

D&E

Goal: To practice the skill of a second trimester Dilation & Evacuation

Description: A D&E (dilation and evacuation) abortion, is a surgical procedure usually performed between 13 and 24 weeks of gestation. A paracervical block and cervical dilation are completed first to prepare for the procedure. Next, a manual vacuum aspirator (MVA) is used to complete an amniotomy, an intentional rupture of the amniotic sac. Finally, forceps are used to remove fetal/placental tissue from the uterus. Several passes with the forceps may be needed to ensure complete removal of all tissue.

Supplies:

- a. 1 assembled ***Pelvic Model*** – 2nd trimester
- b. 1 prepared ***Uterine Model*** – 2nd trimester
- c. 1 speculum
- d. 1 tenaculum
- e. 1 set of cervical dilators
- f. Cannulas of assorted sizes
- g. Forceps
- h. 1 Manual Vacuum Aspirator

Steps:

1. Place the speculum into the model and visualize the cervix
2. Use the tenaculum to grasp the anterior lip of the cervix (12 o'clock position)
3. Dilate the cervix using sequential dilators until obtaining dilation equivalent to the cannula which will be used
 - o D&E will require dilation to a larger size than a D&C
4. Assemble the MVA with a cannula, pull back the plunger to create suction and lock in place
5. Perform an amniotomy using the MVA by inserting the cannula into the uterus and perform suction as would be done for a first-trimester aspiration abortion, rotate the cannula during the suction to aspirate the amniotic fluid
6. Remove the MVA
7. Insert the forceps into the uterus and use them to grasp the nerf darts and hardboiled egg (simulating removing the fetal tissue)
 - o Make sure to insert the forceps in the closed position before opening them inside the uterus
8. Continue to remove additional tissue until all fetal parts are removed (4 nerf darts, 1 entire hardboiled egg)
9. Remove all tools from the model

Performance Checklist

D&E
Ring or Allis on anterior lip
Attempts to perform amniotomy with MVA
Introduces graspers into the uterus <ul style="list-style-type: none">• Introduces forceps closed• Opens forceps widely when past internal cervical os
Appropriate hand grip on forceps
Extracts material from uterus using appropriate technique
Removes all intrauterine material (may require multiple passes)
Verbalizes checking material for completion

Citations:

- Handbook of Contraception and Sexual Reproductive Healthcare – Chapter 43: Surgical Methods for Termination of Pregnancy by Teresa Bombas.
https://books.google.com/books?id=mg5oEAAAQBAJ&pg=PA293&lpg=PA293&dq=perform+an+amniotomy+with+an+MVA&source=bl&ots=L_lGAE0KLI&sig=ACfU3U2B6-0XNOkE7u81h4xg2jAI3wYzVg&hl=en&sa=X&ved=2ahUKEwjD_oql4tn_AhXfkokEHTGPDsEQ6AF6BAgkEAM#v=onepage&q=perform%20an%20amniotomy%20with%20an%20MVA&f=false
- Innovating Education in Reproductive Health: Dilation and Evacuation:
<https://www.innovating-education.org/2022/03/dilation-and-evacuation-animation/>
- National Abortion Federation Clinical Policy Guidelines:
<https://prochoice.org/providers/quality-standards/>