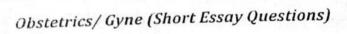
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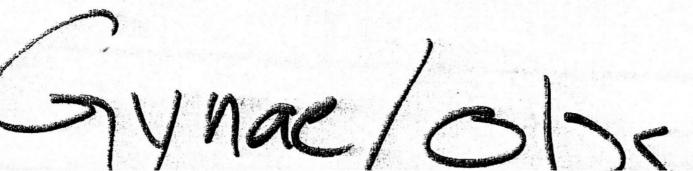
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## MEGA TEST FINAL YEAR MBBS; Feb 16, 2018





Maximum marks: 60	
06 SEQs; 10 marks each. Time allowed	d: 2 hours
Attempt all questions	
Q 1. A 20 years, primigravida at 34 week gestation presents in emergency with headache and blurring of vision for one day. Her BP is 160/110mmHg. Urine eshows protein 2+.	n history of xamination
1) What is the most likely diagnosis? 2) What investigations will you advise her?	2
3) What are the treatment options?	2
4) Give four risk factors for this disorder?	2
5) Name two most common complications of this disorder?	
	Established the file
Q 2A 30-years G2P1 known epileptic came in emergency with gestational am 3? weeks and H/O of seizures for one day. Her B.P is 120/80 mmHg.	ienorrhea of
1) What is the differential diagnosis of convulsions in pregnancy?	2
2) What investigation will you advise?	2
3) What treatment will you give?	2
4) What are the side effects of anti-epileptic drugs?	2
5) What pre pregnancy counseling will you advise for next pregnancy?	2
23. 35 years, G4P3 at gestational amenorrhea of 34 weeks presents in OPD webdominal pain, nausea and vomiting for 5 days with passage of dark yellow on the sclera.	ith H/O colored uring
1) What is the most likely diagnosis?	2
2) What are the common causes of this condition in pregnancy?	2
3) What investigations will you advise her?	
4) What are the risks to the fetus?	2
5) What are the risks to the mother?	2
-y	2



Q 4. A 50- months. S	years lecturer presented in Gyne OPD with complaint of amenorrhead he also C/O hot flushes and mood swings	0(18)
1)	What is the most likely diagnosis?	1
2)	What can be the other causes for such condition?	3
	What are the long-term effects?	3
	What are the management options?	3
	year-old female and her 37-year-old husband present with the complete conceive. She reports good health. Her husband sperm count is 10 mmotility.	
1)	What are the causes of infertility?	3
2)	In addition to semen analysis what is the other work-up for infertile What is the appropriate management if all investigations for female	couples? 3
		4
The patient weights 10	ear-old girl never had a menstrual period, and also has not develope t is not sexually active, and is taking no medications. She is 4 ft. 1 inc 5 lb (BMI 31 kg/m²). There is a continuous murmur heard over the back. Her pelvic exam shows no abnormalities.	h tall, and
1)	What is a likely reason for the patient's clinical presentation?	3
	What is her karyotype?	2
	What is the initial treatment in childhood with this disorder?	5