Interesting Case

Report by: Rachel Burton, Heather Pratt and Jennifer Farrell
Clinical History

- 26 yo Female
- G2 P1
- Previous C-Section in Bangladesh
- LMP : 12/26/2013
Fetal Survey Results: Normal with thickened placenta noted, patient scheduled for follow growth exams
F/U Growth Scan on 09/09/14
- GA by LMP - 36 weeks 5 days
- HR - 139 bpm
- Persistent Placentomegaly
- Improved growth from previous exam with estimated fetal weight in the 81st percentile
- F/U growth scheduled in 3 weeks to assess placenta and growth
- Patient told to follow up with OB at regular scheduled time
09/15/14 - Followed up with OB: diagnosed with placenta disorder and previous C-section affecting pregnancy

Continue NST’s twice a week
09/18/2014

Patient presents for scheduled NST and states she is not feeling movement

No FHT recognized on NST

Ultrasound ordered for further evaluation resulting in -FHT (fetal demise)

GA - 38 weeks 5 days
09/19/2014

Intrauterine fetal demise confirmed

Elected TOLAC (trial of labor after cesarean) with known risk of uterine rupture of 3%

Labor induced- fetal head seen in birth canal

Began normally - Contractions noted

During labor contractions cease and patient has upper abdominal pain

- Palpable fetal parts with fetal head maternal right

- Abdomen very tender to the touch

Ultrasound ordered for further evaluation of possible uterine rupture
Ultrasound Findings:
Findings consistent with uterine rupture with intrauterine contents (placenta and fetus) within the abdominal cavity, outside the uterus
Summary:
Clinically:
- pre c-section patient was dilating and fetal head was seen in birth canal, patient was experiencing labor pains
- Labor pains stopped and fetal head was no longer seen in birth canal
C-section performed
- rupture occurred along the previous classical C-section scar defect - 12 cm in length
- pus with necrotic tissue were found along the edges of the rupture in the uterine cavity and along pelvic peritoneal surfaces
- Fetus and placenta removed from peritoneal cavity
- Tight true knot in umbilical cord noted with obstruction of blood supply which caused fetal demise pre-rupture
- Uterus extracted, cleared of clot and necrotic tissue and returned to the abdomen, patient survived
Uterine Rupture