MVA PROCEDURE NOTE:

Physical Examination:
Uterus: Size in weeks (bimanual): ______ AV/Mid / RV
Cervix: WNL / CMT, parous/nullip
Vagina: WNL / discharge noted: ________________________________________

Procedure:
☐ Pap done ______ gc, chlam done ______
☐ Cervix and vagina swabbed with Betadine.
☐ Lidocaine 1%, ________ cc total injected.
☐ Tenaculum applied ________ o’clock.
☐ Cervix progressively dilated to: ________.
☐ Cannula inserted, size ________.
Estimated blood loss: ________ cc.
Additional comments: ___________________________________________

Tissue Exam:
☐ Decidual tissue
☐ Villi
☐ Gestational sac
☐ Tissue appropriate for gestational age

Post-Op Ultrasound if done:
☐ No IUP visualized Other: ______________________

Assessment:
☐ Patient stable, AB complete
☐ Pad checked for bleeding
   For complications, see progress notes
☐ Post-procedure vital signs:
   B/P _____   P _____

Plan:
☐ Expected symptoms discussed; post-procedure instructions given.
☐ Rhogam if needed: __________________
☐ Doxycycline 100 mg tabs 2 tab ______ Dispensed or ___ 1 gm Zithromax
☐ Contraception: ____________________________________________
☐ Follow up appointment recommended.

Clinician Signature: ____________________________________________