



EXECUTIVE SUMMARY

Good Practice Guide for
abortion care
from 20 weeks
of pregnancy

SERIES Times
of abortion

Document N° 5



clacai

CONSORCIO LATINOAMERICANO
CONTRA EL ABORTO INSEGURO



Times of abortion
Good Practice Guide for
abortion care from 20 weeks of pregnancy

Consortio Latinoamericano Contra el Aborto Inseguro - CLACAI
© Consortio Latinoamericano Contra el Aborto Inseguro CLACAI
Secretaría Ejecutiva hosted by PROMSEX
Av. José Pardo 601, oficina 604, Miraflores, Lima - Perú
511 4478668
susana@promdsr.org
www.clacai.org

Authors: Helena Paro, Mariana Romero, Ruth Zurbriggen, Damián Levy, Sonia Ariza Navarrete, Natalia Acevedo Guerrero and Agustina Ramón Michel
Coordination: Agustina Ramón Michel and Helena Paro
Assistance: Martín Pont Vergés and Mariana Vazquez
Technical review: Guillermo Ortiz, Laura Gil, Alfonso Carrera, Nadya Scherbovsky and Renata Catani

Acknowledgments: Analía Banfi, Beatriz Galli, Carmen Cecilia Martínez López, Cristina Rosero, Dana Repka, Elizabeth Ruiz Hernández, Fausto Viteri, Graciela Lukin Mutov, Jennie Dador Tozzini, Jorge Eduardo Caro, Josefina Miró Quesada Gayoso, Julio César Camelo, Leonel Antonio Soto Restrepo, Linda Valencia, Malena Morales, Mara Zaragoza, Nina Zamberlin, Ninde MolRe, Rebeca Ramos Duarte, Ricardo Antonio Escalante, Silvina Ramos, Soledad Deza and Viviana Mazur.

1st edition – October 2025

Legal deposit at the Biblioteca Nacional del Perú N° 2025-11042
This document is published under terms and conditions of Creative Commons license -
Attribution - Non commercial - Underivative 4.0 International



Series: Times of abortion. Document N° 5. *Good Practice Guide for abortion care from 20 weeks of pregnancy*. August 2025. CLACAI / Consortio Latinoamericano Contra el Aborto Inseguro.

Contents

Glossary	4
Introduction	5
How was it developed?	5
Scope and objectives	5
Section 1: Initial approach for individuals seeking abortion from 20 weeks of pregnancy	7
Section 2: Abortion care before the expulsion of products of pregnancy	12
Section 3: Care after expulsion of products of pregnancy	15
Section 4: Management of abortion complications	17
References	18
Annexes	
<i>Table 1.</i> Information for counseling and technique election for induced abortion	22
<i>Table 2.</i> Medications and techniques used for IFA	23
<i>Table 3.</i> Medication abortion or dilation and evacuation (D&E) for pregnancies from 20 weeks	24
<i>Table 4.</i> Non-pharmacological and pharmacological pain management in abortion care from 20 weeks	25
<i>Table 4.1.</i> Moderate sedation medicines	26
<i>Table 4.2.</i> Deep sedation medicines	26
<i>Table 5.</i> Management of post-abortion hemorrhage according to etiology	27
<i>Table 6.</i> Suggested antimicrobial treatment regimens for post-abortion infection	28
Annex I. Guidelines for adapting the informed consent form for induced abortion from 20 weeks	29
Annex II. Suggested written information sheet to support the informed consent process	33

Glossary

To facilitate the reading and understanding of this document, this glossary defines the following key terms.

Dilation and Evacuation (D&E): A procedure to evacuate the uterus in pregnancies typically beyond 12 to 14 weeks. It involves cervical preparation and is characterized by uterine evacuation using forceps and aspiration.

Gestational duration/time: The duration of pregnancy, estimated from the first day of the last menstrual period (LMP) or through ultrasound measurements.

Good practice guidance (GPg): Recommendation elaborated to assist the healthcare practitioner with patient care decisions about appropriate diagnostic, therapeutic, or other clinical procedures for specific clinical circumstances.

Induction of fetal asystole (IFA): A procedure used to induce cessation of fetal cardiac activity, performed either by surgical means (e.g., transection of the umbilical cord) or pharmacologically, via injection of drugs through the amniotic cavity or directly to the fetus body.

Induced abortion: The complete expulsion or extraction of an embryo or fetus (regardless of gestational duration) following a deliberate termination of an ongoing pregnancy through medication or surgical means, which is not intended to result in a live birth. Induced abortions are distinct from spontaneous abortions (miscarriages) and stillbirths.

Manual Vacuum Aspiration (MVA): Evacuation of uterine contents using plastic cannulas attached to a manual vacuum aspirator (typically a 60 mL syringe).

Medication abortion: Induced abortion using pharmacological agents.

Procedural abortion: Induced abortion via transcervical techniques, such as vacuum aspiration (manual or electric) or dilation and evacuation (D&E).

Products of pregnancy: Refers to the fetus and placenta.

Introduction

This **Good Practice Guide** (GPG) aims to strengthen and enhance the conditions that ensure access to quality abortion care. It is part of the initiative Times of Abortion by the *Consortio Latino Americano contra el Aborto Inseguro* (CLACAI).

The reasons why girls, adolescents, women, and other individuals capable of becoming pregnant may require an abortion beyond 20 weeks of pregnancy are varied: sexual violence or coercion; the time each individual needs for decision-making; barriers to accessing the healthcare system; lack of information; transportation difficulties; situations of extreme vulnerability affecting autonomy; health conditions that arise or worsen with pregnancy progression; fetal conditions incompatible with extrauterine life, among others.

Although relatively infrequent, abortions beyond 20 weeks of pregnancy do occur and require an enabling environment to be carried out with the necessary quality and care for all involved - both the person undergoing the procedure and the healthcare professionals providing the service.

How was it developed?

This GPG was developed through exchanges that took place during a regional in-person meeting held in Bogotá in April 2024, which brought together 32 multidisciplinary specialists from Argentina, Bolivia, Brazil, Colombia, Ecuador, El Salvador, Honduras, Mexico, and Peru.

The regional meeting was enriched by three national meetings held in Argentina, Colombia, and Mexico, involving groups with similar composition. Each national meeting followed a predefined agenda and methodology, with coordination aimed at strengthening the regional meeting. These in-person meetings were followed by virtual meetings and webinars, which are, anyhow, reflected in this GPG.

Scope and objectives

The primary objectives of this GPG are to provide guidance to **healthcare teams and professionals delivering safe abortion care from 20 weeks of pregnancy**, and to equip them with tools to better respond to **the expectations and needs of both users and care teams**.

Its specific objectives include:

- to systematize and to share quality care practices in the provision of abortion services from 20 weeks of pregnancy in different countries of the region, in order to counter stigmatizing, technically inadequate, or abusive practices;
- to produce a reference tool that contributes to the development of comprehensive care policies in abortion services, grounded in evidence of safe and respectful practices, aligned with the decisions of those seeking abortions;
- to offer a technical instrument to strengthen, support, and expand the capacity of teams ensuring access to induced abortion services from 20 weeks of pregnancy.