

FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA, GALLE Final Examination for Medical Degrees – November 2017

OBSTETRICS & GYNAECOLOGY - PAPER I

Tuesday 21st November 2017

1.00 pm - 3.00 pm (2 hours)

Answer all five questions

Answer each question in a separate book

Operative details not required

Discuss the strategies which could be adopted to reduce the complications related to caesarean delivery. (100 Marks)

2.

2.1 Define the term external cephalic version (ECV).	(10 Marks)
2.2 Name five (5) contraindications for ECV.	(20 Marks)
2.3 List three (3) factors which favours a successful ECV.	(15 Marks)
2.4 Name four (4) possible complications of ECV (other than fetal bradycardia).	(20 Marks)

3. A 30 year old primigravida was referred to the antenatal clinic by a medical officer of health due to fundus less than her gestational age (small for gestational age) at 32 weeks of gestation.

2.5 Discuss the management of the fetal bradycardia soon after an ECV.

3.1 Briefly outline the initial assessment of this woman. (30 Marks)
3.2 List four (4) possible complications of a small for gestational age fetus. (20 Marks)
3.3 How would you manage this pregnancy if the fetus is found to have severe fetal growth restriction due to placental insufficiency? (50 Marks)

(35 Marks)

- 4.1 Define the term secondary amenorrhoea. (20 Marks)
- 4.2 List **five (5)** causes for above condition excluding Polycystic Ovary Syndrome (PCOS). (25 Marks)
- 4.3 Briefly outline management of a 30 year old unmarried woman who is diagnosed to have PCOS with a history of infrequent periods and a BMI of 33kg/m². (55 Marks)
- 5. A 28 year old woman with a period of amenorrhoea of seven (7) weeks presents with right sided lower abdominal pain and mild per vaginal bleeding.
 - 5.1 Name three (3) differential diagnosis excluding ectopic pregnancy. (15 Marks)
 - 5.2 Describe how you would arrive at a diagnosis. (35 Marks)
 - 5.3 Describe the management if the diagnosis is right sided unruptured ectopic pregnancy. (50 Marks)
