

Medical abortion with mifepristone and misoprostol

Up to 10 weeks gestation (70 days since last menstrual period (LMP)):

- Mifepristone 200mg orally
- Misoprostol 800mcg buccally, sublingually or vaginally 1-2 days after mifepristone

10-13 weeks gestation:

- Mifepristone 200mg orally
- Misoprostol 600mcg sublingually or 800mcg vaginally 1-2 days after mifepristone, then misoprostol 400mcg sublingually or vaginally every three hours until expulsion
- Alternatively, mifepristone 200mg orally followed 1-2 days later by misoprostol 800mcg buccally, sublingually or vaginally may be used. The dose of misoprostol may be repeated to achieve abortion success.

At or after 13 weeks gestation (13-24 weeks):

- Mifepristone 200mg orally
- Misoprostol 400mcg buccally, sublingually or vaginally 1-2 days after mifepristone, then every three hours until fetal and placental expulsion
- If the woman is stable and it is convenient for her to do so, providers should allow her at least four hours after fetal expulsion to expel the placenta.

Medical abortion with misoprostol only

Before 13 weeks gestation:

- Misoprostol 800mcg buccally, sublingually or vaginally every three hours until expulsion

At or after 13 weeks gestation (13-24 weeks):

- Misoprostol 400mcg sublingually or vaginally every three hours until fetal and placental expulsion. Vaginal dosing is more effective than sublingual dosing for nulliparous women

- If the woman is stable and it is convenient for her to do so, providers should allow her at least four hours after fetal expulsion to expel the placenta

Medical treatment for incomplete abortion, missed abortion, or intrauterine fetal demise (postabortion care)

Less than 13 weeks uterine size:

- Incomplete abortion
 - Misoprostol 600mcg orally in a single dose or 400mcg in a single dose sublingually or, in the absence of vaginal bleeding, vaginally
- Missed abortion
 - Misoprostol 600mcg sublingually or, in the absence of vaginal bleeding, 800mcg vaginally every 3 hours until expulsion (generally 1-3 doses)
 - Where available, add pretreatment with mifepristone 200mg orally 1-2 days before misoprostol

13 weeks or larger uterine size:

- Incomplete abortion
 - Misoprostol 400mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every three hours until expulsion
- Intrauterine fetal demise (up to 24 weeks):
 - Misoprostol 400mcg sublingually or, in the absence of vaginal bleeding, vaginally every 4-6 hours until expulsion.
 - Where available, add pretreatment with mifepristone 200mg orally 1-2 days before misoprostol.

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