DEPARTMENT OF CB-GYN DEPARTMENT

FINAL YEAR MBBS (CLASS TEST 20th Jan, 17)

Time allowed: 2hrs 15minutes Total Marks: 50 attempt all questions Q1. A PG has presented in the antenatal clinic at 37 wks of gestation with an ultrasound report showing breech presentation of the fetus. She is reluctant to have ceasarean section. She wants to know her possibilities for vaginal breech delivery. What are the prerequisites of external cephalic version? (02)What are the risks of ECV? (01)b) What are the selection criteria for normal vaginal delivery for a breech fetus? (02)c) Q2. A young couple, sexually active since marriage for the last four years, presents to OPD. They have not been able to conceive a child as yet. (01) a) What are the parameters of a normal semen analysis? (02)Enumerate the tests of ovulations you will advise for the female partner (02)c) What tubal patency tests will you offer her? Q3. A 19 years old college student presents in outpatient department with oligomenorrhoea and excessive hair growth in male pattern distribution. Her BMI is 30. a) What is most likely diagnosis? (01)b) What is the accepted criterion of diagnosis? (02)(02)Outline your management plan? Q4. A 35 year old multipara woman in her 6th pregnancy reports vaginal bleeding at 10th week of gestation. On examination, her uterus is enlarged to 14 weeks size. The ultrasound shows snowstorm appearance with absence of fetus. a) What is likely diagnosis? (01)What is the course management of this woman? (02)How would you follow up this case? (02)Q5. A 22 years old woman married for one year presents with amenorrhoea of 6 weeks, lower abdominal pain and vaginal bleeding for one day. Her urine for pregnancy test is positive. On TVS, uterus is empty. There is right 't adenexal mass of 2.5x1.5 cm. and no sign of Hemoperitoneum. What is the most probable diagnosis? (01)How will you confirm your diagnosis?

What are the selection criteria for medical management?

What is surgical treatment of this condition?

(01)

(02)

(01)

Q6. A f	inal year medical student is on maternity duty. She is assigned by the	
case, s	cheduled for elective-LSCS tomorrow morning.	
3)	What are the preoperative preparations of this case?	(02)
b)	Name two commonly used skin incisions?	(01)
c)	What complications are associated with this procedure?	(02)
Q7. A p	atient G5P3+1 at 32 weeks of pregnancy came in outpatient department with H/O va	iginal bleeding for 2
days an	d decreased fetal movements since night. APH	
a)	What is your diagnosis?	(0.5)
b)	What are possible causes of vaginal bleeding in this patient	(1.5)
c)	How will you manage?	(03)
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Q8. A G	5P4+0 came in labour room with H/O delivery of a baby girl at home. But placenta did	d not deliver.
	What is your diagnosis? (0.5) Atomic where.	
b)	What are the signs of placental separation?	
c)	What are the complications of 3 rd stage of labour?	(1.5)
d)	How to do active management of 3 rd stage of labour?	(1.5) (1.5)
Q9. A 40	vears old P4+0 has irritability mood swings and agreed to be a series to be a ser	
anxious	years old P4+0 has irritability, mood swings and aggressive behavior for last 5 years. about her condition.	Her husband is very
a)	What 2 relevant questions will you ask to reach diagnosis of PMS?	
	How will you confirm the diagnosis?	(02)
	What treatment options will you offer her?	(01)
Q10. Wri	te short notes on following	
a)	Ventouse delivery	(02)
b)	Missed miscarriage	(02) (02)
c)	Secondary dysmenorrhea	(01)

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