**South Carolina General Assembly**

126th Session, 2025-2026

**H. 4009**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Magnuson, Cromer, Gilreath, Harris, Edgerton, White, Beach, Terribile, Lawson, Rankin, Kilmartin, Morgan, Huff, Pace and Burns

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Introduced in the House on February 13, 2025

Currently residing in the House Committee on **Medical, Military, Public and Municipal Affairs**

Summary: South Carolina Medical Freedom Act

**HISTORY OF LEGISLATIVE ACTIONS**

 Date Body Action Description with journal page number

 2/13/2025 House Introduced and read first time (House Journal‑page 45)

 2/13/2025 House Referred to Committee on **Medical, Military, Public and Municipal Affairs** (House Journal‑page 45)

View the latest  [legislative information](https://www.scstatehouse.gov/billsearch.php?billnumbers=4009&session=126&summary=B)  at the website

**VERSIONS OF THIS BILL**

[02/13/2025](https://www.scstatehouse.gov/sess126_2025-2026/prever/4009_20250213.docx)

A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS BY ENACTING THE “SOUTH CAROLINA MEDICAL FREEDOM ACT” BY ADDING CHAPTER 141 TO TITLE 44 SO AS TO PROVIDE THAT EVERY PERSON HAS THE RIGHT TO REFUSE MEDICAL PROCEDURES, MEDICAL TREATMENTS, VACCINES, AND OTHER MEDICAL CARE AND TO PROTECT THOSE PERSONS FROM DISCRIMINATION; TO PROTECT HEALTHCARE PROFESSIONALS FROM DISCIPLINARY ACTION FOR VOICING CONCERNS ABOUT MEDICAL MANDATES OR TREATMENTS OR FOR ADVOCATING FOR PATIENTS’ RIGHTS; TO CREATE A CAUSE OF ACTION TO PROTECT HEALTHCARE PROFESSIONALS EXPERIENCING RETALIATION; AND FOR OTHER PURPOSES.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. This act may be cited as the “South Carolina Medical Freedom Act.”

SECTION 2. The General Assembly finds and declares the following:

 (1) During the years 2020 through 2022, federal government agencies collaborated with medical organizations, media personalities, social media platforms, and other influential entities to orchestrate a coordinated and coercive propaganda campaign. This campaign was characterized by psychological pressure and public shaming directed at individuals who declined COVID‑19 vaccinations, coupled with the aggressive suppression of dissenting views, including those expressed by esteemed medical and scientific professionals with extensive credentials.

 (2) This coordinated effort created an environment conducive to the implementation of unconstitutional and unethical medical mandates at federal, state, and local levels. These mandates disregarded individual autonomy and the principles of informed consent and due process, which are cornerstones of ethical medical practice.

 (3) As a result of these mandates, thousands of Americans in the public and private sectors, including South Carolina residents, were unjustly terminated from their employment or lost retirement benefits for exercising their right to medical freedom. Many others were denied access to essential public accommodations, violating their constitutional rights and creating severe social and economic repercussions.

 (4) Emerging peer‑reviewed studies and post‑marketing surveillance data have revealed that COVID‑19 vaccinations, contrary to the assertions of the propaganda campaign:

 (a) provided a substantially lower level of protection against contracting and transmitting COVID‑19 than initially claimed, undermining the justification for their widespread and mandatory administration; and

 (b) were associated with increased risks to heart health, including myocarditis and pericarditis, particularly in younger populations, as well as potential adverse effects on fertility, raising significant public health concerns.

 (5) The State of South Carolina bears a profound ethical and constitutional obligation to safeguard its citizens from any future recurrence of coercive medical mandates or campaigns that compromise the principles of bodily autonomy, medical ethics, and public trust in healthcare.

SECTION 3. Title 44 of the S.C. Code is amended by adding:

CHAPTER 141

South Carolina Medical Freedom Act

 Section 44‑141‑10. The right of a person to refuse any medical procedure, medical treatment, device, vaccine, or prophylactic shall not be questioned or interfered with in any manner. The right of a person to public accommodation, to the equal protection of the law, and to seek restitution for harm shall not be denied or infringed upon because of the exercise of the rights contained in this chapter.

 Section 44‑141‑20. Healthcare professionals, including physicians, nurses, and allied health providers, shall be protected from any disciplinary action, loss of licensure, or professional penalties for:

 (1) voicing concerns or dissent regarding medical mandates, treatments, or protocols;

 (2) advocating for patients’ rights to informed consent, medical freedom, or access to alternative treatments; and

 (3) disclosing information about unethical practices, coercive mandates, or improper actions by healthcare institutions or governing bodies.

 Section 44‑141‑30. State medical licensing boards, professional oversight organizations, or any other regulatory authority shall not:

 (1) revoke, suspend, or threaten the licensure of a healthcare professional for engaging in protected speech or whistleblowing activities related to public health policies or medical mandates; or

 (2) investigate or sanction professionals solely for their public or private statements opposing official medical recommendations or practices.

 Section 44‑141‑40. A cause of action is hereby created for any healthcare professional who experiences retaliation, intimidation, or professional harm as a result of engaging in protected activities under this chapter. Such individuals may seek:

 (1) injunctive relief to prevent or reverse any adverse actions; and

 (2) compensatory and punitive damages, including reasonable attorney’s fees and court costs.

 Section 44‑141‑50. Any action taken by a regulatory body against a healthcare professional that is alleged to violate this chapter shall be subject to expedited judicial review. The burden of proof shall rest on the regulatory body to demonstrate, by clear and convincing evidence, that the action was unrelated to the professional’s exercise of protected activities under this chapter.

SECTION 4. This act takes effect upon approval by the Governor.

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