PROVIDING CARE POST DOBBS

Best Practices for Trainees
In recent months, healthcare providers have been struggling to understand the implications of Dobbs on their medical practice. Many states have rushed to impose abortion bans and restrictions, with some openly discussing the possibility of prosecuting anyone who receives or provides an abortion. This has exacerbated pregnant peoples’ already uneven access to abortions and caused confusion about how these laws might limit healthcare providers from providing reproductive healthcare.

Trainees at hospitals that do not offer procedural reproductive health training or who work in cities too saturated with other learners may want to advocate for their programs to establish outside elective rotations and/or apply resident-controlled patient care funds to create such opportunities. However, away rotations take time to plan and implement and require significant financial and personnel resources.

In the following pages, best practices were submitted by members of Doctors for America (DFA) and the Committee of Interns and Residents (CIR).
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Doctors for America (DFA) mobilizes doctors and medical students to be leaders in putting patients over politics on the pressing issues of the day to improve the health of our patients, communities, and nation. We envision a healthy America for everyone and, to get there, we believe:

1) Every person in America has a fundamental right to equitable, high-quality, and affordable health care;
2) Everyone should have the opportunity to lead a healthy life;
3) Every part of society should value and promote healthy families and communities; and
4) Doctors should take a leadership role in improving health care and ending health disparities.

Within Doctors for America, our Health Justice & Equity Impact area organizes around equitable affordable access to reproductive care. We believe this care is not only part of basic, necessary healthcare, but a human right. Our goal is to advocate for healthcare policies that protect reproductive rights for all patients, and make access to abortion, birth control and healthcare more accessible.

How to engage with DFA: https://doctorsforamerica.org/get-involved/become-a-member/

Committee of Interns & Residents

CIR represents over 30,000 residents and fellows across the United States, many of whom perform abortions or care for patients who are capable of becoming pregnant. Reproductive justice is a critical part of CIR’s grassroots advocacy and SEIU’s policy agenda. While both SEIU and CIR rightly acknowledge that other organizations and community partners who are longtime advocates for reproductive justice need to lead the response to the Dobbs decision. Healthcare unions play an essential role in supporting, organizing, and activating the workers that provide reproductive healthcare and are directly impacted by abortion bans. By developing a resource to facilitate abortion training opportunities, CIR can contribute valuable labor expertise to the reproductive justice movement and potentially help galvanize an influential constituency.

How to engage with CIR/How to organize your worksite: https://www.cirseiui.org/organize/
External Training
Best Practices

TRAVEL LOGISTICS

Most common format for training outside your home institution is an away elective. This is dedicated time where your host institution has allotted for you to be off campus and has agreed to continue paying your salary. It is important that your host institution, at a minimum, knows what you are leaving campus to do and, at a maximum, actively supports your wanting to gain skills in abortion care. Members submitted stories that host institutions have placed trainees on administrative leave or actively barred funding support because members attempted to pursue abortion training without the host institution’s knowledge.

Travel costs may or may not be up to you depending on where you plan to pursue additional training. If you are pursuing training through one of the programs listed below, your travel costs are often covered. If not, it may be worth budgeting for travel at the start of your intern year.

LIABILITY INSURANCE

Most all abortion training opportunities not on your home campus will require that you come with your own malpractice coverage. Members cited examples of their home institution continuing to cover them while they rotated elsewhere while others had to seek malpractice insurance on their own. Malpractice coverage for a 4-week rotation averages.

PREPARING FOR THE ELECTIVE

Stage in training often dictates how learning objectives are set. You will likely need to set out learning objectives for the rotation and communicate them to your home institution in order to develop an agreement between your training site and your home institution. These learning objectives may be subject to change.

Some skills our members thought may be helpful in preparing for the elective include:

- Dating/first trimester ultrasounds
- Counseling on birth control options
- Understanding cervical prep- even to know what it is
- Understanding trauma-informed care

LICENSING

In order to practice abortion in a different state than your home institution, you must be licensed in that state. Some abortion training programs will cover the cost of that license, others may not. State licensing fees and process times highly vary.
Below are a list of the organizational partners:

- RHEDI
- [Unite for Reproductive & Gender Equity](https://urge.org) (URGE)
- [Reproductive Health Access Project](https://rhap.org) (RHAP)
- [Training in Early Abortion for Comprehensive Healthcare](https://teachabortion.org) (TEACH)
- [Medical Students for Choice](https://medstudentsforchoice.org)
- [The Ryan Residency Training Program](https://ryanresidency.org)
- [Planned Parenthood](https://www.plannedparenthood.org)
- [Midwest Access Project](https://midwestaccess.org)
- [National Abortion Federation](https://naf.org)
- [NARAL](https://nara1.org)
- [Whole Women’s Health](https://wholewomenshealth.org)
- [National Network of Abortion Funds](https://abortionfunds.org)
- [Liberate Abortion](https://liberateabortion.org)
# Away Electives & Scholarships

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<tr>
<th>Sponsoring Org(s)</th>
<th>How Much</th>
<th>Application Information</th>
<th>Eligibility</th>
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<tr>
<td>CIR/Obstetricians for Reproductive Justice Abortion Fund</td>
<td>Up to $2000</td>
<td>Application</td>
<td>Reside in the US and be enrolled in an accredited residency program in a state that has abortion bans (or where abortion bans have passed but are temporarily blocked): Texas, Missouri, Alabama, Georgia, Mississippi, Tennessee, Kentucky, Louisiana, West Virginia, Oklahoma, Arkansas, Arizona, Florida, Idaho, South Dakota, North Dakota, Montana, Wyoming, Iowa, Indiana, Ohio, Utah, and Wisconsin. Be in good standing in their residency program. Possess the desire to provide abortion care after residency training, either medication or surgical. The applicant can be from any medical specialty, so long as they are accepted into an accredited U.S. residency program that agrees to train them.</td>
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<td>Midwest Access Project Clinical Training Program</td>
<td>The cost of lodging, travel, and a stipend for when you’re there (specific amount dependent on training location and length of rotation which is 2-4 weeks) Trainees are expected to have their own malpractice coverage *Out of state license as needed,</td>
<td>Application</td>
<td>All students, residents, physicians, and advanced practice clinicians in need of training are eligible. MAP learns about the individual, their professional goals, training needs, and desired training location. If accepted, MAP pairs trainees with a reproductive health provider within MAP’s network of training sites throughout the midwest region. The average training rotation length is 2-4 weeks, depending on the professional goals of each learner.</td>
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<td>Medical Students for Choice (MSFC)</td>
<td>MSFC offers three programs to support medical students in gaining clinical exposure to abortion. The programs/externships vary in time and financial support</td>
<td>Application</td>
<td>For medical students in the United States. Some exceptions have been made to bring in resident physician trainees as well. Exceptions are site-dependent.</td>
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Other Trainings/Curricular Resources

Reproductive Health Education in Family Medicine (RHEDI) has an abortion training roadmap that offers tips on how to think about abortion training based on your stage of training.

Abortion Training Centers: The Clinical Abortion Training Centers are a consortium of abortion clinics that seek to increase the number of trained abortion health care workers in the United States. The training centers were developed for physicians and advanced practice clinicians that were unable to obtain abortion training during their education or residency and for those who are seeking to refresh or augment their clinical skills. Partnered with Creating a Clinician Corps, the Clinical Abortion Training Centers are a collaboration between Planned Parenthood Affiliate clinics and independent clinics.

Training in Early Abortion for Comprehensive Healthcare (TEACH) Abortion Training Curriculum: The TEACH Abortion Training Curriculum is an all-inclusive interactive curriculum with tools to train new reproductive health providers to competence. Linked in the TEACH Abortion Training Curriculum is a list of fellowships and job search websites as well.
American Medical Student Association Training

AMSA Hands-on Training: The American Medical Students Association hosts hands-on manual vacuum aspiration training (papaya workshops) with medical schools and residency programs across the country. The abortion care and reproductive health project also offers resources on advocacy, films to watch with your cohort, and links to mentors.

Abortion Training Opportunities

CME California Medication Abortion online course: https://abortionpillcme.teachtraining.org/
Innovating Education abortion course: https://www.innovating-education.org/course/the-abortion-course/

Thank you to all who helped contribute to the creation of this resource.