

Helpful Tips for ER/ED on Miscarriage & Stillbirth



♥ MAKE A CHECKLIST

Have a checklist of what staff is responsible for. Knowing exactly what their responsibilities are relieves staff stress as far as legal responsibilities and allows them to better focus on the needs of the patient.

Nursing staff should know exactly what their responsibilities are regarding:

- 1) obtaining the products of conception properly,
- 2) procedures for containment,
- 3) paperwork, and
- 4) delivery to the lab

If you use the Rachel's Gift **miscarriage resource** (described below under "Provide a Keepsake") make sure the location of the resource is communicated and is on said checklist so staff members don't forget to give one to the patient with the rest of their discharge paperwork.

♥ TERMINOLOGY PRECAUTIONS

Be cautious of using medical terms in front of the patient and patient's family. Consider using the term "miscarriage" instead of "spontaneous abortion." Consider "stillbirth" instead of "fetal demise." Your choice of words can cause further trauma.

♥ UTILIZE COLLEAGUES

Utilize Labor & Delivery staff and/or Chaplain staff. Attempt to get someone from Labor & Delivery involved as they have resources and have had training on interaction and care for patient and baby. They are aware they have been asked to be a resource for the ER/ED and are willing to help you better care for the patient.

♥ UTILIZE MISCARRIAGE KITS

Send a miscarriage kit home with your patient. Consider utilizing miscarriage kits to send home with patients who are actively miscarrying. Kits like the ones available through Heaven's Gain include gentle guidance (in English or Spanish) and all necessary supplies for home care. Miscarriage kits can be purchased online at heavensgain.org/miscarriage-kits.

♥ HONOR THE BODY

Medically, it may be considered "products of conception," but to your patient, this was their child. **Do not put in hazardous waste bag or metal container.** Wrap in a blanket and get someone from Labor and Delivery involved, or refer to your checklist as mentioned above.

♥ ACKNOWLEDGE THE LOSS

Say, "I'm so sorry for your loss." Do not avoid the fact your patient has lost a child they were expecting. No more than that is necessary - just an acknowledgement.

♥ PROVIDE A KEEPSAKE

Give moms, at the very least, a miscarriage card (produced by Rachel's Gift) with their paperwork. This acknowledges their loss and gives them a place to go after they are home if they need further assistance. You can request these cards by emailing info@rachelsgift.org.

Tips provided by the Education Department of Rachel's Gift, Inc. For more info, please contact info@rachelsgift.org.

Additional Recommendations



♥ DON'T AVOID

Don't avoid the fact that this is a pregnancy loss. Acknowledge the loss that goes along with it. Simply saying "I'm so sorry for your loss" is sufficient.

♥ BE SINCERE

With all of your interaction with the parents just being sincere and showing compassion towards their loss is the most important. This will make the patient much more comfortable than if they are given just a stoic, businesslike attitude which comes across as very un-caring.

♥ DON'T COMPARE

Don't ever compare her loss to anyone else's even if the circumstances were very comparable. For these few hours the world should revolve around her and her loss. Just letting her know at some point she is not alone is enough to hint there are others out there that have been in a similar situation.

♥ DON'T MINIMIZE

We don't ever want to minimize the loss by saying things like, "You are young, you can try again." Or "At least you have your other children at home waiting for you." This implies that baby's are replaceable and that there was nothing special about this specific one. Also, she may never be able to have another one. The reason she lost this one may be a medical condition that will prohibit her from successfully giving birth to a child.

♥ DON'T SAY

We never want to offer clichés that sound prophetic, they really can do more harm than good. ("Everything happens for a reason", "Now you have an angel in heaven to watch over you.", "It was probably for the best, something must have been wrong.", "Time heals all wounds.", "God must have needed another angel in heaven.")

♥ SAY

So what do we say? The safest, best thing to stick to is "I'm sorry". It can be that simple or variations such as "I'm so sorry you are going through this, I can't imagine." "I am so very sorry you lost Erin." "I am so sorry, I can't imagine what you are going through." Anything similar to that is fine.

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