



## **Prenatal Care Workshop – Patient Case #3**

**Patient History:** 37-year-old cis-woman G 3, P 0, 0-0-1-0 presents with an intrauterine pregnancy at 12 weeks. Three days ago she noted pink staining after intercourse and called the office. She was advised that this is normal and to avoid intercourse. This morning she noted darker staining and it has continued all morning with enough bleeding to put on a panty liner but not as heavy as a period. She denies recent intercourse, heavy lifting or heavy activity. No abdominal pain, cramps, dysuria, bloody tissue, vaginal discharge, nausea, diarrhea or fever.

**PMH:** S/P TOP (termination of pregnancy) at 8 weeks 3 years ago; S/P carpal tunnel surgery age 33

**FH:** Both parents died at age 45 in car accident; sister 38 alive and well.

**SH:** married, lives with husband, English professor at a local college, non-smoker, no alcohol or recreational drugs

**Q1. What is your differential diagnosis?**

**Q2. Define the following diagnoses listed below and list the physical or lab findings which would support the diagnosis by filling in the table below.** Note on terminology: This case uses the word miscarriage instead of the medical term abortion to prevent confusion for patients and learners. Medical texts may refer to miscarriage as abortion e.g., inevitable abortion instead of inevitable miscarriage.

Diagnosis	Definition	Physical findings	Lab or imaging findings
Missed miscarriage			
Incomplete miscarriage			
Threatened miscarriage			
Inevitable miscarriage			
Septic miscarriage			
Complete Miscarriage			

**Physical Examination and Data:**

VS: BP 126/78, P88, R11, T 98.6 F

Abdomen: soft non-tender, normoactive BS, no palpable masses

Pelvic: Small amount of blood at closed cervical os, uterus 12 week size, fetal heart rate at 148 bpm (normal 120 – 160 bpm)

**Q3. What is your diagnosis now and why?**

**Q4. What would you tell this patient? Include suggestions for care, activity and follow-up.**

**Next Day Visit**

Patient returns the next day because of increased bleeding. She denies fever, abdominal pain, dysuria, or passing tissue. On exam, the cervical os appears is open with tissue at the os. Ultrasound shows pregnancy and no fetal heartbeat.

**Q5. What is your diagnosis now and why?**

**Q6. What would you tell this patient? Include suggestions for care, activity and follow-up.**