"Approved"
at methodical meeting of the Department of
obstetrics, gynecology and family planning
Medical Institute of Sumy State University
protocol № _____
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Methodical recommendations

for practical classes of obstetrics and gynecology

Topic: Postpartum septic diseases. Surgical interventions 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' knowledge on issues of modern views on the etiology, pathogenesis, clinic, diagnosis and treatment of postpartum septic diseases. Learn basic obstetric surgery.

The student must know:

− a modern regulatory framework on the topic of the lesson.

The student must be able to:

− interpret the data of clinical and laboratory examination;
− evaluate the data of ultrasound examination;
− prescribe the treatment of identified pathology.

Materials and equipment: schemes, tables, Internet resource

Test questions

1. Modern views on the etiology, pathogenesis of postpartum purulent-septic diseases.
2. Classification of postpartum septic diseases.
3. Ways of the spread of postpartum infection.
4. Diagnosis of the main forms of postpartum purulent-septic diseases.
5. The clinical course of the main forms of postpartum purulent-septic diseases.
6. Diagnosis of atypical forms of postpartum purulent-septic diseases.
7. Complex therapy of postpartum purulent-septic diseases.
8. The principles of antibacterial therapy of postpartum purulent-septic diseases.
9. Diagnosis of lactational mastitis.
10. Treatment of postpartum lactational mastitis.
11. Prevention of postpartum purulent-septic diseases.
12. Types of obstetric forceps that are used in Ukraine.
13. The structure of obstetric forceps.
14. Indications for the application of obstetric forceps.
15. Contraindications to the application of obstetric forceps.
16. Conditions necessary for the operation of obstetric forceps.
17. The rules for applying obstetric forceps.
18. Methods of anesthesia during surgery obstetric forceps.
19. Complications arising from the operation of imposing obstetric forceps, their prevention.
20. The main fetal-destroying operations.
21. Craniotomy: indications for surgery, conditions and instruments.
22. Technique of craniotomy.
23. Kleidotomy: indications, conditions, technique of operation.
24. Decapitation: indications, conditions, technique of operation.
25. Evisceration, spondylotomy: indications, conditions, technique of operation.
26. Complications and errors during fetal-destroying operations.
27. Indications for cesarean section.
28. The main techniques of caesarean section.
29. Complications of caesarean section.

30. Preparation for cesarean section and postoperative management.

Examples of test control for assessing the final level of knowledge

1. Systemic inflammatory response syndrome (SIRS) includes symptoms:
a) heart rate over 90 beats / min;
b) respiratory rate above 30 per minute or Ra CO2 below 35 mm Hg;
c) body temperature is more than 37.5 0C;
d) everything is correct.
2. What is the name of the systemic inflammatory response to a reliably detected infection in the absence of another possible reason for such changes?
a) sepsis;
b) severe sepsis;
c) septic shock;
d) everything is correct.
3. Systemic inflammatory response syndrome (SIRS) includes symptoms:
a) the number of leukocytes over 12000 mm3, less than 400 mm3 or more than 10% of young forms;
b) body temperature is more than 37.5 0C;
c) heart rate less than 60 beats min;
d) respiratory rate in excess of 35 per minute.
4. The occurrence of septic shock contribute to:
a) the presence of a focus of infection;
b) reducing the overall resistance of the body;
c) the possibility of penetration of pathogens or their toxins into the bloodstream;
d) everything is correct.
5. In the development of septic shock, the following stages are distinguished:
a) *hyperdynamic and hypodynamic;*
b) hyperdynamic, hypodynamic, adynamic;
c) first, progress, terminal, final;
d) none of the above.
6. The hyperdynamic stage of septic shock is characterized by:
a) decrease in peripheral resistance, reflex increase in cardiac output;
b) violation of perfusion and oxygenation, an increase in bcc;
c) myocardial dysfunction and regional vasoconstriction;
d) increasing the vital capacity of the lungs.
7. Which of the clinical and laboratory signs are indicators of severe sepsis?
a) thrombocytopenia <100 * 10 / l, which cannot be explained by another reason;
b) increasing the level of C-reactive protein;
c) positive blood culture with the detection of circulating microorganisms.
d) everything is correct.
8. The diagnosis of septic shock is established if the following are attached to clinical and laboratory signs:
a) petechial rash, necrosis of skin;
b) increase the level of lactate more than 1.6 mmol / l;
c) oliguria (diuresis less than 30 ml / year);
d) everything is correct.
9. The basic principles of intensive care for septic shock include:
a) immediate hospitalization in the intensive care unit;
b) support for adequate ventilation and gas exchange;
c) surgical debridement of foci of infection;
d) everything is correct.
10. In septic shock, the following infusion therapy program is recommended:
a) *first, the liquid is introduced at a rate of 10 ml / min for 15 minutes, and then at the usual pace;*
b) fluid is administered at a normal pace regardless of hemodynamic parameters;

c) first, the liquid is injected at a speed of 35-40 ml / min, and after 20 minutes at a speed of 15 ml / min for 1 hour;
d) none of the above.

Technological map

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

Types and forms of control:

· computer testing;
· 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: https://www.testcent.org.ua/uK/Krok-2.