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## Guidance Regarding the Submission of Terminated Pregnancy Reports

Indiana Code § 16-34-2-5 requires health care providers to report all medication-induced abortions and surgical abortions performed in Indiana to the Indiana Department of Health (IDOH). Terminated Pregnancy Reports are submitted through IDOH's vital records system, DRIVE (Database for Registering Indiana's Vital Events).

Health care providers required to file a terminated pregnancy report (TPR) include:

- (1) A physician who performs a surgical abortion or provides, prescribes, administers, or dispenses an abortion-inducing drug for the purpose of inducing an abortion; and
- (2) A hospital or ambulatory surgical center where a surgical abortion is performed or an abortion-inducing drug is dispensed and administered.

Only one TPR is required to be filed for each abortion. However, it is the responsibility of each health care provider to ensure that a TPR is timely filed.

Health care providers who need to submit a TPR must register as a DRIVE user, which is a twostep process.

- 1. Register for an Access Indiana account at <u>https://www.in.gov/access/</u>.
- 2. Once an Access Indiana account is set up, click on the DRIVE tile posted in Access Indiana Services. Then, follow the prompts to submit an e-request to register as a new user or to link an existing Genesis/DRIVE user profile to the Access Indiana account.

In accordance with Indiana Code § 16-34-2-5(b):

- Health care providers are required to submit the TPR to IDOH within 30 calendar days after the date of each abortion procedure for patients who are 16 years old and older.
- If an abortion procedure is performed for a patient who is less than 16 years old, the health care provider must submit the TPR within three days after the procedure to IDOH <u>and</u> separately to the Indiana Department of Child Services (DCS).
  - TPRs should be submitted to DCS by email to: <u>dcshotlinereports@dcs.in.gov</u>

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Patient Age	Timeline	Submission Method
Age 16 and Older	Within 30 calendar days	DRIVE
Less than 16	Within 3 calendar days	DRIVE and DCS Hotline Email

Once the TPR has been submitted to IDOH and DCS, if applicable, a copy of the TPR must also be retained in the patient's medical file.

TPR reporting requirements are **<u>separate</u>** from a person's duty to **<u>immediately report</u> <u>suspected child abuse or neglect to DCS or law enforcement</u>** when they have reason to believe a child is a victim of child abuse or neglect. Indiana is a mandatory-reporting state—all people must report suspected child abuse or neglect under Indiana law, regardless of a person's relationship to the child. To report suspected child abuse or neglect, you may contact state or local law enforcement or call the DCS Child Abuse Hotline at 1-800-800-5556.

Treatment of a missed miscarriage, septic abortion, inevitable miscarriage, ectopic pregnancy, molar pregnancy, or any pregnancy where the fetus has died in-utero are not required to be submitted as a terminated pregnancy report.

To achieve compliance with new reporting requirements passed by the Indiana General Assembly under Senate Enrolled Act 1 – 2022 (special session), new required fields have been added to the DRIVE terminated pregnancy module. These changes include a new field for indicating the reason for the abortion as allowed by state law and new fields for diagnostic code(s). The "reason for abortion" field contains five choices: serious health risk to the pregnant woman, lethal fetal anomaly, rape, incest, and not applicable.

Important documents and relevant state forms listed below can be found on the IDOH's <u>Abortion Information Center</u> website. As these documents and forms are subject to change based on amendments to state law, we encourage health care providers to download forms directly from the IDOH website as needed.

- Abortion Informed Consent Brochure
- Abortion Informed Consent (State Form 55320)
- Available Counseling after an Abortion (State Form 56615)
- Perinatal Hospice Information Center
- Certificate of Provision of Perinatal Hospice Information: Time of Abortion Consent Decision (State Form 56108)
- Certification of Provision of Perinatal Hospice Information: Time of Diagnosis of a Lethal Fetal Anomaly (State Form 56113)
- Disposition of Aborted Fetus Certification (State Form 56114)



- Fetal Ultrasound and Heart Tone Certification (State Form 55321)
- Abortion Complications Reporting (State Form 56522)
- Abortion Complications Reporting Requirement Guidance