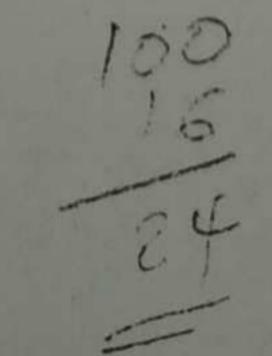
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY THE PAPER WAS GIVESOME And Grant me SUCCESS Inshaa Alla TERM 3. 2015 MBChB YEAR FOUR MCQ EXAM UNIVERSITY OF NAIROBI COLLEGE OF HEALTH SCIENCES AND GYNECOLOGY THE PAPER WAS GIVESOME And Alla TERM 3. 2015 MBChB YEAR FOUR MCQ EXAM Ophs 1 and Alla

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
 - 1) The following is true about the anatomy of the vulva
 - A. The labia majora are touch sensitive but not pain sensitive
 - B. The clitoris has no sebaceous glands
 - C. The nerve supply of the clitoris is derived from the ilioinguinal nerve
 - D. The bulb of the vestibule does not consists of erectile tissue
 - The labia majora contain muscle tissue, the tunica dartos
 - 2) The ureter
 - A. Lies inferior to the lateral vaginal fornix
 - B. Has squamous epithelium
 - 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
 - Right inguinal (superficial) lymph nodes
 - E. Para-aortic lymph nodes
 - 4) The common cause of precocious puberty in girls is
 - / Idiopathic
 - B. Gonadal tumors
 - C. McCune-Albright syndrome
 - D. Hypothyroidism
 - E. Tumors of the central nervous system



Page 1 of 20

- 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

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

Implantation to 6 weeks

3rd to 8th week after fertilization

First 11 to 12 weeks

1st week to 7th week

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

2. 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

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

The fetal period is the stage at which the conceptus is most sensitive to teratogens

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 seriod 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)		the following diameters represent the smallest ence of the head Occipitofrontal Suboccipitobregmatic Bitemporal Biparietal Occipitomental Occipitomental
10)	Which of to of fetal he C. D. E.	Ischial spines Symphysis pubis Ischial tuberosities Sacral promontory A landmark is not needed
	The uterus the following B. C. D. E.	and fallopian tube arise embryologically from which of ing Mullerian ducts Wolffian ducts Urogenital sinus Mesonephric ducts Mullerian sinus
12)7	B. It de the u	omes canalized at 10 weeks gestational age velops from a single sino-vaginal bulb on the posterior wall of urogenital sinus. Lowled tains pressure receptors hormone responsive in the fetus to attached to the cardinal ligament Fif 15
13)D	issolution ompleted A. B. C.	by what gestational age 5 weeks 10 weeks 15 weeks 20 weeks 24 weeks
	ne fuse macept A. B. C.	Cervix Upper two thirds of the vagina Uterine body Vulva

Lower uterine segment 15) From a woman's last normal menstrual period, what method is used to estimate the expected date of delivery? Subtract 7 days, subtract 3 months Add 7 days, subtract 3 months Add 7 days, add 3 months Subtract 7 days, add 3 months F Add 3 days, subtract 3 months F 16) What would surgical removal of corpus luteum of pregnancy result to if removed at 7 weeks of gestation _dats when pg fars takes over It will have no effect on the pregnancy F Would lead to spontaneous abortion Would lead to gestational diabetes Would lead to hypertension in pregnancy . Can result in abdominal pregnancy 業7) Uterine enlargement in pregnancy is due to: less of Hyperplasia Hypertrophy and stretching Atrophy with collagen replacement hyperplana 9 hypertrophy are Hyperplasia and hypertrophy play equal roles None of the above \$\\$\)Mildred Adhiambo presents for antenatal care. Her last normal menstrual periods started on 12th of January 2015 and ended on 15th January 2015. Which of the following is correct: Last normal menstrual period (LNMP) was 15/01/2015 Her gestation by dates on April 24, 2015 was 14 weeks 4 days tpull- 24 Her expected date of delivery is November 19, 2015 All of the above None of the above 19) Which of the following is not a fetal biophysical profile variable Heart rate Breathing ~ Eye movement Body movement Fetal tone Page 4 of 20

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. 20-35days mound personal 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 up to 7 days (2-7) following management plans is appropriate? 21 to 35 days lenger Full hemogram 30 -40mls; mar su None of the above -coz she has a normal cycle.

shops Scor - shows a 7- the has a normal cycle. mild or nodysprenomes B. Coagulation profile Regular. 21) Concerning Bishops Score which of the following is false

A. Includes cervical dilatation 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 -duroprostore. D. Score of less than 6 requires cervical ripening All of the above are false F 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 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? Decompression Contraction Reparation Involutions Shrinking 24) The following is a typical characteristic of uterine ofter pains post 3-4 days. delivery 18 2-3 days Resolves after 7 days post delivery Requires analgesics Relieved by uterine massage

Aggravated by breastfeeding

None of the above F. bxytown Requires analgesics None of the above F.

15 (+

25) The following statement about breast milk is FALSE

A. Colostrum is low fat for easy digestion and acts as a laxative

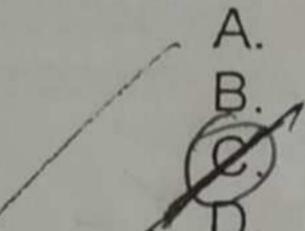
AB. Lactose levels remain fairly constant

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



Longitudinal Breech

Oblique Transverse

Unstable

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

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

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

 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 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 & APCC.
- E. KCCT or APTT is used for monitoring therapeutic levels for warfarin X 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

Bed rest & prevents preterm & other complications
Tocolysis 33) Which of the following has been shown to improve pregnancy outcomes in twin gestation Routine hospitalization Fino use (not essen had). None of the above 4 All of the above placental abruption - Ruk factory - Tobacco & cocome use

A. Young age (advanced goe).

Alcohol abuse tobacco | cocame/alahol. multiple preg, HTM

C. Oliveland Duse tobacco | cocame/alahol. multiple preg, HTM

C. Oliveland Duse tobacco | cocame/alahol. multiple preg, HTM

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C. Olivel 34) Which of the following is associated with an increased risk of Oligohydraminos

Multiple gestation (above) previous abruphu, polyhydraminos

Intrauterine fetal growth retardation fibroids, 35) Which of the following is the main dangerous complication of delivering the placenta by cord traction Endometritis Cord avulsion Uterine inversion Cervical laceration Severe pain to the mother 30 Neonatal morbidity is highly associated with which of the following Birthweight V Gestational age / _Preferm Level of neonatal unit care Maternal medical condition Maternal education level 37) According to Friedman, what is prolongation of latent phase of labor in a nullipara More than 14 hours More than 20 hours More than 24 hours More than 40 hours More than 48 hours 38) What is the etiology of spinal anesthesia headache when used during caesarian section Puncture of meninges followed by leaking fluid Hypotension after spinal block Vasodilatation of cerebral vessels Drug-induced hormonal changes

None of the above

,	the following is not an indication of severe pregnancy sypertension Epigastric pain Oliguria Fetal growth restriction Lower limb edema Severe headache
40) Risk facto following B. C. D. E.	rs for development of diabetes in pregnancy include the except Body mass index of less than 18 History of delivering a baby with a congenital malformation Family history of diabetes Previous unexplained still birth Previous birth weight of more than 4,000 grams
	Increased stroke volume Increased resting pulse rate Expanded blood volume All of the above None of the above
42) What is the B. C. D. E.	Hemorrhage Thrombosis Osteoporosis Thrombocytopenia None of the above
43)Which of th during preg	e following is a change observed in the urinary tract nancy Dilatation of renal calyces, pelves, and ureters Increased predisposition to infection Increased vesicourethral reflux All of the above None of the above

Breaklessners due to progatime effect Physwlugical due POZ 15>95/s Astoma is due to experesportions 3-4% ou payment voyense engo-cause it bron chocontroten 35% de mane 44) The following is TRUE regarding management of asthmatic pregnant 50% unchanged Inhalational bronchodilators are preferred to oral B. General anaesthesia is safer than spinal in these patients C. Ergométrin may be used in third stage in absence of oxytocin D. NSAIDs should be used for pain relieve after delivery of all of the following except preffed to GA bcoz Autoantibodies not gatelectors & Thyroxine (T4) subsequer thest impean Thyrotropin (TSH) Vea Triiodothyronine (T3) Hower it produes stone atms All of the above 46) The denominator for calculating perinatal mortality rate is Total live births B. Still births C. Live and still births E. Total number of children under 28 days of syndrouse. 47) Your patient has had two spontaneous abortions with positive anticardiolipin antibodies. The most appropriate treatment in her next pregnancy would be Low dose aspirin and heparin Double the dose of hematinic High dose folic acid Steroids Reassurance 48) What is the common management of abdominal pregnancy at 17 weeks gestation Conservative management to await feta lung maturation Laparatomy with delivery of fetus, leaving the placenta in situ followed by post-operative methotrexate F Methotrexate alone ? Laparatomy with delivery of both fetus and placenta Uterine artery embolization, then wait for feta resorption

nun det dulta.com 49) The following drugs can be used to treat primary dysmenorrhoea. The causes 15-20%.

EXCEPT:

Omegrazole

B. Mefenamic acid

C. Combined hormonal contractions

D. Lie and Contractions

Omegrazole

Omegrazole C. Combined hormonal contraception Inc. E. Levonorgestrel intrauterine system intrauterine contraceptive device / UCD T 50) The following are useful in the management of endometriosis Cortocosteroids B. Danazol - high side effect comprised to Gold analygue.
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 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 furning the 52) Which of the following is true regarding Pelvic inflammatory disease A. Is usually due to gonorrhoea & chilonydie. B. Carries a risk of sterility of less 10% after one attack C. Has not increased in incidence

Is best treated with a single broad spectrum antibiotic

Is a contraindication to the IUCD.

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 (condon)

54) A 17 year old girl living with a heterosexual boyfriend c (condon)

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. (OCP)

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

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

58) Osteoporosis is associated with all the following EXCEPT:

Poly-cystic ovary syndrome Fed and pgens.

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

Lymphatic

Hematogenous

Contiguous invasion

Transcoelomic spread

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. Vosicovaginal C. Affects only primigravidas D. Mainly due to negligence by midwives 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 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 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 T: B) Anti-depressant therapy can be used in severe forms C. A symptom diary chart does not help arrive to the diagnosis D. Occur mainly during the first 7-10 days of their menstrual cycle E. Symptoms have never been attributed to salt and water retention 64) In cancer of the ovary Diagnosis requires explorative abdominal surgery etgery B. It can never be hereditary BRACI 80-81 denety Ovarion, Brent CA C. About 2% are secondary - Controles 5% of overian tomos. D. Most primary ovarian cancers are serous Entered community from Commer E-Ca125 is diagnostic - pollow op o Endonetral CA 65) The following is incorrect regarding urin. 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 Prevalence is not related to the short urethra in women Dysuria is a symptom

PCC's 66) In relation to polycytic ovarian syndrome A. Amenorrhea is not a symptom B. The ovaries are never enlarged P. C. Does not present with acanthosis D. The LH: FSH is less than 3 72:1 Characterized by excess androgen production by ovaries a Downson berberin deliens A. Cannot be indicated for medical reasons FDM, HTN, CRD - TRUE B. Interval productions 67) Regarding female sterilization · Interval 3 montres bougned Mini-lap procedure can be successfully done under local anesthesia Anaesthesia: GA, Local or spinal - Conventional method anesthesia Anaesthesia anaesthesia option - mini lapanatury

D. Laparoscopic sterilization is never an option - Option vie fushe delnery or a booting o followy the proligeratue pha wing E. Uchida is not a technique for this procedure Style -Vernovejind 68) About radiotherapy Mini-Lap Replaned by Uchlan in 1961

orrective ginds A. Fistula formation is not one of the complications!

B. Squamous carcinoma of the continion 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 Brachytheraphy can be given either intracavitary or interstitial 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.

- 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.
- 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.
- 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.
- 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
- 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.
- 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 examination revealed huge clots in the vaginal canal, a 10 cm dilated examination revealed huge clots in the vaginal canal, a 2 cm dilated cervix and products of conception were palpable in the uterine cavity.

Gonorrhea is symptomatic in women Lower abdominal pain may indicate presence of pelvic inflammatory disease

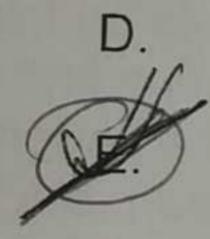
C. X Gonorrhea infections in the fallopian tube result in exotoxin mediated events that result in cell death

Pelvic inflammatory infections with Chlamydia infections in women are symptomatic None of the above

84) Which of the following statement is not true:

Blusters je tre posteros fornis "Strawberry appearance" of the cervix is associated with trichomonas vaginalis infection with pelvic endometriosis."

"Retort shape" is associated with huge hydrosalphinx of the tube



"Acetowhite appearance" at Visual inspection with acetic acid (VIA) is associated with cervical intraepithelial lesions Lugol iodine staining brown associated with cervical cancer

85) State the incorrect statements below:

The β subunit of FSH, LH, TSH and HCG are all similar 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

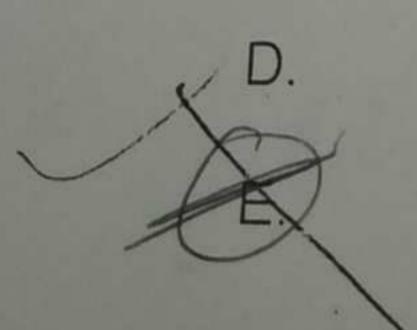
E. FSH primarily acts on the granulosa cells to yield estrogen but when in conjunction with LH involved in the maturation of oocytes

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 ters



The progestogen only implant protects against sexually transmitted diseases/ HIV

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 Hysteroscopy can aid diagnosis A full blood count is not necessary & Combined oral contraceptive pill is a treatment option / Pogularias A trans-vaginal ultrasound may point to the underlying pathology 88) In the examination of the abdomen, the following are true EXCEPT

It is important to make sure that the patient has an empty bladder v

The abdomen is divided into ten (10) regions 9 regrous During inspection, the patient should be lying supine with

arms loosely by the patients side on a firm couch

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

Bimanual examination forms an important part of examining a pelvic mass

89)In canger of the ovary

Diagnosis requires explorative abdominal surgery

It can never be hereditary About 2% are secondary

Most primary ovarian cancers are serous

Ca125 is diagnostic

90) In relation to polycytic ovarian syndrome

Amenorrhea is not a symptom The ovaries are never enlarged

Does not present with acanthosis

The LH: FSH is less than 3

Characterized by excess androgen production by ovaries

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

7 to 8 10 to 12 14 to 16

22 to 24 25 to 26

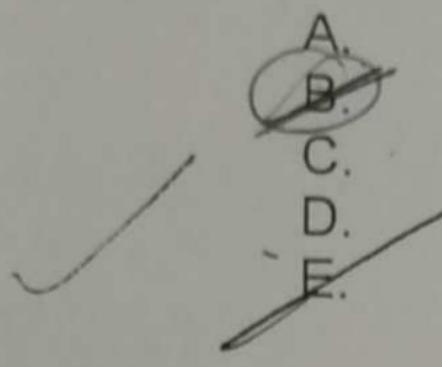
92) What is the name of painless irregular uterine contractions that begin early in the gestation

Braxton Hicks

Casely Alexander

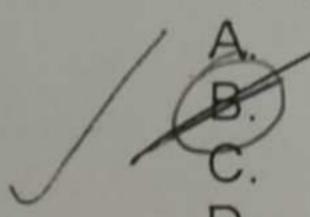
C. McRoberts
D. Shermans
E. McDonalds

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



Bladder trigone
Pelvic brim
Sacrospinous ligaments
Ureterovesical junction
Infundibulopelvic ligament

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



Presentation

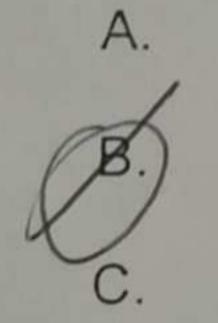
Lie

Attitude

). Posture

E. Descent

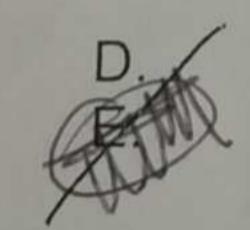
95) Which of the following best describes a complete breech presentation



Lower extremities flexed at the hips and extended at the knees

Lower extremities flexed at the hips and one or both knees flexed - 1 momplete Liveed.

One or both hips not flexed or both feet or knees below the breech



A foot in the birth canal — Footlang
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

A common reason for discontinuing progestogen only methods is unpredictable bleeding

97) Concerning changes in the uterine cervix is true:

A. Stratification of the squamous epithelium results from maturation and differentiation (depends on exhibition)

B. The squamo-columnar junction is sited at the external os in early childhood puberty

Squamous metaplasia results from human papilloma virus infection

D. A normal appearance of the cervix on examination excludes

Chlamydia infection

E. Cervical ectopy usually requires treatment with cryotherapy

98) The following does not occur during lactation

- A High prolactin level
- 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

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
 - Stratification endometrial epithelium
 - Subnuclear vacuolation 36-48 ms.
- D. Increased mitotic figures F
- E. Formation of deciduas capsularis

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END

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