

# Words Matter

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*The rapidly evolving and increasingly constrictive legal landscape governing abortion access in the State of Florida over the past few years warrants careful inspection from both a legal and medical standpoint, given the far-reaching and significant ramifications. This Article evaluates the letter of the law with relevant clinical considerations to highlight the ambiguities of the legislation and its disregard for the medical realities of late-term terminations.*

The primary objective of law school is to teach critical thinking rather than require memorization of information—a fact evidenced by the common practice of professors permitting the use of notes and outlines during final exams. The student is expected to closely analyze the letter of the law, grasp the nuanced implications of the diction utilized, and apply the legal framework to the facts at hand, as judges do. This training impresses upon legal practitioners the irrefutable truth that words matter; solemn care must be given to their selection and structuring. By contrast, medical school demands that students acquire a staggering volume of highly technical data at a relentless pace, propelling their knowledge base far beyond that of

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a layperson. It is only logical, then, that when lawmakers craft legislation regarding specific fields that require additional instruction, such as medicine, they defer to the professional judgment of experts within that discipline regarding the nomenclature and underlying technicalities to ensure that they, as legislators, understand and appropriately address the issues they propose to regulate. To do otherwise would be hubris and a dereliction of duty. And yet, when it comes to abortion access, there is a wholesale dismissal by legislators in many states of the entire medical community—its leading experts, eminent organizations and associations, and overwhelming evidence derived from years of painstaking research and arduous training.

Florida is one such state.<sup>1</sup> Its political ideology, while undeniably conservative, places a substantial premium on individual liberties;<sup>2</sup> this stance had previously protected the right to abortion.<sup>3</sup> In fact, the Florida Constitution, through what is commonly referred to as its “Privacy Clause,” guarantees “the right to be let alone and free from governmental intrusion into . . . private life.”<sup>4</sup> The Privacy Clause had long been interpreted to encompass the right to abortion.<sup>5</sup> However, in recent years, and despite the Privacy Clause, the right to abortion has increasingly been restricted in Florida.<sup>6</sup>

In 2022, the Florida Legislature passed, and Florida Governor Ron DeSantis signed into law, House Bill 5 (“HB 5”), a bill that banned abortions after fifteen weeks of pregnancy, subject to certain exceptions.<sup>7</sup> The law was challenged by healthcare providers, with Planned Parenthood of Southwest and Central Florida representing the petitioners (collectively, “Planned Parenthood”) and bringing suit against the State of Florida (the “State”) on the premise that the

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<sup>1</sup> See, e.g., FLA. STAT. § 390.0111 (2022) (banning abortion at fifteen weeks initially despite challenges by leading healthcare providers).

<sup>2</sup> See, e.g., FLA. CONST. art. I, § 23 (enshrining explicit right to privacy).

<sup>3</sup> E.g., *In re T.W.*, 551 So. 2d 1186, 1188–90 (Fla. 1989).

<sup>4</sup> FLA. CONST. art. I, § 23.

<sup>5</sup> See, e.g., *In re T.W.*, 551 So. 2d at 1192–93; *N. Fla. Women’s Health & Counseling Servs., Inc. v. State*, 866 So. 2d 612, 634–35 (Fla. 2003); *Gainesville Woman Care, LLC v. State*, 210 So. 3d 1243, 1254 (Fla. 2017).

<sup>6</sup> See *infra* notes 7–15 and accompanying text.

<sup>7</sup> See FLA. STAT. § 390.0111(1) (2022) (codifying HB 5’s ban on abortion after fifteen weeks).

law violated the Privacy Clause.<sup>8</sup> After the State submitted its response, in which it asserted that Planned Parenthood lacked standing to bring suit on behalf of its patients, the United States Supreme Court issued its landmark abortion decision in *Dobbs v. Jackson Women's Health Organization*.<sup>9</sup> The Court ruled that the federal Constitution does not guarantee a right to abortion and “return[ed] the issue of abortion to the people’s elected representatives,” thereby overturning years of established precedent under *Roe v. Wade*.<sup>10</sup> In Florida, Planned Parenthood’s case then proceeded until it reached the Florida Supreme Court.

While the constitutionality of HB 5 remained under review by the Florida Supreme Court, the Florida Legislature and Governor DeSantis approved a six-week ban on abortion, known as the “Heartbeat Protection Act,” in 2023.<sup>11</sup> On April 1, 2024, the Florida Supreme Court upheld the constitutionality of the 15-week ban, citing the text of the Privacy Clause, its context, and the historical evidence surrounding its adoption as the basis for its decision.<sup>12</sup> This finding deviated from prior decisions, which held that the Privacy Clause guaranteed the right to receive an abortion through the end of the second trimester.<sup>13</sup> The holding also allowed the six-week ban to spring into effect automatically on May 1, 2024.<sup>14</sup> On the same

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<sup>8</sup> See *Planned Parenthood of Sw. & Cent. Fla. v. State*, 384 So. 3d 67, 71 (Fla. 2024).

<sup>9</sup> See 142 S. Ct. 2228, 2228 (2022).

<sup>10</sup> *Id.* at 2243.

<sup>11</sup> See Anthony Izaguirre, *DeSantis Signs Florida GOP’s 6-Week Abortion Ban into Law*, ASSOCIATED PRESS (Apr. 14, 2023, 6:58 AM), [https://apnews.com/article/florida-abortion-ban-approved\\_c9c53311a0b2426adc4b8d0b463edad1](https://apnews.com/article/florida-abortion-ban-approved_c9c53311a0b2426adc4b8d0b463edad1) [<https://perma.cc/9KKF-DUFU>]; FLA. STAT. § 390.0111 (2023).

<sup>12</sup> See *Planned Parenthood of Sw. & Cent. Fla.*, 384 So. 3d at 71.

<sup>13</sup> See generally *In re T.W.*, 551 So. 2d 1186 (Fla. 1989); *N. Fla. Women’s Health & Counseling Servs., Inc. v. State*, 866 So. 2d 612 (Fla. 2003); *Gainesville Woman Care, LLC v. State*, 210 So. 3d 1243 (Fla. 2017).

<sup>14</sup> Compare FLA. STAT. § 390.0111 n.1 (2023) (stating that six-week ban will take effect if Florida Supreme Court upholds fifteen-week ban in *Planned Parenthood of Sw. & Cent. Fla.*), with FLA. STAT. § 390.0111 n.1 (2024) (providing for six-week ban based on decision in *Planned Parenthood* and noting that decision became effective May 1, 2024).

day, the Florida Supreme Court also ruled that a proposed constitutional amendment to protect abortion access could appear before voters on the November 5, 2024 ballot.<sup>15</sup>

The citizen-led ballot initiative, the “Amendment to Limit Government Interference with Abortion,” or “Amendment 4,” was sponsored by Floridians Protecting Freedom, a “statewide campaign of allied organizations and concerned citizens working together to limit government interference with abortion.”<sup>16</sup> As Florida increasingly restricted abortion access and imposed additional burdens on those seeking reproductive healthcare, Amendment 4 attempted to stem the surging tide of pregnancy criminalization. The full text of Amendment 4, as it appeared on the ballot, read:

No law shall prohibit, penalize, delay, or restrict abortion before viability or when necessary to protect the patient’s health, as determined by the patient’s healthcare provider. This amendment does not change the Legislature’s constitutional authority to require notification to a parent or guardian before a minor has an abortion.<sup>17</sup>

Upon scrutiny, the text of Amendment 4 was carefully constructed to simply restrict government interference with abortion access in an attempt to wrest back medical authority from legislators and return it as appropriate to trained healthcare providers. Its text aligns with the long-sacred spirit of the Privacy Clause, deeming abortion a private matter the government should not infringe upon. In addition, the drafters of Amendment 4 quite intentionally included explicit language clarifying that it would not invalidate legislators’ authority to require notification to caretakers in the case of

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<sup>15</sup> *In re Limiting Gov’t Interference with Abortion*, 384 So. 3d 122, 127 (Fla. 2024) (“We approve the proposed amendment for placement on the ballot.”).

<sup>16</sup> See Angela Fobbs, *Your Voice, Your Choice: 2024 Florida Abortion Amendment Update*, DEMOCRATS ABROAD, [https://www.democratsabroad.org/2024\\_florida\\_abortion\\_amendment\\_update](https://www.democratsabroad.org/2024_florida_abortion_amendment_update) [<https://perma.cc/8VMU-VYXE>] (last visited Mar. 24, 2025).

<sup>17</sup> See *Amendment to Limit Government Interference with Abortion 23-07*, FLA. DIV. OF ELECTIONS, <https://dos.elections.myflorida.com/initiatives/initdetail.asp?account=83927&seqnum=1> [<https://perma.cc/F5HX-8KDG>] (last visited Mar. 24, 2025) [hereinafter *Amendment 4*].

abortions for minors, in prescient anticipation of these scenarios being a moral boundary for many.

Despite the simplicity and forthrightness of the text of Amendment 4, the Financial Impact Statement, as prepared by the Florida Financial Impact Estimating Conference, included dire and dramatic extrapolations unrooted in reality and devoid of evidence-based backing. The text of the Financial Impact Statement, which appeared directly below Amendment 4 on the ballot, read:

The proposed amendment would result in significantly more abortions and fewer live births per year in Florida. The increase in abortions could be even greater if the amendment invalidates laws requiring parental consent before minors undergo abortions and those ensuring only licensed physicians perform abortions. There is also uncertainty about whether the amendment will require the state to subsidize abortions with public funds. Litigation to resolve those and other uncertainties will result in additional costs to the state government and state courts that will negatively impact the state budget. An increase in abortions may negatively affect the growth of state and local revenues over time. Because the fiscal impact of increased abortions on state and local revenues and costs cannot be estimated with precision, the total impact of the proposed amendment is indeterminate.<sup>18</sup>

The Financial Impact Statement boldly declared, without any substantiation, that the passage of Amendment 4 would result in “significantly” more abortions in Florida. This hypothetical projection is impossible to predict or quantify, particularly when the extent of “significantly” is left undefined. Furthermore, despite Amendment 4’s unequivocal statement regarding the Florida Legislature’s

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<sup>18</sup> See *Florida Financial Impact Estimating Conference Financial Impact Statement: Amendment to Limit Government Interference with Abortion (23-07)*, OFF. OF ECON. & DEMOGRAPHIC RSCH. (July 15, 2024), [https://edr.state.fl.us/Content/constitutional-amendments/2024Ballot/LimitGovernmentInterference-withAbortionFinancial%20Impact%20Statement\\_Second%20Series.pdf](https://edr.state.fl.us/Content/constitutional-amendments/2024Ballot/LimitGovernmentInterference-withAbortionFinancial%20Impact%20Statement_Second%20Series.pdf) [<https://perma.cc/7DNC-JM65>].

constitutional authority to require prior notification to a parent or guardian with respect to minors seeking abortions, the Financial Impact Statement cast doubt as to whether the ratification of Amendment 4 would invalidate the laws currently requiring such notice, in direct contradiction of Amendment 4's text. It further introduced the fear of unlicensed physicians performing abortions—a practice not only not contemplated by Amendment 4, but not even remotely condoned by its proponents.<sup>19</sup> Perhaps most outlandish, the Financial Impact Statement envisaged the possibility that the passage of Amendment 4 would require the State to “subsidize abortions with public funds,” indirectly tying abortions to taxes and thereby dissuading voters. The language of the Financial Impact Statement was a masterful work of speculative fearmongering, inflaming the emotions of voters rather than providing them with researched facts.

In the months leading up to the election, supporters of the ban within the government launched an unofficial campaign in opposition to Amendment 4. Governor DeSantis publicly argued that it would “make Florida one of the most radical abortion regimes.”<sup>20</sup> His Agency for Health Care Administration published a website stating that the proposed constitutional amendment “threatens women’s safety” while the Florida Department of Health sent a cease-and-desist letter to television stations that aired an advertisement in support of Amendment 4.<sup>21</sup> The State further opened an investigation into alleged fraud in the petition process to approve

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<sup>19</sup> See Samantha Putterman, *Florida’s Amendment 4 on Abortion is Short. Does a Lack of Definitions Mean No Rules?*, POLITIFACT (Sept. 23, 2024), <https://www.politifact.com/factchecks/2024/sep/23/vote-no-on-4/floridas-amendment-4-on-abortion-is-short-does-a-l/> [https://perma.cc/6RPZ-SC4V] (determining advertisement against Amendment 4 was mostly false because goal of amendment was to codify *Roe v. Wade*, not radically change abortion law).

<sup>20</sup> See Regan McCarthy, *What Could Florida’s 60% Threshold Mean for the State’s Proposed Abortion Amendment?*, WFSU PUB. MEDIA (Oct. 30, 2024, 11:06 AM), <https://news.wfsu.org/state-news/2024-10-30/what-could-floridas-60-threshold-mean-for-the-states-proposed-abortion-amendment> [https://perma.cc/P7CT-3VME].

<sup>21</sup> See Regan McCarthy, *Challenges Stack Up Against a State Website That Opposes Florida’s Abortion Amendment*, WFSU PUB. MEDIA (Sept. 12, 2024, 8:57 AM), <https://news.wfsu.org/state-news/2024-09-12/challenges-stack-up-against-a-state-website-that-opposes-floridas-abortion-amendment> [https://perma.cc/N7UU-28GD]; Gabrielle Russon, *Department of Health Sends Cease and De-*

Amendment 4 as a ballot measure, subjecting some who had signed to police visits.<sup>22</sup> These efforts, among others, were construed by many as inappropriate government interference in, and even sabotage of, the election process.<sup>23</sup>

On November 5, 2024, Florida voters cast their ballots, and the votes were tallied: 6,070,758 Floridians (57.17%) voted “Yes” on Amendment 4, and 4,548,379 others (42.83%) voted “No.”<sup>24</sup> Despite the majority of voters supporting Amendment 4, the measure did not pass.<sup>25</sup> In 2006, an Amendment titled “Requiring Broader Public Support for Constitutional Amendments or Revisions” was sponsored by the Florida Legislature to require at least a 60% approval by Florida voters in order for a proposed amendment or revision of the State Constitution to go into effect.<sup>26</sup> Ironically, this measure imposing a higher threshold for constitutional amendments passed by 57.78% of the vote.<sup>27</sup> Hence, by a frustratingly close margin, a simple majority was not sufficient for Amendment 4 to pass, and the six-week ban on abortion remains in effect in the State. It is this restrictive legal framework that Floridians must now contend with as they await renewed efforts from advocacy groups to repeal the ban during the 2025 legislative session.

Most women are not even aware that they are pregnant at six weeks, and virtually no medical conditions that pose substantial harm to the child or mother arise or are detectable at this stage in

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*sist Letter to TV Station Over Abortion Ad*, FLA. POL. (Oct. 7, 2024), <https://floridapolitics.com/archives/700182-department-of-health-sends-cease-and-desist-letter-to-tv-station-over-abortion-ad/> [<https://perma.cc/7MK2-M6PT>].

<sup>22</sup> See Margie Menzel, *Voting-Rights Advocates Say Florida Is Investigating Ballot Measure Petitions Too Close to the Election*, WFSU PUB. MEDIA (Sept. 15, 2024, 9:09 PM), <https://news.wfsu.org/state-news/2024-09-15/voting-rights-advocates-say-florida-is-investigating-ballot-measure-petitions-too-close-to-the-election> [<https://perma.cc/7CUF-FH9Z>].

<sup>23</sup> See, e.g., McCarthy, *supra* note 21.

<sup>24</sup> See *Amendment 4*, *supra* note 17.

<sup>25</sup> *Id.*

<sup>26</sup> See *Requiring Broader Public Support for Constitutional Amendments or Revisions*, FLA. DIV. OF ELECTIONS, <https://dos.elections.myflorida.com/initiatives/initdetail.asp?account=10&seqnum=63> [<https://perma.cc/2WMT-FHJZ>] (last visited Mar. 24, 2025).

<sup>27</sup> *Id.*

pregnancy.<sup>28</sup> Setting aside the preposterousness of what is effectively a blanket ban on abortion, the legislation is rife with omissions and ambiguities, which leaves medical providers at a loss, and the health of their patients in grave jeopardy.

There are several ambiguities within the defined terms of the law. “Fatal fetal abnormality,” for example, is defined as “a terminal condition that, in reasonable medical judgment, regardless of the provision of life-saving medical treatment, is incompatible with life outside the womb and will result in death upon birth or *imminently thereafter*.”<sup>29</sup> But how imminent is “imminently thereafter”? Is it minutes, hours, days, years? Numerous medical conditions are incompatible with life but have a survival range of mere seconds to young adulthood, and it is impossible to predict with any certainty where within that range each case will fall. Patau syndrome comes to mind, where an extra copy of chromosome 13 causes severe intellectual and physical disabilities that result in a median life expectancy of seven to ten days; of the children affected, 90% live less than one year.<sup>30</sup> Of additional note, many of these conditions are impossible to diagnose until an amniocentesis, which cannot be completed prior to fifteen weeks of gestation,<sup>31</sup> or the anatomy scan of the fetus, which cannot be completed prior to eighteen weeks of gestation<sup>32</sup> (assuming patients have access to standard obstetric care, which is not often the case), each procedure being well beyond the legal limit on termination under Florida law. I am reminded of a friend whose anatomy scan indicated that her baby had DiGeorge syndrome, where a microdeletion on chromosome 22 causes a constellation of defects significant for cardiac abnormalities and severely impaired immune function, subjecting the child to a lifetime

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<sup>28</sup> Izaguirre, *supra* note 11; *see infra* text accompanying notes 29–35.

<sup>29</sup> FLA. STAT. § 390.011(6) (2024) (emphasis added).

<sup>30</sup> Grant M. Williams & Robert Brady, *Patau Syndrome*, NAT’L LIBR. OF MED. (June 26, 2023), <https://www.ncbi.nlm.nih.gov/books/NBK538347/#:~:text=Patau%20syndrome%2C%20also%20called%20trisomy,trigger%20thumbs%2C%20and%20capillary%20hemangiomata> [https://perma.cc/JX2X-5B6B].

<sup>31</sup> Aditi Jindal et al., *Amniocentesis*, NAT’L LIBR. OF MED. (Aug. 14, 2023), <https://www.ncbi.nlm.nih.gov/books/NBK559247/> [https://perma.cc/62QS-F66N].

<sup>32</sup> Doaa Jabaz & Suzanne M. Jenkins, *Sonography 2nd Trimester Assessment, Protocols, and Interpretation*, NAT’L LIBR. OF MED. (Nov. 12, 2023), <https://www.ncbi.nlm.nih.gov/books/NBK570574/> [https://perma.cc/V34L-5G4V].



of intensive medical care if it is fortunate enough to survive past the early years.<sup>33</sup> On the very first day of my Labor and Delivery rotation in medical school, I encountered a young patient pregnant with a baby with holoprosencephaly—a congenital defect where the brain fails to develop normally.<sup>34</sup> Most afflicted babies do not survive beyond early infancy.<sup>35</sup> Our patient was forced to carry to term, endure the hardships and not immaterial risks of labor, and witness her baby die on its second day of life. Would her case qualify as a “fatal fetal abnormality”? Was her baby’s death “imminent” enough for legislators?

The definition of “gestation” is similarly unclear. It is defined as “the development of a human embryo or fetus as calculated from the first day of the pregnant woman’s last menstrual period.”<sup>36</sup> At first glance, the definition appears straightforward. However, it fails to address how gestation should be measured if the first day of the last menstrual period (“LMP”) is unknown, as is often the case, particularly if the patient in question is not actively attempting to become pregnant or has irregular menstrual cycles. Studies indicate that anywhere from 15% to 40% of pregnant women are unable to recall their LMP.<sup>37</sup> Assuming that this specific date is known to the patient, the law further fails to establish how this date is to be confirmed. Finally, the definition does not address the matter of days and its relation to the cutoff. Is the six-week cutoff exactly six weeks and zero days, or does it extend to six weeks and six days? The limit could reasonably be interpreted either way.

An exception to the time limit on terminations is granted to “save the pregnant woman’s life or avert a serious risk of imminent

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<sup>33</sup> See Alexandra E. Lackey & Maria Rosaria Muzio, *DiGeorge Syndrome*, NAT’L LIBR. OF MED. (Aug. 8, 2023), <https://www.ncbi.nlm.nih.gov/books/NBK549798/> [https://perma.cc/FQX3-238E].

<sup>34</sup> Sharanya Ramakrishnan & Joe M. Das., *Holoprosencephaly*, NAT’L LIBR. OF MED. (June 7, 2024), <https://www.ncbi.nlm.nih.gov/books/NBK560861/> [https://perma.cc/2T4K-8MPA].

<sup>35</sup> See *id.*

<sup>36</sup> FLA. STAT. § 390.011(7) (2024).

<sup>37</sup> See SPD Swiss Precision Diagnostics GmbH, *Accuracy of Recollection of Last Menstrual Period (LMP)*, CLEARBLUE, [https://es.clearblue.com/sites/default/files/HCP\\_Publications/Articles-Pregnancy/Accuracy\\_of\\_recollection\\_of\\_Last\\_Menstrual\\_Period.pdf](https://es.clearblue.com/sites/default/files/HCP_Publications/Articles-Pregnancy/Accuracy_of_recollection_of_Last_Menstrual_Period.pdf) [https://perma.cc/AL9L-ZJKP] (last visited Mar. 24, 2024).

substantial and irreversible physical impairment of a major bodily function of the pregnant woman other than a psychological condition.”<sup>38</sup> Frustratingly, this carveout is also subject to uncertainty and does not adequately consider various potential circumstances. For example, a family member was diagnosed with breast cancer while she was pregnant with her second child. She was thankfully in her third trimester and close enough to full-term that her healthcare team was able to induce labor shortly thereafter to deliver a healthy and viable baby, allowing her to begin her cancer treatment as early as possible. But what about those unfortunate women who receive a cancer diagnosis earlier in pregnancy but not early enough to terminate within the legal limit? Must they be forced to continue their pregnancies, even though deferring treatment diminishes their likelihood of surviving cancer? Again, the margins of “imminent” are unclear.

Immediately after the six-week ban went into effect, in an attempt to acknowledge legitimate concerns for the welfare of women, the Florida Agency for Health Care Administration engaged in emergency rulemaking on May 2, 2024, to clarify that the law’s life-saving treatment exception does cover the premature rupture of membranes, ectopic pregnancy, and molar pregnancy.<sup>39</sup> While a worthy effort to provide guidance, the mere fact that emergency rulemaking was found to be necessary demonstrates in and of itself the deficiencies in the law. Furthermore, when reviewed with the requisite medical knowledge that all obstetricians possess, the emergency rule is itself vague and inconsistent. The justification portion of the emergency rule references “preterm premature rupture of membranes (PPROM),” defined as the rupture of membranes (i.e., a mother’s water breaking) prior to the onset of labor *and* prior to full-term at thirty-seven weeks, while the text of the emergency rule instead references “premature rupture of membranes [(PROM)],” defined as the rupture of membranes prior to the onset of labor—a subtle, yet critical, distinction.<sup>40</sup> In addition, although most types of ec-

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<sup>38</sup> FLA. STAT. § 390.0111(1)(b) (2024).

<sup>39</sup> See 50 Fla. Admin. Reg. 1551 (May 2, 2024).

<sup>40</sup> *Id.*; see Shailja Dayal et al., *Preterm and Term Prelabor Rupture of Membranes (PPROM and PROM)*, NAT’L LIBR. OF MED. (Oct. 31, 2024), <https://www.ncbi.nlm.nih.gov/books/NBK532888/> [<https://perma.cc/R63L-Y5FN>].

topic pregnancies are irrefutably non-viable and require swift medical intervention to prevent the death of the mother, certain kinds, such as a cesarean scar ectopic pregnancy, can theoretically progress to viability.<sup>41</sup> It is, therefore, uncertain whether the law's exception is universally applicable to all ectopic pregnancies.

Another exception is provided to those seeking to terminate a pregnancy that is the result of "rape, incest, or human trafficking" if "the gestational age of the fetus is not more than 15 weeks as determined by the physician."<sup>42</sup> The law requires that the patient must provide a copy of "a restraining order, police report, medical record, or other court order or documentation providing evidence" that she is obtaining the termination because she is a victim of such.<sup>43</sup> However, the legislation does not define "rape," "incest," or "human trafficking." As those with legal experience are well aware, charges of rape, incest, and human trafficking are heavily contested and litigated, often taking years to come to an official legal resolution and hinging closely on the elements of codified definitions.<sup>44</sup> Under the current abortion ban, what constitutes "rape," "incest," or "human trafficking"? Is the evidence sufficient if a woman initiates the process through an official police, medical, or court record before the charge is proven in the eyes of the law? It must be noted, as well, that any of these evidentiary requirements often take weeks to obtain, making it exceedingly difficult to achieve care within the fifteen-week limit.

The scenarios discussed above are but a handful of the numerous ones implicated, drawn mostly from personal exposure. In isolation, each of these conditions may be statistically rare, but taken as a whole, they are certainly significant and thus warrant due consideration and acknowledgment. Regardless of one's moral or religious

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<sup>41</sup> See Tyler Mummert & David M. Gnugnoli, *Ectopic Pregnancy*, NAT'L LIBR. OF MED. (Aug. 8, 2023), <https://www.ncbi.nlm.nih.gov/books/NBK539860/> [https://perma.cc/VKB5-N3P6].

<sup>42</sup> FLA. STAT. § 390.0111(1)(d).

<sup>43</sup> *Id.*

<sup>44</sup> See, e.g., Kari Hong, *A New Mens Rea for Rape: More Convictions and Less Punishment*, 55 AM. CRIM. L. REV. 259, 259 (2018); Jan Ransom, 'Nobody Believed Me': How Rape Cases Get Dropped, N.Y. TIMES (Sept. 8, 2021), <https://www.nytimes.com/2021/07/18/nyregion/manhattan-da-rape-cases-dropped.html> [https://perma.cc/7EAR-L32R].

beliefs, these scenarios are medical realities that cannot be dismissed. What lawmakers fail to understand, or perhaps willfully ignore, is that most later-term abortions are driven not by a wanton disregard for human life but rather by the most tragic and heart-breaking of medical circumstances.

Typically, the law is composed of both legislation and ensuing caselaw, which address the nuances of such legislation to fill in any gaps and resolve ambiguities in the application of the legislation. But in the case of pregnancy termination in Florida, the stakes are so significant and the penalty so steep—a violation is considered a third-degree felony—that healthcare providers are naturally unwilling to be the sacrificial lambs required to delineate the boundaries of the law, even if they believe in their “reasonable medical judgment” that their actions would be in compliance with the law.<sup>45</sup> Without caselaw to fill in the holes, there is an effective stalemate on abortion care in Florida, even within the confines of the written law. The glaring omissions and manifold ambiguities within the legislation indicate, at best, negligence on the part of legislators with respect to their basic civic duties and, at worst, a cruel cunning aimed at utilizing uncertainty as a hefty deterrent. Either alternative is unacceptable.

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<sup>45</sup> FLA. STAT. § 390.0111(1).