RENOUF'S

Pocket-Phantom

J. C. CAMERON, M. D.

Fig. 1.

For Head and Breech Presentations.

Fig. 2.

For Shoulder Presentations.

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Fig. 2.

For Shoulder Presentations.

OBSTETRICAL

POCKET-PHANTOM

BY

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With Preface, Diagrams, Descriptions and Tables by
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PREFACE.

The Shibata Phantoms are very popular among the students in Germany, and have come to be almost indispensable in ward-work as well as in home reading. After palpating a case, the student should arrange the phantom in the pelvis as nearly as possible in the position he has found the foetus lying in utero; thus will he obtain a more vivid mental picture of the foetus and its relations in the case under examination than he could get in any other way. Having made his diagnosis, he should turn back to the cuts of the various presentations and positions and find the one which corresponds most closely to that shown by his phantom; in this way he can verify his nomenclature of the position and presentation.

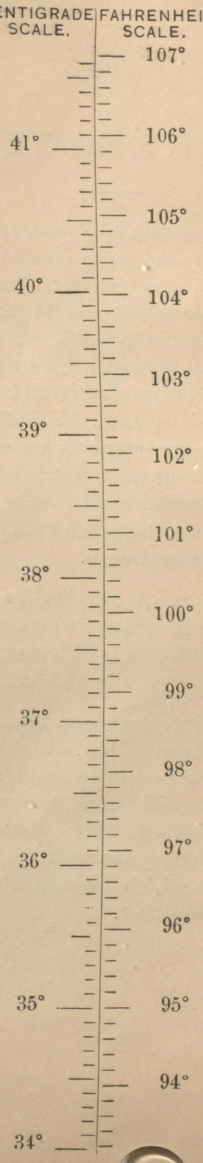
The student who has a working knowledge of French and German should compare foreign textbooks with his own. As the nomenclature is different, the corresponding French and German names have been given.

Some tables of equivalent metric and English weights and measures have been added, which will save the trouble of calculation. As the metric system is coming into general use, especially in scientific work, the student should try to familiarize himself with it; only constant practice will give him the same instinctive appreciation of the value of the metre and gramme which he has already of the grain, ounce, pound, inch and foot.

J. C. C.

Oct., 1903.

THERMOMETER TABLE.



How to Use the Phantoms.

For vertical positions use Fig. 1; for oblique, when the long axes of the uterus and the foetus correspond, use Fig. 1; when the long axis of the foetus lies obliquely or transversely use Fig. 2.

Place the presenting part in the cavity of the pasteboard pelvis, giving the proper attitude for the various presentations and positions.

By means of this Phantom it is easy to study the relations of the presenting part to the brim, the cavity, and the outlet of the pelvis.

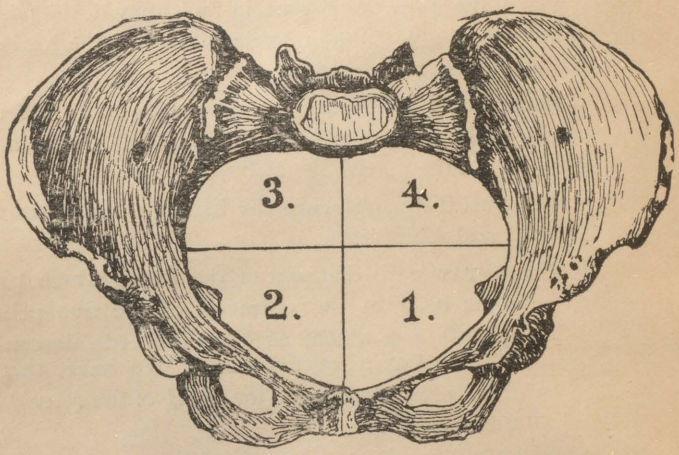
One must distinguish carefully between Presentation, Position and Attitude.

1 PRESENTATION, is that part of the foetus which presents itself at the entrance of the true pelvis (Brim) and which, as labor proceeds, descends into the Cavity, (excavation). We have, therefore, presentations of the *head*, of the *breech*, of the *shoulder*.

2. POSITION, is a relation, a property or attribute of a presentation. Any one presentation may have several positions, several relations to the pelvis. For the sake of convenience, we divide the Brim into four quadrants, and according as the denominator of the presentation is in one or other of these quadrants, we describe the presenting part as being in the 1st, 2nd, 3rd or 4th position.

The Denominator in	Vertex	presentations	is the	Occiput	= O.
"	"	" Face	"	" Chin	= M.
"	"	" Breech	"	" Sacrum	= Sac.(S.)
"	"	" Shoulder	"	" Scapula	= Scap.

The term *position* is used also in another sense, as denoting the relation of the foetus to the uterus; for example, we say that the foetus lies in a *vertical*, *oblique* or *transverse* position in the uterus.



3. ATTITUDE means the relation of the foetal members to one another or to the trunk. We speak of the attitude of *flexion* or of *extension*. Flexion is the usual attitude, the chin is upon the thorax, the arm lies at the side or in front of the thorax, the forearm flexed and in front of the thorax, the thigh is flexed upon the abdomen, the leg upon the thigh, and the feet, generally in extension, are turned towards one another.

Pelvic Measurements.

Sp.=Between ant. Sup. Spines.....26 cm. = 10.24 in.
Cr.=Maximum distance between crests, 28 " = 11.02 "
C.E. (Conj. Ext.) = External Conjugate,
19 ½ to 20½ cm.=7.68 to 8.07 "
C.D. (Conj. Diag.) = Diagonal Conjugate, 12.5 cm.=4.92 "
C.V. (Conj. Ver.) = True Conjugate, 10 to 11 cm. = 4.33 "

N.B.—To get C.V. from C.D. subtract 1.5 to 2 cm. (.59 to .79 in.) according to the depth of the Symphysis, the height of the promontory, and the angle between the Symphysis and the Conjugate. To get C.V. from C.E., subtract 8½ to 9½ cm., according to the Stoutness of the patient.

Circumference of Pelvis over Symph. under Crests and over middle of Sacrum behind.....90 cm. = 35.43 in.
Between ischial tuberosities .....11 " = 4.33 "
" trochanters .....31 " = 12.20 "
From lower margin of Symph. to tip of Sacrum .... 9.5 " = 3.74 "

N.B.—To get approximately the transverse dirm. of true pelvis, divide the intercristal diameter by 2.

Foetus.

Average weight, ... 3000 to 3600 gram. = 6.6 to 7.9 lbs.
" height, ... 48 to 54 cm. = 18.9 to 21.26 in.
Umbilical Cord, average length, 50 cm.=19.69 in. (extremes from 0 to 200 cm. = 78.74 in.)
Placenta, average weight, ⅕ weight of child, i.e., 600 to 1000 gram. = 1.32 to 2.2 lbs.

DIAMETERS.

Head—O F.=Occipito-frontal, 11.5 to 12 cm.=4.53 to 4.72 in
O.M.=Occipito-mental, 13 cm. = 5.12 in.
S.O.B.=Sub-occipito-bregmatic, 9½ cm. = 3.74 in.
B.P.=Bi-parietal, 9¼ to 9½ cm.=3.64 to 3.74 in.
B.T.=Bi-temporal, 8 cm.= 3.15 in.
Shoulders—12 cm. = 4.72 in.
Hips—9.5 to 10 cm. = 3.74 to 3.94 in.

CIRCUMFERENCES.

Occipito-frontal, ... 32 to 34 cm. = 12.6 to 13.39 in.
Occipito-mental,..... 36 " = 14.17 in.
Sub-occipito-bregmatic, 32 " = 12.6 in.
Pulse, at birth, 130 to 150.
Respiration, at birth, 30 to 50, average about 44.

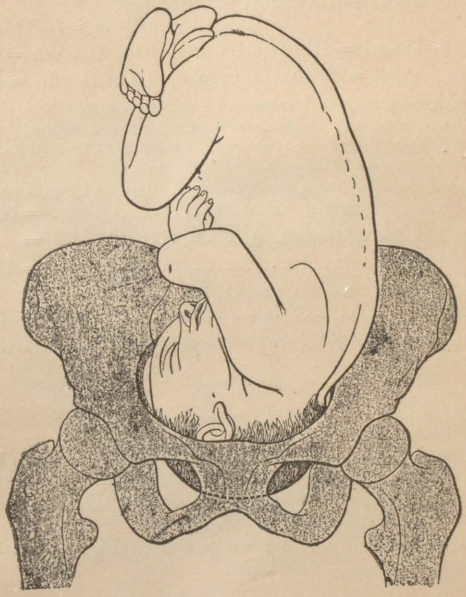


Fig. 1.

Vertex Presentation.—1st position.

Occipito—Left—Anterior—O.L.A.

Occipito—iliaque—gauche—antérieure—O.IG.A.

Linke—vordere—Hinterhauptslage.

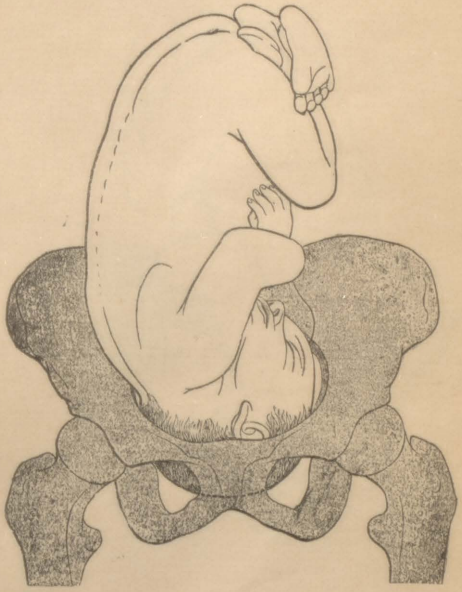


Fig. 2.

Vertex Presentation—2nd position.

Occipito—Right—Anterior—O.R.A.

Occipito—iliaque—droite—antérieure—O.I.D.A.

Rechte—vordere—Hinterhauptslage.

Fig. 3.

Vertex Presentation—3rd position.

Occipito—Right—Posterior—O.R.P.

Occipito—iliaque—droite—postérieure—O.ID.P.

Rechte—hintere—Hinterhauptslage.

Fig. 4.

Vextex Presentation—4th position.

Occipito—Left—Posterior—O.L.P.

Occipito—iliaque—gauche—postérieure—O.IG.P.

Linke—hintere—Hinterhauptslage.

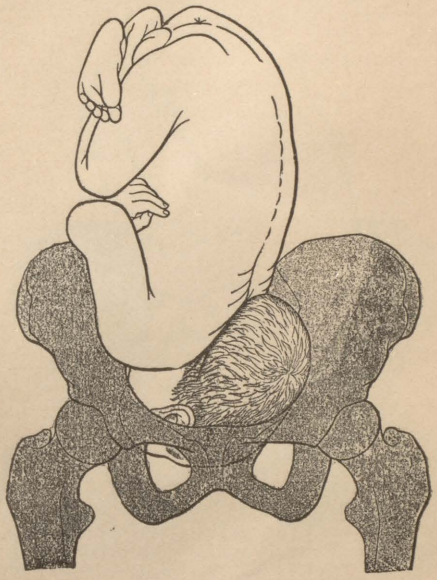


Fig. 5.

Face presentation—1st position.

Mento—Right—Posterior—M.R.P.

Mento—iliaque—droite—postérieure—M.ID.P.

Linke—vordere—Gesichtslage.

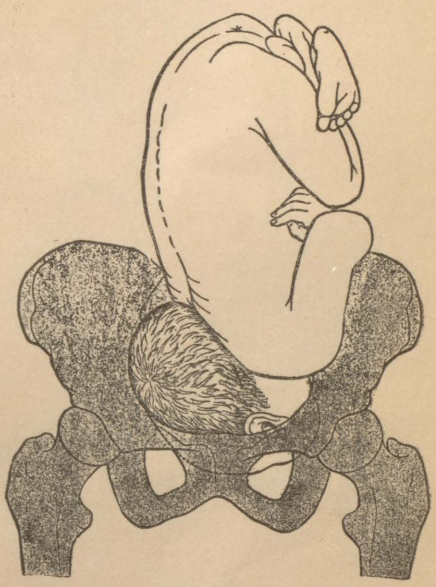


Fig. 6.

Face Presentation—2nd position.
Mento—Left—Posterior—M.L.P.
Mento—iliaque—gauche—postérieure—M.IG.P.
Rechte—vordere—Gesichtslage.

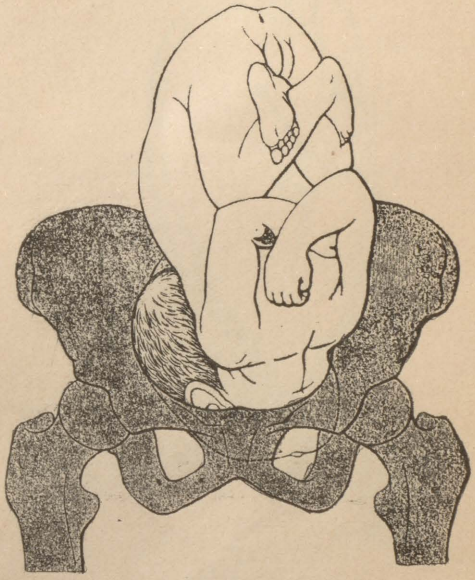


Fig. 7.

Face Presentation—3rd position.

Mento—Left—Anterior—M.L A.

Mento—iliaque—gauche—antérieure—M.IG.A.

Rechte—hintere—Gesichtslage.

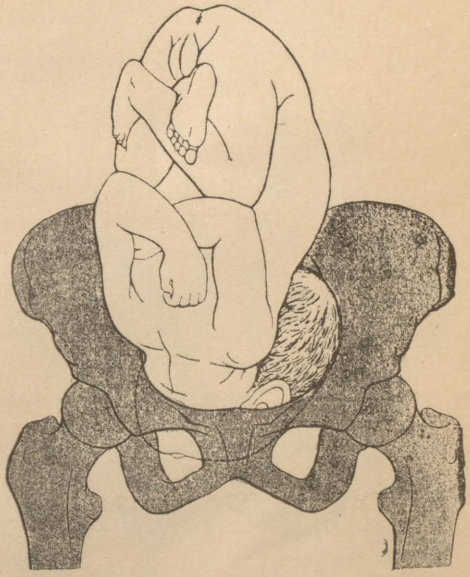


Fig. 8.

Face Presentation—4th position.
Mento—Right—Anterior—M.R.A
Mento—iliaque—droite—antérieure—M.ID.A.
Linke—hintere—Gesichtslage.

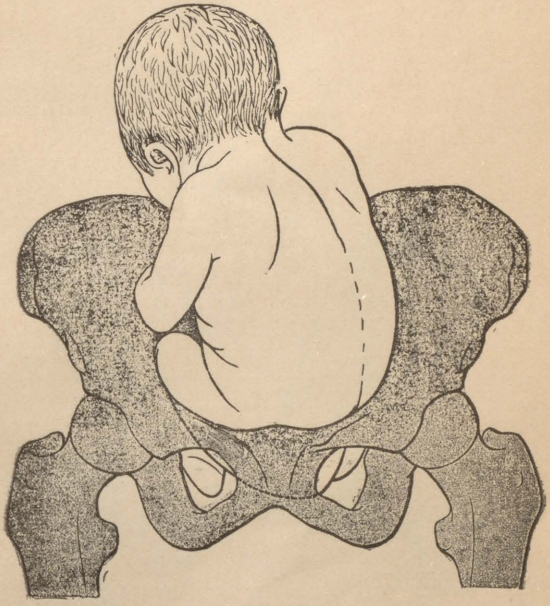


Fig. 9.

Breech Presentation—1st position.

Sacro—Left—Anterior—Sac.L.A.

Sacro—iliaque—gauche—antérieure—S.IG.A.

Linke—vordere—Steisslage.

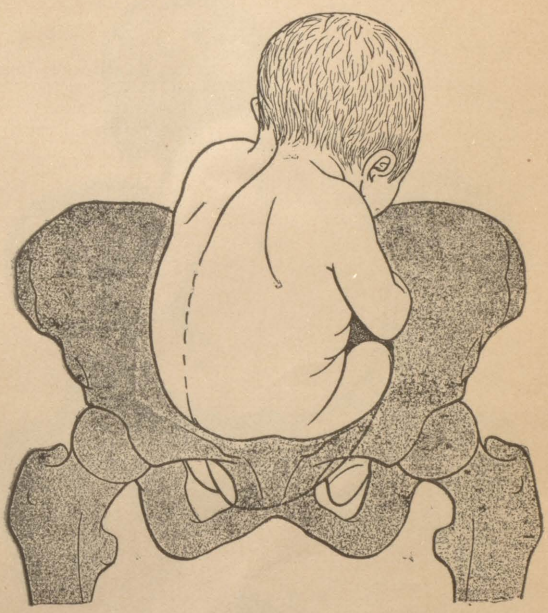


Fig. 10.

Beeech Presentation—2nd position.
Sacro—Right—Anterior—Sac.R.A.
Sacro—iliaque—droite—antérieure—S.I D.A.
Rechte—vordere—Steisslage.

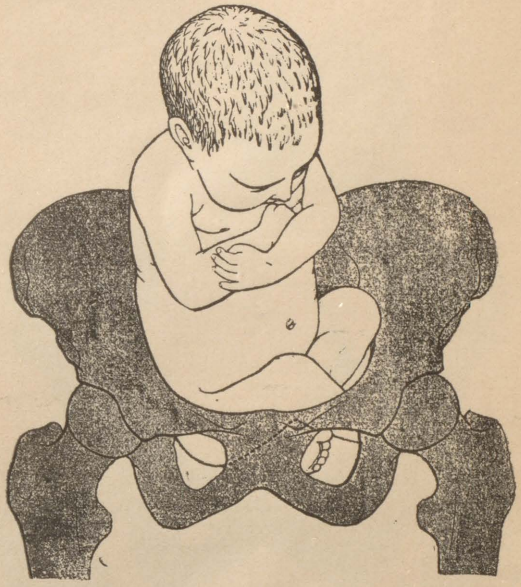


Fig. 11.

Breech Presentation—3rd position.

Sacro—Right—Posterior—Sac.R.P.

Sacro—iliaque—droite—postérieure—S.I D.P.

Rechte—hintere—Steisslage.

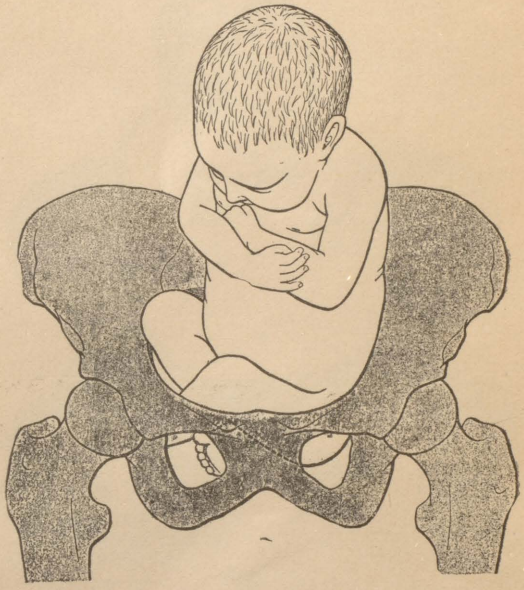


Fig. 12.

Breech Presentation—4th position.

Sacro—Left—Posterior—Sac.L.P.

Sacro—iliaque—gauche—postérieure—S.IG.P.

Linke—hintere—Steisslage.

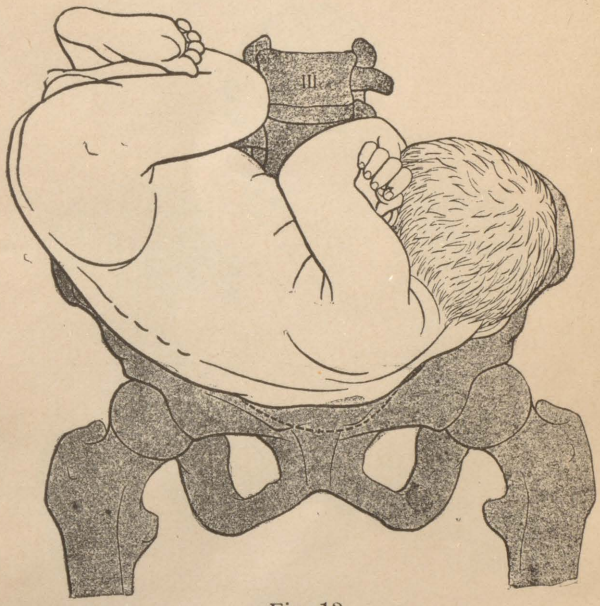


Fig. 13.

Shoulder Presentation—1st position.
Scapula—Left--Anterior—Scap.L.A.
Acromio—iliaque—gauche—antérieure—A.IG.A.
Linke—vordere—Querlage.

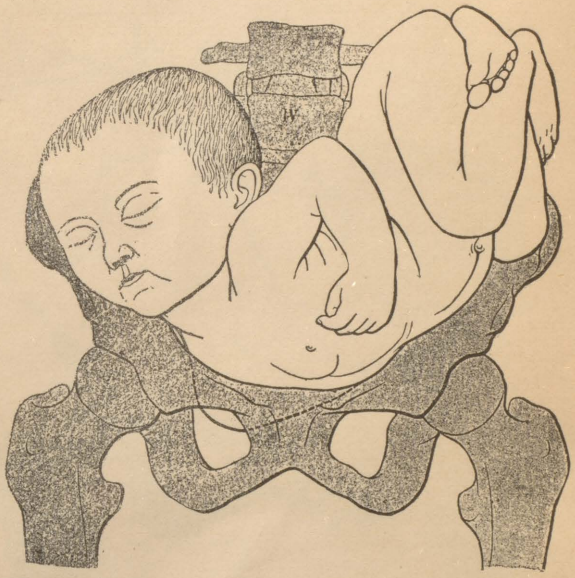


Fig. 15.

Shoulder Presentation—3rd position.
Scapula—Right—Posterior—Scap.R.P.
Acromio—iliaque—droite—postérieure—A.I D.P.
Rechte—hintere—Querlage,

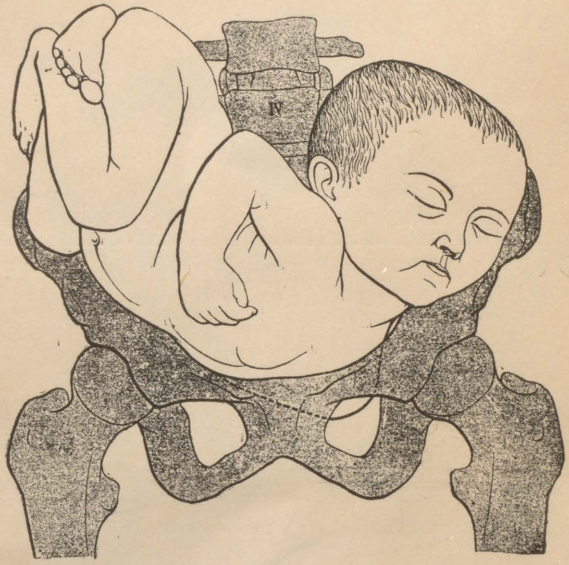


Fig. 16.

Shoulder Presentation—4th position.
Scapula—Left—Posterior—Scap.L.P.
Acromio—iliaque—gauche—postérieure—A.IG.P.
Linke—hintere—Querlage.

Table of Presentations.

I.—VERTICAL.—(Présentations longitudinales—Geradlagen).

A. *Head Presentations.*—(Présentations de l'extremité céphalique—Kopflagen.)

1. *Vertex.*—(Présentations du Sommet—Schädellagen, hinterhauptlagen).

(*a*) Back to left { 1st, O.L.A.
4th, O.L.P.

(*b*) Back to right { 2nd, O.R.A.
3rd, O.R.P.

2. *Face.*—(Présentations de la Face—Gesichtslagen).

(*a*) Back to left { 1st, M.R.P.
4th, M.R.A.

(*b*) Back to right { 2nd, M.L.P.
3rd, M.L.A.

3. *Brow.*—(Présentations du Front—Stirnlagen).

B. *Breech Presentations.*—(Présentations du Siège—Steisslagen, Beckenendlagen.)

(*a*) Back to left { 1st, Sac.L.A.
4th, Sac.L.P.

(*b*) Back to right { 2nd, Sac.R.A.
3rd, Sac.R.P.

Varieties of Breech Presentation:

Complete Breech—(Présentations du Siège complètes—Volkommene Steisslagen).

Half Breech / Footling { (Présentations du Siège décompletées — Unvollkommene Steisslagen, Knielagen, Fusslagen).

Breech with legs extended—(mode des fesses.)

II. *Shoulder Presentations*, oblique or transverse, crossbirth. (Présentations transversales [tronc]—Schieflagen, querlagen).

1. Head to left { (*a*) Back anterior, 1st, Scap.L.A.
(*b*) Back posterior, 4th, Scap.L.P.

2. Head to right { (*a*) Back anterior, 2nd, Scap.R.A.
(*b*) Back posterior, 3rd, Scap.R.P.

Explanations of the Abbreviations on the Phantom.

On the Pelvis:

- P.=Promontory (promontoire, Promontorium, Vorberg).
- S.—Symphysis (Symphyse, Schamfuge).
- T.—Tuberosities of Ischium (Ischions, Sitzbeinhöcker).
- A.s.i.—Sacro-iliac articulation (Symphyse sacro-iliaque, Hüftkreuzbeinhöcker [gelenk]).
- Sa.=Ant. Sup. Iliac Spine (épine iliaque antéro-supérieure, Vorderer oberer Darmbeinstachel).
- C.—Iliac Crest (Créte iliaque, Hüftbeinkamm).

On the Foetus:

- P.f.o.=Occipito-frontal circumference (circonférence occipito-frontale, Stirnhinterhauptumfang).
- P.m.f.—Mento-frontal circumference (circonférence mento-frontale, Kinnstirnumfang).
- P.m.o.—Mento-occipital circumference (circonférence mento-occipitale, Kinnhinterhauptumfang).
- P.o.b.=Occipito-bregmatic circumference (circonférence occipito-bregmatique, Hinterhaupt—gr. Fontanelle-umfang).