

OBS-GYNE MINI OSCE

6th year - Group A



21.11.201

9



Question

1

1. What is the name of the condition seen in the picture?
Urgency
2. Define it.
Sudden compelling desire to pass urine, which is difficult to defer.
3. Explain the mechanism for this condition. Detrusor over activity, over active bladder.
4. If the patient in the picture doesn't make it to the toilet and has incontinence when cough or sneeze, what does she has?
Mix incontinence
5. Name a test to differentiate between the 2 types.
Urodynamic study

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5. If she experienced it for the first time, mention 4 lines of management.
 - Lifestyle modification
 - Pelvic Floor Muscle Training
 - conservative
 - medical (Anti-muscarinic drugs)
 - surgical

“don’t know if these are the exact correct answers”



a

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b

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c

.



d

.

Question

2

Scenario about lady in first stage of labor.

1. What is the name of the device in picture a & b ?
A: Sonicaid, Doppler fetal monitor, Intermittent Fetal heart monitor B: Cardiotocogram
2. Why is device A used for, and when/how?
Listen to fetal heart rate: every 15 minutes or after every other contraction (in 1st stage according to the slides)
3. What is in picture c? Why is it used for?
Amnio-hook, artificial rupture of membrane (amniotomy), shortens the length of labour if the woman is contracting regularly, or as induction

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4. Give 2 indications for oxytocin.
Induction of labor, control postpartum bleeding

 5. Give 2 side effects of oxytocin.
Uterine hyperstimulation, fetal heart rate deceleration.

Question

3

1. Give 3 indications for elective cesarean section.
Transverse lie, previous 2 CS, placenta previa
2. How would you care for woman next day following cesarean section, 4 points.
This question had wide range of answers!
3. Mention 2 early complications for CS.
Bleeding, surgical injury (bladder, ureter..)
4. Mention 2 late complications for CS.
DVT, incisional hernia



Question

4

Lady came to your clinic complaining of dysmenorrhea, 35 years old, G3 p3.

1. What is in the picture? Fibroids
2. How does cause infertility? 4 points
affect tubal motility, anatomical blockage, affect implantation (sick endometrium), mechanical obstruction of tubes
3. Mention 3 lines of management. Conservative, medical, surgical

4. What is the benefit of medical therapy before surgery?

Shrink in size, less bleeding, alleviate symptoms, can change incision from midline

5. In fertility point of view, what are the indications for surgery?

Question wasn't clear, Dr. Feras didn't answer it. Some said: >4cm, recurrent abortions, multiple fibroids

OSCE cases-

OBS

Examiner tells you there's 6 marks on the first page, if you moved to the next page you can't go back.

In the first page of questions:

Mrs. Suzan, G3 P2, EDD 1/12/1019, presented with gush of fluid,etc. "PROM case"

- What you do to her as physical examination?

You need to mention only physical examination, start with vitals, general examination, abdominal; Leopold's maneuver **in details**, speculum, bishop score in details, tests to confirm PROM (these are the main points).

Things like U/S, fetal heart ...etc. are not counted.

OSCE cases-

OBS

- In the second page:

Patient's vitals (all normal), bishop score findings (cervix anterior, soft, station +3, length 1cm, dilation 5cm)

Is it favorable cervix? “Some doctors asked to calculate the score”

What would you do for her? Induction

OSCE cases-

OBS

- In the third page:

What's the progress of cervical dilation? “you need to remember that she's multi from the first page”

1.2cm/hour

How would you monitor fetal heart?

every 5 minutes or after every other contraction

OSCE cases-

GYNE

- IUCD insertion consultation.
(patient profile, LMP, G/P , contraindications, risk assessment, fertility plan...)
- When to follow up after insertion? 4-6 weeks
- After vaginal delivery, when to put it? 4-6 weeks
- Differential diagnosis of missing thread & management.
Expulsion, Perforation, Pregnancy, Short thread,
Mx: U/S, abdominal X-ray
- IUCD complications.
Expulsion, PID, Perforation, Ectopic pregnancy,
bleeding pattern & pain. Lost threads. Pregnancy

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- Good luck!