TEAMM Training, Education, & Advocacy in Miscarriage Management

Office-Based Miscarriage Management: An Opportunity for Patient-Centered Care

Who can benefit?

What would you tell each of these patients?

What options would you offer them?

Janet C is 22 years old, excited about her first pregnancy and eager to do all the right things to have a healthy baby. But now, in her third month, she has started to bleed and has pelvic pain. She calls in a panic. You tell her to come in immediately. In the office, an ultrasound shows a residual gestational sac.

Lola M, 36, mother of two, is in your office for a routine prenatal visit. She's in her third month, expecting this pregnancy to be as uneventful as her previous ones. But your ultrasound exam reveals that her fetus has no heartbeat.

Case examples from: Godfrey EM, Leeman L, Lossy P. Early pregnancy loss needn't require a trip to the hospital. The Journal of Family Practice. 2009;58(11):585-590.

What is the TEAMM?

TEAMM teaches primary care providers (nurse practitioners, certified nurse midwives, physician assistants and family medicine physicians) and support staff how to integrate miscarriage management (MM) into the primary care setting. Miscarriage is common, experienced by one in four women during their reproductive years. Historically, it has been managed by specialists in the operating room with dilation & curettage (D&C) and general anesthesia. However, best clinical evidence supports offering women a choice of management options, including office-based management with medication or manual vacuum aspiration (MVA) with local anesthesia. TEAMM teaches full-spectrum miscarriage care through a multi-faceted & systems approach: didactic, experiential, and hands-on learning involves the entire team of clinicians and support staff involved in patient care. Our goal is to assist you in improving patient care at your site.

Papaya Workshop, TEAMM

What do participants say?

"Great combination of knowledge and skills"

"The training eased any of the hesitations I had about this service"

"The hands-on part let [us] see just how easy the procedure is"

Resident Physicians

"I will rewrite our miscarriage management materials with this excellent up-to-date information"

"I will advocate for this to become standard CNM scope of practice wherever I end up working"

Certified Nurse Midwives

"I liked learning the process step-by-step"

"This really helps me to envision my future role re: MVA in our clinic"

"This helped us come up with a plan that will work for our clinic"

Nursing and Administrative Staff

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How does the TEAMM training work?

Training includes a half-day didactic and a hands-on session. It is appropriate for clinicians, administrative and clinical support staff who interact with patients experiencing miscarriage. Two follow-up trainings focus specifically on clinical and administrative support staff roles. Clinician "champions" are encouraged to attend as well.*

Training components	Length	Who should attend?
Didactic with hands-on papaya workshop	4 hours	Entire site team which may include: clinicians, support staff, administrative staff
Support staff session #1 This session typically takes place 1 month after the initial didactic session and covers topics such as: ♦ Manual Vacuum Aspirator (MVA) equipment (use & processing) ♦ FAQ's about miscarriage ♦ Case studies and role plays ♦ Preparing the physical plant ♦ How to support patients	3 hours	Depending on provider configuration at site: support staff, support staff manager, clinician champion
Support staff session # 2 Tailored to the specific needs of your site: This session is scheduled after your site has worked to integrate information from previous session into your outpatient clinic service. Focus is on honing protocols, working through clinic flow issues, optimizing patient support, and providing technical assistance.	3 hours	Depending on provider configuration at site: support staff, support staff manager, clinician champion

Our training model

We know it is difficult to free up clinician and staff time in a busy clinic. Our training model rests on the knowledge that it takes a team of dedicated, informed personnel to care for each patient. Our systems approach addresses key implementation issues that go beyond and complement clinical knowledge to achieve full integration of miscarriage management services at your site.

*Each site is asked to identify a clinician " champion" and a support staff "champion." These are individuals who have an interest in implementing office-based miscarriage management.

If interested in the TEAMM project, please contact us at teamm@uw.edu

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