MCQ.1 A couple presented in OPD with H/0 infertility since last 2 years. Husband semen analysis was advised. What is WHO criterion for minimum sperm count in normal semen?
   a) 10 million.
   b) 20 million.
   c) 30 million.
   d) 40 million.
   e) 70 million.

Key: b

MCQ.2 A 23 years old primigravida presents with abdominal pain, syncope and vaginal spotting. Assessment reveals that she has an ectopic pregnancy. The most common site of pregnancy is:
   a) Ampulla.
   b) Isthmus.
   c) Fimbrial end.
   d) Abdomin.
   e) Cervix.

Key: a

MCQ.3 Mean age for menopause is:
   a) 40 years.
   b) 45 years.
   c) 51 years.
   d) 48 years.
   e) 39 years.

Key: c

MCQ.4 Second degree uterovaginal prolapse is characterized by:
   a) Complete protrusion of uterus outside introitus.
   b) Descent of genital tract within vagina.
   c) Descent of genital tract upto introitus.
   d) Descent of genital tract outside the introitus.
   e) Descent of cervix below the ischeal spines.

Key: d

MCQ.5 A 63 years old lady presents with abdominal mass and weight loss, was diagnosed as having an ovarian tumour. The most common ovarian tumour in this woman would be:
   a) Epithelial tumour.
   b) Germ cell tumour.
   c) Stromal tumour.
   d) Sex cord tumour.
   e) Trophoblastic tumour.

Key: a
MCQ.6 A young girl, 23 years old is presented with complaint of abdominal pain, menorrhagia and 18 weeks size mass arising from hypogastrium. The most likely diagnosis is:
   a) Endometriosis.
   b) Pelvic inflammatory disease.
   c) Ovarian cyst.
   d) Fibroid uterus.
   e) Mesenteric cyst.

Key: d

MCQ.7 A 25 years old school teacher Para 1 wants to use oral contraceptive pills for contraception. She is asking about the mode of action of oral contraceptive pills. The mechanism of action of oral contraceptive pills is:
   a) Inhibiting ovulation by suppression of serum FSH.
   b) Inducing endometrial atrophy.
   c) Increasing cervical mucous hostility.
   d) Inducing endometritis.
   e) Inhibiting prolactin.

Key: a

MCQ.8 Women complaining of milky whitish discharge with fishy odour. No history of itching. Most likely diagnosis is:
   a) Bacterial vaginosis.
   b) Trichomoniasis.
   c) Candidiasis.
   d) Malignancy.
   e) Urinary tract infection.

Key: a

MCQ.9 A young medical student has come to you with complaints of oligomenorrhea, hirsuitism and weight gain, ultrasound reveals bulky ovaries with sub-capsular cysts. Most likely diagnosis is:
   a) Ovarian cancer.
   b) Cushing’s syndrome.
   c) Polycystic ovarian disease.
   d) Diabetes mellitus.
   e) Pelvic inflammatory disease.

Key: c

MCQ.10 A 43 year old, lecturer has come to you with complaints of heavy but regular menstrual bleeding with flooding and clots. There is no anatomical reason for heavy flow. The most effective remedy for reducing her menstrual flow is:
   a) Tranexemic acid.
   b) Dilatation and Curettage.
   c) Depomedroxy progesterone acetate.
   d) Misoprostol.
   e) Ergometrine maleate.

Key: a
MCQ.11 A 39 years old women Para 6 has presented with complaint of post coital bleeding for the past three months. Your first investigation should be:
   a) Dilatation & Curettage.
   b) Cone biopsy of cervix.
   c) Pap smear.
   d) Colposcopy.
   e) Laparoscopy.

   Key: c

MCQ.12 A 28 years old woman has 14 weeks size irregular uterus. She does not complain of abdominal pain or menorrhagia. Her pap smear is normal. The best next step in her management would be:
   a) Continued observation.
   b) Endometrial biopsy.
   c) Hysterectomy.
   d) Pelvic ultrasonography.
   e) Laparoscopy.

   Key: d

MCQ.13 The most effective treatment of pruritis vulvae associated with atrophic vulvitis is:
   a) Antihistamines.
   b) Hydrocortisone.
   c) Alcohol injections.
   d) Tranquilizers.
   e) Topical estrogen therapy.

   Key: e

MCQ.14 The most common cause of rectovaginal fistula is:
   a) Obstetrical.
   b) Irradiation of the pelvis.
   c) Carcinoma.
   d) Crohn’s disease.
   e) Endometriosis.

   Key: a

MCQ.15 A 40 years old multiparous woman complains of involuntary loss of urine associated with coughing, laughing, lifting or standing. The history is most suggestive of:
   a) Fistula.
   b) Stress incontinence.
   c) Urge incontinence.
   d) Urethral diverticulum.
   e) Urinary tract infection.

   Key: b
MCQ.16 A 28 years old G3 P2 has presented with complaints of brownish vaginal discharge, passage of vesicles and excessive vomiting. Ultrasound scan shows snowstorm appearance in uterus with no fetus. The most likely diagnosis is:
   a) Septic induced abortion.
   b) Twin pregnancy.
   c) Gestational trophoblastic disease.
   d) Ectopic pregnancy.
   e) Fibroid uterus.

Key: c

MCQ.17 The maximum number of oogonia are formed at what age of female life:
   a) One month intrauterine.
   b) Five month intrauterine.
   c) At birth.
   d) At puberty.
   e) At 21 years of age.

Key: b

MCQ.18 Menarche usually occurs at age of:
   a) 8 and 10 years.
   b) 11 and 13 years.
   c) 14 and 16 years.
   d) 17 and 18 years.
   e) 18 and above.

Key: b

MCQ.19 The most common cause of vesicovaginal fistula (VVF) in under developed countries would be:
   a) Obstetrical injuries.
   b) Pelvic irradiation.
   c) Carcinoma.
   d) Haemorrhoidectomy.
   e) Operative injury.

Key: a

MCQ.20 A 28 year old patient complains of amenorrhea after having dilatation and curettage. The most likely diagnosis is:
   a) Kallman’s Syndrome.
   b) Turner’s Syndrome.
   c) Asherman’s Syndrome.
   d) Pelvic inflammatory disease.
   e) Anorexia nervosa.

Key: c
MCQ.21 A large cystic ovarian tumour is detected in a woman on routine antenatal check up. The most common complication she can encounter is:
   a) Torsion.
   b) Rupture.
   c) Haemorrhage.
   d) Degeneration.
   e) Infection.

Key: a

MCQ.22 Which of the following is used to take cervical smear:
   a) Colposcope.
   b) Vaginoscope.
   c) Ayre’s spatula.
   d) Laparoscope.
   e) Forceps.

Key: c

MCQ.23 Normal duration of menstrual cycle is:
   a) 1-3 days.
   b) 1-4 days.
   c) 2-7 days.
   d) 7-10 days.
   e) 1-2 days.

Key: c

MCQ.24 A 20 year old medical student presents with five years history of weight gain, irregular periods and worsening fascial hair. What is the most likely diagnosis?
   a) Polycystic ovarian disease.
   b) Hypothyroidism.
   c) Obesity.
   d) Cushing’s Syndrome.
   e) Nephrotic Syndrome.

Key: a

MCQ.25 A 28 years old woman with previous history of having baby with Down’s Syndrome is now 12 weeks pregnant. Which of the following would you suggest to her:
   a) Amniocentesis.
   b) Obstetric ultrasound.
   c) Chorionic villus sampling.
   d) Fetal blood sampling.
   e) Wait till eighteen weeks for detailed ultrasound and amniocentesis.

Key: c
MCQ.26  A newly married girl comes to gynae OPD with history of dysuria, burning, micturition and sore perineum. What is your likely diagnosis:
   a) Trichomonas vaginalis.
   b) Candida infection.
   c) Trauma due to coitus.
   d) Honey moon cystitis.
   e) Genital herpes.

Key: d

MCQ.27  Gonadotropin releasing hormone (GnRH) stimulates the release of:
   a) ACTH.
   b) Growth hormone.
   c) Leutinising Hormone (LH).
   d) Thyroid stimulating hormone (TSH).
   e) Opiate peptides.

Key: c

MCQ.28  Serum prolactin levels are highest in which of the following conditions:
   a) Menopause.
   b) Ovulation.
   c) Parturition.
   d) Sleep.
   e) Running.

Key: c

MCQ.29  Main uterine support is:
   a) Uterosacral ligaments.
   b) Round ligaments.
   c) Transverse cervical ligaments.
   d) Ovarian ligaments.
   e) Broad ligaments.

Key: c

MCQ.30  The most likely cause of abnormal uterine bleeding in 13 years old girl is:
   a) Uterine cancer.
   b) Ectopic pregnancy.
   c) Anovulation.
   d) Systemic bleeding diatheses.
   e) Trauma.

Key: c
MCQ.31  Which of the following pubertal event would occur even in the absence of ovarian estrogen production:
   a) Thelarche.
   b) Menarche.
   c) Pubarche.
   d) Skeletal growth.
   e) Vaginal cornification.

   Key: c

MCQ.32  58 years old woman has presented with complaints of postmenopausal bleeding for the past two weeks. The most essential investigation would be:
   a) Colposcopy.
   b) Pap smear.
   c) Cone biopsy.
   d) D & C (dilatation & Curettage).
   e) Hysteroscopy.

   Key: d

MCQ.33  The most common symptom of endometrial hyperplasia is:
   a) Vaginal discharge.
   b) Vaginal bleeding.
   c) Amenorrhea.
   d) Pelvic pain.
   e) Abdominal distention.

   Key: b

MCQ.34  56 years old woman has come to you with the complaints of hot flushes irritability, joint pains with lack of sleep. Most appropriate treatment would be:
   a) Hysterectomy.
   b) Vitamins.
   c) Combined oestrogen, progesterone preparations.
   d) Phytooestrogens.
   e) Selective estrogen receptor modulators (SERMS).

   Key: c

MCQ.35  Which of the following is used as an emergency contraceptive:
   a) Combined oral contraceptive pills.
   b) Progesterone only.
   c) Depoprovera.
   d) Levonorgestril (EM-Kit).
   e) Ergometrine.

   Key: d