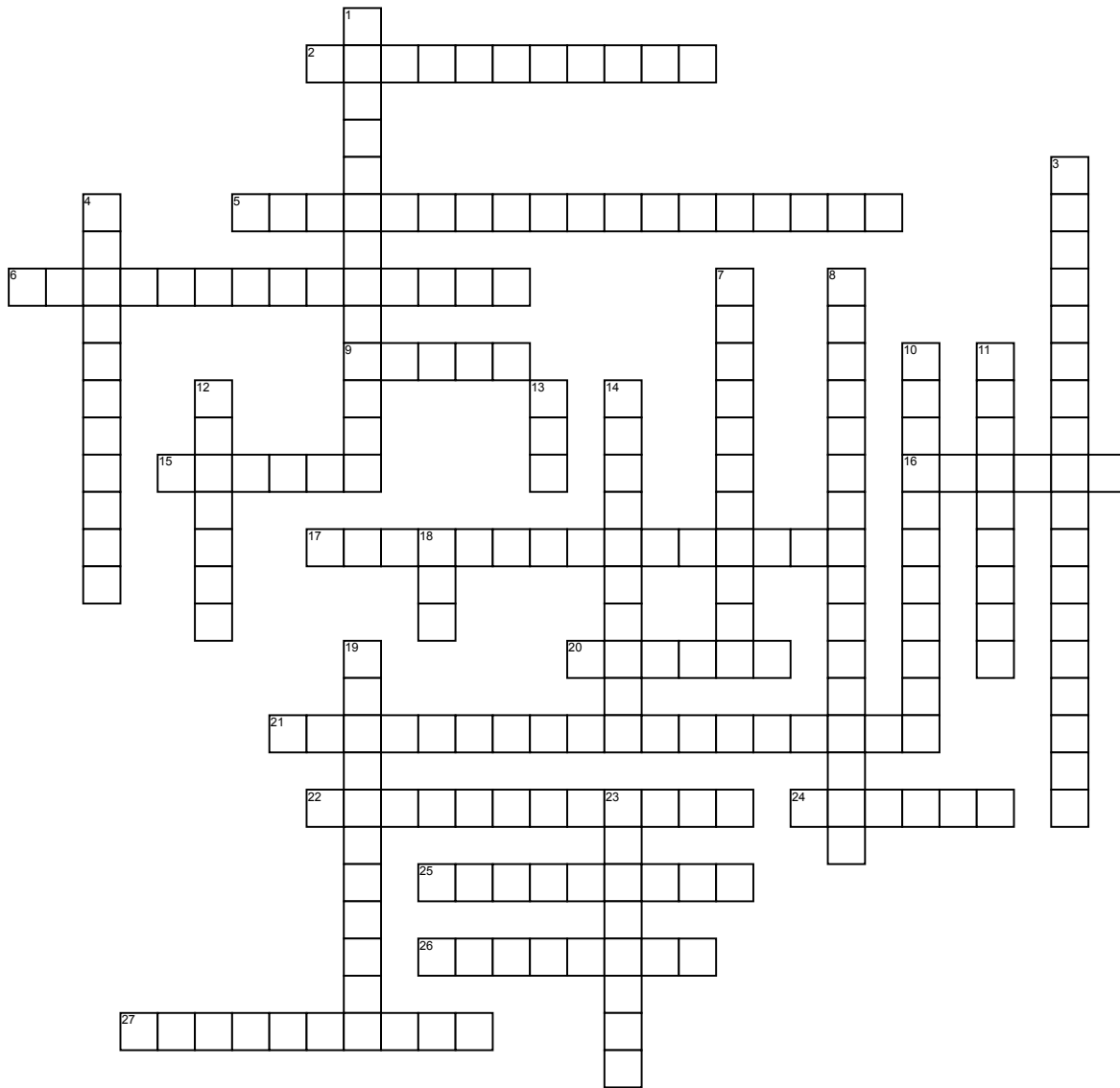


Name: _____

Early Pregnancy Loss



Across

2. antibiotic recommended prior to surgical management of EPL
5. intrauterine gestational sac with no embryonic heartbeat
6. cystic-fluid collection with rounded edges located within the decidua
9. diagnostic finding of EPL: CRL \geq to ____ mm
15. diagnostic finding of EPL: absence of embryo w HB ____ days after GS+YS
16. interobserver variation in measurement of mean sac diameter is ____ %
17. longterm use a contraindication to medical management of EPL (NOT anticoagulation)
20. a pregnancy that can potentially result in a liveborn baby

21. dilated cervix, products of conception have not expelled
22. anti-progestin used in medical management of miscarriage
24. percentage of pregnancy losses in the 1st T
25. most common chromosomal abnormality in EPL
26. gestational age at which the embryo is first seen adjacent to the yolk sac
27. Rh(-) women should received RhoGAM within ____ hours of misoprostol

Down

1. ultrasound findings to distinguish early IUP from psuedogestational sac
3. some products of conception have passed with some remaining in the uterus
4. prostaglandin E1 analog used in medical management of miscarriage

7. #1 cause of EPL is ____ abnormalities
8. syndrome associated with EPL
10. amnion seen adjacent to the yolk sac without visible embryo
11. gestational age at which gestational sac is typically first seen
12. first anatomical structure defined within the gestational sac (5.5w)
13. common risk factor for EPL
14. diagnostic finding of EPL: mean sac diameter \geq to ____ mm with NO embryo
18. EPL occurs in approximately ____ % of clinically recognized pregnancies
19. In diagnosing nonviability, want to eliminate false + results, with a goal of 100% ____
23. diagnostic finding of EPL: absence of embryo w HB ____ after GS only