

MBBS Third Year Part-II (Final Year) Obstetrics including Social Obstetrics Important Question Bank

Essay Questions:

1. Define eclampsia. Describe eclamptic fits management in labour
2. Define caesarean section and its various indications. Explain the management of previous lower segment caesarean section in labour.
3. What are the causes of Breech presentation? How do you manage Breech presentation at 34-36 weeks of Pregnancy?
4. What are the causes of anaemia in pregnancy? Write diagnosis treatment and prevention of anaemia in pregnancy.
5. What are all the causes of second trimester abortion and how do you manage a case of cervical incompetence.
6. Define Preterm labour. Explain the etiology and management of Preterm labour.
7. Define intrauterine growth restriction. Describe the etiology, diagnosis and management of intrauterine growth restriction.
8. What are the causes for III stage complications? Explain the management of atonic postpartum hemorrhage.
9. What is Puerperium? Describe the complications of puerperium and its management.
10. Define Antepartum Haemorrhage. Discuss the aetiology, types, clinical features, differential diagnosis and management of placenta previa at 32 weeks of gestation.
11. Define Multiple Pregnancy. Discuss the aetiology, diagnosis, complications and management of Twin gestation during pregnancy.
12. Define postpartum haemorrhage. What are the types of Postpartum haemorrhage? Discuss in detail predisposing factors, clinical features and management of Atonic Postpartum haemorrhage.
13. Classify hypertensive disorders in pregnancy, Etiopathogenesis, and clinical features, complications of pre Eclampsia and management of Eclampsia.
14. Define preterm labour. Explain the etiology and management of preterm labour.
15. What are the causes of rupture uterus? Signs and symptoms of obstructed labour and their management.
16. A primi with 26 weeks of pregnancy presents with haemoglobin of 7 gms. Discuss investigations and management in pregnancy and in labour

17. Define GDM. Discuss the indications for screening and methods of screening for GDM. Elaborate on management of Mrs X, G3 P2 L2 diagnosed to have GDM at 32 weeks of pregnancy. Brief on maternal/fetal complications.
18. Discuss types of Twins, Maternal and Fetal complications in Multiple Pregnancy. Elaborate on the Diagnosis and Management of a Primigravida at 36 weeks, who is diagnosed to have Twin Pregnancy? Brief on intrapartum and postpartum management.
19. Primi with 36 weeks of gestation with B.P 140/ 100 with painful bleeding per vagina. Discuss diagnosis, investigations, management and complications.
20. Define post-partum haemorrhage. Discuss the management and complications.
21. A Primigravid woman has come at 37 weeks of gestation with no risk factors other than breech presentation. Describe how one should plan for her mode of delivery and what procedure could be done to facilitate normal delivery
22. What is induction of Labour? Discuss briefly the indication, contraindication and methods of induction of Labour.
23. Definition, Incidence, Complications, Diagnosis and Management of Multiple Pregnancy.
24. Discuss the clinical features, diagnosis, management of placenta praevia. Type III at 32 weeks gestation.
25. Definition, types and causes of post partum hemorrhage. Discuss the predisposing factors, clinical features and management of atonic post partum hemorrhage.
26. Causes of anemia in pregnancy. What are the preventive measures and treatment of anemia in pregnancy? Management of anemic woman in labor.
27. Define PROM. Aetiology, diagnosis complications and management of PROM.
28. Discuss in detail the aetiopathogenesis, differential diagnosis, management and complications of placental abruption.
29. Discuss classification of gestational hypertension (GHT). Write the complication of GHT. 20 year old primi with 36 weeks gestational age presenting with generalized tonic clonic convulsion in casualty. How will you manage?
30. Define labour. What are the stages of labour? Write in detail about etiology, management, complications and prevention of obstructed labour.
31. Describe the aetiology, clinical features, complications and management of abruptio placenta.
32. Discuss the classification and causes of Anaemia Complicating Pregnancy. Describe in detail the preventions of Nutritional Anaemia during pregnancy, complications of anaemia complicating pregnancy and management during pregnancy and labour.

Short Answer Questions:

1. Missed abortion
2. Placenta succenturiata
3. Cephalhematoma
4. Couvelaire uterus
5. Define and explain the management of deep transverse arrest
6. Difference between constriction ring and contraction ring dystosia
7. Causes of Intrauterine death (IUD) and diagnosis
8. Anencephaly
9. Trial labour
10. Craniotomy
11. Braxton's Hich's contraction
12. Decidual cast
13. Complications of ARM
14. Why should we cut short second stage of labour in severe PIH?
15. Indication for cervicotomy
16. Universal precautions observed during delivery of HIV patient
17. CHIGNON
18. Causes of birth asphyxia
19. Causes of difficulty in delivery after coming head in breech
20. Indication of induction of labour
21. Physiology of lactation
22. Haematological changes in pregnancy
23. Define maternal mortality What are the causes of maternal mortality?
24. Management of Placenta previa
25. Hypotonic uterine inertia
26. Neonatal jaundice
27. Partogram
28. Complications of Twin pregnancy
29. Diagnosis of gestational diabetes
30. Face to pubis delivery
31. Quickening
32. Meconium aspiration syndrome
33. Causes of puerperal pyrexia
34. Prerequisites for application of outlet forceps
35. Define normal labour

36. Pre conceptional counselling
37. Hegar's sign
38. Incomplete abortion
39. Bandle's ring
40. Indications for induction of labour
41. Breast feeding
42. Neonatal resuscitation
43. Apgar score
44. Complete perineal tear
45. Fibroid complicating pregnancy
46. Expectant management in placenta praevia
47. Baby friendly hospital
48. Inevitable abortion
49. RH iso immunization
50. Face to pubis delivery
51. Advantages of vacuum
52. Indications for classical caesarian section
53. Secondary arrest of labour
54. Causes of maternal mortality
55. Hematological changes during pregnancy
56. Causes of mobile head at term
57. Complications of VBAC
58. Puerperal pyrexia
59. Pathogenesis of preeclampsia
60. Non reactive non stress test
61. Aetiology of hyperemesis
62. Classification of anemia in pregnancy
63. Immunization during pregnancy
64. Implantation
65. Differential diagnosis of convulsions during pregnancy
66. Erythroblastosis foetalis
67. Management of labour in heart disease complicating pregnancy
68. Deep vein thrombosis
69. Perinatal mortality
70. Inversion of uterus
71. Incoordinate uterine action
72. Episiotomy
73. Cord Prolapse

74. RCH interventions
75. Hydrocephalus
76. Diagonal conjugate
77. Importance of prenatal care
78. HELLP syndrome
79. Urinary tract changes during pregnancy
80. Oral glucose challenge test
81. Advantages of elective caesarian section
82. Complications of induction of labour
83. False labour pains
84. Causes of bad obstetrics history
85. Causes of lower abdominal pain during pregnancy
86. Tests for ovulation
87. Indication for internal podalic version
88. Asymptomatic bacteriuria
89. Causes for renal failure in obstetrics
90. Hegar's sign
91. Techniques of prenatal diagnosis
92. USG in obstetrics
93. Advantages of ventouse over forceps
94. Conjoint twins
95. Vulval hematoma
96. Monitoring uterine activity during labour
97. Internal iliac ligation
98. 1st stage of labour
99. CVS changes during pregnancy
100. Prevention of preterm labour
101. Moulding
102. Encirclage
103. Pudendal block
104. Restitution
105. Placenta percreta
106. Couvelaire uterus
107. Delivery of aftercoming head
108. Scar dehiscence
109. Recurrent abortions
110. Mifepristone
111. VBAC

112. RCH interventions
113. Magnesium sulphate in eclampsia
114. Munro-Kerr Muller method
115. Uterine inertia
116. Hyperemesis gravidarum
117. Biophysical profile
118. Maternal mortality
119. Deep transverse arrest
120. Genital tract changes during pregnancy
121. Ultrasonogram in first trimester
122. Missed abortion
123. Follow up of vesicular mole
124. Intrauterine death
125. Gestational Diabetes
126. Cervical Ripening
127. Magnesium sulphate in Eclampsia
128. Outlet forceps
129. Engagement
130. Bandl's ring
131. Pudendal Block
132. Definition of Eclampsia
133. Complications of Abruption Placenta
134. Vaginal birth after caesarean
135. Manual Removal of Placenta
136. Scar dehiscence
137. Precipitate labour
138. Define puerperium
139. Prophylaxis of Rh isoimmunisation
140. Prolonged Pregnancy-aetiology
141. Hyperemesis gravidarum
142. Hematological changes during pregnancy
143. Deep transverse arrest
144. Puerperal sepsis
145. Complete perineal tear
146. Recurrent abortions
147. Cephalhaematoma
148. Birth asphyxia
149. Vaginal Birth after Caesarean Section

150. Screening for Gestational Diabetes Mellitus
151. Any four Indications for Ultrasound in obstetrics
152. Immunisation during pregnancy
153. Causes for mobile head at term
154. Diameters of pelvic inlet
155. Indications for outlet forceps
156. Criteria for medical management of ectopic pregnancy
157. Follow up post vesicular mole evacuation
158. Indications for MTP under the MTP act
159. Indications for caesarean hysterectomy
160. Drugs used for cervical ripening
161. Episiotomy
162. MgSo therapy in obstetrics
163. Criteria of maternal mortality
164. Causes of maternal mortality
165. What is alert line, action line and their importance
166. Neonatal complications in a diabetic mother
167. Reactive non stress test
168. External Cephalic version – Indications and contraindication
169. CVS changes during pregnancy
170. Etiology and investigations of recurrent abortion
171. Prophylactic methergine
172. Obstetric conjugate and its importance
173. Mention differential diagnosis for pregnancy
174. indications for classical caesarean section
175. Define polyhydramnios and oligohydramnios
176. Complications of artificial rupture of membranes
177. What is incomplete abortion and management?
178. Define postpartum haemorrhage
179. Write the dose of Oxytocin in induction of labour and in postpartum haemorrhage
180. What are the complications of suction evacuation?
181. Diagnosis and Management of preterm labour
182. Definition and Causes of Maternal Mortality
183. Antepartum Eclampsia
184. Symptoms and Signs of Abruption Placenta
185. Prevention of vertical transmission of HIV in pregnancy
186. Causes of Neonatal hyperbilirubinemia

187. Partograph
188. Shoulder Dystocia
189. Acute Uterine Inversion
190. Suction Cup Delivery
191. Prevention of Rh isoimmunization
192. Diameters of pelvic inlet
193. Infective Endocarditis Prophylaxis in labour
194. Objectives of antenatal Care
195. Active management of third stage of labour
196. Diagnosis and Management of Missed Abortion
197. Definition and indication for ECV
198. Causes of Obstructed Labour
199. Hegar's Sign
200. Prophylactic Iron therapy
201. Oral glucose challenge test
202. Pelvic inlet
203. Causes of hydramnios and its management
204. Missed abortion
205. Follow up of vesicular mole
206. Management of complete Perineal tear
207. Complications of forceps application
208. Deep transverse arrest
209. Delivery of after coming head
210. HELLP syndrome
211. Asymptomatic bacteriuria
212. Occipitofrontal diameter
213. Anencephaly
214. Pregnancy – Diagnosis tests
215. Complications in Puerperium
216. Battledore placenta
217. Oslander's sign
218. Bandl's ring
219. Causes for coagulation disorder in obstetrics
220. Cephalohematoma
221. Oral glucose tolerance test using grams glucose
222. Enumerate the causes of first trimester pregnancy loss
223. How will one differentiate antepartum haemorrhage due to Placenta previa
224. from Abruptio placentae?

225. If LMP (last menstrual period) is not known, describe the methods by which
226. EDD (expected date of delivery) could be arrived at
227. Describe the procedure of "manual removal of the placenta"
228. What are the planes of the inlet, mid pelvis and outlet in the true pelvis?
229. What is active management of the third stage of labour?
230. Define maternal mortality and perinatal mortality rates
231. Enumerate the antenatal complications encountered in multiple pregnancies
232. Define pregnancy induced hypertension Classify Hypertensive diseases in pregnancy
233. Deep transverse arrest
234. Partogram
235. Meconium aspiration syndrome
236. GDM diagnosis and management
237. Define atonic PPH and its management
238. III Short answers on :
 239. Prostaglandins
 240. Causes of birth asphyxia
 241. Apgar score
 242. NST (Non-Stress Test)
 243. Aims of Antenatal care
 244. Recurrent Abortions
 245. Vaginal birth after Caesarean (VBAC)
 246. Asymptomatic Bacteriuria
 247. Eclampsia
 248. Lochia
 249. Antenatal corticosteroids
 250. New York Heart Association (NYHA) classification
 251. Couvelaire uterus
 252. Quantification of albuminuria
 253. Precipitate labour
 254. Give details of the management of a postdated pregnancy
 255. What is parenteral treatment of anemia in a pregnant woman and when is it indicated?
 257. What are the drugs used in pregnancy for Human Immunodeficiency Virus infection?
 259. Describe the role of medical nutrition therapy in gestational diabetics
 260. Describe the gynaecoid type of pelvis and compare it with the android type
 261. What are the breast changes in pregnancy?

262. What are the common causes for polyhydramnios in the mother?
263. What are the grades of abruptio placentae?
264. Describe early, late and variable deceleration on cardiotocography
265. Define perinatal mortality and list the common causes for the same
266. Physiology of lactation
267. Cervical incompetence
268. Effects of diabetes on pregnancy
269. Impacted breech
270. Bishop score
271. Active Management of Third Stage of Labor (AMTSL)
272. Define mechanism of labor
273. Amniocentesis
274. HELLP syndrome
275. Discordant twins
276. Shoulder dystocia
277. Adherent placenta
278. APGAR score
279. Acute renal failure in obstetrics
280. Threatened abortion
281. Anti-D prophylaxis
282. Maternal mortality
283. Alpha fetoprotein
284. Follow up of molar pregnancy
285. Engagement of presenting part
286. Episiotomy
287. Couvelaire uterus
288. Preconception counseling
289. Vanishing twin
290. Cardiovascular physiology during pregnancy, labour and puerperium
291. Atosiban
292. Quickening
293. Sacrocotyloid diameter
294. Dr Muthulakshmi Reddy scheme
295. Mc Donald's Cerclage
296. First trimester ultrasound
297. Pritchard's Regimen
298. Parenteral iron therapy
299. Non stress test

- 300. Management of molar pregnancy
- 301. Placenta succenturiata
- 302. Pawlik's grip
- 303. Rooming In
- 304. Folic acid
- 305. Macrosomia
- 306. Hydramnios
- 307. Hyperemesis gravidarum
- 308. Biophysical profile
- 309. Incomplete abortion
- 310. Safe motherhood
- 311. β HCG
- 312. Modified Brandt Andrew's method
- 313. Moulding
- 314. Lovset's manoeuvre
- 315. Asymptomatic bacteriuria
- 316. Glucose challenge test
- 317. HELLP syndrome
- 318. Missed abortion
- 319. Antenatal care
- 320. Role of cardiac surgery in pregnancy
- 321. Naegele's rule
- 322. Iron sucrose
- 323. Anencephaly
- 324. Indirect coomb's test
- 325. Baby friendly hospital
- 326. Amnion
- 327. Admission test
- 328. Diagnosis and management of preterm labour
- 329. Braxton – Hicks contraction
- 330. Cord blood
- 331. Fetus papyraceous
- 332. B-Lynch suture
- 333. Isthmus
- 334. Serum fibrinogen
- 335. Macrosomia
- 336. Partogram
- 337. Conduct of VBAC in a case of Post Caeserean Pregnancy

- 338. Indications, Techniques and complication of Episiotomy
- 339. Doppler in Obstetrics
- 340. Septic abortion
- 341. Kangaroo Mother Care
- 342. Maternal Near Miss
- 343. Magnesium Sulfate
- 344. Management of HIV Complicating Pregnancy
- 345. After coming head in breech presentation

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