



Saskatchewan
Health Authority

Surgical Termination of Pregnancy

CEAC 0096

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*This document was designed to support patients of the former RQHR.

Women's Health Centre

Welcome to the Women's Health Centre (WHC) at the Regina General Hospital. The WHC is staffed by doctors, nurses and counselors who are committed to providing quality care in a supportive, safe and confidential atmosphere.

This booklet has information that helps you prepare for the procedure. Read the booklet carefully and let your nurse know if you have any questions or concerns.

Making an appointment

Call (306) 766-0586 (outside Regina call 1-800-563-9923).

The WHC is open Monday to Friday from 8:00 a.m. to 4:00 p.m. All clients asking for a pregnancy termination need to make and attend 4 appointments:

Appointment 1: A pre-counseling session with a nurse. Laboratory work is done at this time. This takes about 1 hour.

Appointment 2: An ultrasound is performed.

Appointment 3: In the morning of the procedure day, you have a pre counseling session with a doctor. A medical history is done and laminaria or misoprostol is inserted. This takes about 30 minutes.

In the afternoon of the procedure day, a vacuum Dilation and Curettage (D&C) is done. This could take 2 to 3 hours, including recovery time.

Appointment 4: You must make a follow up appointment with your family doctor 4 weeks following your termination. This appointment should take about 15 minutes.

Reduction of Sexually Transmitted Infections

Whatever method of contraception is used, you need protection against sexually transmitted infection. This risk can be reduced by the use of a latex condom every time that you have intercourse.

Follow-up Appointment

Appointment # 4

This appointment is very important. Your family doctor wants to make sure that everything is back to normal and that complications have not occurred.

Make arrangements to see your family doctor in 4 weeks. If you do not have a family doctor, the nurse may be able to offer a list of doctors taking new patients. You can follow up at Planned Parenthood.

Many women experience a broad range of emotions. If at any time you wish to talk about your feelings or any other problems that arise, call the WHC and the counselor or one of the nurses are happy to talk to you .

For 24 hour professional health advice and information, call



A Few Days Before Your Procedure

Appointment #1

All clients must fill out a counseling guide and meet with a nurse to discuss their decision. This counseling session is very important and helps you explore your feelings about your pregnancy and your choices.

The nurse discusses future appointments, pain relief, the procedure, birth control methods and your care after the procedure. This counseling session should help to reduce your anxiety, sort out your feelings and values and prepare you for your pregnancy termination. The session may last about 1 1/2 hours and is confidential.

Before the procedure, you are sent to the laboratory for blood tests to determine:

- your blood type and Rh factor
- if you have anemia
- if you are protected from rubella (German measles).

If your blood type is Rh negative, you are given an injection to protect you from Rh disease in the future. If you are not protected against rubella, you are immunized so that you are.

A urine test for gonorrhea and chlamydia is done. You are treated with medication, if the results are positive.

Appointment #2

An ultrasound is done to check how far along you are in your pregnancy.

The Day of Your Procedure

Appointment # 3

Come directly to the WHC after you register in Admitting. When you arrive, check in with the receptionist and have a seat in the waiting room.

The doctor talks to you about your decision to have a pregnancy termination and about the risks, possible complications, anesthesia and medications involved with your procedure. If you have any questions, be sure to ask the doctor at this time so you are better able to make an informed decision about your pregnancy termination.

Following this discussion, the doctor takes your medical history and does a physical exam. During the physical exam, a pelvic exam is done to confirm the duration of your pregnancy and the position of your uterus. A Pap test is done if you have not had one in the past year. If you decide to proceed, a laminaria, or misoprostol pills are inserted.

Laminaria Insertion

The doctor does a vaginal exam and inserts a laminaria into your cervix. A laminaria is a sterile piece of dried seaweed. It acts like a sponge, absorbing the moisture from the surrounding cervical tissue and expands in size (like a tampon). This causes your cervix to gently dilate, or open. During and after the insertion of the laminaria you will probably feel some abdominal cramping. You may experience slight bleeding at the time of insertion and later in the day. The laminaria is removed later by your doctor. If you experience a lot of cramping, take your pain medication as prescribed. **Do not** take ASA. While the laminaria is in place, **do not** have intercourse, a tub bath or remove the laminaria yourself. However, if it comes out by itself, do not worry. Check the gauze to see if the laminaria is inside. Discard what has come out and let your nurse know when you return for your procedure.

Infection

To reduce your risk of infection, avoid the following until the bleeding stops:

- sexual intercourse
- douches
- tampons (avoid until your next period 4 to 6 weeks)
- swimming
- vaginal suppositories
- tub baths with bath oil or salts in the water.

If you are experiencing chills, abdominal pain or a foul smelling discharge from your vagina, call your family doctor.

Breast Tenderness

Due to hormonal changes, some women may experience breast tenderness and a milky discharge from their breasts. Use an absorbent material inside a tight fitting supportive bra. Your breasts return to normal within a few days.

Smoking

Do not smoke for at least 2 hours after you leave the WHC. Smoking may increase your risk of fainting.

Birth control

Make sure you use some form of birth control following your procedure. You can become pregnant following your pregnancy termination and before your next period. If you are on the birth control pill, begin taking them the first Sunday following your termination. Check with your doctor before taking any other medication as it may decrease the effectiveness of the pill.

After pregnancy termination, most women feel a sense of relief. Feelings such as sadness, depression and guilt, are rare, but may occur. The range of emotions depends on how you have dealt with your feelings about your pregnancy and the pregnancy termination. If these feelings of sadness continue, call the WHC and a counseling session with a social worker can be arranged to help you cope with these feelings.

After Your Procedure

Eating / Drinking

- You may resume your usual diet. Follow “Eating Well With Canada’s Food Guide”.
- Drink 6 to 8 glasses (1 glass = 8 oz or 250 mL) of fluids a day.
- Avoid alcohol for at least 36 hours after, as it may increase bleeding.

Activity

- Avoid strenuous activity and heavy lifting for the first 3 to 5 days as it may cause further bleeding.

Bleeding

Bleeding after pregnancy termination is normal and may stop and start again in the first 3 weeks following your procedure. Some women have little or no bleeding, some only spot and some women have bleeding like that of a normal menstrual period. Some women pass small clots and bits of whitish tissue. This is also normal.

Abnormal bleeding

Bleeding is abnormal if it soaks a pad in hour, for 2 hours. If you experience this type of bleeding, call the doctor you saw at the WHC or go to the Regina General Emergency Department.

Misoprostol Insertion

Misoprostol pills are used to help soften and open your cervix before your procedure. The doctor decides if you take the pills by mouth or if they are to be placed high up in your vagina.

These pills may cause you to have cramping and bleeding. This means that the pills are working to help soften and open up your cervix. You may have some stomach discomfort like nausea, vomiting or diarrhea. These may be unpleasant, but normal.

Complications

If you have severe pain or heavy vaginal bleeding (saturating a pad in a 1 hour period), call the WHC and speak to one of the nurses. If it happens after 4:00 p.m., call or go to the nearest Emergency Department.

IMPORTANT: If you change your mind about the pregnancy termination the laminaria **must** be taken out within 24 hours. There remains a minimal risk of losing the pregnancy.

Your Procedure

Pre-Admission Information

- **Do not** have any alcohol or take any ASA or street drugs for at least 3 days before your appointment date.
- Have a shower the night before, or the morning of your procedure.
- **Do not** eat or drink anything after midnight the night before your procedure, except clear fluids, which are acceptable until 4 hours before surgery.
- **Do not** wear jewelry or bring a large amount of money with you to the procedure.
- **Do not** bring children with you.

- We encourage you to bring a support person with you. This person can be with you before, during and after the procedure.
- Ensure that you have a ride home following your procedure. **Do not** drive or operate dangerous machinery for 24 hours following your procedure.
- You can expect to spend approximately 2 to 3 hours at the WHC. Come to the hospital at least 30 minutes before your appointment time and go directly to the WHC reception area.

Most women feel anxious on the day of their procedure. Some doctors prescribe an oral medication (Ativan®). This medication should be taken 15 minutes before your procedure to relieve anxiety. This medication may make you feel light headed, so it is important to have your support person with you while you wait. Ask for pain reducing medication and relaxants if you feel you need them.

About 20 minutes before your appointment you are shown into a change room. You put on a hospital gown and lock your valuables in the lockers provided. Pin the key to your gown so it does not get lost. After you have changed, you and your support person are shown to the Admission/Recovery area. Your nurse asks you questions, takes your blood pressure, heart rate and starts an intravenous used to give medications for the procedure.

Vacuum D&C

In the procedure room, you are asked to lie down on a table and place your legs in stirrups. Your nurse gives you medication to help you relax and be more comfortable. The nurse takes your blood pressure and heart rate during the procedure. A small towel is put under your buttocks and another placed on your abdomen. These towels are sterile so it is important to not touch them.

The doctor removes the laminaria and any misoprostol medication that did not dissolve completely. A speculum is placed in your vagina and local freezing is injected into your cervix to numb it. When this is done you feel 2 or 3 small pinches and a burning sensation. Local anesthesia is used in all cases because it causes less cervical injury, less blood loss, and allows a rapid recovery. Once your cervix is frozen, it is opened further (if necessary) with a rod-like instrument.

A suction curette (hollow tube) is inserted through your cervix into your uterus and the contents of the uterus are removed with a gentle suction. During this time, you may experience mild to moderate cramping that lasts for a very short period of time. If you experience a lot of discomfort, ask for additional pain reducing medication and/or relaxants. Do not be alarmed by the sound of the suction. This part of the procedure lasts for about 5 minutes.

To ensure that the contents of your uterus have been completely removed, the doctor inserts a curette (spoon-like instrument) into the uterus and gently scrapes the uterine wall.

The procedure, from start to finish, will take about 10-15 minutes.

Recovery

After the procedure, a sanitary pad is put on your underwear and you are walked to the recovery room, assisted by a nurse. In the recovery room, your nurse makes sure that you are not bleeding too much and checks your blood pressure.

You may continue to experience some mild cramping. This cramping is due to the uterus contracting in order to reduce the amount of bleeding. If you are experiencing discomfort, ask your nurse for some medication to relieve it. You stay in the recovery room for about 45 to 90 minutes.