

Editorial Note: This article abstract describes a pilot abortion training program from UCSF. The class trains physician assistants and certain nurses to perform uterine aspiration abortions, also known as vacuum or suction abortions.

The crash-course in abortion was accompanied by a written exam. According to the report, 38 trainees achieved “competency” to safely perform aspiration abortions, after performing a minimum of 40 procedures in an average of 6 days. See highlighted info on page 2.

Original document below is found online at: <http://onlinelibrary.wiley.com/doi/10.1111/j.1542-2011.2012.00182.x/abstract>

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Midwives and Abortion Care: A Model for Achieving Competency

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Issue



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Throughout history, the care of women's reproductive health needs has included termination of unwanted pregnancy. Unfortunately, access to safe first-trimester abortion is restricted by a lack of skilled providers. In an effort to provide data-based evidence and increase access to first-trimester abortion care in California, the [University of California, San Francisco](#), under the auspices of the Health Workforce Pilot Program, developed a competency-based training model to increase the number of certified nurse-midwives, nurse practitioners, and physician assistants who can provide uterine aspiration. This article describes the training program, which uses a curriculum comprising both self-directed didactic material and supervised clinical experience with a minimum of 40 procedures. Successful completion of the program requires passing a written examination and satisfactory achievement of a competency-based clinical assessment. Thirty-eight trainees have completed the training to date, achieving competency following an average of 6 training days. Competency development in the clinical area is monitored by both the trainer and the trainee, using daily and final competency assessments in 4 domains: patient comfort, procedural completeness, speed, and ability to identify problems. Analysis of complications is used to identify concerns about clinician safety. The availability of a competency-based training curriculum for uterine aspiration has the potential to increase the number of first-trimester abortion providers by making training available to experienced clinicians, including nurse-midwives, who would like to provide this care.