

# Chart Checklist and Post-Procedure Record for Postabortion Care

Patient Name: \_\_\_\_\_

Date: \_\_\_\_\_

## PRE-PROCEDURE

- Welcome the client, make her comfortable
- Assess client to ensure:
  - vital signs do not indicate shock
  - vaginal bleeding is not excessive
  - no abdominal injury is present
- If needed, make arrangements for doctor availability for procedure or refer to higher level facility
- Ensure privacy and confidentiality
- If client consents, involve husband/support person in all counseling
- Ask/Observe/Examine
- Describe procedure
- Obtain informed consent for procedure and pain management
- Ensure patient gets adequate pain medication:
  - IM: 30 minutes before procedure
  - By mouth: 30 to 60 minutes before procedure
- Ensure that all equipment is ready
- If the patient's condition is stable and time permits, do counseling on FP methods and have patient decide which FP method to use, particularly important if patient desires IUD

## DURING PROCEDURE

- Ensure privacy
- Have assistant monitor vital signs and provide verbal support. Delay FP counseling until procedure is completed
- Monitor client closely for pain, use additional pain medication if needed and it is safe for the patient
- Reassure patient during the procedure
- Follow all infection prevention procedures
- Inspect tissue to ensure that procedure is complete

## POST-PROCEDURE

- Observe client for 1 to 2 hours; check vital signs and vaginal bleeding every 30 minutes
- Provide pain medication if cramping present
- Continue to ensure privacy and confidentiality
- If patient agrees, include husband/family member/friend when giving instructions/counseling including:
  - Rest
  - Nothing in vagina and no sex until vaginal bleeding has ended x 2 days
  - Take and complete medicines given by provider
  - Watch for warning signs that indicate the need for medical attention, including:
    - Severe abdominal pain
    - Fever
    - Bleeding heavier than a normal period
    - Foul odor from vagina
    - Bleeding that lasts more than two weeks

## POST-PROCEDURE (continued)

- Counsel patient to avoid becoming pregnant for six months. This provides her body a rest and helps in promoting a healthier next pregnancy
- Do family planning counseling and help her select a FP method before discharge if she desires a method.  
**Remember that postabortion care has not been completed until FP counseling and an opportunity to choose a FP method has been provided!**
- Discharge client after 1 to 2 hours if she is comfortable, stable, able to walk without assistance
- If FP method not selected, schedule return visit for FP method in two weeks
  - Provide condoms to use until patient decides on a FP method
- Counsel patient, as needed, for:
  - Malaria prophylaxis
  - Tetanus prophylaxis
  - HIV counseling and testing
  - STI evaluation
- Record all findings in client record. Complete PAC register

### POST-PROCEDURE OBSERVATION

Observe for 1 to 2 hours. Assess the patient every 15 -30 minutes.

*Sample*

Date	11/7/07						
Time	6:00 p.m.						
Vital Signs							
BP	110/70						
Pulse	76						
Respirations	20						
Temp	32C						
Uterus (tick one)							
Firm	✓						
Boggy or soft							
Vaginal Bleedng (tick one)							
Small							
Medium	✓						
Large							

Comments: \_\_\_\_\_  
 \_\_\_\_\_

FP Counseling completed? YES \_\_\_\_\_ NO \_\_\_\_\_      FP method chosen: \_\_\_\_\_

Referral done? YES \_\_\_\_\_ NO \_\_\_\_\_      Referred to what facility? \_\_\_\_\_

Name: \_\_\_\_\_      Date: \_\_\_\_\_

Signature: \_\_\_\_\_