

Scanning in the Early Pregnancy Unit

You have been given an appointment to attend the Early Pregnancy Unit. This is because you have experienced bleeding or pain in this pregnancy or because you have had complications before in early pregnancy (for example, previous ectopic pregnancy/molar pregnancy/multiple miscarriages).

What should you expect from this appointment?

On arrival, please complete the form given to you at the Reception desk. This will include checking your personal details as well as providing relevant medical details. Please ask if you need help filling in the form and try to complete as much detail as possible.

This is a clinic with timed appointments, but occasionally emergency patients may need to be seen urgently which may delay your scan. We will try to keep you informed about the approximate length of your waiting time. A urine sample will be requested to ensure you have a positive pregnancy test and look for signs of a urine infection. You will then have a scan performed by either a Sonographer (Ultrasound Technician) or a Consultant Gynaecologist.

Do you need a full bladder?

No. In the majority of cases the scans will be performed by inserting an ultrasound probe into your vagina (an internal transvaginal scan) for which we require you to have an empty bladder.

Why do you need an internal scan?

The best way to look for the pregnancy in early pregnancy (under 10 weeks) is by doing a transvaginal scan. This also allows us to look at the ovaries and the cervix (the neck of the womb) which is particularly important if you are feeling a cramp-like lower abdominal/pelvic pain.

After 9 weeks pregnancy a transabdominal scan (probe placed on skin of the lower abdomen) will normally be performed.

Both methods of scan are safe and will not make you miscarry. If a repeat scan is necessary (this will be decided by the Early Pregnancy team and explained to you) it will usually be booked around 10-14 days later. On some occasions when a pregnancy has not been seen in the womb or outside the womb (an ectopic pregnancy), you will have blood tests which will check the level of certain pregnancy hormones, and depending on what these levels are, a repeat ultrasound scan may be booked for you sooner.

Do you have to have an internal scan?

In the first few weeks of your pregnancy, even with a normally developing pregnancy, the pregnancy is very small and in order to see it more clearly it is best seen by an internal scan. If you decline the internal scan, we can offer you an external scan (on your tummy). You need to be aware that this method has limitations and will not provide as much information as the internal scan. You can discuss this with the Sonographer.

Following your ultrasound scan you will be informed of the findings. Further management depends on the result of the scan and this will be discussed with the Early Pregnancy nurse who will be in the clinic.

Blood tests

You may need to have blood tests to check for hormone levels and possibly your blood group. At all times you will be kept informed about the findings of the scans and any blood tests that may be done.

Patient experience survey

We have asked for your e-mail address as we would like your feedback about your visit to the clinic. Please fill it in if you are happy to be sent an e-mail requesting feedback. The responses will be completely anonymous and will help us improve our service. If you do not wish to be contacted, that is fine too, it will not affect your care in any way.

Contact numbers:

Should you wish to ask any further questions our contact details are:

Early Pregnancy Unit (working days Monday-Friday)

Stoke Mandeville Hospital 01296 316469/316143 (08.00-17.00 hours)

Ward 15 01296 316500/316365 (at all other times/weekends)

Please Note:

If you want to ask anything else related to your Early Pregnancy treatment and management, after your appointment at a later date please contact the Early Pregnancy Unit on the above numbers.

How can you help reduce healthcare associated infections?

Infection prevention and control is important to the well-being of our patients and for that reason we have infection prevention and control procedures in place. Handwashing and wearing a face mask is an effective way of preventing the spread of infections. We ask that you, and anyone accompanying you, use the hand sanitiser available at the entrance to every ward before entering and immediately after leaving the ward. In some situations, hands may need to be washed at the sink using soap and water rather than using the hand sanitiser as hand sanitisers are not suitable for use when dealing with patients who have symptoms of diarrhoea.

Patient Advice Sheet

If you would like a copy of this information on audiotape, in large print or translated, please call the Patient Advice Liaison Service on 01296 831120 or email bht.pals@nhs.net

Division of Women, Children & Sexual Health Services

Approvals:

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Clinical Guidelines Subgroup: not required

Equality Impact Assessment: Sep 2014, V2 Aug 2021

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