

**STANDARD ORDERS
for Treatment of Early
Pregnancy Failure with
Intravaginal Misoprostol**

(addressograph)

Indications

A. Anembryonic Gestation

1. Fetal pole between 5-40mm on U/S without cardiac activity
2. Anembryonic gestational sac with Mean diameter between 16-45mm
3. Growth of gestational sac by less than 2mm over 5 days or less than 3mm over 7 days
4. Increase of quantitative Bhcg of less than 15% over 2 days with yolk sac on U/S

B. Incomplete / Inevitable Abortion

1. Passage of products of conception with residual anteroposterior endometrial lining exceeding 30mm on TVUS and uterine size less than 13wks
2. Intrauterine gestational sac of less than 45mm or fetal pole of less than 40mm with open internal cervical os on digital exam with active pv bleeding

Exclusions

- Hemodynamically unstable
- Anemia hgb less than 95
- History of clotting disorder
- Using anticoagulants (not including ASA)
- Allergy to prostaglandins or NSAIDS
- Previously underwent medical or surgical abortion during current pregnancy

Protocol

First Visit

- CBC, Rh (treat if Rh negative)
- Quantitative Bhcg
- Review U/S as above
- Consent understood and signed
- 800 micrograms of misoprostol inserted per vaginum into posterior fornix

Day 3

- If expulsion not complete (i.e. Gestational sac still visible or endometrial lining greater than 30mm on TVUS), second dose of 800 micrograms of misoprostol per vaginum

Day 8

- If expulsion not complete, vacuum aspiration offered

References

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