



Whole Woman's Health

Changing the World, One Woman at a Time

SECOND TRIMESTER SURGICAL ABORTION INFORMATION

(10 weeks gestation/12 LMP to 24 weeks gestation/26 LMP)

www.wholewomanshealth.com

To Our Patients and Their Friends and Family,

We understand that the decision to end a pregnancy may be among the hardest decisions you will face in your lifetime. It is a choice that must make sense not only in one's head but also in one's heart. Many women feel as if they are the only woman they know who has had an abortion. This is simply not true. Over 1/3 of American women, nearly 40% will have an abortion in their lifetime. Most people know and love a woman who has had an abortion. You are not alone.

Whole Woman's Health is committed to respecting your choice. We understand the complex feelings that often accompany decisions about pregnancy. We know that no one gets pregnant in order to have an abortion. No one wants to face this decision. But many women do. We are here to comfort you and listen to what matters most to you.

Many women tell us they never thought they'd have an abortion. We know how normal those thoughts are. We also know that there is not simply one kind of woman who has an abortion. Don't let stereotypes damage your self esteem. We know you are a good woman making good choices for your life and we are here to support you. We are committed to helping you find the strength within yourself to face this difficult decision and become empowered because of it...Here, we care for you, mind, body and heart. Thank you for letting us be the women and men to help you during this time.

You probably have many questions regarding your abortion procedure. The more you understand, the better you will be able to take care of yourself. 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. 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.

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 and review medical history.
3. Have pre-operative lab work, including a simple blood test and vital signs.
4. View the Whole Woman's Health educational DVD that goes over your procedure and the aftercare instructions.
5. Meet with an intake counselor to discuss pain management options, payment, contact information, etc.
6. Meet with counselor who will discuss any remaining questions you may have about the abortion procedure, aftercare instructions and birth control options.
7. Have a pelvic exam (and possible laminaria insertion) with the physician and/or receive medication (Cytotec) to prepare your cervix for dilation.
8. Finish the abortion procedure (Day 2 for patients using laminaria).
9. Recuperate with our staff in the aftercare room.

ULTRASOUND / 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.

EDUCATIONAL DVD

We have made a DVD for you that explains the abortion procedure, medications, aftercare instructions, pain management options – everything from start to finish. We hope it will answer some of your questions. Feel free to watch it with your escort and jot down any questions to discuss during your one-on-one time with the counselor.

INTAKE / PAYMENT

Whole Woman's Health clinics accept health insurance and Medicaid/MAP for abortion services whenever possible. More often than not, health insurance companies cover abortion 100%. Whole Woman's Health also works tirelessly to help raise funds for our uninsured patients. You and our WWH staff should have done most of the leg work before today if you are planning to use insurance, public assistance, or funding to pay for your abortion. We require our portion be paid before having the abortion. Payment must be made in either cash, money order, or credit card (MasterCard/Visa/Discover & Debit Cards).

Our fees include pre-operative medications: Phenergan for nausea, and Ibuprofen 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.

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.

It is very important that we have your correct telephone number and address, especially in case your lab work indicates that you will need to return to the clinic to repeat testing or the procedure. We are very respectful of your privacy and keep all of your information confidential. We will only call you if there is an emergency. There are no additional costs in the rare case that we need to repeat the procedure.

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.

PAIN MANAGEMENT

Local Anesthesia: 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 be fully awake, but feel less pain. You can expect to have some cramping during the procedure, but the cramps should be manageable.

Conscious IV Sedation: This is done by injecting medication (fentanyl or nubain, or valium, versed, and atropine) into your vein. Sedation 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. Please let staff person know if you are interested.

N₂O₂

This is gas (often called laughing gas) that you can breathe during your procedure. Nitrous Oxide helps you relax and takes your mind off of the procedure while you breathe it. Nitrous leaves your system when you stop breathing it, so you may be okay in the event you don't have a driver.

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

REMEMBER: You MUST have someone escort you home if you use IV sedation. You cannot drive or take a taxi home alone. You also must have had nothing to eat for 3 hours before your appointment.

COUNSELING

You will meet with a counselor who will check in with you about how you are feeling and answer any remaining 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. 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. See section on contraception that follows. They will also review your post-op instructions.

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. This is done by inserting two fingers in the vagina and putting one hand on the lower abdomen and gently pressing on the abdomen so the size and position of the uterus can be determined. 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, 7 days a week, 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.

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 gynecological 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.