

Wyoming Department of Health Vital Statistics Services

2020 Induced Termination of Pregnancy (ITOP) Report

W.S. § 35-6-108(c)

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In response to legislation enacted during the 2019 Wyoming legislative session, the Wyoming State Health Officer notified all Wyoming physicians of changes to Chapter 6 (Abortions) of Title 35 (Public Health and Safety); specifically W.S. 35-6-107 and W.S. 35-1-108, requiring all licensed practitioners in Wyoming to report Induced Termination Of Pregnancy (ITOP) and specific abortion procedure information beginning July 1, 2019.

The requirement directs physicians to submit an ITOP report within twenty days of any abortion procedure. In addition to the physician requirements, these changes also direct the Wyoming Department of Health Vital Statistics Services office to submit an annual report on abortions for public review.

In an effort to confirm the number of procedures reported to the agency during the 2020 calendar year, Vital Statistics Services (VSS) distributed a memorandum to each hospital and medical facility requesting the institution query its electronic health record system for any International Classification of Disease, Tenth Revision (ICD10) code related to any abortion procedure (see **Attachment 1**). As a result, two facilities confirmed their reported numbers and the other facilities confirmed they had none.

The State of Wyoming Vital Statistics Services received ninety-one ITOP reports from two reporting facilities in 2020. Both facilities are classified as a clinic or physician’s office.

Table 1: Residency and Procedures

Procedures Performed	2020 Responses	2019 Responses*
Resident	67	26
Non-Resident	22	5
No Answer (unknown)	2	0
Total Procedures	91	31

* 2019 numbers covered a 6-month period (July to December 2019)

Sixty-seven ITOP procedures were performed for Wyoming residents, with two reports missing information or the residency was unknown (see **Table 1: Residency and Procedures**).

Approximately one-half of the patients requesting the procedure were between the ages of 25-34 years (see **Table 2: Age**), and sixty-one percent of the women reported the procedure was their first (see **Table 3: Number of Procedures**).

Table 2: Age

Age Range	≤ 24	25-34	35 +	Total
Number of Procedures 2020	29	45	17	91
Number of Procedures 2019*	7	18	6	31

* 2019 numbers covered a 6-month period (July to December 2019)

Table 3: Number of Procedures

Number of Previous Procedure(s)	2020 Procedures	2019 Procedures *
0	65	19
1	21	6
2	5	3
≥ 3	0	3
Total	91	31

* 2019 numbers covered a 6-month period (July to December 2019)

Eighty-eight women received the early medical abortion procedure (a nonsurgical abortion), one underwent a surgical dilation and curettage (D&C) procedure and two reports contained no answer (see **Table 4: Method Used**).

Table 4: Method Used

Method Used	2020 Responses	2019 Responses*
Surgical: Dilation and Curettage (D&C)	1	0
Surgical: Hysterectomy/Hysterotomy	0	0
Intrauterine Instillation	0	0
Medical Non-Surgical	88	31
Unknown (No Answer)	2	0
Total	91	31

* 2019 numbers covered a 6-month period (July to December 2019)

No complications were noted on any of the 2020 reports. The gestational age of the fetus for the majority of the procedures was less than or equal to ten weeks; one report contained no answer or the gestational age information was unknown (see **Table 5: Procedures and Gestational Age**).

Table 5: Procedure and Gestational Age

Gestational Age	Procedures 2020	Procedures 2019*
6 weeks or less	49	18
7-10 Weeks	41	13
11 Weeks or more	0	0
No Answer (unknown)	1	0
Total	91	31

* 2019 numbers covered a 6-month period (July to December 2019)

Forty-two patients reported no previous live births, forty-eight reported one or more previous live births, and one report contained no answer (see **Table 6: Number of Previous Live Births**).

Table 6: Number of Previous Live Births

Number of Previous Live Births	2020 Procedures	2019 Procedures*
0	42	17
1	20	5
2	16	7
3	8	1
≥ 4	4	1
No answer (unknown)	1	0
Total	91	31

* 2019 numbers covered a 6-month period (July to December 2019)

Questions regarding this report and the procedures for ITOP reporting may be directed to the State Health Officer or Vital Statistics Services.



 Guy Beaudoin
 Deputy State Registrar

4 June 2021
 Date

Attachment 1: Memorandum to Facilities; Verify ICD10 Code for procedures

Attachment 2: Wyoming Reporting Form dated 2019

cc: State of Wyoming, Legislative Service Office
 Stefan Johansson; Interim Director of Health
 Dr. Alexia Harrist; State Health Officer

gb/cd



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Michael A. Ceballos
Director

Mark Gordon
Governor

February 4, 2021

Ref: ITOP-2021-01

To: Wyoming Clinical Providers

Subject: Induced Termination of Pregnancy Reporting

References:

Wyoming Statute § 35-6-107 Forms for reporting abortions.

Wyoming Statute § 35-6-108 Compilations of abortions; matter of record; exception.

As the Department of Health draws to close the annual reporting of Induced Termination of Pregnancy (ITOP), we request each facility and institution review this past year's medical files to ensure all qualifying procedures are or have been noted, and the appropriate report filed for each qualifying procedure.

Information regarding ITOP reporting requirements may be found at:

<https://health.wyo.gov/admin/vitalstatistics/physicianitop/>

Some Wyoming facilities have run a medical record system query searching the ITOP ICD10 Code to ensure all noted and billable procedures with the qualifying ICD10 Code are identified. This is one option to ensure compliance.

Attached with this memorandum, you will find the ITOP Reporting Form.

If in your reconciliation you find a qualifying procedure, please complete the form and mail the completed report to the office of vital records, the mailing information may be found at the bottom of the reporting form.

Point of contact for this memorandum is the undersigned at 307-777-6042 or guy.beaudoin@wyo.gov.

Respectfully,


Guy Beaudoin
Deputy State Registrar

GB/LH

cc: Alexia Harrist, MD, PhD, State Health Officer, Public Health Division
Stephanie Pyle, MBA, Senior Administrator, Public Health Division

**STATE OF WYOMING
DEPARTMENT OF HEALTH
Report of Induced Termination of Pregnancy (ITOP)**

THIS REPORT IS REQUIRED BY WYOMING STATUTE 35-6-107.

DATE RECEIVED IN STATE OFFICE

1. AGE OF PATIENT		2. DATE OF TERMINATION <i>(Day, Month, Year)</i>	
3. FACILITY TYPE <i>(Office, Hospital, or Clinic)</i>		4. RESIDENCE STATE/COUNTY	
5. RACE <i>(American Indian, Black, White, etc)</i>		6. OF HISPANIC ORIGIN? <i>(Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.)</i> <input type="checkbox"/> NO <input type="checkbox"/> YES Specify _____	
7. PREVIOUS PREGNANCIES <i>(Complete each section)</i>			
LIVE BIRTHS		OTHER TERMINATIONS	
7a. Now Living Number _____ None <input type="checkbox"/>	7b. Now Deceased Number _____ None <input type="checkbox"/>	7c. Spontaneous Number _____ None <input type="checkbox"/>	7d. Induced <i>(Do not include this termination)</i> Number _____ None <input type="checkbox"/>
8. PROCEDURE THAT TERMINATED PREGNANCY <i>(Check only one)</i> <input type="checkbox"/> Suction Curettage <input type="checkbox"/> Medical (Nonsurgical) Specify Medication(s) _____ <input type="checkbox"/> Dilation and Evacuation (D&E) <input type="checkbox"/> Intra-Uterine Instillation (Saline or Prostaglandin) <input type="checkbox"/> Sharp Curettage (D&C) <input type="checkbox"/> Hysterotomy / Hysterectomy <input type="checkbox"/> Other (Specify) _____		9. COMPLICATIONS OF PREGNANCY TERMINATION <i>(Check all that apply)</i> <input type="checkbox"/> None <input type="checkbox"/> Hemorrhage <input type="checkbox"/> Infection <input type="checkbox"/> Uterine Perforation <input type="checkbox"/> Cervical Laceration <input type="checkbox"/> Retained Products <input type="checkbox"/> Other (Specify) _____	
10. WEIGHT OF FETUS IN GRAMS: _____ 10a. LENGTH OF FETUS IN CMs: _____		11. PHYSICIAN'S ESTIMATE OF GESTATION <i>(Weeks)</i>	

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