Obstetrics – Candidate instructions

You are the FY1 and have been asked to see Rachel Smart, 29, who is 26 weeks pregnant. She is attending the antenatal clinic because of an Itch.

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

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

Obstetrics- Patient instructions

Age: 29

Gestation- Gravidity: 1, Parity: 0

Presenting complaint: Itch

History of presenting complaint:

- Itching on Hands & Feet
- 7/10 in severity
- First noticed 2 weeks ago, been constant since then
- No aggravating factors
- Tried Calamine lotion to no benefit
- No other symptoms
- Fetal movements continuing as normal

Systems review:

- No rash, vomiting, bleeding, discharge, Pain
- No changes to Skin colour, Bowel/ Bladder function

Obstetrics history:

- First pregnancy
- Attended all appointments upto now
- Normal scan results & screening test results
- Immunisations upto date
- No history of mental illness

Gynaecological history:

- Cervical smear last year was normal
- Never used barrier protection, only COCP

PMH: None

Drug History: Allergic to Penicillin

Family History: None, No mental illness

Social History:

- Living with boyfriend, Never used recreational drugs
- Have not smoked or drank alcohol since positive pregnancy test

ICE:

Ideas: AllergyConcerns: None

- Expectations: To be told nothing wrong so can put boyfriend at ease

Patient Questions

Q1: What's going on?

Explains pathophysiology of Cholestasis of Pregnancy (Abnormal build up of bile acids in blood causing itching)

Q2: Is it treatable?

Offers factually correct information

- Early delivery/ Induction of Labour at 35 weeks
- Chlorphenamine, Ursodeoxycholic acid for relief

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 (Including rashes)	
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 without using jargon	
Answers any of patients questions	

Global Impression:

Patient Impression/comments:

- Excellent
- Good
- Pass
- Borderline
- Fail