

What is a miscarriage?

A miscarriage is a pregnancy loss that happens before 20 weeks gestational age. The medical term for miscarriage is an abortion, which does not indicate this was desired.

Is this my fault?

NO. Miscarriages are rarely caused by anything that you do or do not do.

What can I expect before any tissue passes?

Before any tissue passes, women may or may not have any symptoms at all. Sometimes there is cramping and sometimes there is bleeding. The cramping can range from mild to intense. The bleeding can range from spotting to a flow heavier than a period.

What can I expect when tissue starts to pass?

Cramping - The uterus is cramping as it tries to pass what is inside. Typically, once everything has passed, the pain improves significantly. But here are comfort measures that you can do to help with the pain.

- Acetaminophen (Tylenol) 500 mg, you may take 2 tablets (1000 mg) every 6 hours as needed for pain
- Ibuprofen (Motrin) 200 mg, you may take 4 tablets (800 mg) every 8 hours as needed for pain
- Heating pad

Bleeding - Bleeding can become heavier than a period when tissue starts to pass. There are typically clots as well. Once things pass, usually the bleeding decreases to a light period. If at any point you have bleeding that completely fills a pad (not a pantyliner) within an hour for 2 consecutive hours, you need to go to the emergency department. Sometimes the body has difficulty passing everything on its own.

Tissue - Depending on how far along you are, you may or may not see any tissue. If you are early on, you will not see a fetus. Tissue can be fleshy gray or red and accompanied with clots. If you see tissue, you do not have to save it. Many women will sit on the toilet when the cramping is intense, and the bleeding is heavier. If the tissue passes into the toilet, it is ok to flush. However, if you are uncomfortable doing that, you could have your partner do this.

What can I expect after my miscarriage is complete?

The cramping usually decreases significantly. Also, the vaginal bleeding decreases to a flow similar to or less than a period and tapers off over 1-2 weeks. It is normal to experience a range of emotions. The physical healing is usually within a week. But the emotional healing can take much longer.

Physically, you can start to exercise and return to work when you are ready. Unless otherwise specified by your doctor, there are no restrictions or limitations for exercise or work. In regards to sex, you should wait at least 1 week AND UNTIL YOU ARE EMOTIONALLY READY.

What are things that I need to let my doctor know or seek emergency care for?

- Fever of 100.4 degrees F or greater
- Completely filling a pad with blood within an hour for 2 consecutive hours
- Severe pain that cannot be controlled by pain medication
- Foul smelling vaginal discharge

What should I avoid?

- Do not insert anything into the vagina, including tampons or intercourse, for 1 week AFTER the miscarriage is complete.
- Avoid bathtubs and pools for 1 week AFTER the miscarriage is complete.

When can I try to get pregnant again?

Women can physically conceive within 2 weeks of a miscarriage. You do not have to have a period first before conception can occur. But waiting for the first period may help clarify how far along you are with the next pregnancy. If you are not ready to conceive, be sure to use condoms or to talk to your doctor about birth control options. However, many women are not emotionally ready to conceive right away. Be sure to take the time that you need to grieve and know that it is ok to wait until you and your significant other are ready.

What are the treatment options for a miscarriage?

1. **Observation:** This is waiting for things to happen on their own. Some women prefer to avoid medication or surgery and to wait for things to happen spontaneously.
 - Pros: There is no medication or surgery.
 - Cons:
 - Time- There is no specific time frame for things to happen on their own. It could take days or weeks.
 - Risk of infection- There is a risk of infection if the tissue stays inside of the uterus too long (more than two months).
 - It may not happen on its own: In this situation, another treatment option may need to be considered.
 - Delayed emotional closure- Sometimes waiting for things to pass can be emotionally difficult and delay reaching emotional closure over the miscarriage.

*If you do choose this option, be sure to have regular follow-ups with your doctor so that together you can decide if it is time to consider another option.

2. **Medication:** Medication can be used to treat a miscarriage. THIS IS NOT CONSIDERED AN ELECTIVE ABORTION. THIS IS NOT AN ILLEGAL OPTION. There are certain restrictions, and your doctor can decide if this is an option for you. Medication can be taken by mouth or inserted into the vagina. Typically, the tissue will pass within 72 hours of taking the medication.
 - Pros:
 - Convenience- You can take the medication when it is convenient for you. This could be a time when you are off from work or when your significant other can be present.
 - Avoid surgery- Avoid the costs and risks of surgery.
 - Inexpensive
 - Cons:
 - Cramping and bleeding- You still experience the cramping and bleeding as described above.
 - It may not work- Sometimes the medication does not work and either the medication needs to be taken again or a D&C needs to be performed.
 - It does not complete the miscarriage- On occasion, your body starts to pass the tissue, but it does not complete things. This can result in the need for a D&C emergently.
3. **Dilation and Curettage (D&C):** This is a surgical procedure performed to remove the tissue from the uterus. THIS IS NOT CONSIDERED AN ELECTIVE ABORTION. THIS IS NOT AN ILLEGAL OPTION.
 - Pros:
 - Anesthesia- You are asleep for the procedure and therefore do not know what is going on. This can allow you to avoid some of the more intense cramping and bleeding that goes along with passing the tissue.
 - Time- This can be a scheduled procedure. This can allow the procedure to be done at a set time that is convenient for you and allow you to return to school or work at a specified time.
 - Emotional closure- For some women, it can be difficult to have emotional closure when the miscarriage is not complete. Having a D&C can complete the miscarriage sooner rather than later and allow the process of emotional closure to begin.
 - Cons:
 - Cost- The cost of surgery is typically more expensive. There are fees for the surgeon, anesthesiologist, and the hospital or surgery center.
 - Risks- There are risks of anesthesia and surgery. Risks could include bleeding, infection, injury to the bowel and/or bladder, injury to the uterus, severe bleeding resulting in a hysterectomy, and failure to remove all the tissue.

Key Takeaway Points:

- This is not your fault.
- You are not alone.
- A miscarriage is a loss and should not be minimized. It takes time to heal.
- Reasons to go to the hospital are:
 - Bleeding that fills a pad within an hour for 2 consecutive hours
 - Severe pain uncontrolled by pain medication
 - Fever of 100.4 F or greater
 - Foul smelling vaginal discharge
- Avoid tampons, sex, and bathtubs/pools/lakes for 1 week AFTER the miscarriage is complete.
- You can potentially get pregnant within a couple of weeks after you miscarry. If you are not ready to conceive, use birth control.
- Treatment options can include observation, medication, or a D&C. There is no one right answer for everyone. Each woman is different.
- Taking medication or having a D&C due to a miscarriage is NOT illegal.
- There is support available. We have included information in this folder about emotional healing and resources for support groups. This information is also available on our website at www.whsnt.com under the “Resources” tab. It will be located under “Pregnancy Loss Resource List.”
- We are here for you.

If you have any questions, please reach out to us at 972-938-3493 or reach out to us on the patient portal.