



RAN-2406000104030701

Third MBBS (Part-2) Examination March - 2026

Obstetrics and Gynaecology (Paper - 1)

Obstetrics and Diseases of the Newborn

सूचना : / Instructions

- (1) उपरोक्त दशविल विगतो उत्तरवही पर अवश्य लખवी.
Fill up strictly the above details on your answer book
- (2) Answer Section A and B in separate answer papers.
- (3) Be precise.
- (4) Add diagrams where necessary.

Seat No.:

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Student's Signature

Section-A

- Q.1. Long Essay Type (Attempt 2 out of 3) (10×2=20)**
- a) Discuss the plan of management of a primiparous patient presenting with haemorrhage within half hour of vaginal delivery of twins. She has presented with pallor, pulse rate of 120 per minute and blood pressure of 90/60 mm Hg.
 - b) Discuss the plan of management of a primiparous patient presenting with generalized tonic-clonic convulsions within one hour of childbirth.
 - c) Discuss the plan of management of a primigravida at 34 weeks gestation presenting with breathlessness and a haemoglobin level of 6 gm/dL.
- Q.2. Short Notes. (Attempt 3 out of 4) (3×4=12)**
- a) Importance of placental examination at birth
 - b) Points to be discussed while counselling for Trial of labour after Caesarean section.
 - c) Complications of post-datism
 - d) Reasons for non-engaged fetal head at term in a primigravida
- Q.3. Short Answers. (Attempt 9 out of 10) (9×2=18)**
- a) Draw the fontanelles of fetal skull at birth and write two points about their importance.
 - b) Dosage schedule of antenatal corticosteroids to prevent Respiratory Distress in preterm newborn
 - c) Daily Fetal Movement Count - how to measure and importance
 - d) Methods of delivery of aftercoming head of breech
 - e) Tetanus prophylaxis during pregnancy
 - f) Four advantages of breastfeeding
 - g) Signs of onset of labour
 - h) Four indications for Induction of labour
 - i) Reasons for physiological pedal edema during third trimester of pregnancy
 - j) Four causes of recurrent pregnancy losses in second and third trimester

Section-B

- Q.4. Long Essay Type (Attempt 2 out of 3) (10×2=20)**
- a) Discuss the causes and management of Disseminated Intravascular Coagulation in Obstetrics.

- b) Discuss the preparations, indications and dosage of anti-D for prophylaxis against Rhesus iso-immunisation.
- c) Discuss the role of USG in first trimester bleeding.

Q.5. Short Notes. (Attempt 3 out of 4) (3×4=12)

- a) Discuss the dose and side effects of Calcium channel blockers in management of Preterm labour.
- b) Discuss the intra and post-operative complications of Caesarean section.
- c) Principles of prevention of vertical transmission of Hepatitis B infection from mother to newborn.
- d) Describe the various positions for breast feeding.

Q.6. Short Answers. (Attempt 9 out of 10) (9×2=18)

- a) Importance of inter-spinous diameter in Obstetrics
- b) Enumerate four complications of Abruption placentae
- c) Suturing uterine incision in LSCS- types of suture materials and precautions
- d) Diagnosis and management of cephalhaematoma
- e) Advantages and timing of External cephalic version
- f) Draw flowchart for management of retained placenta
- g) Uses of carbetocin
- h) Diagnosis and management of Incomplete abortion
- i) Management flowchart of needle stick injury in a healthcare provider
- j) Diagram for Grading of Placenta praevia

RAN-2406000104030702

Third MBBS (Part-2) Examination March - 2026

Obstetrics and Gynaecology (Paper - 2) New

Gynaecology and Family Planning

सूचना : / Instructions

- (1) उपरोक्त दशविल विगतो उत्तरवही पर अवश्य लखवी.
Fill up strictly the above details on your answer book
- (2) Answer Section A and B in separate answer papers.
- (3) Be precise.
- (4) Add diagrams where necessary.

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Student's Signature

Section-A

- Q.1. Long Essay Type (Attempt 2 out of 3) (10×2=20)**
- a) A 25 year old lady with dysmenorrhea and infertility presented to the clinic with suspicion of endometriosis. Discuss the investigations for confirmation of diagnosis and management of the same.
 - b) Discuss the management of a 30 year old lady with third degree utero-vaginal prolapse who has completed her childbearing.
 - c) A 25 year old lady with irregular menstrual cycles has presented with infertility. Discuss the various tests for confirmation of ovulation and management of anovulatory infertility.
- Q.2. Short Notes. (Attempt 3 out of 4) (3×4=12)**
- a) Discuss the contraceptive options for an unmarried lady.
 - b) Describe the colposcopic findings suggestive of Cervical Intra-Epithelial Neoplasia.
 - c) Discuss the management options for AUB-O.
 - d) Describe the timing, steps and post-procedure care after Hystero—Salpingography.
- Q.3. Short Answers. (Attempt 9 out of 10) (9×2=18)**
- a) Four Contra-indications for IUCD
 - b) Tumor markers for Germ Cell tumor of ovary
 - c) Oligozoospermia- management
 - d) Diagnosis of Cervical ectopic pregnancy
 - e) Hydrosalpinx- diagnosis and management
 - f) Mechanism of action of Progestrone only pills as a contraceptive
 - g) Names of four Chemotherapeutic drugs for Gestational Trophoblastic Diseases
 - h) Management of a client with lost IUCD thread
 - i) Diagnostic tests for confirmation of Genital Tuberculosis
 - j) Diagnosis and Management of Senile Vaginitis

Section-B

- Q.4. Long Essay Type (Attempt 2 out of 3) (10×2=20)**
- a) Discuss the clinical features and management of submucosal fibroid.
 - b) Discuss the diagnosis and management of Complex Endometrial Hyperplasia.

c) Discuss the approach to management of Primary amenorrhoea.

(3×4=12)

Q.5. Short Notes. (Attempt 3 out of 4)

- a) Implanon-NXT-advantages and side effects.
- b) Management of recurrent Vulvo-vaginal Candidiasis
- c) Counselling a client for MTP using Mifepristone-Misoprostol combination.
- d) Role of Human Papilloma Virus in Cervical Cancer

Q.6. Short Answers. (Attempt 9 out of 10)

(9×2= 18)

- a) USG findings suggestive of Chocolate cyst of ovary
- b) Clinical features and diagnosis of Trichomonal vaginitis
- c) HSG picture of Bicornuate uterus and Septate uterus
- d) Management of ASCUS noted on Pap smear
- e) Long term implications of Poly Cystic Ovarian Syndrome
- f) Treatment options for Stage III Cervical cancer
- g) Indications for In Vitro Fertilisation- embryo transfer
- h) Post abortion contraception options
- i) Treatment of Acute Pelvic Inflammatory Disease
- j) Confirmation of completion of procedure during Manual vacuum aspiration for MTP