OBSGYN Final Exam

Doctor 2020

SIXTH YR

Special thanks to 👏🏻

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OBSGYN

1. Which of the following is not a cause of secondary amenorrhea?

A. Kallmann syndrome
B. Sheehan syndrome
C. Chemotherapy
D. Premature ovarian failure

Ans: A

2. A 24-year-old married female presented with fever 38, vomiting, lower abdominal pain, and cervical motion tenderness. What is the best next step in management?

A. Oral antibiotics
B. IV antibiotics
C. Reassurance and send home
D. Ultrasound first

Ans: B

3. A 45-year-old female patient presented with menorrhagia; her Hb was 7. What is the next step in management?

A. Hysterectomy
B. Hysteroscopy and biopsy
C. Correct anemia
D. Reassurance and send her for future check

Ans: C

4. Which of the following is an indication for MTX use in ectopic pregnancy?

A. Hemodynamic instability
B. Hemodynamic stability and unruptured tubal pregnancy
C. Presence of fetal heart activity
D. Mass >5 cm

Ans: B

5. Which of the following is the most common complication after lower uterine segment CS?

A. Hemorrhage
B. Bladder injury
C. Bowel injury
D. Ureter injury

Ans: A

6. Which of the following differentiates secondary dysmenorrhea from primary dysmenorrhea?

A. Normal pelvic exam
B. Later onset with identifiable pathology
C. Limited to the first day of menses
D. Absence of pelvic pathology

Ans: B

7. Patient with severe PMS, first-line treatment?

A. COCPs
B. SSRIs
C. Benzodiazepines
D. Dopamine agonist

Ans: B

8. Which of the following is a serious complication of breech delivery?

A. Uterine rupture
B. Cord prolapse
C. PPH

Ans: B

9. All of the following are true about the mini pill except?

A. Can be used postpartum
B. DM is an absolute contraindication

Ans: B

10. All of the following may cause polyhydramnios except?

A. Maternal DM
B. Esophageal atresia
C. Fetal cystic kidney disease
D. Large placental chorioangioma
E. Trisomy 18

Ans: C

11. All of the following are prerequisites for the use of assisted vaginal delivery except?

A. Full dilation
B. Vertex
C. Engagement
D. ruptured membranes
E. Intact perineum

Ans: E

12. The importance of good glycemic control before pregnancy to prevent (decrease incidence of?

A. congenital anomalies
B. Maternal retinopathy
C. Maternal nephropathy
D. Need for Cesserian section

Ans: A

13. Which of the following is the most common gynecological tumor in the reproductive age?

A. Leiomyoma
B. Choriocarcinoma
C. Dysgerminoma

Ans: A

14. Which of the following tumors produces estrogen?

A. Dysgerminoma
B. Thecoma
C. Endodermal sinus tumor
D. Serous cyst adenoma
E. Choriocarcinoma

Ans: B

15. The strongest ligament supports the uterus?

A. Round Ligament
B. Broad ligament
C. Cardinal ligament
D. pubocervical ligament
E. Arcuate ligament

Ans: C

16. Low AMH (anti-Mullerian hormone) indicates?

A. Low ovarian reserve
B. increased antral follicle count
C. increased fertility
D. hyperandrogenism

Ans: A

17. Most common cause of secondary PPH?

A. Fibroid
B. Infection
C. Coagulopathy
D. Cervical laceration

Ans: B

18. First-line treatment in hypothalamic amenorrhea?

A. Weight gain and lifestyle modification
B. Gonadotrophin Injections
C. Clomiphene citrate
D. Combined oral contraceptives

Ans: A

19. Case of primary infertility for 2 years, the wife has normal ovaries, fallopian tubes, and uterus, the husband's semen analysis shows sperm concentration is 12 million/mL, normal motility, next step?

A. IVF
B. IUI
C. Expectant management
D. Intracytoplasmic sperm injection

Ans: B

20. A 27 y/o woman with irregular cycles, high BMI, and subfertility, high LH: FSH ratio, what is the best diagnosis?

A. PCOS
B. Asherman
C. Premature Menopause

Ans: A

21. Woman with chronic Pelvic pain, deep dyspareunia, dysmenorrhea, normal US, what is the best diagnosis?

A. Adenomyosis
B. Endometriosis
C. Fibroid
D. PCOS

Ans: B

22. Woman with heavy Menstrual bleeding, dysmenorrhea, and soft, enlarged, regular tender uterus on examination. What is the best diagnosis?

A. Endometriosis
B. Adenomyosis
C. Fibroid
D. PID

Ans: B

23.Woman had an unsafe abortion, came 3 days after with fever, foul-smelling discharge, and abdominal pain. What is the best diagnosis?

A. Septic abortion
B. Threatened abortion
C. PID
D. missed abortion

Ans: A

24. Patient with hyperemesis Graviderum given glucose, then started to complain of ataxia, blurry vision. What is the deficient vitamin?

A. B1
B. B12
C. B6
D. Vit D
E. Vit C

Ans: A

25. Not associated with molar Pregnancy

A. Hyperemesis
B. Preclampsia early
C. Over-enlarged uterus
D. Hypothyroidism
E. Theca lutein cyst

Ans: D

26. Which of the following tests is used to detect maternal anti-D antibodies?

A. Direct Coombs test
B. Indirect Coombs test
C. Amniocentesis
D. Kleihauer test only

Ans: B

27. Pregnant woman diagnosed With Hypothyroidism, the most significant complication we are concerned about?

A. Prematurity
B. Oligohydramnios
C. Neurocognitive Dysfunction
D. Neural tube defect

Ans: C

28. The narrowest clinically relevant part of the pelvis that the baby must descend through?

A. Transverse inlet
B. AP outlet
C. Diagonal conjugate
D. Intertuberous
E. Interspinous

Ans: E

29. Pregnant woman with a singleton baby, 2 previous CS, one twin delivery, had a miscarriage in the second trimester. Her parity is:

A. 1
B. 2
C. 3
D. 4
E. 5

Ans: B

30. Wrong about seminal analysis?

A. Total motility 50%
B. Normal morphology 94%
C. Sperm concentration 25 million/ml
D. Vitality 60%
E. Progressive motility 15%

Ans: E

31. Patient came with generalized tonic clonic seizures and her blood pressure was 180/110, she is still seizing. What is the best next step?

A. IV lorazepam
B. IV valproate
C. General anesthesia
D. IV MgSO4

Ans: D

32. Patient has been receiving continuous MgSO4, now has absent DTR, decreased breathing effort. What's your best next step?

A. Increase dose of MgSO4
B. IV calcium gluconate
C. Immediate delivery

Ans: B

33. A patient with epilepsy has not had a seizure for 3 years on valproic acid, asking about conception?

A. Switch to a different, safer AED before conception if possible
B. add carbamazepine
C. Continue the same regimen
D. Add phenytoin
E. Avoid pregnancy

Ans: A

34. Multiple pregnancy, All of the following are true except?

A. Increased risk of preeclampsia
B. Decreased incidence of UTI
C. increase risk of congenital anomalies

Ans: B

35. Physiological leukocytosis in pregnancy related to ?

A. Hemodilution
B. Sepsis
C. Lymphocytosis
D. Neutrophilia

Ans: D

36. Patient with intrahepatic cholestasis of pregnancy, false?

A. ALP High is specific for liver disease in pregnancy
B. Associated with itching in palms and soles
C. High Recurrence Rate

Ans: A

37. False about vulvar SCC?

A. Mostly in the labia majora and labia minora
B. 25% multifocal
C. One of presentation Is ulcer or a lump
D. Stage 1 confined to the vulva or perineum or both
E. Contributes to 90% of cases

Ans: B

38. True about postmenopausal bleeding?

A. Endometrial thickness more than 5 mm is alarming
B. Endometrial cancer is the most common cause

Ans: A

39. Patient with ectopic pregnancy who is hemodynamically unstable, next step?

A. Reassurance and send home
B. Laparoscopy
C. Admission for observation
D. Resuscitation and immediate laparotomy

Ans: D

40. Not a usual test in antenatal screening?

A. Hepatitis A antibodies
B. TSH
C. Hepatitis B antibodies
D. Rebulla antibodies
E. Blood sugar

Ans: A

41. Primary amenorrhea, normal breast and pubic hair development, absent uterus, diagnosis

A. Androgen insensitivity
B. Mullerian agenesis
C. Kallmann syndrome
D. Imperforate hymen

Abs: B

42. we concern about Late decelerations in labor because it indicates?

A. Head compression
B. Cord compression
C. Fetal hypoxia due to uteroplacental insufficiency
D. Severe fetomaternal hemorrhage

Ans: C

43. Not a cause of decreased variability on CTG?

A. Given morphine to the mother
B. Prematurity
C. Chorioamionitis
D. Maternal anxiety

Ans: D

44. Not transmitted sexually?

A. Trichomonas
B. HIV
C. Chlamydia
D. Gonorrhea
E. Candida

Ans: E

45. 3 days after Delivery, the patient came with anxiety, insomnia, and emotional liability, but she takes care of her baby and herself well, diagnosis?

A. Postpartum psychosis
B. Postpartum blues
C. Postpartum Depression

Ans: B

46. Postpartum, 4 days of hallucinations, depressed mood, paranoia?

A. Postpartum blues
B. Postpartum depression
C. Postpartum psychosis

Ans C

47. Not a screening method for cervical CA?

A. HPV every 5 years
B. HPV and Pap smear every 5 years
C. Pap smear every 3 years
D. Colposcopy every 3 to 5 years
E. Reflex HPV

Ans: D

48. Not Associated With polyhydramnios?

A. Preterm labor
B. PROM
C. postdate
D. PPH
E. APH

Ans: C

49. Patient presented with incomplete miscarriage, which of the following is not true?

A. Cervix will be open
B. Surgical evacuation is mandatory
C. B-hCG is required to make the diagnosis

Ans: C

50. Not A poor prognosis Sign in endometrial cancer ?

A. Elderly patient
B. Poorly differentiated
C. Myometrial invasion
D. Cervical involvement
E. Endometroid type

Ans: E

51. Which of the following is the most predictive of malignancy in endometrial hyperplasia?

A. High mitotic rate
B. Age
C. Degree of atypia
D. Grade

Ans: C

52. Which of the following is false about stress incontinence?

A. It happens when the leak of urine occurs while sneezing
B. Obesity and ..
C. Treatment involves anticholinergics

Ans: C

53. Which of the following is false management of the urge?

A. Bladder exercise
B. Restrict caffeine at night
C. Tolterodine and oxybutynin
D. Retropubic suspension
E. Botulinum injection

Ans: D ,

54. Bacterial Vaginosis?

A. Is a rare vaginal infection
B. Is always symptomatic
C. Is usually associated with a profound inflammatory reaction
D. Causes fishy discharge, which results from bacterial amine production
E. Is treated with Clotrimazole

Ans : D

55. Low hemoglobin, Low ferritin, pallor, high TIBC in a pregnant woman. What is the most likely diagnosis?

A. IDA
B. Folic acid deficiency
C. Normal

Ans: A

56: Patient with LMP of 9 weeks, but her cycles are not regular. Which of the following is the way to estimate gestational age?

A. LMP
B. 1st trimester US
C. Fundal height

Ans: B

57. 3 days postpartum, chest pain, dyspnea, which of the following is the most serious diagnosis?

A. PE
B. heart failure
C. Pneumonia

Ans: A

58. Which of the following provides an accurate measurement of fetal growth in the third trimester?

A. Femur length
B. Abdominal circumference
C. BPD

Ans: B

59. Most likely to cause SGA?

A. Maternal obesity
B. Post-term
C. Maternal Smoking

Ans: C

60. Which of the following is wrong?

A. Caput doesn't cross suture lines
B. Excessive molding is a sign of CPD
C. OP is flexed

Ans: A

61. What is the initial test to confirm PPROM?

A. Nitrazine test
B. Speculum exam
C. Ultrasound
D. History from the mother is enough

Ans: B

62. Easy bruising, heavy irregular menses, prolonged bleeding time, most likely diagnosis is?

A. Platelet dysfunction
B. VWF
C. Dysmenorrhea

Ans: B

63. Which of the following is a Clinical way to monitor fetal growth?

A. Mri
B. Ct scan
C. Fundal height
D. Doppler US

Ans: C

64. In menopause,which if the following is NOT correct?

A. Weight-bearing exercise decreases the risk of osteoporosis
B. Vasomotor symptoms are most common
C. Associated with high FSH , high AMH and low estrogen
D. Treated with HRT
E. Insomnia is common

Ans : C

65. After suction evacuation of a molar pregnancy, what is the most appropriate practice?

A. Observation
B. Serial B-HCG

Ans: B

66. Uterus on the second day inches above the umbilicus. What is most likely diagnosis (failure of the fundus to descend 2nd day after delivery)?

A. Subinvolution
B. Normal
C. Lactation

Ans: A

67. Pain in primary dysmenorrhea is mainly caused by?

A. Histamine
B. Leukotrienes
C. PGF2æ

Ans: C

68. Which of the following is wrong about Breastfeeding?

A. HIV is a contraindication to breastfeeding
B. HEP B is a contraindication to breastfeeding
C. Lactation can cause amenorrhea
D. Estrogen decrease induces lactation shortly after delivery

Ans: B

69. Which of the following is wrong about physiological changes during pregnancy?

A. Minute ventilation increases
B. RR unchanged
C. Decreased FRC
D. Decreased tidal volume
E. Decreased Residual volume

Ans:D

70. Increased bHCG after evacuation? -> GTN

71. Patient with recurrent first-trimester losses and positive lupus anticoagulant, which of the following is the most appropriate Tx?

A. Low-dose aspirin
B. Heparin and low-dose aspirin
C. Warfarin
D. Rivaroxaban

Ans: B

72. Turtle sign seen in?

A. Breech
B. Shoulder dystocia
C. Precipitated labor

Ans: B

73. Which of the following is a contraindication to a vacuum?

A. Heart disease in the mother
B. Prolonged second stage
C. Cervical tear
D. Ocipito-posterior presentation

Ans: D

74. A patient underwent Loop Electrosurgical Excision of the Transformation Zone (LLETZ), which of the following is an expected complication?

A. Cervical incompetence
B. Hh

Ans: A

75. Monochorionic monoamniotic twin risk of?

A. Preeclampsia
B. Placental abruption
C. Placenta Previa
D. Cord entanglement

Ans: D

76. On the 4th day postpartum, a woman has fever and purulent lochia, which of the following is the diagnosis?

A. Urinary tract infection
B. Endometritis
C. DVT
D. Mastitis

Ans: B

77. Gestational diabetes most common complication?

A. macrosomia
B.

Ans: A

78. Which of the following is the main presentation of vaginal candidiasis?

A. Green frothy discharge
B. Cottage white cheese discharge
C. Clear Fishy discharge
D. Strawberry red cervix

Ans: B

79. Not used to monitor fetal well-being?

A. Maternal abdominal girth
B. Kick count
C. NST
D. U/S

Ans: A

80. Which of the following is wrong?

A. Type 1 dm associated with premature menopause
B. Fibroids cause early menopause

Ans: B

81.
Ans:

82. Which of the following is considered first-line management in primary dysmenorrhea?

A. GnRH analogue
B. Letrozole
C. NSAIDS
D. Surgery

Answer: C

83. 55-year-old woman with bloating, ultrasound complex ovarian cyst 8 cm, elevated CA125, and ultrasound showed no ascites. What is the next step?

A. Repeat testing after 3 months
B. Refer to the gynaecology multidisciplinary team
C. Ovarian cystectomy
D. Reassurance
E. MRI

Ans: B

84. Which of the following is the gold standard tool for the diagnosis of endometriosis?

A. CA 125
B. Diagnostic laparoscopy
C. Transabdominal ultrasound

Ans: B

85. PCOS, which of the following statements is true?

A. It is ultrasonographically found in 20% of premenopausal women
B. Most common cause of premature menopause
C. Commonly causes hyperprolactinemia
D. It is associated with a negative progesterone test

Ans: A

86. Primigravida at stage 2 of labor for 3 hours and fetal head is 1 cm above the ischial spines,CTG shows recurrent late decelerations, which of the following is the next step?

A. Give an additional 2 hours
B. Perform immediate C-section

Ans: B

87. Increased nuchal translucency associated with?

A. Chromosomal abnormalities
B. Neural tube defects

Ans: A

88. About twin pregnancy, which of the following is not true?

A. Monozygotic twins do not run in families
B. Cesearean birth is the main mode of birth
C. Dizygotic is the most common in all twins

Ans: B

89. Not a complication of dilatation and evacuation?

A. Cervical tear
B. Cervical insufficiency
C. Uterine rupture
D. Ectopic
E. Infertility

Ans: D? B?

90. Patient with APH, all of the following are true except?

A. General look of the patient doesn't give a clue about the patient's condition
B. U/S should be offered to all patients

Ans: A

91. All of the following about OCPS are true except?

A. Main MOA is mucus thickening
B. Relieve symptoms of PMS

Ans: A

92: Which of the following is the best modality to assess patency of the tubes?

A. HSG
B. US
C. MRI

Ans: A

93. Not a component of the bishop score?

A. Cervical length
B. Cervical consistency
C. Cervical dilatation
D. Station
E. Position of presenting part

Ans: E

94. Patient shows recurrent variable deceleration, after receiving oxytocin, next step?

A. Increase oxytocin
B. Deliver by CS
C. Forceps
D. Stop oxytocin and reposition
E. Continue and monitor

Ans: D

95. Relation of the baby to the mother?

A. Presentation
B. Attitude
C. Position
D. Lie

Ans: D

96. Which of the following is not an indication of surgical treatment of fibroids?

A. Heavy bleeding causing anemia
B. Red degeneration in pregnancy
C. Infertility

Ans: B

97. Which of the following is the advantage of mediolateral episiotomy

A. Less bleeding
B. Easier repair
C. Less pain
D. Less risk of extension to the anal sphincter

Ans: D

98. Most common cause of direct maternal mortality?

A. Thromboembolism
B. PPH
C. Pneumonia
D. Epilepsy predating pregnancy
E. Leukemia complicating pregnancy

Ans: B

99. Adequate contractions with slow progress, what could be the cause?

A. CPD
B. Breech
C. ..

Ans: A

100. About Placenta previa, which is incorrect?

A. May lead to Prematurity
B. Usually associated with malpresentation
C. Minimal bleeding previa at 37 weeks managed conservatively
D. Usually causing Painless bleeding

Ans: C