

Madhya Pradesh Medical Science University, Jabalpur
MBBS Final Part-2 Examination August-2020

Paper Code:- 20BM0107100401

Subject- Obstetrics & Gynecology

Paper -I

Time :2:30Hours

Maximum Marks : 40

Instructions:

- All questions are compulsory
- Draw diagrams wherever necessary
- Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- MCQ has to be answered in theory answer book
- Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University

Q. 1

Total MCQs : 8

8 X 1/2 = 4

- A case of placenta previa can have all complications except
 - Hemorrhagic shock
 - IUD
 - Placenta Acreta
 - Concealed hemarrhage
- Management of eclampsia requires :-
 - Anti convulsants
 - Anti hypertensives
 - Induction of labour
 - All of the above
- Lactogenesis require which of the hormones
 - Prolactin
 - Growth hormones and glucocorticoids
 - Insulin
 - All of the above
- Patient with preterm labour pains should receive steroid for fetal lung maturity, which is the preferred drug
 - Betamethasone
 - Dexamethasone
 - Cortisol
 - None of the above
- Hyperemesis gravidarum is found in all condition except.
 - H. Mole
 - Multiple pregnancy
 - Low body mass
 - Older age
- Classic triad of symptoms of disturbed tubal pregnancy are
 - Amenorrhoea, abdominal pain, vaginal bleeding
 - Amenorrhoea, Chest pain, vaginal bleeding
 - Bodyache, abdominal pain, vaginal bleeding
 - Amenorrhoea, abdominal pain, leg cramps
- Favourable predictors for vaginal birth after cesarean (VBAC) includes all except
 - Prior nonrecurring indication
 - Average estimated fetal birth weight
 - Spontaneous onset of labour
 - Previous cesarean one year back
- What is superfecundation?
 - Fertilization of two or more ova in one intercourse
 - Fertilization of two or more ova in different intercourse in same menstrual cycle
 - Fertilization of ova and then its division
 - Fertilization of second ovum being implanted

3X 5 = 15

Q.2 Long Answer Question

- a. Describe H mole, risk factors and management.
- b. What is postpartum hemorrhage? Describe the type and causes of PPH. How will you manage atonic PPH?
- c. Describe eclampsia and its complications. How will you manage a case of eclampsia presenting at 34 weeks of pregnancy.

Q.3 Short Answer Question

- a. Classification of anemia. What is physiological anemia?
- b. Preterm labour
- c. Puerperal sepsis

3X 3 = 9

Q.4 Very Short Answer Question

- a. Episiotomy
- b. Importance of antenatal care
- c. Biophysical profile
- d. Type of abruption placenta and its complications
- e. High risk factors for preeclampsia
- f. MTP act

6X 2 = 12

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Madhya Pradesh Medical Science University, Jabalpur
MBBS Final Part-2 Examination August-2020
Paper Code:- 20BM0107100402
Subject- Obstetrics & Gynecology

Paper -II

Time :2:30Hours

Maximum Marks : 40

Instructions:

- All questions are compulsory
- Draw diagrams wherever necessary
- Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- MCQ has to be answered in theory answer book
- Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University

Q. 1

Total MCQs : 8

8 X 1/2 = 4

- In which of the following cases curettage is not done?
 - Acute PID
 - Suspected endometrial Carcinoma
 - Perimenopausal bleeding
 - Postmenopausal bleeding
- All are the complication of endometriosis except
 - Chocolate cyst
 - Infertility
 - Dysmenorrhoea
 - Dermoid cyst
- True hermaphroditism karyotype
 - 45 x 0 streak gonads
 - 46 xx ovary and testis
 - 47 xx + 9
 - 47 xx
- Which of the following is absolute contraindication for OCP use
 - Chronic renal disease
 - DVT
 - Diabetes mellitus
 - History of amenorrhoea
- All of the following is seen in chronic PID except
 - Pyometra uterus
 - Ectopic pregnancy
 - Infertility
 - Tubal factor
- In low ovarian reserve antimulterian hormone level will be
 - <1
 - 1-4
 - >7
 - >10
- Paget's disease is associated with which genital cancer
 - Vulva
 - Cervix
 - Vagina
 - Uterus
- Rotterdam's criteria for PCOD
 - Amenorrhoea or oligomenorrhoea
 - Clinical or biochemical sign of hyperandrogenism
 - Ovarian volume >10ml
 - All of the above

Q.2 Long Answer Question

3X 5 = 15

- What is abnormal uterine bleeding, define classification of AUB and management of menorrhagia.
- Describe fibroid uterus and its type, management of large intramural fibroid at the age of 45 years.
- Describe copper-T, what are the indications and contraindications for copper-T insertion.

3X 3 = 9

Q.3 Short Answer Question

- a. Ectopic pregnancy its type and management in rupture ectopic
- b. What is primary amenorrhoea and its aetiology.
- c. Staging of carcinoma cervix.

Q.4 Very Short Answer Question

6X 2 = 12

- a. Pap smear
- b. High risk factors for ovarian cancer
- c. PCOD
- d. Pelvic inflammatory disease
- e. Non contraceptive uses of combined oral contraceptives
- f. Shaw's system of classification for pelvic organ prolapse

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M-1192

**Final M. B. B. S. Professional Examination,
Feb.-March 2019**

OBSTETRICS GYANECOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : Attempt all questions.

1. Describe various physiological changes during pregnancy with advices to mother related to these physiological changes.

10

2. What is puerperium? Discuss normal and abnormal changes occur during puerperium. 10

3. Write short notes on : 20

(i) Abnormal uterine action

(ii) Complications of Third Stage of labour

(iii) Grand multipara

(iv) Multiple Pregnancy

M-1193

**Final M. B. B. S. (Professional) Examination,
Feb-March, 2019**

OBSTETRICS AND GYNAECOLOGY

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : Attempt all questions.

1. Write about the supports of uterus. Write in detail about the etiological factors responsible for prolapse. How will you manage a case of third degree prolapse at age of 45 years?

10

M-1193

PTO

2. Write about the fourth generation oral contraceptive pills. 5
3. Differentiate between :
 - (a) Fibroid uterus & Adenomyosis 5
 - (b) Bacterial vaginosis and vaginal candidiasis 5
4. Write short notes on :
 - (a) Male contraception 5
 - (b) Cervical fibroid 5
 - (c) WHO prognostic scoring system for gestational trophoblastic disease. 5

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Madhya Pradesh Medical Science University, Jabalpur
MBBS Final Part-2 Examination June 2019
Paper Code:- 19BM0000100401
Subject-Obstetrics & Gynecology I

Time : 2:30 Hours

Maximum Marks : 40

Instructions:

- a) All questions are compulsory
- b) Draw diagrams wherever necessary
- c) Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- d) MCQ has to be answered in theory answer book
- e) Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- f) MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be considered as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University
- g) Student can answer the question in both hindi & English language

Q. 1 Total MCQs : 8

8 X 1/2 = 4

- 1 Blighted Ovum is also known as-
a. Incomplete abortion b. Early fetal demise c. Missed abortion d. Threatened abortion
- 2 Which is shortest diameter of fetal skull
a. Bitemporal b. Suboccipito frontal c. Biparietal d. Occipitofrontal
- 3 Hegar sign can be elicited by-
a. 10 weeks b. 12 weeks c. 15 weeks d. 8 weeks
- 4 Ovarian tumor prone to undergo torsion is-
a. Dermoid cyst b. Serous cystoderoma c. Mucinous cystoderoma d. Theca leutin cyst
- 5 Commonest complication during vaginal delivery of diabetic mother at term is-
a. Moulding b. Uterine inertia c. PPH d. Shoulder dystocia
- 6 In a nullipara prolonged 2nd stage of labour is more than-
a. 30 Min b. 1 Hour c. 2 Hour d. 3 Hour
- 7 For caesarean section following is not an indication-
a. Occiputo transvers b. CaCxlb2 c. Genital Herpese d. Type IV pl provia
- 8 Normal range of Ammolie fluid index is-
a. 10-20 b. 2-25 c. 10-30 d. 5-30

Q.2. Long Answer Question

3X 5 = 15

- a. Define APH, write its classification and management of abruption placentae.
- b. Clarify Hypertensive disorder in pregnancy. Write management of gestational hypertension in 28 weeks
- c. Define normal labour, write management of 2nd stage labour.

Q.3 Short Answer Question

3X 3 = 9

- a. Bishops score and its significance.
- b. Define PROM and write causes of PROM.
- c. Enumerate causes of different colour amniotic liquor.

Q.4 Very Short Answer Question

6X 2 = 12

- a. PPIUCD.
- b. Emergency contraception.
- c. Follow up of vesicular mole.
- d. Antepartum surveillance.
- e. Low birth weight newborn
- f. Lactation failure

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Madhya Pradesh Medical Science University, Jabalpur

MBBS Final Part-2 Examination 2019

Paper Code:- 19BM0000100402

Subject-Obstetrics & Gynecology II

Time : 2:30 Hours

Maximum Marks : 40

Instructions:

- All questions are compulsory
- Draw diagrams wherever necessary
- Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- MCQ has to be answered in theory answer book
- Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- I. (a) I. (b)
- MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University
- Student can answer the question in both Hindi & English language

Q.1 Total MCQs : 8

8 X 1/2 = 4

1 Squamo columnar junction is situated on :-

- a. Vagina b. Uterus c. Cervix d. Ovary

2 Infrequent painless contraction of labour are-

- a. Braxtonhicks b. Hyperactive uterus c. Uterine Inertia d. Normal Labour pains

3 Adult female urethra measure around:-

- a. 4 Cms. b. 2 Cms. c. 6 Cms. d. 8 Cms.

4 HPV Vaccine is best given at :-

- a. 9-14 Yrs b. 12-24 Yrs c. 24-40 Yrs d. 40-45 Yrs

5 Hysteroscopy is examination of :-

- a. Urethra b. Vagine c. Uterine Cavity d. Pelvis

6 Bacterial vaginosis clinically diagnosed by presence of :-

- a. Creamy vaginal discharge b. Red vaginal discharge c. Green vaginal discharge d. Yellow vaginal discharge

7 Cervical Ectopy is seen in :-

- a. Ulcer b. Polyp c. Normal Ectocervix d. Ovarian Mass

8 Muelerschmerz's Pain is :-

- a. Ovular pain b. Cervical Pain c. Abdominal Pain d. Throat Pain

Q.2. Long Answer Question

3X 5 = 15

- Define CIN, Enumerate risk factors for CIN
- What is social obstetrics, How can you contribute as medical doctor.
- Define AUB, write classification

Q.3 Short Answer Question

3X 3 = 9

- a. Iron Sucrose use
- b. Invasive mole – follow up
- c. Benign Ovarian Mass - Causes

Q.4 Very Short Answer Question

6X 2 = 12

- a. HRT
- b. Primary Infertility
- c. Blood Supply of Uterus
- d. Trichomoniasis
- e. Pap Test
- f. Genital TB

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M-1224

**Final M. B. B. S. (Professional) Examination,
Sept.-Oct. 2017**

OBSTETRICS & GYNAECOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Note : All questions are compulsory.

1. How will you manage G₂ P₁ AoL₁, 34 weeks pregnancy with antepartum eclampsia. Enumerate fetomaternal complications of antepartum eclampsia. 10

2. Differentiate between abruptio placentae and placenta previa.

3. Write short notes on : (any four)

4×5=20

(a) AMTSL

(b) Neonatal jaundice

(c) Vasa previa

(d) Hyperemesis of pregnancy

(e) Haemodynamic changes in pregnancy

M-1225

Final M. B. B. S. Examination, Sept.-Oct. 2017

OBSTETRICS & GYNAECOLOGY-II

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory. Write answers in serial order.

1. Enumerate causes of abnormal uterine bleeding in 48 yrs. old woman. Write management plan for Cancer Endometrial.

10

2. Classify Leiomyoma and discuss management of 3 cms submucosal fibroid in 40 years old woman.

10

3. Write short notes on :

4×5=20

(i) Bacterial Vaginosis

(ii) LNG-IUCD

(iii) Ovarian Dermoid

(iv) Medical Management of Ectopic pregnancy

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M-1224

**Final M. B. B. S. (Professional) Examination,
Feb.-March 2017**

OBSTETRICS & GYNAECOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. Define antenatal care. Describe steps taken in antenatal care with antenatal advices.

10

2. Enumerate medical complications of pregnancy. Discuss management of anaemia and diabetes during pregnancy. 10

3. Write short notes on :

4×5=20

(a) Bad obstetric history

(b) Placenta previa

(c) Vomiting in pregnancy

(d) Diagnosis of Pregnancy

M-1225

**Final M. B. B. S. (Professional) Examination,
Feb.-Marh 2017**

OBSTETRICS & GYNAECOLOGY

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

*Note : All questions are compulsory. Write answers
in serial order.*

1. A 55 year old postmenopausal woman came to gynae
OPD with complaints of BPV oft and on : 2 months and
fowl smelling discharge P/V since 1½ months on

M-1225

PTO

[2]

examination woman 100 kg cachexic, P/S-A cauliflower like growth of 3 × 3 cm seen over cervix, P/V-same growth felt, uterus bulky, mobile fornices clear.

- (i) Probable diagnosis of the patient. 2
- (ii) How will you confirm the diagnosis? 4
- (iii) How will you treat this patient? 4

2. Write mechanism of action of IUCDS, how will you classify IUCDS? Write contraindication and complications of IUCD. 10

3. Write short notes on :

- (i) Role of hysteroscopy in infertility 5
- (ii) Dysfunctional uterine bleeding 5
- (iii) Bacterial vaginosis 5
- (iv) Differential diagnosis of fibroid uterus 5

M-1225

**Final M. B. B. S. (Professional) Examination,
Sept.-Oct. 2016**

OBSTETRICS & GYNAECOLOGY

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : Attempt all questions.

1. Define CIN. Write grades of CIN & how will you manage a case of CIN-III? 10
2. Classify Oral contraceptive pill. Write mode of action of

CUCP's. What are the contraindications for using OCP's?

10

3. Write short notes on :

(i) MTP act

5

(ii) Types of fibroid

5

(iii) Role of HSG in infertility

5

(iv) Partial hydatiform mole

5

M-1224

**Final M. B. B. S. (Professional) Examination,
Feb.-March. 2016**

OBSTETRICS & GYNAECOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. Define intrauterine growth restriction. What are the causes of IUGR? How would you manage a case of IUGR at 32 wks. pregnancy in a primigravida. 10

M-1224

PTO

2. What is Atonic Haemorrhage? How would you manage post partum haemorrhage in a woman referred to your hospital in shock within one hour of delivery? 10

3. Write short notes on :

4×5=20

(a) Predictors of pregnancy induced hypertension

(b) Intrauterine foetal death

(c) Role of USG in 2nd trimester of pregnancy

(d) Various types of female pelvis

M-1224

**Final M. B. B. S. (Professional) Examination,
Sept.-Oct., 2015**

OBSTETRICS & GYNECOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. What is antepartum Haemorrhagia? Describe the types of Placenta Previa. How will you manage a 20 yrs primigravida diagnosed by ultrasonography as placenta previa type II anterior.

10

2. What are the absolute indications for Caesarean Section?
What is VBAC (Vaginal Birth After Caesarean Section)?
Describe its criteria and conduct. 10

3. Write short notes :

4×5=20

(a) Partogram

(b) Bandl's ring

(c) Apgar score

(d) USG in obstetrics