



FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA, GALLE

Final Examination for Medical Degrees December 2011

OBSTETRICS & GYNAECOLOGY – PAPER I

Tuesday 6th December 2011

**3 hours
(1.00 p.m. – 4.00 p.m.)**

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

1. A 32 year old primigravida attending the antenatal clinic at 36 weeks of gestation is found to have a blood pressure of 150/100 mmHg. Discuss the different options available to manage this patient, giving reasons. (100 marks)

2.
 - 2.1 Define placenta praevia and describe its classification. (30 marks)
 - 2.2 Discuss how bleeding due to placenta praevia could be clinically differentiated from other causes of antepartum haemorrhage. (40 marks)
 - 2.3 State the rationale for ensuring that a woman has a full bladder when carrying out an abdominal ultrasound scan for a suspected placenta praevia. (10 marks)
 - 2.4 Considering the possibility of an undetected placenta praevia, state the precautions which should be taken when examining a woman who has not had an antenatal ultrasound scan, when she is admitted in early labour. (20 marks)

3. A 24 year - old primigravida presents at 32 weeks of gestation with a history of a watery vaginal discharge for ten hours. She is not in labour.
 - 3.1 Other than pre- labour rupture of membranes, state two (2) possible causes for her presentation. (10 marks)
 - 3.2 Describe the steps which should be taken to establish the cause of her watery vaginal discharge. (30 marks)
 - 3.3 If she has pre labour rupture of membranes, justify and discuss her further management. (60 marks)

4. A 38 year- old mother of four children is admitted to the gynaecological ward with fever, lower abdominal pain and an offensive blood stained vaginal discharge of three days duration. She is not on any contraceptive and has not had her periods since her last childbirth eight months earlier. She is not pale, her temperature is 39° C, blood pressure is 80/50 mmHg, pulse rate 120 bpm and she has warm extremities.
 - 4.1 What is the most likely diagnosis? (15 marks)
 - 4.2 List and justify eight (8) relevant investigations. (25 marks)
 - 4.3 Outline the principles of management of this patient. (60 marks)

5. A 31-year-old primigravida with a period of gestation of 10 weeks is admitted to hospital with excessive vomiting of one week's duration.

5.1 List five (5) possible causes. (20 marks)

5.2 List and justify six (6) investigations you would perform in order to manage this patient. (30 marks)

5.3 Outline the basic principles of management of this patient. (50 marks)

6.

6.1 List the different types of urinary incontinence. (20 marks)

6.2 Describe how you could clinically differentiate each of these types. (40 marks)

6.3 List and justify the investigations which should be performed to assess a woman presenting with urinary incontinence. (40 marks)