Medication Abortion
Information & Instructions
You should also read the Mifeprex Medication Guide*

If you choose a medication abortion, it means that you are pregnant and do not want to be pregnant. We will continue if you desire a medication abortion and feel that your decision is voluntary. If you would like to talk with someone about your decision or have general questions about pregnancy services provided here or elsewhere, please contact Social Services at 510-642-6074 for support.

Process & Summary

You take medications to end an early pregnancy, 70 days (10 weeks) or less since your last menstrual period began.

You are expected to have cramping and bleeding, and may experience strong pain, chills, nausea or diarrhea, which you will manage at home.

You should have access to a telephone and transportation in case you need to call or return to the clinic for things you are worried about or for an emergency.

The day of your first appointment
You swallow the mifepristone pill during your clinic visit (make sure you eat a light meal before your appointment to help prevent nausea). The abortion starts when you take the first pill.

24-48 hours later (at home)
24 to 48 hours after taking the mifepristone, you take 4 pills of misoprostol by holding them in your cheeks.

Mifepristone and misoprostol work together to cause the pregnancy to be passed from your uterus like a miscarriage or heavy period.

You are likely to pass the pregnancy within 2 to 24 hours after taking the misoprostol pills. Some people may need a second dose of the misoprostol pills.

Seeing pregnancy tissue at home: When you pass the pregnancy, you usually will have heavy bleeding and strong cramping for about 1 to 4 hours. Most people pass
some blood clots and often the pregnancy is in one of those clots. If you are less than 7 weeks pregnant, the embryo is less than 1 cm long and is usually very hard to identify. If you are between 8-10 weeks pregnant, the embryo is between 2 to 3.5 cm long and you may be able to recognize it. It often passes into the toilet within a blood clot.

**Follow up**
We confirm the pregnancy has passed by a repeat ultrasound. Most, but not all people can tell if they passed the pregnancy by their own symptoms.

**In some cases, the pills do not work.** This happens in about 2 to 7 out of 100 people. An aspiration abortion is recommended if this happens.

**What to expect at your first appointment**

- **Lab tests** including pregnancy test that measures the amount of pregnancy hormone in your body, your blood type or Rh status (you should receive a Rho immune globulin shot if you are Rh negative), hemoglobin test to determine if you are anemic, chlamydia and gonorrhea testing if it is appropriate.

- **An ultrasound** to confirm the pregnancy is in the uterus.

- **You will take a mifepristone tablet** before you leave which begins the abortion process. Most people do not have side effects from mifepristone, although some people feel nauseated or have vaginal spotting or bleeding. A small percentage of people (less than 5 in 100) have heavy bleeding and pass the pregnancy before taking the misoprostol.

**When you leave you should have:**

- These instructions
- 4 misoprostol tablets (to take 24-48 hours after taking Mifepristone)
- Anti-nausea medication, ondansetron or phenergan
- Ibuprofen for pain/cramping
- A plan for follow up (clinic appointment, numbers to call in an emergency)
- Maxi pads
- A heating pad which can be helpful for expected cramping

**Taking the Misoprostol**

You will take the misoprostol 24-48 hours after taking the mifepristone. We recommend you take the misoprostol pills during the day. You should have a phone, a bathroom and your support person with you for the day. We recommend that you eat a light meal before you start. Drink water (gradually) throughout the day.
Place 2 misoprostol tablets between your gums and each cheek (4 pills total) for 30 minutes and then swallow anything left over with a drink of water.

![Figure 1](image)

2 pills between cheek and gum on left side + 2 pills between cheek and gum on right side

Medications you will receive for side effects:

<table>
<thead>
<tr>
<th>Medication</th>
<th>Effect</th>
<th>Dosage Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ibuprofen</td>
<td>For pain</td>
<td>600 mg every 6-8 hours as needed with food</td>
</tr>
<tr>
<td>Or</td>
<td></td>
<td>We recommend you take the maximum dose as soon as you feel cramps</td>
</tr>
<tr>
<td>Acetaminophen</td>
<td>For pain or fever</td>
<td>500-1000 mg every 4 hours as needed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Max dose 3000 mg in 24 hrs</td>
</tr>
<tr>
<td>Phenergan</td>
<td>Nausea/vomiting</td>
<td>25 mg every 6 hours as needed</td>
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<tr>
<td></td>
<td></td>
<td>Can make you drowsy</td>
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</tbody>
</table>

Follow-up
You will return to the Tang Center approximately one-two weeks after your initial visit to assure the abortion is complete. At this visit you will have:

- **an ultrasound** to assure that the abortion is complete.
- **another blood test** to measure the pregnancy hormone might be needed.

Usually no additional visits are needed after we make sure the pregnancy has passed but you should still call if you have concerns.
Note: If needed, other follow-up arrangements can be discussed and individualized to assure abortion completion.

**Bleeding and Cramping**
Cramping and bleeding are a normal part of a medication abortion.

**Cramping and pain**
- Usually starts between 30 minutes to 4 hours after you use the 4 misoprostol pills.
- Resting and using a heating pad or hot water bottle may help.
- Use your pain medication as directed.

**Bleeding**
- Usually starts 30 minutes to 10 hours after you use the misoprostol pills.
- Can be heavy for a few hours.
- Lasts for an average of 9 to 16 days. Light bleeding may last up to 30 days.
- We recommend using pads rather than tampons for the first few days because it is easier to monitor how much you are bleeding.
- You may have a "second wave" of heavy bleeding. A few days after you have passed the pregnancy, you may experience another episode of heavy bleeding.

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**Call or seek help if you:**
- Are soaking two thick, full-size pads per hour for two hours in a row or if you are concerned about heavy bleeding. Heavy bleeding is expected for a short time. Calling us doesn’t necessarily mean you will need to come to the clinic or go to the emergency room.
- Have no bleeding or only spotting 24 hours or more after using the misoprostol. (Some...
people need a second dose of misoprostol.)

- Have prolonged bleeding. Having bleeding heavier than your period for more than 2 weeks or having light bleeding for more than 4 weeks
- Are otherwise worried about your bleeding.

Other concerns, risks & when to call the clinic or clinician on-call:

Nausea/Vomiting/Diarrhea
Nausea is common after taking misoprostol.
Call if vomiting keeps you from using the pain medication you need.
Call if you vomited within 2 hours after you took the Mifepristone, as it may not work.

Infection
About 1 woman in 1000 will get an infection after having a medication abortion.
Signs of infection include: Headache, malaise, weakness, fever or chills.
- These side effects, especially chills, can be normal around the time you take the misoprostol.
- They are not normal if they begin 24 hours or more after taking the misoprostol
- Call if you have a fever higher than 100.4 F (38 C). Fever within a few hours of taking the misoprostol is usually not a concern.

Continued Pregnancy
After taking both medications, the pregnancy continues to grow in less than 1-3 out of 100 people. Misoprostol has been reported to cause birth defects if the pregnancy does not pass. You should have an aspiration abortion if the medication abortion does not work. If you are still less than 10 weeks, you could try the medication again.

Death is a rare complication after abortion, miscarriage and childbirth. Death from a medication abortion may be slightly more likely than death from an early aspiration abortion. We estimate the risk of death to be about 10 in 100,000 people.

Contact Information - someone is available 24/7

<table>
<thead>
<tr>
<th>WHEN</th>
<th>NUMBER</th>
<th>WHO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday-Friday 8 am to 5 pm</td>
<td>510-643-7197</td>
<td>Tang Center Clinician on-call</td>
</tr>
<tr>
<td>Evenings/weekends for urgent issues that cannot wait for regular hours</td>
<td>855-373-3109</td>
<td>After hours advice nurse</td>
</tr>
<tr>
<td>Emergency</td>
<td>911</td>
<td>In cases of hemorrhage (too much bleeding) or other immediate emergency. If you cannot reach a healthcare provider, go to the nearest hospital emergency room</td>
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Resources for Counseling/Emotional support:

Social Services at the Tang Center: 510-642-6074
Our team of compassionate, skilled counselors provide a myriad of counseling and case management services for students making decisions around pregnancy. Whether you are making decisions around continuing or terminating a pregnancy, adoption services, or other pregnancy concerns, we are here to help at any point in your process. Call our administrative support staff at 510-642-6074 to schedule an appointment or ask questions about our services.

Exhale - 617-749-2948. Offers a free, national textline that provides emotional support, resources and information. All texts are completely confidential and counselors offer support and respect without judgment. The Exhale textline is available to individuals who have had abortions, and to their partners, friends, allies, and family members.