

## **BRAINWARE UNIVERSITY**

## Term End Examination 2020 - 21

Programme – Bachelor of Science in Physician Assistant Course Name – Obstetrics and Gynecology Course Code - BPA305

Semester / Year - Semester III

Time allotted: 75 Minutes

Full Marks: 60

[The figure in the margin indicates full marks. Candidates are required to give their answers in their own words as far as practicable.]

## **Group-A**

(Multiple Choice Type Question) 1 x 60=60

- 1. (Answer any Sixty)
- (i) A 21-year-old woman, who is known to have beta thalassemia major, attends the clinic for preconception counselling. What is the most relevant initial pre-pregnancy investigation to predict maternal complications of pregnancy?
  - a) Cardiac MRI

b) Chest X-Ray

c) ECG

- d) Echocardiogram
- (ii) You are asked to see a 21-year-old woman for preconceptual care. She was diagnosed with generalised tonic-clonic epilepsy four years ago. This is poorly controlled. She is currently on sodium valproate and levetiracetam. What is the next step in her management?
  - a) Arrange MRI

b) Commence folic acid 5 mg

c) Arrange an EEG

- d) Review medication
- (iii) A 28-year-old woman attends the mental health antenatal clinic at 12 weeks for a booking assessment. This is her first baby. Which condition gives her the highest risk of puerperal psychosis?
  - a) Bipolar affective disorder

- b) Anorexia nervosa
- c) Obsessive compulsive disorder
- d) Moderate depression
- (iv) During pregnancy, the placenta and fetus actively contribute to the maternal hormone levels and impact the maternal-fetal unit physiology. Which

of the following hormones decreases after the f	irst trimester of pregnancy?
a) Progesterone	b) Human chorionic gonadotropin (hCG)
c) Estriol	d) Prolacttin
(v) Which of the following is not the screening	test for cervical cancer?
a) Pap test	b) Colonoscopy
c) HPV DNA	d) None of these
(vi) Worldwide, which of the following is the napregnancy?	nost common problem during
a) heart disease	b) urinary tract infection (UTI)
c) iron-deficiency anemia	d) diabetes
<ul> <li>(vii) A patient presents with a positive pregnance of her last normal menses, and the date of her last from a urine kit. Her expected date of delivery by which of the following?</li> <li>a) adding 254 to the date of the start of the last menstrual period (LMP)</li> <li>c) counting 280 from the first day of the LMP</li> </ul>	uteinizing hormone (LH) surge
(viii) The most worrisome sign or symptom of late pregnancy is which of the following?	potentially serious pathology in
a) swollen ankles	b) constipation
c) visual changes	d) nocturia
(ix) Routine screening procedures at her first procedures at her first procedures at her first procedure primigravida with an estimated gestational include which of the following?	•
a) quadruple test	b) family history
c) 1-hour glucose challenge	d) ultrasound

(x) A patient is measuring size larger than dates at her initial obstetric visit at 24 weeks' EGA. She is worried about twins since they "run" in the family. The best method to safely and reliably diagnose twins is by which of the following?		
a) ultrasonography	b) Leopold's maneuvers	
c) Family history	d) computed tomography (CT) scan	
(xi) Of the following evaluations done during routine prenatal care in a normal pregnancy, which of the following is most important in the initial clinic visit?		
a) routine measurement of the fundus	b) determination of the gestational age	
c) determination of maternal blood pressure	d) maternal weight	
(xii) The human placenta is a complex structure that serves as the interface between the fetus and maternal circulation to allow excretory, respiratory, and nutritional functions for the fetus. It does which of the following?		
a) allows mainly small molecules and a few blood cells to pass	b) allows maternal blood to enter the fetal circulation but not vice versa	
c) allows only large molecules to pass	d) allows total mixing of the maternal and fetal blood	
(xiii) What is the maximum normal time for the second stage of labor in a primigravida without anesthesia?		
a) 20 minutes	b) 60 minutes	
c) 120 minutes	d) 240 minutes	
(xiv) Certain patients are more likely than others to have uterine atony and hemorrhage after delivery. Circumstances that predict possible increased bleeding postpartum include which of the following situations?		
a) prolonged labor	b) hypertensive disorders	
c) obesity	d) None of these	
(xv) Which of the following is the most commo cesarean section?	on indication for primary	

a) dystocia	b) prolapsed cord
c) diabetes	d) malpresentation
(xvi) Which of the following factors tends to inclabor?	crease the average duration of
a) increasing parity	b) increasing age of the mother
c) decreasing size of the baby	d) occiput posterior (OP) position of the baby
(xvii) A fetus presents in breech position and is far as the umbilicus. The remainder of the body obstetrician. What is this called?	
a) version and extraction	b) spontaneous breech delivery
c) partial breech extraction	d) total breech extraction
(xviii) A 30-year-old methamphetamine user pr She has had no prenatal care, but says she is 9½ position and feel face and nose. You are concer associated condition with a face presentation is	months. You check fetal ned, because the most common
a) anencephaly	b) hydrocephaly
c) prematurity	d) placenta previa
(xix) A patient has entered spontaneous premate During the vertex delivery, one should do which	C
a) recommend epidural anesthesia to control delivery	b) perform an episiotomy
c) use prophylactic forceps	d) allow spontaneous vaginal birth
(xx) A patient becomes suddenly unresponsive absolute diagnosis of amniotic fluid emboli is n	
a) electrocardiogram (ECG) changes	b) chest X-ray
c) amniotic debris in the pulmonary	d) the presence of consumptive

circulation

## coagulopathy

(xxi) Which of the following is the most common cause of failure to establish effective respiratory effort in the newborn?

a) fetal acidosis

b) fetal immaturity

c) upper airway obstruction

d) infection

(xxii) A 2-day-old newborn has a mild degree of hyperbilirubinemia. What is the most appropriate next step in management?

a) observation only

b) O-negative packed red blood cells

(RBCs) given as an exchange transfusion

c) spinal tap

d) exposing the infant to light

(xxiii) Examination of an asymptomatic 2-day-old infant girl shows a distended abdomen. The urinary bladder and rectal ampulla are empty. A solitary unilocular cyst is visualized with ultrasonography. Which of the following is the best next step in the management of this patient?

a) observation

b) exploratory surgery

c) intravenous pyelogram (IVP)

d) cystoscopy

(xxiv) A 60-year-old woman has the following findings on an examination of her breast. Which one is the most likely to be a late finding of breast cancer?

a) skin or nipple retraction

b) greenish-gray discharge

c) darkening of the areola

d) None of these

(xxv) A 65-year-old woman returns for the results of her vulvar biopsy. Which of the following is the etiologic agent (or immediate precursor lesion) for vulvar cancer?

a) squamous cell hyperplasia

b) chronic irritation

c) atrophic dystrophy

d) unknown

(xxvi) Which of the following types of vulvar cancer occurs most commonly?

a) Paget's	b) squamous	
c) melanoma	d) None of these	
(xxvii) Which of the following is the exervix and endocervix?	most common benign neoplasm of the	
a) polyp	b) leiomyoma	
c) endometriosis	d) None of these	
(xxviii) A 38-year-old patient has been fter a mammogram revealed a mass. diagnose?	n asked to get an ultrasound of the breast What is ultrasound most useful to	
a) fibroid adenomas	b) invasive cancer	
c) in situ carcinoma	d) benign cysts	
(xxix) In the normal labor, the pressurgreatest at which of the following time	re produced by uterine contractions is es?	
a) latent phase	b) active phase	
c) second stage	d) third stage	
	h pregnancy. She has 2 children at home abortion and one child died at childbirth, at?	
a) G5 P3+1	b) G4 P2+1	
c) G4 P1+2	d) G5 P2+2	
(xxxi) Pregnancy can be diagnosed w	ith tvs as early as	
a) 5 weeks	b) 7 weeks	
c) 4 weeks	d) 8 weeks	
(xxxii) Quickening can be seen in a m	nultipara pt as early as	
a) 16 weeks	b) 17 weeks	
c) 18 weeks	d) 19 weeks	

(xxxiii) Spalding sign can be seen in IUD w	vith x-ray after
a) 24 hours	b) 48 hours
c) 1 week	d) 2 weeks
(xxxiv) M/C cause of anemia during pregna	nncy
a) Thalassemia	b) Anemia due to chronic diseases
c) . Sickle cell anemia	d) . Iron deficiency anemia
(xxxv) Oligohydramnios can be caused by	
a) Renal anomaly in fetus	b) Placental insufficiency
c) Congenital heart disease	d) All of these
(xxxvi) 1st sign of IUD is	
a) Spalding sign	b) Hyper flexion of spine
c) Air in heart	d) Egg cell cracking feel of the fetal head
(xxxvii) If a woman's LMP is 1 month 15 d EDD?	lays back from today what is the
a) lmp+ 9 months 7 days	b) lmp + 6 months 7 days
c) lmp+ 10 months	d) None of these
(xxxviii) Viable fetus age limit is	
a) 100 days	b) 90 days
c) 140 days	d) 120 days
(xxxix) HIV infection maximum occurs in	
a) Labour	b) Antepartum
c) Child birth	d) Breast feeding
(xl) UPT can be positive after how many da	ays of termination of pregnancy

a) 1 month	b) 14 days
c) 10 days	d) 1 week
(xli) During late pregnancy, which of the disease?	following implies urinary tract
a) decreased serum creatinine	b) glucosuria
c) dilation of the ureters	d) decreased creatinine clearance
(xlii) The main cause of IUD is	
a) Idiopathic	b) Fetal placental insufficiency
c) Congenital anomaly	d) All of the above
(xliii) An woman with increased chances of	of a fetal anomaly is
a) chronic hypertension +GDM	b) PIH+GDM
c) Chronic hypertension +DM	d) All of them
(xliv) The patient should not take any unp	rescribed drug during
a) 1st trimester	b) 2nd trimester
c) 3rd trimester	d) All of these
(xlv) Which of the following can be done	to monitor fetal well being
a) DFMC	b) NST
c) CTG	d) All of them
(xlvi) Most effective for detection of neur	al tube defect is
a) AFP	b) MRI
c) CT	d) Ultrasound
(xlvii) The fertile period of a Female is me	easured by
a) FSH	b) Estrogen
c) LH	d) Prgesterone

(xlviii) A patient at 38 weeks comes to op AFI is 7. The next step is	od with c/o decreased liquor volume,
a) hospitalisation and immediate termination of pregnancy	b) hospitalisation and usg fpp with doppler
c) hospitalisation and expectant management	d) NST
(xlix) Indication of Caesarean section in t	he diagnosis of IUD is
a) Transverse lie	b) Placenta previa
c) Repental c-section	d) All of these
(l) A decrease In serum B Hcg level can is	ndicate
a) Ectopic pregnancy	b) Abortion
c) IUFD	d) All of these
(li) Tissue sampling in this patient reveals most common symptom associated with the	
a) vaginal discharge	b) amenorrhea
c) vaginal bleeding	d) pelvic pain
(lii) Regarding immunization during preg- vaccines would be the safest to receive du	·
a) Mumps	b) Polio
c) Rabies	d) Rubella
(liii) What procedure is designed to preve of axillary lymph node dissection, and has predictive values for detecting lymph node	s very good positive and negative
a) MRI	b) fine-needle biopsy
c) sentinel node mapping	d) None of these

colour

(liv) At 12 weeks gestation where would you expect to feel the uterine fundus?		
a) Umbilicus	b) Xiphisternum	
c) Halfway between Umbilicus and Xiphisternum	d) Symphysis pubis	
(lv) Which of the following is not cause of post	partum haemorrhage?	
a) Coagulapathy	b) Vaginal of vulval laceration	
c) Uterine atony	d) Placental shrinkage	
(lvi) Which of the following methods is the correstimated date of delivery (EDD)?	rect way to calculate the	
a) First day of LMP+ 8 months and 1 week	b) First day of LMP+ 9 months	
c) First day of LMP+ 9 months and 1 week	d) Last day of LMP+ 8 months	
(lvii) Which structure provides the major support to the uterus and cervix?		
a) Cardinal ligaments	b) Uterosacral ligaments	
c) Round ligaments	d) Broad ligaments	
(lviii) A 46-year-old, non-pregnant, morbidly o irregular periods over the past 6 months. Which most appropriate initial management in this sett	of the following represents the	
a) Endometrial ablation	b) Dilation and curettage of Endometrium	
c) Oral contraceptives	d) Endometrial biopsy	
(lix) Which of the following is NOT a risk factor	or for ectopic pregnancy?	
a) Prior history of pelvic inflammatory disease (PID)	b) Prior history of uterine fibroids	
c) Prior history of infertility	d) Prior history of tubal surgery	
(lx) During early embryonic development the g cells fail to enter the developing genital ridge, v likely to occur?		

- a) ovarian teratomas
- c) ectopic pregnancy

- b) gonadal agenesis
- d) testicular feminization