

*Basic Emergency Obstetric and Newborn Care in Humanitarian Settings: Select Signal Functions*

**Case Study**

Mrs. F is a 20-year-old para 1 who has been brought to the health center by the local traditional birth attendant (TBA) because she has been bleeding heavily since childbirth at home 2 hours ago. The TBA reports that the birth was a spontaneous vaginal delivery of a full-term newborn. Mrs. F and the TBA report that the duration of labor was 12 hours, the birth was normal, and the placenta was delivered 20 minutes after the birth of the newborn.

Assessment (history, physical examination, screening procedures/laboratory tests)

1. What will you include in your initial assessment of Mrs. F? Why?

2. What particular aspects of Mrs. F’s physical examination will help you make a diagnosis or identify her problems/needs? Why?

Diagnosis (identification of problems/needs)

You have completed your rapid assessment of Mrs. F, and your main findings include the following:

*History*

* The TBA says that she thinks the placenta and membranes were delivered without difficulty and were complete.

*Physical examination*

* Mrs. F’s temperature is 36.8ºC, her pulse rate is 108 per minute, her blood pressure is 80/60 and her respirations are 24 per minute. She is pale and sweating. Her uterus is soft and does not contract with fundal massage. She has heavy, bright red vaginal bleeding. On inspection, there is no evidence of perineal, vaginal, or cervical tears.

3. Based on these findings, what is Mrs. F’s diagnosis (problem/need)? Why?

Care provision (planning and intervention)

4. Based on your diagnosis (problem/need identification), what is your plan of care for Mrs. F? Why?