

EMERGENCY AND PLANNED REVIEWS

Patients are usually referred by GP, Midwife or A&E.

WHU will see and access patients with gynaecological problems if needed to be admitted they will be transferred to a surgical ward. As a student you will get chance to triage emergency patients and chaperone the DR. Assist in the transfer of patients to appropriate ward.

- Pregnancy related problems up to 23 weeks are seen on WHU. These include threatened miscarriage, foetal movements, abdominal pain in pregnancy, bleeding in pregnancy
- Repeat BHCG
- 1ST visit for medical management for termination of pregnancy
- Natural management of miscarriage reviews
- Patient for wound check reviews requested by a surgical ward
- Dislodged vaginal ring
- Foreign bodies stuck in the vagina
- Menorrhagia
- Post-menopausal bleeding

Question relating to emergencies/planned reviews (*Continue of a separate sheet if needed*)

1. Up to what gestation do most miscarriages occur?
2. Why may a lady have a ring in situ
3. What observations would be important in a lady who is bleeding heavily?
4. A patient who comes in with menorrhagia may be referred for what investigation?
5. What support may a patient require who is suffering a miscarriage?

