



Information About Your Surgical Abortion

What to do before your procedure:

- ❑ If you are having sedation, have **nothing to eat, drink, smoke or chew after midnight** the night before your procedure. This includes a puff on a cigarette, a stick of gum, or a swallow of water.
- ❑ **No street drugs, alcohol, or aspirin for 72 hours before your procedure.** Tylenol or ibuprofen are fine.
- ❑ Leave jewelry, contact lenses, and any valuables at home. If you are having sedation, please remove tongue and lip rings. Remove dark or metallic nail polish from the index finger of your right hand.
- ❑ **If you are using insurance, we need that information no later than the morning before your abortion day.** You can call us between 1-4pm the day before your appointment to verify that your insurance will cover the cost of your surgery.
- ❑ For liability reasons, **we cannot allow children in the clinic at any time.** Please make arrangements for childcare.
- ❑ It is good to have a stock of maxi pads at home.

What to bring with you:

- ❑ **A state-issued photo ID with birth date** is mandatory for all patients, regardless of age. You may use a driver's license, non-driver's state ID, military ID, alien registration card, or passport. You may use a work or school ID in combination with a birth certificate. *We do not accept check cashing ID's.*
- ❑ **An escort**, if you are having IV sedation. This person must sign an Escort Agreement (saying they will take you home after your procedure) before we can give you IV sedation. This person must return and pick you up when you are done – you are not able to leave without an escort. If you are in your second trimester and receiving local anesthetic it is still good to have an escort. Due to limited space, please do not bring more than one person with you.
- ❑ **If you are a minor**, you must have ID, your parent or guardian must have ID, and you must also bring your birth certificate or tax documents issued by the state listing them as your parent, or court documents proving guardianship. The same parent/guardian who attended the PACA Information Session with you must return for your procedure. If you are a minor and have completed the judicial bypass you must bring court papers.
- ❑ **If you do not speak English or cannot understand medical terms in English**, you must have a translator. We recommend that the same translator who attended the PACA Information Session with you return for your procedure.
- ❑ **Your payment** in either: cash, debit card (with credit card logo), or credit card. If you are not the cardholder the cardholder must be present to show ID and sign the receipt. If using insurance bring your insurance card and co-pay. *No personal checks or money orders accepted.*
- ❑ **Any prescription medications** you are currently taking, including inhalers for asthma.
- ❑ A change of underwear, a few sanitary pads, something to read, and anything else that will make you more comfortable – warm socks, a cozy robe or favorite sweater – as it can get rather chilly in the office.

What to expect on your abortion procedure day (Please expect a stay of 4-8 hours at the office):

Arriving at the clinic

When you arrive at the building, use the intercom to call up to the office (scroll through the list until you see “women's center”). Give your name to be buzzed into the building. Please sign in with the receptionist when you enter the clinic. She will ask you to complete your medical history in your chart, along with some consent forms. Please pay close attention to the questions in the chart and answer honestly because we will use the information you provide us with to determine the best course of treatment for you.

Ultrasound

All PWC patients receive ultrasound examinations at our clinic to verify the length of pregnancy. The ultrasound measurement, which we convert to the number of weeks and days since your last menstrual period, is accurate to within a few days, and is the measurement from which we determine the type of procedure you are eligible as well as the accompanying fee. Here at PWC, we can perform surgical abortion procedures for patients between 5 weeks and 21 weeks of their pregnancy.

Lab work

Following your ultrasound, you will go to the lab, where a medical assistant will take your vital signs. We will test a small sample of your blood for anemia and the Rh factor. Should you be found to have Rh-negative blood, you will need to receive an injection of RhoGam to protect future pregnancies. The cost of the RhoGam injection is \$35 if you are under 12 weeks, and \$90 if you are 12 weeks or further. This cost may be covered by insurance, if it is covering the cost of your procedure. If you have requested testing for chlamydia and gonorrhea we will take a small sample of your urine at this time as well.

**Bookkeeping**

After your lab work is completed, you will meet with the bookkeeper who will verify your identification and collect your payment. If you are having financial difficulties please call our office prior to your appointment. We may be able to help you with additional funding.

Counseling

Your counselor will review your medical history and all of your paperwork with you. She will also explain the procedure that you are going to have, and she can answer any questions you have about the procedure or aftercare. The counselor will discuss your decision to have an abortion and your support system with you. She will discuss birth control, and record your preferred method of birth control for the nurse. In addition to birth control pills, patch, and vaginal ring, we offer a 3-month dose of injectable birth control (similar to Depo) which you may receive on the day of your surgery. The cost of this medication is \$65, but may be covered by insurance. We also offer a 3-year method of birth control called Implanon, which may also be covered by insurance. Both Mirena and Paragard IUDs can be inserted at your follow-up appointment. Please let us know if you are interested in any of these methods. Your counselor will also review your aftercare instructions with you and schedule your follow-up exam at PWC for 2-3 weeks after your abortion. It is also appropriate to follow-up with your own physician if that is more convenient for you.

Getting Changed

Following your counseling session, you will be shown to the changing room. Only medical personnel and patients are allowed in the medical suites, so anyone with you will wait in the lobby until you are done with your procedure and recovery. You will be asked to empty your bladder and undress, leaving your shoes, socks, and a bra on. You will also need to remove all jewelry. You will be given a cloth gown, and may wear your robe over this gown if you have brought one. We will provide you with a personal belonging bag to carry your clothes. You will then be in a small waiting room until a procedure room is available.

Procedure

The procedure room looks very similar to a regular doctor's exam room. If you are having sedation, you will receive anesthetic medications through an intravenous line (IV) before the procedure begins. If you are having local anesthetic, the doctor will numb your cervix with Lidocaine (similar to the Novocain you get at the dentist's office) to make the procedure more comfortable for you. A first trimester abortion (5-12 weeks) will take about 3-5 minutes. Second trimester procedures (12 weeks and further) procedures generally take about 5-20 minutes. Please take a moment to review your anesthesia options listed in this packet to be able to make an informed choice when you arrive at the clinic. Please note that if your pregnancy is 16 weeks or more, you will be required to have IV sedation during your procedure.

Recovery Room

After the procedure, you will be brought into the recovery room for about 30 minutes. Our nurses will monitor your vital signs, bleeding and cramping to make sure that you are recovering well afterwards. They will offer you something to drink and give you a light snack, will go over your aftercare instructions and make sure that that you have a copy to take home. Before you leave, a nurse will give you antibiotics that will help prevent infection, as well as any other medications you may need. While some brands of birth control pills are available free of charge on the day of your procedure, the medical team will determine the best and safest method of birth control with you and may write you a prescription instead.

After Your Abortion

After your procedure, you will want to rest for the remainder of the day. If you are having sedation, you must not drive for 24 hours after your abortion, and should not make important decisions or care for small children. Some women feel well enough to continue regular, non-strenuous activities the next day, while others may want a couple of days to rest. If you need a doctor's note for days missed at school or work, we can write one for you. Vaginal bleeding is normal, but varies from woman to woman: you may not bleed at all; your bleeding may start a few days after your procedure; or your bleeding may start, stop and start again. All of these things are normal, and may continue for a period of 2-8 weeks. It is normal to pass some small clots. You may also experience mild to moderate cramping. To relieve the discomfort, you may take a pain reliever that does not contain aspirin in it. Also try sitting down, using a hot water bottle or heating pad, massaging your lower abdomen, or drinking hot tea. Please feel free to call us with questions or concerns.

As a progressive leader in the community, Philadelphia Women's Center professionally and compassionately provides client-centered abortion services and follow-up care in a friendly, safe, and non-judgmental environment. Please feel free to ask our staff any questions or express any concerns you may have during your visit. We are here to make this experience as comfortable for you as we can.

Anesthesia Options

Type of Anesthesia	Local	IV Sedation
What is it?	Lidocaine works by blocking the nerve impulses that produce pain, numbing the area immediately surrounding the injection site. Lidocaine takes effect within a few seconds and usually lasts for 15-20 minutes.	Patients who choose IV sedation receive a combination of two or three medications. <ol style="list-style-type: none"> 1. Fentanyl is a narcotic analgesic that provides pain relief and sedation. 2. Versed is a benzodiazepine (central nervous system depressant) that provides sedation and amnesia. 3. Diprivan is a sedative hypnotic agent that produces sedation and sleep <p>Additional drugs may include Droperidol, Reglan, Brevital, Atropine, and others.</p>
What are the risks?	Allergic reaction: this is very rare and may range from a rash or swelling to shock.	Allergic reaction: this is very rare and may range from a rash or swelling to shock. Prolonged unconsciousness: this can result from different rates of drug metabolism. Damage to mouth and teeth, airway or vocal cords: This can occur if a patient aspirates (vomits) and must be intubated (tube inserted in throat to help you breathe). Cardiac arrest, respiratory paralysis, hypothermia, death: These are the most serious complications, and can result from severe allergic reactions, aspiration, certain preexisting medical conditions, inappropriate administration and maintenance of anesthesia or other rare, unpredictable variables.
This is a good option for women who...	<ul style="list-style-type: none"> • Want to avoid the risks of deep sedation • Want to go home by themselves, or do not have an escort who can accompany them home after the procedure • Prefer to be in control and remain awake and alert during and after the procedure. • Cannot receive anesthesia due to medical reasons. 	<ul style="list-style-type: none"> • Are particularly nervous. • Want to be asleep during the procedure. • Do not have any respiratory illness or serious medical problems.



Type of Anesthesia	Local	IV Sedation
Immediate side effects	<ul style="list-style-type: none">• Cramping may appear to become stronger as the analgesic effects wear off.• Dizziness• Nausea• A metallic taste in the mouth	<ul style="list-style-type: none">• Grogginess, sleepiness• Nausea and vomiting• Itchy skin: easily treated with benadryl• Hyperemotionality: patients may wake up crying or laughing.• Cramping may appear to become stronger as the analgesic effects wear off.
Restrictions	NONE	<ul style="list-style-type: none">• Cannot eat, drink, chew or smoke after midnight the night before.• Heavy and greasy food should be avoided. Most patients can eat a normal meal within 4-5 hours after the procedure.• Patients who choose IV sedation must have an escort home.• Patients may not drive or operate heavy machinery for 24 hours.• Patients cannot have responsibility for children or dependents for the remainder of the day.
Additional Information	NONE	Patients having IV sedation will be either semi-conscious or completely asleep during the procedure, and may receive oxygen and nitrous oxide through a breathing mask. Some patients may appear to be awake during the procedure, but will have little or no memory of the surgery. Immediate sedation and amnesia typically wear off 2-3 minutes following the procedure.



Further Information on the Abortion

Below is some information which summarizes the things you must know about abortion, by state law. Much of this information will be given to you verbally by a physician at your information session. However, it may also be helpful to read over on your own time. Please don't hesitate to call the clinic if you have questions!

The first thing that the State of Pennsylvania requires that you be informed of is that the Department of Health has created materials describing fetal development within the uterus and listing social services agencies that offer information about alternatives to abortion. You have a right to see these materials if you request to see them, but you are not required to view them at any point if you don't wish to do so. We will provide these materials free of charge, and at least 24 hours before a scheduled abortion procedure, if you request to see and review them.

Also, medical assistance benefits may be available to assist you with costs of prenatal, neonatal, delivery, and early child health care, if you choose not to have the abortion, and to continue your pregnancy instead. More detailed information on the availability of such assistance is contained in the printed materials published by the Department of Health.

The man by who you became pregnant is liable to assist you in the support of a child, should you choose to carry to term and raise the child yourself – even if he has offered to pay for the abortion procedure itself.

You must also certify in writing, on the day of your procedure, that you heard and understood the description of the State's requirements that you received at least 24 hours before having your abortion procedure. You must also certify in writing that if you chose to see the State's printed materials, that they were, in fact, provided to you.

You should also know that you that you cannot be forced to have an abortion. The decision is yours alone. The alternative to having an elective abortion is not to have one, and to deliver at term, either vaginally or by cesarean section. If you choose not to raise the child yourself, adoption agencies can help to place the child with another family.

The probable length of your current pregnancy is considered to be the number of weeks from the first day of your last menstrual period until today. This is an estimate. Every patient at the Philadelphia Women's Center will also have an ultrasound, to confirm the true duration of the pregnancy. If there happens to be a discrepancy between the last menstrual period date and the ultrasound date, remember that the ultrasound is more accurate.

You will meet with a counselor before your abortion to discuss the specifics of the procedure. However, in general, you should know that an abortion is performed to surgically or medically terminate a pregnancy. The surgical abortion procedure performed at PWC is called a D&E, or Dilation and Evacuation. In the first trimester, you may have a choice of anesthesia. The procedure will begin with a pelvic exam, after which you will be given the anesthesia. Your cervical canal – which is a very short passageway leading from your vagina to your uterus – is gently opened (or dilated). A small plastic tube called a vacurette is inserted into the uterus through the opening in the cervix, and a negative pressure or vacuum is applied to empty the contents of the uterus. In the first trimester the abortion takes about 3 to 5 minutes.

In the second trimester dilating sponges may be inserted into the cervix, which will require a dilation period of a few hours, or for some patients, overnight. A second trimester abortion may take anywhere from 5 to 30 minutes.

Patients at the Philadelphia Women's Center also have the option of the medical abortion by pill, if they are 7 weeks or under by ultrasound. The procedure itself involves taking one pill (called Mifeprex) here in the office. The patient will then return home with 4 tablets that she will insert vaginally 24 to 48 hours later. This combination of medications will cause cramping and bleeding, allowing the women's body to pass the pregnancy. This will be similar to a miscarriage, and will take at least a few days. The patient will then need to return to the Center approximately 2 weeks later for an ultrasound to determine if the procedure was successful. In rare cases, the woman's body may not expel all contents of the uterus, and she may need additional medication or a surgical abortion (described previously).

You should also know that pregnancy in general, whether a woman miscarries, chooses an abortion, or delivers at term, involves a potential risk. However, carrying a pregnancy to full term is actually about 10 to 15 times more risky than having an abortion at 16 weeks or less.

The State also requires that you know that both abortion and full term pregnancy "may have detrimental physical and psychological effects which are not accurately foreseeable. Some of these potential problems could include infection, hemorrhage, danger to subsequent pregnancies, and infertility" – although, as mentioned before, for abortion, these risks are relatively very low. Other potential problems could include (but are not limited to) damage to the cervix, the vagina, or the uterus, or to surrounding normal organs requiring hospitalization and/or additional surgery. Sometimes delayed periods occur which require further treatment, or – rarely – re-aspiration of the uterus for blood clots or tissue.

After your procedure, you will be given detailed instructions on aftercare. By following these simple instructions, you can help to decrease your risk of complications, allowing you to have a safe and healthy recovery.