

UNIVERSITY OF JAFFNA, SRI LANKA
FINAL EXAMINATION FOR MEDICAL DEGREES – December 2011
OBSTETRICS AND GYNAECOLOGY Paper II

Date: 06.12.2011

Time: 03 hours

ANSWER ALL THE SIX QUESTIONS

Answer each question in separate answer book

1. **A 28yr old primigravida with an uncomplicated pregnancy goes in to spontaneous labour at 39 weeks of gestation. During the second stage of labour, following delivery of the head of the foetus, the midwife encounters difficulty with delivering rest of the baby and she suspects shoulder dystocia.**
 - 1.1 How would you confirm this emergency condition in this patient? (25 Marks)
 - 1.2 If the difficulty was due to shoulder dystocia how it could have been predicted in this patient during labour? (25 Marks)
 - 1.3 Describe the measures that you would take to deliver the baby safely if you confirm shoulder dystocia. (25 Marks)
 - 1.4 Enumerate the complications that could be expected in this mother and the foetus as a result of shoulder dystocia. (25 Marks)

2. **A 35 year old para 2 with one miscarriage at 10weeks of POA was diagnosed to have diabetes mellitus at 28weeks of gestation.**
 - 2.1 List the foetal complications due to diabetes mellitus in this pregnancy. (20 Marks)
 - 2.2 Describe her antenatal care with special attention to diabetes mellitus. (20 Marks)
 - 2.3 Discuss her delivery plan. (20 Marks)
 - 2.4 List the indications for early admission to ward before the planned time of delivery. (20 Marks)
 - 2.5 Discuss the contraceptive choice for this patient. (20 Marks)

3. **A 23 year old P1 C0 at 33weeks of gestation is admitted to the obstetric ward with a history of dribbling of 4 hours duration without labour pains. Discuss her antenatal management.**

(100Marks)

4. **A 26 year old lady at a period of amenorrhoea of 13 weeks presented with bleeding per vaginum of 2 days duration. An ultrasound scan done at the ward was suggestive of a molar pregnancy.**
- 4.1 What further investigations you would perform before evacuation of the molar tissue. (20 Marks)
- 4.2 What is the preferred method of evacuation and how would you prepare for it? (20 Marks)
- 4.3 List three complications of a molar pregnancy. (20 Marks)
- 4.4 Briefly discuss the follow up plan of this patient. (20 Marks)
- 4.5 Discuss the contraceptive choice of this patient. (20 Marks)
5. **A 30 year old lady with a history of primary subfertility for 3 years presents to the Gynaecology clinic with her husband. Abdominal examination reveals a 20 weeks size uterus and an abdominal USS confirms multiple fibroids.**
- 5.1 Enumerate the common clinical presentations of patients with uterine fibroids. (20 Marks)
- 5.2 Discuss the indications for surgical intervention in this patient. (20 Marks)
- 5.3 List the complications that would occur in uterine fibroids. (20 Marks)
- 5.4 If myomectomy is contemplated in this patient how would you prepare her for the operation? (20 Marks)
- 5.5 How would you monitor this patient in the first 24 hours of the post-operative period? (20 Marks)
6. **A 25 yr old married nulliparous lady presented to the Gynaecology ward with bilateral lower abdominal pain, vaginal discharge and fever. Her urine hCG was negative. She was clinically stable and a preliminary diagnosis of PID was made. Discuss the management of this patient.**
- (100 Marks)