

CASE 1

I am presenting H/o 25 yrs old, Mrs Annu w/o Mr Ramlal, R/O Jaipur, educated upto 5th 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 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 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 micturation, discharge or bleeding per vaginum
- No history of any drug intake
- No history of hyperemesis

Second trimester

- She perceived quickening at 3rd 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

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

3RD conceived after 11 months of 2nd 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

GENERAL PHYSICAL EXAMINATION

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- 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 kg/m²
- 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

SYSTEMIC EXAMINATION

- CVS(cardiovascular)-apex beat is present in 5th 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