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

Updated: November 5, 2020

Clinical algorithm:

MiFEPRISTONE 200 mg orally administered under direct supervision in the emergency department or the ambulatory office. Rh testing is standard of care and RhD immunoglobulin should be administered if indicated.

MiSOPROSTOL 800 mcg vaginally 24 hours after MiFEPRISTONE, 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.

Prescriptions for pain medications should be provided to the patient.

Follow-up in the ambulatory office as needed within 7 to 14 days.
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:

Mifepristone 200 mg orally administered under direct supervision in the emergency department or the ambulatory office. Misoprostol 800 mcg vaginally 24 hours after mifepristone, 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:


