

Clinical approach

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Case 1

- 23 year old married lady , presented to ER complaining of abdominal pain , her LMP was 3 weeks ago
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- - take a relevant history & examination
- - what are your DDX ?
- -what are investigation you would like to ?

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- Findings :

Bhcg -ve

Cbc normal

Ua negative

Tv/us : right ovarian cyst , 6*7 cm

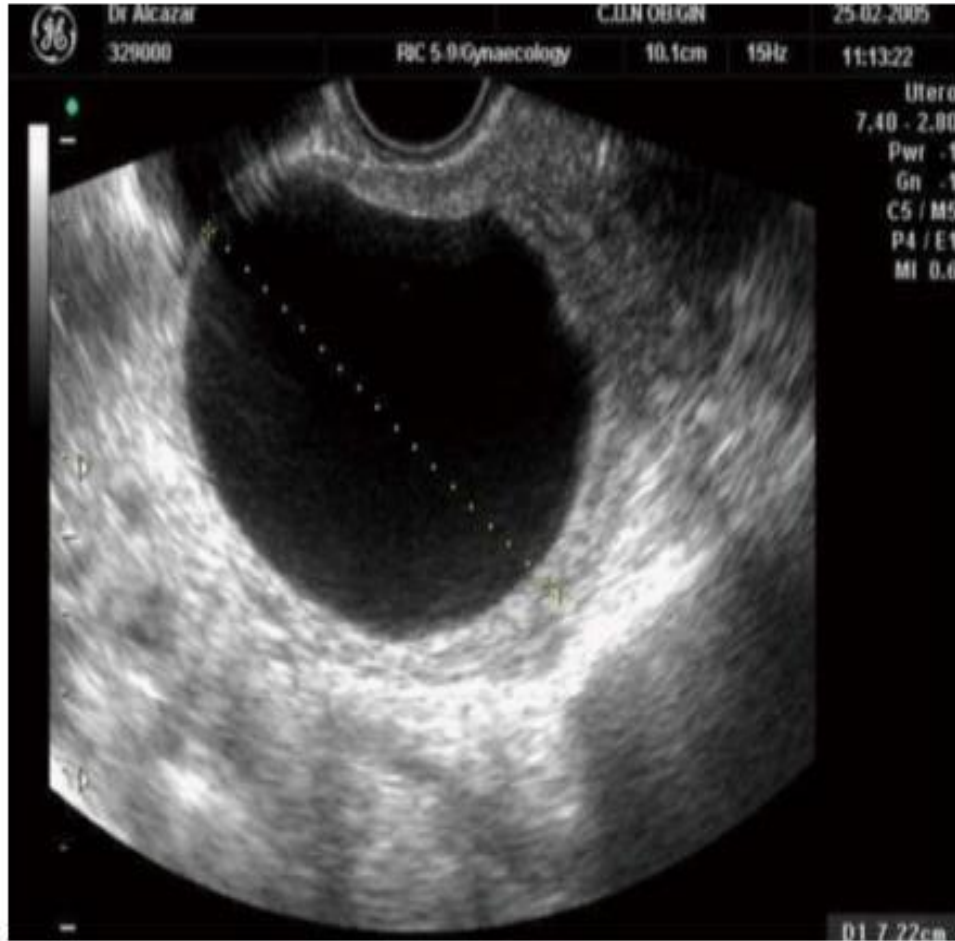
- 1) Simple looking

- 2) Complex (solid components , multi loculated ,...)

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- Define ovarian cyst ?
- Other investigation ?
- What are the DDX for this adnexal mass ?
- How you should manage this patient ?

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- 65 year old menopausal patient , referred to you as a case of ovarian mass , she was doing well , 3 months ago when she started to have vague symptoms (abdominal bloating , weight loss ...)

Tvus : left ovarian mass 5 cm , showed solid component , multiloculated with ascites .

- Take a relevant history ? What are the risk factor for ovarian cancer ?
- What other investigations you would like to order ?
- What is RMI ?

Case 3

- Mrs x , 56 yo menopausal patient presented to you complaining of vaginal bleeding .

-define PMB ?

Inx ?

Ddx ?

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- If TV/US was more than 4 mm what is your next step ?
- What you expect to find ? And how you will manage each case ?

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Mrs x a 25 year old patient , married for 3 years , she is nulliparous

- What is your impression ?
- How you can diagnose it ?
- What other DDX may cause similar symptoms ?
- What are the finding if you orderd:

AMH :

LH :

ESTROGEN :

TV/US :

....

- How you will manage her if her main complain was :

Irregular bleeding :

Infertility :

Acne / hirsutism :