

“Затверджено“
на методичній нараді кафедри акушерства,
гінекології та планування сім’ї
медичного інституту СумДУ
протокол № _____
від “ _____ “ _____ 2021р.

Methodical development

independent work of a student in the discipline "Obstetrics"

Topic: Physiology of pregnancy. Methods of examination of pregnant women. Perinatal protection of the fetus

Number of hours - 3.

Objective: to know the basic principles and problems that arise during antenatal care and ways to solve them, to analyze changes in the psychological state and CNS observed in pregnant women, to know changes in the cardiovascular, respiratory, blood, gastrointestinal and gastrointestinal systems tract, kidneys, endocrine system, metabolic system, skin, musculoskeletal system, genitals and mammary glands observed in pregnant women; classify doubtful, probable and reliable signs of pregnancy and know their diagnostic value; to diagnose uncomfortable conditions that occur during pregnancy, to assess the complaints of women that arose in connection with pregnancy, to differentiate physiological changes in the mother's body during pregnancy with pathological.

The student should: examine the external genitalia and cervix and assess their condition, conduct a vaginal examination and determine the size of the uterus, diagnose pregnancy at an early stage by gynecological examination, make a plan for additional examination to diagnose early pregnancy, evaluate the results of hardware methods of pregnancy diagnosis in the early stages, to be able to determine contraindications to hardware research methods in the early stages, to evaluate the data of laboratory (immunological) methods of diagnosis of pregnancy in the early stages.

Class organization:

I. Testing: 20 tests.

II. Key issues:

1. The concept of gestational dominance, its components and the impact on the physiological course of pregnancy.
2. Changes in the endocrine system during physiological pregnancy.
3. Changes in the reproductive organs and mammary glands, which ensure the physiological delivery of pregnancy and the course of childbirth and the postpartum period.
4. Changes in the cardiovascular, respiratory and blood systems observed in almost healthy pregnant women.
5. Physiological changes in the digestive system during pregnancy and their impact on the course of diseases of the gastrointestinal tract.
6. Features of the urinary system during the physiological course of pregnancy.
7. Changes in metabolism observed in almost healthy pregnant women.

8. Features of the skin, musculoskeletal system in somatically healthy women during pregnancy.
9. The placenta, its structure and function.
10. Critical periods of embryo and fetal development. Influence of harmful factors on the embryo and fetus.
11. Hygiene and nutrition of the pregnant woman.
12. Methods of examination of pregnant women: diagnosis of early and late pregnancy. Topography of the fetus in the uterus.
13. Management of physiological pregnancy. Gravidoqram.
14. Laboratory diagnosis during pregnancy.
15. Determination of prenatal leave and date of birth.
16. Methods of assessment of the fetus: assessment of fetal motor activity, cardiac activity (CTG). Biophysical profile of the fetus.
17. Ultrasound examination in obstetrics. X-ray examination.
18. The role of medical and genetic counseling.
19. Biochemical screening of fetal malformations. Cytogenetic methods of studying the condition of the fetus.
20. Doppler blood flow velocity in the umbilical artery, uterine artery and fetal aorta. The concept of systolic-diastolic ratio.

III. Practical experience:

1. Collect anamnesis, identify the main problems and complaints of women that have arisen in connection with pregnancy.
2. Conduct a general examination of pregnant women, Leopold's receptions,
3. Diagnose uncomfortable conditions that occurred during pregnancy.
4. Differentiate physiological changes in the mother's body during pregnancy with pathological on the basis of evaluation of the results of laboratory and other methods of examination.
5. Collect a medical history and evaluate the woman's complaints that arose in connection with pregnancy.
6. Examine the external genitalia and cervix and assess their condition.
7. Conduct a vaginal examination and determine the size of the uterus.
8. Determining the expected date of delivery.
9. Make a plan for additional examination to diagnose pregnancy.
10. Evaluate the results of ultrasound examination in early pregnancy.
11. Evaluate the results of the immunological test for pregnancy

IV. Solving situational problems.

1. The first-born woman was delivered by ambulance within 39-40 weeks with complaints of contractions lasting up to 20 seconds after 6-7 minutes, amniotic fluid was not spilled. On examination: satisfactory condition. The skin and visible mucous membranes are pale pink. Pelvic dimensions: 25-28-30-21 cm. Solovyov index 15 cm. From the internal organs without visible pathology. Blood pressure 130/80 mm Hg The abdomen is enlarged by the pregnant uterus. VDM 38 cm, coolant 100 cm. The position of the fetus is longitudinal, the head is pressed to the entrance to the small pelvis. Fetal heart rate 146 beats / min. Physiological dispatches are not disturbed. Evaluate blood pressure readings

A indicators are normal for the third trimester of pregnancy

B rates are elevated, primary chronic hypertension

C rates are elevated, secondary chronic hypertension

D indicators are increased, gestational arterial hypertension

E indicators are reduced, IRR by hypotonic type

2. A 26-year-old woman with complaints of contractions lasting 35-40 seconds was taken to the maternity hospital by ambulance in 3-4 minutes. Current pregnancy 3rd, term 40 weeks. History of 2 births. The first day of the last menstruation on May 5. Objective: the condition is satisfactory. The skin and visible mucous membranes are pale pink. Pelvic dimensions: 25-28-31-21 cm. Solovyov index 15 cm. From the internal organs without visible pathology. Blood pressure 120/80 mm Hg During an external obstetric examination in a supine position, the woman suddenly turned pale and covered in cold sweat. Complain about dizziness, ringing in the ears, difficulty breathing, loss of consciousness. When measuring blood pressure 80/50 mm Hg. Art., pulse 98 beats / min. The abdomen is enlarged by the pregnant uterus in the form of a regular ovoid. VDM 42 cm, coolant 102 cm. What is the cause of the developed condition?

A aorto-caval compression syndrome

B hypoglycemic coma

C hypertensive crisis

D orthostatic collapse

E pain syndrome

3. Pregnant 18 years, gestation period 14-15 weeks. Smokes from 14 years to 15-20 cigarettes a day. What arguments should a doctor make about the negative effects of smoking during pregnancy?

A. Increased risk of miscarriage

B. The possibility of giving birth to a child with low body weight

C. The possibility of sudden infant death syndrome

D. Increased risk of respiratory infections and bronchial asthma

E. All of the above

4. Examining the pregnant woman in a women's clinic, the doctor found that the uterus is enlarged to 5-6 weeks of pregnancy, asymmetric, in the left corner of the body of the uterus is palpated protrusion. The uterus is soft, but during the study was reduced and compacted. After the irritation stopped, it became soft again. What signs of pregnancy did the doctor find?

A. Snegirev and Genter

B. Gubarev and Gauss

C. Gorwitz-Gegar

D. Genter and Piskachek

E. Piskachek and Snegirev

5. A 38-year-old woman complains of minor bleeding and mild lower abdominal pain for several days. The last menstruation was 7 weeks ago. What hormone content do you need to know to determine further drug tactics?

A. STG

B. Progesterone

C. HCG

D. Estriol

E. Prolactin

6. A 22-year-old patient complains of delayed menstruation for 2 months. Taste sensations have changed. There were no births or abortions. At gynecological examination: the mucous membrane of the vagina and cervix is cyanotic, the body of the uterus is spherical, enlarged to 7-8 weeks of pregnancy, soft consistency. Appendages without features. The cervix is softened. The vaults of the vagina are free. Which diagnosis is most likely?

A. Chorionepithelioma

B. Uterine leiomyoma

C. Menstrual irregularities

D. Bladder drift

E. Uterine pregnancy

Recommended reading:

1. Obstetrics and gynecology: textbook: in 2 books. Book 1 Obstetrics: Obstetrics / BM Ventskivsky, MO Shcherbina, VI Grishchenko [etc.]; - 4th ed., Ed. - K.: Медицина, 2020. – 424 p.

2. Obstetrics and gynecology: textbook: in 2 books. Book 2 Gynecology / VB Ventskivsky, MO Shcherbina, VI Grishchenko [etc.]; - 3rd ed., Ed. - K.: Медицина,

2020. - 376 p.

3. Workshop on obstetrics / II Bachynska - K .: "Medicine", 2021. - 104 p.

4. Workshop on phantom obstetrics / P. Yavirsky, V. Shatylo, T. Yavirska - K .: "Medicine", 2017 - 144 p.

5. Workshop on gynecology / A.M. Vavilova - K .: "Medicine", 2019. - 96 p.

6. Clinical obstetrics and gynecology / A. Brian, Magovan, Philip Ouden, Andrew Thomson; scientific editor of the translation M. Shcherbyna - K .: "Medicine", 2021. - 512 p.

7. Oxford Textbook of Obstetrics and Gynecology / Sabaratram Arulkumaran, Wiliam Ledger, Lynette Denny, Stergious Doumouchsis - Oxford University Press, 2020, 928 p.

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