

Early Abortion Options

Abortion Pill / Medication Abortion With Mifepristone and Misoprostol	Aspiration Abortion (Suction or Vacuum Aspiration)
1. How far along in the pregnancy can I be?	
Up to 9 weeks from the first day of your last period	Up to 12 weeks from the first day of your last period
2. What will happen?	
<p>The abortion takes place at home.</p> <ul style="list-style-type: none"> • <i>In the office</i>, you swallow the abortion pill (mifepristone). Most women feel fine after taking mifepristone. Some women have nausea. • <i>At home</i>, 6-72 hours later, you insert the misoprostol pills. • The abortion starts 1-4 hours after you take the misoprostol. You have heavy bleeding and cramps for a couple of hours. • You return to the office about 1 week later. 	<p>The abortion takes place in the office.</p> <ul style="list-style-type: none"> • The actual abortion procedure takes 5 to 10 minutes. • The doctor puts instruments in your vagina and uterus to remove the pregnancy. • You return to your regular doctor or to the office where you had the abortion 1-2 weeks later.
3. How painful is it?	
Women have mild to very strong cramps off and on during the abortion. Pain pills help.	Women have mild to very strong cramps during the abortion. Pain pills help.
4. How much will I bleed?	
Heavy bleeding with clots is common during the abortion. After that, lighter bleeding may continue off and on for 1-2 weeks or more.	Most women have light bleeding for 1-7 days. Bleeding may continue off and on for a few weeks.
5. How much does it cost?	
For both types of abortion, the exact cost depends on where you go..	
6. Can the abortion fail?	
The pills work 98-99% of the time. If the pills fail, you must have an aspiration abortion.	It works 99% of the time. If it fails, you must have a repeat aspiration.

Abortion Pill / Medication Abortion (Mifepristone or Mifeprex)	Aspiration Abortion (Suction or Vacuum Aspiration)
7. Can I still have children afterwards?	
YES. Neither type of abortion lowers your chances of getting pregnant or staying pregnant in the future.	
8. Is it safe?	
Both pills have been used safely for over 10 years. Big problems are rare. Medication abortion is at least 10 times safer than continuing a pregnancy.	Aspiration abortion has been done safely for over 25 years. Abortion in the first 12 weeks leads to very few problems. Abortion is at least 10 times safer than continuing a pregnancy.
8. What are the advantages?	
<ul style="list-style-type: none"> + You won't have shots, anesthesia, or instruments in your body + It may feel more natural, like a miscarriage. + It can be done earlier in the pregnancy than an aspiration abortion. + Being at home instead of in an office may be more private. + You can choose to have someone with you, or you can be alone. 	<ul style="list-style-type: none"> + It is over in a few minutes. + It works 99% of the time. + You see less bleeding than you would with a medication abortion. + Medical staff members are with you during the abortion. + It can be done later in the pregnancy than a medication abortion.
9. What are the disadvantages?	
<ul style="list-style-type: none"> - It takes 1-2 days to complete the abortion. - It is not the same for all women. - Bleeding can be very heavy and may last longer than with an aspiration abortion. - Cramps can be severe and last longer than with an aspiration abortion. - It cannot be done as late in pregnancy as an aspiration abortion. - It cannot end a tubal pregnancy. 	<ul style="list-style-type: none"> - A doctor must insert instruments inside the uterus. - Anesthetics & pain medicines may cause side effects. - You have less control over the abortion procedure and who is with you. - The vacuum aspirator may seem noisy. - It cannot be done as early in pregnancy as a medication abortion. - It cannot end a tubal pregnancy.

MVA CONSENT FORM

____ I request a Manual Vacuum Aspiration (MVA), a procedure that will empty my uterus. This procedure may be used as an aspiration abortion or as treatment for a miscarriage, a failed medication abortion or for abnormal uterine bleeding.

____ **I understand that if I am pregnant, my three options regarding this pregnancy are parenthood, adoption, and abortion. I understand that if I am pregnant, the MVA will end my pregnancy.**

____ I understand that before the MVA, I may have blood tests done to check me for anemia and I will have to document my Rh type by donor card, prior blood test or a new blood test. If I am Rh negative, I will get a shot of MicRhogam.

____ I understand that I might be offered 2 medications before the MVA: Ibuprofen to lessen the cramping and misoprostol to help open my cervix. I will have local anesthesia with Lidocaine injected. To the best of my knowledge, I am not allergic to Ibuprofen, Misoprostol, or Lidocaine.

____ I understand that the possible complications from MVA include: incomplete emptying of my uterus, infection, bleeding, allergic reaction and perforation.

____ I have read this form and have had time to think about it. I have had all of my questions answered.

____ I have been given an information sheet explaining how and when to get help should a question or problem arise after the procedure.

____ In the event of an unexpected complication during the MVA, I request and authorize the physician to do whatever is needed to protect my health and welfare.

____ I hereby consent that _____ do the procedure “manual vacuum aspiration” for me.

Signature of patient: _____ **Date:** _____

Witness: _____ **Date:** _____

Signature of Clinician: _____ **Date:** _____

MVA AFTER-CARE INSTRUCTIONS

Today you had a procedure called an “aspiration” or MVA (Manual Vacuum Aspiration). You will probably feel fine when you go home. You can go back to your regular activities as soon as you want to. You can take a shower and wash your hair as soon as you want to. You can eat normally, although you may still feel nauseated for another few days.

Follow-up visit: You have an appointment in 1 week, _____ at _____ am/pm.

Are there things you should not do? Yes! For one week, do not put anything in your vagina. To be safe, do not use tampons, do not douche, and do not have sex.

WHAT TO EXPECT

Vaginal Bleeding: You can expect to have bleeding for up to 2 weeks. It is common for the bleeding to stop and start for several weeks after the abortion. Some women have no bleeding for 2 or 3 days and then begin to have bleeding like a period. Other women have only spotting for a few days and then no more bleeding at all. If you exercise or have a lot of activity, you may notice the bleeding increases; this is not dangerous.

Cramping: Some women have cramps off and on during the week following an abortion. You can use pain medication like Tylenol, Ibuprofen (Motrin or Advil), or Naproxen (Aleve or Nasprosyn). You can also use a heating pad, or drink some warm tea.

Sadness or very emotional: Most women feel very relieved when the abortion is over. Some women also feel sad, feel like crying, or are moody after an abortion. These feelings are partly from the changes in hormones, now that you are no longer pregnant. Feeling emotional at this time is normal. If you think your emotions are not what they should be, please talk to us.

When will your period come back? You can expect a period in 4-8 weeks. It is not the same for all women.

WHAT ARE DANGER SIGNS?

Heavy bleeding: If you are soaking through more than 2 maxi pads an hour for more than 2 hours.

Severe cramps: Cramps that are getting stronger and are not helped by pain medication.

Fever: If your temperature is higher than 101 degrees.

EMERGENCY CONTACT: I have a 24-hour contact number: _____ . If you have any questions, think something is going wrong, or think you have an emergency, page me and I will call you back. I know this may be a tough time for you, so if you forget something, or are worried, call me!

PREGNANCY PREVENTION: You can get pregnant before your period comes back, so it is important to use a birth control method whenever you have sex. If you have sex without protection, you can use Emergency Contraception (EC) to prevent another pregnancy. I have given you a prescription for _____.

Hormonal Birth Control: If you want to use birth control pills, the ring, or the patch, I have given you a prescription. You should start this on Sunday _____, even if you are still bleeding.

Documentation of Ultrasound

Name:

Medical Record #:

Tape Sonogram Picture(s) here

INDICATIONS:

- Prior to Medication abortion
 - hormonal contraception (Past 3m)
 - uncertain LMP
 - irregular cycles/cycle length >35d
 - cost/logistical issues
 - teaching
 - size-dates discrepancy
 - IUD at follow up
 - bleeding
 - 8 weeks or greater by LMP
- Post Medication abortion
- Pre Aspiration abortion
- Post Aspiration abortion
- Prenatal
 - hormonal contraception (Past 3m)
 - uncertain LMP
 - breastfeeding
 - irregular cycles/cycle length >35d
 - 1st tri bleeding/threatened abortion
 - teaching
 - size-dates discrepancy
- IUD localization
- Other _____

FINDINGS:

- Gestational Sac _____ mm (MSD)
- CRL _____ mm
- Yolk Sac
- Fetal Heart
- Other _____

GS: _____ mm+30 = _____ Gestational age (days)

CRL: _____ mm+42= _____ Gestational age (days)

Dating by Hadlock: _____

For Pregnancy dating:

1st Tri, use crl +42 until crl=25, after crl >25 use hadlock

EDD _____

Scan

Provider signature

Date