



A GUIDE TO EARLY PREGNANCY LOSS

MISCARRIAGE, MISSED MISCARRIAGE, ECTOPIC PREGNANCY, BLIGHTED OVUM, & MOLAR PREGNANCY

We are deeply sorry for your loss. You did nothing to cause this, and it is not your fault. You have the right to grieve a loss at any point in your pregnancy.

Please know that there is no right way to handle pregnancy loss. Your choices and grieving process are up to you. Be kind and allow yourself to do what feels helpful.

KNOW YOUR TREATMENT OPTIONS

Non-Medical Let the natural process of miscarriage occur if you're in the first trimester of your pregnancy, and this option is safe for you. This process can often happen at home. Here are examples of what you may experience:

- No defined timeline; the process could take days or weeks
- Symptoms worse than a heavy period; from severe cramping to labor pains
- May see fetal tissue if far along enough – Ask your medical provider or hospital if they have a collection kit for you to use at home.

Medical Your options will depend on several factors, such as how far along you are in your pregnancy. Here are some treatment options that may be available:

- Vaginal or oral medication: This can be taken at home or outpatient. If you're in the 1st trimester of your pregnancy, the medicine will cause the uterus to contract. You then experience what seems like a heavy period. If in the 2nd trimester of your pregnancy, the medicine will start labor and lead to vaginal delivery.
- D&C: An outpatient procedure that is done in the 1st trimester. During the procedure, your cervix is dilated or opened, and the tissue in the uterus is removed.
- D&E: Similar to a D&C, but done in the 2nd trimester.
- If pregnancy is ectopic – methotrexate injection(s) may be given if you're early in your pregnancy. The medication stops cells from growing, and your body absorbs the pregnancy. Sometimes, you may need surgery to remove the pregnancy or repair or remove the fallopian tube.

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ADVOCATE FOR YOURSELF IF IN A MEDICAL SETTING

This is a list of suggestions to ask for or talk about when you are in the hospital for your procedure:

- An ultrasound before the procedure to have a keepsake image
- Pain management options that are available during the procedure (e.g. medication, anesthesia)
- Hand & footprints of your baby
- Request what you need to feel comfortable
- A room far from other patients to have a quiet space
- Options for handling pregnancy remains, especially for further testing, cremation, or burial

COMMON PHYSICAL SYMPTOMS FOLLOWING EARLY PREGNANCY LOSS

- Breastmilk production (lactation)
- Tender or sore breasts
- Uterine cramps
- Spotting or bleeding
- Nausea
- Vomiting
- Postpartum sweats
- Tiredness or difficulty sleeping
- Loss of appetite

COMMON REACTIONS AFTER AN EARLY PREGNANCY LOSS

These are some common mental and emotional responses following an early pregnancy loss.

- Depressed mood, sadness, irritability, anger, or anxiety
- Feelings of insecurity, guilt, and low self-worth
- Flashbacks to the loss
- Difficulty remembering moments around the loss experience
- Struggling to concentrate, having recurring thoughts, being in a mental fog, or feeling disconnected from reality
- Sleeping too little (insomnia) or sleeping too much
- Gaining or losing a lot of weight
- Having anxiety or panicking with healthcare visits