



# MBBS FINAL YEAR SEND-UP EXAM 2017

## OBSTETRICS (short essay questions)

07 SEQs; 05 marks each

Time Allowed: 02 hours

Total marks: 35

Attempt all questions

Q1; Mrs. Shahid G2P1 at 7 weeks gestation presented in antenatal clinic with history of previous Down syndrome baby who died at the age of five months due to diarrhea. Now she is very worried about her current pregnancy. She wants to know

- (64 obs)
- a) What different types of prenatal diagnostic tests are available - 326 UMS (64 T.T) 1.5
  - b) At what gestation are they carried out CVS 11 week 1.5
  - c) What are the miscarriage risks associated with them? Amniocentesis 15 weeks 02  
→ P-68 T.T

Q2. A 35 year old P3 presented in labour ward with history of delivery at home two days back with history of pyrexia, rigors, dysuria and foul smelling vaginal discharge.

- (279) (407 UMS)
- a) What is the most likely diagnosis? puerperal pyrexia / puerperal sepsis 01
  - b) Enumerate the risk factors to develop this condition? 361 UMS 02
  - c) Enlist the investigations to manage further. 02

Q3. A primigravida came at 38 week pregnancy with BP 160/100 mm of Hg and + proteinuria. Induction of labour (IOL) has been decided.

- a) How should this patient be evaluated before IOL? 227 T.T (397 UMS) 01
- b) What are the methods of IOL? 229 T.T 02
- c) Enlist the complications of IOL. 229 T.T 02

Q4. A G6P5 came at 28 weeks of gestation with complaints of weakness, lethargy and headache. Her Hb was 7.5gm%

- a) What is the most likely cause of problem? Iron deficiency anemia (386 UMS) 0.5
- b) What are the risk factor to develop this problem? - 341 UMS 01
- c) How will you investigate her? 338 UMS 02
- d) At this gestation, how will you treat her? 1.5

Please turn over

- Internal bleeding
- Inability to absorb iron
- Inadequate iron intake
- Pregnancy

Q5. A healthy G3P2 comes to you in labour. Her 1<sup>st</sup> stage of labour was uneventful and her 2<sup>nd</sup> stage has just begun.

- (396) UWS 349 UWS 2:16 (2/2) 02  
1.5  
0.5
- a) How would you plan to manage 3<sup>rd</sup> stage of labour?
  - b) What are the benefits of active management?
  - c) What are signs of placental separation

Q6/ A primigravida at 36 week gestation, has intrauterine fetal demise (IUFD)

- (397) UWS
- a) How will you investigate her for IUFD? Arshad Chohan Antenatal 02
  - b) What is the plan of management for the rest of her pregnancy → Antenatal visits 03

Q7. A 20 year old, anxious primigravida is your booked patient. During her antenatal visit at 36 weeks, she wants to know about the pain relief measures available to her during labour.

- Repeat 01
- a) What options will you give her? 02
  - b) What are the risks/complications of epidural analgesia? 02
  - c) Name the contraindications of epidural analgesia? 02
- (397) UWS