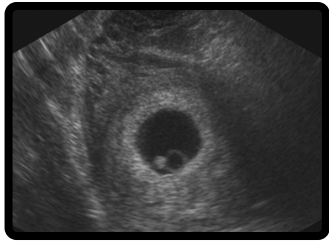


# Rule Out Ectopic in the Emergency Department



intrauterine gestational sac with yolk sac



pseudogestational sac in ectopic pregnancy with no yolk sac and free fluid

**Rule out Ectopic**  
Early pregnancy **and** Abdominal pain **or** Vaginal bleeding **or** Syncope

**Stable?**  
Vital signs

**Resuscitate**  
sonography vs. OR vs. CT if stabilized

**Fertility Therapy?**

**OB Assessment**  
Ultrasound

patients undergoing fertility therapy are at higher risk of heterotopic pregnancy and other dangerous conditions such as ovarian hyper-stimulation syndrome

**Trans-abdominal Sonography**

**IUP?**

IUP = intrauterine gestational sac surrounding yolk sac **or** embryo **and it's in the uterus** = myometrial mantle > 8mm

**Free fluid?**

**Recheck Vitals**  
Close monitoring, TVUS, OB assessment, ectopic until proven otherwise

**Trans-vaginal Sonography**

**IUP?**

IUP = intrauterine gestational sac surrounding yolk sac **or** embryo **and it's in the uterus** = myometrial mantle > 8mm

**Evidence of ectopic?**  
adnexal mass  
significant free fluid

**OB Assessment**

**Pregnancy of Undetermined Location**  
Send quantitative beta  
Repeat ultrasound and beta in 24-48h  
Strict ectopic precautions  
Consider Rho(D) IG  
  
Consider prompt OB assessment if ectopic risk factors or severe pain/bleeding

**Ectopic risk factors**  
Prior ectopic  
History of PID  
Tubal surgery or disease  
Pregnant after BTL, IUD  
Exposure to DES in utero  
Strongly unilateral pain

**Consider alternate dangerous causes of patient's symptoms**  
e.g.  
Appendicitis  
Pyelonephritis  
PID

**Ectopic precautions**  
Return to the ER immediately if increased bleeding, feeling dizzy, fainting, fever.

**New diagnosis pregnancy?**  
Prenatal Vitamin  
Review medications for pregnancy risk  
Counsel regarding usual symptoms of pregnancy, abstaining from bad habits  
OB f/u

**Discharge**

**Ectopic excluded**  
Routine antenatal f/u  
Consider Rho(D) IG

**Consider alternate dangerous causes of patient's symptoms**  
e.g.  
Appendicitis  
Pyelonephritis  
PID

**Ectopic excluded**  
Routine antenatal f/u  
Consider Rho(D) IG