



# Pregnancy of unknown location (PUL)

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**You have been diagnosed with of a condition called ‘pregnancy of unknown location’ (PUL). This information leaflet will help you to understand what this means and what happens next.**

**If there is anything that you don’t understand, or if you have any questions, please feel free to ask the clinic nurse.**

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## **What is a pregnancy of unknown location (PUL)?**

This is a term that we use when you have a positive pregnancy test but the pregnancy cannot be seen on trans-vaginal (internal) ultrasound scan.

## **How can I have a positive pregnancy test and not be able to see the baby on scan yet?**

There are three possibilities:

- You may have a very early pregnancy, which is too small to be seen on scan. It is normal not to see a pregnancy on a scan until about 6 weeks. Pregnancy testing kits are now very sensitive and can detect pregnancy hormones just a few days after conception. Sometimes, this can give an unclear picture especially if you are unsure of the date of your last period or have irregular periods.
- You may have miscarried. Some women have already had pain/bleeding before attending clinic. A pregnancy test can stay positive for up to 2-3 weeks following a miscarriage, until the hormones settle down completely.
- You may have an ectopic pregnancy. This is where the pregnancy grows outside of the womb.

For more information please see ‘Tubal Ectopic pregnancy’ leaflet (<https://www.royalberkshire.nhs.uk/leaflets/tubal-ectopic-pregnancy>)

## **How do I find out what is happening with the pregnancy?**

There are a number of things that help us to give you the answer.

- We start by asking you questions about symptoms and any further relevant medical history.
- You may need an abdominal and/or internal examination.
- We take blood to assess your pregnancy hormone level (called BhCG).

## **What is the blood test for?**

The blood test is taken to measure the amount of pregnancy hormones in your blood. This may tell us the most likely outcome in your case and aid us to plan your management. Once we have the results, we will let you know about the suspected outcome and appropriate advice accordingly. Further follow up will depend on the suspected outcome as explained overleaf.\*

## How long before I get any answers?

We know that this is an anxious time. Waiting and uncertainty are always difficult and stressful but it is very important that we make the right diagnosis for you.

We normally require two blood tests (BhCG) which are done 48 hours apart. Often we will contact you after the second blood test. We will only contact you after the first blood test if you require a review before the second blood test. It is very important that you return to the clinic for the second blood test – the nurse in the clinic will ensure that you have an appointment.

- **\*If an early pregnancy (30-47%)** is expected the hormone levels between the two blood tests will have almost doubled. We would then arrange for you to have a repeat scan. The scan would be arranged normally 1-2 weeks later to allow the pregnancy time to develop so that it can be seen on scan. Sometimes, we may ask for a third blood test before arranging a repeat scan depending on your hormone levels.
- **\*If a miscarriage / failing PUL (50-70%)** is suspected the hormone levels would be falling significantly between the two blood tests. We would normally advise you to repeat a home pregnancy test after 2-3 weeks which we would expect to be negative. If you have sadly experienced a miscarriage the doctors and nurses in the clinic will give you further advice and ensure that you have adequate support and information. Further information is available in the 'Miscarriage' leaflet available from the clinic.
- Sometimes, we may need to do more than two blood tests to help us confirm a diagnosis. The doctors and nurses in the clinic will discuss this with you in detail and answer any queries or concerns that you have.
- **\*In a suspected ectopic pregnancy (6-20%)**, you will be invited to attend the clinic for review by one of our senior doctors to discuss further management. The timing for review will depend on your symptoms. Written information on ectopic pregnancy is available for you.
- **\*Persistent PUL (2%)** This is when the BHCG levels fail to decline spontaneously, there is no other explanation to the raise in hormone levels and the location of the pregnancy cannot be identified. This may take weeks before it resolve or may require medical or surgical intervention.

## While I am waiting what do I need to look out for?

If you feel unwell at home in any way or your symptoms change, it is important that you call us on: **0118 322 8204** (this number is available 24/7).

You should contact the clinic if you experience any of the following symptoms:

- Vaginal bleeding – heavier than a normal period or passing large clots (for example the size of your palm).
- Abdominal pain – any pain that increases or does not go away after taking mild painkillers.
- Feeling faint and dizzy – especially when standing up.
- If you develop pain in your shoulders.

If any of these symptoms become severe please contact the clinic immediately or go to the nearest Emergency Department for further assessment.

## Where can I get more information?

Emergency Gynaecology and Early Pregnancy Clinic at the Royal Berkshire Hospital, London Road, Reading, RG1 5AN. Telephone line: **0118 322 7181** (in hours direct) or out of clinic hours on **0118 322 8204**.

Further information and advice is also available from the following organisations:

The Ectopic Pregnancy Trust Telephone Helpline: 020 7733 2653 <a href="http://www.ectopicpregnancy.org.uk">www.ectopicpregnancy.org.uk</a>	The Miscarriage Association Telephone: 01924 200799 <a href="http://www.miscarriageassociation.org">www.miscarriageassociation.org</a>
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To find out more about our Trust visit [www.royalberkshire.nhs.uk](http://www.royalberkshire.nhs.uk)

**Please ask if you need this information in another language or format.**

L Rushamba, Consultant O&G, September 2017

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