

Caring for Challenging Patients Exercise: Family Planning

Learner Handout

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Workshop Objectives:

1. Discuss patient interactions that might make you feel uncomfortable.
2. Provide an opportunity for you to reflect on your own feelings and values about challenging patients.
3. Use this awareness to identify strategies for maintaining a therapeutic relationship with patients who make decisions about health care with which you may disagree.

Section I: General feelings about abortion, adoption, and parenthood (please check all that apply) ¹

1. I am generally comfortable with a patient choosing to have an abortion in the following circumstances:
 - If the pregnancy threatens her life.
 - If the pregnancy threatens her physical or mental health.
 - If the pregnancy involves significant fetal abnormalities.
 - If the pregnancy resulted from rape.
 - If she does not want any more children.
 - If she is financially unable to support a child.
 - If the baby would interfere with education or career goals.
 - If the pregnancy resulted from a birth control failure.
2. I am generally comfortable with a patient giving the baby for adoption in the following circumstances:
 - If the pregnancy threatens her life.
 - If the pregnancy threatens her physical or mental health.
 - If the pregnancy involves significant fetal abnormalities.
 - If the pregnancy resulted from rape.
 - If she does not want any more children.
 - If she is financially unable to support a child.
 - If the baby would interfere with education or career goals.
 - If the pregnancy resulted from a birth control failure.
3. I am generally comfortable with a patient choosing parenthood in the following circumstances:
 - If the pregnancy threatens her life.
 - If the pregnancy threatens her physical or mental health.
 - If the pregnancy involves significant fetal abnormalities.
 - If the pregnancy resulted from rape.
 - If she does not want any more children.
 - If she is financially unable to support a child.
 - If the baby would interfere with education or career goals.
 - If the pregnancy resulted from a birth control failure.

¹ Adapted from *Obtaining Abortion Training: a Guide for Informed Decision-Making*. National Abortion Federation, 1998.

Section II: Behavior Challenges²

1. A 24 year-old woman who has been pregnant three times and has had three abortions comes to you for pregnancy options counseling and desires an abortion.
2. You are counseling a woman who desires an abortion. After you explain what to expect during the abortion you move on to discuss contraception. She tells you that she is not planning to use any contraception.
3. You are a medical student rotating at an abortion clinic and a 23 year-old woman comes in for termination of pregnancy.
 - a. Gestational age is 8w1d
 - b. Gestational age is 23w0d (the last day for a termination at your clinic)

Section III: Pregnancy Ambivalence³

1. Let's consider a patient who comes to your clinic for a pregnancy test and it is positive. After reviewing her pregnancy options she desires an abortion and doesn't express any emotion about it. She does not appear sad, in fact, she asks you for a picture of the ultrasound for a keepsake.

Section IV: Professional Responsibility

1. You are in an Ob/Gyn clinic seeing patients with an intern. A 17-year-old woman comes in for a pregnancy test that turns out to be positive. S/he performs an ultrasound, shows her the 7-week fetus, congratulates her and schedules her for a prenatal appointment in a few weeks. You notice that s/he does not mention the options of abortion and adoption to her.
2. You are in the same clinic, but this time you are seeing a teen with an intern who counsels her about her options. However, the counseling is heavily biased toward having an abortion. S/he says, "you want to finish high school, don't you?" The patient leaves with an appointment for the abortion clinic.

² Adapted from Obtaining Abortion Training: a Guide for Informed Decision-Making. National Abortion Federation, 1998.

³ Ibid.