

CODE:03

Question: ObstetricsType: Emergency

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Opening Scenario:

You are called urgently to labor/delivery suite. The obstetrician tells you this 28 year old lady who delivered spontaneously without any anaesthetic is bleeding postpartum. Patient looks pale, there is one IV dripping, blood pressure is 80/50 and pulse is 120.

Major points of additional information to be provided to the candidate, e.g., hx, px, labs, x-ray, consults:

Degree of urgency of situation
 Differential diagnosis
 Assessment of anemia and hypovolemia
 Steps to resuscitate and prepare for anaesthesia
 Surgeon wants to take to OR for manual removal.

Major decision points (major decision points or options which must be recognized by the candidate)

How much resuscitation before anaesthesia
 Communicate with obstetrician regarding procedure
 Anaesthetic implications of general vs regional anesthesia in this patient *local*
 Preparation for major blood loss including hysterectomy

Any followup information required to lead to the end of the question

General anaesthesia is chosen. In spite of EUA and manual removal of small bits of placental tissue, patient continues to bleed, diagnosis is uterine atony. How do you treat?

Discuss oxytocics including ergometrine and prostaglandin.
 Indications and contraindications.

Critical features to be included i.e. the *must* have to pass the question or to be considered *completely* unacceptable

Must recognize urgency of situation and difficulty in assessing this patient's volume status.
Must recognize resuscitation and anaesthesia is integral part of her management.
Be prepared to deal with massive blood transfusion and its implications

Ref: RCEXAMAT EXAMS October, 95

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