

## **A Standardized Patient (clinical algorithms and management)**

### **Abnormal uterine bleedings**

(according to the clinical protocol № 353 «Abnormal uterine bleedings»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (age at menarche, the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - contraceptive use;
  - serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (pulse, blood pressure)
7. Recommend necessary examinations for the patient (gynecological examination, express pregnancy test, blood type, Rhesus-factor, complete blood count, coagulogram, ultrasound examination, endometrial biopsy, hysteroscopy)
8. Recommend a necessary treatment (hemostatic agents, nonsteroidal anti-inflammatory drugs, the combined oral contraceptive pills for hemostasis), prescribe drugs to the patient, indicate a drug dose and a route of administration

## **A Standardized Patient (clinical algorithms and management)**

### **Abnormal uterine bleeding in adolescents**

(according to the clinical protocol № 582 «Abnormal uterine bleeding in adolescents»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (menarche, the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - serious illnesses;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (pulse, blood pressure)
7. Recommend necessary examinations for the patient (blood type, Rhesus-factor, complete blood count, coagulogram, hormone tests (Luteinizing hormone, Follicle stimulating hormone, prolactin), ultrasound examination, body mass index)
8. Recommend a necessary treatment (a special diet, uterotonics, hemostatic agents, antianemic agents, nonsteroidal anti-inflammatory drugs, combined oral contraceptives), prescribe drugs to the patient, indicate a drug dose and a route of administration

## **A Standardized Patient (clinical algorithms and management)**

### **Acute abdomen in gynecological practice**

(according to the clinical protocol № 676 «Ectopic pregnancy», according to the clinical protocol № 620 «Prenatal care in Ukraine»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:

- characteristics of the menstrual cycle (the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - contraceptive use;
4. Inform the patient about a preliminary diagnosis
  5. Gain verbal consent
  6. Assess the general condition of the patient (pulse, blood pressure, abdominal examination)
  7. Recommend necessary examinations for the patient (gynecological examination, express pregnancy test, complete blood count, ultrasound examination)
  8. Refer the patient to a gynecological hospital (emergency hospitalization)

### **A Standardized Patient (clinical algorithms and management)**

#### **Contraception counseling**

(according to the clinical protocol № 905 «Family planning»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (age at menarche, the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - sexual activity, number of sexual partners;
  - serious illnesses;
  - bad habits;
4. Gain verbal consent
5. Recommend necessary examinations for the patient (palpation and ultrasound examination of the breasts, speculum examination, bimanual examination, bacterioscopic examination, cytomorphological examination, anthropometric measurements (body mass index, waist circumference), human papillomavirus test, ultrasound examination of the pelvic organs, complete blood count, urinalysis, liver function tests, coagulogram)
6. Recommend contraceptive methods

### **A Standardized Patient (clinical algorithms and management)**

#### **Contraception counseling (postpartum contraception)**

(according to the clinical protocol № 905 «Family planning»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - date of the vaginal delivery or C-section;
  - breastfeeding;
  - menstrual function after childbirth;
  - serious illnesses;
  - bad habits;
4. Gain verbal consent
5. Recommend necessary examinations for the patient (complete blood count, gynecological examination, bacterioscopic examination, cytomorphological examination, ultrasound examination of the pelvic organs)
6. Recommend contraceptive methods; if the lactational amenorrhea method (LAM) will be recommended, the doctor should give information about necessary conditions for using LAM

## **A Standardized Patient (clinical algorithms and management)**

### **Infertility counseling**

(according to the clinical protocol № 582 «Female infertility»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - past obstetric history;
  - sexual activity;
  - serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Recommend necessary examinations for the patient (RW, HIV, tests of functional diagnostics, bacteriological examination of urogenital flora, cytomorphological examination, cariotyping, ultrasound examination of the pelvic organs, hysterosalpingography, postcoital test, hormone tests (luteinizing hormone, follicle stimulating hormone, prolactin, estradiol, testosterone, progesterone, cortisol T4, TTG), spermogram, hysteroscopy, laparoscopy))

## **A Standardized Patient (clinical algorithms and management)**

### **Septic diseases**

(according to the clinical protocol № 620 «Prenatal care in Ukraine»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (the length of the menstrual cycle, menstrual regularity, the date of the last menstrual period);
  - sexual activity, number of sexual partners;
  - contraceptive use;
  - past obstetric history;
  - serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (pulse, blood pressure, body temperature, abdominal examination)
7. Recommend necessary examinations for the patient (complete blood count, urine test, gynecological examination, bacterioscopic examination, bacteriological examination, antibiotic sensitivity, ultrasound examination of the pelvic organs)
8. Refer the patient to a gynecological hospital (emergency hospitalization), antibiotic therapy nonsteroidal anti-inflammatory drugs, infusion therapy, uterotonics, instrumental revision of the uterine cavity

## **A Standardized Patient (clinical algorithms and management)**

### **Hematologic diseases in pregnancy**

(according to the clinical protocol № 782 «Anemia in pregnant women»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - past obstetric history;
  - current gestational age, complications of the pregnancy;
  - hematologic diseases in the past, serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (pulse, blood pressure)
7. Recommend necessary examinations for the patient (complete blood test, urine test, serum iron test, ferritin level blood test, transferrin level blood test)
8. Recommend a necessary treatment (special diet, iron supplements), prescribe drugs to the patient, indicate a drug dose and a route of administration

### **A Standardized Patient (clinical algorithms and management)**

#### **Renal disorders in pregnancy**

(according to the clinical protocol № 620 «Prenatal care in Ukraine»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - past obstetric history;
  - current gestational age, complications of the pregnancy;
  - kidney disease in the past, serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (estimate Pasternatsky symptom)
7. Recommend necessary examinations for the patient (complete blood count, urine test, urine culture, antibiotic sensitivity, Nechiporenko's test, ultrasound of the kidneys)
8. Recommend a necessary treatment for the patient (diet, antibiotic therapy (semisynthetic penicillins, cephalosporins), spasmolytics, uroantiseptics, phytotherapy)), prescribe drugs to the patient, indicate a drug dose and a route of administration

### **A Standardized Patient (clinical algorithms and management)**

#### **Pulmonary problems in pregnancy**

(according to the clinical protocol № 620 «Prenatal care in Ukraine»)

1. Greet the patient warmly and politely; confirm patient`s details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - past obstetric history;
  - current gestational age, complications of the pregnancy;
  - lung diseases in the past, serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Assess the general condition of the patient (pulse, blood pressure, oxygen saturation, lungs auscultation)

7. Recommend necessary examinations for the patient (complete blood count, sputum microbiological analysis, chest X-ray)
8. Recommend a necessary treatment (antibiotic therapy, infusion therapy, bronchodilators, mucolytics), prescribe drugs to the patient, indicate a drug dose and a route of administration

**A Standardized Patient (clinical algorithms and management)**  
**Counseling for pregnant women**

(according to the clinical protocol № 417 «Prenatal care»)

1. Greet the patient warmly and politely; confirm patient's details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - characteristics of the menstrual cycle (age at menarche, the length of the menstrual cycle, the length of the menstrual bleeding, the usual amount of blood loss per period, menstrual regularity, menstrual cramps, the date of the last menstrual period);
  - past obstetric history;
  - serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
6. Gain verbal consent
7. Recommend necessary examinations for the patient (speculum examination, bimanual examination, blood type, Rhesus-factor, RW, HIV, HBsAg, complete blood count, urinalysis, bacteriological examination of urine, cytomorphological examination, bacterioscopic examination, ultrasound examination of the pelvic organs, biochemical screening tests (I trimester - PAPP-A,  $\beta$ -hCG; II trimester – alpha-fetoprotein,  $\beta$ -hCG, estriol), genetic specialist consultation, consultation with other specialists as needed )

**A Standardized Patient (clinical algorithms and management)**  
**Preterm labour**

(according to the clinical protocol № 624 «Preterm labour»)

1. Greet the patient warmly and politely; confirm patient's details (name, date of birth);
2. Find out the patient's complaints
3. Gather important information:
  - past obstetric history;
  - current gestational age, complications of the pregnancy;
  - serious illnesses;
  - bad habits;
4. Inform the patient about a preliminary diagnosis
5. Gain verbal consent
6. Recommend necessary examinations for the patient (external obstetrical examination, internal obstetrical examination, measurement of abdominal circumference and fundal height, pelvimetry, ultrasound examination, cervical length measurement, complete blood count, urine test, bacterioscopic examination, CTG)
7. Recommend a necessary treatment (tocolytic therapy, corticosteroids), prescribe drugs to the patient, indicate a drug dose and a route of administration