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اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید.

ने सुवाहूँ उतनमे दी लेंड वै उं विरध वरवे हिम नंवर उे देन वरवे: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

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यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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Termination of Pregnancy

Obstetrics and Gynaecology Department



Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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What do I do about contraception?

You should start using contraception straight away. Please remember you can get pregnant soon after having a termination, so you are advised to use contraception before resuming sex.

Where can I access further counselling and support?

Everybody will feel differently about their termination, and you may have different feelings to those you expect. Further support can be accessed through your GP and the following resources:

- NHS Counselling - www.nhs.uk/conditions/counselling/
- Marie Stopes - Tel: 0345 300 8090
www.mschoices.org.uk
- The Samaritans - Confidential non-judgmental emotional support, 24-hours a day, seven days a week including Christmas and bank holidays, for people who are experiencing feelings of distress or despair. Freephone: 116 123
Email: jo@samaritans.org
www.samaritans.org
- Rape Crisis England and Wales
For women and girls who have been raped or sexually abused
Tel: 0808 802 9999
www.rapecrisis.org.uk

Finding out that you are pregnant can be a shock. This leaflet is intended for people considering termination of pregnancy.

What is termination of pregnancy (TOP)?

Termination of pregnancy is the same as abortion. It is a process that brings an end to the pregnancy. This is achieved either by giving medication to you or by a surgical procedure. The decision of which method is based on how many weeks pregnant you are and your preference.

In Great Britain, you can request TOP / abortion legally until 24 weeks of gestation. This is carried out only if two doctors agree that it would cause less damage to your physical or mental health than continuing the pregnancy. There are more restrictions in Northern Ireland. There are also other reasons that you may consider termination of pregnancy, and this may be at more than 24 weeks. If appropriate, your doctor will discuss this with you. You have a right to confidentiality if you are seeking termination of pregnancy.

How do I access TOP?

There are three separate providers nationally with the contact details below. They each have a selection of clinics in the surrounding area. Depending on your home postcode one may be more convenient than the other. There is no difference in referral process or speed if you or a doctor contacts the provider. If it is not appropriate for you to have a termination of pregnancy outside of a hospital setting due to medical conditions, the appropriate

way to arrange a termination is still via the following telephone numbers. You will be matched to the correct provider through the 'Right Care' team.

BPAS

Telephone for self-referral: 03457 30 40 30

Or online appointment request:

<https://www.bpas.org/contact-us/request-an-appointment/>

GP or other healthcare professionals can call 03332342435

MSI (Marie Stopes International)

www.msichoices.org.uk Telephone for self-referral: 0345 300 8090

NUPAS (National Unplanned Pregnancy Advisory Service)

www.nupas.co.uk

Telephone for self-referral: 0333 004 666

How long will I have to wait for my TOP?

You should be seen within five working days of the referral letter being received from your GP. After you have been assessed a termination should be offered no more than five working days later.

You should not have to wait more than two weeks from your first referral to the time of your termination. The earlier in your pregnancy you have termination, the safer it is.

start using contraception straight away and this will be discussed with you at the clinic appointment.

The bleeding can continue for up to 14 days but should get less each day. If the bleeding is very heavy, you should call your GP, NHS 111, or present to A&E. If the pain is getting worse or you cannot relieve it with your usual mild painkiller, then you should also seek advice and/or treatment.

If you develop the following symptoms after a termination, you might have an infection in your womb:

- A raised body temperature (greater than 37°C)
- Smelly vaginal discharge
- Pain or discomfort in your lower abdomen that is getting worse rather than better
- Bleeding from your vagina that is increasing rather than getting less or that has lasted more than 14 days after the termination.

If you are concerned about infection, pain or bleeding, then please seek medical advice via your GP, EPU, NHS 111 or A&E.

How can I reduce the risk of infection?

After a termination do not use tampons during the subsequent bleeding – you can use them again for your next proper period. It is also not a good idea to have long, soaking baths, as the bath water will get into your vagina - shower if possible or take a quick dip in the bath. Avoid sexual intercourse until the bleeding has stopped.

You will be given antibiotics in theatre and a course to go home with.

What happens afterwards?

You will be given an Anti-D injection depending on your blood group.

You will be cared for on the ward until you feel able to go home. You are usually able to go home the same day after an uncomplicated procedure.

You will feel crampy tummy pain which settles down with simple painkillers like paracetamol / ibuprofen. It is normal to have some vaginal bleeding. This should not be heavier than a period and it should stop after a week. While you are bleeding you should avoid tampons and penetrative sex. If you have prolonged or heavy bleeding (passing clots) or have smelly discharge, please contact Early Pregnancy Unit (EPU) or your doctor for advice.

When should I seek advice?

For the first few days after a termination, you will probably experience some bleeding from your vagina and might experience some cramping pains low in your abdomen. You can use a sanitary towel and the pain can usually be relieved by your usual painkillers. Please do not use tampons for this bleeding as this may introduce infection to the womb. It is also advisable not to have sexual intercourse during this time. You should, however,

What if I am less than 16 years of age?

Any young person, regardless of age, can give valid consent to medical treatment providing they are considered to be legally competent; that is, able to understand the advice given and the risks and benefits of what is being offered. If you are under 16 years of age you will be encouraged to involve your parents or another supportive adult. If you choose not to do this, doctors can offer you termination if they are confident that you can give valid consent and that it is in your best interests. You have a right to confidentiality like everyone else. However, if staff in NHS hospitals suspect you are at risk of sexual abuse or harm, they are obliged, with your knowledge, to involve social services. The hospital is not required to inform your GP, but it is advisable to do this so that your GP can provide appropriate care afterwards. This is done only with your consent. If you do not want your GP to know, you should tell the staff providing your care.

What are the risks of TOP?

Termination of pregnancy is a safe procedure. Serious complications are uncommon. The earlier in the pregnancy you have termination, the safer it is.

Risks that can occur at the time of TOP include:

- Excessive vaginal bleeding requiring a blood transfusion happens in around 1 in every 1000 TOPs.
- Damage to the cervix happens 1 in every 100 surgical termination.

- Damage to the uterus happens 1 to 4 in every 1000 surgical terminations
- Complications after the TOP (within two weeks) may include:
- Infection happens 1 in 10.
- Incomplete procedure with some pregnancy tissue remaining or ongoing pregnancy; if this happens you may need a repeat surgical procedure to complete the termination.

Will TOP affect future pregnancies?

Termination of pregnancy does not increase your risk of a miscarriage, ectopic pregnancy or a low-lying placenta if you do have another pregnancy. However, you may have a slightly higher risk of a premature birth.

What happens once I have made my decision?

You will be given information on the different methods of termination that can be used at your stage of pregnancy and the possible risks associated with them.

Medical TOP involves using two different types of tablets with an interval of 48 hours.

Surgical TOP involves a general anaesthetic and going into an operating theatre. The same surgical procedure can be performed under local anaesthetic, called MVA (manual vacuum aspiration).

You will be offered the following tests before your TOP:

- Blood test to know your blood group
- Ultrasound scan to know how far advanced your pregnancy is (before the scan you will be asked if you wish to see the image or not)
- If you have health problems there may be additional tests, such as screening for urinary tract infection (UTI), depending upon your health
- Contraception will be discussed, and you will be encouraged to think about the available options
- Sexual health will be discussed, and you will be offered screening for infections as well as cervical smear screening if you are due

What happens when I attend for my TOP?

You will have your blood pressure and observations performed. You will see the doctor who will confirm your consent for the procedure and answer any questions. You will also see an anaesthetic doctor if having a general anaesthetic.

For a surgical TOP you will have a vaginal pessary medication which helps to soften the cervix (neck of the womb) for the procedure and make the procedure safer. In some circumstances this may cause some crampy tummy pain and bleeding and start the process of the termination, although this is not the intended use.

You will be transferred to theatre for the procedure and then afterwards to recovery and then back to the ward.