If an intrauterine pregnancy (IUP) was seen on a prior ultrasound and IUP is no longer seen, completed early pregnancy loss (EPL) is diagnosed and no further management is necessary.

In a viable intrauterine pregnancy with an initial $\beta$-hCG level less than 1500mIU/ml, 1500-3000mIU/ml, or above 3000mIU/ml there is a 99% chance that the $\beta$-hCG level will rise in 48 hours by at least 49%, 40% or 33%, respectively. A slower rate of rise or a decrease in levels suggests but does not diagnose EPL or ectopic pregnancy.

Discriminatory zone varies by the quality of the ultrasound machine and is the $\beta$-hCG level at which the pregnancy should be visible.

Figure 2: Diagnosis and Treatment of Ectopic Pregnancy