

7. A 35 yrs, P3, comes in OPD with H/O recurrent vaginal discharge for last three months. On P/S examination the discharge is off white, homogenous with a fishy smell. 0.5
- a. What is the most likely diagnosis? Bacterial Vaginosis (123) 1
- b. What is the diagnostic criteria for this condition? 1.5
- c. What treatment will you offer? 1
8. A G2P1 comes in emergency with H/O gestational amenorrhea of 5 weeks and lower abdominal pain with syncopal attacks for one day. She is pale, pulse is 110/min, BP is 95/60mmHg. Her USG report shows empty uterus with an adnexal mass of 3 cm on the right side and free fluid in the pouch of douglas. Ectopic pregnancy. 0.5
- a. What is the most likely diagnosis? (62) 1
- b. What are the specific investigations for this condition? (327045) 1
- c. What treatment will you offer? 1
9. A 35 years, P4+0 comes in OPD with H/O Intermenstrual and post-coital bleeding for last 6 months. On P/S examination, there is a cauliflower like growth on the anterior lip of the cervix of 2x2cm that bleeds to touch.
- a. What is the differential diagnosis? - Cervical cancer 1.5
- b. What is the lymphatic drainage of cervix? - cervical plexus 1.5
- (31045)
10. A 40 years old P4+0 presents with lower abdominal pain, distension with anorexia and weight loss. On examination she has 20 weeks size mass arising out of pelvis and uterus is of normal size. ovarian cancer ONCA Ovarian CA 0.5
- a. What is the likely diagnosis? (196) 1
- b. What specific investigations will you order to confirm your diagnosis? (196) 1.5
- c. How will you manage her after investigations? 1.5

- Ant: ξ lateral cervix drains into external iliac nodes that drains into para-aortic nodes
- Posterior ξ lateral cervix drains into internal iliac nodes that drains into para-aortic nodes
 - Part of posterior cervix drains into obturator ξ presacral nodes.