

UNIVERSITY OF JAFFNA, SRI LANKA FINAL EXAMINATION FOR MEDICAL DEGREES – January 2024 ACADEMIC YEAR 2016/2017 OBSTETRICS AND GYNAECOLOGY - PAPER II

Date: 17.01.2024

Time: 1.30 pm to 4.30 pm (03 hours)

01 A 25 year old primigravida is admitted to the ward with a history of fresh vaginal bleeding and persistent abdominal pain of two hours duration at 34 weeks gestation. Her blood pressure is 150/90mm Hg.

- 1.1 Identify the most likely emergency scenario with reasons. (20 Marks)
- 1.2 Mention how you will further assess her to confirm your diagnosis with (30 Marks) expected changes in your findings.
- 1.3 Describe how you will manage this emergency safely until delivery of the (30 Marks) fetus if your diagnosis is confirmed.
- 1.4 List two (2) fetal and two (2) maternal complications that can occur as a (20 Marks) result of this condition.

02 A 37 year old primigravida attends the antenatal clinic with her Oral Glucose Tolerance Test (OGTT) results at 28 weeks of gestation. Her midwife noticed that her symphysis fundal height was 32cm. She was investigated for primary subfertility in the past and conceived following ovulation induction.

- 2.1 Mention five possible causes for her fundus to be more than dates with (20 Marks) reasons.
- 2.2 Her OGTT result is as follows, fasting 90mg/dl and second hour 170 mg/dl. (40 Marks) Describe the antenatal management of this primigravida until delivery.
- 2.3 Mention the maternal and fetal/neonatal complications of this condition. (20 Marks)
- 2.4 Outline her management during the post-natal period. (20 Marks)

03 A 30 year old nulliparous woman married for three years presents with one year history of dysmenorrhea, deep dyspareunia and abdominal bloating.

3.1 Mention the provisional diagnosis with reason.

(20 Marks)

3.2 Describe how will you further assess this woman to confirm your diagnosis.

(30 Marks)

- 3.3 Describe the management options for her symptoms in this woman. (30 Marks)
- 3.4 If she is keen to conceive in near future, mention the treatment options (20 Marks) available to this couple provided her husband's seminal fluid analysis is normal.

A 27 year old primigravida presents to the antenatal clinic at a POA of 7 weeks with a positive urine pregnancy test. She also complains of occasional lower abdominal pain over the last 3 days.
Her vital parameters and basic investigations were normal.
Abdominal and internal ultrasound scan does not reveal an intrauterine pregnancy and the adnexa was normal and there was no free fluid in the pelvis.
A provisional diagnosis of 'Pregnancy of unknown location' is made.

- 4.1 Mention what further information you would elicit in the history of this (20 Marks) woman.
- 4.2 Describe how you will further assess this woman to confirm your diagnosis (30 Marks) mentioned in 3.1.
- 4.3 Describe how you will monitor her while she is in the ward. (30 Marks)
- 4.4 Fourth day of her presentation, an unruptured left sided tubal pregnancy is (20 Marks) confirmed. Mention treatment options available to her.
- 05 'Ideally all women would be seen preconception, take the advice offered and thus enter pregnancy in optimum physical and mental condition'.Critically analyse the system in place to achieve the above goal in Sri Lanka.

(100 Marks)