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### **Final Year MBBS Examination** III MBBS Part 2 Obstetrics & Gynecology 1 (New)

Time: 3 hours Max Marks: 100

#### **Instructions:**

- 1. Answer to the points.
- 2. Figure to the right indicates marks.
- 3. Use separate answer books for each section.
- 4. Draw diagrams wherever necessary.
- 5. Write legibly. Section 1

**a**)

1. Write in detail (Any one of the two)

1X 10- 10 marks (10)

i. What are the stages of labour (3 marks) ii. What are the events that occur in l" stage of labour (4 Marks) iii.

How do you manage the 3" stage of

**b**)

1. Define birth asphyxia (2 marks) ii, What are the causes of birth asphyxia (3 marks) ill. How do you diagnose birth asphyxia and resuscitate a new born (5 marks)

# 2. Case based scenario/Applied short notes (Any two of the three)

- a) How do you

  2 X 6- 12 marks (12)

  manage retained placenta in a para 3 living

  3 with previous 2 cesarean deliverics.
- **b)** A 35year old primigravida with a BMI of 40kg/M? has come to you at 24 wecks of gestation for routine antenatal checkup. [low do you investigate and advise her.
- c) A primigravida has delivered twin babies which have discordancy. One baby weighs 2.2 Kgs and the other 1.4 Kgs. How do you advise and counsel the mother regarding breast feeding.



# www.FirstRanker.com www.FirstRanker.com 3. Write short notes (Any three out of four)

- a) Maternal mortality <sup>3X</sup> 6- 18 marks (18) definition and measures to reduce the same
- **b)** Tuner's syndrome
- c) Oogenesis
- d) Abnormalities of placenta

## 4. Answer only in 2-3 sentences (Any five out of six)

- **a)** Drugs used in 3rd <sup>2</sup> X 5= 10 marks (10) stage of labour
- b) Obstetric problems with uterine anomalics
- c) Types of perineal tears
- d) List three indications for induction of labour
- e) Respectful maternity care
- f) Three methods of puerperal contraception



# Section 2

#### 5. Write in detail (Any one of the two)

a) 1X 10=10 marks (10)

i. Define obstructed labour (2 marks) ii. What are the causes of obstructed labour (3 marks) iii, What are the complications of obstructed labour and how do you manage a case of obstructed labour, discuss in detail (5 marks)

**b**)

i. Define puerperal sepsis ii. What are the causes of puerperal sepsis iii. How do you manage a case of septic shock with a pelvic abscess.

# 6. Case based scenario/Applied short notes (Any two ofthe three)

a) A 24year old 2 X 6- 12 marks (12) primigravida, a known patient of rheumatic mitral stenosis, NYHA IT presents in early labour, Discuss the management of labour in this patient

- b) A 36 year old 5" gravida with 4 living children has presented with bleeding per vaginum at 35 weeks of gestation. Discuss the differential diagnosis
- c) A multigravida with previous history of 2 vaginal deliveries has presented with breech presentation at 36 weeks of gestation. What are the management options and how do you decide the option

## 7. Write short notes (Any three out of four)

- $3 \times 6 = 18 \text{ marks } (18)$ a) Magnesium sulphate in eclampsia
- b) Pre conceptional advise for a known case of Type 2 diabetes with previous history of aborting an anencephalic baby
- c) Role of ultrasound scan in fetal growth restriction
- d) Advantages and disadvantages of Outlet forceps and ventouse during assisted vaginal delivery



# 8. Answer only in 2-3 sentences (Any five out of six)

- $2 \times 5 = 10 \text{ marks } (10)$ a) Indications for peripartum hysterectomy
- b) Types of morbidly adherent placenta
- c) Define HELLP syndrome
- d) Commonly used antihypertensives in pregnancy and their dosage
- e) Causes of acute renal failure in pregnancy
- f) Indications for classical cesarean section MINN! FIFSTR anker

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