

PROVISIONAL ANSWER KEY

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Question1:-All are **TRUE** regarding Fetomaternal unit in pregnancy **EXCEPT**

- A:-Progesterone production by the placenta is largely independent of the quantity of precursor available, the utero-placental perfusion and fetal well-being
- B:-There is a 17 alpha hydroxylase enzyme block in the fetus and placenta has very little 3 beta hydroxyl steroid dehydrogenase activity
- C:-Cholesterol and pregnenolone are obtained mainly from the maternal bloodstream for placental progesterone synthesis
- D:-In human syncytiotrophoblast, estradiol increases progesterone production by means of an increase in LDL uptake

Correct Answer:- Option-B

Question2:-All are **TRUE** statements about Corpus luteum of Pregnancy **EXCEPT**

- A:-Progesterone is largely produced by the corpus luteum until about 10 weeks of gestation
- B:-Pulsatile luteinizing hormone (LH) and human chorionic gonadotropin (hCG) from the implanting pregnancy stimulate progesterone production by the corpus luteum
- C:-In the luteal phase of conception cycles, progesterone concentrations increase from about 1-2 mg/mL on the day of the LH surge to a plateau of approximately 10-35 mg/mL
- D:-The transitional luteo-placental shift takes place between the 10th week and 12th week

Correct Answer:- Option-D

Question3:-The **FALSE** statement regarding the glycoprotein hormone Human Chorionic Gonadotropin (hCG) is

- A:-A maximal level of about 100,000 IU/L in the maternal circulation is reached at 8-10 weeks of gestation
- B:-Long half-life of hCG (48 hours) is due mainly to the greater amino acid content of beta subunit
- C:-Hyperglycosylated hCG is the major circulating form of hCG regulating trophoblastic invasion in the first weeks of normal pregnancies
- D:- β -hCG can be detected in maternal blood about the eighth day after ovulation or one day after implantation

Correct Answer:- Option-B

Question4:-Find out the **FALSE** statement regarding human parturition

- A:-The initiating step in the sequence of events leading to parturition could be an increase in fetal ACTH and cortisol secretion and an increase in placental CRH
- B:-There is a definite decline in peripheral blood levels of progesterone prior to parturition and not just a functional withdrawal
- C:-An increase in estrogen levels in maternal blood begins at 34-35 weeks
- D:-The activity of 15-hydroxyprostaglandin dehydrogenase decreases in the myometrium and the chorion during labor and causes increase in prostaglandins associated with parturition

Correct Answer:- Option-B

Question5:-All the following statements about fetal lung surfactant are **TRUE EXCEPT**

- A:-Phosphatidylcholine (lecithin) and phosphatidylglycerol (PG) are present in only small concentrations until the last 5 weeks of pregnancy
- B:-At 20-22 weeks of pregnancy, a less stable and less active lecithin, palmitoyl-myristoyl lecithin, is formed
- C:-At about the 30th week of gestation, there is a sudden surge of dipalmitoyl lecithin, the major surfactant lecithin
- D:-The Sphingomyelin concentration of amniotic fluid changes relatively little throughout pregnancy and prior to 34 weeks, the Lecithin : Sphingomyelin L/S ratio is approximately 1 : 1

Correct Answer:- Option-C

Question6:-All the following are **TRUE** statement about gonadal differentiation **EXCEPT**

- A:-It now appears that both testis and ovary differentiation require dominantly acting genes
- B:-SRY activation of SOX 9 may be all that is necessary to activate other genes important to testis development
- C:-WNT4 and R-Spondin 1(RSPO1) genes team to promote ovary development via repression of SOX9
- D:-Ovarian differentiation is considered the "default" pathway of sex determination the automatic result in the absence of a testis-determining factor

Correct Answer:- Option-D

Question7:-All are **TRUE** statements about Complete Androgen Insensitivity **EXCEPT**

- A:-One in three phenotypic sisters of an affected individual may have an XY karyotype but 40% may not have a family history
- B:-The normal testes produce normal amounts of AMH and testosterone and absent spermatogenesis. serum LH levels are increased and the serum FSH usually is in the normal range
- C:-They present with primary amenorrhea, normal breast development, absent or scant pubic and axillary hair, a short vagina and an absent cervix and uterus

D:-Gonadectomy generally is best done before puberty because the overall risk for tumor development is 30%

Correct Answer:- Option-D

Question8:-The **FALSE** statement regarding Congenital Adrenal Hyperplasia is

A:-An females, the classic forms of CAH (with and without salt wasting) are characterized by genital ambiguity and is most commonly due to 21-hydroxylase deficiency

B:-Two-thirds of patients with 11 β -hydroxylase deficiency exhibit hypotension and hypokalemia

C:-Females with the non-classical "late-onset" form of 21-hydroxylase deficiency have normal external genitalia and present later, during early adolescence with precocious puberty or other signs of hyperandrogenism such as hirsutism

D:-Diagnosis of 21-hydroxylase deficiency is based on a high serum concentration of 17-OH Progesterone

Correct Answer:- Option-B

Question9:-The **FALSE** statement about Puberty in humans is

A:-"diphasic" pattern of gonadotropin secretion from infancy to puberty results primarily from a high sensitivity to low levels of gonadal steroid feedback

B:-central GABA signaling is one of the factors that restrains GnRH neuronal activity during childhood

C:-glutamate signaling may play a role in the resurgence of pulsatile GnRH secretion at the onset of puberty

D:-hypothalamic kisspeptin-GPR54 signaling is a key component of the neurobiologic mechanism that triggers the onset of puberty

Correct Answer:- Option-A

Question10:-All are **TRUE** regarding premature ovarian Insufficiency (POI) **EXCEPT**

A:-In all patients under age 30 with a diagnosis of POI, a karyotype should be obtained

B:-Women with POI should be offered testing for FMR1 premutations

C:-Women with POI should be screened for antiadrenal antibodies and for antithyroid antibodies

D:-Likelihood of achieving pregnancy after diagnosis of POI is about 60-80% and donor eggs are rarely required for IVF

Correct Answer:- Option-D

Question11:-The **FALSE** statement regarding Polycystic Ovarian Syndrome (PCOS) is

A:-AMH production is increased severalfold in anovulatory PCOS

B:-Those with PCOS generally exhibit altered GnRH pulse frequency, increased serum LH concentrations and low-normal FSH levels

C:-Insulin acts synergistically with LH to perpetuate ovarian androgen production and also inhibits hepatic SHBG production

D:-Insulin resistance due to obesity also causes increased leptin signaling and increased adiponectin levels, thereby decreasing fatty acid oxidation and promoting lipotoxicity

Correct Answer:- Option-D

Question12:-Identify the **FALSE** statement about Metformin

A:-Metformin increases insulin sensitivity up to 20% and decreases fasting glucose by about 5%

B:-Metformin decreases weight and BMI by 3-5%

C:-Metformin has no effect on lipolysis and HDL cholesterol

D:-Metformin improves the chronic inflammatory state in women with hyperinsulinemia

Correct Answer:- Option-C

Question13:-All statements regarding Familial cancers are **TRUE EXCEPT**

A:-about 15-20% of women who develop ovarian cancer have mutations in BRCA1 gene

B:-Prophylactic salpingo-oophorectomy reduces the risk of ovarian cancer by about 90% and the risk of breast cancer by about 50%

C:-Risk-reducing salpingo-oophorectomy is recommended at age 35 or when childbearing is complete for patients carrying BRCA1 mutations and by age 40 in BRCA2 carriers

D:-The use of combined oral contraceptives is likely to reduce the risk of ovarian cancer, but the effect on breast cancer risk is uncertain

Correct Answer:- Option-A

Question14:-All are **TRUE** about Tamoxifen **EXCEPT**

A:-Tamoxifen is selective estrogen receptor modulator, having both estrogen receptor antagonist and agonist properties, depending on the tissue

B:-The incidence of endometrial cancer quadrupled with 5 years of tamoxifen treatment

C:-Levonorgestrel intrauterine device (IUD) is not effective to protect the endometrium against hyperplasia and polyps in women using tamoxifen

D:-Tamoxifen is associated with an ultrasonographic image that is characterized by sonolucent changes that are subepithelial in the presence of atrophic epithelium

Correct Answer:- Option-C

Question15:-Identify the **FALSE** statement about Endometrial Hyperplasia

A:-Lesions without atypia basically represent only exaggerated forms of persistent proliferative endometrium and are associated with little risk (1-3%) for progression to adenocarcinoma

B:-Atypical endometrial hyperplasia does not often spontaneously regress and has significant risk (10-30%) of progression to adenocarcinoma if left untreated

C:-There is significant risk (upto 40%) of an unrecognized adenocarcinoma in endometrial hyperplasia with atypia

D:-Biopsy is not indicated when the clinical history suggests long-term unopposed estrogen exposure but the endometrial thickness is 5-12 mm

Correct Answer:- Option-D

Question16:-STRAW stage-3a is characterized by

- A:-menstrual cycles are relatively unchanged, the serum levels of FSH are low, AMH and inhibin B are low
- B:-menstrual cycles become shorter, FSH increases, while AMH, AFC and inhibin B declines
- C:-periods of amenorrhea lasting greater than or equal to 60 days, FSH level in menopausal range, vasomotor symptoms such as hot flushes
- D:-undetectable AMH, Inhibin and occasional antral follicle

Correct Answer:- Option-B

Question17:-The **FALSE** statement regarding Menopausal Hormone Therapy (MHT/HRT) is

- A:-Continuous, combined estrogen-progestin regimens of HRT has more risk for endometrial cancer than long-term sequential regimens
- B:-Ospemifene is given orally for the treatment of vulvar and vaginal atrophy
- C:-Bazedoxifene combined with conjugated estrogens is effective for hot flushes and vaginal atrophy, prevents bone loss and does not stimulate the endometrium or cause breast tenderness
- D:-The use of tibolone in women with a history of breast cancer remains relatively contraindicated

Correct Answer:- Option-A

Question18:-All the statements about Emergency Contraception are **TRUE EXCEPT**

- A:-Copper IUD can be used anytime during the preovulatory phase of the menstrual cycle and upto 8 days after ovulation
- B:-Ulipristal acetate is slightly more effective than the single 1.5-mg dose of levonorgestrel when used within 120 hours
- C:-Mifepristone prevents about 80-85% of expected pregnancies and has the same efficacy and side effects as levonorgestrel method
- D:-Treatment with Levonorgestrel acts primarily by preventing or delaying ovulation and by preventing fertilization

Correct Answer:- Option-A

Question19:-The **FALSE** statement about etonogestrel Implant (Nexplanon) is

- A:-Inhibits ovulation by preventing LH surge and failure rate is 0.01%
- B:-Implants have an immediate contraceptive effect when inserted within the first 7 days of a menstrual cycle
- C:-Implants should not be inserted immediate postpartum
- D:-It is absolutely contraindicated in women with active thromboembolic disease or known breast cancer

Correct Answer:- Option-C

Question20:-All the statements about reproductive ageing are **TRUE EXCEPT**

- A:-Age related Oocyte aneuploidy results primarily from premature separation of sister chromatids during meiosis I or from whole chromosome nondisjunction during meiosis II
- B:-Miscarriage risks and the prevalence of aneuploidy oocytes are relatively low and change little until approximately age 35
- C:-Live birth rates in donor egg IVF cycles relate to the age of the donor, not the age of the recipient
- D:-Aging itself is thought to be a significant factor influencing uterine endometrial response to steroids and receptivity

Correct Answer:- Option-D

Question21:-Identify the **FALSE** statement regarding Test for Ovarian Reserve

- A:-Total number of antral follicles measuring 2-10 mm in both ovaries is proportional to the number of primordial follicles remaining
- B:-Small antral follicles (2-6 mm) are likely the primary source of AMH because they contain larger numbers of granulosa cells and a more developed microvasculature
- C:-Recent studies suggest AMH levels decrease with the use of oral contraceptives and GnRH agonists
- D:-A single elevated Day -3 FSH concentration (>10 IU/L) has high specificity for predicting poor response to stimulation or failure to achieve pregnancy

Correct Answer:- Option-D

Question22:-Find the **FALSE** statement

- A:-The prevalence of uterine anomalies in infertile women and fertile women with normal reproductive outcomes is similar, approximately 2-4%
- B:-Submucousmyomas reduce IVF success rates by approximately 70% and intramural myomas by approximately 20-40%
- C:-Hysteroscopic polypectomy may improve reproductive performance in infertile women
- D:-Conception and term delivery rates after successful hysteroscopiclysis of intrauterine adhesions are > 80%

Correct Answer:- Option-D

Question23:-The **FALSE** statement regarding Male infertility is

- A:-2-5% of men with severe oligospermia and 8% of men with azoospermia may have Y chromosome microdeletions
- B:-Hyperprolactinemia and treatment with GnRH analogs or androgens can cause hypogonadotropic hypogonadism in males
- C:-Men with idiopathic infertility have significantly lesser CAG trinucleotide repeat lengths in androgen receptor gene
- D:-Disorders of estrogen synthesis or action may be associated with infertility in men

Correct Answer:- Option-C

Question24:-Risk factors for Ovarian Hyperstimulation Syndrome (OHSS) include all **EXCEPT**

- A:-Young age
 - B:-Higher BMI
 - C:-Higher AMH and AFC
 - D:-Higher serum Oestradiol
- Correct Answer:- Option-B

Question25:-Preimplantation Genetic Testing (PGT) - Find the **FALSE** statement

- A:-Can be used to detect numerical chromosomal aneuploidies and monogenic disorders but not structural rearrangements
 - B:-Chromosomal composition of the oocyte may be inferred from that of the extruded polar bodies
 - C:-One or two blastomeres may be removed from cleavage stage embryos
 - D:-Biopsy of the trophoblast can be performed at the blastocyst stage and has become the most commonly used technique
- Correct Answer:- Option-A

Question26:-Medical management of endometriosis - Find the **FALSE** statement

- A:-Approximately 85% of women with endometriosis and pelvic pain who are treated with GnRH agonists experience relief of their pain
 - B:-Dienogest is effective in improving endometriosis-associated pain and may even help overcome progesterone resistance by increasing the number of progesterone receptors
 - C:-Estrogen-progestin contraceptives is cytoreductive and halts progression of endometriosis in upto 90% of affected women when taken continuously
 - D:-The levonorgestrel-releasing intrauterine device is of value in women with deep infiltrating rectovaginal endometriosis in reducing pain and dysmenorrhea recurrence following surgical therapy
- Correct Answer:- Option-C

Question27:-Find the **INCORRECT** statement regarding Ectopic pregnancy

- A:-the overall risk of recurrence is approximately 10% for women with one previous ectopic pregnancy and at least 25% for women having two or more
 - B:-estrogen-progestin contraceptives and vasectomy are associated with the lowest absolute incidence of ectopic pregnancy (0.005 ectopic pregnancies/1,000 women years)
 - C:-if pregnancy does occur with an IUD in situ, the risk for ectopic pregnancy is as high as 80%
 - D:-approximately one-third of all pregnancies resulting from sterilization failure are ectopic
- Correct Answer:- Option-C

Question28:-Medical Management of Ectopic pregnancy-Find **INCORRECT** statement

- A:-In 85% cases, serum β -hCG concentrations rise somewhat between days 1 and 4 and does not necessarily indicate failed treatment
 - B:-Medical treatment is not contraindicated for ectopic pregnancies with serum β -hCG concentrations greater than 5,000 IU/L or presence of embryonic heart activity, but the likelihood of treatment failure and the risk of tubal rupture are increased substantially
 - C:-Anti D immunoglobulin need be administered only to Rh-negative women with ectopic pregnancy undergoing surgical management
 - D:-Free peritoneal fluid may be observed in almost 40% of women with early unruptured ectopic pregnancies and that the presence or absence of cul-de-sac fluid does not accurately predict the success or failure of medical treatment
- Correct Answer:- Option-C

Question29:-Fetoplacental blood volume at term is approximately

- A:-125 ml/kg of fetal weight
 - B:-80 ml/kg of fetal weight
 - C:-45 ml/kg of fetal weight
 - D:-240 ml/kg of fetal weight
- Correct Answer:- Option-A

Question30:-Find the **INCORRECT** statement regarding international guidelines on vaccination in pregnancy

- A:-A dose of tetanus-diphtheria-acellular pertussis (Tdap) is ideally given to gravidas between 27 and 36 weeks' gestation
 - B:-All women who will be pregnant during influenza season should be offered vaccination, regardless of gestational age
 - C:-Avoid becoming pregnant for atleast one month after MMR vaccination
 - D:-HPV vaccination may be administered to high risk pregnant women after the first trimester of pregnancy
- Correct Answer:- Option-D

Question31:-The **FALSE** statement regarding fetal biometry by USS is

- A:-Until 14 weeks' gestation, the Crown-Rump Length (CRL) is accurate to within 5 to 7 days
 - B:-The biparietal diameter (BPD) most accurately reflects gestational age, with a variation of 7 to 10 days in the second trimester
 - C:-If the head shape is flattened-dolichocephaly or rounded brachycephaly, the Head Circumference (HC) is more reliable than the BPD
 - D:-To measure the AC, a circle is placed outside the fetal skin in a transverse image that contains the stomach, the kidneys and the confluence of the umbilical vein with the portal sinus
- Correct Answer:- Option-D

Question32:-All the following are indications for fetal ECHO **EXCEPT**

- A:-thick nuchal translucency
- B:-monochorionic twin gestation
- C:-maternal anti cardiolipin antibodies
- D:-maternal pregestational diabetes orphenylketonuria

Correct Answer:- Option-C

Question33:-Fetal renal pelviectasis - Find the **CORRECT** statement

- A:-is present in 20 to 30 percent of fetuses
- B:-in 30 percent of cases, it is transient or physiological
- C:-the pelvis is typically considered dilated if it exceeds 4 mm in the second trimester or 7 mm at approximately 32 weeks' gestation
- D:-mild pyelectasis in the second trimester is not considered a soft marker for down syndrome

Correct Answer:- Option-C

Question34:-All the statements about Hydramnios (Polyhydramnios) are **TRUE EXCEPT**

- A:-it is diagnosed when AFI exceeds 24 and complicates 1 to 2 percent of singleton pregnancies
- B:-underlying causes of hydramnios include fetal anomalies-in approximately 15 percent and diabetes in 15 to 20 percent
- C:-the degree of hydramnios correlates with the likelihood of an anomalous infant
- D:-idiopathic hydramnios accounts for upto 30 percent of cases of hydramnios

Correct Answer:- Option-D

Question35:-Find the **FALSE** statement regarding teratogens in pregnancy

- A:-less than 1 percent of all birth defects are caused by medications
- B:-80 percent of birth defects do not have an obvious etiology and of those withan identified cause, nearly 95 percent of cases have chromosomal or genetic origins
- C:-mono therapy with Levitracetam is associated with a 8-percent major malformation rate, which is slightly higher than that for the general population
- D:-sulfonamides and nitrofurantoin are appropriate for use in pregnancy only if suitable alternatives are lacking

Correct Answer:- Option-C

Question36:-All are **TRUE** regarding cell free fetal DNA **EXCEPT**

- A:-Reliably detected in maternal blood after 9 to 10 weeks' gestation
- B:-The proportion of cell-free DNA that is placental is called the fetal fraction and it composes approximately 50 percent of the total circulating cell-free DNA in maternal plasma
- C:-The specificity to detect down syndrome, trisomy 18 and trisomy 13 is over 99 percent
- D:-Real-time quantitative polymerase chain reaction (PCR) may be used for Rh genotyping, detection of paternally inherited single-gene disorders or fetal sex determination

Correct Answer:- Option-B

Question37:-All are **TRUE** regarding Prenatal Diagnosis **EXCEPT**

- A:-Biopsy of chorionic villi is typically performed between 10 and 13 weeks' gestation
- B:-Transabdominal amniocentesis is generally done between 11 and 14 weeks
- C:-FISH studies are usually completed within 24 to 48 hours
- D:-Chromosomal MicroArray can often be performed directly on uncultured amniocytes with a turn around time of only 3 to 5 days

Correct Answer:- Option-B

Question38:-All are **TRUE** regarding Anti D immunoglobulin **EXCEPT**

- A:-300 mcg dose is given for each 15 mL of fetal red cells or 30 mL of fetal whole blood to be neutralized
- B:-Anti-D immune globulin may produce a weakly positive-1 : 1 to 1 : 4-indirect coombs titer in the mother
- C:-Routine postpartum administration of anti-D immune globulin to at-risk pregnancies within 72 hours of delivery lowers the alloimmunization rate by 50 percent
- D:-Antepartum anti-D immune globulin at 28 weeks' gestation reduces the third-trimester alloimmunization rate from approximately 2 percent to 0.1 percent

Correct Answer:- Option-C

Question39:-All are **TRUE** regarding Non-Stress Test NST **EXCEPT**

- A:-Before 32 weeks, normal accelerations are defined as having an acme that is 10 bpm or more above baseline for 10 seconds or longer
- B:-Beat-to-beat variability is under the control of the autonomic nervous system
- C:-Loss of reactivity is most commonly associated with fetal hypoxia
- D:-Abnormal non-stress test is inadequate to preclude any acuteasphyxial event happening in a 7 day interval

Correct Answer:- Option-C

Question40:-All are **TRUE** regarding miscarriage **EXCEPT**

- A:-balanced structural chromosomal rearrangements may originate from either parent and are found in 2 to 4 percent of couples with recurrent pregnancy loss

B:-the incidence of euploid abortion rises dramatically after maternal age exceeds 35 years
C:-a threshold CRL of 5 mm with absent cardiac activity is used to diagnose non-viability or embryonic demise
D:-absence of an embryo in a sac with a mean sac diameter (MSD) 25 mm signifies an embryonic pregnancy
Correct Answer:- Option-C

Question41:-In three tier system of CTG interpretation, category III abnormal CTG is all **EXCEPT**

A:-Absent baseline FHR variability and recurrent late deceleration
B:-Absent baseline FHR variability and recurrent variable deceleration
C:-Absent baseline FHR variability and bradycardia
D:-Prolonged deceleration > 2 min but < 10 min
Correct Answer:- Option-D

Question42:-Absolute contraindications to neuraxial analgesia in labour include all **EXCEPT**

A:-Maternal coagulopathy
B:-Thrombocytopenia
C:-Prophylactic low-molecular-weight heparin within 12 hours
D:-Refractory maternal hypertension
Correct Answer:- Option-D

Question43:-Proven contraindications for the use of PGE2 for induction of labour include all **EXCEPT**

A:-suspicion of fetal compromise
B:-bronchial asthma
C:-unexplained vaginal bleeding
D:-cephalopelvic disproportion
Correct Answer:- Option-B

Question44:-McRobert's maneuver for relieving shoulder dystocia acts by all the following **EXCEPT**

A:-straightening of the sacrum relative to the lumbar vertebrae
B:-rotation of the symphysis pubis toward the maternal head
C:-decrease in the angle of pelvic inclination
D:-increase in overall pelvic dimensions
Correct Answer:- Option-D

Question45:-All the following statements are **TRUE EXCEPT**

A:-Case-control studies are most feasible for examining the association between a relatively common exposure and a relatively rare disease
B:-Strengths of cohort studies include the ability to obtain attributable and relative risks (RRs) because the occurrence of the outcome is being compared in two groups
C:-Phase 3 clinical trials determine the efficacy of treatment for the intended population, compared with other available treatments, assess adverse events and side effects
D:-The negative predictive value (NPV) and positive predictive value (PPV) of a test does not vary with the baseline characteristics of population or prevalence of a disease
Correct Answer:- Option-D

Question46:-The following structures may be injured during sacrospinous ligament fixation **EXCEPT**

A:-Pudendal nerve
B:-Superior gluteal artery
C:-Inferior gluteal artery
D:-Internal pudendal vessels
Correct Answer:- Option-B

Question47:-All the following statements about ureteric injury are **TRUE EXCEPT**

A:-75% of all iatrogenic injuries to the ureter result from gynecologic procedures
B:-Laparoscopic hysterectomies have the least rate of ureteral injuries and vaginal hysterectomies the highest
C:-Ninety-one percent of injuries occur at the level of the pelvoureter and only 2% and 7% occur at the upper and middle ureteral thirds
D:-Careful identification of the ureter before securing the infundibulopelvic ligament and uterine artery is the best protection against ureteric injury during hysterectomy
Correct Answer:- Option-B

Question48:-All are **TRUE** regarding Dermoid cysts of ovary **EXCEPT**

A:-Malignant transformation occurs in less than 2% of dermoid cysts in women of all ages
B:-Upto 25% of dermoids occur in postmenopausal women
C:-The risk of torsion with dermoid cysts is approximately 50%

D:-They are bilateral in approximately 10% of cases

Correct Answer:- Option-C

Question49:-All are **TRUE** regarding Endometrial Intraepithelial Neoplasia (EIN) **EXCEPT**

A:-Approximately 40% to 50% of women with atypical hyperplasia or EIN have concurrent carcinoma

B:-The risk of progression of hyperplasia without atypia to cancer is low but is approximately 30% among those with atypical hyperplasia

C:-Infertile women with EIN treated with high dose progestins should have an endometrial biopsy every 3 months

D:-For women with EIN treated with progestins, recurrence risks approach 10%

Correct Answer:- Option-D

Question50:-According to the FIGO fibroid classification system type 3 is

A:-50% or more of the fibroid diameter within the myometrium

B:-Intramural and entirely within the myometrium, without extension to either the endometrial surface or to the serosa

C:-Abuts the endometrium without any intracavitary component

D:-Located in cervix or broad ligament

Correct Answer:- Option-C

Question51:-All are **TRUE** about atypical leiomyomas **EXCEPT**

A:-Mitotically active leiomyoma is defined by the presence of 5 to 10 mitoses/10 high-power fields and may be found in pregnancy and OCP users

B:-Cellular leiomyomas exhibiting chromosome 1p deletions, may be clinically more aggressive

C:-STUMP shows atypical histologic features that range between leiomyoma and LMS but the mitotic count is less than 10/10 hpf

D:-STUMP mostly those that are p53 and p16 positive, have been found to exhibit malignant potential to develop a low-grade LMS

Correct Answer:- Option-A

Question52:-Contraindications to Uterine Artery Embolisation (UAE) include all **EXCEPT**

A:-desirous of future fertility

B:-impaired renal dysfunction

C:-diminished immune status

D:-willingness for hysterectomy

Correct Answer:- Option-D

Question53:-The pharmacologic treatments for vulvodynia can include topical lidocaine 5% with any of the following **EXCEPT**

A:-oral gabapentine and steroids

B:-botulinum toxin injections

C:-combined oestrogen and progesterone pills

D:-menopausal hormone therapy

Correct Answer:- Option-C

Question54:-Find the **INCORRECT** statement about Chronic Pelvic Pain (CPP)

A:-There appears to be no relationship between the incidence and severity of pain or the stage of the endometriotic lesions

B:-The specific location and density of pelvic adhesions correlates consistently with the presence of pain symptoms

C:-Endometriosis can be demonstrated in 15% to 40% of patients undergoing laparoscopy for CPP

D:-The accuracy of ultrasound in detecting ovarian remnant syndrome can be improved by treating the patient with a 5- to 10-day course of clomiphene citrate

Correct Answer:- Option-B

Question55:-Find the **FALSE** statement regarding elagolix

A:-used to suppress the estrogen production to a level that is adequate for symptom relief but minimizes hypoestrogenic effects

B:-cannot produce a dose-dependent suppression of pituitary function and ovarian hormones like GnRH agonists

C:-improves dysmenorrhea and nonmenstrual pelvic pain during a 6-month period in women with endometriosis-associated pain

D:-orally active GnRH antagonist with no flare effect

Correct Answer:- Option-B

Question56:-The **FALSE** statement regarding trichomonial vaginitis is

A:-Increased risk of PPRM and PTL in pregnant women and higher post hysterectomy cuff infection

B:-Less than 10% of men contract the disease after a single exposure to an infected woman

C:-T. vaginalis infection is associated with a two to three fold increased risk for HIV acquisition

D:-Clue cells and Whiff test may be positive in TV

Correct Answer:- Option-B

Question57:-Find the **FALSE** statement regarding cervicitis

- A:-The microbial etiology of endocervicitis is unknown in about 50% of cases in which neither gonococci nor chlamydia is detected
- B:-Mycoplasma genitalium, can be detected in 10% to 30% of women with clinical cervicitis
- C:-Nucleic acid amplification tests (NAAT) for gonorrhoea and chlamydia, is not mandatory in all cases
- D:-Cervicitis is commonly associated with BV, which if not treated concurrently, leads to significant persistence

Correct Answer:- Option-C

Question58:-All the statements regarding PID are **TRUE EXCEPT**

- A:-About 75% of women with tubo-ovarian abscess do not respond to antimicrobial therapy alone and need drainage
- B:-No definite symptoms are defined to diagnose PID
- C:-Evaluation of both vaginal and endocervical secretions is a crucial part of the workup of a patient with PID
- D:-Additional criteria to increase the specificity of the diagnosis include endometrial biopsy, CRP and positive test for gonorrhoea or chlamydia and laparoscopy

Correct Answer:- Option-A

Question59:-Regarding genital ulcers find the **TRUE** statement

- A:-The ulcer of syphilis has irregular margins and is deep with undermined edges
- B:-The chancroid ulcer has a smooth, indurated border and a smooth base
- C:-The genital herpes ulcer is often multiple, sub-epidermal and inflamed
- D:-If inguinal buboes with no ulcer is present, the most likely diagnosis is LGV

Correct Answer:- Option-D

Question60:-Regarding testing in genital ulcers which of the following statements is **FALSE**

A:-(VDRL) test and a confirmatory treponemal test - fluorescent treponemal antibody absorption (FTA ABS) or microhemagglutinin-T. pallidum should be used to diagnose syphilis presumptively in all cases

- B:-HSV culture sensitivity approaches 100% in the vesicle stage but PCR assays for HSV DNA are more sensitive in the ulcerative stage
- C:-Optimally, the evaluation of a patient with a genital ulcer should include culture for Haemophilusducreyi
- D:-The diagnosis remains unconfirmed in more than half of patients (60%) with genital ulcers

Correct Answer:- Option-D

Question61:-Find the **FALSE** statement regarding HPV induced CIN.

- A:-HPV-16 infection is a very specific finding and can be found in only 2% of women with normal cervical cytology
- B:-HPV-18 is more specific than HPV-16 for invasive tumors
- C:-Metaplasia found at the squamocolumnar junction, begins in the subcolumnar reserve cells
- D:-As the CIN lesions become more severe, the HPV copy numbers decrease, and the capsid antigen disappears

Correct Answer:- Option-A

Question62:-The sensitivity of cervical cytology testing by Pap Smear for the detection of CIN 2 or 3 ranges from

- A:-60 to 95%
- B:-47% to 62%
- C:-20-30%
- D:-10-15%

Correct Answer:- Option-B

Question63:-Cervical conisation is indicated in all **EXCEPT**

- A:-ECC histologic findings are positive for CIN 2 or CIN 3
- B:-Lack of correlation between cytology, biopsy and colposcopy
- C:-Type I transformation zone
- D:-Diagnosis of AGC-AIS

Correct Answer:- Option-C

Question64:-The following drugs are approved for treatment of Genitourinary Syndrome of Menopause (GSM) **EXCEPT**

- A:-Ospemifene
- B:-17 beta oestradiol
- C:-Paroxetine
- D:-DHEA

Correct Answer:- Option-C

Question65:-Following are the duties of a Registered Medical Practitioner under POCSO Act of India **EXCEPT**

- A:-The registered medical practitioner shall submit the report on the condition of the child within 48 hrs to the SJPU or local police
- B:-Provide prophylaxis for identified STD including prophylaxis for HIV and emergency contraception
- C:-Shall request for legal or magisterial requisition or other documentation prior to rendering such care
- D:-Options 1) and 3)

Correct Answer:- Option-D

Question66:-All are **TRUE** statements regarding female sterilisation in India **EXCEPT**

- A:-Laparoscopic tubal ligation can be done concurrently with second-trimester abortion and in the post-partum period only by an expert operator
- B:-The consent of the spouse is not required for sterilization
- C:-Clients should be married with female client below the age of 49 years and above the age of 22 years
- D:-The couple need have minimum one child whose age is above one year unless the sterilization is medically indicated

Correct Answer:- Option-A

Question67:-All the following statements are **TRUE EXCEPT**

- A:-BMI greater than 35 or weight greater than 100 kg, should receive 2 g of cefazolin as preoperative antibiotic prophylaxis
- B:-In as many as 50% of postoperative patients, Febrile morbidity in first 48 hours is noninfectious and does not need antibiotics
- C:-Even a single dose of perioperative prophylactic antibiotic decreases the incidence of postoperative urinary tract infection from 40% to as low as 4%
- D:-Incidence of wound infections could be decreased by hexachlorophene showers before surgery and shaving of the woundsite just prior to incision

Correct Answer:- Option-D

Question68:-All the following are **TRUE** about Enhanced Recovery-ERAS Protocol **EXCEPT**

- A:-Preoperative carbohydrate loading
- B:-The use of liberal antiemetics including preoperative steroids
- C:-Avoiding routine nasogastric tube and drains
- D:-Adequate pain relief with opioids

Correct Answer:- Option-D

Question69:-Find the **CORRECT** statement regarding laparoscopy.

- A:-To avoid injury to the deep inferior epigastric vessels, the lateral trocar should be placed 3 to 4 cm medial to the medial umbilical ligament
- B:-Transillumination of the abdominal wall from within permits the identification of the deep inferior epigastric vessels in most thin women
- C:-The amount of gas transmitted into the peritoneal cavity should depend on the measured intraperitoneal pressure, not the volume of gas inflated
- D:-Hasson's open entry method is better than the closed method in preventing organ injury

Correct Answer:- Option-C

Question70:-Find the **FALSE** statement.

- A:-Data are insufficient regarding fasting times for clear liquids and the risk of pulmonary aspiration during labor
- B:-Modest amounts of clear liquids can be allowed in uncomplicated laboring women
- C:-Obvious solid foods are best avoided
- D:-A fasting period of 6 to 8 hours for solid food is recommended for uncomplicated parturients prior to undergoing Category I, II and III Caesarean sections

Correct Answer:- Option-D

Question71:-Findings consistent with an Acute Peripartum or intrapartum event leading to Hypoxic-Ischemic Encephalopathy are the following **EXCEPT**

- A:-Apgar score < 5 at 5 and 10 minutes
- B:-Umbilical arterial pH < 7.0 and/or base deficit > 12 mmo l/L
- C:-Sentinel hypoxic or ischemic event occurring immediately before or during delivery
- D:-Spastic diplegia and ataxia type cerebral palsy

Correct Answer:- Option-D

Question72:-Absolute contraindications to External Cephalic Version in Breech include all **EXCEPT**

- A:-Oligohydramnios
- B:-Antepartum hemorrhage
- C:-Any contraindication to labour
- D:-Multiple gestation

Correct Answer:- Option-A

Question73:-Which of the following is used to deliver an arrested after coming head in assisted breech delivery of chin to pubis rotated baby ?

- A:-Scanzoni maneuver
- B:-Pajot's maneuver

C:-Prague maneuver

D:-Kristellar maneuver

Correct Answer:- Option-C

Question74:-Which is NOT a contraindication to vacuum extraction ?

A:-Brow presentation

B:-Fetal bleeding disorder or demineralization disorder

C:-Previous fetal scalp sampling

D:-Less than 34 weeks of gestation

Correct Answer:- Option-C

Question75:-All the following are TRUE EXCEPT

A:-Third-and fourth-degree lacerations at delivery are associated with an increased risk of fecal incontinence (OR 2-3)

B:-Patients with occult anal sphincter tears are 8 times more likely to have fecal incontinence

C:-There is sufficient evidence to support primary elective cesarean delivery for the purpose of preserving fecal continence

D:-Both forceps and vacuum-assisted vaginal delivery significantly increase this risk, with vacuum being less traumatic than forceps

Correct Answer:- Option-C

Question76:-Using WHO classification for Semen Analysis interpretation, choose the FALSE statement is

A:-The normal lower limit for normal morphology is 4%

B:-The normal lower limit for sperm motility is 32%

C:-Viability should be at least 58%

D:-The normal lower limit for sperm concentration is 39 million/mL

Correct Answer:- Option-D

Question77:-Contraindications to using Gonadotropins for ovulation induction in infertile women include all EXCEPT

A:-Uncontrolled thyroid and adrenal dysfunction

B:-Hypogonadotropichypogonadism due to space occupying lesions

C:-Sex hormone-dependent tumors of the reproductive tract and accessory organs

D:-Kallmann syndrome

Correct Answer:- Option-D

Question78:-All the following are methods to decrease OHSS EXCEPT

A:-HCG trigger

B:-GnRH antagonists

C:-Invitro oocyte maturation

D:-Cabergoline

Correct Answer:- Option-A

Question79:-All statements about heterotopic pregnancy are TRUE EXCEPT

A:-1 in 30000 in spontaneous conceptions, as high as 1% with IVF treatment

B:-Only 26% of heterotopic cases can be diagnosed with transvaginal US

C:-Most often diagnosed in the first 5 to 8 weeks of gestation

D:-After treatment of a heterotopic gestation, the overall delivery rate for the intrauterine pregnancy is only 10-20%

Correct Answer:- Option-D

Question80:-All the following are independent prognostic variables in endometrial cancer EXCEPT

A:-Myometrial invasion

B:-Peritoneal cytology

C:-Tumor size

D:-Lymph node metastasis

Correct Answer:- Option-B

Question81:-Find the INCORRECT statement regarding endometrial cancer.

A:-Inactivation of the PTEN tumor-suppressor gene is the most common genetic defect in type I cancers

B:-Type I cancers arise from its precursor Endometrial Intraepithelial Carcinoma (EIC)

C:-Type II cancers frequently demonstrate alterations in HER2/neu,p53,p16,E-cadherin and loss of LOH

D:-Type II endometrial cancer appears to be unrelated to high estrogen levels and often develops in nonobese women

Correct Answer:- Option-B

Question82:-All are TRUE regarding Leiomyosarcoma EXCEPT

- A:-This malignancy has no relationship with parity
- B:-A history of prior pelvic radiation can be elicited in about 50% of women with uterine LMS
- C:-Surgery is the mainstay of treatment for uterine LMS
- D:-Retroperitoneal lymphatic spread is rare in women with early-stage disease and lymphadenectomy is not associated with a survival advantage

Correct Answer:- Option-B

Question83:-All the following are TRUE about TTTS EXCEPT

- A:-Although growth discordance or growth restriction may be found with TTTS, these per se are not considered diagnostic criteria
- B:-TTTS is diagnosed in a monochorionicdiamnionic pregnancy when there is oligamnios SVP<2 cm in one sac and polyhydramnios SVP>8 in the other sac
- C:-Sonography surveillance of pregnancies at risk for TTTS should begin at 16 weeks and continue every 2 weeks
- D:-The discrepancies in amniotic fluid volumes of TTTS are also typically seen in Twin Anaemia Polycythemia Sequence (TAPS)

Correct Answer:- Option-D

Question84:-Find the FALSE statement regarding 2018 FIGO staging of cancer cervix.

- A:-Tumour of size ≥ 2 cm and < 4 cm confined to the cervix is stage IB2
- B:-Imaging and pathology can be used, where available, to supplement clinical findings with respect to tumor size and extent, in all stages
- C:-The involvement of lymph nodes are not part of staging
- D:-The lateral extent of the lesion is no longer considered

Correct Answer:- Option-C

Question85:-The boundaries of paravesical space include all EXCEPT

- A:-The obliterated umbilical artery running along the bladder medially
- B:-The obturator internus muscle along the pelvic sidewall laterally
- C:-The uterosacral ligament posteriorly
- D:-The pubic symphysis anteriorly

Correct Answer:- Option-C

Question86:-All are TRUE regarding serous borderline ovarian tumours EXCEPT

- A:-10% of all ovarian serous tumors are of borderline type and 50% occur before the age of 40 years
- B:-Up to 40% of serous borderline tumors are associated with spread beyond the ovary
- C:-Up to 10% of women with ovarian serous borderline tumors and extraovarian implants may have invasive implants
- D:-Borderline serous tumors may harbor foci of stromal microinvasion and if so, should be managed as aggressive serous carcinomas

Correct Answer:- Option-D

Question87:-In Kyoto (Querlou and Morrow) classification, Nerve sparing Radical Hysterectomy is

- A:-Type B
- B:-Type C1
- C:-Type C2
- D:-Type D2

Correct Answer:- Option-B

Question88:-All are TRUE about Germ cell tumours EXCEPT

- A:-In patients with stage IA dysgerminoma, unilateral oophorectomy alone results in a 5-year disease-free survival rate of greater than 95%
- B:-Patients with stage IA, grade 1 immature teratoma need 4 cycles of BEP adjuvant therapy after surgery
- C:-All patients with Endodermal Stromal Tumours (EST) should be treated with chemotherapy shortly after recovering from surgery ovarian dysfunction of failure
- D:-Transient ovarian failure is common with platinum-based chemotherapy for germ cell tumours and majority will have successful childbearing in the future

Correct Answer:- Option-B

Question89:-All the following statements regarding Granulosa cell tumours of the ovary are TRUE EXCEPT

- A:-Endometrial cancer occurs in association with granulosa cell tumors in at least 5% of cases
- B:-25-50% of Granulosa cell tumours are associated with endometrial hyperplasia
- C:-Granulosa cell tumors may also produce androgens and cause virilization
- D:-Juvenile granulosa cell tumors of the ovary are rare and behaves more aggressively than the adult type

Correct Answer:- Option-D

Question90:-All the following statements about intrahepatic cholestasis of pregnancy are TRUE EXCEPT

- A:-bile acids are cleared incompletely and accumulate in plasma but the cause is unclear
 - B:-pruritus shows predilection for the soles and may precede laboratory findings by several weeks
 - C:-total plasma concentrations of bilirubin exceed 8 mg/dL and serum transaminases exceed 500 in 30% patients
 - D:-ursodeoxycholic acid relieves pruritus and improves fetal outcome better than steroids and cholestyramine
- Correct Answer:- Option-C

Question91:-All the statements about sickle cell anaemia in pregnancy are TRUE EXCEPT

- A:-Sickle-cell trait does not appear to be associated with increased perinatal mortality, low birthweight or pregnancy-induced hypertension
 - B:-In Sickle cell disease there is no categorical contraindication to vaginal delivery, and caesarean delivery is reserved for obstetrical indications
 - C:-Routine prophylactic blood transfusions during labour is recommended to reduce painful crises in Sickle cell anaemia
 - D:-Antenatal folic acid supplementation with 4 mg daily throughout pregnancy is needed to support rapid red blood cell turnover
- Correct Answer:- Option-C

Question92:-All the statements about thrombocytopenia in pregnancy are TRUE EXCEPT

- A:-A platelet count of < 80,000/L should trigger an evaluation for etiologies other than gestational thrombocytopenia
 - B:-Hypertensive disorders account for 21% of thrombocytopenia in pregnancy
 - C:-In ITP complicating pregnancy, therapy with steroids is considered if the platelet count is below 30,000 to 50,000/L
 - D:-Maternal platelet counts have strong correlation with fetal platelet counts and caesarean delivery is recommended if platelet count is < 50,000 on fetal blood sampling
- Correct Answer:- Option-D

Question93:-All the following statements regarding diabetes in pregnancy are TRUE EXCEPT

- A:-Periconceptional HbA1C should be kept under 6.5% in pregestational diabetic women
 - B:-MSAFP levels may be lower in diabetic pregnancies and the incidence of congenital cardiac anomalies is five fold in mothers with diabetes
 - C:-Ultra short acting insulin analogues starts acting in 30 minutes, peaks in 2 hrs minutes and is good for preprandial glycemic control in pregnancy
 - D:-Insulin therapy is typically added if fasting levels persistently exceed 95 mg/dL after medical nutrition therapy
- Correct Answer:- Option-C

Question94:-All the statements about thyroid in pregnancy are TRUE EXCEPT

- A:-Women with TPO antibodies are at increased risk for progression of thyroid disease and postpartum thyroiditis
 - B:-It is recommended that women avoid pregnancy for 1 month after radioablative therapy with iodine 131
 - C:-Pregnancy is associated with an increased thyroxine requirement in approximately a third of supplemented women
 - D:-Prophylthiouracil (PTU) is preferred in pregnancy because it partially inhibits the conversion of T4 to T3 and crosses the placenta less readily than methimazole
- Correct Answer:- Option-B

Question95:-All the statements about SLE in pregnancy are TRUE EXCEPT

- A:-Fetal cell micro chimerism leads to the predilection for autoimmune disorders like SLE among women
 - B:-In the presence of anti-Ro and Anti-La antibodies, the incidence of fetal myocarditis and heart block is as high as 20%
 - C:-During pregnancy, lupus improves in a third of women, remains unchanged in a third and worsens in the remaining third
 - D:-Hydroxychloroquine is not associated with congenital malformations and can be continued in pregnancy
- Correct Answer:- Option-B

Question96:-All are TRUE about antiphospholipid antibody syndrome EXCEPT

- A:-Asherson syndrome is a rapidly progressive thromboembolic disorder due to a cytokine storm seen in antiphospholipid antibody syndrome
 - B:-Approximately 60 percent of patients with APS have a positive lupus anticoagulant LAC assay alone
 - C:-Heparin binds to beta 2 glycoprotein I and prevents binding of anticardiolipin and anti-beta 2 glycoprotein I antibodies to the syncytiotrophoblasts
 - D:-Treatment using aspirin, anticoagulation and close monitoring has increased live birth rates to more than 70 percent in women with APS
- Correct Answer:- Option-B

Question97:-All are TRUE about management of obstetric haemorrhage EXCEPT

- A:-The most important mechanism of action with internal iliac artery ligation is an 85-percent reduction in pulse pressure in those arteries distal to the ligation
 - B:-ROTEM or TEG cannot diagnose coagulopathies stemming from platelet dysfunction or anti platelet drugs
 - C:-Each single-donor apheresis six-unit bag raises the platelet count by approximately 5000/L
 - D:-Dilutional coagulopathy that is clinically indistinguishable from DIC is the most frequent coagulation defect found with blood loss and multiple transfusions
- Correct Answer:- Option-C

Question98:-All are TRUE about USS features of Placenta Accreta Spectrum (PAS) EXCEPT

- A:-loss of the normal hypoechoicretroplacentalzone between the placenta and uterus
- B:-placental vascular lacunae or lakes

C:-distance between the uterine serosa-bladder wall interface and the retroplacental vessels measures < 10 mm

D:-placental bulging into the posterior bladder wall

Correct Answer:- Option-C

Question99:-USS has a sensitivity of _____ in suspected abruptio placenta.

A:-24%

B:-54%

C:-81%

D:-93%

Correct Answer:- Option-A

Question100:-All are TRUE about COVID-19 in pregnancy EXCEPT

A:-It is associated with an almost three times greater risk of preterm birth (17%)

B:-Majority of pregnant women (74%) may be asymptomatic

C:-ICU admissions are not more common in pregnant women compared to nonpregnant women of the same age

D:-Risk factors associated with hospital admissions include older age, obesity, diabetes and hypertension

Correct Answer:- Option-C