To learn more about abortion, early pregnancy loss, or birth control, check out Reproductive Health Access Project.

www.reproductiveaccess.org

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My partner David and I are 11 months into new parenthood.

It's been a challenge and a joy to bond with our baby, Noa, and each other.

So when I learned I was pregnant again, I was so upset. We just did this! I wasn’t ready to have a baby again so soon. When I shared this with David, he assured me that he would support me with our next steps.
After I rested for about 30 minutes, the nurse came in and gave us an aftercare sheet.

We drove home and were greeted by squeals from Noa, who was being watched by my sister.

David took care of dinner and getting Noa to bed as I relaxed on the couch with a heating pad and some tea. I was feeling a little nauseous and crampy, but so glad to be home with my family.

Over the next two weeks, I bled a little off and on. I took pain pills, which helped quite a bit with cramps. I had some emotional moments, even some tears at work. But I was so grateful that my own doctor gave us the care we needed right there in her regular office.

As soon as David and I talked it over, we reached out to Dr. Singh, our primary care doctor, to see what our options were. David waited for me in the waiting room.

Dr. Singh was very kind, explained all of my pregnancy options, and assured me she would help me no matter what I decided. After talking with her, I knew I wanted an abortion. Dr. Singh asked me for the date of my last period, and with that she told me I was 9 weeks pregnant. This meant I had two options for abortion, I could take medications to end the pregnancy or have an abortion procedure. She said that both options were OK with breastfeeding, which was an important consideration for me. She also gave me an info sheet on my abortion options.

I chose an in-office procedure that Dr. Singh called a manual vacuum aspiration or MVA. She explained it was safe, very effective, and took less than 15 minutes. This sounded better to me than having a medication abortion. The MVA is a procedure she could do for me in her office, and I would not need to go to another clinic. I would be awake for the MVA in Dr. Singh’s office. If I preferred to be asleep for my abortion, she explained she could suggest some other places to go. Lastly, we talked about birth control options to help prevent pregnancy until I was ready to grow my family.

I felt in control of my body, and Dr. Singh showed respect for my decision. Now we can go back to baby-proofing our home for Noa, who took her first steps this week!
Dr. Singh said that, of course, David could stay and that having a support person was helpful. She explained that being nervous was normal and that some people found deep breathing or music helpful with the nerves.

Elena, if you would like, I can explain each step as I do it—or not—it’s up to you. And at any point, if you want me to stop or you need a break, you can just say something or give me a signal and we will pause. The procedure will just take a few minutes and you are in control. I won’t do anything without your consent.

I told Dr. Singh that I wanted her to explain each step before she did it. The nurse brought David back and I told him what I decided. He held my hand and reminded me to breathe through the MVA.

Dr. Singh came back into the room and said that everything looked fine and that I just needed to rest for 15-30 minutes before leaving. She gave me 3 packs of the mini-pill (the new birth control method I’d chosen) and told me I could take the first pill today. Then she told me what to expect after the MVA.

* Bleeding for a couple weeks, which could stop and start over that time.

* Cramping, which I can take Tylenol, ibuprofen, or Naproxen to help with. A heating pad and a cup of warm tea can help, too.

Dr. Singh also told me how to reach her after-hours in case of an emergency.

You can call me anytime! You can schedule a follow-up visit, if you’d like. These things are rare, but make sure to call the office if:

* Your bleeding soaks through more than 2 maxi pads per hour for more than 2 hours.

* Your cramps are getting stronger and are not helped by pain medication.

* Your temperature is higher than 101 degrees Fahrenheit (38.3 degrees Celsius).

* Or, if you feel like your emotions aren’t what they should be.

You can rest here for a little longer and then the nurse will check on you in a bit. Do you have any other questions for right now?

No, but thank you. This was a challenging situation and you’ve been very kind.
Dr. Singh removed the tube, the tenaculum, and speculum, and looked up at me.

Okay, we are done, you did great!

If you'd like to move back up the exam table and take your feet out of the foot holders, you can rest for a minute. I'm going to make sure we removed all the pregnancy tissue and then I'll be right back with you.

Dr. Singh went to take care of this last step.
The nurse gave me a glass of water and checked my blood pressure and bleeding.

Are you okay? How are you feeling?

It wasn't as bad as I thought. It went so fast! Honestly, I'm just relieved it's over. And, I can't wait to get back to Noa.

Okay Elena, the first thing I'm going to do is insert the speculum so I can see your cervix more easily. This will feel like vaginal exams or pap smears you've had in the past. Then, I'll swab your cervix with some cleaning solution. Are you ready?

Next when you are ready, I will inject an anesthetic to numb your cervix. It helps to take a big breath in and slowly exhale.

I nodded my head 'YES', squeezed David's hand and took a big breath in like she suggested, and slowly exhaled as she finished the injections.

That wasn't so bad!
Okay Elena, I'm going to move the tube around your uterus to remove the pregnancy tissue. It's normal to feel some pressure or cramping like you have during a period.
After that I'll remove the tube and we should be done.

Are you ready for this step?

I nodded. "I'm ready."

David noticed me looking uncomfortable and started to talking about Noa to distract me.

What do you think Noa's doing right now?

The stretching took just a couple of minutes and then Dr. Singh inserted a thin tube. She then attached the tube to a big syringe. This was the aspirator.

Next, I'll use a tool called a tenaculum to help hold your cervix in place. Then I'll insert the dilators, which stretch the cervix open. This allows me to insert the tube of the aspirator, the tool that will be used to remove the pregnancy tissue, through the cervical os and into the uterus. Let me know when you're ready for that step.