



Surgical Abortion Suction (Dilation & Curettage)

Metropolitan Family Planning Institute has been providing safe elective surgical abortions to the Washington D.C. Metropolitan area for over 30 years. Our safe and gentle surgical procedure is available up to 17 weeks of gestation. Our unique approach to cervical preparation prior to the procedure has given us the ability to minimize painful instrumentation and cervical dilation. It also gives us the ability to provide same day procedures up to 17 weeks.

By providing our patients with as much information as possible we hope to show that our approach ensures minimal instrumentation, pain and trauma. We also hope this information will make our patients more comfortable and at ease with their decision. We understand that this is not an easy decision so our goal is to make your experience at our clinic a pleasant and comfortable one. Please read the following information about the surgical abortion procedure provided at our clinic.

Before Your Procedure

1. After completing a basic history form you will be called for a sonogram to verify the estimated gestational age of your pregnancy.
 - a. It is very important that you notify our staff of any drug allergies that you have. **Drug allergies are the leading cause of major morbidity and mortality associated with this procedure.**
2. You will then be called into our laboratory where our friendly and gentle lab staff will check your vital signs and draw blood to check your RH status as well as a current hemoglobin and hematocrit.
 - a. Approximately 15% of women are RH negative and will require a Rhogam injection after the procedure to protect future pregnancies.
 - b. There is a small fee for this injection if the need arises.
 - c. If you have further questions about RH status please ask one of our staff to discuss the information further.
3. During this time, we encourage you to read our office provided information about the surgical abortion procedure. Our staff is available to answer any questions.
4. Once your decision is made and depending on your estimated gestational age you will be given a medication called Cytotec (misoprostol) which will help to accomplish natural cervical dilation and aid in the process of making mechanical dilation easier and gentler. Please see the Frequently Asked Questions portion for more information about why we use Cytotec.



The Procedure

1. After about 30-60 minutes, we will call you to the procedure room where you will be asked to undress from the waist down.
2. If you have elected to have Conscious Sedation, it will be administered at this time by one of our physicians.
3. The physician will perform a pelvic and speculum exam.
4. Betadine, an antiseptic, will then be used to cleanse the cervix
 - a. It is important to let our staff know if you have an allergy to betadine or Iodine or other antiseptic agents.
5. Next the physician will inject a local paracervical anesthetic block. This is done to help reduce pain during your procedure.
 - a. **It is VERY IMPORTANT to inform our staff and physician if you have an allergy to any anesthetic or have had any allergic reaction to anesthesia in the past.**
 - b. **Most severe and sometimes FATAL complications during the procedure are as a result of allergy to anesthetic medications and NOT the procedure itself.**
6. After a few minutes have passed, we will perform the procedure using only vacuum aspiration and a plastic cannula.
7. The actual procedure time is extremely short, usually no longer than 2-5 minutes.
8. You will experience cramps like those of a normal period, which will subside shortly after the procedure has been completed. This cramping sensation, while uncomfortable, is the body's natural way of preventing excessive bleeding.
9. After the procedure you will continue to lie down until one of our medical staff helps you to get dressed. If you are having any dizziness or light-headedness please continue to lie down until it has resolved.

After Your Procedure

1. After your procedure is complete you will be led to our comfortable post procedure area where you will be observed for a short period of time.
2. After a brief stay in the recovery room, you will be called for a post procedure sonogram to ensure that the procedure has been completed satisfactorily.
3. You will receive a prescription for antibiotics and pain medication.
4. You will receive all post procedure instructions at this time as well.
5. If you wish to start contraception, please let our staff know and one of our physicians will have a consultation with you to select what is the best option for you.
 - a. We may have samples of different types of contraception and will dispense them if available.
6. We will schedule a follow up appointment to take place 2 weeks after your procedure. During this follow up we will conduct another sonogram and address any issues that you may have. **There is no fee for follow up visits** and they are a mandatory part of your care.



Post Abortion Instructions

After your procedure is complete and we have examined both the tissue removed, and the images from your post procedure sonogram you will leave the office reassured that you are no longer pregnant. Here are some basic instructions for your post procedure care

1. You may resume a normal diet immediately; if you are still experiencing nausea or vomiting, please avoid spicy or greasy foods.
2. You should use pads for 2 weeks after the procedure; using tampons increases the risk of infection.
3. **AVOID** vaginal intercourse for 2 weeks after the procedure and when you resume intercourse make certain to use condoms.
4. You should rest and undertake light activity on the day of your procedure. You may resume your normal daily activities gradually.
5. **AVOID** strenuous activity, especially bending and lifting for approximately 1 week.
6. If you need a work/school note please let our staff know and we will provide one for you. Our notes are very general and do not contain specific information about what was done in the office.
7. You May Shower as desired, but **AVOID** tub baths, swimming, douching for approximately 2 weeks after your procedure.
8. If you plan to become pregnant soon we recommend that you wait at least 3 normal menstrual cycles prior to attempting your next pregnancy.
9. Symptoms of pregnancy will usually resolve in about 10 days. If you are experiencing signs of pregnancy past this time, please call the office.
10. The majority of women will have a period by 4-6 weeks after the procedure has been completed. If it has been more then 6 weeks and you have still not had your period, call our office to schedule an appointment to be seen.

Special Instructions

One of our physicians is available **24 hours a day**. If you had a procedure in our office and have any questions or concerns, please do not hesitate to **call us first**. Our physicians specialize in this type of procedure and thus have the much-needed expertise to help with problems that you may be having. **We cannot be responsible for care that you receive at any institution other then through our office.** If you decide to see your personal physician or feel you need to go to the Emergency Room, please have their physician call us so that we can provide necessary details that may be important for your care. Here are some special instructions for problems that may arise.

Infection	<ul style="list-style-type: none"> • It is important to check your temperature each day for the following 5 days after your procedure. • If you have temperature above 100.4° please give us a call. • A fever may indicate infection and thus it is important to report it immediately so that treatment can be initiated promptly. • A fever may sometimes be accompanied by a foul smelling discharge.
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	<ul style="list-style-type: none"> • While infection does not occur frequently, it is the most common complication and occurs most commonly within the first week. • Most infections can be treated with oral antibiotics and do not require hospitalization if treated early.
Bleeding	<ul style="list-style-type: none"> • Excessive bleeding is a complication that is less common than infection. • The amount of bleeding following the procedure can vary from patient to patient. • If you are having heavy bleeding, such that you are completely saturating a pad every hour for more than 2 hours, you must call us immediately or go to the nearest emergency room. • The majority of women will have bleeding that is similar to their period for approximately 3-5 days after the procedure. • You may have bleeding that is increased with position changes such as arising from a seated position. • Old blood may sometimes accumulate in the uterus and is usually brown in color and may have an odor; this should not be confused with infection unless fever is also present. • Your first period after the procedure may be heavier than your normal period. If this continues for more than two cycles, please call our clinic.
Cramping VS Abdominal Pain	<ul style="list-style-type: none"> • While most women find that the heavy cramping associated with the procedure subsides shortly after the procedure; it is normal to have mild cramping for several days after your procedure. • NSAIDs (Non Steroidal Anti Inflammatory Drugs) including Motrin, Aleve, Ibuprofen, Advil are the best medications for uterine cramps. • Some women have allergies to NSAIDs or are unable to tolerate them; let us know if this is the case and we will provide prescriptions for alternative pain medications. • If you are having severe abdominal pain that is not resolved with pain medications call our office immediately as this may be a sign of a very uncommon, but serious complication.
Breast Fullness or tenderness	<ul style="list-style-type: none"> • Just like after giving birth it is possible for milk to be produced from a woman's breast after an abortion. • This is more likely if you were more than 12 weeks pregnant. • Here are some suggestions to help if this occurs <ul style="list-style-type: none"> • Wear a tight fitting bra • Decrease your fluid intake • AVOID any breast or nipple stimulation. • Use a cold compress on your breasts for 10 minutes every 2 hours • NSAIDs may also help reduce some breast pain



Frequently Asked Questions

1. Why do you give Cytotec (Misoprostol) before the procedure?

- a. We routinely give our patients Cytotec (misoprostol), which is a synthetic prostaglandin. This medication is used to pretreat and soften the cervix.
- b. This has two effects:
 - i. It significantly reduces the pain associated with dilation
 - ii. It also makes the procedure much safer because it lessens the need to dilate the cervix. Dilation of the cervix is not only painful but also carries the risk of more potential for damage.
- c. The number of Cytotec tablets depends on many factors including your estimated gestational age, number of previous vaginal deliveries, number of previous C-sections and history of fibroids
- d. **It is important to understand that Cytotec can have dangerous outcomes on a continuing pregnancy and that once you take this medication your decision to terminate is final.**

2. Why do you do a sonogram before an abortion?

- a. We routinely do sonograms on all patients to determine an accurate dating of pregnancy. Other clinics may rely solely on doing a pelvic exam but this carries a higher incidence of error. We **NEVER** do a procedure without doing a sonogram and knowing your estimated gestational age.
- b. The sonogram also allows us to identify pregnancies that are abnormal. If we are not able to see a pregnancy inside the uterus on either an Abdominal or Vaginal sonogram this may raise suspicion for an Ectopic Pregnancy (pregnancy outside the uterus). Ectopic pregnancies are potentially very serious and require further evaluation by blood work to check your HCG level 2 times (48 hours) apart. If this situation arises a physician will have a consultation with you to explain everything in further detail.

3. What is conscious sedation?

- a. We offer conscious sedation for an additional fee for any patient who is undergoing our surgical abortion.
- b. It consists of a two-part process, the first of which consists of a medication for anxiety. The second part consists of a single intramuscular injection, which contains a strong pain medication as well as a strong sedative.
- c. The combination will allow you to endure the procedure with **LESS** pain, discomfort, cramps and anxiety.
 - i. These medications may make you drowsy, but they will **NOT** put you to sleep or eliminate all feeling during the procedure.
- d. You can only receive conscious sedation if you have someone that can drive you home after the procedure
- e. Please ask the front office about this extremely valuable addition to your care



4. How far along can I be for the procedure?

- a. In our office we do surgical abortions from 6 weeks up to 17 weeks.
- b. If you are further along then 17 weeks we can refer you to a trusted clinic in the area that does abortions for pregnancies that are further along.

5. How long does the process take?

- a. While the actual abortion procedure takes no more then 5 minutes your total office visit can take up to 2 hours which accounts for time for registration, sonogram, lab draws and pre procedure preparation.

6. Will the Surgical Abortion have any effect on my ability to have children in the future?

- a. First trimester abortion has a less than 1% complication rate and is at least 10 times safer than childbirth.
- b. Childbearing ability is not affected, barring rare serious complications.

7. How soon after the procedure can I start or resume birth control?

- a. Once our physician has cleared you after the procedure you may start or resume birth control immediately.
- b. We offer a wide variety of contraceptives including: Birth Control Pills, Nuvaring, Depo Provera Injections, Long Acting Reversible Contraceptives (Paragard and Mirena IUD as well as Nexplanon (subdermal Implant), Ortho Evra (Patch) and may others.
- c. We also offer gynecological exams at a discounted rate for patients that we are already seeing for family planning.
- d. Ask our office staff for these valuable additions to your care.

8. What are the advantages & Disadvantages of Surgical Abortion?

Advantages	Disadvantages
The abortion will be completed on the same day as your initial appointment.	It is more invasive then the medical abortion and necessitates a vaginal exam, speculum exam and use of surgical instruments.
In general it is associated with less bleeding and less cramping then the medical abortion.	The surgical procedure cannot be done earlier then 6 weeks of pregnancy.
Our medical staff will be present throughout the entire process.	There is an inherent risk of causing a uterine perforation; overall the rate is 1-3%
The surgical procedure can be completed up to 17 weeks of pregnancy in our clinic and thus can be further along then the medical abortion	A support person cannot be with you in the procedure room