

OBSTETRICS/GYNECOLOGY

Obstetrics deals with antenatal and postnatal care; maternal and fetal surveillance; and prenatal diagnosis while Gynecology encompasses the diagnosis and treatment of conditions and disorders affecting the female reproductive organs.

EQUIPMENT

- Vaginal speculum
- Obstetric surgical kits
- Vacuum extraction
- Ultrasound
- Fetal monitors
- Curette
- Forceps

PERSONNEL

- Gynecologist
- Nurse
- Midwife
- Sonographer

CONVERSATION IN THE OBSTETRICS/GYNECOLOGY

Patient: Good morning. I'm Mrs. Saki. I'm here to have myself checked.

Nurse: Good morning, Mrs. Saki. Please have a seat.

Patient: Thank you

Nurse: Is this your first visit?

Patient: Yes

Nurse: Okay, I need you to fill out this form. After that, I will take your vital signs.

Patient: Sure

Nurse: Your doctor will be Dr. Chu. She's one of the best Ob-Gyne specialists in our hospital.

Patient: That's great.

Nurse: Please, follow me so I can introduce you to Dr. Chu.

Patient: Okay

Nurse: Good morning, doctor. This is Mrs. Saki.

Doctor: Good morning, Mrs. Saki. Please have a seat.

Patient: Thank you

Doctor: What can I do for you?

Patient: I didn't have my menstruation for 2 months now.

Doctor: When was the first day of your last menstruation?

Patient: November 20

Doctor: Did you have nausea and vomiting?

Patient: Yes, every morning.

Doctor: Did you do pregnancy test?

Patient: Yes, but I want to be sure that's why I came here.

Doctor: I see. Is this your first pregnancy, in case we confirm that you are really pregnant?

Patient: Yes doctor and I want to know if my baby is fine.

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Doctor: Ok. Since you didn't have menstruation for 2 months now, we need to have TVS.

Patient: What's TVS doctor?

Doctor: It means Trans-Vaginal Sonogram Ultrasound. It helps confirm a normal pregnancy; determine the baby's age; look for problems such as ectopic pregnancies or the chances for a miscarriage; determine the baby's heart rate; look for multiple pregnancies (twins, triplets, etc.); identify problems of the placenta, uterus, cervix, and ovaries.

Patient: How is it done?

Doctor: You will lie down for the procedure. Legs may be put in stirrups, or a bolster may be placed under the hips to tilt the pelvic area upwards to facilitate use of the probe, both for insertion as well as for the ultrasound process itself. The probe with gel will be inserted into the vagina. This will provide clearer image due to better resolution.

Patient: Is it painful doctor?

Doctor: It's a bit painful.

Patient: What will be the preparation before the test?

Doctor: You need to empty your bladder first.

Patient: Okay doctor

Doctor: Do you have any questions?

Patient: Not anymore.

Doctor: That's good. Please be ready for the test now.

Common questions asked by pregnant women during first day of prenatal appointment:

How much weight should I gain and at what rate?

Do I have an increased risk of any specific complications or conditions?

What screenings do I need?

What kind of diet should I follow? What should I eat and drink a lot of and what should I avoid?

Should I be doing any particular kind of exercise? What kind and amount is safe?

Are there any restrictions on sex throughout my pregnancy?

Can I dye my hair? Use sunless tanner? Get a massage? Paint my nails? Go to the spa?

Are there any other activities I should avoid?

What over-the-counter medications are safe, and in what amount? Are there any I should avoid?

What prenatal vitamins do you recommend?

Which prenatal classes do you recommend?

What position should I sleep in?

What symptoms should I expect, and how can I manage them? What's normal and abnormal?

What should I do if I don't feel well? What if I have cramps, blood spots in my underwear or fever?

When labor begins, at what point should I call you?