



Medical Education Series

Checklist for Starting Medical Abortion Services

The following list is a general guide of issues to consider and steps to take in preparing to initiate medical abortion services. Depending on the operation and policies of your facility, some of these may not apply, or other steps may be necessary.

Medical	Director:
	Review protocols for medical abortion.
	Prepare your protocols.
Adminis	strative Issues:
1. Staff	and Scheduling
	Review current staffing levels and clinic schedules to determine your ability and capacity to add medical abortion services.
	Assess best times for scheduling medical abortion patients.
	Select key person or team to be primarily responsible for medical abortion patients.
	Assess current on-call arrangements and determine if appropriate for medical abortion services.
	Review your current physician and hospital back-up arrangements. Determine what, if any, changes may need to be made.
	Determine your ability to provide early vacuum aspiration services to patients who choose not to have a medical abortion. Have an appropriate referral if this service is not available at your site.
2. Facili	ty Issues
	Assess the physical plant requirements for medical abortion (telephone and counseling rooms, and recovery rooms if administering misoprostol in the clinic).
3. Fees	and Insurance
	Establish fees for medical abortion services, including what laboratory tests and follow-up procedures are included in that fee.
	Determine proper insurance and Medicaid (if applicable) billing codes for medical abortion.
	Assess current malpractice insurance and its applicability to medical abortion.

	Review state laws on abortion practice and assess their applicability with regard to the provision of medical abortion.
	Review scope of practice laws for physician assistants, nurse practitioners, and nurse-midwives to assess their potential involvement in providing medical abortion.
	Seek legal counsel for clarification, if needed, on any legal or regulatory concern.
Training	
	Let staff know that the facility is planning on offering medical abortion.
	Schedule staff training, including message training and identification of staff biases, for the entire staff.
	For clinical staff, arrange for more in-depth training on counseling, transvaginal sonography, and complication management.
	Train phone staff about the service. Anticipate a high volume of initial interest from patients.
Supplies	and Equipment:
	Assess your capacity to perform transvaginal ultrasonography either with your on-site equipment or through referral.
	Obtain or develop patient education materials, consent forms, and other charting forms.
	Determine what additional supplies and equipment are needed.
	If using mifepristone regimens, establish an account with the distributor of Mifeprex* (mifepristone) by submitting the necessary paperwork. Information about ordering mifepristone is available from the National Abortion Federation or from Danco Laboratories at 877-4earlyoption or www.earlyoptionpill.com.
	Review your arrangements with a lab or in-house capacity for quantitative beta hCG tests. Determine fees.
Security	
	Review security policies and procedures to make sure they are current.
	Schedule staff security training if necessary.
Marketi	ng:
	Develop a marketing plan for the new service.
Getting	Started:
	Set target date for starting medical abortion service and schedule staff accordingly.
	See a certain number of patients and have a team meet to evaluate what changes are necessary.
	Increase patient load to meet demand when ready.

Legal and Regulatory Issues:

Adapted with permission from a Consortium of Planned Parenthood Abortion Providers (CAPS) publication.