"Approved" at methodical meeting of the Department of obstetrics, gynecology and family planning Medical Institute of Sumy State University protocol № ______ " " 2021p.

Methodical recommendations

for practical classes of obstetrics and gynecology

Topic: Bleeding during pregnancy, childbirth and the postpartum period. Hemorrhagic shock. DIC syndrome. Intensive therapy and resuscitation for bleeding in obstetrics.

The duration of the lesson – is 6 hours.

Venue: obstetric department, training room.

The purpose and rationale of the topic – to deepen students' perceptions of the etiology, pathogenesis of bleeding in the first and second half of pregnancy, childbirth and the postpartum period. To master the practical skills of emergency care in hemorrhagic shock directly of the patients.

The student must know:

- a modern regulatory framework on the topic of the lesson;
- The main infusion medium (crystalloid and colloid) used in the treatment of hemorrhagic shock;
- technique of the main operations used to stop obstetric bleeding.

The student must be able to:

- define blood type;
- to conduct external massage of the uterus;
- to carry out a manual examination of the walls of the uterus;
- produce venipuncture and venesection.

Materials and equipment: schemes, tables, Internet resource.

Test questions

- 1. Ectopic pregnancy (etiology, pathogenesis, clinical features, diagnosis, treatment).
- 2. Cervical pregnancy (etiology, pathogenesis, clinical features, diagnosis, treatment).
- 3. Placenta previa (etiology, pathogenesis, clinic, diagnosis, treatment).
- 4. Premature detachment of a normal ramp placenta (etiology, pathogenesis, clinic, diagnosis, treatment).

5. Bleeding in the 3rd stage of labor. Causes of violation of the separation of the placenta and discharge of

the placenta. Clinic, diagnosis and treatment of abnormalities of the placenta.

6. Bleeding in early postpartum period. Clinic, diagnosis and treatment.

- 7. Classification of hemorrhagic shock.
- 8. Hemorrhagic shock. Treatment methods.
- 9. Modern views on the etiology, pathogenesis of the development of DIC syndrome.
- 10. Treatment of DIC syndrome.

Examples of test control for assessing the final level of knowledge

- 1. The basis of the pathogenesis of DIC syndrome:
- a) violation of coagulation hemostasis;
- b) endothelial dysfunction;
- c) violation of the structure of red blood cells;
- d) vascular inflammation.
- 2. Factors for the development of DIC in obstetrics are all but:
- *a) multiple pregnancy;*
- b) eclampsia;
- c) septic abortion;
- d) caesarean section.
- 3. According to the clinical course of DIC, all forms are distinguished, except:
- a) acute

- b) subacute
- c) chronic
- *d*) *early*;
- e) recurrent.
- 4. How many stages of DIC syndrome are distinguished:
- a) 1;
- b) 2;
- c) 3;
- *d*) *4*.
- 5. For I stage DIC syndrome is not typical:
- a) coagulation of venous blood is normal;
- b) platelet hyperaggregation;
- c) petechial type of bleeding;
- d) chronometric hypercoagulation.
- 6. For II stage of DIC syndrome is not typical:
- a) petechial type of bleeding;
- *b)* platelet hyperaggregation;
- c) ARASNE II 20-25 points.
- 7. For III stage of DIC syndrome is not typical:
- a) chronometric hypocoagulation;
- b) mixed type of bleeding;
- c) ARACNE II 20-25 points.
- 8. For IV stage of DIC syndrome is not typical:
- a) total hemorrhage;
- b) mixed type of bleeding;
- c) ARACNE II> 30 points.
- 9. The coagulation time according to Lee-White is normally:
- a) 10-15 minutes;
- *b)* 6-9 *min;*
- c) 1-5 minutes;
- d) 5-12 minutes
- 10. Coagulation time according to Lee-White with DIC-syndrome I stage:
- a) 10-15 minutes;
- b) 6-9 minutes;
- c) <5 min;
- d) 5-12 minutes

Technological map

Test (computer) testing	1 hour	Class room
Krok 2		
Supervising thematic patients,	3 hours	Obstetrical department
demonstrating practical skills		
Clinical analysis of case	1 hour	Class room
histories, situational tasks		
Computer testing and	1 hour	Class room
interviewing on the topic of		
the current lesson		

Types and forms of control:

- · computer testing;
- \cdot interview on the topic of the lesson.

Literature (required):

1. Grishchenko V. I. Obstetrics and gynecology: a textbook: in 2 books. Prince 1: Obstetrics / B. I. Grishchenko, N. A. Shcherbina, B. M. Venzkovsky; Edited by: V.I. Grishchenko, N.A. Shcherbina. – Kiev: Medicine, 2012. – 416 p.

2. Zaporozhan, V. N. – Obstetrics and gynecology textbook: in 2 books. Book 1: Obstetrics / B. N. ZaporozhanKiev: Health, 2001. - 480 p.

3. Materials of lectures.

Literature (optional):

1. Liewellyn-Jones Derek. Fundamentals of Obstetrics and Gynaecology / Derek Liewellyn-Jones, Jeremy Oats, Suzanne Abraham. – 10-th Edition – Canada : Elsevier Limited, : 2017.

2. Obstetrics & Gynaecology : an Evidence-based Text for the MRCOG / edited by David M. Luesley and Mark D. Kilby. – Boca Raton : Taylor & Francis Group, 2016.

3. "Krok 2": site of the Testing Center at the Ministry of Health of Uraina [Electronic resource]. - Access mode: <u>https://www.testcent.org.ua/uK/Krok-2</u>.