APRIL 2001

[KD 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours

Maximum: 100 marks

- 1. Enumerate the high risk factors for post partum hemorrhage. How will you manage atonic PPH? What are the preventive measures for PPH? (25)
- 2. Enumerate the indications for cesarean delivery. How will you decide and manage Trial Vaginal delivery in a case of post cesarean pregnancy? (25)
- Short notes on :

- (a) Outlet forceps delivery
- (b) Intra partum management of cardiac patients
- (c) Neonatal complications for the infant of ϵ diabetic mother
- (d) Advantages and contraindications for breast feeding
 - (e) Partogram

NOVEMBER 2001

[KE 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours Maximum: 100 marks

- 1. Discuss the diagnosis and management of the rupture leterus. (25)
- 2. Discuss the Cardiovascular changes in pregnancy.

 Describe the prognosis and management of mitral stenosis complicating pregnancy. (25)
- 3. Write briefly on:

- (a) Placenta accreta
- (b) Habitual Abortion
- (c) Couvelaire uterus
- (d) Pudendal Block
- (e) Intra uterine foetal therapy.

MARCH 2002

[KG 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours Maximum: 100 marks

- 1. Discuss the antenatal and intrapartum management of multiple gestation. (25)
- 2. Discuss the pathogenesis of endotoxic shock and describe the management of a case of septic induced abortion. (25)
- 3. Write briefly on:

- (a) Intra uterine death.
- (b) Electronic foetal monitoring in labour.
- (c) Obstetric analgesia.
- (d) Role of ultrasonics in obstetrics.
- (e) Perinatal mortality.

SEPTEMBER 2002

[KH 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours

Maximum: 100 marks

Answer ALL questions.

- 1. Discuss the Aetiology and management of Breech presentation. (25)
- 2. Define Puerperial pyrexia. Describe in detail the investigations and treatment of a case of puerperal sepsis? (25)
- 3. Write short notes on:

- (a) Caesarean Hystrectomy
- (b) Intrapartum management in preterm labour
- (c) Oligohydromnios
- (d) Vacuum extractor
- (e) Management of infant of the diabetic mother.

APRIL 2003

[KI 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours

Maximum: 100 marks

- Enumerate the pre-disposing causes, pathology and management of Puerperal infections. (25)
- What are the cardiovascular changes of Pregnancy and discuss the treatment of a case of Heart Disease in failure in Labour. (25)
- Short notes on :

- (a) Hyper emesis gravidarum
- (b) Asphyxia neonatorum
- (c) ABO incompatibility
- (d) New developments in the management of ppH
- (e) Deep transverse arrest.

OCTOBER 2003

[KJ 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours

Maximum: 100 marks

Theory: Two hours and

M.C.Q.: Twenty minutes

Theory: 80 marks

forty minutes

M.C.Q. : 20 marks

M.C.Q. must be answered SEPARATELY on the answer sheet provided as per the instructions given on the first page of the M.C.Q. Booklet.

Answer ALL questions.

Draw suitable diagrams wherever necessary.

Essay:

 $(2 \times 15 = 30)$

- Discuss the aetiology and diagnosis of multiple pregnancy. How do you manage a case of conjoined twin?
- Discuss the development of foetus and placenta in a case of pregnancy with diabetes. How do you screen for gestational diabetes?

3. Write short notes on:

- Inhibition methods for preterm labour
- Diagnosis of foetal growth retardation
- Forceps delivery
- Acute respiratory distress syndrome
- Ruptured uterus
- Prostaglandins in obstetrics
- Couvelaire uterus
- Anencephaly
- Neonatal jaundice
- (10) Convulsions in new born.

AUGUST 2004

[KL 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time : Three hours

Maximum: 100 marks

Theory: Two hours and

Theory: 80 marks

forty minutes

M.C.Q.: Twenty minutes

M.C.Q.: 20 marks

Answer ALL questions.

I. Essay:

 $(2 \times 15 = 30)$

- Discuss the causes, diagnosis and management of preterm labour.
- (2) Discuss the aetiopathology, diagnosis and obstetric management of IUGR.

I. Short notes on :

- (a) Teenage pregnancy
- (b) Obstetric hysterectomy
- (c) Biophysical profile
- (d) Neglected shoulder presentation
- (e) Complete perineal tear
- (f) Amnio infusion
- (g) Cephal hematoma
- (h) Management of birth asphyxia
- (i) Triple test
- Neonatal hypoglycemia.

FEBRUARY 2005

[KM 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

(New Regulations)

Part II

Paper I — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours

Maximum: 100 marks

Theory: Two hours and

Theory: 80 marks

forty minutes

M.C.Q.: Twenty minutes

M.C.Q.: 20 marks

Answer ALL questions.

I. Essay:

 $(2 \times 15 = 30)$

- (1) A 20 year old woman aborted at home two months back, came with severe bleeding P.V. with gross anaemia, mass in lower abdomen, U/S guided F.N.A.C. showed chorionic carcinoma. She has no live child. How do you manage?
- (2) Discuss the causes of EROM and its management.

II. Write short notes:

- (a) Management of unruptured ectopic gestation.
- (b) What is TIFFA and its importance in prenatal screening?
 - (c) Programmed labour.
 - (d) Critical care in Obstetrics.
 - (e) Antenatal fetal surveillanc.
 - (f) Acute inversion of Uterus.
 - (g) Post Partum Eclampsia.
 - (h) Suppression of lactation.
 - (i) DIC.
 - Neonatal Jaundice.

MARCH 2006

[KO 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours Maximum: 100 marks

Theory: Two hours and Theory: 80 marks

forty minutes

M.C.Q.: Twenty minutes M.C.Q.: 20 marks

Answer ALL questions.

I. Essay :

 $(2 \times 15 = 30)$

- (1) A 25 year old primigravida is referred from a peripheral centre with raised blood pressure. She is 32 weeks pregnant. BP is 160/110 mm of mercury. She has generalised edema. How will you evaluate and manage?
- (2) A 24 year old primigravida is having Breech presentation at 34 weeks. She has no pregnancy complications. Discuss how you will manage her.

II. Write short notes on :

- (a) Clinical management of 1st trimester spontaneous miscarriage.
 - (b) Prenatal screening of Down's syndrome.

- (c) Doppler evaluation of fetal circulation in IUGR.
 - (d) Neonatal hypoxia.
 - (e) Neural tube defects.
 - (f) Operative vaginal delivery.
 - (g) Obstetric analgesia.
 - (h) Tight mitral stenosis in pregnancy.
 - Toxoplasmosis in pregnancy.
- (j) Antenatal screening for gestational diabetes.

SEPTEMBER 2006

[KP 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II — OBSTETRICS INCLUDING NEONATOLOGY

Time: Three hours Maximum: 100 marks

Theory: Two hours and Theory: 80 marks

forty minutes

M.C.Q.: Twenty minutes M.C.Q.: 20 marks

Answer ALL questions.

Draw suitable diagrams wherever necessary.

I. Essay questions :

- (1) Write in detail regarding the mechanism of labour in occipito posterior presentation. What are the various modes of delivery in deep transverse arrest? (20)
- (2) What is Prenatal Diagnosis Technique Act (PNDT Act)? What are the congenital malformations and inherited disorders? How to diagnose them and manage? (15)
- (3) What are the different manifestation of Rh isoimmunisation in the foetus. How will you manage a case of Rh isoimmunization? (15)

II. Write short notes on: $(6 \times 5 = 30)$

- (a) Puerperal infection
- (b) Oxytocics in obstetrics
- (c) Obstetric shock-management
- (d) Neonatal jaundice
- (e) Placental hormones
- (f) Multiple Gestation Embryo reduction.

[KQ 1504] MARCH 2007 Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II — OBSTETRICS INCLUDING NEONATOLOGY

(Common to candidates admitted from 1993-94 onwards and candidates admitted from 2004-05 onwards)

Time: Three hours Maximum: 100 marks

Theory: Two hours and Theory: 80 marks

forty minutes

M.C.Q.: Twenty minutes M.C.Q.: 20 marks

Answer ALL questions.

Draw suitable diagrams wherever necessary.

- I. Essay questions:
- 1. Critically evaluate the teenage pregnancy in Indian scenario. (20)
- Write the Anatomy and formation of lower uterine segment. Describe the healing of caesarian section uterine wound. (15)

- 3. Define Maternal Mortality rate. Discuss the maternal mortality in your state. (15)
- II. Write short notes on :

 $(6 \times 5 = 30)$

- (a) Bishop's score
- (b) 'latrogenicity in obstetrics' describe and mention its preventions.
 - (c) Care of newborn in the delivery room.
- (d) Diagnosis of life of foetus at various periods of gestation.
 - (e) Face to pubes delivery.
 - (f) Preparations for operative deliveries.

MARCH 2008

[KS 1504]

Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II — OBSTETRICS INCLUDING NEONATOLOGY

Common to all Regulations

Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Answer ALL questions.

I. Essay questions:

 $(2 \times 20 = 40)$

- (1) Antenatal importance and approach to patient in teaching hospital. (20)
- (2) What are the various causes of APH? Discuss the management of abruptio placenta at 36 weeks gestation. (20)
- II. Short notes:

 $(10 \times 6 = 60)$

- (1) Biochemical changes in PIH.
- (2) Internal podalic version in II stage of the twins.
- (3) Risks of MTP at 18 weeks.
- (4) Management of HIV positive pregnant woman.
- (5) Respiratory Distress syndrome.
- (6) Management of birth asphyxia.
- (7) TORCH infections in pregnancy.
- (8) Active management of III stage of labour.
- (9) IUGR.
- (10) Sheehans syndrome.

September 2008

[KT 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II – OBSTETRICS INCLUDING NEONATOLOGY

(Common to all candidates)

Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Draw suitable diagram wherever necessary.

Answer ALL questions.

I. Essay questions:

 $(2 \times 20 = 40)$

- 1. Recent trends in screening and management of Preterm labour.
- 2. Management of Iron deficiency Anemia in Pregnancy.

II. Write short notes on:

 $(10 \times 6 = 60)$

- 1. Screening test for PIH in pregnancy.
- 2. Role of Steroids in pregnancy.
- 3. Preconceptional councelling.
- 4. Management of after coming head.
- 5. Asphyxia Neonatorum.
- 6. Thrombophlebitis in puerperium.
- 7. Modified Biophysical profile.
- 8. Role of Doppler in Rh ve pregnancy.
- 9. Prevention of Atonic PPH.
- 10. Ventouse.

MARCH -2009

[KU 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II – OBSTETRICS INCLUDING NEONATOLOGY

(Common to all candidates)

Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Draw suitable diagram wherever necessary.

Answer ALL questions.

I. Essay questions: $(2 \times 20 = 40)$

- 1. Recent trends in screening and management of gestational diabetes mellitus.
- 2. Role of PARTOGRAM in dysfunctional labour.

II. Write short notes on : $(10 \times 6 = 60)$

- 1. Prediction of Pre eclampsia.
- 2. Shoulder presentation.
- 3. Oligohydramnios.
- 4. Periconceptional care.
- 5. Neonatal Jaundice.
- 6. APGAR score.
- 7. ACOG guidelines for forceps application.
- 8. Recent trends in the use of Tocolytics in pregnancy.
- 9. Non immune Hydrops.
- 10. Complete perineal tear.

September - 2009

[KV 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION.

Paper II – OBSTETRICS INCLUDING NEONATOLOGY

(Common to all candidates)

Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Draw suitable diagram wherever necessary.

Answer ALL questions.

I. Essay questions: $(2 \times 20 = 40)$

- 1. Discuss the management of imminent eclampsia.
- 2. Write an essay on labour after previous LSCS.

II. Write short notes on : $(10 \times 6 = 60)$

- 1. Non immune hydrops fetalis.
- 2. Chorioamnionitis.
- 3. Intra uterine death.
- 4. Management of baby born to diabetic mother.
- 5. Surgical methods of 1st trimester MTP.
- 6. Couvelaire uterus.
- 7. Prevention of puerperal sepsis.
- 8. Bio physical profile.
- 9. Cephallhaematoma.
- 10. Drugs contraindicated in lactation.

March 2010

[KW 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY EXAMINATION OBSTETRICS INCLUDING NEONATOLOGY

(Common to all candidates)

Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Draw suitable diagram wherever necessary

Answer ALL questions

I. Essay questions:

 $(2 \times 20 = 40)$

- 1. Recent trends in screening and management of gestational diabetes mellitus.
- 2. Role of PARTOGRAM in dysfunctional labour.

II. Write short notes on:

 $(10 \times 6 = 60)$

- 1. Prediction of pre eclampsia.
- 2. Shoulder presentation.
- 3. Oligohydramnios.
- 4. Periconceptional care.
- 5. Neonatal jaundice.
- 6. APGAR score.
- 7. ACOG guidelines for forceps application.
- 8. Recent trends in the use of Tocolytics in pregnancy.
- 9. Non immune hydrops.
- 10. Complete perineal tear.

[KX 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (D.G.O) EXAMINATION.

Part II – Paper I for Candidates admitted upto 2003-04 & Candidates admitted

from 2008-09 onwards

And

Paper II for Candidates admitted from 2004-05 to 2007-08

OBSTETRICS INCLUDING NEONATOLOGY Q.P. Code: 343004

Time: Three hours Maximum: 100 marks

Draw suitable diagram wherever necessary. Answer ALL questions.

I. Essay questions:

 $(2 \times 20 = 40)$

- 1. Describe the Diagnosis and Management of Breech Presentation.
- 2. Discuss the Diagnosis of severe Pre Eclampsia. How will you manage a case of severe Pre Eclampsia at 32wks gestation?

II. Write short notes on:

 $(10 \times 6 = 60)$

- 1. Amnioinfusion.
- 2. Deep Transverse Arrest.
- 3. Neonatal Jaundice.
- 4. Apgar Score.
- 5. Active Management of third stage of labour.
- 6. Screening for Diabetes in Pregnancy.
- 7. Cephalhaematoma.
- 8. Ventouse.
- 9. Partogram.
- 10. Megaloblastic Anaemia.

APRIL 2011

[KY 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION OBSTETRICS INCLUDING NEONATOLOGY

Q.P. Code: 343004

Time: 3 hours (180 Min) I. Elaborate on:		Maximum: 100 marks			
		Time (Max.)	Marks (Max.)		
1. Discuss in detail the causes and management of premature rupture of membranes.	11	35	15		
2. Discuss the diagnosis and management of imminent eclampsia at 32 weeks gestation in a primigravida.	11	35	15		
II. Write notes on :					
1. Programmed labour.	4	10	7		
2. Deep transverse arrest.	4	10	7		
3. Obstetric shock management.	4	10	7		
4. Face to Pubis delivery.	4	10	7		
5. Bishop's score.	4	10	7		
6. Breast feeding.	4	10	7		
7. APGAR.	4	10	7		
8. Ventouse delivery.	4	10	7		
9. Normal puerperium.	4	10	7		
10. Management of HIV baby.	4	10	7		

October 2011

[KZ 1504] Sub. Code: 3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION OBSTETRICS INCLUDING NEONATOLOGY

Q.P. Code: 343004

<i>Q.P. Code : 343004</i>						
~		Maximum: 100 marks				
Answer ALL questions in the same or	der.					
I. Elaborate on :	Pages	Time Marks (Max.)				
1. Discuss in detail about Ante Partum Fetal						
Surveillance.	11	35 min. 15				
2. Discuss the management of Iron deficiency anaemia in pregnancy.	11	35 min. 15				
II. Write notes on :						
1. Cephalhaematoma.	4	10 min. 7				
2. Ventouse.	4	10 min. 7				
3. Biochemical markers of PIH in pregnancy.	4	10 min. 7				
4. After coming head.	4	10 min. 7				
5. External cephalic version.	4	10 min. 7				
6. Prostaglandins in labour induction.	4	10 min. 7				
7. Active management of third stage of labour.	4	10 min. 7				
8. Asphyxia neonatorum.	4	10 min. 7				
9. Neonatal Jaundice.	4	10 min. 7				
10. Red degeneration.	4	10 min. 7				

April 2012

[LA 1504] **Sub. Code: 3004**

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) **EXAMINATION OBSTETRICS INCLUDING NEONATOLOGY**

Q.P. Code: 343004						
Time: 3 hours(180 Min)			Maximum: 100 marks			
	Answer ALL questions in the same or	der. Pages				
I. Elaborate on :			Time (Max.)	Marks (Max.)		
1.	A 20 year old Primi gravida -32 weeks gestation admitted with history of convulsions and loss of consciousness. Her B.P. is 180/110 mm of Hg. How will you investigated and manage her?		35	15		
	Define Post Partum Haemorrhage. Discuss in detail the high risk factors and management of Atonic PPH. What are the preventive measures? rite notes on:	16	35	15		
1.	Definition, timing, technique and ACOG recommendation for restricted use of Episiotomy.	ons 4	10	7		
2.	External cephalic version-Indications, technique, factors that modify the success and complications.		10	7		
3.	Uses of USG in First – Trimester Evaluation and importance of nuchal translucency measurement.	4	10	7		
4.	Define Birth asphyxia. Write the basic steps of neonatal resuscitation DO'S and DONT'S	4	10	7		
5.	Heamorrhagic disease of newborn -Causes, clinical feat	ures				
6.	and Prevention. Describe the Diameters of pelvis at all planes and its	4	10	7		
7.	obstetric significance. Prostaglandin E2 gel and vaginal insert-Method of admir	4 nistration	10 n,	7		
8.	dose, contraindications and side effects. Hyperemesis gravidarum –Definition, causes, complications	4 ions	10	7		
	and management. Intrauterine foetal death- causes, diagnosis and managen	4	10 10	7 7		
	Write in brief the effects of pregnancy on myoma, effect myoma on pregnancy and how will you manage a case of term pregnancy with leiomyoma.	s of	10	7		

[LB 1504] OCTOBER 2012 Sub. Code: 3004 DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION OBSTETRICS INCLUDING NEONATOLOGY

Q.P. Code: 343004

Time: 3 hours Maximum: 100 marks

(180 Min)

Answer ALL questions in the same order.

I. Elaborate on :		Pages (Max.)	Time (Mey.)	Marks
1.	A gravida 4 presents with previous three spontaneous abortion. Discuss the etiology of recurrent pregnancy loss and evaluation and management of this patient.	(Max.) 16	35	(Max.) 15
2.	A primigravida presents at term with a mobile head. What are the causes? Discuss the assessment of CPD and management of trial labor.	16	35	15
II.	Write notes on:			
1.	Describe the Management of a preterm baby.	4	10	7
2.	Indications, dosage and side effects of Anti – hypertensives			
	in pregnancy.	4	10	7
3.	Discuss Medical Management of atonic postpartum			
	haemorrhage.	4	10	7
4.	Clinical features and management of Acute pyelonephritis			
	in pregnancy.	4	10	7
5.	Risk factors and clinical features of Cephalhaematoma.	4	10	7
6.	Indications, types and repair of Episiotomy.	4	10	7
7.	Clinical features and management of Puerperal infection.	4	10	7
8.	Discuss the mechanism and causes of coagulation			
	failure in pregnancy.	4	10	7
9.	Discuss Importance of antenatal care.	4	10	7
10	Indications and interpretation of Non stress test.	4	10	7

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION

OBSTETRICS INCLUDING NEONATOLOGY

Q.P. Code: 343004

Time: Three Hours Maximum: 100 marks

I. Elaborate on: (2X15=30)

1. Discuss the etiology, diagnosis and management of preterm labour.

2. A multigravida present at 34 weeks with breech presentation. Discuss the causes and management of this patient.

II. Write notes on: (10X7=70)

- 1. Discuss the Investigation in a patient with anemia in pregnancy.
- 2. Components and importance of Bishop's score.
- 3. What are the cardiovascular changes in pregnancy?
- 4. How will you assess cepalopelvic disproportion?
- 5. Discuss the Causes of jaundice in pregnancy.
- 6. Importance and components of Partogram.
- 7. How will you diagnose fetal distress in labour?
- 8. Discuss the active management of IIIrd stage of labour.
- 9. Causes and management of Neonatal convulsions.
- 10. Discuss indications and methods of Exchange transfusion in a neonate.

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION

OBSTETRICS INCLUDING NEONATOLOGY

Q.P. Code: 343004

Time: Three Hours Maximum: 100 marks

I. Elaborate on: (2X15=30)

1. Discuss the etiology, diagnosis and management of multiple pregnancies.

2. A primigravida presents at 28 weeks gestation with dyspnoea at rest. How will you evaluate the patient? Discuss the management of heart disease during pregnancy and labour.

II. Write notes on: (10X7=70)

- 1. Describe about internal rotation in labour.
- 2. Write about conservative management of tubal ectopic pregnancy.
- 3. Discuss about Couveliare uterus.
- 4. Write about trial labour.
- 5. Define MMR what are the causes of maternal mortality?
- 6. How will you manage vulval haematoma?
- 7. What the indication for internal podalic version? How will you perform the procedure?
- 8. Write about intrapartum foetal monitoring.
- 9. What are the indication for chorionic villus sampling and how will you perform it?
- 10. Discuss the causes and management of neonatal convulsion.

(LE 1504) APRIL 2014 Sub. Code:3004

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION

OBSTETRICS INCLUDING NEONATOLOGY

Q.P.Code: 343004

Time: Three Hours Maximum: 100 marks

I. Elaborate on: (2X15=30)

- 1. Prediction / Prophylaxis/complications/management of preeclampsia.
- 2. Etiopathogenesis of Rh isoimmunisation and management of a immunized mother.

II. Write notes on: (10X7=70)

- 1. Key Points RCH.
- 2. Cord Prolapse.
- 3. Antiphospholipid antibody syndrome.
- 4. Birth asphyxia.
- 5. Advantages of Partogram.
- 6. Diffferntiate Symmetric and Asymmetric IUGR.
- 7. Uterine Baloon tamponade indications/technique/time of removal.
- 8. Iron therapy in pregnancy.
- 9. Screening for Gestational Diabetes mellitus.
- 10. Asymptomatic Bacteriuria in pregnancy.

DIPLOMA IN OBSTETRICS AND GYNAECOLOGY (DGO) EXAMINATION

OBSTETRICS INCLUDING NEONATOLOGY

Q.P.Code: 343004

Time: Three Hours Maximum: 100 marks

I. Elaborate on: $(2 \times 15 = 30)$

1. Prediction, prevention, diagnosis and management of intrauterine growth restriction diagnosed at 32wks of gestation.

2. Define post partum haemorrhage. Discuss the predisposing factors and management of atonic post partum haemorrhage.

II. Write notes on: $(10 \times 7 = 70)$

- 1. Cervical incompetence.
- 2. Adherent placenta.
- 3. Anencephaly.
- 4. Predicatable and preventable factors in perinatal mortality rate.
- 5. Shoulder dystocia drill.
- 6. Hypoxic ischemic encephalopathy.
- 7. JSY scheme.
- 8. Quadruple test.
- 9. Perineal tears.
- 10. Non stress test.