Medical termination with MS-2 Step

Woman requests termination healthcare
- Offer non-directive pregnancy related counselling
- Urinary pregnancy test
- Ultrasound scan (USS)
- Counsel about termination options

Confirmed IUP?
- Yes
  - Consider ectopic or PUL
  - Refer to QCG EPL and its flowchart
  - Assessment of location and viability
- No
  - Pregnancy ≤ 63 days?

Pregnancy ≤ 63 days?
- Yes
  - Woman chooses MToP?
  - Yes
    - Perform clinical assessment for MToP
    - Follow-up in 2–3 weeks
    - MToP complete
    - Well at follow-up?
      - Yes
        - Follow-up
          - Face to face or remote consult
          - Confirm wellbeing
            - β-hCG: expect 80% drop
            - Bleeding ceased
            - USS if indicated
            - Psychological wellbeing
          - Offer contraception (e.g. short or long acting options)
            - Can commence immediately
      - No
        - Further follow-up (as indicated)
          - Bleeding ongoing consider:
            - USS
          - Consider referral for:
            - Surgical intervention or
            - Further misoprostol dose
  - No
    - Refer to other termination services (medical or surgical)

- No
  - Refer to surgical termination services

Clinical assessment
- Review history (medical, sexual, obstetric)
- Psychosocial history
  - Refer as appropriate
  - Exclude contraindications
  - Obtain consent
  - Remove IUD
  - Discuss contraception
  - Consider need for antenatal bloods
  - If Rh D-ve, Rh D immunoglobulin required if:
    - SToP (all gestations)
    - MToP after 10+0 weeks gestation
  - Offer opportunistic health care
    - Cervical screening test
    - STI screening
    - Smoking cessation advice

MS-2 step
- Provide instructions for self administration
- Advise on:
  - Pain management
  - Expected bleeding
  - Possible complications
  - Accessing emergency care
  - Seeking support if no onset of bleeding within 24 hours after Misoprostol
  - Fertility, contraception and resuming sexual activity
  - Need for follow-up including non-judgemental psychosocial support/counselling or specialist care

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