



Abortion Providers

Fact Sheet
HB2554

Background

Advanced Practice Clinicians, such as nurse practitioners, certified nurse midwives, and physician assistants, have been providing surgical abortions with impressive safety records for over three decades in the United States. For eight years, nurse practitioners have been providing surgical abortion services for women in Arizona with fewer complications than the national average. The Arizona Board of Nursing has stated that performing first trimester, aspiration abortions *is* within the scope of practice for highly trained and specialized advance practice nurse practitioners. This legislation would overturn the will of the Arizona Board of Nursing and undermine its role in determining the scope of practice for Arizona nurses.

Advanced practice clinicians are competent women's health care providers

- The specialized training for an advanced practice clinician distinction includes graduate education, supervised clinical training, licensing, and national board certification.
- The scope of practice already identified by the Arizona State Board of Nursing includes a variety of complex procedures considered as invasive or more so than surgical abortion:
 - Intrauterine Device (IUD) insertions and endometrial biopsies
 - Colposcopy, cryotherapy, and the Loop Electrosurgical Excision Procedure (LEEP)
 - Peripherally inserted external jugular catheter
 - Lumbar puncture
 - Bone marrow aspiration and biopsy
- The full continuum of care provided by gynecological nurse practitioners ranges from (a) well woman exams to (b) birth control dispensing to (c) disease testing and treatment to (d) cancer detection and treatment. Surgical abortion fits squarely within this continuum of care.
- Advanced practice clinicians already perform early surgical abortion in many states. In Vermont and Montana, clinicians have safely performed abortions since 1973.ⁱ

Medical professionals already agree, surgical abortion is within the scope of practice

- On May 14, 2008 the Arizona Board of Nursing ruled that performing first trimester; aspiration abortion is within the scope of practice of a properly trained nurse practitioner.

*This information was compiled by Planned Parenthood Arizona.
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- The American Public Health Association supports the provision of first trimester medical and surgical abortion by appropriately trained NPs, CNMs, and PAs. ⁱⁱ
- Physicians for Reproductive Choice and Health supports the training of advanced practice clinicians in providing abortion services. ⁱⁱⁱ
- The National Association of Nurse Practitioners on Women’s Health “believes that nurse practitioners, with appropriate preparation and medical collaboration, are qualified to perform abortions.” ^{iv}

Access to abortion continues to be a problem for many women in Arizona

- Of Arizona’s 15 counties, only two have medical doctors available to provide abortion services. Availability is severely limited in Arizona’s rural counties.
- Allowing advanced practice clinicians, such as nurse practitioners to perform early surgical abortions will increase women’s access to safe abortion services.
- Health risks of abortions increase exponentially with each week the abortion is delayed. One of the most common reasons for delay is failure to locate an abortion provider.

Abortions are safer during the early stages of a pregnancy

- Surgical abortion can be performed in an outpatient clinical setting.
- 97% of women having surgical abortions in the first trimester report no complications. ^v
- Aspiration abortions are extremely safe when performed by a well-trained and competent practitioner – whether a nurse practitioner or a physician. Nationwide, less than 0.3% of abortion patients experience a complication that requires hospitalization. ^{vi}

Limiting abortion access does not stop abortions; it simply forces women to make riskier decisions

- Clinical evidence supports advanced practice clinicians, such as nurse practitioners, certified nurse midwives, and physician assistants, as safe and competent providers of primary care including abortion.
- Limiting the scope of practice for advanced practice clinicians will limit the access to early abortion services for women in rural areas. This will create an undue burden for these women and increase the number of more risky second trimester abortions.
- The only sure way to prevent abortions is to prevent unintended pregnancies. The most effective way to prevent unintended pregnancies is to increase access to sex education and birth control services.

- It is particularly problematic as a matter of public health policy to be considering further restricting access to abortion when unintended pregnancy rates are inflated by the Arizona legislative preference for abstinence promotion over comprehensive sexuality education and the failure of Arizona to fund access to affordable family planning/contraception.

ⁱ Joffe, Carole; Yanow, Susan. "Advanced Practice Clinicians as Abortion Providers: Current Developments in the United States" *Journal of Reproductive Health Matters* 2007; 12: 198-206.

ⁱⁱ APHA Resolution No. 9917, 1999.

ⁱⁱⁱ Adopted PRCH Board of Directors, May 1999.

^{iv} NANPRH Resolution no Nurse Practitioners as Abortion Providers, October 1991.

^v "Comparison of complication rates in first trimester surgical abortions performed by physicians and midlevel providers." Paper presented at National Abortion Federation Annual Meeting, edited by N.A. Federation. Burlington, VT: National Abortion Federation. BoymanK, GivsonC, Forman L. 2004

^{vi} Guttmacher Institute, Facts on Induced Abortion in the United States, at 4 (Jan. 2008), http://www.guttmacher.org/pubs/fb_induced_abortion.html (last visited March 27, 2008).