# Medical Abortion Training

- 1. Accredited program created through collaboration between:
  - Society of Obstetricians and Gynecologists of Canada
  - College of Family Physicians of Canada
  - Canadian Pharmacists Association
    - <u>https://sogc.org/online-courses/courses.html</u>
    - 6 modules, 1.5 3 hours to complete, \$50
- 2. National Abortion Federation
  - www.prochoice.org
- 3. Celopharma Training Program
  - <u>http://celopharma.com/en/health-professionals/</u>

Abortion Resources for Family Physicians

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CPD

### CPD

#### CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

PROGRAMS AND PRACTICE SUPPORT

- Clinical Live-Stream Webinars
- Contemporary Topics in Early Antenatal Care: A Practical Course for Providers
- Abortion Resources for Family Physicians
- Cannabis Resources for Family Physicians
- Osteoarthritis (OA) Tool
- Poverty: A Clinical Tool for Primary Care Providers
- MAINPRO+®

#### CHRONIC NON-CANCER PAIN MANAGEMENT AND OPIOID RESOURCES

CPD PROVIDERS AND PLANNERS

SELF LEARNING™

Approximately one in three women in Canada has an abortion in her lifetime, according to a 2012 report.<sup>1</sup> Family physicians play a crucial role in supporting patients who need abortion care. Currently many Canadian communities, particularly in rural or remote regions, lack abortion services, which forces patients to travel long distances for care. With the availability of mifepristone, a drug used in combination with misoprostol under the brand name Mifegymiso to induce an abortion, family physicians have an opportunity to extend their practices to incorporate this care and improve access to this service for their patients and communities. The following are links to resources for family physicians who want to provide or refer their patients for abortion care.

#### Resources for physicians

 Health Canada approves updates to Mifegymiso prescribing information: Ultrasound no longer mandatory. Health Canada is informing Canadians that the prescribing and patient information for Mifegymiso has been updated to reflect that an ultrasound is no longer required before the drug is prescribed. Mifegymiso is a combination product containing two drugs (mifepristone and misoprostol) that are taken in sequence for the medical termination of a pregnancy.

Please click on the link below regarding Mifegymiso prescribing from Health Canada for more information. http://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2019/69620a-eng.php

#### Canadian Abortion Providers Support:

This online community of practice provides a broad range of information for providers and is supported by the College of Family Physicians of Canada (CFPC). The site includes Protocols, Ask an Expert, Academic Resources, Tools, Frequently Asked Questions, Locate a Pharmacy, etc. Users must register to access the site, but membership is free: https://www.caps-cpca.ubc.ca/index.php/Main\_Page

## Other Resources:

### **Medical Abortion Guidelines:**

Society of Obstetricians and Gynecologists of Canada with CFPC members:

JOGC April 2016 38(4): 366-389

### **National Abortion Federation**

NAF membership for MA providers - \$125

Reproductive Health Access Project (US)

https://www.reproductiveaccess.org



- Exchange tips, resources, and best practices
- Gain feedback from experts

LEARN MORE

Locate pharmacies in your region



## CAPS CPCA

Canadian Abortion Providers Support Communauté de pratique canadienne sur l'avortement WWW.Caps-cpca.ubc.ca





THE COLLEGE OF FAMILY PHYSICIANS OF CANADA

CART-GRAC Coetraceptor Access Precedult

Version 2 | August 29, 2016 Credit: Shutterstock

https://www.caps-cpca.ubc.ca/index.php/Main\_Page

### CAPS CPCA

### People

Add Member

Edit Role

**Registration Queue** 

Email List

Refer a Colleague

Reset Password

### For All Members Helpful Resources

Take a Poll

Share a Case or Experience

Frequently Asked Questions

Who supplies/pays for Mifegymiso?

Latest News

### For Certified Members

Ask an Expert

Locate a Pharmacy

Add a Pharmacy

# Helpful Resources



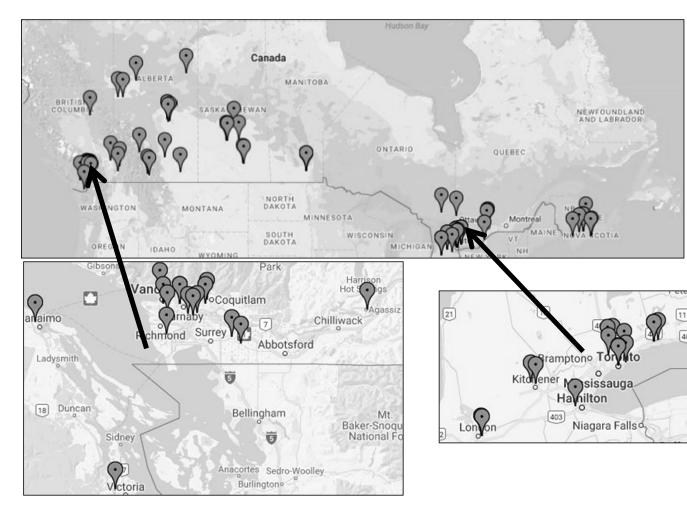
Below are the **Canadian Resources** in CAPS members may be most interested in becoming far use the search box below. You can search by name, date last edited, and last editor.

### Upload

### Uploaded Files

Keywords	\$
	▲ Keywords

### "Locate a Pharmacy" 68 on the map (as of 2018/03/05)



•	AB = 10 (5 Urban, 5 Rural)
•	BC = 23 (15 Urban, 7 Rural)
•	MB = 3 (Urban)
•	NB = 1 (Rural)
•	NFL = 0
•	NWT = 0
•	NS = 5 (2 Urban, 3 Rural)
•	NU = 0
•	<u>ON = 20 (18 Urban, 2</u> Rural)
•	PEI = 0
•	QC = 0
•	SK = 7 (5 Urban, 2 Rural)
•	YK = 0

MEDICAL ABORTION	Patient Na DOB:	me: Tel: Age:
CHARTING FORM	Health Car	d:
1. Counselling		
<ul> <li>Pregnancy options counselling provided</li> <li>Surgical vs. medical abortions discussed</li> <li>Medical abortion protocol explained</li> <li>Reviewed timing of ultrasound, lab tests, r</li> </ul>	nedications, 1	ollow-up appointment
Reviewed effectiveness, side effects and p     Contraception plan:	otential com	plications/ //
2. Determine Eligibility for a Medical Abortion	1	
Confirm All Inclusion Criteria  Expresses clear decision to have an abortion No indication of being coerced into abortion Informed consent process completed Understands expected side effects (bleeding, criteria) Agrees to comply with the visit schedule Agrees to a surgical abortion should pregnancy of Understands when and where to consult in case emergent complications Has access to a telephone, transportation, and emedical care Review of current medications Allergies:	amping) continue of	Absolute Contraindications (exclude all) Chronic a drenal failure Inherited porphyria Uncontrolled asthma Allergy to mifepristone or misoprostol Ectopic pregnancy Coagul opathy or current anticoagulant therapy Consider and Manage Relative Contraindications: Pregnancy of unknown location or gestational age Long term corticosteroid use Anemia with hemoglobin Hb < 95 g/L IUD in situ (no longer a contraindication if removed)
3. Physical Exam, Gestational Age, Pregnand	y Location	4. Initial Labs and Imaging
LMP: / / (date)     G: T: P: A: L:     Vital signs: BP HR		Lab tests completed/results:
Gestational age on/ / is:wi     confirmed clinically and with urine test on     confirmed by ultrasound     βhCG done or planned [see section 4, Labs] on     βhCG not done		Baseline βhCGIU on// Gonorrhea and chlamydia Imaging Dating ultrasound requisition, appointment on
Follow-up appointment scheduled//	(date)	/ (date)
5. Provision of Mifegymiso®  Review U/S and labresults with the patient and  Prescribe Mifegymiso® (indicate on prescription	• •	



People

## Ask an Expert

Add Member	Ask an Expert					
Edit Role	<ul><li>Do you have a question for one of our medical abortion experts? Click below to begin your question.</li><li>Please do not include any personal or identifying information about your patients.</li></ul>					
Registration Queue	<ul> <li>You will receive a response from an expert within two days.</li> <li>If you have been matched up with an expert, the "Matched?" column set of the set of the</li></ul>					
Email List	Ask an Expert					
Refer a Colleague	Problem		Category	\$	Posts 🗘	
Reset Password	? Interaction Methadone and Mife?	X	Clinical		2	
	Breastfeeding	X	Clinical		4	
For All Members	Breastfeeding	×	Clinical		4	
Helpful Resources	Case-by-case access	×	Regulatory/Health Systems	h	4	
Take a Poll	comparing quantitative bhcg between labs	×	Clinical		2	
Share a Case or Experience	emesis 35 mins post-miso - repeat???	X	Clinical		4	
Frequently Asked Questions	follow up betas	X	Clinical		3	
Who supplies/pays for	General guidance	X	Clinical		6	
Mifegymiso?	Gravol et mifepristone-misorostol	×	Clinical		5	
Latest News	mifepristone and methadone	×	Clinical		2	
For Certified Members	More questions about- Dating a pregnancy using U/S vs LMP and be	×	Clinical		7	
Ask an Expert	questions converning prescription and dispensing	×	Regulatory/Health Systems	h	5	
Locate a Pharmacy Add a Pharmacy	re: expected drop in bhcg at 24 hrs post miso in 9 wk pregnancy	×	Clinical		2	
Audia Fhannacy			1221-1200 FB		1	