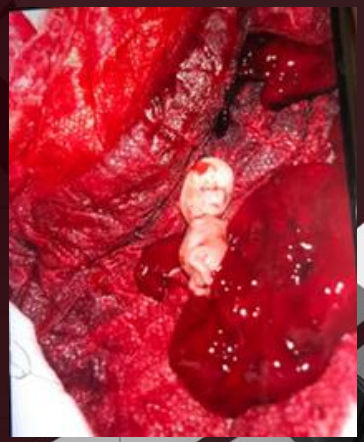
Nursing Practicum for women with bleeding during pregnancy



Asst.Prof. Duangporn Pasuwan

Objective

- Differentiating bleeding patterns in pregnant women & give intervention
- Provide guidance and support to pregnant women experiencing bleeding
- Preparing a pregnant woman for Dilatation&curettage or MVA(Manual Vacuum Aspiration)

Abortion (Miscarriage)

- **Definition:**

Termination of pregnancy before fetal viability (usually before 20 weeks of gestation).

Types of Abortion

1. Threatened Abortion

- Vaginal bleeding in early pregnancy
- Cervix closed
- Fetus still alive
- Pregnancy may continue

2. Inevitable Abortion

- Vaginal bleeding with abdominal pain
- Cervix dilated
- Pregnancy cannot be maintained

Types of Abortion

3. Incomplete Abortion

- Partial expulsion of products of conception
- Vaginal bleeding continues
- Cervix open

4. Complete Abortion

- Complete expulsion of all products of conception
- Bleeding decreases
- Cervix closed

Types of Abortion

5. Missed Abortion

- Fetal death without expulsion
- No bleeding or mild spotting
- Cervix closed

6. Septic Abortion

- Abortion complicated by infection
- Fever, foul-smelling vaginal discharge
- Risk of sepsis

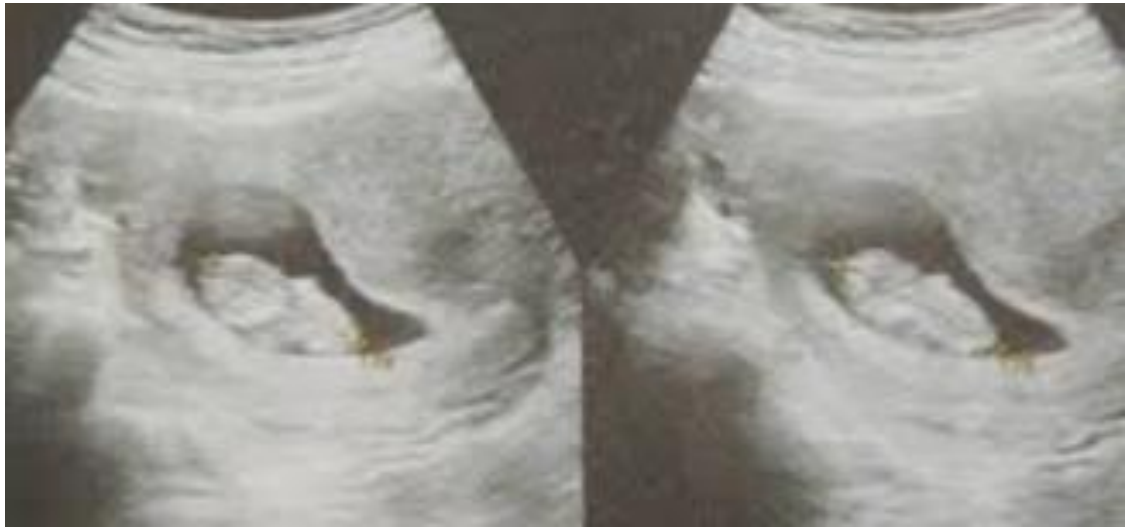
7. Recurrent (Habitual) Abortion

- Two or more consecutive pregnancy losses
- May be related to genetic, uterine, or hormonal causes

Type of Abortion	Abdominal Pain	Vaginal Bleeding	Cervical Os	Others
Threatened abortion	Mild or none	Slight to moderate	Closed	Fetus alive, pregnancy may continue
Inevitable abortion	Moderate to severe	Moderate to heavy	Open	Pregnancy cannot be prevented
Incomplete abortion	Moderate to severe	Heavy, persistent	Open	Retained products of conception
Complete abortion	Mild or relieved	Minimal or stopped	Closed	All products expelled

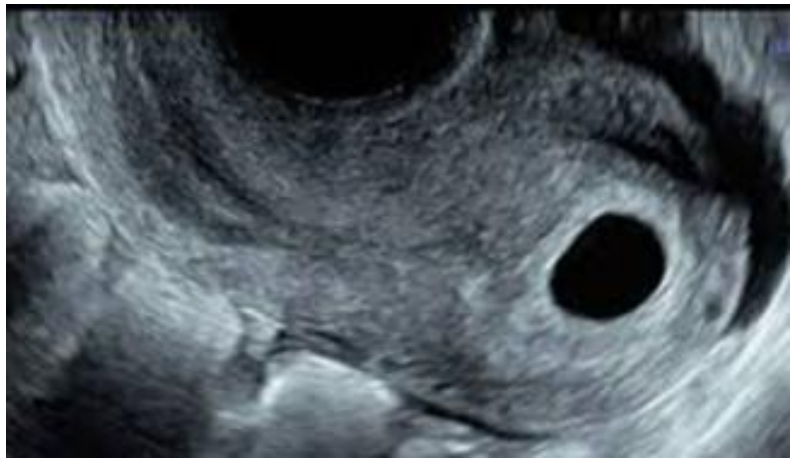
Type of Abortion	Abdominal Pain	Vaginal Bleeding	Cervical Os	Others
Missed abortion	None or mild	None or spotting	Closed	Fetal death without expulsion
Septic abortion	Severe	Variable, often foul-smelling	Open or closed	Fever, uterine infection, sepsis risk
Recurrent abortion	Variable	Variable	Variable	≥2 consecutive pregnancy losses

Threatened abortion : try Absolute bed rest

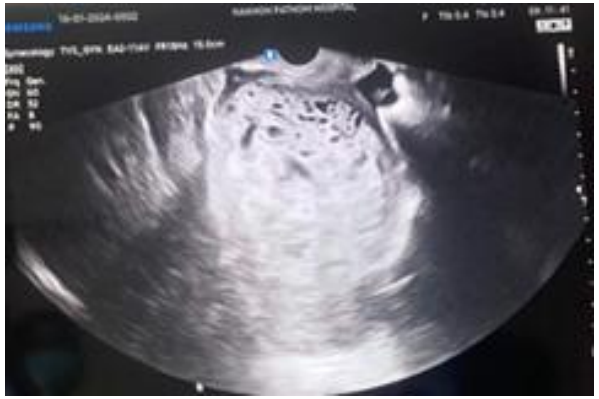


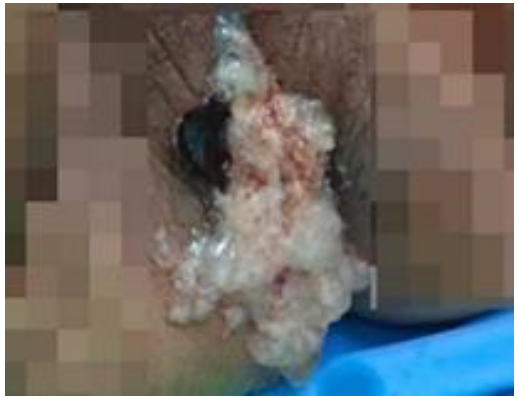

OH
My
GOD

Inevitable abortion : blighted ovum



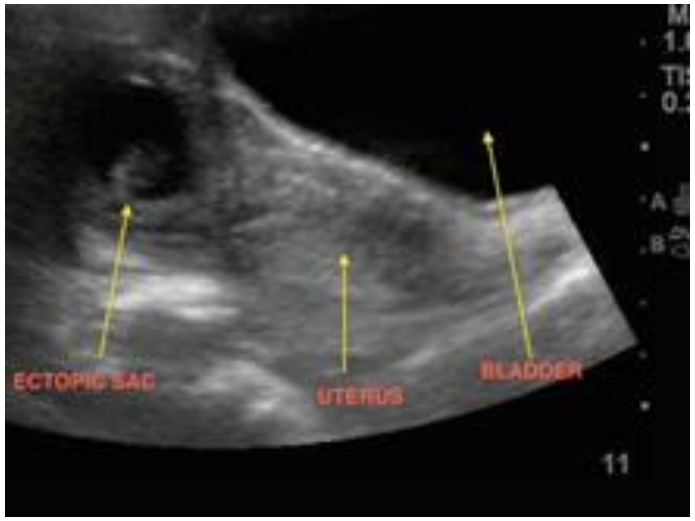
(Molar pregnancy) Hydatidiform mole:

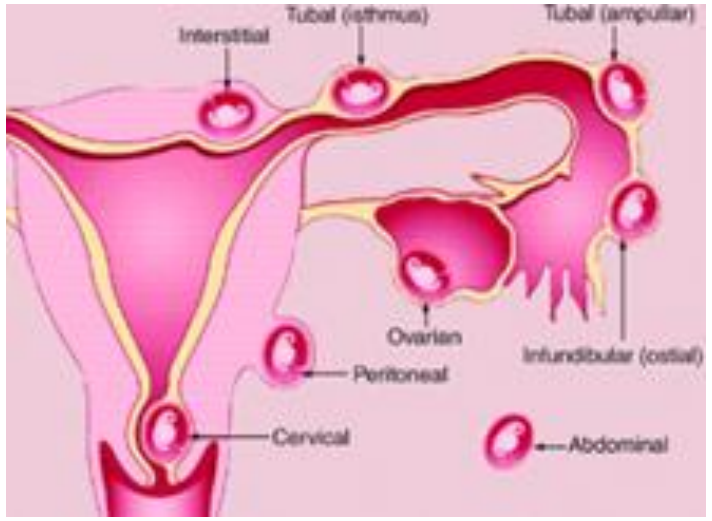


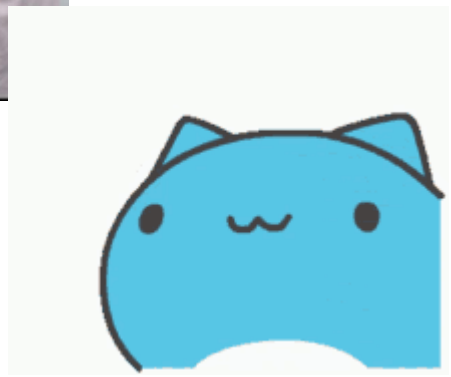


- May cause cancer. High β-hCG levels require contraception for at least one year.
- β-hCG levels must be monitored within 48 hours of termination and
- tested weekly until at least three times are normal. Then,
- tests should be conducted monthly for six months, and then every three months for one year.

Ectopic pregnancy & intervention







This is an emergency condition that can cause rupture of the fallopian tube and severe intra-abdominal bleeding, leading to shock and death.

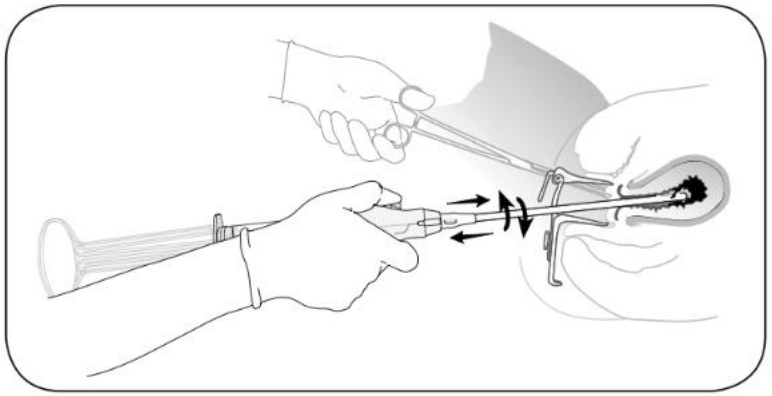
treatment: Pregnant women must be prepared for surgery.

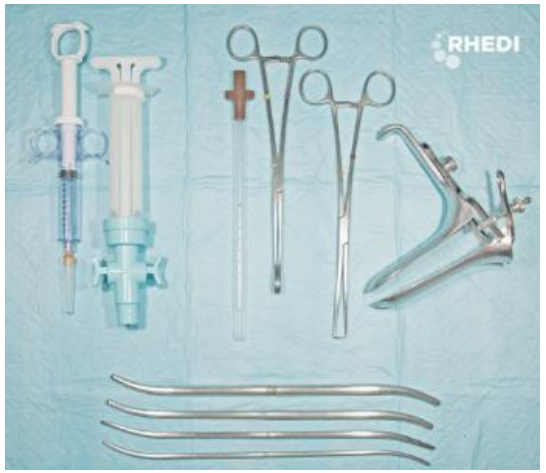
Depending on the location of embryo implantation,

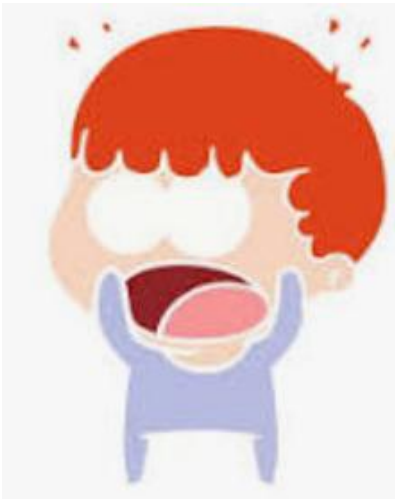
the area where the embryo is implanted must be removed.

Most often, this is done by surgically removing the fallopian tube (Left or Right Salpingectomy).

Intervention for Incomplete abortion & Other

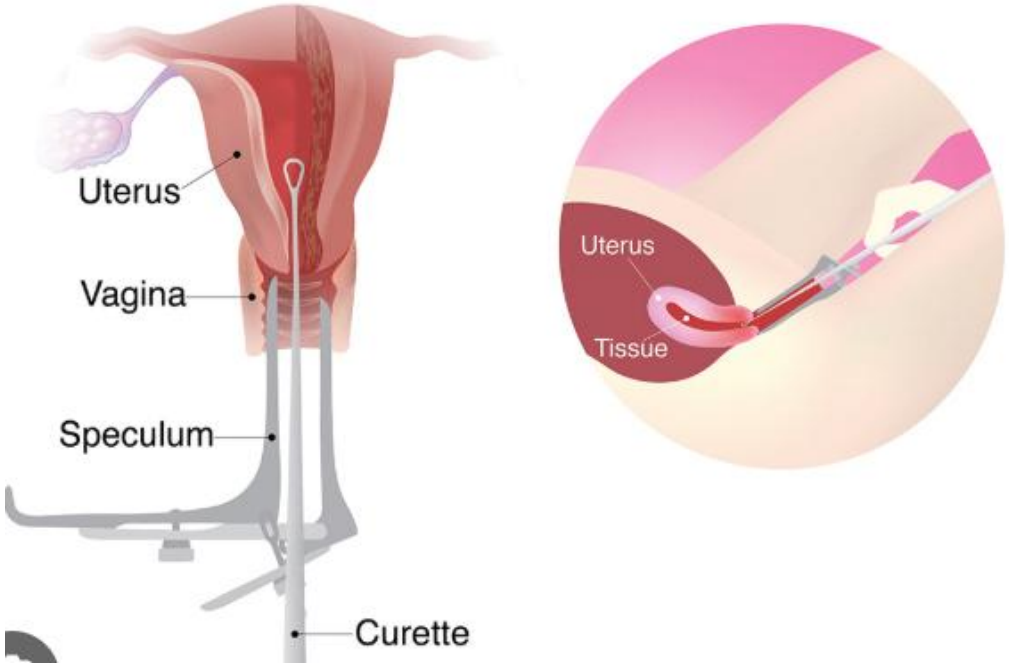


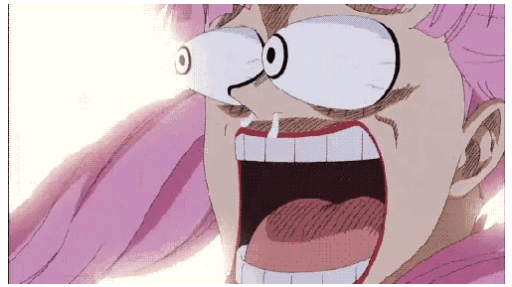




https://w1.med.cmu.ac.th/obgyn/lecturestopics/topic-review/3526/
https://rhedi.org/mva-protocol/

Procedure dilatation-and-curettage (D&C)

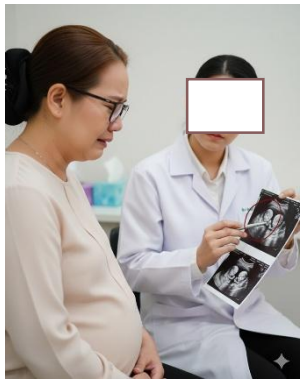




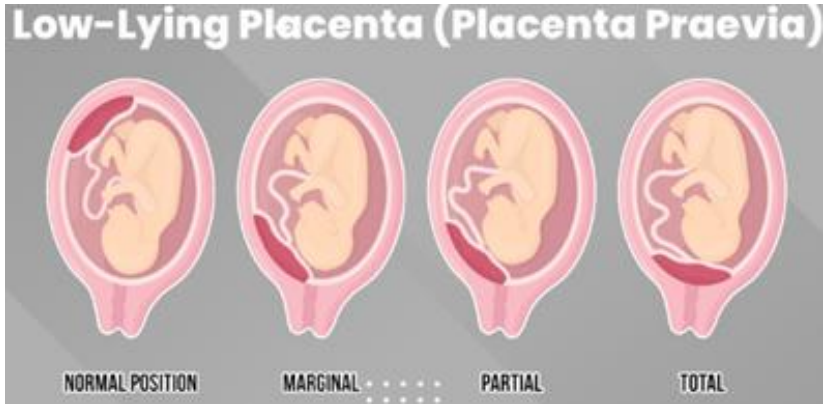
https://www.healthdirect.gov.au/dilatation-and-curettage

Nursing diagnoses in case of miscarriage.

- Risks include: complications from bleeding during pregnancy;
- Discomfort from uterine pain;
- Risk of miscarriage/threatened miscarriage;
- Lack of knowledge about contraception after a miscarriage; and
- Grief due to the loss of a fetus (in case of a miscarriage).



Placenta Previa & Intervention



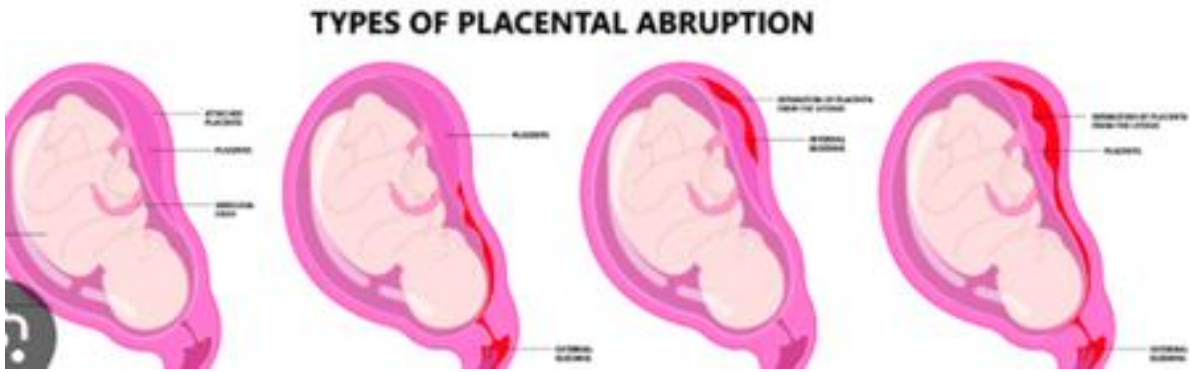
massive bleeding without labor pains.

AVOID PER –VAGINA: PV***

- (Admit) and administer absolute bed rest to prevent further trauma that could cause increased bleeding.
- Check Hct to determine blood concentration. If it is less than 28%,
- blood transfusion is usually required
- Monitor fetal health using EFM (Early Fetal Monitoring)
- If bleeding cannot be stopped, a Cesarean section may be necessary.
- A fetal resuscitation team must be prepared in cases of early gestation (less than 37 weeks)

Case : G2P1 GA33 wk. lab normal present: bleeding per vagina , U/S Placenta mid anterior

Abruptio placenta & Intervention



bleeding or not (reveal & conceal)

but labor pains so much

AVOID PER –VAGINA if bleeding***

- (Admit) and administer absolute bed rest to prevent further trauma that could cause increased bleeding.
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Summary

Thank u for your attention