

Obs Gynae Questions - SAQ

SAQ 1. A 32 yo female who is 32/40 is referred by her GP with 24 hours of right upper quadrant pain.

- a. What differential diagnoses would you consider? (6 marks)

- b. She has a BP of 150/110, hyperreflexia, and facial oedema. What are the criteria for diagnosis of pre-eclampsia? (2)

- c. List five signs/symptoms that would suggest pre-eclampsia. (5 marks)

- d. As you cannulate her, she has a grand mal seizure. What medications will you give for the seizure, including doses? (4 marks)

SAQ 2. A 38 yo female who is 28/40 presents after a high-speed MVA. She has no obvious injury except for a seat belt sign across her abdomen.

- a. Fill out the table with how physiological changes of normal pregnancy will affect assessment/management in trauma.

Physiological parameter	Change in pregnancy	Effect on assessment/management
Blood volume		
RBC count		
HR		
GIT motility		
FRC/RV		
Haematocrit		
Enlarged uterus	IVC compression	
Diaphragm height		

- b. She develops abdominal pain and is concerned she is going into early labour. What are the three stages of normal labour? (3 marks)

- c. She suddenly drops her blood pressure and has a cardiac arrest. Give 4 causes of maternal cardiac arrest (not specifically for this patient). (4 marks)

d. You consider a perimortem C section. What are the indications for a perimortem C-section? (3 marks)

SAQ 3. A 32 yo multiparous female presents with significant PV bleeding after the precipitous delivery of her term baby 15 minutes early. The infant is well and is being cared for by SAAS. SAAS have been unable to obtain IV access and the patient has a BP of 70/40.

a. List 5 causes of PPH and a cardinal clinical feature of each. (5 marks)

b. You diagnose uterine atony. List the management of this in ED, including doses where appropriate. (6 marks)

SAQ 4. List six risk factors for ectopic pregnancy. (6 marks)

SAQ 5. List 6 causes of antepartum haemorrhage. (6 marks)

SAQ 6. A 28 yo female who is 34/40 presents with pleuritic chest pain consistent with a PE.

a. How does the assessment of this patient with the following screening tests differ from non-pregnant patients? (3 marks).

D dimer

PERC score

Well's score

b. What imaging would you use to investigate a potential PE in this patient? Justify your choice. (2 marks)

c. A scan shows a PE in the left lower pulmonary artery. How does management of this patient using the following medications differ from that of a non-pregnant patient with the same diagnosis? (3 marks)

Warfarin

Clexane/heparin

Apixaban