

TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS

27 February 2015

Speakers:

-Deborah VanDerhei, *National Director, Consortium of Abortion Providers (CAPS), Planned Parenthood Federation of America* (“**PPCAPS**”)

-Anne-Marie Grewer, WHNP-BC, *Associate Director of Training & Resource Development, Consortium of Abortion Providers (CAPS), Planned Parenthood Federation of America* (“**PP2**”)

-Two actors posing as Fetal Tissue Procurement Company (“**Buyer**”)

frame counts are approximate

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PPCAPS: Hey.

Buyer: Hi. How are you doing?

PPCAPS: Good, I'm meeting my colleague but can I join you?

Buyer: Okay sure, yeah.

PPCAPS: Is [Name] here?

Buyer: Yeah, my colleague is here, he just went to go get some Emergen-C at the little shop around the corner because--

PPCAPS: He's not feeling well?

Buyer: Yeah, well we both actually, and the week before we came here, we both had the same thing, like phlegm in the throat and all of that. So, I think we're better for the most part. At least, I got better for the most part, but he's still like--

PPCAPS: Good. Scratchy?

Buyer: So.

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PPCAPS: May I have a glass of--do you have a dark lager? I'll have the one from New Zealand. So, I talked with my--oh, here's my friend. I talked with my colleague, who's gonna do that panel.

Buyer: Oh! In Washington, right? In Washington, DC.

PPCAPS: Yeah. Would you mind if we had a four-way call before the panel? Just to pick your brain?

Buyer: Not at all! Yeah, that could be good. We--

PPCAPS: Hi. Annemarie, this is--

Buyer: [Name]. [Company]. Good to meet you.

PP2: Hi [Name], good to meet you.

Buyer: Are you with CAPS as well or?

PP2: Yes.

PPCAPS: So [Name] and [Name] are based--

PP2: Hi, Annemarie.

PPCAPS: This is Annemarie, she's my colleague from CAPS.

PP2: Yeah.

PPCAPS: Nurse practitioner. And helps all the affiliates with a number of things, including tissue disposal and donation, which is, so they're here representing an organization that would like to collect tissue for donation to harvest the stem cells.

Buyer: For research.

PP2: Oh, okay.

PPCAPS: And they're located in southern California, and Deb knows them. But Deb's affiliate uses a different provider.

Buyer: Everyone in California is pretty much already partnered up. That's what's been difficult. We're very new, we're only about a year in business. And so that's what's been difficult about the first year.

PP2: Sure. Sure. And so are you guys trying to work with other states, and do--

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Buyer: Yeah, and so we've been, that's what we've been having to do is kind of cast our gaze farther afield to see where we might be able to go. We do other tissue procurements as well, a lot of adipose tissue--

PPCAPS: In southern California!

Buyer: From liposuction. Exactly, [laughter] it's wonderful.

PP2: I'm familiar very much with adipose tissue, I don't really want to talk about itf!

Buyer: Oh! Oh, people always say that.

PPCAPS: She looks fabulous! I can't believe that.

Buyer: She does!

PP2: I have plenty of shrunken adipose tissue, you can have all you want!

Buyer: Just think. It's more stem cells for you!

PP2: That's right.

PPCAPS: Yeah right. If only you could take them. Without me having to have surgery. So they exhibited at NAF last year, which is where Deb met them. And they're here of course as exhibitors, and they're going to the National Conference in DC, and they're going back to NAF, yep?

Buyer: Yep.

PPCAPS: To sort of identify, independent providers, and how reliable they'll be, and trying to identify affiliates within Planned Parenthood that do procedures to 16 weeks and over, and they're willing to send a tech on-site, but they'd like a minimum of 4 specimens, 4 samples--

Buyer: Per week. Yeah.

PPCAPS: To fly somebody--

Buyer: She's got it down! She knows all of our specifications.

PP2: Of course. Right. You got their cards? Okay.

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PPCAPS: Yeah. And so Kristin's, you know we're doing that panel, at Affinity Day, on disposal and donation, and Roger's doing it with Kristin, and so is Suzanne--

PP2: From, uh, from--yeah.

PPCAPS: Kristin just [inaudible]. So we're gonna, Kristin and I were gonna chat with these guys on the telephone. While you were getting Emergen-C we--

PP2: Good.

PPCAPS: And just to kind of identify some of the issues that are--

Buyer: Oh, Kristin Flood!

PPCAPS: Oh!

Buyer: I met her at NAF. Yeah, we met her.

PPCAPS: Oh good.

Buyer: Yeah, and she actually, she's the one who sent Deborah over to our table.

PPCAPS: Well then you know everybody. So you've known Kristin longer than I have 'cause--

Buyer: Oh, well I only, she and I haven't communicated, she just made the connection with Deborah. And Deb took it from there, so.

PPCAPS: Well I just asked her now and she said yeah, but I didn't tell her who they were, who you were.

Buyer: Yeah, that's funny. She was very helpful.

PPCAPS: Yeah. She is, she's very, attorney, she's.

Buyer: Okay.

PPCAPS: Just as bright as Annemarie and I.

PP2: Oh, way way brighter, but don't tell anybody.

PPCAPS: So yeah, she's gonna lead this discussion.

Buyer: Okay, so she'll be the one leading the panel. Okay.

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PPCAPS: Along with her mentor Roger Evans, who's also an attorney, and has been running the Litigation & Law Department, at PPFA for many years, who now is on as Senior Advisor.

Buyer: Okay.

PPCAPS: And then, somebody from an affiliate.

Buyer: Yeah, yeah. So what are their thoughts, Roger and--Roger and Kristin, on, you know, specimen procurement, and remuneration? Have you guys talked about that?

PPCAPS: What I said earlier. That we advise that, um, they not do it.

Buyer: So that's their--

PPCAPS: I mean, if they do it, that's fine! We're not gonna say no. But we want them to think about, really, the New York Times headline.

Buyer: To go into it--

PPCAPS: Yeah. How could this go bad? Is this really worth getting--I don't even know what in general, what a specimen generally brings in?

Buyer: Right. Yeah. I mean it really varies from place to place, we would start at probably \$100 per specimen is what we've been quoting people.

PPCAPS: Yeah. So--

Buyer: And that can, some people do more, some people do less, and it just kind of depends--

PPCAPS: But we have independent colleagues who generate a fair amount of income doing this. And if they have smaller margins--

Buyer: At the independent clinics.

PPCAPS: Or don't have the ability to fundraise, because they're not a non-profit, that's really helpful.

Buyer: Right. Because all of it is just going to get thrown away anyway. So.

PP2: There's a small subset of women, and this is unscientific, so I'm not quoting any specific, there's a small subset of women who feel like that's a lovely thing to do, and like, you know, mitigates some of my own ambivalence about having an abortion procedure because I can do this, right? You know--

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Buyer: Right. Yeah.

PP2: So, I mean, there's a little bit of--

Buyer: Yeah, I think it puts a silver lining on what can be a difficult experience for some people.

PP2: Right. And then there are other people who can be like no, I don't want to do that. So you know it's individual, clearly, but it can be something that is really helpful for some of the women that we see because they feel like they're making a difference that way and it makes them feel good about what it is going on. So. Yeah. Are you guys working with any Planned Parenthoods right now?

Buyer: We're talking with a couple right now, and we're doing actually site visits to one of them in I think just the next couple of weeks here, just to finalize all the logistics and everything so.

PP2: Good.

PPCAPS: Other than sharing with you some of the concerns of the affiliates at this meeting that we're having in mid-March, what else can we--and then we'll chat with Kristin--but what else can we do to help?

Buyer: Well, I mean--you mean in terms of, for us specifically, for [Company]?

PPCAPS: [nods]

Buyer: I mean, a list of the top affiliates that are, you know, 16 weeks and over, and a significant volume in that window, would be really really helpful.

PPCAPS: How did you find the two that you're chatting with?

Buyer: We found--actually we met both of them at the Society for Family Planning in October.

PP2: Oh, okay. Good.

Buyer: Yeah. And it's, there's still some question with both of them actually as to how things will play out in terms of specimen quality, and volume and all of that, but I think you take, at this point you take what you get and then move forward.

PPCAPS: Yeah. So then did you sit in on that cervical prep lecture because preparation depends on how intact the specimen--

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Buyer: That's exactly, yeah. Cervical prep is, that's the major factor, apart from provider skill, that's really gonna impact the quality of the specimen, at the end. Yeah.

PP2: So, you'll have to drill that down for me. If somebody is doing cervical prep with medications, does that have a--

Buyer: Yep. So, it's the amount of dilation basically, and how macerated is the specimen when it's coming out.

PP2: Oh, okay. But pre-op medications don't necessarily impact that--

Buyer: And no digoxin. Digoxin nukes the stem cells. Yeah, no. I have a colleague who not at [Company], but who tried to do a cell isolation on a liver from a dig'ed specimen once, and just to try it, they were just gonna try it, just for kicks, to see what happens, and they got nothing. Because it was already dead, the cells were, you know the membranes were ruptured, like all of it, nothing.

PP2: Yeah.

Buyer: And that's the thing too, is if you think of an actual liver sample, there's lots of cells in that tissue, but there's only a certain ratio, a certain proportion of them are stem cells, and then--

PP2: In my liver there'd be none!

PPCAPS: I will drink to that!

Buyer: Cheers to you. Speaking of which, and if there's a specific type of stem cell they're looking for, then the proportion goes down even more, so that's why, when you have very specific studies, which pretty much every scientist has a slightly different thing that they're doing, it's really important to have the whole thing so that they can pull whatever they're specifically looking for out of it.

PP2: So the same is true here.

Buyer: Exactly. So yeah, that's why intactness is always important.

PP2: Well, and you know I mean again, I don't know everyone's practice, but there used to be digoxin typically not until later, I mean if you're open to 16 weeks plus, that won't be--

Buyer: Yeah, we're hearing 18 to 20 is when people start giving it. And apparently there are some affiliates that don't use it at all. In New York, it's not used. Now, are there PPFA protocols about, like mandating when digoxin needs to be used? How does that--

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PP2: Yeah. As with all Planned Parenthood standards, there can be waivers acquired to practice differently, and so when you think about Planned Parenthood New York, they have done that. They have said we need to practice differently, we want to practice differently, and so we're applying for a waiver to do something different than what's normally--

Buyer: Is New York the only one that's done that?

PP2: I don't know the answer to that.

Buyer: Because that would be another variable on that list, if you wanted to do that for me. I don't want to load you up--

PPCAPS: I don't know if we know that--

PP2: Yeah, we may not know. Nonetheless, nobody is doing it at 16 to 18. I'm sure.

Buyer: Right. I mean if there's another affiliate out there though, that's doing procedures past 20 weeks without dig, I mean that's excellent too, so that would be--

PP2: Yeah. That I may not know.

PPCAPS: Well great. So, is your email on your card? I have your card, so then I'll--

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PPCAPS: Set up a time. I'm going to be working with Kristin for the next four days, so, the first four days of next week. So I'll find a time when we're both free, to call you and schedule--

Buyer: And what, and is there anything specifically, so I can prepare for that, is there any--what are you interested in?

PPCAPS: No, just, sort of, just what you said. That you know, what you're looking for.

Buyer: Oh, so she can hear the same stuff out of my mouth that I--

PPCAPS: In fact, I could probably just tell her! But yeah, it would just be helpful. And she might have questions for you as well as she prepares our presentation.

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Buyer: That would be good. And she can also represent as well kind of what Planned Parenthood National's thoughts are feelings are at this point on how contracts are set up and all of that, as well as remuneration and--

PPCAPS: Well that contract would be between you and the affiliate--

Buyer: Right, but I mean in terms of just what the guidelines are and what the institutional culture and stuff--she's got her pulse on that.

PPCAPS: She does have that.

Buyer: Because the messaging is coming from her at this point, right? Or from her and Roger.

PPCAPS: Her and then the person who's in charge of Litigation & Law.

Buyer: Roger, okay.

PPCAPS: And then the Senior Advisor, Roger. And we did discover who the other person was on the panel, it was Jennifer Dunn. From California. The attorney presenting, maybe facilitating that panel.

Buyer: Oh, at the NAF meeting.

PPCAPS: Yeah. And she, I just asked this morning and she's shared her slide set with Kristin already.

Buyer: Okay.

PPCAPS: She had asked all of us if we still had last year's agenda and nobody did. But somebody did, so.

Buyer: That's good. I'm really, I was stoked today to hear that that's gonna be one of the sessions, because it's really important for people to be talking about.

PPCAPS: Well it's an issue that you might imagine we're not really that comfortable talking about on email.

Buyer: Oh.

PPCAPS: And so we want to have the conversation in person.

Buyer: Yeah.

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PPCAPS: And it's not so much that we're uncomfortable, we're just trying to get others to engage. And we didn't know if others would engage on an email conversation.

Buyer: Yeah, in order to get everybody--

PPCAPS: Everybody's together, talking, and it becomes generative.

Buyer: Yeah.

PPCAPS: Okay, so I'll be in touch?

Buyer: Excellent, we'll see you guys at dinner.

PP2: Nice to meet you. Thank you for your good work.

Buyer: Definitely, you too.