

Final analytical coding framework

- Patient descriptors of medical abortion pain are varied and complex
 - Severity of pain
 - Quality of pain
 - Comparisons to other reproductive experiences
 - Using comparisons to menstruation pain
 - Using comparisons to labour pain
- Current counselling leaves some unprepared for pain experienced
 - Experiencing less pain than expected
 - Experiencing as much pain as expected
 - Health care contact valued
 - Experiencing more pain than expected
 - The role of health care professions in under preparation
 - The role of patient literature /website material in under preparation
 - The impact of under preparation on pain management strategies
- Greater-than-expected pain negatively impacts method choice
 - Reflections on most recent method 'choice'
 - Preference for surgical abortion in the future
 - Adequate pain counselling as part of informed consent
- Patient-centred counselling recommendations to improve abortion experience and informed choices
 - Recommendations related specifically to pain counselling
 - Timing of analgesia
 - Dosing of analgesia
 - Analgesia and vomiting
 - Pre-cautionary pain medications
 - Desire for transparent, realistic accounts
 - Reassurance for less painful experiences and efficacy
 - Online accounts showing a range of experience
 - Other general advice
 - Being accompanied
 - Being comfortable: Position and movement
 - Being prepared with food
 - Being prepared to not be able to leave the house
 - Being prepared for other side effects and how to manage (e.g the chills and blankets)
 - Having pain medication and hot water bottles ready
 - Having the appropriate menstrual products available for bleeding

Codes outside the final analytic framework

- Management of bleeding and passing the pregnancy
- Personal reflections on home-use of medications
- Emotional support and impact