

Supplementary Table S1. Medication pack for medical abortion at home.

*FSRH = Faculty of Sexual and Reproductive Healthcare UK.

Abortion medications	<p>Mifepristone 200mg Oral</p> <p>24-48 hours later</p> <p>Misoprostol 800micrograms sublingual/vaginal/buccal (per patient preference)</p> <p>Plus a further 1 x 400micrograms of misoprostol if no bleeding within 4 hours of first dose</p> <p>For 10-11+6 weeks only: a further 400micrograms of misoprostol if not passed pregnancy by 4 hours of last dose</p> <p><10 weeks provided 1200 mcg misoprostol total and 10-11+6 weeks provided 1600 mcg misoprostol total</p>
Analgesia	<p>Dihydrocodeine 30mg</p> <p>Women advised to purchase their own supply of paracetamol and ibuprofen.</p>
Antibiotics	Doxycycline 100mg twice daily for 7 days
Antiemetic (if required)	Cyclizine 50mg oral
Confirmation of abortion	Low Sensitivity Urine Pregnancy Test 1000iu at 14 days
Contraception	<p>Pills, patches, rings and condoms supplied in pack. Combined hormonal methods issued in accordance with FSRH* advice.</p> <p>Long acting reversible contraceptives provided at rapid access clinic and bridging method offered.</p>
Information	Detailed step-by-step information provided as written leaflet included in pack.

Supplementary Table S2. Topic Guide

Topics	Focus/Prompts: indicative questions	
Introductions	<ul style="list-style-type: none"> • Researcher to reiterate the study aims • Researcher to explain that the interview will start with some general questions about the participant, then begin the actual interview - explain that the sorts of things we will cover in the interview • Researcher to explain that they are happy for the participant to decide what they talk about, and emphasise that they don't need to talk about anything they don't want to. Remind the participant that they are free to refuse to answer any questions, or to withdraw at any time during the interview, without giving an explanation. • Researcher to explain that they will check in every so often to make sure that the participant is happy to carry on. • Researcher to reiterate that what the participant tells them is confidential and their name will be removed from transcripts and any details that might identify them will not be included in the final transcripts or any of the reports/papers that are written. • Researcher will invite the participant to ask any further questions before starting the interview. 	
Consent	<p>The consent form will be read out and the participant will be asked to agree to each statement. This consent process will be audio recorded.</p> <p>Sample script for consent in telephone interviews</p> <p>“As this interview is by phone I will read through the consent form with you and if ask you to say if you agree to the statements. I will need to audio record your responses but if at the end of that or during those questions you decide not to take part in the research I will stop the recording and delete it. If you are happy to go ahead at this time I will now begin this part of the process”.</p> <p>Researcher then reads aloud the consent form and ask for a response from the potential participant after each statement.</p>	
Role	<p>What is your role as a healthcare professional? E.g. doctor/nurse?</p> <p>How long have you been doctor/nurse?</p> <p>How long have you worked in abortion care? Lead into main Qs</p>	
Experience of Teleconsultation	Opening	Can you tell me about your experience of delivering abortion care/the service using telephone consultations?
	Information	<p>Able to provide all the information you want to patients via telephone?</p> <p>Different to face to face experience – in providing the information?</p> <p>What information sources do you direct them to? E.g. website/leaflet</p>

	Communication	<p>How does the telephone consultation compare to a face-to-face consultation?</p> <p>Do you feel like you and the patients understand each other clearly?</p> <p>How do you think the fact that there are no non-verbal cues affects the consultation? – communication, connection etc</p> <p>Do you think it changes ability to successfully screen for intimate partner violence?</p> <p>Different if video consultation rather than phone?</p>
	Practicalities	<p>How did you prepare for your telephone consultation?</p> <p>How would you advise a member of staff to prepare for the telephone consultation?</p> <p>What impact do you think telephone consultations have on access to the service?</p> <p>Timing – during day. Would this work if women were at work?</p>
	Ultrasound	How do you feel about patients not having a scan?
	Contraception counselling	Are you satisfied with the contraception counselling and provision you are able to offer?
	COVID-19	Any issues for women that you became aware of that related to COVID-19
Support	Pre/post treatment	<p>Do you feel that enough support is provided before and after the teleconsult?</p> <p>Should the website or information sheet be changed?</p> <p>Do you do Choices follow-up? Has it changed since starting telemedicine?</p>
	Counselling	Are you able to provide sufficient counselling to patients to help them make decisions? Should we offer more?
Introduction of telemed		<p>How were told that the change to the telemed service would be implemented? Who, when...</p> <p>How was it explained to you?</p> <p>How did you feel when you first told?</p>
Training		<p>What training did you receive to do telephone consults?</p> <p>Did you find it useful?</p> <p>Is there anything you would have changed?</p>

	Have you identified further training needs?
Work satisfaction	Do you feel that your role has changed since telemed started? How has your workload changed since? Has it had any impact on how you feel about your work – rewarding, satisfaction, stress?
The Future	If this was a telemedicine service without COVID-19 – do you think it would be different? Should we continue to deliver the abortion service via telephone? What would be good about doing this? What would you change about it if it was continued and why?
Close	Thanks Brief summary of interview discussion Ensure interviewee has opportunity to add comments/ask questions Seek feedback on the interview experience Check if participant want end of research summary and if so how this should be sent.