Q.P. Code: 327001 **Reg. no.: .....**

Third Professional MBBS Part II Degree Supplementary Examinations
October 2025
Obstetrics and Gynaecology
Paper II - Gynaecology and Family Welfare
(2019 Scheme)

Time: 3 Hours **Total Marks: 100**

- ***Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers***
- ***Indicate the question number correctly for the answer in the margin space***
- ***Answer all parts of a single question together • Leave sufficient space between answers***
- ***Draw table/diagrams/flow charts wherever necessary***

1. Multiple Choice Questions **(20x1=20)**

The **MCQ** questions **(Q.No. i to Q.No. xx)** shall be answered **only in the OMR sheet provided at page No. 51** of the answer book (the inner portion of the back cover page (PART III)). Responses for MCQs marked in any other part/page of the answer book will not be valued. **For marking the correct responses use X mark only**

Question numbers i-v case scenario-based questions

A 55 year old unmarried obese lady presents with post menopausal bleeding. On examination cervix and vagina are healthy.

i. What is the next line of management:
   a) Hysteroscopy c) LLETZ/LEEP
   b) TVS and Endometrial sampling d) CT scan

ii. Corpus cancer syndrome in Carcinoma Endometrium is
   a) Obesity, Hypertension, Increased Lipid Profile
   b) Diabetes Mellitus, Ischemic Heart Disease, Colon Cancer
   c) Hypertension, Diabetes Mellitus, Obesity
   d) Carcinoma Cervix, Carcinoma Ovary, Carcinoma Endometrium

iii. FIGO Stage 2 Carcinoma endometrium is:
   a) >50% myometrial invasion c) Invasion into cervical stroma
   b) <50% myometrial invasion d) Invasion into serosa of uterus

iv. Most common cause of postmenopausal bleeding is:
   a) Endometrial atrophy c) Carcinoma cervix
   b) Carcinoma Endometrium d) Hormonal replacement therapy

v. p53 mutation is seen in which histological type of carcinoma endometrium:
   a) Endometriod b) Serous cell c) Squamous cell d) Mucinous

Question numbers vi-x consist of two statements - Assertion (A) and Reason (R). Answer these questions by selecting the appropriate options given below.

a) Both A and R are correct, R is the correct explanation of A **c) A is correct, R is incorrect**
b) Both A and R are correct, R is not the correct explanation of A **d) A is incorrect, R is correct**

vi. **Assertion:** There is prolonged amenorrhea after depot progesterone injections
   Reason: Endometrial atrophy occurs due to depot progesterone injections

vii. **Assertion:** IUCD insertion is a risk factor for PID
   Reason: IUCD is a long acting reversible contraceptive

viii. **Assertion:** Retroverted fundal fibroid causes retention of urine
   Reason: Retention of urine is due to stretching and occlusion of urethra

ix. **Assertion:** In syndromic management of STI, Kit 1 is used to treat lower abdominal pain (PID)
   Reason: Kit 1 contains Tab.Azithromycin + Tab. Cefixime

x. **Assertion:** Inhibin is increased in granulosa cell tumors
   Reason: Granulosa cell tumors have good prognosis

Question numbers xi-xv are multiple-response type questions. Read the statements & mark the answers appropriately.

xi. True about Asherman's syndrome:
   1) Seen after genital TB 2) Seen after rigorous endometrial curettage
   3) Causes menorrhagia 4) Treatment is Tuboplasty
   a) 1, 2, 3, 4 b) 1, 3, 4 c) 1, 2, 3 d) 1, 2

xii. Treatment for myoma include:
   1) Myomectomy 2) MR guided Ultrasound 3) CT scan 4) Embolisation
   a) 1, 2 and 4 b) 1 and 4 c) 1 and 2 d) 1 only

(PTO)

xiii. Intra uterine contraceptive devices are used for:
1) Contraception 2) Decrease blood loss in AUB
3) Prevent ectopic pregnancy 4) Prevents STI
a) 1 only b) 1 and 4 c) 1 and 2 d) 1, 2 and 4

xiv. Pre requisites for female sterilization include:
1) Age >22 years 2) At least 2 children alive and healthy
3) Interval sterilization can be done after 6 weeks of delivery
4) Can be done in postpartum period after 24 hours
a) 2 only b) 1 and 2 c) 2 and 3 d) 1, 3 and 4

xv. Adenomyosis with infertility can be treated with:
1) Adenomyomectomy 2) Wedge resection 3) Progesterone IUCD
4) Uterine artery embolisation
a) 1 and 3 b) 1 and 2 c) 2 and 3 d) 2 and 4

Question numbers xvi-xx are single-response type questions

xvi. On clinical examination cervix is deviated to extreme right. The most likely diagnosis is:
a) Cervical fibroid c) Left broad ligament fibroid
b) Right broad ligament fibroid d) Left cornual fibroid

xvii. According to ART and surrogacy act 2021, the eligibility criteria for a surrogate mother is:
a) Genetically related c) Shall provide her own gamete
b) <45 years d) Can be a surrogate mother only twice in her lifetime

xviii. In Urogenital fistula, while doing methylene blue 3 swab test, the uppermost swab is stained blue. This indicates:
a) Ureteral injury c) Vesicocervical fistula
b) Upper VVF d) Urethrovaginal fistula

xix. The treatment of choice in Cryptomenorrhea is:
a) Laparoscopy and drainage c) Vaginoplasty
b) Cruciate incision hymenotomy d) Psychiatric evaluation

xx. In classification of Abnormal uterine bleeding(AUB), AUB-E is
a) Endometrial dysfunction c) Endometrial cancer
b) Endometriosis d) Erosion of cervix

Long Essays: **(2x10=20)**

2. A 35 year old lady with failure to conceive for past 8 years presents to infertility clinic.
   a) What are the tests done for basic evaluation of infertility
   b) Describe semen analysis
   c) Diagnostic criteria for PCOS (3+4+3)
3. A 55 year old multiparous lady complains of post coital bleeding.
   a) What are the causes of post coital bleeding
   b) What is the next step if there is a growth over the cervix
   c) Describe the FIGO staging of Carcinoma cervix
   d) Add a note on prevention of Carcinoma cervix (2+1+4+3)

Short Essays: **(6x6=36)**

4. A 30 Year old Nulligravida, married for 1 year presents with mass descending per vagina. How will you evaluate her. Describe sling surgeries.
5. A 27 year old presents with acute lower abdomen pain and nausea for two days duration. What are the differential diagnosis. Describe the management of PID in her.
6. A 36 year old lady with normal BMI, married for 6 months, presents with severe dysmenorrhea for 2 years and now she complains of dyspareunia. What is the diagnosis. Describe the management.
7. A 14 year old girl is brought by her mother stating there are no pubertal changes. Mention the condition and how will you evaluate.
8. A 30 year old Para 1 living 1 presents to OPD seeking for contraception. Her last child birth was 2 years ago. How will you counsel her for contraception.
9. A 55 year old presents with hot flushes. What are the other symptoms and signs of menopause. Briefly describe hormone replacement therapy.

Short Answers: **(6x4=24)**

10. Describe FIGO classification of fibroid uterus.
11. Follow up of vesicular mole.
12. Role of laparoscopy in Gynacology.
13. Classify ovarian tumors.
14. Diagnosis and management options for Stress urinary incontinence.
15. Turner's syndrome.

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