

**10A NCAC 13S .0329 POST PROCEDURAL CARE**

- (a) A patient whose pregnancy is terminated shall be observed in the clinic to ensure that no post procedural complications are present. Thereafter, patients may be discharged according to a physician's order and the clinic's protocols.
- (b) Any patient having a complication known or suspected to have occurred during or after the performance of the abortion shall be transferred to a hospital for evaluation or admission.
- (c) The following criteria shall be documented prior to discharge:
  - (1) the patient shall be able to move independently with a stable blood pressure and pulse; and
  - (2) bleeding and pain are assessed to be stable and not a concern for discharge.
- (d) Written instructions shall be issued to all patients in accordance with the orders of the physician in charge of the abortion procedure and shall include the following:
  - (1) symptoms and complications to be looked for; and
  - (2) a dedicated telephone number to be used by the patients should any complication occur or question arise. This number shall be answered by a person 24 hours a day, seven days a week.
- (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 that the clinic's physician is incapable of managing.

*History Note: Authority G.S. 131E-153.5; 143B-165;  
Codifier determined that findings of need did not meet criteria for emergency rule on October 30, 2023;  
Emergency Rule Eff. November 14, 2023;  
Temporary Adoption Eff. February 8, 2024;  
Eff. October 1, 2024.*