Suspected Ectopic Pregnancy – Pathway

Patient presents to hospital via any route with suspected ectopic pregnancy



Initial triage should be carried out within area of presentation within 15 mins. Implement Appendix 1.



Category A and B Patients should be referred to on call Gynaecology
0900-2100 M-F, 0900-1700 wkend - On call Gyn Reg (dect 5905, pg 136)
2100 - 0900 M-F, 1700 - 0900 wkend - On call Obstetric Reg (dect 5754, pg 137)
Nurse in Charge Ward 13 (dect 7985) and Maternity Co-ordinator (dect 7890) should be made aware of patient

In OOH period Clinical Night Manager should also be informed (dect 6161)

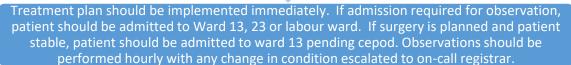


If stable, patient should be assessed in EPAS if during working hours and maternity triage out of hours. If unstable, patient should undergo **urgent** assessment in area of presentation by Gynaecology Team and On Call Gyn Consultant should be made aware of patient.



Initial Medical assessment should be undertaken within 15 minutes for category A patients and within 1 hour for category B patients

Any delay to assessment should be escalated to on call Consultant Gynaecologist





Patient should undergo followup **bed side** review within 4 hours if no deterioration in clinical condition. Any cause for concern should be escalated immediately to Gyn or Obs Reg. If stable, patient to be handed over to gynaecology on-call team for ward round review and EPAS for scan if indicated.



Discharge Checklist
Inform Maternity Co-ordinator of pregancy loss
Bereavement followup to be arranged if appropriate

Date: Aug 2024

Review Date: Feb 2025

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