Patient Firstname and Lastname Personal code (sticker)



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# Application for a surgical termination of pregnancy

## **Induced termination of pregnancy**

Termination of pregnancy means the removal from the uterus of a foetus or embryo by surgical means or administration of medicinal products.

## Conditions for induced termination of pregnancy

Induced termination of pregnancy is governed by the Termination of Pregnancy and Sterilisation Act.

A pregnancy is terminated at a woman's request. A pregnancy is terminated based on a written application. Based on Subsection 766 (4) of the Law of Obligations Act, in the case of a woman with restricted active legal capacity, a pregnancy can be terminated at her own consent or at her legal representative's consent.

A pregnancy may be terminated if it has lasted less than 12 weeks. A pregnancy which has lasted less than 22 weeks may be terminated based on therapeutic indications.

#### **Examination and studies**

The procedure is preceded by a visit to a doctor or a midwife. You will be counselled regarding the possible methods for the termination of pregnancy and the following studies are conducted:

- A gynaecological examination;
- An ultrasound to determine the state of pregnancy;
- Vaginal analyses for possible infection;
- A blood group and Rh assay.

To ensure a safe termination of the pregnancy and to reduce the risk of complications you must inform your doctor or midwife:

- About the status of your health;
- Of any illness and medication taken;
- Of any known hypersensitivity to medicinal products.

#### Before the procedure

- Do not drink or eat on the morning of the procedure day;
- In case you are suffering from a chronic illness (e.g. Arterial hypertension or asthma), you should take your daily medicines and undergo planned treatments as prescribed. A few sips to swallow your pills is permitted and safe. The only exception is made for diabetes medicines, which should not be taken without eating;
- Do not chew gum or smoke. Empty your bladder before the procedure.

## **Description of the procedure**

Surgical termination of pregnancy is carried out vaginally and usually under general anaesthesia. Firstly, a gynaecological examination is conducted to specify the size and position of the uterus. This is followed by a short-term anaesthesia. The cervix is dilated with instruments and the foetus is removed from the uterine cavity with a special instrument.



### **Possible complications**

During the procedure the following may occur:

- the uterus or the cervix may be injured. The risk of injury is increased if the woman has not given birth before, there are uterine malformations (e.g. uterine septum) or if the uterine cavity is malformed due to myoma(s). You may need an operation in case the uterine wall is injured;
- anaesthesia-related complications: allergic reactions to medicinal products, side effects of the anaesthetic, complications related to breathing and to the gastric contents ending up in the respiratory system.

After the procedure there may be:

- bleeding due to disorder of uterine contractions. This bleeding is stopped with medicinal products that stimulate uterine contractions;
- a need for a blood transfusion:
- blood and/or foetus constituents remaining in the uterine cavity. In both cases it will be necessary to later dilate the cervix again and to empty the uterine cavity again;
- pain in the abdomen;
- inflammation of the uterus and the pelvic organs, which requires antibacterial treatment. The risk of inflammations is significantly increased in the presence of sexually transmitted infections.

The late complication of the termination of a pregnancy may be infertility which most often is related to an inflammation

#### After the procedure

If you are Rh-negative, then immediately after the termination of the pregnancy you will be given a medicinal product (Rhesonativ).

After the procedure, you will remain in the hospital for observation for at least two hours. You can be discharged once the nurse has removed your venous cannula and given you a summary of your medical case history (epicrisis). You are entitled to a certificate of incapacity for work for this day.

For the next 24 hours, do not drive a vehicle or conduct any other procedures requiring fast reaction as the medicinal products used for anaesthesia may slow your reaction speed.

You may experience vaginal bleeding for a few weeks after terminating the pregnancy. It is recommended:

- not to use tampons;
- not to go to a bathtub, a sauna or pool;
- not to have intercourse without a condom for two weeks
- to avoid catching a cold.

After terminating the pregnancy, the gynaecologist decides if it is necessary to have an additional appointment

If you experience severe bleeding, fever (over 38°C), strong pain in the abdomen, purulent or badly smelling vaginal discharge, consult the East-Tallinn Central Hospital's Women's Health Clinic's emergency reception immediately (open 24/7).

In case you suspect that your pregnancy has not been terminated (symptoms include tender and enlarged breasts, nausea, vomiting, tiredness, changes in appetite and increased urination), you should take a pregnancy test and consult a gynaecologist at the first possible opportunity.

After the termination of pregnancy, the next expected menstruation should be within 4-5 weeks. If the menstruation cycle has not started in this period, consult a gynaecologist or midwife to determine the reason.

The termination of the pregnancy does not prevent a new pregnancy during the following month. An effective contraceptive must be used immediately after the termination of the pregnancy. Hormonal contraceptives (pills, minipills, implant, injected progestogens) are usually started on the same day as the termination of the pregnancy. During the procedure to terminate the pregnancy, the doctor may also insert an intrauterine contraceptive device.

Before terminating the pregnancy, consult your doctor or midwife regarding appropriate contraceptives.

Contraception method agreed on	Yes	No
Contraception prescribed	Yes	No
confirm, that a health care professi (patient's the biological and medical nature, the	onal has forenam ie relate	
I have been informed that during the pro	ocedure t	the scope of the procedure may require modifications.
information about the need for a blood	transfusi ansfusion	may be required during or after the procedure. I have received sion, its nature and related risks. I have also been informed about on. In case of a therapeutic indication, I <b>consent/do not consent</b> cusion.
		ted to a transfusion of blood components, but if not conducting a or death, it will be done without my consent.
For purposes of medical education, I <b>co</b> medical students, interns, residents or tr		<b>do not consent</b> (underline the selected option) to the presence of to my procedure.
I confirm that I have been given an oppresponses. I am aware that the procedur	-	y to ask questions about the procedure and I have understood the not have the desired result.
I have been explained that by signing the additional information from the doctor		ication I retain my right to ask additional questions or to receive rife regarding the procedure.
I have been informed that I may withdra	aw my co	consent at any time by submitting a request in writing.
By signing this application, I expres procedure.	s my wi	rish to terminate my pregnancy and consent to the relevant
Date	Sig	gnature  (patient / patient's legal representative)
	understar	, confirm that I have explained to the patient and/or to andable manner, the biological and medical nature of terminating plications.
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This application has been compiled in twee the other by the patient.	wo equal	l copies, one of which will be kept by the health care provider and

