# **National Board of Examinations**

Question Paper Name :	DNB Obstetrics and Gynaecology Paper2
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**Is this Group for Examiner?**: No

#### **Enable Mark as Answered Mark for Review and**

**Clear Response:** 

Yes

## **Question Number: 1 Question Type: SUBJECTIVE**

- a) What is WHO labour care guide? [5]
- b) Describe Cardiotography. [5]

## **Question Number : 2 Question Type : SUBJECTIVE**

- a) Discuss the complications of induction of labour and their management. [6]
- b) Discuss the measures that can be taken to prevent post partum hemorrhage. [4]

### **Question Number: 3 Question Type: SUBJECTIVE**

- a) What can be the strategy for reducing caesarean section rate? [3]
- b) Discuss parenteral iron therapy. [4]
- c) Write briefly about vaccination in pregnancy. [3]

#### **Question Number: 4 Question Type: SUBJECTIVE**

- a) Mrs X 34 years, G2P1 with previous LSCS for breech presentation presents in labour. She was counselled for vaginal birth. Discuss the management of labour and delivery in this case. [6]
- b) Enumerate the contraindication for vaginal birth after Cesarean section. [2]
- c) Dscuss briefly predictors of successful outcome of trial of labor after Cesarean section. [2]

**Question Number: 5 Question Type: SUBJECTIVE** 

a) Write about transdermal contraceptive patch. [3]

b) Describe post partum contraception. [4]

c) Write a note on Ulipristal acetate. [3]

**Question Number: 6 Question Type: SUBJECTIVE** 

a) Discuss the indications, contraindications and limitations of medical methods of abortion.

[1+2+2]

b) Mrs. Z 33 year G4P0A3 presents at 7 weeks gestation with a history of three second trimester

miscarriages. All miscarriages were painless with live abortuses. There was no significant past

medical or surgical history. What is the most probable diagnosis? Discuss the management of this

patient. [2+3]

**Question Number: 7 Question Type: SUBJECTIVE** 

a) Discuss the etiology and classification of placenta previa. [2+2]

b) Discuss the management of third gravida with painless bleeding at 32 weeks of gestation. [6]

**Question Number: 8 Question Type: SUBJECTIVE** 

Mrs X, a known case of hypothyroidism on thyroxine, is planning pregnancy and comes to clinic for preconception counselling. Her TSH is 6.7 mIU/dl and free T4 is 1 ng/dl.

a) Discuss the adverse effects of hypothyroidism on mother and fetus. [3]

b) What is the diagnostic criterion for hypothyroidism in pregnancy? [2]

c) Discuss the goals of treatment and monitoring of hypothyroidism in pregnancy. [5]

**Question Number: 9 Question Type: SUBJECTIVE** 

a) What are safety guidelines for imaging modalities in pregnancy? [3]

b) Discuss the goals of National Rural Health Mission. [3]

c) Write a note on Lakshya. [4]

**Question Number: 10 Question Type: SUBJECTIVE** 

Mrs. Y 33 years G3P2L2 at 12 weeks comes to OPD with HIV test reported as positive.

- a) Discuss the management of this case in antenatal period. [5]
- b) Discuss the recommendations for breast feeding and infant prophylaxis at birth. [5]