

phnaa

Seen at Maternity HDU/Emergency

PATIENCE NUNOO

32years

35WKS + 2D

G3P1 +1SA(1 PREVIOUS CS)

PC: REFRAL O/A PLACENTA ABRUPTON

HPC: Client was well until FEW HOURS PRIOR TOPRESENTATION WHEN SHE NOTICEDSPOTTING, DARK IN COLOR, THAT INCREASED GRADUALLY AFTER.

ODQ: , +LAP, +BPV, -dizziness, -palpitation, -fevers,-headache, -BURRED VISION,-vaginal discharge, -dysuria

PMS Hx: Nil of note

DHx: FOLIC ACID, VIT C, IRON

Obs HistorY

1ST PREGNANCY

UNPLANNED, SPONTANEOUS ABORTION WITHNO COMPLICATIONSAFTER 2ND PREGNANCY

UNPLANNED, BUT WELCOMED, DELIVERED VIACS, NO COMPLICATION

Index Pregnancy

UNPLANNED BUT WELCOMED, Booking LABSDONE

Gynae Hx

Cycle: 5/26, 3pads per day, +dysmenorrhoea,

history of pap smear DONE, NO breast screening

No history of PID or STI

Lifetime partners- 1

Family Hx: unremarkable

Soc Hx: Lives at ACCRA, TRADER, acceptstransfusion, -smoke, -alcohol use,

On Examination

Young WOMAN, STABLE AND WELL LOOKING,afebrile, no conjunctival pallor, no pedal oedema,hydration fair

CVS: . Radial pulse-rgv. +S1. +S2. -M0

RS: RR 20cpm. SPO2 97% ora. Breath sounds-vesicular, no crepitation

ABD: Gravid uterus. TENDERNESS, SFH; 36cm, fhr; 142bpm

CNS: Conscious and alert. Grossly intact. GCS 15/15

Impression

gravid

Plan



