

UNIVERSITY OF JAFFNA, SRI LANKA FINAL EXAMINATION FOR MEDICAL DEGREES – November 2024 ACADEMIC YEAR 2017/2018 OBSTETRICS AND GYNAECOLOGY - PAPER II

Date: 12.11.2024

Time: 1.30 pm to 4.30 pm (03 hours)

01 A 34-year-old multigravida with an uncomplicated antenatal history delivered her third baby vaginally at 40 weeks of gestation weighing 3100 g without an episiotomy. Her third stage of labour was managed actively and the placenta and membranes were completely expelled. One hour after delivery, she developed postpartum bleeding with an estimated blood loss of 1000 ml. Her uterus was hard and well contracted below the level of the umbilicus.

She was pale, pulse rate 110 beats/min and BP-90/60 mmHg.

- 1.1 Mention the most likely cause for her postpartum haemorrhage with reasons. (25 Marks)
- 1.2 Describe the immediate measures you would take in managing this patient? (25 Marks)
- 1.3 Briefly discuss further management of this emergency, considering the most (25 Marks) likely cause.
- 1.4 Mention the components of active management of third stage of labour and (25 Marks) their intended benefits.
- 02 A 26 years old primigravida is admitted to the ward with a history suggestive of dribbling for 3 hours duration without abdominal pain. Her current period of gestation is 34 weeks and pregnancy has been otherwise uncomplicated.
 - 2.1 Describe the initial assessment of this patient to confirm the diagnosis. (25 Marks)
 - 2.2 Mention two anticipated complications each in the fetus and mother as a (25 Marks) result of dribbling at 34 weeks of gestation.
 - 2.3 In the event of true dribbling, mention the measures you will take to minimize (25 Marks) these complications.
 - 2.4 If she is being managed conservatively in the presence of dribbling, mention (25 Marks) how you will monitor her in the ward.

03 A 62-year-old postmenopausal woman presents to the gynaecology clinic with a complaint of episodes of vaginal bleeding over the last one week.

3.1	Mention four (4) probable causes for her presentation.	(20 Montra)
3.2	Mention the initial assessment of this patient with the above presentation in a	(20 Marks)
	gynecology clinic.	(30 Marks)
3.3	How will you evaluate to arrive at the diagnosis in this patient?	(30 Marks)
3.4	If hysterectomy is planned in this woman, how would you prepare her?	(20 Marks)

04 A 26-year-old woman is admitted to the gynecology ward with a history of diffuse lower abdominal pain, heavy malodourous vaginal discharge and fever for three days duration. She gives a history of unprotected sexual contact with her partner for the first time a week ago. Her temperature was 101° F and urine pregnancy test was negative.

- 4.1 Mention three (3) differential diagnoses and indicate the most likely (20 Marks) diagnosis giving reasons.
 4.2 Mention the further assessment of this patient in view of arriving at a definitive (30 Marks)
- 4.2 Mention the further assessment of this patient in view of arriving at a definitive (30 Marks) diagnosis.
- 4.3 Considering the most likely diagnosis mentioned in 4.1, outline how would (30 Marks) you initiate treatment?
- 4.4 List four complications of the condition you mentioned in 4.1 (20 Marks)
- 05 Postpartum period is an ideal time to access contraception services but many women are unaware or undecided of a suitable method in Sri Lanka. Discuss the methods available for post-partum contraception and strategies in place to improve its uptake.

(100 Marks)