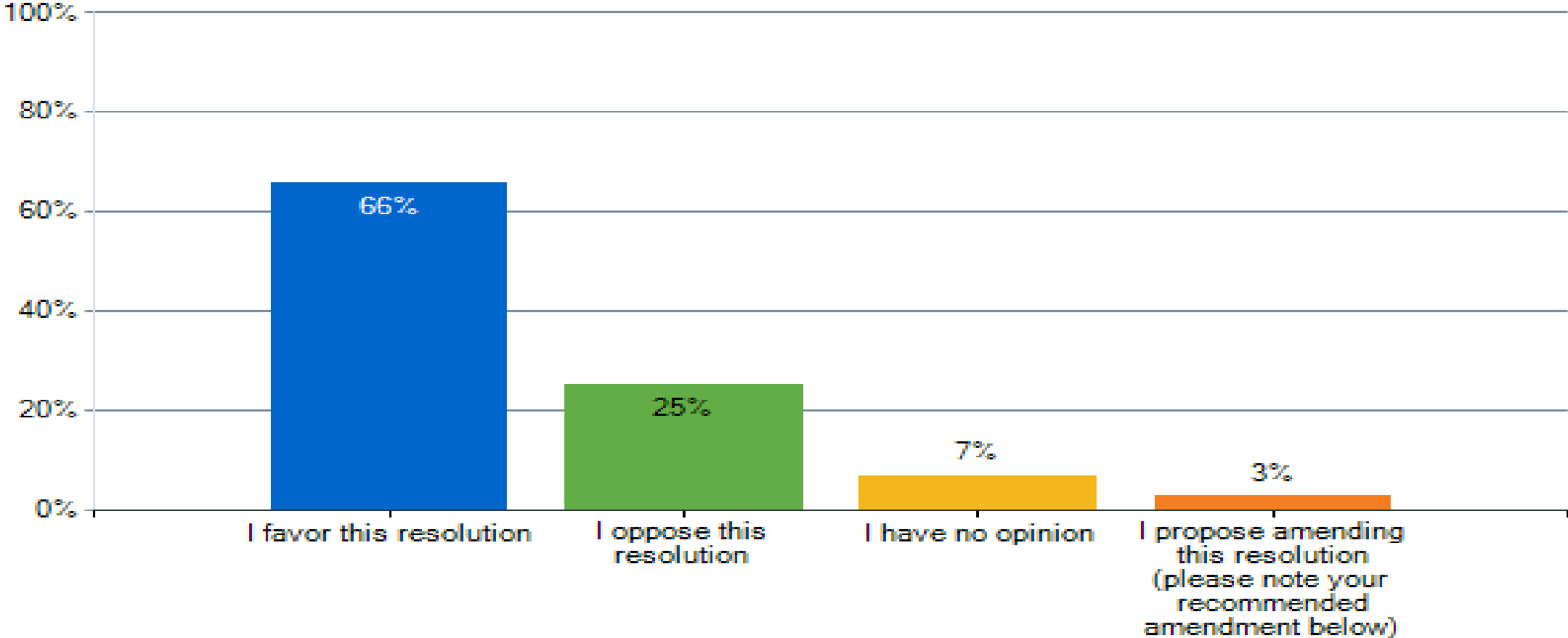
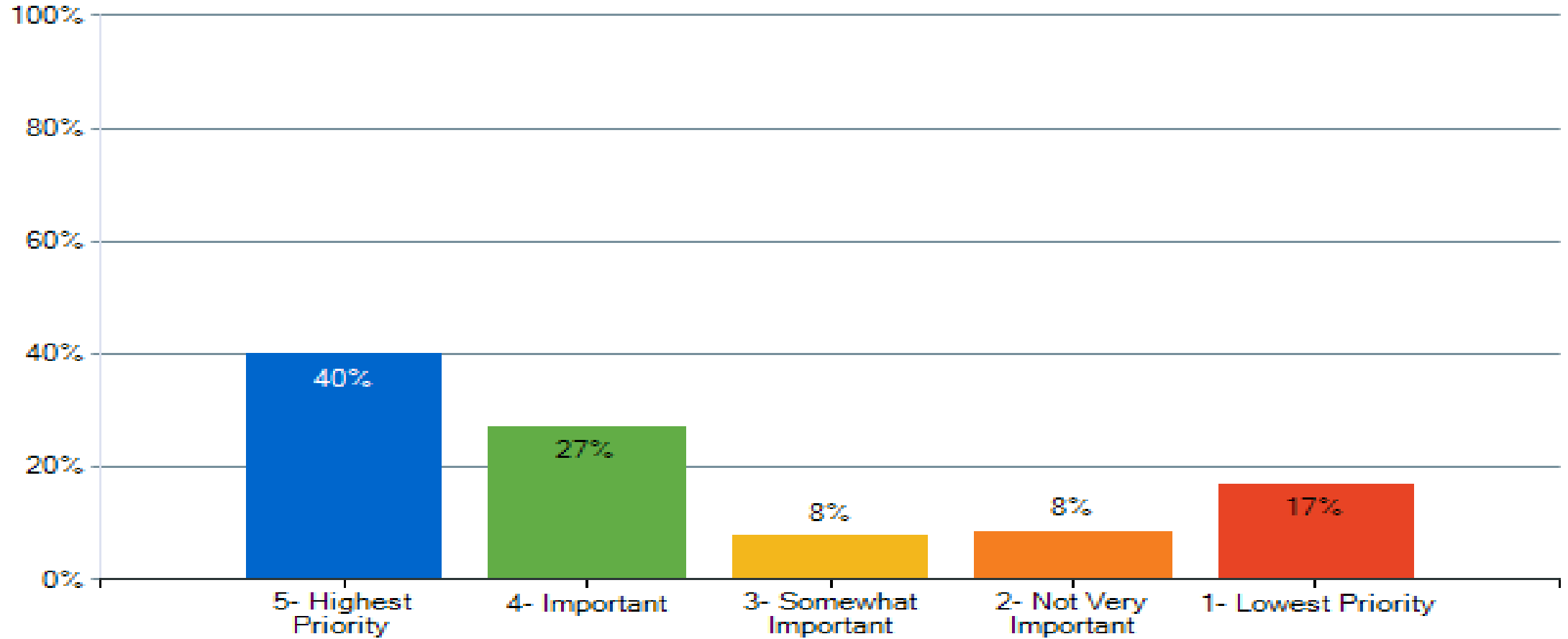


# Women's Reproductive Health



119 Responses

Please indicate your view of this resolution as an ISMS priority.



118 Responses

## Comments

### Response Text

This should be self apparent.

The great state of Illinois is already a healthy place for these issues. The problem is -- what if someone is training in a Catholic Hospital that does not permit birth control, abortions, etc. So that resident will not receive training or have experience in those subjects. In my opinion it would not be a good idea to accept an ob-gyn residency in such an institution... but sometimes situations dictate that you take what you get. I really don't think this resolution is needed, because it really applies mostly to a Catholic hospital and it is not the duty of the medical society to make trouble there. Of course I practiced in a terrific Catholic hospital for 40 years and in ortho it was NO issue at all.

Only problem is a personal discomfort given clotting and other risks of OTC availability of BCPs

It appears that the authors of the amendment may have specific issues in mind which they fail to address. If ISMS were to support this resolution, it is not entirely clear exactly what would be supported. On that basis, the resolution should not be passed. The amendment might be resubmitted with clearer wording where it would be clear to all what issues are in contention.

This is stupid and an example of the 'woke' policies that have infected the Society

support= get politics out of the patient/physician relationship

Very timely

Women's reproductive health is today code language for access to abortion. To term this "health" is a sad statement on today's medical profession.

All physicians should have a mandatory basic health care training before specialty. of 6-12 months

I am confused by "protect residency guidelines." What does this mean?

I don't believe that abortion is a part of women's reproductive rights because it does direct violence to unborn women as well, however understand that many other women do count the procedure among our rights and therefore have no opinion.

Incredibly important to support

Strongly oppose. ISMS does not need to insert itself in this clearly politicized way...thinly veiled as an education issue.

Currently patients require a prescription to obtain SALINE and you want to make hormonal "contraceptives" available to anyone OTC. Both are inappropriate.

This carefully worded resolution seems to hide an unrestricted pro-abortion stance under the word "manifestations". I think this is dishonest and disingenuous. So that I am clear and honest, I oppose abortion that it not done to protect and preserve the life of the mother, and I respect the fetus/infant as a separate life that we should and often do work to preserve and protect the same as we do the mother. Also, there is no provision here (or in ACGME guidelines) to protect residents from discrimination in selection to, or programmatic requirements in residency programs who have moral objections to abortion.

This is incredibly non-specific

Abortion, especially beyond the first trimester, should be illegal unless the life of the woman is in jeopardy. This procedure extinguishes a life which is against the basic tenets of medical practice.

I was with you 100% until the statement "and all of its manifestations." The techniques for the evacuation of an IUFD and an incomplete miscarriage are exactly the same as elective termination of pregnancy into the early second trimester of pregnancy. If an Ob/Gyn chooses to utilize his or her skill set for the performing of abortions, that is entirely their choice and I will not pass harsh judgment on them. However, I am equally interested in protecting those medical providers who do

not wish to perform "abortions" to be required only to learn the techniques heretofore mentioned. It's all in the wording!

I do not favor abortion, but of course all other women's care requires appropriate training.

Medical trainees should not be forced to participate or penalized if they refuse to participate in abortions if this is in concert with their moral values. Medical training programs should not be forced to perform or penalized if they do not perform abortions if this is in concert with their institutional charter. This should be regardless of ACGME requirements. Forcing such compliance amounts to forcing physicians to practice medical procedures against their will at risk of penalty. Additionally the use of the term "reproductive health" is misleading as it represents pregnancy to potentially be a disease which should be eliminated. Leave the ISMS policy as is.

This resolution seems to be intentionally nonspecific... If we want to agree on something let's use clear language.

To think that "current political thinking" will endanger the teaching or performance of abortions in Illinois is laughable. "Current political thinking" allows states to make decisions on abortion policy and law; in Illinois it is clear that abortions will not be in danger. I would have hoped ISMS would not disguise the abortion question behind the benign sounding title of "Woman's Reproductive Health." It would have been more forthright to call this what it is: a resolution to protect abortion and abortion education. While I agree that physicians should be educated on all forms of treatment or procedures, I would hope it is not the ISMS position that participation in procedures that a physician feel go against their morals should be mandatory. Further, I disagree that all abortions performed following state and federal laws and standards are to be considered ethical (existing ISMS policy). There are many reasons a woman may pursue an abortion; to say they are all ethical because they follow established rules and standards is a statement I cannot support. I hope ISMS, who is supposed to represent ALL Illinois physician members, has not established an "exclusion clause" to membership for physicians who consider themselves Pro-life. As an emergency medicine physician and member of ISMS, my duty is to treat all who need help for any reason, any time and without judgement. I will continue to perform my duty to my patients no matter what the law says.

We have policy already

Rasmeet Miller MD (member, committee member) - full support that our ISMS and stakeholders protect training for residence that includes full spectrum of women's reproductive health

Yes. Catholic mission hospitals are dictating the training of our residents in many areas and we need to be able to train Illinois physicians without their interference.

This resolution supports the greater than 50% of the world! I am 72 years old and remember before Roe v Wade. Now my daughters face the same prejudice and ignorance.

Current ISMS position is adequate. This resolution does not increase attention physicians should have to support the exceptional detail of policies and guidelines of ACOG.

## Women's Reproductive Health

### Response Text

Other (Please specify) :

Other (Please specify) : Eliminate the OTC recs.

Other (Please specify) : Added education on moral aspects with discussions of risk/benefit to all involved similar to surgical consent of all procedures