

UNIVERSITY OF NAIROBI

UNIVERSITY EXAMINATIONS 2017/2018

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

HOG 400: OBSTETRICS AND GYNECOLOGY – MULTIPLE CHOICE QUESTIONS

DATE: FEBRUARY 21, 2018

TIME 9.00 -10.30 AM

DURATION: 1 HOUR 30 MINUTES

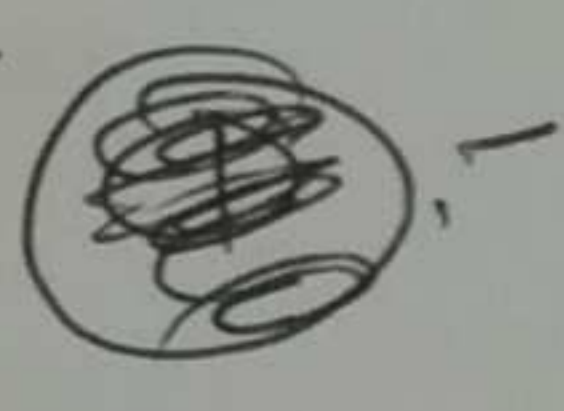
INSTRUCTIONS TO STUDENT

- 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) 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
- 2) The ovarian vessels are found in which of the following ligaments *suspensory ligament.*
- A. Broad
 - B. Round
 - C. Uterosacral
 - D. Infundibulopelvic
 - E. Mackenrodt
- 3) Infundibulopelvic ligament is contiguous with which of the following structures?
- A. Broad ligament
 - B. Lateral uterine wall *- broad ligament*
 - C. Uterosacral ligament
 - D. Supravaginal portion of the cervix
 - E. Parietal peritoneum
- 4) Uterine support in the pelvis is provided by all of the following except,
- A. Cardinal ligaments
 - B. Uterosacral ligaments
 - C. An intact perineal body
 - D. Pubocervical ligaments
 - E. Transverse ligament
- 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) Normal stature with minimal or absent pubertal development may be seen in
- A. Testicular feminization
 - B. Kallman syndrome *- Hypogonadal*
 - C. Pure gonadal dysgenesis
 - D. Turners syndrome
 - E. Intensive athletic training

7) At puberty

- A. The mean age of menarche is 10x 13
- B. The first sign is appearance of axillary hair x
- C. The growth spurt in boys occurs earlier than in girls x *earlier in girls*
- D. There are associated night time peaks of Follicle Stimulating Hormone (FSH) ✓
- E. The first steroid to show an increase is progesterone x *estrogen*



8) 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

9) What is the estimated number of oocytes present at puberty

- A. 50,000 to 100,000
- B. 200,000 to 400,000
- C. 750,000 to 1 million ✓
- D. 3 million to 5 million
- E. 800,000 to 1 million

10) Regarding stages of development before birth

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

11) What is the solid ball of cells formed by 16 or more blastomeres?

- A. Morula - compacted ball of cells ✓
- B. Blastocyst
- C. Zygote
- D. Embryo
- E. Fetus

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

- A. Occipitofrontal x *11.5 cm*
- B. Suboccipitobregmatic - 9.5 cm
- C. Bitemporal - 8.5 cm ✓
- D. Biparietal - 9.5 cm
- E. Occipitomenal x

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

- A. Ischial spines - *stature*
- B. Symphysis pubis
- C. Ischial tuberosities
- D. Sacral promontory
- E. There are none

Option list for question 14 to 18; from the list given a to e, choose the most likely action for the scenarios given. Write the letter that corresponds to the correct option in the answer sheet. One option can be used more than once

- a) Uterine vein
- b) Right ovarian vein
- c) Left ovarian vein
- d) Uterine artery
- e) Ovarian artery

14) Arises from the anterior branch of the hypogastric artery *→ internal iliac*
D-Uterine artery ✓

15) Drains into the internal iliac veins ✓
A-Uterine vein

16) Drains into the inferior vena cava
B-Right ovarian vein ✓

17) Arise from the abdominal aorta
E-Ovarian artery ✓

18) Drains into the left renal vein
C-Left ovarian vein ✓

19) The vagina

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

20) 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

21) The fused müllerian ducts give rise to all of the following structures except

- A. Cervix ✓
- B. Upper two thirds of the vagina ✓
- C. Uterine body ✓
- ~~D. Vulva ✗~~
- E. Lower uterine segment ✓

Option list for question 22 to 26; from the list given a to e, choose the most likely action for the scenarios given. Write the letter that corresponds to the correct option in the answer sheet. One option can be used more than once

- a) True sexual precocity
- b) Incomplete sexual precocity
- c) Isosexual precocious pseudopuberty
- d) Heterosexual precocious pseudopuberty
- e) Precocity due to gonadotropin producing tumors

22) Defined by the presence of virilizing signs in girls

D- Heterosexual precocious pseudopuberty

23) Characterized by the presence of premature adrenarche, pubarche or thelarche

B- Incomplete sexual precocity

24) Can arise from cranial tumors or hypothyroidism

A- True sexual precocity

25) Stems from premature activation of the hypothalamic-pituitary system

A- True sexual precocity

26) Frequently caused by ovarian tumors

C- Isosexual precocious pseudopuberty

27) Regarding fetal movement, at what gestation does spontaneous fetal movement begin?

- A. 6 weeks
- B. 12 weeks
- ~~C. 16 weeks~~ - *multiparous women.*
- D. 20 weeks
- E. 22 weeks

28) During pregnancy, increased joint mobility is associated with increased levels of which hormone?

- A. Estradiol
- ~~B. Progesterone~~
- ~~C. Relaxin~~

- D. Cortisol
- E. Androgens

29) What is the average weight gain in pregnancy

- A. 5.5 kg
- B. 8.5 kg
- C. 12.5 kg
- D. 15.5 kg
- E. 16 kg

30) 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
- B. Previous ruptured ectopic pregnancy
- C. Previous pregnancy loss at 22 weeks
- D. Previous termination of pregnancy at 6 weeks
- E. Previous still birth at 36 weeks

31) In determining gestation age between 14 and 26 weeks of gestation, which of the following is the most accurate parameter

- A. Femur length
- B. Biparietal diameter *- transcerebellar diameter best*
- C. Crown-rump length
- D. Abdominal circumference
- E. None of the above

32) Pap smear:

- A. Is for confirming diagnosis of cancer of a cervical lesion *screening*
- B. Is done if there is a cervical lesion *histology*
- C. Is one of the objective screening tests for cervical dysplasia *✓*
- D. Abnormal uterine bleeding is an absolute indication *✓*
- E. Is an endometrial biopsy test *✓*

33) 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

34) Concerning the Umbilical cord, the following is false

- A. Contains two arteries and one vein, which are surrounded and supported by gelatinous tissue called Wharton's jelly ✓
- B. Umbilical cord sampling has been useful in studying perinatal physiology ✓
- C. Normal cord length at birth on average is 100-150 cm ✓
- D. Single artery (2 vessel cord) occurs when there is aplasia or atrophy of the missing vessel ✓
- E. In velamentous insertion if they present before the head of the fetus may lead to vasa previa ?

35) Challenges to partograph use include the following except

- A. Insufficient knowledge ✓
- B. Non availability ✓
- C. Need a lot of resources to implement ?
- D. Workload pressure ✓
- E. Staff attitudes ✓

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

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

37) The following is a common cause of uterine subinvolution post delivery

- A. Puerperal infection
- B. Fetal macrosomia
- C. Polyhydramnios during pregnancy
- D. Cessation of breastfeeding
- E. None of the above

38) What is the commonest etiology of episiotomy dehiscence

- A. Postpartum anemia
- B. Poor nutrition
- C. Infection
- D. Poor repair technique
- E. Macrosomia

39) The following is false regarding breastfeeding

- A. If the mother suckles twins simultaneously, the prolactin response is about double that when one baby is fed at a time ✓
- B. The mechanism by which suckling stimulates prolactin release involves the stimulation of dopamine - inhibition
- C. Prolactin concentrations in the nursing mother decline gradually during the late puerperium ✓

- D. Prolactin levels continue to rise as pregnancy advances ✓
- E. Baby friendly hospital policy promotes breastfeeding ✓

40) Which Leopold's maneuver involves fundal palpation to define which fetal pole occupies the fundus

- A. First - FH and contents.
- B. Second - lie.
- C. Third - Pawlik's grip for presentation
- D. Fourth - deep p. palpation for engagement/descent.
- E. Fifth

41) When examining a woman at term, what does hearing fetal heart tones loudest above the umbilicus 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

42) In which maneuver are the index and middle finger applied over the maxilla in order to free the head during breech delivery

- A. Pinard
- B. Bracht
- C. Mauriceau ✓ Mauriceau Smellie's technique.
- D. Zavanelli
- E. Denzel

43) Concerning monozygotic twins, which of the following is false

- A. Result from ovulation and fertilization of a single oocyte ✓
- B. Timing of egg division determines placentation ✓
- C. They are of same sex ✓
- D. Are genetically identical ✓
- E. Usually begin after the blastocyst stage

44) Which of the following is associated with an increased incidence of placenta previa

- A. Low parity ✓ - increased parity.
- B. Young age ✓ & ↑ age.
- C. Singleton gestation ✓ - multiple gestations.
- D. Prior cesarean section ✓ ↑ scar tissue.
- E. All of the above

45) The following is a predisposing factor of uterine atony

- A. Low parity *- multiparity*
- B. Preeclampsia *x*
- C. Precipitous labor *✓ - labor less than 2 hrs*
- D. Oligohydramnios *x - polyhydramnios*
- E. None of the above

46) Which of the following is the most reliable clinical indicator of chorioamnionitis in the management of premature rupture of membranes

- A. Fetal tachycardia *x*
- B. Maternal fever *x*
- C. Maternal leukocytosis *x*
- D. Uterine tenderness *✓*
- E. Reduced fetal movements *x*

47) According to Friedman, what is prolongation of latent phase of labor in a multipara

- A. More than 6 hours
- B. More than 14 hours
- C. More than 20 hours
- D. More than 22 hours
- E. More than 24 hours

48) 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

49) Which is the best way to deliver a term transverse lie in labor with ruptured membranes

- A. Low transverse cesarean delivery *x*
- B. Vertical cesarean delivery *- classical cs*
- C. Version to vertex and vaginal delivery *x*
- D. Version to breech and vaginal delivery *x*
- E. None of the above

50) 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 *- upper limbs & face*
- E. Severe headache *✓*

51) How is magnesium sulphate toxicity treated

- A. Calcium gluconate 1 g intravenously ✓
- B. Calcium gluconate orally ✓
- C. Calcium gluconate 1 g intravenously and discontinue magnesium sulphate ✓
- D. Dialysis ✓
- E. None of the above ✓

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

- A. Body mass index of less than 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 ✓

53) Which of the following is false regarding management of diabetes in pregnancy

- A. Serial postprandial blood sugars are recommended for monitoring blood sugars ✓
- B. Oral glucose tolerance test is used for screening diabetes in pregnancy ✓
- C. Tocolytics should be used cautiously ✓ *any β₂ blocker against monitoring.*
- D. Steroids may cause hyperglycaemia ✓
- E. Glycosylated haemoglobin is used for screening diabetes in pregnancy ✓

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

- A. Increased stroke volume ✓
- B. Increased resting pulse rate ✓ *10-15% increase*
- C. Expanded blood volume ✓
- D. All of the above ✓
- E. None of the above ✓

55) Which of the following, if chronic during pregnancy, requires heparin anticoagulation therapy

- A. Atrial fibrillation ✓
- B. Ventricular tachycardia ✓
- C. First degree heart block ✓
- D. Paroxysmal supraventricular tachycardia ✓
- E. All of the above ✓

56) During pregnancy, which of the following is false

- A. DVT is more common in the left lower limb than the right ✓
- B. Fibrinogen and factors VII, VIII, IX, XI and XII increase ✓

- C. Heparin is given throughout pregnancy because it crosses the placental barrier *- does not cross*
- D. Warfarin takes three days for its onset of action to take full effect ✓ *onset 3-72 hrs*
- E. Protamine sulphate is the antidote for Heparin and is given at a dose of 1mg per 100 I.U of Heparin ✓ *100 I.U of Heparin*

57) Which of the following pregnancy complication is the most common in women with chronic renal insufficiency

- A. Anemia
- B. Fetal growth restriction
- C. Preeclampsia
- D. Preterm delivery
- E. Premature rupture of membranes

58) The following is false regarding epilepsy and pregnancy *- drug interactions of anticonvulsants with OCPs*

- A. Hormonal contraceptive failure may lead to pregnancy in women on antiepileptic drugs ✓
- B. All anticonvulsants are teratogenic? *- mg/day is not*
- C. Folic acid supplementation is important ✓ *- esp if on phenytoin*
- D. Anomaly scan is recommended to all pregnant epileptic patients ✓
- E. Pregnancy generally leads to decrease in fits in epileptics ✓

59) 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 ?

60) Which of the following is associated with elevated serum levels of thyroxine

- A. Gestational trophoblastic disease ✓
- B. Graves disease ✓
- C. Hyperemesis gravidarum ✓
- D. All of the above
- E. None of the above

Option list for question 61 to 65; from the list given a to e, choose the most likely diagnosis for the scenarios given. Write the letter that corresponds to the correct option in the answer sheet.

a) Chronic hypertension

- b) Preeclampsia superimposed on chronic hypertension
- c) Gestational hypertension
- d) Preeclampsia
- e) Eclampsia

61) Nancy previously well presents with a blood pressure of 170/120, at 7 weeks postpartum. Dipstick is negative for proteinuria.

- (a) Chronic hypertension

62) Grace is 26 weeks pregnant with blood pressure of 160/100 the only abnormal observation. She had elevated blood pressure in previous pregnancy. Her blood pressure weeks ago was normal.

- (d) preeclampsia

Gestational HTN (C)

marker of severe pre-eclampsia

- beyond 6 wks HTN is said to be chronic

63) Betty known hypertensive Para 0+0 gravida at 24 weeks gestation, complaints of frontal headache. Her blood pressure is 145/100, proteinuria ++

- (b) Preeclampsia superimposed on chronic hypertension ✓

64) Jebet blood pressure rises to 160/100 at 26 weeks and she develops new onset proteinuria.

- (c) Gestational hypertension

pre-eclampsia (D)

65) Nafula is brought unconscious with blood pressure of 200/120 following heavy sedation for epileptic like convulsions at 4 weeks postpartum

- (e) Eclampsia ✓

66) 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

67) The most sensitive indicator of quality of antenatal care is

- A. Perinatal mortality
- B. Still birth rate
- C. Neonatal mortality rate
- D. Infant mortality rate
- E. None of the above

68) 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

69) The following is TRUE concerning recurrent mid-trimester abortions

- A. Donald Fothergill Manchester operation procedure is a predisposing factor
- B. LEEP conization of the cervix are protective α
- C. Defective mullerian fusion can be confirmed by ultrasonography
- D. Toxoplasma IgM indicates chronic infection α - IgG
- E. Cold knife conization of the cervix is not a risk factor α

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

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

71) Concerning Ectopic pregnancy, which of the following is true

- A. Most tubal pregnancies occur in the ampulla of the fallopian tube \checkmark
- B. Expulsion of a tubal pregnancy into the peritoneal cavity does not lead to α an abdominal pregnancy - 2ndary
- C. Arias Stella reaction never occurs α
- D. Patients with ectopic pregnancy very rarely present in shock in our setting α
- E. Vaginal bleeding is not a symptom of ectopic pregnancy α

72) The following drugs can be used to treat primary dysmenorrhoea EXCEPT:

- A. Omeprazole
- B. Mefenamic acid \checkmark
- C. Combined hormonal contraception \checkmark
- D. Hyoscine - Buscopan \checkmark
- E. Levonorgestrel intrauterine system intrauterine contraceptive device \checkmark

73) Which of the following statements about Polycystic Ovarian Syndrome is FALSE

- A. There is hirsutism \checkmark
- B. There is low levels of Luteinizing Hormone \checkmark High LH; FSH ratio.
- C. Obesity is common \checkmark - Insulin resistance.
- D. Clomiphene may restore ovulation and menstruation \checkmark
- E. Progestogens may be used for symptomatic relieve \checkmark

74) The following are useful in the management of endometriosis EXCEPT

- A. Corticosteroids - NSAIDs
- B. Danazol
- C. Gonadotropin releasing hormone agonists
- D. The oral contraceptive pill
- E. Progestin's

75) Common cause of chronic pelvic pain in women of reproductive age include

- A. Endometriosis
- B. Ovarian cancer
- C. Uterine retroversion
- D. Uterine fibroids
- E. Gastroenteritis

76) 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 ✓

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

- A. Artificial rupture of membranes immediately when labor is established & avoided.
- B. Use of antiseptics techniques in conducting delivery
- C. Frequent vaginal examinations done every two hours & avoided
- D. Routine episiotomies & avoided.
- E. Cesarean section for all HIV infected pregnant women at term & only if viral load > 71000

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

- A. Is usually due to gonorrhoea - Chlamydia as well.
- B. Carries a risk of sterility of less 10% after one attack & - close to 90% sterility
- C. Has not increased in incidence &.
- D. Is best treated with a single broad spectrum antibiotic & - combination with an antibiotic for anaerobes
- E. Is a contraindication to the IUCD ✓ - Active PID.

79) The following is true about Chlamydial infection EXCEPT

- A. It is commonly harboured in the cervix without causing symptoms - Asymptomatic 50% cases.
- B. Is a possible cause of pneumonia in infants ✓
- C. Is not sensitive to Erythromycin

- D. Is silent in over 50% of the cases ✓
- E. It is sensitive to azithromycin ✓ *lg Azithromycin.*

Option list for question 80 to 84; 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

- 80) A 17 year old high school student planning to start a sexual relationship
C- Condom ✓
- 81) A 17 year old girl living with a heterosexual boyfriend
C-Condom ✓
- 82) 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-Oral contraceptives ✓
- 83) A 35 year old, para 3+0, heavy smoker with reduced functional capacity of her lungs due to chronic obstructive lung disease
B-Intrauterine contraceptive device ✓
- 84) A 25 year old, married nulliparous woman with a recent history of superficial thrombophlebitis
C-Condom ✓

Option list for question 85 to 90; from the list given a to e, for each of the situations listed below involving oral contraceptives, select the most appropriate response. Write the letter that corresponds to the correct option in the answer sheet. One option can be used more than once

- a) Stop pills and resume after 7 days
- b) Continue pills as usual
- c) Continue pills and use an additional form of contraception
- d) Take an additional pill
- e) Stop pills and seek a medical examination

- 85) Nausea during first cycle of pills
B-Stop pills and resume after 7 days

(B) - Continue pills as usual.

- 86) No menses during the 7 days following 21 day cycle of correct use
B-Stop pills and resume after 7 days

(A)

- 87) Pill forgotten for 1 day

D

D-Take an additional pill

88) Pill forgotten for 10 continuous days

C- Continue pills and use an additional form of contraception ✓

89) Light bleeding at mid-cycle during first month on pill

B- Stop pills and resume after 7 days

~~B~~ - continue pills as usual

90) Hemoptysis

E- Stop pills and seek a medical examination

91) 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

92) The following is true regarding dilatation and curettage

A. It should be carried out on all patients with menorrhagia ✓

~~B~~ Should be carried out on all patients with post-menopausal bleeding ✓ - Fractional curettage

C. Should be carried out on all patients with breakthrough bleeding while on the combined oral contraceptive pill

D. Is an essential investigation for infertility ✓

E. Is an important investigation for making a diagnosis of cancer of the ovary ✓

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

A. Lymphatic

~~B~~ Hematogenous

C. Contiguous invasion

D. Transcoelomic spread

E. Local spread

94) In hydatidiform mole, which of the following is true

A. Theca lutein cysts contain androstenedione

~~B~~ Tremors and tachycardia could be present in some cases ✓ - excessive β hCG stimulatory

C. Anti-D prophylaxis is indicated in all cases ✓ - Only if Rh negative

D. Dilatation and sharp curettage is the management of choice ✓ - suction curettage

E. None of the above is true

95) Which of the following is TRUE about obstetric fistula

A. Obstetric type is common in developed countries ✓ & developing

B. Majority are recto-vaginal ✓ & VVF

C. Affects only primigravidas ✓

D. Mainly due to negligence by midwives ✓

E. Obstructed labour is a contributing factor

Option list for question 96 to 100; from the list given a to j, choose the most likely action for the scenarios given. Write the letter that corresponds to the correct option in the answer sheet

- a) Marsupulisation
- b) Wertheims hysterectomy
- c) Cytoreductive or debulking surgery
- d) Hormonal profile
- e) Colposcopy biopsy
- f) Loop electrosurgical excision procedure
- g) Pap smear
- h) Fractional curettage and endometrial biopsy
- i) Reassure her
- j) Chemotherapy

96) Anne presents with a Pap smear diagnosis of high grade squamous intraepithelial lesion.

E-colposcopy biopsy

97) Wangari presents with a unilateral tender swelling beneath the posterior half of the labium majus, expanding medially to the posterior part of the labium minus. The overlying skin is red, oedematous and covered with pus.

A-Marsupulisation

98) Jepchumba, 65 years old who has not been getting her menstrual periods for the last 10 years presents to you excited that she feels like a woman again because her menstrual period has resumed

H-Fractional curettage and endometrial biopsy

99) Mueni had an incomplete abortion six months ago, she presents to you with a serum hCG level of 200,000 mIU/ml, a non productive cough and speculum examination reveals a bluish nodular lesion in the vaginal wall

J- chemotherapy

100) Wanja was undergoing examination under anesthesia procedure for a cervical mass. The doctors notes were as follows: Carcinoma extends beyond the cervix, Does not extended to the pelvic side wall, It involves the vagina, but not the lower third vagina and No obvious parametrial involvement

B-Wertheims hysterectomy

END