



Abortion is one of the safest surgeries when done by an experienced doctor in a well-equipped clinic such as ours. We are required by law to inform you of the risks of abortion before you consent to having an abortion. We would like to assure you that complications of abortion are very rare and that our staff is well prepared to deal with any complications that might arise.

General Risks of Abortion

- » Infection in the uterus. This happens in about 2 – 4 out of every 100 abortions.

What we will do: We give you antibiotics at the time of abortion to reduce your risk of infection.

- » Retained tissue (some pregnancy tissue is left in the uterus). Happens in less than one out of every 100 abortions. This could lead to increased bleeding, passing of clots, increased cramps and infection.

What we will do: The uterus is often able to push the tissue out on its own. Sometimes medication or a second abortion may be needed.

- » Continued pregnancy (failed abortion). This happens about once in every 1000 abortions involving a normal pregnancy in a normal uterus. Failed abortion is most likely to happen if the uterus is an unusual shape or if the pregnancy is outside the uterus. This might not be discovered until after the abortion has been performed.

What we will do: The doctor will try to remove the pregnancy. If this is not possible, you may have to return for another abortion or be referred to another doctor.

- » Blood in the uterus. This happens in about one in every 1000 abortions. This means blood builds up more quickly than it comes out; the uterus becomes enlarged and painful. This is uncomfortable but not dangerous.

What we will do: The blood is removed with a suction procedure.

- » Excessive bleeding. This happens about once in every 1000 abortions. This may be because the uterus fails to contract or because of retained tissue. Heavy bleeding can also be from an injury described below.

What we will do: This can usually be treated at our clinic. If you have extremely heavy bleeding and the cause can not be found and corrected; we will transfer you immediately to a hospital.

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- » Injury to the uterus or other internal organs (bowel, bladder, or blood vessels). This happens once in every 1000 abortions.

What we will do: If the doctor thinks that an organ has been injured, we will immediately transfer you to hospital for surgery to assess or repair the injury. Major surgery, like removing the uterus (hysterectomy) happens about once in every 10,000 abortions.

- » Allergic reactions and other reactions to medication, latex, and other materials. Severe allergic reactions happen less often to medications than to insect bites or food.

What we will do: If you have such a reaction, we will treat you in the clinic using standard treatment protocols. If the reaction is severe, we will transfer you immediately to a hospital.

- » The rarest complication of abortion is death. More than one million abortions are performed in North America every year. Of these, there are approximately 10 deaths. About half of these are related to general anaesthesia and medication problems. Most of the rest are due to later term pregnancies or unusual medical circumstances.



women's
health clinic

CONSENT FOR ABORTION PROCEDURE

I, _____ have considered all my options and I confirm that I have chosen not to carry this pregnancy to term. I request an abortion.

I give my full consent to Dr. _____ of WHC – Portage to perform an abortion on me, and to treat any related complications, should they arise, according to his/her judgement and good medical practice.

I agree that the doctor named above may use the assistance of other WHC Portage clinic staff, and that they may order or perform all or part of the investigation, treatment or operation, and that they have the same discretion related to my abortion care as the doctor named above.

I have been advised that having an abortion is generally less risky than carrying a pregnancy to full term and that current evidence shows there is no negative effect on future pregnancy and delivery from one or more properly performed suction D&C procedure.

I understand that an abortion, like surgery, has some risks. I have read or have had explained to me the risks of abortion as described in detail on the other side of this form.

I understand that if I need to seek medical attention after my abortion, the doctor or health care facility treating me may call WHC Portage for information or advice concerning my care. I consent to WHC Portage staff to provide such information or advice.

I understand that medication and other physical effects of abortion may affect my thinking and judgement and that I should not make important decisions or drive a motor vehicle for the next 24 hours.

I give my consent for the doctor to swab for gonorrhoea and Chlamydia. I understand that WHC Portage staff will contact me if either test result is positive.

I acknowledge that I have had the opportunity to discuss with WHC Portage staff any concerns or questions that I might have about this information and my abortion care.

I acknowledge that I have read or have had this consent form explained to me, and that I fully understand its contents, and I have signed.

(Client Signature)

(Date)

(Staff Person Witnessing Signature)

(Interpreter)