the mike and saying I oppose Senator Lindsay and having Senator Lindsay get up and said I oppose what Senator Rasmussen says, when in fact when we get off the mike and try and figure out what is good policy for an issue we both care about we sound like we're both playing the same tape and I...I'd like us to focus more and more on that and we are trying to figure out how to do that in a way that gives Senator Lindsay the assurance that it will be constitutionally correct and, at the same time, take some of the issues that are good and some of the issues that are not so good and come up with a good policy here. As Senator Day said, this is not a total rewrite of the bill. Almost all of the language comes from the E & R amendment. What it basically does is remove the doctor penalties and it also makes it clear that the information would be available through a mandated toll-free number rather than an optional one and that that woman can get that information at any point in time through the Department of Health. The omission about requiring a physician...the...to identify who the physician is to perform the abortion was simply a matter of that would not be appropriate information for the Department of Health to give out. That really does need to come from the clinic or from the physician when the appointment is made and that's a reasonable thing to insert back in there. That is information that should come from the clinic. Again, I would like to reiterate that what we are trying to do is get information to women in a way that is nonbiased. What little