

Class Test Final Year MBBS

16<sup>th</sup> July, 2021

Total marks: 25

Time allowed: 30min.

Attempt all questions.

Q1. A 25-year old lady presents in OPD with complain of lower abdominal pain. On ultrasound there is a multiseptated cyst with solid and cystic components & calcifications. Most probable diagnosis is?

- A) Corpus luteal cyst
- B) Dermoid cyst
- C) Epithelial ovarian tumor
- D) Hemorrhagic cyst
- E) Tubo-ovarian abscess

Q2. A 18-year-old girl present in emergency with C/O acute, severe lower abdominal pain along with nausea and vomiting. On examination she is tender in the left side of lower abdomen. Ultrasound shows left adnexal cyst of 5x6cm. What is the management of this patient?

- A) Analgesics
- B) Conservative management
- C) Emergency laparotomy
- D) IV fluids and antibiotics
- E) Ultrasound guided aspiration of cyst

Q3. A 40-year old lady presents in OPD with C/O lower abdomen pain for last 6 months. She also gives history of abdominal distension. On ultrasound there is a large cyst which is multiloculated. CA 125 is normal. What is the most likely diagnosis?

- A) Germ cell tumor
- B) Inflammatory ovarian cyst
- C) Mucinous cyst adenoma
- D) Serous cyst adenoma
- E) Sex cord stromal tumor

Q4. The most likely cause of abnormal uterine bleeding in 13 years old girl is?

- A) Anovulation
- B) Ectopic pregnancy
- C) Systemic bleeding diathesis
- D) Trauma
- E) Uterine cancer

Q5. The most common symptom of endometrial hyperplasia is?

- A) Abdominal distention
- B) Amenorrhea
- C) Pelvic pain
- D) Vaginal bleeding
- E) Vaginal discharge

Q6. Gonadotropin releasing hormone (GnRH) stimulates the release of?

- A) ACTH
- B) Growth hormone
- C) Luteinizing Hormone (LH)
- D) Opiate peptides
- E) Thyroid stimulating hormone (TSH)

Q7. A 28-year-old patient complains of amenorrhea after having dilatation and curettage. The most likely diagnosis is?

- A) Anorexia nervosa
- B) Asher man's Syndrome
- C) Kalman's Syndrome
- D) Pelvic inflammatory disease
- E) Turner's Syndrome

Q8. Menarche usually occurs at age of?

- A) 8 and 10 years
- B) 11 and 13 years
- C) 14 and 16 years
- D) 17 and 18 years
- E) 18 and above

Q9. A 43-year old lecturer has come to you with complaints of heavy but regular menstrual bleeding with flooding and clots. On USG there is no anatomical abnormality for heavy flow. The most effective remedy for reducing her menstrual flow is?

- A) Depo Medroxyprogesterone acetate
- B) Dilatation and Curettage.
- C) Ergometrine
- D) Misoprostol.
- E) Tranexamic acid

Q10. A 39 years, Para 6 has presented with a complaint of post coital bleeding for the past three months. On examination there is fleshy growth of 2x2 cm coming out of cervix. The most probable diagnosis is?

- A) Cervical ectropion
- B) Cervical polyp
- C) Endometrial hyperplasia
- D) Ovarian mass
- E) Uterine fibroid

Q11. A 23 years young girl presented with complaint of abdominal pain, menorrhagia & increased frequency of micturition. On abdominal examination there is an 18 weeks size mass arising from hypogastrium. The most likely diagnosis is:

- A) Endometriosis.
- B) Fibroid uterus
- C) Mesenteric cyst
- D) Ovarian cyst
- E) Pelvic inflammatory disease

Q12. A young medical student has come to you with complaints of oligomenorrhea, hirsutism and weight gain. USG reveals bulky ovaries with subcapsular cysts. Most likely diagnosis is:

- A) Cushing's syndrome.
- B) Diabetes mellitus
- C) Ovarian cancer
- D) Pelvic inflammatory disease
- E) Polycystic ovarian disease

Q13. A 36 -year female presents in gynae OPD with a pelvic mass, amenorrhea and signs of virilization. Most likely diagnosis is?

- A) Choriocarcinoma
- B) Dysgerminoma
- C) Endometrioid CA
- D) Sertoli Leydig cell tumour
- E) Teratoma

Q14. A 45 -year old woman presents in OPD with complain of increasing abdominal girth and fullness for 6 months. Abdominal examination reveals fluid thrill and bilateral adnexal masses. Serum Ca 125 is elevated. Which of the following is most likely diagnosis?

- A) Benign cystic teratoma
- B) Endometrial Ca
- C) Invasive cervical squamous Ca
- D) Serous cystadenocarcinoma ovary
- E) Serous cyst adenoma ovary

Q15. Which of the following is the tumour marker for endodermal yolk sac tumour?

- A) AFP
- B) Ca 125
- C) Ca 19-9
- D) HCG
- E) Inhibin

Q16. Following are the risk factors for ovarian Ca except?

- A) Cigarette smoking
- B) COCPs
- C) Endometriosis
- D) Nulliparity
- E) Obesity

Q17. A 52-year nulliparous female presented in OPD with persistent abdominal pain, bloating and irregular bleeding. On examination, there is a fixed mass. Which of the following is the initial imaging modality?

- A) Barium enema
- B) CT scan
- C) MRI
- D) Transvaginal scan
- E) X-ray abdomen pelvis

Q18. Which of the following is the screening test for ovarian CA

- A) Ca 125
- B) None
- C) Pap smear
- D) Transvaginal scan
- E) X-ray pelvis

Q19. A 47years, P5, presented in OPD with complain of heavy menstrual bleeding for last 1 year. Her cycle is regular but she soaks 4-5 pads /day. On USG her uterus size is 8x5x5cm, endometrial thickness is 9mm. How would you investigate her further?

- A) CT-Scan
- B) E & C
- C) MRI
- D) Pipelle sampling
- E) X-Ray

Q20. A 42 years, P4, presented in OPD with H/O heavy menstrual bleeding. She took medical treatment but didn't get better. USG pelvis shows normal size uterus & 2x1 cm endometrial polyp. What is best management option in this patient?

- A) Diagnostic D & C
- B) Hysterectomy
- C) Mirena
- D) Outpatient hysteroscopy with endometrial biopsy & Polypectomy
- E) Tranexamic acid & NSAIDS



Q21. A 40 years, P4 present in OPD with C/O irregular heavy menstrual bleeding. She is hypertensive for the last 6 years. On USG she has normal size uterus with endometrial thickness of 8 mm. She is not compliant with medical treatment. What is best management you can offer her?

- A) Cu-IUCD
- B) GnRH agonist
- C) Implanon
- D) LNG-IUS
- E) OCPs

Q22. A 22 years girl, married for 1 year, came in OPD with primary subfertility. She is obese and has irregular prolonged cycles. She gives history of increase growth of facial hair since last 6 months. On USG there are small multiple follicles in both ovaries. What is the first line management in this patient?

- A) Clomiphene
- B) COCP
- C) GnRH analogs
- D) Laparoscopic Ovarian drilling
- E) Weight reduction /Diet modification & Exercise

Q23. A 65 years, P3, presents in OPD with C/O vaginal bleeding for the last 3 days. She is postmenopausal for last 15 years. On examination vulva is normal looking & vaginal epithelium seems thin & broken down, otherwise cervix is normal looking. What is the most common cause of postmenopausal bleeding?

- A) Atrophic vaginitis
- B) Cervical CA
- C) Endometrial CA
- D) Endometrial poly
- E) Ovarian CA

Q24. A 45years, P4, presented in OPD with C/O heavy menstrual bleeding for the last 4 years. She has taken multiple medical treatments but didn't get better. Her USG shows a myometrial fibroid of 7x5cm. She wants definitive treatment. What is best option for her?

- A) Hysterectomy
- B) LNG-IUG
- C) Laparoscopic Hysterectomy
- D) Myomectomy
- E) TAH + BSO

5. A 14-year old girl, presents in emergency with heavy vaginal bleeding. She gives H/O heavy menstrual bleeding since menarche. She had 2 blood transfusions in last 3 months. On examination she is pale, her Hb is 9g/dl. Pelvic USG is unremarkable. What is the most appropriate test you will carry out.

- A) Coagulation Profile
- B) Chest X-Ray
- C) CT- Scan
- D) LFTs
- E) Urine complete examination