#### **Case Briefing**

It's a beautiful August day, and on the walk to work this morning, all you could think about was getting on the water in your kayak later. Today should be a regular day, with a few appointments in the morning and on-call for obstetrics. You're working in a rural 1A maternity site (no local cesarean section capabilities), and the nearest urban centre is 500 km away.

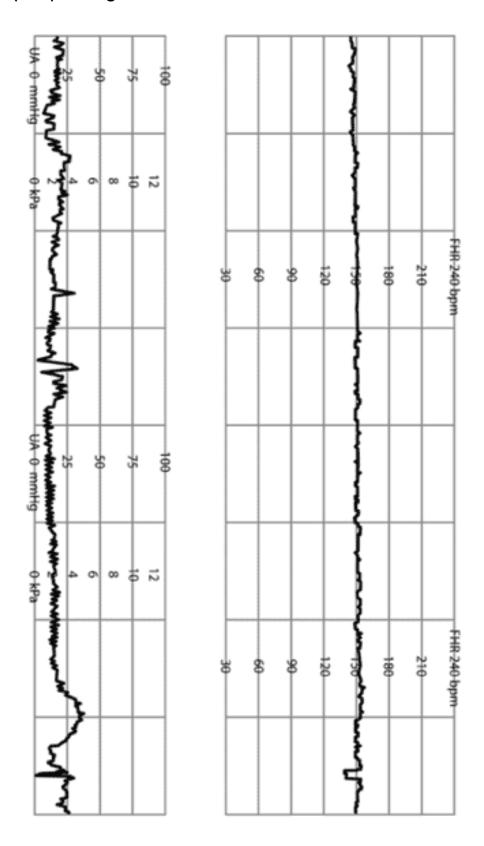
Your neighbour, yes – the one who makes the best sourdough bread, is 36 y/o and pregnant with her fourth child (Gravida 5, Para 3). She's 23 weeks into her pregnancy and coming in for a follow-up appointment after going to the referral centre last week. Prenatal clinics are done at the hospital.

Neighbour (Cathy): "It's been a whirlwind! Three pregnancies before this one with no complications, and for some reason, this little one can't relax. Anyway, I know I'm in good hands since you got the last three out okay."

Cathy went to the referral centre last week (22 weeks) because her previous antepartum transvaginal ultrasound showed a shortened cervix (<25 mm). The physician prescribed micronized progesterone 200 mg qd PV, from diagnosis until 36 weeks. Cathy: "The doc told me to follow up with you, but I'm also having other problems. I've been getting this tightening in my belly and a constant low, dull backache. It started yesterday morning after what kind of felt like water breaking, but I wrote it off as, you know, "leaking" and was busy all day with the other kiddos."

She has no allergies, and her family and medical history are insignificant. She has been taking progesterone PV for the past six days and finished her treatment for bacterial vaginosis (Metronidazole 500 mg PO b.i.d for 7 days) last Friday. Past labs are normal. Up until last week, she's had no complications. She had no complications in her past pregnancies. She does not drink alcohol but smokes approximately one pack of cigarettes/week.

Patient Chart					
Name: Cathy Majewski	<b>Age:</b> 36	Gender: F	Weight: 57.3 kg	Height: 152 cm	GA: 23 Weeks
Temp: 37.2	<b>HR</b> : 105 bpm	<b>BP</b> : 118/79	RR: 22/min	<b>O<sub>2</sub>Sat</b> : 99%	<b>GCS</b> : 15
Presenting complaint: Vaginal discharge and a low, dull backache since 0630 yesterday morning. Abdominal tightening since 0745 this morning.					

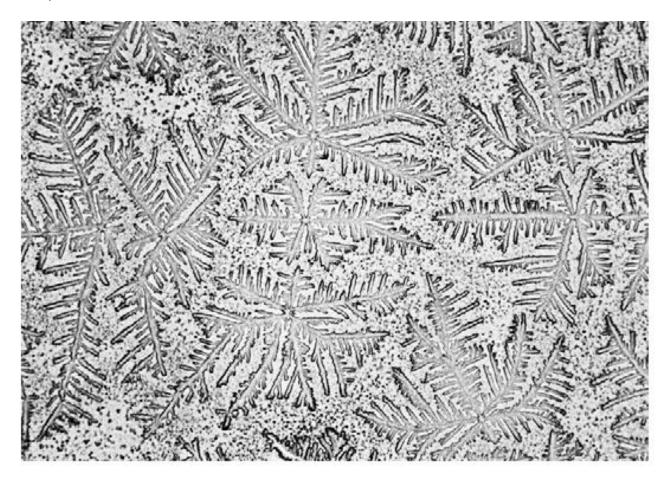


### Reference(s):

Online Figures A through L adapted from Bailey RE. Intrapartum fetal surveillance. In: Leeman L, ed. Advanced Life Support in Obstetrics Program: Provider Course Syllabus. Leawood, Kan.: American Academy of Family Physicians; 2009.

Bailey RE. Intrapartum fetal monitoring. Am Fam Physician. 2009 Dec 15;80(12):1388-96. PMID: 20000301.

# Microscope / Fern Test Result:



### Reference(s):

Kiechle, F.L., & Gauss, I. (2001). Provider-performed microscopy. Clinics in laboratory medicine, 29 3, 573-82.

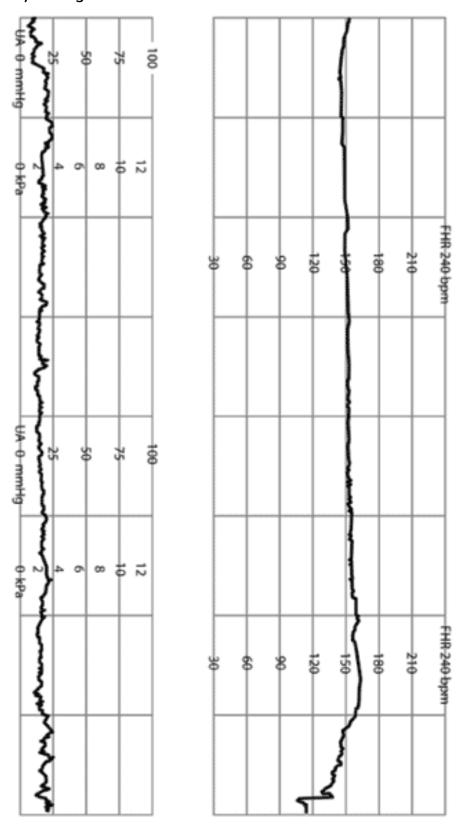
# Nitrazine pH Test Result:



# Reference(s):

Retrieved July 13, 2023, from <a href="https://codehealth.co/case/344">https://codehealth.co/case/344</a>

### Fetal Heart Rate (FHR) Tracing #2



### Reference(s):

Online Figures A through L adapted from Bailey RE. Intrapartum fetal surveillance. In: Leeman L, ed. Advanced Life Support in Obstetrics Program: Provider Course Syllabus. Leawood, Kan.: American Academy of Family Physicians; 2009.

Bailey RE. Intrapartum fetal monitoring. Am Fam Physician. 2009 Dec 15;80(12):1388-96. PMID: 20000301.