



## Information About Your 2-Day Surgical Abortion

### **General Information:**

We have estimated that you may be between 18 weeks and 22 weeks from your last menstrual period when you come for your procedure. Because of your stage in your pregnancy, your cervix (the opening of your uterus) will need additional time to be gently dilated. We start this process the day before your surgery by inserting cervical dilators into your cervix. You must return the following day for the removal of these dilators and the completion of your abortion. We want you to know that we do this kind of procedure regularly and are experienced in making it a safe procedure for you. To ensure your safety and comfort throughout the process, we ask that you read all of the following information, follow the doctor's instructions carefully, and ask us any questions.

### **What to do before Day 1 of your abortion procedure:**

- No street drugs, alcohol, or aspirin for 72 hours before day 1 of your procedure.**
- If you are using insurance, we need that information no later than the morning before day 1 of your procedure.** You can call us between 1-4pm the day before your appointment to verify that your insurance will cover the cost of your surgery and what your financial responsibility is.
- 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 on Day 1:**

- 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.*
- 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. The same translator who attended the PACA Information Session with you must return for your procedure.
- Your payment** in either: cash, debit card (with credit card logo), or credit card. If you are not the cardholder of the debit or credit card the cardholder must be present to show ID and sign the receipt. If using insurance, bring your insurance card and co-pay. Your payment is due on this day. We cannot begin your procedure without full payment. No personal checks or money orders will be accepted.
- Any prescription medications** you are currently taking, including inhalers for asthma.

### **What to expect on Day 1 of your abortion procedure:**

#### **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 for as well as the accompanying fee.

#### **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 have to receive an injection of RhoGam to protect future pregnancies. The cost of the RhoGam injection is \$95 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, collect your payment. If you are having financial difficulty, please call our office prior to your scheduled 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 during your first post abortion menstrual. Please let us know if you are interested in any of these methods. Your counselor will also review your plans for day 1 and day 2 of your abortion to make sure that you are safe and can return to PWC for the completion of your abortion. She will also review your aftercare instructions 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.

### **Insertion of cervical dilators**

Following your counseling session, you will be shown to one of the exam rooms. If you have any valuables, please leave them with your escort. The doctor will insert dilators into your cervix. A medical staff member will review with you how these dilators work and how to take care of yourself over night. You will be given prescriptions for pain relievers for your cramping, a seven-day course of antibiotics that will help prevent infection, as well as any other medications you may need. You will then be released for the day. You should expect to be in the office an average of 4 to 8 hours on this first day, depending on various circumstances.

**ONCE THE DILATORS ARE INSERTED, THIS IS THE START OF YOUR ABORTION PROCEDURE. YOU MUST RETURN TO THE CLINIC THE DAY FOLLOWING THE INSERTION TO AVOID SERIOUS COMPLICATIONS.**

### **What to do before Day 2 of your abortion procedure:**

- ❑ **Do not have anything to eat, drink, smoke or chew after midnight** the night before your surgery. This includes a puff on a cigarette, a stick of gum, a swallow of water. This is to ensure your safety while under IV sedation. You may shower and brush your teeth in the morning, just don't swallow any water or toothpaste.
- ❑ Leave jewelry, contact lenses, and any valuables at home. Please remove all jewelry, including tongue rings. Remove dark or metallic nail polish from the index finger of your right hand.

### **What to bring with you on Day 2:**

- ❑ **An escort.** This person must sign an Escort Agreement Form saying they will take you home after your procedure – they cannot just drop you off and leave. You must have this agreement signed before we can give you IV sedation. They must return to the office to pick you up when you are done – again, they cannot wait outside.
- ❑ 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.
- ❑ Please note that you are likely to be in the office for 5-10 hours on this day.

### **What to expect on Day 2 of your abortion procedure:**

#### **Arriving**

**You must arrive at 7:30am with no exceptions. Leave earlier than you need to!** When you return to the clinic the following day, you will sign in once again, and the receptionist will alert the nurse of your arrival. She will take you to the recovery room, take your vital signs, and verify that you have not consumed anything since midnight. You will be asked to empty your bladder and undress, leaving your shoes, socks, and a bra on. You will be given a cloth gown, and may wear your robe over this gown if you have brought one. *You will then be made as comfortable as possible while we wait for your cervix to adequately dilate, which can take several more hours.*

#### **Procedure**

Once you are adequately dilated, a medical assistant will bring you into the procedure room. The procedure room looks very similar to a regular doctor's exam room. Unfortunately, we cannot allow friends, family or partners to accompany you as only



medical personnel are allowed in the medical suites. A staff member will remain with you the entire time you are in the procedure room. You will receive anesthetic medications through an intravenous line (IV) before the procedure begins. This sedation will make you fall asleep and remain asleep and unaware throughout the procedure. Your procedure may take between 15-20 minutes.

### **Recovery Room**

After the procedure, you will be brought into the recovery room for about 1 hour. Our nurses will monitor your vital signs, bleeding and cramping to make sure that you are recovering well. They will offer you something to drink and eat, will go over your aftercare instructions and give you a copy of them to take home with you. 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, and you must not drive for 24 hours after your abortion. 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. Cold compresses may help swollen or tender breasts. Please feel free to call us with questions or concerns.

### **Additional Information About IV Sedation:**

Patients having IV sedation will be unconscious during the procedure, and may receive oxygen and nitrous oxide through a breathing mask. Immediate sedation and amnesia typically wear off 2-3 minutes following the procedure. Patients having IV sedation receive a combination of two or three medications:

- Fentanyl is a narcotic analgesic that provides pain relief and sedation.
- Versed is a benzodiazepine (central nervous system depressant) that provides sedation and amnesia.
- Diprivan is a sedative hypnotic agent that produces sedation and sleep.

Additional drugs may include Droperidol, Reglan, Brevital, Atropine, and others.

### **Possible risks:**

- 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.

### **Possible side effects:**

- 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.

### **Additional precautions:**

- Heavy and greasy food should be avoided after the procedure. Most patients can eat a meal within 4-5 hours.
- 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, and should not make important decisions for 24 hours.

***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.***



### **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 whom 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 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 woman'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.