

Dear Board of Directors, St. Vincent Hospital:

We, the undersigned, are concerned that your pending merger with CHRISTUS Health will compromise our access to comprehensive family planning services and our freedom to die with dignity at St. Vincent Hospital. The people of Northern New Mexico rely upon you as their primary source of health care.

We hear and appreciate your assurances that services will not change after the merger. However, such guarantees have been abandoned in similar mergers in Austin, Texas, Little Rock, Arkansas, and Carrington, North Dakota, among other places, after the Church changed its application of the Ethical and Religious Directives (ERDs).

For example, mere days after the U.S. Conference of Catholic Bishops revised the Directives in 2001, a Catholic health system in Austin, Texas--Seton Health Care--broke its longstanding promise to Austin city officials that sterilizations would continue to be provided in a city-owned hospital that Seton Health Care managed.

In the past, CHRISTUS has initiated its own such changes after a merger is signed. Not long after CHRISTUS acquired McCuiston Hospital, in Paris, Texas, it removed maternity services from the hospital, separating delivery and tubal ligation services from critical emergency room facilities.

We urge you to protect us against these possibilities and to share with the community the details of how you intend to do so. In your legal agreement with CHRISTUS Health, please include language that not only ensures compliance with state laws, but that also ensures that patients will continue to have access to comprehensive family planning services and can control their own end of life decisions, without segregation of services that conflict with the ERDs into different wards or locations.

# TAKE ACTION!

**Sign the petition** asking the Board of Directors of St. Vincent Regional Medical Center to write guarantees into their merger agreement with CHRISTUS Health that comprehensive reproductive health and end-of-life care will not be compromised.

Name & Signature	Email	Phone	Address	Yes, I want to receive breaking news, action alerts and other important information related to this issue.	Yes, you may include my name in a public list of petition signers.
First: Last: Signature:			Address: City: State: Zip:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
First: Last: Signature:			Address: City: State: Zip:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
First: Last: Signature:			Address: City: State: Zip:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
First: Last: Signature:			Address: City: State: Zip:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO



**www.SVHmerger.org**

**FAX: (505) 266-5916**