Summary of termination of pregnancy

**Clinical assessment**
- Confirm pregnancy
- Medical, obstetric, sexual history
- Psychosocial history
  - Screening for domestic violence or reproductive coercion
  - Refer as appropriate

**Examination/Investigations**
- Determine gestational age
- Confirm intrauterine pregnancy (excludes ectopic)
- Routine antenatal bloods
- Ultrasound scan (USS)
- Offer opportunistic health care

**Information**
- Provide accurate, non-judgemental, easy to understand information on:
  - Options for the pregnancy (including palliation/adoption)
  - Methods of termination
  - Contraception
  - Post-termination care

**Co-ordinate referrals**
- As clinically indicated
- Offer confidential non-judgemental counselling
- Offer formal mental health referral
- Refer to other services (e.g., private service providers)
- Discuss fetal autopsy

**Post-termination care**
- Histopathology
- Rh D immunoglobulin
- Analgesia requirements
- Provide after care advice
- Discuss contraceptive options
- Provide advice on accessing psychological care
- Recommend follow-up
- Refer as required

**Legal requirements ToP Act 2018**

**Less than or equal to 22+0 weeks**
- A medical practitioner may perform a termination upon request

**At or after 22+1 weeks**
- A medical practitioner may perform a termination if, in consultation with another medical practitioner, all the below circumstances are met
  - Circumstances both medical practitioners must consider:
    - All relevant medical circumstances
    - The woman's current and future physical, psychological and social circumstances
    - Professional standards and guidelines relevant to the practitioners in relation to termination

**Pre-termination assessment**

**Surgical or medical procedure**
- Consider:
  - Gestation of pregnancy
  - Clinical indications
  - Preferences of the woman
  - Service level capability and expertise
  - Antibiotics for surgical procedures, if required

**Consent**
- Consider issues of capacity
- Consider adequacy of information provision and counselling
- If less than 18 years:
  - Assess Gillick Competence
  - Assess mandatory reporting requirements

**Co-ordinate referrals**
- Consider referrals specialist care, termination procedure, psychological support/counselling

**Discuss**
- Follow up
- Contraception options

**Post-termination care**
- Histopathology
- Rh D immunoglobulin
- Analgesia requirements
- Provide after care advice
- Discuss contraceptive options
- Provide advice on accessing psychological care
- Recommend follow-up
- Refer as required

**Conscientious objection**
- Disclose objection if termination is requested
- Without delay, transfer care to other service or to provider who does not have conscientious objection