

FINAL YEAR MBBS MEGA CLASS TEST 23rd SEPTEMBER, 2021
(GYNAE)

Total Marks: 50

Time allowed: 50 Min

Name: _____

Roll Number: _____

1. A 60 year, P₄ + 0, come with post-menopausal bleeding (PMB). The most common cause of PMB is?
 - a. Atrophic vaginitis
 - b. Cervical CA
 - c. Endometrial hyperplasia
 - d. Endometrial polyps
 - e. Ovarian CA

2. A 32 year woman developed amenorrhea after evacuation and curettage (E&C) which was done six months ago for incomplete miscarriage. Most probable diagnosis is?
 - a. Anorexia nervosa
 - b. Asherman's syndrome
 - c. Kallman's syndrome
 - d. Pre-mature ovarian failure
 - e. Sheehan's syndrome

3. GnRH analogues are effectively used in all of the following gynecological problems except?
 - a. Endometriosis
 - b. DUB
 - c. Hot flushes
 - d. Fibroid uterus
 - e. Precocious puberty

4. A 44 year, P₄ presents with severe menorrhagia and multiple fibroids in the uterus. The most appropriate treatment for her is?
 - a. GnRH analogues
 - b. Hysterectomy
 - c. Mirena
 - d. Myomectomy
 - e. NSAIDS

5. A 30- year, schoolteacher, with H/O fibroid uterus presented with recurrent miscarriages. The fibroid most commonly associated with miscarriage is?
 - a. Cervical
 - b. Intramural
 - c. Pedunculated
 - d. Sub-serosal
 - e. Sub mucosal

6. A 25-year female underwent laparoscopy for primary subfertility. Laparoscopy is not helpful for the diagnosis of?
- Asherman's syndrome
 - Endometriosis
 - Ectopic pregnancy
 - Infertility
 - Ovarian cyst
7. A 32-year, P3 with previous 3 LSCS presented with cyclical pain in the scar. On examination 3x3 cm swelling felt at the scar area. The most likely diagnosis is?
- Infection
 - Malignancy
 - Rectus Muscle hematoma
 - Scar endometriosis
 - Scar dehiscence
8. A 43 years, P5 presented with the C/O HMB. On USG uterus is bulky and uniformly enlarged. The most likely diagnosis is?
- Adenomyosis
 - Endometriosis
 - Endometrial tuberculosis
 - Endometrial CA
 - Fibroid uterus
9. A 26 years, P₂ comes with menstrual cycle of 4/30-40 days with average flow. Her ultrasound shows a unilocular clear right ovarian cyst 7x8cm, left ovary is normal. What is your diagnosis?
- Dermoid cyst
 - Ovarian carcinoma
 - Ovarian serous cystadenoma
 - Polycystic ovary disease
 - Tuberculosis
10. A 19 year girl has hirsutism, oligomenorrhoea and obesity. Her BMI is 30. The drug which is not used for the treatment of different presentation of PCO is?
- Cyproterone acetate
 - Danazol
 - OCPS
 - Metformin
 - Spirolactone
11. Laparotomy was done in a 60 year old woman. Intraoperative findings were a tumor confined to the ovary with ascites and omental deposits more than 3cm. According to FIGO staging system stage of disease is?
- II
 - III A
 - III B
 - III C
 - IV

12. A 54 year female presented with post-menopausal symptoms. You advise her hormonal replacement therapy (HRT). Complication of HRT doesn't include?
- Breast carcinoma
 - Endometrial carcinoma
 - Osteoporosis
 - Endometrial hyperplasia
 - Thromboembolism
13. Early menopause without additional estrogen is associated with?
- Pulmonary embolism
 - Ischemic heart disease
 - Carcinoma Uterus
 - Breast Cancer
 - Colorectal cancer
14. Sexually transmitted disease can be prevented by?
- Hormone pills
 - Condom
 - IUCD (Intra-uterine contraceptive device)
 - HRT
 - LNIU system (Levonorgestrel intrauterine system)
15. Which hormone is most useful in confirming menopause?
- T4 & TSH
 - LH
 - FSH
 - Progesterone
 - Estradiol
16. A 19 year, girl presented with normal flow of cyclical bleeding but at too frequent intervals. The condition is known as?
- Polymenorrhagia.
 - Polymenorrhrea.
 - Menorrhagia.
 - Metrorrhagia.
 - Heavy menstrual bleeding'
17. Virus which leads to premalignant change in cervical epithelium is?
- CMV
 - Hep B
 - Hep C
 - HPV
 - Parvo virus
18. The hormone whose surge leads to ovulation in females is?
- GnRH
 - LH
 - Estrogen
 - Progestogen
 - FSH

19. A 25- Year, obese lady married for 3 years presented in Gynae OPD with complains of failure to conceive. She gives Ho of irregular menstrual cycle since menarche along with excessive hair growth on face, arm and abdomen. The most likely diagnosis is?
- Asherman syndrome
 - Congenital tubal blockage
 - PCOs
 - Premature ovarian failure
 - HPO axis dysfunction
20. A 30 year female took ovulation induction for primary subfertility with clomiphene citrate. The mechanism of action of this drug is?
- Down regulation of pituitary
 - Direct effect on endometriu
 - Enhance negative feedback
 - Increase release of FSH
 - Inhibits prolactin secretion
21. A 70 year, P6, presented with complaint of something coming out of vagina. She is unfit for surgery. Which one is the best treatment option?
- Anterior colporrhaphy
 - Antibiotic + Analgesics
 - Pelvic floor exercise
 - Ring pessary
 - Vaginal packing
22. Semen analysis report of a person presenting in subfertility clinic shows oligospermia. Which of the following parameter is abnormal?
- pH >7.2
 - Sperm concentration < 10 million/ml
 - Total sperm number > 33 million per ejaculate
 - More than 4 % normal morphology
 - Vitality-live sperm >55%
23. A 38 year, G6P5 presents with hyperemesis gravidarum and vaginal bleeding at 14 weeks. On her abdominal examination size of the uterus is 18 weeks and ultrasound report show a snowstorm appearance. What is your most likely diagnosis?
- Ectopic pregnancy
 - Molar pregnancy
 - Threatened miscarriage
 - Inevitable miscarriage
 - Incomplete miscarriage

24. A primigravida presents on emergency floor with sudden abdominal pain. She has gestational amenorrhea of 8 weeks with a 4- day history of dark colored vaginal spotting. On admission, her pulse is 110/min. BP is 90/50 mmHg, temp 37°C. What is the most likely diagnosis?
- Acute appendicitis
 - Ectopic pregnancy
 - Torsion of ovarian cyst
 - Threatened miscarriage
 - Septic induced abortion
25. A primigravida, at 20-week gestation, presents with abdominal pain and mild fever. On abdominal examination uterus is tender over the fundus. USG shows a viable pregnancy of 20 weeks with an intramural fibroid of 6x7 cm. What is the most likely cause of her pain?
- Hyaline degeneration
 - Red degeneration
 - Cystic degeneration
 - Sarcomatous degeneration
 - Infection of the fibroid
26. What is the best indicator of ovarian reserve that does not change in response to gonadotrophins and hence can be measured at any point in the menstrual cycle?
- FSH
 - Estradiol
 - Inhibin B
 - Anti-Mullerian hormone
 - Serum progesterone
27. The type of HPV for genital warts is?
- HPV 16, 18
 - HPV 6, 11
 - HPV 31, 33
 - HPV 35, 36
 - HPV 33, 45
28. A 60-year-old woman presents with weight loss and offensive vaginal discharge. Examination reveals a tumor involving upper two third of vagina and parametrium. A biopsy shows squamous cell carcinoma of cervix. The stage of her disease is?
- Stage IB
 - Stage IIA
 - Stage IIB
 - Stage IIIA
 - Stage IIIB

29. Endometrial cancer is the most common gynecological malignancy. What is the most common type of endometrial cancer?
- Adenocarcinoma
 - Mucinous carcinoma
 - Sarcoma
 - Serous carcinoma
 - Undifferentiated
30. High grade serous carcinomas account for what percentage of all epithelial ovarian cancer?
- 45 %
 - 55%
 - 65 %
 - 75 %
 - 85%
31. Risk factors for endometrial cancer doesn't include?
- Obesity
 - Diabetes
 - Multiparity
 - Nulliparous
 - Tamoxifen
32. A 20- year lady presented in gynae OPD with complaint of abdominal pain for 1 month. Ultrasonography shows a cyst of about 5x6cm with hair, teeth, bone and cartilage. What would be the most probable type of ovarian tumor?
- Brenner tumor
 - Dermoid cyst
 - Functional ovarian cyst
 - Mucinous cystadenoma
 - Serous cystadenoma
33. A 60 years old Para 1, presented with history of abdominal distension and pain for last 3 months. On examination, there is a fixed hard mass in right adnexa. Provisional diagnosis of CA ovary has been made. What is the commonest type of ovarian cancer?
- Dysgerminoma
 - Epithelial tumor
 - Granulosa cell tumor
 - Germ cell tumor
 - Sertoli Leydig cell tumor
34. Beta HCG is the tumor marker of which type of ovarian tumor?
- Dysgerminoma
 - Epithelial ovarian tumor
 - Granulosa cell tumor
 - Sertoli Leydig cell tumor
 - Teratoma

35. A 30 years old nulliparous female presents in emergency with history of severe lower abdominal pain associated with nausea and vomiting for one day. Her pulse is 120/min. On abdominal examination, there is tenderness with guarding and rigidity. Ultrasonography shows a cyst of about 10x8 cm in right adnexa. What is the most likely diagnosis?

- a. Acute appendicitis
- b. Ectopic pregnancy
- c. Hemorrhagic Ovarian cyst
- d. Ovarian carcinoma
- e. Torsion of ovarian cyst

36. A 40 years of age lady presents with lower abdominal pain. On ultrasound there is cyst of about 8x8 cm in left adnexa. You have advised CA 125. CA-125 is a tumor marker of which type of ovarian tumor?

- a. Brenner tumor
- b. Choriocarcinoma
- c. Dysgerminoma
- d. Epithelial ovarian tumor
- e. Granulosa cell tumor

37. A 45 year, P1, presents with history of amenorrhea for last 6 months. There is also history of hirsutism and deepening of voice. What is your probable diagnosis?

- a. Brenner tumor
- b. Choriocarcinoma
- c. Dysgerminoma
- d. Epithelial ovarian tumour
- e. Sertoli Leydig cell tumour

38. A 52- year, P 4+0, underwent surgery for ovarian tumor which was confirmed as granulosa cell tumor on histopathology report. In order for surveillance for recurrence of tumor mass, which of hormones is used?

- a. Androgens
- b. Alpha-feto protein
- c. Beta hCg
- d. CA-125
- e. Inhibin

39. A 25 year, primigravida at 8 weeks of gestation presents with lower abdominal pain. On ultrasound there is intrauterine pregnancy with positive fetal cardiac activity and bilateral ovarian cyst. Which type of ovarian cyst is present in pregnancy?

- a. Corpus luteal cysts
- b. Follicular cysts
- c. Inflammatory cysts
- d. Hemorrhagic cysts
- e. Theca luteal cysts

40. A 40 year, multigravida, presents in gynae OPD with secondary amenorrhea of 15 months. After initial assessment you suspect premature menopause. Which hormone you will advise to confirm diagnosis?
- Increased levels of Follicle stimulating hormone
 - Decreased levels of Follicle stimulating hormone
 - Increased levels of luteinizing hormone
 - Decreased levels of luteinizing hormone
 - Serum testosterone
41. Staging laparotomy is performed for surgical treatment of carcinomas. Staging laparotomy includes?
- Total abdominal hysterectomy
 - Total abdominal hysterectomy + bilateral salpingo oophorectomy
 - Total abdominal hysterectomy + bilateral salpingo oophorectomy + peritoneal washings
 - Total abdominal hysterectomy + bilateral salpingo oophorectomy + peritoneal washings + omentectomy
 - Total abdominal hysterectomy + bilateral salpingo oophorectomy + peritoneal washings + omentectomy + lymph nodes dissection
42. The average age of menopause is?
- 49 – 50 years
 - 50 – 51 years
 - 51 – 52 years
 - 52 – 53 years
 - 53 – 54 years
43. A 25 year female presented in OPD with a large solid ovarian mass. Final diagnosis made was dysgerminoma. What is the 5 years survival rate of stage I dysgerminoma?
- 30%
 - 50%
 - 70%
 - 80%
 - 90%
44. A 49- year- old patient comes to you with complaint of hot flushes and night sweats for the last 3 months. She also had menstrual irregularity. You counsel her about perimenopausal changes. Cause of her symptoms is?
- Loss of modulating effect of estrogen on serotonergic receptors in brain
 - Loss of modulating effect of progesterone on serotonergic receptors in brain
 - Loss of modulating effect of testosterone on serotonergic receptors in brain
 - Loss of modulating effect of inhibin on serotonergic receptors in brain
 - Loss of modulating effect of follicle stimulating hormone on serotonergic receptors in brain

A 45 years old patient has undergone hysterectomy for severe endometriosis. Three months later she reports to you with post-menopausal symptoms (hot flushes and night sweats). Which type of menopause is she having?

- a. Surgical
- b. Medical
- c. Iatrogenic
- d. Premature
- e. Natural

46. Ovarian cancer staging is based on clinicopathological assessment, using the FIGO staging system. What is the most common stage at which patients usually present?

- a. Stage I
- b. Stage II
- c. Stage III
- d. Stage IV
- e. Stage V

47. A 60 years old patient comes in gynae OPD with menopause for the last 8 years. She gives history of backache and bone pains for the last 3 years. Which of the following is not a risk factor for osteoporosis?

- a. Long term use of steroid
- b. Family history of osteoporosis
- c. Menopause
- d. Immobility
- e. Diabetes

48. Regarding ovarian cancer, what is the most important factor for future prognosis of the disease?

- a. Stage of disease
- b. Volume of residual disease post-surgery
- c. Age at presentation
- d. Histological type and grade of tumor
- e. Surgeon who treated the patient

49. A 68 years old woman presents with complaint of vaginal burning and itching. She is post-menopausal for the last 10 years. What is the most probable cause of her complaint?

- a. Deficiency of estrogen
- b. Excess of estrogen
- c. Deficiency of progesterone
- d. Excess of progesterone
- e. Deficiency of testosterone

50. A 50 years old nulliparous woman presents with abdominal mass. There is history of anorexia and weight loss. Which of the following risk factor is not associated with increased risk of ovarian cancer?

- a. Endometriosis
- b. Multiparity
- c. Nulliparity
- d. Family history
- e. Smoking