

## Pre-abortion Evaluation and Pregnancy Dating

### Purpose

The purpose of this activity is to provide participants with an opportunity to practice how to conduct a pre-abortion evaluation and confirm gestational age dating.

### Materials

- Make photocopies of each item for each trainee:
  - Cases (below)
  - Medical Abortion Competency Checklist
  - Client Evaluation Form

### Timeline

- 1 hour

### Instructions

- Brainstorm with the group regarding key components to a pre-abortion evaluation. Use the flipchart to write down the group's responses. **Refer to Chapter 2 (page 9) of the *Medical Abortion Reference Guide: Induced abortion and postabortion care at or after 13 weeks gestation ('second trimester')***. Responses should include:
  - Age
  - Gestational dating (last menstrual period)
  - Pregnancy history including any issues/problems in this current pregnancy
  - Allergies
  - Medications
  - Medical issues/conditions
    - Trainees may want to discuss specific medical conditions. **See page 11 of the *Medical Abortion Reference Guide: Induced abortion and postabortion care at or after 13 weeks gestation ('second trimester')*** for a list of some health conditions that may impact care.
  - Prior surgeries
  - Indication for abortion
  - Physical exam
  - Social history (use of alcohol or recreational drugs, tobacco use)
  - Domestic violence screening
  - Laboratory testing
    - In a healthy woman, no laboratory testing is necessary except that Rh status should be checked if it is recommended by local policies and procedures. If Rh-negative, anti- D immunoglobulin should be given at the time of abortion.

- Other preventative health screening and/or testing
  - Other screening, testing, and/or immunizations can be performed at this time but should not create barriers or delays to abortion care.
- Continue brainstorming with the group regarding how to determine gestational age. Emphasize the importance of gestational age assessment in women needing abortions at or greater than 13 weeks gestation, as errors in dating can lead to unexpected transient fetal survival. Gestational age can be estimated using bimanual and abdominal exam in conjunction with a woman's last menstrual period. Fundal height can be helpful – similar to routine obstetrical care. Ultrasonography is not necessary but can be used to confirm gestational age if in doubt or if there is a discrepancy. Depending on the needs and knowledge of the trainees, the facilitator may want to discuss the measurements to use for determining gestational age using ultrasonography (**see pages 12-13 of *Medical Abortion Reference Guide: Induced abortion and postabortion care at or after 13 weeks gestation* ['second trimester']**).

Of note, if a woman is presenting for postabortion care (PAC) – uterine size determines treatment in this situation rather than her reported last menstrual period.

- Next, divide participants into small groups (typically groups of 3 work well). Give each participant a handout. Give each group the following instructions:
  - Spend a couple minutes discussing each case – have the group come up with key questions they want to ask the client in order to obtain the information they need to safely provide care. Does she need any special care, services, treatment, counseling? As well, have the small groups use the client history forms and medical abortion checklist as a reference guide in the evaluation of this “client.”