

**LANCASTER GENERAL COLLEGE OF NURSING AND HEALTH SCIENCES
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM**

SYLLABUS

- I. Title: DMS 212 – OBSTETRICS II
- II. Course Description: This course will provide the student with an understanding of the abnormalities that may occur throughout the pregnancy. Emphasis is given to etiology and significance of the abnormality as well as its sonographic appearance. Classroom instruction will be coordinated with clinical activities in the DMS 214 course.
- III. Prerequisite: DMS 202, DMS 203
- IV. Placement: Year II – Semester II, concurrent with DMS 214
- V. Time Allotment: Theory 30 hours
Clinical Laboratory 0 hours
- VI. Faculty: Robert M. Hess, BS, RDMS
- VII. Credits: 2
- VIII. Evaluation: 5 Unit Exams 300 Points
Total Theory Points 300 Points
- *A grade of "C" (2.0) is required to pass this course.**
- IX. Textbooks: STRUCTURAL FETAL ABNORMALITIES, Sanders, 2002
DIAGNOSTIC ULTRASOUND, RUMACK, 2005
LGH PROTOCOL MANUAL
SDMS GUIDELINES
- X. Course Objectives: Given the theoretical content, at the completion of Obstetrics II, the student will demonstrate that he/she has the knowledge to:
1. Describe the selected abnormalities encountered in the 2nd and 3rd trimester of pregnancy.
 2. Describe characteristic sonographic features of each abnormality.
 3. Explain how the standard sonographic imaging protocol is modified to document the abnormal process.

- XI. School Policies: Students are held accountable for all policies in the Student Handbook and any revisions made to those policies during the academic year.
- XII. Class:
- A. Importance of Attending Class

Education comprises more than just private reading and passing of exams. Students should recognize that active and informed participation in class is essential to the development of their intellectual abilities and scholarly growth. Students must also recognize the importance, for both the present and the future, of achieving an academic record that reflects their intellectual ability. Such records are seldom achieved without regular attendance and participation in class activities. Attendance will be taken.
 - B. Student Responsibility for Missed Material

Students are responsible for all material presented and announcements made in class, regardless of attendance. It is the student's responsibility to obtain materials and assignments if absent.
 - C. Unit Examinations

Examinations should only be missed in extenuating circumstances. A student who misses an examination will be required to make up the examination on the next day of lecture. Contact the Course Faculty prior to the next lecture day to make arrangements to take the exam.

A student who misses an examination, regardless of the reason, will have ten percent (10%) deducted from the grade achieved on the exam. Example: The exam is worth sixty (60) points, the student takes the exam and achieves a grade of 52/60. The score of 52 is then decreased by ten percent (10%) or five (5) points, thus the grade on the exam will be 47/60. An alternate examination may be given for the make-up examination.
 - D. Class Behavior

Once class has started, the instructor has the prerogative not to admit students into lecture. Students will be dismissed from class for any inappropriate behavior.
 - E. Written Assignments:

All submitted written work must follow the College of Nursing and Allied Health Writing Guidelines.

XIII. Other:

A. Academic Dishonesty and Plagiarism

Academic dishonesty violates the spirit and purpose of an academic community, and is therefore subject to disciplinary action. Academic dishonesty includes cheating on examinations, unauthorized duplicated submission of work, and/or unauthorized possession of exams.

Plagiarism is an act of academic dishonesty. Any work submitted that is not your own is an act of plagiarism. In preparing assignments, you must acknowledge in writing, any use of outside sources or any assistance you received in preparing an assignment.

If an instructor believes that a student has committed an act of academic dishonesty or has plagiarized material, the instructor will award a failing grade for that assignment to the student. If the occurrence is during an examination, the student will receive a zero for that portion of their grade and must leave the room.

If the student disagrees with this decision, the student may follow the grievance procedure.

XIV.

| CONTENT | HOURS | STUDENT ACTIVITIES | COURSE OBJECTIVE |
|---|----------------------------|--|------------------|
| I. Multiple Gestation A. Indications B. Incidence C. Types D. Morbidity/Mortality E. Ultrasound Criteria F. Fetal growth and Well-being G. Syndromes | Class: 3 hrs | Rumack, Ch. 35 SDMS OB, p. 23-25 | 1-3 |
| II. Placenta Abnormalities A. Previa B. Abruption C. Infarctions D. Placental Lesions E. Accreta F. Placental Size | Class: 3 hrs | Rumack, Ch. 48 SDMS OB, p.14-17 | 1-3 |
| III. Feto-Maternal Disease A. RH Incompatibility B. Diabetes C. Maternal Hypertension IV. IUGR A. Symmetric B. Asymmetric C. Management | Class: 3 hrs | Hagen, p. 695-701 SDMS OB, p.25-29 Rumack, p. 1505-9 p. 1528-37 SDMS OB, p.20-22 | 1-3 |
| VIII. Neural Cranial Disorders A. Hydrocephalus B. Holoprosencephaly C. Dandy Walker Malform. D. Agenesis of Corpus Callosum E. Hydranencephaly F. Porencephaly G. Arachnoid Cyst H. Choroid Plexus Cyst I. Posterior Fossa Teratoma J. Vein of Galen Aneurysm K. Microencephaly L. Anencephaly M. Exencephaly N. Cephalocele | Class: 8 hrs | Rumack, Ch. 37 Sanders, p. 14-53 SDMS OB, p. 37-43 | 1-3 |

| CONTENT | HOURS | STUDENT ACTIVITIES | COURSE OBJECTIVE |
|---|--------------------------------|--|------------------|
| <p>VIII. Neural Cranial Disorders (cont.)</p> <ul style="list-style-type: none"> O. Iniencephaly P. Spina Bifida Q. Sacrococcygeal Teratoma R. Non-Immune Hydrops S. Facial Abnormalities <p>IX. Neck Masses</p> <ul style="list-style-type: none"> A. Cystic Hygroma B. Cervical Teratoma | | <p>Rumack, Ch. 36 Sanders, p. 153-62</p> | |
| <p>X. Intrathoracic Abnormalities</p> <ul style="list-style-type: none"> A. CDH B. CAM C. Pulmonary Sequestration D. Bronchial Cysts E. Pleural Effusions <p>XI. Fetal Heart Abnormalities</p> <ul style="list-style-type: none"> Septal Defects Ebstein's Anomaly Hypoplastic Heart Tetralogy of Fallot Transposition Truncus Arteriosus Aortic Coarctation | <p>Class: 4 hrs</p> | <p>Rumack, Ch. 39 SDMS OB, p. 44-46</p> <p>Rumack, Ch. 40 SDMS OB, p. 51-53</p> | <p>1-3</p> |
| <p>XII. Abdominal Abnormalities</p> <ul style="list-style-type: none"> A. Gastrointestinal Atresia <ul style="list-style-type: none"> Esophageal Duodenal Small Bowel Anal B. Abdominal Wall Defects <ul style="list-style-type: none"> Omphalocele Gastroschisis Ventral Hernia Prune Belly Syndrome C. Misc. Abnormalities/ Syndromes <ul style="list-style-type: none"> Amniotic Band Limb Body Wall Pentalogy of Cantrell Beckwith-Weidemann CDH Meconium Peritonitis | <p>Class: 4 hrs</p> | <p>Rumack, Ch. 41 Sanders, p. 132-52 Sanders, p. 89-117 SDMS OB, p. 43-4, 49</p> | <p>1-3</p> |

| CONTENT | HOURS | STUDENT ACTIVITIES | COURSE OBJECTIVE |
|--|-----------------------------------|---|------------------|
| <p>XII. Misc. Abnormalities/ Syndromes</p> <p>D. G-U Tract Abnormalities</p> <p> Agenesis</p> <p> Hydronephrosis</p> <p> Polycystic Disease</p> <p> Meckel-Gruber</p> <p>XIII. Skeletal Disorders</p> <p>A. Rhizomelia</p> <p> Achondrohypoplasia</p> <p> Thanatophoric Dwarfism</p> <p> Sirenomelia</p> <p>B. Long Bone Discordance</p> <p>C. Connect. Tissue Disease</p> <p> Osteogenesis Imperfecta</p> <p> Craniosynostosis</p> <p>D. Misc.</p> | <p>Class:</p> <p>2 hrs</p> | <p>Rumack, Ch. 42</p> <p>SDMS OB, p. 46-49</p> <p>Rumack, Ch. 43</p> <p>Sanders, p. 1-13</p> <p>SDMS OB, p. 49-51</p> | <p>1-3</p> |
| <p>XIV. Chromosomal Abn.</p> <p> Trisomy 13,18, 21</p> <p> Turner's Syn.</p> <p> Klinefelter's Syn.</p> <p> Triploidy</p> <p>XV. Special Procedures</p> <p>A. Amniocentesis</p> <p>B. CVS</p> <p>C. Level II Exam</p> <p>D. Biophysical Profile</p> <p>E. Cord Doppler</p> | <p>Class:</p> <p>3 hrs</p> | <p>Rumack, Ch. 34</p> <p>Sanders, p. 1-13</p> <p>SDMS OB, p. 53-55</p> <p>Rumack, Ch. 47,50</p> <p>SDMS OB, p. 33-36</p> | <p>1-3</p> |