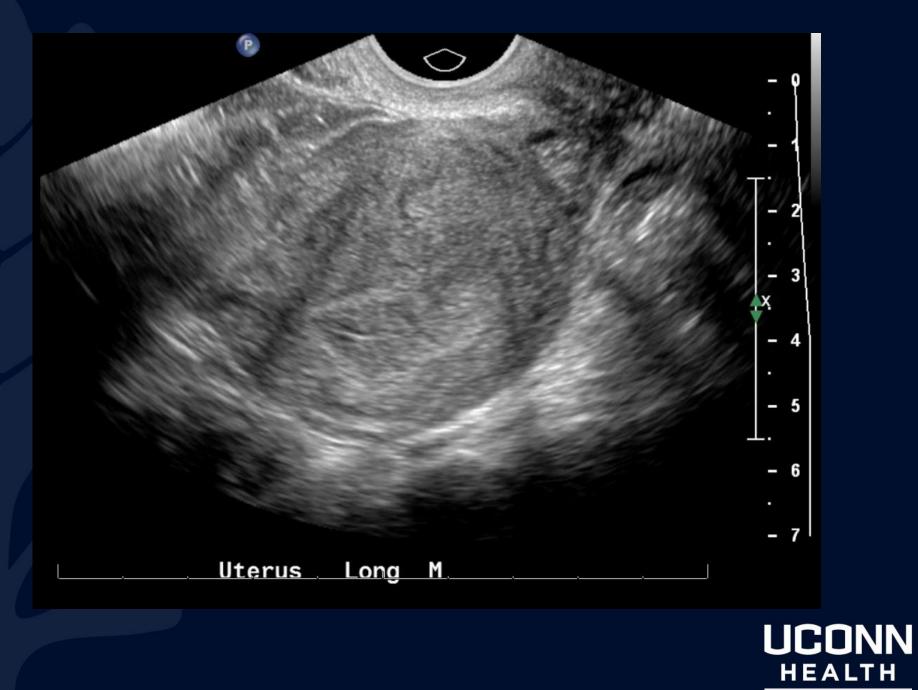
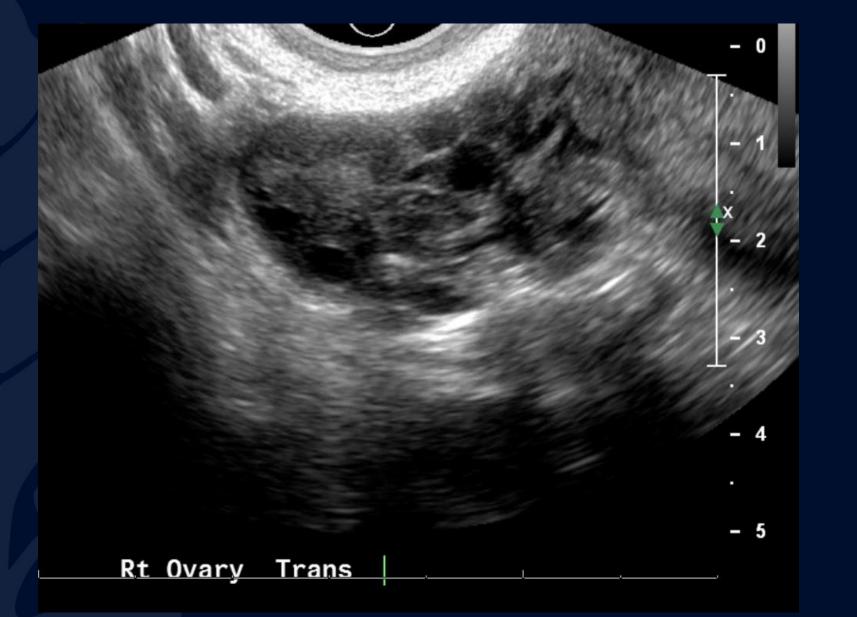
34 y/o F w/ positive urine pregnancy test

Samantha Huq, MD, MPH



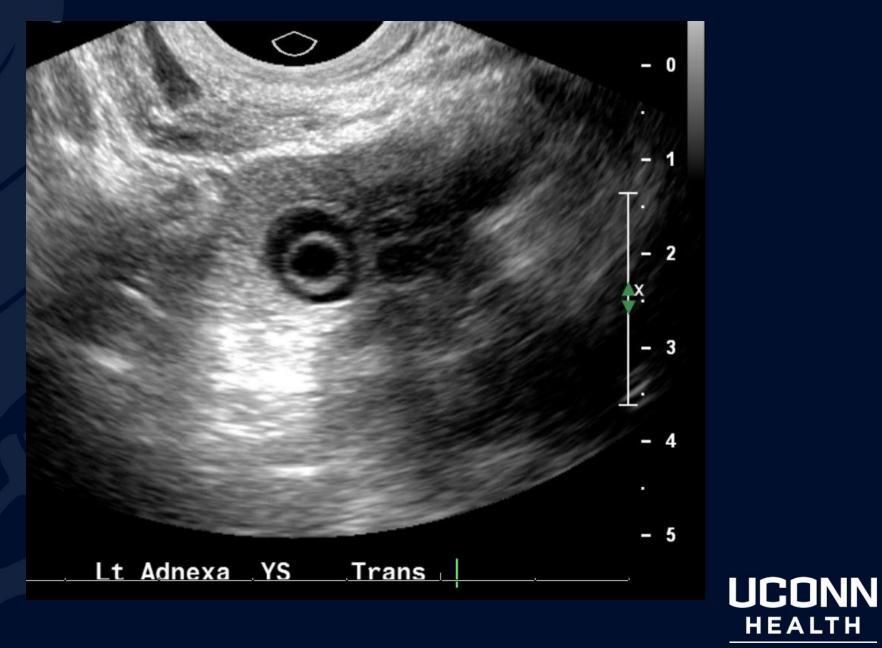


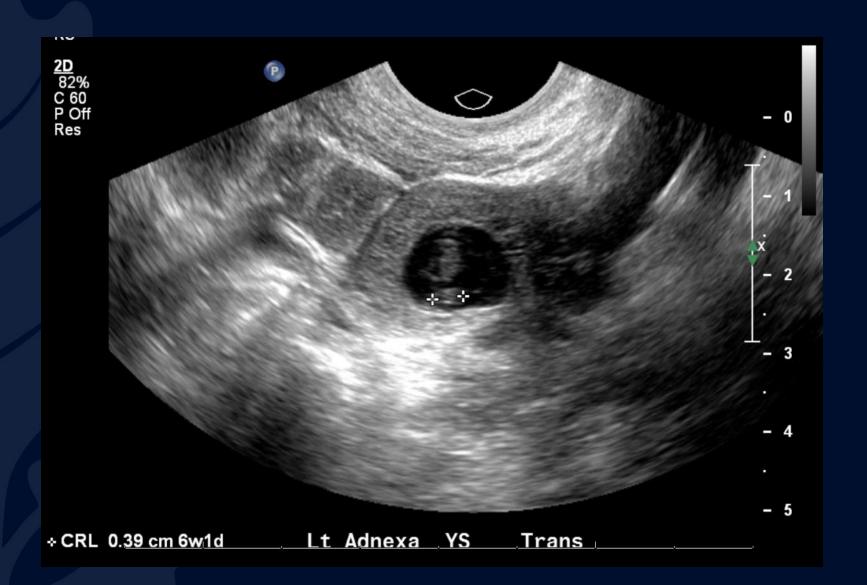




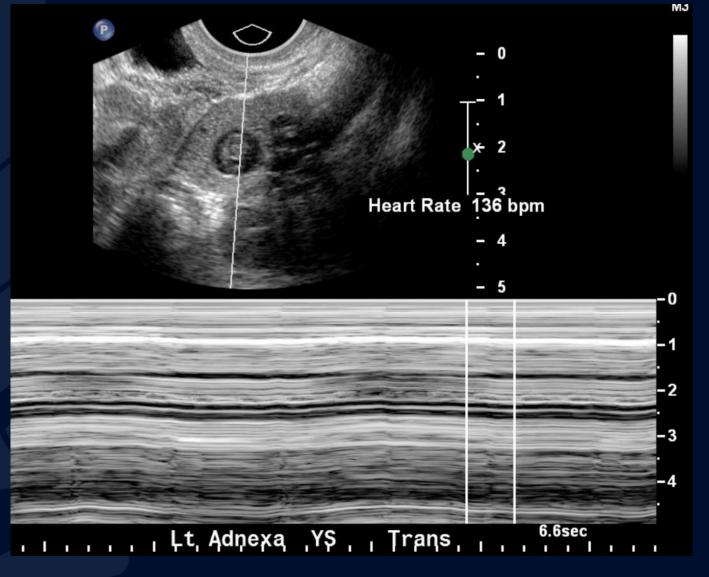












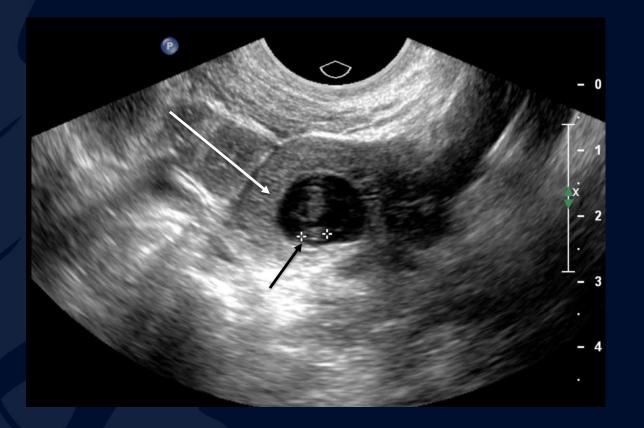
UCONN HEALTH





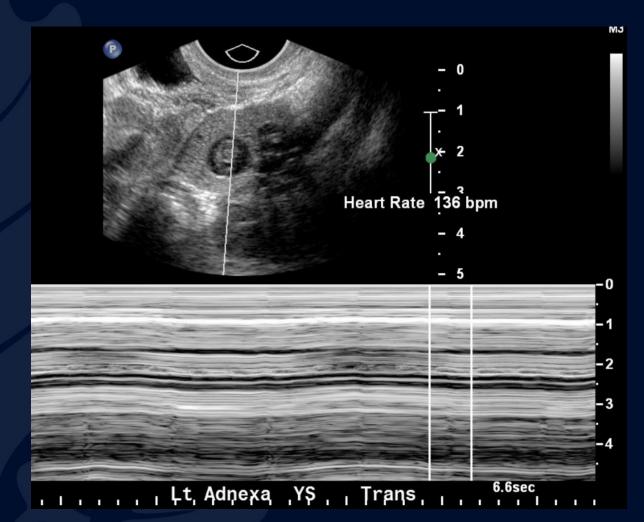


Ectopic pregnancy



Left adnexal mass with gestational sac (white arrow), yolk sac and fetal pole (black arrow). CRL is 6.6mm, which corresponds to 6 wk 4 days gestational age.

UCONN HEALTH RADIOLOGY



Fetal pole demonstrates heart beat (136 bpm)



Ectopic pregnancy

Ectopic pregnancy is implantation of a fertilized ovum outside the uterine cavity. Classic presentation is with abdominal pain and bleeding. In practice, symptoms are usually not severe.

Risk factors include in vitro fertilization (IVF), prior ectopic pregnancy, tubal injury or surgery, pelvic inflammatory disease, use of intrauterine contraceptive devices.

In vast majority of the cases, implantation is within the fallopian tube: ampullary: 70%; isthmal: 12%; fimbrial: 11%; interstitial: 3-4%. Other locations: ovarian, cervical, scar ectopic, abdominal.

Top differentials include: ruptured corpus luteum, intrauterine pregnancy, incidental adnexal mass.



References

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- Wang M et al: Nonsurgical management of live tubal ectopic pregnancy by ultrasound-guided local injection and systemic methotrexate. J Minim Invasive Gynecol. 21(4):642-9, 2014

