C 64819   (Pages : 2 + 2 + 1 = 5)   Name............................

Reg. No............................

FINAL M.B.B.S. (PART II) DEGREE EXAMINATION, AUGUST 2014

OBSTETRICS AND GYNAECOLOGY—Paper I

(2007 Scheme)

Time : Two Hours   Maximum : 40 Marks

*Answer **all** the questions.*
Draw diagrams wherever necessary.
*Answer Sections A and B in **separate** answer-books.*
MCQs should be answered first in the response sheet provided.

Section A

I. Multiple Choice Questions :

Single response sheet type 8 (Separate sheet attached).

(8 × ½ = 4 marks)

II. Match the following.

Single response type 8 (separate sheet attached).   (8 × ½ = 4 marks)

III. Draw the diagram and label :

    (a) Partograph.

    (b) Vertex and its boundaries.

(2 × 1 = 2 marks)

IV. Short answer questions :

    (a) Glucose challenge test.

    (b) Complications of breech delivery.

    (c) Internal rotation of fetal head.

    (d) Causes of rupture uterus during labour.

(4 × 1 = 4 marks)

V. Write short notes on :

    (a) Intra uterine death.

    (b) Medical management of PPH.

    (c) Treatment of Iron deficiency Anaemia in pregnancy.

(3 × 2 = 6 marks)

Turn over

Section B

VI. A 26 Years old second gravida with 37 weeks of pregnancy with bleeding per Vagina :

    (a) Mention two important causes.

    (b) How will you confirm the diagnosis.

    (c) Outline the general management measures of this patient.

    (d) Mention the obstetric management of any one condition.

                                            (2 + 2 + 3 + 3 = 10 marks)

VII. Short answer questions :

    (a) Maternal complication of Heart disease.

    (b) Causes of 1st trimester abortion.

    (c) Spalding's sign.

    (d) Classification of APH.

                                            (4 × 1 = 4 marks)

VIII. Write short notes on :

    (a) VBAC.

    (b) Management of Twin pregnancy during labour.

    (c) Non-stress test.

                                            (3 × 2 = 6 marks)

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OBSTETRICS AND GYNAECOLOGY—Paper I

(2007 Scheme)

I. MULTIPLE CHOICE QUESTIONS

Note.—(1) *Do not write anything on the question paper.*

(2) *Write your register number on the answer-sheet provided.*

(3) *Select* **one** *most* **appropriate response** *and encircle the alphabet against each question in the answer-sheet provided.*

I.   1   Treatment of choice in a primigravidal at term in labour with transverse lie and cervical dilatation of 6 cm. with intact membrane is :

   (A) Watch and wait till full dilatation of cervix.

   (B) Internal podalic version and Breech extraction.

   (C) LSCS.

   (D) Classical Caesarean section.

2   Weight of placenta is ———— % of fetus :

   (A) 10 %.   (B) 20 %.

   (C) 30 %.   (D) 45 %.

3   Pulsation felt in the Vagina during pregnancy is called :

   (A) Hegar's sign.   (B) Alder's sign.

   (C) Osciander's sign.   (D) Piskacek's sign.

4   Engaging diameter in brow presentation :

   (A) Suboccipito bregmatic.   (B) Occipito frontal.

   (C) Sub mento bregmatic.   (D) Mento vertical.

5   Which of the following type of twin is associated with increased perinatal complications ?

   (A) Monochorionic diamniotic.   (B) Monochorionic monoamniotic.

   (C) Dichorionic diamniotic.   (D) All of the above.

6   All of the maneuvers are used in shoulder dystocia *except* :

   (A) Mc Robert's.   (B) Lovset's.

   (C) Wood's.   (D) Rubin's.

Turn over

7 Direct Occipito posterior is more commonly associated with :

    (A) Gynaecoid pelvis.   (B) Android pelvis.

    (C) Anthrapoid pelvis.   (D) Platy pelloid pelvis.

8 Atonie PPH occurs in all *except* :

    (A) Multiple pregnancy.   (B) Erythroblastosis foetalis.

    (C) Hydramnios.   (D) Prolonged labour.

                                    (8 × ½ = 4 marks)

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OBSTETRICS AND GYNAECOLOGY—Paper I

II. Match the following :—

1	Late deceleration	(a)	Internal podalic Version.
2	Snow storm appearance	(b)	Clomiphene.
3	Hydramnios	(c)	Fetal distress.
4	Multiple pregnancy	(d)	DIC.
5	Abrutio placenta	(e)	Vesicular mole.
6	Anovulatory infertility	(f)	Gestational Diabetes.
7	Gonadotrophins	(g)	Deep transverse arrest.
8	Android pelvis	(h)	OHSS.

(8 × ½ = 4 marks)