**MFM theory day 2**

**Case studies- MoreOB**

**1. A 17-year old woman is admitted to the birthing unit of a level 2 hospital at 28 weeks and 2 days' gestation with contractions. You suspect preterm labor. What risk factors would you look for in your history as evidence for preterm labor?**List six factors

**2. True or false? The single most important factor in the history to determine the prognosis of the fetus if preterm birth occurs is accurate dates.**

3. This woman fortunately came into the hospital as soon as she suspected something was wrong. This has helped in making a timely diagnosis. What symptoms would you look for in your initial assessment?

**4.You now want to examine her to confirm your diagnosis. What evaluations would you make? What assessments would you perform?**

5.**What are the overall objectives in the management of preterm labor?**List four

6.Based on evidence, her infant’s likely survival rate, if delivered now, would be greater than \_\_\_\_\_\_\_\_\_

### 7. Administration of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ has established benefits and is recommended for all women at risk for preterm birth between 24 and 346 weeks’ gestation.

The single most important contraindication to this drug is the presence of \_\_\_\_\_

**1.A 30-year old woman, G2P1, with a previous preterm birth, is seen for her first prenatal visit at 12 weeks’ gestation.** **What risk factors for preterm prelabor rupture of membranes (PPROM) would you look for when taking a history?**Type six

**2. You discuss Preterm PROM with the woman. Suggest two ways she can prevent or reduce the risk of PPROM.**

**3. At 30 weeks’ gestation, the woman comes to the Assessment Unit suspecting that her membranes ruptured 2 hours previously.**

**The most important principle when managing any suspected PROM is to avoid digital pelvic examination. Is this statement true or false?**

4. The most significant complication of PPROM is preterm birth. True or false?

5. I**f a diagnosis of Preterm PROM is confirmed, what should we avoid?**