INITIAL CLINICAL SCENARIOS FOR OSKE ON OBSTETRICS AND GYNECOLOGY (SECTION GYNECOLOGY) The maximum number of points is 100, the minimum is 60.

Patient N., 28 years old, appealed to the family doctor with complaints of discomfort and the presence of an mass in the left mammary gland. Notes that during this time mass in the amount has not increased. She does not take any medicine and has no other relevant history of somatic illness. A woman works as a teacher at school. Denies bad habits and allergic reactions. Blood pressure is 125/70 mmHg, heart rate is 74 / min, heart rate is 14 / min, temperature is 36.8 ° C.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Identify the main symptoms of a possible pathology

2. Risk factors for pathology in the specified patient

3. What other instrumental examinations are needed?

4. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis

5. Define the principles of treatment

6. Tell the woman about further tactics.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 32-year-old patient consulted a doctor for a routine examination. A woman works as a pastry chef. Complaints of minor vaginal discharge are not related to the menstrual cycle. Gynecological diseases denied. Contraception - interrupted sexual intercourse. BP 130/65 mm Hg, heart rate - 78 / min., BH - 12 / min., Temperature - 36.5° C.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis

2. Differential diagnosis.

3. Further examination plan and patient management tactics?

4. Tell the woman about further tactics.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

Patient F., 28 years old, turned to a family doctor with complaints of pain in the right inguinal region, which periodically recur, nausea, spotting from the genital tract, dizziness. Somatically healthy. The condition is satisfactory. BP 110 / 65mm Hg, heart rate 88 / min, heart rate 14 / min, temperature 37.1°C. The skin and visible mucous membranes of normal color.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Evaluate patient complaints

2. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis

3. Develop a plan for further action.

4. Tell the woman about further tactics.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

Patient K., 20 years old, turned to the family doctor with complaints of minor periodic pulling pains in the lower abdomen for 2 weeks. The condition is satisfactory, the skin and mucous membranes of normal color. From the side of the lungs and heart pathology was not detected. The tongue is wet. The abdomen is not swollen, participates in the act of breathing, soft, painless. There are no symptoms of

peritoneal irritation. Blood pressure is 120/70 mmHg, heart rate is 80 /min, heart rate is 14 /min, temperature is $36.7 \degree C$.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis

2. Develop a plan for further action.

3. Tell the woman about further tactics.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

In the direction of the family doctor, a 32-year-old patient M. turned to the obstetrician-gynecologist of the antenatal clinic with complaints of pain in the lower abdomen, more to the right. Objectively: the general condition is satisfactory. Pulse 80 beats / min., BP 120/80 mm Temperature - 36.4^oC. The skin and visible mucous membranes are pale pink. Heart sounds are rhythmic. Vesicular respiration over the lungs.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. What is the most likely diagnosis?

2. What treatment methods can you offer?

3. Indicate the side effects of the drugs to be used?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 51-year-old woman turned to the family doctor with complaints of ,, hot flashes". Objectively: weight 65 kg, height 162 cm, skin and visible mucous membranes are pale pink, rhythmic. Vesicular breathing. The abdomen is soft,

painless. The liver and spleen are not palpable. Pasternatsky's symptom is negative on both sides. Stool and diuresis are normal. BP 140/85 mm Hg, heart rate 84/ min, heart rate 14 /min, temperature 36.4 ° C.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis

2. What additional examinations should be prescribed?

3. Define a treatment plan for this condition

4. Absolute contraindications to the appointment of HRT

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 24-year-old woman went to the family doctor with a complaint about a missing period for 9 months. She has a regular sexual partner and uses condoms for contraception. She was never pregnant. Somatic history is not burdened. She works as a primary school teacher. She does not smoke or use recreational drugs. In her free time, she runs and swims. Blood pressure and general indicators are normal. Temperature - 36.8°C. The abdomen is soft and painless, and specular and bimanual vaginal examination without features.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. Identify possible additional examination methods.

3. Determine the direction of clinical management of the case.

A married couple (male 32 years old, female 28 years old), married for 5 years, turned to the family doctor with a complaint about the absence of pregnancy, subject to regular open sex. BP 125/70 mmHg, heart rate 74 in 1 min., BH - 12 in min. Temperature - 36.5° C. Somatic history is not burdened. Drug use denied.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Evaluate anamnestic data, complaints, and the results of previous examination methods.

2. What additional examinations should be assigned to the couple?

3. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

4. Define further tactics for a married couple.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 24-year-old woman, married for 3 years, turned to her family doctor with a complaint about the inability to become pregnant. Steam does not use contraceptives. The person is healthy. A man's spermogram is without pathology. BP 110/60 mm Hg, heart rate 74 in 1 min., BH - 14 in min. Temperature - 36.4 ° C.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Interpret laboratory and instrumental studies.

2. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

3. What other additional examination methods should be used?

4. Define further tactics for a married couple.

5. Inform the patient about the possible side effects of drugs

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam

Patient K., 22 years old, consulted a female doctor with complaints of profuse purulent foamy discharge from the genital tract, a feeling of heaviness in the lower abdomen. The general condition is satisfactory, blood pressure 120/65 mm Hg, heart rate 72 in 1 min, BH - 14 for the body temperature of $36.7 \,^{\circ}$ C. From the side of the chest and abdominal cavity without pathology. Physiological administration is normal.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. What additional research is needed?

3. Create a treatment plan with the dose and duration of treatment.

4. How is the cure of this disease monitored?

5. How to prevent the occurrence of this disease in the future?

6. Side effects of drugs

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 48-year-old woman complains of intermenstrual bleeding from the genital tract for 2 months. She does not take any medicine and has no other relevant history of somatic illness. A woman works as a teacher at school. Denies bad habits and allergic reactions. The general condition is satisfactory, blood pressure 110/65 mm Hg, heart rate 68 in 1 min., BH - 12 /min., Body temperature 36.4 ° C. The abdomen is soft, painless.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. Differential diagnosis.

3. Further examination and treatment plan?

4. Tell the woman about further tactics.

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 29-year-old woman and her partner turned to the family dispensary complaining of the inability to get pregnant. They have stopped using condoms and have regular sex. The partner does not have a previous medical history. The woman also does not have aggravating somatic pathology. There is no intermenstrual or postcoital bleeding. She always had normal smears on the urogenital flora and never had sexually transmitted infections. She does not take medicine, does not smoke. She works as a manager in a hotel. The abdomen is soft and painless. The general condition is satisfactory, BP 115/60 mm Hg, heart rate 82 in 1 min., BH - 16 in min., Body temperature $36.2 \degree C$.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. Further examination and treatment plan?

3. Inform the patient about the possible side effects of drugs

4. Tell the woman about further tactics.

A 22-year-old woman who did not give birth complains of vaginal discharge with an unpleasant odor and postcoital spotting after intercourse. She denies a history of sexually transmitted diseases, and so far has not used contraceptives. Somatic history is not burdened. During the examination, her blood pressure is 100/60 mm Hg, the heart rate is 80 beats per minute, and the temperature is 37.2 ° C. The examination of the heart and lungs is normal. The abdomen is soft, painless.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. What is the most likely diagnosis?

- 2. Differential diagnosis
- 3. What is the next step in therapy?

4. Inform the patient about the possible side effects of drugs

5. What are the complications of this problem?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 55-year-old woman complains of a sense of pelvic pressure and the feeling that something is "falling out of my vagina." Over the past 10 years, she underwent a general abdominal hysterectomy for symptomatic uterine fibroids. She denies other somatic problems. She has no urinary incontinence or dysuria. Upon examination, her blood pressure is 120/70 mm Hg, heart rate 90 beats / min, respiratory rate - 12 per minute, temperature 36.6 ° C, weight 75 kg. The mammary glands are without features. Examination of her heart and lungs is normal.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. What are the main risk factors for this disease?

3. What are the treatment options and possible complications due to treatment?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 48-year-old woman complains of urine loss four to five times a day. These events cause her embarrassment and interfere with her daily activities. Monthly from 13 years 4 / 21-23 days. OM 3 weeks ago. 5 pregnancies (3 abortions, 1 ectopic pregnancy, 1 premature birth). Married. Smoking up to 10 cigarettes per day. Chronic gastritis for 15 years with a relapse in the fall. Her blood pressure is 130/80 mm, Heart rate - 80 beats per minute, and temperature - 37.2 ° C. Examination of the mammary gland is normal. Her heart has a regular rhythm. Examination of the abdomen does not show pain.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. What additional survey survey methods are most likely?

3. What is the best initial treatment you recommend?

4. Possible complications due to treatment?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 66-year-old woman comes for a routine examination. Her menopause came at the age of 51, and she takes estrogen tablets daily along with progestin tablets every day. A woman works as a laboratory assistant. During the examination, she has a blood pressure of 140/70 mm Hg, a heart rate of 70 beats per minute and a temperature of 36.6 ° C. The thyroid gland during palpation without pathology. Examination of her mammary glands does not show pathological formations and secretions. Assessment of the abdomen, heart and lungs is within normal limits.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► What is your next step?

► Further examination plan?

► What is the possible common cause of mortality among women of the age given in the clinical task?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 66-year-old woman who did not give birth and who had menopause at 55 years old complains of 2-week vaginal bleeding. She denies the use of estrogen replacement therapy. When viewed from a BMI of 32 kg / m2, blood pressure is 150/90 mm. Hg. Art., pulse - 88 min., temperature - $37 \degree \text{C}$. Examination of the heart and lungs is normal. The abdomen is soft, enlarged due to obesity.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► What will be your next step?

► Differential diagnosis?

► Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

► Risk factors for the occurrence of reduced pathology.

► Possible difficulties in performing diagnostic and therapeutic measures.

A 24-year-old woman went to the doctor with complaints about the absence of menstruation. Blood pressure is 125/65 mm Hg, heart rate is 68 min, heart rate is 12 min, and the temperature is 36.7 ° C. Somatic history is not burdened. She denies taking medication, headaches, or visual impairment.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

- ► What is the most likely diagnosis?
- ► What are the most likely additional screening methods?
- ► What is the best initial treatment you recommend?
- ► Possible complications due to treatment (side effect)?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

The 40-year-old woman who gave birth complains of significant menstruation with clots for 2 years. She denies bleeding or spotting between menstruation before. She denies fatigue, cold intolerance, or galactorrhea. Upon examination, her blood pressure (BP) is 135/80 mm Hg, heart rate (HR) 80 beats per minute, weight 60 kg, temperature 36 ° C. Examination of the heart and lungs is normal.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

1. Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

2. What is your next step (examination and treatment plan)?

3. Possible complications of treatment

A 25-year-old woman wants to choose a method of contraception for the next 3 years. She cannot remember how to take pills every day and wants contraception, which will allow her not to take the drug strictly by the hour. She does not take any medicine and does not have a known drug allergy. She has been married for 6 years and denies any sexually transmitted infections. Her blood pressure is 120/70 mmHg, her heart rate is 80 beats per minute, and her temperature is 37.2 ° C. Examination of the heart and lungs is normal. The abdomen is soft, painless. Examination of the small pelvis reveals a uterus of normal size, mobile. No tumor-like mases in the pelvic cavity were found, the arches are free.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► What would be the best contraceptive for this patient?

► What are the contraindications to the proposed contraceptive?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

33-year-old woman complains about the absence of menstruation. Her past history of somatic and surgical pathology is not burdened. Her general physical examination without features. The thyroid gland of normal shape and size during palpation, mammary glands without pathological formations and without secretions. The abdomen is soft, painless. Vaginal examination shows a normal uterus, the cervix is closed, the appendages are not detected, the arches are free. BP 120/70 mmHg, heart rate - 70 /min., BH -14 /min., Temperature - 36.9° C.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

► What is the next step to verify the diagnosis?

► What possible complications can develop if the above pathology progresses?

► What treatment measures can you recommend to your patient?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

A 17-year-old girl complains that she has not yet begun menstruation. She denies losing weight or excessive exercise. Each of her sisters reached the menarche until the age of 13. On examination, her height is 171 cm in height and weighs 64 kg. Her blood pressure is 110/60 mm RT. Her thyroid gland is normal on palpation. She has the development of Tanner's mammary gland of stage IV and the external genitalia of a woman. She has stage IV and axillary and pubic hair. No skin lesions.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

► What is the next step in the diagnosis?

► What treatment method can you offer?

► Methods that allow women with this pathology to have genetic offspring.

When answering the teacher (up to 5 minutes), you can use the survey protocol that will be issued to you before the exam.

A 17-year-old girl went to the doctor about the fact that she never had a menstrual period. There are no other complaints. She has an older sister who had a menarche at the age of 12. She denies excessive exercise or a strict diet. Examination of the abdomen did not reveal any tension and tumor-like formations. The external genitalia are normal for the girl's age.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

► What is the next step in the diagnosis?

► What observation scheme can you offer?

► What are the options for becoming pregnant with pathology?

When answering the teacher (up to 5 minutes), you can use the survey protocol, which will be issued to you before the exam.

Over the past 2 weeks, an 18-year-old woman who did not give birth complains of vaginal discharge with an unpleasant odor. She denies being treated for vaginitis or sexually transmitted diseases. She is in good health and does not take any drugs other than oral contraceptives. On examination, her blood pressure is 110/70 mm Hg, a heartbeat of 80 beats per minute, and the temperature is febrile. The thyroid gland during palpation is unchanged. Examination of the heart and lungs is normal. Mammary glands - implants (size 5), pubic and axillary hair growth - Tanner V st.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

► Based on clinical, laboratory and instrumental methods of research, establish a preliminary diagnosis.

Additional research methods

► What is the best treatment for this condition?

► Side effects of the drugs you plan to use with your patient.

A 14-year-old girl visits a private clinic, wanting to start using COCs. She's been with a guy for 8 months. They both agreed that they wanted to have sexual relations and had had sexual intercourse twice already, during which they had not used contraception. She has never been sexually active before. She never had any gynecological or other medical problems. She reports that there are no problems at school, and she is one of three children, with a brother of 21 years and a sister of 19 years. She lives with her parents in a house outside the city. She visited the clinic with her friends.

More detailed information can be obtained from the primary documentation and during the survey of the patient (up to 10 minutes).

• What issues are important in determining how to manage this situation?

• What do you recommend for this girl?