**Teaching to the Texts**

**Te Linde’s Chapter 12: Shock in the Gynecologic Patient**

CREOG Educational Objectives

1. Describe the evaluation, diagnosis and management of the following conditions:
	1. Anaphylaxis and severe allergic reactions
	2. Systemic inflammatory response syndrome/acute respiratory distress syn- drome
	3. *Shock (hypovolemic, cardiogenic, septic, neurogenic)*
	4. Necrotizing fasciitis

Practice Questions

1. A 24-year-old G4P2012 Jehovah's Witness is undergoing emergent cesarean hysterectomy secondary to hemorrhage. Prior to the procedure she clearly refused any foreign blood products. Despite receiving 2 liters of lactated ringers, her blood pressure is 60/40 mmHg and her pulse has increased to 155 bpm. The cell saver is unavailable and she is losing consciousness. Which of the following is the MOST appropriate infusion for this patient to receive?
	1. colloid
	2. crystalloid
	3. Fresh frozen plasma
	4. Packed red blood cells
	5. Platelets

From: TrueLearn Question Bank

2. A patient at 30 weeks' gestation presents to obstetrics triage with symptoms of septic shock. She is quickly admitted to the intensive care unit, and blood cultures are collected prior to initiating empiric antibiotic therapy. What is the MOST common organism isolated from blood cultures in patients with septic shock?

* 1. Candida albicans
	2. Enterococcus
	3. MRSA
	4. Pseudomonas
	5. Streptococcus

From: TrueLearn Question Bank

3. A 60-year-old woman with a history of poorly controlled diabetes mellitus, hypertension, and advanced-stage ovarian cancer comes to the ED 7 days after an exploratory laparotomy, TAH, BSO, and optimal cytoreduction for ovarian cancer. She has been experiencing nausea, vaginal discharge, and worsening lethargy. Her pulse is 130 bpm, blood pressure is 90/40 mmHg, and temperature is 38.8 C. Her urine output is 15 mL/hr. Her physical exam is notable for hypoactive bowel sounds, abdominal pain, and purulent drainage from the vagina. Her white blood cell count is 17,500. The best next step in her management is

1. furosemide
2. Broad-spectrum antibiotics
3. IV fluids and broad-spectrum antibiotics
4. Computed tomography scan
5. vasopressors

From: Gynecologic Oncology and Critical Care Prolog, 7th Edition, Question 87

High-Yield Associated Resources

1. Haseer Koya H, Paul M. Shock. [Updated 2020 Jul 26]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2020 Jan-. Available from: https://www.ncbi.nlm.nih.gov/books/NBK531492/
2. UptoDate: Definition, classification, etiology, and pathophysiology of shock in adults

Answers:

1-a, 2-e, 3-c