## PAPAYA WORKSHOP ROLE PLAY

**Doctor/Narrator:** I'm here in my office with my patient, Susan, who is a young mom I saw a few days ago with her 6-month-old son for his well child care. At that visit she told me that she had never gotten around to filling her prescription for her contraceptives and had not had her first post-partum period. For a few weeks she had been feeling nauseated in the morning and wondered if she might be pregnant. We did a pregnancy test and it was positive. She was really surprised and upset and so we made this appointment for today to talk about it. (Doctor/Narrator turns to mock patient.) So, Susan, you've had a bit of time to digest this information. What are you feeling and thinking today?

**Susan:** Oh, doctor, I just can't have another child so soon! Joe is possibly getting laid off and my job isn't all that secure, either and between the two of us working different shifts to take care of Junior, we are just managing all we can right now. (You can have another person play the part of Joe.) We talked it over and decided we really need to be referred for an abortion.

**Doctor:** Well I want you to know I appreciate the thought you put into this decision. You don't have to go anywhere else for your abortion, however, because I do them here if your pregnancy is early, which it sounds like it is.

**Susan:** You do? Oh, that is so wonderful! (She and Joe look at each other with relief.) You mean, right here in this office? How do you do that?

**Doctor:** I offer both the pill and the suction procedure called MVA. We can talk over the pros and cons of each and then you can decide which sounds better to you. First I will just give you a fact sheet here about each while I go take care of another patient, and give you two some time to talk over the options, and then I'll come back and answer any questions you might have.

**Doctor – to audience:** In a busy office, people often need some time to talk and digest information. So, I often give them some of the information to read while I go see another patient. If their partner is not with them, sometimes they want to make a phone call. If they decide to have the suction procedure, sometimes they want to call in a support person or come back on a day when they can have their partner or a friend with them.

**Doctor:** So, Susan, what do you think about what you have read?

**Susan:** Well, this pill idea is a little new to me. I've had friends who have had the traditional abortion, I never heard of this pill before.



(Depending up how much time you have for this presentation, you can be more or less detailed with the options counseling. Since we used this to introduce MVA, we kept the role-play short – but then the students had tons of questions anyway about the pill, how it works, etc...)

But the main thing is, I'd like to miss as little work as possible, and have this over as soon as possible. So, it seems like the suction procedure would do that the best. When can we do this?

**Doctor:** Well, I scheduled you to come back today because this is the afternoon when I do procedures. So, we can do it today, if you like. I'd like to do a sonogram first, since we're really not sure just how pregnant you are, and give you some Ibuprofen that needs about 30 minutes to get into your system.

Susan: Today would be great. Can Joe stay with me for it?

**Doctor:** Sure, that would be very helpful. Let me get you the Ibuprofen first, and then I'll describe the procedure, do the sonogram and give you a consent form to read and sign.

(Susan swallows the Ibuprofen.)

**Doctor:** For the procedure, you will be on the exam table like you would be for a pap smear. I will use a slightly larger speculum and give you some internal injections to take the edge off the discomfort of the procedure. You will still feel me doing the opening of your uterus which feels crampy and you'll feel a tugging sensation when I remove the pregnancy with this aspirator (shows her the MVA syringe and demonstrates the strength of the suction on her finger.) The suction is gentle, however, and the whole procedure itself only takes about 6 to 8 minutes.

This is a good place to pause and see if the participants in the workshop have additional questions.

Next, the mock patient holds the papaya while the "doctor" does the procedure on the papaya, talking as one would during the procedure. For example, "Now you're going to feel the injections, sometimes it helps to give a little cough here..." and so on...

For med students, we actually don't bring needles, we just pretend to do the injections with a 10 cc syringe. We do put a tenaculum on the papaya, wipe with the gauze on a sponge stick, dilate it to a #10 denniston and remove the seeds with a #10 cannula.

