

Rajiv Gandhi University of Health Sciences, Karnataka

Fellowship Examination – 07-Sep-2023

[Time: 3 Hours]**[Max. Marks: 100]****HIGH RISK PREGNANCY - PAPER – I****QP 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**

1. What is the differential diagnosis of jaundice in pregnancy? Write the diagnostic criteria for each of the above. How will you manage a case of acute fatty liver of pregnancy at 34 weeks of pregnancy?
2. What are anti-phospholipid antibodies? Write about the clinical and laboratory criterias of diagnosing antiphospholipid antibody syndrome. What are the pregnancy complications associated with thrombophilias?
3. Write about the diagnosis of unruptured tubal ectopic pregnancy. What is expectant management for unruptured tubal ectopic pregnancy and management of persistent trophoblastic activity following management of ectopic pregnancy
4. What are the screening protocols for Gestational Diabetes Mellitus (GDM) and discuss the role of oral hypoglycemic agents in the management of GDM. Write about the management of diabetic ketoacidosis during pregnancy
5. Enumerate the methods of laboranalgesia. What are the contraindications for neuraxial analgesia also discuss about postdural puncture headache management
6. 25 year old woman with sickle cell disease comes to antenatal clinic with her husband for pre-pregnancy counselling. Her husband has a sickle cell trait. What issues should you include in your discussion? Discuss the management of pregnancy with sickle cell disease
7. A 25 year old woman has been referred at 18 weeks gestation because he haemoglobin concentration is 8.1g/dl. Discuss your initial assessment and her treatment options given that she has iron deficiency anaemia. Discuss your intra-partum and post-natal care given that she goes into spontaneous labour at 38 weeks gestation and her Hb at 37 weeks was 8.4g/dl
8. A healthy 30 year old woman has been referred to the assessment unit at 32 weeks gestation because her BP is 170/115 mmHg and she has 3+ proteinuria on automated reagent stix testing. Discuss your initial assessment. During clinical assessment, she suffers a grand mal seizure. Discuss your subsequent ante-partum management
9. A 29 year old Primigravida presented at 36 weeks of gestation. She complained she could not move her mouth properly. What is the differential diagnosis? What other information / investigations might be useful? How would you manage this pregnancy?
10. What are the types of morbidly adherent placenta? Discuss the risk factors, antepartum diagnosis of placenta accreta, anticipated complications in a woman diagnosed with placenta accreta at 34 weeks of pregnancy

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