

Gynecology Job Interview Questions And Answers



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Gynecology Interview Questions And Answers Guide.

Question - 1:

A 35 year old woman has been listed for hysteroscopy. What are the indications for hysteroscopy in a woman of this age?

Ans:

Abnormal uterine bleeding, Habitual abortion, pelvic pain, cancer, GIFT, ZIFT, TET, FIVET, Bone metaplasia of the endometrium are some of the diagnostics observed in this age.

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Question - 2:

How would you assess and treat a 52year old woman who complains of heavy prolonged menstrual bleeding?

Ans:

It may or maynot be any symptom of ovarian Ca, or fiberus formation of the uterus or any other complications. So better she go for hysteroscopy, and blood study for any infestations of micro organism. check the platelet level in blood, and WBC count and BT,CT . Her age is abow 50. so in this age there is less chance menstuation.

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Question - 3:

34 year old woman is found to have a monochorionic twin pregnancy at 12 weeks gestation in her first pregnancy. She requests information on the antenatal risks to her and her fetuses and their management. How would you counsel her?

Ans:

because of the age of the woman, it will be too dificult to countinue the pregnancy. Other than the multiple pregnancy, She have only one plasenta for bothe child. so better she can do LSCS at the onset of labour. Tell the posibility and de merits of the LSCS to the PT.

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Question - 4:

35 year second gravida with single umbilical artery and ctev (club foot)?

Ans:

ctev is asso. with consanguity, oligohydroamnios, breech presentation and some cong. malformations. single umb. artery is ass. with increased risk for cong. malformation e.g. renal and cardiac. so screening should be done for other cong. malformation

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Question - 5:

In scanning report of my wife at gender column it is written as III, What is the meaning?

Ans:

in scanning report both testostorone and progestron hormone found tats why she is not male or female.

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**Question - 6:**

How is called the small opening of the uterus that sperm would first enter?

Ans:

Cervix

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Question - 7:

A 14year old woman attends with her mother because she has not started menstruating. Outline your initial assessment?

Ans:

Commonest cause is constitutional delay. There are, however, causes such as ovarian and adrenal tumours that are potentially life-threatening and the presence of dysgenetic gonads with malignant potential.

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Question - 8:

What are the side-effects of magnesium sulphate therapy?

Ans:

Nausea
Vomiting
Thirst
Flushing of skin
Muscle weakness
Loss of deep tendon reflexes
Respiratory depression
Confusion, drowsiness, coma
Hypotension
Arrhythmias.

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Question - 9:

35 year old woman is thought to have a vesico-vaginal fistula. What are the main causes of vesico-vaginal fistulas?

Ans:

The most common cause of fistula was trauma associated with pelvic operation, and the operation most often involved was total abdominal hysterectomy.

Malignant disease of the pelvic organs was the second most common cause, while radiation therapy and obstetrical causes were next in the order of frequency.

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Question - 10:

Is there an ovarian tumor with hair and teeth?

Ans:

Dermoid cysts, also known as mature cystic teratomas, are the commonest ovarian tumor. They occur primarily in the reproductive years, but can also occur in children. The tumor has all three germ layers that are seen in the body - ectoderm, mesoderm and endoderm. As such, the tumor has fat, hair and teeth in it. Teratomas sometimes can be very organized and appear to form fetal-like tissues. Dermoids are bilateral 15-20 percent of the time. Treatment is surgical removal prior to torsion or rupture.

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Question - 11:

What should I do if I miss a birth control pill?

Ans:

If you miss one pill, you should take it as soon as you remember and take the next one as usual.

If 2 pills are missed during the first 2 weeks of your cycle, then you should take 2 pills a day for the next 2 days and use a back-up method such as a condom for the next 7 days.

If 2 pills or more are missed in the 3rd week of the cycle then you should take 2 pills a day for the next 2 days and then complete the pack of pills. You should then begin your new pack on a Sunday. A back-up form of birth control should be used for the next 7 days such as a condom.

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Question - 12:

Is it possible to have a polyp in the uterus?

Ans:

Polyps can form where there is glandular tissue, i.e. in the colon, nose or uterus. Endometrial polyps occur in the uterus and patients will have the symptom of heavy menstrual periods. These polyps can be resected with a simple procedure called hysteroscopy. With a small telescope inserted through the cervix and into the uterus, the polyp can be directly visualized and removed.

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**Question - 13:**

Is irregular bleeding common when starting a new birth control pill?

Ans:

Yes. It can take up to 3 months after switching to new a birth control pill before your menstrual period becomes regular. You should not discontinue your new pills for at least 3 months to see if they are going to begin working. Spotting between your cycle, nausea and occasional vomiting and headaches are all common when starting a new birth control method.

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Question - 14:

Is there a screening test for ovarian cancer?

Ans:

To qualify as a screening test, the test has to be sensitive enough to pick up the disease in its early stages. It has to be specific, so other conditions do not trigger the test to be positive. It has to be cost efficient, so that trying to find the disease does not cost more than the treatment of the disease. Unfortunately, no such test is available for ovarian cancer currently. CA-125, an ovarian cancer antigen, was thought to be a possible screening tool. CA-125 is elevated in women with a known ovarian cancer, and is used to monitor progression or regression of the tumor. It is not sensitive enough to pick up ovarian cancer at Stage I disease, and can be positive in non-cancerous conditions like endometriosis, pelvic inflammatory disease, and fibroids.

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Question - 15:

If I am no longer having my monthly period because of menopause, when should I be worried about new onset vaginal bleeding?

Ans:

If you have not had a menstrual cycle in over 6 months you are probably in the menopause. The loss of your monthly period along with occasional hot flashes or night sweats usually indicate menopause. This begins for most women between the ages of 45 and 52. Any bleeding after the menopause is considered abnormal and requires evaluation by a doctor immediately.

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Question - 16:

Can an ovarian cyst be normal?

Ans:

During a woman's menstrual cycle, ovarian cyst formation is normal. These cysts are part of developing an egg to ovulate or to make hormones to support a potential early pregnancy, and are called functional cysts. These type of cysts should disappear with each cycle. I get worried that a cyst is abnormal if it persists for more than 2 cycles, if it is larger than 5 cm, or if it has unusual features such as a septum or solid elements. Sometimes a functional cyst can cause severe pain and internal bleeding if it should rupture internally. This is usually an emergent situation that requires immediate evaluation.

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Question - 17:

Should I continue to have a pelvic exam each year if I have had a Hysterectomy?

Ans:

Women should have a yearly physical exam by a physician which includes a pelvic exam and breast exam beginning in their late teens and early twenties. All women should have their cholesterol checked every 3 to 5 years. A yearly mammogram is essential after age 40. Women over 50 need a screening colonoscopy every 5 years. There are different opinions concerning whether women should have a pap smear every year after hysterectomy. You should discuss your individual medical history with your doctor before deciding whether you should continue to get a pap smear after hysterectomy.

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Question - 18:

What are fibroids?

Ans:

Fibroids, also known as leiomyomas, are benign smooth muscle tumors that occur in the uterus. They grow under the influence of estrogen and progesterone, and are thus seen in the reproductive years. By the age of 40, 40% of women have fibroids. African-American women may be prone to get symptomatic fibroids in their 20's. With menopause and the decrease in hormones, fibroids also decrease in size. The most common symptom from fibroids is abnormal bleeding. When fibroids grow, it can also cause pressure symptoms on the bladder, rectum or pelvis. There may be a genetic predisposition to having fibroids and multiple fibroids.

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Question - 19:

Is some bleeding normal when starting Hormone Replacement Therapy?

Ans:

Yes, it is not uncommon to notice some light spotting during the first 3 months after beginning Hormone Replacement Therapy. Heavy bleeding like your menstrual cycle is not normal and should be reported to the doctor immediately.

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