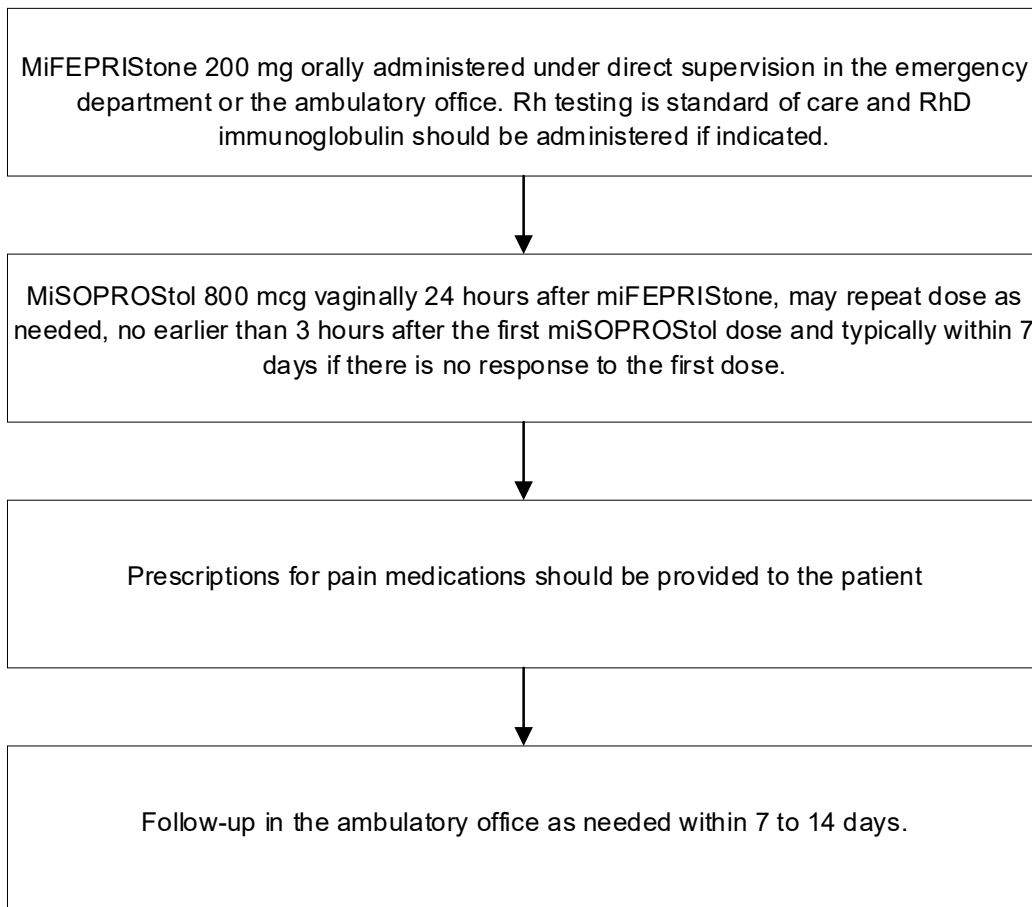


## MiFEPRIStone for Medical Management of Early Pregnancy Loss, Emergency Room/Ambulatory Practice, Guideline

Updated: November 5, 2020

### Clinical algorithm:



## Clinical guideline summary

**CLINICAL PATHWAY NAME:** Mifepristone for Medical Management of Early Pregnancy Loss, Emergency Room/Ambulatory Practice

**PATIENT POPULATION AND DIAGNOSIS:** Early pregnancy loss (defined as a nonviable, intrauterine pregnancy with either an empty gestational sac or a gestational sac containing an embryo or fetus without fetal heart activity) up to 13 weeks gestation.

**APPLICABLE TO:** All Spectrum Health Sites

**BRIEF DESCRIPTION:** This is the medical management of a nonviable pregnancy up to 12+ 6 weeks of completed gestation using combined mifepristone-misoprostol regimen.

**OVERSIGHT TEAM LEADER(S):** Suzanne West and Chelle Backus-Walzer

**OWNING EXPERT IMPROVEMENT TEAM (EIT):** Women's Health Ambulatory EIT

**MANAGING CLINICAL PRACTICE COUNCIL (CPC):** Women's Health CPC

**OTHER TEAM(S) IMPACTED (FOR EXAMPLE: CPCs, ANESTHESIA, NURSING, RADIOLOGY):** Emergency Room providers, Nursing

**IMPLEMENTATION DATE:** 1/1/2021

**LAST REVISED:** 6/30/2020

**FOR MORE INFORMATION, CONTACT:** Suzanne West

## Clinical pathways clinical approach

### TREATMENT AND MANAGEMENT:

MiFEPRISStone 200 mg orally administered under direct supervision in the emergency department or the ambulatory office. MiSOPROStol 800 mcg vaginally 24 hours after miFEPRISStone, may repeat dose as needed, no earlier than 3 hours after the first miSOPROStol dose and typically within 7 days if there is no response to the first dose.

## References:

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2. Torre A, Huchon C, Bussieres L, Machevin E, Camus E, Fauconnier A. Immediate versus delayed medical treatment for first-trimester miscarriage: a randomized trial. *Am J Obstet Gynecol*. 2012 Mar;206(3):215.e1-6. doi: 10.1016/j.ajog.2011.12.009. Epub 2011 Dec 16. PubMed PMID: 22381604.
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4. American College of Obstetricians and Gynecologists. Practice Bulletin. Medical Management of First-Trimester Abortion. Number 143, March 2014. Reaffirmed 2016.
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