

Whole Woman's Health of Austin
Transforming health care one woman at a time
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**SECOND TRIMESTER ABORTION SERVICES INFORMATION
(10 to 15.6 WEEKS)**

To Our Patients and Their Friends and Family,

At Whole Woman's Health, our emphasis is on the whole woman – your head, your heart and your body. You are the most important person involved in your health care and we welcome your participation. Many of our patients feel so alone and afraid—yet 43% of American women have an abortion by the age of 45 – you are not alone. We strongly support your ability to decide what's best for you and are here to guide you and provide you with information. We will treat you with excellent medical care and respond to your needs as best we can.

The more you understand, the better you will be able to take care of yourself. Your informed participation in decisions regarding your health care is important to us. We invite your support person to accompany you and support you throughout as much of the visit as you wish him/her to be involved in. Your comfort is important to us. You probably have many questions regarding your abortion procedure. This packet is designed to address those concerns. Please read the information **carefully** and if you have any questions please ask a staff person at any time or the counselor when you meet with her.

We will try to make your stay with us as comfortable and brief as possible. Most of our patients can plan to be here for approximately 3-5 hours. There is some waiting time between the stages of your medical work up and we advise you to read all the accompanying information while you're waiting. During your visit(s) you will:

1. Complete self medical history forms
2. Have an ultrasound to estimate the length of pregnancy
3. Meet with an intake counselor to discuss medical history, payment, and contact information, ect.
4. Have pre-operative lab work, including a simple blood test and vital signs.
5. Meet with a patient advocate or counselor who will discuss the abortion procedure, aftercare instructions and birth control options. This is a good time to ask your questions.
6. Have a pelvic exam (and possible laminaria insertion) with the physician and/or receive medication (cytotec) to prepare your cervix for dilation.
7. Finish the abortion procedure (Day 2 for patients using laminaria).
8. Recuperate with our nurse in the aftercare room.

LENGTH OF PREGNANCY

We will perform an ultrasound to determine the length of your pregnancy and to confirm the pregnancy is in the uterus. An ultrasound is a test which uses sound waves to see the pelvic structures. It is NOT AN X-RAY and there is no radiation. An ultrasound is done while you lie down and a gel solution is applied to your abdomen. There is little or no discomfort while the ultrasound is being performed.

An ultrasound is considered the most reliable method of determining the length of pregnancy. Although you may have had an ultrasound done elsewhere before coming to our office, we need to perform one here.

LAB TESTING

In the lab we will check your blood pressure, weight, pulse, and temperature. We will also need a sample of blood to perform routine lab testing. We need to check your blood for iron count and Rh factor. If your blood is found to be Rh negative you will need an injection of Rhogam, at an additional charge, after your abortion. Rhogam prevents antibodies from being formed in your blood that would cause problems with future pregnancies. If you're Rh negative, it is important to receive the Rhogam injection with every pregnancy.

PAYMENT

We require the entire fee be paid before the laminaria is inserted on the first day. Payment must be made in either cash, money order, or credit card (Mastercard, Visa, Discover).

Our fees include pre-operative medications: Phenergen for nausea, and Ibuprofin for pain as well as nitrous oxide gas during the procedure. We also offer IV sedation for a minimal fee—see the section on “Pain Management” for more information on this. You may have additional fees if the physician or medical staff find you need extra medications or testing. These may include, but are not limited to, injectable antibiotics, early detection pregnancy test, urine culture, throat culture, or Rhogam injection.

We offer Depo Provera birth control injection to our patients after the abortion is finished. This method of birth control lasts for 3 months and costs \$65. Please let a staff person know if you are interested.

If the abortion procedure is not performed due to patient request or physician advice, you will be responsible for payment of services rendered such as the pregnancy test, ultrasound, and lab tests. All other fees will be refunded.

COUNSELING

You will meet with a counselor who will check in with you about how you are feeling and answer any questions you may have. The two of you will discuss the abortion procedure, how to take care of yourself afterwards and any concerns you may have about your abortion. This is a good time to talk about your decision to terminate the pregnancy and any concerns you may have emotionally. We understand that the decision to have an abortion involves both your head and your heart; we are here to trust you and guide you through that process. Legally we must obtain your written consent for the abortion. **An abortion will not be performed on any woman who does not want one, regardless of age.**

The counselor will discuss birth control options and, if you choose, will provide you with a method to use after the abortion. She will also review your post-op instructions.

PAIN MANAGEMENT

Local Anesthesia/Nitrous Oxide: In addition to the medications we give you pre-operatively, the physician will administer an injection of pain-stopping medication into your cervix. You will also be offered nitrous oxide gas to breathe. You will be fully awake, but feel less pain. You can expect to have cramping during the procedure.

Oral Anxiety Medications: If you are feeling especially anxious, feel free to speak to a staff person about pre-op anxiety medications such as Xanax.

Conscious IV Sedation: This is done by injecting medication (nubain, versed, and atropine) into your vein. It will help you with pain management and relaxation—you will not be asleep during the abortion, but you will be sedated. The IV Sedation is in addition to the local anesthesia and nitrous oxide gas, and there is an extra fee of \$25 for IV sedation. Please let a staff person know if you're interested.

REMEMBER: For any type of relaxation medications you MUST have someone to escort you home. You cannot drive or take a taxi home alone. You also must have had nothing to eat for 3 hours.

CERVICAL DILATION

To perform an abortion in the second trimester, the cervix must be dilated more than in the first trimester. This process takes time and is safest for you when done slowly. There are two ways to achieve cervical dilation: dilating your cervix overnight with laminaria or using a medication called misoprostol (Cytotec) to soften and dilate your cervix. Our physician will review your ultrasound and medical history and will recommend the method that s/he believes will be safest and most comfortable for you. Many times the physician will recommend both methods of dilation. Our primary concern is your safety and comfort.

Laminaria are made from sterile natural materials that absorb moisture from your body and slowly expand over several hours. The physician will use a speculum (a clean metal instrument used to open the vagina) to help see inside your vagina. When the speculum is inserted and opened, you will likely feel a lot of pressure in your pelvis which may feel uncomfortable but should not hurt. The doctor will look for your cervix, which is the end of your uterus, much like during a pap smear. S/he will then insert the laminaria into your cervix and allow it to expand overnight so the abortion can be done safely the next day.

The number of laminaria depends on the length of pregnancy and the discretion of the physician performing the abortion, usually only 2 or 3 are necessary. After the laminaria insertion you may go home and relax for the evening. Although it is not our intention that you pass the pregnancy as a result of dilation alone, there is a small chance this may happen, in which case you should call the nurse. This method requires two visits on two consecutive days; you can expect to be here about 3-4 hours on the first day and 1-2 hours on the second day.

Misoprostol (Cytotec) is a medication used for the same purpose that we use laminaria—to help prepare your body for the termination procedure by dilating and softening your cervix. The benefit of misoprostol is that it often allows us to complete your procedure in one day. However, this option is not appropriate for all patients and the physician makes the final decision after reviewing your ultrasound and medical history. Misoprostol can be used orally or vaginally. Once the medication starts working (usually 1 ½ - 2 hours time) you will feel cramping and you may have a little bleeding. Again, although it is not our intention that you pass the pregnancy as a result of dilation alone, there is a small chance this may happen, in which case you should let the staff know. The physician will do a pelvic exam to ensure that your cervix is sufficiently dilated and then will complete the abortion procedure.

PROCEDURE

After the anesthesia of your choice is administered, the physician will perform a pelvic exam to determine the exact position of your uterus. The physician will determine if there has been sufficient dilation and will remove the laminaria. S/he will hold the cervix, the opening to the uterus, with an instrument called a tenaculum. The physician will then insert several narrow metal rods, called dilators, into the cervix to further open it.

The physician will use a suction canula and/or other specialized instruments such as forceps to remove the pregnancy from the uterus. The physician will use standard Dilation and Evacuation technique, which calls for the fetus to be removed from the uterus in multiple fragments. The entire process will take 10-20 minutes. A staff person will be in the room along with you and the doctor to help you through the procedure. Please ask about including your support person in the process as well.

POSSIBLE COMPLICATIONS

Second trimester abortion is a safe surgical procedure and has approximately the same rate of complications as normal childbirth. Complications range from minor to severe, including the rare event of death. However, deaths that occur after second trimester stage abortions usually result from physical complications present prior to the procedure. Therefore it is very important that you inform us fully about your medical history and any drugs, legal or illegal, that you are using.

Complications that can occur during or after the abortion include infection, incomplete abortion (where some placenta remains in the uterus) (less than .3% of all cases*), injuries to the uterus (less than .4% of cases*), cervical tear (.6-1.2% of cases*), and heavy and prolonged bleeding (less than .02-.03% of all cases*), whole body complications such as blood clotting problems, adverse reactions to the drugs, shock, cardiac arrest, amniotic fluid embolism, and possible sterility. One death occurs for every 160,000 women who have abortions*. If you have a multiple pregnancy, the chances of complications increase. There is also the possibility of cervical incompetence, which may result in problems maintaining a pregnancy in the future (possible miscarriage, stillbirth, low birth weight, premature delivery). Should any of these problems arise antibiotic drugs and blood transfusions may be required. **Remember, although many types of complications have been listed, the chances of a problem are very small.**

Many complications are also a result of NOT taking care of yourself after leaving our office. **It is essential that you follow the post-operative instructions explained to you.** Even though complications are rare, you should call us immediately if there is a problem such as those mentioned on your post-operative instruction sheet. Our nurse is on call 24 hours a day and a physician is always available. A complication that is detected early is usually easily treated and corrected before it can become a major problem.

* Source: National Abortion Federation, www.prochoice.org

AFTERCARE

Following the abortion our nurse will escort you to the recovery room, where we have tea, juice, cookies, and crackers for you. You will have some cramps and bleeding at this time. Cramps are expected, as the uterus must return to its normal size after the pregnancy is removed. The nurse will give you some medication for pain and monitor your vital signs and how you are feeling. You will be in the aftercare room until you feel ready to go home (usually about 30 minutes).

PRESCRIPTIONS

The doctor will prescribe several medications for you after the procedure, including antibiotics to prevent infection and a pain medication to help manage cramping. These may be filled at any pharmacy, including our in-house Whole Woman's Health pharmacy. If you choose to fill your prescriptions here, you are able to leave here today with your medications without an additional wait. Unfortunately, our pharmacy is not able to accept insurance or Medicaid. Please ask a staff person for current medication prices.

CONTRACEPTION

At Whole Woman's Health we want to make sure your reproductive health needs continue to be met after your abortion. For some women, not getting pregnant again is the most pressing issue on their mind the day of their abortion; for other women it is difficult to imagine being sexually active any time soon after their abortion procedure. We're here to help with whatever your needs are, whenever you're ready.

On the day of your abortion we can start you on birth control pills, the vaginal ring, the patch, or the depo provera shot. Sometimes the doctor can even insert an IUD during the abortion procedure. If you're interested in non-hormonal methods like a diaphragm, or a tubal ligation, let us know and we can talk about how to get started. As you know, part of taking care of yourself after the abortion is avoiding vaginal intercourse until your check up—so for the next 2-3 weeks you'll be using the most reliable birth control method of all (no intercourse)!

In the next few months you'll need to get an annual exam and a pap smear (if you haven't had one in the last year). We offer annual exams and pap smears at Whole Woman's Health, and you'll find that just as with abortion care, the gyn care we offer is supportive and inclusive. You have a few options:

- Get the pap done while you're having your abortion and come back another day-- at your follow up if you'd like-- for the rest of the annual exam, OR
- Get the annual exam and pap at the same visit as your follow up, OR
- Come back within three months of your abortion. All annual exams/pap tests done at Whole Woman's Health on the same day as your abortion or within three months afterward receive a discounted rate.