

SCOPE DEFINITION

Guideline Title: *Early pregnancy loss*

Scope framework	
Population	<p><i>Which group of people will the guideline be applicable to?</i></p> <p>Pregnant women experiencing or at risk of pregnancy loss before 20 weeks</p>
Purpose	<p><i>How will the guideline support evidence-based decision-making on the topic?</i></p> <p>Identify relevant evidence related to pregnancy loss before 20 weeks:</p> <ul style="list-style-type: none"> • Diagnosis by type • Assessment • Management
Outcome	<p><i>What will be achieved if the guideline is followed? (This is not a statement about measurable changes / not SMART goals)</i></p> <p>Support evidence informed:</p> <ul style="list-style-type: none"> • Assessment of women at risk of early pregnancy loss • Diagnosis of type of early pregnancy loss • Investigations to confirm diagnosis • Identification of treatment relevant to type of early pregnancy loss • Psychological support for the woman/family
Exclusions	<p><i>What is not included/addressed within the guideline</i></p> <ul style="list-style-type: none"> • Termination of pregnancy • Pregnancy loss after 20 weeks • Management of anaesthesia • Usual or standard care outlined in the Queensland Clinical Guideline <i>Standard care</i>

Clinical questions

Question	Likely Content/Headings/Document Flow
Introduction	<ul style="list-style-type: none"> • Clinical standards • Presentation for care
<p>1. What are the types of early pregnancy loss and how are they diagnosed?</p>	<ul style="list-style-type: none"> • Assessment <ul style="list-style-type: none"> ○ History ○ Signs and symptoms ○ Confirmation of pregnancy ○ Examination • Viability and location <ul style="list-style-type: none"> ○ Transvaginal and/or abdominal ultrasound ○ Serum βhCG ○ Serial βhCG assessment ○ Pregnancy of unknown location
<p>2. What management is recommended for each type of EPL?</p>	<ul style="list-style-type: none"> • Haemodynamically unstable • Ectopic pregnancy <ul style="list-style-type: none"> ○ Expectant ○ Medical ○ Surgical • Non-viable intrauterine pregnancy <ul style="list-style-type: none"> ○ Expectant ○ Medical ○ Surgical • Second trimester loss • Gestational trophoblastic disease
<p>3. What care is recommended during and following early pregnancy loss?</p>	<ul style="list-style-type: none"> • Rh D immunoglobulin • Tissue sample collection for histology • Follow up <ul style="list-style-type: none"> ○ Frequency • Psychological support/counselling options • Recurrent pregnancy loss • After care advice <ul style="list-style-type: none"> ○ Support referrals (e.g. SANDS, Bonnie Babes) ○ Investigation results ○ Next pregnancy advice • Sensitive disposal of fetal tissue/remains • Other specialised investigations (e.g. cytogenetics)

Potential areas for audit focus (to be refined during development)

Audit items will relate to the desired outcomes and the clinical questions

1. Proportion of women offered medical, surgical or expectant management according to suitability criteria (as outlined in the guideline)
2. The proportion of women diagnosed with Gestational Trophoblastic Disease who were referred to the Queensland Trophoblast Centre (GTC)
3. Of the women for whom Rh D was indicated, the proportion of Rh D negative women who received Rh D immunoglobulin
4. The proportion of women having non-surgical management (i.e. medical or expectant management) who are offered histopathology of products of conception
5. The experiences of women who receive care for early pregnancy loss