

C2.16 – POST-TERMINATION VISIT

Policy

Abortion/termination services are not provided as a part of the Title X Program. Ideally, the post-abortion examination should be provided by the facility that performed the procedure and should include a negative pregnancy test. If the client seeks care at the Title X clinic for a post-termination visit, the procedure is outlined below.

Procedure

Up to Six Weeks Post Termination Visit

NEW post-abortion client. Reference policy - Initial Visit.

- **REVISIT** post-abortion client. *Refer to the Periodic Health Assessment Policy for further guidance.*
- If current with annual exam, the client only needs a pelvic exam.

Additional History Components Obtained

1. Type of Abortion:
 - a. Induced (i.e. termination) or spontaneous (i.e. miscarriage)
 - b. Management type: Medication (i.e. misoprostol with or without mifepristone) or procedural (i.e. uterine aspiration or dilation and evacuation)
2. Gestational age at time of abortion.
3. Presence of pregnancy symptoms before and after the abortion.
4. Results of pregnancy test performed this visit (pregnancy test may be positive if less than 4 weeks post-abortion, especially in a medication abortion).
5. History of Post-abortion Complications:
 - a. Excessive vaginal bleeding.
 - b. Nausea.
 - c. Abdominal tenderness.
 - d. Fever > 38 degrees C (100.4 degrees F).
 - e. Emergency room visit.
6. Current medication status.
7. Sexual History: History of intercourse since abortion (protected or unprotected).
8. Feelings about abortion.
9. Future pregnancy plans/reproductive life plan (refer to C1.2 Reproductive Life Plan)

Reassess Current Contraceptive Needs

- Past method/user satisfaction/method failure.
- RLP counseling.
- Education about all method options.

Referrals

Initiate appropriate referrals if abnormalities are discovered, order appropriate testing and/or refer to appropriate CSP.

Date Revised	September 2023
References	Providing Quality Family Planning Services Recommendations of CDC and

	the U.S. Office of Population Affairs (QFP) [2014] (https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html)
Additional Resources	