

TABLE 2. Guidelines for Transvaginal Ultrasonographic Diagnosis of Pregnancy Failure in a Woman With an Intrauterine Pregnancy of Uncertain Viability*

Findings Diagnostic of Pregnancy Failure	Findings Suspicious for, But Not Diagnostic of, Pregnancy Failure†
CRL of ≥ 7 mm and no heartbeat	CRL of < 7 mm and no heartbeat
MSD of ≥ 25 mm and no embryo	MSD of 16–24 mm and no embryo
Absence of embryo with heartbeat ≥ 2 weeks after a scan that showed a gestational sac without a yolk sac	Absence of embryo with heartbeat 7–13 days after a scan that showed a gestational sac without a yolk sac
Absence of embryo with heartbeat ≥ 11 days after a scan that showed a gestational sac with a yolk sac	Absence of embryo with heartbeat 7–10 days after a scan that showed a gestational sac with a yolk sac
	Absence of embryo ≥ 6 weeks after LMP
	Empty amnion (amnion seen adjacent to yolk sac, with no visible embryo)
	Enlarged yolk sac (> 7 mm)
	Small gestational sac size in relation to the embryo (MSD – CRL < 5 mm)

* Criteria are from the Society of Radiologists in Ultrasound Multispecialty Consensus Conference on Early First Trimester Diagnosis of Miscarriage and Exclusion of a Viable Intrauterine Pregnancy, October 2012.

† When there are findings suspicious for pregnancy failure, follow-up ultrasonography at 7–10 days to assess the pregnancy for viability is generally appropriate. Abbreviations: CRL indicates crown-rump length; MSD, mean sac diameter; LMP, last menstrual period.