

FIRST YEAR THEORY EXAM– FEBRUARY 2016

PAPER III – MATERNAL & CHILD HEALTH

QP CODE: 434003

Time: Three hours

Maximum marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios (**40 Marks**).
- **Part B** will have Objective type EMQs (**Extended Matching Questions**) (**60 Marks**).
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English alphabets **A, B, C, D** and so on.

Example:
3. THEME–COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6Marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

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

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

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

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

❖ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

❖ Each option may be used more than once. Some options may not be used at all.

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. You are the PHC Medical officer and you are in charge of the labour room. The following are some of the patients who were brought to you in labour. Answer the questions below regarding each of these patients: **(Total 20 Marks)**

A. 28 years old Mrs. Renganayaki has come to the labour room at 38⁺⁴ weeks gestation in the 2nd stage of labour. This is her second pregnancy. Her first child was delivered by a caesarian section 18 months ago. How will you manage her? **(5 Marks)**

B. 30 year old Mrs. Kundal was admitted in the labour room at 39 weeks gestation and she is getting contractions every 3 minutes lasting for 45 seconds. The nurse told you that she is having a high fever with 103° F. What are the common causes and clinical features of the intrapartum fever and how will you manage them? **(5 Marks)**

C. Mrs. Grace, a primigravida got admitted today morning. Your ANM was monitoring her and told you about the progression of labour. You have decided to augment the labour using oxytocin. Explain i) how you will augment labour using oxytocin. ii) What precautions you will take before augmenting labour with oxytocin and iii) how will you monitor Mrs. Grace and the fetus once you start oxytocin? **(5 Marks)**

D. You got a call from the nurse saying that Mrs. Rosy, a primigravida, who is admitted in the labour room has fetal distress.

1. List the features of fetal distress. **(2 Marks)**

2. You did a per vaginal examination. Mention how you will manage Mrs. Rosy if the following were her PV findings. **(3 Marks)**

a) If the cord is felt below the Vertex (Cord prolapse)

b) If the cervix was fully dilated and the fetal head was 0/5 above symphysis pubis and head was at 0 station and liquor was meconium stained.

c) If cervix was 5 cm dilated, head was 2/5 palpable above symphysis pubis and head was at -1 station and the liquor was meconium stained.

2. Answer the following questions on vaccination. **(Total 20 Marks)**

A. Mrs. Saroja had a home delivery 7 days ago. Her newborn baby has received no vaccines so far and has been brought for vaccination. Baby has no other problems. You told Mrs. Saroja that you will give BCG vaccine for the baby. The nursing student posted with you is asking the following questions. Kindly answer them. **(4 Marks)**

1. What type of vaccine is it?

2. What is the ideal time to give the vaccine?

3. What is the dosage?

4. What is the route of administration?

B. Mrs. Saroja asked you about the next vaccine her baby need to have. You told her to come for DPT vaccine. Answer her questions about DPT vaccine: **(4 Marks)**

1. What type of vaccine is it?
2. What is the recommended schedule for this vaccine?
3. What is the dose of the vaccine?
4. What is the route of administration?

C. 10 year old Sumathi has been brought with dog bite. You gave wound care and categorized the wound as Category III bite. She never had any rabies vaccine before. i) What is the post exposure prophylaxis you will give Sumathi apart from wound care? Mention the doses also. ii) If it were a Category II bite, what post exposure prophylaxis will you give? **(4 Marks)**

D. Your nursing student had the following doubt about passive immunization. Kindly clarify her doubts. **(4 Marks)**

1. What is passive immunization?
2. What are its characteristics?
3. To whom is it useful?
4. Name the 3 passive immunization agents available.

E. Name 4 adverse reactions that can follow immunization, the vaccine that can cause them and their management. **(4 Marks)**

PART – B

EXTENDED MATCHING QUESTIONS

(ANSWER ALL QUESTIONS)

1. THEME: BLEEDING IN PREGNANCY [QUESTIONS. 1(i)-1(vi)] (Total: 6 Marks)
From the options ‘A to L’ given below, choose the best answer for the questions 1(i) – 1(vi)

Options:

- | | |
|-------------------------------|-------------------------------|
| A. Threatened abortion | G. Inevitable abortion |
| B. Ectopic pregnancy | H. Abruptio placenta |
| C. Placenta praevia | I. Complete abortion |
| D. Incomplete abortion | J. Normal labour |
| E. Molar pregnancy | K. Delayed period |
| F. Uterine rupture | L. Preterm labour |

Questions: Mark the most likely diagnosis for the following patients:

1(i). Mrs. Leela who is 10 week pregnant has come with bleeding PV. Speculum examination showed bleeding. Her uterus corresponds to 14 weeks and her cervix is dilated. The most likely diagnosis is

- 1(ii).** Mrs. Radika is 12 week pregnant and has come with bleeding PV with clots. Uterus is around 8 week size and soft. Speculum examination shows a closed cervix. The diagnosis is
- 1(iii).** Mrs. Balan who is 12 week pregnant has come with bleeding PV. Uterus is corresponding to dates and cervix was dilated. The diagnosis is
- 1(iv).** Mrs. Dutta who is 14 weeks pregnant came with bleeding PV. Uterus is corresponding to dates and soft. On speculum examination you notice bleeding from a closed cervix. The diagnosis is
- 1(v).** Mrs. Fatima who is 12 week pregnant has come with bleeding PV. Her uterus is 9 week size and soft, speculum examination showed bleeding from cervix and cervical os is open. The diagnosis is
- 1(vi).** Mrs. Geeta has missed her period 1 month ago and today came with bleeding PV. On examination, uterus was not enlarged. She had tender adnexal mass on the left side and the fornix was tender. The most likely diagnosis is

2. THEME: OBSTETRIC DEFINITIONS [QUESTIONS 2(i) – 2(vi)] (6 Marks)
From the options 'A to J' given below, choose the best answer for questions 2(i)–2(vi)

Options:

- | | |
|---|---|
| A. G ₃ P ₀ L ₀ A ₂ | F. Grand Multigravida |
| B. G ₂ P ₁ L ₀ A ₁ | G. G ₂ P ₀ L ₀ A ₁ |
| C. Nullipara | H. G ₃ P ₂ L ₂ A ₀ |
| D. G ₃ P ₁ L ₂ A ₁ | I. Nulligravida |
| E. G ₃ P ₁ L ₀ A ₁ | J. Grand multipara |

Questions:

- 2(i).** Mrs. Yesodha is married for 1 year. 6 months ago she had an abortion. Her obstetric score is
- 2(ii).** Mrs. Mumtaj has come for ANC. She delivered twin girls during her first pregnancy. She had an abortion 9 months ago. This is her third pregnancy. Her obstetric score is
- 2(iii).** Mrs. Xavier has come for ANC. She had an intrauterine death (IUD) at 32 weeks during her 1st pregnancy. 8 months ago she had an abortion and now she has conceived again. What is her obstetric score?
- 2(iv).** Mrs. Suresh has come for ANC. During her first pregnancy she had an abortion at 20 weeks. Her obstetric score is
- 2(v).** Mrs. Anil has come for ANC. This is her third pregnancy and her first 2 children are alive and healthy. Her obstetric score is
- 2(vi).** Mrs. Rani is married for 2 years. She has never conceived. She is a

3. THEME: POSTNATAL PROBLEMS [QUESTIONS 3(i) – 3(vi)] (6 Marks)
From the options 'A to P' given below, choose the best answer for questions 3(i)–3(vi)

Options:

- | | |
|---|--|
| A. Primary postpartum hemorrhage | I. Acute pyelonephritis |
| B. 7 gm/dl | J. 9 gm/dl |
| C. Deep vein thrombosis | K. Tertiary postpartum hemorrhage |
| D. Cystitis | L. Intravenous ceftriaxone |
| E. Oral amoxicillin | M. Limb Claudication |
| F. Cellulitis of the lower limbs | N. Calcium deficiency |
| G. Secondary postpartum hemorrhage | O. Oral metronidazole |
| H. 5 gm/ dl | P. Intravenous Amikacin |

Questions:

- 3(i).** Mrs. Subedha presents with excessive bleeding PV after 72 hours of delivery. She has
- 3(ii).** Mrs. Elizabeth is in her postpartum period. Her bleeding is stopped but she is looking pale. The Hb level below which you will transfuse her with blood is
- 3(iii).** Mrs. Ranjitham is has fever in her postpartum period. She has spiking fever despite antibiotics and she has calf muscle tenderness. The most likely diagnosis is
- 3(iv).** Mrs. Kothi has fever and lower abdominal pain during her postpartum period. On examination, she has suprapubic tenderness. The most likely diagnosis is

Mrs. Murugan has high fever, nausea and vomiting during her postpartum period. On examination she has right loin tenderness.

- 3(v).** The most likely diagnosis is
- 3(vi).** The treatment of choice for Mrs. Murugan is

4. THEME: MEDICAL DISEASES IN PREGNANCY [QUESTIONS 4(i) – 4(vi)] (Total: 6 Marks)

From the options 'A to N' given below, choose the best answer for questions 4(i)–4(vi)

Options:

- | | |
|--------------------------------|---|
| A. 92 mg/dl | H. Continued at the same dose |
| B. Increased | I. Intrauterine growth retardation |
| C. Folic acid | J. Ferrous sulphate |
| D. Carbimazole | K. 28 Kg/m ² |
| E. 96 mg/dl | L. Macrosomia |
| F. 30 Kg/m ² | M. Stopped |
| G. Decreased | N. Propylthiouracil |

Questions:

Mrs. Lubna, a primigravida comes to you for antenatal checkup .

- 4(i). You have done the fasting blood sugar for Mrs. Lubna. The fasting blood sugar level above which you label her as having gestational diabetes (GDM) is
- 4(ii). One of the risk factors for Mrs. Lubna to have GDM is BMI more than
- 4(iii). The drug you will give Mrs. Lubna to prevent the development of neural tube defect is
- 4(iv). Mrs. Saroja who is under your care has gestational diabetes. One of the important complications her baby can develop if her blood sugars are not well controlled is
- 4(v). Mrs. Kannammal, a known case of thyrotoxicosis is pregnant and has come for antenatal care to you. The drug you will avoid in her during her 1st trimester is
- 4(vi). Mrs. Gopal, a known case of hypothyroid on eltroxine is pregnant and has come to you for antenatal checkup. The dose of eltroxine for her must be

5. THEME: CONTRACEPTION [QUESTIONS 5(i) – 5(vi)]

(6 Marks)

From the options ‘A to G’ given below, choose the best answer for questions 5(i) – 5(vi)

Options:

- | | |
|-------------------------------------|--------------------------------------|
| A. Increase | E. Progestin only pill |
| B. Combined Oral contraceptive pill | F. Intrauterine contraceptive device |
| C. Estrogen only pill | G. Decrease |
| D. Tubectomy | |

Questions:

- 5(i). Mrs. Kanchana is on amitriptyline for her depression. She is requesting oral contraceptive pill (OCP). OCP will _____ the effect of amitriptyline.
- 5(ii). Mrs. Lakshmi is on clofibrate for her hyperlipidemia. She is requesting OCP for contraception. OCP will _____ the effect of clofibrate.
- 5(iii). Mrs. Yesodha is on Rifampicin for her TB pleural effusion. She is requesting for OCP. Rifampicin will _____ the effect of OCP.
- 5(iv). Mrs. Malathi delivered 2 months ago and she is breast feeding her infant. The OCP of choice for her is
- 5(v). Newly married Mrs. Osler is requesting for a contraception. The ideal contraception for her would be
- 5(vi). Mrs. Saroja who delivered her 1st child 6 weeks ago has come for contraception. She is requesting for a temporary contraception. The ideal contraception for her would be

6. THEME: NEONATAL SCREENING [QUESTIONS 6(i) – 6(vi)] (Total: 6 Marks)
From the options ‘A to L’ given below, choose the best answer for questions 6(i) – 6(vi)

Options:

- | | |
|--|--|
| A. Hypothyroidism | F. Estimation of total and direct bilirubin |
| B. 6 months | G. Puloximetry |
| C. Auditory brainstem response audiometry | H. 12 months |
| D. Semi quantitative florescent screening | I. TSH estimation |
| E. Phenylketonuria | J. Anti-thyroid antibody |
| | K. Otoacoustic emission |
| | L. Echocardiogram |

Questions:

You are examining the newborn of Mrs. Yesodha. The baby has large fontanelles and wide sutures, macroglossia, with umbilical hernia.

- 6(i).** The most likely problem the newborn has is
- 6(ii).** The investigation you will do for this baby is
- 6(iii).** Auditory stimulation before what age is critical for the development of speech and language.
- 6(iv).** While screening a neonate for hearing, which screening tool has the additional advantage of identifying neonates with auditory neuropathy?
- 6(v).** Which screening tool is recommended for screening a neonate for congenital heart disease?
- 6(vi).** The screening tool used to detect Glucose 6 Dehydrogenase Deficiency is

7. THEME: NEONATAL RESUSCITATION [QUESTIONS 7(i) – 7(vi)] (Total: 6 Marks)
From the options ‘A to K’ given below, choose the best answer for the questions 7(i) – 7(vi)

Options:

- | | |
|---|-------------------------------------|
| A. 1 minute | G. Intubation of the newborn |
| B. Initiate positive pressure ventilation | H. 6/10 |
| C. 8/10 | I. 3 minutes |
| D. Dry the baby and stimulate | J. 5 minutes |
| E. Consider intubation and chest compression | K. 10/10 |
| F. Administration of positive pressure ventilation and chest compression | |

Questions

- 7(i).** If you are a person called for resuscitating the newborn, you must be well equipped in

- 7(ii). When you went for neonatal resuscitation, the following were the features of the baby. Baby was crying, Heart rate was 120/ minute, baby was fully flexed and had grimace and peripheral cyanosis. What is the APGAR score?
- 7(iii). The time allowed for completing the initial steps in the neonatal resuscitation is approximately
- 7(iv). You were called for a neonatal resuscitation. When you counted the heart rate, it was 70/min. What will you do?
- 7(v). After sometime, the heart rate was 50 /min. What will you do now?
- 7(vi). During another occasion, when you went for neonatal resuscitation, the baby was crying vigorously and the tone was good. What will you do now?

8. THEME: BREASTFEEDING [QUESTIONS 8(i) – 8(vi)] (Total: 6 Marks)
From the options 'A and L' given below, choose the best answer for questions 8(i)-8(vi).

Options:

- | | |
|-----------------------|-------------------------------|
| A. 1 year | G. Lactobacillus bifidus |
| B. Uterine malignancy | H. 2 years |
| C. Ovarian malignancy | I. Escherichia Coli |
| D. Colostrum | J. Increase |
| E. Decrease | K. Giving Hepatitis B vaccine |
| F. True | L. False |

Questions

- 8(i). The maximum time till when breast feeding can be continued for a child is
- 8(ii). One of the factors in the breast milk helps in the growth of this bacterium in the gut, which is useful for digestion.
- 8(iii). The risk of this cancer is reduced in a woman who breast feeds her infant.
- 8(iv). This is called the “The first immunization” of the baby.
- 8(v). For a baby who has been given colostrum, the level of bilirubin in his/her body will
- 8(vi). An exclusively breastfed infant needs extra water. This statement is

9. THEME: NEONATAL PROBLEMS [9(i) – 9(vi)] (Total: 6 Marks)
From the options 'A and I' given below, choose the best answer for questions 9(i)-9(vi)

Options:

- | | |
|------------------------------|--------------------------------------|
| A. Normal | F. Pyloric stenosis |
| B. Abnormal | G. Cotton |
| C. Jaundice on Day 3 of life | H. Regurgitation of milk after feeds |
| D. Bilious vomiting | I. Intestinal obstruc |
| E. Nylon | |

Questions:

- 9(i). 36 hours old Sumathi’s baby has not passed urine. This is

- 9(ii).** The same baby has not passed meconium yet. This is
- 9(iii).** This is one of the “Red flags” in the newborn.
- 9(iv).** Mrs. Koyal’s baby is having nappy rash. The nappy you would recommend for her must be made up of
- 9(v).** You are teaching the Medical students about vomiting in the Newborn. One of the dangerous causes of vomiting in the newborn is
- 9(vi).** Mrs. Kalpana’s newborn baby is having bilious vomiting. The commonest cause of bilious vomiting in the newborn is

10. THEME: DEVELOPMENTAL DELAY [QUESTIONS 10(i) –10(vi)] (Total: 6 Marks)
For the developmental milestones given in 10(i)-10(vi), choose the age at which they are usually attained from the option given from A to J

Options

- | | |
|--------------------|---------------------|
| A. 1 month | F. 13 months |
| B. 2 months | G. 2 years |
| C. 4 months | H. 3 years |
| D. 6 months | I. 4 years |
| E. 9 months | J. 5 years |

Questions

- 10 (i).** You notice that Arun can draw and copy a square. The normal age at which children attain this milestone is
- 10 (ii).** You notice that Kiruba can walk backwards. The minimum developmental age of kiruba is
- 10 (iii).** You did a developmental assessment on Shalini. You noticed that Shalini can roll over from supine to prone position. The minimum developmental age of Shalini is
- 10 (iv).** You notice that your nephew Suresh can unbutton his shirt himself. The minimum age of Suresh is
- 10 (v).** Sangeetha was brought to you since she had diarrhea. You noticed that she can walk without support. Her age is around
- 10 (vi)** Mrs. Kokila brought her infant to you since she had an upper respiratory infection. You did a developmental assessment on her. Her eyes were following objects to midline. The minimum age of Mrs. Kokila’s daughter is
