

GYNECOLOGY

Primary Care Paramedicine

Module: 18

Section: 02



- Introduction
- Assessment
- Management
- Specific gynecological disorders

- Gynecology
 - Branch of medicine that deals with women's health
- Beyond labour and delivery the most common complaints are:
 - Abdominal pain
 - Vaginal bleeding

- Does the patient complain of pain?
 - Dysmenorrhea
 - Dyspareunia
- Associated signs or symptoms
- Previous pregnancy
 - Gravida/parity/abortion
- Document last menstrual cycle
- Medications
 - Contraceptives

- Respect patient's privacy.
- Be professional.
- Explain procedures.
- Observe patient.
- Check vital signs.
- Assess bleeding or discharge.
 - Do not perform an internal vaginal exam in the field.
- Abdominal examination.

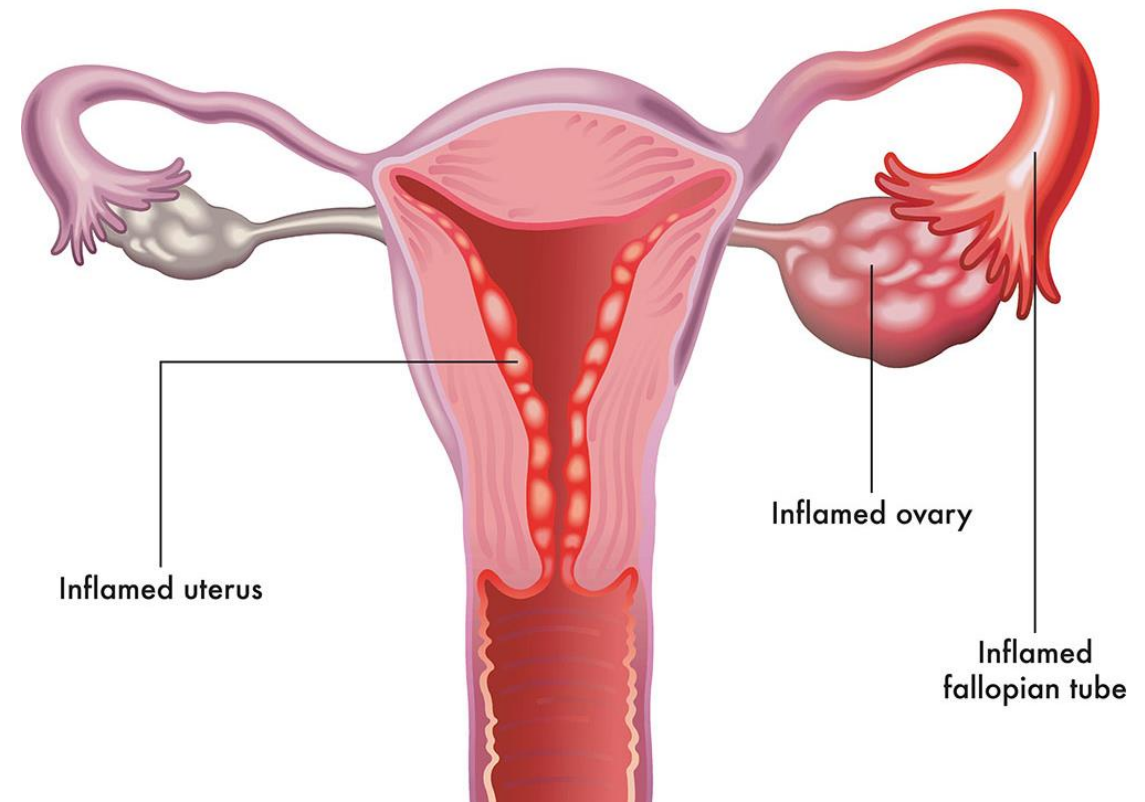
- Focused on supportive care
- Psychological support
- Make the patient comfortable and transport
- Do not pack dressings in vagina

- Pelvic inflammatory disease
- Ruptured ovarian cyst
- Cystitis
- Mittelschmerz
- Endometriosis
- Ectopic pregnancy

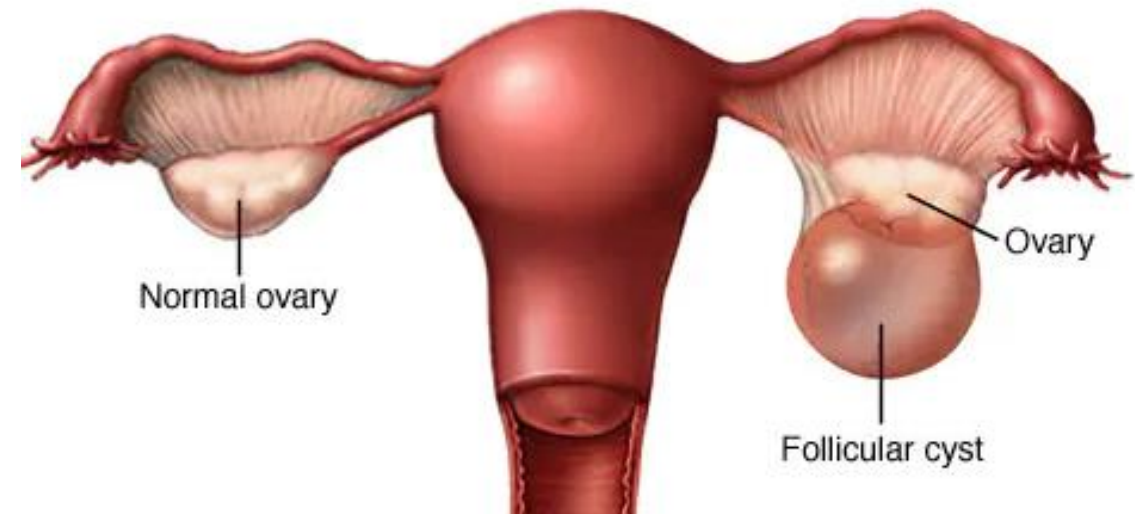


Pelvic Inflammatory Disease

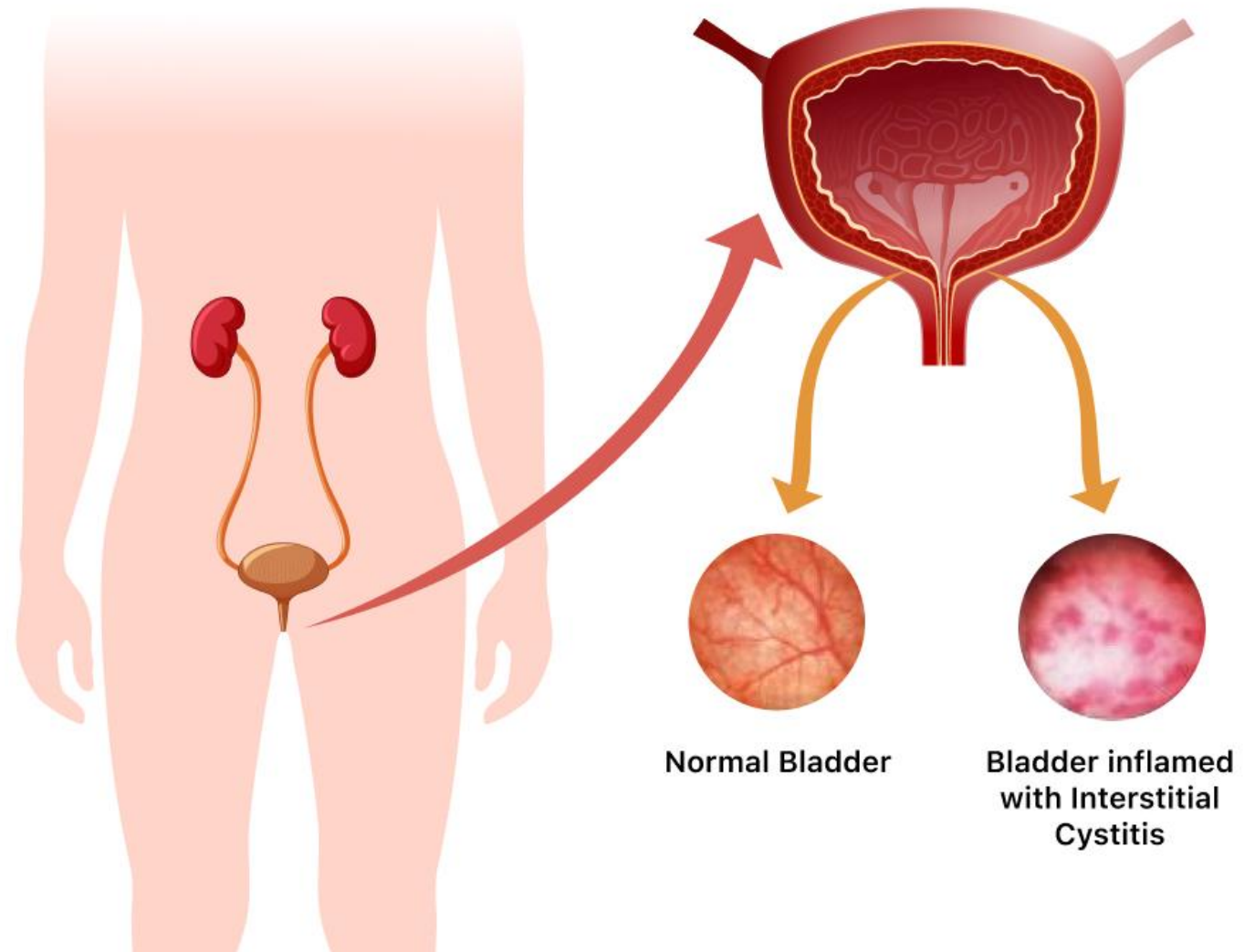
- Infection of the reproductive tract
- Highest rate in sexually active women 15-24
- Most common causes gonorrhea and chlamydia
- May be acute or chronic
- Untreated may lead to sepsis



- Fluid filled pockets on ovary
- Cysts occasionally develop independent of ovulation
- Rupture spills small amount of blood into peritoneum
 - Often during exercise or sexual intercourse
- Abdominal pain and rebound tenderness
- Occasional vaginal bleeding

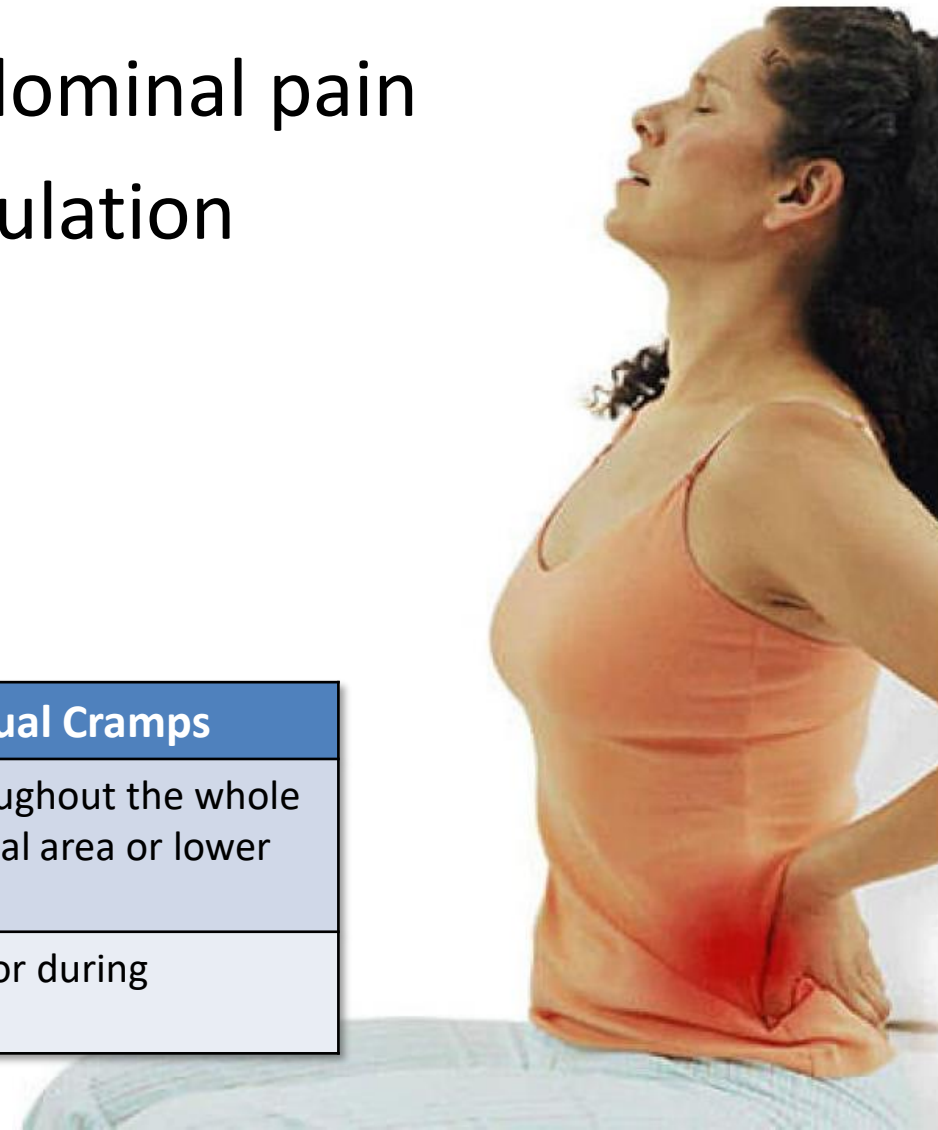


- Urinary bladder infection
- Pain immediately above symphysis pubis
- Occasionally spreads to kidneys
 - Increased frequency and urgency
 - Occasional blood tinged urine



- Ovulation accompanies by mid-cycle abdominal pain
- Follicle rupture or bleeding at time of ovulation
- Lower abdominal pain
 - Usually self-limiting
 - Spotting

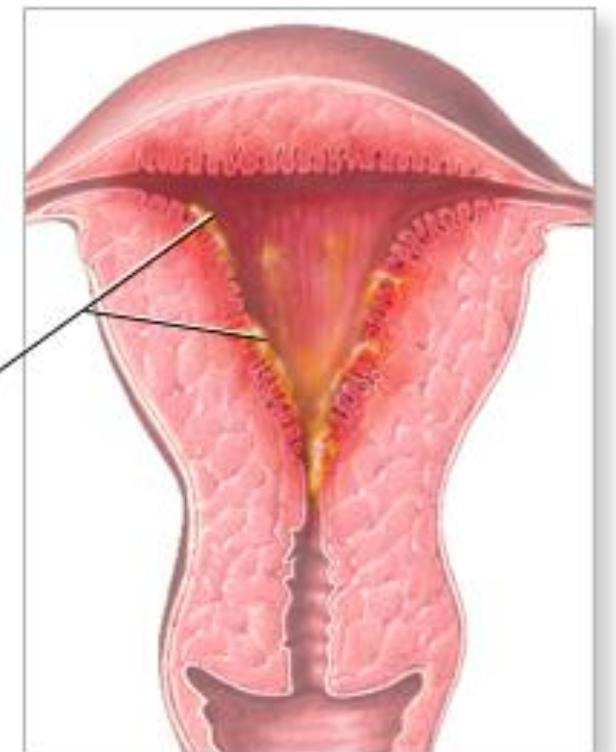
	Mittelschmerz	Menstrual Cramps
Where is the pain felt?	Occurs on one side only of the abdominal area or lower back	Can occur throughout the whole lower abdominal area or lower back
When is the pain felt?	Occurs in the middle of the menstrual cycle (during ovulation)	Occurs before or during menstruation



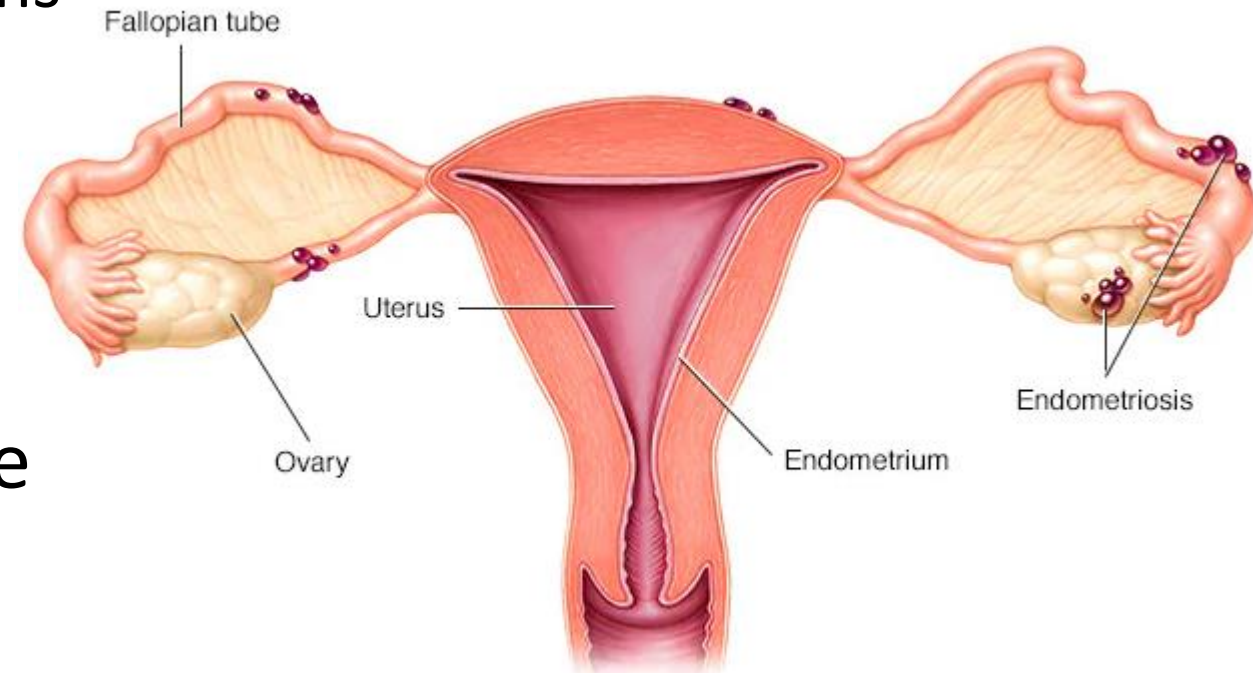
- Inflammation of uterine lining
- Occasional complication of an obstetrical problem
- Lower abdominal pain
- Foul smelling discharge
- Mimics PID

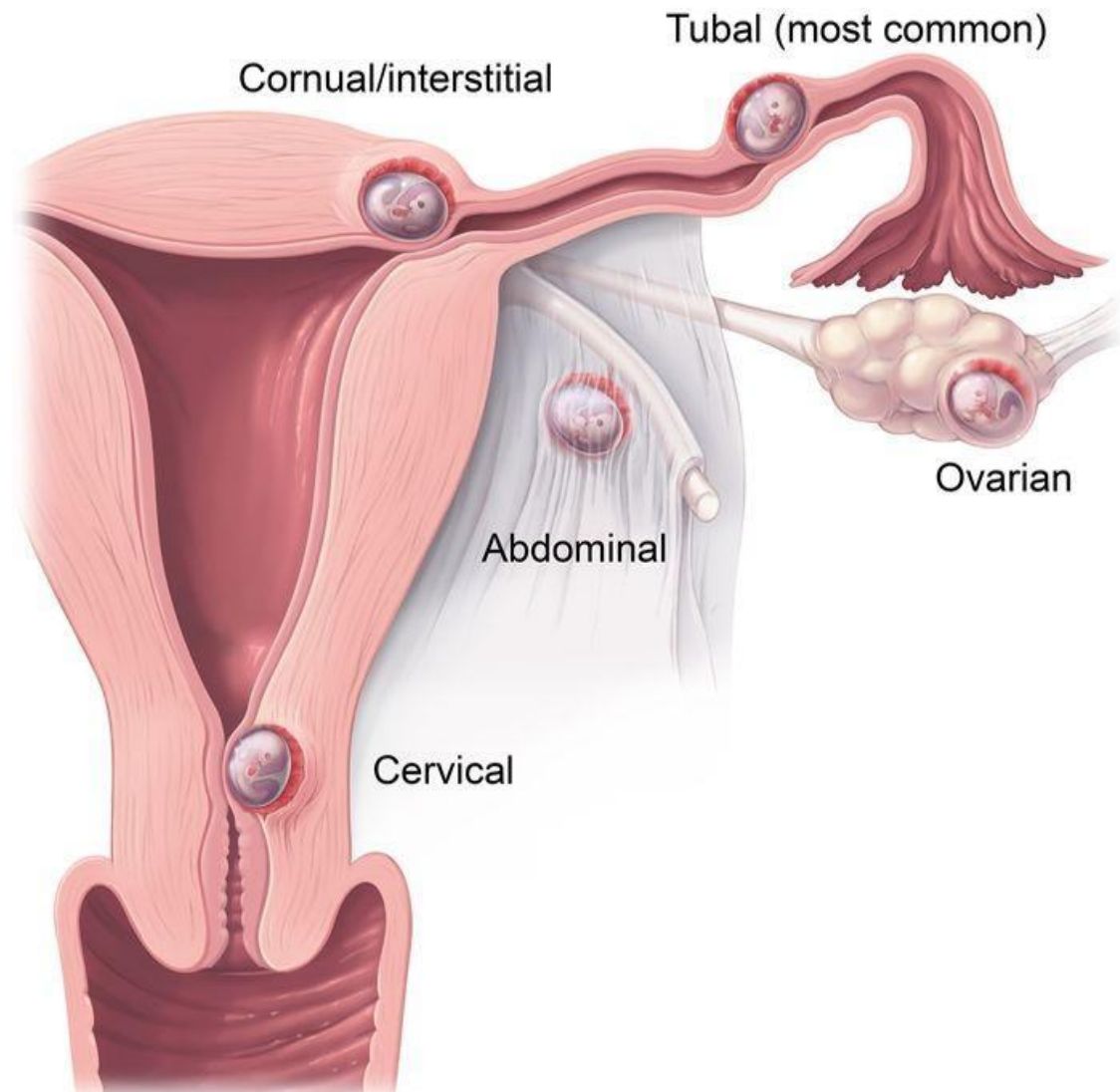


Inflammation and
infection of the
endometrium
(the lining of
the uterus)



- Endometrial tissue found outside the uterus
 - Responds to hormonal influences
 - Bleeds in a cyclic manner
 - Inflammation, scarring, adhesions
- Exact cause unknown
- Cramping pain related to menstruation
- Dyspareunia, abnormal uterine bleeding





- Implantation of a fetus outside the uterus
- Most commonly in the Fallopian tubes
- Tube can rupture
- Triggers massive hemorrhage
- Severe unilateral abdominal pain
- May radiate to shoulder on affected side

- Menorrhagia
 - Excessive menstrual flow
 - Hemorrhage is always a potential life threat
- Spontaneous abortion
 - Most common cause of vaginal bleeding
 - Cramping, abdominal pain, passage of clots

Management

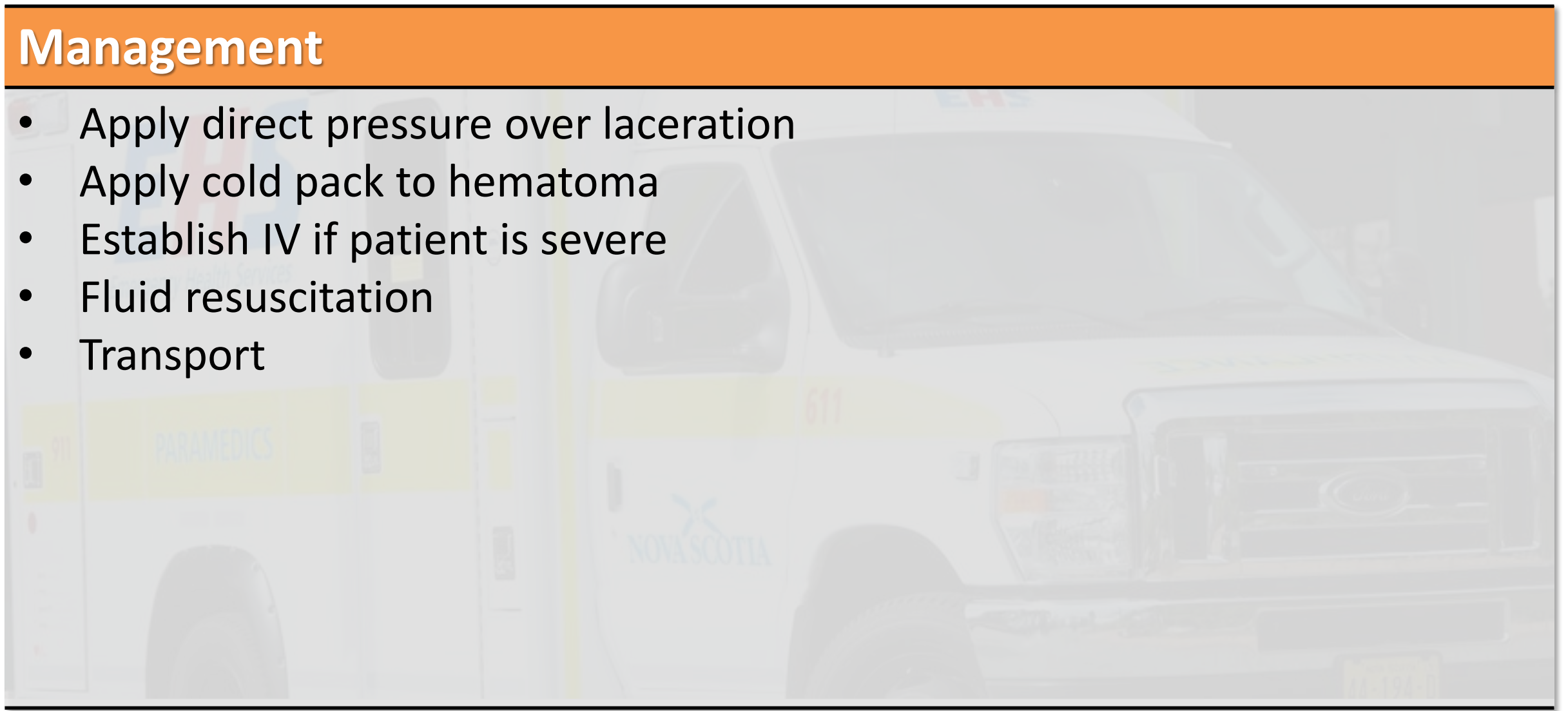
- Do not pack vagina
- Transport
- Oxygen therapy
- IV access
- Fluid resuscitation



- Blunt trauma
- Sexual assault
- Blunt force to lower abdomen
- Foreign bodies inserted in vagina
- Abortion attempts

Management

- Apply direct pressure over laceration
- Apply cold pack to hematoma
- Establish IV if patient is severe
- Fluid resuscitation
- Transport



- Most rapidly growing violent crime
- Only 6% of cases are reported
- There is no typical victim
- Definition varies by province
- Common element is sexual contact without consent

- Objectivity is essential
- Victims should not be questioned about the incident in the field
- Do not ask specific details
- Variety of psychological responses
- Cover patient
- Avoid touching unless necessary

Management

- Protect the scene
- Handle clothing as little as possible
- If removing clothing, bag each item separately
- Do not cut through any tears or holes in clothing
- Place bloody articles in brown paper bags

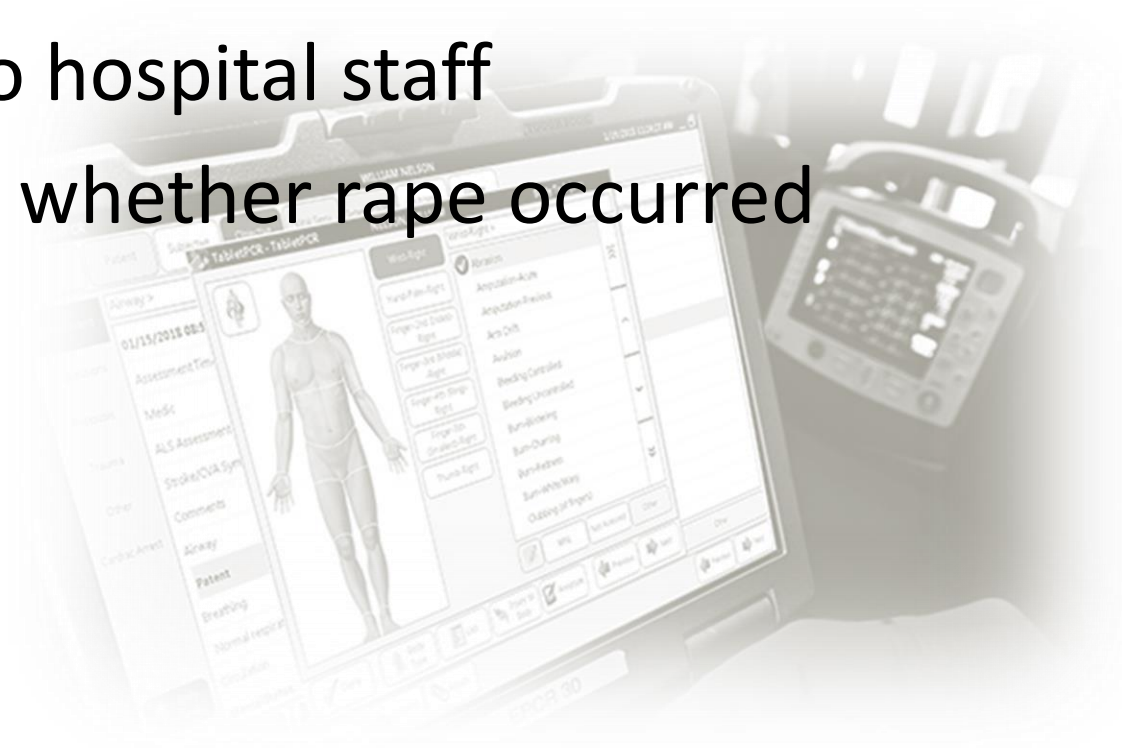


Management

- Do not exam the perineal area
- Do not allow patient to change clothes, bathe, or douche
- Do not allow patient to comb hair, brush teeth, or clean fingernails
- Do not clean wounds, if possible



- State patient remarks accurately
- Objectively state your observations of patient's physical condition, environment or torn clothing
- Document evidence turned over to hospital staff
- Do not include your opinions as to whether rape occurred



- Assessment of the gynecological patient
- Management of the gynecological patient
- Specific gynecological emergencies