

## **Improving Nursing Care of the Patient Experiencing Miscarriage: Increasing Nurses Comfort Through Staff and Patient Education**

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**Abstract Background Information:** Nurses working in the post anesthesia care unit (PACU) in the outpatient surgery center at a large academic Medical Center provide care for patients who undergo dilation and curettage (D&C) for a miscarriage (ie., pregnancy loss before 20 weeks gestation). In 2024, we learned that discharge instructions for patients undergoing a D&C in the outpatient PACU contained little information about education or support services that addressed the psychological aspects of miscarriage. We conducted a survey with clinical staff, asking them to rate their comfort with caring for post operative D&C patients on a scale of one to five (extremely comfortable - extremely uncomfortable). Eleven out of 28 (39.3%) responded either “uncomfortable” or “extremely uncomfortable”. Anecdotally, staff reported feeling uncomfortable because of lack of experience and concerns about saying the wrong thing to a patient during a highly vulnerable time.

**Objectives of Project:** The goal of this project was to improve nurses’ comfort in providing appropriate care to post operative D&C patients.

**Process of Implementation:** The implementation was focused on enhancing education to both nurses and patients. Nursing education was provided by the hospital's labor and delivery bereavement coordinator, who has expertise in providing support for this specific patient population. We used this education to guide revision of our post operative D&C discharge instructions, which now include a focus on psychosocial impacts of D&C and resources for follow up mental health care. Last, we created a bereavement kit for nurses to provide to post operative D&C patients which included information from the revised discharge instructions and keepsakes for parents.

**Statement of Successful Practice:** Following implementation, only 10% (1/10) surveyed reported discomfort with caring for postoperative D&C patients, and this individual reported a personal history that was driving their discomfort.

**Implications for Advancing the Practice of Perianesthesia Nursing:** Ensuring that our post anesthesia care unit nurses had appropriate information to guide the care of patients following a miscarriage was instrumental in improving nurses comfort caring for this population. Given that approximately 1 in every four pregnancies ends in miscarriage in the US, it is critical that nurses have appropriate resources to provide support for this vulnerable population.