

UNIVERSITY OF NAIROBI UNIVERSITY EXAMINATIONS 2016/2017

FIFTH YEAR EXAMINATIONS FOR THE DEGREE OF BACHELOR OF MEDICINE AND BACHELOR OF SURGERY

HOG 500: OBSTETRICS AND GYNECOLOGY - MULTIPLE CHOICE QUESTIONS

DATE: MONDAY 11TH SEPTEMBER, 2017

TIME 2.00PM - 3.30 PM

DURATION: 1 HOUR 30 MINUTES

INSTRUCTIONS TO STUDENT

 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 on 19 pages, attempt all questions.

IV. Write your registration number on the answer sheet.

1) Regarding maternal Rh(D) negative blood type, what would be the next step to undertake? Antibody screen at the first antenatal visit regardless of gestational age Antibody screen only at 28 weeks of gestation A positive antibody screening test means that the fetushas hemolytic disease — Controlled e) All of the above -2) Which of the following represents normal thyroid function in the first half of pregnancy? 个ては、 a) Decrease in total thyroxine (T4) levels Unchanged triiodothyronine (T3) levels Decrease in thyroxine binding globulin (TBG) levels 1766. Decrease in TSH in first trimester e) Maternal thyroid volume is 30% higher 3) Regarding antithyroid drugs, which of the following is TRUE? Propylthiouracil is preferred in the first trimester - less weeky to cross placents. b) Carbimazole is preferred in the first trimester - preferably avoided in the it trimester Propylthiouracil is preferred at all gestational ages thange to causimazole lake in PG. Carbimazole is hepatotoxic - Carbimazole causes chalestative jaundice & Carbimazole does not cross the placental barrier agranulo cylina. e) Carbimazole does not cross the placental barrier - Both dungs cross placents PCU - Lepadotofic. 4) Regarding severe obstetric anal sphincter injuries, the following statement is FALSE? a) 3rd degree: 3a: < 50% of external anal sphincter thickness involved / b) 3rd degree: 3b ≥ 50% of external anal sphincter thickness involved 3rd degree: 3c external anal sphincter and internal anal sphincters involved 3 degree: 3c external anal sphincter and internal anal sphincters involved and anal epithelium involved X 4mi degree. e) 4th degree: external anal sphincter and internal anal sphincters and anal epithelium involved 5) Neonatal complication of gestational diabetes mellitus include a. Hyperglycemia Hypoglycemin. - Hypornagueseurs.

b. Anemia

e. Cardiomyopathy

d. Hypoinsulinemia

e. Hypercalcemia Hypocolcours

- Hyperbilinibonening - polycytheuns
- cardionnyopatry.

c) 20 million spermatozoa/mL c) 20 million spermatozoa per ejac d) 2% normal forms using "strict" T e) 30% total (progressive + nonpro 7) The leading causes of maternal m include ALL EXCEPT (a) Thromboembolic disease b) Sepsis c) Abortion d) Hemorrhage e) Preeclampsia-eclampsia 8) A hysterosalpingogram can evaluate	ulate - 40 million per ejaculate - cotul come. ygerberg criteria gressive) motility ortality in low and middle income countries - He moust hage - 25 - Fepti - 40% - Hy parteurno - 13% - unsage - 13% - obstructed lasor - 7% - obstructed lasor - 7% - other dazest causes 8%
a. Submucous fibroids / b. Intramural fibroids /	(X) His may not detect wall carrows
Endometriosis	If they do not dethort the country.
d. Cornual fallopian tube block	
e. Hydrosalpinx	
a) Manual removal of placenta b) Cesarean section c) Anticonvulsants d) Blood transfusion All of the above	ergencyobstetric careprovides which of the
a) Suppressive therapy recommended	ig buboes which may form fistulas - 4-the to granuloms
e) Painless inflammatory nodules tha	t progress to ulcers - Donaganosa.
	hemorrhages or "strawberry spots" - Tordomones.
g) Transmission is sexual and vertica	- TORCHEI @ Syphing hance upper in the
h) Vaginal pH less than 3	
i) Tender inguinal and/or femoral lym	phadenopathy that is typically unilateral.
10) Vulvovaginal candidiasis H	Chausian.
11)Bacterial vaginosis	Buboes with suppuration - chanción
12) Trichomonas vaginalis F	Busoes + Suppuration + fishula - Lla
13) Syphilis &	Buboes + suppura.
14)Herpes A	
	0

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Differentrate Stron Law and chancion.

15)Chancraid 2
16)Donovanosis
17) The following is NOT a common cause of urinary tract infection a. Escherichia coli b. Neisseria gonorrhoeae c. Chlamydia trachomatis - causes Heale pyung.
e. Enterococcus faecalis
18) Regarding asymptomatic bacteriuria in pregnancy, which is the CORRECT statement?
a. Defined as >100,000 colony forming units of multiple coliforms - strate organisms. b. More common in pregnant than non-pregnant women - common of meature. If untreated, up to 40% results in symptomatic urinary tract infection as 40%. Risk factors include extremes of ageat pregnancy 1% increase per decade. Urinalysis is the gold standard for diagnosis - MCI.
9)Multipurpose contraceptive prevention technology protects against . Pregnancy . HIV
Syphilis Gonorrhea
All of the above
Coc, Vepituelval ovairand Decreased bone density x
Increased risk of ectopic pregnancy - Increased risk of benign breast diseases - IUCDS Increased incidence and severity of acute salpingitis None of the above - *VIX of Central caucer due to ectopic and * exposure to HPV and vagand acidly
Long acting reversible contraceptives include all of the following EXCEPT ladelle - sym Mirena - sym

21)

a.

b.

a.

Copper

Bilateral tubal ligation X (rrevenible.

e. Implanon - 3y3

22) What is the recommended first line treatment for complicated malaria in pregnancy?

Intravenous Quinine and clindamycin

b) Intravenous artesunate followed by artemisinin based combination therapy

Intravenous artesunate then quinine

Intravenous Quinine and doxycycline

e) Intravenous Quinine followed by artemisinin based combination therapy (ACT) - 2nd Lag

23) Which of the following statements concerning abdominal pregnancy is CORRECT? a) Gastrointestinal symptoms are quite often severe Б. Fetal survival is approximately 50% - битогой в 10%. c. Aggressive attempts should be made to remove the placenta at the time of initial surgery x. d. It may result in infectious morbidity prior to the diagnosis e. It is usually the result of a primary abdominal implantation _ Almost always 20 24) Intrauterine fetal demise at 17 weeks diagnosed 5 weeks later is at increased risk of a. Septic abortion b. Recurrent abortion Consumptive coagulopathy with hypofibrinogenemia - DIC. d. Future infertility e. Ectopic pregnancies 25) Which of the following predisposes to ectopic pregnancy? a. Recurrent UTI Pelvic inflammatory disease (PID) c. Progesterone containingintrauterine device (IUD) Y d. Induction of ovulation × e. Exposure in utero to diethylstilbestrol (DES) have been associated with which of the 26)Combined oral contraceptives pills following? a. Pituitary adenoma b. Ovarian cancer c. Endometrial cancer d. Hepatic cancer (e.) Hepatic adenoma 27) A transverse lie of the fetus is least likely in the presence of: a. Placenta previa. b. Pelvic contraction. c. Preterm fetus. d. Grand multiparity. Normal term fetus.

28) The following ultrasonic measurements may be used to confirm or establish gestational age:

a) Crown rump length

- b. Nuchal pad thickening
- c. Amniotic fluid volume
- d. Yolk sac volume
- e. Biophysical profile

29) Multiple pregnancy increases

- a. In white people more than black X
- (b) With advancing maternal age
- c. With Bromocriptine use for infertility treatment k.
- d. If first pregnancy x -multipawas.
- e. After ovarian diathermy for polycystic ovary syndrome x

30)In twin deliveries: Which of the following statement is TRUE?

a. The first twin is at greater risk than the second

b. They usually go post date x

c. Epidural analgesia is best avoided & perus should delinery proce difficult.

d. Commonest presentation is cephalic and second breech x clc There is increased risk of postpartum hemorrhage

31) Which of the following is known to be the commonest presentation in twins?

a. Breech, cephalic

b. Cephalic, breech - 35%.

Cephalic, cephalic - 45%.

- d. Breech, breech
- e. Cephalic, transverse

32) The most common cause of perinatal death in mono-amniotic twin is:

a Cord entrapment. Cord entruglement.

b. Cord prolapse.

- c. Twin-twin transfusion syndrome. 15-20% of dealing-
- d. Lethal congenital anomalies.
- e. Placental abruption.

33) Regarding missed abortion, all of the following are correct, EXCEPT:

a. Patient may present with loss of the symptoms of pregnancy <

b. Per vaginal bleeding may be one of the presenting symptom /

Immediate evacuation should be done once the diagnosis is made

Poor is left for Disseminated intra-vascular coagulation made

d. Disseminated intra-vascular coagulation may occur as a sequel of missed abortion

e. Ultrasound should be done to confirm the diagnosis

 34) This is true regarding complete abortion: a. Uterus is usually bigger than date × b. Cervical os is open with tissue inside the cervix × c. Need to have evacuation of the uterus × After complete abortion there is minimal or no pain and minimal or no bleeding e. Follow up with β-hCG for one year
35)Which is the most common cause of first trimester abortion? Chromosomal abnormalities b. Syphilis c. Rhesus isoimmunization d. Cervical incompetence e. Bicornuate uterus
36)Regarding ectopic pregnancy, all of the following are true, EXCEPT: a. Is associated with uterine enlargement b. Is situated in the ovary in about 0.5% of all cases c. Is more dangerous when it is situated in the isthmus of the fallopian tube Can only be diagnosed after it has ruptured a. Is a complication of assisted conception
The following are factors affecting Methotrexate as a choice of treatment for ectopic pregnancy, EXCEPT: Size of the ectopic of character (the less than formalise (these). Presence or absence of cardiac activity of the patient of the tube of the law of the law. Integrity of the tube of the patient of the law of the law of the law.
B) The commonest site of ectopic pregnancy is: Peritoneal cavity Mesosalpinx Ovary Ampulla of the fallopian tube Isthmus portion of the fallopian tube
The following may be signs of abruptio placenta, EXCEPT: Vaginal bleeding.

c. Blood stained amniotic fluid. d. Abnormal fetal heart rate.

e. Tense painful uterus. /

40) The following aid in the diagnosis of Placenta previa, EXCEPT. Constant lower abdominal pain ? - paruless publeoding b. Malpresentation c. Bright red vaginal bleeding d. Obstetric ultrasound

41) Regarding Postpartum haemorrhage, which of the following is CORRECT?

May occur as a consequence of antepartum haemorrhage.

b. Ends with Hypercoagulable state

e. History of repeated C-section.

c. Hysterectomy is the first the first line of treatment - where massage concountant with

uleworours d. Always complicates intrauterine fetal death (IUFD)

e. Diagnosed only when the placenta is still undelivered

42) Regarding Secondary postpartum haemorrhage, which of the following CORRECT?

24hrs to endoy prespecture. Is diagnosed when bleeding occurs 72 hours after delivery

Contra indicate breast feeding

c. The commonest cause is the cervical tears & Intections

d. Very common when the patient delivers a congenitally abnormal baby &

e. Choriocarcinoma could be a cause.

×43)In Disseminated intravascular coagulation (DIC), which of the following is CORRECT?

a. The level of Fibrinogen degeneration products is low

b. Platelet count is high

Bleeding time is prolonged

d. Prothrombin Time and Partial Thromboplastin Time are normal

e. The Fibrinogen level is high &

44) Clinical causes of disseminating intravascular coagulation include the following EXCEPT

a. Ectopic pregnancy

b. Septic abortion

Mild preeclampsia - seeere with HELLP.

d. The use of tampons / - Tokk suck syndrome.

e. Intra Uterine Fetal Death /

***45)**The following are absolute indications for Caesarean Section

a. Hydrocephalus X

b. Abruptio placenta X

c. Preterm Labor

(d.) Active primary genital herpes

e. Severe pre-eclampsia

46)Which of the following statement is true regarding obstructed labour? a. Diagnosed only when the cervix is fully dilated b. Usually predicted before onset of labor c. More common in developed countries In face presentation ,Mento-posterior position could be a cause e. Delivery can safely be accomplished by vaccum extraction	
 47)Which of the followings is an absolute contraindication to a trial of labor after cesarean delivery? Prior classical incision. Prior cesarean delivery for dystocia. Prior Intra Uterine Fetal Death . Ultrasound estimation of fetal weight of 3500g. Prior cesarean delivery for breech. 	
48) The most serious complication of preterm premature rupture of membrane at 28 weeks: a. Fetal compression anomaly. Pulmonary hypoplasia. c. Intrauterine infection. d. Limb contraction. e. Abruptio placenta.	
 49) The following are obstetric causes for premature labor EXCEPT: a. Multiple pregnancy b. Multiparity c. Premature preterm rupture of the membrane d. Cervical incompetence e. Uterine congenital anomalies 	
50)In the diagnosis of premature rupture of the membrane, all of the following are true EXCEPT: a. History of fluid loss per vagina b. Visualization of amniotic fluid in the vagina by sterile speculum c. Positive Nitrazine test d. Positive fern test Positive methylene blue test Positive methylene blue test Positive fuplicate.	
1) Compound presentation is most consistently associated with: Premature repture of manufacture	

52) Complete breech means: a. Flexion at hip joint and extension in knee joint Flexion at hip joint and flexion at knee joint c. Extension at the hip joint d. Flexion at knee joint and extension at the hip joint e. Flexion of one leg at hip joint and extension of the other leg at the hip joint 53) Which is the BEST screening and diagnostic test for gestational diabetes? a. Fasting blood sugar b. Random blood sugar c. Serial blood sugars Glucose tolerance test e. None of the above 54) Regarding injectable progesterone contraception, which of the following is false? a. Medroxyparogesterone acetate is the most commonly used ~ b. May cause irregular uterine bleeding ~ c. May cause amenorrhea. Should not be given to lactating mother. = B-feeding a an indirection. e. Does not carry a risk of venous thrombosis. occurra no of pregnancies per 100 womanyrs. 9 where a woman yr II defried as 13 monthud 55) With regards to contraception failure, the pearl index refers to: a. Numbers of Pregnancies in years. b. Number of pregnancies in 1 woman-year. Number of pregnancies in 100 woman-year. cycles. d. Number of pregnancies in 100 woman-years over pregnancy losses. e. Number of Pregnancy losses in 100 woman-years.

56) The following is a recognized feature of Sheehan syndrome.

a. Menorrhagia X

b. Galactorrhea x

c. Insulin resistance X

Hypothyroidism- accordany hypothywords.

e. Dwarfism - m alt.

parhypophilanism

afterly-lactotropis - prolactor

afterly-lactotropis - Lit, FSH

- translatiopis - GHRSH

- trywtropis - tsH

- corractopis - CRH

57) All the following are possible causes of menorrhagia, EXCEPT

a. Uterine fibroid - Fubmucos al

b. Adenomyosis

c. Pelvic inflammatory disease

d. Endometrial hyperplasia

© Combined oral contraceptive pills X

EQ\Dogordin -	
b. Conadotrophis level falls & Refe	. of - Becomes more basis - Audity decreases.
c. There is increase in bone density	decrease
a. The size of an existing fibroid incre	eases. decreases.
Post-menopausal bleeding should	be investigated by endometrial biopsy
59)From a woman's last normal menst expected date of delivery?	trual period, what method is used to estimate the
a. Subtract 7 to the date, subtract 9 from Add 7 to the date, substract 3 from the	e month
c. Add 7 to the date, add 3 to the month	4
d. Subtract 7 to the date, add 3 to the mo	onth «
e. Add 3 to the date, subtract 3 from the	
60) What causes softening and blueish	color of the cervix in early pregnancy - Chadwall's
b. Increased vascularity b. Decreased blood flow	Hegav's 83-
c. Decreased oxygen	
d. Atrophy	of pregnancy at 7 weeks of gestation may
e. None of the above	placenta prospers.
Surgical removal of corpus luter result in Spontaneous abortion Gestational diabetes	uni of pregnancy at a woone of govern
b. Gestational diabetes x	
c. Hypertension in pregnancy	
d. Abdominal pregnancy <	
e. No effect on the pregnancy x	
	od is lost during normal vaginal delivery of a
singleton pregnancy?	- 11 2 Come SVD.
250 ml b. 750 ml	71000ml SVD.
c. 900 ml	
d. 1000 ml	
e. 1200 ml	
In which of the following positon	is cardiac output most increased in the pregnar
Left lateral recumbent - 100	THE RESIDENCE OF THE PERSON OF
Left lateral recumbent - NO COL b. Right lateral recumbent	
c. Standing	
d. Supine	
e. None of the above	

e. Infundibulopelvic ligament - 1 kg 1 st turnester - 5 kg each in 2 nd & 3 rd turne see. 65) Weight gain in normal pregnancy a. Is distributed equally in all trimesters× b. Averages about 16 kg x 12-5 kg -cotal = 12.5 kg-(e) Occurs more commonly in 2nd trimester d. Is closely related to the birth weight & - prepregnancy BM1. e. Is closely related to age of the mother x 66)Concerning transfer of gases through the placenta, which of the following is FALSE a. Oxygen crosses the placental membrane by simple diffusion b. Carbon dioxide crosses the placental membrane by simple diffusion c. Carbon monoxide crosses the placental membrane by facilitated diffusion / Inhaled anaesthetics cross the placental membrane / Nitrous oxide does not cross the placental membrane 67) At what gestation does the gravid uterus stop being a pelvic organ? a. 10 weeks 12 weeks c. 14 weeks d. 16 weeks e. 18 weeks Both hypertrophy & hyperplans thoughtess. 68) Uterine enlargement in pregnancy is due to: a. Hyperplasia b. Hypertrophy and stretching c. Atrophy with collagen replacement d. Hyperplasia and hypertrophy play equal roles e. None of the above 69)Mildred Adhiambo presents on 24th July with per vaginal bleeding and last normal menstrual periods started on 12th of January 2017 and ended on 15th January 2017. a. Last normal menstrual period (LNMP) was 15/01/2017 X pourod. Her gestation by dates on April 24, 2017 Her gestation by dates on April 24, 2017 was 14 weeks 4 days - 13 weeks Stays c. Her expected date of delivery is November 19, 2017 d. All of the above e. None of the above Page 12 of 18

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

a. Bladder trigone

c. Sacrospinous ligaments

d. Ureterovesical junction

D Pelvic brim

b. 6.

70) In taking history of a couple presenting with infertility, the female patient was reported to be para 0 + 2. The following may be true except

a. Previous miscarriage at 12 weeks

Previous ruptured ectopic pregnancy

Previous pregnancy loss at 22 weeks

d. Previous termination of pregnancy at 6 weeks

Previous still birth at 36 weeks

71) Which of the following is not a fetal biophysical profile variable

a. Amniotic fluid index

b. Breathing

Fetal presentation

d. Body movement

e. Fetal tone

72) Between 14 and 26 weeks of gestation, which of the following is the most accurate crans-cenesellas dumeter (14 and 200 kg) parameter for gestational age assessment

a. Femur length

Biparietal diameter - 12 to 18 trimester (8 to 13 wks)

c. Crown-rump length - 18t trimester (8 to 13 wks)

Abdominal circumference

e. None of the above

BPD - septum pelluciduns

73) In performing investigations in reproductive health, the following clusters of investigations are relevant:

a. Fibroids: ultrasound, X-ray pélvis, full blood count

Urinary tract infection in pregnancy: Mid-stream specimen of urine for microscopy, culture sensitivity, intra-venous urogram, renal ultrasound

Pre-eclampsia: urinalysis for proteinuria, ultrasound for biophysical profiles, liver function tests for transaminases

d. Infertility: seminalysis, hysterosalphingo gram (HSG), X-ray pelvis

Preterm premature rupture of membranes: speculum examination, antibiotic therapy, bed rest

74) What are the cardinal movements of labor (in order, starting with first movement)

Descent, engagement, flexion, internal rotation, extension, external rotation, expulsion

b. Descent, flexion, engagement, internal rotation, extension, external rotation, expulsion

Engagement, descent, flexion, internal rotation, extension, external rotation, expulsion

Engagement, flexion, descent, internal rotation, extension, external rotation, expulsion

e. None of the above

75)In which situation should standard digital examination be deferred at term Bleeding in excess of bloody show Maternal fever Patient nervousness d. Suspected ruptured membranes e. Severe hypertensive disease in pregnancy 76) When should the fetal heart rate be auscultated during labor a. Before a contraction b. During a contraction e. Immediately after a contraction d. Anytime e. 15 minutes after a contraction 77)In third stage of labor, which of the following is not a sign of placental separation a. A gush of blood b. Uterus rises in the abdomen & doops C. Umbilical cord protrudes further out of the vagina ~ - cord fig The Uterus becomes flaccid from & globular > calking fige. e. Uterus contracts 78) Active management 1st stage of labour does not include which of the following a. Amniotomy as needed / b. Commitment to deliver within a certain timeframe c. Oxytocin augmentation d. Repeated vaginal examination e) Assisted vaginal delivery _ and stage 79) Concerning Bishop's Score which of the following is FALSE? a. Includes cervical dilatation, cervical effacement cervical consistency, cervical position and station of the presenting part. c. When the score is favorable the preferred pharmacological agent for induction is score of the Score of less than 6 requires cervical ripening _ not favourable for induction.

80) During lactation, all the following statements are true EXCEPT

a. Oxytocin causes the myoepithehial cells of the breast to contract v

b. Ovulation is often delayed /

All of the above

c. Prolactin secretion is stimulated by suckling /

d. The administration of a progestogens will suppress milk production &

e. The administration of oestrogen will suppress milk production

6477268704219603 ATV-38056118008960

81) The following	are	useful	in t	he	management	of	endometriosis	EXCEP	T
a Cortocostoroid				. 44		77.7		-	

b. Danazol

c. Gonadotropin releasing hormone agonists /

d. The oral contraceptive pill

e. Dienogest

82) 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 K

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

83)Optimal intrapartum care for HIV pregnant women includes one of the following

a. Artificial rupture of membranes immediately when labor is established <

Use of antiseptics techniques in conducting delivery

c. Frequent vaginal examinations done every two hours &

d. Routine episiotomies X

e. Cesarean section for all HIV infected pregnant women at term K

84) The World Health Organization has identified reproductive health to include which of the following dimensions?

a. Physical, vocational, ethnic

b. Emotional, social, spiritual

c. Physical, mental, social

d. Spiritual, vocational, gender-related

e. Physical, emotional, social

85) Barriers to reproductive health services include all of the following EXCEPT

a. Lack of women empowerment

b. Weak health management systems

c. Lack of community engagement /

Male involvement

Poor growth of the economy

86) Which of the following statements is TRUE?

a. Sexual violence is an unusual crime because the victim is often to blame for the act

b. A man cannot rape his wife &

c. Boys and men cannot be victims of sexual violence from men and women <

Most rapes are not reported to the police

e. Male rape by other men is mostly a problem for gay men a

- Female-mullenam | parameto - male-woothan duct. 87) Which of the following is true regarding the reproductive system? a. In females develops from Mesonephric system ~ b. In makes develops from Mullerian system c. Develops similar structures in males and female & d. In males is not dependent on hormones & (e.) Is passive in females compared to men 88) Regarding the Wolfian duct in the female which is the correct statement? a. Develops into the fallopian tube b. Forms the ovary c. Forms the infundibulopelvic ligament Regresses and becomes vestigial e. None of the above 89) The function of the round ligament is to a. prevent uterine prolapse b. provide nerve supply to the upper vagina - precents antererson c. prevent retrodisplacement of the uterus d. Support the ovaires e. Supports the fallopian tubes 90) The most common symptom associated with adenomyosis is a. Infertility **b.** Menorrhagia c. Haematometra d. Dyspareunia e. Metrorrhagia 91) The differential diagnosis for vaginal cysts include a. Cystocele b. Urethral diverticulum c. Urethrocoele d. Hydrocele of the canal of Nuck e. All of the above 4 92) The primary lymphatic drainage of the lower vagina is to the upper 1/2 - polemal Twee a. External iliac lymph nodes moddle 1/3 - "/ b. Sacral lymph nodes c. Femoral lymph nodes below - supercorrect mymer pyrioned Superficial inguinal lymph nodes Internal iliac lymph nodes

94) Which of the following does not provide uterine support in the pelvis? a. Cardinal ligaments Uterosacral ligaments An intact perineal body d. Pubocervical ligaments e. Transverse ligament 95) Interstitial uterine myomas most often cause menorrhagia due to a. Secondary degeneration b. Rupture of the endometrial cavity c. Pressure necrosis d) Inhibition of uterine contractility e. Prolapse 96) Osteoporosis is associated with all the following EXCEPT: a. Early Menopause b. Long-term Heparin therapy c. Turner's syndrome d. Glucocorticoid therapy Poly-cystic ovary syndrome 97) During puberty, which of the following is the last event Menarche Menarche D. Adrenanche D. Adrenanche C. Thelarche D. Adrenanche D.	93)What is the primary treatment of molar pregnancy? a. Hysterectomy Suction curettage C. Oxytocin induction d. Misoprostol induction e. Methotrexate
b. Rupture of the endometrial cavity c. Pressure necrosis d. Inhibition of uterine contractility e. Prolapse 96)Osteoporosis is associated with all the following EXCEPT: a. Early Menopause b. Long-term Heparin therapy c. Turner's syndrome d. Glucocorticoid therapy E Poly-cystic ovary syndrome 97)During puberty, which of the following is the last event a. Menarche b. Adrenarche c. Thelarche b. Adrenarche c. Thelarche c. Thelarche c. Totalarche c. Totalarche c. Totalarche c. Totalarche c. Totalarche c. Therefirst meiotic division is completed after ovulation d. The first meiotic division is completed after opuberty is less than 300,000 d. The number of ova in both ovaries at the time of puberty is less than 300,000	d. Pubocervical ligaments An intact perineal body d. Pubocervical ligaments Alto called cardanal agaments
a. Early Menopause b. Long-term Heparin therapy. c. Turner's syndrome d. Glucocorticoid therapy. e. Poly-cystic ovary syndrome 97) During puberty, which of the following is the last event a. Menarche Last b. Adrenarche puber have facility here b. Adrenarche puber have facility here c. Thelarche breads d. Pubarche puber have facility here d. Pubarche puber have facility here e. Coitarche 98) Which of the following statements is FALSE a. No new ova are formed after birth b. During fetal period, the ovaries contain over 7 million germ cells c. The first meiotic division is completed after ovulation d. The number of ova in both ovaries at the time of puberty is less than 300,000	b. Rupture of the endometrial cavity c. Pressure necrosis Inhibition of uterine contractility
d. Glucocorticoid therapy. Poly-cystic ovary syndrome 97) During puberty, which of the following is the last event Menarche - puber have facility have b. Adrenarche - puber have facility have c. Thelarche - puber have facility d. Pubarche - puber have e. Coitarche 98) Which of the following statements is FALSE a. No new ova are formed after birth b. During fetal period, the ovaries contain over 7 million germ cells c. The first meiotic division is completed after ovulation d. The number of ova in both ovaries at the time of puberty is less than 300,000	
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97) During puberty, which of the following is the last event a. Menarche - puber har factory b. Adrenarche - puber har factory c. Thelarche - puber her d. Pubarche - puber her d. Pubarche - puber her d. Pubarche - puber her b. Coitarche 98) Which of the following statements is FALSE a. No new ova are formed after birth b. During fetal period, the ovaries contain over 7 million germ cells c. The first meiotic division is completed after ovulation d. The number of ova in both ovaries at the time of puberty is less than 300,000	
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99)At what stage does conceptus implant

- a. Zygote
- b. Morula
- C. Blastocyst
 - d. Embryo
 - e. Blastomere

100) Which of the following statement is true 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 pro-our buyout
- 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 \propto

THE END

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