# GENESIS

Post-Graduation Medical Orientation Centre 230, New Elephant Road (4<sup>th</sup> floor), Katabon More, Dhaka-1205 Phone: 01404 432 530, 01404 432 515

### FCPS PART-I MOCK TEST-I

**SUBJECT**: Gynae

PAPER : III

Exam Date : **Mock-I** : **13-12-20/17-12-20/20-12-20** 

Mock-II : 25-12-20/26-12-20/27-12-20

Exam Time : 2.30.pm-4.00pm

Total Number: 100

Question 26-50 based on single answer

### 1. Red degeneration of leiomyoma

- a) Occurs during pregnancy and puerperium
- b) Diffusely stained with salmonpil
- c) Painless
- d) Leukopenia
- e) Fishy smell

#### 2. Autosomal recessive disorders

- a) Manifest only in homozygous state
- b) Consanguinity marriage is risk factor for each pattern
- c) Disease appear at early life
- d) Females are more affected
- e) Hemophilia-B is a autosomal disease

#### 3. Tumor markers

- a) Are reliable for prognosis
- b) Surest investigation of malignancy
- c) Used for screening test
- d) Increased in inflamatory condition
- e) May be raised in pregnancy

### 4. Disease mediated by T-cell

- a) Insulin dependent DM
- b) Goodpasture syndrome
- c) Chrons disease
- d) Insulin independent DM
- e) Multiple sclerosis

### 5. Premalignant condition

- a) Bowen's disease
- b) Endometrial hyperplasia
- c) Peptic ulcer
- d) Cervical erosion
- e) Osteitisdeformans

### 6. Secondary syphilis

- a) Condylomatalata
- b) Generalized lymphadenopathy
- c) Chancre
- d) Aortitis
- e) Maculopapular rash

### 7. Chance of fetal affection according to trimester

- a) Toxoplasma  $\rightarrow 1^{st}$  trimester
- b) Rubella → 1<sup>st</sup> trimester
- c) CMV→ Throughout pregnancy
- d) Varciella→ 3<sup>rd</sup> trimester
- e) Parva virus  $\rightarrow 2^{nd}$  trimester

#### 8. Congenital rubella syndrome

- a) Patent ductusarteriosus
- b) Microcephaly
- c) Osteoarthropathy
- d) Sensory neural deafness
- e) Cerebral calcification

### 9. Transmission of pathogens through breast milk

- a) Candida albicans
- b) Hepatitis B virus
- c) N. gonorrhoea
- d) Listeria monocytogenes
- e) HIV

### 10. Preformed mediators

- a) Prostaglandins
- b) Cytokines
- c) Histamin
- d) Serotonin
- e) Lysosomalenzymes

### 11. Non-cellular component of cell mediated immunity

- a) IL-4
- b) IL-1
- c) IL-γ
- d) IL-5
- e) IL-2

### 12. Alfa feto protein increased in

- a) Dysgerminoma
- b) Embryonal carcinoma
- c) Polyembryoma
- d) Choriocarcinoma
- e) Choriocarcinoma

### 13. Example of type-II hypersensitivity

- a) Pre- eclampsia
- b) Pernicious anaemia
- c) Cryoglobulinemia
- d) Graft rejection
- e) Reactive arthritis

### 14. Risk factors for endometrial hyperplasia

- a) Nulliparity
- b) Combined oral contraceptive pill
- c) Tamoxifen therapy
- d) PCOS
- e) Menopause

### 15. Dystrophic calcification

- a) Uterine fibroid
- b) Oligodendroglioma
- c) Hyperparathyraidism
- d) Renal failure
- e) Calcinosis cutis

### 16. Unilateral ovarian tumor

- a) Yolk sac tumor
- b) Theca lutein cyst
- c) Krukenberg tumor
- d) Luteoma
- e) Mucinous cyst adenoma

### 17.Condylomaacuminata

- a) Caused by HPV-6,11
- b) Flourishes in pregnancy
- c) Anterior forachette is the common site
- d) Recurrence is common
- e) Can be treated by podophyllum resin in 1st trimester

### 18. Hormone producing tumor

- a) Granulosa cell tumor
- b) Adneoblastoma
- c) Dermoid cyst
- d) Brenner tumor
- e) Fibroma

### 19. Following are the methods of prevention of DVT

- a) Use of stocking
- b) Early mobilization
- c) Use of B-blocker
- d) Use of heparin
- e) Blood transfusion

### 20. Cells of granuloma

- a) Histiocytes
- b) Platelets
- c) Lymphocyte
- d) Langerhance cell
- e) Fibroblast

### 21. Complete mole depends on

- a) Maternal age
- b) Carotene deficiency
- c) Oral contraceptive pill
- d) Vit-A- deficiency
- e) Menstrual history

### 22. Hydrogen peroxide can be neutralized in our body

- a) Catalase
- b) Myeloperoxidase
- c) Superoxide dismutase
- d) Glucose-6- phosphate dehydrogenase
- e) Glutathione peroxidase

### 23. Malignant trophoblastic disease

- a) Placental site trophoblastic tumor
- b) Hydatidiform mole
- c) Invasive mole
- d) Choriocarcinoma
- e) Placental site nodule

### 24. Amyloidosis

- a) Is a type of coagulativenecrosis
- b) Granulation tissue is a feature of amyloidosis
- c) The amyloid deposits around the blood vessels
- d) Renal failure is the terminal manifestation
- e) Rarely affects the liver

### 25. Wound healing

- a) Is deluged by the presence of dead tissue
- b) Collagen is a polysaccharide
- c) Nerve cell can regenerate
- d) Healing by primary intension is fast
- e) Collagen has a high content of hydroxyproline& praline

## Each question below contains five suggested answers- choose the <u>one best</u> response to each question (26-50)

### 26. Neisseria gonorrhoeae

- a) Can cross intake mucosa
- b) Lipopolysaccharide is the important virutentfaetor
- c) Newborn are safe from this organism
- d) In women can cause ectopic pregnancy
- e) Doxycyclin is the drug of choice

### 27. Phases of life when vaginal defence remain petent

- a) During menstruation
- b) Following childbirth
- c) From puberty to menupause
- d) Following 10 days of births till puberty
- e) During menopause

### 28. Dysplasia

- a) Irreversibility
- b) Encountered in connective tissue
- c) Neclear cytoplasmic ratio is high
- d) Mitotic figure are confined to basal lager
- e) Can be invasive

#### 29. Genital warts

- a) Caused by HPV type-6,11
- b) Vagina is mostly involved
- c) Single in number
- d) HPV-vaccine can present 50% cases
- e) Most oftenly become malignant

### 30. HIV

- a) Belongs to retrovirus family
- b) Clinical latency is 3-5 years
- c) Impairs humoral immunity
- d) The virus destroyed by heating at 66°c for 30min
- e) Men are affected more than women

### 31. Which activator is most efficient for activation of classic pathway of complement

- a) Ig G
- b) Ig M
- c) Ig A
- d) Cobra nenome
- e) Endotoxin

### 32. Which IgG doesn't cross placenta

- a) IgG
- b) Ig G<sub>2</sub>
- c) Ig G<sub>3</sub>
- d) Ig G<sub>4</sub>
- e) Ig G<sub>5</sub>

### 33. In irreversible cell injury

- a) ATP depletion
- b) Decreased protein systhesis
- c) Increased pH
- d) Cell membrane damage
- e) Shrinkage of endoplasmic reticulum

### 34. Physiologic defence of vagina

- a) Cytokines
- b) Lactobacillus
- c) Acidity
- d) Estrogen
- e) Stratified epithelium

### 35.Treponemapallidum

- a) Non-motile rods
- b) Can't penetrate intact mucosa
- c) Incubation period is 9-90 days
- d) Transplacental transmission isn't occur
- e) Can cause infertility

### 36. Primary sites of pelvic tuberculosis

- a) Vulva
- b) Ovaries
- c) Cervix
- d) Endometrium
- e) Fallopian tubes

#### 37. Leiomyoma

- a) Involve striated muscle
- b) True capsulated
- c) Rapid growth
- d) May causes hyperglycemia
- e) Associated ē follicular cyst of ovary

### 38. Most common cause of genital ulcer

- a) Scabies
- b) Herpes simplex virus
- c) HIV
- d) Trauma
- e) Candidiasis

### 39. Ectopic pregnancy

- a) Ampulla is the most dangerous site
- b) Common in left side
- c) Pain is the most constant feature
- d) Acute ectopic is more common than chronic ectopic
- e) Ovary canaccomdate the pregnancy up to 6 weeks

### 40. Simple endometrial hyperplasia

- a) True hyperplasia
- b) Cellular atypia
- c) 个 cellular activity
- d) Glands shows no secretory activity
- e) Glandular: stromal ratio is decreased

### 41. FNAC is most commonly done

- a) Para-aortic lymph node
- b) Pancreas
- c) Cervix
- d) Testis
- e) Lymph node

### 42. Cervical intraepithelial neoplasia

- a) Perversion of columnar cell differentiation & maturation
- b) Rete ridge present
- c) CIN-II & CIN-III is precancerous
- d) Progress to invasive carcinoma in more than 20-30% case
- e) Glands near involved

#### 43. Brenner tumor

- a) Bilateral
- b) Hugesize
- c) Usually associated with fibroma
- d) Hormone producing
- e) Pseudomyxomaperitonei is a complication

### 44. Lichen sclerosis

- a) Autoimmune mediated dermatitis
- b) Commonest white lesion of vagina
- c) Common in reproductive age
- d) White glistening sheets ē ill-defined margin
- e) Is a forerunner of malignant change

### 45.Pagets disease

- a) Squamous cell intraepithelial neoplasia
- b) Corps ronds found in paget's disease
- c) Tends to recur
- d) Associated ē HPV-4,6
- e) Common in postmenopausal women

### 46. Most important laparoscopic findings of Chlamydia infection

- a) Pyosalpinx
- b) Violin string like adhesion
- c) Abcess
- d) Purulent exudates from fimbrial ends
- e) Immobile tube

### 47. Cervical ectopy

- a) Cervical columnar epithelium is replaced by squamous epithelium
- b) Beneath the epithelium a tissue often shows round cell infiltration
- c) Static condition
- d) Congenital ectopy may occur due to maternal  $\beta\text{-}$  HCG
- e) Common in post-menopausal women

### 48. Gestational trophoblastic disease

- a) Complete mole is more common than partial mole
- b) More likely to occur in 1st pregnancy
- c) IUCD should be the choice of contraception
- d) Partial mole has triploid karyotype
- e) All chromosomes are maternal origin

### 49. Highly radiosensitive tumors

- a) Hepatoma
- b) Squamous cell carcinoma
- c) Hypernephroma
- d) Botryoides
- e) Rhabdomyosarcoma

### 50. Shock

- a) Is associated with bradycardia
- b) Endotoxic shock can causes kidney damage only by direct damage to renal epithelium
- c) Tissue hypoxia leads to metabolic acidosis
- d) Hypovolemic shock follows haemorrhage of 5% or more of blood volume
- e) Metabolic rate is increased

### Gynae-Mock-I, Paper-III

- 1. TTFFT [Ref: Jeffcoate7<sup>th</sup>/Page-592)
- 2. TTFFF [Re: Robbin's 9<sup>th</sup>/Page-141]
- 3. TFTFT [Re: Robbin's 9<sup>th</sup>/Page-337]
- 4. TFFFT [Re: Robbin's 9<sup>th</sup>/P-221, Lange 14<sup>th</sup>/P-57]
- 5. TTFFT [Ref: Robbin's9<sup>th</sup>/Page-279]
- 6. TTFFT [Ref: Jeffcoate7<sup>th</sup>/Page-122]
- 7. FTTFT [Ref: Obs.dutta8<sup>th</sup>/Page-349]
- 8. TFTTF [Ref: Obs. dutta8<sup>th</sup>/Page-348]
- 9. TTFFT [Ref: Obs. dutta8<sup>th</sup>/Page-34]
- 10. FFTTT [Ref: Robbin's9<sup>th</sup>/Page-83]
- 11. FTTFT [Ref: Lange14<sup>th</sup>/P-492, Robbin's 9<sup>th</sup>/P-198]
- 12. FTTFF [Ref: Robbin's 9th/Page-337]
- 13. FTFTF [Ref: Robbin's9<sup>th</sup>/Page-206]
- 14. TFTTF [Ref: Jeffcoate7<sup>th</sup>/Page-501]
- 15. TTFFT [Ref: Robbin's9<sup>th</sup>/Page-65]
- 16. TFFTT [Ref: Jeffcote7<sup>th</sup>/Chapt-35]
- 17. TTFTF [Ref: Gynae.dutta.7<sup>th</sup>/Page-128]
- 18. TTTFF [Ref: Jeffcoate7<sup>th</sup>/Chapt-35]
- 19. TTFTF [Ref: Robbin's 9<sup>th</sup>/Page-123]
- 20. TFTFT [Ref: Khaleque's/Page-39]
- 21. TTFTF [Ref: Jeffcoate7<sup>th</sup>/Page-190]
- 22. TFFFT [Ref: Robbin's9<sup>th</sup>/Page-47-49]
- 23. TFTTF [Ref: Jeffcoate9<sup>th</sup>/Page-189]
- 24. FFTTF [Ref: Robbin's9<sup>th</sup>/Page-259]
- 25. TFFTT [Ref: Robbin's 9th/Page-106]
- 26. D [Ref: Jeffcoate 7<sup>th</sup>/P-120]
- 27. C [Ref: GynaeDatta/7<sup>th</sup> /P-105]
- 28. C [Ref: Robbins/9<sup>th</sup>/P-271]
- 29. A [Ref: Gynaedutta 7<sup>th</sup>/P-105]
- 30. HIV A [Ref: Jeffcoate 7<sup>th</sup>/P-126]
- 31. B [Ref: Prof.akram5<sup>th</sup>/Page-143]
- 32. B [Ref: Lange 14th/Page-528]
- 33.D [Ref: Robbin's9th/Page-41]
- 34.D [Ref: Gynae.dutta7<sup>th</sup>/Page-105]
- 35. C [Ref: Jeffcoate7<sup>th</sup>/Page-367]
- 36. E [Ref: Gynaedutta7<sup>th</sup>/Page-113]
- 37. E [Ref: Jeffcoate7<sup>th</sup>/Page-554]
- 38. B [Ref: Jeffcoate7<sup>th</sup>/Page-374]
- 39. C[Ref: Jeffcoate7th/Page-157]
- 40.D [Ref: Jeffcoate7<sup>th</sup>/Page-501]
- 41. E [Ref: Robbins 9th/Page-333]
- 42. C [Ref: Gynaedutta 7<sup>th</sup>/Page-262, 518]
- 43. C [Ref: Jeffcoate7<sup>th</sup>/Page-624]
- 44. A [Ref: Gynaedutta 7<sup>th</sup>/Page-211]
- 45. C [Ref: Jeffcoate7<sup>th</sup>/P-483, 487]
- 46. B [Ref: Gynae. dutta7<sup>th</sup>/Page-123]
- 47. B [Ref: Jeffcoate7<sup>th</sup>/Page-490]
- 48. D [Ref: Jeffcoate7<sup>th</sup>/Page-188]
- 49. B [Ref: Baily & love's 26<sup>th</sup>/Page-138-140]
- 50. C [Ref: Baily & love's 27<sup>th</sup>/Page-14-15]