Medical abortion with mifepristone and misoprostol

**BEFORE 13 WEEKS GESTATION:**

- Mifepristone 200mg orally
- Misoprostol 800mcg buccally, sublingually, or vaginally 1–2 days after mifepristone. The dose of misoprostol can be repeated to achieve abortion success.
- After 9 weeks gestation, routinely using at least two doses of misoprostol, administered 3–4 hours apart, improves abortion success rates.

**AT OR AFTER 13 WEEKS GESTATION (13–24 WEEKS):**

- Mifepristone 200mg orally
- Misoprostol 400mcg buccally, sublingually, or vaginally 1–2 days after mifepristone. The dose of misoprostol should be repeated every three hours until fetal and placental expulsion.
- The median time to abortion is 6–10 hours after beginning misoprostol, although some individuals will require more time to successfully abort.

**Medical abortion with misoprostol only**

**BEFORE 13 WEEKS GESTATION:**

- Misoprostol 800mcg buccally, sublingually, or vaginally every three hours until expulsion.
- Individuals undergoing misoprostol-only medical abortion outside of a health facility should be provided with 3–4 doses of misoprostol depending on the scenario.
AT OR AFTER 13 WEEKS GESTATION (13-24 WEEKS):

- Misoprostol 400mcg buccally, sublingually, or vaginally every three hours until fetal and placental expulsion. Vaginal dosing is more effective than other routes.
- The average time to abortion is 10–15 hours after beginning misoprostol, although some individuals will require multiple days to successfully abort.

**Medical treatment for incomplete abortion, missed abortion, or intrauterine fetal demise (postabortion care)**

LESS THAN 13 WEEKS UTERINE SIZE:

- Incomplete abortion
  - Misoprostol 600mcg orally in a single dose or 400mcg in a single dose buccally, sublingually or, in the absence of vaginal bleeding, vaginally.
- Missed abortion
  - Misoprostol 800mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every three hours until expulsion (generally 1–3 doses).
  - Where available, add pretreatment with mifepristone 200mg orally 1–2 days before misoprostol.

13 WEEKS OR LARGER UTERINE SIZE:

- Incomplete abortion
  - Misoprostol 400mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every three hours until expulsion.
- Intrauterine fetal demise (up to 24 weeks):
  - Misoprostol 400mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every 4–6 hours until expulsion.
  - Where available, add pretreatment with mifepristone 200mg orally 1–2 days before misoprostol.