**Physiology of a female body at pregnancy.Fetus physiology.Pregnancy diagnostics.Inspection of the pregnant woman.**

MSQs

**1.** To determine the estimated date of labor (EDL), which day of the menstrual period will you ask?

1. first

2. last

3. third

4. second

2. According to patient, her last menstrual period is November 15, 2017. What is her estimated date of labor?

1. August 18, 2018

2. July 22, 2018

3. February 22, 2018

4. August 22, 2018

3. An obstetric history should include:

1. Current pregnancy details

2. past obstetric history

3. Past gynaecological history

4. Drug history and allergies

4. The uterus changes normally become palpable at \_\_\_weeks gestation

1. 8

2. 12

3. 15

4. 5

5. The uterus normally reaches the level of the umbilicus at \_\_\_weeks gestation

1. 15

2. 18

3. 22

4. 24

6. Auscultation of the fetal heart by a fetal stethoscope from \_\_\_\_weeks

1. 15

2. 28

3. 20

4. 25

7. Symphysis fundal height (SFH) palpated from \_\_\_\_weeks

1. 12

2. 18

3. 22

4. 25

8. Fetal lie can be:

1. longitudinal

2. oblique

3. horizontal

4. transverse

9. Body mass index calculated

1. weight (kg)/ height (m²)

2. height (m²)/ weight (kg)

3. weight (kg) height (m²)

4. weight (kg) height (m²)

10. Which hormone is necessary for a positive pregnancy test?

1. Progesterone

2. HCG

3. Estrogen

4. Placental Lactogen

11. Fetal Lie refers to:

1. Longitudinal Axis of the fetus in relation to the oblique axis of the maternal uterus

2. Longitudinal Axis of the fetus in relation to the transverse axis of the maternal uterus

3. Longitudinal Axis of the fetus in relation to the long axis of the maternal uterus.

4. Longitudinal Axis of the fetus in relation to the long axis of the maternal pelvis.

12. The following are presumptive skin signs of pregnancy EXCEPT:

1. Chloasma.

2. Maculopapular rash.

3. Linea Nigra.

1. Stretch marks.
2. Spider Telangiectases.

13. Normally, pregnancy in 2nd trimester is characterized by all of the following EXCEPT:

1. Elevated fasting plasma glucose.
2. Decreased fasting plasma glucose.
3. Elevated postprandial plasma glucose.
4. Elevated plasma triglycerides.

14.Pregnancy is associated with, EXCEPT, :

1. Increased cardiac output.
2. Increase venous return.
3. Increased peripheral resistance.
4. Increase pulse rate.
5. Increase stroke volume.

15. In normal pregnancy, levels of all the following hormones increases EXCEPT:

1. Total Thyroxine (T4).
2. Parathyroid hormone in the 2nd&3rd trimesters of pregnancy.
3. Cortisol.
4. Prolactin.
5. Estradiol.

16.Changes in the urinary tract system in pregnancy include:

1. Increase glomerular filtration rate (GFR).
2. Decrease in renal plasma flow.
3. Increase in BUN & Creatinine.
4. Marked increase in both GFR & renal plasma flow when patient is supine.

17. Lowered hemoglobin during normal pregnancy is a physiological finding. It’s mainly due to:

1. Low iron stores in all women.
2. Blood lost to the placenta.
3. Increase plasma volume.
4. Increased cardiac output as a result greater red cell destruction.
5. Decreased reticulocytosis.

18.Which lung volume is decreased in pregnancy?

1. Peak flow rate.
2. Tidal volume.
3. Vital capacity.
4. Functional residual capacity.
5. Forced expiratory volume.

19.During normal pregnancy, the renal glomerular filtration rate (GFR) can increase up to:

1. 10%
2. 25%
3. 50%
4. 75%
5. 100%

20. The resting pulse in pregnancy is:

1. Decreased by 20bpm.
2. Decreased by 1015bpm.
3. Unchanged.

4.Increasedby 1015bpm

21. A healthy 20 year old primi presents for her booking visit at 10 weeks of gestational age. She denies any significant medical history both personally, and in her family. Which of the following tests is NOT recommended in the 1st trimester testing?

-1. Hb concentration

-2. Screening for HIV

-3. Blood group

4. OGTT

22. Presentation is the part of the fetus that is:

-1. Relates to the right or left side of the maternal pelvis

2. Presenting or is the closest in proximity to the birthing canal.

-3. Relates to the long axis of the maternal Pelvis

-4. First entering the pelvis

23. Physiological pregnancy continues

1.240 days

2.280 days

3.320 days

4.220 days

5.300 days

24. Under observation in the antenatal clinic, a general urine test for pregnant women is carried out

1.2 times a trimester

2. Once a month

3.2 times a month

4.1 times a week

5.for each visit to the doctor

25. To identify the 3O-week gestational age, you can use

1.X-ray method

2. ultrasound

3. ECG and PCG of the fetus

4.amnioscopy

5.cytological method

26. The woman dilivered a child weighing 1000 g. The child died on the 2nd day after birth. What kind of mortality does this case refer to?

1. Perinatal

2. Intranatal

3. Early neonatal

4. Antenatal

27. Perinatal mortality means:

1. Death of a child in childbirth

2. Fetal loss in the antenatal, intrapartum and early neonatal nom periods

3. Stillbirth

4. Antenatal fetal death

1. Death of a child in the first 7 days (168 hours) of life

28. Maternal mortality includes the death of a woman:

1. From cirrhosis of the liver.

2. From gastric bleeding.

3. From a stroke.

4. From medical abortion

29. At what stage of pregnancy is the maximum concentration of human chorionic gonadotropin in the blood:

1. 5-6 weeks;

2. 8-10 weeks;

3. 14-16 weeks;

4. 3537 weeks;

5. it is constant during pregnancy.

30. The view of the fetus is determined

1.in relation to the back of the fetus to the left or right wall of the uterus

2.in relation to the longitudinal axis of the fetus to the longitudinal axis of the uterus

3.in relation to the back of the fetus to the anterior or posterior wall of the uterus

4.in relation to the limbs and head to the body of the fetus

31. The fetal position means:

1. the ratio of the back of the fetus to the lateral walls of the uterus

2. the ratio of the fetal head to the entrance to the pelvis

3. the ratio of the axis of the fetus to the longitudinal axis of the uterus

4. the relationship of different parts of the fetus

32. 7. The gestational age is established according to the following criteria, except for:

1. date of last menstruation

2. change in body weight of a pregnant woman

3. fetal movement

4. the size of the uterus in obstetric examination

5. ultrasound data

33. A primary pregnant woman smokes one pack of cigarettes a day. When she come to the antenatal clinic at 32 weeks of pregnancy, the height of the fundus of the uterus corresponds to 29 weeks. What should be assessed first of all during an ultrasound examination?

1. the volume of amniotic fluid

2. the size of the fetus

3. fetal anomalies

4. fetal motor activity

34. It’s possible to determine the position of the fetus if it’s in lie by:

1. back

2. head

3. small parts

4. buttocks

35. The most pronounced risk factor for miscarriage is:

1.age;

2. a history of 3 spontaneous miscarriages within 8-14 weeks;

3. smoking;

4. breech presentation of the fetus;

5. the height of the woman.

36. The estimated labor date is based on all of the above EXCEPT

1. menstrual cycles are regular;

2. the duration of pregnancy is 280 days;

3. ovulation occurs approximately on the 14th day of the cycle;

4. oral contraceptives were used before pregnancy;

5. conception occurred in the middle of the cycle.

37.An objective examonation of a pregnant or parturient woman begins:

1. with palpation of the abdomen

2. with abdominal auscultation

3. measuring the pelvis

4. from an objective examination of the systems

38. By the first step of external obstetric examination is determined:

1. fetal position

2. view

3. the height of the fundus of the uterus

4. the presenting part

39. By the second step of external obstetric examination is determined:

1. the presenting part

2. fetal position

3. the height of the uterine fundus

40. The third step of external obstetric examination defines

1. fetal position

2. fetal lie

3. the presenting part

4. fetal heartbeat

Clinical cases:

Task1.

Determine the date of birth in a primiparous woman 24 years old on the first day of the last menstruation - January 1.

Task2.

Calculate the date of birth for a re-pregnant woman 24 years old if she knows the date of conception - January 15

Task 3.

A 23-year-old woman with a regular sex life has no menstruation for 12 days. Previously, there were no delays in menstruation. The menstrual cycle is regular, 29 days, menstruation lasted 6 days, passed moderately, painlessly. She wants to establish if there is a pregnancy. What are the actions of the doctor?

Task 4.

A 36-year-old patient has 8 weeks of pregnancy. Suffers from arterial hypertension, smokes, is overweight.

What risk factors for this woman pose a real threat to the normal course of pregnancy and fetal development?

Task 5.

A 38-year-old female patient came to the antenatal clinic. The term of pregnancy is 7 weeks. She hasn’t somatic diseases and bad habits. What is the obligatory examination and why is it necessary to appoint a patient in connection with her age?

Task 6.

In a 28-year-old re-pregnant patient with a gestational age of 36 weeks. The height of the fundus of the uterus is in the middle of the distance between the navel and the xiphoid process. Is it norm?

Task 7.

A 19-year-old patient came to the antenatal clinic. She is unable to pinpoint the date of the last menstrual period, feels nauseous in the morning and has a positive pregnancy test. What actions of the doctor will help to establish the diagnosis of pregnancy?