

## Gynecology case study # 9

A 13 year old nulligravid came to the ER due to profuse menstrual bleeding accompanied by weakness and loss of consciousness. On history, she has been experiencing heavy menstrual bleeding since her menarche at age 12 years old, using up 3-4 baby diapers per day, lasting 10-12 days each month. She has unremarkable past medical and family medical history. LMP is 2 days ago

On physical exam, the patient was stretcher-borne, weak-looking, but conversant. Her BMI is 28 kg/m<sup>2</sup>. BP is 90/60, heart rate of 110 bpm, RR 25 cpm. She has very pale palpebral conjunctivae, anicteric sclerae, pale nail beds. She has unremarkable neck, chest, lung and abdominal findings.

She had normal external genitalia, with intact hymen; on rectal exam: she had smooth rectal vault, no masses palpated; cervix and uterus and adnexae normal on palpation.

### QUESTIONS:

1. What is your complete diagnosis? Defend your diagnosis (state basis)
2. What other laboratory work-ups will you request to investigate this condition?
3. Discuss the pathophysiology of this condition? Give the differential diagnosis
4. How will you manage this patient?