Indiana Department of Health

Terminated Pregnancy Report
Jan. 1 – March 31, 2025

Executive Summary

The purpose of this report is to present information from the first quarter of 2025 (Jan. 1, 2025, through March 31, 2025) (the "reporting quarter") on terminated pregnancy reports as required by Indiana law. Indiana Code § 16-34-2 et seq. requires that all terminated pregnancies in Indiana be reported to the Indiana Department of Health's (IDOH) Division of Vital Records within 30 days of termination.

Key Findings

Two terminated pregnancy reports were submitted to the Indiana Department of Health (IDOH) through the electronic reporting system, as required by Ind. Code § 16-34-2-5.5. Additionally, there were 20 incomplete reports submitted via email. Eleven were from Indiana University Health and nine were from an unknown Indiana hospital. While these reports confirmed that a terminated pregnancy occurred in Indiana among Indiana resident mothers during Q1 of 2025, they did not include the complete set of required data elements specified under Ind. Code § 16-34-2-5.

To ensure data integrity and consistency in analysis, these 20 incomplete reports have been counted in the total number of terminated pregnancies for Q1. However, because they lack essential demographic, medical, and procedural details, they have been excluded from some calculations related to trends, demographics, and medical data. These analyses rely solely on the two fully completed submissions to maintain accuracy and comparability across reporting periods.

Number of Terminations Performed, Q1 of Each Year 2021-2025		
Year	Total Count	Indiana Resident Count (%)
Q1 of 2021	2,251	2,130 (94.62%)
Q1 of 2022	2,286	2,159 (94.44%)
Q1 of 2023	1,931	1,549 (80.22%)
Q1 of 2024	45	44 (97.78%)
Q1 of 2025	22	21 (95.45%)

Weeks of Gestation at Time of Termination, Q1 of 2025	
Weeks	Count (%)
≤8 weeks	1 (50.00%)
9-13 weeks	0 (0.00%)
14-20 weeks	1 (50.00%)
≥21 weeks	0 (0.00%)
Total	**2 (100.00%)**

Procedure Type Used to Terminate Pregnancy, Q1 of 2025	
Procedure Type	**Count (%)**
Nonsurgical	1 (50.00%)
Surgical	1 (50.00%)
Total	**2 (100.00%)**

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Introduction

Indiana Reporting Requirements

Reporting requirements regarding terminated pregnancies are governed by Indiana Code § 16-34-2 et seq.,[1] which can be found [on the Indiana General Assembly's website](#).

Terminated pregnancy complications are collected separately from terminated pregnancy reports and have separate quarterly reports.

Table 1 shows the number of reports that met or did not meet the time reporting threshold under Indiana law. For women who were 16 years of age or older at the time of their termination, a report is required to be filed with IDOH within 30 days. For minors who were younger than 16 years of age at the time of their termination, a report is required to be filed with both IDOH and the Indiana Department of Child Services within three days.

Table 1. Timeliness of Submission of Terminated Pregnancy Reports, Q1 of 2025	
16 Years of Age or Older **Report to IDOH**	**Count (% of Total Reported to IDOH)**
Reported within 30 days	2 (100.00%)
Reported after 30 days	0 (0.00%)
Under 16 Years of Age **Report to IDOH**	
Reported within 3 days	0 (0.00%)
Reported after 3 days	0 (0.00%)
Total Reported to IDOH	**2 (100.00%)**
Under 16 Years of Age **Report to DCS**	**Count (%)**
Reported within 3 days	0 (0.00%)
Reported after 3 days	0 (0.00%)
Total Reported to DCS	**0 (0.00%)**

Methodology

Methods

This report includes analyses of certain demographic information provided by patients and medical information collected from reports. Self-reported demographic information collected in the report includes age, marital status, education level, race and ethnicity, ZIP code of residence, county of residence, and state of residence. Some information collected on terminated pregnancy reports is not represented in this quarterly report because of the potential for patient identification.

Medically relevant information collected from the patient and reported to IDOH also includes the patient's number of previous live births of children who are still living, the number of previous live births of children who are deceased, the number of previous spontaneous terminations (i.e., miscarriages), and the number of previously induced terminations (excluding the termination being reported). Patients are asked to list the years of previous spontaneous and induced terminations, and the date last normal menses began.

Other medical information collected on reports regarding the termination is provided by the physician. This information includes:

- Date of termination
- Whether a pathological exam was performed
- Estimate of the gestational age and post-fertilization age
- The method used to estimate or determine gestational age and post-fertilization age
- Type of procedure
- Fetus delivered alive
- Complications of the termination
- Reason for termination

Additional information collected includes the name of the facility where the termination was performed, the city or town where the termination occurred, the county where the termination occurred, the physician's full name, address, and signature, and the age of the father, if known.

Measures

The categorization of data is based on CDC standards.[2] Physicians report both the post-fertilization age and gestational age of the fetus, but the two are calculated differently. Gestational age measures the age of the fetus from the first day of the mother's last menstrual period, whereas post-fertilization age measures the age of the fetus from the actual date of conception or fertilization. Since fertilization generally occurs about two weeks after the first day of the last menstrual period, the gestational age is typically about two weeks greater than the post-fertilization age. For instance, if a fetus is 10 weeks by gestational age, its post-fertilization

age is approximately 8 weeks. The Indiana Code refers to post-fertilization age, but gestational age is more commonly used in epidemiological analyses. Both measures are represented in this report.

Analytic Procedures

Data was pulled from the IDOH DRIVE (Database Registration for Indiana's Vital Events) system using Structure Query Language (SQL). To ensure data accuracy, the dataset was checked for potential errors and duplicates using patient identification numbers and date of termination. SAS Statistical Software 9.4 was used to calculate counts and percentages. Graphs were made using Microsoft Excel.

Results

Trends in Indiana

Figure 1 depicts the number of terminations reported in Indiana and the number of terminations reported by Indiana residents, comparing the reporting quarter to the same quarter in previous years.[1]

Figure 1. Terminations Reported in Indiana, Q1 of Each Year 2021-2025

Year	Indiana Resident	Total Terminations
Q1, 2021	2130	2251
Q1, 2022	2159	2286
Q1, 2023	1549	1931
Q1, 2024	44	45
Q1, 2025	21	22

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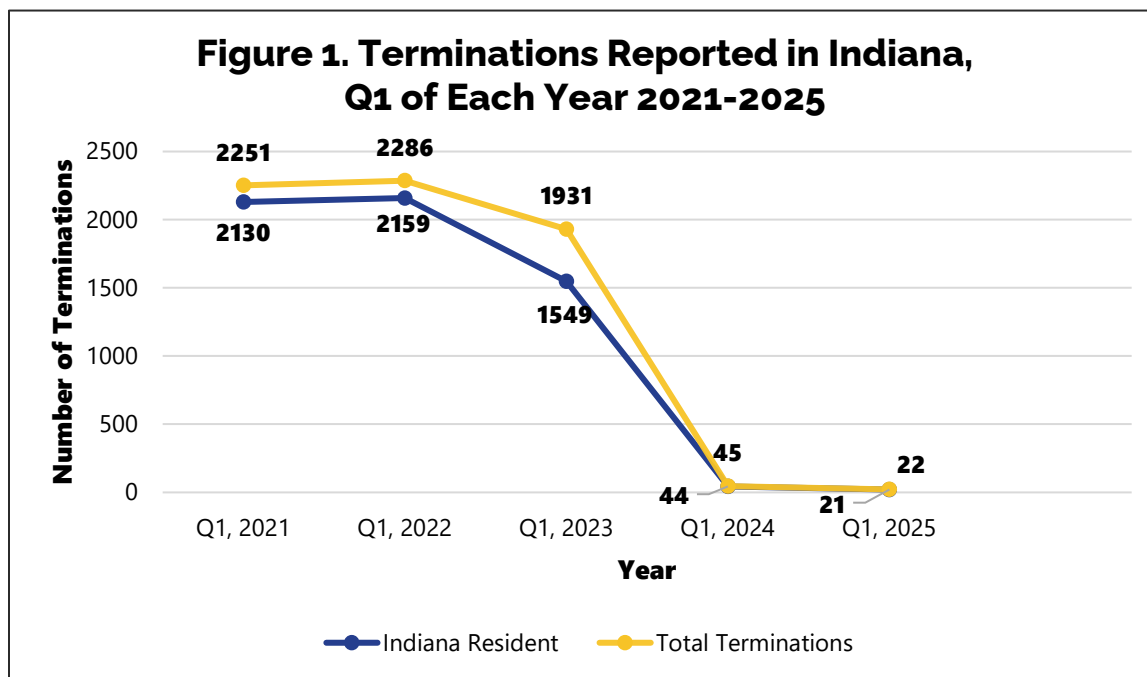
[1] The 20 submissions via email contained patient residency information and have been included Figure 1.

Figure 2 depicts the number of terminations reported in Indiana and the number of terminations reported by Indiana residents, comparing the reporting quarter to the previous four quarters.[2]

Figure 2. Terminations Reported in Indiana in the Last Five Quarters, Q1 2024-Q1 2025
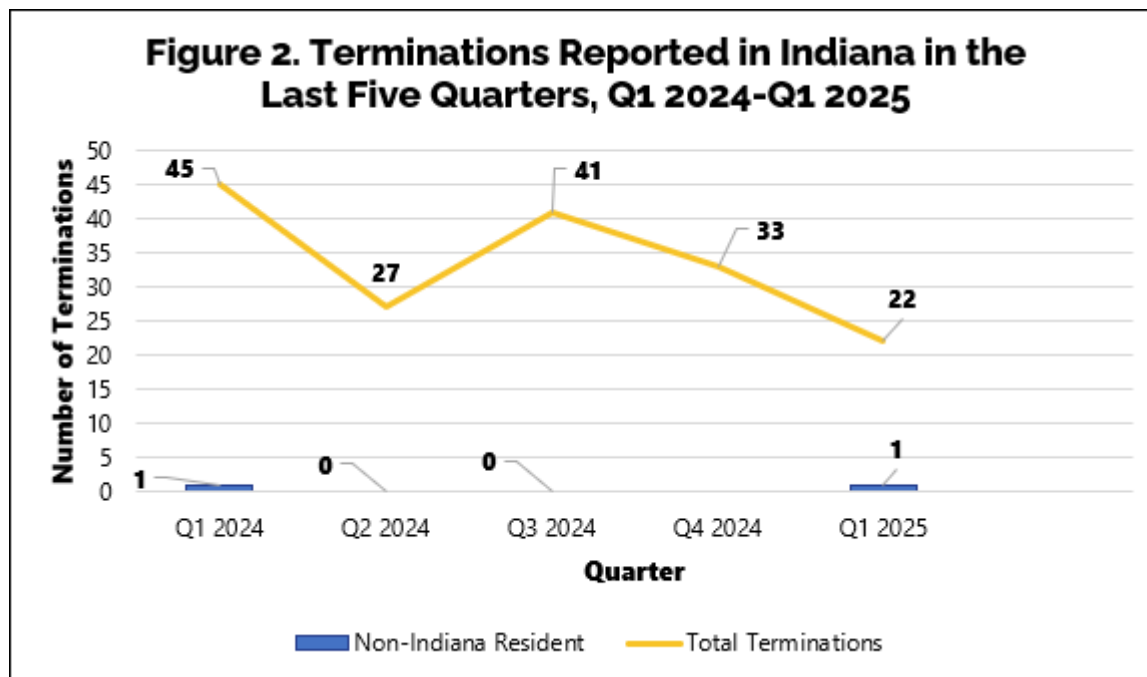

Table 2 shows the percentage of Indiana residents of childbearing age who terminated a pregnancy in the reporting quarter and provides comparative data from the same quarter in previous years.

Table 2. Rate of Reported Terminations Among Indiana Residents of Childbearing Age Occurring, Q1 of 2025 and the Previous Four Years			
Year	**Count**	**Population Est.†**	**Rate***
Q1, 2021	2,130	1,328,151	1.60
Q1, 2022	2,159	1,333,576	1.62
Q1, 2023	1,549	1,334,793	1.16
Q1, 2024	44	1,334,793**	0.03
Q1, 2025	21	1,334,793**	0.02
*Rate is per 1,000. (Indiana had terminations in age ranging from 13-44 years). **A single-year estimate for this age and gender group is not yet available, so 2023 data is used. †Population estimates of females aged 15-44 that were Indiana residents during specified year[3]			

Table 3* provides a breakdown by month of the number of terminations that occurred in Indiana in the reporting quarter.

Table 3: Number of Women Obtaining Terminations by Month, Q1 of 2025	
Month	**Total Terminations** **(n = 22)**
January	2
February	7
March	13
* For the 20 reports submitted via email, the counts reflect the month in which each report was submitted to IDOH.	

Demographic Information of Women Obtaining Terminations

Demographic information collected and analyzed for this report includes age, race, ethnicity, marital status, and education level of the women obtaining terminations in Indiana in the reporting quarter.

Age

Table 4 shows the age distribution of women who obtained terminations in the reporting quarter and the overall number of live births in Indiana for each age group in the reporting quarter.

Table 4. Age Distribution of Women Who Obtained Terminations, Q1 of 2025		
Age of mother, years	**Count (%)**	**Count of Live Births in Q1 2025***
< 16	0 (0.00%)	31
16-24	1 (50.00%)	4,546
25-34	1 (50.00%)	11,464
35-44	0 (0.00%)	2,923
≥ 45	0 (0.00%)	36
Unknown	0 (0.00%)	1
Total	**2 (100.00%)**	**19,001**
*Birth counts for 2025 are preliminary and are current as of 5/23/2025.		

Race and Ethnicity

Table 5. Race and Ethnicity of Women Who Obtained Terminations, Q1 of 2025	
Race	**Count (%)**
White	2 (100.00%)
Black / African American	0 (0.00%)
Asian	0 (0.00%)
American Indian / Alaska Native	0 (0.00%)
Pacific Islander / Native Hawaiian	0 (0.00%)
Multiple Races	0 (0.00%)
Other	0 (0.00%)
Unknown	0 (0.00%)
Total	**2 (100.00%)**
Ethnicity	**Count (%)**
Non-Hispanic / Non-Latino	2 (100.00%)
Hispanic / Latino	0 (0.00%)
Ethnicity Unknown	0 (0.00%)
Total	**2 (100.00%)**

Education and Marital Status

Table 6. Marital Status of Women Who Obtained Terminations, Q1 of 2025	
Marital Status	**Count (%)**
Unmarried	2 (100.00%)
Married	0 (0.00%)
Divorced	0 (0.00%)
Separated	0 (0.00%)
Total	**2 (100.00%)**

Table 7. Education Level of Women Who Obtained Terminations, Q1 of 2025	
Education Level	**Count (%)**
8th Grade or Less	0 (0.00%)
9th to 12th Grade, No Diploma	1 (50.00%)
High School Diploma or GED	0 (0.00%)
Some College Credit, No Degree	0 (0.00%)
Associate degree	0 (0.00%)
Bachelor's Degree	0 (0.00%)
Master's Degree	0 (0.00%)
Doctoral or Professional Degree	0 (0.00%)
Unknown	1 (50.00%)
Total	**2 (100.00%)**

Pregnancy History of Women Obtaining Terminations

Table 8 shows the pregnancy and termination history of women who obtained a termination in the reporting quarter. Four data points are represented. First, women were asked if they have had a previous live birth and, if so, how many of those children are still living. Second, women were asked if any of those children were now deceased. Third, women were asked if they had any previous spontaneous terminations, such as a miscarriage or other fetal death. Fourth, women were asked if they had any previously induced terminations.

Table 8. Pregnancy and Termination History of Women Obtaining Terminations, Q1 of 2025	
Pregnancy History	**Count (%)**
Previous Live Births Still Living	
0	0 (0.00%)
1	1 (50.00%)
2	1 (50.00%)
≥3	0 (0.00%)
Unknown	0 (0.00%)
Total	**2 (100.00%)**
Previous Live Births Now Deceased	
0	1 (50.00%)
1	1 (50.00%)
2	0 (0.00%)
≥3	0 (0.00%)
Unknown	0 (0.00%)
Total	**2 (100.00%)**
Termination History	**Count (%)**
Previous Spontaneous Terminations	
0	2 (100.00%)
1	0 (0.00%)
2	0 (0.00%)
≥3	0 (0.00%)
Unknown	0 (0.00%)
Total	**2 (100.00%)**
Previous Induced Terminations	
0	2 (100.00%)
1	0 (0.00%)
2	0 (0.00%)
≥3	0 (0.00%)
Unknown	0 (0.00%)
Total	**2 (100.00%)**

Medical Information of Women Obtaining Terminations

Estimated Gestational Age

Physicians report estimated gestation and post-fertilization age on all reports. The Indiana Code uses post-fertilization age as the legal metric for fetal age, whereas gestational age is used for epidemiological analysis. Table 9 shows the gestational age at the time of termination for the reporting quarter.

Table 9. Weeks of Gestation at Time of Termination, Q1 of 2025	
Number of Weeks	**Count (%)**
≤8 weeks	1 (50.00%)
9-13 weeks	0 (0.00%)
14-20 weeks	1 (50.00%)
≥21 weeks	0 (0.00%)
Total	**2 (100.00%)**

Procedure Type

Terminated pregnancies are classified as either medical (nonsurgical) or surgical. Table 10 shows the number of medical and surgical procedures used to terminate a pregnancy in the reporting quarter, and if the procedure type was medical, the type of medication used in the procedure.

Table 10. Number of Terminations by Procedure Type, Q1 of 2025	
Procedure Type	**Count (%)**
Medical (Nonsurgical)	
Utilizing Misoprostol and/or Mifepristone	1 (50.00%)
Utilizing Intracardiac Injections	0 (0.00%)
Surgical	1 (50.00%)
Total	**2 (100.00%)**

The one termination procedures utilizing misoprostol and/or mifepristone was marked as "Not Applicable" for both having received and signed the manufacturer's instructions and patient agreement.

Table 11 shows the number of terminations by procedure type and weeks gestation, the measure most commonly used in epidemiological analysis.

Table 11. Number of Terminations by Weeks of Gestation and Procedure Type, Q1 of 2025	
Procedure Type and Timeframe	**Count (%)**
Medical (Nonsurgical)	
≤8 weeks	0 (0.00%)
>8 weeks	1 (50.00%)
Surgical	
≤8 weeks	1 (50.00%)
>8 weeks	0 (0.00%)
Total	**2 (100.00%)**

Procedure Type by Facility

Table 12 provides the number of terminations performed by each reporting facility in the reporting quarter.

Table 12. Terminations Reported by Facility, Q1 of 2025					
Facility Type	**Facility**	**County**	**Medical**	**Surgical**	**Total**
Acute Care Hospital	Good Samaritan Hospital	Knox	0 (0.00%)	1 (50.00%)	1 (50.00%)
	The Women's Hospital	Warrick	1 (50.00%)	0 (0.00%)	1 (50.00%)
Total			**1 (50.00%)**	**1 (50.00%)**	**2 (100.00%)**

Reason for Abortion

Table 13 shows the number of terminations categorized by the reason for abortion.

Table 13. Reason for Abortion, Q1 of 2025	
Reason for Abortion	**Total Count (%)**
Lethal Fetal Anomaly	0 (0.00%)
Serious health risk/life of the pregnant woman	2 (100.00%)
Rape/Incest	0 (0.00%)
Total	**2 (100.00%)**

Additional Information

| Table 14: Additional Information, Q1 of 2025 ||
Metric	Total Count
Number of Terminations Where the Fetus Was Born Alive	0
Number of Terminations Performed After 20 Weeks of Post-Fertilization Age	0
Number of Terminations Performed After 20 Weeks of Post-Fertilization Age Where a Second Attending Physician Was Present	0

Limitations

The data in this report is taken only from terminated pregnancy reports submitted to the IDOH. If a termination occurs but is not reported to the IDOH Division of Vital Records, this data would not be captured in the report.

Demographic information and pregnancy history are self-reported by the patient, so incomplete or incorrect information may be reported by the patient and reflected in this report. Patients also can refuse to answer questions that are asked at hospitals and facilities. This results in unknown values when the provider is filling out the form.

The information contained in this report is a snapshot of the data held by IDOH on the report date. Providers can amend records after they are initially submitted to IDOH, and amendments submitted after the report date will not be reflected in this report. These amendments will be reflected in future reports published by IDOH.

Additionally, duplicate data entries can occur if a patient were to present to a different facility or see a different practitioner for follow-up treatment. If the follow-up practitioner is required to perform an additional procedure related to the termination, and he or she is unaware that a terminated pregnancy report has already been filed related to the termination, the practitioner or facility may file a second, duplicate report to document the additional procedure. This could artificially inflate the termination counts listed in this report. Education and recommendations are distributed and communicated to providers to mitigate these data entry errors.

Finally, since the launch of the DRIVE system in June 2022, data comparisons to previous years can be difficult because additional categorization options were made available in the reporting form. For example, the marriage categories — previously "married" and "unmarried" — now match what is currently collected for IDOH's birth, death, and fetal death modules — "married," "unmarried," "separated," and "divorced." Additionally, the race and ethnicity categories have been expanded to include a more diverse population which reflects what the Centers for Disease Control and Prevention recommend for race and ethnicity categories.

References

1) Indiana Code. Retrieved from https://iga.in.gov/laws/2024/ic/titles/16 - 16-34-2

2) Mortality and Mortality Weekly Report (MMWR) Abortion Surveillance, United States, 2021. Retrieved from
https://www.cdc.gov/mmwr/volumes/72/ss/ss7209a1.htm

3) Single-Race Population Estimated, CDC WONDER Online Database, August 2021. Retrieved from https://wonder.cdc.gov/single-race-population.html