

Abortions in Arizona

2015 Abortion Report

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Health and Wellness for all Arizonans

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MISSION

To promote, protect, and improve the health and wellness of individuals and communities in Arizona.

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Table of Contents

Page

Ex	ecutive Summary	1
1.	Introduction	2
	1.1 Overview of the Arizona Abortion Reporting Requirements	2
2.	Methodology	3
	2.1 Data Sources	3
	2.2 Measures	3
	2.3 Analytic Procedures	4
3.	Results	5
	3.1 Characteristics of Women Receiving Abortions in Arizona	6
	3.2 Abortions by Gestational Age	17
	3.3 Abortions by County of Residence	18
	3.4 Complications Resulting from an Abortion	19
	3.5 Disposition of Aborted Fetal Tissue	21
	3.6 Petitions Filed with the Arizona Administrative Office of the Courts	21
4.	Conclusion	22

Appendix

- A. Glossary
- B. Abortion Reporting Forms

List of Tables

Page

1.	Abortions, live births, and abortion ratios by month and resident status, 2015	5
2.	Age-distribution of resident women receiving abortions in Arizona, 2015	7
3.	Proportions, rates, and ratios of abortions by age group, Arizona residents,	
	2011-2015	8
4.	Proportions, rates, and ratios of abortions by race and ethnicity, Arizona residents,	
	2011-2015	9
5.	Pregnancy history of resident women receiving abortions in Arizona, 2015	12
6.	Method of abortion used by resident women in Arizona, 2015	13
7.	Maternal characteristics and maternal medical conditions cited for obtaining an abortion,	
	Arizona residents, 2015	15
8.	Maternal characteristics and fetal medical conditions cited for obtaining an abortion,	
	Arizona residents, 2015	16
9.	Gestational age at time of abortion, Arizona residents, 2015	17
10.	Method of abortion and gestational age, Arizona residents, 2015	18
11.	Abortions, live births, rates, and ratios for resident females by county of residence,	
	Arizona, 2015	19
12.	Complications resulting from an abortion for resident women, Arizona, 2015	20
13.	Method of disposition of fetal remains among Arizona residents, 2015	21
14.	Petitions filed with the Arizona Administrative Office of the Courts, 2015	21

List of Figures

Page

1.	Abortion counts and rates for Arizona residents, 2005–2015	6
2.	Marital status of resident women receiving abortions, 2011–2015	10
3.	Educational status of resident women receiving abortions, 2015	11
4.	Method of abortion among Arizona resident women, 2011–2015	14

Executive Summary

This comprehensive annual statistical report provides abortion statistics and demographic characteristics of women obtaining abortions in Arizona as required by <u>Arizona Revised Statute §36-2163</u>. Included are data compiled from reports of abortions, complications resulting from an abortion, and petitions compiled and processed by the Arizona Administrative Office of the Courts authorizing an abortion to unemancipated minors (<u>A.R.S. §36-2163</u> Subsection <u>C</u>). Data is collected through a secure, web-based reporting system and compiled on a calendar year basis. Facilities and providers submit abortion procedure (<u>A.R.S. §36-2161</u>) and complication reports (<u>A.R.S. §36-2162</u>) to the Arizona Department of Health Services on a monthly basis. During the 2015 reporting year, the Department enacted new rules (R9-10-119) mandating that all abortion reports include additional detail describing the final disposition of fetal tissue from the abortion. The reporting rule took effect from August 16, 2015.

During the 2015 reporting year the total number of reported abortions performed in Arizona was 12,655, compared to 12,900 in 2014. Nearly ninety-nine percent (98.6%, n = 12,479) of abortions performed within Arizona were to resident women ("resident" refers to valid resident status within Arizona), of these, 12,408 were women between the ages of 15 and 44 years. Resident women between the ages of 20 and 29 comprised 58.2 percent of all abortions to resident women (see Table 2). Unmarried resident women represented about 64.4% of women obtaining abortions (see Figure2).

Compared to 2014, the 2015 abortion rate decreased for adolescents aged 15 -19 years, while it increased by 15.9 percent for Arizona females under 15 years of age. Surgical abortion procedures were used to perform approximately 67.9 percent (n = 8,479) of reported resident abortions (see Table 6). The percent of resident women who received non-surgical abortions increased to 32 percent (n = 3,996 see Table 6) in 2015.

The number of abortions due to maternal and fetal medical conditions decreased in 2015 (see Tables 7 and 8). About fifty-five percent of abortions performed due to *maternal medical conditions* were performed at gestational ages 14 to 20 weeks, and highest proportion of abortion in this category were performed on resident women. Over fifty-six percent of abortions performed due to *fetal medical conditions* were performed at gestational age 14 and 20 weeks, the greatest number on resident women 35 and over.

During the 2015 reporting year hospitals and clinics reported 82 resident women who experienced complications resulting from an abortion (see Table 12). Of these, the majority resulted from abortions performed at gestational ages of 13 or fewer weeks (61.0%, n = 50).

The Arizona Administrative Office of the Courts reported a total of 29 petitions filed during the 2015 reporting year. Of those, 27 orders authorizing an abortion without parental consent were issued to unemancipated minors (see Table 13).

This report is available for public inspection and copying at <u>http://www.azdhs.gov/plan/abortions.htm</u>.

Introduction

1.1 Overview of the Arizona Abortion Reporting Requirements

Arizona abortion surveillance facilitates ADHS' ability to monitor long-term changes in the overall incidence of abortion in Arizona, complications associated with abortion procedures, and pregnancy-related program development and evaluation.

Beginning July 1976, state licensed providers of abortion services voluntarily reported basic information about abortions and complications associated with abortions in accordance with Arizona Administrative Code, R9-19-302D, authorized by Arizona Revised Statute 36-344. ADHS sent routine reminders and provided a standard reporting format. The data was used to create tables for the annual Arizona Health Status and Vital Statistics report^{*} and improved the estimation of total pregnancies and pregnancy outcomes.

The enactment of SB1304 in 2010 established a statutory requirement to report abortions and treatment of complications associated with abortions.¹ The *Arizona Abortion Report, 2010* was the transitional report containing a combination of data collected prior to and after the establishment of the law. Beginning July 29, 2010, abortion data is reported using a secure, web-based reporting system. The reporting system was designed to meet the statutory requirements. Reports submitted using the web-based system do not include personally identifiable information (i.e., name, address, birthdate, social security number, etc.) and are submitted by password-authenticated personnel only. The ADHS provides training to all known providers within the state and maintains an Abortion Reporting website for provider assistance and related resources. In addition to licensed practitioners, hospitals, and clinics, the statute requires the Arizona Administrative Office of the Courts to report the number of petitions filed with Arizona courts for authorization to perform an abortion on an unemancipated minor without parental consent (see also <u>A.R.S. §36-2152</u>, subsections B and D).

The *Abortions in Arizona, 2015* report is the result of five consecutive years of web-based abortion reporting. Statistics and information presented reflect abortion services provided within the state. Several data tables reflect year ranges relevant to trends in Arizona (i.e., 1 year, 5 years, and 10 years).

* ADHS. Arizona Health Status and Vital Statistics (HSVS) Report. See Section 1D.

^{1.} SB1304 State of Arizona Senate Forty-Ninth Legislature Second Regular Session 2010. http://www.azleg.gov/legtext/49leg/2r/bills/sb1304p.pdf

Methodology

Collection of accurate abortion data reveals the level of pregnancy terminations related to other pregnancy outcomes and preconception health/planning in a population. Abortion also relates to maternal morbidity and mortality. The statistics and information presented in this report result from statutory requirements established by <u>Arizona Revised Statutes §36-2163</u>. The term *abortion* replaces *induced termination of pregnancy* (ITOP) and *termination* where appropriate throughout this report. The term *resident* refers to legitimate resident status within Arizona as determined by patient's reported state and county of residence.

2.1. Data Sources

The primary data source for this report is the web-based reporting system for Arizona providers. The consolidated dataset includes procedure and complication reports. Reports submitted do not include personally identifiable information. Only authorized entities access and submit data through a secure password protected portal.

A second data source, the Arizona Administrative Office of the Courts, provides an aggregate data summary report which includes the number of petitions filed with Arizona courts for authorization to perform an abortion on an unemancipated minor as prescribed in <u>A.R.S. §36-2163</u>, <u>Subsection C.</u>

The third data source is the abortion reports received from other states for Arizona residents who obtained an abortion in a state other than Arizona. Although these reports are for Arizona residents, they are not included in the annual dataset because the procedure was not performed within Arizona. The reports are provided through the ADHS' Office of Vital Records and sent as a courtesy from other states.

2.2. Measures

Measures reported here are generally consistent with CDC categorizations and definitions. Aggregate abortion counts are reported for the following variables:

- Age in years of the woman (<15, 15–19, 20–24, 25–29, 30–34, 35–39, 40–44, \geq 45);
- Gestational age in weeks at the time of abortion (≤ 8 through ≥ 21 by individual week; ≤ 13, 14-20, and ≥ 21 weeks);
- Race (White, Black/African American, American Indian/Alaska Native, Asian/ Native Hawaiian/Pacific Islander, Multiple Race);
- Ethnicity (Hispanic or non-Hispanic);
- Method type (surgical, non-surgical/medication-induced);
- Marital status (married or unmarried);
- Number of previous live births $(0, 1, 2, \text{ or } \geq 3)$;
- Number of previous abortions $(0, 1, 2, \text{ or } \ge 3)$;
- Maternal residence (state, Arizona county of residence, border and non-border region).

Important measures for abortions are: a) the total number (count) of abortions in a given population, b) the percentage (proportion) of abortions within a given population, c) the abortion rate (number of abortions per 1,000 women aged 15–44 years), and d) the abortion ratio (number of abortions per 1,000 live births within a given population).¹

Total counts and percentages provide an overview of abortions while abortion rates are a more useful measures as they adjust for differences in sub-populations and sub-population size. Abortion ratios reflect the relative number of pregnancies in a population that end in abortion compared to live births. Abortion ratios are affected by the proportion of unplanned pregnancies in a population and specifically those ending in abortion.¹

The U.S. Census Bureau and the Arizona Department of Public Health Statistics population estimates (obtained from the Arizona Department of Administration Office of Employment and Population Statistics) were used as the denominator for calculating abortion rates. Overall abortion rates were calculated from the population of women aged 15 – 44 years. To calculate abortion ratios, live birth data were obtained from the ADHS Office of Vital Records natality files.

The variables for race and ethnicity are based on specifications established by the Federal Office of Management and Budget (OMB) and the Arizona State Demographer with specifications developed by ADHS Vital Statistics. Consistent with OMB methodology,² the web-based reporting system allows for multiple race categorizations consistent with U.S. Census enumerations. For instance, women obtaining abortions were asked to provide their ethnicity (i.e., Hispanic or Latino and/or Non-Hispanic or non-Latino) and race according to five standard race categories (i.e. White, Black/African American, American Indian/Alaska Native, Asian/Native Hawaiian/Pacific Islander). Additionally, if one of the OMB categories does not apply, selecting "Other" allows providers to input specific race designations. A multiple race category was added to enumerate women who identify with more than one race. The selection of more than one race resulted in numerous combinations. Collecting multiple race posed a challenge resulting in an accumulation of approximately 32 percent of abortion records containing multiple race designations.

As denominators for multiple races are not readily available, utilizing multiple race and ethnicity categories complicates estimation of abortion rates for groups who report multiple races.³ To meet the requirements of OMB reporting standards for compiling statistics on these sub-groups, records designating ethnicity as Hispanic or Latino, irrespective of race, were reported as Hispanic. When single race and ethnicity were reported, those categories were included and when multiple races were reported, multiple races were coded to a single "multiple race" category.

^{1.} Extracted from Centers for Disease Control and Prevention. Abortion Surveillance — United States, 2011. MMWR 2014;63(11):1-41. Digital version available at: <u>http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6311a1.htm?s cid=ss6311a1 w</u>

^{2.} Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity: Federal Register Notice. Retrieved from <u>http://www.whitehouse.gov/omb/fedreg_1997standards/</u> accessed on July 16, 2012.

^{3.} Abortion rate is essentially denoted as number of abortions per 1,000 women. Race specific abortion rates are obtained by estimating the number of abortions (numerator) by women in a given racial group per 1,000 women in that same racial group.

An examination of characteristics of women obtaining abortions by border region is included in this report. Arizona encompasses several federally recognized sovereign American Indian nations and shares its southern border with Mexico. For the purpose of this report, women reporting their county of residence as Cochise, Pima, Santa Cruz, and Yuma (which comprises the United States and Mexico border region) were categorized as "border region". This is consistent with the U.S. Mexico Border Health Commission¹ definition. The remaining counties are considered "non-border region".

2.3. Analytic Procedures

Where applicable, both univariate and bivariate statistics are presented. Counts, percentages, and rates were calculated using SAS statistical software. Cell suppression was applied to categories with non-zero counts fewer than six (6). While abortion rates in general are reported for women of child-bearing age (15 – 44 years), age-specific rates were estimated using U.S. Census and Arizona Vital Statistics population denominators for age-groups \leq 14 years, 15–17 years, 18–19 years, 20–24 years, 25–29 years, 30–34 years, 35–39 years, and 40–44 years.

^{1.} United States-México Border Health Commission. Border Region. Available at: <u>http://www.borderhealth.org/border_region.php</u>. Website. Accessed on July 16, 2012.

Results

A total of 19 facilities reported data for calendar year 2015. During this period, there were a total of 12,655 abortions reported in Arizona of which 12,479 were to Arizona residents. The total number of reported abortions to Arizona resident women between the ages of 15 and 44 years was 12,407. The percent decrease in total abortions from 2014 (n = 12,900) was 1.9 percent. Table 2 provides an overview of abortions by month of termination, residence and non-residence status, and the number of resident live births in those months. Consistently since 2011, the highest number of abortions performed and the highest abortion ratio were reported in March.

Month	Non-resident abortions (N =180†)	Resident abortions (N =12,479)	Resident live births (N = 85,024)	Abortion ratio ^a
January	24	1,110	7,169	155
February	13	1,080	6,660	162
March	22	1,265	7,175	176
April	19	1,121	6,613	170
Мау	18	896	6,814	131
June	20	976	6,770	144
July	10	1,184	7,030	168
August	11	945	7,372	128
September	19	1,085	7,685	141
October	10	973	7,487	130
November	9	834	6,940	120
December	*	1,010	7,309	138
Total	180†	12,479	85,024	147

Table 1. Abortions, live births, and abortion ratios by month and resident status,2015

Notes: * Cell suppressed due to non-zero count less than 6; + Sum rounded to nearest tens unit due to non-zero addend less than 6; * Abortion ratio is the number of abortions per 1,000 live births.

The overall abortion ratio for calendar year 2015 remained constant at 147 abortions per 1,000 live births compared to 156 in 2013. The overall abortion rate for calendar year 2015 was 9.5 per 1,000 women of childbearing age (15 – 44 years; see Figure 1).

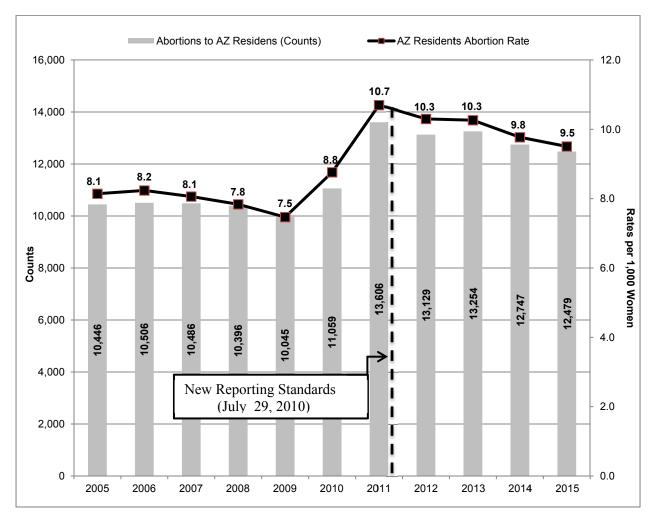


Figure 1. Abortion counts and rates for Arizona residents, 2005 – 2015

3.1. Characteristics of Women Receiving Abortions in Arizona

Characteristics described in this section examine age, race and ethnicity, marital status, and education of women obtaining abortions in Arizona. Also, included are descriptions of pregnancy history (i.e. previous pregnancies, live births, abortions, and spontaneous abortions), and the method used for abortion (i.e. surgical or non-surgical).

Maternal age is a critical element in determining maternal and child health. The age range for resident women receiving abortions was 12 to 50 years. The average age of resident women who received an abortion was 27 years (SD=6.3 years). Abortions occurring among females younger than 15 years of age increased 13.6% from 2014 to 2015. About 68% of abortions were to resident women younger than 30 years of age. Abortions were less frequent among women in the youngest (<15 years; 0.2%) and oldest (≥45 years; 0.3%) age groups.

Age distribution	AZ resident	(N = 12,479)
Age distribution	Count	Percent
< 15 years	25	0.2
15 - 17 years	287	2.3
18 - 19 years	877	7.0
20 - 24 years	3890	31.2
25 - 29 years	3375	27.0
30 - 34 years	2190	17.5
35 - 39 years	1324	10.6
40 - 44 years	465	3.7
≥ 45 years	42	0.3
Unknown	*	**
Total	12,479	100.0

Table 2. Age-distribution of resident women receiving abortions in Arizona,2015

Notes: * Cell suppressed due to non-zero count less than 6; ** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6.

The following page presents abortions reported among residents by year and age group from 2011 – 2015. The *percentage* of abortions among women less than 15 years of age showed a 15.9 percent increase from 2014 to 2015. A decline in the percentage of abortions to women less than 15 years of age is most evident during the five year (-44.5 %) period. The percentage of abortions among women 15 to 19 years of age decreased from 12.76 percent in 2011 to 9.32 percent in 2015, a 27 percent decline. The proportion of abortions among women 20-24 years of age decreased by 3.2 percent from 2011 – 2015. The proportion of abortions for all remaining age-groups increased from 2011 to 2015, the greatest among women ages 30 to 34 years.

Table 3. Proportions, rates, and ratios of abortions by age group, Arizona residents,

	Year				% Ch	ange	
Age in years	2011	2012	2013	2014	2015	2014 to 2015	2011 to 2015
Percent of abortions ^a							
<15 yrs	0.36	0.37	0.15	0.17	0.20	16.1	-44.4
15-19 yrs	12.76	11.36	10.72	9.63	9.33	-3.1	-26.9
20-24 yrs	32.24	32.91	32.47	32.76	31.17	-4.8	-3.3
25-29 yrs	25.19	24.99	25.44	26.23	27.05	3.1	7.3
30-34 yrs	15.82	16.61	17.56	16.77	17.55	4.6	10.9
35-39 yrs	9.61	9.52	9.91	10.16	10.61	4.4	10.4
≥ 40 yrs	4.01	4.23	3.74	4.28	4.06	-5.0	1.2
Abortion rates ^b							
<15 yrs	0.22	0.22	0.09	0.10	0.11	13.5	-49.9
15-19 yrs	7.69	6.56	6.21	5.57	5.24	-6.0	-31.8
20-24 yrs	20.45	20.02	19.40	17.76	16.41	-7.6	-19.7
25-29 yrs	15.87	15.57	16.19	15.70	15.46	-1.5	-2.6
30-34 yrs	10.45	10.32	10.84	9.88	10.04	1.7	-3.9
35-39 yrs	6.32	6.23	6.48	6.37	6.41	0.5	1.4
≥ 40 yrs	2.70	2.66	2.36	2.59	2.41	-7.0	-10.8
Abortion ratio ^c							
<15 yrs	485	716	282	478	610	27	26
15-19 yrs	208	185	199	187	199	7	-4
20-24 yrs	202	200	201	196	190	-3	-6
25-29 yrs	141	134	137	133	134	0	-5
30-34 yrs	111	109	117	101	105	4	-6
35-39 yrs	143	136	140	128	131	2	-8
≥ 40 yrs	245	244	221	237	213	-10	-13

2011 - 2015

Notes: ^a Proportion of total abortions by age group represented as a percentage. Percentages are calculated using the total number of abortions as the denominator and the number of reported abortions for a specific age-group as the numerator. Percents do not add up to a 100 due to rounding errors as well as unknown age-categories in some reporting years.

^b Number of abortions obtained by women in a given age group per 1,000 women in that same age group. Females aged 10– 14 years were used as the denominator for the group of females aged <15 years and women aged 40-44 years were used as the denominator for the group of women aged \geq 40 years.

^c Number of abortions obtained by women in a given age group per 1,000 live births to women in that same age group.

Abortion *rates* (the number of abortions per 1,000 women in a given age group) for women less than 15 years of age declined 49.9 percent from 2011 – 2015, the greatest decline of any age group during the time period, followed by the abortion rate for women 15 to 19 years (31.9 percent). Similarly, the abortion rate for women 20 to 24 years of age declined from 20.45 in 2011 to 16.41 in 2015, a 20 percent decrease. From 2011 to 2015, the abortion rate decreased for all women, except for women ages 35 to 39 years who show an increase of 1.4 percent.

As noted earlier, the *abortion ratio* is a comparison of abortions and live births and is expressed as the number of abortions per 1,000 live births. As indicated in Table 3, the abortion ratio for women less than 15 years of age dramatically increased from 485 abortions per 1,000 live births in 2011 to 610 abortions per 1,000 live births in 2015, (the high ratio is due to the small number of live births to females in this age group and may vary widely due to the number of births). From 2011-2015, the abortion ratio decreased for all the remaining age groups, the largest among women aged 40 years or older.

Race and Ethnicity

Among resident women obtaining abortions, about 2.83 percent were identified as being multiple race (n = 175). In approximately 5 percent of cases (n = 639), race was categorized as "Unknown". Approximately 43 percent of the 12,479 abortions were among non-Hispanic White women (n = 5378), followed by approximately 35 percent for Hispanic women (n = 4,350). Abortions among all remaining groups increased from 2014 to 2015. Black/African American women accounted for 8.6 percent (n = 1,074) of reported abortions, followed by Asian or Pacific Island women (n = 532), and American Indian women (n = 331).

The table below provides an overview of abortion trends from 2011 to 2015 by mother's race and ethnicity. In general, abortions to Hispanic and/or Latino women remained similar throughout this time period. However, some of the figures specific to race and ethnicity changed dramatically, reaching their lowest point during the years 2011 to 2013. This can be explained by the shift in the proportion of abortions accounted for by the different single race/ethnicity group, the decline in pregnancy rates and changes in the number of women of reproductive ages within those groups. It is important to note that while specific rates and ratios among women of single race/ethnicity selection have increased from 2011 to 2015, the global annual abortion rate has declined. This is due to the decrease in proportions of women reporting multiple races or unspecified race/ethnicity.

Table 4. Proportions, rates, and ratios of abortions by race and ethnicity, Arizona residents, 2011 – 2015

	Year				
Race/Ethnicity	2011 ^d	2012	2013	2014	2015
Percent of abortions ^a					
White non-Hispanic	17.53	14.50	18.98	43.63	43.1
Hispanic or Latino	31.41	25.84	31.61	35.29	34.8
Black or African American	1.07	0.88	1.43	7.70	8.6
American Indian or Alaska Native	0.35	0.29	0.46	2.28	2.6
Asian or Pacific Islander	0.35	0.57	0.83	4.19	4.2
Multiple races	32.65	22.74	32.12	2.83	1.4
Unknown	16.65	35.17	14.58	4.07	5.1
Abortion rates ^b					
White non-Hispanic	3.67	2.89	3.82	8.60	8.3
Hispanic or Latino	9.95	7.66	9.25	10.57	9.0
Black or African American	2.48	2.02	3.24	12.81	16.3
American Indian or Alaska Native	0.58	0.55	0.88	3.37	5.1
Asian or Pacific Islander	0.92	1.57	2.27	8.47	9.1
Multiple races	NA	NA	NA	NA	N
Unknown	NA	NA	NA	NA	N
Abortion ratio ^c					
White non-Hispanic	62	49	66	139	14
Hispanic or Latino	132	102	127	133	12
Black or African American	33	25	40	217	24
American Indian or Alaska Native	8	7	11	57	6
Asian or Pacific Islander	13	21	32	169	16
Multiple races	NA	NA	NA	NA	N
Unknown	NA	NA	NA	NA	N

Notes: ^a Proportion of total resident abortions by ethnicity and/or race represented as a percentage. Percentages are calculated using the total number of reported resident abortions as the denominator and the number of reported resident abortions for a specific ethnicity and/or race as the numerator. Percents may not add up to a 100 due to rounding errors, multiple race and unknown ethnicity/race categories.

^b Calculated using the number of abortions in a given race and/or ethnic group divided by female population aged 15-44 per 1,000.

^c Calculated using the number of abortions in a given race and/or ethnic group per 1,000 live births to women in the same group.

^d Beginning 2011, rates and ratios should be interpreted with caution due to the addition of the Multiple Race and Unknown categories. Single race selections are the best estimates for rates and ratios.

Marital Status

In 2015, 12.6 percent (n = 1,574) of resident women obtaining abortions were reported as married. Figure 2 displays the distribution of abortions among Arizona resident women from 2011 to 2015 by marital status. Between 2011 and 2015 the percent of abortions performed on married and unmarried women showed uncharacteristic variation in women with "Unknown" marital status; a deviation attributable to incomplete reporting. New reporting requirements for marital status in the electronic reporting system were recently implemented to correct this. The percent of abortions among unmarried women remained the highest during this reporting period.

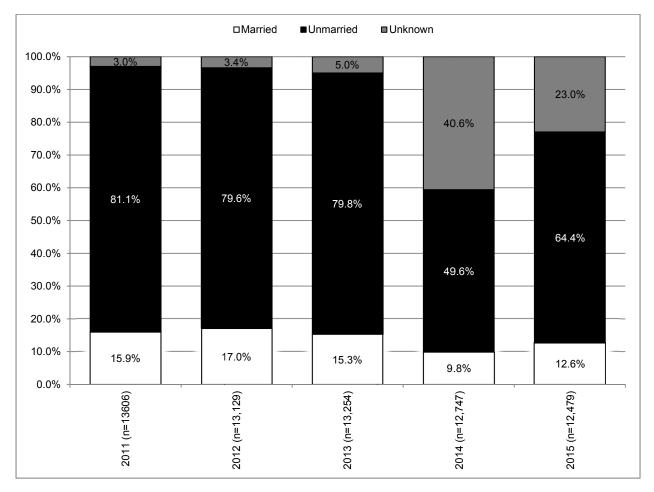


Figure 2. Marital status of resident women receiving abortions, 2011 – 2015

Education

Figure 3 displays the distribution of educational attainment reported for Arizona resident women obtaining abortions in 2015. The largest proportion reported an "Unknown" education status (\sim 54%), this is a 15 percent decrease from 2014. Approximately 22 percent (n = 2,691) of women obtaining an abortion in 2015 completed 13 to 16 years of education, followed by approximately 15 percent (n = 1,879) of women who had attained 12 years of education. Women with less than a high school education accounted for 5.5 percent of women obtaining abortions in 2014.

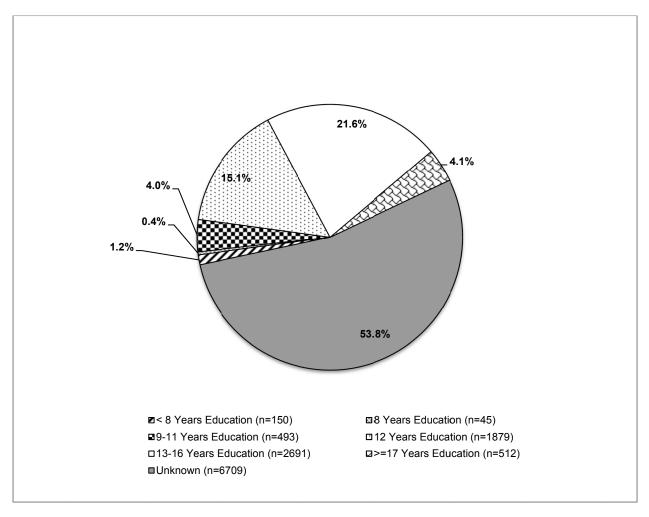


Figure 3. Educational status of resident women receiving abortions, 2015

Pregnancy History

Pregnancy history compiles the previous number of pregnancies, live births, abortions, and spontaneous abortions. Collecting previous pregnancy history data provides an overview of the potential risk of future pregnancy outcomes and informs preconception program development.

The previous number of pregnancies, live births, abortions, and spontaneous abortions are presented below. Among resident women who received abortions in 2015, over one-third (\sim 36%) had three or more previous pregnancies and approximately 15 percent had three or more previous live births.

Table 5. Pregnancy history of resident women receiving abortions in Arizona,
2015

Pregnancy history	Count (N = 12,479)	Percent
Number of previous pregnancies		
0	3,072	24.6
1	2,702	21.7
2	2,234	17.9
3 or more	4,441	35.6
Unknown	30	0.2
Number of previous live births		
0	5,267	42.2
1	2,891	23.2
2	2,363	18.9
3 or more	1,933	15.5
Unknown	25	0.2
Previous abortions		
0	7,843	62.8
1	3,020	24.2
2	1,021	8.2
3 or more	508	4.1
Unknown	87	0.7
Previous spontaneous abortions		
0	10,146	81.3
1	1,725	13.8
2	356	2.9
3 or more	139	1.1
Unknown	113	0.9

Additionally, of resident women obtaining abortions during 2015, approximately 11 percent had two or more previous abortions and approximately 4 percent had two or more previous spontaneous abortions. These numbers remained quite stable from 2014 to 2015.

Among resident women who had abortions in 2015, 6,695 (\sim 54%) had neither a previous abortion nor a spontaneous abortion (data not shown). Approximately 8 percent (n = 1,050) had at least one or more previous abortions and had one or more previous spontaneous abortions. Further, 9 percent (n = 1,140) had a previous spontaneous abortion but did not have a previous elective abortion, and about 27 percent (n = 3,441) had a previous abortion but did not have a previous spontaneous abortion.

Abortion Method

Of resident women who had abortions in 2015 (n = 12,479), approximately 68 percent (n = 8,479) had surgical procedures and approximately 32 percent (n = 3,996) had non-surgical procedures.

An overview of abortion method procedures reported in 2015 is shown below. Of the total surgical procedures reported for resident women, the most common procedure was vacuum (75.2%), followed by open approach via natural or artificial opening endoscopic/curettage (19.9%). Of the total number non-surgical (medication-induced) procedures reported, the most common was the combination of Mifepristone (Mifeprex) and Misoprostol (Cytotec) (99.5%).

Method	Count	Percent
Surgical procedures	(n = 8,479)	100.0
Open approach	*	**
Endoscopic approach	12	0.1
Vacuum via natural or artificial opening	6,375	75.2
Laminaria	211	2.5
Abortifacient	14	0.2
Open approach via natural or artificial opening endoscopic/curettage	1,685	19.9
Dilation and Evacuation	175	2.1
Other surgical abortion procedure	*	**
Non-surgical procedures	(n = 3,996)	100.0
Mifepristone (Mifeprex) and Misoprostol (Cytotec)	3,975	99.5
Misoprostol (Cytotec)	13	0.3
Methotrexate and Misoprostol (Cytotec)	*	**
Other and unknown procedures	7	0.2

Table 6. Method of abortion used by resident women in Arizona, 2015

Notes: * Cell suppressed due to non-zero count less than 6; ** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6.

Below, the trends in surgical and non-surgical procedures are displayed during 2011 – 2015. Between 2011 and 2015, most abortion procedures performed on resident women were surgical. The proportion of non-surgical procedures decreased from 37.5 percent in 2011 to 32.0 percent in 2015, reaching the lowest point (27.8 percent) in 2011.

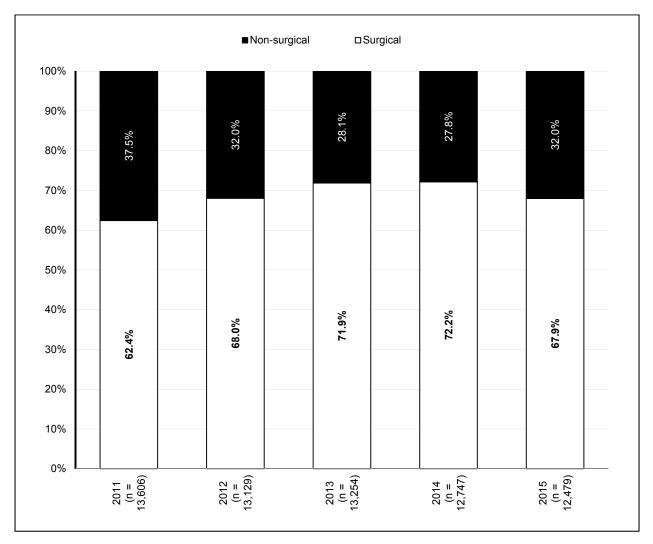


Figure 4. Method of abortion among Arizona resident women, 2011 – 2015

Note: Due to cases of unknown method of abortion, total percent may not add to 100%.

Facility and Reason for Termination

Table 7 presents maternal characteristics and maternal medical conditions cited for obtaining an abortion. During 2015, 20 resident women obtained an abortion citing a medical condition as the reason for termination. The age range of women in this group was 18 to 45 years and older. Thirty percent of the procedures were performed on women between 25 and 29 years of age. The majority of these abortions (55%, n = 11) occurred at gestational ages 14 to 20 weeks.

Table 8 on the following page presents maternal characteristics and fetal medical conditions cited as reasons for obtaining an abortion. Abortions due to fetal medical conditions were cited for 119 women, a 3.25 percent decrease from 2014 (n = 123). Most of these were related to birth defects. The age range of women in this group was 15 to 45 years and older, with the highest number of procedures to women 35-45 years or older. Approximately 56 percent (n = 67) of these procedures were performed between 14 and 20 weeks gestation.

Maternal characteristics	Count (n = 20†)	Percent
Age		
≤15-19 yrs	0	0.0
20-24 yrs	*	**
25-29 yrs	6	30.0
30-34 yrs	*	**
35-45+ yrs	*	**
Gestational age		
≤13 weeks	6	30.0
14 to 20 weeks	11	55.0
21 weeks	*	**
Unknown	0	0.0
Maternal medical conditions		
Premature rupture of membranes	*	**
Anatomical abnormality	*	**
Chorioamnionitis	*	**
HELLP or preeclampsia	*	**
Other/unspecified	6	30.0
Total	20†	100.0

Table 7. Maternal characteristics and maternal medical conditions cited for obtaining an abortion, Arizona residents, 2015

Notes: * Cell suppressed due to non-zero count less than 6; † Sum rounded to nearest tens unit due to non-zero addend less than 6; ** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6.

Maternal characteristics	Count (n = 120†)	Percent
Age		
≤15-19 yrs	0	0.0
20-24 yrs	13	10.9
25-29 yrs	19	16.0
30-34 yrs	40	33.6
35-45+ yrs	47	39.5
Gestational age		
≤ 13 weeks	25	21.0
14 to 20 weeks	67	56.3
≥ 21 weeks	26	21.8
Unknown	*	**
Fetal medical conditions		
Trisomy/Triploidy	53	44.5
Central nervous system anomalies	7	5.9
Multiple anomalies	13	10.9
Fetal demise	*	**
Cardiac defect	7	5.9
Oligohydramnios/Anhydramnios & Urological	6	5.0
Karyotype or genetic abnormality	8	6.7
Skeletal abnormality	*	**
Twin abnormality	*	**
Lethal anomalies	*	**
Other/unspecified	14	11.8
Total	120†	100.0

Table 8. Maternal characteristics and fetal medical conditions cited forobtaining an abortion, Arizona residents, 2015

Notes: * Cell suppressed due to non-zero count less than 6; † Sum rounded to nearest tens unit due to non-zero addend less than 6; ** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6.

3.2. Abortions by Gestational Age

Some evidence suggests an association between gestational age and abortion-related mortality. An overview of the gestational age of the fetus at the time of abortion is reported below. The majority of abortions (65.8%) to resident women were performed at gestational ages 8 or fewer weeks. Ninety-five percent (95%; n = 11,836) of abortions to resident women were performed at gestational ages of 15 or fewer weeks. More than one-quarter (29.1%) of the abortions were performed at 6 weeks gestation, followed by just over one-fifth (21.2%) at seven weeks gestation, and approximately fifteen percent at eight weeks gestation. Approximately one percent (n = 154) were performed at gestational ages of 21 weeks or greater, representing an increase of 16.67 percent from 2014 (n=132).

Gestational age	Count (N = 12,479)	Percent
≤ 8 weeks	8,211	65.8
6 weeks	3,628	29.1
7 weeks	2,645	21.2
8 weeks	1,938	15.5
9 to 13 weeks	3,163	25.3
9 weeks	1,101	8.8
10 weeks	733	5.9
11 weeks	676	5.4
12 weeks	341	2.7
13 weeks	312	2.5
14 to 15 weeks	462	3.7
14 weeks	233	1.9
15 weeks	229	1.8
16 to 17 weeks	239	1.9
16 weeks	128	1.0
17 weeks	111	0.9
18 to 20 weeks	244	2.0
18 weeks	98	0.8
19 weeks	79	0.6
20 weeks	67	0.5
≥ 21 weeks	154	1.2
Unknown	6	NA
Total	12,479	100.0

Table 9. Gestational age at time of abortion, Arizona residents, 2015

Table 10 on the following page provides an overview of the association between gestational age and method of abortion. Despite gestational age, surgical procedures were the most utilized methods of abortion. Vacuum was the most commonly used surgical procedure performed at gestational ages of 13 or fewer weeks (n = 5,610, 75.8%) and at 14 to 20 weeks of gestation, accounting for approximately 72 percent (n = 672).

Use of non-surgical abortion procedures were similarly distributed with approximately 99 percent of all nonsurgical abortions performed at 13 or fewer weeks of gestation. Mifepristone (Mifeprex) and Misoprostol (Cytotec) (n = 3,976; 99.9%) taken together was the most commonly used non-surgical procedure for abortions within this gestational period.

	Gestational age ^a					
Method	≤ 13 weeks (n = 11,374)		14 to 20 weeks (n = 945)		≥ 21 weeks (n = 154)	
	Count	Percent	Count	Percent	Count	Percent
Surgical total	7,397	100.0	929	100.0	151	100.0
Open approach	*	**	0	0.0	0	0.0
Percutaneous approach	0	0.0	0	0.0	0	0.0
Endoscopic approach	9	0.1	*	**	0	0.0
Vacuum via natural or artificial opening	5,610	75.8	672	72.3	92	60.9
Laminaria	13	0.2	159	17.1	39	25.8
Abortifacient	12	0.2	*	**	*	**
Open approach via natural or artificial opening endoscopic/curettage	1,629	22.0	49	5.3	7	4.6
Dilation and Evacuation	122	1.6	43	4.6	10	6.6
Other surgical abortion procedure	0	0.0	*	**	*	**
Non-surgical total	3,977	100.0	16	100.0	3	100.0
Mifepristone (Mifeprex) and Misoprostol (Cytotec)	3,976	100.0	11	68.8	*	**
Misoprostol (Cytotec)	0	0.0	0	0.0	0	0.0
Methotrexate and Misoprostol (Cytotec)	*	**	0	0.0	0	0.0
Other/unknown procedure	0	0.0	*	**	*	**

Table 10. Method of abortion and gestational age, Arizona residents, 2015

Notes: * Cell suppressed due to non-zero count less than 6; ** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6; ^a Gestational age was reported "unknown" for six (6) patients.

3.3. Abortions by County of Residence

On the following page is an overview of the number of abortions, live births, abortion rates, and ratios by patient's county of residence and summarized into border and non-border regions. The border region consists of Cochise, Pima, Santa Cruz, and Yuma counties. The remaining counties are considered the non-border region.

The overall Arizona abortion rate in 2015 was 9.5 per 1,000 resident women between 15 and 44 years of age. Fourteen of the 15 counties had abortion rates below the state rate. Maricopa (10.6) was the only county where the abortion rate exceeded the state rate. Similarly, except for Maricopa (157.6), all the remaining counties had abortion ratios below the state ratio 147.2 per 1,000 live births.

When comparing border and non-border regions, the abortion rate for the border region was 6.5 abortions per 1,000 women between the ages of 15 and 44 compared to 9.0 abortions in the non-border region. The abortion ratio for the border region was 104.3 abortions per 1,000 live births compared to the non-border region ratio of 138.9 abortions per 1,000 live births.

Posident countra	Abor	tions	Live b	oirths	Abortion	Abortion	
Resident county ^a	Count	Percent	Count	Percent	rate ^c	ratio⁴	
Apache	17	0.1	953	1.1	1.3	17.9	
Cochise	105	0.8	1,566	1.8	4.9	67.2	
Coconino	231	1.9	1,575	1.9	6.8	147.0	
Gila	50	0.4	580	0.7	6.6	87.0	
Graham	16	0.1	580	0.7	2.3	27.7	
Greenlee	8	0.1	154	0.2	3.9	51.9	
La Paz	14	0.1	199	0.2	5.6	70.4	
Maricopa	8504	68.1	54,600	64.2	10.2	156.2	
Mohave	18	0.1	1,845	2.2	0.6	9.8	
Navajo	49	0.4	1,517	1.8	2.6	32.3	
Pima	1555	12.5	11,476	13.5	7.9	135.9	
Pinal	366	2.9	4,454	5.2	5.3	82.3	
Santa Cruz	26	0.2	621	0.7	2.8	41.9	
Yavapai	193	1.5	1,877	2.2	6.5	103.1	
Yuma	49	0.4	3,017	3.5	1.2	16.3	
Unknown ^e	1278	10.2	10	0.0	N/A	N/A	
Border region ^b	1,735	13.9	16,680	19.6	6.5	104.3	
Non-border region	9,466	75.9	68,334	80.4	9.0	138.9	
Arizona	12,479	100.0	85,024	100.0	9.5	147.2	

Table 11. Abortions, live births, rates, and ratios for resident femalesby county of residence, Arizona, 2015

^a Residence indicates women's county of residence.

^b Border region in Arizona include Cochise, Pima, Santa Cruz, and Yuma.

^c Number of abortions obtained per 1,000 women of child-bearing age (15-44 years of age).

^d Number of abortions obtained per 1,000 live births.

^e Records submitted as Arizona residents without a county of residence selected. While the records are counted as Arizona residents, counts were neither included in Border nor Non-Border region counts.

3.4. Complications resulting from an abortion

The way ADHS assesses and reports complications resulting from an abortion have changed over time. Beginning in June 1976, as part of the required *Report of an Induced Termination of Pregnancy*, providers reported patients hospitalized for complications occurring *during* the abortion procedure. Between 1982 and 2003 the ADHS annual *Health Status and Vital Statistics Report (HSVSR*, Table D1-1) used provider-submitted reports to tabulate both the number of patients who received abortions and patients hospitalized for complications. Beginning in 1986, the table of complications included only Arizona residents. From 2004 to 2009 the ADHS *HSVSR* continued reporting general characteristics of women receiving abortions but did not list the count of complications.

Beginning July 2010, <u>Arizona Revised Statute §36-2162</u> established an abortion complication reporting requirement. Healthcare professionals who provide medical treatment to women experiencing complications resulting from an abortion are required to submit reports to the ADHS. The reports contain no personally identifiable information (PII) and hospital patient records are not accessible for public review.

Data submitted on the Complication report differs from data submitted on the Procedure report. Reports submitted in compliance with <u>A.R.S. §36-2162</u> are for complications occurring *after* an abortion is performed (i.e., excessive hemorrhaging hours or days after leaving the facility where the abortion was performed). These reports are primarily submitted by hospitals.

A total of 82 reports of complications resulting from an abortion procedure among Arizona resident women were submitted in 2015, a decrease of 40.15 percent from 2014. More than 60 percent (n = 50) of abortion complications occurred at gestational ages 13 weeks or fewer and primarily among women between 20 and 24 years of age.

Table 12 lists characteristics of resident women who experienced complications resulting from an abortion followed by a list of most reported complications by both ICD-9 CM and ICD-10 CM codes.

	Count (n = 80†)	Percent
Age		
<15 yrs	0	0.0
15-19 yrs	7	8.9
20-24 yrs	28	35.4
25-29 yrs	29	36.7
30-34 yrs	9	11.4
35-39 yrs	*	**
≥40 yrs	*	**
Gestational age		
≤13 weeks	48	60.8
14 to 20 weeks	*	**
≥ 21 weeks	0	0.0
Unknown	27	34.2
Description of complications ^a		
Delayed or excessive hemorrhage	7	8.9
Damage to pelvic organs	*	**
Sepsis	*	**
Urinary tract infection	*	**
Unspecified complications	29	36.7
Other complications	34	43.0

Table 12. Complications resulting from an abortion for resident women, Arizona, 2015

Notes: ^{*} Cell suppressed due to non-zero count less than 6; [†] Sum rounded to nearest tens unit due to non-zero addend less than 6; ^{**} Cell suppressed due to rate/ratio/percent based on non-zero count less than 6; ^a Refers to complications following elective abortions; ^b Complications associated/occurring with the abortion procedure but not the direct result.

3.5 Disposition of Aborted Fetal Tissue

The 2015 Abortion report is the first to provide information on the disposition of fetal tissue after an abortion. A new rule mandating that abortion reports include additional detail describing the final disposition of fetal tissue was approved on August 14, 2015. The electronic abortion reporting system was changed to collect such information, and reporting became mandatory on August 16, 2015. Reports submitted prior to the rule change do not include detail on the disposition of fetal tissue. Table 13 provides a summary of the disposition of fetal tissue after an abortion in 2015.

	Count	Percent
Tissue was not donated in part or whole	4,288	34.4
Anatomical gift/donation to a person(s) or establishment	0	0.0
Delivered to a mortuary for burial/cremation	59	0.5
Not Reported*	8,132	65.2
Total	12,479	100.0

Table 13. M	lethod of dis	osition of fetal	remains among	Arizona	residents,	2015
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Note: * Reports submitted prior to rule change.

3.6 Petitions Filed with the Arizona Administrative Office of the Courts

The Arizona Administrative Office of the Courts collects data in accordance with <u>A.R.S. § 36-2163 subsection C</u>, regarding granting authorization to unemancipated minors to undergo an abortion procedure without parental consent.

Following is the summary data provided by the Arizona Administrative Office of the Courts. The dates of petitions filed range from January 1, 2015 to December 31, 2015. Although not specified in statute, the total number of petitions issued an order are included for context. A total of 29 petitions were filed, 26 (90%) were issued an order authorizing an abortion and, 27 were without parental consent. Please note, while a petition may be filed during a specific period, resolution may be in the following period.

Reporting category	Number of Petitions
1. Number of petitions filed pursuant to A.R.S.§ 36-2152 Subsection B	29
2. Of the petitions filed pursuant to A.R.S.§ 36-2152 Subsection B, the number in which the judge appointed a guardian <i>ad litem</i> or court-appointed counsel for the minor pursuant to A.R.S.§ 36-2152 Subsection D. Note: An additional 3 petitions were filed without an appointed guardian ad litem or court appointed counsel, resulting in a total of 29 petitions filed.	26
3. Of the petitions filed pursuant to A.R.S.§ 36-2152 Subsection B, the number in which the judge issued an order authorizing an abortion <u>without</u> parental consent. Note : No petitions were issued with parental consent during calendar year 2015.	27
4. Of the petitions filed pursuant to A.R.S.§ $36-2152$ Subsection B, the number in which the judge issued an order denying the petition.	*
5. Of the petitions denied, the number appealed to the court of appeals.	0
6. The number of those appeals that resulted in the denials being affirmed.	0
7. The number of those appeals that resulted in the denials being reversed. Note: * Cell suppressed due to non-zero count less than 6.	0

Conclusion

This 2015 Abortion Report provides a comprehensive overview of abortion in the State of Arizona following the passage of SB1304 in 2010. In addition to presenting comprehensive statistics regarding incidence and prevalence of abortion in Arizona, the report also highlights the importance of continued public health prevention messaging, regarding unplanned pregnancies and the risks associated with abortion among women of child-bearing age, especially in the adolescent teen population.

The implementation of <u>A.R.S. §36-2161 thru §36-2163</u> provides a standardized data collection system that improves data quality. Enhancements to the web-based reporting system and provider training are ongoing, providing an accurate secure reporting system that allows individual providers to report abortions online through a secured web-based system.

Analysis of abortion data has numerous public health implications. Ongoing abortion surveillance facilitates efforts to decrease and/or prevent unplanned pregnancies. This report provides a comprehensive overview of statistics about the incidence of abortion in Arizona, however it is limited to descriptive data analysis. No attempt was made to formulate inferences regarding the general population or sub-populations of women obtaining abortions in Arizona. Because of differences in abortion data collection across time, trend comparisons should be interpreted with care because of variation in provider reporting prior to 2010 and expanded reporting requirements that went into effect July 2010. There is no data available to assess the extent of underreporting of incidences.

This comprehensive annual abortion report is respectfully compiled and submitted for public review in accordance with <u>Arizona Revised Statute §36-2163 Subsection B</u>.

Appendix A- Glossary

Abortion or induced termination of pregnancy (ITOP) – *Abortion* means the use of any means to terminate the clinically diagnosable pregnancy of a woman with knowledge that the termination by those means will cause, with reasonable likelihood, the death of the unborn child. Abortion does not include birth control devices, oral contraceptives used to inhibit or prevent ovulation, conception, or the implantation of a fertilized ovum in the uterus, or the use of any means to save the life or preserve the health of the unborn child, to preserve the life or health of the child after a live birth, to terminate an ectopic pregnancy, or to remove a dead fetus (A.R.S. 36-2151).

Abortion rate – The number of abortions per 1,000 women aged 15 – 44 years or other specific group within a given population.

Abortion ratio – The number of abortions per 1,000 live births within a given population. The ratio reflects the relative number of pregnancies in a population that end in abortion compared to live birth.

Birth or live birth – The complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy which, after such expulsion or extraction, breathes or shows any other evidence of life such as beating of the heart, pulsation of the umbilical cord or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Heartbeats are to be distinguished from transient cardiac contractions; respirations are to be distinguished from fleeting respiratory efforts or gasps.

Gestational age – *Gestational age* means the age of the unborn child as calculated from the first day of the last menstrual period of the pregnant woman.

Pregnancies – Pregnancies are the sum of live births, spontaneous terminations of pregnancy (fetal deaths or stillbirths), and induced terminations of pregnancy (abortions).

Proportion – A proportion is a ratio in which those in the numerator are also in the denominator.

Rate – A *rate* is a ratio in which those in the numerator are also in the denominator, and those in the denominator are "at risk" of being in the numerator. The denominator is the sum of "at risk" person-time or, by convention, the count of individuals "at risk" in a given time period.

Ratio – A *ratio* is any division of one number by another; the numerator and denominator do not have to be mutually exclusive.

Unemancipated minor – *Unemancipated minor* means a minor who is subject to the control, authority, and supervision of his or her parents or guardians, as determined under State law (See Title 42. The Public Health and Welfare; Chapter 6a USCS §300z-1).

Appendix B- Abortion Reporting Forms



Arizona Department of Health Services

Abortion Procedure Report

NOTICE: This is a MONTHLY report that must be filed within 15 days after the last day of the reporting month.

Facility Name		Facility Type	-	
County of Pregnancy Te County	ermination ut of State			
City	State Arizona	Zip		
Provider First Name	Provider Last Nam	e	Provider Type	License Number

ge	Education	Resid	ence State	Residence Coun	tv
		elp Arizo	ona		
		_	on USA Resident		
		R	esidence Unknow	n	
lispa	nic Origin?				
© Ye	es 🔘 No 🔘 Unkno	wn			
lace,	check all that app	ply			
	White		Asian		
	American Indian		Native Hawa	iian or Other Pacific Is	slander
	Black or African Ar	nerican	Other		
Aarrie	d Prior Pre	egnancy	Prior Birth	Prior Abortion	Prior Spontaneous Terminations
name				-	

Estimate of Gestational Age Date o	of Termination	
Reason for Termination		
-		
Diagnosis Code	_	
•		
Surgical Procedure Performed	Non-Surgical/Medication-Induced Procedure	
Madiaal Complication		
Medical Complication		
Preexisting medical conditions that v	would complicate pregnancy (4000 characters left)	
		*
		-
equirements of this chapter.	that a medical emergency existed that excused the physician from con	npliance with the
requirements of this chapter.	that a medical emergency existed that excused the physician from con	npliance with the
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Submit Form

ame of Person Preparing Report	Report Date	
I declare that the information in t correct to the best of my knowle	s report provided to the Arizona Department of Health Services is lge.	
	Submit	

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Arizona Department of Health Services

Abortion Complication Report

NOTICE: This is a MONTHLY report that must be filed within 15 days after the last day of the reporting month.

Facility Name		Facility Type		
Address of Facility			1	
City	State Arizona	Zip		
Provider First Name	Provider Last Name		Provider Type	License Number

Facility Name			Facility Type	+
Address of Facil	ity			
City	State	Zip		
	Arizona			

Patient Information

Age	Education	۱		Resid	ence State		Residence County	/		
		•	Help	Arizo	na		•			
					on USA Resid	ent				
				R	esidence Unk	nown				
Hispa	nic Origin	?								
O Ye	es 🔘 No 🄇	🖯 Unk	nown							
Race,	check all	that a	apply							
	White				Asian					
	American Ir	ndian			Native Harris Native Harris 1	awaiia	n or Other Pacific Isl	ander		
	Black or Af	rican	Americ	an	Other					
Marrie	d	Prior	Pregna	ncy	Prior Birth		Prior Abortion	Prior Spontar	eous	Terminations
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Medical Information	
Estimate of Gestational Age Date of T	ermination
	
Surgical Procedure Performed	Non-Surgical/Medication-Induced Procedure
	▼
Nature of complication	
	▼
Medical Treatment Given (4000 characte	rs left)
	*
	*
Nature and Extent of any Permanent Co	ondition Caused by the Complication
	▼
	Clear Fields

Submit Form

Name of Person Preparing Report	Treatment Date
 I declare that the information in this report prov correct to the best of my knowledge. 	vided to the Arizona Department of Health Services is
[Submit
After you press the submit button, if you do not r was not received by ADHS.	receive a confirmation message with a report number your report

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Our Web site at http://www.azdhs.gov/plan provides access to a wide range of statistical information about the health status of Arizonans. The Arizona Health Status and Vital Statistics annual report examines trends in natality, mortality, and morbidity towards established health objectives. In addition to the print and original online versions, the 2015 report is made available as a mobile-friendly e-book. Additional reports and studies include Advance Vital Statistics by County of Residence, Injury Mortality among Arizona Residents (accidents, suicides, homicides, legal intervention, firearm-related fatalities, drug-related deaths, drowning deaths, falls among Arizonans 65 years or older), Hospital Inpatient and Emergency Room Statistics (first-listed diagnosis, procedures, mental disorders, asthma, diabetes, influenza and pneumonia, and substance abuse), Community Vital Statistics, Teenage Pregnancy, Differences in Health Status Among Racial/Ethnic Groups, and Health Status Profile of American Indians in Arizona.



Population Health and Vital Statistics Section Bureau of Public Health Statistics ARIZONA DEPARTMENT OF HEALTH SERVICES