

# Pregnancy of an unknown location

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Information for patients and their partners 

This leaflet answers some of the questions you may have about pregnancies that are not visible on ultrasound. If you have any questions or concerns, please do not hesitate to speak to the doctors or nurses caring for you.

## Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

**If we don't ask these questions, then please ask us to check.**

Ensuring your safety is our primary concern.

## What is pregnancy of an unknown location?

A pregnancy of unknown location means that we cannot see your pregnancy on a transvaginal ultrasound, even though you have had a positive urine pregnancy test.

There are four possible reasons why we cannot see your pregnancy:

### **1) You may have a very early uncomplicated pregnancy in your womb which is too small for us to see on your scan.**

There is a window of about a week between the urine test turning positive and it being possible to see signs of an early pregnancy on a transvaginal ultrasound scan. This is most likely to be the reason if you have not had any vaginal bleeding and you are not sure of the date of your last period or the length of your cycle. We usually see a pregnancy sac on a scan by about a week after you miss a period and a heartbeat about a week later if all is well.

### **2) Your pregnancy may be growing in your womb but not at the expected rate because it is not healthy and going to miscarry.**

There is no specific time by which we expect to see your pregnancy on a scan if you are going to have a miscarriage

### **3) You may have an ectopic pregnancy, where the pregnancy grows outside of your womb. This is different in each case.**

There is no specific time or hormone level that tells us when we should be able to see an ectopic pregnancy on a scan.

### **4) You may have already had a miscarriage** during period-like or heavy vaginal bleeding and the pregnancy has already been passed.



## What other tests will I have?

To help us work out what is most likely to have happened, we will take a sample of your blood to measure two hormones: hCG (human chorionic gonadotrophin) and progesterone.

The level of hCG tells us how much pregnancy tissue you have or have had in your body. The level of progesterone tells us how quickly it is growing. We will give you the test results over the phone, either later that afternoon or the following morning, depending on when we took your blood sample.

These tests do not tell us where your pregnancy is, but they do help us to decide if and when you need to come back for routine checks.

**Low hCG and high progesterone:** This shows a small, very early pregnancy that is growing quickly. We expect to be able to see signs of an uncomplicated pregnancy in your womb once your hCG level is above 1,000 to 1,500. We will usually advise you to come back for another scan to check the location of your pregnancy when we predict that it will have reached this level. The hCG level should double every 48 hours.

### **Mid-level progesterone:**

In 70% of cases this is due to a miscarriage or ectopic pregnancy, with a 30% chance of an uncomplicated pregnancy. Blood tests cannot tell the difference between an ectopic pregnancy and a pregnancy that will end as a miscarriage. The hCG level varies in both, but the progesterone level is usually quite low. If you get this result, we will ask you to have the test for hCG again in 48 hours.

After this second hCG test, if the level is:

- rising, we will scan you again to try to locate your pregnancy



- the same or going down, it is likely that you are having a very early miscarriage or ectopic pregnancy that is ending naturally. We will do blood tests to keep checking your hCG level until it falls below 20. In this case, we will probably never know where the pregnancy was. You are likely to have vaginal bleeding and this cannot be prevented or stopped.

As we have not been able to confirm where the pregnancy is, if you have any severe pain – even if your hCG levels are falling – please come back to the Early Pregnancy Unit (EPU) or go to your local Emergency Department (ED). You may have an ectopic pregnancy that we have not been able to see. This can burst and cause internal bleeding, although this is rare if you have a low level of hCG. So, we advise you to avoid travel and stay in London until we can rule out an ectopic pregnancy.

**Very low progesterone:** This shows that the pregnancy is very unlikely to be growing or developing – whether it is implanted in the cavity of the womb or outside it. It is likely that you have had – or will have – a miscarriage and we do not need to keep monitoring you routinely. We will ask you to take a pregnancy test in a week or two. If it is negative, you will not need any more check-ups with us. If it is positive, you will have another hCG blood test.

You should expect to have some vaginal bleeding. If you have any severe pain, please come back to the EPU or go to your local ED so we can check again for an ectopic pregnancy. If you have vaginal bleeding that does not settle within two weeks, or you have a fever or feel unwell, also come back to the EPU.

## When can we try for a baby again?

We advise you wait until after your next period before trying again as it makes it easier to work out your due date. If you get



pregnant before your first period, it should not increase your risk of a miscarriage or ectopic pregnancy, but it may make early diagnosis more difficult.

You may need more time to recover – emotionally and physically. Start again when you and your partner feel ready.

## **Where can we get help and emotional support?**

You and your partner may have different emotions if you miscarry or have an ectopic pregnancy. Grieving and depression are common and it can take time to get over these feelings.

You may feel that you need help to come to terms with your loss. Our nurses can help you: they can advise you, give you information or arrange for you and your partner to have psychotherapy.

Please contact us if you need support or you would like us to refer you.

## **Who can I contact with queries and concerns?**

If you have any queries or concerns during working hours, contact the EPU:

### **King's College Hospital site**

Tel: **020 3299 3168** (9am to 5pm, Monday to Friday)

Nurse Triage line, Tel: **020 3299 7232** (9am to 4.30pm, Monday to Friday)

Email: [Kch-tr.helpineepu@nhs.net](mailto:Kch-tr.helpineepu@nhs.net)

Women's Surgical Unit, Tel: **020 3299 5936** (out of hours)

### **Princess Royal University Hospital (PRUH) site**

Tel: **01689 865721** (9am to 4pm, Monday to Friday)

**In an emergency, please go to your local ED.**



## Where can I get more information?

### Miscarriage Association

Helpline: 01924 200799

[www.miscarriageassociation.org.uk](http://www.miscarriageassociation.org.uk)

### The Ectopic Pregnancy Trust

Helpline: 020 7733 2653

[www.ectopic.org.uk](http://www.ectopic.org.uk)

### MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care. To sign up or for help, call us on **020 3299 4618** or email [kings.mychart@nhs.net](mailto:kings.mychart@nhs.net). To find out more visit

**[www.kch.nhs.uk/mychart](http://www.kch.nhs.uk/mychart)**

### Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit **[www.kch.nhs.uk](http://www.kch.nhs.uk)**.

### Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.



## **PALS**

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

Tel: **020 3299 4618**

Email: **[kings.pals@nhs.net](mailto:kings.pals@nhs.net)**

**If you would like the information in this leaflet in a different language or format, please contact our Interpreting and Accessible Communication Support on 020 3299 4618 or email [kings.access@nhs.net](mailto:kings.access@nhs.net)**



