










Practices of obstetric semiology in a medical skills laboratory: an experience report

Práticas de semiologia obstétrica em um laboratório de habilidades médicas: um relato de experiência



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Abstract

General practitioners are responsible for prenatal consults and other healthcare services for pregnant women. Thus, they need to have an efficient academic background in Obstetrics. This experience report aimed to describe practices in obstetric semiology occurring between March and November 2023 in a medical skills laboratory of a higher education institution in Pernambuco. The students practiced semiology techniques used in Obstetrics and the care of pregnant women with pathologies. The activities supplied the demands of the health of women and validated the urgency of a medical formation centered on direct knowledge application, improving its efficiency and giving students a leading role.

Keywords: Prenatal care, Prenatal education, Pregnancy complications, Clinical practice guide.

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Funding: Not applicable.

Research Ethics

Committee: Not applicable.

Received in 12/04/2023

Approved in 04/25/2024

How to cite: Feitosa **ABS**, Almeida **IFS**, Silva **JES**, Oliveira **JKBS**, Santos **LFC**, Camelo **ZDCM**, et al. Practices of obstetric semiology in a medical skills laboratory: an experience report. *An Fac Med Olinda* 2024; 1(12):129 doi: <https://doi.org/10.56102/afmo.2024.334>

Resumo

É papel do médico generalista realizar rotinas de pré-natal e outros atendimentos a gestantes. Para isso, é necessária uma formação acadêmica eficaz em obstetrícia. Este relato de experiência objetivou descrever práticas em semiologia obstétrica que aconteceram entre março e novembro de 2023 em um Laboratório de Habilidades Médicas. Tratou-se de um estudo descritivo desenvolvido com base em atividades realizadas em uma instituição de ensino pernambucana. Os alunos praticaram técnicas utilizadas na semiologia obstétrica e no atendimento a gestantes em contextos patológicos. Tais atividades atendem às demandas da saúde da mulher e ratificam a urgência de uma formação médica centrada na aplicação direta do conhecimento, tornando-a mais eficiente e dando protagonismo aos estudantes.

Palavras-chave: Cuidado pré-natal, Educação pré-natal, Complicações na gravidez, Guia de prática clínica.

INTRODUCTION

The Unified Health System (SUS) was established by the 1988 Constitution¹ and brought new health policies to Brazil. The National Politics of Integral Attention to Women's Health², implemented in 2004, was developed to ensure integral and longitudinal attention to women, and it is the foundation for actions in the area. Among the guiding policies, the promotion of health and the need for consolidation of obstetric advances are highlighted³. Thus, prenatal care in primary health care (PHC) is one of the key points for the health prevention and promotion of Brazilian women^{2, 3, 4}.

Prenatal care aims to monitor the pregnant woman to secure maternal health and fetal development, perform timely diagnoses, and reduce maternal-fetal mortality, providing safety to mother and child. To achieve this, the Ministry of Health recommends a minimum of six prenatal visits in PHC, with follow-ups alternating between a general practitioner and nursing staff⁵.

In the PHC, pregnancy monitoring generally begins with routine-risk prenatal care, followed by regular follow-ups and screenings to ensure good pre- and postnatal conditions. According to the Prenatal Care Technical Manual⁶, a pregnancy is considered high-risk only in specific situations, such as pregnancy-induced hypertension and gestational diabetes mellitus; when these situations occur, the pregnant woman should be referred to a specialist. Thus, these guidelines are essential to organize the care in prenatal follow-up, leading to optimal maternal-fetal outcomes.

In this context, the general practitioner working in the PHC should provide efficient care to pregnant women, conducting prenatal routines, timely diagnoses, and direct high-risk prenatal care when needed^{5, 6}. Therefore, they need solid academic training in Obstetrics using practical activities that prepare the students for real clinical situations⁷. To ensure adequate training, the

Ministry of Education encourages medical courses to provide laboratories equipped for student development. In turn, the institutions adopt various technologies, such as mannequins, anatomical models, and simulated clinics, to enhance the learning process^{7, 8, 9}.

Therefore, this experience report described the practical activities in obstetrics semiology performed between March and November 2023 in a medical skills laboratory (MSL) at a higher education institution in the Pernambuco state.

METHODS

This experience report was developed based on the obstetric semiology practices of the Academy Obstetrics League (AOL) conducted in an MSL.

The practical activities occurred between March and November 2023 and aimed to revisit the knowledge of obstetric anamnesis and physiological and pathological obstetric exams.

A literature search was conducted to support the practices and to solidify the importance of the activities conducted by the AOL. Thus, the following descriptors were selected in the Medical Subject Headings (MeSH) platform: prenatal care, prenatal education, pregnancy complications, and clinical practice guide.

Searches were performed using the descriptors in Portuguese, English, and Spanish in the SciELO, LILACS, and Virtual Library on Health databases. Studies published from January 2017 to November 2023 were selected, as well as the Prenatal Care Manual, developed by the Brazilian Federation of Gynecology and Obstetrics Association⁶, and the antenatal card from the Brazilian Ministry of Health⁵.

RESULTS

The practical activities of the AOL occurred from March to November 2023 in a MSL of a higher education institute in Pernambuco and covered crucial topics for Obstetrics in general medicine.

During each workshop, the students performed the main techniques of obstetric semiology. Throughout 12 classes, the students were divided into three groups to discuss and practice several themes, such as prenatal and antenatal cards, medical history and obstetric physical exams, and the evaluation of postpartum bleeding and emergency measures.

In the workshop regarding the prenatal consult and the antenatal card, the students learned the importance of this instrument to follow up the pregnancy and verify the identity, social issues, obstetric history, results of exams and screenings, follow-ups, and other procedures. The antenatal card facilitates continuity of care since it encompasses all healthcare services, promoting more effective communication between healthcare professionals and the services involved, as well as the generation of data for epidemiological research¹⁰.

In the workshop about obstetric physical exams, the students practiced Leopold maneuvers, the use of an ultrasound device to listen to fetal heartbeats, the measurement of fundal height, and the evaluation using vaginal touch (Figure 1). These practices provide essential abilities to assess the state of the pregnancy and the well-being of the baby¹¹.

Figure 1. Student of the Academic Obstetrics League measuring the fundal height in the obstetric semiology practice in the medical skills laboratory.



Source: personal archive.

In the third workshop, a simulation of the first prenatal consult with a pregnant patient was conducted, combining the medical history with an obstetric physical exam. Simulation, also known as role-playing, is an active teaching method based on performing arts and improvisation. This activity involves simulating consults and other procedures in which students interact with fictitious patients¹².

The fourth workshop was about postpartum bleeding and emergency measures, exercising the assessment and the handling of possible complications during postpartum (Figure 2).

Figure 2. Use of mannequins in the postpartum bleeding and emergency measures practice in the medical skill laboratory.



Source: personal archive.

According to the Pan-American Health Organization, postpartum bleeding is one of the main obstetric complications and a relevant cause of maternal death in Brazil¹³. This practice highlighted the importance of effective communication within the healthcare team during obstetric emergencies, which is also crucial for ensuring better maternal outcomes¹⁴. Moreover, general practitioners must recognize abnormal bleeding and intervene immediately to control hemorrhage. This scenario reinforces the importance of incorporating practices that support learning and prepare future professionals to handle emergency, high-stress, and critical obstetric situations^{9,15}.

CONCLUSION

The practical activities promoted by the AOL addressed the current demands in the health of women and also highlighted the importance of medical education focused on the direct application of knowledge. Training with more practical activities, as demonstrated in this study, improves care and gives students a leading role in their education.

Furthermore, case simulations, evidence-based discussions, and the practice of clinical maneuvers were key elements in preparing general practitioners to manage various situations in maternal care. This study also confirmed the need for academic training other than theoretical knowledge and empowered students as active agents in improving maternal-fetal outcomes, preparing them for real-world challenges. The importance of a more humanized and effective medical practice was also emphasized.

CONFLICT OF INTEREST

Nothing to declare

AUTHORS CONTRIBUTIONS

All authors participated in the manuscript production and approved the final version.

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