





Azerbaijan Medical Simulation Education Association

# THE GUIDE TO THE OSCE

Practical skills in obstetrics and gynecology

Specialty: General medicine







### The duration of the station

The total time to complete the skill is 10 minutes.

Accredited person's time at the station is 8.5 minutes (in case of early performance of a practical skill, the accredited person stays inside the station until the voice command "Enter the station, say your ID number and listen to the assignment").

### Timing of the practical skill

Time of the voice command	Voice Command	Action of the accredited person	Skill performance time
0,	Enter the station, say your ID number and listen to the assignment	Listen to the station assignment (briefing). Initiation of the work at the station	0,5'
8,0'	You have one minute left	Work continuing at the station	8,5'
9,0'	Time is up	Wait for the next command	1'

### **List of situations (scenarios)**

No	Situation (scenario)
1	Examination of the pregnant woman closer to the delivery
2	Delivery

The choice and sequence of situations is determined by the member of the commission on the day of the exam.







Scenario 1

## Examination of the pregnant woman closer to the delivery

### **Information for the accredited person (briefing)**

You are an obstetrician-gynecologist. A pregnant woman is waiting for you in the office for an obstetric examination. Turn to right and start. Voice your actions.

### Skill performance algorithm

No	Action of the accredited person		
1	Say hello to the patient		
2	Introduce yourself, indicate your role		
3	İdentify the patient according to medical record and inquire about the patient's well-being		
4	Ask the patient about her last menstrual period (LMP)		
5	Calculate the estimated date of delivery (EDD)		
6	Inform the patient about the upcoming procedure		
7	Check, whether the patient gave voluntary informed consent for the upcoming procedure		
8	Disinfect hands by hygienic way		
9	Put on disposable examination gloves		
	Conducting an external obstetric examination (fetal palpation):		
10	Start the examination by standing on the right side of the patient and facing the patient's face		
11	The I Leopold's maneuver: the palms of both hands shall be placed on the uterus so that they tightly cover the uterine fundus, the nail phalanxes of the fingers are facing each other		
12	Voice the purpose of the I Leopold's maneuver		
13	The II Leopold's maneuver: press with the palms and fingers of both hands on the side walls of the uterus		
14	Voice the purpose of the II Leopold's maneuver		
15	The III Leopold's maneuver: cover with one hand the presenting part of fetus, after which they carefully move this hand to the right and left		
16	Voice the purpose of the III Leopold's maneuver and the presenting part of fetus		
17	Change your position and continue the examination by facing the patient's feet		
18	The IV Leopold's maneuver: place both hands on the lower segment of the uterus and bring them closer		
19	Voice the IV Leopold's maneuver purpose		
	Auscultation of the fetus		
20	Press the obstetric stethoscope's wide bell to the mother's abdomen		
21	Correctly determine the place of listening to the fetal heartbeat		
	Calculation of the estimated weight of the fetus		
22	Measure the circumference of the abdomen: place measuring tape at the level of navel - in front, at the level of the lumbar region - behind		







	Determine the fundal height: place measuring (centimeter) tape along the midline of the			
23	abdomen, measure the distance between the upper edge of symphysis and the most			
	protruding point of the uterine fundus			
24	Calculate the estimated weight of the fetus according to the rule: height of			
24	the uterus bottom $\times$ abdominal circumference $\pm$ 200 gr			
	Determining the dimensions of the large pelvis			
25	Hold the pelvimeter correctly. Pick up the pelvimeter arms so that the thumb and index			
23	finger hold the bulbs. The scale of pelvimeter must be facing up			
26	Determine the first transverse dimension, distantia spinarum (voice the normal state).			
27	Determine the second transverse dimension distantia cristarum (voice the normal state)			
28	Determine the third transverse dimension distantia trochanterica (voice the normal state)			
29	Ask the patient to change the position: turn on her left side, bending the left leg at the			
29	knee and hip joints, and keep the right leg extended			
30	Fourth anterioe-posterior diametr (voice the normal state)			
31	On the basis of conjugata externa determine the conjugata vera			
	End of procedure			
32	Inform the pregnant woman about the completion of examination			
33	Take off the gloves, consumables and place them in class B container for disposal			
34	Disinfect hands by hygienic way			
35	Inform the pregnant woman about the examination results			







Scenario 2

### **Delivery**

### **Information for the accredited person (briefing)**

You are an obstetrician-gynecologist. A woman giving birth is waiting for you in the delivery room. Turn to left and start. Voice your actions.

# Skill performance algorithm

No	Action of the accredited person		
1	Say hello to the patient		
2	Introduce yourself, indicate your role		
3	Identify the patient according to medical record and inquire about the patient's well-being		
4	Ask the patient about complaints:  • when contractions started  • frequency, duration, time between contractions  • when the amniotic fluid flows  • the presence of vaginal discharge		
	nature of uterine discharge		
5	Disinfect hands by hygienic way		
6	Put on sterile gloves		
	Physiology of childbirth		
7	To determine the degree of opening of the cervix		
8	To demonstrate the biomechanism of labor in an occiput anterior breech presentation		
9	Place the child on the mother's belly after birth		
10	Set up two Kocher's clamps, at 10 cm distance from the umbilical ring (retraction) and the second one - stepping back 2 cm from the first clamp		
11	Treat the area to be cut with an antiseptic (represent)		
12	Take medicinal scissors and cut the cord between the Kocher's clamps		
13	Give the child to a neonatologist with a Kocher clamp (conditionally)		
14	<ul> <li>Sounding of the active conduct of the III stage of labor</li> <li>for the prevention of bleeding, within 1 minute after the birth of the child, perform (sound) an intramuscular injection of 10 units or intravenous 5 units of oxytocin to the mother</li> <li>keep the umbilical cord incision intact</li> <li>external massage of the uterus immediately after the expulsion of the placenta</li> </ul>		
	Checking the signs of the placenta detachment		
15	Check Schroder's sign (represent)		
16	Check Kustner sign (represent)		
17	Check Alfeld's sign (represent)		
18	Check Klein's sign (represent)		
Methods of external placenta detachment			
19	Apply the Abuladze method by sounding it out		







20	Apply the Krede method by sounding it out	
21	Apply Hunter's method by sounding it out	
22	Check the completeness of the placenta	
Period of physiological intelligence		
23	Uterine massage is performed every 15 minutes in the first 1 hour after birth, and every	
	30 minutes in the 2nd hour (voicing)	
24	Duration and management of late childhood development (voicing and describing)	
25	Determining the number of days after birth based on the size of the uterus	
26	Take off the gloves, consumables and place them in class B container for disposal	
27	Disinfect hands by hygienic way	







### Scenario 1

# Dialogue with an accredited person sample texts of input information in the frame

№	Action of the accredited person	Indicative text
1	When the accredited person identifies the last name, first name and age of the patient	«Leyla Mammadova, 30 years old»
2	When asking patient's well-being	«Normal»
3	When checking the presence of voluntary informed consent to the procedure	«Informed voluntary consent will be considered to have been received»
4	When determining the date of the patient's last menstrual period	«XX.02. – 10.02.2023»
5	When an accredited person tries to wash his hands by hygienic way	«Let is assume that the hands have been disinfected»
6	When the I Leopold's maneuver is being performed	«The large, soft, indefinite shaped part of the fetus is determined»
7	When the II Leopold's maneuver is being performed	«A smooth, flat part is handled on the right side, and small parts are set on the left sid »
8	When the III Leopold's maneuver is being performed	«The round, hard large part of the fetus is determined»
9	When the IV Leopold's maneuver is being performed	«The small pelvis is compressed»
10	When listening to the fetal heartbeat	«Fetal heartbeat is 140 beats per minute, clear, rhythmic»
12	When measuring the abdominal circumference	«100 cm»
13	When measuring the height of the uterus bottom	«32 cm»
14	When the patient is asked to turn on her left side to measure the external conjugate	«We will consider that the patient turned on her left side»
15	When trying to wash hands by hygienic way	«Let is assume that the hands have been disinfected»







### Scenario i 2

# Dialogue with an accredited person sample texts of input information in the frame

No	Action of the accredited person	Indicative text
1	When the accredited person identifies the last name, first name and age of the patient	«Leyla Mammadova, 30 years old»
2	When asking patient's well-being	«Normal»
3	When the accredited person specifies patient's complaints	«There are contractions,amniotic fluid flowed from the fetus»
4	When asking the time and nature of contractions	«Onset 1/2/3/5/7/9 hours ago, seizure-like»
5	When asking about the time when the amniotic fluid started to flow	«An hour ago»
6	When asking about the nature of uterine secretions	«Amniotic fluid»
7	When trying to wash hands by hygienic way	«Let is assume that the hands have been disinfected»
8	When trying to cut the umbilical cord	«We will consider that the umbilical cord was cut»
9	After checking for signs of separation of the placenta	«Signs of separation of the placenta are positive, but the woman cannot deliver the placenta»
10	When trying to examine the placenta	«Placenta is complete»
12	When trying to wash hands in a hygienic way	«Let is assume that the hands have been disinfected»







#### Reference information

Calculating the estimated date of delivery (DET) based on the last menstrual period (LMT):

The history of the last menstruation from the pregnant woman is studied. 3 months from the specified date are counted back and 7 days are added to it.

#### *Leopold's examination methods:*

The purpose of the I Leopold's maneuver: to determine the height of the uterine fundus and the large part of the fetus in the fundus. I Leopold's method: the palms of both hands are placed on the bottom of the uterus, with the fingertips pointing towards each other.

The purpose of the II Leopold's maneuver: to determine the condition, position and appearance of the fetus. Careful pressure is applied to the side walls of the uterus with the palms and fingers of both hands.

The purpose of the III Leopold's maneuver: to determine the condition, position and appearance of the fetus. Careful pressure is applied to the side walls of the uterus with the palms and fingers of both hands.

The purpose of the IV Leopold's maneuver: to determine the relationship of the presenting part of the fetus to the planes of true pelvis. Facing the patient's feet, place both hands on the lower segment of the uterus and bring them closer.

*The size of the abdominal circumference of a pregnant woman:* 

At the end of pregnancy, the circumference of the abdomen is 90-100 cm. The presence of abdominal circumference above 100 cm means polyhydramnios, large fetus, obesity, transverse position of the fetus, etc. may depend.

#### Placenta detachment:

If there is no bleeding, the detachment of the placenta can be expected within 30 minutes.

Schroeder's sign - the fundus of the uterus is raised, above and to the right of the navel (hourglass).

Kustner - the umbilical cord incision does not retract when pressure is applied to the groin withthe external edge of the hand.

Alfeld's sign - extension of the external umbilical cord section, the ligature goes down 8-10 cm.

Klein's sign - the elongated umbilical cord incision does not retract after stopping the pushing.







### *Treatment of external genitalia before internal examination:*

Sterile control balls are taken with a cornsang and treated with skin antiseptic, and then the labia, groin area, inner surface of the thigh, perineum and anus are treated sequentially.

*Methods of external placenta detachment:* 

- Abuladze method. With both hands, the front wall of the abdomen is held in the form of folds, they offer the woman to push.
- Krede method. The uterus is brought to the middle position, a light caress is applied to contract the uterus (no massage!). Then, with four fingers on the back wall of the uterus, the palm at the bottom of the uterus, and the thumb on its front wall, pressure is applied to the uterus with the whole hand in two intersecting directions (thumb from front to back, palm from top to bottom). Do not offer the patient to push.
- Hunter method. Uterus is brought to the middle. A light caress is taken from the front wall of the abdomen to collect the uterus. Then, facing towards the legs of the woman giving birth, hands clenched like fists should be placed in the area of the tubal angles of the uterus and gradually pressure should be applied to the uterus and groin. Do not offer the patient to push.







# Chec klist (scenario

№	Action of the accredited person		Evaluation criteria	
1	Communicates verbally and non-verbally with the patient	□yes	□no	
2	Clarified the date of the last menstruation	□yes	□no	
3	Calculated EDD			
4	Disinfect hands in a hygienic way and put on examination gloves	□yes	□no	
5	Performed I Leopold's manevure's and voice her goal	□yes	□no	
6	Performed II Leopold's manevure's and voice her goal	□yes	□no	
7	Performed III Leopold's manevure's and voice her goal	□yes	□no	
8	Performed IV Leopold's manevure's and voice her goal	□yes	□no	
9	Determined the place of listening to the fetal heartbeat	□yes	□no	
10	Measure abdominal circumference and uterine fundus height	□yes	□no	
11	Calculate the estimated weight of the fetus	□yes	□no	
12	Hold the pelvimeter correctly	□yes	□no	
13	Determined D.spinarum	□yes	□no	
14	Determined D.cristarum	□yes	□no	
15	Determined D.trochanterica	□yes	□no	
16	Determined Conjugata externa	□yes	□no	
17	Calculate the conjugate vera	□yes	□no	
18	Placed gloves in class B container for disposal	□yes	□no	
19	Disinfect hands by hygienic way	□yes	□no	
20	Informed the patient about the manipulation results	□yes	□no	







### Chec klist (scenario

№	Action of the accredited person	Evaluation criteria	
1	Communicates verbally and non-verbally with the patient	□yes	□no
2	Clarified the patient's complaints	□yes	□no
3	Disinfect hands in a hygienic way and put on examination gloves	□yes	□no
4	Demonstrates the correct conduct of a vaginal examination to determine if the cervix is dilated	□yes	□no
5	Correctly determines the degree of opening of the cervix	□yes	□no
6	Demonstrates the biomechanism of birth in anterior view occiput presentation	□yes	□no
7	Voiced the fixation points for this biomechanism of childbirth	□yes	□no
8	He voiced the tactics of conducting the third stage of labor	□yes	□no
9	Correctly applied two Kocher clamps	□yes	□no
10	Handled the umbilical cord intersection and cut the umbilical cord between the clamps	□yes	□no
11	Assessed Schroder's signs	□yes	□no
12	Assessed Alfeld's signs	□yes	□no
13	Assessed Klein's signs	□yes	□no
14	Assessed Kustner signs	□yes	□no
15	Demonstrates the Abuladze method	□yes	□no
16	Demonstrates the Krede method	□yes	□no
17	Demonstrates the Genther method	□yes	□no
18	He voiced the rules for managing the early postpartum period and demonstrated	□yes	□no
19	According to the level of standing of the bottom of the uterus, correctly announced the day of the postpartum period	□yes	□no
20	Placed gloves in class B container for disposal	□yes	□no
21	Disinfect hands by hygienic way	□yes	□no

### Normative and methodological support of the passport

- 1. Modern diagnostics and treatment in obstetrics and gynecology "Gunesh" Medical Publishing House 11 Publishing House 2010
- 2. Williams Obstetric. Publisher: McGraw Hill / Medical; Edition: 26th, 2022
- 3. Obstetrics Eds. G.M. Savelyeva, G.T. Sukhikh, V.N. Serov, V.E. Radzinski 2-nd edition, revisedand enlarged M.: ГЭОТАР-Медиа, 2019
- 4. https://www.wikilectures.eu/w/The\_third\_period\_of\_labor