SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

A public report providing statistics compiled from all abortions reported to DHEC

2019



INTRODUCTION

SC Code of Law 44-41-60 requires that all abortions performed in the state be reported to the South Carolina Department of Health and Environment Control (SC DHEC). This report contains the data reported to SC DHEC, Vital Statistics, for abortions performed in South Carolina in 2019 as required by SC Code of Law 44-41-460.

To comply with changes required by South Carolina statute, Vital Statistics adopted a new form on September 25, 2017. This report is based on data collected utilizing this form.

Table 1.

Abortions by Probable Postfertilization Age (Weeks) by Year, South Carolina, 2017* - 2019

Year Total		otal 6 or less weeks		7 - 13 weeks		14 - 19 weeks		20 - 23 weeks		24 or more weeks	
I Cai	real Total		Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
2019	5,101	2,323	45.5	2,748	53.9	25	0.5	5	0.1	-	0
2018	4,646	2,050	44.1	2,579	55.5	11	0.2	6	0.1	-	0
2017*	1,237	544	44.0	691	55.9	2	0.2	-	0	-	0

^{*}Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 2.

Ultrasound Used to Determine Probable Postfertilization Age by Year, South Carolina, 2017* - 2019

Year	Total	tal Yes		N	0	Unknown	
I Gai	าบเลา	Number	Percent	Number	Percent	Number	Percent
2019	5,101	5,101	100.0	-	0	-	0
2018	4,646	4,646	100.0	-	0	-	0
2017*	1,237	1,235	99.8	2	0.2	-	0

^{*}Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 3.

Abortions by Method and Probable Postfertilizition Age (Weeks) by Year, South Carolina, 2017* - 2019

			Weeks Gestation					
Year	Method of Abortion	Total	Under 6	7 - 13	14 - 19	20 - 23	24 or more	Unknown
	Total	5,101	2,323	2,748	25	5	-	-
	Dilation and Curettage	598	42	556	_	_	_	_
	Manual Vacuum Aspiration	192	82	110	-	-	-	-
	Electrical Vacuum Aspiration	1,179	369	810	-	-	-	-
	Dilation and Evacuation	22	-	4	17	1	-	-
	Combined Induction Abortion and Dilation and Evacuation	4	-	1	3	-	-	-
2019	Medication Abortion	3,100	1,830	1,267	1	2	-	-
	Induction Abortion with Prostaglandins	5	-	-	3	2	-	-
	Induction Abortion with Intra-Amniotic Instillation	-	-	-	-	-	-	-
	Induction Abortion - other	-	-	-	-	-	-	-
	Hysterotomy / Hysterectomy	1	-	-	1	-	-	-
	Intact Dilation and Extraction (partial birth)	-	-	-	-	-	-	-
	Other	-	-	-	-	-	-	-
	Total	4,646	2,050	2,579	11	6	-	-
	Dilation and Curettage	566	57	509	-	-	-	-
	Manual Vacuum Aspiration	159	77	82	-	-	-	-
	Electrical Vacuum Aspiration	1,323	368	955	-	-	-	-
	Dilation and Evacuation	13	-	6	7	-	-	-
2018	Combined Induction Abortion and Dilation and Evacuation	1	-	-	1	-	-	-
2010	Medication Abortion	2,580	1,548	1,027	2	3	-	-
	Induction Abortion with Prostaglandins	4	-	-	1	3	-	-
	Induction Abortion with Intra-Amniotic Instillation	-	-	-	-	-	-	-
	Induction Abortion - other	-	-	-	-	-	-	-
	Hysterotomy / Hysterectomy Intact Dilation and Extraction (partial birth)	-	-	-	-	-	-	-
	Other	-	_					<u> </u>
				_	_		_	
	Total	1,237	544	691	2	-	-	-
	Dilation and Curettage	128	22	106	-	-	-	_
	Manual Vacuum Aspiration	89	39	50	-	-	-	-
	Electrical Vacuum Aspiration	300	66	234	-	-	-	-
	Dilation and Evacuation	5	-	4	1	-	-	-
	Combined Induction Abortion and Dilation and Evacuation	-	-	-	-	-	-	-
2017*	Medication Abortion	714	417	296	1	-	-	-
	Induction Abortion with Prostaglandins		-	1	-	-	-	-
	Induction Abortion with Intra-Amniotic Instillation	-	-	-	-	-	-	-
	Induction Abortion - other	-	-	-	-	-	-	-
	Hysterotomy / Hysterectomy	-	-	-	-	-	-	-
	Intact Dilation and Extraction (partial birth)	-	-	-	-	-	-	-
	Other	-	-	-	-	-	-	-
*Includes	Other abortions from September 25, 2017 to December 31, 2017 due to changes requi	ired by statu	te in the data	- collection fo	- orm	-	-	

^{*}Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 4.
Intra-fetal Injection Used in an Attempt to Induce Fetal Demise by Year, South Carolina, 2017* - 2019

Year	Total	Yes		N	0	Unknown	
real	Total	Number	Percent	Number	Percent	Number	Percent
2019	5,101	2	0.0	5,099	100.0	-	0
2018	4,646	5	0.1	4,641	99.9	-	0
2017*	1,237	-	0	1,237	100.0	-	0

*Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 5.
Abortions by Maternal Age
South Carolina, 2017 - 2019

Age Group	2019		20	18	2017	
Age Group	Number	Percent	Number	Percent	Number	Percent
Total	5,101	100.0	4,646	100.0	5,112	100.0
Under 15	10	0.2	14	0.3	10	0.2
15 - 16	58	1.1	49	1.1	57	1.1
17-19	441	8.7	400	8.6	431	8.4
20-24	1,403	27.5	1,360	29.3	1,500	29.3
25-29	1,500	29.4	1,343	28.9	1,506	29.5
30-34	961	18.8	814	17.5	885	17.3
35 & Over	728	14.3	666	14.3	722	14.1
Unknown	-	0	-	0	1	0.0

Table 6.
Reason for the Abortion if Probable Postfertilization Age is 20 Weeks or More by Year, South Carolina, 2017* - 2019

Year	Total	Medical Emergency		Fetal A	nomaly	Unknown	
Teal	Total	Number	Percent	Number	Percent	Number	Percent
2019	5	3	60.0	2	40.0	-	0
2018	6	-	0	6	100.0	-	0
2017*	-	-	0	-	0	-	0

*Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 7.

Method of Abortion Used that, in Reasonable Medical Judgement, Provided the Best Opportunity for the Unborn Child to Survive, If Probable Postfertilization Age is 20 Weeks or More by Year, South Carolina, 2017* - 2019

Year	Total	Υ	es	١	No	Unk	nown
i eai	real Total		Percent	Number	Percent	Number	Percent
2019	5	3	60.0	2	40.0	-	0
2018	6	6	100.0	-	0	-	0
2017*	-	-	0	-	0	-	0

^{*}Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Table 8.

Was the Basis of the Determination of Method of Abortion Used Provided?

by Year, South Carolina, 2017* - 2019

	Year	Total	Y	es	No		
	i eai	TOlai	Number	Percent	Number	Percent	
	2019	2	2	100.0	-	0	
	2018	-	-	0	-	0	
Γ	2017*	-	-	0	-	0	

^{*}Includes abortions from September 25, 2017 to December 31, 2017 due to changes required by statute in the data collection form.

Appendix

Mohec	REPORT OF INDUCED STATE FILE TERMINATION OF PREGNANCY NUMBER					
Patient's ID Number (Do Not Enter Patient's Name)	2. Age (Last Birthd	ay)		3. Date of F	Pregnancy Termination (Month, Day, Year)	
4. Facility Name	5. City/Town or Loc	cation of Pregnanc	y Termination	6. County o	f Pregnancy Termination	
7. Residence - State or Foreign Country			8. Residence - C	ounty		
☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latina Specify ☐ Asian ☐ Chines ☐ Filiping ☐ Japane	ne enrolled or principal ndian e	Indian or Alaska Native enrolled or principal tribe) an			11. Education (Specify the highest degree or level completed) 8th grade or less 9th -12th grade no diploma High school graduate or GED completed Some college credit, but no degree Associate degree (e.g., AA, AS) Bachelor's degree (e.g., BA, AB, BS) Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA) Doctorate or professional degree (e.g., PhD, MD)	
12. Patient Married? ☐ Yes ☐ No		13. Date Last No	rmal Menses Bega	ın (Month, Day, Ye	ear)	
14. Previous Pregnancies LIVE BIRTHS			OTH	IER TERMINATIO	PINC	
14a. Now Living 14b. Now Dead		Spontaneous ER □ NON		14d. Induce	ed (DO NOT INCLUDE THIS TERMINATION)	
(Pursuant to	Chapter 41, Title 44, of	the Code of Laws	of South Carolina,	1976, as amende	ed)	
15. Was a Determination of Probable Postfertilization Age ☐ YES - Go to question 17 ☐ NO - Go to question 16. Enter the basis of the determination that a medical em Specify:	ergency existed:		Was the reas b. If Medical En woman had a necessitate trisk of substate	on for the abortion nergency, provide a condition which s ne abortion of her intial and irreversi	is 20 or more weeks:	
Go to question 20			Specify:		Go to Question 18c.	
Probable Postfertilization Age 17a. Enter weeks of Probable Postfertilization Age:		11	provided the	best opportunity for	ed one that, in reasonable medical judgment, or the unborn child to survive? I No. Go to question 19	
17b. Was Ultrasound used to determine Probable Postfer If less than 20 weeks Probable Postfertilization Age, g If 20 weeks or MORE Probable Postfertilization Age, g	o to question 20		9. Provide the bas (best opportunit or of the substa	is of the determina y) would pose a g ntial and irreversit ychological or em	ation that termination of the pregnancy in that manner reater risk either of the death of the pregnant woman ole physical impairment of a major bodily function, otional conditions, of the woman than would other	
OS PRIMARY PROGERVING VICENTA TERMINATE E		TERMINATION PR		NITIONIAL DROOF	EDUDEO HOED IE ANN (OHEOK ALL THAT ADDIN)	
20a. PRIMARY PROCEDURE USED TO TERMINATE THE Check Only One Primary Procedure	E PREGNANCY (CHE	CK ONLY ONE) Type of Procedur		ITIONAL PROCE	EDURES USED IF ANY (CHECK ALL THAT APPLY) Check all Additional Procedures Used	
	Dilation	and Curettage (Da	&C)			
	Manu	al Vacuum Aspiration	on			
0						
☐Medication Abortion						
☐Induction Abort	on with Intra-Amniotic	Instillation (such as	s, but not limited to	, saline or urea)	□	
	Intact Dilation	and Extraction (pa	artial birth)			
21. Was an intra-fetal injection used in an attempt to indu	,		· · · · · · · · · · · · · · · · · · ·	`		
ITEM 22 MUST BE COMPLETED FOR EACH PATIENT, REGARDLESS OF 1 ☐ Medical Emergency	CONSENT WAS NOT 0	OBTAINED DUE To			T HAS BEEN COURT ADJUDGED MENTALLY , INFORMED WRITTEN CONSENT OBTAINED ine) 3 □ Legal Guardian 4 □ None of the above	
ITEM 23 MUST BE COMPLETED FOR EACH PATIENT, UNDER 17 YEARS OF AGE, ADDITIONAL INFORMED WRITTEN CONSENT OBTAINED FROM:(check one) The parent Consent of the above Consent of				23b. IF PATIENT	T IS UNDER 17 YEARS OF AGE AND ADDITIONAL LITTEN CONSENT WAS NOT OBTAINED, CHECK W: (check one) ed Minor 4 □ Incest r 5 □ None of the above	
24. Date Report Completed					- V- 17	