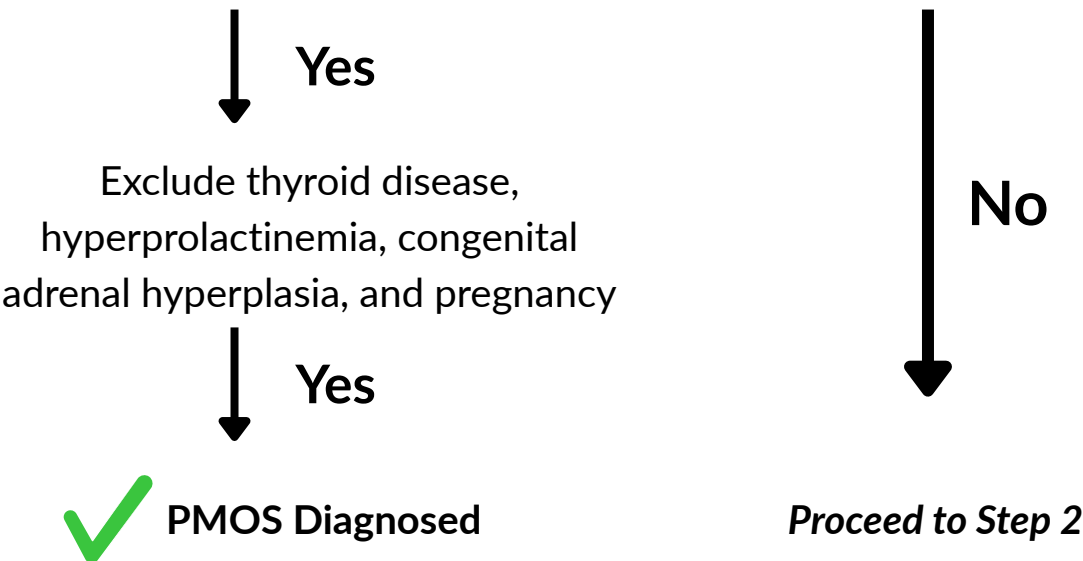


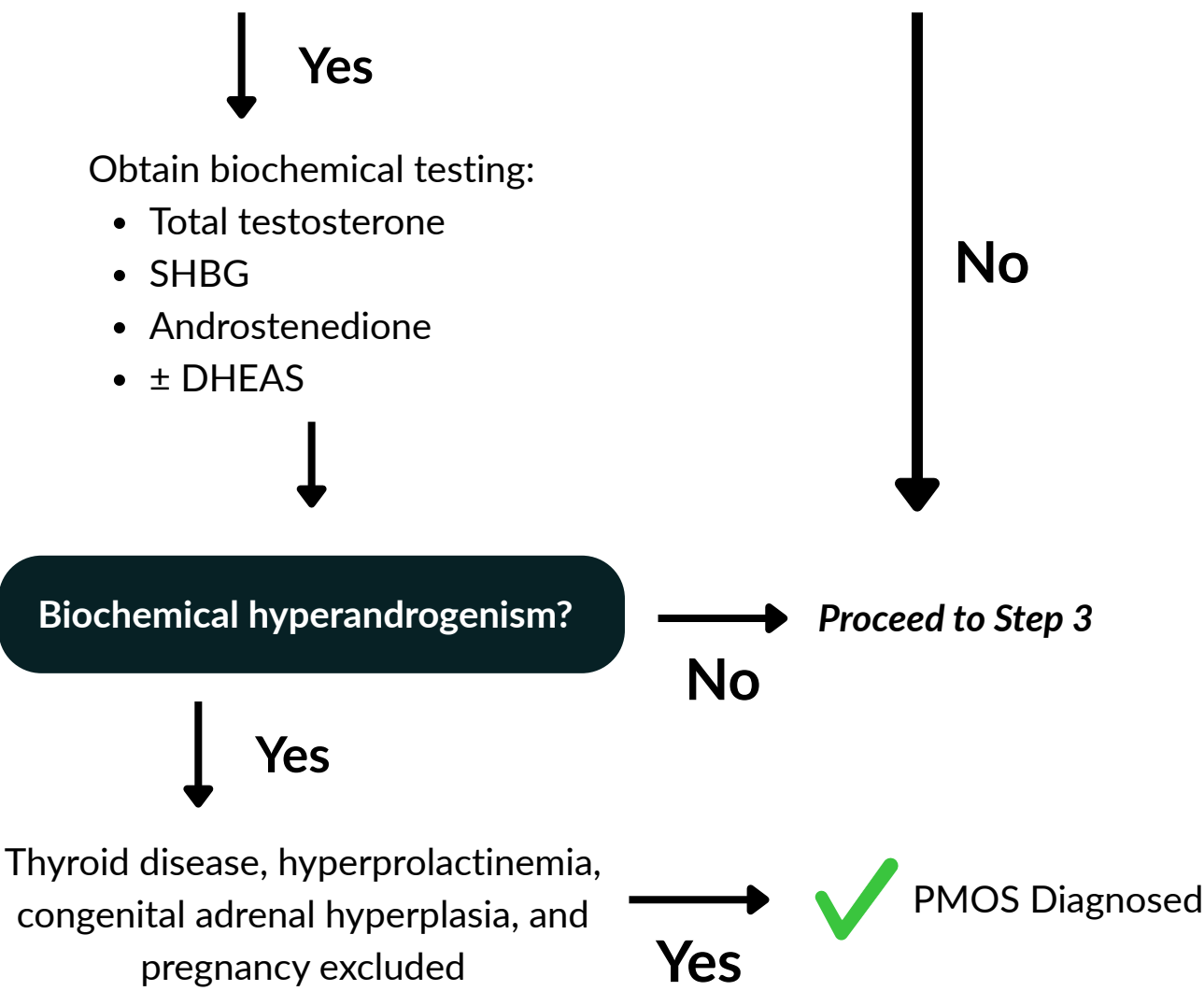
A Stepwise Approach to PMOS Diagnosis

Patient with suspected PMOS

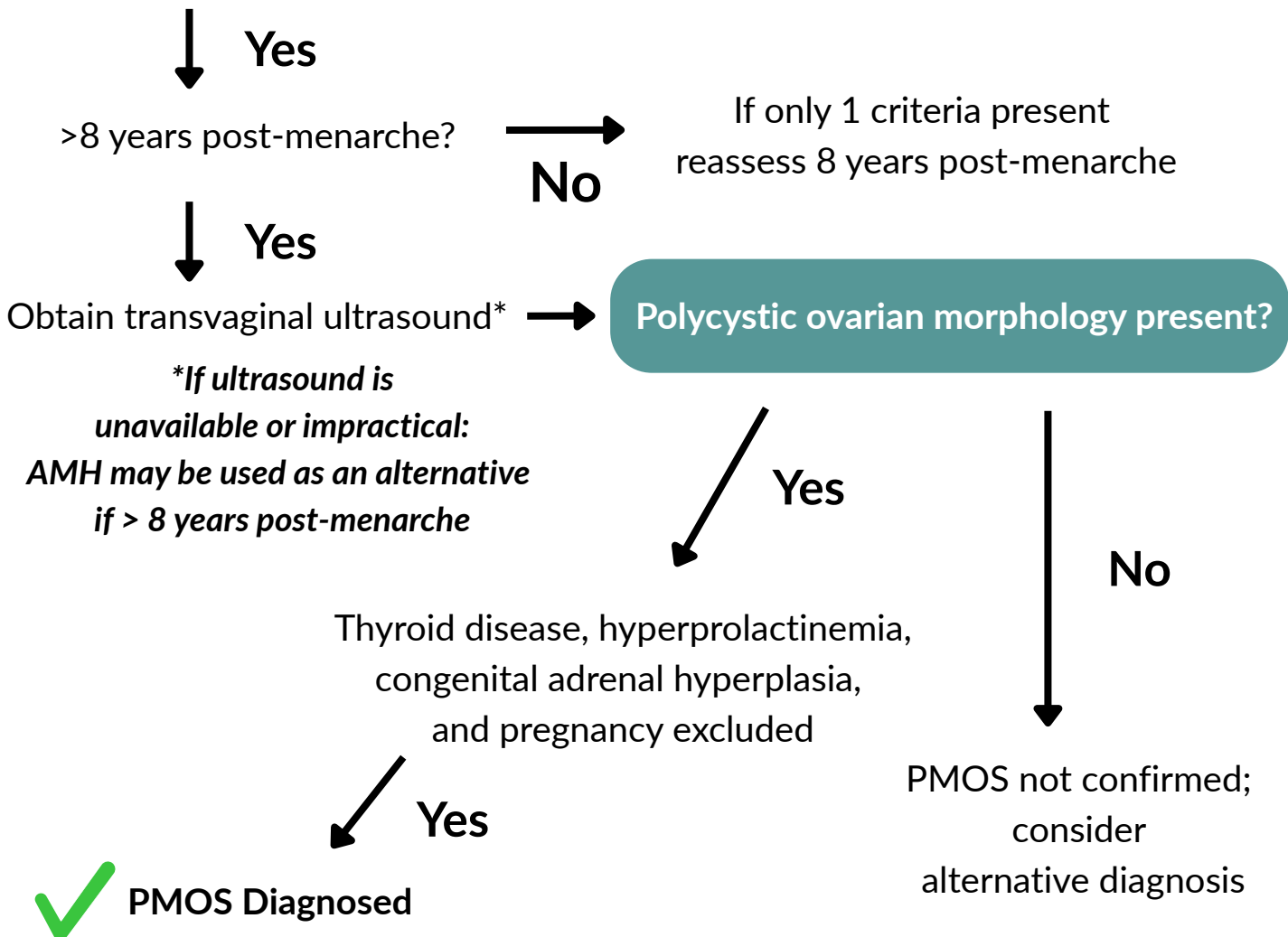
Step 1. History suggests oligo-anovulation AND clinical hyperandrogenism



Step 2. Oligo-anovulation WITHOUT obvious clinical hyperandrogenism?



Step 3. Oligo-anovulation WITHOUT hyperandrogenism (clinical or biochemical) OR Hyperandrogenism (clinical or biochemical) WITHOUT oligo-anovulation



Remember: Incidental polycystic ovarian morphology alone is not diagnostic. Clinical history and evidence of ovulatory dysfunction or hyperandrogenism remain essential.