

# Bleeding in early pregnancy under 14 weeks gestation

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## Early Pregnancy Assessment Unit [Patient information](#)

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This is a worrying time for you, but 1 in 10 women experience bleeding in the first trimester of pregnancy. This is often not because of anything serious. However, it could be a warning sign of a possible miscarriage.

This leaflet will give you some information on bleeding in early pregnancy. This will help make sure you are fully informed.

### What can be the cause?

- **Implantation** - light vaginal bleeding can occur as the embryo implants itself in the wall of your uterus.
- **Cervical ectropion** - harmless changes to the cervix can cause bleeding. This can often happen after sexual intercourse.
- **Miscarriage** - occurs in 1 out of 4 pregnancies under 12 weeks gestation.
- **Ectopic pregnancy** - this is when a pregnancy grows outside the womb. The most common place for an ectopic pregnancy is in the tubes. This is a less common cause of bleeding.
- **Infection** - lots of pelvic infections can cause bleeding. Most can be easily treated with antibiotics. This is a less common cause of bleeding.
- **Unknown** - sometimes we are unable to find a cause for the bleeding. Many women will go on to have successful pregnancies.

### What will happen next?

You will be given an appointment in the Early Pregnancy Assessment Unit (EPAU). You will see a nurse specialist who will ask you some questions about your pregnancy and the bleeding you have experienced. A urine pregnancy test may be taken. An ultrasound scan may also be arranged.

### The ultrasound scan

A scan will happen as part of your appointment at the EPAU if it is needed. The scan will be a transvaginal (internal) scan. This is the clearest way to see early pregnancies. This is safe and does not raise the chance of miscarriage. Sometimes a cause for the bleeding cannot be seen on the scan.

### What if my EPAU appointment is not on the day I have been assessed?

**Do** carry on with your normal routine (bedrest is not recommended). Take paracetamol if needed for pain. Keep well hydrated.

**Don't** have sexual intercourse until the bleeding has stopped. Do not do any heavy lifting. Do not use tampons.

# What if I have increased bleeding before my EPAU appointment?

Please keep your appointment if the bleeding remains the same or is lighter than your normal period.

If:

- the bleeding is becoming heavier with clots
- you are soaking large sanitary towel
- you feel unwell with dizziness and pain.

Please contact your GP or attend the Emergency Department.

## After the scan

If the scan is normal then you will be reassured and sent home to continue with usual antenatal care.

If the scan is abnormal, the nurse will explain the results to you and discuss what happens next. You may need some blood tests and/or another scan. Sometimes more than one appointment is needed before we can confirm what is happening with your pregnancy.

## When will the bleeding stop?

It can take up to 10 days for the bleeding to settle.

If your bleeding continues for more than 10 days, you will be advised to contact the EPAU for advice.

Unfortunately, sometimes bleeding does progress to early pregnancy loss. Sadly, there are no treatments to stop this. Please return to the Emergency Department if the bleeding becomes heavy (soaking through more than two pads an hour).

If it does turn out to be a miscarriage, the Early Pregnancy Assessment Unit will support you through the diagnosis and treatment options (if needed). They will also provide emotional support.

Many women who attend EPAU with vaginal bleeding will have an ongoing pregnancy.

**Contact** - the staff at the EPAU are happy to help and give advice if you have any concerns during the first 14 weeks of your pregnancy.

**UHD Early Pregnancy Unit: 0300 019 5713** 8am-4pm

EPAU appointment date and time:

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