

Excerpts below taken from article published by Life.org.nz. Original document found online at: <http://www.life.org.nz/abortion/abortionethicalkyissues/ninemonthslegal/>

**Nine Months Legal - Partial-birth Abortions**

When President Bush signed the Partial Birth Abortion Ban in 2003 it was immediately challenged by abortion advocates in three federal courts…

**The Reality of Partial Birth Abortion**
The ban on this procedure became federal law in the United States in November 2003. Immediately Planned Parenthood, the National Abortion Federation, and the American Civil Liberties Union filed lawsuits in three federal courts claiming the ban takes away a fundamental constitutional right.

The main reason judges have given for overturning the ban is that there is no exception for when the mother's life is at risk if she continues with the pregnancy.

The American College of Obstetricians and Gynecologists is on record as saying "there is no situation where they can think that this [partial birth abortion] is the only option available."

Abortion doctors have taken the witness stand to describe how they abort babies in the fifth and sixth months of pregnancy. Below are some extracts from their testimony…

**DAY THREE: March 31, 2004
Excerpts from Abortion Doctors' direct examination of Dr. William Knorr:**
**Q:** Can you tell the Court approximately how many abortions you performed last year?
**A:** Somewhere between five and six thousand.

**Q:** Of those, can you estimate how many were second trimester abortions?
**A:** Somewhere between 12 and 15%.

**Q:** Dr. Knorr, before you begin to remove the fetus during a D&E procedure, is the fetus typically alive?
**A:** ...the majority of the fetuses are alive.

**Q:** And you don't routinely induce fetal demise, as part of your second trimester abortion procedures, is that right?
**A:** That's right. Very rarely.

**Q:** And why not?
**A:** I just don't believe in it. I think that it's an extra procedure and, you know, we first have to remember, don't do any harm.

**Q:** When it happens and the fetus comes through the cervix except for the head, how do you proceed?
**A:** I first evaluate the cervix to see if I have enough room to slip a finger between the cervix and the fetal head, and if I can do that, I can then insert my crushing forcep around the head, crush the head and extract it.

If the cervix is very tight, I can't do that, I will use a craniotomy procedure, will turn the fetus so the back is up and find the area that I want to open, and either with a finger, dilator or a scissor will open that area and gently pull down. That pressure alone is enough to empty the cranium and extract the head.

**Q:** And why don't you routinely do second trimester abortions by induction?
**A:** I don't really have the ability to do that. I cannot put a woman in the hospital where I have privileges and admit her for an elective abortion beyond 12 weeks of gestation, and even if I wanted to do 12 weeks and under, I can usually never find a nurse that will accompany me to the OR to do it.

**Excerpts from Government's cross examination of Dr. Knorr:**
**Q:** Also when you bring out a fetus in pieces, you make sure that you have got all the parts that you want; right? You kind of --
**A:** Yes

**Q:** You try and lay them out and put them back together as best you can to see if you have everything?
**A:** Not necessarily. Some of us keep track on the way out.

**Q:** Dr. Knorr, is the procedure you perform consistent with this definition in DX651?
**A:** No

**Q:** In what way?
**A:** ...Breech extraction of the body excepting the head, well, according to the way I do my procedure, that sometimes occurs. Partial evacuation of the intracranial contants of a living fetus to effect delivery of a dead but otherwise intact fetus, yes I do that.

**Q:** Doctor, when you do have an intact extraction and the head gets stuck at the cervical os and then you do something to bring the head out, you testified on direct that sometimes the fetus is alive before you open the skull?
**A:** Yes...

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