Obstetrics Candidate instructions

You have been asked to see Jemima Davis (27 years old), who is 36 weeks pregnant. She is attending the MAU because of some discomfort.

You have 10 minutes for this station and have been asked to:

- Take a history/discuss results/discuss procedure/counsel patient (5 minutes)
- Perform an obstetrics examination and briefly explain your findings to the patient (5 minutes)

Obstetrics Patient instructions

Gestation - gravidity: 1 Parity: 0

Presenting complaint: Discomfort over last week or so

History of presenting complaint: I have been having these contractions in my tummy for last week or so and they are uncomfortable. There is no pain. They really can vary in terms of length and when they come on, kind of random. They start suddenly but then tend to slow down and go away.

Other relevant symptoms: Non

Obstetrics history: I have attended all my scans, I had the blood tests, and they were all fine, this is my first pregnancy, no miscarriages or anything in the past, yeah had my immunisations.

Gynaecological history: I did have chlamydia when I was like 16 but nothing apart from that, all my smear have been normal

ICE: Am I in Labour, isn't it too early? is there something wrong with the baby?

PMH: None

DHx: Just took folic acid but stopped that, no drugs at the moment, not allergic to anything.

FHx: I have heart disease on my dad's side, but I don't have anything,

SHx: Don't drink or smoke, healthy.

Systems review: Nothing of significant, deny all symptoms.

Other relevant history or instructions for actor: None

Questions for candidate during examination:

What is the position of the baby?

What advice in terms of management and safety netting would you give patient?

Normal contractions – Braxton hicks, changing positions, lying down and walk/relaxing e.g. warm baths and sleeping can help, maintain hydration.

if become longer and more frequent and any bleeding or change in symptoms come back in

Obstetrics Examiner Marksheet

Introduces themselves and confirms patient details	
Confirms gestational age, gravidity and parity	
Open questions and then narrows down	
History of presenting complaint	
Screens for key obstetric symptoms	
Does a relevant obstetrics history	
Does a relevant gynaecological history	
Address ICE	
Asks about PMH	
Asks about DHx	
Asks about FHx, SHx and other history if relevant	
Systems Review	
Shows empathy	
Active listening	
Summaries and clarifies	
Consents patient appropriately for examination	
Builds rapport and puts patient at ease	
Washes and PPE	

General inspection	
Ask patient about pain or discomfort before starting	
Palpates borders of uterus correctly	
Measures symphysial-fundal height	
Correctly identifies fetal lie, presentation and engagement	
Listens to fetal heartbeat in correct location and offers to count for 60 seconds	
Explains result of finding to patient	
Answers any of patients questions	