



Student Health Center Medication Abortion Program - Design and Implementation

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ABSTRACT

The 2020 ACHA Sexual Health Services Survey reported only 2.5% of participating student health services provided medical abortion services on-site.

December 2020 medication abortion provision started at University of California Berkeley, in response to CA Senate Bill No. 24 requiring California State University/ University of California Student Health Services to offer medication abortion on-campus by January 1, 2023. By April 2022, 100% (32/32 patients) had completed abortions, demonstrating both success and feasibility.

ACCESS BARRIERS TO FAMILY PLANNING

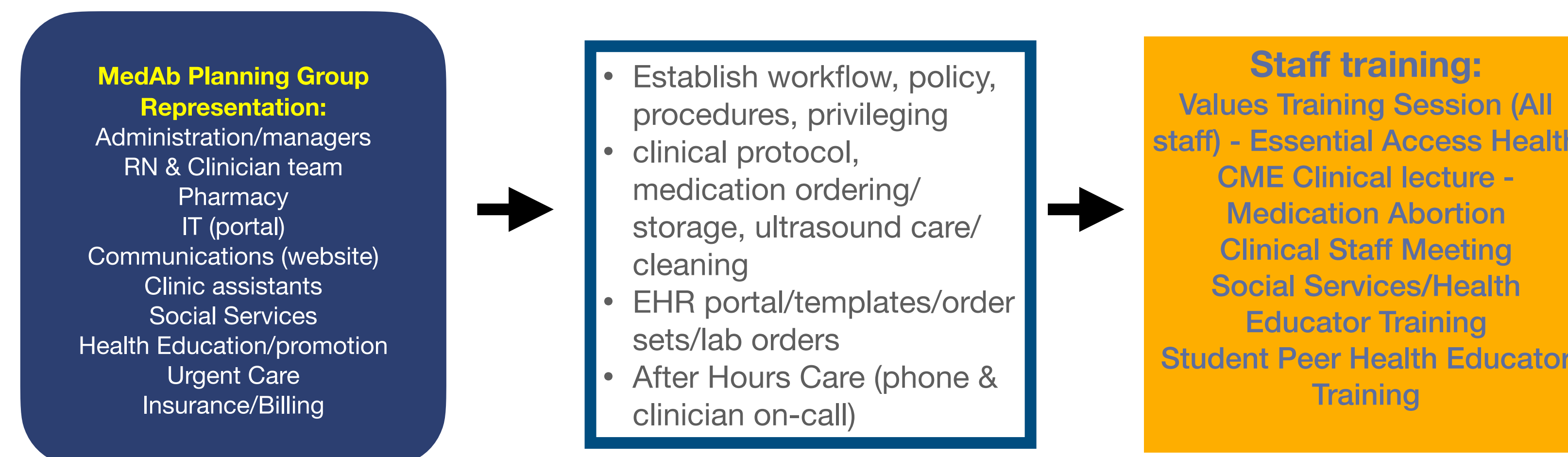
Students seeking early pregnancy termination, especially those enrolled at institutions outside of urban centers, face prohibitively expensive travel, often without reliable means of transportation, to a clinic that may require hours of travel from their campus or geographic location. These financial and time burdens negatively impact academic performance and mental health.

Provision of on-campus medication abortion reduces access, transportation, and economic barriers experienced by students. Reducing these barriers also reduces stress experienced by students seeking abortion care. ¹

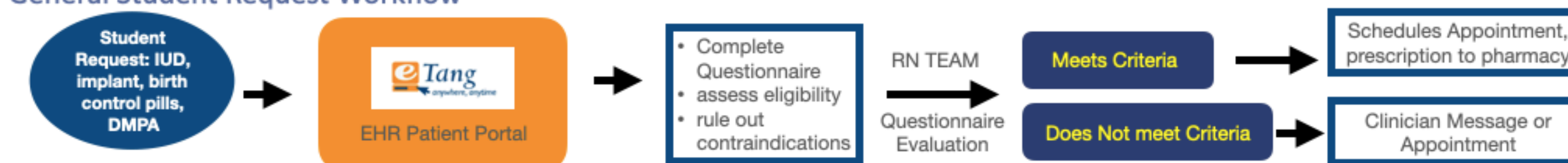
Evidence shows that medication abortion is safe. Serious complications requiring hospitalization (for infection treatment or transfusion) occur in less than 0.4% of patients under the standard protocol. ³

MEDICATION ABORTION PROGRAM DESIGN & IMPLEMENTATION

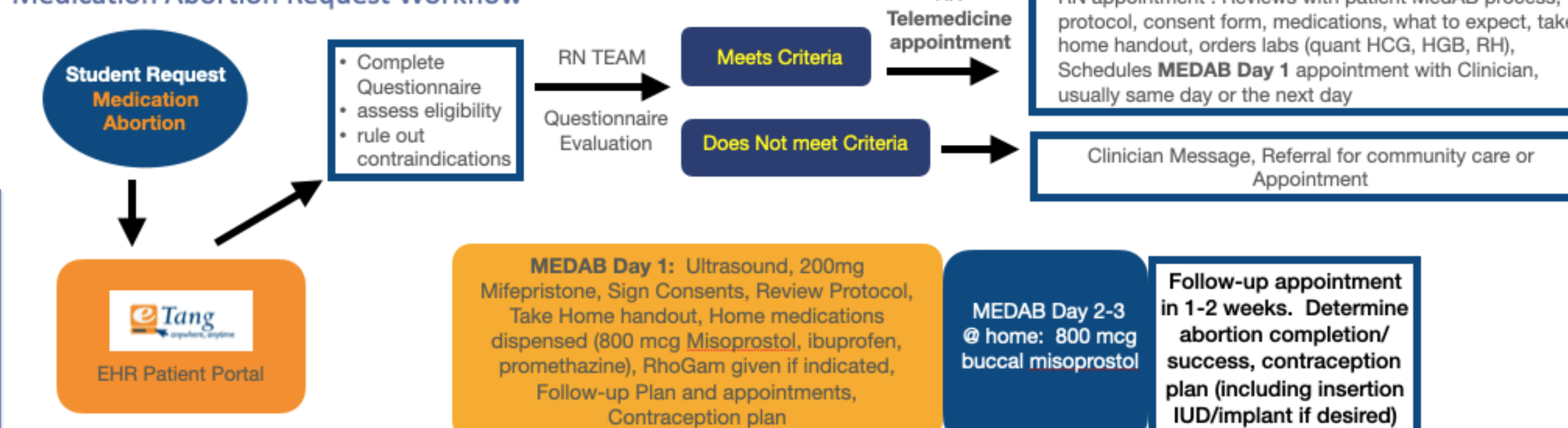
A medication abortion program can be developed around utilizing commonly used and familiar student health services and practices (electronic portal, advice nurse, pharmaceutical storage and delivery, after hours call center) to aid student familiarity to access and staff training.



General Student Request Workflow



Medication Abortion Request Workflow



OUTCOMES

# patients by April 2022	32
# completed abortions (not multiple dosing)	32/32 (100%)
RH neg	2/32 (6%)
After Hours Calls	7/32 (22%)
ER visit (stable, no treatment, discharged)	2/32 (6%)

Medication abortion is highly effective; it has a success rate of more than 95%. ³

REFERENCES

1. Bill Text SB 24: https://leginfo.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB24
2. FDA mifepristone information: <https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/mifeprex-mifepristone-information>
3. Guttmacher Institute Medication abortion article: <https://www.guttmacher.org/evidence-you-can-use/medication-abortion>
4. National Abortion Federation Clinical Policy Guidelines 2022: <https://prochoice.org/providers/quality-standards/>
5. ACOG Practice Bulletin 225 October 2020: Medication abortion: <https://www.acog.org/-/media/project/acog/acogorg/clinical/files/practice-bulletin/articles/2020/10/medication-abortion-up-to-70-days-gestation.pdf>

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