Guidance note for completing the HSA1 and HSA2 abortion forms

This guidance is intended to help doctors and clinic staff in completing the HSA1 and HSA2 abortion forms.

General notes

Sample forms can be downloaded from the Department of Health website via the DH abortion webpage. HSA1 forms can be downloaded as a PDF or a word document, HSA2 forms as a PDF.

HSA1 (Certificate A)

Completing the form

Form HSA1 must be completed, signed and dated by two registered medical practitioners before an abortion is performed under Section 1 (1) of the Abortion Act 1967. The HSA1 form must be kept with the patient notes for 3 years from the date of termination.

Section 1

Practitioner terminating the pregnancy

The form must be completed by both practitioners certifying their opinion, formed in good faith, that at least one and the same ground for abortion in section 1(1) of the 1967 Act exists.\(^1\) The certification takes place in the light of their clinical judgement of the circumstances of the pregnant woman's individual case. It is not necessary to provide a General Medical Council (GMC) registration number.

Please ensure that the form contains:

- the full address of the place at which the patient was seen or examined.

In addition that the practitioner has:

- Indicated whether he/she has or has not seen and examined the pregnant woman to whom the certificate relates by deleting as appropriate.

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Patient details

Please ensure that the section asking for patient details contains the full name and usual place of residence of the woman undergoing the termination. This section must be completed in block capitals.

Grounds for termination

Please indicate by circling the appropriate letter a), b), c), d) or e) on which grounds the termination was carried out.

Finally, the form needs to be signed and dated by both practitioners before the termination is performed.

Please note, these forms should not be forwarded to the Chief Medical Officer. It is a legal requirement for the clinic to keep these forms for three years from the date of the termination.

Certification is replicated on form HSA4 therefore the HSA1 and HSA4 forms need to be checked locally for consistency.

NOTE: except in emergencies, two doctors must certify their good faith opinion that the termination meets at least one and the same ground set out in the Act, given the information that they have about the woman’s circumstances. Certifying doctors are expected to have enough evidence of the woman’s circumstances to justify that they were able to form a good faith opinion that the ground for the termination exists.

If there is evidence that a certifying doctor has not formed an opinion in good faith, then those performing the termination are not protected by the Act and may have potentially committed a criminal offence by terminating the pregnancy. The doctors involved may also be acting contrary to their professional duties.

Failure to meet the certification requirements or properly complete HSA1 may be a breach of the Abortion Regulations.

HSA2 (Certificate B) – Certificate to be completed in relation to abortion performed in emergency under Section 1 (4) of the Act.

Section 1

Practitioner terminating the pregnancy

Please provide full name, qualifications and address of the practitioner responsible for the termination under emergency conditions. Please also complete the declaration as appropriate.
Patient’s details

Please provide the full name and usual place of residence of the patient.

Form HSA2 should only be completed in relation to abortion performed in emergency under section 1 (4) of the Abortion Act. (see below)

The form must be completed by a registered medical practitioner certifying their opinion, formed in good faith, that the circumstances in which abortion can be performed in an emergency existed, i.e. the abortion is immediately necessary:

1) to save the life of the pregnant woman; or
2) to prevent grave permanent injury to the physical or mental health of the pregnant woman.

Please ring as appropriate whether the termination is being performed under circumstance 1) or 2).

The certificate of opinion must be given:

A) Before commencement of the treatment for the termination of the pregnancy to which it relates;
B) Alternatively, if that is not reasonably practicable, then no later than 24 hours after the termination.

Please ring as appropriate.

Failure to meet the certification requirements or properly complete HSA2 may be a breach of the Abortion Regulations.

This form is not to be destroyed within three years of the date of the termination.

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