
CASE DISCUSSIONS

CASE 1

A 24 y/o pt at 32 weeks presents with painful vaginal bleeding of a moderate amount.

Her pregnancy has been complicated by HTN and heavy smoking.

What does your initial assessment and investigation include?

CASE 2

32 y/o G7P6 was delivered at home by a midwife. She is being brought in by ambulance for profuse bleeding.

- BP stable, HR 82
- On assessment: stable hemodynamically, placenta in situ, cord avulsed, still bleeding
- Ivs in place
- Management
 - ABCs
 - Group and X-match, CBC, INR
 - Anesthesia
 - Prepare for OR (manual removal)
 - Beware accreta, inversion
 - Uterus still boggy after removal...A 70 years old woman complains of early satiety and abdominal distension

CASE 3

A 21 year old primip presents for a routine antenatal visit at 28 weeks. You remark that the fetus is in a breech position and she immediately is worried that she will end up with a cesarean section.

How would you counsel her at this stage?

How would your discussion differ if she presented at 36 weeks?