

M.MED.FAMILY MEDICINE
SECOND YEAR THEORY EXAM– Aug 2013
PAPER III – MATERNAL & CHILD HEALTH

TIME: THREE HOURS

MAXIMUM MARKS: 100

INSTRUCTIONS

The paper will be for a total of **100 marks**.

Answer **all** the Questions.

The Paper has 2 parts – **Part A & Part B**.

Part A will be **descriptive type questions** based on case scenarios **(40 marks)**.

Part B will have Objective type EMQs (**Extended Matching Questions**) **(60 marks)**.

This will have 10 sets of these questions.

Each set will have 6 questions.

Each question will carry 1 mark.

Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)

From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

3(i) What is the drug of choice for Acute Psychosis?

3(ii) What is the drug of choice for Bipolar illness?

PART – A
DESCRIPTIVE QUESTIONS

(ANSWER ALL QUESTIONS)

1. Answer the following questions on Antenatal care: (5 X 4 MARKS)

A. Mrs. Sumathy has come to you for antenatal care and this is her 1st visit. List any 4 risks that you will screen by your history taking.

B. Name 4 baseline investigations you will do on Sumathy.

C. Mrs. Gomathy is a G2P1L1 antenatal mother presenting at 28 weeks of gestation. On examination, her uterus corresponds to 32 weeks size. Name 4 conditions that can cause this.

D. 24-year old Mrs. Radika, a primigravida at 10 weeks gestation presents with severe vomiting and she is dehydrated.

(i). When will you say that she has Hyperemesis gravidarum?

(ii). What are the 2 important conditions you need to rule out on her?

(iii). How will you treat her?

(iv). At discharge what advice & drugs will you give her?

E. Karpagam, G₃P₂L₂, comes to you at 20 weeks of gestation with anaemia (Hb-8gm%).

i. What are the causes of anaemia in pregnancy?

ii. What is the Government of India recommendation for Iron prophylaxis in pregnancy.

iii. If she is not tolerating oral iron how will you treat her?

iv. What are the indications for blood transfusion in anaemia in pregnancy?

2. Answer the following questions on Managing patients with HIV related diseases:

A. 24 years old Mrs. Shanthi has been diagnosed to be HIV infected. She has presented with fever, cough and mild breathlessness for the past 10 days. List the common presenting signs & symptoms, investigations and the treatment of the following respiratory conditions which she may have. (6 MARKS)

- Pulmonary Tuberculosis
- Lobar Pneumonia
- Pneumocystis carinii pneumonia

B. 2 months later she presented to you with severe headache and vomiting. You are suspecting cryptococcal meningitis on her. List the presenting symptoms & signs of this condition, describe the CSF picture, specify what special stain you will ask for and what drugs you will start her on.

(8 MARKS)

C. After a month she presents with high fever, abdominal pain and bloody diarrhea for a day. What is the most likely diagnosis? What is the causative organism? How will you treat her?

(6 MARKS)

PART – B
EXTENDED MATCHING QUESTIONS

(ANSWER ALL QUESTIONS)

1.THEME: MENSTRUAL IRREGULARITIES - DIAGNOSIS (QUESTIONS 1(i)-1(vi))

From the options 'A to N' given below , choose the best answers for the questions '1(i)-1(vi)':

Options :

- | | |
|--|---|
| A. Dysfunctional uterine bleeding | H. Diabetes Mellitus |
| B. Drug Induced problem | I. Bleeding disorder |
| C. Ectopic Pregnancy | J. Polycystic Ovarian Disease |
| D. Hypothyroidism | K. Maternal oestrogen withdrawal |
| E. Pelvic inflammatory disease | L. Psychological upset |
| F. Endometrial carcinoma | M. Chlamydia |
| G. Uterine fibroid | N. Ovarian carcinoma |

Questions:

- 1.(i)**32 year old nulliparous obese lady with irregular periods and increased facial hair.
- 1(ii)**.63 year old postmenopausal lady with bleeding PV. Pelvic assessment shows an enlarged uniformly shaped uterus.
- 1(iii)**.33 year old with excessive periods associated with discharge PV. Cervical motion tenderness is positive.
- 1.(iv)**.43 year old with depression recently started on Amitriptyline presenting with menorrhagia.
- 1.(v)**.36 year old lady with regular heavy periods .Pelvic examination is normal. Ultrasound abdomen shows normal uterus.
- 1.(vi)**.41 year old with history of intermenstrual bleeding, weight loss and distension of abdomen. On examination, you find an adnexal mass.

2.THEME: GERIATRICS – DIAGNOSIS (QUESTIONS 2i-2vi)

From the options ‘A to J’ given below , choose the best answers for the questions ‘2(i)-2(vi)’:

Options :

- A. Urge incontinence
- B. Stress incontinence
- C. Osteoporosis
- D. Osteoarthritis
- E. Age associated memory loss
- F. Delirium
- G. Dementia
- H. Atrophic vaginitis
- I. Decreased response of hypothalamic-pituitary-adrenal axis
- J. Decreased testosterone

Questions:

- 2(i).**Mrs. Rajammal, 62year old, a retired teacher is distressed because she could not remember the name of a friend she met that morning. She has no other functional impairment. What is his problem?
- 2(ii).**Mrs.Lakshmi, 75 year old has been fit till 6 months back when her relatives found her difficult to manage. She repeats the same questions several times, he goes to visit friends and cannot find his way back. He becomes angry when cautioned and becomes restless and is unable to sleep. What does he have?
- 2(iii).**An 87 year old presents with urinary incontinence which occurs while at sleep (2 or 3 AM).She also leaks 3-4 times during the day. The post void volume is 20ml.What does she have?
- 2(iv).**84 year old Savithri had a trivial fall in the house last month and sustained a fracture neck of femur which required surgery. What is she likely to have?
- 2(v).**A 60 year old post-menopausal woman complains of dyspareunia and dysuria. What is she likely to have?
- 2(vi).**Of late 84year old Mrs.Swathi has difficulty in remembering where she is, forgets where she had kept her keys,finding it difficult to live independently.She most likely has...

3.THEME: TYPES OF ANEMIA (QUESTIONS 3(i)-3(vi))

From the options 'A to D' given below , choose the best answers for questions 3(i)-3(vi) given below:

Options :

- A. Iron deficiency anemia
- B. Megaloblastic anemia
- C. Hemolytic anemia
- D. Anaemia of chronic disease

Questions:

3(i).Pratap has anemia with icterus and frontal bossing.

3(ii).Pamela has anemia and pigmentation over knuckle and tongue.

3(iii).5 year old Sundar with Malnutrition and anemia.

3(iv).Mannar is brought to you sick and anemic and he lives in a malaria-prone area.

3(v).Christina is suffering from Rheumatoid arthritis for many years.

3(vi).Swati with Plummer Vinson syndrome.

4.THEME: INVESTIGATIONS IN ANEMIA (QUESTIONS 4(i)-4(vi))

From the options ‘A to K’ given below, choose the best answers for questions 4(i)-4(vi) given below:

Options :

- | | |
|------------------------------|--------------------------------|
| A. Iron deficiency anemia | G. Anemia in Hypothyroidism |
| B. B12 Deficiency | H. Autoimmune Hemolytic anemia |
| C. Anemia of Chronic disease | I. G6PD deficiency |
| D. Sickle cell anemia | J. Elliptocytosis |
| E. Thalassemia | K. Pyruvate kinase deficiency |
| F. Spherocytosis | |

Questions:

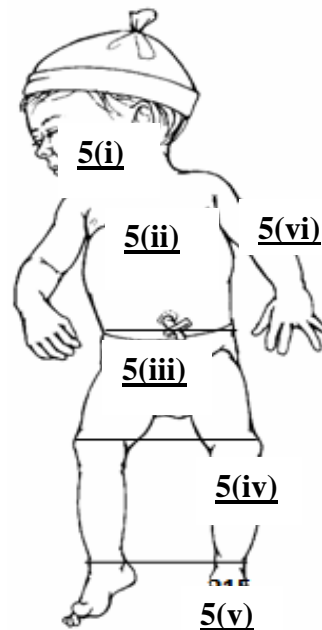
- 4(i).MCV low, Serum Iron low, Ferritin normal, TIBC high, Electrophoresis normal.
4(ii).MCV low, Serum Iron normal, Ferritin normal, TIBC normal, Electrophoresis abnormal.
4(iii).MCV high, Reticulocyte count normal, B12, folate levels low, Intrinsic factor low.
4(iv).MCV high, Reticulocyte count high, B12, folate levels normal, Intrinsic factor normal.
4(v).Reticulocyte count high, Osmotic Fragility test positive.
4(vi).Reticulocyte count high, Direct Coombs test positive.

5.THEME: NEONATAL JAUNDICE(QUESTIONS 5(i)-5(vi))

From the options ‘A to G’ given below , choose the best answers for numbers 5(i)-5(vi))given in the picture below.

Options :

- A. 5 mg/dl
- B. 2 mg/dl
- C. 8 mg/dl
- D. 10 mg/dl
- E. 12 mg/dl
- F. 15 mg/dl
- G. 20 mg/dl



6.THEME: Contraception(QUESTIONS 6(i) - 6(vi))

From the options 'A to G' given below , choose the best answers for6(i)-6(vi):

Options :

A.Combined pills

B.IUCD

C.Tubectomy

D.Oral pill+Condom,Avoid IUCD

E.Vasectomy/Tubectomy/Injectable progestogens/Barrier+Spermicides

F.InjectableProgestogens,Barrier contraception+Spermicides

G.Emergency contraception

Questions:

6(i)A lady who delivered her 1st child 2months back

6(ii)Commercial sex worker with past history of pelvic infection/ectopic pregnancy

6(iii).Failure of Barrier method

6(iv).Newly married woman

6(v).32 year old woman, P2L2 and the 2nd child is 3years old

6(vi). Woman with Rheumatic heart disease

7.THEME: SEXUALLY TRANSMITTED INFECTIONS(Questions 7(i)-7(vi))

From options AtoH ,choose the best answers for the treatment of the following conditions in Questions 7(i)-7(vi)

Options:

A.Cryotherapy

B.Metronidazole 2gram stat

C.Acyclovir 400mg orally three times daily for 7to 10days.

D.Doxycycline 100mg orally twice daily for 2weeks.

E.Benzathine penicillin 2.4 million units IM

F.Miconazolepeessaries 100mg daily for 6days.

G.Cefixime 400mg orally in a single dose

H.Azithromycin 1gram orally as a single dose

Questions:

7.(i).Genital Herpes

7(ii).Gonorrhoea

7(iii).Trichomonasvaginalis

7(iv).Chancroid

7(v).Granuloma Inguinale

7(vi).Syphilis

8.THEME:VAGINAL DISCHARGE(Questions 8(i)-8(vi))

From the options 'A to H' given below , choose the best answers for8(i)-8(vi):

Options :

- | | |
|----------------------|-------------------------------|
| A.Physiological | E.Vulvovaginal candidiasis |
| B.Vaginitis | F.Trichomonasvaginalis |
| C.Carcinoma cervix | G.Cervicitis |
| D.Atrophic vaginitis | H.Pelvic inflammatory disease |

Questions:

- 8(i).Mucopurulent discharge from the os
- 8(ii).Cervical motion tenderness on bimanual examination
- 8.(iii).45 year Mrs.Thenmohi,with uncontrolled diabetes presents with curdy white discharge
- 8.(iv).Frothy discharge with fishy odor.
- 8.(v).Vaginal discharge and redness of vaginal wall
- 8.(vi).14 year old Sumathi complains of white discharge PV every time before her menstruation.

9. THEME: MENSTRUAL IRREGULARITIES(Questions 9(i)-9(vi))

From the options 'A to H' given below , choose the best answers for9i-9vi:

Options :

- | | |
|------------------------|--------------------------------|
| A. Craniopharyngioma | E. Polycystic ovarian syndrome |
| B. Oestrogen | F. Hypothyroidism |
| C. Gonadal Dysgenesis | G. Precocious puberty |
| D. Asherman's syndrome | H. Cryptomenorrhea |

Questions:

- 9(i).False amenorrhoea
- 9(ii).Visual defects
- 9(iii).Webbed neck
- 9(iv).Acne/acanthosisnigricans
- 9(v).Delayed bone age
- 9(vi).Advanced bone age

10.THEME: MENSTRUAL IRREGULARITIES-II (QUESTIONS 10(I)-10 (vi)

From the options 'A to I' given below , choose the best answers for 10(i) -10(v)i:

Options :

- A. Craniopharyngioma
- B. Galactorrhea
- C. Hypertrichosis
- D. Hirsutism
- E. Asherman's syndrome
- F. Necrosis, posterior pituitary
- G. Ovarian failure
- H. Bone age
- I. Necrosis , anterior pituitary

Questions

10(i). Sheehan's syndrome

10(ii). Hypothyroidism

10(iii). Hair upper lip

10(iv). Hair forearm

10(v). High FSH and LH

10(vi). Low FSH and LH
