

**What is Miscarriage?** In medical words, miscarriage is called spontaneous abortion. It is the loss of an unborn baby less than halfway (20weeks) through a full-term pregnancy.

**Symptoms of Miscarriage:** Some miscarriages are completely silent, but one or more of the following events suggests (yet does NOT prove) that you may miscarry (“threatened spontaneous abortion”), or have already miscarried:

- Bleeding greater than your typical menstrual period
- Cramping pain in your pelvis, lower back, or lower abdomen
- A gush of warm liquid from your vagina
- The passage of true tissue (not just blood clots) of a small recognizable baby from your vagina (birth canal)
- Inability to demonstrate beating of the baby’s heart on a sonogram after six or more weeks of life

**Confirmation or Diagnosis:** Miscarriage may be confirmed in one or more of these ways:

- Pelvic exam showing your cervix has dilated (opened up)
- Examination of any solids (rather than blood or clots) that have passed from your vagina
- Sonogram (scan) of your pelvic organs
- Falling pregnancy hormone levels, according to lab tests

**Causes:** It is rare for a doctor to be able to discover the cause. It can be known with certainty in those with:

- A baby with abnormalities that prevented it from surviving
- Certain infections or immune system abnormalities
- Abnormalities of shape or function of the female organs

**Future Pregnancies:** When considering getting pregnant again, realize that these factors may tend toward repeat miscarriage:

- A prior miscarriage
- A new pregnancy less than three months after a prior birth, miscarriage, or abortion
- Pregnancy in a woman over 35yrs old
- Certain chronic conditions like diabetes (ask your doctor)
- Using tobacco, alcohol, illegal substances, or even a few specific prescription medications (talk to your doctor about any medications you are taking)

**Here are some things that some women blame their miscarriages on, but which in fact, PROBABLY DO NOT cause it:**

- Emotional stress
- Birth control pills taken accidentally in early pregnancy
- Typical work environments, activities, and reasonable amounts of exercise or sexual intercourse

**Treatment: Because continued blood loss could harm you, go IMMEDIATELY to your obstetrician, or if you do not have one go to the emergency room of nearby hospital**

- Miscarriage will either be confirmed or ruled out by one or more of the tests listed above
- If all the tissue of the pregnancy has been passed, you may be treated with medication and followed closely outside the hospital by a physician
- If tissue remains in your uterus, you may need a D&C, a minor surgery, that will remove the remaining tissue and control further blood loss. You will be “put to sleep” (general anesthetic) or get other effective pain relief for the D&C.
- If your blood type is Rh- (negative) you will be given an injection of Rhogam, which prevents Rh problems in future pregnancy.

---

Patient Signature

---

Date

---

Clinic Personnel Signature

---

Date