

UNIVERSITY OF NAIROBI
COLLEGE OF HEALTH SCIENCES
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

TERM 3, 2015 MBChB YEAR FOUR MCQ EXAM

the paper was awesome (so awesome)
May Allah grant me success Inshaa Alla
(Obs + gynae)

DATE: 21st, Friday August 2015 TIME: 8.00 AM - 9.30 AM DURATION: 1hr 30 min

INSTRUCTIONS TO STUDENT

- I. For each question you are provided with five options, ONLY one answer is correct
- II. Answer on the separate answer sheet provided
- III. There are 100 questions, attempt all questions
- IV. Write your admission number on the answer sheet

84

1) The following is true about the anatomy of the vulva

- A. The labia majora are touch sensitive but not pain sensitive F
- B. The clitoris has no sebaceous glands F
- C. The nerve supply of the clitoris is derived from the ilioinguinal nerve F
- D. The bulb of the vestibule does not consists of erectile tissue F
- E. The labia majora contain muscle tissue, the tunica dartos

2) The ureter

- A. Lies inferior to the lateral vaginal fornix
- B. Has squamous epithelium
- C. Is more dilated on the right side in pregnancy
- D. Passes posterior the external iliac vessels
- E. It is crossed by the genitofemoral nerve

3) In a patient with right sided cancer of the vulva, the most likely site of first nodal metastasis is

- A. Right femoral (deep) lymph nodes
- B. Right obturator node
- C. Bilateral inguinal (superficial) lymph nodes
- D. Right inguinal (superficial) lymph nodes
- E. Para-aortic lymph nodes

4) The common cause of precocious puberty in girls is

- A. Idiopathic
- B. Gonadal tumors
- C. McCune-Albright syndrome
- D. Hypothyroidism
- E. Tumors of the central nervous system

16

100
16

84

✓ 5) True statements relating to dysmenorrhea include the following **EXCEPT**

- A. It is classified as primary if it is not related to detectable pelvic pathology ✓
- B. It incapacitates about 10% of menstruating women ✓
- C. It usually occurs in ovulatory cycles
- D. Pre-menstrual syndrome is usually accompanied with nausea, fatigue and headache
- ✓ ~~E.~~ It is caused by psychological factors in 90% of cases

✓ 6) Which of the following best describes the embryonic period

- A. Fertilization to 6 weeks
- B. Implantation to 6 weeks
- ✓ ~~C.~~ 3rd to 8th week after fertilization
- D. First 11 to 12 weeks
- E. 1st week to 7th week

Pre-embryonic
Embryonic
Fetal

✓ 7) Regarding stages of development before birth

- A. Pre-embryonic period is week 2 to week 6
- B. The main events of fetal period include formation of morula, blastogenesis, and implantation F
- ✓ ~~C.~~ Embryonic period is week 3 to week 8 and the main events is organogenesis including development of germ cell layers, placenta, and body systems
- D. Fetal period is week 3 weeks to 9 weeks F
- E. The main events of pre-embryonic period include organ growth and development, and functioning of locomotor system

✓ 8) The following is false about stages of development before birth

- ✓ ~~A.~~ The fetal period is the stage at which the conceptus is most sensitive to teratogens F
- B. Preembryonic period is from conception to week 2, main events are formation of morula, blastogenesis, and implantation
- C. The end of the embryonic period and the beginning of the fetal period occurs 8 weeks after fertilization (developmental-age) or 10 weeks after the onset of the last menstrual period ✓
- D. Embryonic period is from week 3-8, main events are organogenesis, and development of germ cell layers, placenta, and body systems
- E. The main events during the fetal period include organ growth and development, and functioning of locomotor system

9) Which of the following diameters represent the smallest circumference of the head

- A. Occipitofrontal - 11 cm
- B. Suboccipitobregmatic - 10.5 cm
- C. Bitemporal 8 cm
- D. Biparietal 9.5 cm
- E. Occipitomenal 7 cm

10) Which of the following serve as a landmark when assessing descent of fetal head

- ~~A.~~ Ischial spines *indicates fetus reached pelvic floor*
- ~~B.~~ Symphysis pubis ✓
- C. Ischial tuberosities
- D. Sacral promontory
- E. A landmark is not needed

11) The uterus and fallopian tube arise embryologically from which of the following

- ~~A.~~ Mullerian ducts ✓
- B. Wolffian ducts
- C. Urogenital sinus
- D. Mesonephric ducts
- E. Mullerian sinus

12) The vagina

- A. Becomes canalized at 10 weeks gestational age
- B. It develops from a single sino-vaginal bulb on the posterior wall of the urogenital sinus *double*
- C. Contains pressure receptors
- ~~D.~~ It is hormone responsive in the fetus ✓
- E. Is not attached to the cardinal ligament *Fit 15*

13) Dissolution of the uterine septum to form the uterine cavity is completed by what gestational age

- A. 5 weeks
- B. 10 weeks
- C. 15 weeks
- ~~D.~~ 20 weeks ✓
- E. 24 weeks

14) The fused mullerian ducts give rise to all of the following structures except

- A. Cervix *Vagina*
- B. Upper two thirds of the vagina
- C. Uterine body
- ~~D.~~ Vulva ✓

20) Jane Wanjiru presents with history of abnormal vaginal bleeding following a reproductive health talk she and her friends received in a women's group.

20-35 days

normal menstrual cycle
up to 7 days (2-7)
21 to 35 days length
30-40mls; may be
mild or no dysmenorrhea
Regular

On further probing she is found to have a period whose flow lasts for a duration of 6 days and her cycles take 32 days. Which of the following management plans is appropriate?

- A. Full hemogram
- B. Pelvic ultrasound
- C. Coagulation profile ✓
- D. All of the above
- ~~E. None of the above~~ ✓

2-6 days

- coz she has a normal cycle
- shows a how even to induce

21) Concerning Bishops Score which of the following is false

- A. Includes cervical dilatation, cervical effacement cervical consistency, cervical position and station of the presenting part. ✓
- B. Duration of labour is inversely correlated to the score ✓
- C. When the score is favorable the preferred pharmacological agent for induction is misoprostol ✓ - dinoprostone
- D. Score of less than 6 requires cervical ripening ✓
- ~~E. All of the above are false~~ ✓

22) Concerning Bishops Score which of the following is false

- A. Includes cervical dilatation, cervical effacement cervical consistency, cervical position and station of the presenting part.
- B. Duration of labour is inversely correlated to the score
- C. When the score is favorable the preferred pharmacological agent for induction is misoprostol
- D. Score of less than 6 requires cervical ripening
- ~~E. All of the above are false~~

23) Which of the following describes the process in which the uterus contracts and atrophies into its non-pregnant size?

- A. Decompression
- B. Contraction
- C. Reparation
- ~~D. Involution~~ ✓
- E. Shrinking

24) The following is a typical characteristic of uterine after "pains" post delivery

3-4 days

- ~~A. Resolves after 7 days post delivery~~
- ~~B. Requires analgesics~~ ✓
- ~~C. Relieved by uterine massage~~
- ~~D. Aggravated by breastfeeding~~
- ~~E. None of the above~~ ✓

1st 2-3 days
common in
multipara

oxytocin

exacerbated during
not feeding?
oxytocin

15 14
25) The following statement about breast milk is FALSE

- A. Colostrum is low fat for easy digestion and acts as a laxative ✓
- ~~B. Lactose levels remain fairly constant~~
- C. Mature human milk contains casein as one of its proteins ✓
- D. Fat soluble vitamins (ADEK) are not found in breast milk ✓
- E. Levels of water soluble vitamins depend on maternal intake

26) What is the lie if the fetal and maternal axes cross at a 45-degree angle

- A. Longitudinal
- B. Breech
- ~~C. Oblique~~
- D. Transverse
- E. Unstable

27) When examining a woman at term, what does hearing fetal heart tones loudest above the umbilicus suggest in terms of fetal presentation *(below)*

- A. Cephalic presentation
- B. Transverse lie
- C. Breech presentation ✓
- D. None of the above
- E. All of the above

28) The following are true about hyperemesis gravidarum EXCEPT

- A. Hyperemesis gravidarum is defined variably as vomiting sufficiently severe to produce weight loss, dehydration, alkalosis from loss of hydrochloric acid, and hypokalemia
- B. Acidosis in patients with hyperemesis gravidarum develops from partial starvation
- C. Some women with hyperemesis gravidarum develop transient hepatic dysfunction
- D. Hyperemesis appears to be related to high or rapidly rising serum levels of pregnancy-related hormones including human chorionic gonadotropin (hCG), estrogens, progesterone, placental growth hormone, thyroxine, and adrenocortical hormones ✓
- ~~E. Symptoms are effectively managed by vitamin B6 given along with Doxylamine~~

29) Which of the following is a characteristic of focused antenatal care

- A. First visit is conducted as early as possible after the first trimester
- B. Last visit is conducted at 40 weeks and 10 days after the expected date of delivery
- C. Pregnant women are screened for bacteriuria during the first visit
- D. The first assessment is to distinguish pregnant women who require standard antenatal care model from those requiring special attention and more visits
- E. The screening tests performed during each visit are hemoglobin, urinalysis and HIV

30) Which of the following is NOT a feature of comprehensive PMTCT

- A. Keep women HIV negative especially during pregnancy & lactation ✓
- B. Prevent unwanted pregnancies among HIV positive women ✓
- C. Providing antiretroviral preexposure prophylaxis to all HIV uninfected women whose male partner status is unknown
- D. Prevent vertical transmission of HIV from infected pregnant women to their children ✓
- E. Providing care and treatment for HIV infected women and their families ✓

31) The following is TRUE about deep venous thrombosis or its management during pregnancy

- A. Warfarin embryopathy has been linked with exposure at less than 6 weeks of gestation
- B. Warfarin readily crosses the placenta and cause fetal death and malformations from hemorrhages
- C. Unlike unfractionated and low-molecular-weight heparin, prolonged use of warfarin during breast feeding is not safe
- D. INR is used for monitoring of therapeutic levels for high molecular weight heparin ✗ APTT.
- E. KCCT or APTT is used for monitoring therapeutic levels for warfarin ✗ INR

32) Which of the following infections or conditions does NOT increase the risk of HIV acquisition or transmission during pregnancy

- A. Genital ulcer disease
- B. Vitamin A deficiency
- C. Anemia
- D. Injecting drug use
- E. Cesarean section before the onset of labor

33) Which of the following has been shown to improve pregnancy outcomes in twin gestation

- ~~A.~~ Bed rest *F - prevents preterm & other complications*
- ~~B.~~ Tocolysis *F*
- ~~C.~~ Routine hospitalization *F - no use (not essential)*
- D. None of the above *F*
- E. All of the above

34) Which of the following is associated with an increased risk of placental abruption

- ~~A.~~ Young age *(advanced age)*
- ~~B.~~ Alcohol abuse *tobacco/cocaine/alcohol multiple preg, HTN*
- ~~C.~~ Oligohydramnios *HTN superimposed on pre-eclampsia*
- ~~D.~~ Multiple gestation *(above) previous abruption, polyhydramnios, circumvallate placenta, fibroids;*
- E. Intrauterine fetal growth retardation

35) Which of the following is the main dangerous complication of delivering the placenta by cord traction

- A. Endometritis
- B. Cord avulsion
- C. Uterine inversion *✓*
- D. Cervical laceration
- E. Severe pain to the mother

36) Neonatal morbidity is highly associated with which of the following

- A. Birthweight *✓*
- ~~B.~~ Gestational age *✓ - Preterm*
- ~~C.~~ Level of neonatal unit care
- D. Maternal medical condition
- E. Maternal education level

37) According to Friedman, what is prolongation of latent phase of labor in a nullipara

- ~~A.~~ More than 14 hours *✓*
- ~~B.~~ More than 20 hours *✓*
- C. More than 24 hours
- D. More than 40 hours
- E. More than 48 hours

38) What is the etiology of spinal anesthesia headache when used during caesarian section

- A. Puncture of meninges followed by leaking fluid
- ~~B.~~ Hypotension after spinal block
- ~~C.~~ Vasodilatation of cerebral vessels
- D. Drug-induced hormonal changes
- E. None of the above

39) Which of the following is not an indication of severe pregnancy induced hypertension

- A. Epigastric pain ✓
- B. Oliguria ✓
- C. Fetal growth restriction ✓
- ~~D. Lower limb edema~~
- ~~E. Severe headache~~ ✓
- F.

40) Risk factors for development of diabetes in pregnancy include the following except

- ~~A. Body mass index of less than 18~~ ^{> 18}
- B. History of delivering a baby with a congenital malformation ✓
- C. Family history of diabetes ✓
- D. Previous unexplained still birth ✓
- E. Previous birth weight of more than 4,000 grams ✓

41) In late pregnancy, which of the following contributes to the normal increase in cardiac output

- ~~A. Increased stroke volume~~
 - ~~B. Increased resting pulse rate~~
 - ~~C. Expanded blood volume~~
 - ~~D. All of the above~~
 - E. None of the above
- CO = SV x HR*
SVCO = HR x SV
HR = CO / SV
SV = CO / HR

42) What is the life threatening complication of heparin use

- ~~A. Hemorrhage~~
- B. Thrombosis
- C. Osteoporosis
- D. Thrombocytopenia ✓
- E. None of the above

43) Which of the following is a change observed in the urinary tract during pregnancy

- A. Dilatation of renal calyces, pelves, and ureters ✓
- B. Increased predisposition to infection ✓
- C. Increased vesicourethral reflux ✓
- ~~D. All of the above~~
- E. None of the above

Breathlessness due to progesterone effect

↓ CO₂ tension

Physiological due PO₂ is > 95%

Asthma is due to hyperresponsiveness of airway to irritants.

3-4% of all pregnant women

ergo - cause it causes

bronchoconstriction

20% improve
35% decrease
50% unchanged

44) The following is TRUE regarding management of asthmatic pregnant woman

- A. Inhalational bronchodilators are preferred to oral
- B. General anaesthesia is safer than spinal in these patients F
- C. Ergometrin may be used in third stage in absence of oxytocin F
- D. NSAIDs should be used for pain relieve after delivery
- E. In all women the asthma will worsen in pregnancy FF

epidural is safer

risk of atelectasis & subsequent chest infection of GA.

45) Thyrotoxicosis in pregnancy may be associated with elevated levels of all of the following except

- A. Autoantibodies
- B. Thyroxine (T4)
- C. Thyrotropin (TSH) ↓
- D. Triiodothyronine (T3)
- E. All of the above

20% - improved, 30% - deteriorates 50% - remains same

Epidural anaesthesia preferred to GA bc CO₂ not GA atelectasis & subsequent chest infection Halothane is better in GA however it produces strabismus

46) The denominator for calculating perinatal mortality rate is

- A. Total live births
- B. Still births
- C. Live and still births
- D. Total births
- E. Total number of children under 28 days

47) Your patient has had two spontaneous abortions with positive anticardiolipin antibodies. The most appropriate treatment in her next pregnancy would be

- A. Low dose aspirin and heparin
- B. Double the dose of hematinic
- C. High dose folic acid
- D. Steroids
- E. Reassurance

found in antiphospholipid syndrome

48) What is the common management of abdominal pregnancy at 17 weeks gestation

- A. Conservative management to await fetal lung maturation
- B. Laparotomy with delivery of fetus, leaving the placenta in situ followed by post-operative methotrexate F
- C. Methotrexate alone F
- D. Laparotomy with delivery of both fetus and placenta F - 8 weeks
- E. Uterine artery embolization, then wait for fetal resorption F

- no pelvic pathology.
- causes 15-20%
painful menses
H⁺ carbonate

49) The following drugs can be used to treat primary dysmenorrhoea.

EXCEPT:

- ~~A.~~ Omeprazole ✓
- B. Mefenamic acid ✓
- C. Combined hormonal contraception ✓ - true.
- D. Hyoscine (anti-emetic)
- E. Levonorgestrel intrauterine system intrauterine contraceptive device IUCD ✓

- NSAIDs
- COCs

50) The following are useful in the management of endometriosis

EXCEPT

- ~~A.~~ Cortocosteroids
- B. Danazol - high side effect compared to GnRH analogue.
- C. Gonadotropin releasing hormone agonists
- D. The oral contraceptive pill ✓
- E. Progestin's ✓

51) Concerning prevention of mother to child transmission of HIV, which of the following statements is false

- ~~A.~~ All pregnant mothers should only be counseled and tested during their 1st Antenatal care visit
- B. Pregnant women can be counselled and tested for HIV in labor ✓
- C. All HIV exposed infants should be given Nevirapine prophylaxis for the first 12 weeks of life ✓
- D. All HIV infected women are counselled and started on ART for life ✓
- E. An integrated approach to care is recommended in managing HIV infected mothers during the postnatal period F - all through.

52) Which of the following is true regarding Pelvic inflammatory disease

- A. Is usually due to gonorrhoea & chlamydia. (mainly)
- B. Carries a risk of sterility of less 10% after one attack
- C. Has not increased in incidence F.
- D. Is best treated with a single broad spectrum antibiotic F.
- E. Is a contraindication to the IUCD ✓
Not about giving IUCD
also very true.

Option list for question 53 to 57; from the list given A to E, for each of the female patient below seeking contraception, select the most suitable contraceptive method. Write the letter that corresponds to the correct option in the answer sheet. One option can be used more than once

- ✓ A- Oral contraceptives
- ✓ B- Intrauterine contraceptive device
- ✓ C- Condom
- ✓ D- Tubal ligation
- E- Rhythm

53) A 17 year old high school student planning to start a sexual relationship *C (condom)*

54) A 17 year old girl living with a heterosexual boyfriend *C (condom)*

55) A married 22 year old woman, para 2+ 1, with an history of ectopic pregnancy, who is planning to get pregnant in 2 months *A. (COCPs)*

56) A 35 year old, para 3+0, heavy smoker with reduced functional capacity of her lungs due to chronic obstructive lung disease ~~B~~
B (IUD)

57) A 25 year old, married nulliparous woman with a recent history of superficial thrombophlebitis *E (condom)*

58) Osteoporosis is associated with all the following EXCEPT:

- A. Early Menopause ✓
- B. Long-term Heparin therapy *TT*
- C. Turner's syndrome *T*
- D. Glucocorticoid therapy
- ~~E. Poly-cystic ovary syndrome~~

→ caused by ↓ estrogens.

hirsutism, obesity, irregular cycles

↓ ↓ androgens. ↓ ↓ est

59) In choriocarcinoma metastasis is mainly by which of the following method

- ~~A. Lymphatic~~
- ~~B. Hematogenous~~
- ✓ C. Contiguous invasion
- D. Transcoelomic spread
- E. Local spread

60) Which of the following is TRUE about obstetric fistula

- A. Obstetric type is common in developed countries
- B. Majority are recto-vaginal *F. vesicovaginal*
- C. Affects only primigravidas *F.*
- D. Mainly due to negligence by midwives
- E. Obstructed labour is a contributing factor

61) Which one of the following is NOT TRUE about Candida Albicans:

- A. It is the most common candida species involved in human infection
- B. It is not a normal inhabitant of the gastrointestinal tract and found in the mouth of about 5% of normal individuals
- C. Pregnancy, immunologic and endocrine dysfunction, immunosuppression, high dose estrogen, antibiotics, diabetes mellitus and systemic corticosteroids predispose to clinical infection
- D. Between 15% to 30% of asymptomatic women are carriers of candida albicans
- E. It is a common cause of superficial dyspareunia

62) Infertility

- A. Pelvic inflammatory disease is a common etiology in Kenya
- B. Is failure to achieve conception in six months
- C. In more than half the cases the cause is a female factor
- D. Investigating the male partner does not add value
- E. Laparoscopy is not used for diagnosis

63) In relation to premenstrual syndrome

- A. Does not present with psychosomatic symptoms *F.*
- B. Anti-depressant therapy can be used in severe forms
- C. A symptom diary chart does not help arrive to the diagnosis *F.*
- D. Occur mainly during the first 7-10 days of their menstrual cycle
- E. Symptoms have never been attributed to salt and water retention *F.*

64) In cancer of the ovary

- A. Diagnosis requires explorative abdominal surgery *✓ staging*
- B. It can never be hereditary *BRAC1 80-85 develop Ovarian, Breast CA*
- C. About 2% are secondary - *Contributes 5% of ovarian tumours.*
- D. Most primary ovarian cancers are serous *Epithelial* *commonly from*
 - o Gastric
 - o Breast
 - o Endometrial CA
- E. *Tumor marker* Ca125 is diagnostic - *follow up*

65) The following is incorrect regarding urinary tract infections in women

- A. The commonest organism is Escherichia coli *✓*
- B. Sexual intercourse increases ascent of organisms to the bladder *✓*
- C. Asymptomatic bacteriuria can occur *✓*
- D. Prevalence is not related to the short urethra in women
- E. Dysuria is a symptom

Madlener's was 15-2/15

POC's

66) In relation to polycystic ovarian syndrome

- A. Amenorrhea is not a symptom **F**
- B. The ovaries are never enlarged **F**
- C. Does not present with acanthosis **F**
- D. The LH: FSH is less than 3 **> 2:1**

E. Characterized by excess androgen production by ovaries

67) Regarding female sterilization

- A. Cannot be indicated for medical reasons **F DM, HTN, CRD → ↑ pregnancy due to pregnancy**
- B. Interval procedure can be done two weeks after delivery **X**
- C. Mini-lap procedure can be successfully done under local anesthesia **Anaesthesia: GA, Local or spinal - Conventional method**
Local anaesthesia ONLY - Mini laparotomy
- D. Laparoscopic sterilization is never an option **F - Optm use Fallopian clip**
- E. Uchida is not a technique for this procedure **NB: Mini laparotomy also method in 3rd world countries**

68) About radiotherapy

- A. Fistula formation is not one of the complications **F**
- B. Squamous carcinoma of the cervix is not sensitive to radiotherapy **F**
- C. Epithelial ovarian carcinomas are sensitive to radiotherapy
- D. Combining cisplatin and radiotherapy has not been found to improve outcomes in patients with advanced cancer of the cervix **F**
- E. Brachytherapy can be given either intracavitary or interstitial **Mini-Lap popularised by Uchida in Japan in 1961**

Option list for question 69 to 76; from the list given A to H, choose the most likely diagnosis for the scenarios given. Write the letter that corresponds to the correct option in the answer sheet

- A- Post abortion sepsis
- B- Hydatidiform mole
- C- Missed abortion
- D- Inevitable abortion
- E- Septic abortion
- F- Incomplete abortion
- G- Threatened abortion
- H- Complete abortion

69) Mrs M. presented to accident and emergency with a history of 12 weeks amenorrhoea. She now has per vaginal bleeding. Examination revealed a soft non tender abdomen and a closed cervix **G**.

70) Mrs N. presented to accident and emergency worried that she is suppose to be 18 weeks pregnant now. Her diagnosis of pregnancy was confirmed by a pregnancy test and ultrasound when she was 6 weeks gestation. Her main complaint today is that her pregnancy

symptoms just disappeared, her abdomen is not growing big and she has never had any per vaginal bleeding. C

- 71) Mrs O. is 8 weeks pregnant, presented to accident and emergency with severe lower abdominal pain and per vaginal bleeding. Speculum examination revealed a dilated cervix with visible products of conception. D
- 72) Miss Q is a 14 year old high school student. She has a history of 7 weeks amenorrhea. Two days ago she developed severe lower abdominal pains followed by expulsion of huge clots. Today she has no symptoms; however her mother brought her for check up. Digital examination reveals a closed cervical os, normal size uterus and no blood on examining finger. H.
- 73) Miss R. underwent a manual vacuum aspiration following a diagnosis of incomplete abortion. She presents to accident and emergency with a one week history of foul smelling copious per vaginal discharge associated with lower abdominal pain. Her temperature is 39°C and her uterus corresponds to 20 weeks gestation and tender. *post-abortal sepsis A.*
- 74) Miss T. had a spontaneous complete abortion three months ago, she comes to you surprised that her period has resumed but she is expelling grape like clots and the period has been going on for two weeks now. Examination confirmed her concern and in addition a bulky uterus and a 2 cm dilated cervix was found B.
- 75) Mrs S. had an unattended pregnancy at 7 weeks gestation. Last week she visited an herbalist who gave her some concoction to terminate the pregnancy. Today she presents with severe lower abdominal pains with foul smelling per vaginal discharge. Speculum and digital examination revealed a 4 cm dilated cervix with pus draining out of the cervical os and products of conception palpable. *reference needed F.*
- 76) Mrs P. is 12 weeks pregnant, she presented to accident and emergency with an history lower abdominal pain and per vaginal bleeding. She reports having expelled huge clots. Digital examination revealed huge clots in the vaginal canal, a 3 cm dilated cervix and products of conception were palpable in the uterine cavity. B

83) Which statement is true relating to sexually transmitted infections

- ~~A.~~ Gonorrhea is symptomatic in women ✓ *50% are asymptomatic*
- ~~B.~~ Lower abdominal pain may indicate presence of pelvic inflammatory disease
- C. Gonorrhea infections in the fallopian tube result in exotoxin mediated events that result in cell death *endotoxin*
- D. Pelvic inflammatory infections with Chlamydia infections in women are symptomatic ✓ *75% asymptomatic*
- E. None of the above

84) Which of the following statement is not true:

Bluish spots in the posterior fornix ✓

- A. "Strawberry appearance" of the cervix is associated with trichomonas vaginalis infection ✓ *Valerovaginitis (bleeding) present offensive vaginal discharge*
- B. "Match stick spots" are associated with pelvic endometriosis ✓
- C. "Retort shape" is associated with huge hydrosalpinx of the tube ✓
- D. "Acetowhite appearance" at Visual inspection with acetic acid (VIA) is associated with cervical intraepithelial lesions ✓
- ~~E.~~ Lugol iodine staining brown associated with cervical cancer ✓ *named*

85) State the incorrect statements below:

- ~~A.~~ The β subunit of FSH, LH, TSH and HCG are all similar ✓
- B. Leutinizing hormone acts on the leutinized granulosa cells to produce progesterone ✓
- C. The midcycle LH surge initiates the resumption of meiosis 1 ✓
- D. Progesterone has 21 carbon atoms and androgens have 19 carbon atoms ✓
- E. FSH primarily acts on the granulosa cells to yield estrogen but when in conjunction with LH involved in the maturation of oocytes ✓

86) A 23 year old woman is considering changing from the combined oral contraceptive to a progestogen only implant. Which is the most appropriate information would you provide?

- A. Progestogen only implant is not as effective as the COC as it does not inhibit ovulation ✓
- B. Bleeding will be predictable, unlike with COC
- C. The risk of deep venous thrombosis is decreased in COC users
- D. The progestogen only implant protects against sexually transmitted diseases/ HIV
- ~~E.~~ A common reason for discontinuing progestogen only methods is unpredictable bleeding

87) Mary 30 years old, presented to you with irregular heavy menstrual bleeding, which of the following is FALSE about her management

- A. Hysteroscopy can aid diagnosis ✓
- B. A full blood count is not necessary ✗
- C. A coagulation profile may be indicated ✓
- D. Combined oral contraceptive pill is a treatment option ✓ *regular menses*
- E. A trans-vaginal ultrasound may point to the underlying pathology ✓

88) In the examination of the abdomen, the following are true EXCEPT

- A. It is important to make sure that the patient has an empty bladder ✓
- B. The abdomen is divided into ten (10) regions *9 regions*
- C. During inspection, the patient should be lying supine with arms loosely by the patients side on a firm couch ✓
- D. Normally there is a gentle rise in the abdominal wall during inspiration and a fall during expiration, the movement should be free and equal on both sides ✓
- E. Bimanual examination forms an important part of examining a pelvic mass ✓

89) In cancer of the ovary

- A. Diagnosis requires explorative abdominal surgery
- B. It can never be hereditary
- C. About 2% are secondary
- D. Most primary ovarian cancers are serous
- E. Ca125 is diagnostic

90) In relation to polycystic ovarian syndrome

- A. Amenorrhea is not a symptom
- B. The ovaries are never enlarged
- C. Does not present with acanthosis
- D. The LH: FSH is less than 3
- E. Characterized by excess androgen production by ovaries

91) At what gestational age in weeks does the fetus begin to produce thyroxine?

- A. 7 to 8
- B. 10 to 12
- C. 14 to 16
- D. 22 to 24
- E. 25 to 26

92) What is the name of painless irregular uterine contractions that begin early in the gestation

- A. Braxton Hicks
- B. Casely Alexander

- C. McRoberts
- D. Shermans
- E. McDonalds

93) At what level does compression of the ureters by the gravid uterus occur?

- A. Bladder trigone
- B. Pelvic brim
- C. Sacrospinous ligaments
- D. Ureterovesical junction
- E. Infundibulopelvic ligament

94) What is the relationship of the long axis of the fetus to that of the mother called

- A. Presentation
- B. Lie
- C. Attitude
- D. Posture
- E. Descent

95) Which of the following best describes a complete breech presentation

- A. Lower extremities flexed at the hips and extended at the knees - *Frank*
- B. Lower extremities flexed at the hips and one or both knees flexed - *incomplete breech*
- C. One or both hips not flexed or both feet or knees below the breech
- D. A foot in the birth canal - *Footling*
- E. None of the above

96) A 23 year old woman is considering changing from the combined oral contraceptive to a progestogen only implant. Which is the most appropriate information would you provide?

- A. Progestogen only implant is not as effective as the COC as it does not inhibit ovulation
- B. Bleeding will be predictable, unlike with COC
- C. The risk of deep venous thrombosis is decreased in COC users
- D. The progestogen only implant protects against sexually transmitted diseases/ HIV
- E. A common reason for discontinuing progestogen only methods is unpredictable bleeding

- TE
- E
- Aou

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97) Concerning changes in the uterine cervix is true :

- A. Stratification of the squamous epithelium results from maturation and differentiation (depends on estrogen activity)
- B. The squamo-columnar junction is sited at the external os in early childhood (puberty)
- C. Squamous metaplasia results from human papilloma virus infection ✓
- D. A normal appearance of the cervix on examination excludes Chlamydia infection F
- E. Cervical ectopy usually requires treatment with cryotherapy F

98) The following does not occur during lactation

- A. High prolactin level ✓
- B. High oestrogen level ✓
- C. Reduced ovulation
- D. Increased oxytocin release
- E. Positive feedback during neonatal suckling

99) Which is incorrect about Human immunodeficiency virus (HIV)

- A. HIV is a retrovirus ✓
- B. Viral propagation continues largely in CD4+ T helper cells
- C. Reverse transcriptase, integrase and protease are virus specific enzymes that serve for its replication
- D. In the human cell reverse transcriptase ensures that nuclear DNA is converted to RNA genome ✓
- E. HIV can be transmitted from mother to child in utero, at delivery and during breastfeeding

100) Earliest histological evidence of ovulation in the "endometrium:"

- A. Coiling of spiral arterioles
- B. Stratification endometrial epithelium
- C. Subnuclear vacuolation - 36-48hrs ✓
- D. Increased mitotic figures F
- E. Formation of deciduas capsularis

S - PG's - late

END

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