10A NCAC 14E .0313 is proposed for amendment as follows:

10A NCAC 14E .0313  POST-OPERATIVE CARE

(a) Patients. A patient whose pregnancy is terminated on an ambulatory basis shall be observed in the abortion clinic for a reasonable number of hours, not less than one, to insure that no immediate post-operative complications are present. Thereafter, patients may be discharged according to a physician’s order and the clinic’s protocols. such patients may be discharged if their course has been uneventful.

(b) Any patient having an adverse condition or complication known or suspected to have occurred during or after the performance of the abortion shall be transferred to the back-up hospital for evaluation or admission.

(c) The following criteria must be documented prior to discharge:

(1) the patient must be ambulatory with a stable blood pressure and pulse; and
(2) bleeding and pain must be controlled.

(e) Any non-ambulatory patient shall be accompanied by an attending medical or nursing staff member during any transfer within or outside the facility.

(d) Written instructions shall be issued to all patients in accordance with the rules orders of the physician in charge of the abortion service and shall include the following:

(1) symptoms and complications to be looked for, for; and
(2) activities to be avoided.

(e) The clinic shall have a defined protocol for triaging post-operative calls and complications. This protocol shall establish a pathway for physician contact to ensure ongoing care of complications which the operating physician is incapable of managing.

History Note: Authority G.S. 14-45.1(a); 143B-10;
Eff. February 1, 1976;
Readopted Eff. December 19, 1977;
Amended Eff. April 1, 2015; December 24, 1979.