

119TH CONGRESS
2D SESSION

H. R. 7651

To provide a private right of action for children and the parents of children whose healthy body parts have been damaged by medical professionals practicing or participating in certain interventions.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 23, 2026

Mr. ONDER (for himself and Mr. KENNEDY of Utah) introduced the following bill; which was referred to the Committee on the Judiciary

A BILL

To provide a private right of action for children and the parents of children whose healthy body parts have been damaged by medical professionals practicing or participating in certain interventions.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Chloe Cole Act of
5 2026”.

6 **SEC. 2. DEFINITIONS.**

7 In this Act:

1 (1) CHILD.—The term “child” means an indi-
2 vidual under 18 years of age.

3 (2) COVERED INTERVENTIONS.—

4 (A) IN GENERAL.—

5 (i) INTERVENTIONS.—The term “cov-
6 ered intervention” means providing any of
7 the items and services described in clause
8 (ii) for the purpose of—

9 (I) intentionally delaying, halting,
10 or disrupting the natural development
11 of the individual’s body, including the
12 onset or progression of puberty, so
13 that it does not develop or halts devel-
14 oping to correspond to the individual’s
15 sex; or

16 (II) intentionally changing the in-
17 dividual’s body, including the individ-
18 ual’s external appearance or biological
19 functions, to no longer correspond to
20 the individual’s sex.

21 (ii) ITEMS AND SERVICES.—The items
22 and services described in this clause are—

23 (I) the use of puberty blockers,
24 including gonadotropin releasing hor-
25 mone agonists and antagonists;

1 (II) the use of sex hormones,
2 such as androgen blockers, estrogen,
3 anti-estrogen, progesterone, testos-
4 terone, or dihydrotestosterone
5 blockers; and

6 (III) surgical procedures that at-
7 tempt to transform an individual's
8 physical appearance or that attempt
9 to alter or remove an individual's sex-
10 ual organs.

11 (B) EXCLUSIONS.—The term “covered
12 intervention” does not include any of the fol-
13 lowing:

14 (i) Appropriate and medically nec-
15 essary procedures to treat a verifiable dis-
16 order of sexual development, including an
17 individual born with 46 XX chromosomes
18 with virilization, with 46 XY chromosomes
19 with undervirilization, or having both ovar-
20 ian and testicular tissue.

21 (ii) The treatment of any infection, in-
22 jury, disease, or disorder that has been
23 caused or exacerbated by the performance
24 of an intervention described in subpara-
25 graph (A) without regard to whether the

1 intervention was performed in accordance
2 with State or Federal law or whether the
3 intervention is covered by the private right
4 of action under section 4.

5 (iii) Any intervention undertaken be-
6 cause the individual suffers from any diag-
7 nosed and verifiable condition of the body's
8 organ systems, including the following:

9 (I) Traumatic bodily injuries
10 (such as fractures, organ rupture, or
11 penetrating trauma).

12 (II) Congenital structural anoma-
13 lies of major organs or systems, in-
14 cluding the cardiovascular, res-
15 piratory, renal, hepatic, neurological,
16 or musculoskeletal systems.

17 (III) Acute illnesses with a high
18 probability of rapid mortality.

19 (3) DETRANSITION TREATMENT.—The term
20 “detransition treatment” means any treatment,
21 medical intervention, or surgery, that stops, reverses
22 the effects of, or aids in the recovery from the ef-
23 fects of, a prior covered intervention.

24 (4) HEALTH CARE PROFESSIONAL.—The term
25 “health care professional” means an individual who

1 is licensed, certified, or otherwise authorized by the
2 laws of a State to administer health care in the ordi-
3 nary course of the practice of his or her profession
4 or performing such acts which require such licen-
5 sure.

6 (5) PARTICIPATE.—The term “participate”,
7 with respect to acts constituting a covered interven-
8 tion as defined in paragraph (1), means directly en-
9 gaging in the planning, authorization, prescription,
10 administration, or performance of any such act, in-
11 cluding any of the following:

12 (A) Prescribing puberty blockers, sex hor-
13 mones, or related medications with the intent to
14 delay, halt, or interrupt an individual’s puberty
15 or to alter an individual’s physical appearance
16 or reproductive function to align with an iden-
17 tity differing from his or her sex.

18 (B) Administering medications or treat-
19 ments described in subparagraph (A) with such
20 intent, whether by injection, oral delivery, or
21 other means.

22 (C) Performing surgical procedures that
23 attempt to transform an individual’s appear-
24 ance to no longer correspond to the individual’s
25 sex as part of a covered intervention.

1 (D) Authorizing or directing such covered
2 intervention as a supervising health care profes-
3 sional or institutional representative.

4 (E) Knowingly planning or coordinating
5 the provision of treatments or procedures de-
6 scribed above in subparagraph (A), (C), or (D)
7 with the intent to facilitate a covered interven-
8 tion.

9 (6) SEX.—The term “sex” means a person’s
10 immutable biological classification, determined at the
11 moment of conception, as either male or female, as
12 follows:

13 (A) The term “female” is a person who
14 naturally has, had, will have, or would have but
15 for a congenital anomaly or intentional or unin-
16 tentional disruption, the reproductive system
17 that produces, transports, and utilizes the large
18 gamete (ova) for fertilization.

19 (B) The term “male” is a person who nat-
20 urally has, had, will have, or would have but for
21 a congenital anomaly or intentional or uninten-
22 tional disruption, the reproductive system that
23 produces, transports, and utilizes the small ga-
24 mete (sperm) for fertilization.

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1 **SEC. 3. PRIVATE RIGHT OF ACTION.**

2 (a) IN GENERAL.—An individual subjected as a child
3 to a covered intervention, or the parents or legal guardians
4 of such individual, may bring a civil action in an appro-
5 priate district court of the United States for damages
6 against any health care professional, hospital, or clinic
7 who participates in the covered intervention on that child.
8 Such a cause of action shall be available regardless of
9 whether the alleged covered intervention occurred before,
10 on, or after the date of enactment of this Act.

11 (b) DAMAGES.—Damages available pursuant to such
12 an action may include—

13 (1) compensatory damages, including all eco-
14 nomic damages associated with undoing, correcting,
15 or ameliorating the effects or results of any covered
16 intervention;

17 (2) non-economic damages for emotional dis-
18 tress and pain and suffering; and

19 (3) punitive damages, if the claimant proves by
20 clear and convincing evidence that the defendant
21 against whom punitive damages are sought acted
22 maliciously, intentionally, fraudulently, or recklessly.

23 (c) STRICT LIABILITY.—Any health care profes-
24 sional, hospital, or clinic whose participation in a covered
25 intervention on a child after the date of enactment of this
26 Act is proven by clear and convincing evidence shall be

1 strictly liable for damages for any such intervention. If
2 a treatment qualifies under an exception specified in
3 clauses (i) through (iii) of section 2(2)(B), and that is
4 raised as an affirmative defense to a violation of this Act,
5 the health care professional, hospital, or clinic shall bear
6 the burden of proving by clear and convincing evidence
7 that such exception applies.

8 (d) CIRCUMSTANCES DESCRIBED.—The cir-
9 cumstances described in this subsection are that—

10 (1) the defendant or child traveled in interstate
11 or foreign commerce, or traveled using a means,
12 channel, facility, or instrumentality of interstate or
13 foreign commerce, in furtherance of or in connection
14 with the participation in the covered intervention;

15 (2) the defendant used a means, channel, facil-
16 ity, or instrumentality of interstate or foreign com-
17 merce in furtherance of or in connection with the
18 participation in the covered intervention;

19 (3) any payment of any kind was made, directly
20 or indirectly, in furtherance of or in connection with
21 the participation in the covered intervention using
22 any means, channel, facility, or instrumentality of
23 interstate or foreign commerce or in or affecting
24 interstate or foreign commerce;

1 (4) the defendant transmitted in interstate or
2 foreign commerce any communication relating to or
3 in furtherance of the participation in the covered
4 intervention using any means, channel, facility, or
5 instrumentality of interstate or foreign commerce or
6 in or affecting interstate or foreign commerce by any
7 means or in any manner, including by computer,
8 mail, wire, or electromagnetic transmission;

9 (5) any instrument, item, substance, or other
10 object that has traveled in interstate or foreign com-
11 merce was used to perform the covered intervention;

12 (6) the covered intervention occurred within the
13 District of Columbia, the special maritime and terri-
14 torial jurisdiction of the United States, or any terri-
15 tory or possession of the United States; or

16 (7) the covered intervention otherwise occurred
17 in or affected interstate or foreign commerce.

18 **SEC. 4. RULES OF CONSTRUCTION.**

19 (a) NO WAIVER.—No liability for a health care pro-
20 fessional under these provisions may be waived.

21 (b) AMBIGUITIES.—Any ambiguities shall be resolved
22 against any party found to have engaged in participation
23 in a covered intervention on a child.

24 (c) STANDARDS OF CARE.—In any cases in which a
25 covered intervention on a child is shown to have occurred

1 before the date of enactment of this Act, there is limited
2 deference to prevailing standards of care to the extent that
3 such standards contradict the intent of this Act and it is
4 shown that the health care professional knew or should
5 have known that such standards of care were in serious,
6 scientific, and medical dispute at the time of the covered
7 intervention.

8 (d) PROVISION OF INFORMATION.—Nothing in this
9 Act shall be construed to prohibit a health care profes-
10 sional from providing information about all available treat-
11 ment options, discussing risks and benefits, or expressing
12 professional medical opinions, so long as such actions do
13 not constitute participation in a covered intervention.

14 **SEC. 5. STATUTE OF LIMITATIONS.**

15 An action under section 3 may be brought within 25
16 years from the date of the eighteenth birthday of an indi-
17 vidual subjected to a covered intervention as a child or
18 within 4 years from the time the cost of a detransition
19 treatment is incurred, whichever date is later.

20 **SEC. 6. SEVERABILITY.**

21 If any provision of this Act, or the application of such
22 a provision to any person or circumstance, is held to be
23 unconstitutional, the remainder of this Act, and the appli-

1 cation of the provision to any other person or cir-
2 cumstance, shall not be affected.

