

DIP.G.O. EXAMINATION' 2007
Paper I
OBSTETRICS
Batch -A/07

Time : 2 hrs.

Question 1.

- a. Discuss the importance of A.N.C. 10
- b. Of what use is the Dawn rule of 10 in identifying high risk factors during pregnancy? 10

Question 2.

- a. Define APH 5
- b. What are the causes of APH? 5
- c. How will you manage a case of bleeding PN at 34 wks of Gestation? 10

Question 3.

- a. What are the various stages of normal labour? 10
- b. How will you manage labour in a primi with the help of Partograph? 10

Question 4.

Write short notes on the following

- a. Asphyxia Neonatorum 5
- b. Neonate of IUGR Pregnancy 5
- c. Vaccination schedule of New Born. 5
- d. Care of cord of New Born. 5

Question 5.

Write in short about:

- a. PNDT Act & how to educate the patient about this act. 6
- b. Mode of transmission of HIV in pregnancy. 8
- c. Maternal Mortality. 6

DIP.G.O. EXAMINATION' 2007

Paper I

Batch -B/07

OBSTETRICS

Time : 2 hrs.

Question 1

Describe the nerve supply of Perineum, Vulva & Vagina. Draw a diagram of the course of Pudendal nerve & describe its indication as vaginal analgesia in obstetric practice. Condition where its most commonly indicated. **20**

Question 2.

- Define P.P.H. Write down the causes of atonic P.P.H.
- Woman who just had vaginal delivery, is bleeding profusely from the vagina. Evaluate your management options.
- How will you control severe postpartum Haemorrhage at Caesarean section for Placenta Praevia?
- Maternal mortality during delivery due to P.P.H. is highest in which state of India? How can we prevent maternal death in rural India? What are your suggestions? **4 X 5 =20**

Question 3.

- External Cephalic version performed at 36 weeks is not justified. debate the statement.
- Comment critically on the manoeuvres used in the management of after coming head of Breech delivery? **2 X 10 =20**

Question 4.

A 32 years old woman Primigravida with Pre eclampsia at 39 weeks gestation just had a fit in labour. Justify your management of this patient? **20**

Question 5.

- What are the indications of Low Forceps delivery?
- What are the conditions to be fulfilled before forceps application.
- What are the different kind of forceps used by the obstetricians.
- What are types of Forceps operations commonly done by the obstetricians. **4 X 5 =20**

DIP.G.O. EXAMINATION' 2007

**Paper I
OBSTETRICS
Batch: C-07**

Time : 2 hrs.

Question 1. 20

Mention the abnormalities and complications you can diagnose by good antenatal care.

How will you suspect and diagnose placenta praevia in a primigravidae at 26 weeks pregnancy?

How will you treat such a case?

Question 2. 20

A 35 year old multipara comes to you with anencephalic fetus at 24 weeks pregnancy. How will you manage the case.

Question 3. 20

What precautions you will take during child birth and delivery to prevent puerperal sepsis?

Question 4. 20

Mention the conditions when induction of labour is indicated.

What is programmed labour?

Question 5. 20

Write short notes (any four)

- a) Episiotomy
- b) Prevention of HIV in fetus of HIV positive mother
- c) Contribution of Dr. C.S.Dawn to obst.gyn.
- d) Missed abortion
- e) Neonatal asphyxia

DIP.G.O. EXAMINATION, 2007

**Paper I
OBSTETRICS
Batch: D-07**

Time:2hrs.

MM:100

Question 1

- a) What is the importance of the Dawn Rule of Ten in A.N.C.? **10**
- b) How will you manage a case of Pregnancy Anaemia? **10**

Question 2

- a) Define P.I.H. — 4 types and its etiology. **15**
- b) Write the management of Eclampsia. **10**

Question 3

- a) What are the various stages of normal labour? **7**
- b) Importance of Partogram. **8**
- c) Active management of 3 stage of labour. **10**

Question 4

Write short notes on:

- (a) Episiotomy **5**
- b) Prematurity **10**
- c) Neonatal Jaundice **10**

DIP.G.O EXAMINATION' 2007

Paper I

OBSTETRICS

Batch: E- 07

Time:2hrs.

MM:100

Question 1

Write briefly on the structure, macro and micro anatomy, of a mature full time Placenta. Which are the important functions of placenta?

20

Question 2

Define antepartum haemorrhage and mention its common causes. How will you treat a case of placenta praevia admitted at 34 weeks of pregnancy at your hospital?

20

Question 3

How do you diagnose a case of twin pregnancy? Which complications are commonly associated with it during pregnancy and labour?

20

Question 4

State the common causes of preterm labour and briefly outline its management.

20

Question 5

Write short notes on:

5 x 4=20

- a) Maternal mortality in India
- b) Respiratory distress syndrome in neonates.
- c) Prostaglandins in obstetrics.
- d) Episiotomy.

DIP.G.O. EXAMINATION 2008
Paper I
Obstetrics

Time : 2 hrs.

Question 1.

- a. Describe the anatomic features of four percent type of Pelvic. **10**
- b. What is trial of Labour and how it is conducted ? **10**

Question 2.

- a. What are the Science of separation of Placenta ? **5**
- b. How do you manage a case of Post Partum Haemorrhage which occurs after the birth of the baby. **15**

Question 3.

Describe the mechanism of Labour in Ooceipito Posteror position. How do you manage such a case? **20**

Question 4.

4 X 5 = 20

What are the drugs to be prescribed in :

- a. Pregnancy with epilepsy
- b. Pregnancy with asthma
- c. Pregnancy with anaemia
- d. Pregnancy with Hypertension

Question 5.

Write short notes on

4 X 5 = 20

- a) Episiotomy
- b) Prematurity
- c) Neonatal Jaundice
- d) Neonatal asphyxia

Dr. C.S. DAWN ICMCH FINAL EXAMINATION
DIP. G.O. – 2009, Paper - I
Obstetrics and Neonatology

Time : 2 hrs
Marks : 100

- Q1**
- a Define Maternal Death 2
 - b Define M.M.R. 2
 - c Enumerate avoidable factors in Maternal Deaths. 5
 - d How can you eliminate Maternal Death by Mass RCH by DAWN Rule of Ten Pictorial Calendars Bedroom Programme? 16
- Q2**
- a What is Bishop's Score and how it is done ? 2+5
 - b What is a favourable and what is an unfavourable Cervix ? 2
 - c Describe Pre induction cervical ripening. 6
 - d Describe different procedure if induction of labour? 10
- Q3**
- a What are sign of separation of placenta ? 5
 - b Define Post Partum Haemorrhage. 2
 - c. Describe management of Primary Post Partum Haemorrhage after delivery of Placenta. 18
- Q4** **WRITE SHORT NOTES ON :**
- a Episiotomy 5
 - b Prematurity 10
 - c Neonatal Jaundice 10

Dip G.O FINAL EXAMINATION 2010
Paper I
Obstetrics and Neonatology

Date : 27-06-2010
Time : 2 hrs
Marks : 100

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| Q1 | a | Describe the structure (micro anatomy) of placenta. | 10 |
| | b | Structure of umbilical cord at term. | 5 |
| | c | Signs of separation of Placenta. | 10 |
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| Q2 | a | Define Prolonged Labour. | 2 |
| | b | What are the types of prolonged labour (only enumerate)? | 6 |
| | c | What are the causes of prolonged labour? | 7 |
| | d | How do you diagnose Uterine Dysfunctional Prolonged labour (both Hypotonic & Hypertonic) ? | 10 |
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| Q3 | a | Define PPH. | 2 |
| | b | What are causes of PPH? | 6 |
| | c | Describe the management of Primary PPH. | 17 |
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| Q4 | | Write short note | |
| | a | Dawn Rule of Ten (Antenatal Care). | 8 |
| | b | Episiotomy | 7 |
| | c | PPTCT | 5 |
| | d | Asphyxia Neonatorum | 5 |