

The Bay Centre for Birth Control(BCBC)

76 Grenville St., 3rd Floor Toronto ON, M5S 1B2

Tel: 416-351-3700 Fax: 416-351-3727

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PATIENT IDENTIFICATION			

INFORMED CONSENT FOR MEDICATION ABORTION WITH MIFEPRISTONE and MISOPROSTOL

After reviewing my options, I am requesting a medication abortion with mifepristone and misoprostol (abortion with pills). Women's College Hospital is following evidence-based protocols for medication abortion endorsed by the Society of Obstetricians and Gynecologists of Canada and the National Abortion Federation.

I understand that I should not begin a medication abortion unless I am sure that I want to end my pregnancy, and that I will be counselled on my options including having a surgical abortion if the medication fails, since there is a risk that misoprostol may damage the current growing pregnancy.

I understand that with these doses of mifepristone and misoprostol, there are no known long-term side effects. Short-term side effects include diarrhea, nausea, vomiting, abdominal pain, flatulence (gas), fever, chills, and headaches. Approximately 2-5% of women will either need or choose to have a surgical aspiration (dilatation & curettage or D&C) for ongoing pregnancy, too much bleeding, pain, or because they are tired of waiting to pass the pregnancy tissue. In comparison, the risk of a surgical abortion being incomplete and requiring a repeat D&C is less than 1%. Infections that can be treated with antibiotics occur in less than 1% of women and very rarely (less than 1/100,000) will a serious infection occur. The risk of a life-threatening event (blood clot, hemorrhage etc) should I choose to continue the pregnancy is 1/10,000.

I understand that I will be given prescriptions for pain medications and phone numbers to reach the clinic or the on-call provider if I experience any problems or have any questions after I leave the clinic.

I understand that one to five hours after I insert the misoprostol, I will experience cramping and bleeding. The cramping can be strong for several hours, but usually not for more than 24 hours. The bleeding can be heavy and there may be clots for several hours. I may see some pregnancy tissue (usually white or gray in colour). If the heavy bleeding lasts for more than 12 hours, or if I soak more than two maxi pads each hour for two hours in a row, I know that I should go to the emergency room. I know that I should call the clinic if I do NOT bleed at all within 24 hours of inserting the misoprostol.

I understand that if I do not have OHIP/valid health coverage and cannot afford the WCH services related to medical abortion at BCBC, I will be provided them without charge. However, I acknowledge that in the rare situation that I require emergency care after the medical abortion, if I do not have OHIP/ valid health coverage, I may be required to pay a hospital and/or physicians for the emergency care.

I understand that it is important that I follow-up with the clinic to be sure that the abortion is complete, and that this visit may be by phone/video or in person. I know that before this visit a blood test or ultrasound may be done and that if the abortion has not been completed, I will have the option of taking another dose or doses of the misoprostol or of having a surgical aspiration (a suction procedure to empty the uterus) to complete the abortion.

All records are maintained within the patient health record and all information will be kept confidential as per Ontario's Personal Health Information Privacy Act.

I have had the opportunity to discuss all questions I have concerning the medical treatment I may receive. I have read and understand this consent form. I can request to receive a copy of this consent form for my records

				Date:/
Patient's name (please print):	1	Patient's signature:		DD / MM / YYYY
		to a second of		Date://
Health Care Provider name (ple	ease print):	Health Care Provider signature:	Designation:	DD / MM / YYYY
Form number F	3083 (6-2	020)		
				Page 1 of 1
F3083				



bay centre for birth control

FOLLOW-UP INFORMATION AND INSTRUCTIONS FOR MEDICAL ABORTION

STARTING YOUR ABORTION

Inside the Mifegymiso medication box, you will find one BLUE box and one ORANGE box

Step 1: you will swallow the MIFEPRISTONE (ONE tablet in BLUE box):

- This pill will begin the abortion process.
- Most people have little to no side effects with this medication.
- You may start to bleed or cramp a bit but you still need to take the misoprostol (Step 2) as directed below.
- If you have been nauseous during your pregnancy, you may wish to take medication to prevent nausea (i.e. Gravol) before swallowing the mifepristone. If you vomit within an hour of taking the mifepristone, call us. If you vomit after 1 hour, the medication will still work.

STEP 2: you will open the MISOPROSTOL (FOUR tablets in ORANGE box):

WHEN TO USE THE MISOPROSTOL: At least 24 hours (1-2 days) after you swallow the MIFEPRISTONE

- This medication will help push out the pregnancy tissue.
- For best pain relief, take Naproxen 500 mg OR Advil 800 mg 1 hour before inserting the misoprostol. This medication may cause stomach upset (take with food).
- If you have been very nauseous during your pregnancy, you may also wish to take Gravol 1 hour before the misoprostol.

HOW TO TAKE:

- Wash your hands and remove the pills from the box
- Choose ONE method:
 - a) Place 2 of the tablets deep in each cheek pouch (4 total) between your cheek and lower gums. Keep the tablets there for 30 minutes and do not eat or drink during this time. After 30 mins, swallow the rest of the tablets.

OR

- b) Place all 4 tablets deep inside the vagina and lie down for 20 minutes.
- Cramping and bleeding usually start 1 to 4 hours later
- Drink lots of clear fluids (juice, pop, broth, tea)
- Eat lightly because of the possibility of vomiting
- If you are between 9 and 10 weeks pregnant, you will take a second dose of this medication 4 hours after the first dose.

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MIFEGYMISO SCHEDULE:		at		
Step 1: You will swallow the MIFEPRISTONE of	on(DD/MM/YYYY)		TIME	
Step 2: Take 500 mg of Naproxen or 800 mg of	of Ibuprofen 60 minutes befor	re taking MISOPROS	TOL.	
You will insert all 4 MISOPROSTOL tablets –	a) 2 in each cheek pouch - a b) deep in the vagina – and	nd keep there for 30) minutes	
Radius at	and	a	t	
(DD/MM/YYYY)	TIME (DI	D/MM/YYYY)	TIME	
Based on your last menstrual period (or other lifyou are 9 - 10 weeks pregnant, you will take	er testing) we believe you to e a second dose of misoprost	be wee ol (4 pills) FOUR HO	ks pregnant. URS AFTER your firs	t 4 pills at:
TIME				

WHAT TO EXPECT

Cramping in the lower abdomen is normal and is the worst when your body is trying to pass the pregnancy tissue. Cramping often starts before the bleeding, within 2 hours of taking misoprostol. To help manage the cramps, you can rest, use a heating pad, massage your lower belly or take medications. If the pain is not helped by Naproxen 500 mg, you may use 1-2 Tylenol #3 tablets taken 4 hours apart as a backup. This medication may cause nausea. After the pregnancy tissue passes, cramping is usually mild & stops within 2-3 days. Uterine Massage is done by taking the fingertips of both hands and pressing into your belly just above the pubic bone. This can be done for 5 minutes a few times a day to help move clots through and decrease bleeding and cramping.



Form No. F-3087 (8-2020)

Bleeding starts between 30 minutes and 24 hours of using misoprostol, usually within 2-4 hours. It is usually heavier than a period, sometimes with large clots. You may notice passing a small amount of white tissue or clot up to the size of a grape. This is the pregnancy tissue. After the second day, the bleeding should decrease to no more than a light-moderate period. The bleeding/spotting may continue for a few weeks. We recommend that you use pads for the first few days to allow you to monitor your bleeding until the bleeding slows down.

Sexual activity: You should avoid unprotected vaginal intercourse until your follow-up has determined that the abortion is complete. It is important for you to have a birth control plan in place because you can get pregnant before you get your first period.

Pregnancy Symptoms: Nausea and vomiting usually go away in a few days. Chest/breast tenderness, fatigue, and mood swings can take 2 weeks to go away, but should improve.

Pregnancy hormones (bHCG) remain in your body for up to 4 weeks after a medication abortion, so please do NOT do a home pregnancy test before 4 weeks after your abortion, as it may be falsely positive.

Birth control: You can get pregnant again within one week of having a medical abortion, even if you are bleeding. If you don't want to be pregnant, know that:

- Condoms can be used immediately
- Birth control pills/patch/ring or DepoProvera or Micronor can be re-started the day after Step 2 (misoprostol)
- IUDs can be inserted once the abortion is confirmed to be complete

EMERGENCIES:

Emergencies are rare but it is important to be prepared.

- It is important for you to be able to call us
- Consider who will drive you to the nearest hospital (ideally within one hour away) if necessary

GO TO EMERGENCY ROOM/CALL IF YOU HAVE:

- Excessive bleeding (soaking more than 2 large sanitary pads per hour for 2 consecutive hours)
- Severe abdominal pain not managed by the pain medications
- Continued vomiting or if you cannot keep fluids down for more than 6 hours
- A fever greater than 38C that starts more than 24 hours after taking misoprostol.
- A feeling of severe dizziness or fainting, chills or shortness of breath
- Symptoms of a tubal pregnancy: increasing one-sided pelvic pain, sharp shoulder pain

HOW TO CONTACT US:

Monday to Friday 8:00 am - 4:00 pm: Call our nursing line: 416-351-3726

FOR URGENT MEDICAL ISSUES evenings/weekends: Call Women's College Hospital at 416-323-6400 & ask for the Bay Centre doctor on call.

If you feel your symptoms are so bad that you cannot wait for a return phone call, go to your nearest emergency room and TAKE THIS FORM WITH YOU. If you are not sure if you should go to the emergency room, please call us.

If you do not have OHIP or other valid health coverage, you may be required to pay for this emergency care.

TORY FOLLOW-LIP VISIT: (A or B)

	1-2 weeks (no IUD insertion) 2 weeks with IUD-insertion
(DD/MM/YYYY)	Hall Take growing the factor of the con-
with IUD insertion: you must have your blood dra	wn 2 days before the appointment as discussed with the doctor.
B) PHONE FOLLOW-UP:	
Bloodwork at your local lab on(DD/MM/YYYY)	
Phone call from doctor on	between 1:00 and 4:00 pm
(DD/MM/YYYY)	
	clinic
If you do not hear from the doctor by 4:00 pm, please call the	CIIIIC.
	re unable to follow the above instructions or keep your follow-up