

Early Pregnancy Assessment Clinic (EPAC): Welcome to a patient-centered service.

INTRODUCTION

Miscarriages and first trimester bleeding and pain are common complications of pregnancy. Overall, 30% of women will experience bleeding and pain during the first half of the pregnancy, 10-20% of pregnancies will miscarry and 1% will implant in an inappropriate site. Early pregnancy assessment clinics (EPAC) are in most hospitals in England, yet not standard in Canada. It is a collaborative, interdisciplinary service devoted to providing care for women experiencing pain and /or bleeding in the first trimester of pregnancy. It addresses the medical as well as the emotional needs of the patient in an efficient and timely fashion, in what can be described as a “one-stop clinic”.

EPAC at BC Women’s Hospital

EPAC opened in July 2007. It is located in the Women’s Health Care Centre within the Reproductive Medicine Program. The clinic is staffed by nurse clinicians and ultrasound certified obstetrician-gynecologists. We offer assessment, diagnosis and management of early pregnancy complications and early pregnancy loss as well as supportive counselling and follow-up care.

The clinic is opened Monday to Friday from 8-4pm. It is our intention that all patients be seen and treated within one to two business days.

PATIENTS

We see patients who reside within the Vancouver Coastal Health Regions and who:

- have cramping or bleeding and a positive pregnancy test
- have a non-viable pregnancy on ultrasound at <12 weeks of gestational age

Patients with heavy bleeding, severe abdominal pain or suspected ectopic pregnancy are not eligible to be seen at EPAC and are directed to their local emergency department.

REFERRALS

We accept referrals from family physicians, midwives, obstetrician-gynecologists, emergency departments and from the assessment room of obstetrical units. We will also see self referred patients. The patient does not have to be assessed by her health care provider prior to being referred. Referring health care providers are asked to fax all relevant patient information available. This may

include referral letter, ultrasound and laboratory results such as blood group. Health care providers or patients can also call the clinic directly and leave a message if after hours or on week-ends.

WHAT WE DO

The patient is contacted by the nurse clinician within 12 to 24 hours (following Monday when referred on week-end). The clinical information is reviewed over the telephone to ensure that eligibility criteria are met. She is given an appointment usually the same day or the following day (Monday to Friday). On arrival, the patient meets with the clinical nurse and ultrasound (if needed) is performed by the obstetrician-gynecologist. The findings are reviewed with the patients, along with management options. We welcome the involvement of her partner or other support person at all times.

Patients with a viable pregnancy are referred back to their health care provider.

Patients with a non-viable pregnancy are given the following choices:

- Expectant management
- Medical management with misoprostol (vaginal administration)
- Surgical management with manual vacuum aspiration under local anesthetic at the Women's Health Care Centre (usually the same day or the following day, Monday to Friday)
- Surgical management with Dilatation and Curettage

Emotional support and counselling is an important component of the patient's experience. Telephone follow-up, when necessary, is provided by the nurse clinician. Written information is also given to the patient.

A note (and ultrasound report if applicable) is faxed to all health care providers involved in the care of the patient within 24 hours of her visit at EPAC. This outlines the diagnosis, management and follow-up plan.

OUR CONTACT INFORMATION

EPAC at BC Women's Hospital

4500 Oak Street, Vancouver

Fax: 604-875-3136

Phone: 604-875-2592 Monday to Friday (8-4pm)

www.bcwomens.ca/services/healthservices/reproductivemedicine/earlypregnancy