

Patient information factsheet

Bleeding in early pregnancy

After your assessment in the emergency department today, you have been allocated the next available appointment in the early pregnancy assessment unit (EPAU).

The EPAU is on **D level** in Princess Anne Hospital.

Your appointment is on.....at.....

If possible, you should come to your appointment with:

- an empty bladder if you are **less than ten weeks pregnant**
- a full bladder if you are **ten weeks pregnant or more**

You should also bring any pregnancy booking records with you.

Bleeding during pregnancy

Bleeding during pregnancy can be a very worrying time. Light vaginal bleeding is common during the first trimester of pregnancy (the first 12 weeks) and can be caused by lots of different things, so having this symptom does not necessarily mean that you are having a miscarriage.

A miscarriage is the loss of a pregnancy that happens sometime during the first 23 weeks. Around three quarters of miscarriages happen during the first 12 weeks of pregnancy. The main symptom of a miscarriage is vaginal bleeding, which may be followed by cramping and pain in the lower abdomen.

Around one in four pregnancies will end in miscarriage and unfortunately, nothing can usually be done to stop a miscarriage from happening. However, it is important to remember that:

- normal daily activities will not cause a miscarriage, so a miscarriage is extremely unlikely to be caused by anything someone has or has not done.
- in most cases, a miscarriage is a one-off event and most people go on to have a successful pregnancy in the future.

On rare occasions, a fertilised egg can implant itself outside of the womb, usually in one of the fallopian tubes. This is called an ectopic pregnancy. Ectopic pregnancies are potentially serious because there is a risk that you could experience internal bleeding. Symptoms of an ectopic pregnancy usually appear between weeks five to ten of the pregnancy. An ectopic pregnancy may present itself as abdominal pain with or without vaginal bleeding.

If you experience any discomfort, you can take paracetamol to help with this. We advise that you use sanitary towels rather than tampons for any bleeding that you may have, as this will give you a more accurate estimate of how much you are bleeding. It will also help to reduce your risk of infection.

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Contact the EPAU or Bramshaw Women's Unit or return to the emergency department for re-assessment if you experience:

- heavy bleeding (significantly more than a period and filling a sanitary towel every 30 minutes)
- passing of clots of blood that are larger than a golf ball
- abdominal pain which is not relieved by simple analgesia like paracetamol or codeine

You don't need to wait for your appointment to let us know about these symptoms.

Contact us

Early pregnancy assessment unit (EPAU)

Telephone: **023 8120 8412** (8am to 7pm, Monday to Saturday, including bank holidays)

Bramshaw Women's Unit

Telephone: **023 8120 6035** (out-of-hours and weekends)

Useful information

Counselling and support services recommended by the Royal College of Obstetricians and Gynaecologists (RCOG):

Miscarriage Association

Helpline: **01924 200799** (Monday to Friday, 9am to 4pm)

Email: info@miscarriageassociation.org.uk

www.miscarriageassociation.org.uk

NHS

www.nhs.uk/conditions/miscarriage

You can also access more detailed patient information factsheets from the RCOG:

Early miscarriage

www.rcog.org.uk/for-the-public/browse-our-patient-information/early-miscarriage

Recurrent miscarriage

www.rcog.org.uk/for-the-public/browse-our-patient-information/recurrent-miscarriage

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