

MBBS III (Third) Professional Part-2 Examination 2016-17

Paper ID: 0314109 Course Code: MBS403

Obstetric and Gynaecology - I

Time: 2 Hours 10 Minutes Max Marks: 30

Note: Attempt all questions. Draw proper diagrams to support

your answer.

Part 'B'

- What are causes of bleeding in $2^{\rm nd}$ trimester of pregnancy? Write down management in 32 weeks pregnancy with bleeding P/V. (7)
- Classify hypertensive disorder of pregnancy. Write management of 32 weeks pregnancy with preeclampsia. (7)

Part 'C'

- Write short notes on the following: Complications of 3rd stage of labour. 3.

 - Episiotomy b)
 - Partogram. c)
 - d) Maternal Mortality

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(4x4=16)

Student's Name
Invigilator's Signature
Paper ID: 0314109

Obstetric and Gynaecology - I

Part 'A'

Time: 20 Minutes Max Marks: 10

- Note: 1. Attempt all questions and return this part of the question paper to the invigilator after 20 Minutes. 2. Please tick $(\sqrt[4]{})$ correct one only. Cutting, overwriting or any other marking are not allowed.

	For answering please use Ball- pen only.		
Q.1	Drug of choice for antepartum eclampsia:		c) CTG
	a) MgSO4		d) All
	b) Phenytoin		
	c) Phenargen	Q.7	Absolute indication of caesarean is:
	d) Diazepam		 a) Central Placenta Praevia
	•	2	 b) Hypertensive disorder
Q.2	Premature Placental separation is seen in:	0/.	 Diabetes
Q.2			d) Heart Disease
	a) Abruption placentae b) Vasa Praevia		
	c) Placenta Praevia	Q.8	Diagnosis of Placental Praevia is confirmed
	c) Placenta Praevia d) All		by:
	d) All		a) Ultrasound
0.3	Shortest discourse of facility and the		b) P/V Ex
Q.3	Shortest diameter of fetal head is:		 Per Abdomen Ex
	a) Biparietal Diameter		d) CTG
	b) Suboccipito frontal	Q.9	Placental functions are:
	c) Occipito frontal	Q.9	a) Barrier
	d) Bitemporal		-,
			,
Q.4	Commonest cause of anemia in pregnancy is:		-,
	 a) Iron, folic acid deficiency 		d) All
	b) Bleeding	Q.10	Uterotonic drugs are all except:
	c) Thalessemia	4	a) Oxytocin
	d) Coagulopathy		b) PGF2α
			-,

- Pre-eclampsia is characterized by: Q.5
 - a) Hypertension Proteinuria b)
 - Edema c)
 - All Methods for diagnosing fetal distress are:
 - Fetal heart rate Biophysical profile

< 38 weeks c) < 40 weeks < 42 weeks d)

PGE1

Isoxsuprine

< 37 weeks

Q.11 Preterm gestation is called when pregnancy:

P.T.O.

c)

d)

a)



Q.6



- Q.12 Partogram is used to monitor
 - 1st stage of labour 2nd stage 3rd stage 4th stage a)

 - d)
- Q.13 Bishop score is used to assess:
 - Progress of Labour Fetal Distress
 - b) Maternal distress c)
 - All d)
- Q.14 Low lying placenta is called:
 - Abruptio Placentae
 - Placenta Praevia b)
 - Vasa Praevia c)
 - d)
- Q.15 Ectopic pregnancy is called when:
 - a)
 - b)
- Pregnancy outside uterus Missed Pregnancy Congenital abnormal pregnancy c)
 - d)
- Q.16 Drug used in medical treatment of ectopic pregnancy:
 - Methotrexate a)
 - b) Cyclophosphamide
 - c) Cephalosporin
 - d) Actinomycin
- Q.17 Drug used in active management of 3rd stage:
 - a)
 - b) Prostaglandin
 - c) Isoxsuprine
 - Methergin d)
- Q.18 Following is types of abortion:
 - Missed
 - b) Incomplete
 - Threatened
 - c) d)
- FIRST ON Q.19 Causes of bleeding in early pregnancy are all except:
 - Abortion
 - a) b) Ectopic
 - c) Molar Pregnancy
 - d) Preeclampsia

- Q.20 2nd Stage of labour ends at:
 - Full cervical dilatation a)
 - Delivery of fetus
 - c) d) Delivery of placenta
 - None.

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