Database of questions for the Medical Final Examination (LEK) Part 1

Obstetrics and gynecology

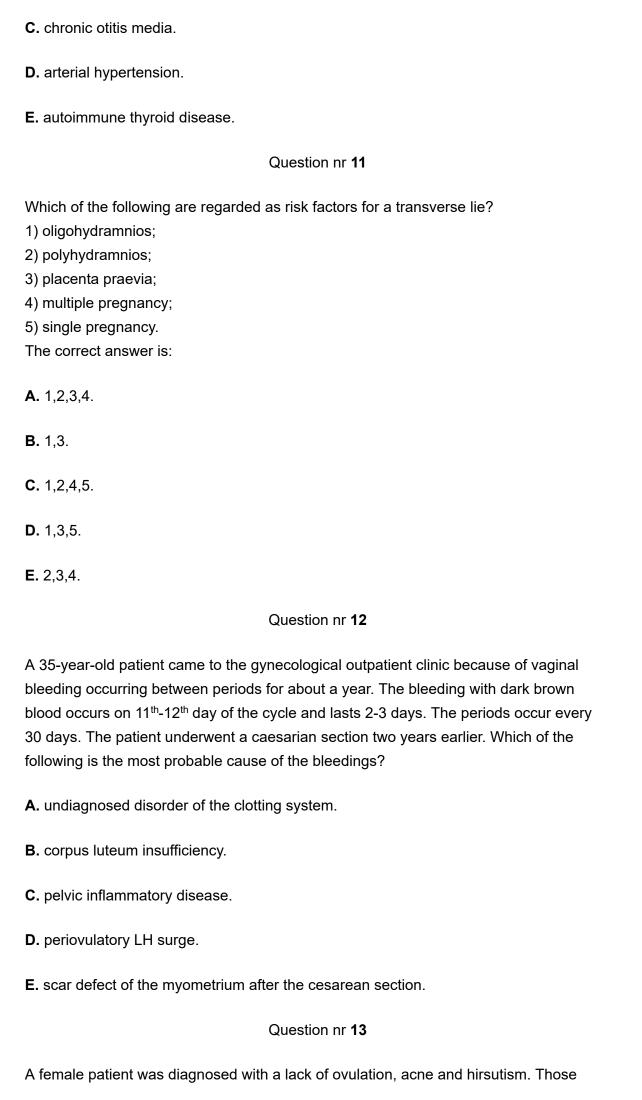
Modified 15.12.2023
Question nr 1
Symptoms of ovarian cancer <u>do not</u> include:
A. pain in the lower abdomen or pelvis.
B. oliguria.
C. increase in the abdominal circumference.
D. tympanites, abdominal distention.
E. urge incontinence.
Question nr 2
Which statement regarding the placenta is false ?
A. forms the afterbirth together with the umbilical cord and the amniotic sac.
B. its mass is approximately 500g.
C. fully formed placenta is not observed until the second half of the second trimester.
D. cotyledon is the morphological and structural unit of the placenta.
E. right umbilical vein undergoes atrophy in the early stage of foetal development.
Question nr 3
Which of the following are regarded as anatomical factors which can cause a

miscarriage?

- **A.** endometriosis in the lesser pelvis.
- **B.** congenital defects of the uterus.
- **C.** cervical incompetence.

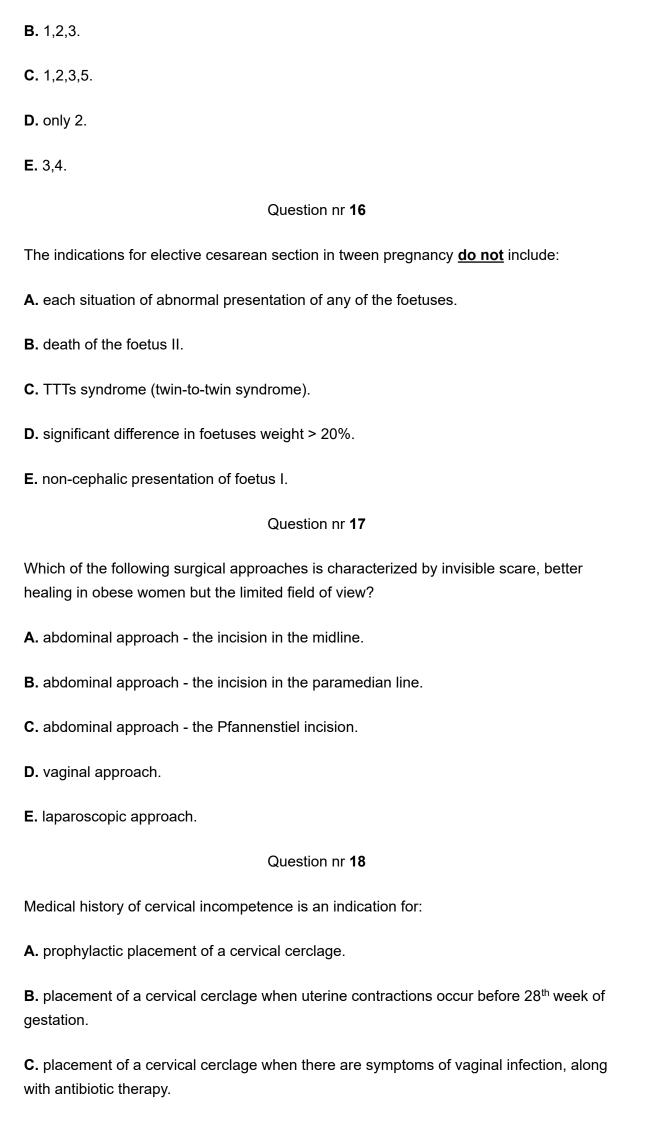
D. uterine fibroids.
E. all the above.
Question nr 4
Which stage of endometriosis according to the classification of the American Society for Reproductive Medicine should be diagnosed in a patient with an endometrial cyst of the left ovary of 4 cm in diameter, partial obliteration of the recto-uterine pouch and superficial lesions of the peritoneal membrane of the diameter < 1 cm?
A. I.
B. II.
C. III.
D. IV.
E. V.
Question nr 6
Which of the following decreases men's fertility by lowering testosterone production?
A. ethanol.
B. ketoconazole.
C. spironolactone.
D. sulfasalazine.
E. all the above.
Question nr 7
The range of normal values of Amniotic Fluid Index between 5 and 25 cm may be applied to the patients:
A. during the whole singleton pregnancy.
B. independently of the number of fetuses.
C. in singleton pregnancy only after 20 weeks of gestation.
D. in singleton pregnancy only after 24 weeks of gestation.

E. in singleton pregnancy only after 32 weeks of gestation.
Question nr 8
Which of the following is not an indication for cesarean section?
A. Marfan syndrome with aorta dilatation and the coarctation of the aorta that has not been surgically corrected.
B. anxiety of a pregnant woman before the delivery.
C. significant difference of foetal weights of > 20% in twin pregnancy.
D. foetal weight > 3500 g in the longitudinal foetus breech position.
E. heart failure or significant arrhythmia in a pregnant woman.
Question nr 9
A neglected transverse lie is characterized with: 1) impaction of the presenting shoulder in the pelvic inlet; 2) premature rupture of the membranes; 3) total cervical effacement; 4) excessive dilation of the lower uterine wall; 5) contraction of the uterus on a highly bent fetus. The correct answer is: A. 1,2,3. B. 1,3,5. C. 2,4. D. 3,4,5. E. all the above.
Question nr 10
The incidence of which of the following diseases does not increase in female patients with Turner syndrome?
A. strabismus.
B. grass pollen allergy.



symptoms may suggest polycystic ovary syndrome. However, a presence of striae, a buffalo hump and arterial hypertension may suggest the diagnosis of Cushing's syndrome. Which of the following should be performed in order to differentiate those disorders? A. estradiol level. **B.** dexamethasone suppression test. **C.** metoclopramide test. **D.** lutropin level. E. follitropin level. Question nr 14 Which class in the Quigley scale corresponds to complete androgen insensitivity syndrome (CAIS)? **A.** from 1 to 3. **B.** 4. C. 7. **D.** 6. **E.** 5. Question nr 15 Indicate the true statements concerning labor induction: 1) in the case of cholestasis of pregnancy when fatty acid concentration is 45 nmol/L the labor induction should be considered after 34 weeks of gestation; 2) in the case of gestational diabetes the labor induction should be considered after 39 weeks of gestation; 3) rupture of membranes is an absolute contraindication to labor preinduction with the use of prostaglandins; 4) in the case of pregestational diabetes the labor induction should be considered after 39 weeks of gestation; 5) in the pregnancy complicated by diabetes the labor induction is indicated when the difference between the fetal abdomen diameter and the biparietal diameter is over 4 cm. The correct answer is:

A. 1,2,5.



D. frequent monitoring of the cervical length with ultrasonography.
E. calcium-rich diet in order to improve the consistence of the cervix.
Question nr 20
Which of the following determinations is used to diagnose hyperandrogenism in a 25-year-old woman?
A. ratio of LH to FSH.
3. free testosterone or index of free androgens.
C. dihydrotestosterone.
D. SHBG.
E. SHBG and dihydrotestosterone.
Question nr 21
Untreated iron-deficiency anemia in a pregnant woman may lead to: 1) intrauterine growth retardation; 2) premature labour; 3) elongation of the pregnancy; 4) congenital anomalies; 5) prolonged labour. The correct answer is:
A. 1,2,4,5.
3. 1,3,4,5.
C. 1,2,3,4.
D. 1,2,3,5.
E. 3,4,5.
Question nr 22
The high risk factors of gestational diabetes include: 1) obesity of the pregnant woman (BMI > 30); 2) diabetes in the first-degree relatives; 3) birth weight of neonates of previous pregnancies > 4000 g;

4) age of the pregnant woman < 25 years;

The correct answer is:
A. 1,2,3.
B. 1,2,5.
C. 2,3,4.
D. 1,3,4.
E. all the above.
Question nr 23
Which of the following is not typical of cervical cancer?
A. urinary urgency.
B. bloody vaginal discharge with unpleasant smell.
C. intermenstrual bleeding.
D. abdominal pain.
E. contact bleeding.
Question nr 24
Which of the following is not among the abnormalities of the head position during labour:
A. deep transverse arrest.
B. brow presentation.
C. occiput posterior position.
D. left or right posterior position.
E. occiput anterior position.
Question nr 25
When, during pregnancy, the concentration of the β -subunit of hCG in blood is the highest?

A. 5-6 week.

B. 6-7 week.
C. 9-12 week.
D. 14-16 week.
E. 16-18 week.
Question nr 26
Which of the following is characteristic of borderline ovarian tumors?
A. no destructive infiltration of the stroma.
B. occurrence limited to the ovaries only.
C. prognosis similar to that of ovarian cancer.
D. no effective treatment options available.
E. occurrence in postmenopausal women only.
Question nr 27
The administration of specific immunoglobulin is mandatory in the case of the pregnant, who had not been affected or vaccinated, and who had contact with a patient infected with: 1) type B hepatitis virus;
2) CMV virus;
3) fifth disease virus; 4) rubella virus;
5) chickenpox virus.
The correct answer is:
A. 1,3,5.
B. 2,3,5.
C. 2,3,4.
D. 1,4,5.
E. 4,5.

Microscopic evaluation of the material obtained at the outer opening of the cervix is called cervical smear (Papanicolaou test) and is used to diagnose precancerous states or cervical cancer. Which of the following should be advised in the case of the abnormal result of cervical smear - HSIL (*high-grade squamous intraepithelial lesion*)?

A. repeat cervical smear - twice every 4-6 months.

B. perform colposcopy with the biopsy of the suspected lesions and abrasion of the

B. perform colposcopy with the biopsy of the suspected lesions and abrasion of the cervical canal.

C. HPV determination.

D. repeat cervical smear and determine HPV.

E. none of the above.

Question nr 29

A 64-year-old obese female reports postmenopausal vaginal bleeding. A cytological smear was obtained and in a transvaginal ultrasound endometrial hyperplasia was found. The mucosa biopsy was performed and the histopathological diagnosis of adenocarcinoma was obtained. Pap smear was normal. The uterus with appendages was completely resected and the lymph nodes were sampled. In postoperative examination adenocarcinoma cells were found in the uterus region (no evidence of serous membrane infiltration) and in the cervical canal near the internal orifice. No evidence of adnexal infiltration or metastases to the lymph nodes was found. Indicate tumor advancement according to FIGO classification:

A. IA.

B. IB.

C. II.

D. IIIA.

E. IIIB.

Question nr 30

The possible causes of cervical incompetence include:

- 1) inherited disorders;
- 2) traumas of the cervix;
- 3) state after the cervical conization;
- 4) multiple pregnancy.

The correct answer is:

A. only 1.
B. 1,2.
C. only 4.
D. all the above.
E. none of the above.
Question nr 31
A 25-year-old man with normal male phenotype is examined because of infertility. Apart from a decreased sperm count in the semen analysis, gynecomastia was found and laboratory tests showed decreased follicle-stimulating hormone levels and increased testosterone levels. The most probable cause of the above abnormalities is:
A. chemotherapy in the past.
B. radiotherapy in the past.
C. use of anabolic steroids.
D. Kallmann syndrome.
E. Sertoli cell-only syndrome.
Question nr 32
What percentage of the patients with diagnosed ovarian cancer are BRCA1/BRCA2 germinal mutation carriers?
A. 1%.
B. 5%.
C. 10%.
D. 30%.
E. 50%.
Question nr 33
In a pregnant vegetarian you should expect the insufficiency of vitamin: 1) B ₂ ;

2) B₁₂;

4) C;
5) E. The correct answer is:
The correct answer is.
A. only 1.
B. only 2.
C. only 3.
D. 1,3,4,5.
E. 1,2,4,5.
Question nr 34
The normal age of menarche in Poland is defined as:
A. 8-9 years.
B. 9-16 years.
C. 16-17 years.
D. >18 years.
E. no norm exists.
Question nr 35
Which of the following cannot be a consequence of intrauterine infection?
A. Down syndrome.
B. hydrocephalus.
C. fetal tachycardia.
D. preterm labor.
E. prelabor rupture of membranes.
Question nr 36
Which of the following concerning hyperprolactinemia is false?

A. sleep and stress are physiological conditions associated with increased secretion of

3) D;

prolactin.
B. hyperprolactinemia is the cause of 30% of cases of secondary amenorrhea after discontinuation of oral contraceptives.
C. drugs used in hyperprolactinemia treatment are cabergoline and bromocriptine.
D. consequences of hyperprolactinemia include the lack of pubic hair and a decrease in the secretion of adrenal androgens.
E. galactorrhoea is found in 30-90% women with hyperprolactinemia.
Question nr 37
A 33-year-old pregnant woman in 37th week of her second pregnancy came by the obstetric out-patient clinic because of the weakening of fetal movements. The course of the previous pregnancy was uncomplicated. The cardiotocography showed normal reactive FHR. Ultrasound examination of biophysical profile of the fetus revealed normal volume of amniotic fluid, one episode of breathing movements lasting 60 seconds, three movements of the trunk and twice hand closing and opening. The result of biophysical profile is:
A. 2/10 points.
B. 4/10 points.
C. 6/10 points.
D. 8/10 points.
E. 10/10 points.
Question nr 38
The indications for insemination include: 1) decreased parameters of the semen; 2) ejaculation disorders; 3) PCOS; 4) III grade endometriosis; 5) idiopathic infertility. The correct answer is:
A. 1,2,3.
B. 1,2,3,4.

C. 1,2,4,5.

D. 1,2,5.
E. 3,4,5.
Question nr 39
If hypogastric pain appears approx. 2-3 days after the administration of methotrexate in a patient treated for ectopic pregnancy, you should:
A. perform urgent laparotomy with the longitudinal incision - this symptom means that there is haemorrhage because of ectopic pregnancy rupture.
B. perform urgent laparoscopy - this symptom means that there is haemorrhage because of ectopic pregnancy rupture.
C. perform urgent laparotomy with the transverse incision - this symptom means that there is haemorrhage because of ectopic pregnancy rupture.
D. observe the patient and monitor decrease in the hCG level - this is a typical pain after the treatment with methotrexate.
E. discharge the patient and inform her that the pain is most probably caused by ovulation.
Question nr 40
In a patient with Turner syndrome (karyotype 45,X), within sexual organs, one can observe:
A. aplastic ovaries.
B. additional ovaries.
C. testes and ovaries.
D. testes only.
E. normal ovaries.
Question nr 41
In women using biphasic hormonal anticonception a typical menstrual period:
A. is short and light.
B. does not occur.

C. occurs irregularly and last for many days. **D.** is heavy and long. **E.** occurs every 21 days and is light. Question nr 42 Indicate the true statement concerning the uterine artery: **A.** originates from the ovarian artery. **B.** gives the branch running through the round ligament. **C.** originates from the internal iliac artery. **D.** crosses the ureter from the rear. **E.** provides blood to the uterus only. Question nr 43 The prevention of Rh disease during pregnancy consists in the administration to each pregnant woman: **A.** who is Rh-D negative, of 300 µg anti-RhD immunoglobulin at 28th-32th week of gestation. **B.** irrespectively of her Rh-D status, of 300 μg anti-RhD immunoglobulin at 28th-32th week of gestation. C. who is Rh-D negative, of 300 µg anti-RhD immunoglobulin at 28th-32th week of gestation, but only if Rh-D status of the father is provided. **D.** who is Rh-D negative, of 150 μg anti-RhD immunoglobulin at 28th-32th week of gestation. E. who is Rh-D negative, of 300 µg anti-RhD immunoglobulin after 34th week of gestation. Question nr 44 Which of the following situations occurring during pregnancy requires a quick termination of the pregnancy?

A. premature placental abruption.

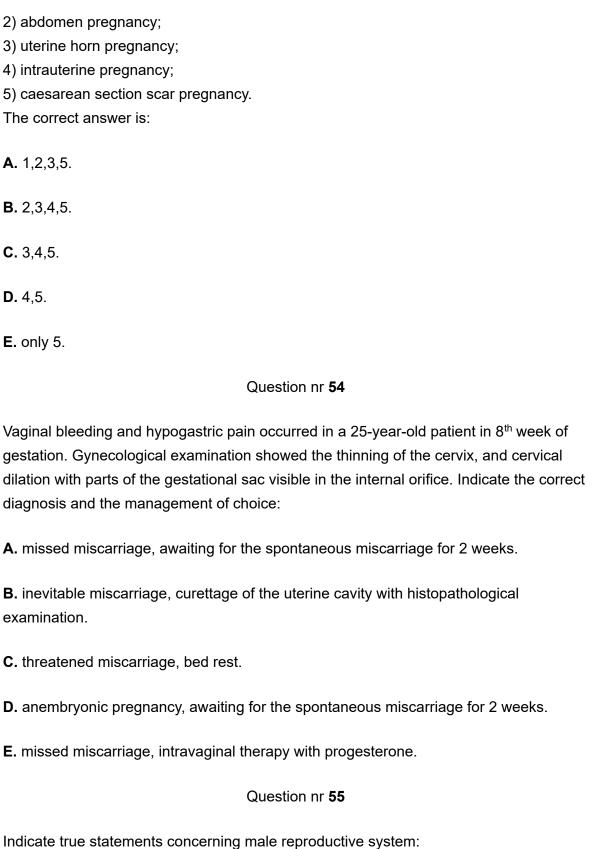
b. Cervical caricer in pregnancy.
C. HIV infection.
D. adnexal torsion.
E. acute appendicitis.
Question nr 45
Indicate the maneuver used in vaginal delivery of a baby in a longitudinal lie with breech presentation in order to release the child's shoulders:
A. Lővset's maneuver.
B. Mauriceau-Smellie-Veit maneuver.
C. Wiegand-Martin-von Winckel maneuver.
D. Gaskin maneuver.
E. Kiwisch-Scanzoni maneuver.
Question nr 46
Which of the following is in favor of the diagnosis of antiphospholipid syndrome?
A. vascular thrombosis.
B. miscarriages.
C. presence of anti-cardiolipin antibodies.
D. presence of antibodies against β2-glycoprotein 1.
E. all the above.
Question nr 47
Which of the following medications is certified for the treatment of stress urinary incontinence?
A. paroxetine.
B. duloxetine.
C. venlafaxine.

D. dapoxetine.
E. fluoxetine.
Question nr 48
Which of the following is not considered in the assessment of the cervix according to the Bishop score?
A. dilation.
B. consistency.
C. distance from the sacral bone.
D. effacement.
E. fetal station.
Question nr 49
Indicate the medications that can be safely used in pregnant patients: 1) aluminum compounds in the treatment of gastroesophageal reflux; 2) non-steroidal anti-inflammatory drugs from the group of non-selective cyclooxygenase inhibitors; 3) nystatin in the treatment of infectious diseases; 4) nitrofurantoin and furazidin in the treatment of urinary tract infections; 5) angiotensin converting enzyme inhibitors in the treatment of hypertension. The correct answer is:
A. 1,4.
B. 1,2,4.
C. 2,3,5.
D. 1,3.
E. only 1.
Question nr 50
Bacterial vaginitis: 1) is asymptomatic in most women, and in symptomatic cases manifests with a grey or white vaginal discharge; 2) is related to dysuria and dyspareunia;

3) is diagnosed on the basis of reported-by-the-patient fishy smell that aggravates after

the intercourse;
4) is related to the increase in the number of Lactobacilli;
5) is characterized by the presence of clue cells in the smear.
The correct answer is:
A. 1,3.
B. 1,5.
C. 1,3,5.
D. 2,3,4.
E. 2,3,5.
Question nr 51
In female adolescents without signs of breast development gonadotropins should be measured in order to exclude:
A. hyperprolactinemia.
B. hypergonadotropic hypogonadism.
C. hyperthyroidism.
D. precocious puberty.
E. polycystic ovarian syndrome.
Question nr 52
An <u>absolute contraindication</u> to laparoscopic surgery in gynecology <u>is not</u> :
A. patient's lack of consent.
B. condition after extensive oncological surgery of the stomach and intestines.
C. diffuse peritonitis.
D. obesity.
E. pulmonary hypertension.
Question nr 53

Ectopic pregnancy relates to the following situations:
1) fallopian pregnancy (ampullary region);



- 1) cycle of the seminiferous epithelium takes approx. 74 days;
- 2) in the testes FSH acts mainly on Sertoli and LH mainly on Leydig cells;
- 3) after gonadotropin stimulation Leydig cells produce testosterone;
- 4) estrogens do not participate in the regulation of male reproductive system.

The correct answer is:

A. all the above.

B. 2.4.

D. 2,3,4. **E.** 3,4. Question nr 56 Which of the following is called menarche? A. first menstruation in life, usually occurring at the age of 12-13 years. **B.** development of pubic hear, usually occurring at the age of 11 years. **C.** beginning of the hormonal activity of the ovaries. **D.** evolving function of the adrenals that comes 2-3 years before gonadal function. **E.** development of the breasts, usually occurring at the age of 10 years. Question nr 57 A basic recommendation for a woman with polycystic ovary syndrome, BMI>27, irregular menstrual cycles and infertility is: A. weight loss (diet). **B.** metformin. **C.** stimulation of ovulation with clomiphene citrate. **D.** metformin and the stimulation of ovulation with clomiphene citrate. **E.** progestogens in the second phase of the cycle. Question nr 58 Indicate the true sentences regarding screening for the neoplastic disorders of female genital organs: 1) screening for vaginal and vulvar cancer is not performed because of the low incidence of these tumours; 2) screening for endometrial cancer is not performer because its first symptoms, i.e. uterine bleeding, are easily noticed by women and reported to their doctors; 3) screening for non-epithelial tumours of the ovaries, the uterus and the vagina is not performed because of the low incidence of these tumours; 4) screening for endometrial cancer is performed and includes ultrasound imaging, the measurement of the markers: CA 125, HE 4 (human epididymis protein 4) and chorion

C. 1,2,3.

which sensitivity reaches 85-90% in leading centers. The correct answer is:
A. 1,2,3.
B. 1,5.
C. 3,4,5.
D. 4,5.
E. 1,3,4.
Question nr 59
Which of the following heart diseases in a pregnant woman are absolute indications for cesarean delivery? 1) uncorrected ASD; 2) uncorrected VSD; 3) uncorrected coarctation of the aorta; 4) Marfan syndrome. The correct answer is: A. 2,3,4. B. 1,2,3. C. only 4. D. 3,4. E. all the above.
Question nr 60
Hemorrhage, strong hypogastric pain, no palpable fundus of the uterus above the pubic symphysis and rapid deterioration of the patient's general condition during the third stage of delivery are the symptoms and signs of:
A. uterine inversion.
B. uterine rupture.
C. rupture of the vaginal fornix.

gonadotropin;

D. afterbirth retained in the uterine cavity. **E.** incarcerated placenta. Question nr 61 What is the role of estrogens in the combined contraceptive pill? **A.** fallopian tube peristalsis reduction. **B.** thickening of cervical mucus. C. inhibition of selection and growth of the dominant follicle. **D.** suppression of the LH secretion. **E.** A and C are correct. Question nr 62 A 34-year-old female patient 3 months after a physiological childbirth suddenly suffered a pain of the vulva. She complained that she could not sit, and while she tries to sit down she feels a resistance in the right side. In the light of reported symptoms one should: A. diagnose complications of crotch sewing and refer the patient for crotch plastic surgery. **B.** diagnose viral vulvitis, most probably herpetic and order acyclovir therapy. C. diagnose vulva carcinoma and order biopsy. **D.** diagnose Skene's gland abscess and order antibiotics. E. diagnose Bartholin's abscess, make incision and drainage. Question nr 63 Which of the following are used to assess the maturity of girls during puberty? 1) Bishop score; 2) Nugent score; 3) POP-Q score;

6) Lauritzen criteria.

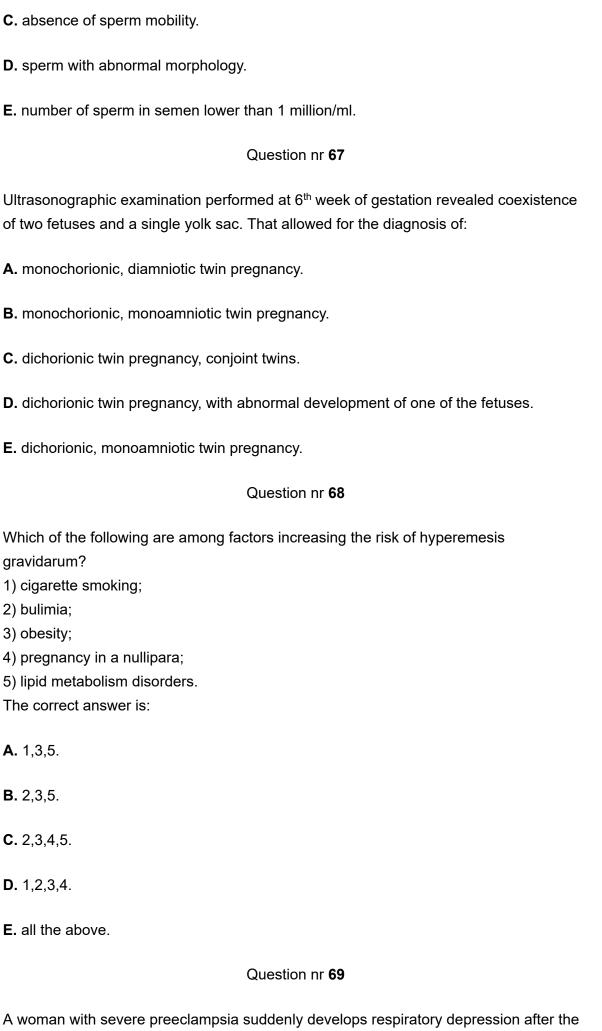
The correct answer is:

5) TBS (the Bethesda system) classification;

4) Tanner stages;

A. 1,T.
B. 2,5.
C. 3,5.
D. 4,5.
E. 4,6.
Question nr 64
In the ultrasound examination of the fetus performed between the 11 th and 13 th week of pregnancy, the most accurate method of assessing the duration of pregnancy is the measurement of:
A. biparietal diameter (BPD).
B. femur length (FL).
C. abdominal circumference (AC).
D. crown-rump length (CRL).
E. gestational sac diameter.
Question nr 65
Side-effects of the treatment of premenstrual syndrome with selective serotonin reuptake inhibitors include:
A. hirsutism.
B. loss of hair.
C. abnormal bleeding from the uterus.
D. inhibition of ovulation.
E. decreased libido.
Question nr 66
Azoospermia is defined as:
A. absence of semen.

B. absence of sperm in semen.



A woman with severe preeclampsia suddenly develops respiratory depression after the administration of hydralazine and magnesium sulfate. Respiratory depression is due to:

A. impending eclampsia.
B. hydralazine toxicity.
C. magnesium sulfate toxicity.
D. pulmonary embolism.
E. heart attack.
Question nr 70
External examination of a woman giving birth is performed with the use of: 1) first Leopold's maneuver; 2) pelvimeter; 3) fifth Leopold's maneuver; 4) McRoberts maneuver; 5) Bracht maneuver. The correct answer is:
A. 1,2,3.
B. 4,5.
C. 1,2.
D. 1,2,4.
E. all the above.
Question nr 71
A 42-year-old patient came to the gynecologist to get anticonception advice. She smokes 5 cigarettes daily and is treated for arterial hypertension. Periodic bleeding are abundant and last up to 7 days. Which of the following methods should be advised?
A. progestogen-only 'mini pill'.
B. subcutaneous implant releasing etonogestrel.
C. intrauterine device with copper, Cu-IUD.
D. intrauterine device releasing levonorgestrel.
E. sterilization.

Question nr 72

Which of the following was the most frequently occurring malignant tumor in Polish women for the 5 years (2010-2014)?

A. breast cancer.

C. cervical cancer.

B. ovarian torsion.

B. endometrial cancer.

D. ovarian cancer.
E. lung cancer.
Question nr 73
Indicate findings present in normal cardiotocographic non-stress test (NST) in pregnancy: 1) baseline fetal heart rate - 100/min; 2) baseline fetal heart rate - 150/min; 3) marked variability of the fetal heart rate; 4) absence of accelerations; 5) absence of decelerations. The correct answer is:
A. 1,3.
B. 2,4.
C. 2,5.
D. 2,3.
E. 3,5.
Question nr 74
A 28-year-old woman, with menstrual cycle length of about 35 days, comes to the admission room with pains in the hypogastrium and vaginal bleeding lasting for 3 days. The last menstrual flow occurred 45 days before. The patient also complains of frequent urination and tenderness of the breasts. What diagnosis should be considered first?
A. hemorrhagic ovarian cyst.

C. extrauterine pregnancy.
D. adnexitis.
E. ruptured ovarian cyst.
Question nr 75
The <u>absolute contraindications</u> to the use of two-component hormonal contraceptives include: 1) smoking tobacco at the age over 35 years; 2) pregnancy or not excluded possibility of pregnancy;
3) migraine headaches;4) mitral valve prolapse;5) estrogen-dependent neoplasms.The correct answer is:
A. 1,2,3,4.
B. 3,4,5.
C. 1,2,3.
D. 1,2,5.
E. all the above.
Question nr 76
Indicate the true sentences regarding impending miscarriages: 1) painless vaginal bleeding is usually present; 2) gynecological examination shows cervical ripening; 3) gynecological examination shows the cervix dilated to 1-2 cm; 4) speculum examination shows the amniotic sac; 5) treatment of choice is conservative. The correct answer is:
A. 1,2.
B. 3,4.
C. 2,5.
D. 1,2,5.

E. 1,3,5.

Question nr 77

As a consequence of physiological processes in the circulatory system of a pregnant woman in the case of single pregnancy the volume of circulating blood can increase by up to: **A.** 20%. **B.** 30%. **C.** 40%. **D.** 50%. E. in a single pregnancy there is no change in the volume of circulating blood of the pregnant woman. Question nr 78 Which of the following is a risk factor for ovarian hyperstimulation syndrome? **A.** long time of infertility treatment. **B.** young age. C. hypothyroidism. D. obesity. **E.** supplementation of progesterone in the luteal phase. Question nr 79 Which of the following **is not** the symptom related to uterine fibroids? **A.** menorrhagia. **B.** prolonged menstruation. C. hypogastric pains. **D.** pressure on the bladder or the rectum.

Question nr 80

Indicate the true statements concerning oxytocin test:

E. secondary amenorrhea.

 it is a stress test; it is a biophysical test assessing the placental efficiency; positive result is concluded on the basis of late decelerations present after at least half of the contractions; it is the test of choice in pregnant woman with placenta praevia. The correct answer is:
A. all the above.
B. 1,3,4.
C. only 4.
D. 1,2,3.
E. only 1.
Question nr 81
Indicate the false statement concerning HPV infection:
A. so-called oncogenic HPV may cause cancers of the anus, the perineum, the penis and the oral cavity.
B. use of condoms fully eliminates the risk of HPV infection.
C. cytological result of LSIL suggests HPV infection.
D. vaccination against HPV is recommended for young girls who have not started sexual activity.
E. HPV infection does not lead to stable acquired immunity against subsequent infections with HP viruses.
Question nr 82
Indicate the true statement concerning the risk factors for ovarian cancer:
A. BRCA2 mutation is more common than BRCA1 mutation in Poland.
B. risk of the disease is higher in the bearers of <i>BRCA1</i> mutation than in the bearers of <i>BRCA2</i> mutation.
C. risk of the disease is similar in the bearers of <i>BRCA1</i> mutation and the bearers of <i>BRCA2</i> mutation.
D. family history of breast cancer does not increase the risk of the disease.

E. long-term use of hormonal contraceptives increases the risk of the disease.
Question nr 83
Routine seminological examination is an essential element in assessing the male factor as the cause of infertility. The values of microscopic evaluation of semen are presented below: 1) volume from 1.5-6 mL; 2) sperm concentration > 15 million/mL; 3) viability > 38% live sperm; 4) mobility A and B > 32%; 5) > 4% sperm with normal structure. Indicate the parameters within normal range (normospermia) according to the WHO 2010 standards:
A. 1,2,4,5.
B. 2,3,4,5.
C. 4,5.
D. only 5.
E. 1,5.
Question nr 84
In patients with polycystic ovary syndrome there is an increased risk of:
A. type 2 diabetes mellitus.

- **B.** hypertension.
- C. endometrial cancer.
- **D.** myocardial infarction.
- **E.** all the above.

Question nr 85

Indicate the true description of the influence of chorionic gonadotropin on the thyroid function:

A. there is no influence.

- B. it lowers the TSH production which causes the decrease in thyroxine synthesis in the thyroid gland.
 C. it stimulates TSH production which causes the increase in thyroxine synthesis in the thyroid gland.
 D. it decreases TSH production and stimulates the thyroid gland to produce thyroxine.
 - Question nr 86

E. it increases TSH production and stimulates the thyroid gland to produce thyroxine.

A **contraindication** to sexual activity in pregnancy **is not**:

- A. multiple pregnancy.
- **B.** cervical incompetence.
- C. placenta previa.
- **D.** inflammatory urinary tract.
- **E.** fetal breech presentation.

Question nr 87

A 25-year-old woman in 12th week of her first pregnancy made a test of antibodies against *Toxoplasma gondii*. The results were as follows: IgG = 300 IU/mL, IgM (-). A similar test performed 2 years earlier showed: IgG = 480 IU/mL, IgM (-). The patient should be informed that:

- **A.** there is a high risk of an infection with *Toxoplasma gondii* caused by the consumption of both raw meat and contaminated fruit and vegetables.
- **B.** she has to repeat the test of antibodies against *T. gondii* every 6-8 weeks during the whole pregnancy.
- **C.** she should undergo antiprotozoal treatment.
- **D.** she was infected with *Toxoplasma gondii* before the pregnancy (most probably it was a subclinical infection) and her child is not at risk of the infection.
- **E.** it is necessary to perform invasive diagnostics for the infection (amniocentesis, examination of the amniotic fluid for protozoan cysts).

A. complete hydatidiform mole is diploid and all the genetic material is of paternal origin.
3. incomplete hydatidiform mole is usually triploid.
C. principal diagnostic tool for hydatidiform mole is ultrasound imaging.
D. first symptom of hydatidiform mole is usually uterine bleeding.
E. most common symptoms of hydatidiform mole are excessive vomiting and the symptoms of hypothyroidism.
Question nr 89
Oligohydramnios is defined as the decrease in the volume of amniotic fluid below:
A. 600 mL.
3. 500 mL.
C. 400 mL.
D. 300 mL.
E. 200 mL.
Question nr 90
Which sexually transmitted disease does not cause symptoms in the genital area?
A. infection caused by HIV.
3. infection caused by HPV.
C. infection caused by HSV.
D. syphilis.
E. gonorrhea.
Question nr 91
A 41-year-old patient came to gynecologist asking for advice on contraception during

perimenopause. She has two children, and has diabetes mellitus type I diagnosed at the

ophthalmoscopy showed pre-proliferative retinopathy. Which of the following methods is

age of 4. The current level of glycated haemoglobin HbA₁C is 8.9%, urine albumin

excretion - 40 mcg/mg creatinine, her blood pressure is about 130/80 mmHg,

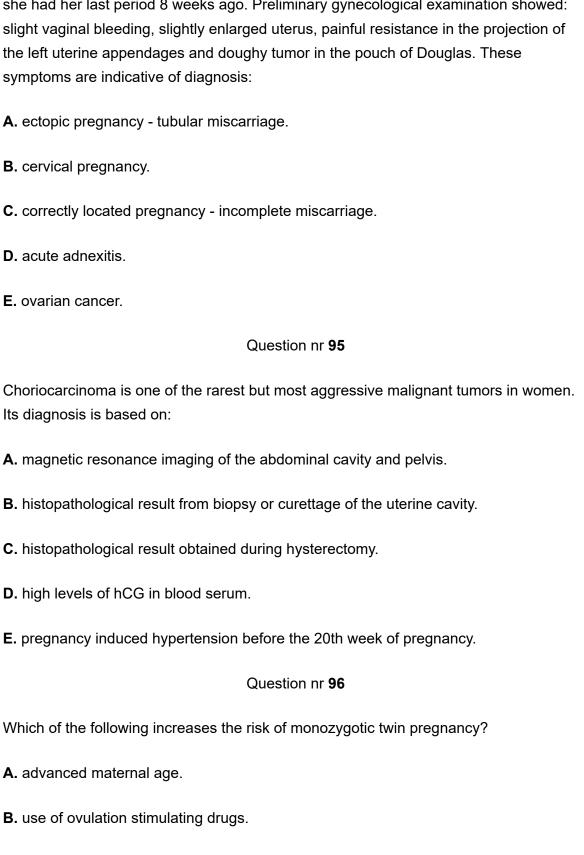
Which of the following statements concerning hydatidiform mole is **false**?

A. cervical mucus-body temperature method.
B. progestin-only pill.
C. combined oral contraceptive pills with ethinylestradiol and levonorgestrel.
D. barrier method.
E. intrauterine device with levonorgestrel.
Question nr 92
Which of the following is the correct management of a 30-year-old patient in 37 th week of her first pregnancy who was diagnosed with the minor type of placenta previa confirmed by repeated US examination and reports minor bleeding from the reproductive tract?
A. transvaginal palpation, transvaginal ultrasound examination, conservative treatment (pregnancy continuation up to 38 weeks).
B. transvaginal palpation, CTG monitoring, vaginal delivery.
C. assessment of the general condition of the mother, fetal pulse monitoring, preparations and performing caesarean section.
D. assessment of the general condition of the mother, fetal pulse monitoring, vaginal delivery.
E. speculum examination, intravenous fenoterol infusion, pregnancy continuation up to 38 weeks.
Question nr 93
Prohibited vaccinations during pregnancy include:
A. measles.
B. hepatitis B.
C. infuenza.
D. tetanus.
E. yellow fever.

contraindicated in this patient?

Question nr 94

A 28-year-old woman who fainted again at home reported to the obstetrics and gynecology ER. On admission she presented pale, sweaty face, rapid heart rate, body temperature 36.6°C. Despite inserting a contraceptive intrauterine device a year ago, she had her last period 8 weeks ago. Preliminary gynecological examination showed:



C. previous multiple pregnancy.

D. long-term use of oral contraceptives.

E. none of the above.

Question nr 97

A 58-year-old patient complains of vaginal dryness and postcoital bleedings. The gynecological examination reveals atrophic lesions in the vagina and normal uterus and uterine appendages. The cytological smear of the cervix is normal. The local vaginal estrogen therapy has been recommended and thus the patient should:

- **A.** receive simultaneous gestagen therapy in order to prevent the overgrowth of endometrium and the development of endometrial cancer.
- **B.** receive simultaneous gestagen therapy in order to prevent the development of breast cancer.
- **C.** receive simultaneous gestagen therapy in order to prevent the development of cervical cancer.
- **D.** receive simultaneous gestagen therapy in order to decrease the risk of a stroke.
- **E.** there is no indication for gestagen therapy in this patient.

Question nr 98

Complete androgen insensitivity syndrome is characterized by:

- A. female phenotype, no axillary hair, male external genitalia.
- **B.** male phenotype, no pubic hair, male external genitalia.
- C. female phenotype, pubic an axillary hair, female external genitalia.
- **D.** 46 XY karyotype with estrogen-secreting ovaries.
- **E.** female phenotype, no pubic an axillary hair, female external genitalia.

Question nr 99

Which of following is not an advantage of Pfannenstiel incision?

- **A.** good cosmetic effect.
- B. rare cases of wound dehiscence.
- **C.** wide access to the operative field.
- **D.** rare cases of incisional hernia.

E. better blood supply to the wound.
Question nr 100
Which of the following is not a biological effect of progesterone?
A. induction of endometrial secretory changes during the ovulation cycle.
B. cervical mucus change into impenetrable to sperm.
C. decrease of the hypoglycemic effect of insulin.
D. decrease of contractibility of the uterine muscle and fallopian tube peristalsis.
E. increase in the concentration of coagulation factors II, VII, IX and X.
Question nr 101
The composition of the amniotic fluid includes the following proteins produced by the foetus: 1) transferrin; 2) alpha-fetoprotein; 3) beta-microglobulin; 4) IgG immunoglobulins. The correct answer is: A. 1,2,4. B. 1,2,3. C. 2,3,4. D. only 2. E. all the above.
Question nr 102
Which of the following is the primary medication used for the long-term antihypertensive therapy in pregnancy?
A. methyldopa.
B. perindopril.
C. enalapril.

E. lisinopril.
Question nr 103
An umbilical cord prolapse during the second stage of the labor in a cephalic presentation with a longitudinal lie:
A. is not dangerous.
B. is an indication for the attempt of a manual reduction of the prolapse.
C. is an indication for immediate delivery.
D. is an indication for a manual rotation of the fetus.
E. is an indication for the immediate artificial rupture of membranes.
Question nr 104
Fetal bradycardia is defined as a decrease of the basic fetal heart rate:
A. below 100 beats/min. lasting at least 15 minutes.
B. below 110 beats/min. lasting at least 10 minutes.
C. below 110 beats/min. lasting at least 15 minutes.
D. below 120 beats/min. lasting at least 10 minutes.
E. below 120 beats/min. lasting at least 15 minutes.
Question nr 105
Which of the following factors does not predispose to the breech presentation?
A. oligohydramnios.
B. polyhydramnios.
C. localization of the placenta on the posterior wall of the uterus.
D. hydrocephalus.
E. placenta praevia.
Question nr 106

D. ramipril.

The administration of short-acting GnRH analogues begins on the first day of the menstrual cycle and from the third day gonadotropins are added. This description regards controlled ovarian hyperstimulation with the use of: A. ICSI technique (intracytoplasmic sperm injection). **B.** slow freezing of reproductive material. **C.** protocol with GnRH antagonists. **D.** long protocol. **E.** short protocol. Question nr 107 Which of the statements regarding stress urinary incontinence is true? **A.** increase in intra-abdominal pressure is accompanied by involuntary loss of urine. **B.** involuntary leakage of urine is accompanied by a strong but short urinary urgency. C. volume of leaking urine is large.

- **D.** frequency of micturition at night is increased.
- **E.** in urodynamic testing detrusor hyperreflexia is observed.

Question nr 108

Endometrial cancer is currently the most common female genital cancer in developed countries. The following are the characteristics of its two subtypes:

- 1) estrogen dependence (positive E + and P + receptor state);
- 2) aggressive course, frequent metastases;
- 3) the most common are mutations PTEN, K-ras, microsatellite instability;
- 4) the most common histopathological type is endometrioid endometrial cancer;
- 5) the most common mutations are p-53, HER2-neu, p16.

The correct combination of characteristics of the first subtype of endometrial cancer is:

- **A.** 1,2,5.
- **B.** 2,4,5.
- **C.** 3,4.
- **D.** 1,3,4.

E. only 1	1.
-----------	----

A disulfiram-like reaction can be expected in a patient who was drinking alcohol	ol while
undergoing the treatment for the symptoms of a genital infection with:	

undergoing the treatment for the symptoms of a genital infection with:
A. HPV virus.
B. HSV virus.
C. Chlamydia trachomatis.
D. Trichomonas vaginalis.
E. Neisseria gonorrhoeae.
Question nr 110
Which of the following are maternal risk factors for the breech position? 1) defects of the uterus which impair fetal rotation; 2) leiomyomas of the uterus; 3) narrow pelvis; 4) excessively wide pelvis; 5) multiparity. The correct answer is: A. 1,3. B. 1,2,4. C. 1,3,5. D. all the above. E. only 5.
Question nr 111
The complications of fetal diabetes include:
A. macrosomia.
B. preterm birth, respiratory distress syndrome.

C. hypoglycemia, polycythemia, hypokalemia.

D. all the above.
E. none of the above.
Question nr 112
Uterine leiomyomas are the most frequent benign neoplasms of the uterus. Indicate the false statement concerning their symptoms:
A. they include prolonged heavy periods and intermenstrual bleedings.
B. they include pain in the hypogastrium, and pressure on the bladder or the rectum.
C. small leiomyomas may be asymptomatic.
D. hot flushes are typical symptoms.
E. leiomyomas may be the cause of infertility.
Question nr 113
The diagnosis of endometriosis should be considered in a patient with the following symptoms: 1) periodic pain, beginning just before the menstrual period lasting throughout the whole time of menstruation; 2) the temperature during the menstrual period > 39°C; 3) dyspareunia (pain related to sexual intercourse); 4) pain during defecation or micturition; 5) a stinking discharge from the vagina, occurring cyclically after menstruation. The correct answer is:
A. 2,3,4.
B. 1,3,4.
C. 1,3,4,5.
D. 2,5.
E. all the above.
Question nr 114
The most common site for an ectopic pregnancy is:
A. abdominal cavity.

C. intramural part of the uterine tube.
D. isthmus of the uterine tube.
E. ampulla of the uterine tube.
Question nr 115
ntermittent amenorrhea denotes:
A. lack of menstruation under 16 years of age.
3. menstrual bleeding lasting 5-7 days.
C. menstrual bleeding occurring every 43 days - 6 months.
D. menstrual bleeding occurring with gaps shorter than 21 days.
E. alternative name for coitus interruptus.
Question nr 116
ndicate the true sentences regarding ovarian reserve: (i) it is lower in Afro-Americans than in Caucasian women; (ii) it is determined genetically; (ii) it decreases after ovarian surgery; (iii) it decreases as a consequence of ovarian disorders; (iv) it increases with woman's age; (iv) it decreases after antibiotic treatment. (iii) The correct answer is:
3. 2,3,4.
2. 3,4,5.
D. 4,5,6.
≣. 1,4,5.
Question nr 117

B. ovary.

In a 16-year-old girl with amenorrhea, vaginal hematoma (hematocolpos) was diagnosed during ultrasound examination. The most probable diagnosis is:

A. imperforate hymen.
B. uterine septum.
C. uterine aplasia.
D. Mayer-Rokitansky-Küster-Hauser syndrome.
E. ovarian agenesis.
Question nr 118
Absence of menstruation after fertilization and implantation of the embryo in the endometrium is caused by:
A. absence of corpus luteum degeneration and the increased synthesis of progesterone and estrogens because of increasing levels of chorionic gonadotropin.
B. absence of corpus luteum degeneration and the increased synthesis of progesterone and estrogens because of decreasing levels of prolactin.
C. absence of corpus luteum degeneration because of the placenta taking over the production of progesterone and estrogens.
D. degeneration of the corpus luteum because of the placenta taking over the production of progesterone and estrogens.
E. degeneration of the corpus luteum because of increasing prolactin levels.
Question nr 119
Which of the following medicines is not indicated in endometriosis treatment?
A. danazol.
B. goserelin.
C. mirabegron.
D. dienogest.
E. progesteron.
Question nr 120

The basic strategy of treatment in the case of Bartholin's gland abscess consists in:

B. surgical removal of the abscess.
C. observation.
D. antibiotic therapy only.
E. wraps with washing soda.
Question nr 121
Is it acceptable to postpone the next dose when taking contraceptive tablets containing only progestogen (mini pills)?
A. yes, up to 3 hours.
B. yes, up to 12 hours.
C. yes, up to 24 hours.
D. yes, up to 72 hours.
E. the next dose should absolutely be taken at the same time.
Question nr 122
Oral hormonal anticonception is a well-documented protective factor against: 1) ovarian cancer; 2) liver cancer; 3) endometrial cancer; 4) cervical cancer; 5) renal cancer. The correct answer is:
A. 2,3,4.
B. 1,5.
C. 1,3,4.
D. 1,3.

A. incision of the abscess or its marsupialization.

Pelvic floor disorders are the result of the weakening of the supporting and hanging apparatus as well as an excessive action of forces causing a displacement of genital organs. The factors conducive to the decline of the reproductive organ include: 1) damage to the vulvar and pelvic nerves in the course of vaginal delivery; 2) physical work in standing position and associated with carrying; 3) respiratory diseases associated with chronic cough; 4) chronic constipation; 5) post-menopausal estrogen deficiency. The correct answer is: **A.** 1,2,3,4. **B.** 1,3,4,5. **C.** 1,2. **D.** only 1. **E.** all the above. Question nr 124 A 25-year-old woman was referred to the GP because of secondary amenorrhea. She reports galactorrhoea and periodically blurred vision. Which of the following hormones should be measured? **A.** adrenocorticotropic. **B.** glucagon. C. insulin. **D.** prolactin. **E.** testosterone. Question nr 125 Indicate the true statements concerning the double test in prenatal diagnostics: 1) it is performed between 11th and 14th week of gestation;

- 2) it assesses 2 biochemical markers in the blood of the pregnant woman;
- 3) in the case of a fetus with Down syndrome the concentration of free beta hCG subunit is decreased;
- 4) in the case of a fetus with Down syndrome the concentration of PAPP-A is decreased;
- 5) in the case of a fetus with Edwards syndrome the concentration of free beta hCG subunit is decreased.

The correct answer is:
A. 1,2,3,4.
B. 1,3,4,5.
C. 2,3,4,5.
D. 1,2,4,5.
E. all the above.
Question nr 126
The left uterine artery is a direct branch of:
A. aorta.
B. left common iliac artery.
C. left external iliac artery.
D. left internal iliac artery.
E. left ovarian artery.
Question nr 127
The most common uterine anomaly is:
A. unicorn uterus with a rudimentary horn.
B. uterus didelphys.
C. septate uterus.
D. bicornuate uterus.
E. unicorn uterus.
Question nr 128
Labor begins with regular contractions of the uterus causing the cervix to shorten and open. Which of the following concerning the first stage of labor is true?

1) it is the time from full cervical dilation to the birth of a child;

3) it is the time from the beginning of labor to the full cervical dilation;

4) it is divided into two phases: latent - from the labor beginning to the opening around

2) it is the time of postpartum content expulsion;

3-4 cm and active - from the 3-4 cm of the dilation to the complete dilation;
5) maximal time of the first stage of labor is 2 hours.
The correct answer is:
A. only 1.
B. only 2.
C. 3,4.
D. 3,4,5.
E. none of the above.
Question nr 129
"This tumor can develop before puberty but the peak incidence is observed in women of reproductive age. It easily ruptures which may lead to peritoneal signs and symptoms demanding urgent surgery. In postmenopausal women it may cause abnormal bleeding from the reproductive tract. Surgical excision does not guarantee full recovery as this tumor recurrence may be observed as many as 30 years after the initial diagnosis". The above is a characteristic of:
A. ovarian cancer.
B. sarcoma.
C. hydatidiform mole.
D. germinoma.
E. granulosa cell tumor.
Question nr 130
Azoospermia is defined as:
A. absence of spermatozoa in semen.
B. absence of semen.
C. absence of progressive motility of sperms.
D. concentration of sperms less than 20 million in 1 mL of semen.
E. less than 30 % of spermatozoa with normal morphology.

Which of the following is not a risk factor for urinary incontinence?
A. patient's age.
B. obesity.
C. previous gynecological procedures.
D. nulliparity.
E. chronic constipation.
Question nr 132
The combination of pharmacological therapy with a planned cesarean delivery has been shown to reduce the perinatal transmission of HIV to:
A. 25%.
B. 17.5%.
C. 5%.
D. 1.5%.
E. perinatal transmission of HIV does not depend on the mode of a delivery.
Question nr 133
The main source of alfa-fetoprotein (AFP) in the maternal blood at 18 weeks' gestation is:
A. maternal liver.
B. fetal liver.
C. fetal adrenal glands.
D. placenta.
E. yolk sac.
Question nr 134

Pregnancy in a woman with Swyer's syndrome may be possible:

A. after stimulation of ovulation with gonadotropins.
B. after performing patient's oocyte retrieval by the aspiration of ovarian follicles.
C. when a donor oocyte is used.
D. after surgical recreation of the vagina.
E. after the uterus transplantation.
Question nr 135
Indicate the <u>false</u> statement on interpretation of CTG:
A. sporadic accelerations are indicative of a healthy foetus.
B. bradycardia within 100-110 bpm does not indicate that foetal health is endangered.
C. cardiotocography should be implemented when the foetus is mature enough to survive outside the womb.
D. decelerations are drops in the baseline heart rate lasting 20 seconds or longer with a magnitude of at least 10 bpm.
E. early decelerations mirror uterine contractions.
Question nr 136
Indicate the estimated date of delivery calculated according to Naegele's rule for a woman with regular menstrual cycles of 32 days if the last menstruation started on 15 July 2018:
A. 15 April 2019.
B. 19 April 2019.
C. 21 April 2019.
D. 25 April 2019.
E. 26 April 2019.
Question nr 137
A patient presents at the gynecological outpatient clinic on the 12 th day after the radical hysterectomy due to endometrial hyperplasia with atypia. She complains of a constant

outflow of urine from the vagina. Which of the following should be suspected?

A. overactive bladder.
B. exercise-induced urinary incontinence caused by the impairment of ligaments of the uterus.
C. mixed urinary incontinence.
D. evacuation of accumulated lymph fluid through the vaginal stump.
E. vesicovaginal fistula.
Question nr 138
Factors increasing the risk of emergency peripartum hysterectomy <u>do not</u> include:
A. previous cesarean section.
B. pregnancy after in vitro procedure.
C. placenta praevia or percreta.
D. numerous previous pregnancies.
E. age above 35.
Question nr 139
The surgical treatment of cervical incompetence consists in a cervical cerclage. Which of the following conditions should be met before putting on a cerclage? 1) normal fetal development; 2) alive fetus; 3) absence of uterine contractions; 4) normal vaginal biocenosis; 5) gestational age over 28 weeks. The correct answer is:
A. 2,3,4,5.
B. 1,3,4,5.
C. 1,2,3,4.
D. all the above.
E. 1,2.
Over attention of 440

A normal letal fleart fate is in the range of.
A. 160-180 beats/minute.
B. 110-160 beats/minute.
C. 100-120 beats/minute.
D. 80-100 beats/minute.
E. 60-80 beats/minute.
Question nr 141
Which of the following is not characteristic of thrombotic thrombocytopenic purpura in a pregnant woman?
A. microangiopathic hemolytic anemia.
B. disseminated intravascular coagulation.
C. thrombocytopenia.
D. kidney failure.
E. fever.
Question nr 142
Obstetrical complications that may lead to disseminated intravascular coagulation (DIC) do not include:
A. amniotic fluid embolism.
B. premature placental abruption of the normally located placenta.
C. HELLP syndrome.
D. eclampsia.
E. fetal hypotrophy caused by placental insufficiency.
Question nr 143
Which of the following is not a risk factor for endometrial cancer?

A. BMI > 32 kg/m².

B. tamoxifen therapy.
C. late menopause.
D. nulliparity.
E. family history of ovarian cancer.
Question nr 144
The best method to diagnose fetal hemolytic disease is:
A. amniocentesis.
B. cordocentesis.
C. fetoscopy.
D. placenta biopsy.
E. biopsy of the fetal liver.
Question nr 145
The phase of voiding the urinary bladder, initiated by the brain cortex is characterized by the relaxation of sphincter muscles surrounding the urethra and the increased tone of the detrusor muscle. These phenomena are caused by:
A. inhibition of the sympathetic activity and the increased pulsation in the parasympathetic system.
B. inhibition of the parasympathetic activity and the increased pulsation in the sympathetic system.
C. increased pulsation in the somatic system innervating muscles of the pelvic floor.
D. inhibition of the sympathetic activity only.
E. inhibition of the parasympathetic activity only.
Question nr 146
Fetal heart auscultation is an important part of obstetrical examination and it helps safe delivery management. During normal delivery the basic fetal heart rate should be in the range of:

A. 70 - 90 bits per minute.

B. 100 - 170 bits per minute. **C.** 110 - 150 bits per minute. **D.** 110 - 190 bits per minute. **E.** above 170 bits per minute. Question nr 147 Which of the following indicates a complete mole at ultrasound examination? 1) "snow-storm" image; 2) no fetus; 3) presence of theca lutein cysts; 4) presence of fetal echo with a visible heart action; 5) presence of the gestational sac with amniotic fluid. The correct answer is: **A.** 1,2,3. **B.** 1,2,5. C. 1,3,5. **D.** 2,3,5. **E.** 3,4,5. Question nr 148 A 65-year-old patient in good medical condition, with arterial hypertension and type 2 diabetes mellitus treated with oral therapy, comes to the gynecologist because of the moderate hemorrhage from the reproductive tract. Her body weight is 87 kg and the height is 163 cm. The result of the endometrial biopsy is: endometrial adenocarcinoma G1. Transvaginal ultrasound imaging suggests minimal invasion of the endometrium, CT imaging shows no intra-abdominal dissemination nor pathological pelvic or paraaortic lymph nodes. Indicate the optimal treatment for this patient: **A.** surgery: hysteroscopic removal of the tumor. **B.** surgery: panhysterectomy. **C.** radiotherapy (brachytherapy + teletherapy).

D. chemotherapy (paclitaxel + carboplatin).

E. hormonal (megestrol acetate).
Question nr 149
Indicate the false sentence concerning the influence of progesterone on the female body:
A. progesterone has a diuretic effect.
B. progesterone thickens cervical mucus.
C. progesterone increases glycogen synthesis.
D. progesterone increases the thickness of the myometrium and the rate of peristaltic waves of the fallopian tubes.
E. progesterone increases body temperature.
Question nr 150
Indicate the true statement concerning vulvar cancer:
A. most often occurs before the age of 40.
B. accounts for 3-8% of all female genital malignancies.
C. more than 90% of vulvar cancers are glandular cancers.
D. the treatment of choice is a systemic treatment.
E. five-year survival for women in FIGO stage I is 31%.
Question nr 151
Which of the following manoeuvres is not recommended in the case of shoulder dystocia:
A. suprapubic pressure.
B. Zavanelli's manoeuvre.
C. Bracht's manoeuvre.
D. McRoberts manoeuvre.
E. Woods manoeuvre.
Ougstion pr 152

Indicate the correct sequence of fetal head movements in the birth canal during labor:
A. flexion, extension, rotation.
B. extension, rotation, flexion, rotation.
C. flexion, rotation, extension.
D. rotation, flexion, extension, rotation.
E. flexion, rotation, extension, rotation.
Question nr 153
In which of the following neoplasms brachytherapy is not used as an auxiliary method?
A. ovarian cancer.
B. endometrial cancer.
C. cervical cancer.
D. vulvar cancer.
E. in the all of the above cancers brachytherapy is used as an auxiliary method.
Question nr 154
Finding the lambda sign on ultrasound examination in a patient at 9 week of gestation allows diagnosing:
A. missed miscarriage.
B. monoamniotic twin pregnancy.
C. monozygotic twin pregnancy.
D. singleton pregnancy.
E. dichorionic twin pregnancy.
Question nr 155
Which of the following does not affect the result of the triple test?

A. body weight of the pregnant woman.

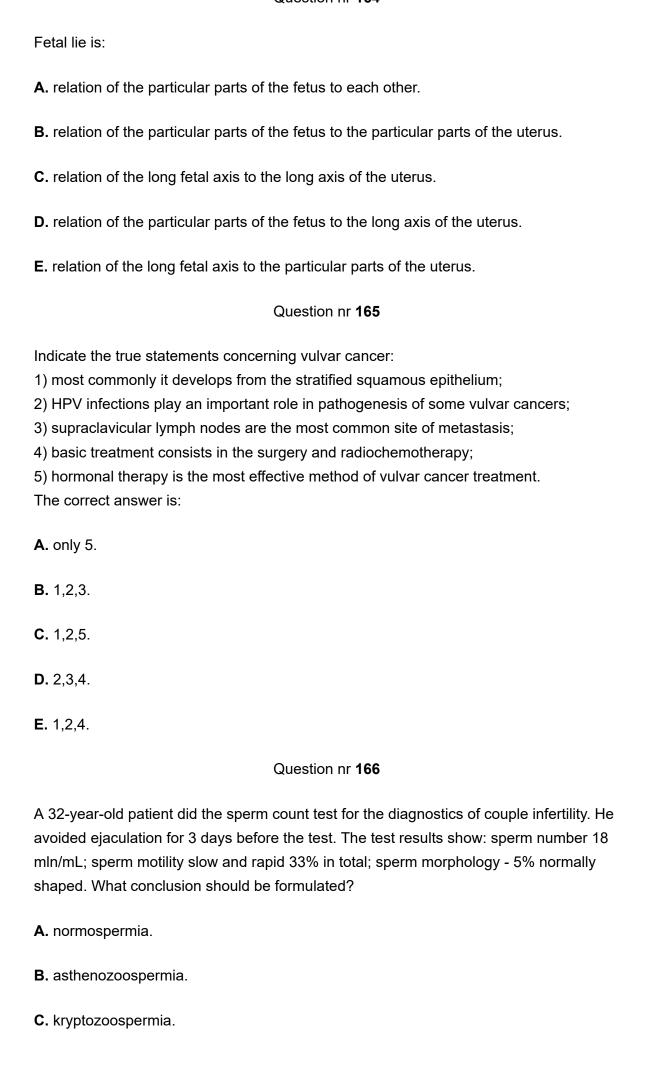
b. tobacco smoking.
C. number of pregnancies.
D. race.
E. type I diabetes.
Question nr 156
Which of the following are risk factors for exercise-induced urinary incontinence? 1) young age; 2) BMI < 30 kg/m²; 3) chronic constipation; 4) taking diuretics or anti-hypertensive medications; 5) chronic diseases with coughing. The correct answer is:
A. 1,2.
B. 3,4,5.
C. 1,3,5.
D. 2,4,5.
E. all the above.
Question nr 157
Routine obstetric ultrasounds between 11 weeks and 14 weeks of gestational age do not include:
A. evaluation of the number of gestational sacs in the uterine cavity.
B. measurement of the crown-rump length in the sagittal plain.
C. evaluation of the blood flow in the umbilical artery.
D. evaluation of the fetal heart rate (FHR).
E. determination of the number of chorionic sacs for multiple gestations.
Question nr 158

Which of the following is the most probable diagnosis in the case of impaired fertility, chronic pelvic pain, painful periods, and dyspareunia?

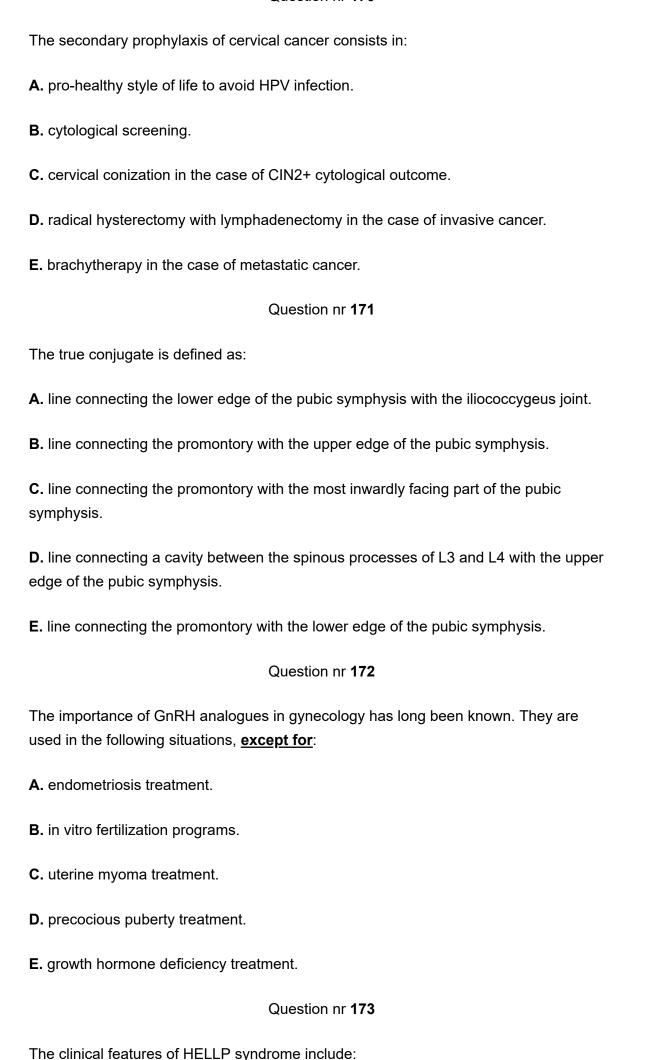
A. endometriosis.
B. ovarian cancer.
C. cervical cancer.
D. adnexitis.
E. premature ovarian failure.
Question nr 159
Assessment of the location of the fundal height is an important part of obstetrical examination. The fundus of the uterus at 24 th week of gestation is normally located:
A. 3 finger widths above the pubic symphysis.
3. at the umbiculus.
C. 3 finger widths above the umbiculs.
D. 3 finger widths below the xiphoid process.
E. under the costal margin.
Question nr 160
A patient at 26 th week of the gestation was injured in a traffic accident and subsequently was treated surgically and received 2 medications of the category B in the FDA classification. The category B denotes:
A. medications with the documented risk of fetal abnormalities.
3. medications with the documented risk of fetal abnormalities, but benefits from their use justify their application.
C. medications that showed adverse effect on the fetus in animal reproduction studies and there are no adequate studies in humans, but potential benefits may warrant the use of the drug in pregnant women despite a potential risk.
D. medications that are relatively safe in pregnancy, with no teratogenic effects observed in animal studies, but there are no adequate studies in humans.

E. medications that did not show teratogenic effects in the studies in pregnant women.

Which of the following is not a germ cell tumor of the ovary?
A. germinoma.
B. teratoma.
C. embryonal carcinoma.
D. granulosa cell tumor.
E. choriocarcinoma.
Question nr 162
Which of the following are indications for first-trimester complex prenatal diagnosis? 1) advanced maternal age (at least 35 years at the expected time of delivery); 2) giving birth to a child with genetic disorders in the past; 3) increased nuchal translucency (NT) values; 4) preeclampsia in the previous pregnancy; 5) oligohydramnios. The correct answer is:
A. 1,4,5.
B. 2,4,5.
C. 1,2,3.
D. 4,5.
E. 3,4.
Question nr 163
A single-handed maneuver performed during palpation of the pregnant woman's abdomen that allows to determine the leading part of the fetus and its location in relation to the inlet is called:
A. first Leopold's maneuver.
B. second Leopold's maneuver.
C. third Leopold's maneuver.
D. forth Leopold's maneuver.
F none of the above



D. oligoteratozoospermia. **E.** asthenoteratozoospermia. Question nr 167 In patients with severe preeclampsia the treatment of choice, both for the cessation of seizures as well as for their prevention, includes: **A.** atosiban administered intravenously. **B.** atosiban administered intramuscularly. C. magnesium sulfate administered intravenously. **D.** magnesium sulfate administered intramuscularly. **E.** calcium gluconate administered intravenously. Question nr 168 Chronic alcohol abuse may lead to disorders of spermatogenesis as the result of: **A.** increased concentration of levonorgestrel. **B.** decreased adrenal production of androstendione. **C.** increased concentrations of estrogens. **D.** increased synthesis of LH. **E.** increased synthesis of testosterone. Question nr 169 Which of the following is characteristic of stress urinary incontinence (SUI) in women? **A.** involuntary voiding that is preceded by strong urge to void and nycturia. **B.** leakage of urine following increased abdominal pressure. C. involuntary leakage of urine as the bladder is filled over. **D.** continuous urinary leakage through the fistula. **E.** feeling of incomplete voiding after emptying the bladder.



1) elevated liver enzymes;
2) low platelet count;
3) hemolysis;
4) thrombocytosis;
5) decreased concentration of indirect bilirubin.
The correct answer is:
A. 1,2,3.
B. 1,3,4.
C. 1,3,5.
D. 2,3,5.
E. 3,4,5.
Question nr 174
Which of the following may cause retrograde ejaculation?
1) diabetes mellitus;
2) depression;
3) sclerosis multiplex;
4) spinal cord injury;
5) myocardial infarction;
6) femoral bone fracture.
The correct answer is:
A. 1,3,4.
B. 1,4,5.
C. 2,5,6.
D. 3,4,5.
E. 4,5,6.
Question nr 175
The ultrasound risk factor for shoulder dystocia is not:

C. difference in the circumference of the abdomen and fetal head over 40 mm.

B. abdominal circumference above 350 mm.

- **D.** difference in the transverse abdominal and biparietal diameter over 26 mm.
- **E.** difference in the length of the clavicular bone and the humerus over 50 mm.

A heterotopic pregnancy may be a complication of an assisted reproductive program and denotes:

- A. ectopic pregnancy localized in the abdominal cavity.
- **B.** ectopic pregnancy localized in the scar after the cesarean section.
- **C.** ectopic pregnancy localized in the isthmus of the uterine tube.
- **D.** ectopic pregnancy localized in the cervix.
- **E.** both extra-uterine and intrauterine pregnancy occurring simultaneously.

Question nr 177

The lower limit of the reference range of hemoglobin concentration below which anemia is diagnosed in a pregnant woman is:

- **A.** higher than in non-pregnant women because the increase in the volume of circulating blood in pregnancy does not keep up with the increase in erythrocyte production.
- **B.** lower than in non-pregnant women because the increase in erythrocyte production does not keep up with the increase in the volume of circulating blood.
- **C.** the same as in non-pregnant women.
- **D.** irrelevant because anemia in pregnancy is diagnosed on the basis of hematocrit.
- **E.** dependent on the level of hemoglobin concentration before the pregnancy.

Question nr 178

Sheehan's syndrome - postpartum pituitary gland necrosis - is characterized by:

- A. hypogonadotropic hypergonadism.
- **B.** hypogonadotropic hypogonadism.
- **C.** hypergonadotropic hypergonadism.
- **D.** hypergonadotropic hypogonadism.

E. primary amenorrhoea.

Question nr 179

Which of the following is introduced into the peritoneal cavity in order to produce pneumoperitoneum during the laparoscopic procedure?
A. saline solution.
B. carbon dioxide.
C. oxygen.
D. nitrogen.
E. compressed air.
Question nr 180
Which of the following markers should be used in the diagnosis of molar pregnancy?
A. Ca125.
B. beta HCG.
C. estradiol.
D. inhibin A.
E. HE4.
Question nr 181
Indicate the true sentence describing endometriosis:
A. retrograde menstrual flow is necessary in the pathogenesis of endometriosis.
B. surgical treatment of endometriosis should not be used in women with pelvic pain.
C. fertility in endometriosis is only reduced when adhesions in the peritoneal cavity are present.
D. pharmacological treatment in endometriosis is limited due to the side effects of medicines.

E. every woman with endometriosis is infertile.

The multiple pregnancy is related to the increased risk of numerous obstetrical complications compared with the singleton pregnancy. Which of the following complications <u>are not</u> observed in multiple pregnancies more often than in singleton pregnancies?

· · · · · · · · · · · · · · · · · · ·
pregnancies?
1) shoulder dystocia;
2) gestational hypertension;
3) necessity for the cesarean section;
4) postterm pregnancy;
5) perinatal death;
6) placenta praevia;
7) congenital defects.
The correct answer is:
A. 1,4.
B. 2,6.
C. 2,7.
D. 3,5.
E. 4,6.
Question nr 183
The treatment of pre-invasive cervical cancer consists in:
A. excision of the affected part of the cervix.
B. strict cytological and colposcopic examination once a month.
C. simple hysterectomy.
D. radical hysterectomy.
E. brachytherapy.
Question nr 184
Which of the following ovarian tumors is a virilizing tumor?

B. endometrioid tumor.

A. Sertoli-Leydig cell tumor.

C. Wolffian duct cell tumor.
D. corpus luteum cyst.
E. fibroblast tumor.
Question nr 185
A woman who is rhesus negative undergoes spontaneous miscarriage at 14 week. What dose of anti D immunoglobulin should she receive?
A. 50 μg.
B. 100 μg.
C. 150 μg.
D. 300 μg.
E. 1500 μg.
Question nr 186
The relation of the long fetal axis to the long axis of the uterus and reproductive canal is called:
A. fetal lie.
B. position.
C. fetal location.
D. engagement.
E. presentation.
Question nr 187
A feature common for the Mayer-Rokitansky-Kustner-Hauser syndrome and complete androgen insensitivity syndrome is:
A. XY karyotype.
B. XX karyotype.
C. lack of the uterus and vagina.
D. defect of the androgen receptor gene.

E. presence of testicles in the abdominal cavity.

Question nr 188

When should the next cytological examination be ordered in a 35-year-old multipara with normal results of the last three cytological examinations and without any risk factors?

- A. in 3 months.
- **B.** in 6 months.
- C. in a year.
- D. in 3 years.

E. only if some symptoms occur, such as increased vaginal discharge, or contact bleeding.

Question nr 189

Indicate **the false** statement concerning hormonal contraception:

- A. progestogen-only pills can be used during breastfeeding.
- **B.** in the case of progestogen-only pills irregular bleedings or secondary amenorrhea can occur.
- **C.** hormonal contraception decreases the risk of ovarian, cervical and endometrial cancers.
- **D.** migraine is a contraindication to the use of oral hormonal contraception.
- **E.** so-called breakthrough bleedings are more intense in smokers.

Question nr 190

A patient with twin monochorionic pregnancy has been informed about the risk of twin-to-twin transfusion syndrome (TTTS). The syndrome is characterized by an unbalanced blood flow between the twins through active interconnecting blood vessels. One of the complications of TTTS that occurs in the recipient is:

- **A.** fetal hypertrophy.
- **B.** growth retardation.

D. oligohydramnios.
E. hypovolemia.
Question nr 191
Endometriosis should be taken into account in the case of:
A. endometrial hyperplasia on ultrasound, the presence of symptoms of hirsutism.
B. abnormal postmenopausal bleeding from the uterine cavity.
C. reduced fertility, pelvic pain syndrome, dysmenorrhea.
D. rare menstruation with the image of polycystic ovaries on ultrasound.
E. presence of endometrial polyps in the uterine cavity.
Question nr 192
The proliferative phase of the uterine cycle is dependent on:
A. progesterone produced by the corpus luteum.
B. progesterone produced by granulous cells.
C. estrogen produced by the corpus luteum.
D. estrogen produced by granulous cells.
E. estradiol produced by the dominant follicle.
Question nr 193
Precocious puberty in girls is defined when tertiary sexual features appear before:
A. the age of 8.
B. the age of 8, but when menstruation starts concomitantly with pubic hair.
C. the age of 10.
D. the age of 10, but when menstruation starts concomitantly with pubic hair.
E. the age of 11 regardless of race.

C. anemia.

Which of the following foetal head diameters is the smallest and most conveniently goes through the spaces of the pelvic planes during physiological childbirth?

A. suboccipitobregmatic.

A. suboccipitobregmatic.B. occipitofrontal.C. occipitomental.D. submentobregmatic.

E. verticomental.

Question nr 195

Which of the following findings on cardiotocography (CTG) is a good prognostic factor?

- A. decelerations.
- **B.** sinusoidal pattern.
- C. tachycardia.
- **D.** accelerations.
- E. bradycardia.

Question nr 196

Which of the following changes in blood morphology occurs in the second trimester of normal pregnancy?

- A. increased hematocrit levels.
- **B.** decreased hemoglobin concentration.
- **C.** increased hemoglobin concentration.
- **D.** increased platelet count.
- **E.** increased leucocyte count.

Question nr 197

Directly after the third stage of the delivery massive hemorrhage occurred leading to hypovolemic shock. The condition of the patient improved significantly over several

suspicion?
A. her child receiving 7 in the Apgar score.
B. change in respiratory rate.
C. worsening of the general condition and depressive thoughts.
D. no lactation.
E. occurrence of diarrhea.
Question nr 198
Which of the following is not a physiological cause of increased prolactin secretion in women?
A. pregnancy.
B. strenuous activity.
C. sleeping.
D. stress.
E. increased glucose level.
Question nr 199
Low molecular weight heparin during pregnancy:
A. has tocolytic effect.
B. accelerates foetal lung maturation.
C. prevents miscarriage in women with hereditary thrombophilia.
D. decreases the risk of premature placental abruption.
E. should not be used due to its teratogenic effect.
Question nr 200
Indicate the true statement concerning Duncan's method of placental separation:

A. it is correlated with lower bleeding than in Schultze's method.

days, but she is suspected of Sheehan's syndrome. Which of the following justifies this

B. it begins centrally.
C. it occurs in 80% of cases.
D. more frequently occurs in twin pregnancy.
E. usually does not lead to a hematoma formation.
Question nr 201
The pharmacological treatment of endometriosis <u>does not</u> include:
A. danazol.
B. gonadoliberin analogues.
C. preparations which contain 17-b estradiol only.
D. progestogens.
E. estrogen-progestogen formulations.
Question nr 202
Dopamine D ₂ receptor agonists (bromocriptine, quinagolide, cabergoline) are used for:
A. stimulation of lactation when the amount of milk produced in the postpartum period is too low.
B. treatment of pituitary tumors producing prolactin.
C. diagnostics of functional hyperprolactinemia.
D. controlled ovarian hyperstimulation.
E. contraception.
Question nr 203
Indicate the true statements concerning the cardiotocography (CTG) analysis: 1) short-term variability (STV) is particularly helpful in predicting the risk of metabolic acidosis in the fetus; 2) normal fetal heart rate (FHR) is 100 to 160 beats per minute;

4) correct long-term variability (LTV) is between 5 and 25 beats per minute; 5) sinusoidal rhythm indicates a high degree of fetal distress.

a sign of deep sleep of the fetus;

3) lack of an acceleration in the record up to 180 minutes is regarded as normal and as

A. 1,3,5.
B. 1,5.
C. 2,3.
D. 1,4,5.
E. 2,3,4.
Question nr 204
The examiner places his hands flat and parallel on both sides of the abdomen of a pregnant woman, at the level of the umbilicus. The described maneuver allows to determine the fetal position and is called:
A. 1 st Leopold's maneuver.
B. 2 nd Leopold's maneuver.
C. 3 rd Leopold's maneuver.
D. 4 th Leopold's maneuver.
E. 5 th Leopold's maneuver (Zangemeister maneuver).
Question nr 205
Adaptive changes in the circulatory system of a pregnant woman consist of: 1) increase in the circulating blood volume, including 45% of the plasma volume and 20% of the erythrocyte mass, with a greater increase of the circulating blood volume in obese women than in slim women; 2) increase in cardiac output; 3) acceleration of heart rate by 10-15 beats per minute; 4) increased peripheral arterial resistance by 20%; 5) increase in central venous pressure. The correct answer is:
A. 1,5.
B. 1,2,3.
C. 1,3,4.
D. only 1.

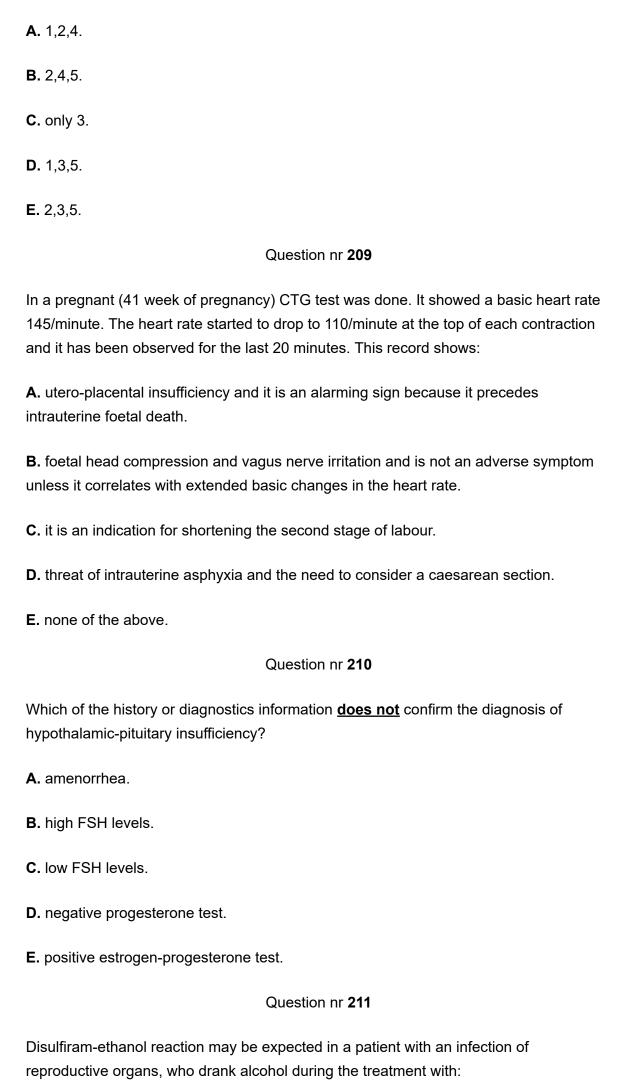
The correct answer is:

A 27-year-old patient comes to the emergency department at 29 weeks of her first pregnancy complaining about a fever up to 38.3°C for the last couple of hours, 2

episodes of vomiting and back pain. Ultrasound examination reveals a normally growing living foetus, normal placenta located in the fundus and the full bladder. On palpation,
the abdomen is not rigid but tender in the hypogastric area. On bimanual vaginal
examination no pain during cervical motion is observed. The percussion of the lumbar
area, especially on the left side, is very painful for the patient. What do you suspect?
A. acute appendicitis.
B. acute cystitis.
C. left-sided renal calculi.
D. acute pyelonephritis.
E. hydronephrosis due to the pressure of the pregnant uterus on the ureter.
Question nr 207
All of the following are features of Swyer syndrome, except from :
A. XY karyotype.
B. uterus present.
C. primary amenorrhea.
D. male phenotype.
E. hypogonadism.
Question nr 208
Which of the following are characteristic of a granuloma cell tumor?

- 1) most often occurs on both sides;
- 2) it is a germ cell tumor;
- 3) it is secreting estrogens and inhibin;
- 4) it is often accompanied by ascites;
- 5) most often occurs before puberty.

The correct answer is:



B. cefuroxime.
C. clindamycin.
D. furaginum.
E. acyclovir.
Question nr 212
Which of the following should not be used in the treatment of a urinary tract infection in a pregnant or breastfeeding woman?
A. nitrofurantoin.
B. ciprofloxacin.
C. cefuroxime.
D. amoxicillin.
E. ampicillin.
Question nr 213
Which of the following is a non-invasive prenatal test that shows the highest sensitivity in the diagnostics of chromosomal aberrations in a fetus?
A. chorionic villus sampling.
B. amniocentesis.
C. triple test.
D. PAPP-A determination.
E. examination of cell-free fetal DNA in maternal blood.
Question nr 214
Teratozoospermia according to WHO criteria of 2010 denotes:
A. percentage of sperm with normal morphology below 4%.
B. percentage of sperm showing normal mobility below 4%.

A. metronidazole.

- C. no sperm in the ejaculate.
- **D.** over 250 million sperm in 1 mL of the ejaculate.
- **E.** percentage of sperm with normal morphology below 40%.

Which of the following is characteristic of the vaginal discharge in a woman with bacterial vaginitis?

- **A.** pH < 4.5, yellow-greenish foamy discharge with clue cells present.
- **B.** pH < 4.5, grey or milky homogenous discharge with clue cells present.
- **C.** pH > 4.5, grey or milky homogenous discharge with clue cells present.
- **D.** pH > 4.5, white, clotty, serous discharge with clue cells present.
- **E.** pH < 4.5, white, clotty, serous discharge without any cells present.

Question nr 216

Indicate the true statement concerning ovarian cancer surgery:

- A. it strives for tumour sample obtaining and fast radical chemotherapy application.
- **B.** cytoreduction is performed to the highest possible extent.
- **C.** only and always the affected ovary is removed.
- **D.** following uterectomy the region of the lesser pelvis may be irradiated.
- **E.** neoadjuvant chemotherapy is always used in order to decrease a tumour mass.

Question nr 217

Indicate the clinical features of germinal neoplasms of the ovary:

- 1) occur mainly in young women;
- 2) occur mainly in post-menopausal women;
- 3) may be diagnosed on the basis of increased blood levels of CA-125, CEA, CA 15-3;
- 4) may be diagnosed on the basis of increased blood levels of LDH, AFP, hCG;
- 5) respond well to chemotherapy;
- 6) are treated only surgically;
- 7) are always malignant tumours.

The correct answer is:

A. 1,4,7.
B. 3,4,6.
C. 2,4,6,7.
D. 1,4,5.
E. 2,3,7.
Question nr 218
Which of the following is not related to the polycystic ovary syndrome?
A. overweight and obesity.
B. insulin resistance and increased risk of type 2 diabetes.
C. increased risk of cardiovascular diseases.
D. increased risk of breast cancer and rectal cancer.
E. increased risk of endometrial cancer.
Question nr 219
Neoplastic ovarian tumours which produce steroid hormones include: 1) thecoma; 2) mature teratoma; 3) endometrioid carcinoma; 4) granulosa cell tumour. The correct answer is:
A. 1,2.
B. 1,4.
C. 2,3.
D. 2,4.
E. 3,4.
Question nr 220

The triad of Sabin and Pinkerton (hydrocephalus or microcephaly, chorioretinitis, intracranial calcifications) is typical of the congenital infection with:

A. rubella virus.
B. toxoplasmosis.
C. parvovirus B19.
D. cytomegalovirus.
E. herpes simplex virus.
Question nr 221
The treatment of arterial hypertension in pregnant women includes the use of:
A. angiotensin-converting-enzyme inhibitors, methyldopa, labetalol.
B. angiotensin-converting-enzyme inhibitors, methyldopa, angiotensin II receptor antagonists.
C. labetalol, nifedipine, methyldopa.
D. diuretics, angiotensin II receptor antagonists, labetalol.
E. labetalol, methyldopa, amiodarone.
Question nr 222
Which of the following is not a risk factor for endometrial cancer?
A. smoking tobacco.
B. obesity.
C. diabetes.
D. exogenous estradiol.
E. late menopause.
Question nr 223
Which of the following can be usually found in a patient with menstrual disorders related to chronic intensive physical exercise?
A. hypogonadotropic hypergonadism.
B. hypergonadotropic hypergonadism.

D. hypergonadotropic hypogonadism.
E. hypogonadotropic hypogonadism.
Question nr 224
A <u>contraindication</u> to the safe delivery of the vaginal birth with the breech presentation of the fetus is:
A. multiparity.
B. pregnancy term 36-40 weeks.
C. fetal frank breech presentation.
D. fetal weight from 2000 to 3700 g.
E. footlink breech presentation.
Question nr 225
The pregnancy in a patient with chronic hypertension is a high-risk pregnancy and may be complicated with the following disorders except for :
A. preterm birth related to the cervical incompetence.
B. intrauterine growth retardation.
C. superimposed preeclampsia.
D. abruption of normally located placenta.
E. oligohydroamnios.
Question nr 226
Which of the following should be done in the case of a patient without risk factors for diabetes if her fasting glucose level is 110 mg/dL in the 9 th week of gestation?
A. oral glucose tolerance test with 75g of glucose between 24 th and 28 th week of gestation.

C. normal hormonal function of the ovaries.

B. repeated fasting glucose examination.

C. recommend diabetes diet.

D. assessment of the 24-hour blood glucose profile.
E. oral glucose tolerance test with 75g of glucose immediately.
Question nr 227
Which of the following are <u>absolutely contraindicated</u> in the pharmacological treatment of arterial hypertension during pregnancy?
A. calcium blockers.
B. beta-blockers.
C. thiazide diuretics.
D. angiotensin convertase inhibitors.
E. clonidine.
Question nr 228
Which of the following is not a typical complication of gestational diabetes?
A. polyhydramnios.
B. fetal macrosomia.
C. intrauterine growth retardation.
D. obstetric cholestasis.
E. traumatic delivery.
Question nr 229
A <u>contraindication</u> to breastfeeding <u>is not</u> :
A. HIV infection.
B. breast cancer.
C. severe mental disorder.
D. mother's use of semisynthetic penicillin.
E. acute heart failure.

A young female patient gave birth to her child about a year ago through the vaginal delivery, after which curettage was necessary because of fragments of the placenta did
not separate from the uterus. She stopped breastfeeding 4 months ago, but the periods
have not reoccurred yet. Her medical history may suggest:
A. Kallmann syndrome.
B. Sheehan's syndrome.
C. Asherman's syndrome.
D. Mayer-Rokitansky-Küster-Hauser syndrome.
E. Couvelaire syndrome.
Question nr 231
Which of the following blood vessels is used in the non-invasive ultrasound evaluation of foetal anaemia?
A. uterine artery.
B. ductus venosus.
C. umbilical artery.
D. middle cerebral artery.
E. umbilical vein.
Question nr 232
High FSH serum levels accompanied by low estradiol levels are characteristic of: 1) Turner syndrome; 2) premature ovarian failure (POF); 3) pure gonadal dysgenesis; 4) polycystic ovary syndrome (PCOS); 5) postmenopausal period. The correct answer is:
A. 1,2,3.
B. 1,2,5.
C. 1,2,3,5.

D. only 3.
E. all the above.
Question nr 233
In obstetrics, the term position (positio) means:
A. relationship of the foetus' body parts to the parts of the maternal womb.
B. relationship of the longitudinal axis of the foetus to the longitudinal axis of the maternal womb.
C. relationship of the foetal head to the foetal spine.
D. relationship of the foetus' body parts to one another.
E. relationship of a presenting part of the fetus to the inter-spinal line.
Question nr 234
Which of the following parameters <u>is not</u> included in the assessment of the fetal biophysical profile?
A. fetal movement.
B. fetal tone.
C. umbilical artery blood flow.
D. amniotic fluid volume.
E. fetal heart rate.
Question nr 235
Indicate the true set of physiological changes in the circulatory system of pregnant women:
A. increased heart rate, increased cardiac output, increased volume of circulating blood, decreased systemic and pulmonary vascular resistance, decreased arterial pressure.
B. increased heart rate, decreased cardiac output, increased volume of circulating blood, increased systemic and pulmonary vascular resistance, decreased arterial pressure.

C. increased heart rate, decreased cardiac output, increased volume of circulating

blood, increased systemic and pulmonary vascular resistance, increased arterial pressure. D. increased heart rate, decreased cardiac output, decreased volume of circulating blood, increased systemic and pulmonary vascular resistance, decreased arterial pressure. E. decreased heart rate, decreased cardiac output, increased volume of circulating blood, increased systemic and pulmonary vascular resistance, increased arterial pressure. Question nr 236 A 45-year-old woman with the diagnosis of cervical cancer went to see her gynecologist. Which of the following data from her medical history is not a risk factor for this cancer? A. 5 deliveries. **B.** numerous viral and bacterial infections of the cervix. C. obesity. **D.** smoking. **E.** frequent changing of sexual partners. Question nr 237 The complications typical of monochorionic-monoamniotic twin pregnancies include: 1) acute type of twin-to-twin transfusion syndrome (TTTS); 2) chronic type of twin-to-twin transfusion syndrome (TTTS); 3) impairment of the fetus whose twin died in the utero; 4) conjoint twins; 5) premature labor after the end of 37 week of gestation. The correct answer is: **A.** 2,3,4,5. **B.** 1,3,4,5. **C.** 1,2,3,4. **D.** all the above.

E. 1.2.

Anti-RhD immunoglobulin is used in RhD minus female patients in a single i.m. injection after the laparoscopic treatment of an ectopic pregnancy (WGA < 12 Hbd) within 72 h of the surgery at a dose of:

the surgery at a dose of:
A. 50 μg.
B. 100 μg.
C. 150 μg.
D. 200 μg.
E. 300 μg.
Question nr 239
Which of the following is not included in the fetal biophysical profile (Manning's score)?
A. fetal heart rate.
B. fetal muscle tone.
C. placenta development stage.
D. amniotic fluid volume.
E. fetal respiratory movements.
Question nr 240
The factors that increase the risk of endometrial cancer include: 1) smoking cigarettes; 2) metabolic syndrome (obesity, diabetes); 3) multiparity; 4) polycystic ovary syndrome; 5) long-term estrogen therapy not balanced with progesterone administration. The correct answer is:
A. 1,3,5.
B. 3,4,5.
C. 2,3,4.

D. 2,4.

Quostion in 241
Which of the following fetal head circumferences is the smallest?
A. occipito-frontal.
B. suboccipito-bregmatic.
C. occipito-mental.
D. suboccipito-hyoid.
E. genio-hyoid.
Question nr 242
Premature <i>thelarche</i> in contrast to precocious puberty is characterized by the isolated:
A. development of axillary hair.
B. development of pubic hair.
C. breast development.
D. occurrence of ovulation.
E. occurrence of voice change.
Question nr 243
Marsupialization is a surgical method of:
A. primary treatment of stress urinary incontinence.
B. treatment of recurrent stress urinary incontinence.
C. treatment of a recurrent Bartholin gland abscess.
D. treatment of impaired statics of the reproductive organ.
E. creation of the vagina in patients with Mayer-Rokitansky-Küster-Hauser syndrome.

Question nr 244

A 32-year-old childless patient has a history of 4 miscarriages in the first trimester. The

evaluation of the possible causes of miscarriages in this patient should include:
1) diagnostics of <i>Toxoplasma gondii</i> infection;
2) diagnostics of Human Papilloma Virus infection;
3) determination of anti-cardiolipin antibodies;
4) diagnostics of Cytomegalovirus infection;
5) determination of lupus anticoagulant.
The correct answer is:
A. 1,2.
B. 2,3.
C. 3,5.
D. 2,4,5.
E . 1,4,5.
Question nr 245
Which of the following are assessed by the Bishop score?
A. relation between the cervix and the vaginal axis, dilation, cervical effacement, fetal station.
B. gestational age, fetal position, cervical dilation and effacement.
C. cervical consistency, fetal lie, dilation, cervical effacement, fetal presentation.
D. relations between the uterine axis and vaginal axis, dilation, cervical effacement, fetal position.
E. relations between the long fetal axis and the vaginal axis, dilation, cervical effacement, strength of uterine muscle contractions.
Question nr 246
The diagnosis of endometriosis should be considered in all the following conditions, except for :
A. oligomenorrhea.
B. dyspareunia.
C. painful menstruation.

E. pelvic pain.
Question nr 247
So called <i>clue cells</i> are typical of:
A. vaginal candidiasis.
B. vaginal trichomoniasis.
C. bacterial vaginosis.
D. normal vaginal biocenosis.
E. vaginal actinomycosis.
Question nr 248
The increased risk of endometrial cancer <u>has not</u> been associated with:
A. obesity.
B. diabetes.
C. hypertension.
D. late menopause.
E. endometriosis.
Question nr 249
Chemotherapy as a separate therapeutic strategy (not as a part of a combination therapy) is the most effective in the treatment of:
A. serous ovarian cancer.
B. mucinous ovarian cancer.
C. endometrial cancer of the uterus.
D. choriocarcinoma.
E. cervical squamous cell carcinoma.

A 36-year-old multiparous woman went to see a gynecologist because of regular but excessive and painful periods which has lasted for the last few years. This is accompanied by increasing fatigue, general weakness, and more frequent urination. The pathological findings included pale mucosa. Gynecological exam revealed a tumour the size of a 4-month pregnancy. Blood test and transvaginal ultrasound were made. What lab test results and diagnosis can you expect? **A.** aneamia, uterine myomas. **B.** anaemia, pregnancy. C. normal blood count, pregnancy. **D.** normal blood count, simple ovarian cyst. **E.** anaemia, simple ovarian cyst. Question nr 251 A 14-year-old girl went to see a gynecologist due to cramp pains within lower abdomen, accompanied by nausea, vomiting and general weakness. The pain started just before her menstruation and have continued for two days. A similar condition occurred during her last cycle. The girl is disturbed as she had her menarche the year before and did not have any similar symptoms. Gynecological exam did not reveal any abnormalities. Abdominal and pelvic ultrasound did not show any pathological findings. The most probable diagnosis will be: A. premenstrual syndrome (PMS). **B.** unicornate uterus. C. primary dysmenorrhea. **D.** secondary dysmenorrhea.

Question nr 252

Indicate which of the activities below is an example of primary prevention in gynecologic

E. Asherman syndrome.

onology:

A. cytology.

B. HPV vaccination.

C. colposcopy.

D. HPV genotyping.
E. cervical conization/LLETZ.
Question nr 253
nfluenza vaccination in pregnancy: 1) is recommended to every woman who has no contraindications to vaccination; 2) should be performed only in the second trimester of pregnancy; 3) should be performed using inactivated quadrivalent vaccine; 4) is safe both for the mother and the child. The correct answer is:
A. 1,4.
3. all of the above.
C. 1,3,4.
D. 1,2,4.
E. 1,2.
Question nr 254
The Mayer-Rokitansky-Kustner and Hauser syndrome is characterized by: 1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus. The correct answer is:
1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus.
1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus. The correct answer is:
1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus. The correct answer is: A. all of the above.
1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus. The correct answer is: A. all of the above. B. 1,2,5,6.
1) primary amenorrhoea; 2) female karyotype 46,XX; 3) scarcity of axillary and pubic hair; 4) congenital absence of ovary; 5) congenital absence of vagina; 6) ametria, rudimentary uterus or rudimentary horns of uterus. The correct answer is: A. all of the above. 3. 1,2,5,6.

A patient in a 36-week pregnancy had contact with a person diagnosed with chickenpox. If the patient is non-immune to chickenpox, the correct proceeding will be:
A. immunoglobulin given only to the newborn, just after birth.
B. informing the patient that no prophylactic treatment is necessary.
C. intramuscular immunoglobulin given to the patient, within 72-96 hours from contact.
D. intramuscular immunoglobulin given to the patient, within 72-96 hours from contact, and to the newborn, immediately after birth.
E. performing a cesarean section within 24 hours from contact with the chickenpox-infected person, and immunoglobulin given to the newborn just after birth.
Question nr 256
In the case of post-menopausal bleeding, the recommended diagnostic procedure will be: 1) ultrasound examination after 2 months; 2) endometrial aspiration biopsy; 3) hysteroscopy and targeted biopsy; 4) computed tomography (CT) of pelvis; 5) fractional curettage of the uterine cavity. The correct answer is: A. 1,2,3. B. 1,2,5. C. 1,2,3,5. D. 4 only. E. 2,3,5.
Question nr 257
A 28-year-old patient obtained an ASC-H cytology result. The patient was not pregnant and was not vaccinated against HPV. The recommended procedure will be:
A. colposcopy.
B. cervical conization, both for diagnostic and therapeutic purposes.

C. HPV genotyping.

D. assessment of the p16/Ki67 biomarkers.
E. repeated cytology after 6 months.
Question nr 258
The risk factors for gestational diabetes do not include:
A. obesity of pregnant woman.
B. diabetes in first-degree relatives.
C. diabetes in previous pregnancy.
D. age above 35 years.
E. diabetic father of the child.
Question nr 259
Oligohydramnios can be caused by: 1) fetal lung hypoplasia; 2) premature rupture of membranes; 3) fetal hypotrophy; 4) placental insufficiency; 5) viral infection. The correct answer is: A. 1,2,3. B. 2,4,5. C. 2,3,4. D. 3,4,5.
E. 1,4,5.
Question nr 260
Endometriosis is a disease in which endometrial glands and stroma occur outside the uterus. The clinical symptoms of endometriosis include:
A. dyspareunia.
B. infertility.

C. dysmenorrhea.
D. pelvic pain syndrome.
E. all of the above.
Question nr 261
A 60-year-old female visited her gynaecologist because of vaginal bleeding/spotting. The symptoms appeared after sexual intercourse. The patient has not had periods for 10 years. She has not observed any spotting or bleeding so far. For the last few years she has been treated with marcumar for atrial fibrillation. Indicate the possible cause(s) of these symptoms:
A. the use of marcumar.
B. cervical cancer.
C. endometrial proliferation/cancer.
D. vaginal atrophy.
E. all of the above.
Question nr 262
A 14-year-old girl was found to have no breast growth. This may be the symptom of: 1) Rokitansky syndrome; 2) gonadal dysgenesis; 3) constitutional delay of puberty; 4) androgen insensitivity syndrome; 5) some metabolic diseases, e.g. diabetes. The correct answer is:
A. 1,2,3.
B. 2,3,4.
C. 3,4,5.
D. 2,3,5.
E. all of the above.
Question nr 263

In imminent premature labour, the $\underline{absolute}$ contraindications to tocolytic treatment \underline{do}

A. fetal death.
3. intrauterine infection.
C. premature rupture of membranes.
D. premature placental abruption.
E. eclampsia.
Question nr 264
n week 27 of diamniotic monochorionic twin pregnancy, one of the foetuses was found to have oligohydramnios, collapsed bladder, and reduced fetal movement, while the other had overfull bladder and generalised oedema. The diagnosis should be:
A. selective intrauterine growth restriction (sIUGR), and the treatment should be medical observation and another ultrasound after two weeks.
B. reversed flow syndrome, and the treatment should be a sclerosant injected into the artery of the acardiac foetus.
C. twin-to-twin transfusion syndrome (TTTS), and the treatment should be fetoscopic asercoagulation of blood vessels connections between the twins.
D. twin anaemia-polycythemia sequence, and the treatment should be urgent termination of pregnancy via the caesarean section.
E. comorbidity of gestational trophoblastic disease, and the treatment should be urgent termination of pregnancy via the caesarean section.
Question nr 265
n diabetic patients, the contraindications to pregnancy <u>do not</u> include:
A. severe nephropathy.
3. treatment-resistant arterial hypertension.
C. ischaemic heart disease.
D. diabetic nephropathy.
E. treatment-resistant proliferative retinopathy.

not include:

Indicate true statements regarding epidemiology of cervical cancer:
A. the incidence of cervical cancer is correlated with the rate of human papilloma virus.
B. the relative risk of cervical cancer decreases with age.
C. cervical cancer is more prevalent among obese women.
D. cervical cancer is not found among sexually inactive women.
E. the relative risk of cervical cancer decreases with the number of childbirths.
Question nr 267
The most frequent type of vulvar cancer (65-90% of cases) is:
A. adenocarcinoma.
B. squamous cell carcinoma.
C. clear cell carcinoma.
D. Paget's disease.
E. Bowen's disease.
Question nr 268
A female genital neoplasm which gives a positive pregnancy test result, and is often manifested by the development of bilateral ovarian cysts during its course, is termed as:
A. dysgeminoma.
B. folliculoma.
C. sertolioma.
D. choriocarcinoma.
E. luteoma.
Question nr 269
In gynaecology, an example of primary prevention of cervical cancer is:

A. DNA genotyping of highly oncogenic HPVs.

B. cytology.
C. a so-called 'co-testing' i.e. cytology combined with HVP genotyping.
D. vaccination against HPV.
E. colonoscopy.
Question nr 270
The basic examination for detecting cervical cancer is:
A. routine gynaecological examination.
B. cytological assessment of the peritoneal fluid obtained in abdominal paracentesis.
C. determination of Ca125 marker.
D. ROMA test (Ca125 and HE-4 markers).
E. transvaginal ultrasound of pelvic organs.
Question nr 271
In ovarian cancer diagnostics, the family history of this cancer is of high significance. Which genes should be considered in gene mutation testing that could help assess an increased risk of ovarian cancer among family members?
A. P 53.
B. <i>Bcl-2</i> .
C. BRCA1 and BRCA2.
D. ACE 2.
E. HE4.
Question nr 272
Indicate which of the factors below contribute to decreasing the risk of ovarian cancer and are thought to play a protective role: 1) multiparity:

4) ovarian puncture in the *in vitro* fertilization procedure.

2) combined hormonal contraceptive;3) hormonal stimulation of ovulation;

The correct answer is:
A. 2 only.
B. 1,2.
C. 1,2,3.
D. all of the above.
E. none of the above.
Question nr 273
Indicate hormonal drugs used in the complementary therapy of cancer of the body uterus:
A. estrogens.
B. selective oestrogen receptor modulators.
C. progestagens.
D. selective progesterone receptor modulators.
E. androgens.
Question nr 274
Human papilloma virus genotype 6 and 11 (HPV6 and HPV11) infection is considered to be a low-risk infection for the development of cervical cancer. Which of the pathologies below can be caused by HPV6 and HPV11 infection?
A. genital warts.
B. cervical intraepithelial neoplasia stage 1 (CIN-1).
C. laryngeal papillomatosis.
D. all of the above.
E. none of the above.
Question nr 275

One of the additional biochemical tests that may help diagnose genital lesions and distinguish benign ones from malignant ones is the test that measures the levels/ amount of:

A. AMH.
B. cancer antigen 125 (CA 125).
C. inhibin.
D. procalcitonin.
E. cancer antigen 15-5 (CA 15-5).
Question nr 276
Primary active cervical cancer prevention is based on:
A. regular Pap/cervical smears.
B. the avoidance of hormonal contraception.
C. the use of HPV vaccine in girls before sexual initiation.
D. the treatment of vaginal infections.
E. the treatment of cervical ectropion.
Question nr 277
Which of the malignant tumours of the genital organs is hormone-sensitive and is treated hormonally both in basic and adjuvant therapy?
A. cervical cancer.
B. endometrial cancer.
C. uterine sarcoma.
D. endometrioid ovarian cancer.
E. ovarian granulosa-cell tumour.
Question nr 278
Which of the statements below is true about brachytherapy?
A. it is a form of treatment that involves chemotherapy of malignant tumours of the genital organs in females.

B. it involves local radiation therapy of genital tumours in females.

C. it involves hormonal therapy in the case of uterine bleeding.
D. it involves palliative symptomatic treatment of metastatic cancer of the genital organs in females.
E. it involves balneotherapy of genital diseases in females.
Question nr 279
The clinical symptoms of pre-eclampsia include: 1) headache; 2) visual disturbances; 3) nausea and vomiting; 4) increasing activity of hepatic enzymes; 5) thrombocytosis.
A. 1,3.
B. 2,3.
C . 2,4,5.
D. 1,2,3,4.
E. all of the above.
Question nr 280
Which of the statements below are true about myomas? 1) myomas are malignant tumours of the uterus that are mainly composed of smooth muscle cells; 2) African American women are at the highest risk of developing uterine myomas; 3) the diagnosis of myomas in a pregnant woman should result in the termination of pregnancy by means of a C-section; 4) myomas typically manifest clinically in perimenopause; 5) surgical excision of the body of the uterus is advisable in every post-reproductive patient with uterine myomas.
A. only 1.
B. 1,3.
C. 2,4.
D. 2,3,4.

E. all of the above.

Question nr 282

Which of the following vaccinations should not be performed in pregnancy?
A. flu, hepatitis B.
B. rabies, tetanus.
C. BCG, measles.
D. hepatitis A, pertussis.
E. typhoid fever, polio.
Question nr 283
The main features of labour in occipito-posterior position are:
A. the denominator - the area of the posterior fontanelle, the engaging diameter-suboccipito-bregmatic, the contact point - the suboccipital area.
B. the denominator - the area of the posterior fontanelle, the engaging diameter - suboccipito-bregmatic, the contact point - the area of the anterior fontanelle.
C. the denominator - the forehead, the engaging diameter - mento-bregmatic, the contact point - the upper jaw.
D. the denominator - the upper jaw, the engaging diameter - trachelobregmatic, the contact point - the chin.
E. the denominator - the anterior fontanelle, the engaging diameter - occipito-frontal, the contact point - the forehead.
Question nr 284
The action of oestrogens does not include:
A. an increase in the synthesis of the protein binding sex steroids, cortisol and thyroxine.
B. the suppression of osteolysis and stimulation of osteogenesis.

C. the influence on the distribution of female-type adipose tissue.

D. a decrease in hypoglycaemic action of insulin.

E. a positive effect on the mental and emotional condition.

Question nr 285

Which of these **is not** an **absolute** contraindication for the use of the combined oral contraceptive pill?

- A. oestrogen-dependent cancer.
- **B.** smoking in patients over 35.
- C. active vein thrombosis.
- **D.** ergotamine-based treatment of migraines.
- **E.** elevated blood pressure.

Question nr 286

Which of the changes in the circulatory system and haemostasis are typical of pregnancy?

- **A.** an approximately 45% increase in the volume of the blood, an approximately 30% increase in the total volume of erythrocytes.
- **B.** a decrease in the number of leukocytes, an approximately 15% increase in haemoglobin.
- **C.** an approximately 50% decrease in the volume of plasma, an approximately 15% increase in haematocrit.
- **D.** an increase in the number of blood platelets and a prolonged prothrombin time.
- **E.** a decrease in fibrinolysis and fibrinogen degradation products.

Question nr 287

When is the occurrence of choriocarcinoma the most dangerous?

- **A.** after a previously diagnosed partial hydatidiform mole.
- **B.** after a pregnancy that ended with delivery.
- **C.** after a previously diagnosed complete hydatidiform mole.
- D. after ectopic pregnancy.
- **E.** after a pregnancy that ended with a miscarriage.

A 28-year-old gravida 1, LMP = 14/11/22, regular menstruations, 31-day cycles. The EDD according to Naegele's rule is: **A.** 07/08/23. **B.** 19/08/23. C. 21/08/23. **D.** 24/08/23. **E.** 21/09/23. Question nr 289 The main features of labour in the occiput posterior position are: A. the denominator - the area of the posterior fontanelle, the engaging diametersuboccipito-bregmatic. B. the denominator - the area of the anterior fontanelle, the engaging diametersuboccipito-bregmatic. **C.** the denominator - the forehead area, the engaging diameter- suboccipito-bregmatic. **D.** the denominator - the nape of the neck, the engaging diameter- suboccipitobregmatic. **E.** the denominator - the forehead area, the engaging diameter- the fronto-occipital diameter. Question nr 290 Which of the following **is not** a contraindication for external version? **A.** a multiple birth, a pelvic presentation of the first foetus. **B.** a multiple birth, a transverse lie of the second foetus after the delivery of the first one. C. foetal macrosomia. **D.** oligohydramnios.

E. placenta previa.

The second Leopold's manoeuvre determines:
A. the height of the fundus of uterus.
B. the location of the foetal back.
C. the presenting part.
D. whether the head is above the level of the pubic symphysis.
E. the insertion of the presenting part.
Question nr 292
Which of the following bones connect in the acetabulum?
A. the ilium and the ischium.
B. the ilium, the sacrum and the ischium.
C. the ilium, the ischium and the pubis.
D. the ischium, the pubis and the sacrum.
E. the ilium and the pubis.
Question nr 293
Which of the following nerves transmit(s) pain stimuli in the vagina?
A. the vaginal nerves.
B. the inguinal nerves.
C. the genitofemoral nerves.
D. the pudendal nerve.
E. the perineal branches of the posterior femoral cutaneous nerve.
Question nr 294
The shortest circumference of the foetal head is in:

A. the fronto-occipital diameter.

B. the mento-occipital diameter.
C. the fronto-suboccipital diameter.
D. the suboccipito-bregmatic diameter.
E. the occipito-bregmatic diameter.
Question nr 295
The most common complications observed during the induction of labour are: 1) uterine hyperstimulation; 2) uterine rupture; 3) hypertension in the mother; 4) abnormal CTG; 5) post-partum haemorrhage; 6) green amniotic fluid; 7) HELLP syndrome. The correct answer is: A. 1,2,3,5. B. 2,3,4,5,6. C. 3,4,5,6,7. D. 1,2,3,4,6. E. 1,2,4,5,6.
Question nr 296
A spontaneous vaginal delivery in a full-term pregnancy <u>is not</u> possible in the case of:
A. vertex presentation.
B. sinciput presentation.
C. occiput posterior presentation.
D. face presentation (anterior type).
E. face presentation (posterior type).
Question nr 297

Monochorionic monoamniotic twins should ideally be delivered at:

A. 32 - 34 weeks' gestation.
B. 35 - 36 weeks' gestation.
C. 37 - 38 weeks' gestation.
D. 39 - 40 weeks' gestation.
E. 41 - 42 weeks' gestation.
Question nr 298
The ante-partum risk factors of post-partum haemorrhage do not include:
A. being underweight.
B. multiparity.
C. maternal age > 35.
D. diabetes.
E. multiple pregnancy.
Question nr 299
The most common cause of post-partum haemorrhage is:
A. uterine inversion.
B. uterine atony.
C. uterine rupture.
D. post-partum infections.
E. disturbed homeostasis.
Question nr 300
The preferred and most effective method of relieving labour pain is:
A. general endotracheal anaesthesia.

C. the use of nitrous oxide.

B. epidural analgesia.

D. water immersion.
E. psychotherapy.
Question nr 301
Foetal tachycardia is diagnosed in cardiotocography when the foetal heartbeat exceeds:
A. 150 bpm for at least 15 minutes.
B. 160 bpm for at least 10 minutes.
C. 160 bpm for at least 30 minutes.
D. 180 bpm for at least 10 minutes.
E. 200 bpm irrespective of the duration.
Question nr 302
Meconium aspiration syndrome is the most common:
A. following a pre-mature release of the amniotic fluid.
B. in pre-mature babies.
C. after a breech birth.
D. in full-term or post-mature babies.
E. following C-sections.
Question nr 303
In pregnant women iron deficiency anaemia is diagnosed when:
A. haemoglobin is <9 g/dl, serum ferritin is <20 ng/ml.
B. haemoglobin is <10 g/dl, serum ferritin is <20 ng/ml.
C. haemoglobin is <11 g/dl, serum ferritin is <30 ng/ml.
D. haemoglobin is <11 g/dl, serum ferritin is <50 ng/ml.
F haemoglobin is <12 g/dL serum ferritin is <20 ng/ml

are:
A. 16 and 18.
B. 16 and 45.
C. 31 and 45.
D. 51 and 66.
E. 6 and 11.
Question nr 305
The risk factors of uterine polyps do not include :
A. age.
B. diabetes.
C. obesity.
D. tamoxifen treatment.
E. the use of combined oral contraceptive pills.
Question nr 306
Which is a risk factor of ovarian torsion in mature women?
A. ovarian cysts with a diameter of > 6 cm.
B. menstrual disorders.
C. uterine myomas.
D. surgeries of uterine appendages in the past medical history.
E. acute pelvic inflammatory disease.
Question nr 307
The pituitary gland <u>does not produce</u> :

A. FSH.

The most common HPV subtypes responsible for the development of most genital warts

B. oxytocin.
C. ACTH.
D. TSH.
E. prolactin.
Question nr 308
Which of the following statements is true about endometriosis?
A. laparoscopy is a recognised standard in the diagnosis and treatment of endometriosis. Histopathological verification is not necessary to diagnose the disease.
B. laparoscopy is a recognised standard in the diagnosis and treatment of endometriosis. Histopathological verification is necessary to diagnose the disease.
C. laparotomy is a recognised standard in the diagnosis and treatment of endometriosis. Histopathological verification is necessary to diagnose the disease.
D. laparoscopy is a recognised standard in the diagnosis of endometriosis, while laparotomy is a recognised standard in its treatment. Histopathological verification is necessary to diagnose the disease.
E. ultrasonography is a recognised standard in the diagnosis of endometriosis, while laparoscopy is a recognised standard in its treatment. Histopathological verification is necessary to diagnose the disease.
Question nr 309
Which of the following statements is true about hormone replacement therapy?
A. oestrogen therapy does not increase the risk of breast cancer.
B. oestrogen-progesterone therapy may be connected with an increased risk of breast cancer.
C. it decreases the risk of thromboembolism.
D. it decreases the risk of cholecystitis.
E. it does not affect lipid metabolism in women.
Question nr 310

Which of the following statements is true about cervical HPV infection?

- **A.** the presence of cervical HPV infection is detected with the use of mRNA HPV tests, while persistent cervical HPV infection, or an already initiated carcinogenesis, with the use of DNA HPV tests.
- **B.** the presence of cervical HPV infection as well as persistent cervical HPV infection, or an already initiated carcinogenesis, are detected with the use of DNA HPV tests.
- **C.** the presence of cervical HPV infection is detected with the use of DNA HPV tests, while persistent cervical HPV infection, or an already initiated carcinogenesis, with the use of mRNA HPV tests.
- **D.** the presence of cervical HPV infection is detected with the use of smear tests, while persistent cervical HPV infection, or an already initiated carcinogenesis, with the use of DNA HPV tests.
- **E.** the presence of cervical HPV infection is detected with the use of smear tests and colposcopy, while persistent cervical HPV infection, or an already initiated carcinogenesis, with the use of DNA HPV tests.

A complete hydatidiform mole is diploid:

- A. the genetic material is mostly of maternal origin.
- **B.** the whole genetic material is of maternal origin.
- **C.** the whole genetic material is of paternal origin.
- **D.** the genetic material is mostly of paternal origin.
- **E.** none of the above is true.