

## MEDICATION ABORTION CONSENT

**What is a medication abortion?** A medical abortion means using 2 medicines to end your pregnancy.

- Mifepristone is the first medicine-it starts the abortion process. Your pregnancy needs a hormone called progesterone to grow normally. Mifepristone blocks your body's progesterone.
- The second medicine, misoprostol, opens the opening to your uterus (cervix) and makes your uterus contract in order to expel or push out the pregnancy.
- Medication abortion has over a 98% success rate

\_\_\_\_\_ **Purpose:** I understand that the purpose of abortion is to terminate a pregnancy.

**Options:** I understand that with pregnancy there are three options: abortion, adoption, and parenting. There are two ways to have an abortion, medication abortion and suction abortion. I can talk about these options with the staff when making my decision.

### **Side Effects of Medication Abortion:**

Side effects usually do not last long. They usually need little or no treatment.

- **Cramping:** This is normal and supposed to happen. Cramping is usually the worst when the pregnancy is passing. Milder cramps may last a day or 2 after that.
- **Bleeding:** This is normal and is supposed to happen. Bleeding is usually heaviest while the pregnancy is passing.
- **Fever/chills:** The misoprostol can cause a slight fever. Having a temperature of 99-100 is okay.
- **Gastro-intestinal Symptoms:** Nausea, vomiting, and diarrhea
- **Headache**
- **Dizziness**

\_\_\_\_\_ **Risks of Medication Abortion:** Medication abortion is safe, but there are risks with any medical procedures.

I understand these risks may include:

- **Incomplete abortion:** Some of the pregnancy tissue may not completely expel. This may lead to heavy bleeding, infection, or both. If this happens you may need a suction procedure, other tests, or treatments.
- **Infection:** The infection rate from medication abortion is less than 1%. Antibiotics are used to treat the infection, and rarely, a suction procedure.
- **Continuing pregnancy:** In some cases, the pregnancy does not end after the medications. Because misoprostol can cause birth defects, if this happens you may need to take more medicine or have a suction procedure (called a "D&C") to complete your abortion. A tubal (ectopic) pregnancy is not ended by abortion and may require an abdominal operation.
- **Hemorrhage:** You may have too much bleeding or bleed for too long. If this happens you will need to be seen urgently. You may need medicine, a suction procedure, or, rarely, a blood transfusion or surgery to remove the uterus (hysterectomy)
- **Allergic reaction:** While rare, some people are allergic to the medicines that are used.
- **An emotional reaction after the abortion:** Emotional problems after abortion are uncommon. Evidence is clear that people can have emotions that swing from relief to sadness...all in one day. This mix of emotions is normal as long as sad feelings don't get severe or prolonged. If you experience severe symptoms, please contact us for referral resources.
- **Death:** Death from medication abortion is very rare (1 to 1.5 per 100,000) compared with 10 per 100,000 for a full-term pregnancy and birth.

\_\_\_\_\_ **What else do I need to know?**

After a medication abortion, there are three different ways to make sure you are no longer pregnant:

- Ultrasound exam
- Urine Pregnancy test
- Series of blood tests

Your Medical Provider will discuss these options and develop a plan that is medically appropriate for you.

\_\_\_\_\_ **Emergency:** I have been given an emergency telephone number to call 24 hours a day for assistance.

\_\_\_\_\_ **Voluntary Consent:** I hereby give my consent to and authorize an EHC clinician and assistants to perform an abortion for me.

- have read and understand this form.
- All the information I have given is true and correct and I realize that the EHC clinical team have relied on such information.
- All my questions have been answered to my satisfaction.
- I give my consent voluntarily. No one is forcing me to make this decision.
- I am aware that I may have a copy of this form at my request.

**Additional Risks for telehealth abortion or if no gestational dating ultrasound is not done**

Telehealth “No-test” pill abortion means having an abortion with pills without having an ultrasound or other office lab testing using telehealth. There is a great deal of evidence that shows that telehealth pill abortion is a very safe and effective practice for most individuals electing to end their pregnancy with medications.

**Risks of not having lab work, or a pre-abortion ultrasound to determine the dates of the pregnancy.** There is a small risk of missing the following medical diagnoses and situations:

Initial

\_\_\_\_\_ **Ectopic pregnancy** The risk of ectopic pregnancy in patients seeking abortion is rare. Pill abortion does not treat ectopic pregnancy, which, if untreated, can develop into a life-threatening emergency.

\_\_\_\_\_ **Inaccurate pregnancy dating** Although rare, you may be earlier or later in pregnancy than anticipated by your last menstrual period. Inaccurate dating may affect the success, side effects, and complication rate of medication abortion.

\_\_\_\_\_ **Early pregnancy loss (miscarriage)** An early pregnancy loss may go undetected without an ultrasound. If early pregnancy loss is not diagnosed, you may lose the opportunity for other options for management. Medication abortion is one option for management of early pregnancy loss.

\_\_\_\_\_ **Rh sensitization** This happens when you have a Rh negative blood type and your blood and the fetus’s blood mix. As a result, your body starts to make antibodies which can cause miscarriages or pregnancy complications with future pregnancies. There is overwhelming evidence that Rh sensitization does not occur before 12 weeks LMP.

\_\_\_\_\_ **Bleeding complications due to a result of having non-diagnosed severe iron-deficiency anemia.** It is rare for anemia to cause complications with pill abortion. The safety of medication abortion in patients with anemia is unknown because studies have excluded patients with severe anemia.

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\_\_\_\_\_  
**Signature of Patient**

\_\_\_\_\_  
**Date**

I witness that the patient received this information, said it was read and understood, and there was an opportunity to ask any answer any questions.

\_\_\_\_\_  
**Signature of Witness**

\_\_\_\_\_  
**Date**