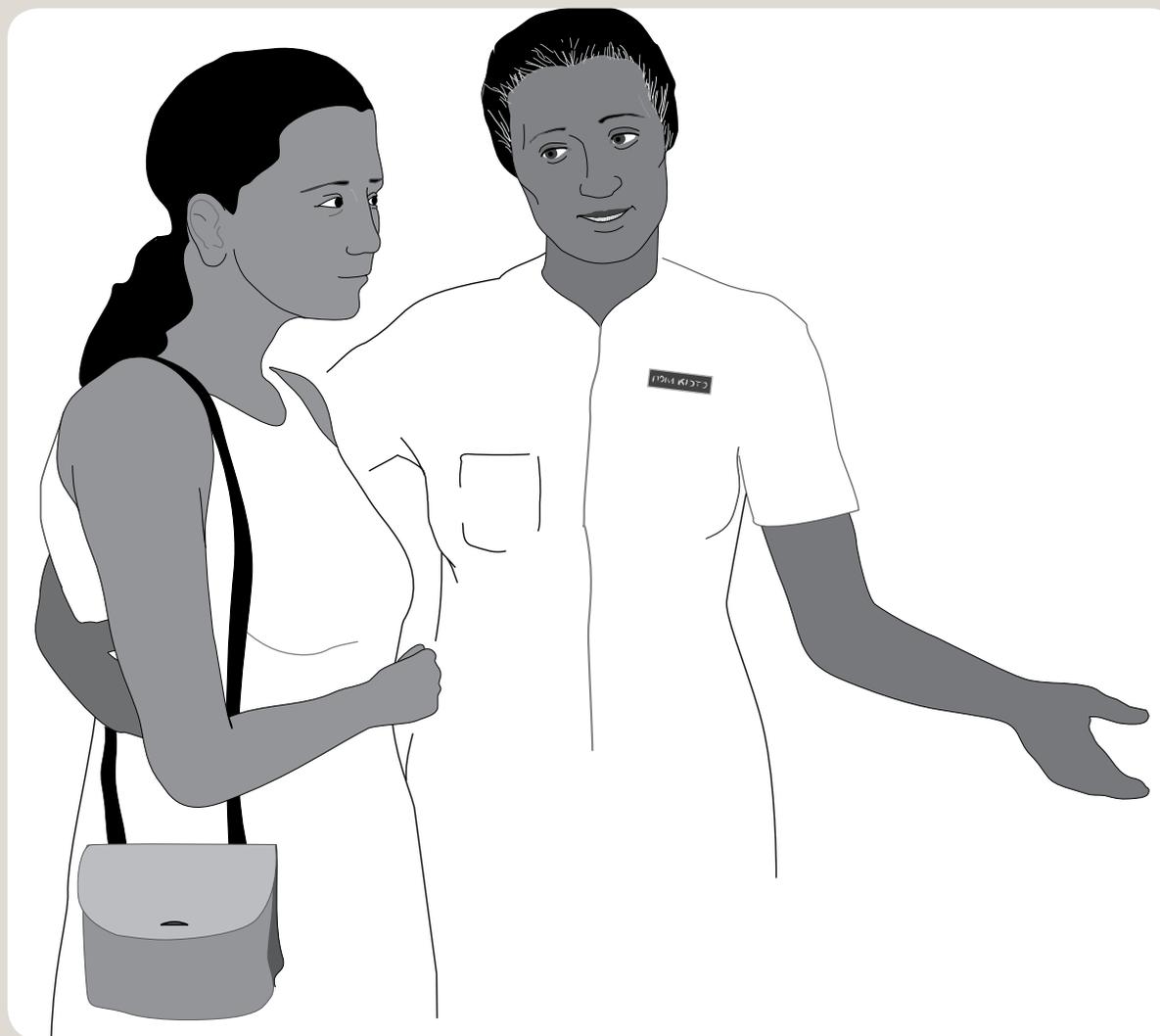
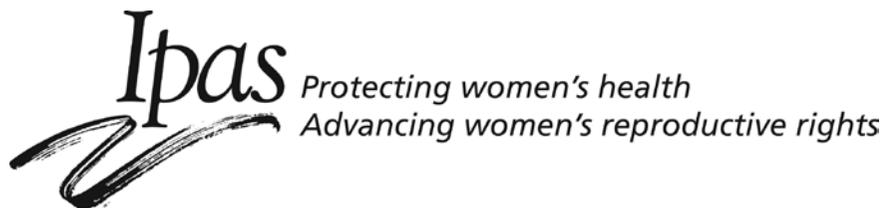


Medical Abortion Counseling



Medical Abortion Counseling ***A Resource for Providers***



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Determine eligibility

1. Explain indication

- Termination of first-trimester intrauterine pregnancy

2. Discuss contraindications

- Known allergy to the medications
- Confirmed or suspected ectopic pregnancy
- Hemorrhagic disorder or concurrent anticoagulant therapy
- Inherited porphyria (with mifepristone regimen)

3. Establish if precautions are needed

- IUD in place (remove first)
- Steroid-dependent women (for women using a regimen with mifepristone)
- Severe anemia
- Unstable health problems

4. Identify any other special needs women may have that require specific counseling





Review informed consent

1. Respect privacy and confidentiality

2. Discuss options

- Continue pregnancy to term and parent or release for adoption
- Terminate the pregnancy: Medical abortion or vacuum aspiration

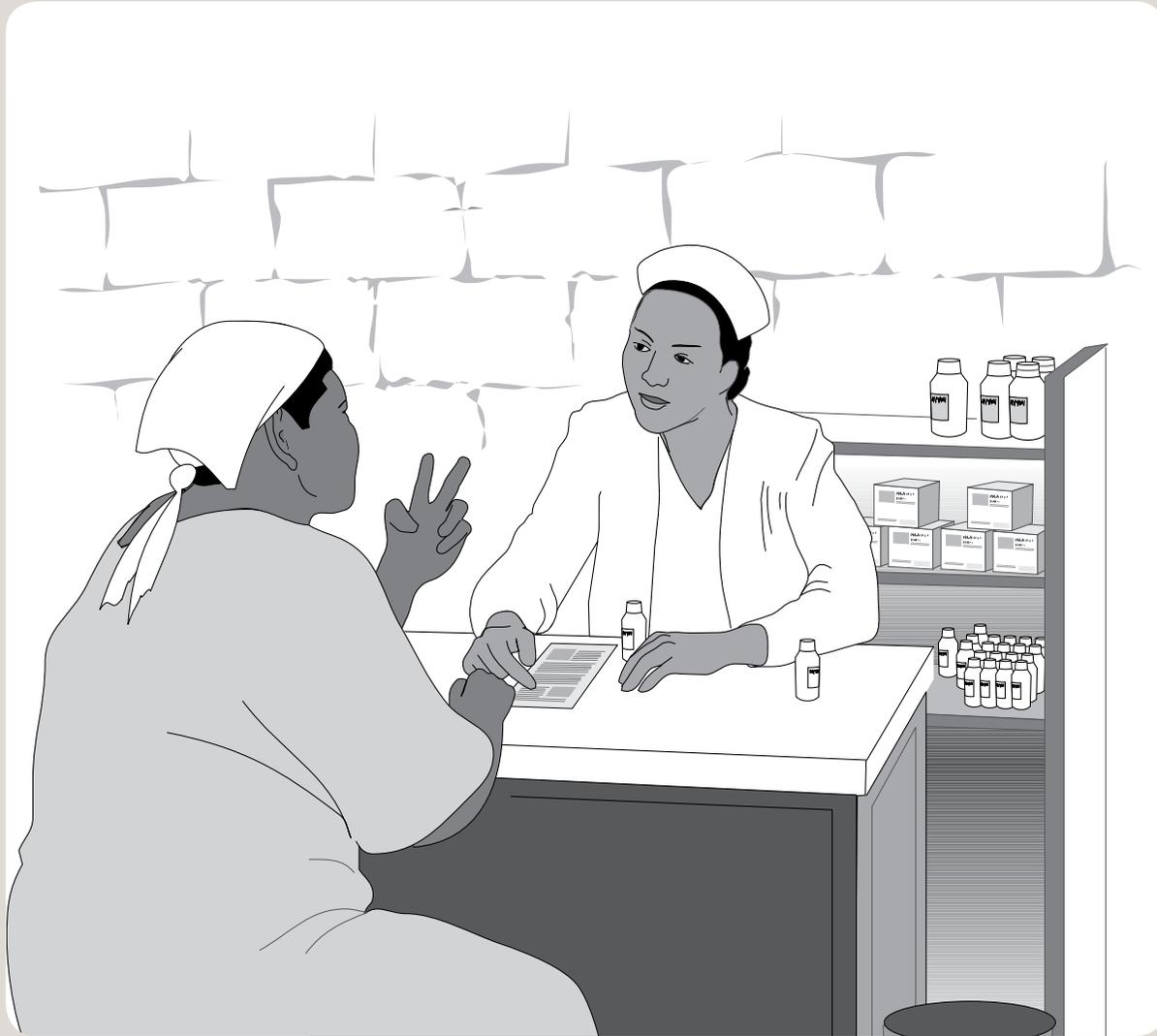
3. Explain benefits

- Medical abortion safely and effectively ends a pregnancy without an invasive medical procedure
- A woman can use misoprostol in her home; family or friends can provide support
- Some women also feel that it is more private and natural, similar to a heavy menstrual period or a miscarriage
- Medical abortion does not affect future pregnancies

4. Explain risks

- Every medical procedure carries some risk
- There is a small risk that medical abortion will not work, meaning the pregnancy may continue after taking the medications
- Potential birth defects to the fetus if the pregnancy is not terminated
- Possible need for vacuum aspiration if medical abortion is not successful
- Drug side effects
- Other risks that are rare (for example, excessive bleeding or infection)

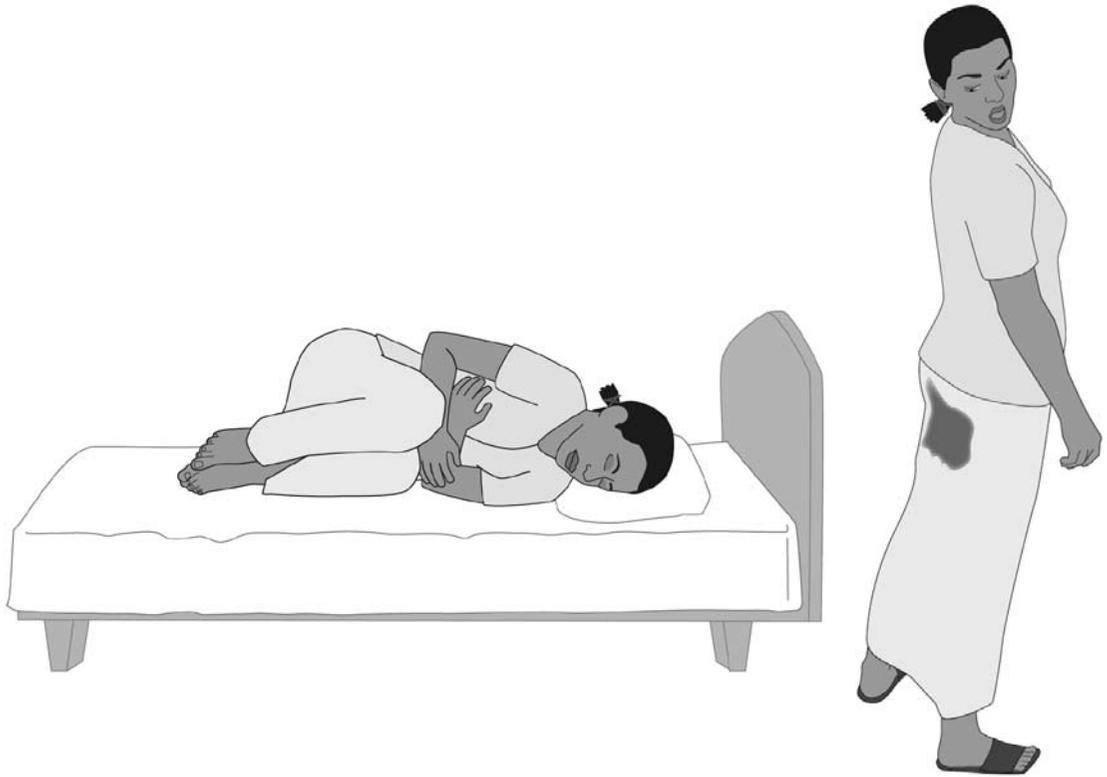




Process of medical abortion

- 1. Review steps to taking the medicines (when and how)**
- 2. Discuss taking misoprostol at home or in the clinic (if both options are available)**
- 3. Explain what a woman will experience**
 - Expected range of bleeding and timing of abortion
 - How long the process typically takes and the benefits of a supportive partner or friend
- 4. Explain that vacuum aspiration will be necessary if the medical abortion fails**
- 5. Assess the woman's commitment to completing the abortion once it has begun**
 - If the abortion is not completed with the medications, the woman should return to the clinic to discuss her available options





Discuss the expected effects and side effects of medical abortion

1. Review what a woman should expect

- Bleeding and cramping are normal and expected (provide information on timing of abortion and range of bleeding)
- Intensity of pain (provide information on the range of pain/cramping that women can experience)

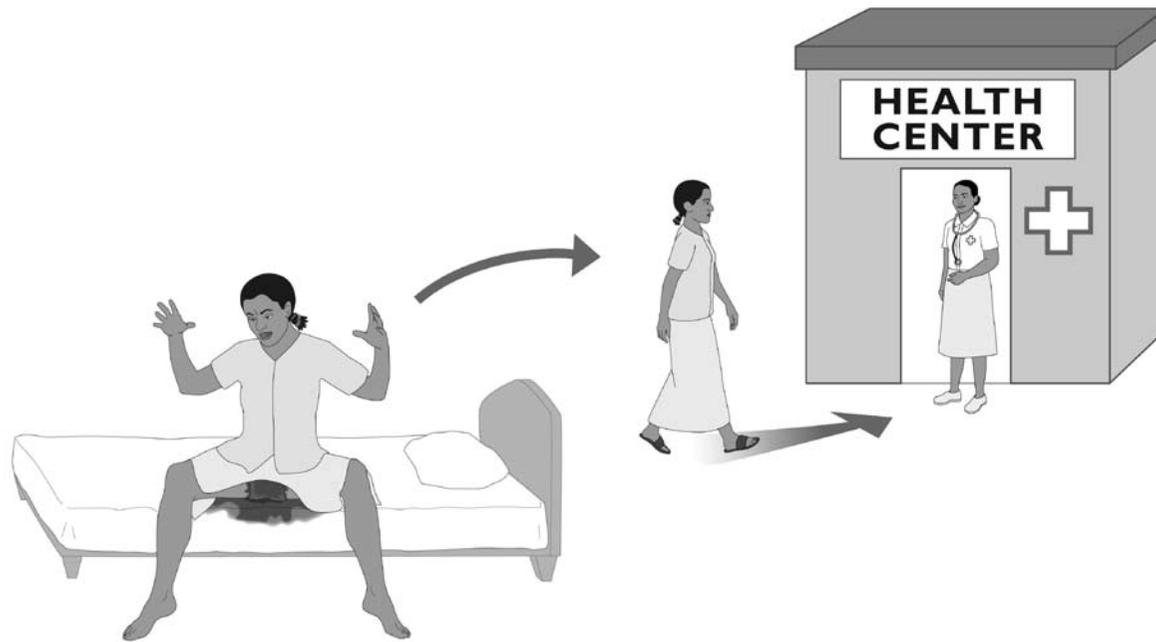
2. Discuss other possible side effects after taking misoprostol

- Mild fever and chills
- Nausea, vomiting and diarrhea
- Headache or dizziness

3. Discuss ways to manage side effects

- Cramps will be less painful if the woman uses ibuprofen
- Ibuprofen can also help with headache and fever
- Drinking lots of water throughout the medical abortion process can help with nausea, vomiting and diarrhea





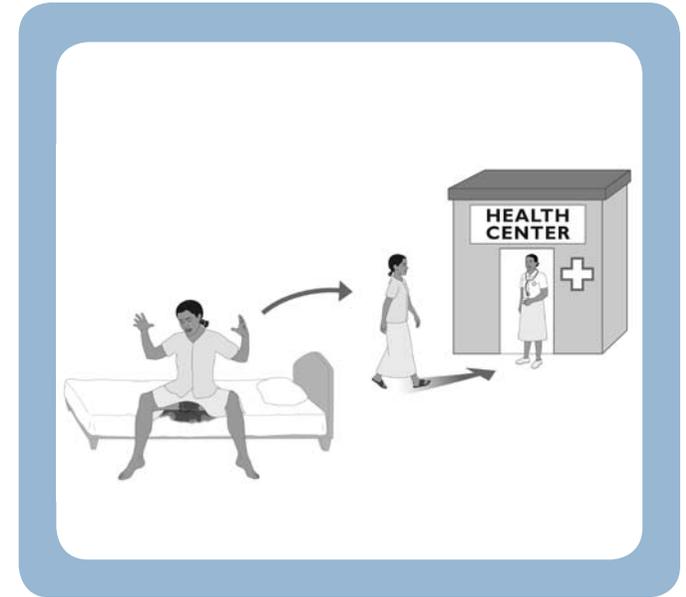
Warning signs

1. Explain the symptoms or warning signs that require women to come back to the clinic or seek emergency care

- Excessive bleeding or soaking more than two sanitary pads per hour for two hours in a row, especially if accompanied by prolonged dizziness, lightheadedness and increasing tiredness
- Fever any time after the day misoprostol was used
- Unusual or bad-smelling vaginal discharge, especially if accompanied by severe cramps or abdominal pain
- Severe abdominal pain that occurs any time after the day misoprostol was used
- Feeling very sick with or without fever any time after the day misoprostol was used
- Persistent severe nausea or vomiting any time after the day misoprostol was used

2. Inquire about access to emergency care

- Provide contact and location information for emergency services





Reproductive health counseling and scheduling a follow-up visit

1. Provide contraceptive counseling

- Fertility (can return as early as 10 days after the abortion)
- Contraceptive methods
- Emergency contraceptive pills
- Help the woman choose a method and provide it, if possible

2. Screen for other reproductive health issues and provide referral information, if needed

- Sexually transmitted infections
- Sexual and domestic violence
- Youth-friendly services
- Others

3. Schedule a follow-up visit for about two weeks after medical abortion





Questions and Concerns

- 1. Ask if there are questions or concerns, especially about side effects**
- 2. Discuss woman's support and surroundings during the day of taking misoprostol**
- 3. Allow time to answer all questions**

Key points to remember when counseling young women

- 1. Medical abortion is appropriate for adolescents seeking abortion**
- 2. Young women and adolescents can reliably follow a medical abortion regimen**

