

TABLE 12

RESIDENT INDUCED ABORTIONS BY ZIP CODE OF PATIENT, OHIO, 2008

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
43001	2	43072	2	43157	1	43244	1
43004	66	43073	1	43160	20	43250	1
43006	1	43074	5	43162	5	43268	2
43007	1	43076	5	43164	5	43279	1
43008	4	43078	28	43168	1	43301	1
43009	4	43080	7	43169	1	43302	61
43010	1	43081	105	43186	1	43310	1
43011	6	43082	17	43197	1	43311	29
43013	1	43085	38	43201	158	43314	2
43014	3	43087	1	43202	60	43315	6
43015	52	43102	4	43203	53	43316	1
43016	48	43103	12	43204	129	43318	4
43017	52	43105	4	43205	64	43319	1
43018	1	43107	3	43206	106	43320	2
43019	6	43109	3	43207	111	43321	1
43020	1	43110	101	43208	3	43324	1
43021	7	43112	3	43209	68	43325	1
43022	1	43113	24	43210	25	43326	11
43023	8	43115	1	43211	97	43328	1
43025	3	43116	1	43212	48	43331	1
43026	77	43119	59	43213	156	43334	7
43028	4	43123	115	43214	38	43338	7
43031	9	43125	20	43215	43	43340	1
43032	1	43126	1	43216	1	43342	1
43035	34	43127	1	43217	14	43343	1
43036	1	43128	4	43219	130	43344	3
43040	41	43129	1	43220	48	43347	1
43044	7	43130	62	43221	53	43348	3
43045	1	43135	6	43222	6	43351	19
43046	7	43137	3	43223	62	43357	2
43050	33	43138	19	43224	120	43358	1
43051	1	43139	1	43225	2	43360	1
43052	1	43140	22	43226	3	43368	1
43054	25	43142	1	43227	98	43402	62
43055	76	43143	8	43228	174	43403	12
43056	24	43144	1	43229	207	43406	2
43060	3	43146	7	43230	91	43410	14
43061	2	43147	57	43231	64	43412	4
43062	34	43148	1	43232	237	43413	1
43064	5	43149	3	43233	1	43414	1
43065	26	43150	2	43234	1	43416	5
43066	3	43151	1	43235	91	43417	1
43067	1	43152	1	43237	2	43420	65
43068	181	43153	2	43240	11	43421	1
43069	1	43154	3	43241	1	43425	1
43071	2	43155	3	43242	1	43426	1

Table 13 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 2)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
43430	3	43551	53	43720	1	43901	2
43431	5	43552	1	43722	2	43906	1
43432	1	43554	3	43723	3	43907	2
43435	2	43556	2	43724	1	43917	1
43440	3	43557	5	43725	22	43920	22
43442	4	43558	23	43728	2	43930	1
43445	1	43560	46	43730	2	43932	3
43447	3	43564	1	43731	4	43937	1
43449	4	43566	8	43732	1	43946	1
43450	11	43567	8	43734	2	43947	2
43451	1	43569	3	43735	1	43950	1
43452	23	43570	3	43740	1	43952	3
43457	1	43571	9	43746	1	43964	2
43460	9	43601	1	43747	3	43968	6
43462	4	43602	6	43748	1	43973	2
43464	2	43604	67	43749	3	43977	3
43465	9	43605	97	43754	1	43985	1
43466	5	43606	89	43756	3	43988	1
43467	1	43607	130	43758	1	44001	41
43468	1	43608	106	43759	1	44002	1
43469	2	43609	109	43760	1	44003	4
43501	1	43610	24	43762	3	44004	58
43502	6	43611	48	43764	5	44005	1
43505	1	43612	117	43766	2	44007	1
43506	9	43613	83	43768	1	44009	1
43511	1	43614	85	43772	3	44010	2
43512	25	43615	149	43773	2	44011	37
43515	9	43616	31	43777	2	44012	38
43516	6	43617	7	43780	1	44016	1
43517	5	43618	2	43783	3	44017	43
43518	3	43619	7	43793	4	44021	8
43519	1	43620	33	43802	1	44022	19
43521	2	43622	1	43804	2	44023	26
43522	6	43623	35	43811	1	44024	28
43526	1	43624	1	43812	10	44026	9
43527	2	43665	1	43821	4	44028	12
43528	36	43668	3	43822	6	44030	33
43532	6	43701	53	43824	7	44031	1
43533	3	43704	1	43830	4	44032	3
43536	1	43709	1	43832	9	44033	2
43537	44	43713	1	43833	1	44034	2
43543	11	43714	1	43837	2	44035	180
43545	11	43716	2	43840	1	44036	2
43547	3	43717	1	43844	2	44037	1
43548	1	43718	1	43845	2	44038	1
43549	1	43719	1	43872	1	44039	55

Table 12 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 3)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
44040	5	44104	377	44155	1	44258	1
44041	22	44105	424	44157	1	44260	23
44042	3	44106	203	44167	1	44262	7
44044	18	44107	271	44170	1	44263	3
44045	3	44108	337	44183	1	44264	1
44046	6	44109	198	44194	2	44265	1
44047	8	44110	250	44195	1	44266	71
44048	5	44111	187	44200	1	44270	12
44050	9	44112	283	44201	9	44272	5
44051	1	44113	111	44202	28	44273	9
44052	111	44114	20	44203	91	44275	4
44053	51	44115	148	44204	2	44276	2
44054	32	44116	36	44205	2	44278	29
44055	79	44117	61	44206	5	44280	5
44056	28	44118	234	44207	1	44281	26
44057	43	44119	77	44211	1	44286	6
44060	105	44120	403	44212	79	44287	9
44062	10	44121	242	44214	2	44288	17
44064	1	44122	106	44215	3	44301	67
44065	5	44123	108	44216	12	44302	33
44067	41	44124	92	44217	10	44303	23
44068	2	44125	178	44218	1	44304	29
44070	79	44126	56	44220	1	44305	90
44071	1	44127	41	44221	78	44306	131
44072	11	44128	322	44222	2	44307	58
44073	1	44129	92	44223	36	44308	2
44074	15	44130	134	44224	60	44309	4
44076	5	44131	28	44230	9	44310	104
44077	133	44132	110	44231	9	44311	61
44081	13	44133	56	44232	1	44312	78
44082	3	44134	101	44233	10	44313	96
44084	10	44135	128	44234	8	44314	69
44085	3	44136	65	44235	1	44315	1
44086	1	44137	206	44236	27	44316	1
44087	53	44138	40	44239	1	44317	2
44089	28	44139	40	44240	129	44319	40
44090	8	44140	19	44241	56	44320	122
44092	51	44141	11	44242	8	44321	27
44093	4	44142	52	44243	11	44323	1
44094	91	44143	75	44245	1	44329	1
44095	72	44144	59	44250	1	44333	19
44099	3	44145	59	44251	3	44338	1
44100	3	44146	217	44253	4	44341	1
44101	5	44147	43	44254	19	44343	1
44102	280	44149	27	44255	10	44347	1
44103	193	44152	1	44256	102	44370	2

Table 12 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 4)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
44381	1	44455	4	44618	6	44702	1
44382	1	44460	35	44620	2	44703	43
44383	1	44468	1	44621	2	44704	17
44390	1	44470	5	44622	26	44705	61
44391	1	44471	20	44623	1	44706	36
44400	1	44473	7	44624	2	44707	29
44401	3	44481	18	44625	3	44708	48
44402	10	44482	1	44626	3	44709	45
44403	8	44483	60	44627	1	44710	32
44404	1	44484	65	44629	1	44714	37
44405	27	44485	67	44632	11	44718	15
44406	33	44490	3	44637	1	44720	45
44407	3	44491	7	44638	3	44721	19
44408	9	44493	1	44641	27	44725	1
44410	31	44501	4	44643	3	44730	5
44411	2	44502	41	44644	6	44804	3
44412	4	44503	2	44645	3	44805	27
44413	14	44504	23	44646	120	44807	3
44415	2	44505	72	44647	28	44810	4
44417	1	44506	11	44651	1	44811	13
44418	1	44507	36	44652	2	44813	9
44420	40	44508	1	44653	1	44814	3
44421	1	44509	67	44654	6	44815	2
44423	4	44510	5	44656	4	44816	1
44425	20	44511	73	44657	9	44817	2
44427	1	44512	83	44659	1	44818	2
44428	3	44513	3	44662	16	44820	19
44429	2	44514	23	44663	47	44822	2
44430	5	44515	67	44666	5	44826	3
44431	7	44517	1	44667	20	44827	7
44432	10	44519	3	44669	3	44830	31
44434	1	44530	1	44671	1	44833	15
44436	6	44547	1	44672	3	44836	2
44437	3	44556	1	44676	6	44837	3
44438	8	44601	53	44677	1	44839	11
44440	8	44602	1	44680	6	44840	5
44441	1	44603	2	44681	1	44842	5
44442	7	44605	1	44682	1	44843	4
44443	4	44606	6	44683	17	44844	1
44444	15	44607	1	44685	37	44846	4
44445	1	44608	3	44688	4	44847	5
44446	60	44609	4	44689	1	44849	3
44449	1	44612	8	44691	55	44851	4
44450	2	44613	5	44695	1	44854	3
44451	5	44614	11	44699	2	44855	1
44452	4	44615	18	44701	4	44856	1

Table 12 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 5)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
44857	29	45042	45	45159	2	45234	2
44859	1	45044	105	45160	1	45235	1
44864	3	45045	1	45162	4	45236	69
44865	7	45050	17	45164	1	45237	107
44866	1	45052	2	45165	1	45238	138
44867	2	45053	3	45167	5	45239	123
44870	104	45054	1	45168	2	45240	156
44874	1	45055	1	45169	4	45241	47
44875	17	45056	52	45171	6	45242	39
44878	3	45062	1	45174	1	45243	19
44880	1	45064	1	45176	15	45244	39
44881	1	45065	9	45177	34	45245	40
44882	1	45066	20	45200	1	45246	55
44883	28	45067	26	45201	2	45247	52
44889	10	45068	8	45202	65	45248	54
44890	7	45069	92	45203	19	45249	26
44901	1	45071	2	45204	24	45251	93
44902	10	45102	41	45205	100	45252	6
44903	49	45103	65	45206	64	45253	1
44904	15	45106	15	45207	47	45255	35
44905	15	45107	16	45208	37	45259	1
44906	22	45108	1	45209	35	45266	1
44907	39	45111	2	45210	3	45277	1
44908	1	45112	1	45211	162	45278	1
44909	1	45113	4	45212	70	45287	1
44951	1	45117	1	45213	56	45290	1
45001	2	45118	2	45214	71	45291	1
45002	22	45120	5	45215	97	45302	4
45004	1	45121	15	45216	38	45303	2
45005	47	45122	25	45217	38	45304	4
45006	1	45123	8	45218	18	45305	6
45011	167	45125	1	45219	92	45308	3
45012	1	45127	1	45220	78	45309	16
45013	92	45130	4	45221	1	45311	6
45014	154	45133	18	45222	1	45314	6
45015	25	45135	6	45223	101	45315	4
45016	1	45137	1	45224	97	45316	1
45022	1	45140	66	45225	89	45318	5
45030	29	45142	4	45226	16	45320	22
45032	1	45144	3	45227	74	45321	3
45033	2	45148	2	45228	1	45322	42
45034	1	45150	54	45229	81	45323	14
45036	40	45152	15	45230	56	45324	110
45039	47	45153	1	45231	170	45325	2
45040	80	45154	12	45232	71	45326	1
45041	1	45157	14	45233	15	45327	11

Table 12 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 6)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
45329	1	45407	3	45629	1	45764	9
45330	1	45408	64	45631	6	45766	4
45331	19	45409	16	45634	2	45769	4
45334	1	45410	33	45638	8	45771	2
45335	6	45413	1	45640	6	45772	1
45338	4	45414	49	45644	2	45775	1
45339	2	45415	25	45646	1	45777	1
45340	1	45416	35	45647	1	45778	1
45341	4	45417	34	45648	2	45779	4
45342	69	45418	19	45651	4	45780	6
45344	24	45419	29	45652	1	45783	1
45345	16	45420	46	45653	1	45801	31
45346	2	45424	114	45656	3	45802	2
45347	7	45426	87	45660	1	45804	28
45348	1	45427	38	45661	6	45805	25
45349	1	45429	34	45662	34	45806	14
45356	34	45430	7	45663	10	45807	10
45358	1	45431	50	45669	1	45810	11
45359	1	45432	29	45672	1	45812	1
45361	1	45433	3	45679	1	45813	1
45362	1	45434	6	45680	3	45814	1
45363	2	45435	2	45681	2	45815	1
45365	18	45439	36	45682	2	45816	1
45368	7	45440	49	45690	12	45817	2
45369	8	45443	1	45692	4	45821	1
45370	2	45449	57	45693	8	45822	12
45371	20	45450	1	45694	7	45827	3
45372	1	45458	56	45695	2	45830	5
45373	46	45459	51	45697	2	45832	2
45377	19	45469	1	45699	1	45833	9
45380	5	45493	1	45701	67	45840	78
45381	13	45500	1	45706	1	45843	3
45382	2	45502	16	45710	2	45844	1
45383	11	45503	64	45711	4	45845	3
45384	8	45504	32	45712	1	45846	1
45385	48	45505	46	45714	3	45848	1
45387	9	45506	31	45716	1	45849	1
45388	1	45508	1	45719	1	45851	1
45389	1	45520	1	45723	4	45853	1
45390	1	45535	1	45724	1	45854	1
45401	2	45540	1	45725	1	45856	6
45402	35	45601	63	45732	4	45858	4
45403	37	45606	1	45740	1	45859	1
45404	32	45612	8	45750	15	45865	2
45405	100	45613	1	45760	2	45866	1
45406	118	45628	4	45761	1	45869	3

Table 12 Resident Induced Abortions by Zip Code of Patient, 2008 (Page 7)

Zip Code	Total	Zip Code	Total	Zip Code	Total	Zip Code	Total
45870	1	45875	2	45882	1	45890	3
45871	3	45877	2	45883	1	45891	10
45872	8	45879	1	45885	9	45895	17
45873	1	45880	2	45887	1	45896	1
45874	1	45881	1	45889	1	45931	1

Confidential Abortion Report

Ohio Department of Health
(Required pursuant to O.A.C. 3701-47-03)

1. Facility name:	For State Use Only
2. Address: Zip code: <input style="width: 50px;" type="text"/>	

GENERAL INFORMATION

3. Zip code of address of the woman: <input style="width: 100%;" type="text"/>	Ohio County of Residence (specify):	Non-Ohio State of Residence (specify):
4. Woman's Identification number: <input style="width: 100%;" type="text"/>	5. Age of woman: <input style="width: 50px;" type="text"/>	6. Education: Specify highest number of years completed <input style="width: 50px;" type="text"/>
7. Marital status: <input type="checkbox"/> Never married <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Unknown	8A. Race or ethnic group: <input type="checkbox"/> White <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Other /Unknown (specify) _____ <input type="checkbox"/> American Indian	8B. Is woman Hispanic? <input type="checkbox"/> Yes <input type="checkbox"/> No

MEDICAL HISTORY

9. Number of living children: <input style="width: 50px;" type="text"/>	10. Date of last live birth: <input style="width: 50px;" type="text"/> m <input style="width: 50px;" type="text"/> d <input style="width: 50px;" type="text"/> y <input style="width: 50px;" type="text"/>
11. Number of prior abortions: Spontaneous <input style="width: 50px;" type="text"/> Induced <input style="width: 50px;" type="text"/>	12. Date of last induced abortion: <input style="width: 50px;" type="text"/> m <input style="width: 50px;" type="text"/> d <input style="width: 50px;" type="text"/> y <input style="width: 50px;" type="text"/>
13. Number of previous pregnancies: <input style="width: 50px;" type="text"/>	14. Contraceptive History: Was the woman practicing contraception at the time of conception? <input type="checkbox"/> Yes <input type="checkbox"/> No. <input type="checkbox"/> Unknown
15. Method. If yes to number 14, what was the method used?: <input type="checkbox"/> Pill, Norplant, Depo-Provera <input type="checkbox"/> Surgical <input type="checkbox"/> Condom, Jelly, Cervical Cap, Sponge, Insert <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Rhythm, Coitus Interruptus	16. First day of last menstrual period: <input style="width: 50px;" type="text"/> m <input style="width: 50px;" type="text"/> d <input style="width: 50px;" type="text"/> y <input style="width: 50px;" type="text"/>
	17. Rh type of woman: <input type="checkbox"/> Negative <input type="checkbox"/> Positive

MEDICAL PROCEDURE

18. Date of Termination: <input style="width: 50px;" type="text"/> m <input style="width: 50px;" type="text"/> d <input style="width: 50px;" type="text"/> y <input style="width: 50px;" type="text"/>	19A. Clinical Estimate of Gestation in weeks: <input style="width: 50px;" type="text"/>	19B. If 19A is 14 or greater, were discharge instructions given as per O.A.C. 3701-47-02? <input type="checkbox"/> YES <input type="checkbox"/> NO
20. Method of Termination: <input type="checkbox"/> Suction Curettage <input type="checkbox"/> Sharp Curettage <input type="checkbox"/> Dilation & Extraction <input type="checkbox"/> Dilation & Evacuation <input type="checkbox"/> Saline/Urea Installation <input type="checkbox"/> Prostaglandin Installation <input type="checkbox"/> Hysterotomy <input type="checkbox"/> Hysterectomy <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Medical (NonSurgical) Specify Medication(s) _____		
21. Medical condition of the woman at the time of the abortion: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Other (specify) _____	22. Type of procedure done immediately after the abortion: <input type="checkbox"/> Sterilization <input type="checkbox"/> None <input type="checkbox"/> Other (specify) _____	
23. Post Abortion Complications (Indicate all): <input type="checkbox"/> None <input type="checkbox"/> Hemorrhage <input type="checkbox"/> Perforation of uterus <input type="checkbox"/> Cervical laceration <input type="checkbox"/> Infection <input type="checkbox"/> Anesthetic <input type="checkbox"/> Failed Abortion <input type="checkbox"/> Incomplete Abortio <input type="checkbox"/> Hematometra <input type="checkbox"/> Death <input type="checkbox"/> Other (specify) _____	24. Type of family planning recommended: <input type="checkbox"/> Pill, Norplant, Depo-Provera <input type="checkbox"/> Condom, Jelly, Cervical Cap, Sponge, Insert <input type="checkbox"/> Rhythm, Coitus Interruptus <input type="checkbox"/> Surgical <input type="checkbox"/> Other (specify) _____	
25. Type of Counseling given: <input type="checkbox"/> Psychological <input type="checkbox"/> Social Service <input type="checkbox"/> Pastoral <input type="checkbox"/> Medical <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> None		
26. Physician's name (Type or print):	M.D. D.O.	Physician's Signature: _____ Date: _____

**Send completed forms to:
OHIO DEPARTMENT OF HEALTH,
CONFIDENTIAL REPORTS A,
P.O. BOX 118, COLUMBUS, OHIO 43216**

