

SUBCHORIONIC HEMORRHAGE / HEMATOMA FAQs

What is a subchorionic hematoma/hemorrhage (SCH)?

- Bleeding between the chorion membranes and the uterus
- Frequently found on routine obstetric ultrasonography
- Exact etiology unknown, however believed to be due to detachment of chorionic membranes from the uterine wall
- Most common cause of bleeding in women 10-20 weeks gestation

Do you always bleed if you are diagnosed with a SCH?

- No. You can have a “concealed” hematoma that does not result in vaginal bleeding.
- If the blood leaks through the cervix, vaginal bleeding CAN be appreciated at varying quantities (as little as spotting or as much as large blood clots).
- Cramping can be present or absent

Am I having a miscarriage?

- No. Although a subchorionic hematoma can be linked with pregnancy complications like miscarriage, it is NOT diagnostic of a miscarriage.
- There is conflicting data on if the presence of a SCH leads to an increased risk of early pregnancy loss

Is there a way to get rid of my SCH?

- No. Routine management is conservative therapy with follow up ultrasounds as determined by your provider.
- A SCH can shrink in size or even resolve spontaneously on its own

How long does it take for the SCH to resolve?

- There is no set amount of time

What are some interventions to take if I have a SCH?

- Light activity (no exercising, no lifting beyond 10 lbs)
- Pelvic rest (i.e.: no relations)

When do I need to present to the Emergency Room?

- If you are saturating a pad in less than an hour or have significant abdominal pain as this can be suggestive of an early pregnancy loss.

Please contact your OB provider if you have any further questions.

Thanks,

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