A BILL TO BE ENTITLED

AN ACT

relating to abortion, including abortions after detection of an
unborn child's heartbeat; authorizing a private civil right of
action.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. This Act shall be known as the Texas Heartbeat
Act.

SECTION 2. The legislature finds that the State of Texas
never repealed, either expressly or by implication, the state
statutes enacted before the ruling in Roe v. Wade, 410 U.S. 113
(1973), that prohibit and criminalize abortion unless the mother's
life is in danger.

SECTION 3. Chapter 171, Health and Safety Code, is amended
by adding Subchapter H to read as follows:

SUBCHAPTER H. DETECTION OF FETAL HEARTBEAT

Sec. 171.201. DEFINITIONS. In this subchapter:
(1) "Fetal heartbeat" means cardiac activity or the
steady and repetitive rhythmic contraction of the fetal heart
within the gestational sac.

(2) "Gestational age" means the amount of time that
has elapsed from the first day of a woman's last menstrual period.

(3) "Gestational sac" means the structure comprising
the extraembryonic membranes that envelop the unborn child and that
is typically visible by ultrasound after the fourth week of
pregnancy.

(4) "Physician" means an individual licensed to practice medicine in this state, including a medical doctor and a doctor of osteopathic medicine.

(5) "Pregnancy" means the human female reproductive condition that:

(A) begins with fertilization;

(B) occurs when the woman is carrying the developing human offspring; and

(C) is calculated from the first day of the woman's last menstrual period.

(6) "Standard medical practice" means the degree of skill, care, and diligence that an obstetrician of ordinary judgment, learning, and skill would employ in like circumstances.

(7) "Unborn child" means a human fetus or embryo in any stage of gestation from fertilization until birth.

Sec. 171.202. LEGISLATIVE FINDINGS. The legislature finds, according to contemporary medical research, that:

(1) fetal heartbeat has become a key medical predictor that an unborn child will reach live birth;

(2) cardiac activity begins at a biologically identifiable moment in time, normally when the fetal heart is formed in the gestational sac;

(3) Texas has compelling interests from the outset of a woman's pregnancy in protecting the health of the woman and the life of the unborn child; and

(4) to make an informed choice about whether to
continue her pregnancy, the pregnant woman has a compelling
interest in knowing the likelihood of her unborn child surviving to
full-term birth based on the presence of cardiac activity.

Sec. 171.203. DETERMINATION OF PRESENCE OF FETAL HEARTBEAT
REQUIRED; RECORD. (a) For the purposes of determining the presence
of a fetal heartbeat under this section, "standard medical
practice" includes employing the appropriate means of detecting the
heartbeat based on the estimated gestational age of the unborn
child and the condition of the woman and her pregnancy.

(b) Except as provided by Section 171.205, a physician may
not knowingly perform or induce an abortion on a pregnant woman
unless the physician has determined, in accordance with this
section, whether the woman's unborn child has a detectable fetal
heartbeat.

(c) In making a determination under Subsection (b), the
physician must use a test that is:

(1) consistent with the physician's good faith and
reasonable understanding of standard medical practice; and

(2) appropriate for the estimated gestational age of
the unborn child and the condition of the pregnant woman and her
pregnancy.

(d) A physician making a determination under Subsection (b)
shall record in the pregnant woman's medical record:

(1) the estimated gestational age of the unborn child;

(2) the method used to estimate the gestational age;

and

(3) the test used for detecting a fetal heartbeat,
including the date, time, and results of the test.

Sec. 171.204. PROHIBITED ABORTION OF UNBORN CHILD WITH DETECTABLE FETAL HEARTBEAT; EFFECT. (a) Except as provided by Section 171.205, a physician may not knowingly perform or induce an abortion on a pregnant woman if the physician detected a fetal heartbeat for the unborn child as required by Section 171.203 or failed to perform a test to detect a fetal heartbeat.

(b) A physician does not violate this section if the physician performed a test for a fetal heartbeat as required by Section 171.203 and did not detect a fetal heartbeat.

(c) This section does not affect:

(1) the provisions of this chapter that restrict or regulate an abortion by a particular method or during a particular stage of pregnancy; or

(2) any other provision of state law that regulates or prohibits abortion.

Sec. 171.205. EXCEPTION FOR MEDICAL EMERGENCY; RECORDS.

(a) Section 171.204 does not apply if a physician believes a medical emergency exists that prevents compliance with this subchapter.

(b) A physician who performs or induces an abortion under circumstances described by Subsection (a) shall make written notations in the pregnant woman's medical record of:

(1) the physician's belief that a medical emergency necessitated the abortion; and

(2) the medical condition of the pregnant woman that prevented compliance with this subchapter.
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(c) A physician performing or inducing an abortion under this section shall maintain in the physician's practice records a copy of the notations made under Subsection (b).

Sec. 171.206. CONSTRUCTION OF SUBCHAPTER. (a) This subchapter does not create or recognize a right to abortion before a fetal heartbeat is detected.

(b) This subchapter may not be construed to:

(1) authorize the initiation of a cause of action against or the prosecution of a woman on whom an abortion is performed or induced or attempted to be performed or induced in violation of this subchapter;

(2) wholly or partly repeal, either expressly or by implication, any other statute that regulates or prohibits abortion, including Chapter 6-1/2, Title 71, Revised Statutes; or

(3) restrict a political subdivision from regulating or prohibiting abortion in a manner that is at least as stringent as the laws of this state.

Sec. 171.207. LIMITATIONS ON PUBLIC ENFORCEMENT. (a) The requirements of this subchapter shall be enforced exclusively through the private civil enforcement actions described in section 171.208. No enforcement of this subchapter, and no enforcement of Chapters 19 and 22, Penal Code, in response to violations of this subchapter, may be taken or threatened by this state, a political subdivision, a district or county attorney, or an executive or administrative officer or employee of this state or a political subdivision against any person, except as provided in section 171.208.
Subsection (a) may not be construed to:

(1) legalize the conduct prohibited by this subchapter or by Chapter 6-1/2, Title 71, Revised Statutes;

(2) limit in any way or affect the availability of a remedy established by Section 171.208; or

(3) limit the enforceability of any other laws that regulate or prohibit abortion.

Sec. 171.208. CIVIL LIABILITY FOR VIOLATION OR AIDING OR ABETTING VIOLATION. (a) Any person, other than an officer or employee of a state or local governmental entity in this state, may bring a civil action against any person who:

(1) performs or induces an abortion in violation of this chapter;

(2) knowingly engages in conduct that aids or abets the performance or inducement of an abortion, including paying for or reimbursing the costs of an abortion through insurance or otherwise, if the abortion is performed or induced in violation of this chapter, regardless of whether the person knew or should have known that the abortion would be performed or induced in violation of this chapter.

(b) If a claimant prevails in an action brought under this section, the court shall award:

(1) injunctive relief sufficient to prevent the defendant from violating this chapter or engaging in acts that aid or abet violations of this chapter;

(2) statutory damages in an amount of not less than $10,000 for each abortion that the defendant performed or induced
in violation of this chapter, and for each abortion performed or
induced in violation of this chapter that the defendant aided or
abetted; and

(3) costs and attorney's fees.

(c) Notwithstanding Subsection (b), a court may not award
relief under this section if the defendant demonstrates that the
defendant previously paid statutory damages in a previous action
for that particular abortion performed or induced in violation of
this chapter, or for the particular conduct that aided or abetted an
abortion performed or induced in violation of this chapter.

(d) Notwithstanding Chapter 16, Civil Practice and Remedies
Code, a person may bring an action under this section not later than
the sixth anniversary of the date the cause of action accrues.

(e) Notwithstanding any other law, the following are not a
defense to an action brought under this section:

(1) ignorance or mistake of law;

(2) a defendant's belief that the requirements of this
chapter are unconstitutional or were unconstitutional;

(3) a defendant's reliance on any court decision that
has been overruled on appeal or by a subsequent court, even if that
court decision had not been overruled when the defendant engaged in
conduct that violates this chapter;

(4) a defendant's reliance on any state or federal
court decision that is not binding on the court in which the action
has been brought;

(5) nonmutual issue preclusion or nonmutual claim
preclusion;
(6) the consent of the unborn child's mother to the
abortion; or

(7) any claim that the enforcement of this chapter or
the imposition of civil liability against the defendant will
violate the constitutional rights of third parties, except as
provided by section 171.209.

(f) It is an affirmative defense if a person sued under
Subsection (a)(2) reasonably believed, after conducting a
reasonable investigation, that the physician performing or
inducing the abortion had complied or would comply with this
chapter. The defendant has the burden of proving the affirmative
defense under this subsection by a preponderance of the evidence.

(g) This section may not be construed to impose liability on
any speech or conduct protected by the First Amendment of the United
States Constitution, as made applicable to the states through the
United States Supreme Court's interpretation of the Fourteenth
Amendment of the United States Constitution, or by Section 8,
Article I, Texas Constitution.

(h) Notwithstanding any other law, this state, a state
official, or a district or county attorney may not intervene in an
action brought under this section. This subsection does not
prohibit a person described by this subsection from filing an
amicus curiae brief in the action.

(i) Notwithstanding any other law, a court may not award
costs or attorney's fees under the Texas Rules of Civil Procedure or
any other rule adopted by the supreme court under Section 22.004,
Government Code, to a defendant in an action brought under this
Sec. 171.209. CIVIL LIABILITY: UNDUE BURDEN DEFENSE LIMITATIONS. (a) A defendant against whom an action is brought under Section 171.208 does not have standing to assert the rights of women seeking an abortion as a defense to liability under that section unless:

(1) the United States Supreme Court holds that the courts of this state must confer standing on that defendant to assert the third-party rights of women seeking an abortion in state court as a matter of federal constitutional law; or

(2) the defendant is an abortion provider, an employee of an abortion provider, or a physician who performs abortions.

(b) A defendant in an action brought under Section 171.208 may assert an affirmative defense to liability under this section only if:

(1) the defendant has standing to assert the third-party rights of women seeking an abortion in accordance with Subsection (a); and

(2) the defendant demonstrates that the relief sought by the claimant will impose an undue burden on women seeking an abortion.

(c) A court may not find an undue burden under Subsection (b) unless the defendant introduces evidence proving that:

(1) an award of relief will prevent an identifiable woman or an identifiable group of women from obtaining an abortion; or

(2) an award of relief will place a substantial
obstacle in the path of an identifiable woman or an identifiable
group of women who are seeking an abortion.

(d) A defendant may not establish an undue burden under this
section by:

(1) merely demonstrating that an award of relief will
prevent women from obtaining support or assistance, financial or
otherwise, from others in their effort to obtain an abortion; or

(2) arguing or attempting to demonstrate that an award
of relief against other defendants or other potential defendants
will impose an undue burden on women seeking an abortion.

(e) The affirmative defense under Subsection (b) is not
available if the United States Supreme Court overrules Roe v. Wade,
410 U.S. 113 (1973) or Planned Parenthood v. Casey, 505 U.S. 833
(1992), regardless of whether the conduct on which the cause of
action is based under Section 171.208 occurred before the Supreme
Court overruled either of those decisions.

Sec. 171.210. CIVIL LIABILITY: VENUE. Notwithstanding any
other law, including Section 15.002, Civil Practice and Remedies
Code, a civil action brought under Section 171.211 shall be brought
in:

(1) the county in which all or a substantial part of
the events or omissions giving rise to the claim occurred;

(2) the county of residence for any one of the natural
person defendants at the time the cause of action accrued;

(3) the county of the principal office in this state of
any one of the defendants that is not a natural person; or

(4) the county of residence for the claimant if the
claimant is a natural person residing in this state.

Sec. 171.211. SOVEREIGN, GOVERNMENTAL, AND OFFICIAL IMMUNITY PRESERVED. (a) This section prevails over any conflicting law, including:

(1) the Uniform Declaratory Judgments Act; and

(2) Chapter 37, Civil Practice and Remedies Code.

(b) This state has sovereign immunity, a political subdivision has governmental immunity, and each officer and employee of this state or a political subdivision has official immunity in any action, claim, or counterclaim or any type of legal or equitable action that challenges the validity of any provision or application of this chapter, on constitutional grounds or otherwise.

(c) A provision of state law may not be construed to waive or abrogate an immunity described by Subsection (b) unless it expressly waives immunity under this section.

Sec. 171.212. SEVERABILITY. (a) Mindful of Leavitt v. Jane L., 518 U.S. 137 (1996), in which in the context of determining the severability of a state statute regulating abortion the United States Supreme Court held that an explicit statement of legislative intent is controlling, it is the intent of the legislature that every provision, section, subsection, sentence, clause, phrase, or word in this chapter, and every application of the provisions in this chapter, are severable from each other.

(b) If any application of any provision in this chapter to any person, group of persons, or circumstances is found by a court to be invalid or unconstitutional, the remaining applications of
that provision to all other persons and circumstances shall be
severed and may not be affected. All constitutionally valid
applications of this chapter shall be severed from any applications
that a court finds to be invalid, leaving the valid applications in
force, because it is the legislature's intent and priority that the
valid applications be allowed to stand alone. Even if a reviewing
court finds a provision of this chapter to impose an undue burden in
a large or substantial fraction of relevant cases, the applications
that do not present an undue burden shall be severed from the
remaining provisions and shall remain in force, and shall be
treated as if the legislature had enacted a statute limited to the
persons, group of persons, or circumstances for which the statute's
application does not present an undue burden.

(c) The legislature further declares that it would have
enacted this chapter, and each provision, section, subsection,
sentence, clause, phrase, or word, and all constitutional
applications of this chapter, irrespective of the fact that any
provision, section, subsection, sentence, clause, phrase, or word,
or applications of this chapter, were to be declared
unconstitutional or to represent an undue burden.

(d) If any provision of this chapter is found by any court to
be unconstitutionally vague, then the applications of that
provision that do not present constitutional vagueness problems
shall be severed and remain in force.

(e) No court may decline to enforce the severability
requirements of Subsections (a), (b), (c), and (d) on the ground
that severance would rewrite the statute or involve the court in
legislative or lawmaking activity. A court that declines to
enforce or enjoins a state official from enforcing a statutory
provision does not rewrite a statute, as the statute continues to
contain the same words as before the court's decision. A judicial
injunction or declaration of unconstitutionality:

(1) is nothing more than an edict prohibiting
enforcement that may subsequently be vacated by a later court if
that court has a different understanding of the requirements of the
Texas Constitution or United States Constitution;

(2) is not a formal amendment of the language in a
statute; and

(3) no more rewrites a statute than a decision by the
executive not to enforce a duly enacted statute in a limited and
defined set of circumstances.

(f) If any federal or state court declares unconstitutional
or enjoins the enforcement of a provision in this chapter and fails
to enforce the severability requirements of Subsections (a), (b),
(c), (d), and (e), the executive commissioner shall:

(1) adopt rules that enforce the requirements
described by this chapter to the maximum possible extent while
avoiding the constitutional problems or other problems identified
by the federal or state court; and

(2) issue notice of those rules, not later than the
30th day after the date of the court ruling.

(g) If the executive commissioner fails to adopt the rules
and issue notice under Subsection (f), a person may petition for a
writ of mandamus requiring the executive commissioner to adopt the
rules and issue notice.

SECTION 4. Chapter 30, Civil Practice and Remedies Code, is amended by adding Section 30.022 to read as follows:

Sec. 30.022. AWARD OF ATTORNEY'S FEES IN ACTIONS CHALLENGING ABORTION LAWS. (a) Notwithstanding any other law, any person, including an entity, attorney, or law firm, who seeks declaratory or injunctive relief to prevent this state, a political subdivision, or any governmental entity or public official in this state from enforcing any statute, ordinance, rule, regulation, or any other type of law that regulates or restricts abortion or that limits taxpayer funding for individuals or entities that perform or promote abortions, in any state or federal court, or that represents any litigant seeking such relief in any state or federal court, is jointly and severally liable to pay the costs and attorney's fees of the prevailing party.

(b) For purposes of this section, a party is considered a prevailing party if a state or federal court:

(1) dismisses any claim or cause of action brought against the party that seeks the declaratory or injunctive relief described by Subsection (a), regardless of the reason for the dismissal; or

(2) enters judgment in the party's favor on any such claim or cause of action.

(c) Regardless of whether a prevailing party sought to recover costs or attorney's fees in the underlying action, a prevailing party under this section may bring a civil action to recover costs and attorney's fees against a person, including an
entity, attorney, or law firm, that sought declaratory or injunctive relief described by Subsection (a) not later than the third anniversary of the date on which, as applicable:

(1) the dismissal or judgment described by Subsection (b) becomes final on the conclusion of appellate review; or

(2) the time for seeking appellate review expires.

(d) It is not a defense to an action brought under Subsection (c) that:

(1) a prevailing party under this section failed to seek recovery of costs or attorney's fees in the underlying action; or

(2) the court in the underlying action declined to recognize or enforce the requirements of this section.

SECTION 5. Subchapter C, Chapter 311, Government Code, is amended by adding Section 311.036 to read as follows:

Sec. 311.036. CONSTRUCTION OF ABORTION STATUTES. (a) A statute that regulates or prohibits abortion may not be construed to repeal any other statute that regulates or prohibits abortion, either wholly or partly, unless the repealing statute explicitly states that it is repealing the other statute.

(b) A statute may not be construed to restrict a political subdivision from regulating or prohibiting abortion in a manner that is at least as stringent as the laws of this state unless the statute explicitly states that political subdivisions are prohibited from regulating or prohibiting abortion in the manner described by the statute.

(c) Every statute that regulates or prohibits abortion is
severable in each of its applications to every person and
circumstance. If any statute that regulates or prohibits abortion
is found by any court to be unconstitutional, either on its face or
as applied, then all applications of that statute that do not
violate the constitutional rights of women seeking abortions shall
be severed from the unconstitutional applications and shall remain
enforceable, notwithstanding any other law.

SECTION 6. Subchapter A, Chapter 171, Health and Safety
Code, is amended by adding Section 171.008 to read as follows:

Sec. 171.008. REQUIRED DOCUMENTATION. (a) If an abortion
is performed or induced on a pregnant woman because of a medical
emergency, the physician who performs or induces the abortion shall
execute a written document that certifies the abortion is necessary
due to a medical emergency and specifies the woman’s medical
condition requiring the abortion.

(b) A physician shall:

(1) place the document described by Subsection (a) in
the pregnant woman’s medical record; and

(2) maintain a copy of the document described by
Subsection (a) in the physician’s practice records.

(c) A physician who performs or induces an abortion on a
pregnant woman shall:

(1) if the abortion is performed or induced to
preserve the health of the pregnant woman, execute a written
document that:

(A) specifies the medical condition the abortion
is asserted to address; and
(B) provides the medical rationale for the physician's conclusion that the abortion is necessary to address the medical condition; or

(2) for an abortion other than an abortion described by Subdivision (1), specify in a written document that maternal health is not a purpose of the abortion.

(d) The physician shall maintain a copy of a document described by Subsection (c) in the physician's practice records.

SECTION 7. Section 171.012, Health and Safety Code, is amended by amending Subsection (a) and adding Subsection (g) to read as follows:

(a) Consent to an abortion is voluntary and informed only if:

(1) the physician who is to perform or induce the abortion informs the pregnant woman on whom the abortion is to be performed or induced of:

(A) the physician's name;

(B) the particular medical risks associated with the particular abortion procedure to be employed, including, when medically accurate:

(i) the risks of infection and hemorrhage;

(ii) the potential danger to a subsequent pregnancy and of infertility; and

(iii) the possibility of increased risk of breast cancer following an induced abortion and the natural protective effect of a completed pregnancy in avoiding breast cancer;
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(C) the probable gestational age of the unborn child at the time the abortion is to be performed or induced; and
(D) the medical risks associated with carrying the child to term;

(2) the physician who is to perform or induce the abortion or the physician's agent informs the pregnant woman that:
(A) medical assistance benefits may be available for prenatal care, childbirth, and neonatal care;
(B) the father is liable for assistance in the support of the child without regard to whether the father has offered to pay for the abortion; and
(C) public and private agencies provide pregnancy prevention counseling and medical referrals for obtaining pregnancy prevention medications or devices, including emergency contraception for victims of rape or incest;

(3) the physician who is to perform or induce the abortion or the physician's agent:
(A) provides the pregnant woman with the printed materials described by Section 171.014; and
(B) informs the pregnant woman that those materials:
   (i) have been provided by the commission [Department of State Health Services];
   (ii) are accessible on an Internet website sponsored by the commission [department];
   (iii) describe the unborn child and list agencies that offer alternatives to abortion; and

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include a list of agencies that offer sonogram services at no cost to the pregnant woman;

(4) before any sedative or anesthesia is administered to the pregnant woman and at least 24 hours before the abortion or at least two hours before the abortion if the pregnant woman waives this requirement by certifying that she currently lives 100 miles or more from the nearest abortion provider that is a facility licensed under Chapter 245 or a facility that performs more than 50 abortions in any 12-month period:

(A) the physician who is to perform or induce the abortion or an agent of the physician who is also a sonographer certified by a national registry of medical sonographers performs a sonogram on the pregnant woman on whom the abortion is to be performed or induced;

(B) the physician who is to perform or induce the abortion displays the sonogram images in a quality consistent with current medical practice in a manner that the pregnant woman may view them;

(C) the physician who is to perform or induce the abortion provides, in a manner understandable to a layperson, a verbal explanation of the results of the sonogram images, including a medical description of the dimensions of the embryo or fetus, the presence of cardiac activity, and the presence of external members and internal organs; [and]

(D) the physician who is to perform or induce the abortion or an agent of the physician who is also a sonographer certified by a national registry of medical sonographers makes
audible the heart auscultation for the pregnant woman to hear, if present, in a quality consistent with current medical practice and provides, in a manner understandable to a layperson, a simultaneous verbal explanation of the heart auscultation; and

(E) if a fetal heartbeat is detected under Section 171.203, the physician who is to perform or induce the abortion informs the woman in writing of the statistical probability of bringing the unborn child to term:

(i) to the best of the physician's knowledge, based on the gestational age of the unborn child; or

(ii) as provided by commission rule;

(5) before receiving a sonogram under Subdivision (4)(A) and before the abortion is performed or induced and before any sedative or anesthesia is administered, the pregnant woman completes and certifies with her signature an election form that states as follows:

"ABORTION AND SONOGRAM ELECTION

(1) THE INFORMATION AND PRINTED MATERIALS DESCRIBED BY SECTIONS 171.012(a)(1)-(3), TEXAS HEALTH AND SAFETY CODE, HAVE BEEN PROVIDED AND EXPLAINED TO ME.

(2) I UNDERSTAND THE NATURE AND CONSEQUENCES OF AN ABORTION.

(3) TEXAS LAW REQUIRES THAT I RECEIVE A SONOGRAM PRIOR TO RECEIVING AN ABORTION.

(4) I UNDERSTAND THAT I HAVE THE OPTION TO VIEW THE SONOGRAM IMAGES.

(5) I UNDERSTAND THAT I HAVE THE OPTION TO HEAR THE
HEARTBEAT.

(6) I understand that I am required by law to hear an explanation of the sonogram images unless I certify in writing to one of the following:

___ I am pregnant as a result of a sexual assault, incest, or other violation of the Texas Penal Code that has been reported to law enforcement authorities or that has not been reported because I reasonably believe that doing so would put me at risk of retaliation resulting in serious bodily injury.

___ I am a minor and obtaining an abortion in accordance with judicial bypass procedures under Chapter 33, Texas Family Code.

___ My unborn child [fetus] has an irreversible medical condition or abnormality, as identified by reliable diagnostic procedures and documented in my medical file.

(7) I am making this election of my own free will and without coercion.

(8) For a woman who lives 100 miles or more from the nearest abortion provider that is a facility licensed under Chapter 245, Texas Health and Safety Code, or a facility that performs more than 50 abortions in any 12-month period only:

I certify that, because I currently live 100 miles or more from the nearest abortion provider that is a facility licensed under Chapter 245 or a facility that performs more than 50 abortions in any 12-month period, I waive the requirement to wait 24 hours after the sonogram is performed before receiving the abortion procedure. My place of residence is:__________.
SIGNATURE DATE; 

(6) before the abortion is performed or induced, the physician who is to perform or induce the abortion receives a copy of the signed, written certification required by Subdivision (5); and 

(7) the pregnant woman is provided the name of each person who provides or explains the information required under this subsection.

(g) The executive commissioner may adopt rules that specify the information required under Subsection (a)(4)(E) regarding the statistical probability of bringing an unborn child to term based on the gestational age of the child. The information in the rules must be based on available medical evidence.

SECTION 8. Section 245.011(c), Health and Safety Code, is amended to read as follows:

(c) The report must include:

(1) whether the abortion facility at which the abortion is performed is licensed under this chapter;

(2) the patient's year of birth, race, marital status, and state and county of residence;

(3) the type of abortion procedure;

(4) the date the abortion was performed;

(5) whether the patient survived the abortion, and if the patient did not survive, the cause of death;

(6) the probable post-fertilization age of the unborn child based on the best medical judgment of the attending physician.
at the time of the procedure;
(7) the date, if known, of the patient's last menstrual cycle;
(8) the number of previous live births of the patient;
(9) the number of previous induced abortions of the patient;
(10) whether the abortion was performed or induced because of a medical emergency and any medical condition of the pregnant woman that required the abortion;
(11) whether the physician made a determination of the presence of a fetal heartbeat in accordance with Section 171.203; and
(12) whether the physician performed or induced the abortion under circumstances described by Section 171.205.

SECTION 10. Every provision in this Act and every application of the provision in this Act are severable from each other. If any provision or application of any provision in this Act to any person, group of persons, or circumstance is held by a court to be invalid, the invalidity does not affect the other provisions or applications of this Act.

SECTION 11. The change in law made by this Act applies only to an abortion performed or induced on or after the effective date of this Act.

SECTION 12. This Act takes effect September 1, 2021.