

Self assessment questions

Questions

SBA 1

Remifentanyl PCA is indicated for labour analgesia in which ONE of the following circumstances:

- A) Needle phobic, term parturient with chronic back pain
- B) Morbidly obese primigravida, 38/40 weeks' gestation
- C) Rapidly progressing labour in an anxious, term parturient
- D) Term parturient with a platelet count $60 \times 10^9/L$ requesting an epidural
- E) Prophylactic LMWH was administered 14 h ago

SBA 2

Which ONE of the following statements is true with regard to the morbidly obese parturient:

- A) The risk of failed intubation is 1 in 15
- B) Functional residual capacity decreases by 20%
- C) High flow nasal oxygen and videolaryngoscopy are useful at induction of anaesthesia
- D) Desaturation at anaesthesia occurs as rapidly in the non-obese parturient
- E) Epidural volumes are larger than in the non-obese

SBA 3

Which ONE of the following physiological parameters is NOT a correct target during major obstetric haemorrhage?

- a) Haemoglobin $>80 \text{ g/L}$
- b) Haematocrit >0.3
- c) platelets $>100 \times 10^9/L$
- d) fibrinogen $>1 \text{ g/L}$
- e) temperature $>36^\circ\text{C}$

EMQ 4

Which ONE of the following vulval skin conditions is best described by each of the descriptions below?

- a) Aphthous ulceration
- b) Squamous cell carcinoma
- c) Bullous pemphigoid
- d) Vulval melanosis
- e) Molluscum contagiosum
- f) Vulval intraepithelial neoplasia
- g) Lichen simplex
- h) Erosive lichen planus
 1. Full thickness loss of the epidermis (top layer of skin) +/- dermis
 2. Flat area of colour change (macule)
 3. An accentuation of skin markings commonly associated with thickening of epidermis usually caused by scratching or rubbing

SBA 5

Which ONE of the following statements is true regarding erosive lichen planus?

- a) There is usually a loss of vulval anatomy
- b) Wickham's striae are always associated
- c) Violaceous plaques are an uncommon complication
- d) It is more likely to respond to treatment than lichen sclerosus
- e) Patients should be referred early to a vulval service

SBA 6

Which ONE of the following statements regarding induction of labour in women over 35 is true?

- a) Offering IOL at 39+ weeks would result in more expense to the health service
- b) Offering IOL at 39+ weeks would result in more caesarean sections
- c) Offering IOL at 39+ weeks would result in equally good neonatal outcomes
- d) Offering IOL at 39+ weeks would result in less good experience of childbirth
- e) Offering IOL at 39+ weeks would result in worse maternal outcomes

SBA 7

Which of the following statements is NOT true regarding stillbirth in mothers over the age of 35?

- a) Stillbirth is more likely in primiparous women >35 years
- b) Stillbirth is more likely in multiparous women >35 years
- c) Stillbirth due to congenital anomaly is more likely in women >35 years
- d) Stillbirth due to fetal growth restriction is more likely in women >35 years
- e) Stillbirth that is unexplained is more likely in women >35 years

SBA 8

A 41-year-old primiparous woman at 36 weeks is considering her options for delivery. Which of the following statements is NOT true regarding her delivery risks?

- a) Her risk of laboring spontaneously prior to 37 weeks is 80% higher than a woman <35 years
- b) If she labours spontaneously, she is like to have a longer second stage than a woman <35 years
- c) If she is induced she has a higher risk of caesarean section than a woman <35 years
- d) If she labours spontaneously she has a higher risk of caesarean section than a woman <35 years
- e) She has a higher risk of operative vaginal delivery than a woman aged <35 years

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SBA 9

A 41-year-old nulliparous woman with a history of inflammatory bowel disease attends your clinic for pre-pregnancy counselling. Which ONE of the following is correct to include in your counselling?

- She has an elevated risk of placental abruption
- She has an elevated risk of breech at term
- She has no elevated risk of gestational diabetes
- She has no elevated risk of pre-eclampsia
- She has an elevated risk of cord prolapse

SBA 10

Which ONE of the following does NOT arise from the pubo-visceral muscle?

- Puborectalis
- Iliococcygeal muscle
- Puboanal muscle
- Puboperineal muscle
- Pubovaginal muscle

SBA 11

Using the POPQ method of assessing vaginal prolapse, which ONE of the following should be measured with the patient at rest?

- Genital hiatus
- Perineal body
- Total vaginal length
- Point C
- Point D

Answers**SBA 1**

D

The current indications for remifentanyl PCA are situations in which regional analgesia is contraindicated (coagulopathy, thrombocytopenia, certain neurological conditions) or has failed. Although precipitous labour may mean that there is not time to establish a working epidural, it is not a contraindication. Needle phobia and back pain are not contraindications to regional analgesia. Morbid obesity is an indication to insert an early labour epidural in order to avoid the risks associated with general anaesthesia in these patients.

SBA 2

C

The risk of failed intubation in the morbidly obese parturient is 1 in 3. Desaturation at anaesthesia occurs more rapidly in the morbidly obese, as their FRC decreases by >25%. This is exaggerated in the supine position. The significantly reduced FRC means that these patients have much lower oxygen reserves even following adequate pre-

oxygenation. High-flow nasal oxygen has been shown to prolong the time taken to desaturate at apnoea prior to intubation in the general population, and the routine use of high-flow oxygen for obstetric general anaesthesia has been adopted in some institutions.

SBA 3

D

The target for fibrinogen levels in major haemorrhage should be >2 g/L

EMQ 4

1. A

Aphthous ulceration is full thickness epidermal loss, whereas an erosion removes only part of the epidermis

2. D

3. G

SBA 5

E

For classical type refer to vulval service for treatment – resistant cases and when associated with VIN. Erosive lichen planus is difficult to treat so refer early to a vulval service.

SBA 6

C

The 35/39 trial shows that none of the other statements are true for women randomized to IOL between 39 and 40 weeks.

SBA 7

D

Stillbirth due to fetal growth restriction is more common amongst women <35 years.

SBA 8

E

The risk of operative vaginal delivery in a woman <35 years is 23% compared to 43% in a woman >40 years.

SBA 9

A

The risk of placental abruption is higher in women aged >40.

SBA 10

B

The iliococcygeal muscle is also part of levator ani, but separate from the pubovisceral muscle.

SBA 11

C

The other measurements should all be estimated at maximum Valsalva.