

OBSTETRICS & GYNECOLOGY

IN TWO VOLUMES

TEXTBOOK

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Gynecology

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Improvement of the quality of training the students of higher medical education establishments is connected with the improvement of forms and methods of teaching subjects, as well as the introduction of the latest achievements of modern forms, learning the high standard and control of the level of knowledge.

The materials presented in this textbook are based on the program of studying the subject “Obstetrics and Gynecology” on the position of evidence-based medicine and the transition to the Bologna Process.

Each unit contains test tasks and clinical cases with answers to check up the students’ knowledge.

At the end of each subunit there is the list of practical skills that the students should master.

For students of higher medical education establishments.

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CHAPTER 1

Foundations of Gynecological Care, Female Department and Gynecological Hospital

Strategy obstetric care is based on the principles of both the mother and child health. Reform of Health is determined reorientation of the primary health care to pregnant women, women, girls; and it has the priority meaning. The basic principles of obstetric care in Ukraine are the same: available for villages and towns systematic, phased, qualified medication, medical and preventive supervision of women, timely diagnosis and treatment of obstetric and gynecological pathology, extensive information and educational activities on reproductive health, family planning, preparing the pregnant women for childbirth.

There are two types of obstetric care: ambulatory and stationary.

The ambulatory obstetric and gynecological care is carried out in consultative departments, gynecological cabinets of the central district hospitals and rural medical outpatient clinics of general practice/family medicine, obstetric cabinets, family planning centers, and polyclinics.

The stationary obstetric and gynecological care is provided in the obstetric and gynecology departments of the district, central district, city and regional hospitals and prenatal centers.

ORGANIZATION OF OUTPATIENT GYNECOLOGICAL CARE

Organization of outpatient gynecological care involves taking measures to prevent gynecological diseases, their early detection and providing the medical and rehabilitative care.

The gynecological diseases are found by:

- prophylactic examinations of women (in antenatal polyclinics, obstetric cabinets, medical clinics and hospitals);
- examination of the women in the consultative departments or gynecological cabinets of the multidisciplinary clinic for medical advice.

The prophylactic examination in the observational rooms is provided all women (with their informed consent) coming to the clinic for the first time this year. Midwife's diagnosis established in the scoping study is oriented. The obstetrician-gynecologist establishes the final diagnosis of the disease on the basis of the gynecological examination and further examination. The work of the administrative antenatal clinics and multidisciplinary clinics must interact in the detection and rehabilitation of patients.

During prophylactic examinations of women the palpation of breasts, cervical screening in the specula, collection of vaginal smears for the oncocytological and bacterioscopic tests, Schiller's test, bimanual and digital rectal examination are carried out. Ultrasound scans is performed, if it's necessary. Besides here the patients are consulted on family planning and prophylactic of sexually transmitted diseases, and HIV/AIDs.

Groups of health are defined according to the results of preventive gynecological examination based on criteria:

- “Healthy”: there are no complaints, no disorders of the menstrual cycle since its beginning, no gynecological diseases;
- “Practically healthy”: there is existing information about gynecological diseases, surgical interventions, including therapeutic abortion, disordered menstrual cycle, but there no complaints at the moment. During physical examination the anatomical changes are revealed, but they don’t lead to dysfunction of the reproductive system and don’t reduce the capacity for the woman’s work;
- “Sick”: if the gynecological disease is diagnosed during the physical examination.

The results of the preventive gynecological examination are put down into the medical card.

Observation of the “healthy” women includes the preservation of her health by popularization of healthy way of life and the prophylactic preventive examination. This group of women can be inspected once a year.

The main task for the “practically healthy” women is to take preventive measures to limit the impact of risk factors of the gynecological diseases and strengthen the body’s immune system. This group of women has to undergo the routine observation twice a year.

The tasks of dynamic control over the “sick” women are to study and choice of eliminating the causes of a disease of the reproductive system, early detection of a disease, its effective treatment and rehabilitation according to the “Standards of Medical Care of the Female Population in specialty of ‘Obstetrics and Gynecology’ in the condition of outpatient medical institutions”.

‘Outpatient Medical Card’ with a detailed history, description of complaints, making the test results and data of gynecological examination is started for every woman, who the first applies to the prenatal consultation with complaints or on the orders of other specialists, as well as for routine observation.

After taking anamnesis the general and specialized examinations are held.

The general examination includes palpation of the breasts with the assessment of their condition, determining the type and character of the body hair. During the cervical screening in the specula, it should be taken the material to oncocytological test and to Schiller’s test. The antenatal clinics should be equipped with microscopes to carry out some simple tests immediately. After the first examination in the Outpatient Medical Card its date is put down, but the final diagnosis is written on the day of its decision.

For every woman who must be registered for the medical supervision the ‘Control Card of Clinical Supervision’ is started. It should contain the information of the diagnosis of the disease, which is taken into account, the frequency of inspections, methods of examination and treatment. Efficient interaction and strict succession in the outpatient and inpatient work improves the quality of the medical care, which is the mechanism of information regarding step by step performed outpatient or inpatient treatment and rehabilitation.

Specialized Outpatient-Polyclinic Obstetric and Gynecological Care

For more skilled examination, diagnosis and treatment specialized outpatient care is provided in:

- Prenatal Consultive Department, which covers eight and more obstetric stations;

- Diagnostic Center of Family Planning and Human Reproduction;
- Consultive Polyclinic.

Specialized health care is the type of medical care provided by the skill specialists, who can provide more qualified counseling, diagnosis and treatment with the help of modern medical diagnostic apparatus, instruments and equipment, more than a general practitioner.

Outpatient Obstetric and Gynecological Care in Rural Area is taken in the antenatal or obstetric-gynecologic district clinics, central district hospitals, rural medical ambulances and feldsher's stations. The rural female population is consulted by urban antenatal clinics, obstetric and gynecological centers of the regional, national clinics and consulting clinics.

The main task of obstetric care in the rural areas is the creation of a single health care system by improving the forms and methods of preventive work, dynamic monitoring and medical and social assistance.

The development and strengthening of material and technical bases of the district and regional hospitals were allowed to come into realization the stage system of gynecological care. The basis of this system is to differentiate selection of patients for outpatient and inpatient care, depending on the capabilities of stage, said in the Ministry of Public Health of Ukraine Order № 503 on 28.12.2002.

The first stage of the outpatient gynecological care is implemented in the obstetric cabinets, outpatient clinics and area hospitals (without an obstetrician-gynecologist). The outpatient midwives' work on the first stage is focused mainly to prevent the occurrence of gynecological diseases. The 'practically healthy' young women with uncomplicated general obstetric and gynecological history can be under the dynamic supervision of midwives when attending obstetrician-gynecologist of the prenatal hospital, the local hospital or the visiting medical teams.

The second stage of the outpatient gynecological care is provided by the medical staff of the rural clinic, by the obstetrician-gynecologist of the district hospital and the central district hospital.

The third stage of the outpatient obstetric care is done by specialists of the regional hospitals. In this stage the full amount of the medical examination is provided, while it is impossible in previous two stages of care of gynecological patients. If necessary, the patients are consulted by other specialists. And after it an individual management plan of the gynecological patient is made for the medical staff of the first and the second stages.

The rural population is checked up by the complex obstetric and medical care provided by visiting teams, consisting of the obstetrician-gynecologist, pediatrician, therapist, dentist, doctor-laboratory assistant. A feldsher and a midwife should have a list of women of their area, who are the subject to periodic preventive examination. According to the schedule the midwife must inform the population of her area about coming of the visiting medical team. The obstetrician-gynecologist, as a member of this team, should do the routine inspection of women of the appointed age, make observation of the pregnant women and gynecological patients, consult on questions of family planning, provide necessary medical help, do the informational and educational work on regarding the reproductive health among the population (lectures, talks, consulting etc.). If the patients with gynecological pathology are identified, they should be registered with the following treatment to recover. Coming for the second time the gynecologist checks the midwife to do his prescriptions and instructions.

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