

Gynae/OBS MCQs

1. 23 years old primigravida is at 32 weeks of gestation she is known asthmatic taking tablet Salbutamol and ventide inhaler. what would be the best management plan for Her during pregnancy:
 - A. continue the same drugs
 - B. stop all drugs
 - C. Stop salbutamol
 - D. stop ventide inhaler
 - E. Start corticosteroids
2. One of the following is not a possible symptom caused by fibroids
 - a. pelvic pain
 - b. Subfertility
 - c. pressure symptom
 - d. deep vein thrombosis
 - e. heavy menstrual bleeding
3. antiepileptic drugs taken during pregnancy may increase the risk of baby having deficiency of which vitamin
 - a. vitamin E
 - b. Vitamin D
 - c. vitamin A
 - d. vitamin B12
 - e. vitamin K
4. what is the most common cause of prolonged first stage of labour
 - a. CPD
 - b. Malpresentation
 - c. malposition
 - d. insufficient uterine contraction
 - e. pelvic bone deformity
5. during pregnancy women needs additional iron to satisfy the demands of the foetus the Placenta and her own increasing hemoglobin mass. total antepartum iron need is approximately:
 - a. 250mg
 - b. 1000 mg
 - c. 1350 mg
 - d. 1800 mg
 - e. 2500 mg

6. in prolong pregnancy all the following are true except:
 - a. gestational age beyond 43 week
 - b. Associated and meconium steroid liquor
 - c. The foetus has long nails and dry skin
 - d. may result in oligohydramnios
 - e. associated with fetal hypoxia

7. the maximum rise in HB achievable with whether oral or parenteral iron is
 - a. 1.5 g/dl/ week
 - b. 0.5 g/dl/ week
 - c. 1 g/dl/ week
 - d. 0.8 g/dl/ week
 - e. 2 g/dl/ week

8. Bishop score include all except:
 - a. effacement of cervix
 - b. dilation of cervix
 - c. station of head
 - d. position of cervix
 - e. interspinous diameter

9. which of the following is used as an emergency contraceptive:
 - a. Levonorgestrel
 - b. COCP
 - c. Mini pills
 - d. depo provera
 - e. Ergometrine

10. serum prolactin level is highest in which of the following condition
 - a. Menopause
 - b. Ovulation
 - c. Lactation
 - d. Sleep
 - e. Running

11. maximum normal limit for second stage of labour in primary gravida without epidural analgesia:
 - a. 20 minute
 - b. 60 minute
 - c. 120 minute
 - d. 240 minute
 - e. there is no normal maximum

12. a 26 year old primigravidae at 42 weeks of gestation comes for induction of labour. her cervix is long thick and closed. pge2 gel is placed into vagina. in approximately 60 minutes FHR falls to the 90s and uterus start contracting every 1 minute with no rest in between contraction which of the following was most likely the cause of Uterine hyperstimulation:
- Infection
 - IV fluids
 - post dates pregnancy
 - pge2 gel
 - Vaginal examination
13. G2 P1, previous 1 cesarean section has reached 36 week gestation she is afraid of repeated cesarean section and wants to know the possibility of success of labour in her present pregnancy:
- 30%
 - 50%
 - 90%
 - 70%
 - 60%
14. A 25 year old school teacher P1 wants to use contraceptive tablets for contraception he is asking about the mode of action of oral contraceptive tablets the mode of action of oral tablets is:
- inducing endometrial atrophy
 - Increase cervical mucus thickness
 - inhibiting LH
 - all of the above
15. The expected date of delivery of human pregnancy can be calculated
- from a change in the patients weight
 - as 10 lunar months after the time of ovulation
 - as 40 weeks after last menstrual period
 - as 280 days from the last full moon
 - as 36 weeks after the last menstrual period
16. Uterine cervix:
- portion of uterus below the isthmus
 - external OS cell lining is columnar epithelium
 - literally is attached to the round ligament
 - the cervical Canal is covered with stratified squamous epithelium
 - can be dilated with dilation without the need of anaesthesia

17. the most important muscles in the pelvic floor is:
- Bulbocavernosus
 - Ischiocavernosus
 - Levator ani
 - superficial transverse perineal muscle
 - Deep transverse perineal muscle
18. hyperextension of the fetal head is found in
- vertex presentation
 - face presentation
 - shoulder presentation
 - breech presentation
 - hydrocephalic bodies
19. On abdominal examination when only one fifth of the head is palpable indicates:
- head is free floating
 - head is engaged
 - forceps may not be used
 - head is at the level of ischial spines
 - Always occur in term brow presentation
20. what is the station where the presenting part is at the level of the ischial spines:
- 2
 - 1
 - 0
 - +1
 - +2
21. A primipara is in labour and needs an episiotomy. Compared with a midline episiotomy, Advantage of medial lateral episiotomy is:
- Ease of repair
 - fewer breakdowns
 - Lower blood loss
 - Less dyspareunia
 - less extension of incision
22. unstable lie is associated with all the following except:
- Prematurity
 - Grand multiparity
 - placenta previa
 - Fundal fibroid
 - cervical fibroid

23. the heart rate of normal foetus at term:
- 80-100 bpm
 - 100-120 bpm
 - 120 - 160 bpm
24. Which of the following is not a characteristic of Normal labour:
- progressive cervical dilation
 - increasing intensity of contraction
 - uterine relaxation between contractions
 - moderate bleeding
 - Moderate pain
25. Bishop score is used to predict:
- state of the foetus at the time of delivery
 - success rate of induction of labour
 - fetal condition in the uterus
 - maternal well-being in labour
 - maternal well being Postpartum
26. Pregnant patients with bicornuate uterus can get all the following except :
- Polyhydramnios
 - Abortion
 - preterm labour
 - abnormal fetal lie
 - retained placenta
27. increase in blood volume in normal pregnancy is made up of:
- Plasma only
 - Erythrocytes only
 - more plasma than Erythrocytes
 - More Erythrocytes then plasma
 - all of the above
28. in foetus the most well oxygenated blood interest systemic circulation through:
- ductus arteriosus
 - foramen ovale
 - right ventricle
 - ligamentum teres
29. changes in the urinary tract system in pregnancy:
- increase the glomerular filtration rate
 - decrease in Renal plasma flow
 - marked increased in both GFR and RPF when the patient is supine
 - increase in the amount of Dead Space in the union retract
 - increase in BUN and Creatinine

30. lower hemoglobin during normal pregnancy is physiological finding it is mainly due to:
- low iron stores in women
 - blood loss to the placenta
 - increased plasma volume
 - increased cardiac output resulting in Greater red cell destruction
 - decrease reticulocytosis
31. during normal pregnancy the renal glomerular filtration rate is increased as much as:
- 10%
 - 25%
 - 75%
 - 100%
32. in normal physiological changes in pregnancy all of the following are increased except
- Gfr
 - stroke volume
 - peripheral resistance
 - plasma volume
 - white blood cells
33. all of the following causes oligohydramnios except
- renal agenesis
34. which of the following causes of polyhydramnios is most common
- twin pregnancy
 - Diabetes
 - hydrops Fetalis
 - Anencephaly
 - idiopathic
35. if your patient is 8 weeks pregnant which of the following ultrasound measurement is most useful
- Crown lump length
 - Biparietal diameter
 - Femur length
 - placental side
 - abdominal circumference
36. the following statements are true about hyperemesis in pregnancy except:
- may be cured by admission to hospital
 - is commonest in the third trimester
 - associated with multiple pregnancy
 - is associated with trophoblastic disease
 - is associated with urinary tract infection

37. ultrasound in first trimester of pregnancy is done for:
- placental localisation
 - detection of fetal weight
 - assessment of amniotic fluid volume
 - detection of fetal breathing
38. Which changes in uterine fibroid occur during pregnancy:
- Red degeneration
 - cystic degeneration
 - Calcification
 - sarcomatous change
39. 32 year old P3 Ud come to you for advice after evaluation you have decided to offer her progesterone only methods. following would be the available option except
- COCP
 - Mini pill
 - Depo provera injection
 - Mirea
40. in relation to the woman who is pregnant with epilepsy:
- carbamazepine associated with fetal cardiac anomalies
 - antiepileptic would be discontinued due to teratogenicity
 - IV mgso₄ is the drug of choice to create the status epilepsy
 - vitamin K supplementation should be given
 - routine ultrasound scan is recommended for detection of a normally at 22 - 24 weeks gestation
41. the Risk of endometrial cancer is higher in the following histological pattern of endometriosis:
- simple hyperplasia without atypia
 - simple hyperplasia with cystic
 - complex hyperplasia without atypia
 - complex hyperplasia with atypia
 - benign hyperplasia
42. IUCD prevent pregnancy by all of the following mechanism except:
- creating chronic endometritis
 - Inducing endometrial atrophy
 - inhibiting ovulation
 - preventing implantation
 - by destroying sperms

43. epidural analgesia is contraindicated if there is:
- lack of trained staff
 - Coagulopathy
 - success of the site
 - the fibrile toxicity
 - past history of use of epidural analgesia in labour
44. risk and complication of indication of labour include all of the following except
- field induction
 - Uterine hyperstimulation
 - atopic PPH
 - uterine rupture in multigravida with previous cesarean section
 - less need of analgesia
45. Postpartum vaginal discharge containing blood mucus and decidual tissue is called:
- Stow
 - Liquor
 - Lochia
 - PPH
 - APH
46. a young girl 23 year old is presented with complaint of abdominal pain menorrhagia and 18 weeks size mass rising from hypogastrium the most likely diagnosis is
- Endometriosis
 - PID
 - ovarian cyst
 - fibroid uterus
 - mesenteric cyst
47. in epileptic women who take only one anti-epileptic drug the average major congenital anomaly rate is
- 6.5%
 - 3.5 %
 - 0.5%
 - 8.5 %
 - 10.5%
48. RH negative woman has following genotype
- CDE/CDE
 - CDE/cde
 - cde/CDE
 - CDe/cde
 - cde/cde

49. Concerning pudendal block:
- relives pain due to uterine contraction
 - Patient is unable to walk
 - it it may lead to spinal headache
 - it blocks Pudendal nerve which runs in front of the ischial spine
 - it blocks Pudendal nerve which runs behind the ischial spine
50. human milk has the following advantage over formula milk
- Human milk contains more protein
 - human milk contain more lactose
 - human milk is associated with reduction in atopic less in the baby
 - Human milk is source of iron
 - human milk is a good source of vitamin K
51. If one patient has Sickle Cell disease and other has the trait what proportion of their children will have the disease:
- 0%
 - 25%
 - 50%
 - 75%
 - 100%
52. following is used to shrink the size of fibroids before myomectomy
- mefenamic acid
 - nonsteroidal anti-inflammatory Drugs
 - Tranexamic acid
 - GnRH antagonist
 - GRH agonist
53. COCP besides being used as a method of contraception can be used to treat the following except:
- Endometriosis
 - malignant ovarian cyst
 - premenstrual syndrome
 - irregular menstrual cycle
 - dysmenorrhea
54. the following are true about fibroid uterus except
- Usually multiple
 - Usually malignant
 - Usually discrete
 - Usually spherical or irregular
 - Usually enucleated From the surrounding myometrium

55. which of the following anti tuberculosis agent is associated with congenital deafness, if given to pregnant women:
- Streptomycin
 - Isoniazid
 - Rifampicin
 - Ethambutol
 - Kenamycin
56. the failure rate of bilateral tubal ligation is:
- one in hundred
 - one in thousand
 - 1 in 200
 - 1 in 500
 - 1 in 2
57. a 20 year old patient presents in OPD 3 week after delivery with standard for painful swelling in right breast she also complain fever with Rigors, what will be the most likely treatment:
- Antibiotics
 - Analgesics
 - Incision
 - Drainage
 - Conservative
 - lactation inhibition drugs
58. the protective effects of breast milk are known to be associated with
- IgM antibodies
 - Lysozyme
 - mast cell
 - IgA antibodies
 - fat content
59. according to WHO definition of the severe anaemia in pregnancy is
- 4g/dl
 - <6g/dl
 - <7g/dl
 - <5g/dl
60. G3P2 at 39 weeks of gestation came inlabour. On examination cervix was 5cm dilated and occipito posterior position. The management is:
- Infusion throughout labour
 - Wait and watch
 - Extraction
 - C-section only

MCQ#39 Which of the following anti-TB drug is not safe in pregnancy:-
a) Rifampicin b) Ethambutol c) Pyrazinamide d) Streptomycin e) Isoniazid

MCQ#40 Which of the following is not true for migraine in pregnancy:
a) Improves in pregnancy due to stable estrogen level
b) Is associated with higher incidence of preeclampsia, IUGR
c) We should start Valproate as preventive therapy
d) Drug of choice for control of acute attack is Paracetamol
e) Attacks will recur as soon as 1 week after delivery

MCQ#41 Which of the following is true for Pulmonary TB in pregnancy:
a) Treatment should be delayed till end of first trimester because of risk of teratogens
b) An open case which is sputum positive should undergo abortion
c) The baby should not be breastfed unless the mother has taken treatment for 6 months
d) It leads to higher incidence of preeclampsia & eclampsia
e) Rifampicin & INH are safe in all trimesters

MCQ#42 Hypothyroidism during pregnancy is not associated with:-
a) Fetal morbidity b) Impaired fetal cognitive development
c) Spontaneous abortion
d) Graves disease
e) Pre-eclampsia

MCQ#43 A PG is in 2nd stage of labour for the last 2 hrs. The head is palpable 3/5th abdominally. On vaginal examination, fetal head is at 2 station. CTG shows type 2 deceleration. What will be your plan of management.
a) Wait for another 1 hour
b) Emergency C-section
c) Forceps delivery
d) Give sedation to mother
e) Vacuum delivery

44. Prolonged second stage of labour occurs in:-

Epidural analgesia

Rigid perineum

uterine inertia

malposition of fetal head

All of above

The most common symptoms of endometrial hyperplasia are:-

vaginal discharge

vaginal bleeding

menorrhoea

pelvic pain

abdominal distension

Following is not an urgent indication for inducing labour:-

anaemia

clampsia

prolonged labour

pre-eclampsia

placenta-uterine fetal demise

30 year old came with sub mucous Polyp. She complains irregular heavy menses. Following is going to be the conservative management option:-

hysterectomy

hysteroscopic removal

uterine artery embolization

hysterectomy

LSC

Pr Para who has A-ve blood group. Her anti-D antibodies level was done at 34w. by immunoassay. This is risk of severe fetal hemolysis of anti-D antibodies

level is:

- a) $\geq 1 \text{ IU/ml}$
- b) $< 4 \text{ IU/ml}$
- c) $> 10 \text{ IU/ml}$
- d) $> 5 \text{ IU/ml}$
- e) $< 6 \text{ IU/ml}$

MCQ=49 To cover the chance of silent fetomaternal in primigravida who has Rh -ve blood group. At which gestation we should administer anti-D prophylactically

- a) 24 & 32 weeks
- b) 28 & 34 weeks
- c) 30 & 36 weeks
- d) After delivery
- e) 34 & 38 weeks

MCQ=50 A PG at 36 weeks of gestation wants painless delivery. Which of the following is most reliable mean of pain relief during labour?

- a) Inhalational analgesia
- b) opiates
- c) TENS
- d) Epidural analgesia
- e) All of above