GYNAE MCQs

- 1. First phenotypic sign of puberty is:
 - a. Adrenarche
 - b. Gonadarche
 - c. Thelarche
 - d. Pubarche
 - e. Menarche
- 2. Increase in blood volume in normal pregnancy is made up of:
 - a. plasma only
 - b. erythrocyte only
 - c. more plasma than erythrocyte
 - d. more erythrocyte than plasma
 - e. all of the above
- 3. changes in urinary tract system in pregnancy include:
 - a. increase GFR
 - b. decrease RPF
 - c. increase in both when patient is spine
 - d. increase in amount of Dead Space in urinary tract
 - e. increase in the BUN and Creatinine
- 4. during normal pregnancy the renal gfr can increase as much as:
 - a. 10%
 - b. 25%
 - c. 50%
 - d. 75%
 - e. 100%
- 5. the source of progesterone that maintains the pregnancy during early first trimester:
 - a. Placenta
 - b. Corpus luteum
 - c. Corpus albicans
 - d. adrenal glands
 - e. Endometrium

- 6. Which of the following medications which give before and during pregnancy may help to protect neural tube defects:
 - a. vitamin B
 - b. Iron
 - c. Folic acid
 - d. Zinc
 - e. magnesium
- 7. primary chronic villi developed between:
 - a. 9 to 10 weeks
 - b. 10 to 11 weeks
 - c. 11 to 12 weeks
 - d. 12 to 13 weeks
 - e. 13 to 15 weeks
- 8. the following vessels are all branches of internal iliac artery except:
 - a. Superior vesicle
 - b. vaginal artery
 - c. uterine artery
 - d. ovarian artery
 - e. internal pudendal artery
- 9. The absence of vagina is common in which of following:
 - a. congenital adrenal hyperplasia in female infant
 - b. turner's syndrome
 - c. Association with an absent or rudimentary uterus
 - d. medication induced fetal masculinization of female infant
 - e. gonadal dysgenesis
- 10. the most common cause of precocious puberty is:
 - a. Idiopathic
 - b. McCune-Albright syndrome
 - c. Gonadoblastoma
 - d. Abnormal Skull Development
 - e. Granulosa cell tumor

- 11. bartholin's abscess
 - a. Is often asymptomatic
 - b. Bilateral
 - c. most common due to gonococcal infection
 - d. Best treated surgically
 - e. is usually presented as painful swelling to one side of clitoris
- 12. sexual differentiation
 - a. development of male genitalia depends on presence of functioning testis
 - b. due to absence of testis x x foetus exposed to androgens and will not masculinzed
 - c. Development of female genitalia required presence of ovary
 - d. 45X0 foetus will have normal ovary
 - e. development of testes does not require presence of Y chromosome
- 13. in testicular feminization
 - a. the chromosome status is xxy
 - b. the Gonads should be removed after puberty
 - c. the patient adopts male role and appearance
 - d. breast are absent
 - e. voice is male
- 14. Precocious puberty may be seen in all except:
 - a. granular cell tumor
 - b. corticosteroid injection
 - c. head injury
 - d. Theca cell tumor
 - e. hyperthyroidism
- 15. the proliferative phase occurs at
 - a. Day 4-8
 - b. day 1-4
 - c. day 14 to 28
 - d. day 8 to 14
 - e. Day 5 to 13

- 16. the common congenital cause of amenorrhea
 - a. Hyperprolactinemia
 - b. Hypothalamic gonadism
 - c. physical amenorrhea
 - d. PCOS
 - e. turner's syndrome

17. menstruation occurs at:

- a. Day 4-8
- b. day 1-4
- c. day 14 to 28
- d. day 8 to 14
- e. Day 5 to 13
- 18. Unilateral and painful Lesions is formed in lower Vastibule adjacent to vaginal wall what disease is this a description of:
 - a. bartholin cyst
 - b. Condyloma
 - c. lichen sclerosus
 - d. vulvar carcinoma
 - e. vaginal cancer
- 19. which is not a feature of late onset congenital adrenal hyperplasia at puberty:
 - a. Clitoromegaly
 - b. blind vagina
 - c. Hirsutism
 - d. Menstrual disturbance
 - e. virilization
- 20. Most common cause of ambiguous genitalia in newborn with XX is:
 - a. androgen insensitivity syndrome
 - b. true hermaphroditism
 - c. congenital adrenal hyperplasia
 - d. maternal injection of androgenic substance
 - e. mixed gonadal dysgenesis

- 21. primigravida present in antenatal clinic, Her LMP is 25Feb, 2016. what is the estimated date of delivery?
 - a. 25 November 2016
 - b. 25 December 2016
 - c. 12 December 2016
 - d. 2 November 2017
 - e. 2 December 2017
- 22. A G5 P4 Conceived during laudation amenorrhea comes to ANC in her first trimester you are advised her getting scan on Ultrasound the accurate dating is done by measuring:
 - a. Crown rump length
 - b. bi parietal diameter
 - c. head circumference
 - d. abdominal circumference
 - e. femur length
- 23. which of the following test is used in screening for down syndrome
 - a. Ca125
 - b. Carcinoembryonic antigen
 - c. Triple screening test
 - d. fsh LH
 - e. Thyroid test
- 24. 30 year old PG presents to do you at 14 weeks of gestation she is concerned about normality of baby at what time you will advise her to do detailed fetal anomaly scan:
 - a. 22 to 24 weeks
 - b. 14 to 16 weeks
 - c. 18 to 22 weeks
 - d. 10 to 14 weeks
 - e. 22 to 24 weeks
- 25. the best time to do chronic villus sampling is between
 - a. 6 to 8 weeks
 - b. 7 to 9 weeks
 - c. 9 to 10 weeks
 - d. 11 to 13 weeks
 - e. from 20 weeks

- 26. the use of Folic acid to prevent congenital Diseases best initiative
 - a. during 1st trimester
 - b. during second trimester
 - c. during third trimester
 - d. before conception
 - e. throughout pregnancy
- 27. home Doppler ultrasound blood flow waveform in uterine arteries that predicts preeclampsia is:
 - a. early diastolic notch
 - b. absent diastolic flow
 - c. low diastolic flow
 - d. low systolic flow
 - e. reverse end diastolic flow
- 28. in first trimester aneuploidy is screened by
 - a. Nuchal translucency
 - b. CRL
 - c. Aminocentesis
 - d. fetal blood rambling
 - e. Doppler usg
- 29. With regard to anatomy of maternal pelvis
 - a. The Pudendal nerve passes in front of ischial spines
 - b. the anterior posterior diameter of pelvic inlet is 11 cm
 - c. anterior posterior diameter of pelvic outlet is 11 cm
 - d. levator Ani muscle forms perineal body
 - e. angle of pelvic inlet is horizontal usually 100 degrees
- 30. 28 year old woman complains of Malaria after having D and C the most likely diagnosis is:
 - a. kaalmanns syndrome
 - b. turner's syndrome
 - c. asherman's syndrome
 - d. down's syndrome

- 31. the diameter that present in a well formed fetal head is
 - a. Biparietal diameter
 - b. Occipito frontal diameter
 - c. Mentovertical
 - d. bi temporal
 - e. Sub-occipito bregmatic
- 32. Turner syndrome is associated with:
 - a. absent uterus
 - b. normal breast development
 - c. primary amenorrhea
 - d. Hirsutism
 - e. normal height
- 33. uterine blood flow at term is:
 - a. 50 to 70 ml per minute
 - b. 150 to 200 ml per minute
 - c. 200 to 300 ml per minute
 - d. 350 to 4000 ml per minute
 - e. 7500 ml per minute
- 34. a 15 year old girl presented to you with primary amenorrhea she gives history of cyclical abdominal pain every month and having urinary retention for one day what is diagnosis:
 - a. polycystic ovaries
 - b. Kalman syndrome
 - c. imperforate hymen
 - d. Prolactinoma
 - e. Endometrinoma
- 35. a 20 year old PG has just deliver vaginally 36 minutes after delivery of placenta she started bleeding heavily ultrasound shows a lobe of placenta inside the uterine cavity what is the likely cause
 - a. Vasa previa
 - b. placenta previa
 - c. placental abruption
 - d. succenturiate lobe of placenta
 - e. Placental infection

- 36. regarding fetal circulation at birth cessation of umbilical causes cessation of flow in:
 - a. ductus venosus
 - b. ductus arteriosus
 - c. pulmonary vasculature
 - d. right Atrium
 - e. all of the above
- 37. MRs bi is presented to you for booking visit in her second pregnancy she is at10 weeks of gestation you will advise the following blood test except
 - a. complete blood count
 - b. blood group
 - c. hbs AG
 - d. HIV
 - e. torch
- 38. following are conditions of physiological amenorrhea except
 - a. before puberty
 - b. after puberty
 - c. Pregnancy
 - d. Menopause
 - e. lactation
- 39. the peritoneal pelvic cavity can easily be enter through vagina:
 - a. anterior vaginal wall
 - b. posterior vaginal fornix
 - c. Lateral vaginal wall
 - d. anterior vaginal fornix
 - e. lateral vaginal fornix
- 40. fertilization usually occurs in the
 - a. ampulla of uterine tube
 - b. peritoneal cavity
 - c. posterior fornix of vagina
 - d. uterine cavity
 - e. cervix of uterus

- 41. in Rokitansky Syndrome there is
 - a. absence of uterus
 - b. closure of lower Two third of vagina
 - c. agenesis of uterus and vagina
 - d. absence of ovaries
 - e. Pseudo Amenorrhea
- 42. embryologically which of following develop from urogenital fold in female external genitalia
 - a. glans clitoris
 - b. labia majora
 - c. labia minora
 - d. Hymen
 - e. greater vestibular glands
- 43. lower one third of vagina embryologically originate from
 - a. genital tubercle
 - b. genital swelling
 - c. urogenital sinus
 - d. urethral folds
 - e. Müllerian ducts
- 44. The stage of gestational development in which endometrial implantation occurs in which of the following:
 - a. 8 cell embryo
 - b. Zygote
 - c. marula formation
 - d. Blastocyst
 - e. embryonic disk
- 45. miscarriage is defined as spontaneous loss of pregnancy before:
 - a. 18 weeks
 - b. 20 weeks
 - c. 22 weeks
 - d. 24 weeks
 - e. 26 weeks

- 46. the first embryonic structure that becomes visible in chorionic cavity
 - a. Primitive yolk sac
 - b. fetal pole
 - c. gestational sac
 - d. secondary yolk sac
 - e. fetal head
- 47. The maximum number of Oogonia is found at what age:
 - a. first month gestational age
 - b. 5 months gestation
 - c. Birth
 - d. Puberty
 - e. 21 years of age
- 48. The paramesonephric duct will form which of following:
 - a. prostatic utricle
 - b. seminal vesicle
 - c. oviduct, uterus and upper vagina
 - d. Upper Vagina only
 - e. Ureter
- 49. Which of following is a result of lack of fusion of mullerian duct system
 - a. uterine didelphys
 - b. TVS
 - c. Unilateral renal agenesis
 - d. imperforate hymen
 - e. ovarian remnant syndrome
- 50. the following evaluation done during routine antenatal care in a normal pregnancy the most important initial clinic visit is which of following:
 - a. Routine measurement of fundus
 - b. determination of gestational age
 - c. determination of maternal BP
 - d. maternal urine analysis
 - e. maternal weight