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Terminated Pregnancy Report

2015

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Terminated Pregnancy Report

Indiana State Department of Health

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Disclaimer

The analysis presented in this report is not comparable to the results of former state reports of terminated pregnancies. Although similar characteristics (i.e. age, marital status) are explored, this is a new analysis conducted differently than past reports. Results from 2012 and 2013 data will not match results for these years previously published due to the change in analysis.

Trends identified in this report are based solely on data collected since 2012, and are subject to change in future reports due to reports being corrected and returned periodically. Reports may show a different number of terminations for a previous year because new analyses are rerun to incorporate any records that were not previously available for analysis and reporting.

This report shifts from previous reports by exploring demographics, such as education level, for a more comprehensive analysis of the occurrence of pregnancy termination in the state. Unlike previous reports, this report focuses on the occurrence of terminations and begins to examine trending; as such, data analysis based on residency will be more limited than previously reported.

Due to the required publication of this report by mid-year, a cut-off date was established to create a 2015 dataset for analysis. As such, there is the possibility that reports were submitted after this cut-off and were not included in the analysis; this may cause the number of terminations for the year to be slightly lower than the true total. Reports may show a different number of terminations for a previous year because new analyses are rerun to incorporate any records that were not previously available for analysis and reporting.

Analyses conducted by the Centers for Disease Control and Prevention (CDC) that are referenced in this report were subject to data availability at the federal level. For details, please refer to the original document released by the CDC.[1]

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Executive Summary

The Terminated Pregnancy Report for Indiana is produced annually to provide a comprehensive overview of terminations performed in the state throughout the previous year. Data is reported to the Indiana State Department of Health Division of Vital Records in accordance with Indiana Code § 16-34-2. This year's report is the second to provide analysis from an epidemiological perspective. Reports prior to 2014 consisted of the presentation of data tables for the information obtained from terminated pregnancy records.

The 2015 reporting year is the last year for which reports are collected using a paper form. All future reports will be collected via an online reporting system.

During calendar year 2015, 7,957 pregnancy terminations were reported by physicians to ISDH at the time of analysis. Of these terminations, 7,487 (95.87%) were Indiana residents. For 2014, 8,118 terminations were reported for 2014. In 2012 and 2013, 8,808 and 8,179 terminations were reported, respectively.

The most recent U.S. Census data estimates that 1,295,431 women of childbearing age (15–44 years) lived in Indiana in 2014.[4] Based on this estimation, the termination rate for Indiana residents in 2015 was 5.8 per 1,000 women aged 15–44. Of the women receiving terminations in 2015, 87.58% were unmarried and 12.39% were married.

Terminations at abortion clinics accounted for 99.66% of procedures, and reported terminations were performed in six counties: Hamilton, Lake, Marion, Monroe, St. Joseph, and Tippecanoe. Of these, Marion County had the most, accounting for 63.10% of terminations; Hamilton County had the fewest, accounting for only 0.03% of terminations.

Reports show that 41.54% of women reported a high school diploma or General Educational Development (GED) as the highest level of education they completed at the time of procedure. This is similar to 2012, 2013, and 2014, with 40.05%, 37.32%, and 39.00% reporting the same level of education in each year, respectively.

Total Abortions in Calendar Year 2015: 7,957
Total Abortions in Calendar Year 2014: 8,118

Terminations by Race		
Race	**2015**	**2014**
White	57.12%	58.36%
Black / African American	30.11%	28.66%
Asian	3.24%	3.12%
Pacific Islander / Native Hawaiian	0.09%	0.06%
American Indian / Alaska Native	0.36%	0.26%
Multiple Races	1.29%	0.79%
Other	7.78%	7.48%
Unknown	0.00%	1.27%

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Weeks of Gestation at Time of Termination		
Gestation	**2015**	**2014**
≤8	80.21%	78.82%
9-13	19.57%	20.90%
14-15	0.08%	0.07%
16-17	0.05%	0.09%
18-20	0.10%	0.11%

Procedure Used to Terminate Pregnancy in Indiana		
Procedure	**2015**	**2014**
Dilation & Evacuation	0.24%	0.33%
Menstrual Aspiration	0.04%	0.00%
Mifepristone / Misoprostol	27.93%	26.64%
Suction Curettage	71.80%	73.00%

* Percentages may not add to 100 due to rounding

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Introduction

The Centers for Disease Control and Prevention (CDC) has reported on abortion surveillance since 1969. Annually, CDC requests data from throughout the United States; however, participation by health agencies is voluntary.[1] The Indiana State Department of Health (ISDH) has provided data to CDC since 1973.[9] The most recently reported abortion numbers, rates (number of abortions per 1,000 women aged 15-44 years), and ratios (number of abortions per 1,000 live births) for the United States during the time frame 2003–2012 are shown in Table 1.

Table 1. Number, rate, and ratio of reported abortions – by selected reporting areas, United States, 2003–2012[1]

Year	All reporting areas[§]	Continuously reporting areas[¶]			
	Count	Count	Percent**	Rate	Ratio
2003	848,163	826,036	97.4	16.1	245
2004	839,226	817,906	97.5	15.9	241
2005	820,151	807,680	98.5	15.7	236
2006	852,385[††]	834,615	97.9	16.2	237
2007	827,609	818,923	99.0	15.8	229
2008	825,564	816,765	98.9	15.8	232
2009	789,217[§§]	779,278	98.7	15.0	227
2010	765,651	754,780	98.6	14.6	227
2011	730,322	719,530	98.5	13.9	219
2012	699,202	688,149	98.4	13.2	210

[§] Excludes states that did not report abortion numbers to CDC: California (2003-2012), Louisiana (2005), Maryland (2007-2012), New Hampshire (2003-2012), and West Virginia (2003-2004).
[¶] Only includes areas that reported abortion counts every year during the period of analysis (2003-2012).
** Abortions from areas that reported every year during 2003-2012 as a percentage of all reported abortions.
[††] This number is greater than reported in the 2006 report because of numbers subsequently provided by Louisiana.
[§§] This number is greater than reported in the 2009 report because of numbers subsequently provided by Delaware.

Indiana Reporting Requirements

Reports were submitted by mail to the ISDH Vital Records Division on State Form 36526 (R4 / 12-11) (Appendix A). A minimal number of reports were submitted on the older form, State Form 36526 (R3 / 6-11) (Appendix B). Upon receipt, all forms were reviewed for completeness; incomplete forms were returned to the physician for correction. Completed forms were entered into the electronic terminated pregnancy database (Appendix C).

The performance of, and reporting requirements for, terminated pregnancy in Indiana are governed by Indiana Code Title 16, Article 34, Chapter 2 (§ 16-34-2).[3] The pertinent Indiana Code can be found in its entirety at https://iga.in.gov/legislative/laws/2014/ic/titles/016/articles/034/chapters/002/.

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Trends in Indiana

During calendar year 2015, 7,957 pregnancy terminations were reported by physicians to ISDH, at the time of analysis. Of these terminations, 7,487 (95.87%) were Indiana residents. In 2012 and 2013, 8,808 and 8,179 terminations were reported, respectively. There were 8,118 terminations reported for 2014. The decrease in the total number of terminations performed in Indiana from 2012 to 2015 can be seen in Figure 1.

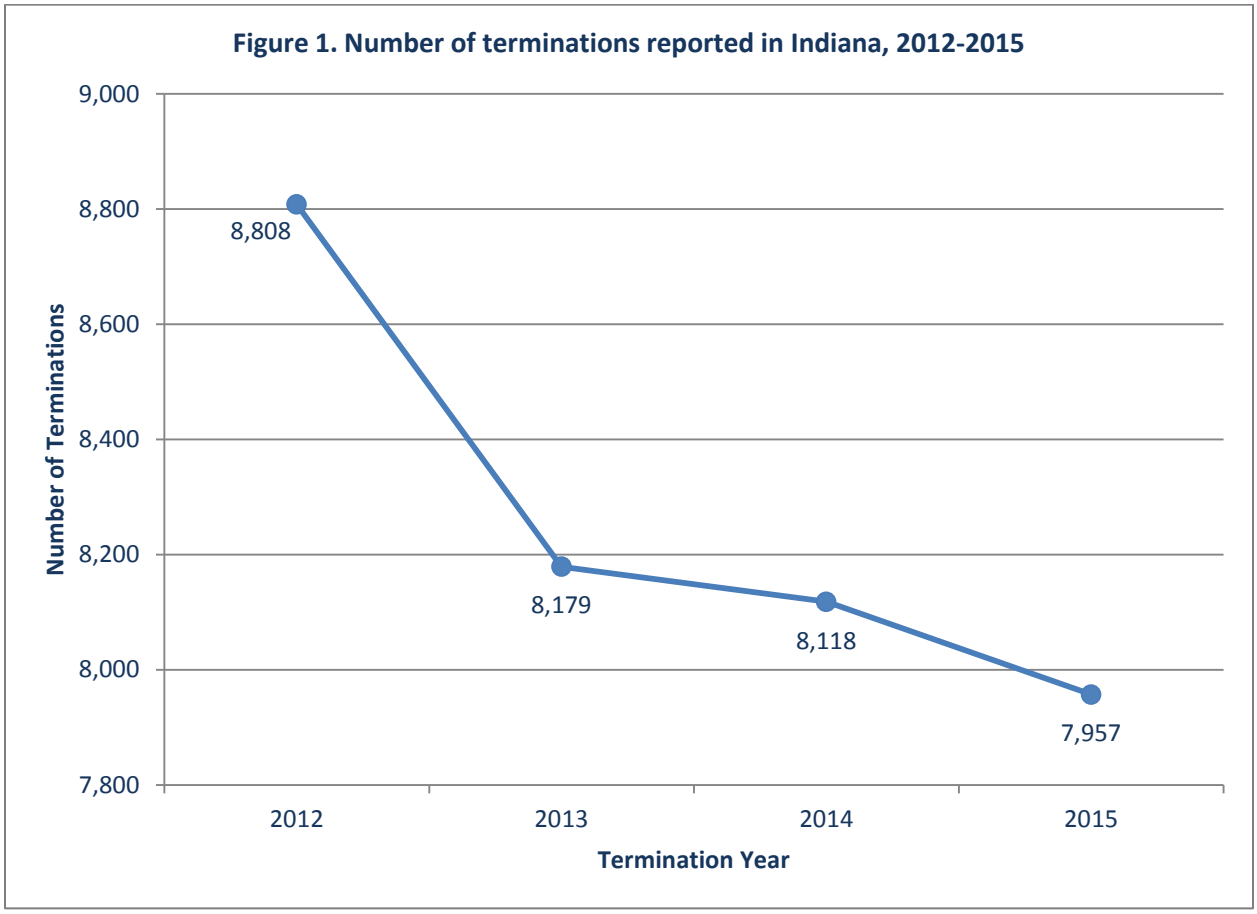

Table 2 shows the number of terminations among Indiana residents of childbearing age and the associated rates from 2012 to 2015. As rates are only based on Indiana residents, data is also provided to identify the percentage of all terminations reported that were Indiana residents. The count used to determine the rate is the number of Indiana residents receiving terminations from all reported terminations in Indiana.

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Table 2. Number and rate of reported terminations among Indiana residents of childbearing age occurring in Indiana, 2012–2015				
Year	**Count**	**Population Est.**[§]	**Rate**[†]	**Percent**[¶]
2012	8,272	1,287,150	6.4	93.9
2013	7,596	1,292,138	5.9	92.9
2014	7,621	1,295,431	5.9	93.9
2015	7,487	1,295,431*	5.8	94.1

[§] Estimation of females aged 15–44 that were Indiana residents during the specified year.[4]

* Estimation based on the most recent year available at the time of publication, 2014.

[†] Rate per 1,000.

[¶] Percent of total terminations reported to the Indiana State Department of Health for the specified year.

True trends have yet to be established at the state level in Indiana due to the change in reporting, which began with the 2014 report. This report will focus on the characteristics associated with terminations conducted in 2015, while beginning to identify trends since 2012.

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Methodology

The data and information presented in this report resulted from the statutory requirements established by Indiana Code § 16-34.[3]

Data Source
The data source for this report was the electronic database where information provided on official reports is recorded by ISDH Division of Vital Records personnel. Reports do not include personally identifiable information.

Included in this report are analyses of demographic information provided by the patient, as well as medical information collected from reports. Demographic information is self-reported by the patient, and includes:

- Age;
- Marital status;
- Education level;
- Race;
- Ethnicity;
- County of residence (if an Indiana resident);
- State of residence.

Some medically relevant information is also reported by the patient, including the number of previous live births living, the number of previous live births deceased, the number of previous spontaneous terminations, the number of previous induced terminations excluding the termination being reported, dates of all past terminations, spontaneous and induced, and the date last normal menses began.

Medical information collected on reports regarding the present termination is completed by the physician. This information includes:

- Date of termination;
- Fetus delivered alive;
- Viability of fetus;
- Completion of a pathological examination of the fetus;
- Results if pathological examination performed;
- Procedure employed for termination;
- Complications of the termination;
- Result in maternal death;
- Estimated gestational age and/or postfertilization age;
- Method used to determine gestational age.

Other information reported includes the name of the facility where the termination was completed, the city or town of termination, the county of termination, the physician's full name, address, and signature, and the name and age of the father, if known.

Measures
Measures in this report are primarily consistent with CDC categorizations and definitions.
Aggregate counts of terminated pregnancies reported are for the following variables:

- Termination by month (Indiana resident, non-resident);

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- Woman's age in years (10-14, 15-17, 18-19, 20-24, 25-29, 30-34, 35-39, 40-44, ≥ 45);
- Race (White, Black/African American, American Indian/Alaska Native, Pacific Islander/Native Hawaiian, Multiple Races, Other Race);
- Ethnicity (Hispanic or non-Hispanic);
- Marital status (married or unmarried);
- Education level (8th grade or less, 9th-12th grade but no diploma, high school diploma or GED, some college credit but no degree, Associate's Degree, Bachelor's Degree, Master's Degree, Doctoral or Professional Degree);
- Pregnancy history (0, 1, 2, ≥ 3, Unknown);
- Procedure (Dilation & Evacuation, Mifepristone/Misoprostol, Suction Curettage, Medical (Non-Surgical), Menstrual Aspiration, Unknown);
- Facility (Facility where termination performed);
- Estimated gestational age in weeks at the time of termination (≤ 8, 9-13, 14-15, 16-17, 18-20);
- County of termination (Indiana county of termination);
- County of residence (Indiana residents only, under specific criteria).

In addition to aggregate data, cross-tabulations are also provided in this report. Reported cross-tabulations include age by race, procedure by facility type, and gestational age by procedure. Figures are also shown for trending of data from 2012 to 2015 or to compare 2015 data across demographics. These figures demonstrate trends in age, ethnicity, education, pregnancy history (separately by race and by age), and gestational age.

Variables for race and ethnicity are based on specifications established by the Federal Office of Management and Budget (OMB). Women receiving terminations were asked to identify their ethnicity (i.e. Hispanic or Latino and/or non-Hispanic or non-Latino) and race. Race identification is based on five standard categories: White, Black/African American, Asian, American Indian/Alaska Native, and Pacific Islander/Native Hawaiian. If one of these OMB categories does not apply, women may identify as Other.[2]

Aggregate data for race is presented based on 1997 OMB standards; however, some analyses, such as cross-tabulations, were conducted with non-standard race categories. This change was made to provide a more accurate representation of the differences between races when analyzing particular variables.

Table 3. Equivalence of race categories in this report

1997 OMB Standards	Non-Standard Race Categories
White	White
Black / African American	Black
Asian	Other
American Indian / Alaska Native	Other
Pacific Islander / Native Hawaiian	Other
Other	Other

Analytic Procedures

Counts and percentages were calculated using SAS statistical software, version 9.3. Univariate and bivariate statistics are presented where applicable.

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Ratios are not provided in this analysis due to the fact that Indiana's 2015 natality file will not be considered complete until early 2016. Some records were removed from the dataset for reasons such as duplication or incomplete procedures, prior to analysis.

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Results

During 2015, 7,957 terminations were reported to the ISDH. Of these terminations, 7,487 were residents of Indiana. The most recent U.S. Census data estimates that 1,295,431 women of childbearing age (15–44 years) lived in Indiana in 2014.[4] Based on this estimation, the termination rate for Indiana residents in 2015 was 5.8 per 1,000 women aged 15–44. Table 4 provides a breakdown of the number of terminations among resident and non-resident women who received terminations in Indiana in 2015 by month.

Table 4. Terminations among resident and non-resident women in Indiana by Month, 2015

Month	Resident Terminations (n = 7,487)	Non-Resident Terminations (n = 470)
January	753	59
February	703	47
March	670	27
April	657	44
May	681	43
June	644	39
July	621	48
August	527	23
September	581	44
October	592	33
November	504	30
December	554	33

Demographic Information of Women Receiving Terminations

Demographic information collected and analyzed for this report includes age, race, ethnicity, marital status, and education level of the women receiving terminations in Indiana in 2015.

Age

The age range for women receiving terminations in Indiana in 2015 was 12 to 48 years. The average age of a woman who obtained a termination was 26.5 years (SD = 6.2 years), with a median age of 25.

Table 5. Age distribution of women obtaining terminations in Indiana, 2015

Age (years)	Count	Percent
10-14	25	0.31
15-17	219	2.75
18-19	602	7.57
20-24	2,686	33.76
25-29	2,111	26.53
30-34	1,279	16.07
35-39	780	9.80
40-44	243	3.05
≥ 45	12	0.15
Total	7,957	100.0

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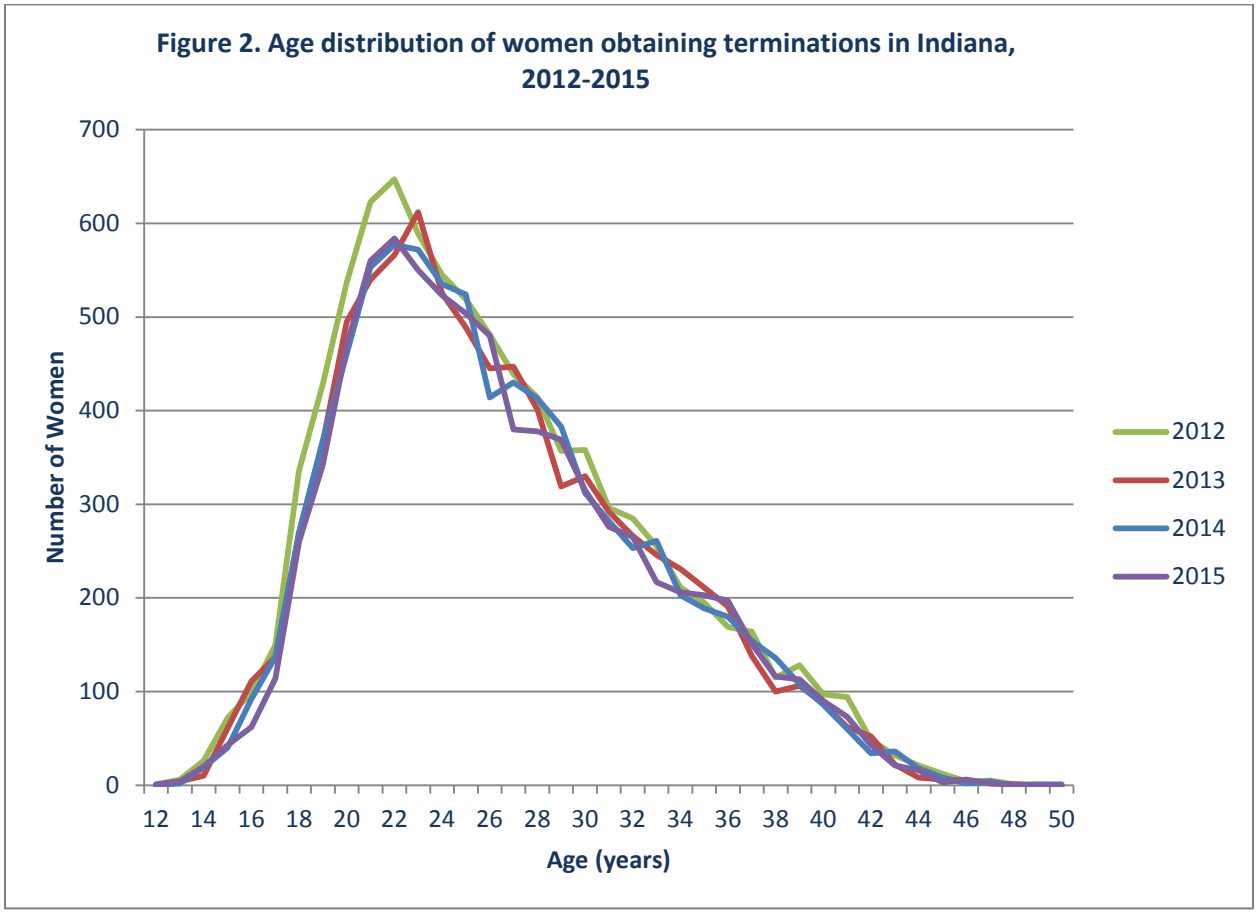
Approximately 60.29% of terminations were performed for women in their twenties (20–29 years). Women aged forty and older had the smallest percentage of terminations, 3.20%.



For each age group, more than half of the women were white. Based on cross-tabulation of age group by race, white women in their twenties received the most terminations in Indiana in 2015.

Table 6. Age of women obtaining terminations in Indiana by Race, 2015

Age Group	Race						Total
	White		Black		Other		
	Count	Percent	Count	Percent	Count	Percent	
Adolescent (≤ 19)	516	60.99	204	24.11	126	14.89	846
Twenties (20-29)	2,698	56.24	1,515	31.58	584	12.17	4,797
Thirties (30-39)	1,171	56.87	616	29.92	272	13.21	2,059
Forties & Over (≥ 40)	160	62.75	61	23.92	34	13.33	255
Total	4,545		2,396		1,016		7,957

Adolescents

Adolescents, defined as females under twenty, accounted for 10.63% of terminations in Indiana in 2015. Females aged 18-19 were the most likely group of adolescents to receive terminations (71.16%) compared to those aged 15-17 (25.89%) and 10-14 (2.96%). This aligns with CDC's 2012 analysis, which identified that 18-19 year olds accounted for 65.9% of adolescent terminations.[1]

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Race and Ethnicity

The largest percentage of women reported their race as white, accounting for 57.12% of all records in 2015; 30.11% of women identified their race as black. In 2012, 60.30% and 28.2% of women identified as white and black, respectively; while in 2013, 58.45% and 28.79% identified as white and black, respectively. In 2014, 58.36% and 28.66% of women identified as white and black, respectively.

Table 7. Race of women obtaining terminations in Indiana, 2015

Race	Count	Percent
White	4,545	57.12
Black / African American	2,396	30.11
Asian	258	3.24
Pacific Islander / Native Hawaiian	7	0.09
American Indian / Alaska Native	29	0.36
Multiple Races	103	1.29
Other	619	7.78
Total	7,957	100.0

Women who marked more than one race checkbox on the report were classified under the multiple race category for this analysis. Some women who were classified as multiple race identified as combinations such as black and white, Asian and American Indian/Alaska Native (AI/AN), black and Asian, black and AI/AN, or white and Pacific Islander/Native Hawaiian (PI/NH).

In 2015, 0.36% of women identified as AI/AN and 0.09% identified as PI/NH. In 2014, only 0.26% of women identified as AI/AN and 0.06% identified as PI/NH. In 2012 and 2013, about 0.7% of women identified as AI/AN while 0.12% identified as PI/NH. However, it is of note that women categorized as multiple race may have identified as AI/AN or PI/NH but were not classified as such because they also identified with at least one other race.

Regarding ethnicity, 8.09% of women receiving a termination in Indiana self-identified as being either Hispanic or Latino in 2015 compared to 7.4% in 2014. In 2013, 7.37% of women reported as either Hispanic or Latino and 7.28% reported as such in 2012.

The 2015 data illustrates an increase in the percentage of women receiving terminations that identify as Hispanic or Latino. However, 2015 is the only analyzed data year where there were no cases of unknown ethnicity reported; as such, it is possible that the lack of unknown responses has contributed to the increase in ethnicity identification.

Table 8. Ethnicity of women obtaining terminations in Indiana, 2015

Ethnicity	Count	Percent
Hispanic / Latino	644	8.09
Non-Hispanic / Non-Latino	7,313	91.91
Total	7,957	100.0

The number of women reported as Hispanic or Latino has increased, while the number reporting as neither Hispanic nor Latino has remained almost the same, and the number reporting as unknown has decreased. In 2015, no records were reported with unknown ethnicity. In 2012, 2013, and 2014, 682 (7.74%), 492 (6.02%), and 111 (1.37%) of women had an unknown ethnicity, respectively. The number of

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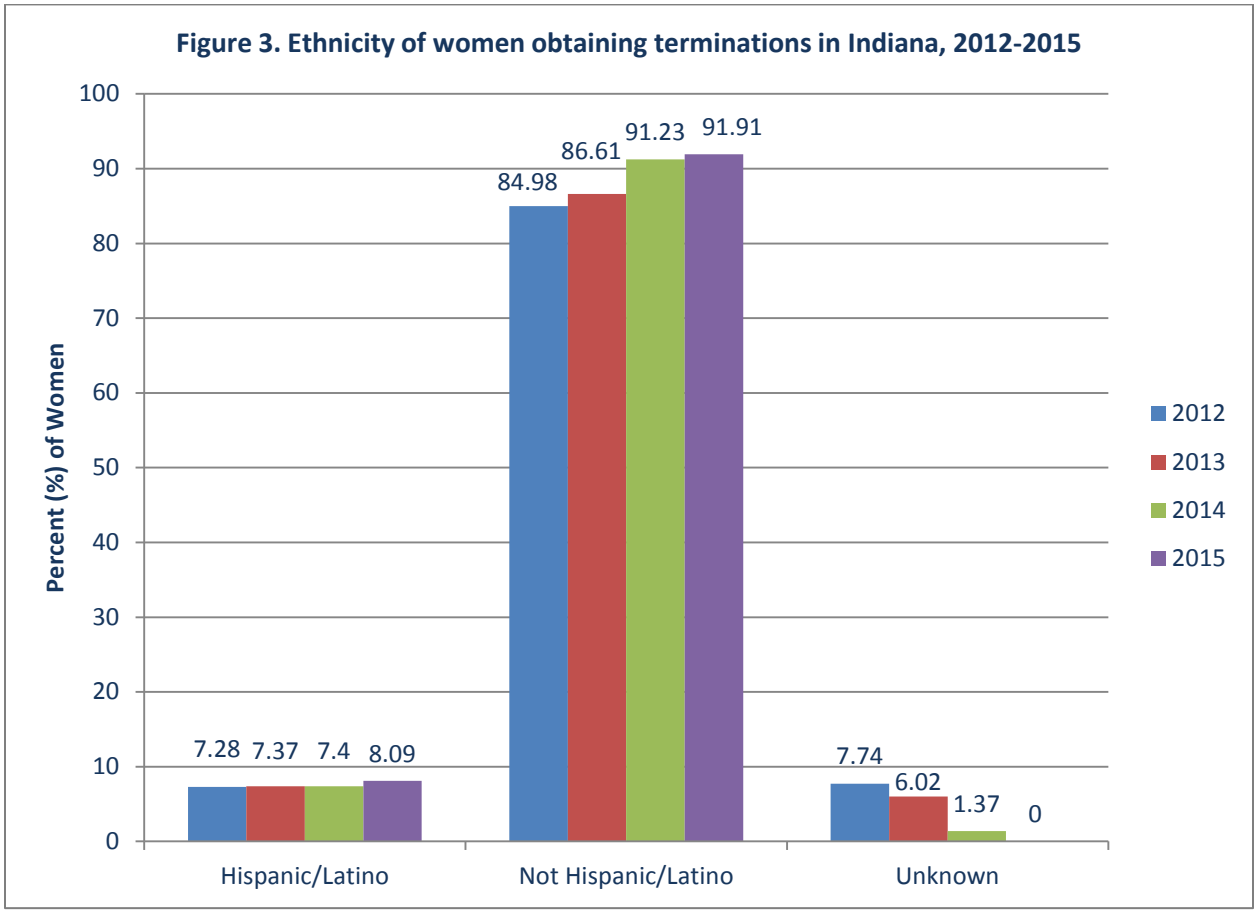
women reporting as non-Hispanic/non-Latino has increased each year; however, this increase slowed in 2015. These changes can be seen in Figure 3.



Marital Status

Of the women receiving terminations in 2015, 87.58% were unmarried and 12.39% were married. Similar to ethnicity reporting, the number of women whose marital status is unknown has continued to decrease since 2012. In both 2012 and 2013, 1.45% of women had an unknown marital status; however, that number decreased in 2014, with unknown marital status for only 0.39% of women. By 2015, the number of women with unknown marital status is a single digit, accounting for 0.03% of women.

Table 9. Marital status of women obtaining terminations in Indiana, 2015

Marital Status	Count	Percent
Married	986	12.39
Unmarried	6,969	87.58
Unknown	2	0.03
Total	7,957	100.0

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Education Level

In 2015, 41.54% of women reported a high school diploma or General Educational Development (GED) as the highest level of education they completed. This is similar to 2012, 2013, and 2014, with 40.05%, 37.32%, and 39% reporting the same level of education in each year, respectively.

The second most identified education level was some college credit, but no college degree. In 2015, 29.32% of women had achieved this level of education. This is an increase from the previous three years where 22.98%, 24.39%, and 20.28% of women reported earning some college credit in 2012, 2013, and 2014, respectively.

Table 10. Education level of women obtaining terminations in Indiana, 2015

Education Level	Count	Percent
8th Grade or Less	89	1.12
9th to 12th Grade, No Diploma	635	7.98
High School Diploma or GED	3,305	40.54
Some College Credit, No Degree	2,333	29.32
Associate's Degree	393	4.94
Bachelor's Degree	960	12.06
Master's Degree	103	1.29
Doctoral or Professional Degree	84	1.06
Unknown	55	0.69
Total	7,957	100.0

Figure 4 shows a graphical representation of the highest level of education achieved by women obtaining terminations in 2015.

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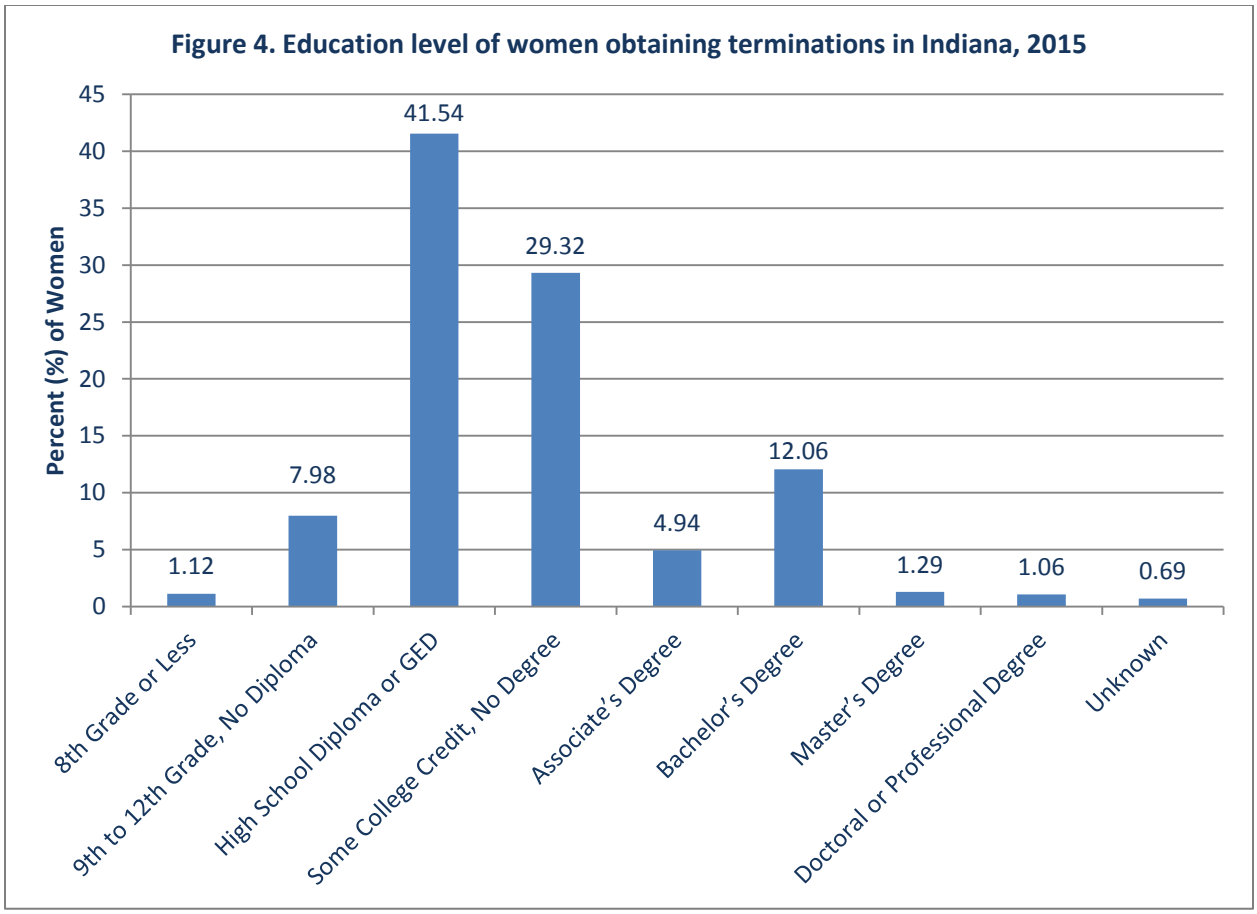

When the education field was completed by writing the number of years of education, inference was made by ISDH personnel to identify what education category was most applicable. Table 11 shows the equivalence for years of education in education levels.

Table 11. Equivalence of education years and education level

Years of Education	Education Level
≤ 8	8th Grade or Less
9 – 11	9th to 12th Grade, No Diploma
12	High School Diploma or GED
13, 15	Some College Credit, No Degree
14	Associate's Degree
16 – 17	Bachelor's Degree
18 – 19	Master's Degree
≥ 20	Doctoral or Professional Degree

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Pregnancy History of Women Receiving Terminations

The number of previous pregnancies was calculated by adding the values reported for previous live births living, previous live births deceased, previous spontaneous terminations, and previous induced terminations, when the values were reported. The number of previous live births was calculated by combining the reported values for previous live births living and previous live births deceased, when available.

Table 12. Pregnancy history of women obtaining terminations in Indiana, 2015

Pregnancy History	Count	Percent
Previous pregnancies		
0	2,167	27.23
1	1,637	20.57
2	1,479	18.59
≥ 3	2,674	33.61
Previous live births		
0	2,943	36.99
1	2,067	25.98
2	1,693	21.28
≥ 3	1,254	15.76
Previous spontaneous terminations		
0	6,577	82.66
1	1,059	13.31
2	223	2.80
≥ 3	98	1.23
Previous induced terminations		
0	5,087	63.93
1	1,943	24.42
2	635	7.98
≥ 3	292	3.67

As seen in Figure 5, white women have the greatest number of reported previous pregnancies, live births, spontaneous terminations, and induced terminations; however, spontaneous terminations were more common than live births or induced terminations. Among black women, induced terminations were more frequent than live births or spontaneous terminations; while all other race categories showed similar percentages between previous pregnancies and live births, and spontaneous and induced terminations, respectively.

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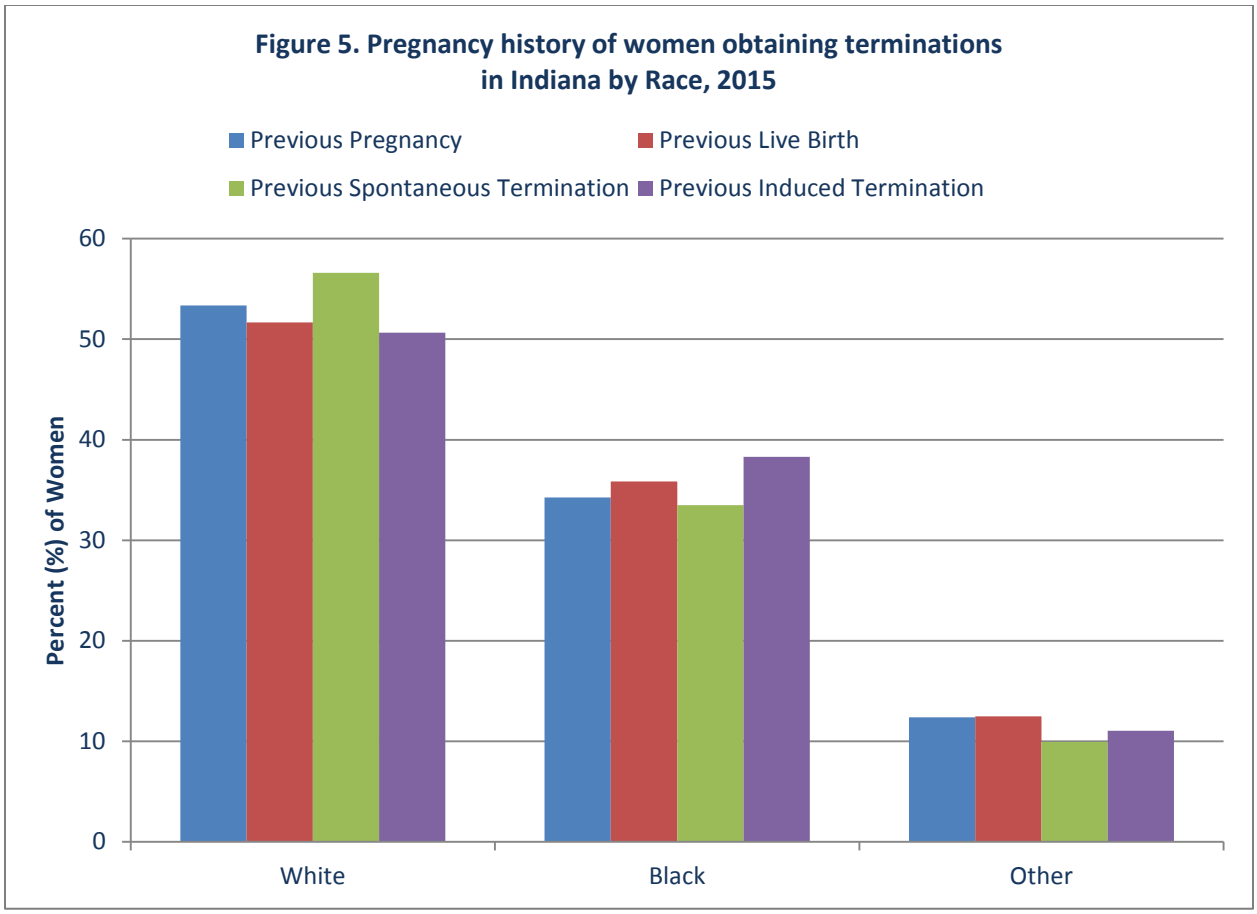

Figure 6 further shows that women in their thirties (30–39) had the highest percentages for all parts of pregnancy history: previous pregnancies, previous live births, previous spontaneous terminations, and previous induced terminations. All age groups, except women aged forty or older, had greater numbers of pregnancies, live births, and induced terminations than spontaneous terminations. Women forty and over had a higher occurrence of spontaneous terminations than pregnancies, live births, or induced terminations, although the increased occurrence was minimal.

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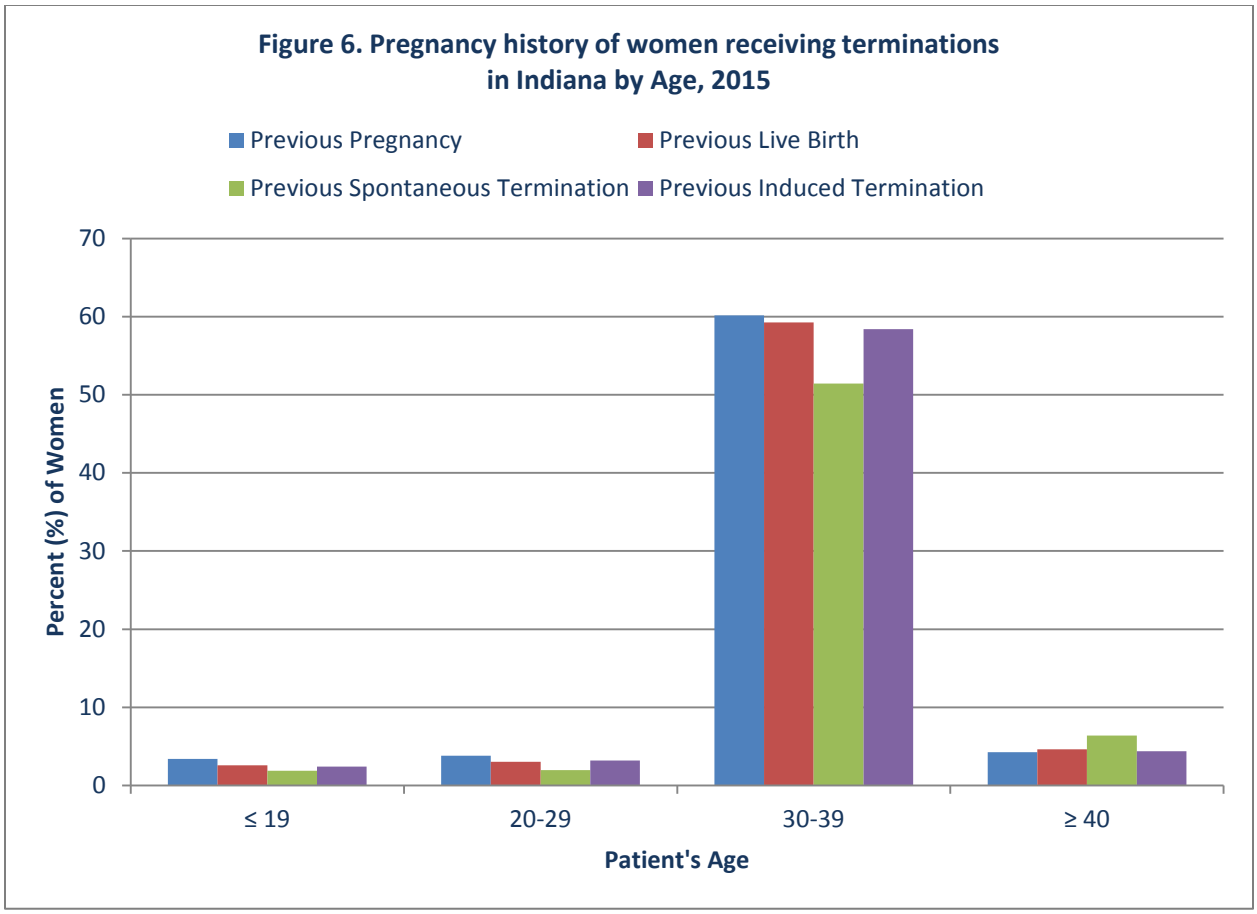

Medical Information of Women Receiving Terminations

Medical information analyzed and presented in this report includes the procedure used to terminate a pregnancy, the facility type where the termination occurred, and the gestational age of the fetus at the time of termination.

Procedure and Facility Type

Four procedures were reported as having been used to terminate a pregnancy in 2015 in Indiana: Dilation and Evacuation (D&E), menstrual aspiration, Mifepristone/Misoprostol, and suction curettage. Although D&E is not a specific field to be selected on the reporting form, all procedures reported as medical (surgical) specified D&E as the procedure used for termination.

Two reports in 2014 identified the procedure as medical (non-surgical); however, the report specified D&E. Based on the definition of D&E, these two reports were considered medical (surgical) procedures for reporting purposes and included in the data as D&E.

Some reports from 2012 and 2013 listed the procedure used as medical (non-surgical) with Mifeprex and/or Misoprostol listed as the pharmaceuticals used. The reporting form includes a specific 'Mifepristone/Misoprostol' checkbox; as such, these reports were regarded as procedures completed with Mifepristone/Misoprostol due to the fact that Mifeprex® is a brand name for Mifepristone.

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All other occasions when medical (non-surgical) was identified as the primary procedure, specific details were not provided on the report, thus leading to the reporting of unspecified medical non-surgical procedures.

The administration of the pharmaceuticals Mifepristone and/or Misoprostol was the second most commonly used technique to terminate a pregnancy in 2015, accounting for 27.93% of terminations. This is an increase in the use of the drug combination from the last three years, where its use has increased from 1.82% in 2012 to 26.67% in 2014.

Suction curettage was the most commonly employed technique for pregnancy termination in 2015, accounting for 71.8% of terminations. The use of this procedure has declined since 2012, when it was reported for 79.6% of terminations. The majority of suction curettage procedures were performed at abortion clinics (99.89%).

Table 13. Procedure used to terminate pregnancy in Indiana, 2013–2015

Procedure	2015		2014		2013	
	Count	Percent	Count	Percent	Count	Percent
Dilation & Evacuation	19	0.24	27	0.33	23	0.28
Mifepristone / Misoprostol	2,222	27.93	2,165	26.67	1,631	19.94
Suction Curettage	5,713	71.80	5,926	73.00	6,519	79.70
Medical (Non-Surgical)	0	0.00	0	0.00	1	0.01
Menstrual Aspiration	3	0.04	0	0.00	3	0.04
Unknown	0	0.00	0	0.00	2	0.02
Total	7,957		8,118		8,179	

Rarely, a secondary procedure was identified on a record as necessary for the completion of termination. However, due to the rarity, these values are not reported and the report is associated with the primary procedure that was identified on the record. If only a secondary procedure was reported, that procedure was considered the primary procedure.

There were also a handful of records that were submitted as terminations; however, receipt of a new record informed ISDH that the original procedure had been unsuccessful and a new procedure was conducted to complete the termination. In these cases, the initial record has been removed from the dataset as a termination was not completed in association with the record, and the new record was maintained to account for a completed termination.

As of January 1, 2015, nine abortion clinics were licensed in Indiana and 124 licensed acute care hospitals. Of the 7,957 procedures performed in the state, 99.66% were performed at abortion clinics and 0.34% at acute care hospitals.

Table 14 provides a breakdown of the number of terminations performed by each reporting facility in 2015. Although licensed at the beginning of the year, two facilities did not report terminations in 2015, and Women's Pavilion closed November 6, 2015.

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Table 14. Terminations reported in Indiana by Facility, 2015				
Facility Type	**Facility Name**	**Facility Address**	**Count**	**Percent**
Abortion Clinic	Clinic for Women	3607 W. 16th St. Indianapolis	784	9.85
	Indianapolis Women's Center	1201 N. Arlington Ave. Indianapolis	1,334	16.77
	Planned Parenthood of Indiana and Kentucky– Indianapolis	8590 Georgetown Rd. Indianapolis	2,879	36.18
	Planned Parenthood of Indiana and Kentucky – Bloomington	421 S. College Ave. Bloomington	822	10.33
	Planned Parenthood of Indiana and Kentucky – Lafayette	964 Mezzanine Dr. Lafayette	259	3.25
	Planned Parenthood of Indiana and Kentucky – Merrillville	8645 Connecticut St. Merrillville	1,274	16.01
	Women's Pavilion	2010 Ironwood Cir. South Bend	578	7.26
Acute Care Hospital	Indiana University Health University Hospital	550 University Blvd. Indianapolis	5	0.06
	Sidney & Lois Eskenazi Hospital	720 Eskenazi Ave. Indianapolis	20	0.25
	Indiana University Health North Hospital	11700 N. Meridian St. Carmel	2	0.03
Total			7,957	100.0

Terminations at abortion clinics accounted for 99.66% of procedures, as well as 100% of terminations using Mifepristone and/or Misoprostol, and 99.89% of terminations employing suction curettage. All surgical terminations (D&E) were performed at acute care hospitals. Menstrual aspiration was performed at both abortion clinics (33.33%) and acute care hospitals (66.67%) in 2015.

Table 15. Procedure used to terminate pregnancy in Indiana by Facility type, 2015					
Procedure	**Facility Type**				**Total**
	Abortion Clinic		**Acute Care Hospital**		
	Count	**Percent**	**Count**	**Percent**	
Dilation & Evacuation	0	0.00	19	100.0	19
Menstrual Aspiration	1	33.33	2	66.67	3
Mifepristone/Misoprostol	2,222	100.0	0	0.00	2,222
Suction Curettage	5,707	99.89	6	0.11	5,713
Total	7,930		27		7,957

Suction curettage and menstrual aspiration procedures were performed at both facility types. All D&E procedures were performed at acute care hospitals, while all administration of Mifepristone and/or Misoprostol was done by abortion clinics. No terminations were reported from ambulatory surgical centers, other clinics, or physician offices.

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Estimated Gestational Age

The gestational age range was 1 to 19 weeks, with an average gestational age of 6.5 weeks (SD= 2.15 weeks) and a median gestational age of 6 weeks.

In Indiana, 80.21% of terminations occurred prior to the ninth week of pregnancy, 19.57% occurred during the 9-13 week timeframe, and those more than 13 weeks accounted for less than one percent of terminations in 2015. Data from 2012 through 2014 show a similar trend, with 77.99% (2012), 75.41% (2013), and 78.82% (2014) of terminations occurring prior to week nine.

Table 16. Estimated gestational age at time of termination in Indiana, 2015

Weeks of Gestation	Count	Percent
≤ 8	6,382	80.21
9-13	1,557	19.57
14-15	6	0.08
16-17	4	0.05
18-20	8	0.10
Total	7,957	100.0

During 2015, gestational age of five weeks was reported most frequently by physicians at 22.07%, while six weeks was reported for 20.89% of terminations; this reflects a shift in gestational age at termination. In 2014, there was a secondary peak at gestational age of five weeks, with the most frequently reported age at six weeks, which followed the trend from 2012 and 2013.

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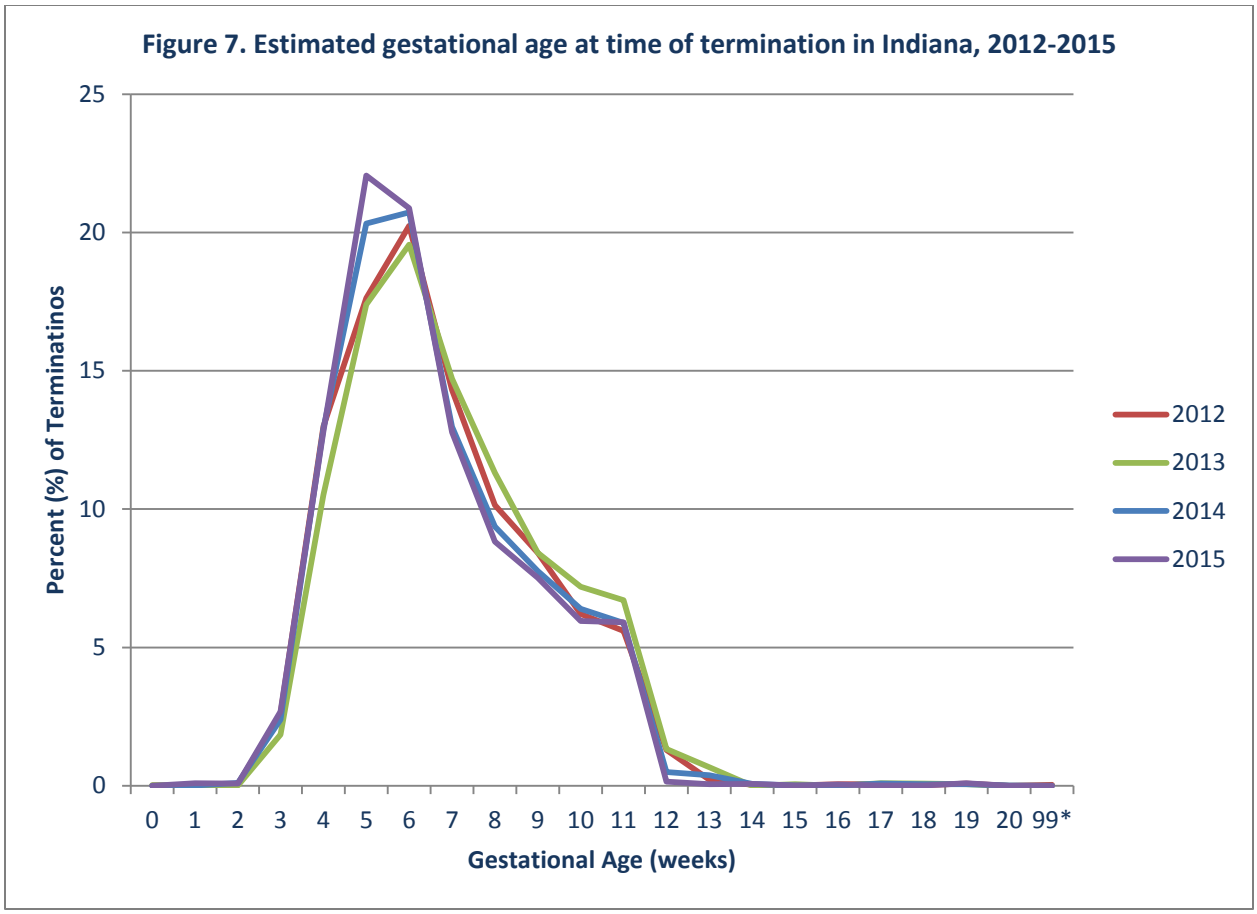

* Indicates percentage of terminations where the gestation age in weeks was not provided on the report.

Indiana Code dictates that the gestation of the fetus is determined by the physician's determination of postfertilization age; as such, estimated gestational age, in weeks, is based on this value. When postfertilization age is not reported, estimated gestational age was used to approximate the gestational age. Where neither was reported, the gestational age was unknown. There were no occurrences where the gestational age was unknown in 2013, 2014, or 2015; however, 0.03% of terminations in 2012 were of unknown gestational age.

Of the terminations that were completed at more than thirteen weeks gestation, 94.44% were D&E. Suction curettage accounted for 71.95% of terminations thirteen weeks or less; 27.99% of procedures at thirteen weeks or less were completed with the pharmaceuticals Mifepristone and/or Misoprostol. All menstrual aspirations were performed at less than eight weeks.

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Table 17. Estimated gestational age among women obtaining terminations in Indiana by Procedure, 2015									
Weeks of Gestation	Procedure								Total
	Dilation & Evacuation		Menstrual Aspiration		Mifepristone / Misoprostol		Suction Curettage		
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	
≤ 8	0	0.00	3	0.05	2,210	34.63	4,169	65.32	6,382
9-13	2	0.13	0	0.00	12	0.77	1,543	99.10	1,557
14-15	6	100.0	0	0.00	0	0.00	0	0.00	6
16-17	4	100.0	0	0.00	0	0.00	0	0.00	4
18-20	7	87.50	0	0.00	0	0.00	1	12.50	8
Total	19		3		2,222		5,713		7,957

Geographic Information of Women Receiving Terminations

Geographic information provided on terminated pregnancy reports consists of the county where the termination was performed and the state and county of the woman's residence. While county of termination must be indicated on all reports, county of residence is not always provided.

County of Termination

In 2015, reported terminations were performed in six counties: Hamilton, Lake, Marion, Monroe, St. Joseph, and Tippecanoe. Of these, Marion County had the most, accounting for 63.10% of terminations; Hamilton County had the fewest, accounting for only 0.03% of terminations.

Table 18. County where termination performed in Indiana, 2015		
County of Termination	Count	Percent
Hamilton	2	0.03
Lake	1,275	16.02
Marion	5,021	63.10
Monroe	822	10.33
St. Joseph	578	7.26
Tippecanoe	259	3.25
Total	7,957	100.0

Marion County continues to see the most terminations, with 61.51% in 2012, 63.08% in 2013, and 64.24% in 2014. In 2012 and 2013, terminations were also reported in Allen County, 2.99% and 4.32%, respectively.

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County of Residence

In 2015, 7,487 terminations were reported among Indiana residents. County of residence was only analyzed for women who were Indiana residents. Table 19 breaks down the number of terminations by county of residence and age (less than 20 and at least 20), for the counties that accounted for at least one percent of the total number of residential women.

Table 19. County of residence of Indiana residents receiving terminations in Indiana by Age, 2015

County of Residence*	Count		Percent of All Residents
	Adolescent (< 20)	Adult (≥ 20)	
Allen	29	297	4.35
Bartholomew	10	82	1.23
Delaware	19	115	1.79
Elkhart	23	146	2.26
Hamilton	25	244	3.59
Hendricks	13	130	1.91
Howard	9	78	1.16
Johnson	17	156	2.31
Lake	73	636	9.47
LaPorte	15	113	1.71
Madison	14	110	1.66
Marion	225	2,442	35.62
Monroe	26	226	3.37
Porter	19	132	2.02
St. Joseph	38	274	4.17
Tippecanoe	26	246	3.63
Vanderburgh	12	103	1.54
Vigo	14	112	1.68

* Counties that accounted for at least one percent of the total number of residential women.

Similar to the occurrence of terminations by county, Marion County also had the largest number of female residents obtaining terminations in 2015 (35.62%). Lake County accounted for 9.47% of residential terminations, while St. Joseph and Allen counties each accounted for just over 4% of residential terminations.

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Table 20 provides a breakdown of the number of residents from each Indiana county that received terminations in 2015.

Table 20. Number of Indiana residents receiving terminations in Indiana by County, 2015					
County of Residence	**Count**	**County of Residence**	**Count**	**County of Residence**	**Count**
Adams	15	Hendricks	143	Pike	6
Allen	326	Henry	33	Porter	151
Bartholomew	92	Howard	87	Posey	5
Benton	7	Huntington	18	Pulaski	6
Blackford	4	Jackson	16	Putnam	23
Boone	49	Jasper	27	Randolph	23
Brown	10	Jay	11	Ripley	4
Carroll	4	Jefferson	25	Rush	3
Cass	28	Jennings	11	St. Joseph	312
Clark	28	Johnson	173	Scott	16
Clay	21	Knox	23	Shelby	36
Clinton	22	Kosciusko	41	Spencer	8
Crawford	3	LaGrange	7	Starke	15
Daviess	9	Lake	709	Steuben	8
Dearborn	7	LaPorte	128	Sullivan	9
Decatur	14	Lawrence	49	Tippecanoe	272
DeKalb	18	Madison	124	Tipton	9
Delaware	134	Marion	2,667	Union	2
Dubois	17	Marshall	35	Vanderburgh	115
Elkhart	169	Martin	8	Vermillion	8
Fayette	9	Miami	24	Vigo	126
Floyd	15	Monroe	252	Wabash	20
Fountain	7	Montgomery	25	Warren	4
Franklin	10	Morgan	64	Warrick	20
Fulton	3	Newton	14	Washington	14
Gibson	10	Noble	18	Wayne	38
Grant	50	Ohio	1	Wells	10
Greene	12	Orange	14	White	18
Hamilton	269	Owen	14	Whitley	17
Hancock	43	Parke	8	Unknown	3
Harrison	7	Perry	4	**Total**	7,487

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Discussion

This report has started to identify consistencies among women receiving pregnancy terminations in Indiana by exploring new data from 2015 in conjunction with retrospective data from 2012 to 2014; however, retrospective data is not comparable to previously published reports. All demographic and pregnancy history information was self-reported by the woman obtaining a termination, while medical information was provided by the performing physician.

The largest portion of pregnancy terminations are reported among women in their twenties (60.29%). Women were also more likely to identify as white (57.12%), not Hispanic or Latino (91.91%), and unmarried (87.58%). The most frequently reported education levels were completion of a high school diploma or GED (40.54%) or some college credit, but no degree (29.32%).

Women in their thirties (30–39) were identified as having the highest numbers of previous pregnancies, previous live births, previous spontaneous terminations, and previous induced terminations, when compared to all other age groups. Regardless of age group, 82.66% of women reported no previous spontaneous terminations and 63.93% of women reported no previous induced terminations.

In 2015, there were also no records without an identified procedure. The use of Mifepristone and/or Misoprostol continues to increase each year, while the use of suction curettage has decreased over the same time period. The majority of terminations in 2015 were performed in licensed abortion clinics (99.66%); and terminations with reported gestational age less than nine weeks accounted for 80.21% of reports.

Marion County was reported as the most common county of termination (63.10%) as well as the most common county of residence (35.62%), for Indiana residents. Lake County was identified as second most common county for terminations and residency, accounting for 16.02% of all terminations and 9.47% of Indiana residents.

This report has some key limitations. Due to the fact that demographic and pregnancy history are reported by the women receiving terminations, the information is subject to bias. There is also the possibility that women who required a second procedure to complete the termination were reported as a new record, or they attended a different facility to complete the procedure; each of these scenarios would lead to an increase in the number of terminations reported to ISDH. A third scenario may increase the number of reported terminations if the woman had an incomplete procedure but chose not to return for follow-up, instead choosing to have the child, because the reported termination would have been incomplete.

As this is only the second report for Indiana in this format, there is a limitation to what can be analyzed, particularly in terms of trending data. Finally, all data is obtained from reported terminated pregnancies; as such, there is the possibility for terminations to occur of which ISDH is not informed and cannot be included in this report.

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Appendix A: State Form 36526 (R4 / 12-11)

TERMINATED PREGNANCY REPORT
State Form 36526 (R4 / 12-11)
INDIANA STATE DEPARTMENT OF HEALTH – VITAL RECORDS
Per IC 16-34-2

☐ PLEASE CHECK IF AN AMENDED FORM.

Mail completed form to: **Indiana State Department of Health**
P. O. Box 7125
Indianapolis, IN 46204

**** If the patient is less than fourteen (14) years of age** the physician performing the termination shall transmit this report to the Department of Child Services within **three (3) days after** the termination is performed via email at dcshotlinereports@dcs.in.gov.
Further, this **report shall also be mailed** to the Indiana State Department of Health within three (3) days of the termination. (See IC 16-34-2-5)

Reports for all other patients shall be mailed to the Indiana State Department of Health **no later than July 30 for each termination performed in the first six (6) months of that year** and **no later than January 30 for each termination performed for the last six (6) months of the preceding year**.
Each failure to file this report on time as required is a Class B misdemeanor per IC 16-34-2-5-(b).

Facility name *(If not a hospital or clinic, please enter address.)*	City or town, of pregnancy termination	County of pregnancy termination
Patient's age** / Married ☐ Yes ☐ No	Date of pregnancy termination *(month, day, year)*	Education *(Enter highest grade completed.)*

Race *(Select one or more.)* ☐ American Indiana or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White ☐ Other
Ethnicity ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Live Births:	Number now living *(enter number or check None)* ☐ None	Number now deceased *(enter number or check None)* ☐ None
Other Terminations:	Number of spontaneous terminations *(enter number or check None)* ☐ None	Number of induced terminations *(enter number or check None)* ☐ None

Dates of terminations *(Do not include this termination.)*
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____
7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____

Fetus delivered alive? ☐ Yes ☐ No	Fetus viable? ☐ Yes ☐ No	If viable, medical reason for termination:
Pathological examination performed? ☐ Yes ☐ No		If yes, results:

Type of Termination Procedures

Procedure that Terminated pregnancy *(check one only)*	Additional Procedures used for this termination, if any *(check all that apply)*
☐ Medical (nonsurgical) Mifepristone / Misoprostol	☐
☐ Suction Curettage	☐
☐ Menstrual Aspiration	☐
☐ Medical (Nonsurgical) Specify Medication(s) _____	☐
☐ Medical (Surgical) Other *(Specify)* _____	☐

Complication(s) of Pregnancy Termination *(Check all that apply.)*
☐ None ☐ Uterine Perforation
☐ Hemorrhage ☐ Cervical Laceration
☐ Infection ☐ Retained Products
☐ Other *(Specify)*: _____

Did this termination of pregnancy result in a maternal death? ☐ Yes ☐ No

Date last normal menses began *(month, day, year)*	Physician estimate of gestation *(in weeks)*	Postfertilization age of the fetus *(in weeks)*
How determined:		

My signature certifies this termination was performed according to IC 16-34-2.

Signature of physician performing termination	Full name of physician performing termination
Address of physician performing termination *(number and street, city, state, and ZIP code)*	

Patient Identification Number *(optional)*	County of Residence	State of Residence
Name of father, if known	Age of father	If age not known, approximate age

DATE RECEIVED BY ISDH ***(month, day, year)*****:** _____

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Appendix B: State Form 36526 (R3 / 6-11)

(R3/ 6-11)

TERMINATED PREGNANCY REPORT
State Form 36526 (R3 / 6-11)
INDIANA STATE DEPARTMENT OF HEALTH – VITAL RECORDS
Per IC 16-34-2

☐ PLEASE CHECK IF AN AMENDED FORM.

Mail completed form to: Indiana State Department of Health
P. O. Box 7125
Indianapolis, IN 46204

.f the patient is less than fourteen (14) years of age the physician performing the termination shall transmit this report to the Department of Child Services within three (3) days after the termination is performed via email at dcshotlinereports@dcs.in.gov.
Further, this report shall also be mailed to the Indiana State Department of Health within three (3) days of the termination. (See IC 16-34-2-5)

Reports for all other patients shall be mailed to the Indiana State Department of Health no later than July 30 for each termination performed in the first six (6) months of that year and no later than January 30 for each termination performed for the last six (6) months of the preceding year.
Each failure to file this report on time as required is a Class B misdemeanor per IC 16-34-2-5-(b).

Facility name *(If not a hospital or clinic, please enter address.)*	City or town, of pregnancy termination	County of pregnancy termination

Patient's age**	Married ☐ Yes ☐ No	Date of pregnancy termination *(month, day, year)*	Education *(Enter highest grade completed.)*

Race *(Select one or more.)*				Ethnicity	
☐ Black or African American	☐ American Indiana or Alaska Native	☐ Asian	☐ Other	☐ Hispanic or Latino	☐ Not Hispanic or Latino
	☐ Native Hawaiian or Other Pacific Islander	☐ White			

Live Births:	Number now living *(enter number or check None)* ☐ None	Number now deceased *(enter number or check None)* ☐ None
Other Terminations:	Number of spontaneous terminations *(enter number or check None)* ☐ None	Number of induced terminations *(enter number or check None)* ☐ None

Dates of terminations *(Do not include this termination.)*
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____
7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____

Fetus delivered alive?	Fetus viable?	If viable, medical reason for termination:
☐ Yes ☐ No	☐ Yes ☐ No	

Pathological examination performed?	If yes, results:
☐ Yes ☐ No	

Type of Termination Procedures		Complication(s) of Pregnancy Termination *(Check all that apply.)*	
Procedure that minated pregnancy .eck one only)	Additional Procedures used for this termination, if any *(check all that apply)*	☐ None	☐ Uterine Perforation
☐ Medical (nonsurgical) Mifepristone / Misoprostol	☐	☐ Hemorrhage	☐ Cervical Laceration
☐ Suction Curettage	☐	☐ Infection	☐ Retained Products
☐ Menstrual Aspiration	☐	☐ Other *(Specify)*: _____	
☐ Medical (Nonsurgical) Specify Medication(s) _____	☐	Did this termination of pregnancy result in a maternal death?	
☐ Medical (Surgical) Other *(Specify)* _____	☐	☐ Yes ☐ No	

Date last normal menses began *(month, day, year)*	Physician estimate of gestation *(in weeks)*	Postfertilization age of the fetus *(in weeks)*

How determined:

My signature certifies this termination was performed according to IC 16-34-2.

Signature of physician performing termination	Full name of physician performing termination

Address of physician performing termination *(number and street, city, state, and ZIP code)*

Patient Identification Number	Country of Residence	State of residence	County of residence	City or Town of residence	Patient's ZIP code

Name of father, if known	Age of father	If age not known, approximate age

DATE RECEIVED BY ISDH *(month, day, year)*: _____

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Appendix C: Electronic Terminated Pregnancy Database

IVER - Terminated Pregnancy

submit | cancel

Facility *

Patient's Age *

Married: Yes No

Date of Termination *

Education

Race: American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or Pacific Islander; White; Other

Ethnicity: Hispanic or Latino; Not Hispanic or Latino

Live Births
Number now living:
Number now deceased:

Other Terminations
Spontaneous Terminations:
Induced Terminations:

Previous Termination Dates
1) 2) 3) 4) 5) 6)

Fetus delivered alive? Yes No

Fetus viable? Yes No

Pathological exam? Yes No

Type of Termination Procedures
Procedure that Terminated Pregnancy
- Medical (nonsurgical) Mifepristone/Misoprostol
- Suction Curettage
- Menstrual Aspiration
- Medical (nonsurgical)
- Medical (surgical) Other

Additional Procedures used for this termination

Complication(s) of Termination *(check all that apply)*: None; Hemorrhage; Infection; Other; Uterine Perforation; Cervical Laceration; Retained Products

Did this termination of pregnancy result in a maternal death? Yes No

Date last normal menses began

Physician estimate of gestation * *(in weeks)*

Postfertilization age of the fetus * *(in weeks)*

How determined?

Physician *

Patient *
Identification Number:
State of Residence: INDIANA
County of Residence
Zip Code: ___-___

Father
Name:
Age: approximate

Date Received By ISDH: 11/5/2014

Comments

Indiana State Department of Health - Vital Records

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Appendix D: Glossary

Childbearing years: The reproductive age span of women, assumed for statistical purposes to be 15–44 or 15–49 years of age.[10]

Dilation & Evacuation (D&E): Dilation & evacuation is a surgical abortion that is typically performed midway during the second trimester of pregnancy and in which the uterine cervix is dilated and fetal tissue is removed using surgical instruments (as a forceps and curette) and suction. It is also referred to as D&E.[5]

Induced abortion: An intentional termination of pregnancy before the fetus has developed enough to live if born. From 20% to 50% of pregnancies are terminated deliberately at the request of the mother or for medical indications, during the first trimester by vacuum aspiration and/or curettage or during the second trimester by dilation and evacuation, induction of labor, or hysterotomy.[11] This report references induced terminations regarding pregnancy history.

Terminated pregnancy or abortion: "Abortion" means the termination of human pregnancy with an intention other than to produce a live birth or to remove a dead fetus. The term includes abortions by surgical procedures and by abortion inducing drugs (IC § 16-18-2-1).[3]

Mifepristone (RU-486): RU-486, also known as Mifepristone, is a drug taken orally to induce abortion, especially early in pregnancy, by blocking the body's use of progesterone. The chemical formula for Mifepristone is $C_{29}H_{35}NO_2$.[6] Mifepristone may also be identified by the proprietary names Korlym® and Mifeprex®.[8]

Misoprostol: Misoprostol is a synthetic prostaglandin analog used to induce abortion in conjunction with RU-486 and to prevent stomach ulcers associated with nonsteroidal anti-inflammatory drug (NSAID) use. The chemical formula for Misoprostol is $C_{22}H_{38}O_5$.[7]

Pregnancy history: Pregnancy history is a calculated variable that is the sum of the number of previous live births, the number of previous spontaneous terminations, and the number of previous induced terminations.

Previous live births: The number of previous live births is a calculated variable that is the sum of the number of previous live births living and previous live births deceased.

Rate: The number of terminations per 1000 women aged 15–44 years estimated as living in Indiana. Terminations where age was unknown were excluded from the numerator.

Spontaneous abortion or miscarriage: A termination of pregnancy before the twentieth week of gestation as a result of abnormalities of the conceptus or maternal environment. Up to 30% of pregnancies may end as spontaneous abortions, many caused by blighted ova that have congenital defects incompatible with life.[11] This report references spontaneous terminations regarding pregnancy history.

References

1. Extracted from Centers for Disease Control and Prevention. Abortion Surveillance – United States, 2012. MMWR 2015; 64(SS10):1-40. Digital version available at http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6410a1.htm?s_cid=ss6410a1_e#tab1

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