

# INFORMED CONSENT for ABORTION PROCEDURE

IN accordance with KANSAS LAW (SB 204), the following information is being provided to you in **written** form at least twenty-four (24) hours **prior** to an elective abortion procedure to be performed by: Herbert C. Hodes, MD or Traci L. Nauser, MD of Overland Park, Kansas.

**THE** abortion procedure will be that of a Dilatation and Suction Curettage ("**D & C**") or a Dilatation and Evacuation ("**D & E**"). The doctor will perform the abortion procedure by numbing the cervix with injections of **lidocaine**, a local anesthetic. After waiting several minutes for the medication to take effect, the doctor will dilate the cervical opening to the uterus using sterile rods. Tubing attached to a suction machine will then be used to remove the pregnancy tissue from the uterine cavity. Special **forceps** will be used in the "D & E" procedure to remove fetal tissue. A metal instrument called a **curette** may also be used to gently scrape the uterine walls. The actual procedure takes from 30 seconds, to three to five minutes, depending on the number of weeks of the pregnancy.

The **HEALTH RISKS** of an abortion are much less than those of other surgical procedures, and far less than those associated with a full-term pregnancy and delivery. **SOME** of the **possible** complications include:

Retained Clots or Tissue; necessitating a repeat "D & C"	less than 1 per 100 patients
Hemorrhage (excessive bleeding), or Infection	less than 1 per 350 patients
Allergic Reaction to Medication	less than 1 per 500 patients
Laceration of the Cervix requiring sutures	less than 1 per 500 patients
Missing an Ectopic ("Tubal") Pregnancy	less than 1 per 600 patients
"Missing" an early Pregnancy	less than 1 per 1000 patients
Uterine Perforation, Organ Damage, Hospitalization, Major Surgery, Blood Transfusion, Emergency	less than 1 per 10,000 patients
Hysterectomy, future Sterility	
<b>DEATH</b>	less than 1 per 200,000 patients

**FOR** full-term pregnancies, the death rate following a vaginal delivery is around 15 per 100,000; and 30 per 100,000 for Cesarean Section deliveries (the rate of Cesarean Section is about 1 out of 4 deliveries).

**TODAY**, you have Four (4) **CHOICES**:

1. **WAITING** and thinking more about your decision.
2. **CONTINUING** the pregnancy, and planning for an **ADOPTION**.
3. **CONTINUING** the pregnancy, and **BECOMING A PARENT**.
4. **ENDING** the pregnancy, by having an **ABORTION**.

**ALSO** provided to you and listed below, are some **COMMUNITY RESOURCES** available to support your decision to carry the pregnancy to full term. The Kansas Department of Health & Environment may be able to provide further assistance.

**BASED** on the information you provided to us today, you are approximately \_\_\_\_\_ **weeks** pregnant. (*Plus or minus 1 week*)

**If** you carry the pregnancy to **full-term**, you would **DELIVER** on approximately: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_. (*Plus or minus 1 week*)

**I CERTIFY** that I received this information **IN WRITING** at least **24 HOURS PRIOR** to the performance of an abortion procedure upon me by Dr. Herbert C. Hodes, M.D. or Dr. Traci L. Nauser, M.D. or the staff of Center for Women's Health.

**SIGNED:** \_\_\_\_\_ **TIME RECEIVED:** \_\_\_\_\_ A.M. / P.M. **DATE RECEIVED** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**ALL PAPERWORK MUST BE COMPLETELY FILLED OUT BEFORE YOUR APPOINTMENT & BRING ALL OF IT BACK WITH YOU DO NOT MAIL IT BACK TO US**

**Due to the time you will be in our office, only ONE support person per patient**

**DO NOT BRING CHILDREN**

**YOU MUST BRING A PHOTO I.D. SHOWING YOUR DATE OF BIRTH**

**ALL fees must be paid in CASH before the procedure**

**NO Checks or Money Orders**

**VISA or MasterCard may be used**

**▶▶ CARDHOLDER must be present to sign ◀◀**

**DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE NIGHT BEFORE YOUR APPOINTMENT !**

**If you plan using Medical Insurance, ALL your insurance information must be in our office at least 2 WORKING DAYS in advance**

## COMMUNITY RESOURCES AVAILABLE TO ASSIST YOU, IF YOU DECIDE TO CONTINUE THE PREGNANCY

**KANSAS:** Christian Family Services (913) 491-6751  
K. U. Medical Center 588-6290  
Right to Life of Eastern KS 299-9047  
Johnson Co. Health Dept. (Mission) 791-5660  
Johnson Co. Health Dept. (Olathe) 782-9400  
Wyandotte Co. Health Dept. 321-4803  
Douglas County Health Dept. (785) 843-0721  
Franklin County Health Dept. (785) 242-1873

**MISSOURI:** Birthright (816) 444-7090  
Truman Medical Center (West) 556-3516  
Truman Medical Center (East) 478-1180  
MO Right to Life 353-4113  
"L.I.G.H.T." House 361-2233  
Jackson Co. Health Dept. 881-4424  
Clay Co. Health Dept. 781-1600  
Platte Co. Health Dept. 329-5759

### Center for Women's Health

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