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Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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# Bleeding and abdominal pain in early pregnancy

## Early Pregnancy Unit



# Bleeding and abdominal pain in early pregnancy

Patient information leaflet for women who present with bleeding and pain in early pregnancy up to 12 weeks gestation.

This includes women who may or may not have had a first trimester scan.

## Early Pregnancy Unit opening hours

Open: Monday to Friday 0900-1600  
USS scanning hours: Monday to Friday 0900-1230  
Phone: 01932 722662  
Fax: 01932 722270

## What does vaginal bleeding and / or pain mean for me in pregnancy?

Vaginal bleeding and or pain in early pregnancy are common and don't always mean there is a problem. However, it may be a warning sign of a miscarriage or other early pregnancy problems.

## What is the cause?

For most women, bleeding and pain in pregnancy may resolve and the pregnancy continues without any problems. Possible causes include miscarriage, an ectopic or molar pregnancy. There are other non-pregnancy related causes of pain like muscular pain, urinary tract infection or surgical problems. These non-pregnancy related conditions are not discussed in this leaflet.

## You can get further information and advice from:

Association of Early Pregnancy Units (AEPU)  
<http://www.aepu.org.uk/>

Miscarriage Association  
<https://www.miscarriageassociation.org.uk/>

National Institute for Health & Care Excellence (NICE) Ectopic Pregnancy and Miscarriage  
<https://www.nice.org.uk/guidance/cg154>

NHS 111 Service  
<http://www.nhs.uk/NHSEngland/AboutNHSservices/Emergencyandurgentcareservices/Pages/NHS-111.aspx>

Royal College of Obstetrics and Gynaecology  
<https://www.rcog.org.uk/en/patients/patient-leaflets/bleeding-and-pain-in-early-pregnancy/>  
<https://www.rcog.org.uk/en/guidelines-research-services/guidelines/gtg21/>

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## Further Information

We endeavor to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email [patient.advice@asph.nhs.uk](mailto:patient.advice@asph.nhs.uk). If you remain concerned, the team can also advise upon how to make a formal complaint.

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- A complete miscarriage where all the pregnancy tissue has already been passed. This is more common if you have had very heavy bleeding. It is not uncommon for the pregnancy test to be positive 1-2 weeks after a miscarriage.
- An ectopic pregnancy that has not yet been seen on the scan. This could be due to various reasons. This occurs in 1-2% of women.

**When you are given a diagnosis of (PoUL), it is important you listen carefully to the instructions the doctor or nurse will give you and ensure you keep your follow up appointment until we are certain about the location and outcome of the pregnancy.**

**Remember you can return to our emergency department if the bleeding or pain gets more severe or you feel very unwell.**

## **What will you do to find out what is happening to my pregnancy?**

If you have presented to our Emergency department, you will be asked about your symptoms, pregnancy history and general health. You may need to have a urine sample taken to confirm the pregnancy. Blood test may be done to check your blood count, blood group and occasionally, the pregnancy hormone level. In addition to a general assessment, you may also require an internal vaginal examination to check for pain and / or severity of bleeding. This may involve using a speculum (a plastic instrument) and / or digital examination. This examination will not affect the outcome of your pregnancy. We will also refer you to be seen in our Early Pregnancy Unit (EPU) for a scan if this is required.

**We aim to do a scan as soon as possible in our EPU but this may take up to 48 hours to arrange. You will be advised to arrange an EPU consultation by calling on Monday to Friday on 01932 722662. Please note our opening hours on the previous page.**

## **What happens in EPU?**

Our EPU is located on the **ground floor of the Abbey Wing at St Peter's Hospital and this is where** you will have your scan. Some scans are done in the scan department. In early pregnancy, the scan will be done internally, with a probe inserted into the vagina. This is slightly uncomfortable, but not painful and will not harm the baby or cause a miscarriage. The scan will check that the pregnancy is inside the womb, try to identify the cause of the bleeding and ascertain if the pregnancy is progressing normally.

## What should I do while waiting for the scan?

If your symptoms are mild and it was not possible to get a scan on the same day, you may be discharged home to await your scan. You can carry on with your normal activities if you feel able to. Use a pad to monitor the amount of bleeding you are having. It is advisable to get plenty of rest. Do not have sex or use tampons, as this can increase the risk of infection.

## You should return to the Emergency Department if:

- The bleeding becomes too heavy and you are worried (much heavier than a normal period or changing pads every hour)
- You have severe pain in your lower stomach
- You have any pain in your shoulders
- You feel faint or dizzy, or collapse
- You get shivers or flu-like symptoms, or a smelly vaginal discharge

## What if I miscarry while waiting for my scan?

Early miscarriage sadly is very common, affecting as many as 1 in 5 pregnancies. Most miscarriages occur as a one-off event. Unfortunately, there is no treatment you can give to prevent an early miscarriage. Miscarriages are not caused by stress, physical activity or having sex. In most cases, it is not possible to give a reason for an early miscarriage, but the most common cause is thought to be a problem with the baby's chromosomes (the genetic information that we inherit from our parents).

## What is the possible outcome of my scan in EPU?

- **Viable intra-uterine pregnancy:** The pregnancy is located within the womb and a heartbeat can be clearly seen.
- **Early intra-uterine of uncertain viability:** The pregnancy is seen within the womb but it is too early to identify a heartbeat. It may not always be possible to see a heartbeat before the 7th week of pregnancy. If it is very early in your pregnancy, you may need to come back for another scan 1 - 2 weeks later.
- **Early miscarriage:** The scan may show that that you have unfortunately had a miscarriage. Sadly miscarriages are common but most women do go on to have a healthy pregnancy or pregnancies in the future. Your doctor will explain the various treatments available.
- **Ectopic pregnancy:** This is where the pregnancy is growing outside the cavity of the womb. An ectopic pregnancy can pose a risk to your health and the treatment options will be discussed by your doctor.
- **Pregnancy of unknown location (PoUL):** This is where we have been unable to identify a pregnancy on scan when either your urine or blood pregnancy hormone test is positive. This can be due to the following reasons:
  - A very early pregnancy that can't be seen on scan yet. On internal scan, the earliest sign of a pregnancy called a gestation sac is seen around 5 weeks from your last period.