Teaching to the Texts

William's Obstetrics Chapter 9: Prenatal care

CREOG Educational Objectives:

- 1. Identify risk factors for pregnancy complications
- 2. Understand how to establish accurate dating and gestational age
- 3. Be able to counsel pregnant patients on the following topics:
 - a. lifestyle modifications including expected weight gain based on body mass index, diet, exercise, sexual health, and healthy lifestyle.
 - b. the effects of pregnancy on other medical conditions
 - c. warning signs of adverse pregnancy events.
- 4. Be able to counsel pregnancy patients about previous cesarean delivery and implications for current delivery mode.
- 5. Describe socioeconomic, family, and environmental effects on access to care and pregnancy outcomes.
- 6. Understand gestational age appropriate testing and treatment of routine prenatal care.

Practice Questions:

A 38-year-old, G4P3, at 10 weeks gestation presents for her first prenatal visit. Her BMI is 30. She is healthy overall and would like to be able to start exercising during this pregnancy. You tell her that she can exercise 20-30 minutes daily during pregnancy. The most appropriate way for her to monitor her level of exercise intensity is:

- A. Blood pressure
- B. Calorie expenditure
- C. Heart rate
- D. Perceived exertion rate
- E. Respiratory rate

From Obstetrics Prolog 8th edition, Question 62

- 2. A 27 year-old patient, G1P0, presents to your office for a prenatal appointment at 13 weeks gestation. In reviewing information about nutrition and food safety, she says she has trouble finding food that she enjoys eating during pregnancy. You request a 48-hour review of her diet. Among the foods she has eaten, the most worrisome for causing a serious conditions in her pregnancy is:
 - A. Banana strawberry smoothies
 - B. Canned light tuna
 - C. Grilled bologna sandwiches

Wednesday	Breakfast	Banana strawberry smoothie Toast, whole wheat bread (1 slice)
	Lunch	Grilled bologna sandwich Potato chips (1 small bag) Water
	Snack	Protein bar Water
	Dinner	Shrimp tempura roll (2) House salad Chocolate chip cookie (2) loed tea
Thursday	Breakfast	Oatmeal with cranberries Coffee (12-oz cup)
	Lunch	Chicken quesadilla Rice and beans Queso fresco nachos Water
	Snack	Canned light tuna (6 oz) Crackers Water
	Dinner	Flank steak Mashed potatoes Green beans Fruit salad Iced tea Slice of apple pie with vanilla ice cream

- D. Queso fresco nachos
- E. Shrimp tempura rolls

From Obstetrics Prolog 8th ed, Question 22

- 3. A 25 year old woman, gravida 2, visits your office at 14 weeks gestation for advice about nutrition during her pregnancy. You advise her that the U.S. Food and Drug Administration (FDA) has studied mercury levels in king mackerel, salmon, swordfish, tilefish, and tuna. You tell her that the FDA found that the fish likely to have the lowest mercury level is
 - A. king mackerel
 - B. Salmon
 - C. Swordfish
 - D. Tilefish
 - E. Tuna

From Obstetrics Prolog 7th ed, Question 107

- 4. A 25-year old woman, G1P0, at 17 weeks gestation, who has HIV presents for prenatal care. She is currently being treated with antiviral therapy. Her viral load is undetectable and CD4 count > 200. She is rubella nonimmune. Although she received the hepatitis vaccination series many years ago, she has not received any vaccinations since her HIV diagnosis. She had confirmed chickenpox as a child. During her initial prenatal visit, you explain that the influenza and Tdap vaccines are recommended as part of routine prenatal care. The other vaccine that you recommend for this patient during the antenatal period is:
 - A. Hepatitis B
 - B. Human papillomavirus
 - C. Measles-mumps-rubella
 - D. Pneumococcal
 - E. Herpes zoster

From Obstetrics prolog 8th ed, Question 38

- 5. A 38 year old college professor has a 6 week twin gestation after embryo transfer. Her medical history includes asthma and depression. On routine prenatal screening, she discloses ongoing physical abuse by her husband. The factor most strongly associated with intimate partner violence is the woman's
 - A. Asthma
 - B. Infertility
 - C. Depression
 - D. Socioeconomic status

From Obstetrics Prolog 7th ed, Question 115

6. A 26 year old woman comes to your office for the first prenatal visit at 10 weeks of gestation, and you review her vaccination history with her. She reports that she does not have any risk factors for infections for which she could be vaccination history with her. She reports that she does not have any risk factors for

infections for which she could be vaccinated. The area in which she lives has not reported any increase of particular pathogens. For each vaccine below (1-5), identify the appropriate timing for its administration (A-D) in this pregnant woman.

- A. Postpartum
- B. Any time during pregnancy
- C. First trimester only
- D. After 20 weeks of gestation
- 1. Influenza vaccine
- 2. Diphtheria and reduced tetanus toxoids and acellular pertussis vaccine (Tdap)
- 3. Varicella vaccine
- 4. Measles, mumps, rubella vaccine
- 5. Hepatitis A vaccine

From Obstetrics Prolog 7th ed, Question 139-143

High-Yield Resources:

- 1. Committee Opinion Number 804: Physical activity and exercise during pregnancy and the postpartum period
- 2. Committee Opinion Number 746: Air travel during pregnancy
- 3. Committee Opinion Number 732: Influenza vaccination during pregnancy
- 4. Committee Opinion number 733: Employment considerations during pregnancy and the postpartum period
- 5. Committee Opinion Number 718: Update on immunization and pregnancy tetanus, diphtheria, and pertussis vaccination
- 6. Committee Opinion Number 700: Methods for estimating due date
- 7. Committee Opinion Number 548: Weight gain during pregnancy
- 8. Committee Opinion Number 462: Moderate caffeine consumption during pregnancy