

**MINISTRY OF HEALTH OF UKRAINE
ODESSA NATIONAL MEDICAL UNIVERSITY**

Faculty of international

Department of Obstetrics and Gynecology



I APPROVE

Vice-rector for scientific and pedagogical work

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**METHODOLOGICAL DEVELOPMENT TO THE PRACTICAL LESSONS
FROM MEDICAL PRACTICE**

Faculty of international , 4th year

Educational discipline " **Obstetrics and gynecology** "

Practical lesson №5. Topic: " Curation of a gynecological patient, preparation of educational medical history ".


Approved:


Meeting of the Department of Obstetrics and Gynecology
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Protocol No. 1 dated August 28, 2023 .

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Practical lesson №5

Topic: " Curation of a gynecological patient, preparation of educational medical history ".

Purpose: to learn to take the patient's complaints, medical history, life history, information about the patient's general condition and appearance, examine the condition of the cardiovascular system, respiratory organs, the condition of the organs of the abdominal cavity, the musculoskeletal system, the nervous system, the condition of the genitourinary system systems. Identify from complaints, medical history, data of subjective, objective and special examination methods the signs and features needed to establish the final diagnosis, evaluate them.

Basic concepts: General blood analysis. General analysis of urine. Blood hormones. Coagulogram. Amplification methods for infectious diseases (PCR, LLR). Microbiological research of biological fluids and secretions. Methods of instrumental visualization of abdominal organs. Methods of instrumental visualization of the genitourinary system (MSG, ultrasound). Methods of instrumental visualization of the skull. Methods of instrumental visualization of the breast. Cytological examination of the cervix. Histomorphological study of biopsy of mucous membranes. Establishing a preliminary and clinical diagnosis of the disease. Preparation of educational medical history.

Equipment: Professional algorithms, structural and logical schemes, tables, models, video materials, results of laboratory and instrumental studies, situational problems, patients, case histories.

1. Organizational measures (greetings, verification of those present, announcement of the topic, purpose of the lesson, motivation of higher education seekers to study the topic).

Curation of gynecological patients allows one to be able to identify from complaints, anamnesis of the disease, the data of subjective and objective special methods of examination, the signs and features that are needed to establish a final diagnosis, to analyze them, it gives the opportunity for students of higher education to acquire the skills of formulating a possibly earlier, well-founded and a probable diagnostic hypothesis, to carry out a differential diagnosis, to draw up a plan for further examination and treatment of a gynecological patient.

2 . Control of the basic level of knowledge (written work, written test, online test, face-to-face survey, etc.).

Requirements for the theoretical readiness of students of higher education to perform practical classes (knowledge requirements, list of didactic units);

Knowledge requirements:

- Ability to collect medical information about the patient and analyze clinical data.
- Ability to determine the necessary list of laboratory and instrumental studies and evaluate their results.
- Ability to establish a preliminary and clinical diagnosis of the disease.

- The ability to determine the necessary regime of work and rest in the treatment and prevention of diseases
- The ability to determine the nature of nutrition in the treatment and prevention of diseases.
- Ability to determine the principles and nature of treatment and prevention of diseases.
- Ability to diagnose emergency conditions.
- Ability to determine tactics and provide emergency medical assistance.
- Ability to perform medical manipulations.
- Ability to maintain medical documentation, including electronic forms.
- The ability to determine the management tactics of persons subject to dispensary supervision

List of didactic units:

- Complaints
- Medical history.
- History of life.
- Gynecological history.
- Objective examination.
- Preliminary diagnosis.
- Laboratory and instrumental research methods.
- Differential diagnosis.
- Final diagnosis.
- Methods of treatment of a gynecological patient.
- Prevention.

Questions (test tasks, tasks, clinical situations) to check basic knowledge on the subject of the lesson

Theoretical questions for the lesson:

1. Anatomy and physiology of female genital organs.
2. Specific functions of the female body . Regulation of the menstrual cycle.
3. Peculiarities of taking an anamnesis from a gynecological patient.
4. Special methods of examination of gynecological patients.
5. Mechanisms of action of drugs that can be used for gynecological diseases.
6. Differential diagnosis of gynecological diseases.

Test tasks:

1. A 40-year-old woman came to the women's consultation with complaints of menstrual cycle disorders of the hyperpolymenorrhea type for six months, pulling pains in the lower abdomen, weakness. During the gynecological examination, the body of the uterus is enlarged up to 12 weeks of pregnancy, dense, mobile, painless. In the blood: Hb - 90 g/l. What pathology can be assumed?
 - A. Myoma of the uterus*
 - B. Cancer of the uterine body
 - S. Pregnancy
 - D. Cystoma of the ovary

E. Abnormal uterine bleeding

2. The patient complains of pain in the lower abdomen, which intensifies during menstruation and sexual intercourse, and radiates into the vagina. During the vaginal examination, dense, nodular, painful formations are found behind the uterus. What is the most likely diagnosis?

- A. Retrocervical endometriosis*
- B. Adenomyosis
- C. Perimetritis
- D. Chronic inflammation of the appendages of the uterus
- E. Parametric

3. Formation of professional skills and abilities (mastery of skills, conducting curation, determining the treatment scheme, conducting laboratory research, etc.):

Content of tasks (tasks, clinical situations, etc.)

Recommendations (instructions) for performing tasks (professional algorithms, orienting maps for the formation of practical skills and abilities, etc.)

SCHEME OF HISTORY DISEASES GYNECOLOGICAL DISEASE

Patient (Surname named after 'I and paternal)

Clinical diagnosis (*established within the first three days after the patient's hospitalization in a medical institution*)_ _____

Associated diseases _____

Curator _____

Faculty _____

Course__ **Group** _____

Head of curation_____

Time of curation_____

PASSPORT PART

Surname, first name and patronymic name_____. Age_____.

Marital status_____.

Profession_____. Job_____. Home address_____.

_____ Date of hospitalization_____.

GRIEVANCE

The main complaints that brought the patient to the medical institution, as well as complaints in the present tense. Associated complaints.

ANAMNESIS DISEASE (*anamnesis morbi*).

When and how this disease began, how it developed; suddenly, or gradually, or were at the same time pain, their localization and character, bleeding, etc. How long were you in the hospital or at home in bed, what was the treatment for? How the disease progressed later, what and where it was treated, the results of treatment. If the disease is chronic, when was the last exacerbation.

ANAMNESIS LIFE (*anamnesis vitae*).

Conditions of birth , development, childhood. Diseases suffered in childhood and in subsequent periods of life - childhood diseases, chronic infectious diseases, malaria, typhus, tuberculosis, hepatitis, injuries, surgical interventions, blood transfusions. Frequent colds. Psychoemotional state. Does he currently take any medications and which ones?

Previous gynecological diseases, where and when they were treated, the effect of treatment. Family history: health status of parents (hereditary diseases), brothers, sisters - tuberculosis, venereal diseases, obesity, infertility, tumors of the reproductive system, developmental defects, pathology of the main body systems. Mental illnesses, malignant neoplasms, alcoholism. The man's state of health (parotitis, venereal diseases, sexually transmitted diseases, etc.).

Living conditions in childhood and now. Living conditions (environmental history): overcrowding, lighting, heating, humidity, general sanitary conditions. The state of the area (presence of harmful industries, irrigation fields, radioactive emitters, etc.).

Nutrition: quantity, quality, regularity of food intake.

Nature of work (hard physical work). Occupational hazards (organic solvents, work in hot shops, dusty rooms, radiation, vibration, etc.).

Harmful habits (smoking, alcoholism, drug addiction).

Allergological history: intolerance to drugs and other substances (industrial, household), food products.

Menstrual function

At what year of life did menstruation begin, or did it immediately stabilize. The nature of the menstrual cycle (the volume of blood loss, the presence of pain, the duration and regularity of menstruation. The nature of their changes after the beginning of sexual life , childbirth , abortions, etc. Contact bleeding. The time of the last normal menstruation.

Gender function

When did sex life begin? Is he married? In which marriage (by number) is there, how many time was in previous ones marriages How often changes sexual partners. Did the diseases appear after the beginning of sexual life. Features sexual life (pains during intercourse, bleeding during intercourse, when the last sexual intercourse was). Does she use contraceptives and which ones? How effective are they?

Childbearing function

As soon as I got pregnant after the start sex life How many times was she pregnant, with what intervals of time between pregnancies. How many births were there: urgent, premature. How did they flow (if abnormal, how did it manifest itself). How many children are alive, when was the last birth. How many abortions were there: artificial, spontaneous, in what month of pregnancy. Were there complications after abortions, when was the last abortion.

Secretary A function

Or is white with whose time their noticed them nature (color, consistence, scent) and quantity Does it irritate the external genitalia and the skin of the thighs and buttocks.

OBJECTIVE STATE OF THE PATIENT AT THE PRESENT TIME

(Status praesens objectivus)

General review the patient The patient's position (active, passive), consciousness, temperature, blood pressure pressure, pulse, mucous membranes, tongue. Height. Weight. Building bodies Food. Tongue.

The condition of the skin and integuments. The nature of hair growth. Hair growth in atypical places for a woman (on the hips, white line of the abdomen, chin, peri-nipple area); the time of its appearance (before or after the first menstruation). Skin condition (swelling, itching, rash, presence of acne, increased humidity). the presence of stretch marks, their color, location, time of appearance. Subcutaneous layer (turgor).

Thyroid. Lymphatic system (palpation of lymph nodes). Musculoskeletal system. Chest. The condition of the heart and circulatory system (blood pressure, heart pain, palpitations, edema). Respiratory organs (breathing, cough, shortness of breath, chest pain).

Neurological status (mood, memory, sleep, attention, headache, or change in sensitivity). Sight, taste, hearing, smell.

Palpation of the mammary glands (presence of tumor-like formations, discharge from the nipples, their color).

Digestive organs: appetite, thirst; pains, dry mouth, salivation, hall. mouth Dyspeptic phenomena, heartburn, belching, bitterness in the mouth, nausea, vomiting. His stomach. Changes in the volume of the abdomen during the illness: gas, grunting. Stool (frequency, character, pain, tenesmus).

Urinary function, urination is free, painless, frequency. Pasternacki's symptom.

Stomach.

Its shape (convex, sunken, pigmentation of the white line, state of the anterior abdominal wall (turgor), participation in the act of breathing. Percussion of the abdomen. Palpation of the abdomen (tension of the muscles of the anterior abdominal wall). Data of deep palpation. Liver, stomach, intestine, spleen If there is a tumor, determine its boundaries, mobility, size, shape, surface character, consistency and tenderness. Symptoms of abdominal irritation. Abdominal auscultation.

Genitals.

Examination of the external genitalia. The nature and type of hair on the external genitalia. Pubic hair (shape, nature and type of hair, condition of the subcutaneous fat layer). The inner surface of the thighs (the presence of hyperemia, pigmentation. Description of the external genitalia: large and are small sexual lips - size, presence of hyperemia, pigmentation, varicose veins, condylomas, ulcers, swelling, condition of the mucous membrane (dryness, paleness). Clitoris (size). Perineum (presence of old tears, scars). Genital fissure (condition, degree of closure). Vaginal hair with glands - condition of Bartholin's glands, external opening of the urethra (presence of polyps, hyperemia). Hymen is integrity.

Examination in mirrors: vagina (folding, condition of the mucous membrane, presence of edema, neoplasms). The vaginal part of the cervix (shape, size, color of the mucous membrane, the presence of precancerous diseases, if so - their color and nature). The external eye of the cervical canal (color of the mucous membrane, shape, condition). The nature of secretions (color, quantity, smell) from the cervical canal and vagina.

When examining in mirrors, pH-metry of the contents of the vagina is performed, material is taken to determine the degree of cleanliness of the vagina, cytological, bacteriological and bacterioscopic studies are carried out. If necessary, functional diagnostic tests of the hormonal function of the ovaries are performed.

Vaginal examination: length, width of the vagina, condition of the perineum, muscles of the pelvic floor, mobility of the mucous membrane. The condition of the vaults of the vagina (depth, soreness). Cervix (shape, consistency, degree of mobility, degree of sensitivity).

Bimanual examination (abdominal-vaginal):

Uterus (position, size, degree of mobility, sensitivity, consistency). Fallopian tubes are thin and soft in the absence of pathological changes, normally they are not palpable. Ovaries (shape, size, pain). Ligaments of the uterus (consistency, soreness, infiltration). Cervical tissue (condition – soft, does not limit the mobility of the uterus, degree of sensitivity).

A rectal-abdominal examination is performed for girls, if a detailed examination of the pelvic organs is necessary for women (when a tumor-like process is suspected or when it is ascertained to determine the stage), as well as in inflammatory processes to determine the degree of infiltration of the sacro-uterine ligaments and pararectal tissue, in case of atresia and vaginal stenosis. If necessary - and it arises when there is a suspicion of the presence of pathological processes in the wall of the vagina, rectum or rectal-vaginal membrane - conducting a rectal -vaginal examination.

Data of laboratory, instrumental and other special research methods.

The data of research methods are extracted from the medical history and analyzed.

Preliminary diagnosis.

Brief conclusions of objective research. The diagnosis is written concisely and can be generalizing.

Differential diagnosis

If it is necessary to differentiate this disease from other pathologies that have it in common, the elements of similarity are first indicated, then a description of the differentiating form is given, and only after that the conclusion of its low probability in this case is described.

Plan for additional research

A plan of additional research methods is drawn up, which, in the opinion of the student of higher education, must be carried out for clarification or making a final diagnosis.

Final diagnosis

The diagnosis should be detailed. This means that all pathological changes detected in the patient should be reflected in it.

Treatment

Treatment is covered in two ways: the general principles of treatment the disease and treatment that should be carried out for this patient in the clinic. The main dosage forms are recorded in recipes _ If an operative intervention was performed, the operation is described. For physiotherapeutic treatment - single and course doses.

Histological and other studies of organs and their parts removed during surgery.

Diary

(a detailed daily description of the patient's condition for 3 days)

Preventive instructions

The instructions should contain data on recommended living conditions, work, diet and medication.

The result of the disease. Forecast.

The prognosis is written "for recovery", "for life", "for work capacity". If the patient's work capacity is limited due to the disease, then the expected group of disability and employment measures are indicated. Dispensary observation.

Epicris

The main complaints, anamnesis data, objective condition, dynamics of the disease are briefly described. Basic laboratory and instrumental research. Justification of the diagnosis. The therapy was carried out. Treatment outcomes (recovery, improvement, no change, deterioration, death). Loss of working capacity (restored, lost, reduced).

Used Books

Date

Signature curate or a

Control materials for the final stage of the lesson: tasks, tasks, tests, etc. (if necessary)

Practical works (tasks) that will be performed during the lesson

1. Under the guidance of the teacher, students of higher education consider the main points of the curation scheme of a gynecological patient; get acquainted with the medical history; analyze the data of laboratory, instrumental, hardware research methods.
2. The teacher distributes gynecological patients for curation among the students of higher education.
3. After writing the medical history, the applicant must defend it, at the same time substantiate the decision of the diagnosis, the prepared plan of examination and treatment of the patient.
4. The scheme of curation of a gynecological patient, as a graphological structure of

curation, is given separately.

Test tasks

STEP-2 tests

1. A 27-year-old woman complains of irregular menstruation with delays of up to 2-3 months, a significant increase in body weight, and obesity. Married for 5 years, there were no pregnancies. During the vaginal examination, the uterus is slightly smaller than normal, on both sides, dense, mobile ovaries up to 4 mm 5 cm in diameter are detected. What pathology can be thought of in this case?

- A. Syndrome of sclerocystic ovaries
- B. Bilateral ovarian cysts
- C. Chronic bilateral salpingitis
- D. Tuberculosis of uterine appendages
- E. Hypomenstrual syndrome

2. A 49-year-old woman complains of a headache, "hot flushes" to the head, neck, increased sweating, palpitations, and an increase in blood pressure up to 170/100 mm Hg, blood pressure, insomnia, tearfulness, memory loss, rare menstrual periods, weight gain during the last six months. What is the most common diagnosis?

- A. Climacteric syndrome*
- B. Premenstrual syndrome
- C. Vegetovascular dystonia and I
- D. Arterial hypertension
- E. Post-castration syndrome

A 29-year-old female patient turned to her colleague with complaints of dizziness, indigestion, tearfulness, headache, nausea, and sometimes vomiting, pain in the region of the heart. attacks of tach and cardia, loss of memory, flatulence. These complaints appear 6 days before menstruation and disappear the day before or in the first two days. Vaginal: uterus and appendages without changes. What is the most likely diagnosis?

- A. Premenstrual syndrome *
- B. Algodysmenorrhea
- C. Ovarian apoplexy
- D. Genital endometriosis
- E. Neurosis

Individual tasks for students of higher education on the topic of the lesson

1. Reports on the results of the examination, presentation and justification of the diagnosis, differential diagnosis and treatment of the patient with gynecological pathology according to the scheme.

4. Summing up:

Current control: survey, testing, evaluation of performance of practical skills, evaluation of communication skills during role play, solution of situational clinical tasks, evaluation of activity in class.

Final control: KPI.

Assessment of current activity in a practical session :

1. Evaluation of theoretical knowledge on the subject of the lesson:
 - methods: survey, solving a situational clinical problemassessment: maximum – 5, minimum – 3, unsatisfactory – 2
2. Evaluation of practical skills and manipulations on the subject of the lesson:
 - methods: assessment of the correctness of the performance of practical skillsassessment: maximum – 5, minimum – 3, unsatisfactory – 2
3. Evaluation of work with patients on the subject of the lesson:
 - methods: communication skills with the patient and his relatives; correctness of appointment and assessment of laboratory and instrumental studies; compliance with the differential diagnosis algorithm; substantiation of the clinical diagnosis; drawing up a treatment planassessment: maximum – 5, minimum – 3, unsatisfactory – 2

The grade for one practical session is the arithmetic average of all components and can only have a whole value (5, 4, 3, 2), which is rounded according to the statistical method.

Current evaluation criteria in practical training

| Rating | Evaluation criteria |
|-----------------------|--|
| Perfectly "5" | The applicant is fluent in the material, takes an active part in discussing and solving a situational clinical problem, confidently demonstrates practical skills. Excellently interprets the data of clinical, laboratory and instrumental studies, expresses his opinion on the topic of the lesson, demonstrates clinical thinking. |
| Fine "4" | The applicant has a good command of the material, participates in the discussion and solution of a situational clinical problem, demonstrates practical skills. Interprets the data of clinical, laboratory and instrumental studies well with some errors, expresses his opinion on the subject of the class, demonstrates clinical thinking. |
| Satisfactorily "3" | The acquirer does not have sufficient knowledge of the material, is unsure of participating in the discussion and solution of a situational clinical problem, demonstrates practical skills for and interprets clinical, laboratory and instrumental research data with significant errors. |
| Unsatisfactorily | The acquirer does not possess the material, does not participate in the discussion and solution of the situational clinical problem, does not |

5. List of recommended literature.

Main:

1. Obstetrics and gynecology: National a textbook for medical universities of IV accreditation levels in 4 vols.// Nat. textbook in 4 volumes / V.M. Zaporozhan, T.F. Tatarchuk, I.Z. Gladchuk, V.V. Podolsky, N.M. Rozhkovska, V.G. Marichereda, A.G. Volyanska. -K.: VSV "Medicine", 2017. - 696 c.
2. Training manual on midwifery (edited by I.B. Ventskivska, V.P. Lakatosha, V.M. Kushcha). - K., 2018. - RA-HARMONY - 210 p.
3. Obstetrics and gynecology: in 2 books. - Book 2. Gynecology: a textbook (University III-IU: r.a.) / V.I. Hryshchenko, M.O. Shcherbiny and others. - K.: Medicine, 2020. - 376 p.
4. Clinical Obstetrics and Gynaecology: 4th Edition / Brian A. Magowan, Philip Owen, Andrew Thomson. - 2021. - 454 p.
5. Family planning and contraception: study guide / V.I. Boyko, N.V. Kalashnyk, A.V. Boyko and others; in general ed. Dr. Med. Sciences, Prof. V.I. A fight – Sumy: Sumy State University, 2018. – 223 p.

Additional:

1. Order No. 417 dated 15.07.2011 "On the organization of ambulatory obstetric and gynecological care in Ukraine"
2. Intra-abdominal bleeding in gynecology: a monograph / I. Z. Gladchuk, O. Ya. Nazarenko, R. O. Tkachenko. - Odesa. : ONMedU, 2021. – 112 p.
3. Endoscopic surgery: training. manual / V.M. Zaporozhian, V.V. Grubnik, Yu.V. Grubnik, A.V. Malinovsky and others; under the editorship V.M. Zaporozhana, V.V. Grubnika - K.: VSV "Medicine", 2019. - 592 p.
4. Gynecology: a guide for doctors./ V.K. Likhachev. – Vinnytsia: Nova Kniga, 2018. - 688 p.
5. Family planning. Educational and methodological manual / N.G. Hoyda, O.V. Hryshchenko, V.P. Kvashenko, O.V. Kravchenko et al. / Kyiv, 2016. – 444 p.
6. Situational problems in gynecology: study guide. / I.Z. Gladchuk, A.H. Volyanska, G.B. Shcherbina and others; under the editorship Prof. FROM. Hladchuk - Vinnytsia: "Nilan-LTD" LLC, 2018.-164 p.
7. Oats, Jeremy Fundamentals of Obstetrics and Gynecology [Text]: Liewellyn-Jones Fundamentals of Obstetrics and Gynecology / J. Oats, S. Abraham. – 10th ed. – Edinburgh [etc.]: Elsevier, 2017. – VII, 375 p.
8. Obstetric risks in uterine fibroids: age aspect / Zhelezov D.M., Saleh O.S // East European Science Journal 1(41) 2019. - P. 50-52.
9. Complications of laparoscopic conservative myomectomy / I.Z. Gladchuk, D.M. Zhelezov, G.V. Shitova, N.A. Zarchitska // Clinical and experimental pathology Vol. 18, No. 2(68), 2019. - P.168-173.
10. Laparoscopic myomectomy in patients with reproductive intentions (literature

review) / I.Z. Hladchuk, G.V. Shitova, N.A. Zarzhytska // Health women - #2 (148) -2020. - pp. 75-85.

11. Prevention of purulent-septic complications during laparoscopic surgeries on pelvic organs with the risk of vaginal microbiota contamination / Zaporozhan VN, Gladchuk IZ, Rozhkovska NM, Volyanska AG, Shevchenko OI // World of Medicine and Biology.-2020- №1(71) . - P.49-53. (*Web of science*)

Electronic information resources

1. <https://www.cochrane.org/> - Cochrane / Cochrane Library
2. <https://www.acog.org/> - The American College of Obstetricians and Gynecologists
3. <https://www.uptodate.com> – UpToDate
4. <https://online.lexi.com/> - Wulters Kluwer Health
5. <https://www.ncbi.nlm.nih.gov/> - National Center for Biotechnology Information / National Center for Biotechnology Information
6. <https://pubmed.ncbi.nlm.nih.gov/> - National Library of Medicine
7. <https://www.thelancet.com/> - The Lancet
8. <https://www.rcog.org.uk/> - Royal College of Obstetricians & Gynecologists
9. <https://www.npwh.org/> - Nurse practitioners in women's health
10. <http://moz.gov.ua> – Ministry of Health of Ukraine
11. www.ama-assn.org - [American Medical Association / American Medical Association](http://www.ama-assn.org)
12. www.who.int - [World Health Organization](http://www.who.int)
13. www.dec.gov.ua/mtd/home/ - [State Expert Center of the Ministry of Health of Ukraine](http://www.dec.gov.ua/mtd/home/)
14. <http://bma.org.uk> - British Medical Association
15. www.gmc-uk.org - General Medical Council (GMC)
16. www.bundesaerztekammer.de – German Medical Association
17. www.euro.who.int - European Regional Office of the World Health Organization