[Time: 3 Hours] [Max. Marks: 100]

HIGH RISK PREGNANCY - PAPER - I OP Code: 4233

Your answers should be specific to the questions asked Draw neat labeled diagrams wherever necessary

Answer All The Questions

10 X 10 = 100 Marks

- G2P1L1 with 28 weeks of gestation with history of GDM in previous pregnancy. Discuss the screening, diagnosis and complications of GDM in pregnancy
- 2. Primigravida with 38 weeks of gestation with cephalic presentation with mitral valve stenosis with NYHA grade IV in labor. How do you manage the labor and briefly enumerate the complications?
- What are the physiological changes in coagulation system in pregnancy? Name the causes and laboratory tests for diagnosis of DIC in pregnancy
- G2P1L1 with 34 weeks of gestation with fever and cough for 2 days and breathlessness since morning. Enumerate the causes. Discuss the management if covid positive
- G4P2L2A1 with 32 weeks of gestation with hemoglobin of 7 g/dl. Discuss the management and prevention of anemia in pregnancy
- G2A1 with 20 weeks of gestation newly diagnosed with HIV positive status. Discuss the management, counselling and complications
- G4P3L3 with 2 moths of amenorrhea with MTP pill abuse with fever in shock. Discuss the management of septic abortion and sequelae
- Primigravida with 30 weeks of gestation with newly detected hypertension. Classify hypertensive disorders of pregnancy. Discuss the management of eclampsia for the above case
- Primigravida with 10 weeks of gestation is having severe vomiting for 2 days. Discuss the pathophysiology and management of Hyperemesis gravidarum
- Primigravida with 28 weeks of gestation with chronic renal failure. Discuss the management during antenatal period

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