

## CASE 1

I am presenting H/o 25 yrs old, Mrs Annu w/oMr Ramlal,R/O Jaipur, educated upto 5<sup>th</sup> standard, she is a housewife, belonging to lower socioeconomic status,G4 P 3-0-0-3 with 30 weeks of period of gestation presented for the first time in the ANC OPD with the complains of

1-amenorrhea since 7 months.

2-weakness and easy fatiquability since last 3 months.

3-breathlessness on exertion since last 15 days.

## HISTORY OF PRESENT ILLNESS

- Patient complains of easy fatiguability and weakness since last 3 months which has gradually increased over last 15 days to an extent that she gets tired on doing household activities.
- Patient also complains of breathlessness on exertion since last 15 days. patient gets breathless on climbing two flight of stairs, it is not associated with palpitations or any chest pain.
- **NEGATIVE HISTORY**

There is no history of sudden onset of breathlessness, cough or decreased urine output.

there is no history of asthma, or chronic cough.

There is no history of chronic fever with chills and rigors

There is no history of passes of worms in stool nor blood loss from any site.

There is no history of easy bruisability or petechiae.  
there is no history of yellow discoloration of urine, skin  
and eyes.

she did not take any iron folic acid prophylaxis in this  
pregnancy.

No history of high B.P records, pedal  
odema, headache, epigastric pain, blurring of vision

No history of polyuria, polydipsia, polyphagia

No history of pain abdomen, leaking or bleeding per  
vaginum

# Antenatal History

## First trimester

- Spontaneous conception
- No history of radiation or any teratogen exposure
- No history of fever with rash, burning micturition, discharge or bleeding per vaginum
- No history of any drug intake
- No history of hyperemesis

## Second trimester

- She perceived quickening at 3<sup>rd</sup> month
- Only single ANC visit
- Patient did not take any IFA prophylaxis
- She has received one dose of tetanus immunization from local dispensary

- **MENSTRUAL HISTORY**

Her last menstrual period 22/12/2017

Her expected date of delivery 29/9/2018

Her menstrual cycles were regular with normal blood flow

- **OBSTETRIC HISTORY**

She is G 4 P 3-0-0-3

All children were full term normal vaginal delivery at home.

First FTND female child 5yrs old

2<sup>nd</sup> conceived in lactational amenorrhea after 7 months of 1<sup>st</sup> baby FTND female child 3yrs old

3<sup>rd</sup> conceived after 11 months of 2<sup>nd</sup> baby FTND female child 1.5yrs old

All issues are alive and healthy and immunized

All three pregnancies were uneventful

- **PAST HISTORY**

no history of TB, heart disease, hypertension, asthma, any chronic illness

No history of hospitalization, surgery, allergic reaction to any drug, blood transfusion

- **PERSONAL HISTORY**

She is vegetarian, non-smoker, non-alcoholic with normal bowel bladder habits

She has h/o pica in this and earlier pregnancies

there is no history of repeated blood transfusions or thalassemia in any of the family member.

- **SOCIOECONOMIC HISTORY**

she belongs to lower middle class according to modified Kuppuswamy scale.

- **DIETARY HISTORY**

total calorie intake is 1500 Kcal and protien intake 17 gm per day which is grossly inadequate,iron intake is around 15 mg/day



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# GENERAL PHYSICAL EXAMINATION

- She is lying comfortable in bed and well oriented to time ,place and person
- she is thin built poorly nourished
- her height is 5 feet,weight is 50kg bmi=  $22.22 \text{ kg/m}^2$
- her gait is normal.

## VITALS

- Her pulse rate is 80/minute regular,good in volume,bilateral synchronous without any radiofemoral delay.
- Her B.P is 120/80mmHg
- she is afebrile.
- Her respiratory rate is 20/min



# GENERAL PHYSICAL EXAMINATION

- Hair shows signs of malnutrition,
- Pallor is present in the conjunctiva and skin
- Nails shows platonychia
- There is no icterus, no pedal odema, no lymphadenopathy, no cyanosis
- Neck veins are not visible, no other neck swelling
- There is no angular stomatitis, glossitis or cheilosis



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## SYSTEMIC EXAMINATION

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- CVS(cardiovascular)-apex beat is present in 5<sup>th</sup> intercostals space and is hyperdynamic S1S2 normal Ejection systolic murmur grade 2/4 is heard best over pulmonary area are not radiating to any site.
- RESPIRATORY- air entry equal on both the sides no added sounds or crepts heard.
- CNS;-no abnormality detected
- BREAST EXAMINATION  
breasts shows normal changes of pregnancy, nipple are everted

# ABDOMINAL EXAMINATION

- Inspection

Abdomen uniformly distended

umbilicus central and inverted

Linea nigra and stria gravidarum present

No scar mark

No visible vessel

All hernia sites are free

No hepatosplenomegaly

## P/A

- **Palpation**  
Fundal height is around 28 weeks  
Symphysiofundal height is 28.5cm  
Abdominal girth is around 29 inches  
Fundal grip-broad irregular mass suggestive of breech  
Lateral grip-back felt on right side and limbs on left side  
Pelvic grip-smooth hard ballotable mass suggestive of head felt
- **Auscultation-fetal heart rate is 140/min regular in left spinoumbilical line**

## FINAL DIAGNOSIS

- 25 years old G4P3-0-0-3 with 30 weeks periods of gestation with single live fetus in longitudinal lie, cephalic presentation with anemia not in failure.
- MANAGEMENT