

Third Professional MBBS (Part II) Degree Examination (2019 Scheme)**Paper 1 Obstetrics and social obstetrics**

Time: 3 hours

Max Marks: 100

Long Essay**15x2 = 30 marks**

1. Primigravida, 39 wks of gestation came to labour room with c/o labour pains. On abdominal examination contractions were felt every 3 minutes lasting for 30 seconds. On pelvic examination the cervix was soft mid position 2 cm long and 2cm dilated, membranes present, vertex at brim, pelvis normal

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|-------------------------------------------------------------------------------------------------------------|---------|
| a) What is your diagnosis and how will you monitor her? | 4 marks |
| b) What is "Bishops score" and give its significance? Give the Bishop score in the above patient? | 4 marks |
| c) What are the 2 degree of Cephalo Pelvic Disproportion- Explain | 2 marks |
| d) What are the points to be noted while doing a clinical pelvic assessment in an antenatal patient at term | 2 marks |
| e) What is a synclitism | 2 marks |
| f) What is waste space of Morris? And which type of pelvis do we refer to when it is increased | 1 mark |

2. A multigravida following a full term normal delivery had excessive bleeding PV, soon after the patient was pale and her pulse rate 140/m. BP was 70/50mmhg. Uterus was above the level of umbilicus and flabby

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|---------------------------------------------------------|---------|
| a) What are the causes of primary PPH | 3 marks |
| b) What is the initial management for this patient? | 4 marks |
| c) What is the non surgical management for this patient | 4 marks |
| d) Explain the surgical management of this patient | 4 marks |

Short essays**8 x5 = 40 marks**

3. A 28 year old primigravida with critical mitral valve stenosis presents to the OPD with shortness of breath at 8 wks of gestation. What is the possible line of management and how will you counsel her?

4. A 34 year old G2P1L1 presents to the OPD with polyhydramnios. Her blood sugar fasting is 146 mg/dl and post prandial 243 mg/dl. How will you counsel and manage this patient?

5. 19 year old primigravida presents to the OPD at 34 wks pregnancy with BP 140/94 mmHg. She was normotensive previously. Her BP was rechecked and found to be the same. What is your provisional diagnosis. How will you investigate and manage her?

6. What is hyper emesis gravidarum .Name any two causes? How do you manage this condition?

7. What are the different types of twins? What are the complications specific monochorionic twins? Explain in detail about TTTS

Short answers

5 x 4=20 marks

8. Adherent placenta
9. Asymptomatic bacteruria
10. Parenteral iron therapy
11. PPTCT
12. Active management of third stage of labour

Short answers

1 x 8=8 marks

13. .What is it Lovset's manoeuvre?
14. Deep transverse arrest-definition
15. TOLAC-Expand
16. Classify anaemia
17. Define engagement of foetal head. What is the diameter of engagement in vertex presentation
18. Define external cephalic version
19. Components of biophysical profile
20. Name the sign for diagnosis of shoulder dystocia

Draw and label

1 x 2 = 2 marks

21. Layers cut in an episiotomy & label it
22. Draw a graphic picture of late deceleration

NB: Questions can be scenario based

Q.P. Code:

Reg. No.:

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Paper 2 Gynaecology and family welfare

Time: 3 hours

Max Marks: 100

Long Essay

(15x2 = 30 marks)

1. 49 year old Nulliparous lady with BMI of 30, hypertensive and diabetic admitted with complaints of heavy menstrual bleeding since last 3 months
 - a) What is abnormal uterine bleeding 1 marks
 - b) Expand the acronym PALM-COEIN 2 marks
 - c) Name any 4 risk factors of ca endometrium 4marks
 - d) Describe in detail the staging of Ca endometrium 4 marks
 - e) What is the treatment for stage 1 Ca endometrium 4 marks

2. 65-year-old P5L5 presented to the OPD with blood stained discharge of 2 weeks' duration. O/E she had uterovaginal prolapse
 - a) What are the various supports of the uterus? What are risk factors of UV prolapsed? 4 marks
 - b) What are the degrees of utero-vaginal prolapsed? 4 marks
 - c) What is the full form of POPQ? 1 marks
 - d) What causes urinary retention in UV prolapsed? 4 marks
 - e) What is decubitus ulcer and how do you manage it? 2 marks

Short essays

8 x 5=40 marks

3. 29 year old G4P3L3 comes with history of 2 months amenorrhea with abdominal pain, Urine pregnancy test Positive. What is the probable diagnosis? How will you medically manage this condition?

4. What are the different types of emergency contraception?

5. A Patient comes to OPD asking for elective hysterectomy. She gives family history of Ca colon for her uncle and brother and Ca ovary for her sister. How will you counsel this patient?

6. A 20-year-old married for 1 month comes to OPD for advice on contraception. How will you counsel her?

7. What is an enterocele? Give a clinical examination to diagnosis it. How will you manage it?

Short answer**(4x5=20 marks)**

- 8 Management and follow of a case of complete hydatidiform mole
9. Complete perineal tear
10. Chocolate cyst of Ovary
11. Treatment of a/c PID
12. Secondary amenorrhoea

Short answers**(1x8 = 8 marks)**

- 13 Criteria for diagnosis of PCOS
14. Bacterial vaginosis
15. Bartholin cyst
16. Pap smear
- 17 Define menopause
18. Ca 125
- 19 Expansion of UAE
- 20 Drug for management of Trichomonas vaginalis

Draw and label**(1x2=2 marks)**

14. Structure of human sperm
15. Hormonal changes in menstrual cycle