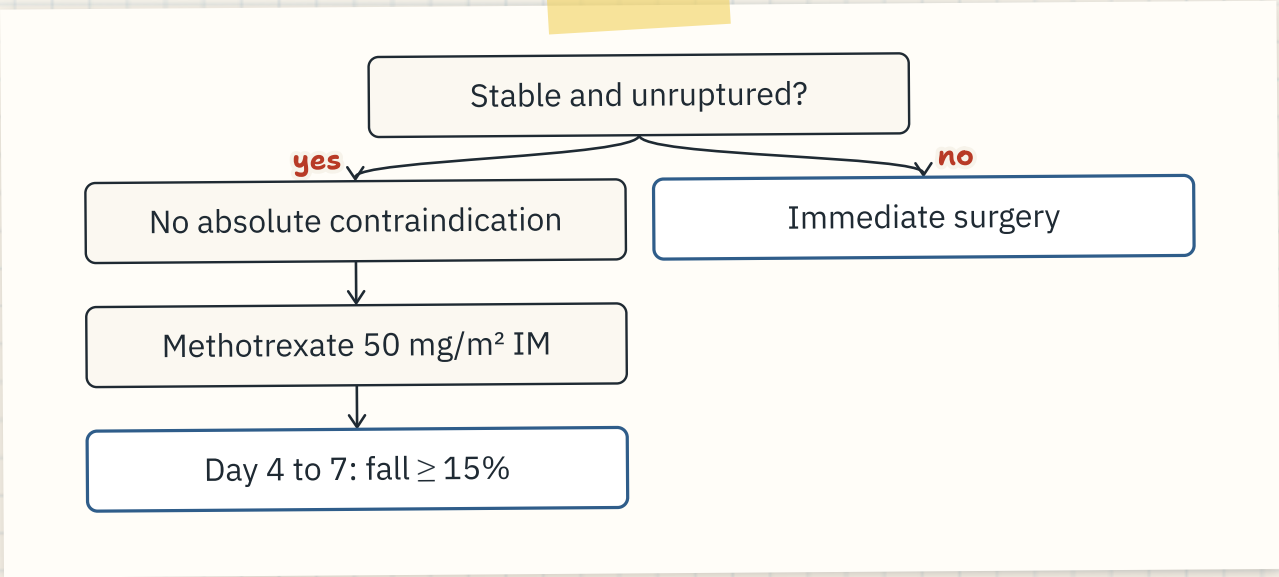
Ectopic pregnancy in 5 steps

Diagnose with beta-hCG and ultrasound, then choose the treatment



Step by step

1. Urine hCG, then serum beta-hCG and transvaginal ultrasound.
2. Above 3500 mIU/mL with an empty uterus: ectopic until proven otherwise.
3. Below it and stable: repeat the beta-hCG in about 48 hours.
4. Methotrexate: check beta-hCG on days 4 and 7.
5. Unsensitised Rh-negative (US): anti-D, whatever the treatment.

Situation	Treatment
Unstable or ruptured	Immediate surgery; laparotomy if unstable
Stable, methotrexate not suitable	Laparoscopy, usually salpingectomy
Stable, unruptured, no absolute contraindication	Methotrexate 50 mg/m² IM on day 1

Methotrexate or surgery

Rules of thumb

Stability decides: unstable means surgery

Day 4 to day 7: fall of at least 15%

Exam traps

- ! An empty uterus above the zone is not a tiny pregnancy: ectopic until proven otherwise.
- ! Below the zone an empty uterus is not diagnostic: repeat in about 48 hours.
- ! Absolute contraindications include no reliable follow-up and an intrauterine pregnancy.

Ectopic pregnancy: beta-hCG, ultrasound, methotrexate vs surgery

Video, written lesson, practice question and sources: medservatory.com/usmle-step-2-ck/ob-gyn/ectopic-pregnancy-beta-hcg-ultrasound-methotrexate-vs-surgery

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