**Background and Hypothesis**: Changes in healthcare legislation may have unintended consequences for patient care at the individual level. Following the Supreme Court case Dobbs vs Jackson Women’s Health Organization in 2022 resulting in the reversal of Roe V. Wade, many states enacted new abortion legislation. Currently, there are many restrictions and barriers to abortion and reproductive care that may limit access across the country. Given the volatile political environment surrounding abortion legislation, there may be some confusion among clinicians about the legality of abortion and miscarriage care. Abortion legislation and restriction may have an impact on other areas of healthcare, including prescription patterns of Category X medications in women of childbearing age. Based on the current legislation, we hypothesize that prescription rates of Category X medications will decrease while prescription rates of birth control methods will increase.

**Project Methods**: Real world data on prescribing patterns will be obtained from IUH Cerner database and the Cerner Learning Health Network. Demographic information including age, race and insurance status will be obtained. Data will be analyzed to assess trends in prescription patterns for women of childbearing age that correlate with dates of changing abortion legislation.

**Potential Impact**: The findings from this study will help direct future research on medication prescription and administration in people of childbearing age. Results may also inform future policy changes surrounding women’s healthcare.