Helpful Information to Gather Before Making an Abortion Referral

Date
Name
Preferred phone number and how to identify caller (e.g., doctor's office or name only)
Age (If minor: Does parent(s) know? Need for judicial bypass/court approval?)
First day of last normal menstrual period
Pregnancy test (when, where, result)
Ultrasound (when, where, result)
Total # of pregnancies (including current pregnancy), # vaginal births, # C-sections (May need US for placental location if \geq 14 weeks)
Height and weight
Significant medical conditions (e.g., anemia, bleeding or clotting disorders, immune deficiency, asthma, diabetes, hypertension, seizure disorder, other serious or uncontrolled condition)
Substance use (alcohol, street drugs) – still using? how often? last use?
Current medications
Insurance type and whether it covers abortion
Need for financial assistance (to help pay for the abortion, travel costs)
Support (someone to accompany patient to the abortion visit)

Abortion Referral Resources

RESOURCE	CONTACT INFORMATION	COMMENTS
ACCESS Program	1-617-616-1636	General info about referrals and funding
National Abortion Federation	https://prochoice.org/think-youre-pregnant/naf-hotline/ Abortion referrals: 1-800-257-0012 Funding support: 1-800-772-9100	Refers to nearest NAF member clinic
Planned Parenthood Federation of America	http://www.plannedparenthood.org 1-800-230-PLAN	Directs women to nearest Planned Parenthood clinic
National Network of Abortion Funds	https://abortionfunds.org/need-abortion/	Provides financial assistance thru 70 member funds located throughout the U.S.
ACOG Resource Center	resources@acog.com on ACOG website (prefers email, not phone call)	Referral info for later abortions (ACOG members only)

