

## FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA

## Final Examination for Medical Degrees - November 2012

## **OBSTETRICS & GYNAECOLOGY - PAPER I**

Tuesday 6<sup>th</sup> November 2012

one hours duration.

6.1 List the possible causes for her presentation.6.2 Discuss the initial management of this patient.

6.3 Briefly outline the definitive management of this patient

3 hours (1.00 p.m. – 4.00 p.m.)

(10 Marks)

(60 Marks)

(30 Marks)

Answer All Six Questions
Answer Each Question in a Separate Book
Operative Details Not Required

1.	Discuss the strategies which should be adopted to reduce morbidity and mortality	-
	abortions in Sri Lanka.	(100 marks)
2.	A 46 year - old woman with five children presented with a history of persistent blo per vaginal discharge of three weeks duration. Speculum examination revealed a fi in the anterior lip of her cervix.	
	2.1 Describe how the diagnosis is established and the mode of treatment decided.	(15 Marks)
	2.2 List five (5) risk factors for the most likely condition.	(20 Marks)
	2.3 Discuss how these risk factors correlate with the aetiology of the most likely	
	condition.	(25 Marks)
	2.4 Outline the measures which should be adopted for primary and secondary	•
	prevention of the most likely condition.	(40 Marks)
3.		
	3.1 Define the term recurrent miscarriage.	(10 Marks)
	3.2 List five (5) groups of conditions which can result in recurrent miscarriage.	(20 Marks)
	3.3 What details would you like to obtain by interviewing a woman with a history	
	of recurrent miscarriages ?	(50 Marks)
	3.4 Outline how you would manage a woman who had an unexplained recurrent	
	miscarriage six weeks earlier.	(20 Marks)
4.		
	4.1 List six (6) indications for an episiotomy.	(25 Marks)
	4.2 Describe the basic principles of this procedure and the types of episiotomies	
	carried out.	(40 Marks)
	4.3 List five (5) complications of episiotomy.	(20 Marks)
٠	4.4 List three (3) strategies which could be adopted to reduce a high episiotomy	
	rate in an obstetric unit.	(15 Marks)
5.	•	
	5.1 Define the term Fetal Growth Restriction (FGR).	(10 Marks)
	5.2 List five (5) groups of conditions which result in FGR.	(25 Marks)
	5.3 Critically evaluate the methods available to monitor a fetus with FGR.	(50 Marks)
	5.4 List the factors which should be considered in deciding on when to	
	deliver a baby with FGR.	(15 Marks)
6.	A 36 year- old mother of one child delivered by caesarean section, presents to the antenatal	

ward at 34 weeks of gestation with a history of sudden onset, painful per vaginal bleeding of