

BLH
PROVISIONAL ANSWER KEY

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THE LINK FOR ONLINE OBJECTION SYSTEM WILL START FROM 25-02-2025; 10:00 AM ONWARDS

Instructions / સૂચન

Candidate must ensure compliance to the instructions mentioned below, else objections shall not be considered: -

- (1) Candidates have to pay fees of Rs.100/- for each objection. The fees can be paid from the link given herewith.
- (2) The Candidate will be able to submit objection only after payment of the fees. The generation of the receipt will only be considered as final submission.
- (3) The Candidate must retain the receipt of the payment of the fees. The fees, once paid, will not be refunded under any circumstances.
- (4) All the objections should be submitted through **ONLINE OBJECTION SUBMISSION SYSTEM** only. Physical or submission through any other means will not be considered.
- (5) All objections are to be submitted with reference to the Master Question Paper published with provisional answer key, published herewith on the website / online objection submission system. Objections should be sent referring to the Question No. & options of the Master Question Paper. Objections regarding question nos. and options other than provisional answer key (Master Question Paper) shall not be considered.
- (6) Objections and answers suggested by the candidate should be in compliance with the responses given by him in his answer sheet. Objections shall not be considered, in case, if responses given in the answer sheet /response sheet and submitted objections are differed.
- (7) Supportive document to the objection must be uploaded, without which objection will not be considered.

ઉમેદવારે નીચેની સૂચનાઓનું પાલન કરવાની તકેદારી રાખવી, અન્યથા વાંધા-સૂચન અંગે કરેલ રજૂઆતો ધ્યાને લેવાશે નહીં

- (1) ઉમેદવારે દરેક વાંધા દીઠ રૂપિયા ૧૦૦/- ફી ભરવાની રહેશે. જે ફી આ સાથે આપેલ લીંક ઉપરથી ભરી શકાશે.
- (2) ફી ભર્યા બાદ જ વાંધો સબમીટ થઈ શકશે. ફી ભર્યાની આખરી પહોંચ જ આખરી સબમીશન ગણાશે.
- (3) ફી ભર્યાની પહોંચ ઉમેદવારે સાચવી રાખવાની રહેશે. એક વાર ભરેલ ફી કોઈ પણ પરિસ્થિતિમાં પરત આપવામાં આવશે નહિ.
- (4) વાંધા ફક્ત **ઓનલાઈન ઓબ્જેક્શન સબમીશન સીસ્ટમ** દ્વારા જ સબમીટ કરવાના રહેશે. રૂબરૂ, ટપાલ અથવા ઈ-મેઈલ કે અન્ય કોઈ રીતે આયોગને મોકલવામાં આવેલ વાંધા ધ્યાને લેવામાં આવશે નહીં, જેની ખાસ નોંધ લેવી.
- (5) ઉમેદવારે પોતાને પરીક્ષામાં મળેલ પ્રશ્નપુસ્તિકામાં છપાયેલ પ્રશ્નક્રમાંક મુજબ વાંધા-સૂચનો રજૂ ન કરતાં, તમામ વાંધા-સૂચનો વેબસાઈટ પર પ્રસિધ્ધ થયેલ પ્રોવિઝનલ આન્સર કી (માસ્ટર પ્રશ્નપત્ર) ના પ્રશ્નક્રમાંક મુજબ અને તે સંદર્ભમાં રજૂ કરવા. માસ્ટર પ્રશ્નપત્રમાં નિર્દિષ્ટ પ્રશ્ન અને વિકલ્પ સિવાયના વાંધા ધ્યાને લેવામાં આવશે નહીં.
- (6) ઉમેદવારે પ્રશ્નના વિકલ્પ પર વાંધો રજૂ કરેલ છે અને વિકલ્પ રૂપે જે જવાબ સૂચવેલ છે એ જવાબ ઉમેદવારે પોતાની ઉત્તરવહીમાં આપેલ હોવો જોઈએ. ઉમેદવારે સૂચવેલ જવાબ અને ઉત્તરવહીનો જવાબ ભિન્ન હશે તો ઉમેદવારે રજૂ કરેલ વાંધા ધ્યાને લેવાશે નહીં.
- (7) વાંધા માટે સંદર્ભ જોડવો આવશ્યક છે, જેના વિના વાંધો ધ્યાને લેવામાં આવશે નહીં.

Website link for online objection submission system: https://www.formonline.co.in/GPSC_TRACK/SearchPage.aspx

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- The most common source for vicarious menstruation is**
(A) Ovary (B) Gum
(C) Nose (D) Kidney
- Primary spermatocyte is derived from**
(A) Type A spermatogonia (B) Type B spermatogonia
(C) Type C spermatogonia (D) Type D spermatogonia
- In ectopic pregnancy, the most common reaction seen in the uterus is**
(A) Decidual reaction (B) Arias - steal reaction
(C) Double decidual sac sign (D) Stallworthy sign
- Wharton's jelly in the umbilical cord is**
(A) Ectoderm (B) Endoderm
(C) Mesoderm (D) Trophoblast
- The role of human placental lactogen is**
(A) To antagonize insulin action (B) To develop the fetal breast
(C) For the growth of fetus (D) All of the above
- Renal agenesis in the fetus is associated with**
(A) Hydramnios (B) Anencephaly
(C) Tracheoesophageal fistula (D) Oligohydramnios
- Surfactant in fetal lungs is secreted by**
(A) Type I alveolar cells (B) Clara cells
(C) Type II alveolar cells (D) Pulmonary alveolar macrophages
- Rise in body temperature during the ovulation is due to**
(A) Estrogen (B) Progesterone
(C) LH (D) FSH
- Failure rate of tubectomy is**
(A) 0.1-0.6% (B) 1-3%
(C) 2-5% (D) 4-6%
- The IUCD having the longest life spans is**
(A) Progestasat (B) Cu T 380A
(C) Mirena (D) Nova T
- Pearl Index of Cu T 380A is**
(A) 0.8 HWY (B) 1 HWY
(C) 3 HWY (D) 4 HWY

12. The minimum level of β HCG that can be detected by ELISA is
(A) 30-40 mIU/ml (B) 1 to 2 mIU/ml
(C) 40-50 mIU/ml (D) 20-30 mIU/ml
13. In the case of primigravida, if head fails to engage, then causes are all, except
(A) Reflexed head (B) CPD
(C) Wellflexed head (D) Hydrocephalus
14. Measurement of diagonal conjugate is
(A) 13 cm (B) 10 cm
(C) 12 cm (D) 11 cm
15. Uteroplacental blood flow at term is
(A) 300-500 ml (B) 500-600 ml
(C) 700-900 ml (D) 900-1100 ml
16. The principal term of Hemoglobin in fetus is
(A) HbA1 (B) Hb F
(C) Hb Barts (D) HbA2
17. Choose a multiphasic OCP from the following
(A) Cerazette (B) Triquilar
(C) Mala D (D) Duoluten-L
18. LNG IUCD is a
(A) First generation (B) Second generation
(C) Third generation (D) None of the above
19. Hegar's sign can be demonstrated at
(A) 6 to 10 weeks (B) 12 to 16 weeks
(C) 18 to 22 weeks (D) 24 to 28 weeks
20. Dating scan is done in
(A) First trimester (B) Second trimester
(C) Third trimester (D) All of the above
21. Denominator in face presentation is
(A) Mentum (B) Occiput
(C) Frontum (D) Sacrum

M

22. Ischial spines are at the level of
(A) Minus 1 (B) Minus 2
(C) Zero Station (D) Plus 1 Station
23. The most significant diameter in mid pelvis is
(A) Interspinous (B) Intertuberous
(C) Anterior sagittal (D) Posterior sagittal
24. The best time to do chronic villus sampling is
(A) 6-8 weeks (B) 7-9 weeks
(C) 9-11 weeks (D) 11-13 weeks
25. The ideal number of antenatal visits are
(A) 12 to 14 (B) 6 to 8
(C) 3 to 5 (D) 10 to 12
26. Daily caloric needs in pregnancy is about _____ kilo cal.
(A) 1000 (B) 1500
(C) 2500 (D) 3500
27. Fetal nutrition is best reflected by
(A) AC (B) BPD
(C) HC (D) FL
28. A Normal Reassuring Manning score is
(A) < 2 (B) 4 - 6
(C) 6 - 7 (D) > 8
29. Lower uterine segment develops from
(A) Isthmus (B) Cervix
(C) Body of uterus (D) Vagina
30. Delayed cord clamping is done after
(A) 30 sec (B) 1 min
(C) 2-3 min (D) 5 min
31. The clotting factor decreased in pregnancy is
(A) VIII (B) X
(C) XIII (D) Fibrinogen

32. Fertilization is said to be complete if
(A) 1st polar body is formed (B) 2nd polar body is formed
(C) Primary oocyte is formed (D) Secondary oocyte is formed
33. The PH of amniotic fluid is
(A) 6.8 to 6.9 (B) 7.1 to 7.3
(C) 7.4 to 7.6 (D) 6.7 to 6.8
34. Ritgen manoeuvre is done in
(A) Shoulder dystocia (B) For delivery of head in breach
(C) For delivery of legs in breach (D) For delivery of head in normal labour
35. Pain in early labour is limited to dermatomes
(A) T10 – L1 (B) S1 – S3
(C) L4 – L5 (D) L2 – L3
36. All of the following methods are recommended by WHO for preventing PPH, except
(A) IV Oxytocin infusion
(B) Uterine massage packing
(C) Delivering of placenta by controlled cord traction
(D) Intermittent assessment of uterine tone
37. Which one of the following is not an operation for uterine inversion?
(A) O'Sullivan (B) Haultain
(C) Spinelli (D) Fentoni
38. The dose of Misoprostol in emergency management of PPH is
(A) 200 mcg (B) 400 mcg
(C) 600 mcg (D) 800 mcg
39. Carbetocin dose for PPH is
(A) 100 mcg IV (B) 50 mcg IV
(C) 150 mcg IV (D) 250 mcg IV
40. Minimum duration between onset of symptoms and death is seen in
(A) APH (B) PPH
(C) Septicemia (D) Obstructed labour
41. Traction force required for forceps delivery in primigravida is
(A) 15 kg (B) 18 to 20 kg
(C) 13 kg (D) 25 kg

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42. Optimum interval between uterine incision and delivery of fetal and head during LSCS should be
(A) < 90 secs (B) 90 - 150 secs
(C) 150 - 200 secs (D) ≥ 200 secs
43. Sensory afferent fibers from the fallopian tubes ascend to
(A) T8 (B) T10
(C) L2 (D) L4
44. Absolute indication for LSCS in heart disease is
(A) Coarctation of aorta (B) Eisenmenger syndrome
(C) EB Stein's anomaly (D) Pulmonary stenosis
45. Which of the following infection is associated with preterm labour?
(A) Trichomonas Vaginalis (B) Candidiasis
(C) Bacterial infection (D) All of the above
46. Saffron-colored meconium is seen in
(A) Post-maturity (B) TB
(C) Breach (D) Normal in appearance
47. Features of post maturity syndrome are all, except
(A) Wrinkled skin (B) Macrosomia
(C) Long thin baby (D) Long nails
48. Risk of preterm delivery is increased, if cervical length is
(A) 2.5 cms (B) 3.0 cms
(C) 3.5 cms (D) 4.0 cms
49. On TVS, which of the following shapes of cervix indicates preterm labour?
(A) T (B) Y
(C) U (D) O
50. All of the following are the risk factors for preterm labour, EXCEPT
(A) Previous h/o preterm birth (B) Multiple pregnancy
(C) Previous LLETZ (D) Marfans syndrome
51. Concentration of $MgSO_4$ in the treatment of Eclampsia in mEq/lit is
(A) 7-10 (B) 10-15
(C) 2-4 (D) 4-7

52. Earliest sign of $MgSO_4$ toxicity is
(A) Depression of deep tendon reflexes (B) Respiratory depression
(C) Cardiac arrest (D) Anuria
53. Which of the following antihypertensives is not given in pregnancy?
(A) Enalapril (B) α -methyldopa
(C) Labetalol (D) Nifedipine
54. The cause of convulsion in eclampsia is
(A) Cerebral anoxia due to arterial spasms
(B) Hypovolemia
(C) Hypocalcemia
(D) Shock
55. In a pregnant female with B.P. of 150/100 mm Hg, which protein/creatinine ratio suggests the development of preeclampsia?
(A) > 0.20 (B) > 0.30
(C) < 0.20 (D) < 0.30
56. Infection transmitted to the baby at delivery are all, except
(A) Toxoplasmosis (B) Gonococcus
(C) Herpes simplex type II (D) Hepatitis B
57. Which of the following is a known effect of dengue to fetus if mother is affected?
(A) Abortion (B) Teratogenicity
(C) IUGR (D) None of the above
58. Which of the following abnormality is commonly seen in fetus with CMV infection?
(A) Colitis (B) Myocarditis
(C) Blood dyscrasia (D) Pulmonary cyst
59. Transmission of herpes is maximum in
(A) 2nd trimester (B) 3rd trimester
(C) During parturition (D) 1st trimester
60. The risk of vertical transmission of HIV without intervention and without breast feeding is
(A) 15 to 30% (B) 5 to 10%
(C) 10 to 15% (D) 2 to 5%
61. All are the complications of formula fed baby over human milk fed baby, except
(A) Necrotizing enterocolitis (B) Otitis media
(C) Hypocalcemia (D) Vitamin K deficiency

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62. The most common nerve injured during normal labour vaginal delivery is
(A) Femoral nerve (B) Lateral femoral cutaneous nerve
(C) Iliohypogastric nerve (D) Ilioinguinal nerve
63. The likely size of uterus 8 weeks postpartum is
(A) 100 gm (B) 500 gm
(C) 700 gm (D) 900 gm
64. Contraceptive method of choice in lactating mother is
(A) Barrier method (B) Progesterone only pills
(C) Combined oral contraceptive pills (D) Lactational amenorrhea
65. The most common immunoglobulin secreted by mother in milk and colostrum is
(A) IgA (B) IgG
(C) IgE (D) IgO
66. Meconium is excreted by a newborn till
(A) 2 days (B) 3 days
(C) 4 days (D) 6 days
67. The commonest causes of perinatal death in India is
(A) Prematurity (B) Asphyxia
(C) Intracranial haemorrhage (D) Congenital malformation
68. IUGR is seen in
(A) Rubella (B) Syphilis
(C) CMV (D) All of the above
69. Caudal regression syndrome is seen in babies of mother having
(A) Gestational diabetes (B) PIH
(C) Cardiac disease (D) Anaemia
70. The best parameter for ultrasound evaluation of IUGR is
(A) Placental membrane (B) Length of femur
(C) Abdominal circumference (D) BPD
71. Macrosomia is associated with
(A) Gestational Diabetes Mellitus (B) Maternal malnutrition
(C) Hypothyroidism (D) Hyperthyroidism

72. The possible cause of choriocarcinoma after hydatidiform mole is all, except
(A) Rising HCG (B) More theca lutein cysts
(C) Increase uterine size (D) Suburethral nodule
73. Which of the following is not in quadruple test for the detection of Down's syndrome antenatally?
(A) AFP (B) β -HCG
(C) Estradiol (D) Inhibin β
74. A female comes to gynac OPD for preconception counselling with H/O two second trimester abortion. What is the next investigation you will advise?
(A) TVS (B) Hysteroscopy
(C) Endometrial biopsy (D) Chromosomal study
75. A lady presents with 7 weeks amenorrhea and vaginal spotting. CRL is 5 mm with good gestational sac of 5-6 weeks on TVS. Next line of management is
(A) Repeat TVS after 1 week (B) Evacuation
(C) Wait for 4 weeks (D) Serum HCG level
76. Longest fetal skull diameter is
(A) Biparital Diameter (B) Suboccipito Bregmatic
(C) Occipito Frontal (D) Mento Vertical
77. Cordocentesis is done at
(A) 14-18 weeks (B) 10-12 weeks
(C) Anytime more than 8 weeks (D) 18-20 weeks
78. Spiegelberg's criteria is used in
(A) Ovarian pregnancy (B) Abdominal pregnancy
(C) Cervical pregnancy (D) Tubal pregnancy
79. The most common site of ectopic pregnancy is
(A) Ampulla portion of fallopian tube (B) Isthmus
(C) Interstitium (D) Abdominal
80. Drug of choice of PPH, resistant to oxytocin and ergometrine is
(A) Carboprost (B) Dinoprostone
(C) Dinoprost (D) Misoprostol
81. Sentinel biopsy is most effective in
(A) Ca cervix (B) Endometrium Ca
(C) Vulval Ca (D) Vaginal Ca

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82. Which of the following is the most common cause for intraorbital metastasis in female?
(A) Breast cancer (B) Cervical cancer
(C) Ovarian cancer (D) Endometrial cancer
83. The most common site of Vulval cancer is
(A) Labia majora (B) Labia minora
(C) Prepuce of the clitoris (D) Bartholin's gland
84. A characteristic feature of carcinoma fallopian tube is
(A) Watery discharge PV (B) Haemorrhage
(C) Pain (D) Sepsis
85. Common D/D of verrucous carcinoma is
(A) Condyloma lata (B) Condyloma accuminata
(C) Adenocarcinoma (D) Tuberculosis
86. The best gas used for creating pneumoperitoneum in laparoscopy is
(A) N₂ (B) O₂
(C) CO₂ (D) N₂O
87. Hysteroscopy can diagnose all, except
(A) Asherman's syndrome (B) Septate uterus
(C) Adenomyosis (D) TB endometritis
88. A best indicator of ovarian reserve is
(A) FSH (B) Estradiol
(C) LH (D) FSH/LH ratio
89. Chassaignac surgery is done in case of
(A) Uterine inversion (B) VVF repair
(C) Uterovesical fistula (D) Retroverted uterus
90. Transcervical endometrial resection is used in
(A) Endometriosis (B) DUB
(C) Carcinoma endometrium (D) Submucosal fibroid
91. Cryosurgery is effective in all, except
(A) Chronic cervicitis (B) Squamous intraepithelial lesion
(C) Condyloma acuminata (D) Severe dysplasia or CIS lesion

92. Regarding the use of laser, all are correct, except
(A) Management of CIN VIN VAIN
(B) Laser laparoscopy for ectopic pregnancy
(C) Laser hysteroscopy for presacral neuropathy
(D) It acts by tissue cutting, vaporization or coagulation
93. Menstruation is defined as precocious, if it starts before the age of
(A) 8 years
(B) **10 years**
(C) 14 years
(D) 20 years
94. Congenital cervical erosion reappears at
(A) One year of age
(B) Two years of age
(C) Five years of age
(D) Puberty
95. Which of these is a diagnostic of menopause?
(A) Serum FSH > 40
(B) Serum FSH > 20
(C) Serum FSH < 40
(D) Serum FSH < 30
96. Ulipristal acetate is a/an
(A) GnRH agonist
(B) Androgen antagonist
(C) Selective Estrogen Receptor Modulator
(D) Selective Progesterone Receptor Modulator
97. Which of the following is true about Swyer's syndrome?
(A) Can be fertile with surrogacy
(B) Can be fertile with ovum donation
(C) Present with primary infertility
(D) Gonadectomy is indicted for all patients
98. Which of these is not a support of uterus?
(A) Urogenital diaphragm
(B) Pelvic diaphragm
(C) Perineal body
(D) Rectovaginal septum
99. The true statement about testosterone in female is
(A) > 50 % testosterone secreted from ovary
(B) > 80 % testosterone secreted from ovarỹ
(C) ~ 0.5 % ng/ml is plasma concentration
(D) Slight decrease at the time of ovulation

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100. The true statement about non-oxynol 9 is
(A) Decreased risk of HIV
(B) Present STD infection
(C) Remains effective for 1-2 hours after application
(D) It is a banned drug
101. All of the following pelvic structures support the vagina, except
(A) Perineal body
(B) Pelvic diaphragm
(C) Levator ani muscle
(D) Infundibulopelvic ligament
102. The pH of vagina is most acidic in
(A) Menstruation
(B) Pregnancy
(C) Puerperium
(D) Infancy
103. Protective bacterium in normal vagina is
(A) Pepto streptococcus
(B) Lactobacillus
(C) Gardnerella vaginalis
(D) E-coli
104. The main source of physiological secretion found in the vagina is
(A) Bartholine glands
(B) Gartner duct
(C) Vagina
(D) Cervix
105. Uterocervix ratio up to the age of 10 years is
(A) 3:2
(B) 2:1
(C) 3:3
(D) 1:2
106. Bartholin duct opens into
(A) Labia majora and minora
(B) A groove between labia minora and hymen
(C) The lower vagina
(D) The upper vagina
107. Peg cells are seen in
(A) Vagina
(B) Vulva
(C) Ovary
(D) Fallopian tube
108. Bartholin cyst is caused by
(A) Candida
(B) Anaerobes
(C) Gonococcus
(D) Trichomonas

109. Vaginal defence is not seen _____
(A) Within 10 days of birth (B) After 10 days of birth
(C) During pregnancy (D) At puberty
110. Glands of Litter are homologous to
(A) Bartholin's glands (B) Cowper's glands
(C) Skene glands (D) Glands of labia
111. HRT is helpful in all, except
(A) Vaginal atrophy (B) Flushing
(C) Osteoporosis (D) Coronary artery disease
112. Estrogen replacement for postmenopausal women increases
(A) LDL (B) Cholesterol
(C) VLDL (D) Triglycerides
113. Non-hormonal drug to prevent postmenopausal osteoporosis is
(A) Alendronate (B) Estrogen
(C) Raloxifene (D) Parathyroid extracts
114. All of the following appear to decrease hot flushes in menopausal women, except
(A) Androgens (B) Raloxifene
(C) Isoflavones (D) Tibolone
115. The cut point of serum estrogen level for the diagnosis of ovarian failure is
(A) 10 pg/ml (B) 20 pg/ml
(C) 30 pg/ml (D) 40 pg/ml
116. HRT is not useful in
(A) Vaginal flashing (B) Flushing
(C) Osteoporosis (D) Coronary artery diseases
117. Which of the following statements about vit. D is false?
(A) Vitamin D from plant sources is vitamin D2
(B) Vitamin D from animal sources is vitamin D3
(C) Vitamin D2 has more biological sources than D3
(D) 25(OH)D is the major circulating & storage form of vitamin D

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118. Which of the following statements is incorrect regarding polycystic ovarian disease?
(A) Elevated LH hormone
(B) Can cause infertility
(C) May be associated with abnormal GTT
(D) Results in post-dated pregnancy
119. A 20-year-old lady is suspected to have PCOD. Sample for testing LH & FSH are best taken in which of the following day of menstrual cycle?
(A) 1 - 4
(B) 8 - 10
(C) 13 - 15
(D) 24 - 26
120. According to Ferrimann Gallwey Scoring System, hirsutisms is diagnosed when the score is more than
(A) 8
(B) 12
(C) 16
(D) 20.
121. BMI of an overweight female is
(A) 19 - 24
(B) 25 - 29
(C) 30 - 34
(D) Less than 19
122. All of the following are associated with polycystic ovarian syndrome, except
(A) Ovarian carcinoma
(B) Endometrial carcinoma
(C) Insulin resistance
(D) Osteoporosis
123. A 20-year-old girl presents with rapidly developing hirsutism and amenorrhea. Which of the following blood tests will help in the diagnosis?
(A) 17-OH progesterone
(B) DHEA
(C) Testosterone
(D) LH : FSH ratio
124. A double-headed monster is known as
(A) Diplopagus
(B) Dicephalus
(C) Craniopagus
(D) Heteropagus
125. A patient is diagnosed to have CIN II. You can tell her the risk of malignancy as
(A) 15%
(B) 60%
(C) 30%
(D) 5%
126. Colposcopic features suggestive of malignancy are all, except
(A) Condyloma
(B) Vascular atypia
(C) Punctuation
(D) White epithelium

127. All of the following are the indication of colposcopy, except
(A) Suspicious pap smear (B) Obvious mass lesion
(C) Invasive carcinoma (D) Patient who refuses biopsy
128. High risk HPV includes
(A) Type 16 (B) Type 10
(C) Type 11 (D) Type 12
129. The earliest symptom of carcinoma cervix is
(A) Irregular vaginal bleeding (B) Post coital bleed
(C) Foul smelling discharge (D) Pain
130. Point B in the treatment of carcinoma cervix receives the dose of
(A) 7000 cGY (B) 6000 cGY
(C) 5000 cGY (D) 10000 cGY
131. HPV triage strategy includes all, except
(A) Conventional pap smear (B) Liquid-based cytology
(C) Hybrid capture 2 for HPV DNA (D) Colposcopy
132. The most common site of metastasis of Ca cervix is
(A) Lymph node (B) Lungs
(C) Bone (D) Abdominal cavity
133. The commonest cause of primary amenorrhea is
(A) Genital tuberculosis (B) Ovarian dysplasia
(C) Mullerian duct anomalies (D) Hypothyroidism
134. A woman has 2 kids. She presents with galactorrhea and amenorrhea since 1 year. The most common probable diagnosis is
(A) Pregnancy (B) Pituitary tumor
(C) Sheehan's syndrome (D) Metastasis to pituitary
135. Hypothalamic amenorrhea is seen in
(A) Asherman's syndrome (B) Stein-Leventhal syndrome
(C) Kallmann syndrome (D) Sheehan's syndrome
136. A 55-year-old woman para 2 + 0 has menorrhagia. The best treatment for her diagnosis of endometrial hyperplasia is
(A) Combined pills (B) Mirena
(C) Hysterectomy (D) TCRE

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137. In case of secondary amenorrhea who fails to get withdrawal bleeding after taking E and P, the fault lies at the level of
(A) Pituitary (B) Hypothyroidism
(C) Ovary (D) Endometrium
138. The most common cause of puberty menorrhagia is
(A) Anovulation (B) Malignancy
(C) Endometriosis (D) Bleeding dyscrasias
139. Evaluation of a patient with post-menopausal bleeding is done by
(A) Pap smear (B) USG
(C) D&C (D) All of the above
140. A woman presenting with amenorrhea, headache, blurred vision and galactorrhea, the most appropriate investigation is
(A) Prolactin level (B) LH
(C) FSH (D) HCG
141. To diagnose uterus didelphys, the procedure of choice is
(A) Laparoscopy (B) IVP
(C) HSG (D) 3D USG
142. The most important indication for surgical repair of bicornuate uterus is
(A) Infertility (B) Dysmenorrhea
(C) Menorrhagia (D) Habitual abortion
143. An ideal age for the repair of vaginal agenesis is
(A) 6 months (B) 3 years
(C) At puberty (D) Before marriage
144. Transverse vaginal septum mostly corresponds to
(A) External OS (B) Vesical neck
(C) Bladder base (D) Hymen
145. SRY gene is located on the
(A) Short arm of Y chromosomes (B) long arm of Y chromosomes
(C) Short arm of X chromosomes (D) Long arm of X chromosomes
146. Ovary develops from
(A) Mullerian duct (B) Genital ridge
(C) Genital tubercle (D) Sinovaginal bulb

147. The first sign of puberty in girls is
(A) Breast budding (B) Peak height velocity
(C) Menarche (D) Pubic and axillary hair growth
148. In testicular feminization syndrome,
(A) Buccal smear is chromatin positive (B) Normal breast size is observed
(C) Menstruation is scanty and infrequent (D) Familial incidence is recognized
149. Precocious puberty is seen in all of the following, except
(A) Granulosa cell tumor (B) Head injury
(C) Corticosteroids intake (D) Hyperthyroidism
150. The destruction of ovaries prior to 7th week following fertilization results in
(A) Pseudohermaphroditism (B) Uterine agenesis
(C) Masculinization (D) None of the above
151. Which of the following is sexually transmitted?
(A) Echinococcus (B) E. coli
(C) Molluscum contagiosum (D) Group B streptococcus
152. Strawberry vagina is seen in
(A) Candida albicans (B) H. Vaginalis
(C) Syphilis (D) Trichomonas vaginalis
153. Clue cells are seen in
(A) Bacterial vaginosis (B) Candidiasis
(C) Trichomoniasis (D) Gonorrhea
154. A 25-year-old female with H/O multiple sexual contacts is presenting with growth on vulva. The probable diagnosis is
(A) Condyloma Acuminata (B) Verruca plana
(C) Verruca vulgaris (D) Condyloma lata
155. Non-gonococcal urethritis is caused by
(A) Chlamydia (B) LGV
(C) Syphilis (D) Gardnerella vaginalis
156. All of the following are the clinical features of PID, except
(A) Temp > 38°C (B) WBC count of 15000
(C) ESR -10 mm/hour (D) Tenderness on movement of cervix

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157. Which of the following cannot be detected by wet film?
(A) Candida (B) Trichomonas
(C) Chlamydia (D) Bacterial vaginosis
158. Ulceration of the vulva is commonly seen in all, except
(A) Bacterial vaginosis (B) Syphilis
(C) Chancroid (D) Bechet's disease
159. Following are the primary sites of acute gonococcal infection, except
(A) Urethra (B) Bartholine gland
(C) Skene gland (D) Ectocervix
160. A 19-year-old girl with painless ulcer in labia majora with everted margins is caused by
(A) Treponema pallidum (B) Chlamydia
(C) Gonorrhoea (D) Herpes genital ulcer disease
161. The most common cause of vesicovaginal fistula in India is
(A) Gynaec surgery (B) Irradiation
(C) Obstructed labour (D) Trauma
162. In a 30-year-old multipara who has uterine prolapse, the management of choice is
(A) Fothergill repair (B) Fothergill repair with tubal ligation
(C) Sling operation (D) Vaginal hysterectomy
163. Postpartum VVF is best repaired after
(A) 6 weeks (B) 8 weeks
(C) 3 months (D) 6 months
164. The causes of decubitus ulcer in uterine prolapse is
(A) Friction (B) Venous congestion
(C) Intercourse (D) Trauma
165. The most common site of obstetric injury leading to ureterovaginal fistula is
(A) Infundibulopelvic ligament
(B) Vaginal vault
(C) Ureteric tunnel
(D) Below cardinal ligament where uterine artery crosses
166. The best management of vault prolapse is
(A) Sacral colpopexy (B) Sacrospinous ligament fixation
(C) Le fort repair (D) Anterior colporrhaphy

167. The most useful investigation for Vesicovaginal fistula (VVF) is
(A) Three swab test (B) Cystoscopy
(C) Urine culture (D) IVP
168. Ureteric fistula is best treated by all, except
(A) Ureteroneocystostomy (B) End-to-end anastomosis
(C) Ureteroureterostomy (D) Ileal conduit
169. In Baden Walker Half-way system of classification of prolapse, the reference point is
(A) Hymen (B) Introitus
(C) Internal OS (D) External OS
170. Childbirth trauma leading to urine incontinence is seen least in female with
(A) Android pelvis (B) Anthropoid pelvis
(C) Gynecoid pelvis (D) Platypelloid pelvis
171. The best prognosis in infertile woman is seen in
(A) Tubal block (B) Anovulation
(C) Oligospermia (D) Endometritis
172. TB endometritis causes infertility by
(A) Causing anovulation (B) Destroying endometrium
(C) Tubal blockage (D) Ciliary dysmotility
173. What is the cause for luteal phase defect?
(A) Progesterone is inadequately secreted
(B) Excess estrogen is secreted
(C) Excess progesterone is secreted
(D) All of the above
174. Mrs. X is infertile. What is the right time to do endometrial biopsy in her menstrual cycle?
(A) 12 - 14 days (B) 17 - 19 days
(C) 20 - 22 days (D) 3 - 5 days
175. Ferning is seen due to
(A) Presence of NACL under Progesterone effect
(B) Presence of NACL under estrogenic effect
(C) LH / FSH
(D) Mucus secretion by glands

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176. A patient treated with Clomiphene Citrate presents with sudden abdominal pain and ascites. The probable cause is
- (A) Uterine rupture (B) Ectopic pregnancy rupture
(C) Multifetal pregnancy (D) Hyperstimulation syndrome
177. Fallopian tube dysmotility is seen in
- (A) Noonan syndrome (B) Turner syndrome
(C) Kartagener syndrome (D) Marfan syndrome
178. Postcoital test detects all of the following, except
- (A) Fallopian tube block (B) Cervical factor abnormality
(C) Sperm count (D) Sperm abnormality
179. WHO definition of normal sperm count is
- (A) 10 million/ml (B) 20 million/ml
(C) 40 million/ml (D) 60 million/ml
180. Aspermia is a term used to describe
- (A) Absence of semen (B) Absence of sperm in ejaculation
(C) Absence of sperm motility (D) Occurrence of abnormal sperm
181. In azoospermia, the diagnosis test which can differentiate between testicular failure and obstruction of vas deferens is
- (A) Estimation of FSH level (B) Estimation of testosterone level
(C) Karyotyping (D) FNAC of testis
182. Aspiration of sperm from testis is done in
- (A) TESA (B) MESA
(C) ZIFT (D) GIFT
183. Indication of intrauterine insemination are all, except
- (A) Hostile cervical mucus (B) Unexplained infertility
(C) Oligoasthenospermia (D) Luteal phase defect
184. Absence of fructose in seminal fluid suggests
- (A) Congenital absence of seminal vesicle
(B) Partial duct obstruction
(C) None of the above
(D) Both (A) and (B)

185. The major contribution to human seminal fluid is
(A) Testes (B) Seminal vesicle
(C) Prostate (D) Bulbourethral and urethral glands
186. What is raised in dysgerminoma?
(A) AFP (B) LDH
(C) HCG (D) CA-A 19-9
187. Marker for granulosa cell tumor is
(A) CA 19-9 (B) Ca 50
(C) Inhibin (D) AFP
188. Sex cord stromal tumor of the ovary includes all, except
(A) Luteoma (B) Gynandroblastoma
(C) Sertoli-Leydig cell tumor (D) Thecoma-fibroma
189. Luteal cysts are associated with all, except
(A) Gestational trophoblastic tumor (B) Clomiphene administration
(C) Bilaterality (D) Use of OCPs
190. Surgical staging includes all, except
(A) Peritoneal washing (B) Peritoneal biopsy
(C) Omental biopsy (D) Palpation of organs
191. Complications of TVT (sling procedure for SUI) are all, except
(A) Injury to bladder in about 7%
(B) Sling erosion with (Gore-Tex)
(C) Overactive bladder in 7%
(D) Obturator nerve injury in about 10%
192. Endometrial hyperplasia is seen in
(A) Endodermal sinus tumor (B) Dysgerminoma
(C) PCOD (D) Ca fallopian tube
193. Lymph nodes that are not involved in Ca endometrium are
(A) Para-aortic (B) Presacral
(C) Inferior mesenteric (D) Inguinal
194. Ca endometrium with positive superficial inguinal lymph node is classified as stage
(A) I (B) II
(C) III (D) IV

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195. Primary carcinoma body uterus are all of the following types, except
(A) Adenocarcinoma (B) Adenosquamous carcinoma
(C) Clear cell Ca (D) Large cell keratinising type
196. The most common ovarian tumor in less than 20 years is
(A) Epithelial tumor (B) Germ cell tumor
(C) Metastatic tumor (D) Sexcord stromal tumor
197. Which of the following is the most radiosensitive ovarian tumor?
(A) Dysgerminoma (B) Dermoid cyst
(C) Serous cystadenoma (D) Endodermal sinus tumor
198. According to WHO classification of ovarian tumor, Brenner tumor of ovary belongs to
(A) Epithelial tumor (B) Sexcord stromal tumor
(C) Germ cell tumor (D) Metastatic tumor
199. Chemotherapy drug is effective in the treatment of epithelial ovarian cancer, except
(A) Carboplatin (B) Folic acid
(C) Cyclophosphamide (D) Methotrexate
200. The most common pure germ cell tumor of ovary is
(A) Choriocarcinoma (B) Dysgerminoma
(C) Embryonal cell tumor (D) Malignant teratoma
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