



**FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA**  
**Final Examination for Medical Degrees – July 2023**

**OBSTETRICS & GYNAECOLOGY – PAPER I**

**Tuesday 11<sup>th</sup> July 2023**

**1.00 pm – 3.00 pm**  
**( 2 hours )**

**Answer all five questions**  
**Answer each question in a separate book**  
**Operative details are not required**

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1. Discuss the measures which could be adopted to reduce complications of teenage pregnancies in Sri Lanka. (100 Marks)
  
2. A 40 year old mother of six children presented to the antenatal clinic at 16 weeks of gestation.
  - 2.1 Define the term “grand multipara”. (10 Marks)
  - 2.2 List **six (6)** possible obstetric complications that is anticipated in this patient. (30 Marks)
  - 2.3 Briefly describe the antenatal measures you would adopt to improve the obstetric outcome. (30 Marks)
  - 2.4 Outline the additional measures in the intrapartum management if she is presenting with spontaneous onset of labour at 39 weeks of gestation. (30 Marks)
  
3. A 28 year old primi gravida presented at period of gestation of 12 weeks to the antenatal clinic for the booking visit. Her haemoglobin level was 9 g/dL.
  - 3.1 Briefly describe the initial assessment (history and examination ) of this patient. ( 30 marks)
  - 3.2 List relevant investigations with expected results in the diagnosis of the cause for her anaemia. (30 marks)
  - 3.3 Discuss the basic principles of management, if the diagnosis is thalassaemia trait. (40 marks)

P.T.O.

4. A 39 year old multiparous woman presented to gynaecology clinic with a history of excessive vaginal discharge for one month duration.
- 4.1 Briefly describe how you would clinically differentiate a physiological from pathological vaginal discharge. . (20 Marks)
- 4.2 List **four (4)** possible causes for her discharge other than vaginal infection. (20 Marks)
- 4.3 Explain the value of speculum examination in this patient. (30 Marks)
- 4.4 Briefly outline the management if her diagnosis is vaginal candidiasis. (30 Marks )
5. A 39 year old woman with primary subfertility presented to the gynaecology clinic with dysmenorrhea, heavy menstrual bleeding and deep dyspareunia for 3 years duration.
- 5.1 List **three (03)** possible diagnosis except pelvic endometriosis. (15 marks)
- 5.2 Explain the value of clinical pelvic examination to arrive at final diagnosis. (20 marks)
- 5.3 List **four (04)** relevant investigations to perform in this patient giving reasons (30 marks)
- 5.4 Briefly describe the basic principles of management of endometriosis in this patient. (35 marks)

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