Assessment of suspected early pregnancy loss

**Clinical presentation**
- Pregnancy < 20 weeks
- PV bleeding and/or
- Pain (abdominal, shoulder tip)

**Haemodynamically stable?**

**Yes**

**Assessment**
- History
- Confirm pregnancy
- Physical Exam
- Serial β-hCG
- USS (TVS preferred)
- FBC and blood group
- MSU as indicated
- STI screen as indicated

**Ectopic pregnancy**
- Refer to flowchart: Ectopic pregnancy

**Unknown location**

**Intrauterine**

**Pregnancy viable?**

**Yes**

**Individualise pregnancy care**

**Stable non-viable IUP**
- Refer to flowchart: Stable intrauterine non-viable pregnancy

**No**

**Gestational Trophoblast Disease**
- Suction curettage
- Register with QTC
- Evaluate for persistent trophoblastic disease
- Serial β-hCG
- Recommend effective contraception
- Prolonged follow-up
- Early referral in next pregnancy

**Resuscitation**
- Initiate resuscitation
- Speculum exam
  - Remove any POC
  - Urgent
    - β-hCG
    - Gynaecology review
    - USS
    - FBC, Group + Hold
  - Consider surgical intervention

**PUL**
- Specialist review and follow-up essential
- Serial β-hCG
- Serial TVS

Refer to flowchart: Assessment of location and viability in suspected early pregnancy loss