Abstract

Background and Purpose: More than one million pregnant people will experience a first trimester early pregnancy loss in the United States annually. In-office management of early pregnancy loss, without a transfer of care, has the potential to streamline the process and decrease patient distress, as well as decreasing costs for both the patient and the health care system at large. The purpose of this quality improvement project was to familiarize providers on the appropriate use of evidence-based management options for early pregnancy loss.

Methods: This project utilized a non-experimental, correlational design with unmatched groups assessed before and after the intervention. The intervention was an early pregnancy loss management workshop. Pre- and post-intervention surveys were assessed for a change in knowledge using an independent t-test and post-intervention surveys were assessed for intention to provide and workshop satisfaction using descriptive statistics.

Results: Surveys from a total of 134 pre-test and 29 post-test participants who attended one of the Reproductive Health Access Project’s early pregnancy loss workshops were used to assess the data. Post-test participants scored better than pre-test participants on an early pregnancy loss knowledge survey. The change was statistically significant and represented a 34.02% improvement in scores. Post-test participants rated the presentation favorably, with two-thirds rating it as excellent, and all 29 post-test participants agreed that the presentation was balanced and evidence-based and that the presentation met their learning needs.

Conclusions: Given the prevalence of early pregnancy loss, providers have a responsibility to their patients to be aware of the various early pregnancy loss management options available. This project found statistically significant increases in knowledge for participants after the workshop, as well as providing useful information on the impact of the workshop for intention to provide early pregnancy loss care.

Key Words: early pregnancy loss, miscarriage, spontaneous abortion, misoprostol, mifepristone