



## Choices (Termination)

Evaluation	Management	Referral Guidelines
<ul> <li>Include notes of History -         Gravida/Parity/Miscarriage/STOP/MTOP/LNMP/ Ectopic/trophoblastic disease</li> <li>FBE</li> <li>Blood group and Antibodies</li> <li>(Endo cervical swabs for chlamydia and gonorrhoea PCR *         HVS for MC&amp;S done at BH at pre-op consult)</li> <li>Obstetric/ pelvic ultrasound report with EDD.         U/S will need repeating (if no FHR or Fetal pole) in 10 days or refer to MTOP</li> </ul>	For Medical Termination (Under 8 weeks) Refer to BCHS Tel: 54481600 Fax 54481600 Information available on www.1800myoptions.org.au	