



# Consent & Care Coordination: Medication Abortion (Revised Jan 10, 2019)

Saskatoon Community Clinic  
455 2<sup>nd</sup> Ave N, Saskatoon SK  
Phone (306) 652-0300

Name \_\_\_\_\_

Date \_\_\_\_\_

**\*\*\*Please keep and refer to this form throughout the medication abortion process. If you require emergency care, give this form to your provider: it contains important information helpful in caring for you.\*\*\***

**Pregnancy options including parenting, adoption, and abortion. An abortion is intended to end the pregnancy.** Please refer to the handout "Comparison of Early Pregnancy Options" for additional information about medication and surgical abortions.

### Lab work

Date \_\_\_\_\_ B<sub>h</sub>CG \_\_\_\_\_ Hb \_\_\_\_\_ Blood Group &RH \_\_\_\_\_

### Ultrasound

Date \_\_\_\_\_ Gestational Age: \_\_\_\_\_ weeks \_\_\_\_ days, location: intrauterine uncertain  
Notes/Ectopic Risk Assessment:

Note re **Tubal Pregnancy**: If the location of pregnancy is uncertain, there is a small chance you may have a tubal or ectopic (outside the uterus) pregnancy. This uncertainty need not delay the medication abortion process. However, strict follow-up is extremely important to ensure resolution of the pregnancy. You must seek care if you have signs or symptoms of a tubal pregnancy and possible rupture (see page 3).

**Winrho injection** (if needed).

Date \_\_\_\_\_ or Not Applicable

If your blood group is Rh negative, you will need Winrho within 72 hours of taking the first medication. Your nurse will make arrangements for you to pick up Winrho from the hospital and bring it back to the clinic for injection.

### First Medication

Date \_\_\_\_\_ Gestational Age: \_\_\_\_\_ weeks \_\_\_\_\_ days Time: \_\_\_\_\_

**Mifepristone** 200 mg orally blocks progesterone, a hormone needed for the pregnancy to continue. You may eat and drink normally.

**Methotrexate** (dose=50 mg/m<sup>2</sup>) stops the growth of the pregnancy and is given by intramuscular injection. Avoid multi-vitamins and food containing folic acid for the week around the day you take methotrexate as it can make it less effective (see detailed handout).

Side effects from the first medication are uncommon and usually mild, but may include nausea, diarrhea, headache, dizziness, bleeding, and abdominal cramping. Methotrexate may also cause mouth sores for 1-2 days.

**Second Medication** (24-48 hours after the mifepristone with no repeat unless between 63-70 days.  
3-7 days after the methotrexate with one repeat.)

**Date** \_\_\_\_\_ **Time** \_\_\_\_\_ **Repeat Time** \_\_\_\_\_

**Misoprostol** 800 mg is taken at home to help your uterus contract and pass the pregnancy tissue.

**Buccal:** put the tablets into the inside of your cheek and hold them there for 30 minutes while they slowly dissolve. After 30 minutes, swallow anything remaining with water.

Cramping and vaginal bleeding is usually more than your usual period. You need to remain at home, rather than working or attending school when you take the misoprostol. **During the bleeding, use full size maxi-pads (not tampons) and refrain from vaginal intercourse.**

Side effects from the second medication may include include nausea, vomiting, diarrhea, fever, dizziness and low grade fever, and are rarely severe. If the vomiting is severe, dimenhydrinate (Gravol) rectal suppositories can be helpful (available from pharmacies without a prescription).

**Cramping** in the lower abdomen is normal. Severe cramps usually mean that some pregnancy tissue is passing out of the uterus. Cramping often starts within 2 hours of taking the misoprostol, before the bleeding starts. After the pregnancy tissue passes, cramping is usually mild and stops within 4-7 days. To relieve this discomfort, take naprosyn (Naproxen) and/or acetaminophen with codeine (Tylenol#3) as prescribed (do not take acetylsalicylic acid such as aspirin). Extra strength ibuprofen (Advil) and/or acetaminophen (Tylenol) are also good options. A hot water bottle or heating pad can also really help.

**Bleeding** usually starts within 4-6 hours of taking the misoprostol. It may be like a heavy period, sometimes with clots. You may notice that you pass a small amount of whitish-gray tissue or solid clot about the size of a grape, which may be the pregnancy tissue. If you are >56 days gestation, you may see fetal tissue. The bleeding may continue off and on for a few weeks, or may decrease to spotting after a few days.

#### **Lab follow-up**

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

You **MUST** have blood work done to confirm the termination is complete. You can bleed and pass clots and still be pregnant. You must be willing to go for additional follow-up lab work as advised.

#### **Phone follow-up**

**Date** \_\_\_\_\_ **before 3:00 PM**

A few days after you get your blood work, your nurse or doctor will phone you and tell you if the abortion process is complete. You may need to have additional blood work done. If you do not hear from your nurse or Dr by 3:00 PM, please phone the clinic.

#### **Birth Control:**

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

**Start birth control** as advised by your doctor. You can become pregnant as early as 7 days after the termination and before your next period. Usually you start the birth control the day of or after you are phoned with your lab results to confirm the abortion is complete. If you are prescribed an IUD, make an appointment to have the IUD inserted within 7 days of this phone call confirming the abortion is complete. For more information on birth control options, see <http://www.sexualityandu.ca>.

**For a medication abortion, you must**

- **have a telephone,**
- **have transportation in case of an emergency,**
- **follow through with the entire multi-step process as advised** (including medications, labwork and phone calls at the pre-arranged dates and times), and
- **have a surgical abortion if the medication abortion doesn't work.** If the medication abortion fails it is very likely the fetus will be damaged or deformed.

**Rare risks are serious infection, hemorrhage requiring blood transfusion or hysterectomy, and death.** In perspective, first trimester abortion is at least 10-14 times safer than childbirth.

**Phone 306-652-0300 or attend Emergency if you experience:**

- excessive bleeding (soaking 2 pads per hour for more than 2 hours in a row),
- severe abdominal pain that is not helped at all by using the pain medications,
- continued vomiting or are unable to keep fluids down for more than 4-6 hours (and are getting dehydrated),
- a fever greater than 38 C (100.4 F) for more than 4 hours.

-pregnancy of uncertain location AND

- increasing one-sided pelvic pain,
- pain that is sharp or seems to be coming from an unusual location, such as your shoulder tip or underneath one of your shoulder blades, or
- feeling unusually weak or faint.

I, \_\_\_\_\_, consent to and authorize Dr. \_\_\_\_\_ to provide a medication abortion to myself. The procedure has been explained to me and I understand the nature of the procedure. I have been given an opportunity to ask questions and have had my questions answered.

**This decision is voluntary and without coercion.**

Verbal consent expressed by patient

Patient consented to receive this form and email risk waiver via email and accepts risks associated with email communication.

Signature of patient/guardian X \_\_\_\_\_ Date \_\_\_\_\_

Signature of physician \_\_\_\_\_ Date \_\_\_\_\_