Problem-Based Questions



CD 1: Third Trimester Bleeding 5

Problem:

A 31-week pregnant woman, P3+0, previous 3 C/S, presents with painless vaginal bleeding, stable vitals, no ongoing bleeding, placenta previa on ultrasound.

Guiding Questions:

- What is your initial approach to a patient with third-trimester bleeding?
- o Based on the history and examination, what are the likely causes of her bleeding?
- o How would you differentiate placenta previa from abruptio placenta clinically?
- What are the maternal and fetal complications of placenta previa?
- Outline your management plan for this patient.
- o When is blood transfusion indicated, and what are its possible complications?

CD 2: Intrauterine Fetal Demise (IUFD) 3

Problem:

A 39-week patient, P2+5, diabetic, presents with absent fetal movements for 1 week, no fluid loss, no bleeding, ultrasound confirms absent fetal heart.

Guiding Questions:

- o What are the etiologies and risk factors for IUFD in this patient?
- o Which clinical features raise suspicion of IUFD?
- o How do you confirm the diagnosis of IUFD
- What are the management options once IUFD is confirmed?
- o How would you address the psychosocial aspects of care in IUFD?

CD 3: Surgical Conditions during Pregnancy 4

Problem:

A 25-year-old, 20-week pregnant woman presents with acute left lower quadrant pain, tachycardia, localized tenderness, and ultrasound suggesting ovarian torsion.

Guiding Questions:

- How do you conduct a focused history and examination for acute abdomen in pregnancy?
- What are the differential diagnoses of acute abdomen during pregnancy?
- o Which investigations would you order, and how do you interpret them?
- What is your management plan for ovarian torsion in this case?
- What are the potential complications of surgical intervention during pregnancy?

CD 4: Premenstrual Syndrome (PMS) 3

Problem:

A 34-year-old woman reports hot flushes, mastalgia, irritability, and depression 5 days before menses, resolving after menstruation begins.

Guiding Questions:

- o How would you define PMS?
- What history and examination are essential in evaluating PMS?
- What are the possible causes and pathophysiology of PMS?
- o What are the diagnostic criteria for PMS?
- What is your management plan for PMS?

CD 5: Pelvic Inflammatory Disease (PID) 4

Problem:

A 20-year-old woman presents with 3 days of worsening lower abdominal pain, fever (39°C), and cervical motion tenderness. Swab positive for chlamydia.

Guiding Questions:

- What is the pathophysiology of PID?
- What are the key history, examination, and investigations for PID?
- o What are the diagnostic criteria for PID?
- o What is your initial management approach?
- What are the long-term complications of PID?

CD 6: Ectopic Pregnancy 3

Problem:

A 27-year-old woman, 6 weeks LMP, presents with abdominal pain, vaginal bleeding, and adnexal mass on ultrasound.

Guiding Questions:

- o How do you define ectopic pregnancy?
- What risk factors predispose to ectopic pregnancy?
- o What is your differential diagnosis for first-trimester bleeding and pain?
- Which investigations confirm the diagnosis of ectopic pregnancy?
- What are the management options (medical vs. surgical)?

CD 7: Abortion 4

Problem:

A 9-week pregnant woman presents with vaginal bleeding, clots, and cervical dilatation with tissue passage.

Guiding Questions:

- What is your differential diagnosis for first-trimester bleeding?
- How do you differentiate the types of abortion clinically (missed, threatened, incomplete, etc.)?
- What are the possible etiologies of spontaneous abortion?
- What are the complications of spontaneous abortion?
- o How would you manage each type of abortion?
- What are the methods of termination (surgical and non-surgical)?
- What are the complications of induced abortion?

CD 8: Pelvic Prolapse 3

Problem:

A 48-year-old multipara with 8 vaginal deliveries presents with pelvic heaviness and uterus protrusion. Exam confirms complete uterine prolapse.

Guiding Questions:

- What are the types of pelvic organ prolapse?
- What are the anatomic changes associated with prolapse?
- What history and examination are important for pelvic prolapse?
- o How do you classify pelvic organ prolapse?
- What are the confirmatory investigations?
- What are the medical and surgical management options?

CD 9: Polycystic Ovarian Syndrome (PCOS) 3

Problem:

A 28-year-old obese woman with irregular menses and hirsutism for 2 years, ultrasound shows >10 follicles/ovary.

Guiding Questions

- What are the Rotterdam criteria for PCOS diagnosis?
- o What are the etiologies and risk factors for PCOS?
- What are the clinical features and physical findings?
- Which investigations are appropriate for PCOS?
- What is your management plan for PCOS?

CD 10: Menopause 3

Problem:

A 55-year-old woman presents with severe hot flushes and night sweats. FSH and LH are elevated, last menses 6 months ago.

Guiding Questions:

- o How do you define menopause?
- o What are the physiological changes in the hypothalamic-pituitary-ovarian axis?
- What are the common symptoms and exam findings of menopause?
- What are the management options for peri-menopausal symptoms?
- o How would you counsel a patient regarding menopause?
- o What are the long-term complications associated with menopause?