Abortion

Information, resources, and access in Northern Ontario





- · Confirmed positive pregnancy test.
- · First day of last menstrual period (LMP)





Ultrasound may be necessary if:

- · LMP is uncertain
- · LMP was more than 70 days ago
- · Ectopic pregnancy is suspected
- · Risk factors for ectopic pregnancy



Medication abortion

Day 1: Take anti-progesterone tablet (Mifepristone 200 mg) orally



Day 2: Take prostaglandin tablet (Misoprostol 800 mcg) buccally (2 tablets in each cheek pouch for 30 minutes, then swallow)

Procedural abortion

Dilation: Provider will insert a "dilator" wand into your cervix to gently stretch open your cervical opening.

Curettage: Provider will insert a "curette" tube into your cervical opening and gently suction to empty the contents of your uterus.

Seek medical attention if you develop a fever ≥38 °C for more than 3 hours, soak through 1 pad/hour after initial 6 hours, or experience uncontrolled pain.



Which method is best for me?

	Medication abortion	Procedural abortion
Location:	Home	Hospital
Consciousness:	Aware	Under anesthesia/sedation
Duration of bleeding:	Heavier & longer	Lighter & shorter
	Vaginal bleeding is heaviest on day 1 and 2 and decreases	Bleeding or spotting may occur for 2 to 3 weeks after
	over 2 weeks	the abortion or may not bleed at all
Effectiveness:	98%	>99%
Expectations:	Painful uterine cramping, heavy vaginal bleeding, passage of tissue +/- nausea, diarrhea, headache	Cramping occurs on and off for 2 to 3 weeks after the abortion.



Accessing abortion

Virtual medical abortion clinic: <u>Wawa Family Health Team:</u> patient.medeohealth.com/booking/wawa-family-health-team



Locate a provider: ChoiceConnect

https://choiceconnect.ca/



For information about abortion call:

Algoma Public Health: 1-705-942-4646 or Toll-free 1-866-892-0172



Support

ActionCanadaSHR.org or 1-888-642-2725





