

National Board of Examinations

Question Paper Name :	Diploma Obstetrics and Gynaecology Paper2
Subject Name :	Diploma Obstetrics and Gynaecology Paper2
Creation Date :	2024-12-16 09:44:14
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Diploma Obstetrics and Gynaecology Paper2

Group Number :	1
Group Id :	3271873252
Group Maximum Duration :	0
Group Minimum Duration :	180
Show Attended Group? :	No
Edit Attended Group? :	No
Break time :	0
Group Marks :	100

Diploma Obstetrics and Gynaecology Paper2

Section Id :	3271873255
Section Number :	1
Section type :	Offline
Mandatory or Optional :	Mandatory
Number of Questions :	10
Number of Questions to be attempted :	10
Section Marks :	100
Maximum Instruction Time :	0
Sub-Section Number :	1
Sub-Section Id :	3271873259
Question Shuffling Allowed :	No

Question Number : 1 Question Id : 32718734464 Question Type : SUBJECTIVE Consider As

Subjective : Yes

Correct Marks : 10

Please write your answers in the answer booklet within the allotted pages as follows:-

Question Number	Answer to be attempted within	Question Number	Answer to be attempted within
Q. 1	Page 1-5	Q. 6	Page 26-30
Q. 2	Page 6-10	Q. 7	Page 31-35
Q. 3	Page 11-15	Q. 8	Page 36-40
Q. 4	Page 16-20	Q. 9	Page 41-45
Q. 5	Page 21-25	Q. 10	Page 46-50

1. a) Enumerate the causes of liver diseases in pregnancy. [5]
b) How will you manage a HBsAg positive woman with 8 weeks pregnancy? [5]

Question Number : 2 Question Id : 32718734465 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) What is obstetric early warning score? [5]
b) Write the differences between septic, hemorrhagic and cardiogenic shock. [5]

Question Number : 3 Question Id : 32718734466 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Describe the risk factors for preeclampsia. [3]
b) Write the criteria for labelling a patient as a case of preeclampsia with severe features. [2]
c) How will you manage a primigravida at 32 weeks pregnancy with severe preeclampsia? [5]

Question Number : 4 Question Id : 32718734467 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) How will you do antenatal screening of Down syndrome? [5]
b) Discuss the role of cell free DNA in modern obstetrics. [5]

Question Number : 5 Question Id : 32718734468 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) How will you diagnose and manage respiratory distress syndrome in a newborn? [5]
b) Enumerate the etiology and possible outcome of neonatal cranial injuries. [5]

Question Number : 6 Question Id : 32718734469 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) What are the risk factors for fetal growth restriction? [3]

b) How will you confirm your diagnosis of fetal growth restriction in a G2P1L1 with 30 weeks pregnancy with suspected fetal growth restriction? How will you manage this case? [4+3]

Question Number : 7 Question Id : 32718734470 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

a) Enumerate the causes of dyspnoea during pregnancy. [4]

b) How will you evaluate and manage a woman with 34 weeks pregnancy with dyspnoea at rest. [3+3]

Question Number : 8 Question Id : 32718734471 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

a) Write the etiology of preterm labour. [4]

b) Discuss the diagnosis and management of a G1P0 with 30 weeks pregnancy presenting with suspected preterm labor. [2+4]

Question Number : 9 Question Id : 32718734472 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

a) Critically appraise different maneuvers for delivering after coming head of breech. [5]

b) Write the indications of external cephalic version. [2]

c) What are the complications of external cephalic version? [3]

Question Number : 10 Question Id : 32718734473 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

a) Enumerate the important infections during pregnancy which cause maternal and fetal morbidity and mortality. [5]

b) How will you manage a suspected case of maternal primary cytomegalovirus infection in pregnancy? [5]