

OBS & GYN

archive

Group 2

Wateen

Tala & Hala



1- what you see ?

**Shoulder dystocia with external rotation !**

2- Mechanism of delivery , Why ? السؤال كان اطول من هيك

!

3- if fetus go inside and affect perenium , the midwife call the doctors , what she should do until the doctors arrive ?

اعتقد هاي حسب ال management , الخطوة الثانية بعد ال call , و نحكي عن



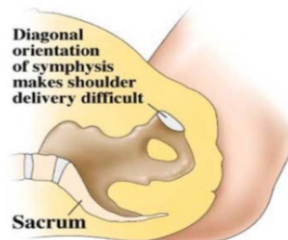
توضيح الصورتين هذول لفكرة الجواب !

**! increase inclination angle**

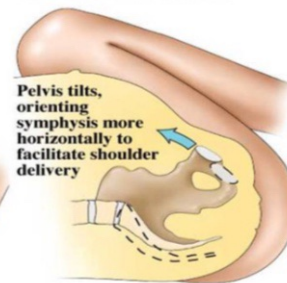
anagement

<b>HELPERR</b> for Shoulder Dystocia	
	<b>H</b> Call for Help
	<b>E</b> Evaluate for Episiotomy
First-line Maneuvers	<b>L</b> Legs: McRoberts Maneuver
	<b>P</b> External Pressure – suprapubic
	<b>E</b> Enter: rotational maneuvers
Second-line Maneuvers	<b>R</b> Remove the posterior arm
	<b>R</b> Roll the patient to her hands and knees

Before McRoberts Positioning



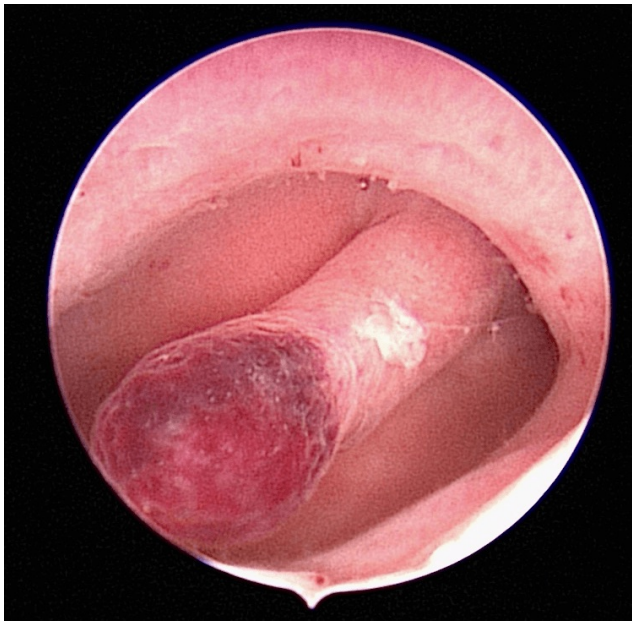
McRoberts Position



4 - The arm is adducted and internally rotated, with extension at the elbow, pronation of the forearm, and flexion of the wrist ?

**Erbs palsy**

2



1- what you see ?

**Pedunculated endometrial polyp**

2- risk factors ? 8 بده

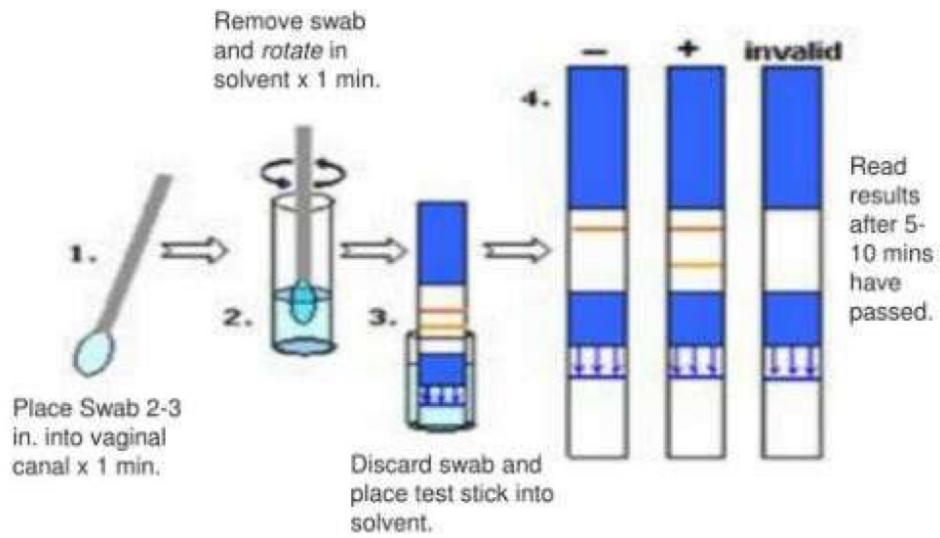
3- management procedure ? And why ?

**myomectomy ,**

4- investigation to diagnosis ?

5 - mention acute long term complications of the procedure mentioned in Q3 ?

3



1- name of the test ?

**Amnisure test**

2 - When you say this positive or negative ? (Mechanism of action )

3 - Patient complain from what to do this test ?

**Gush of fluid ! , ...**

4- what you ask about in history ?

5 - Another screening tests ?      **Screening vs diagnostic !**

6- what is your management ?

- ④ Two couples complaining from infertility for 2 years ,  
Normal male semen analysis , normal hormonal female .



1- Name ?

**HSG**

4- Parts a b c d ?

**A : body of uterus**

**B : fallopian tubes**

**C : spill of fluids**

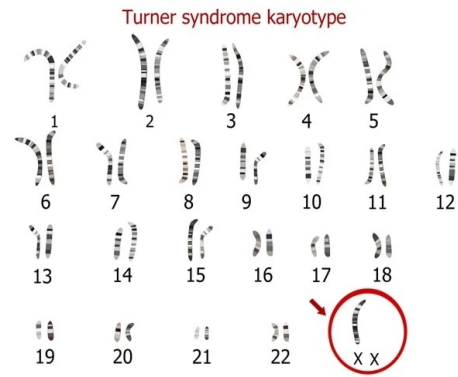
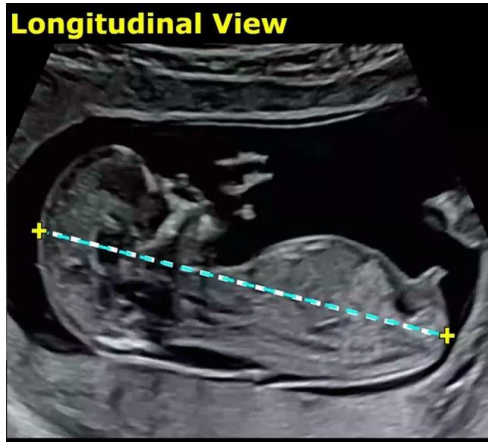
**D : speculum !**

3- what do you think the cause of infertility ?

4- What is its purpose, and what is clinically relevant to each ?

5- other test you should do ?

5



## Growth restrictions

Q1/ what fetal Feature the ultrasound describe ?

**Nuchal translucency , crown rump length**

Q2/ what's the abnormalities in the ultrasound ?

**Increase translucency**

Q3/ what is the indication for the previous measures ?

■ **assess fetal growth**

■

Q4/ if the mother presented to the clinic after duration and kerotyping was done what is the abnormality seen ?

Turner Syndrom XO

Q5/ phenotype ?

Q6/ what you will on physical examination ?

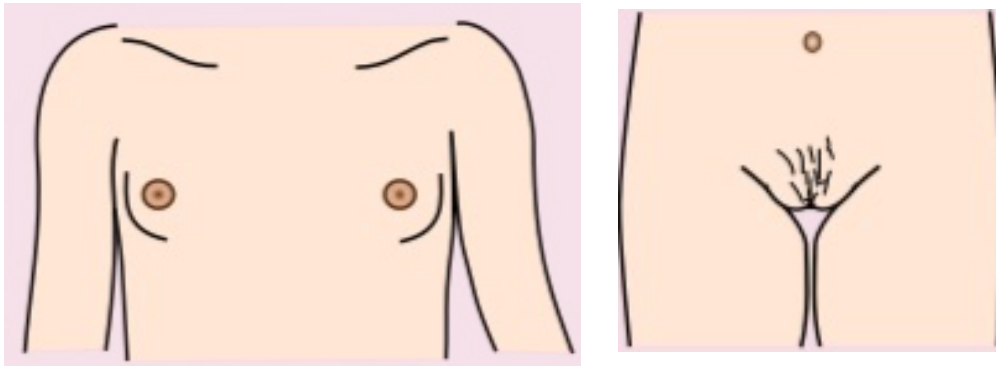
■ **webbed neck**

■ **wide nipples**

■ **short stature**

■ **shield chest**

6



## Puberty lecture

Mother come with her daughter to clinic , age 7 year - old .. , complaining of early breast and pubic hair as in pictures ...

Q1/ what are the feature in the picture?

**Secondary sexual characteristics ! Or second stage of tanner scale !**

مو متأكدة شو الصح !

Q2/what is the diagnosis?

**Precocious puberty**

Q3/ what are the relevant points of the history?

- **family history !**
- **ansomnia !**

Q4/ what are the findings on physical examination ? On :

General : **sexual organs , stature ?**

Skin : **if there is pigmentation ...**

Upper chest :

Q5/ what you think the cause ?

**Central, gonadotrophin dependent,**

**or true PP: e.g. brain tumors, or CNS malformation, 75% idiopathic**

برضه مو اكيد 😞