

Patient Information

Updated patient information leaflet during the

COVID pandemic

This information should be read before your telephone appointment.

With the current COVID pandemic, women may be advised to avoid hospital attendance if possible. Home termination is increasingly available in Scotland and the medicines used can only be given by specialised clinics. Research done with the help of Grampian and Lothian women has shown that home termination is an acceptable and safe option for women. Hospital termination of pregnancy is also available for women who prefer it and for those over 12 weeks pregnant.

You may choose home termination if you will be less than 12 weeks pregnant on the day of the termination and your nurse/doctor thinks this is a safe option for you. Women who live more than one hour's drive from a hospital may choose a home termination if less than 10 weeks pregnant.

Women considering home termination must:

- Be a maximum gestation of 12 weeks at the time of termination (or 10 weeks if more than one hour's drive from a hospital)
- Have a reliable telephone for incoming and outgoing calls
- · Be over 16 years of age
- Speak and read English
- · Be available for follow up in 2-3 weeks
- Agree for GP contact, who will be informed if you fail to follow up

What if I change my mind?

If you have doubts about your decision at any time, please feel free to discuss them with us. Lots of women have doubts. You may want to talk to someone confidentially. We know you sometimes need time to think things over. There are contact numbers at end of this leaflet if you need to contact us.

Telephone consultation

All women will be offered a telephone appointment with a nurse/doctor and you should read this information leaflet before the consultation. We will ask you about your medical history and your reasons for wanting a termination. We will then discuss the safest option for you and explain the procedure. We may ask your consent over the phone rather than a written signature.

Some women may be able to have a home termination without needing to be seen in the hospital. Others will be asked to attend Raigmore Hospital for a face to face appointment.

No visit to hospital required

If the nurse/doctor thinks it is safe for you to have your termination at home without coming to the hospital for an appointment, you will be asked to collect your medication. During your telephone consultation we will give you a date, time and pick up location. If collection is not possible due to COVID related reasons, then we will discuss how this can be delivered to you.

Please read the section *Termination of Pregnancy at Home*.

Visit to hospital required

You will be asked to visit the hospital if we think it is not safe for you to have a termination at home. You may also be asked to attend for an ultrasound scan or to start contraception (such as the Depo injection or Nexplanon implant). When you attend the hospital we will explain when to return for your termination procedure. Some women may still be able to have a home termination after a face to face appointment.

Important dates

1st Day of tablets

Date: Time: Location:

2nd Day of tablets

Date: Time: Location:

Telephone follow up

Date: Time: Location:

Information for termination of pregnancy at home

First Day of Tablets (Day 1)

You will be given a mifepristone tablet to swallow on Day 1 of your termination. You may not feel any different and can carry on with your normal activities. Some women have light vaginal bleeding and there is a tiny chance that you will miscarry at this stage. You may also experience some period pains and may take paracetamol based tablets to help.

Second Day of Tablets (Day 3)

You will also be given misoprostol tablets to take at home and these should be taken 24-48 hours after the first tablet. The misoprostol tablets should be put under the tongue to dissolve. They should not be swallowed.

Place 4 misoprostol tablets under your tongue (2 on each side) or place all 4 tablets high into your vagina. If there is no bleeding after 4 hours, take the 2 extra misoprostol tablets either under the tongue or in the vagina.



If you are over 10 weeks pregnant, you will be given a further 3rd dose of misoprostol to take 3-4 hours after the 2nd dose if you still have no bleeding. Take 2 of these misoprostol tablets under the tongue.

You will also be given antibiotics to take at home to reduce the risk of infection. Enclosed in the pack is paracetamol, which can be used for pain.

What happens next?

The misoprostol tablets cause the womb to contract and pass the pregnancy. This happens soon or in 2-8 hours. Most women say the process feels like strong period pains.

Some women feel sick, have diarrhoea or feel hot and cold for a few hours after the tablets. You can eat and drink during this time as normal. Use pain control tablets used for period cramps if needed. Some women find they are more comfortable walking around or soaking in a warm bath rather than lying in bed.

You may see or feel the soft pregnancy tissue coming away. You can flush any clots or tissue down the toilet. Your bleeding and cramps should become lighter after the pregnancy has come away.

You can phone the nurses at any time for advice. You should contact them if the bleeding is heavier than a heavy period or you feel dizzy. Call ward 9B if this happens. You may be asked to attend a nearby hospital. **Ward 9B – 01463705376**

How long will I bleed for?

The amount of bleeding at the time of termination varies but most women describe the bleeding as 'much heavier than my period' and it may include some large clots. If you experience continuous and heaving bleeding (SOAKING three or more pads in an hour while resting) contact the ward or go to A&E urgently. If you have not started bleeding within 72 hours of your second tablets, contact the clinic/ward as the procedure may not have been effective

It is advised that you use sanitary towels and NOT tampons whilst you are bleeding. You can then expect to bleed for around two weeks although this could continue for one month or longer. You should continue to use sanitary towels and not tampons until you have a normal period. This is to reduce the risk of getting an infection into the womb.

How soon can I have sex?

You should wait until the bleeding has settled (at least 7-10 days). When you do start to have sex use a condom (as well as your chosen method of contraception) to reduce the risk of infection getting into the womb. You should continue using a condom until your next period arrives.

Telephone Follow-up

The medical termination works for about 98 out of 100 women under 10 weeks of pregnancy. However, approximately 2 in every 100 women need further medication or a surgical procedure.

It is extremely important that you follow up with a telephone consultation 2- 3 weeks later to have check up. We will give you a urine pregnancy test to do on a first morning urine sample and the date that we will phone you.

You can also phone us to let us know your result at the Social gynaecology clinic 01463 704431

If you cannot be contacted for the follow-up then we will need to contact your General Practitioner.

Signs that treatment may not have worked and that you may still be pregnant:

- If you do not bleed within 24 hours of receiving misoprostol tablets
- · If you have less than 4 days of bleeding
- If you still 'feel' pregnant at the end of one week or have symptoms of pregnancy such as sore breasts, sickness, tummy growing, etc.
- If at 2 weeks after treatment, the urine pregnancy test (that we give you) is positive or invalid
- If your next period does not come by one month after the treatment

Information for termination of pregnancy in hospital

Swab and blood tests

Contraception

Contact Details

If you are over 12 weeks pregnant or the nurse/doctor does not think a home termination is safe, you will be asked to attend the hospital for a face to face appointment.

A medical termination in hospital is similar to the home termination except that you will be cared for by nursing staff on the ward. You will be given a single room during your stay. This will allow you some privacy and the use of a private toilet and showering facilities. Ward staff will check on you regularly and you will be required to stay for up to 2 hours after you have passed the pregnancy. This allows the nurses to observe your bleeding and to make sure you are well enough to go home.

A surgical termination in hospital is not recommended during the COVID pandemic. This has a much higher risk of coronavirus transmission and will only be considered for very few women. If you would like to discuss a surgical termination, you can talk to the nurse/doctor about this.

You may not need an STI swab or blood test and this will be discussed with you during your telephone consultation. If you do require STI testing, we will either post out a chlamydia/gonorrhoea swab to you or ask you to do a swab in hospital. We will advise you to wait with STI blood testing until it is possible to do so after the COVID pandemic restrictions.

Research has shown that we do not need to know your Rhesus blood type under 10 weeks of a pregnancy. With the COVID pandemic, it has been recognised that some women may not need this between 10-12 weeks in a pregnancy. We may ask if you know your blood type and use this for our records only.

You can get pregnant before you get your next period. It is very important that you start contraception as soon as possible. For contraceptive pills and patches we can include this in your medication pack. If you would like to have a Depo injection or an implant inserted, then we will ask you to attend the clinic for this. If you would like to have a coil fitted, we will advise you to use some other form of contraception until we are able to give you an appointment after the COVID pandemic restrictions.

Clinic nurse	01463 704431 or 07825263199
Ward 9B (currently 4A)	01463 704376
Women's Health Clinic	01463 704278
Highland Sexual Health	01463 888300
British Pregnancy Advisory Service	08457 304030