

~~HCG < 3000
Absence flow
-unR flow~~

~~HCG < 3000
unruptured tubal pregnancy
→ Poco. & non palpable
→ soft non rigid uterus~~

~~IUD
endo.~~

Bacterial vaginosis \Rightarrow fishy odour
Trichomoniasis \Rightarrow strawberry cervix

Δ PID
 Δ endometriosis
 Δ chlamydia/fel

Sent up Examination 2016 Gynae final year MBBS SAQs
Total Marks: 30

Time Allowed: 2 hours

Pg: 62/63

1. A 23 year old primigravida presented with abdominal pain, syncope and vaginal spotting. Assessment revealed ectopic pregnancy.

- a. What are the indications for medical management of ectopic pregnancy? Pg # 167 (0.9 u.m.)
b. Write contraindications for medical management of ectopic pregnancy? Pg # 167 (1.5)

(2)

0-5
3-10
7+

2. A 54 year old lady presents in OPD with complaint of irritability, hot flushes, insomnia and mood swings.

- a. What are the long term effects of menopause? Pg # 167 (0.9 u.m.)
b. After how many years long term effects will appear? Pg # 167 (0.5)

(1.5)
(0.5)
(1)

(2)
(3)

- c. What are non-hormonal treatments of menopause? Pg # 167 (0.5)

(1) pipl + hyper
prostate 0.67

3. A 47 year old lady P7+0 presents in OPD with complain of something coming out of vagina for 7 months.

- a. What is the differential diagnosis? Pg # 167 (0.9 u.m.)
b. What is second degree prolapse? Pg # 167 (0.5)
c. What is the cause of congenital prolapse? Pg # 167 (0.5)

vaginal prolapse, cervical polyp, Bartholin cyst ipsilateral cervical CA.

(1)
(3) C1 dsa

weakness of CT

4. A 63 year old lady presents with abdominal mass and history of weight loss. She was diagnosed as having an ovarian tumour.

- a. What is the common type of ovarian tumour in this age group? Pg # 167 (0.9 u.m.)
b. Write risk factors for ovarian tumour? Pg # 167 (0.5)

NICE

5. A couple presented in OPD with history of infertility since two years. Wife had normal menstrual cycle and husband's semen analysis was normal. You suspected tubal blockage as a cause of infertility.

- a. What are the different methods available to check tubal patency? Pg # 167 (0.9 u.m.)
b. Which factors are responsible for tubal blockage? Pg # 167 (0.5)

(2)
(2)

6. A 25 year old school teacher P1 wants to have contraception, she is asking about different methods of contraception.

- a. What information will you give her in contraception consultation? Pg # 167 (0.9 u.m.)
b. What does POP stand for and what is its mechanism of action? Pg # 167 (0.5)

(2)
(2)

Pr gel only

ovulation delay

-Ime
-Dith
-Preg
-High
COP
-Wome
Pw

7. A patient presented in OPD with complaint of curd-like white vaginal discharge with itching and soreness of vulva.

- a. What is your diagnosis? Pg # 167 (0.9 u.m.)
b. What are the predisposing factors for this infection? Pg # 167 (0.5)

(2)
(2)

8. A 39 year old woman P6 has presented with complaint of post coital bleeding for the past three months.

- a. What is the differential diagnosis? Pg # 167 (0.9 u.m.)
b. What would you investigate first? Pg # 167 (0.5)

(2)
(2)

pelvic ultrasound, cervical biopsy, CA (serum)

9. A 28 year old patient complains of amenorrhoea after having dilatation and curettage for incomplete miscarriage.

- a. What is the most likely diagnosis? Pg # 167 (0.9 u.m.)
b. How will you treat her?

(1)
(2)

(Adenomyosis), Preventive care only.

(2)
(2)

10. A patient presents in OPD with history of P0+2, she is very conscious about her next pregnancy.

- a. What are the common causes of early pregnancy loss? Pg # 167 (0.9 u.m.)
b. What are the complications of abortion? Pg # 167 (0.5)

(2)
(2)

- chorion (1.5)
- mod of (1.5)
- uterus (1.5)

- drugs

(2)
(2)

hemorrhage

sepsis

• Coagulopathy

Complications of treatment &
infusion reaction

\rightarrow w/inf poly/ectopl

cert
cer
ed

\rightarrow Pw
- Pw
- Pw
- Pw

\rightarrow Dolo. ses