Rules of
Department of Health
Division 10—Office of the Director
Chapter 15—Abortsions

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Title 19—DEPARTMENT OF
      HEALTH
Division 10—Office of the Director
Chapter 15—Abortions

19 CSR 10-15.010 Report of Induced Termination of Pregnancy

PURPOSE: The Department of Health under sections 188.052 and 188.055, RSMo 1986 is given the responsibility to provide abortion forms to health facilities and physicians. This rule establishes the content of the report of induced termination of pregnancy to be filed with the Department of Health for statistical purposes.

(1) The report of induced termination of pregnancy will include the following items:
- name of abortion facility or hospital; the city, town or location of the abortion facility or hospital; county where the abortion facility or hospital is located; patient identification number; age of patient; marital status of patient; date of pregnancy termination; residence of patient state, county, city or town; inside city limits (yes or no) and zip code; patient’s race; patient’s education; previous pregnancy history; number of live births now residing; number of live births now dead; number of spontaneous terminations and number of induced terminations; type of termination procedures used; complications of pregnancy termination; date last normal menses began; date of pregnancy termination; residence or hospital where the procedure was performed; name and address of other facility that treated patient; name of abortion facility or hospital; the city, county where the abortion facility or hospital is located; patient identification number; patient’s date of birth; residence of patient state, county, city; date of abortion; name and address of abortion facility or hospital; name and address of facility reporting complication; was patient previously seen at another facility for post-abortion care (yes or no); name and address of other facility that treated patient; complications; result of complications; signature of physician providing post-abortion care; and date of post-abortion care.


19 CSR 10-15.030 Content and Filing of Tissue Report

PURPOSE: The Department of Health under sections 188.047 and 188.055, RSMo 1986 is given the responsibility to provide forms relating to abortion to health facilities and physicians. This rule establishes the content of the tissue report and filing requirements for tissue reports.

(1) The Department of Health will accept local pathologists’ report forms for compliance with section 188.047, RSMo 1986 if the reports contain the following: patient identification number assigned by the facility where the procedure was performed; name and address of the abortion facility or hospital where the procedure was performed; name and address of the pathologist who examined the tissue. All reports shall contain the findings of a gross examination. If fetal parts or placenta are not identified, then an accompanying microscopic tissue report must also be filed with the Department of Health.


(2) The pathologist shall file the tissue report with the Department of Health within thirty (30) days after the examination of the tissue.


19 CSR 10-15.040 Induced Termination of Pregnancy Consent Form

PURPOSE: The Department of Health is given the responsibility to provide physicians with consent forms for abortions. This rule establishes the content of the form.

(1) The consent form for abortion shall contain the following information:

MISSOURI DEPARTMENT OF HEALTH
Division of Health Resources

INDUCED TERMINATION OF PREGNANCY CONSENT FORM
I have been informed by my physician, ________________, of the particular risks associated with the abortion technique to be used in my case. My physician has also informed me of the alternatives available to me other than an abortion.

__________________ witness                              date

__________________ signature of patient

(2) Any physician who performs an abortion, prior to the abortion, shall require the woman to give her informed consent on the Department of Health induced termination of pregnancy consent form or on a form which includes as a minimum the same information as included on the Department of Health form.