



**SEND UP EXAMINATION
FINAL PROFESSIONAL PAPER
FINAL YEAR MBBS; 2018**

GYNAECOLOGY (SHORT ESSAY QUESTIONS)

Maximum marks: 30

10 SEOs; 3 marks each.

Time allowed: 2 hours 15 mins

Attempt all questions

1b) Creation of vagina comfortable for penetrative intercourse.
- Hormonal control of menstrual cycle disorders.

1. A 20 years girl brought by her mother in gynae OPD with primary amenorrhea. On examination, she has normal secondary sexual characters. On pelvic examination vagina is blind ending and short in length. Ultrasound shows normal ovaries but absent uterus.

a. What is the most likely diagnosis? Rokitansky syndrome 16 TT

b. How will you manage her? (16)

Mullerian

207
10/11
agenes

2. A new born baby was brought by her mother with ambiguous external genitalia.

a. What are the causes of masculinization in a genetic female? 258 UHS

b. How will you manage her? (272 KU)

273
UHS

3. A 25-year married for three years presented with failure to conceive. On examination, BMI is 30 and mild hirsutism:

a. What is the most likely diagnosis? PCO 1

b. How will you manage her? 2

4. A 38 years, Para 2 presented with heavy menstrual bleeding for 6 months She is otherwise fit.

a. What is first line of treatment? LNG-105 1

b. What are other options of treatment in heavy menstrual bleeding? 52 T/2

(52)

5. Forty years, P3+0 presents in OPD with history of intermenstrual and post-coital bleeding for last eight months. Colposcopic examination shows a gross lesion of <4cm confined to the cervix.

a. What is the most likely diagnosis? Endocervical polyp (Endometrial polyp)

b. What investigations will you carry out? TVUSS, outpatient hysteroscopy, saline infusion sonography.

CA & Cervix

6. A young woman came to you with history of itching and white curdy discharge. Vaginal candidiasis was diagnosed.

a. Enlist four predisposing factors. 270 UHS

b. How will you manage her? (124)

(282 UHS) 1
2

Cytology / Pap smear, HPV testing, Colposcopy



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GYNAECOLOGY

7. A fifty-five years, P7, presents with H/O urge incontinence and stress incontinence. Abdominal examination is unremarkable. Pelvis examination reveals 1st degree utero vaginal prolapse with huge cystocele. *UV prolapse 306 UHS. ant. vaginal wall prolapse*
- What is the most likely diagnosis? *1*
 - What investigations will you advise? *1*
 - What are the causes of this condition? *1322 KUHO*
8. A 32-year-old P3+0 came to you for contraception. After discussion patient opted for IUCD (Intrauterine Contraceptive Device). *277 UHS*
- Give the mechanism of action of IUCD. *1*
 - What are its complications? *2*
9. A 30-year-old woman attends the Early Pregnancy Assessment Unit at 11 weeks' gestation complaining of a brownish vaginal discharge. A transvaginal ultrasound scan reveals an appropriately sized gestation sac but no fetal pole or fetal heart pulsation consistent with a missed miscarriage.
- What are the etiological factors for miscarriage? *61 T.T. 1*
 - What are the management options? *1*
10. *242 T.T. (242)*
- What is laparoscopy? *1*
 - Enlist FOUR indications of diagnostic laparoscopy. *1*
 - What complications can occur during this procedure? *1*