

# Phone Script For Offering Abortion Options & Information

*These tips and tools can also be used when talking with patients face-to-face.*

Schedulers working in general primary care practices may not have the necessary clinical knowledge to schedule abortion visits. In many primary care practices, nurses will schedule appointments, answer common abortion FAQs, and field any unknown questions to clinicians. This phone script may be a helpful reference for nurses and schedulers booking abortion visits in the primary care office.

1. Have certain helpful tools at your fingertips when scheduling an abortion appointment:

- A pregnancy wheel
- Comparison of Medication & Aspiration Abortion Fact Sheet (see Tool)
- Abortion Scheduling Template (see Tool)
- Referrals

2. Find out approximately how many weeks pregnant they are.

3. For callers wanting an abortion and meet your guidelines for aspiration and medication abortion:

*"It sounds like you're around — weeks pregnant, which means that you have two options."*

*"You can have an **aspiration abortion**":*

- *This requires one office visit.*
- *Your visit will include some simple lab tests, reviewing medical history, answering your questions, explaining the procedures, talking about birth control options, and scheduling a follow-up visit.*
- *You will be in our clinic approximately 2-3 hours, but the procedure itself only lasts about five minutes.*
- *You will rest after the abortion for 20-30 minutes before leaving.*

*"Your other option is a **medication abortion (aka the abortion pill)**":*

- *This also requires one office visit.*
- *Your visit will include the same steps as an aspiration abortion.*
- *After completing those steps, you will receive 2 medications. The first is pill you take at the office.*
- *The next day, at home, you will insert the second medication into your cheeks or vagina. You will complete your abortion at home.*
- *The follow-up visit is a short check-up to make sure that the abortion is completed.*

4. Check in with the patient to see if they have made a decision.

- *"Would you like more information about either or both methods? Or do you feel ready to decide and schedule an appointment?"*
- *Note: If you offer both on the same day, allow the patient to make their decision at the time of their appointment. This allows you to get to another call, and does not pressure the caller).*

5. If the caller is unsure at this point, go into advantages and disadvantages of both.

- See Comparison of Medical Versus Surgical Abortion Tool

**Here is an example of a call to schedule an abortion that is both reassuring and informative.**

Ring, ring, ring

*Hello, Dr. Farr's Office, this is Josie how may I help you?*

Hi, I need an abortion.

*Sure, I can help you with that. Do you remember when you had your last period?*

December 5<sup>th</sup>.

*By that date, you are about 7 weeks pregnant, so you have a few choices. I can tell you about the two types of abortions and the pain management options we offer. Do you want me to quickly review those, or do you know what type of services you want?*

I want to do it all in one day.

*We can certainly accommodate that. We offer medication abortion – which is also known as the abortion pill. You take one medication here in the office and then you take another medication the next day at home. Your abortion is completed at home. The surgical abortion is done here at the clinic under local or conscious sedation anesthesia, the procedure is performed by a doctor and takes 5-7 minutes and you recover here on site. Both services can be offered in one day, they both cost the same, and are covered by insurance. Should we schedule an appointment for you and you can decide on the day of your appointment?*

Oh, I didn't know there were so many choices. I would like to schedule the appointment and think about which option is better for me.

*Certainly, we can see you on Tuesday, Thursday, or Saturday. Which day would work better for you?*

Saturday.

*We have appointments at 8 am or 9 am.*

8am.

(Schedule appointment, get demographic information, refer to [Abortion Scheduling Template](#))  
*I'd like to walk you through what you will need to bring with you...what your day will be like. We also have all this information on our web site if you would rather not spend more time on the phone.*

Thanks, I am in a hurry. I'll go to the web site.

*Great, our web site is XXXX, let me just confirm a few basics with you: your appointment is for this Saturday morning at 8 am, the cost for either abortion option is \$400, if you are Rh (-) there may be an additional fee for a special medication. You will want to wear comfortable two piece clothing. You may want to arrange for a ride home if you do want to get any sedation that day. I know this is a lot of information, but I want to make sure there are no surprises when you get to the clinic. Do you have any questions?*

No I don't have any other questions.

*Ok, then. We will call a day or two ahead of time to confirm your appointment, so if you do think of anything else, that would be a good time to ask. Thank you.*

### **Tips for Talking About Pain Management Options**

One of the most common questions from clients is how to handle and minimize pain. They may have had a bad experience in the past or may not have any idea what to expect.

First, assess what the patient knows or believes and address their concerns directly. Here are some helpful responses:

Q: "I am worried about how painful this will be."

*R: "I get asked that a lot, let me first tell you we will take very good care of you. Different patients describe the discomfort of abortion differently. Some really want strong pain medication and others don't take anything stronger than Ibuprofen - and they do just fine. Depending on what makes you feel comfortable, we can give you a range of medication options.*

*We do provide oral and IV sedation. These medications may make you feel as though you're awake but floating far away. We can determine which type of sedation you may want at the time of the visit. You will need to bring someone to drive you home if you choose to have sedation."*

Q: "I'm afraid it will hurt."

*R: "That is a very normal fear. The procedure itself is fairly quick and we offer a variety of medications to try to make you as comfortable as possible during the procedure."*

Q: "I want to be asleep"

*R: "We do not offer general anesthesia here, but we do offer other pain medications that will help with the discomfort and anxiety. Many patients who have been very anxious or apprehensive have been happily surprised at how well they did with the sedation we offer. Or, if you are sure you want general anesthesia I can refer you to \_\_\_\_\_."*

### **Other Useful Phone "Best Practices"**

- Answer the phone using a warm, welcoming tone that tells the client that
  - The patient's questions are good questions

- The patient has called the right place
- Put things in the positive:  
Not “*We don’t do that,*” but instead, “*Let me tell you what we can do.*”  
Not “*I have no idea,*” but instead, “*That’s a good question; I can find out the answer if you’ll hold for a moment,*”
- Watch out for medical jargon. Words that may not make sense to clients include “*TAB,*” “*Procedure,*” and “*Medical Abortion.*”
- Do not put clients on hold immediately; find out why they are calling first.
  - If it’s a quick thing, give them an answer and move on to the next call.
  - If callers need information that is time consuming, make a note of what they want and what line they’re on and then ask them if they can hold. Though it feels longer, this is a time-saving practice for you and the clients.
- Avoid abrupt, yes-or-no answers to questions. Use your answers to guide the call toward the information *you* need to give.
- Don’t just say “*the doctor will answer that when you’re here*” or “*you can get all that information after your ultrasound.*” While it’s true that callers can get complete information during their visit (or their ultrasound), this is no excuse not to give them information on the phone. Callers may need this information to decide whether they’ll come to your office.
- When your caller has a thousand questions, and you have 2 people in front of you waiting to check in, and there’s no way you can properly answer the caller’s questions, reassure that they have called the right place and make an appointment to call them back. Be very warm and reassuring that you want to help them. *Never* share your stress with callers like “Look, there are a ton of people in front of me, do you want an appointment or not?”
- Remember to make confirmation and no show calls. Please see sections below.

### **Tips for Handling Difficult and Angry People**

- Allow the person to vent, do not interrupt.
- Listen carefully to the complaint.
- Avoid being defensive.
- Do not interrupt.
- Ignore exaggerated, dramatic statements - try to focus on the real issue.
- Thank the person for telling you about the problem.
- Give a statement of sincere regret.
- Suggest possible solutions.
- Take action, if this is what the client wants.
- Follow-up whenever possible.

### **Calming Techniques**

- Keep your cool – don’t react personally to the situation.

- Relax and be attentive.
- Show respect and concern.
- Use active listening techniques:
  - Carefully re-state what you hear to make sure you understand
  - Acknowledge the person's situation and/or feelings
- Use words and phrases that calm:
  - "I can certainly understand why you would be upset."
  - "Your frustration is very understandable."
  - "I'm really sorry that happened."
  - "I'd really like to help you resolve that problem."

## **Violence and Abusive Language**

It may be helpful to tell the violent/abusive person that you are going to call 911, or that you have done so, in order to get them to calm down. Use staff meetings to clarify office standards and guidelines about when to tell clients you will be hanging up, and when to call police. When incidents do occur, document them and, make sure staff have an opportunity to debrief.

## **Confirmation calls**

First review your scheduling template to see which "caller code" is preferred.

Ring ring

Hello?

*Hi, may I speak with Stacy please?*

This is Stacy

*Hi, Stacy, this is Aura from Dr. MorningStar's office. I'm calling to confirm your appointment with us at 9a.m. tomorrow and to see if you had any questions I could answer.*

Thanks. Um, I don't think I have any questions.

*OK, I see that you are using your insurance – please remember to bring your card and a photo ID. Let me just go over a few reminders so tomorrow goes as smoothly as possible:*

*If you plan on driving, we now validate parking. The appointment may take up to 3 hours, so you might want to bring something to read. I see in my notes that David will be with you – that's great, maybe tell him to bring a book as well.*

Ring ring

Answering machine

*Hi, this message is for Anita. Anita, this is Aura from your doctor's office. I'm calling to confirm your appointment with us tomorrow at 10:30 a.m. If you have any questions please call me at xxx-xxxx. Otherwise, I'll see you tomorrow morning!*

## **No Show Calls**

First review your scheduling template to see which "caller code" is preferred.

Ring ring

Hello?

*Hi, may I speak with Ava?*

This is Ava.

*Hi Ava, this is Aura from Dr. MorningStar's office. I'm calling to see if you want to reschedule your appointment with us or if I can help you with any other kind of appointment or referral.*

Oh, I totally forgot to call...I still want to have that appointment...  
*No problem, I can make that appointment right now.*

Ring ring

Hello?

*Hello, may I speak with Wilma?*

This is Wilma.

*Hi, Wilma, this is Aura from Dr. MorningStar's office. I'm calling to see if you want to reschedule your appointment with us or if I can help you with any other kind of appointment or referral.*

I decided to go somewhere else.

*That's fine. In order to better tailor our services, may I ask why you decided to go elsewhere?*

Record all information for review.