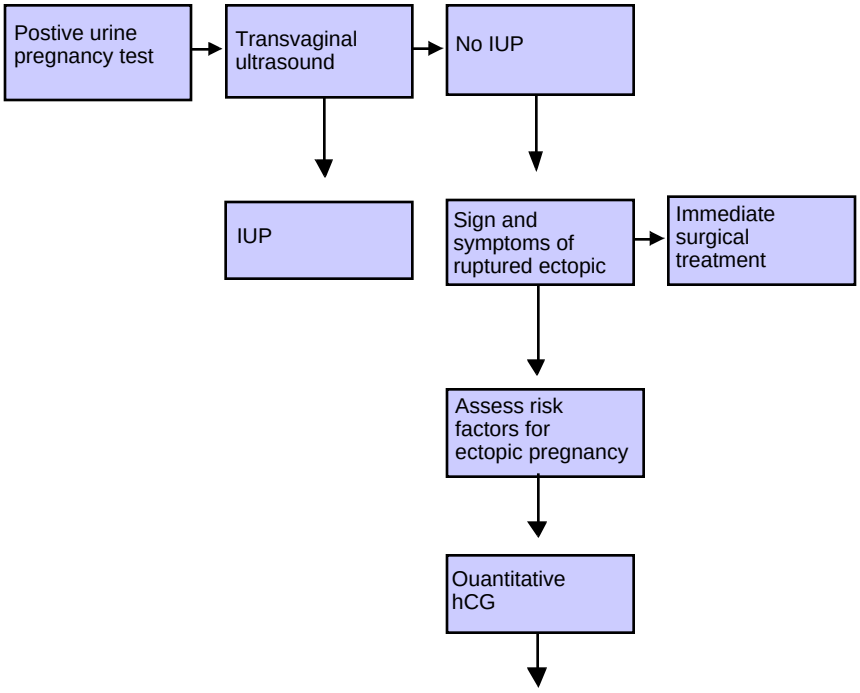
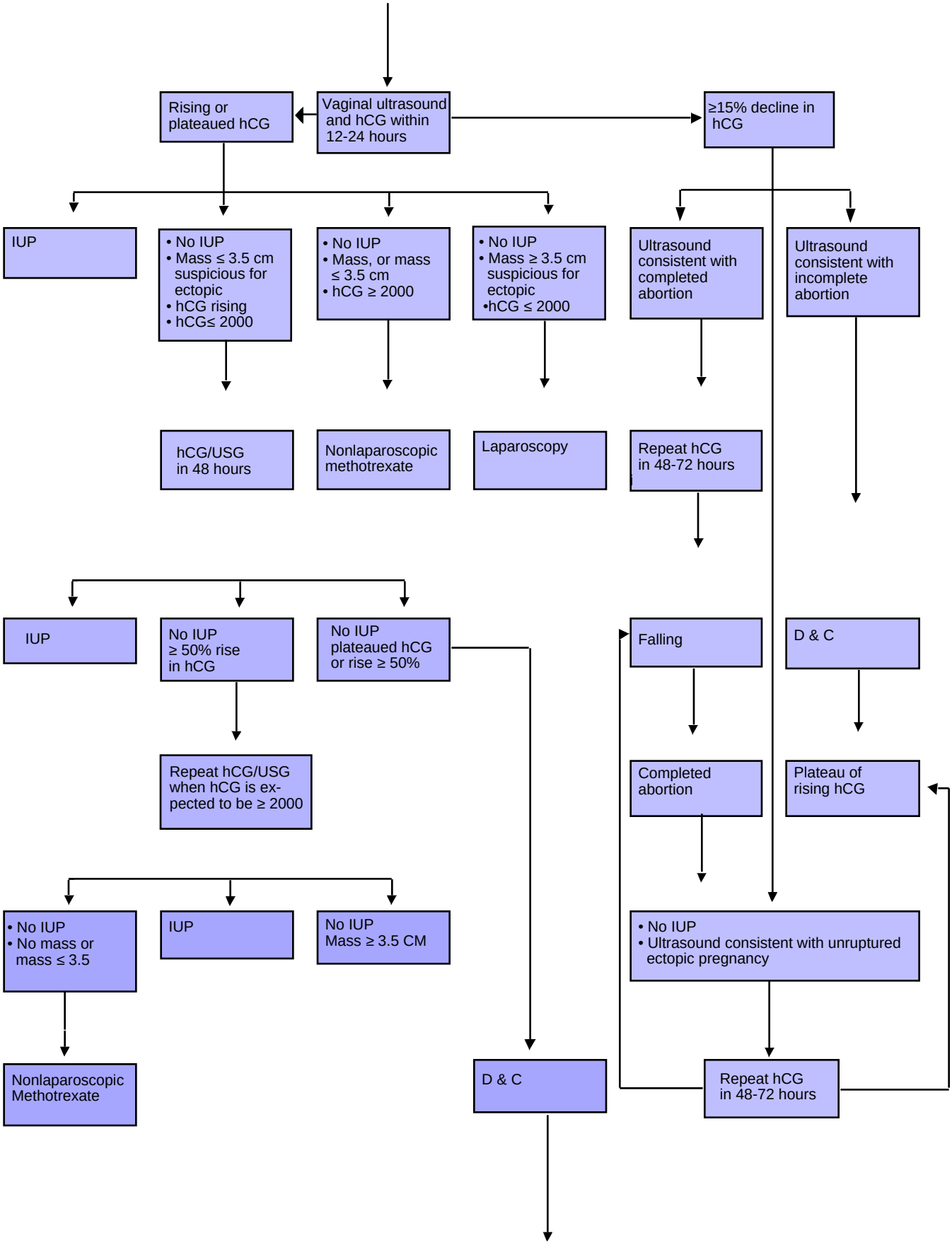
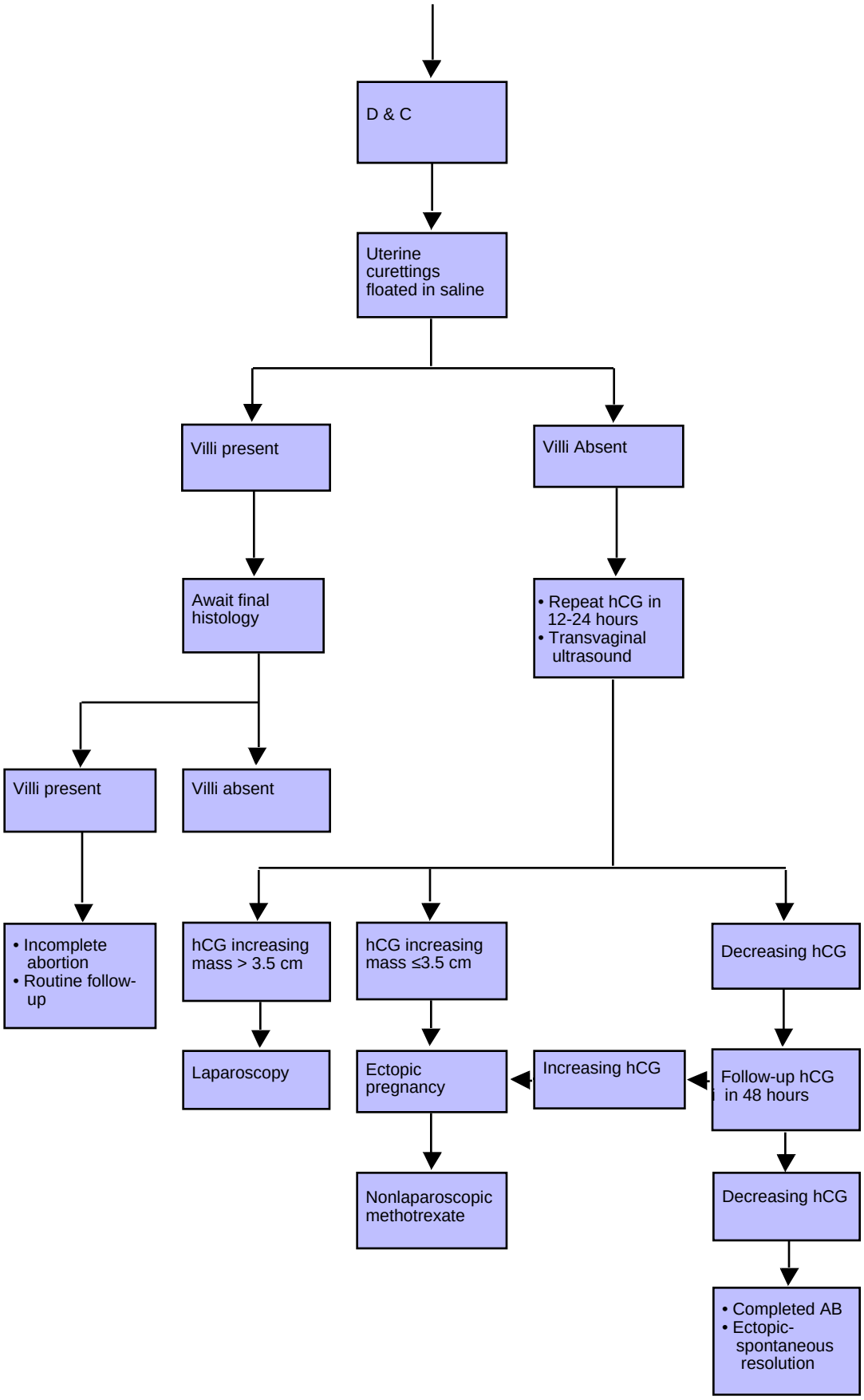

Postive urine pregnancy test
Transvaginal ultrasound
No IUP
IUP
Sign and symptoms of ruptured ectopic
Immediate surgical treatment
Assess risk factors for ectopic pregnancy
Ouantitative hCG


Vaginal ultrasound and hCG within 12-24 hours
Rising or plateaued hCG
≥15% decline in hCG
IUP
• No IUP
• Mass ≤ 3.5 cm suspicious for ectopic
• hCG rising
• hCG≤ 2000
• No IUP
• Mass, or mass ≤ 3.5 cm
• hCG ≥ 2000
• No IUP
• Mass ≥ 3.5 cm suspicious for ectopic
•hCG ≤ 2000
Ultrasound consistent with completed abortion
Ultrasound consistent with incomplete abortion
hCG/USG in 48 hours
Nonlaparoscopic methotrexate
Laparoscopy
Repeat hCG in 48-72 hours
IUP
No IUP ≥ 50% rise in hCG
No IUP plateaued hCG or rise ≥ 50%
Falling
D & C
Repeat hCG/USG when hCG is expected to be ≥ 2000
Completed abortion
Plateau of rising hCG
• No IUP
• No mass or mass ≤ 3.5
IUP
No IUP Mass ≥ 3.5 CM
• No IUP
• Ultrasound consistent with unruptured ectopic pregnancy
Nonlaparoscopic Methotrexate
D & C
Repeat hCG in 48-72 hours


D & C
Uterine curettings floated in saline
Villi present
Villi Absent
Await final histology
• Repeat hCG in 12-24 hours
• Transvaginal ultrasound
Villi present
Villi absent
• Incomplete abortion
• Routine follow-up
hCG increasing mass > 3.5 cm
hCG increasing mass ≤3.5 cm
Decreasing hCG
Laparoscopy
Ectopic pregnancy
Increasing hCG
Follow-up hCG in 48 hours
Nonlaparoscopic methotrexate
Decreasing hCG
• Completed AB
• Ectopic-spontaneous resolution