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| № | krok 2017, 2013 |
| Topic | 32 Urgent conditions in gynecology |
| Task | A 28-year-old woman has been delivered to a hospital with acute pain in the lower abdomen. There was a brief syncope. The delay of menstruation is 2 months. Objectively: the patient has pale skin, BP- 90/50 mm Hg, Ps- 110/min. Lower abdomen is extremely painful. Vaginal examination reveals uterus enlargement. Promtov's sign (pain during bi-manual gynecological examination) is positive. Right uterine appendages are enlarged and very painful. Posterior vault hangs over. What is the most likely diagnosis? |
| Correct answer | Right-sided tubal pregnancy |
| B | Right ovary apoplexy |
| C | Acute right-sided salpingoophoritis |
| D | Pelvioperitonitis |
| E | Incipient abortion |
| № | krok 2017 |
| Topic | Benign tumors of the female genitalia.Dishormonal diseases of breasts.Endometriosis |
| Task | A parturient woman complains of pain in her mammary gland. In the painful area there is an infiltration 3x4 cm in size with softened center. Body temperature is 38,5° C . What is the most likely diagnosis? |
| Correct answer | Acute suppurative mastitis |
| B | Pneumonia |
| C | Pleurisy |
| D | Milk retention |
| E | Birth trauma |
| № | krok 2017 |
| Topic | Disorders of the menstrual function in reproductive age.neuroendocrine syndromes in gynecology.physiological and pathological conditions in the perimenopausal period. |
| Task | A 29-year-old woman came to a gynecologist with complaints of irritability, tearfulness, headache, nausea, occasional vomiting, pain in the heart area, tachycardia attacks, memory impairment, meteorism. These signs appear 6 days before menstruation and disappear the day before menstruation or during its first 2 days. On vaginal examination: the uterus and uterine appendages are without alterations. What diagnosis is the most likely? |
| Correct answer | Premenstrual syndrome |
| B | Algodismenorrhea |
| C | Ovarian apoplexy |
| D | Genital endometriosis |

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| E | Neurosis |
| № | krok 2017, 2016 |
| Topic | early gestosis.hypertensive conditions during pregnancy.preeclampsia.eclampsia. |
| Task | An infant has been born at the 41st week of gestation. The pregnancy was complicated with severe gestosis of the second semester. The weight of the baby is 2400 g, the height is 50 cm. Objectively: the skin is flabby, the layer of subcutaneous fat is thin, hypomyotonia is observed, neonatal reflexes are weak. The internal organs are without pathologic alterations. This newborn can be assessed as a: |
| Correct answer | Full-term infant with prenatal growth retardation |
| B | Premature infant |
| C | Immature infant |
| D | Postmature infant |
| E | Full-term infant with normal body weight |
| № | krok 2017 |
| Topic | premature breaking of pregnancy.prolonged pregnancy.multi-fetal (multiple) pregnancy |
| Task | A primigravida at the term of 20 weeks complains of pain in her lower abdomen, smearing blood-streaked discharge from the genital tract. Uterine tone is increased, fetus is mobile. On vaginal examination: the uterus is enlarged according to the term, uterine cervix is shortened to 0,5 cm, external cervical orifice is open by 2 cm. What is the most likely diagnosis? |
| Correct answer | Risk of late abortion with hemorrhage |
| B | Risk of late abortion without hemorrhage |
| C | The process of late abortion |
| D | Incomplete late abortion |
| E | Attempted late abortion |
| № | krok 2017 |
| Topic | the physiology of pregnancy,labor and postpartum period.perinatal protection of fetus.pharmacotherapy in obstetrics. |
| Task | Vaginal examination reveals the head of the fetus, which fills the posterior surface of symphysis pubis and hollow of the sacrum. The lower edge of symphysis pubis, ischi-adic spines, and sacrococcygeal joint can be palpated. Where in the lesser pelvis is the fetal head situated? |
| Correct answer | In the narrow plane of lesser pelvis |
| B | In the wide plane of lesser pelvis |
| C | Above pelvic inlet |
| D | In the area of brim |

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| E | In the area of pelvic outlet |
| № | krok 2017 |
| Topic | the physiology of pregnancy, labor and postpartum period. perinatal protection of fetus. pharmacotherapy in obstetrics. |
| Task | Vaginal examination reveals the head of the fetus, which fills the posterior surface of symphysis pubis and hollow of the sacrum. The lower edge of symphysis pubis, ischi-adic spines, and sacrococcygeal joint can be palpated. Where in the lesser pelvis is the fetal head situated? |
| Correct answer | In the narrow plane of lesser pelvis |
| B | In the wide plane of lesser pelvis |
| C | Above pelvic inlet |
| D | In the area of brim |
| E | In the area of pelvic outlet |
| № | krok 2017, 2013 |
| Topic | anomalies of the contractive activity of the uterus. birth and maternal traumatism. modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 30-year-old multigravida has been in labour for 18 hours. 2 hours ago the pushing stage began. Fetal heart rate is clear, rhythmic, 136/min. Vaginal examination reveals complete cervical dilatation, the fetal head in the pelvic outlet plane. Sagittal suture is in line with obstetric conjugate, the occipital fontanel is near the pubis. The patient has been diagnosed with primary uterine inertia. What is the further tactics of labour management? |
| Correct answer | Outlet forceps |
| B | Labour stimulation |
| C | Cesarean section |
| D | D. Skin-head Ivanov's forceps |
| E | E. Vacuum extraction of the fetus |
| № | krok 2017 |
| Topic | benign tumors of the female genitalia. dishormonal diseases of breasts. endometriosis. |
| Task | A 20-year-old woman on the 10th day after her discharge from the maternity ward developed fever up to 39° C and pain in her left mammary gland. On examination the mammary gland is enlarged, in its upper outer quadrant there is a hyperemic area. In this area a dense spot with blurred margins can be palpated. The patient presents with lactostasis and no fluctuation. Lymph nodes in the right axillary crease are enlarged and painful. Specify the correct diagnosis: |
| Correct answer | Lactational mastitis |
| B | Abscess |

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| C | Erysipelas |
| D | Dermatitis |
| E | Tumor |
| № | krok 2017 |
| Topic | disorders of the menstrual function in reproductive age.neuroendocrine syndrome in gynecology.physiological and pathological conditions in the perimenopausal period. |
| Task | A 46-year-old woman came to a maternity clinic with complaints of moderate blood discharge from the vagina, which developed after the menstruation delay of 1,5 months. On vaginal examination: the cervix is clean; the uterus is not enlarged, mobile, painless; appendages without changes. Make the diagnosis: |
| Correct answer | Dysfunctional uterine bleeding |
| B | Adenomyosis |
| C | Ectopic pregnancy |
| D | Submucous uterine myoma |
| E | Cancer of the uterine body |
| № | krok 2017 |
| Topic | disorders of the menstrual function in reproductive age.neuroendocrine syndrome in gynecology.physiological and pathological conditions in the perimenopausal period. |
| Task | A 30-year-old woman complains of amenorrhea that lasts for 2 years after she has given birth, loss of hair and body weight. The labor was complicated with hemorrhage caused by uterine hypotonia. Objectively the patient is of asthenic type, her external genitalia are hypoplastic, the uterine body is small in size and painless. No uterine appendages can be detected. What is the most likely diagnosis? |
| Correct answer | Sheehan's syndrome (postpartum hypopituitarism) |
| B | Ovarian amenorrhea |
| C | Turner's syndrome |
| D | Ovarian exhaustion syndrome |
| E | Galactorrhea-amenorrhea syndrome |
| № | krok 2017 |
| Topic | disorders of the menstrual function in reproductive age.neuroendocrine syndrome in gynecology.physiological and pathological conditions in the perimenopausal period. |

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| Task | A 28-year-old woman complains of increased intervals between menstruations, up to 2 months, and hirsutism. Gynecological examination revealed the following: ovaries are enlarged, painless, and dense; no alterations of the uterus. US of the lesser pelvis: ovaries are 4-5 cm in diameter, with numerous enlarged follicles on the periphery. X-ray of the skull base: sellar region is widened. What is the most likely diagnosis? |
| Correct answer | Stein-Leventhal syndrome (polycystic ovarian syndrome) |
| B | Algodismenorrhea |
| C | Sheehan syndrome (postpartum hypopituitarism) |
| D | Premenstrual syndrome |
| E | Morgagni-Stewart-Morel syndrome (metabolic craniopathy) |
| № | krok 2017 |
| Topic | early gestosis.hypertensive conditions during pregnancy.preeclampsia.eclampsia. |
| Task | A multigravida on the 38th week of her pregnancy complains of increased BP up to 140/90 mm Hg, edema of the shins for 2 weeks. In the last month she gained 3,5 kg of weight. Urine analysis: protein - 0,033 g/l. Make the diagnosis: |
| Correct answer | Mild preeclampsia |
| B | Moderate preeclampsia |
| C | Pregnancy hypertension |
| D | Severe preeclampsia |
| E | Pregnancy edema |
| № | krok 2017 |
| Topic | female urogynecological inflammatory diseases. |
| Task | A 37-year-old woman complains of acute pain in the genital area, swelling of the labia, pain when walking. Objectively: body temperature is 38,7° C , Ps- 98/min. In the interior of the right labia there is a dense, painful tumor-like formation 5,0x4,5 cm in size, the skin and mucous membrane of genitals are hyperemic, there is profuse foul-smelling discharge. What is the most likely diagnosis? |
| Correct answer | Acute Bartholinitis |
| B | Labial furuncle |
| C | Acute vulvovaginitis |
| D | Bartholin gland cyst |
| E | Carcinoma of vulva |
| № | krok 2017 |
| Topic | gynecological diseases in children and teenagers.methods of contraception for teenagers. |

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| Task | A 14-year-old girl has been delivered to a gynecological department with complaints of profuse blood discharge from her genital tract for 2 weeks. Anamnesis: menstruation since 13, irregular, painful, profuse; the last one was 2 months ago. Objectively: pale skin and mucosa, BP- 100/60 mm Hg, Hb- 108 g/l. The abdomen is soft and painless on palpation. Rectal examination revealed no pathologies of reproductive organs. What condition is it? |
| Correct answer | Juvenile uterine hemorrhage (Dysfunctional) |
| B | Hypomenstrual syndrome |
| C | Inflammation of uterine appendages (Pelvic inflammatory disease) |
| D | Pelvipерitonitis |
| E | Endometritis |
| № | krok 2017 |
| Topic | early gestosis.hypertensive conditions during pregnancy.preeclampsia.eclampsia. |
| Task | A multigravida at 39 weeks of gestation presenting with regular labour activity for 8 hours has been delivered to a hospital; the waters broke an hour ago. She complains of headache, seeing spots. BP is 180/100 mm Hg. Urine test results: protein - 3,3 g/l, hyaline cylinders. Fetal heart rate is 140/min, rhythmic. Vaginal examination reveals complete cervical dilatation, the fetal head is on the pelvic floor, sagittal suture is in line with obstetric conjugate, the occipital fontanel is under the pubis. What is the optimal tactics of labour management? |
| Correct answer | Outlet forceps |
| B | Cavity forceps |
| C | Cesarean section |
| D | Vacuum extraction of the fetus |
| E | Conservative labour management |
| № | krok 2017, 2016, 2015 |
| Topic | female urogynecological inflammatory diseases. |
| Task | A 6-year-old girl came to a general practitioner with her mother. The child complains of burning pain and itching in her external genitalia. The girl was taking antibiotics the day before due to her suffering from acute bronchitis. On examination: external genitalia are swollen, hyperemic, there is white deposit accumulated in the folds. The most likely diagnosis is: |
| Correct answer | Candidal vulvovaginitis |
| B | Trichomoniasis |
| C | Nonspecific vulvitis |
| D | Helminthic invasion |
| E | Herpes vulvitis |

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| № | krok 2017 |
| Topic | disorders of the menstrual function in reproductive age.neuroendocrine syndrome in gynecology.physiological and pathological conditions in the perimenopausal period. |
| Task | A 22-year-old woman complains of amenorrhea for 8 months. Anamnesis states that menarche occurred at the age of 12,5. Since the age of 18 the patient has a history of irregular menstruation. The patient is nulli-gravida. The mammary glands are developed properly, nipples discharge drops of milk when pressed. Hormone test: prolactin level is 2 times higher than normal. CT reveals a bulky formation with diameter of 4 mm in the region of sella. What is the most likely diagnosis? |
| Correct answer | Pituitary tumour |
| B | Lactational amenorrhea |
| C | Stein-Leventhal syndrome (polycystic ovary syndrome) |
| D | Sheehan's syndrome (postpartum hypopituitarism) |
| E | Cushing's disease |
| № | krok 2017 |
| Topic | benign tumors of the female genitalia.dishormonal diseases of breasts.endometriosis. |
| Task | A 25-year-old woman has a self-detected tumor in the upper outer quadrant of her right breast. On palpation there is a painless firm mobile lump up to 2 cm in diameter, peripheral lymph nodes are without alterations. In the upper outer quadrant of the right breast ultrasound revealed a massive neoplasm with increased echogenicity sized 21x18 mm. What is the most likely diagnosis? |
| Correct answer | Fibroadenoma |
| B | Lactocele |
| C | Diffuse mastopathy |
| D | Mammary cancer |
| E | Mastitis |
| № | krok 2017 |
| Topic | Immunological incompatibility of maternal and fetal blood. Anomalies of fetal egg. |
| Task | Examination of a Rh-negative pregnant woman at 32 weeks of gestation revealed a four-time rise of Rh-antibody titer within 2 last weeks; the titer is 1:64. The first two pregnancies resulted in antenatal fetal death due to hemolytic disease. What is the optimal tactics of pregnancy management? |
| Correct answer | Early delivery |
| B | Delivery at 37 weeks of gestation |
| C | Screening for Rh-antibodies in 2 weeks and urgent delivery in case of further increase of antibody titer |
| D | Introduction of anti-Rh (D) immunoglobulin |

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| E | Ultrasound for signs of hemolytic disease of the fetus |
| № | krok 2017 |
| Topic | Operative obstetrics. |
| Task | A 24-year-old pregnant woman on her 37th week of pregnancy has been delivered to a maternity obstetric service with complaints of weak fetal movements. Fetal heartbeats are 95/min. On vaginal examination the uterine cervix is tilted backwards, 2 cm long, external orifice allows inserting a fingertip. Biophysical profile of the fetus equals 4 points. What tactics of pregnancy management should be chosen? |
| Correct answer | Urgent delivery via cesarean section |
| B | Treatment of placental dysfunction and repeated analysis of the fetal biophysical profile on the next day |
| C | Doppler measurement of blood velocity in the umbilical artery |
| D | Urgent preparation of the uterine cervix for delivery |
| E | Treatment of fetal distress, if ineffective, then elective cesarean section on the next day |
| № | krok 2017 |
| Topic | Benign tumors of female genitalia. Dishormonal diseases of breast. Endometriosis. |
| Task | During regular preventive gynecological examination a 30-year-old woman was detected to have dark blue punctulated "perforations" on the vaginal portion of the uterine cervix. The doctor suspects endometriosis of the vaginal portion of the uterine cervix. What investigation method would be most informative for diagnosis confirmation? |
| Correct answer | Colposcopy, target biopsy of the cervix |
| B | US of small pelvis |
| C | Hysteroscopy |
| D | Curettage of the uterine cavity |
| E | Hormone testing |
| № | krok 2017 |
| Topic | Benign tumors of female genitalia. Dishormonal diseases of breast. Endometriosis. |
| Task | A 26-year-old woman came to a gynecologist for a regular check-up. She has no complaints. Per vaginam: the uterus lies in ante flexion, not enlarged, dense, mobile, painless. On the left from the uterus in the area of uterine appendages there is a mobile painless outgrowth that can be moved independently from the uterus. On the right the appendages cannot be detected. What additional investigation would be informative for diagnosis clarification? |
| Correct answer | US of lesser pelvis |
| B | Metrosalpingography |
| C | Examination for urogenital infection |

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| D | Colposcopy |
| E | Colonoscopy |
| № | krok 2017, 2016 |
| Topic | Benign tumors of female genitalia. Dishormonal diseases of breast. Endometriosis. |
| Task | On the 9th day after childbirth the obstetric patient developed high fever up to 38° C . She complains of pain in the right mammary gland. On examination a sharply painful infiltrate can be palpated in the right mammary gland, the skin over the infiltrate is red, subareolar area and nipple are swollen and painful. What is your diagnosis? |
| Correct answer | Abscess of the right mammary gland |
| B | Mastopathy |
| C | Cancer of the right mammary gland |
| D | Serous mastitis |
| E | E. Fibrous cystic degeneration of the right mammary gland |
| № | krok 2017 |
| Topic | Pregnancy and labor of women with extragenital diseases. Perinatal infections. Prophylaxis to prevent vertical HIV transmission. |
| Task | A woman is on the 32nd week of her second pregnancy. She complains of fever, chills, nausea, vomiting, lumbar pain, and dysuria. Costovertebral angle tenderness is present on both sides. Urine analysis: pyuria, bacteriuria. Blood test: leukocytosis. What is the most likely diagnosis? |
| Correct answer | Gestational pyelonephritis |
| B | Cystitis |
| C | Pyelitis |
| D | Glomerulonephritis |
| E | Latent bacteriuria |
| № | krok 2016 |
| Topic | Premature breaking of pregnancy. Prolonged pregnancy. Multi-fetal (multiple) pregnancy. |
| Task | A pregnant woman is 28 years old. Anamnesis: accelerated labor complicated by the II degree cervical rupture. The following two pregnancies resulted in spontaneous abortions at the terms of 12 and 14 weeks. On mirror examination: the uterine cervix is scarred from previous ruptures at 9 and 3 hours, the cervical canal is gaping. On vaginal examination: the cervix is 2 cm long, the external orifice is open 1 cm wide, the internal orifice is half-open; the uterus is enlarged to the 12th week of pregnancy, soft, mobile, painless, the appendages are without changes. What diagnosis would you make? |
| Correct answer | Isthmico-cervical insufficiency, habitual noncarrying of pregnancy |
| B | Threatened spontaneous abortion |

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| C | Incipient abortion, habitual noncarrying of pregnancy |
| D | Cervical hysteromyoma, habitual noncarryi-ng of pregnancy |
| E | Cervical pregnancy, 12 weeks |
| № | krok 2016 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 26-year-old secundipara at 40 weeks of gestation arrived at a maternity ward after the beginning of labor activity. The bursti-ng of waters occurred 2 hours prior. The fetus was in a longitudinal lie with cephalic presentation. Abdominal circumference was cm, fundal height - 42 cm. Contracti-ons occurred every 4-5 minutes and lasted seconds each. Internal obstetric examinati-on revealed cervical effacement, opening by 4 cm. Fetal bladder was absent. Fetal head was pressed against the pelvic inlet. What compli-cation arose in the childbirth? |
| Correct answer | Early amniorrhea |
| B | Primary uterine inertia |
| C | Secondary uterine inertia |
| D | Discoordinated labor |
| E | Clinically narrow pelvis |
| № | krok 2016 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 26-year-old woman, who gave bi-rth 7 months ago, has been suffering from nausea, morning sickness, somnolence for the last 2 weeks. The patient breastfeeds; no menstruation. She has been using no means of contraception. What method would be most efficient in clarification of the diagnosis? |
| Correct answer | Ultrasound |
| B | Small pelvis radiography |
| C | Palpation of mammary glands and squeezei-ng out colostrum |
| D | Bimanual abdominovaginal examination |
| E | Mirror examination |
| № | krok 2016, 2015 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |

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| Task | A 30-year-old parturient woman was delivered to a maternity hospital with full-term pregnancy. She complains of severe lancinating pain in the uterus that started 1 hour ago, nausea, vomiting, cold sweat. Anamnesis states cesarean section 2 years ago. Uterine contractions stopped. Skin and mucous membranes are pale. Heart rate is 100/min., BP is 90/60 mm Hg. Uterus has no clear margins, is sharply painful. No heartbeat can be auscultated in the fetus. Moderate bloody discharge from the uterus can be observed. Uterus cervix is 4 cm open. Presenting part is not visible. The most likely diagnosis is: |
| Correct answer | Uterine rupture |
| B | Initial uterine rupture |
| C | Threatened uterine rupture |
| D | Premature detachment of normally positioned placenta |
| E | Compression of inferior pudendal vein |
| № | krok 2016 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A parturient woman is 23 years old. Internal obstetric examination shows the uterine cervix to be completely open. Fetal bladder is absent. Cephalic presentation is observed in the plane of the small pelvic outlet. Sagittal suture is at the longitudinal section of the small pelvic outlet, small fontanel is situated closer to the uterus. What cephalic position will the newborn have during birth in this case? |
| Correct answer | Minor oblique lie |
| B | Longitudinal lie |
| C | Transverse lie |
| D | Medium oblique lie |
| E | Major oblique lie |
| № | krok 2016, 2012 |
| Topic | Placental dysfunction, hypotrophy of the fetus, fetal distress symptoms. |
| Task | During the dynamic observation of a parturient woman in the second stage of labor it was registered that the fetal heart rate decreased to 90-100/min. and did not normalize after contractions. Vaginal examination revealed the complete cervical dilatation, the fetal head filling the entire posterior surface of the pubic symphysis and sacral hollow; the sagittal suture was in the anteroposterior diameter of the pelvic outlet, the posterior fontanelle was in front under the pubic arch. What plan for further labour management should be recommended? |
| Correct answer | Application of forceps minor |
| B | Caesarean section |
| C | Episiotomy |

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| D | Application of cavity forceps |
| E | Stimulation of labour activity through intravenous injection of oxytocin |
| № | krok 2016 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 16-year-old girl has primary amenorrhea, no pubic hair growth, normally developed mammary glands; her genotype is XY; uterus and vagina are absent. What is your diagnosis? |
| Correct answer | Testicular feminization syndrome |
| B | Mayer-Rokitansky-Kuster-Hauser syndrome |
| C | Cushing's syndrome |
| D | Sheehan syndrome |
| E | Cushing's disease |
| № | krok 2016 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 35-year-old woman addressed a gynecological in-patient department with complaints of regular pains in her lower abdomen, which increase during menstruation, and dark-brown sticky discharge from the genital tracts. On bimanual examination: the uterine body is slightly enlarged, the appendages are not palpated. Mirror examination of the uterine cervix reveals bluish spots. What diagnosis is most likely? |
| Correct answer | Cervical endometriosis |
| B | Cervical erosion |
| C | Cervical polyp |
| D | Cervical cancer |
| E | Cervical fibroid |
| № | krok 2016 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 25-year-old woman complains of menstruation retention lasting for 3 years. The patient explains it by a difficult childbirth complicated with profuse hemorrhage, weight loss, brittleness and loss of hair, loss of appetite, depression. Objective examination reveals no pathologic changes of uterus and uterine appendages. What pathogenesis is characteristic of this disorder? |
| Correct answer | Decreased production of gonadotropin |
| B | Hyperproduction of estrogen |

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| C | Hyperproduction of androgen |
| D | Decreased production of progesterone |
| E | Hyperproduction of prolactin |
| № | krok 2016, 2015 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 26-year-old woman has attended maternity center complaining of her inability to become pregnant despite 3 years of regular sex life. Examination revealed the following: increased body weight; male-type pubic hair; excessive pilosis of thighs; ovaries are dense and enlarged; basal body temperature is monophasic. The most likely diagnosis is: |
| Correct answer | Sclerocystosis of ovaries |
| B | Inflammation of uterine appendages |
| C | Adrenogenital syndrome |
| D | Premenstrual syndrome |
| E | Gonadal dysgenesis |
| № | krok 2016 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A woman addressed a gynecologist on the 20th day of puerperal period with complaints of pain in the left mammary gland, purulent discharge from the nipple. Objectively: Ps- 120/min., body temperature is 39° C . The left mammary gland is painful, larger than the right one, the skin there is hyperemic; in the upper quadrant there is an infiltrate 10x15 cm in size with soft center. Blood test: ESR- 50 mm/hour, leukocytes - 15, 0 · 10 ⁹ /l. What would be the treatment tactics? |
| Correct answer | Transfer to a surgical department for surgical treatment |
| B | Refer to a gynecology department |
| C | Refer to a postnatal department |
| D | Refer to a surgeon for conservative treatment |
| E | Lance the mammary gland abscess in a maternity department |
| № | krok 2016, 2013, 2012 |
| Topic | Pregnancy and labor of women with extragenital diseases. Perinatal infections. Prophylaxis to prevent vertical HIV transmission. |
| Task | A 10 week pregnant woman was admitted to a hospital for recurrent pain in the lower abdomen, bloody discharges from the genital tracts. The problems developed after a case of URTI. The woman was registered for antenatal care. Speculum examination revealed cyanosis of vaginal mucosa, clean cervix, open cervical canal discharging blood and blood clots; the lower pole of the gestational sac was visible. What tactics should be chosen? |
| Correct answer | Curettage of the uterus |

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| B | Pregnancy maintenance therapy |
| C | Expectant management, surveillance |
| D | Hysterectomy |
| E | Antiviral therapy |
| № | krok 2016 |
| Topic | Urgent conditions in gynecology. |
| Task | A patient with fibromyoma of uterus sized up to 8-9 weeks of pregnancy consulted a gynaecologist about acute pain in the lower abdomen. Examination revealed pronounced positive symptoms of peritoneal irritation, high leukocytosis. Vaginal examination revealed that the uterus was enlarged corresponding to 9 weeks of pregnancy due to the fibromatous nodes, one of which was mobile and extremely painful. Appendages were not palpable. There were moderate mucous discharges. What is the optimal treatment tactics? |
| Correct answer | Urgent surgery (laparotomy) |
| B | Surveillance and spasmolytic therapy |
| C | Fractional diagnostic curettage of the uterine cavity |
| D | Surgical laparoscopy |
| E | Surveillance and antibacterial therapy |
| № | krok 2016 |
| Topic | Infertile marriage. |
| Task | A 32-year-old woman addressed a maternity clinic with complaints of infertility that has been lasting for 7 years. Her menstrual cycle occurs in two phases. Hysterosalpingography reveals obstruction of the uterine tubes in the ampullar areas, an adhesive process in the small pelvis can be observed. What treatment is most advisable in this case? |
| Correct answer | Laparoscopy |
| B | Laparotomy |
| C | Tubectomy |
| D | Adnexectomy |
| E | Hydrotubation |
| № | krok 2016, 2015 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |

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| Task | A 25-year-old patient during self-examination detected a tumor in the upper external quadrant of the right mammary gland. On palpation: painless, dense, mobile growth 2 cm in diameter is detected in the mammary gland; no changes in the peripheral lymph nodes are observed. On mammary glands US: in the upper external quadrant of the right mammary gland there is a space-occupying lesion of increased echogenicity 21x18 mm in size. The most likely diagnosis is: |
| Correct answer | Fibrous adenoma |
| B | Lacteal cyst |
| C | Diffuse mastopathy |
| D | Breast cancer |
| E | Mastitis |
| № | krok 2016 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | 2 weeks after labour a parturient woman developed breast pain being observed for 3 days. Examination revealed body temperature at the rate of $39^{\circ}C$, chills, weakness, hyperaemia, enlargement, pain and deformity of the mammary gland. On palpation the infiltrate was found to have an area of softening and fluctuation. What is the most likely diagnosis? |
| Correct answer | Infiltrative-purulent mastitis |
| B | Phlegmonous mastitis |
| C | Lactostasis |
| D | Serous mastitis |
| E | Mastopathy |
| № | krok 2016, 2015 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A maternity patient breastfeeding for 1,5 weeks has attended a doctor. She considers the onset of her disease to be when proportional breast engorgement occurred. Mammary glands are painful. Body temperature is $36,6^{\circ}C$. Expression of breast milk is hindered. The most likely diagnosis is: |
| Correct answer | Lactostasis |
| B | Infiltrative mastitis |
| C | Suppurative mastitis |
| D | Chronic cystic mastitis |
| E | Gangrenous mastitis |
| № | krok 2016 |

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| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | An 18-year-old woman complains of mammary glands swelling, headaches, tearfulness, abdominal distension occurring the day before menstruation. The symptoms disappear with the beginning of menstruation. Menstruations are regular, last for 5-6 days with interval of 28 days in between. Gynecological examination revealed no changes of internal genitals. What is your diagnosis? |
| Correct answer | Premenstrual syndrome |
| B | Sheehan syndrome |
| C | Stein-Leventhal syndrome |
| D | Asherman's syndrome |
| E | Adrenogenital syndrome |
| № | krok 2016 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | Examination of a Rh-negative pregnant woman at 32 weeks of gestation revealed a four-time rise of Rh-antibody titer within 2 weeks, the titer was 1:64. In the first two pregnancies the patient had experienced antenatal fetal death due to hemolytic disease. What is the optimal tactics of pregnancy management? |
| Correct answer | Early delivery |
| B | Delivery at 37 weeks of gestation |
| C | Screening for Rh-antibodies 2 weeks later and early delivery in case of further titer rise |
| D | Introduction of anti-Rh (D) immunoglobulin |
| E | Ultrasound for signs of hemolytic disease of the fetus |
| № | krok 2015, 2010 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | 13 months after the first labor a 24-year-old patient complained of amenorrhea. Pregnancy ended in Caesarian section because of premature detachment of normally positioned placenta which resulted in blood loss at the rate of 2000 ml due to disturbance of blood clotting. Choose the most suitable investigation: |
| Correct answer | Estimation of gonadotropin rate |
| B | US of small pelvis |
| C | Progesteron assay |
| D | Computer tomography of head |
| E | Estimation of testosterone rate in blood serum |

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| № | krok 2015, 2008 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A 24-year-old primipara was hospitalised with complaints of discharge of the amniotic waters. The uterus is tonic on palpation. The position of the fetus is longitudinal, it is pressed with the head to pelvic outlet. Palpitation of the fetus is rhythmical, 140 bpm, auscultated on the left below the navel. Internal examination: cervix of the uterus is 2,5 cm long, dense, the external opening is closed, light amniotic waters are discharged. Point out the correct component of the diagnosis: |
| Correct answer | Antenatal discharge of the amniotic waters |
| B | Early discharge of the amniotic waters |
| C | The beginning of the 1st stage of labour |
| D | The end of the 1st stage of labour |
| E | Pathological preterm labour |
| № | krok 2015 |
| Topic | Early gestosis. Hypertensive conditions during pregnancy. Preeclampsia. Eclampsia. |
| Task | A primagravida with pregnancy of 37-38 weeks complains of headache, nausea, pain in epigastrium. Objectively: the skin is acyanotic. Face is hydropic, there is short fibrillar twitching of blepharons, muscles of the face and the inferior extremities. The stare is fixed. BP - 200/110 mm Hg; sphygmus is of 92 bpm, intense. Respiration rate is 32/min. Heart activity is rhythmical. Appreciable edemas of the inferior extremities are present. Urine is cloudy. What medication should be administered? |
| Correct answer | Droperidolum of 0,25% - 2,0 ml |
| B | Dibazolium (Bendazole hydrochloride) of 1% - 6,0 ml |
| C | Papaverine hydrochloride of 2% - 4,0 ml |
| D | Hexenalum of 1% - 2,0 ml |
| E | Pentaminum of 5% - 4,0 ml |
| № | krok 2015, 2009 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 59-year-old female patient attended a maternity welfare clinic with complains of bloody discharge from the genital tracts. Postmenopause is 12 years. Vaginal examination revealed that external genital organs had signs of age involution, uterus cervix was not erosive, small amount of bloody discharge came from the cervical canal. Uterus is of normal size, uterine appendages are unpalpable. Fornices were deep and painless. What method should be applied for the diagnosis specification? |
| Correct answer | Separated diagnostic curetage |
| B | Laparoscopy |
| C | Puncture of abdominal cavity through posterior vaginal fornix |

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| D | Extensive colposcopy |
| E | E. Culdoscopy |
| № | krok 2015, 2009, 2008 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 26-year-old woman, who delivered a child 7 months ago, has been suffering from nausea, morning vomiting, sleepiness for the last 2 weeks. She breastfeeds the child, menstruation is absent. She has not applied any contraceptives. What method should be applied in order to specify her diagnosis? |
| Correct answer | Ultrasound examination |
| B | X-ray of small pelvis |
| C | Palpation of mammary glands and pressing out of colostrum |
| D | Bimanual vaginal examination |
| E | E. Speculum examination |
| № | krok 2015 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 28-year-old woman has bursting pain in the lower abdomen during menstruation; chocolate-like discharges from vagina are observed. It is known from the anamnesis that the patient suffers from chronic adnexitis. Bimanual examination revealed a tumour-like formation of heterogenous consistency 7x7 cm large to the left from the uterus. The formation is restrictedly movable, painful when moved. What is the most probable diagnosis? |
| Correct answer | Endometrioid cyst of the left ovary |
| B | Follicular cyst of the left ovary |
| C | Fibromatous node |
| D | Exacerbation of chronic adnexitis |
| E | Tumour of sigmoid colon |
| № | krok 2015, 2008 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 28-year-old woman complains of increased intermenstrual periods up to 2 months, hirsutism. Gynaecological examination revealed that the ovaries were enlarged, painless, compact, uterus had no peculiarities. Pelvic ultrasound revealed that the ovaries were 4-5 cm in diameter and had multiple enlarged follicles on periphery. X-ray of skull base showed that sellar region was dilated. What is the most probable diagnosis? |

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| Correct answer | Stein-Leventhal syndrome (Polycystic ovary syndrome) |
| B | Algodismenorrhea |
| C | Sheehan's syndrome |
| D | Premenstrual syndrome |
| E | Morgagni-Stewart syndrome |
| № | krok 2015, 2008 |
| Topic | of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A woman consulted a therapist about fatigability, significant weight loss, weakness, loss of appetite. She has been having amenorrhea for 8 months. A year ago she born a full-term child. Haemorrhage during labour made up 2 l. She got blood and blood substitute transfusions. What is the most probable diagnosis? |
| Correct answer | Sheehan's syndrome |
| B | Stein-Leventhal syndrome |
| C | Shereshevsky-Turner's syndrome |
| D | Homological blood syndrome |
| E | Vegetovascular dystonia |
| № | krok 2015, 2009, 2008 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A parturient woman is 27 year old, it was her second labour, delivery was at full-term, normal course. On the 3rd day of postpartum period body temperature is 36, 8° C, heart rate - 72/min, BP - 120/80 mm Hg. Mammary glands are moderately swollen, nipples are clean. Abdomen is soft and painless. Fundus of uterus is 3 fingers below the umbilicus. Lochia are bloody, moderate. What is the most probable diagnosis? |
| Correct answer | Physiological course of postpartum period |
| B | Subinvolution of uterus |
| C | Postpartum metroendometritis |
| D | Remnants of placental tissue after labour |
| E | Lactostasis |
| № | krok 2015 |
| Topic | Female urogynecological inflammatory diseases. |

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| Task | A 37-year-old woman complains of sharp pains in her external genitalia, edema of the vulvar lips, pain when walking. Objectively: body temperature is 38, 7° C, heart rate is 98/min. Inside the right vulvar lip there is a dense, painful, tumor-like growth 5,0x4,5 cm in size; skin and mucosa of the external genitalia are hyperemic, copious foul-smelling discharge is observed. The most likely diagnosis is: |
| Correct answer | A.Acute bartholinitis |
| B | B.Furuncle of outer labia |
| C | C.Acute vulvovaginitis Bartholin's cyst |
| D | D,Carcinoma of vulva |
| E | |
| № | krok 2015, 2012, 2010, 2009 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | Examination of placenta revealed a defect. An obstetrician performed manual investigation of uterine cavity, uterine massage. Prophylaxis of endometritis in the postpartum period should involve the following actions: |
| Correct answer | Antibacterial therapy |
| B | Instrumental revision of uterine cavity |
| C | Haemostatic therapy |
| D | Contracting agents |
| E | Intrauterine instillation of dioxine |
| № | krok 2015, 2013, 2012 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A patient with uterine fibromyoma sized up to 8-9 weeks of pregnancy consulted a gynaecologist about acute pain in the lower abdomen. Examination revealed pronounced positive symptoms of peritoneal irritation, high leukocytosis. Vaginal examination revealed that the uterus was enlarged up to 9 weeks of pregnancy due to the fibromatous nodes, one of which was mobile and extremely painful. Appendages were not palpable. Discharges were mucous, coming in moderate amounts. What is the treatment tactics? |
| Correct answer | Urgent surgery (laparotomy) |
| B | Surveillance and spasmolytic therapy |
| C | Fractional diagnostic curettage of the uterine cavity |
| D | Surgical laparoscopy |
| E | Surveillance and antibacterial therapy |
| № | krok 2015 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |

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| Task | A 20-year-old parturient woman has the I labor stage. The pregnancy is full-term. Labors occur every 3 minutes and last for 55 seconds. Fetus presentation is polar, the head is pressed to the small pelvis entrance. Heart rate of the fetus is 150/min, distinct and rhythmic. Vagina examination: uterus cervix is smoothed out; mouth of the womb is 2 cm open; fetal bladder is intact; the head is presented over the I plane of small pelvis; moderate mucous-bloody discharge is observed. What phase of the I labor stage is it? |
| Correct answer | Latent |
| B | Active |
| C | Slowing-down |
| D | Physiological preliminary period |
| E | Primary uterine inertia |
| № | krok 2015, 2014, 2013, 2012 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | On the 10th day postpartum a puerperant woman complains of pain and heaviness in the left mammary gland. Body temperature is 38, 8° C, Ps- 94 bpm. The left mammary gland is edematic, the supero-external quadrant of skin is hyperemic. Fluctuation symptom is absent. The nipples discharge drops of milk when pressed. What is a doctor's further tactics? |
| Correct answer | Antibiotic therapy, immobilization and expression of breast milk |
| B | Compress to both mammary glands |
| C | Inhibition of lactation |
| D | Physiotherapy |
| E | Opening of the abscess and drainage of the mammary gland |
| № | krok 2015 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | An Rh-negative woman with 32-weeklong term of pregnancy has been examined. It was observed that Rh-antibodies titer had increased four times within the last 2 weeks and was 1:64. First two pregnancies ended in antenatal death of fetus caused by hemolytic disease. What tactics of pregnancy management should be chosen? |
| Correct answer | Preterm delivery |
| B | Delivery at 37 weeks term |
| C | Rh-antibody test in 2 weeks; if Rh-antibodies increase in number conduct delivery |
| D | Introduction of anti-Rh immunoglobulin |
| E | US examination to determine signs of fetal erythroblastosis |
| № | krok 2015 |

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| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 48-year-old patient was delivered to a hospital in-patient unit with uterine bleeding that occurred after the 2-week-long delay of menstruation. Anamnesis states single birth. Examination of the uterine cervix with mirrors revealed no pathologies. On bimanual examination: uterus is of normal size, painless, mobile; uterine appendages have no changes. Discharge is bloody and copious. What primary hemostatic measure should be taken in the given case? |
| Correct answer | Fractional curettage of uterine cavity |
| B | Hormonal hemostasis |
| C | Hemostatics |
| D | Uterine tamponade |
| E | Uterotonics |
| № | krok 2015 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 30-year-old woman complains of irregular copious painful menstruations, pain irradiates to the rectum. Anamnesis states 10year-long infertility. On bimanual examination: uterus is of normal size; uterine appendages on the both sides are corded, with restricted mobility, painful; there are dense nodular painful growths detected in the posterior fornix. A doctor suspects endometriosis. What method allows to verify this diagnosis? |
| Correct answer | Laparoscopy |
| B | Diagnostic curettage of uterine cavity |
| C | Paracentesis of posterior fornix |
| D | Uterine probing |
| E | Hysteroscopy |
| № | krok 2014 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 13-year-old girl was admitted to the gynecology department for having a significant bleeding from the genital tract for 10 days. The patient has a history of irregular menstrual cycle since menarche. Menarche occurred at the age of 11. Recto-abdominal examination revealed no pathology. What is the provisional diagnosis? |
| Correct answer | Juvenile uterine bleeding |
| B | Adenomyosis |
| C | Injury of the external genitalia |

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| D | Werlhof's disease |
| E | Endometrial polyp |
| № | krok 2014 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | A 21-year-old female patient consulted a gynecologist about itching, burning, watery vaginal discharges with a fish-like smell. Speculum examination revealed that the cervical and vaginal mucosa was of a normal pink color. Vaginal examination revealed no alterations of the uterus and appendages. Gram-stained smears included clue cells. What is the most likely pathology? |
| Correct answer | Bacterial vaginosis (gardnerellosis) |
| B | Chlamydiosis |
| C | Gonorrhea |
| D | Trichomoniasis |
| E | Candidiasis |
| № | krok 2014 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 26-year-old secundipara at 40 weeks of gestation arrived at the maternity ward after the beginning of labor activity. 2 hours before, bursting of waters occurred. The fetus was in a longitudinal lie with cephalic presentation. Abdominal circumference was 100 cm, fundal height - 42 cm. Contractions occurred every 4-5 minutes and lasted 25 seconds each. Internal obstetric examination revealed cervical effacement, opening by 4 cm. Fetal bladder was absent. Fetal head was pressed against the pelvic inlet. What complication arose in childbirth? |
| Correct answer | Early amniorrhea |
| B | Primary uterine inertia |
| C | Secondary uterine inertia |
| D | Discoordinated labor |
| E | E. Clinically narrow pelvis |
| № | krok 2014 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 28-year-old female patient has been admitted to the gynecology department for abdominal pain, spotting before and after menstruation for 5 days. The disease is associated with the abortion which she had 2 years ago. Anti-inflammatory treatment had no effect. Bimanual examination findings: the uterus is enlarged, tight, painful, smooth. Hysteroscopy reveals dark red holes in the fundus with dark blood coming out of them. What diagnosis can be made on the grounds of these clinical presentations? |

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| Correct answer | Inner endometriosis |
| B | Polymenorrhea |
| C | Hypermenorrhea |
| D | Submucous fibromatous node |
| E | Dysfunctional uterine bleeding |
| № | krok 2014 |
| Topic | Operative obstetrics. |
| Task | A woman at 30 weeks pregnant has had an attack of eclampsia at home. On admission to the maternity ward AP- 150/100 mm Hg. Predicted fetal weight is 1500 g. There is face and shin pastosity. Urine protein is 0,66 ^o / _{oo} . Parturient canal is not ready for delivery. An intensive complex therapy has been started. What is the correct tactics of this case management? |
| Correct answer | Delivery by cesarean section |
| B | Continue therapy and prolong pregnancy for 1-2 weeks |
| C | Continue therapy and prolong pregnancy for 3-4 weeks |
| D | Labor induction by intravenous oxytocin or prostaglandins |
| E | Treat preeclampsia and achieve the delivery by way of conservative management |
| № | krok 2014 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A pregnant 26-year-old woman was admitted to a hospital for abdominal pain and bleeding from the genital tract. Bimanual examination revealed that uterus was the size of 9 weeks of pregnancy, the cervical canal let a finger through. Fetal tissues could be palpated in the orifice. There was moderate vaginal bleeding. What is the tactics of choice? |
| Correct answer | Instrumental extraction of fetal tissue |
| B | Surveillance |
| C | C. Administration of hormones |
| D | Hemostatic and antianemic therapy |
| E | Therapy for the maintenance of pregnancy |
| № | krok 2014 |
| Topic | Urgent conditions in gynecology. |

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| Task | A 36-year-old female presented to a gynecological hospital with a significant bleeding from the genital tract and a 1-month delay of menstruation. Bimanual examination revealed soft barrel-shaped cervix. Uterus was of normal size, somewhat softened. Appendages were unremarkable on both sides. Speculum examination revealed that the cervix was cyanotic, enlarged, with the external orifice disclosed up to 0,5 cm. Urine hCG test was positive. What is the most likely diagnosis? |
| Correct answer | Cervical pregnancy |
| B | Uterogestation |
| C | Abortion in progress |
| D | Threatened miscarriage |
| E | Ectopic pregnancy |
| № | krok 2014 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | An 18-year-old girl complains of breast pain and engorgement, headaches, irritability, swelling of the lower extremities. These symptoms have been observed since menarche and occur 3-4 days before the regular menstruation. Gynecological examination revealed no pathology. Make a diagnosis: |
| Correct answer | Premenstrual syndrome |
| B | Neurasthenia |
| C | Renal disease |
| D | Mastopathy |
| E | Cardiovascular disorder |
| № | krok 2014 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 25-year-old female presented to a women's welfare clinic and reported the inability to get pregnant within 3 years of regular sexual activity. Examination revealed increased body weight, male pattern of pubic hair growth, excessive pilositis of thighs, dense enlarged ovaries, monophasic basal temperature. What is the most likely diagnosis? |
| Correct answer | Polycystic ovarian syndrome |
| B | Adnexitis |
| C | drenogenital syndrome |
| D | Premenstrual syndrome |
| E | Gonadal dysgenesis |

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| № | krok 2014 |
| Topic | Postnatal septic diseases. |
| Task | A 23-year-old female consulted a gynecologist on the 20th day postpartum period about pain in the left breast, purulent discharge from the nipple. Objectively: Ps120/min, $t - 39\text{ }^{\circ}\text{C}$. The left breast is painful, larger than the right one, hyperemic. In the upper quadrant there is an infiltrate sized 10x15 cm with a softening inside. Blood test results: ESR- 50 mm/h, WBC- $15,0 \cdot 10^9/l$. What is the tactics of choice? |
| Correct answer | Refer to the surgical department for operative treatment |
| B | Refer to the gynecology department |
| C | Refer to the postpartum department |
| D | Refer to a polyclinic surgeon for conservative treatment |
| E | Lance the breast abscess in the women's health clinic |
| № | krok 2014 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A puerperant is 28 years old. It's the 3rd day post-partum after a second, normal, term delivery. The body temperature is of $36,8^{\circ}\text{C}$, Ps- 72/min, AP- 120/80 mm Hg. Mammary glands are moderately engorged, the nipples are clean. Abdomen is soft, painless. The fundus is 3 fingers' breadth below the navel. Moderate bloody lochia are present. What diagnosis can be made? |
| Correct answer | Physiological course of the postpartum period |
| B | Subinvolution of uterus |
| C | Postpartum metroendometritis |
| D | Remains of placental tissue after childbirth |
| E | Lactostasis |
| № | krok 2014 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics |
| Task | A puerperant is 32 years old, it's her first childbirth, term precipitate labor, the III period is unremarkable, the uterus is contracted, tight. Examination of the birth canal revealed a rupture in the left posterior vaginal wall that was closed with catgut. Two hours later, the patient complained of a feeling of pressure on the anus, pain in the perineum, minor vaginal discharges, edema of the vulva. These clinical presentations are indicative most likely of: |
| Correct answer | Vaginal hematoma |
| B | Hysteroecervicorrhexis |
| C | Hemorrhoids |

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| D | Hysterorrhesis |
| E | Hypotonic bleeding |
| № | krok 2014 |
| Topic | Infertile marriage. |
| Task | A 31-year-old female patient complains of infertility, amenorrhea for 2 years after the artificial abortion that was complicated by endometritis. Objectively: examination of the external genitalia reveals no pathology, there is female pattern of hair distribution. According to the functional tests, the patient has biphasic ovulatory cycle. What form of infertility is the case? |
| Correct answer | Uterine |
| B | Ovarian |
| C | Pituitary |
| D | Hypothalamic |
| E | Immunological |
| № | krok 2014, 2013 |
| Topic | Infertile marriage. |
| Task | A female patient complains of being unable to get pregnant for 5 years. A complete clinical examination brought the following results: hormonal function is not impaired, urogenital infection hasn't been found, on hysterosalpingography both tubes were filled with the contrast medium up to the isthmic segment, abdominal contrast was not visualized. The patient's husband is healthy. What tactics will be most effective? |
| Correct answer | In-vitro fertilization |
| B | Insemination with husband's sperm |
| C | ICSI within in-vitro fertilization program |
| D | Hydrotubation |
| E | Laparoscopic tubal plasty |
| № | krok 2014 |
| Topic | Placental dysfunction, hypotrophy of the fetus, fetal distress symptoms. |
| Task | A 19-year-old primiparous woman with a body weight of 54,5 kg gave birth at 38 weeks gestation to a full-term live girl after a normal vaginal delivery. The girl's weight was 2180,0 g, body length - 48 cm. It is known from history that the woman has been a smoker for 8 years, and kept smoking during pregnancy. Pregnancy was complicated by moderate vomiting of pregnancy from 9 to 12 weeks pregnant, edemata of pregnancy from 32 to 38 weeks. What is the most likely cause of low birth weight? |
| Correct answer | Fetoplacental insufficiency |
| B | Low weight of the woman |

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| C | Woman's age |
| D | First trimester preeclampsia |
| E | Third trimester preeclampsia |
| № | krok 2014 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A 23-year-old primigravida at 39 weeks gestation has been admitted to the maternity ward with irregular contractions. The intensity of uterine contractions is not changing, the intervals between them stay long. Bimanual examination reveals that the cervix is centered, soft, up to 1,5 cm long. There is no cervical dilatation. What diagnosis should be made? |
| Correct answer | Pregnancy I, 39 weeks, preliminary period |
| B | Pregnancy I, 39 weeks, labor I, 1 period, the latent phase |
| C | Pregnancy I, 39 weeks, labor I, period 1, the active phase |
| D | Pregnancy I, 39 weeks, birth I, 1 period, the acceleration phase |
| E | E. Pregnancy I, 39 weeks, pathological preliminary period |
| № | krok 2014 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 25-year-old female has a self-detected tumor in the upper outer quadrant of her right breast. On palpation there is a painless, firm, mobile lump up to 2 cm in diameter, peripheral lymph nodes are not changed. In the upper outer quadrant of the right breast ultrasound revealed a massive neoplasm with increased echogenicity sized 21x18 mm. What is the most likely diagnosis? |
| Correct answer | Fibroadenoma |
| B | Lactocele |
| C | Diffuse mastopathy |
| D | Mammary cancer |
| E | Mastitis |
| № | krok 2014, 2008 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 49-year-old female patient complains of itching, burning in the external genitals, frequent urination. The symptoms have been present for the last 7 months. The patient has irregular menstruation, once every 3-4 months. Over the last two years she has had hot flashes, sweating, sleep disturbance. Examination revealed no pathological changes of the internal reproductive organs. Complete blood count and urinalysis showed no pathological changes. Vaginal smear contained 20-25 leukocytes per HPF, mixed flora. What is the most likely diagnosis? |

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| Correct answer | Menopausal syndrome |
| B | Cystitis |
| C | Trichomonas colpitis |
| D | Vulvitis |
| E | Bacterial vaginosis |
| № | krok 2014 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | On admission a 35-year-old female reports acute abdominal pain, fever up to 38, 8° C, mucopurulent discharges. The patient is nulliparous, has a history of 2 artificial abortions. The patient is unmarried, has sexual contacts. Gynecological examination reveals no uterus changes. Appendages are enlarged, bilaterally painful. There is profuse purulent vaginal discharge. What study is required to confirm the diagnosis? |
| Correct answer | Bacteriologic and bacteriascopic studies |
| B | Hysteroscopy |
| C | Curettage of uterine cavity |
| D | Vaginoscopy |
| E | Laparoscopy |
| № | krok 2014 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 20-year-old female consulted a gynecologist about not having menstrual period for 7 months. History abstracts: early childhood infections and frequent tonsillitis, menarche since 13 years, regular monthly menstrual cycle of 28 days, painless menstruation lasts 5-6 days. 7 months ago the patient had an emotional stress. Gynecological examination revealed no alterations in the uterus. What is the most likely diagnosis? |
| Correct answer | Secondary amenorrhea |
| B | Primary amenorrhea |
| C | Algomenorrhea |
| D | Spanomenorrhea |
| E | Cryptomenorrhea |
| № | krok 2013 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |

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| Task | A 28-year-old patient complains of infertility. The patient has been married for 4 years, has regular sexual life and does not use contraceptives but has never got pregnant. Examination revealed normal state of the genitals, tubal patency. Basal body temperature recorded over the course of 3 consecutive menstrual cycles appeared to have a single phase. What is the most likely cause of infertility? |
| Correct answer | Anovulatory menstrual cycle |
| B | Immunological infertility |
| C | Genital endometriosis |
| D | Chronic salpingoophoritis |
| E | Ovulatory menstrual cycle |
| № | krok 2013 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | Full-term pregnancy. Body weight of the pregnant woman is 62 kg. The fetus has the longitudinal position, the fetal head is pressed against the pelvic inlet. Abdominal circumference is 100 cm. Fundal height is 35 cm. What is the approximate weight of the fetus? |
| Correct answer | 3 kg 500 g |
| B | 4 kg |
| C | 2 kg 500 g |
| D | 3 kg |
| E | 4 kg 500 g |
| № | krok 2013 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A newborn's head is of dolichocephalic shape, that is front-to-back elongated. Examination of the occipital region revealed a labour tumour located in the middle between the prefontanel and posterior fontanel. Specify the type of fetal presentation: |
| Correct answer | A. Posterior vertex presentation |
| B | B. Anterior vertex presentation |
| C | C. Presentation of the bregma |
| D | Brow presentation |
| E | E. Face presentation |
| № | krok 2013 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | During her first visit to the prenatal clinic a pregnant woman was referred to other doctors for mandatory consultation. The patient was referred to: |

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| Correct answer | Internist, dentist |
| B | Internist, surgeon |
| C | Dentist, surgeon |
| D | Surgeon, oculist |
| E | Therapist, oculist |
| № | krok 2013 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 28-year-old patient complains of profuse, painful and prolonged menstruation. Before and after the menstrual period there is spotting lasting for 4-6 days. Vaginal examination reveals that the uterus is enlarged corresponding to 5-6 weeks of pregnancy, has limited mobility, is painful. Appendages are not palpable. On the 15th day of the menstrual cycle, the uterus was of normal size, painless. On account of stated problems and objective examination the patient has been diagnosed with internal endometriosis. Which drug should be used for the effective treatment of this patient? |
| Correct answer | Duphaston |
| B | Synoestrolum |
| C | Parlodel |
| D | Ovidon |
| E | - |
| № | krok 2013, 2012 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 40 week pregnant secundipara is 28 years old. Contractions are very active. Retraction ring is at the level of navel, the uterus is hypertonic, in form of hourglass. On auscultation the fetal heart sounds are dull, heart rate is 100/min. AP of the parturient woman is 130/80 mm Hg. What is the most likely diagnosis? |
| Correct answer | Risk of hysterorrhexis |
| B | Mazolysis |
| C | Disturbed labour |
| D | Complete hysterorrhexis |
| E | Attack of eclampsia |
| № | krok 2013 |
| Topic | Female urogynecological inflammatory diseases. |

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| Task | A 37-year-old patient complains of acute pain in the region of genitals, swelling of the labia, pain when walking. Objectively: body temperature is 38, 7° C, Ps- 98/min. In the interior of the right labia there is a dense, painful tumour-like formation 5,0x4,5 cm large, the skin and mucous membrane of genitals is hyperemic, there are profuse foulsmelling discharges. What is the most likely diagnosis? |
| Correct answer | Acute Bartholinitis |
| B | Labial furuncle |
| C | Acute vulvovaginitis |
| D | Bartholin gland cyst |
| E | Carcinoma of vulva |
| № | krok 2013 |
| Topic | Early gestosis. Hypertensive conditions during pregnancy. Preeclampsia. Eclampsia. |
| Task | A multigravida at 39 weeks of gestation has been delivered to a hospital having a regular labour activity for 8 hours, the waters burst an hour ago. She complains of headache, seeing spots. AP is of 180/100 mm Hg. Urine test results: protein - 3,3 g/l, hyaline cylinders. Fetal heart rate is 140/min, rhythmical. Vaginal examination reveals complete cervical dilatation, the fetal head is on the pelvic floor, sagittal suture is in line with obstetric conjugate, the occipital fontanel is under the pubis. What is the optimal tactics of labour management? |
| Correct answer | Outlet forceps |
| B | Cavity forceps |
| C | Cesarean section |
| D | Vacuum extraction of the fetus |
| E | Conservative labour management |
| № | krok 2013 |
| Topic | Gynecological diseases in children and teenagers. Methods of contraception for teenagers. |
| Task | A 13-year-old girl was admitted to the gynecological department with heavy bleeding, which appeared after a long delay of menstruation. Shortly before, the girl suffered a serious psychotrauma. Her menarche occurred at the age of 11, she has a 30-day cycle with 5 to 6 days of moderate, painless bleeding. The patient is somatically healthy, of normosthenic constitution with height of 160 cm, weight of 42 kg. The patient is pale. Rectoabdominal examination revealed that the uterus was of normal size and consistency, anteflexio-versio, the appendages were not changed. What is the most likely diagnosis? |
| Correct answer | Juvenile bleeding |
| B | Ovarian cyst |
| C | Hysteromyoma |
| D | Girl is healthy |

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| E | Amenorrhea |
| № | krok 2013 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 38-year-old female patient complains about hot flashes and feeling of intense heat arising up to 5 times a day, headaches in the occipital region along with high blood pressure, palpitations, dizziness, fatigue, irritability, memory impairment. 6 months ago the patient underwent extirpation of the uterus with its appendages. What is the most likely diagnosis? |
| Correct answer | Post-castration syndrome |
| B | Premenstrual syndrome |
| C | Early pathological menopause |
| D | Secondary psychogenic amenorrhea |
| E | Physiological premenopause |
| № | krok 2013 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | 20 minutes after a normal delivery at 39 weeks a puerpera had a single temperature rise up to 38° C . Objectively: the uterus is dense, located between the navel and the pubis, painless. Lochia are bloody, of small amount. Breasts are moderately soft and painless. What is the optimal tactics? |
| Correct answer | Further follow-up |
| B | Antibiotic therapy |
| C | Appointment antipyretic |
| D | Manual examination of the uterine cavity |
| E | Expression of breast |
| № | krok 2013, 2012 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | During self-examination a 22-yearold patient revealed a mammary tumour. Palpation revealed a firm, painless, mobile formation up to 2 cm, peripheral lymph nodes were not changed. USI results: in the superior external quadrant of the right mammary gland there was a big formation of increased echogenicity, sized 18x17 mm. The patient was provisionally diagnosed with fibroadenoma. What is a doctor's further tactics? |
| Correct answer | Surgical removal of the tumour prior to pregnancy |
| B | Dynamic follow-up |
| C | Surgical treatment after pregnancy |

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| D | Radical mastectomy |
| E | Nonsteroid anti-inflammatory drugs, oral contraceptives |
| № | krok 2013 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | 2 weeks after labour a parturient woman developed breast pain being observed for 3 days. Examination revealed body temperature at the rate of 39° C, chills, weakness, hyperaemia, enlargement, pain and deformity of the mammary gland. On palpation the infiltrate was found to have an area of softening and fluctuation. What is the most likely diagnosis? |
| Correct answer | Infiltrative-purulent mastitis |
| B | Phlegmonous mastitis |
| C | Lactostasis |
| D | Serous mastitis |
| E | Mastopathy |
| № | krok 2013 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A puerpera breastfeeding for 1,5 weeks consulted a doctor about uniform breast engorgement. Breasts are painful. The body temperature is of 36, 6° C. Milk expressing is difficult. What is the most likely diagnosis? |
| Correct answer | Lactostasis |
| B | Infiltrative mastitis |
| C | Purulent mastitis |
| D | Fibrocystic mastopathy |
| E | Gangrenous mastitis |
| № | krok 2013 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | Examination of a Rh-negative pregnant woman at 32 weeks of gestation revealed a four-time rise of Rh-antibody titer within 2 weeks, the titer was 1:64. In the first two pregnancies the patient had experienced antenatal fetal death due to hemolytic disease. What is the optimal tactics of pregnancy management? |
| Correct answer | Early delivery |
| B | Delivery at 37 weeks of gestation |
| C | Screening for Rh-antibodies 2 weeks later and early delivery in case of further titer rise |
| D | Introduction of anti-Rh (D) immunoglobulin |
| E | Ultrasound for of the fetus signs of hemolytic disease |

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| № | krok 2012 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A woman, primagravida, consults a gynecologist on 05.03.2012. A week ago she felt the fetus movements for the first time. Last menstruation was on 10.01.2012. When should she be given maternity leave? |
| Correct answer | 8 August |
| B | 25 July |
| C | 22 August |
| D | 11 July |
| E | 5 September |
| № | krok 2012, 2010 |
| Topic | Operative obstetrics. |
| Task | A 28-year-old parturient complains about headache, vision impairment, psychic inhibition. Objectively: AP200/110 mm Hg, evident edemata of legs and anterior abdominal wall. Fetus head is in the area of small pelvis. Fetal heartbeats is clear, rhythmic, 190/min. Internal examination revealed complete cervical dilatation, fetus head was in the area of small pelvis. What tactics of labor management should be chosen? |
| Correct answer | Forceps operation |
| B | Cesarean |
| C | Embryotomy |
| D | Conservative labor management with episiotomy |
| E | Stimulation of labor activity |
| № | krok 2012, 2011 |
| Topic | Operative obstetrics. |
| Task | A secundipara has regular birth activity. Three years ago she had cesarean section for the reason of acute intrauterine hypoxia. During parodynia she complains of extended pain in the area of postsurgical scar. Objectively: fetus pulse is rhythmic - 140 bpm. Vaginal examination shows 5 cm cervical dilatation. Fetal bladder is intact. What is the tactics of choice? |
| Correct answer | Cesarean section |
| B | Augmentation of labour |
| C | Obstetrical forceps |
| D | Waiting tactics of labor management |
| E | Vaginal delivery |
| № | krok 2012 |

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| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 27-year-old woman presents at the maternity welfare centre because of infertility. She has had sexual life in marriage for 4 years, doesn't use contraceptives. She hasn't get pregnant. On examination: genital development is without pathology, uterine tubes are passable, basal (rectal) temperature is one-phase during last 3 menstrual cycles. What is the infertility cause? |
| Correct answer | Anovular menstrual cycle |
| B | Chronic adnexitis |
| C | Abnormalities in genital development |
| D | Immunologic infertility |
| E | Genital endometriosis |
| № | krok 2012 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | A 25-year-old woman complains of profuse foamy vaginal discharges, foul, burning and itching in genitalia region. She has been ill for a week. Extramarital sexual life. On examination: hyperemia of vaginal mucous, bleeding on touching, foamy leucorrhea in the urethral area. What is the most probable diagnosis? |
| Correct answer | Trichomonas colpitic |
| B | Gonorrhea |
| C | Chlamydiosis |
| D | Vagina candidomycosis |
| E | Bacterial vaginosis |
| № | krok 2012, 2011, 2009, 2008, 2007 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A woman consulted a doctor on the 14th day after labour about sudden pain, hyperemy and induration of the left mammary gland, body temperature rise up to 39° C, headache, indisposition. Objectively: fissure of nipple, enlargement of the left mammary gland, pain on palpation. What pathology would you think about in this case? |
| Correct answer | Lactational mastitis |
| B | Lacteal cyst with suppuration |
| C | Fibrous adenoma of the left mammary gland |
| D | Breast cancer |
| E | Phlegmon of mammary gland |
| № | krok 2012, 2011, 2010 |

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| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 42-year-old woman has had hyperpolymenorrhea and progressing algodismenorrhea for the last 10 years. Gynaecological examination revealed no changes of uterine cervix; discharges are moderate, of chocolate colour, uterus is slightly enlarged and painful, appendages are not palpable, the fornices are deep and painless. What is the most likely diagnosis? |
| Correct answer | Uterine endometriosis |
| B | Uterine carcinoma |
| C | Subserous uterine fibromyoma |
| D | Endomyometritis |
| E | Adnexal endometriosis |
| № | krok 2012, 2010 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | On the tenth day after discharge from the maternity house a 2-year-old patient consulted a doctor about body temperature rise up to 39° C, pain in the right breast. Objectively: the mammary gland is enlarged, there is a hyperemized area in the upper external quadrant, in the same place there is an ill-defined induration, lactostasis, fluctuation is absent. Lymph nodes of the right axillary region are enlarged and painful. What is the most likely diagnosis? |
| Correct answer | Lactational mastitis |
| B | Abscess |
| C | Erysipelas |
| D | Dermatitis |
| E | Tumour |
| № | krok 2012 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | A 28-year-old patient complains of discomfort, acute pain in the lower third of the left labia majora. The disease began suddenly after menstruation. Objectively: body temperature is 38° C. The left labia majora has a formation to 3 cm diameter, with hyperemic surface, extremely painful to the touch, with symptoms of fluctuation. What is the most likely diagnosis? |
| Correct answer | Acute bartholinitis |
| B | Vulvar cancer |
| C | Vulvar fibroid |
| D | Bartholin gland cyst |
| E | Hypertrophy of the labia |
| № | krok 2012 |

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| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 51-year-old patient complains of having intensive bloody discharges from vagina for 15 days after delay of menstruation for 2,5 months. In anamnesis: disorders of menstrual function during a year, at the same time she felt extreme irritability and had sleep disorders. US examination results: uterus corresponds with age norms, appendages have no peculiarities, endometrium is 14 mm thick. What is the doctor's tactics? |
| Correct answer | Diagnostic curettage of uterine cavity |
| B | Conservative treatment of bleeding |
| C | Hysterectomy |
| D | Supravaginal amputation of uterus without appendages |
| E | TORCH-infection test |
| № | krok 2012, 2011 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 25-year-old female patient complains about having amenorrhea for 3 years. She associates it with difficult labour complicated by massive hemorrhage. She also complains of loss of weight, hair fragility and loss, lack of appetite and depression. Objective examination reveals no pathological changes of uterus and its appendages. What is the disease pathogenesis? |
| Correct answer | Hypoproduction of gonadotropin |
| B | Hyperproduction of estrogens |
| C | Hyperproduction of androgens |
| D | Hypoproduction of progesterone |
| E | Hyperproduction of prolactin |
| № | krok 2012, 2011 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 54-year-old female patient consulted a gynaecologist about bloody discharges from the vagina for 1 month. Last menstruation was 5 years ago. Gynaecological examination revealed no pathological changes. What is the tactics of choice? |
| Correct answer | Diagnostic fractional curettage of uterine cavity |
| B | Colposcopy |
| C | USI |
| D | Cytosmear |
| E | Symptomatic therapy |
| № | krok 2012 |

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| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A 28-year-old female patient complains of having haemorrhage from the genital tracts for 1 month. 6 months ago she had natural delivery and gave birth to a girl weighing 3100 g. Objectively: the uterus is enlarged to 9-10 weeks, mobile, painless, of heterogenous consistency. Examination reveals vaginal cyanosis, anaemia and body temperature rise up to 37, 8° C. There is a significant increase in hCG concentration in the urine. What is your provisional diagnosis? |
| Correct answer | Uterine chorionepithelioma |
| B | Pregnancy |
| C | Hydatidiform mole |
| D | Endometritis |
| E | Uterine fibromyoma |
| № | krok 2012 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | A multigravida with Rhisensitization was found to have a decrease in anti-Rh titer from 1:32 to 1:8 at 33-34 weeks of gestation. Ultrasound revealed double contour of head, enlargement of fetal liver, placental thickness of 50 mm. The patient has indication for: |
| Correct answer | Premature delivery |
| B | Course of desensitizing therapy |
| C | Plasmapheresis |
| D | Repeated (after 2 weeks) USI |
| E | Administration of anti-Rh gammaglobulin |
| № | krok 2012 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 27-year-old patient complains of irritability, tearfulness, depression, and sometimes aggressiveness, headache, nausea, vomiting, swelling of the mammary glands. The mentioned problems arise 5-6 days before menstruation and gradually progress until menstruation, 3 days after it the problems disappear. What is the most likely diagnosis? |
| Correct answer | Premenstrual syndrome |
| B | Premature pathological climacterium |
| C | Secondary psychogenic amenorrhea |
| D | Preclimacterium syndrome |
| E | Algomenorrhea |

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| № | krok 2012 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 30-year-old female patient complains of milk discharge from the mammary glands, 5-month absence of menstruation. She had one physiological labour four years ago. Objectively: mammary glands are normally developed. Bimanual examination reveals that the uterus is decreased in size, the ovaries are of normal size. MRI-scan shows no cerebral pathologies. Concentration of thyroid-stimulating hormone is normal. The serum prolactin level is increased. What is the most likely diagnosis? |
| Correct answer | Hyperprolactinemia |
| B | Hypothyroidism |
| C | Polycystic ovary syndrome |
| D | Pituitary adenoma |
| E | Sheehan syndrome |
| № | krok 2011 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 54-year-old female patient consulted a doctor about bloody discharges from the genital tracts after 2 years of amenorrhea. USI and bimanual examination revealed no genital pathology. What is the tactics of choice? |
| Correct answer | Fractional biopsy of lining of uterus and uterine mucous membranes |
| B | Styptic drugs |
| C | Contracting drugs |
| D | Estrogenic haemostasia |
| E | Hysterectomy |
| № | krok 2011, 2010 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A 30-year-old gravida consulted a gynecologist about bright red bloody discharges from the vagina in the 32 week of gestation. She was hospitalized with a suspicion of placental presentation. Under what conditions is it rational to conduct the internal examination in order to make a diagnosis? |
| Correct answer | In the operating room prepared for the operation |
| B | In the examination room of antenatal clinic |
| C | In the admission ward of maternity hospital |
| D | In the delivery room keeping to all the aseptic regulations |
| E | The examination is not to be conducted because of risk of profuse haemorrhage |

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| № | krok 2011 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | 10 minutes after delivery a woman discharged placenta with a tissue defect 5x6 cm large. Discharges from the genital tracts were profuse and bloody. Uterus tonus was low, fundus of uterus was located below the navel. Examination of genital tracts revealed that the uterine cervix, vaginal walls, perineum were intact. There was uterine bleeding with following blood coagulation. Your actions to stop the bleeding: |
| Correct answer | To make manual examination of uterine cavity |
| B | To apply hemostatic forceps upon the uterine cervix |
| C | To introduce an ether-soaked tampon into the posterior fornix |
| D | To put an ice pack on the lower abdomen |
| E | To administer uterotonics |
| № | krok 2011 |
| Topic | Urgent conditions in gynecology. |
| Task | A 24-year-old female patient complains of acute pain in the lower abdomen that turned up after a physical stress. She presents with nausea, vomiting, dry mouth and body temperature 36, 6° C . She has a right ovarian cyst in history. Bimanual examination reveals that uterus is dense, painless, of normal size. The left fornix is deep, uterine appendages aren't palpable, the right fornix is contracted. There is a painful formation on the right of uterus. It's round, elastic and mobile. It is 7x8 cm large. In blood: leukocytosis with the left shift. What is the most likely diagnosis? |
| Correct answer | Ovarian cyst with pedicle torsion |
| B | Right-sided pyosalpinx |
| C | Subserous fibromyoma of uterus |
| D | Acute metritis |
| E | Extrauterine pregnancy |
| № | krok 2011 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A parturient woman is 23 years old. Vaginal obstetric examination reveals full cervical dilatation. There is no fetal bladder. Fetal head is in the plane of pelvic outlet. Sagittal suture is in mesatipellic pelvis, anterior fontanel is closer to pubes. The fetal head diameter in such presentation will be: |
| Correct answer | Suboccipito-bregmaticus |
| B | Fronto-occipitalis recta |

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| C | Biparietal |
| D | Suboccipitio-frontalis |
| E | Mento-occipitalis |
| № | krok 2011, 2010 |
| Topic | |
| Task | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. A 26-year-old woman complains of having bloody discharges from the genitals for the last 14 days, abdominal pain, general fatiguability, weakness, weight loss, fever, chest pain, obstructed respiration. 5 weeks ago she underwent an induced abortion in the 6-7 week of gestation. Objectively: the patient is pale and inert. Bimanual examination revealed that the uterus was enlarged up to 8-9 weeks of gestation. In blood: Hb - 72 g/l. Urine test for chorionic gonadotropin gave the apparently positive result. What is the most likely diagnosis? |
| Correct answer | Chorioepithelioma |
| B | Metroendometritis |
| C | Uterus perforation |
| D | Uterine fibromyoma |
| E | Uterine carcinoma |
| № | krok 2011 |
| Topic | Early gestosis. Hypertensive conditions during pregnancy. Preeclampsia. Eclampsia. |
| Task | A 28-years-old woman complains of nausea and vomiting about 10 times per day. She has been found to have body weight loss and xerodermia. The pulse is 100 bpm. Body temperature is 37, 2° C. Diuresis is low. USI shows 5-6 weeks of pregnancy. What is the most likely diagnosis? |
| Correct answer | Moderate vomiting of pregnancy |
| B | Mild vomiting of pregnancy |
| C | I degree preeclampsia |
| D | Premature abortion |
| E | Food poisoning |
| № | krok 2011 |
| Topic | Urgent conditions in gynecology. |

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| Task | A 22-year-old female patient complains of dull pain in her right iliac area that she has been experiencing for a week, morning sickness and gustatory change. She has a history of menstruation delay for 3 weeks. Objectively: AP80/50 mm Hg, pulse is 78 bpm, body temperature is 37° C. Bimanual examination reveals that uterus is enlarged, soft, mobile and painless. Uterine appendages are palpable on the right, there is a dense, elastic and moderately painful formation 3x4 cm large. What is the most likely diagnosis? |
| Correct answer | Progressing fallopian pregnancy |
| B | Interrupted fallopian pregnancy |
| C | Right ovarian cyst |
| D | Uterogestation |
| E | Acute appendicitis |
| № | krok 2011 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A 32-year-old gravida complains of episodes of unconsciousness, spontaneous syncope that are quickly over after a change of body position. A syncope can be accompanied by quickly elapsing bradycardia. There are no other complications of gestation. What is the most likely reason for such condition? |
| Correct answer | Postcava compression by the gravid uterus |
| B | Pressure rise in the veins of extremities |
| C | Pressure fall in the veins of extremities |
| D | Vegetative-vascular dystonia (cardiac type) |
| E | Psychosomatic disorders |
| № | krok 2011 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | An ambulance delivered a 21-year-old woman to the gynaecological department with complaints of colicky abdominal pain and bloody discharges from the genital tracts. Bimanual examination revealed that uterus was soft, enlarged to the size of 6 weeks of gestation, a gestational sac was palpated in the cervical canal. Uterine appendages weren't palpable. Fornices are free, deep and painless. Discharges from the genital tracts are bloody and profuse. What is the most likely diagnosis? |
| Correct answer | Abortion in progress |
| B | Cervical pregnancy |
| C | Threat of abortion |
| D | Incipient abortion |
| E | Interrupted fallopian pregnancy |

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| № | krok 2011 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | On the fifth day after a casual sexual contact a 25-year-old female patient consulted a doctor about purulent discharges from the genital tracts and itch. Vaginal examination showed that vaginal part of uterine cervix was hyperemic and edematic. There was an erosive area around the external orifice of uterus. There were mucopurulent profuse discharges from the cervical canal, uterine body and appendages exhibited no changes. Bacterioscopic examination revealed bean-shaped diplococci that became red after Gram's staining. What is the most likely diagnosis? |
| Correct answer | Acute gonorrhoeal endocervicitis |
| B | Trichomonal colpitis |
| C | Candidal vulvovaginitis |
| D | Chlamydial endocervicitis |
| E | Bacterial vaginism |
| № | krok 2011 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | A 30-year-old female patient has been delivered to the gynaecological department with complaints of acute pain in the lower abdomen and body temperature 38, 8° C. In history: sexual life out of wedlock and two artificial abortions. Gynaecological examination reveals no changes of uterine. The appendages are enlarged and painful on both sides. Vaginal discharges are purulent and profuse. What study is required to confirm a diagnosis? |
| Correct answer | Bacteriological and bacterioscopic analysis |
| B | Hysteroscopy |
| C | Curettage of uterine cavity |
| D | Colposcopy |
| E | Laparoscopy |
| № | krok 2011, 2010 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A parturient woman is 25 years old, it is her second day of postpartum period. It was her first full-term uncomplicated labour. The lochia should be: |
| Correct answer | Bloody |
| B | Sanguino-serous |
| C | Mucous |
| D | Purulent |

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| E | Serous |
| № | krok 2011 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | At first appointment with an obstetrician-gynaecologist a pregnant woman is referred to other medical specialists. She must be obligatory examined by the following specialists: |
| Correct answer | Therapeutist and dentist |
| B | Therapeutist and endocrinologist |
| C | Dentist and phthisiatrician |
| D | ENT and ophthalmologist |
| E | Dentist and cardiologist |
| № | krok 2011 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A pregnant woman was delivered to the gynecological unit with complaints of pain in the lower abdomen and insignificant bloody discharges from the genital tracts for 3 hours. Last menstruation was 3 months ago. Vaginal examination showed that body of womb was in the 10th week of gestation, a fingertip could be inserted into the external orifice of uterus, bloody discharges were insignificant. USI showed small vesicles in the uterine cavity. What is the most likely diagnosis? |
| Correct answer | Grape mole |
| B | Abortion in progress |
| C | Incipient abortion |
| D | Threat of spontaneous abortion |
| E | Incomplete abortion |
| № | krok 2011 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | A primigravida is 22 years old. She has Rh(-), her husband has Rh(+). Antibodies to Rh weren't found at 32 weeks of pregnancy. Redetermination of antibodies to Rh didn't reveal them at 35 weeks of pregnancy as well. How often should the antibodies be determined hereafter? |
| Correct answer | Once a week |
| B | Once in two weeks |
| C | Once in three weeks |
| D | Montly |

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| E | There is no need in further checks |
| № | krok 2011 |
| Topic | Gynecological diseases in children and teenagers. Methods of contraception for teenagers. |
| Task | A 14-year-old girl complains of pain in vaginal area and lower abdomen that last for 3-4 days and have been observed for 3 months about the same time. Each time pain is getting worse. Objectively: mammary glands are developed, hairiness corresponds to the age. The virginal membrane is intact, cyanotic and protruded. She has never had menstruation. She has been diagnosed with primary amenorrhea. What is the reason of amenorrhea? |
| Correct answer | Hymen atresia |
| B | Turner's syndrome |
| C | Babinski-Frohlich syndrome |
| D | Pregnancy |
| E | Sexual development delay |
| № | krok 2010 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A primagravida in her 20th week of gestation complains about pain in her lower abdomen, blood smears from the genital tracts. The uterus has an increased tonus, the patient feels the fetus movements. Bimanual examination revealed that the uterus size corresponded the term of gestation, the uterine cervix was contracted down to 0,5 cm, the external orifice was open by 2 cm. The discharges were bloody and smeary. What is the most likely diagnosis? |
| Correct answer | Incipient abortion |
| B | Risk of abortion |
| C | Abortion in progress |
| D | Incomplete abortion |
| E | Missed miscarriage |
| № | krok 2010, 2009 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 40-year-old female patient has been observing profuse menses accompanied by spasmodic pain in the lower abdomen for a year. Bimanual examination performed during menstruation revealed a dense formation up to 5 cm in diameter in the cervical canal. Uterus is enlarged up to 5-6 weeks of pregnancy, movable, painful, of normal consistency. Appendages are not palpable. Bloody discharges are profuse. What is the most likely diagnosis? |
| Correct answer | Nascent submucous fibromatous node |

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| B | Abortion in progress |
| C | Cervical carcinoma |
| D | Cervical myoma |
| E | Algodismenorrhea |
| № | krok 2010, 2009 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | On the 5th day after labor body temperature of a 24-year-old parturient suddenly rose up to 38, 7° C. She complains about weakness, headache, abdominal pain, irritability. Objectively: AP- 120/70 mm Hg, Ps- 92 bpm, t° - 38, 7° C. Bimanual examination revealed that the uterus was enlarged up to 12 weeks of pregnancy, it was dense, slightly painful on palpation. Cervical canal lets in 2 transverse fingers, discharges are moderate, turbid, with foul smell. In blood: skeocytosis, lymphopenia, ESR - 30 mm/h. What is the most likely diagnosis? |
| Correct answer | Endometritis |
| B | Parametritis |
| C | Pelviperitonitis |
| D | Metrophlebitis |
| E | Lochiometra |
| № | krok 2010, 2009 |
| Topic | Premature breaking of pregnancy. Prolonged pregnancy. Multi-fetal (multiple) pregnancy. |
| Task | An 18-year-old primigravida in her 27-28 week of gestation underwent an operation on account of acute phlegmonous appendicitis. In the postoperative period it is necessary to take measures for prevention of the following pregnancy complication: |
| Correct answer | Noncarrying of pregnancy |
| B | Intestinal obstruction |
| C | Fetus hypotrophy |
| D | Premature placenta detachment |
| E | Late gestosis |
| № | krok 2010 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 30-year-old patient consulted a doctor about menstruation absence for 2 years after labour, loss of hair, body weight loss. The labour was complicated by a haemorrhage caused by uterus hypotonia. Objectively: the patient is asthenic, external genitals are hypoplastic, the uterus body is small and painless. The appendages are not palpable. What is the most likely diagnosis? |

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| Correct answer | Sheehan's syndrome |
| B | Ovarian amenorrhea |
| C | Turner's syndrome |
| D | Exhausted ovary syndrome |
| E | Galactorrhea-amenorrhea syndrome |
| № | krok 2010, 2009 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 25-year-old woman came to a maternity welfare clinic and complained about being unable to conceive within 3 years of regular sexual life. Examination revealed weight gain, male pattern of hair distribution on the pubis, excessive pilosis of thighs. Ovaries were dense and enlarged, basal temperature was monophasic. What is the most likely diagnosis? |
| Correct answer | Sclerocystosis of ovaries |
| B | Tubo-ovaritis |
| C | Adrenogenital syndrome |
| D | Premenstrual syndrome |
| E | Gonadal dysgenesis |
| № | krok 2010 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 49-year-old woman complains about headache, head and neck going hot, increased perspiration, palpitation, arterial pressure rise up to 170/100 mm Hg, irritability, insomnia, tearfulness, memory impairment, rare and scarce menses, body weight increase by 5 kg over the last half a year. What is the most likely diagnosis? |
| Correct answer | Climacteric syndrome |
| B | Premenstrual syndrome |
| C | Vegetative-vascular dystonia |
| D | Arterial hypertension |
| E | Postcastration syndrome |
| № | krok 2010 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 49-year-old patient undergoes regular medical check-up for uterine fibromyoma. Within the last year the uterus has enlarged up to 20 weeks of gestation. What is the rational way of treatment? |
| Correct answer | Surgical treatment |

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| B | Hormonal therapy |
| C | Further surveillance |
| D | Embolization of uterine arteries |
| E | Treatment with prostaglandin inhibitors |
| № | krok 2010 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A maternity house has admitted a primagravida complaining of irregular, intense labour pains that have been lasting for 36 hours. The woman is tired, failed to fall asleep at night. The fetus is in longitudinal lie, with cephalic presentation. The fetus heartbeat is clear and rhythmic, 145/min. Vaginal examination revealed that the uterine cervix was up to 3 cm long, dense, with retroflexion; the external orifice was closed; the discharges were of mucous nature. What is the most likely diagnosis? |
| Correct answer | Pathological preliminary period |
| B | Uterine cervix dystocia |
| C | Primary uterine inertia |
| D | Physiological preliminary period |
| E | Secondary uterine inertia |
| № | krok 2009, 2008 |
| Topic | Urgent conditions in gynecology. |
| Task | A woman complains of having slight dark bloody discharges and mild pains in the lower part of abdomen for several days. Last menses were 7 weeks ago. The pregnancy test is positive. Bimanual investigation: the body of the uterus indicates for about 5-6 weeks of pregnancy, it is soft, painless. In the left appendage there is a retort-like formation, 7x5 cm large, mobile, painless. What examination is necessary for detection of fetus localization? |
| Correct answer | Ultrasound |
| B | Hysteroscopy |
| C | Hromohydrotubation |
| D | Colposcopy |
| E | Cystoscopy |
| № | krok 2009, 2008 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |

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| Task | A pregnant woman in her 40th week of pregnancy undergoes obstetric examination: the cervix of uterus is undeveloped. The oxytocin test is negati-ve. Examination at 32 weeks revealed: AP 140/90 mm Hg, proteinuria 1 g/l, peri-pheral edemata. Reflexes are normal. Choose the most correct tactics: |
| Correct answer | Labour stimulation after preparation |
| B | Absolute bed rest for 1 month |
| C | Complex therapy of gestosis for 2 days |
| D | Caesarian section immediately |
| E | Complex therapy of gestosis for 7 days |
| № | krok 2009, 2008 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A 26 year old woman had the second labour within the last 2 years with oxytocin application. The child's weight is 4080 g. After the placent birth there were massive bleeding, signs of hemorrhagic shock. Despite the injection of contracti-ve agents, good contraction of the uterus and absence of any cervical and vaginal disorders, the bleeding proceeds. Choose the most probable cause of bleeding: |
| Correct answer | Atony of the uterus |
| B | Injury of cervix of the uterus |
| C | Hysterorrhexis |
| D | Delay of the part of placenta |
| E | Hypotonia of the uterus |
| № | krok 2009, 2008 |
| Topic | Pregnancy and labor of women with extragenital diseases. Perinatal infections. Prophylaxis to prevent vertical HIV transmission. |
| Task | A woman of a high-risk group (chronic pyelonephritis in anamnesis) had vaginal delivery. The day after labour she complained of fever and loin pains, frequent urodynia. Specify the most probable complication: |
| Correct answer | Infectious contamination of the urinary system |
| B | Thrombophlebitis of veins of the pelvis |
| C | Infectious hematoma |
| D | Endometritis |
| E | Apostasis of sutures after episiotomy |
| № | krok 2009 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |

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| Task | In the woman of 24 years about earlier normal menstrual function, cycles became irregular, according to tests of function diagnostics - anovulatory. The contents of prolactin in blood is boosted. Choose the most suitable investigation: |
| Correct answer | Computer tomography of the head |
| B | Determination of the level of gonadotropins |
| C | USI of organs of small pelvis |
| D | Progesterone assay |
| E | Determination of the contents of testosteron-depotum in blood serum |
| № | krok 2009 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | A woman delivered a child. It was her fifth pregnancy but the first delivery. Mother's blood group is $A(I I)Rh^-$, newborn's - $A(I I)Rh^+$. The level of indirect bilirubin in umbilical blood was 58 micromole/l, haemoglobin - 140 g/l, RBC-3, $8 \cdot 10^{12}/l$. In 2 hours the level of indirect bilirubin turned 82 micromole/l. The hemolytic disease of newborn (icteric-anemic type, Rh-incompatibility) was diagnosed. Choose the therapeutic tactics: |
| Correct answer | Replacement blood transfusion (conservative therapy) |
| B | Conservative therapy |
| C | Blood transfusion (conservative therapy) |
| D | Symptomatic therapy |
| E | Antibiotics |
| № | krok 2009 |
| Topic | Infertile marriage. |
| Task | Which of the methods of examination is the most informative in the diagnostics of a tube infertility? |
| Correct answer | Laparoscopy with chromosalpingoscopy |
| B | Perturbation |
| C | Hysterosalpingography |
| D | Transvaginal echography |
| E | Bicontrast pelviography |
| № | krok 2009 |
| Topic | Operative obstetrics. |

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| Task | A 28 year old parturient complains about headache, vision impairment, psychic inhibition. Objectively: AP-200/110 mm Hg, evident edemata of legs and anterior abdominal wall. Fetus head is in the area of small pelvis. Fetal heartbeats is clear, rhythmic, 190/min. Internal investigation revealed complete cervical dilatation, fetus head was in the area of small pelvis. What tactics of labor management should be chosen? |
| Correct answer | Forceps operation |
| B | Cesarean |
| C | Embryotomy |
| D | Conservative labor management with episiotomy |
| E | Stimulation of labor activity |
| № | krok 2009 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 48 year old female patient complains about contact haemorrhage. Speculum examination revealed hypertrophy of uterus cervix. It resembles of cauliflower, it is dense and can be easily injured. Bi-manual examination revealed that fornices were shortened, uterine body was nonmobile. What is the most probable diagnosis? |
| Correct answer | Cervical carcinoma |
| B | Metrofibroma |
| C | Endometriosis |
| D | Cervical pregnancy |
| E | Cervical papillomatosis |
| № | krok 2009 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A parturient complains about pain in the mammary gland. Palpation revealed a 3x4 cm large infiltration, soft in the centre. Body temperature is 38, 5° C. What is the most probable diagnosis? |
| Correct answer | Acute purulent mastitis |
| B | Pneumonia |
| C | Pleuritis |
| D | Retention of milk |
| E | E. Birth trauma |
| № | krok 2009, 2008, 2007 |
| Topic | Gynecological diseases in children and teenagers. Methods of contraception for teenagers. |

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| Task | A 14 year old girl complains of profuse bloody discharges from genital tracts during 10 days after suppression of menses for 1,5 month. Similiar bleedings recur since 12 years on the background of disordered menstrual cycle. On rectal examination: no pathology of the internal genitalia. In blood: Hb - 70 g/l, RBC-2, $3 \cdot 10^{12}/l$, Ht - 20. What is the most probable diagnosis? |
| Correct answer | Juvenile bleeding, posthemorrhagic anemia |
| B | Werlhof's disease |
| C | Polycyst ovarian syndrome |
| D | Hormonoproduktive ovary tumor |
| E | Incomplete spontaneous abortion |
| № | krok 2009 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | Immediately after delivery a woman had haemorrhage, blood loss exceeded postpartum haemorrhage rate and was progressing. There were no symptoms of placenta detachment. What tactics should be chosen? |
| Correct answer | Manual removal of placenta and afterbirth |
| B | Uterus tamponade |
| C | Instrumental revision of uterine cavity walls |
| D | Removal of afterbirth by Crede's method |
| E | Intravenous injection of methylergometrine with glucose |
| № | krok 2009 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 28 year old woman has bursti-ng pain in the lower abdomen during menstruation; chocolate-like discharges from vagina. It is known from the anamnesis that the patient suffers from chronic adnexitis. Bimanual examinati-on revealed a tumour-like formation of heterogenous consistency 7x7 cm large to the left from the uterus. The formati-on is restrictedly movable, painful when moved. What is the most probable di-agnosis? |
| Correct answer | Endometrioid cyst of the left ovary |
| B | Follicular cyst of the left ovary |
| C | Fibromatous node |
| D | Exacerbation of chronic adnexitis |
| E | Tumour of sigmoid colon |
| № | krok 2009 |

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| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A woman consulted a therapist about fatigability, significant weight loss, weakness, loss of appetite. She has had amenorrhea for 8 months. A year ago she born a full-term child. Haemorrhage during labour made up 2 l. She got blood and blood substitute transfusions. What is the most probable diagnosis? |
| Correct answer | Sheehan's syndrome |
| B | Stein-Leventhal syndrome |
| C | Shereshevsky-Turner's syndrome |
| D | Homological blood syndrome |
| E | Vegetovascular dystonia |
| № | krok 2009 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 26 year old woman complains about edemata, swelling and painfulness of mammary glands, headache, tearfulness, irritability. These signs turn up 5 days before menstruation and disappear after its start. What clinical syndrome is it? |
| Correct answer | Premenstrual syndrome |
| B | Postcastration syndrome |
| C | Adrenogenital syndrome |
| D | Climacteric syndrome |
| E | E. Stein-Leventhal syndrome |
| № | krok 2009 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A woman is 34 years old, it is her tenth labor at full term. It is known from the anamnesis that the labor started hours ago, labor was active, painful contractions started after discharge of waters and became continuous. Suddenly the parturient got knife-like pain in the lower abdomen and labor activity stopped. Examination revealed positive symptoms of peritoneum irritation, ill-defined uterus outlines. Fetus was easily palpable, movable. Fetal heartbeats wasn't auscultable. What is the most probable diagnosis? |
| Correct answer | Rupture of uterus |
| B | Uterine inertia |
| C | Discoordinated labor activity |
| D | Risk of uterus rupture |

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| E | II labor period |
| № | krok 2009 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 30 year old patient complains about inability to become pregnant over 3 years of married life. The patient is of supernutrition type, she has hair along the median abdominal line, on the internal thigh surface and in the peripapillary area. Menses started at the age of 16, they are infrequent and non-profuse. US revealed that the uterus was of normal size, ovaries were 4x5x5 cm large and had a lot of cystic inclusions. What is the most probable diagnosis? |
| Correct answer | Polycystic ovaries |
| B | Ovarian cystoma |
| C | Chronic oophoritis |
| D | Menstrual irregularity |
| E | Bilateral ovarian tumours |
| № | krok 2009 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A female patient consulted a doctor about gain in weight, chill, edemata, dry skin, sleepiness, problems with concentration. Objectively: the patient's height is 165 cm, weight is 90 kg, gynoid body proportions, t° - 35, $8^{\circ} C$, ESR-58/min, AP- 105/60 mm Hg. Heart sounds are weakened, bradycardia is present. Other internal organs have no changes. Thyroid gland is not palpable. Mammary glands ooze milk droplets. Hormonal study revealed rise of TSH and prolactin concentration, reduction of T_4 . What factor caused obesity? |
| Correct answer | Primary hypothyroidism |
| B | Secondary hypothyroidism |
| C | Prolactinoma |
| D | Hypopituitarism |
| E | Adiposogenital dystrophy |
| № | krok 2008 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | On the first day after labour a woman had the rise of temperature up to $39^{\circ} C$. Rupture of fetal membranes took place hours before labour. Examination of the bacterial flora of cervix of the uterus revealed hemocatheretic streptococcus of A group. The uterus body is soft, tender. Discharges are bloody, with admixtures of pus. Specify the most probable postnatal complication: |

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| Correct answer | Metroendometritis |
| B | Thrombophlebitis of veins of the pelvis |
| C | Infectious hematoma |
| D | Infective contamination of the urinary system |
| E | Apostasis of sutures after the episi-otomy |
| № | krok 2008, 2007 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | A woman in her 39th week of pregnancy, the second labour, has regular birth activity. Uterine contractions take place every 3 minutes. What criteria describe the beginning of the II labor stage the most precisely? |
| Correct answer | Cervical dilatation by no less than 4 cm |
| B | Cervical smoothing over 90% |
| C | Duration of uterine contractions over 30 seconds |
| D | Presenting part is in the lower region of small pelvis |
| E | Rupture of fetal bladder |
| № | krok 2008 |
| Topic | Surgical operations in gynecology. Preparation and postoperative care of gynaecological patients during emergency and planned operations. Prophylaxis of HIV-infecting. |
| Task | A 29 year old patient underwent surgical treatment because of the beni-gn serous epithelial tumour of an ovary. The postoperative period has elapsed wi-thout complications. What is it necessary to prescribe for the rehabilitational peri-od: |
| Correct answer | Hormonotherapy and proteolytic enzymes |
| B | Antibacterial therapy and adaptogens |
| C | Lasertherapy and enzymotherapy |
| D | Magnitotherapy and vitamin therapy |
| E | The patient does not require further care |
| № | krok 2008 |
| Topic | Early gestosis. Hypertensive conditions during pregnancy. Preeclampsia. Eclampsia. |
| Task | A primagravida with pregnancy of 37- weeks complains of headache, nausea, pain in epigastrium. Objective: the skin is acyanotic. Face is hydropic, there is short fibrillar twitching of blepharons, muscles of the face and the inferior extremities. The look is fixed. AP- 200/110 mm Hg; sphygmus of 92 bpm, intense. Respiration rate is 32/min. Heart activity is rhythmical. Appreciable edemata of the inferior extremities are present. Urine is cloudy. What medication should be administered? |
| Correct answer | Droperidolum of 0,25% - 2,0 ml |

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| B | Dibazolium of 1% - 6,0 ml |
| C | Papaverine hydrochloride of 2% - 4,0 ml |
| D | Hexenalum of 1% - 2,0 ml |
| E | Pentaminum of 5% - 4,0 ml |
| № | krok 2008, 2007 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia |
| Task | A 40 year old woman has changes of mammary gland. What are the most often symptoms that precede the malignization? |
| Correct answer | Skin induration with inverted nipple |
| B | Painful movable induration |
| C | Painless movable induration |
| D | Bloody discharges from the nipple |
| E | Pure discharges from the nipple |
| № | krok 2008 |
| Topic | Early gestosis. Hypertensive conditions during pregnancy. Preeclampsia. Eclampsia. |
| Task | An onset of severe preeclampsia at 16 weeks gestation might be caused by: |
| Correct answer | Hydatidiform mole |
| B | Anencephaly |
| C | Twin gestation |
| D | Maternal renal disease |
| E | Interventricular defect of the fetus |
| № | krok 2008 |
| Topic | Anomalies of the pelvic bone. Macrosomia in obstetrics. The disparity between the size of the fetal head and mother's pelvis. Anomalies of position of the fetus. Pelvic presentation of the fetus. |
| Task | A 34 year old woman in the 10th week of gestation (the second pregnancy) consulted a doctor of antenatal clinic in order to be registered there. In the previous pregnancy hydramnion was observed, the child's birth weight was 4086 g. What examination method should be applied in the first place? |
| Correct answer | The test for tolerance to glucose |
| B | Determination of the contents of fetoproteinum |
| C | Bacteriological examination of discharges from vagina |
| D | A cardiophonography of fetus |
| E | US of fetus |

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| № | krok 2008 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | A woman born a child. It was her fifth pregnancy but the first delivery. Mother's blood group is $A(II)Rh^-$, newborn's - $A(II)Rh^+$. The level of indirect bilirubin in umbilical blood was 58 micromole/l, hemoglobin - 140 g/l, RBC- $3,8 \cdot 10^{12}/l$. In 2 hours the level of indirect bilirubin turned micromole/l. The hemolytic disease of newborn (icteric-anemic type, Rh-incompatibility) was diagnosed. Choose the therapeutic tactics: |
| Correct answer | Replacement blood transfusion (conservative therapy) |
| B | Conservative therapy |
| C | Blood transfusion (conservative therapy) |
| D | Symptomatic therapy |
| E | E. Antibiotics |
| № | krok 2008 |
| Topic | Pregnancy and labor of women with extragenital diseases. Perinatal infections. Prophylaxis to prevent vertical HIV transmission. |
| Task | A pregnant woman may be diagnosed with hepatitis if it is confirmed by the presence of elevated: |
| Correct answer | SGOT (AST) |
| B | Sedimentation rates |
| C | WBCs |
| D | Alkaline phosphatase |
| E | BUN |
| № | krok 2008, 2007 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |
| Task | The highest risk of congenital anomalies probably occurs when human embryos or fetuses are exposed to ionizing radiation. At what stage of gestational period does it occur? |
| Correct answer | 18-45 days after conception |
| B | The first 7 days |
| C | 10-14 days after conception |
| D | 90-120 days after conception |
| E | The third trimester |
| № | krok 2008 |
| Topic | Female urogynecological inflammatory diseases. |

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| Task | A 40 year old patient complains of yellowish discharges from the vagina. Bimanual examination revealed no pathological changes. The smear contains Trichomonas vaginalis and blended flora. Colposcopy revealed two hazy fields on the frontal labium, with a negative Iodine test. Your tactics: |
| Correct answer | Treatment of specific colpitis and subsequent biopsy |
| B | Diathermocoagulation of the cervix of the uterus |
| C | Specific treatment of Trichomonas colpitis |
| D | Cervix ectomy |
| E | Cryolysis of cervix of the uterus |
| № | krok 2008 |
| Topic | Isoantigen incompatibility of the mother's and fetus's blood. Anomalies of development of fertilized ovum. |
| Task | A 28 year old woman had the second labour and born a girl with manifestati-ons of anemia and progressing jaundice. The child's weight was 3 400 g, the length was 52 cm. The woman's blood group is $B (III) Rh^-$, the father's blood group is $A (III) Rh^+$, the child's blood group is $B (III) Rh^+$. What is the cause of anemia? |
| Correct answer | Rhesus incompatibility |
| B | Antigen A incompatibility |
| C | Antigen B incompatibility |
| D | Antigen AB incompatibility |
| E | Intrauterine infection |
| № | krok 2008, 2007 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 13 year old girl consulted the school doctor on account of moderate bloody discharge from the genital tracts, which appeared 2 days ago. Secondary sexual characters are developed. What is the most probable cause of bloody di-scharge? |
| Correct answer | Menarche |
| B | Juvenile hemorrhage |
| C | Haemophilia |
| D | Endometrium cancer |
| E | Werlhof's disease |
| № | krok 2008 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |

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| Task | Internal obstetric examination of a parturient woman revealed that the sacrum hollow was totally occupied with fetus head, ischiadic spines couldn't be detected. Sagittal suture is in the straight diameter, occipital fontanel is directed towards symphysis. In what plane of small pelvis is the presenting part of the fetus? |
| Correct answer | Plane of pelvic outlet |
| B | Wide pelvic plane |
| C | Narrow pelvic plane |
| D | Plane of pelvic inlet |
| E | Over the pelvic inlet |
| № | krok 2008, 2007 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | After delivery and revision of placenta there was found the defect of placental lobule. General condition of woman is normal, uterus is firm, there is moderate bloody discharge. Speculum inspection of birth canal shows absence of lacerations and raptures. What action is necessary? |
| Correct answer | Manual exploration of the uterine cavity |
| B | External massage of uterus |
| C | Introduction of uterine contracting agents |
| D | Urine drainage, cold on the lower abdomen |
| E | Introduction of hemostatic medications |
| № | krok 2008 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 30 year old patient complains about inability to become pregnant over 3 years of married life. The patient is of supernutrition type, she has hair along the median abdominal line, on the internal thigh surface and in the peripapillary area. Menses started at the age of 16, they are infrequent and non-profuse. US revealed that the uterus was of normal size, ovaries were 4x5x5 cm large and had a lot of cystic inclusions. What is the most probable di-agnosis? |
| Correct answer | Polycystic ovaries |
| B | Ovarian cystoma |
| C | Chronic oophoritis |
| D | Menstrual irregularity |
| E | Bilateral ovarian tumours |

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| № | krok 2007 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A 32 y.o. woman consulted a gynecologist about having abundant long menses within 3 months. Bimanual investigation: the body of the uterus is enlarged according to about 12 weeks of pregnancy, distorted, tuberos, of dense consistence. Appendages are not palpated. Histological test of the uterus body mucosa: adenocystous hyperplasia of endometrium. Optimal medical tactics: |
| Correct answer | Surgical treatment |
| B | B.Hormonotherapy |
| C | C. Phytotherapy |
| D | D Radial therapy |
| E | E. Phase by phase vitamin therapy |
| № | krok 2007 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A woman was hospitalised with full-term pregnancy. In survey: the uterus is morbid, the abdomen is tense, heart sounds of the fetus are not auscultated. What is the most probable complication of pregnancy? |
| Correct answer | Premature detachment of the normally posed placenta |
| B | Preterm labour |
| C | Back occipital presentation |
| D | Acute hypoxia of a fetus |
| E | E. Hydramnion |
| № | krok 2007 |
| Topic | Placental dysfunction, hypotrophy of the fetus, fetal distress symptoms. |
| Task | By the end of the 1st period of physiological labour the clear amniotic waters went out. Contractions lasted 35-40 sec every 4-5 min. Palpitation of the fetus is 100 bpm. The AP is 140/90 mm Hg. Di-agnosis: |
| Correct answer | Acute hypoxia of the fetus |
| B | Labors before term |
| C | Premature detachment of normally posed placenta |
| D | Back occipital presentation |
| E | E. Hydramnion |
| № | krok 2007 |
| Topic | The physiology of pregnancy, labor and postpartum period. Perinatal protection of fetus. Pharmacotherapy in obstetrics. |

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| Task | Which gestational age gives the most accurate estimation of weeks of pregnancy by uterine size? |
| Correct answer | Less than 12 weeks |
| B | Between 12 and 20 weeks |
| C | Between 21 and 30 weeks |
| D | Between 31 and 40 weeks |
| E | Over 40 weeks |
| № | krok 2007 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A 34 y.o. woman in her 29-th week of pregnancy, that is her 4-th labor to come, was admitted to the obstetric department with complaints of sudden and painful bloody discharges from vagina that appeared 2 hours ago. The discharges are profuse and contain clots. Cardiac function of the fetus is rhythmic, strokes in the minute, uterus tone is normal. The most probable provisional diagnosis will be: |
| Correct answer | Placental presentation |
| B | Detachment of normally located placenta |
| C | Vasa previa |
| D | Bloody discharges |
| E | Disseminated intravascular coagulation syndrome |
| № | krok 2007 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 40 weeks pregnant woman in intrinsic obstetric investigation: the cervix of a uterus is undeveloped. The oxytocin test is negative. Upon inspection at 32 weeks it is revealed: AP- 140/90 mm Hg, proteinuria 1 g/l, peripheral edemata. Reflexes are normal. Choose the most correct tactics of guiding the pregnant: |
| Correct answer | Laborstimulation after preparation |
| B | Strict bed regimen for 1 month |
| C | Complex therapy of gestosis for 2 days |
| D | Cesarean section immediately |
| E | Complex therapy of gestosis for 7 days |
| № | krok 2007 |
| Topic | Female urogynecological inflammatory diseases. |

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| Task | A woman had the rise of temperature up to 39 ⁰ on the first day after labour. The rupture of fetal membranes took place 36 hours before labour. The investigation of the bacterial flora of cervix of the uterus revealed hemocatheretic streptococcus of group A. The uterus body is soft, tender. Discharges are bloody, mixed with pus. Specify the most probable postnatal complication: |
| Correct answer | Metroendometritis |
| B | Thrombophlebitis of pelvic veins |
| C | Infected hematoma |
| D | Infection of the urinary system |
| E | Apostatis of junctures after the episiotomy |
| № | krok 2007 |
| Topic | Obstetrical bleedings during pregnancy, during labor and in the postnatal period. Hemorrhagic shock. DIC - syndrome. Intensive therapy and resuscitation during bleeding in obstetrics. |
| Task | A 24 y.o. patient 13 months after the first labour consulted a doctor about amenorrhea. Pregnancy has concluded by a Cesarean section concerning to a premature detachment of normally posed placenta hemorrhage has made low fi-delity 2000 ml owing to breakdown of coagulability of blood. Choose the most suitable investigation: |
| Correct answer | Determination of the level of Gonadotropins |
| B | USI of organs of a small pelvis |
| C | Progesteron assay |
| D | Computer tomography of the head |
| E | Determination of the contents of Testosteron-Depotum in Serum of blood |
| № | krok 2007 |
| Topic | Anomalies of the pelvic bone. Macrosomia in obstetrics. The disparity between the size of the fetal head and mother`s pelvis. Anomalies of position of the fetus. Pelvic presentation of the fetus. A 34 y.o. woman in the 10-th week of gestation (the second pregnancy) consulted a doctor of antenatal clinic with purpose of statement on the dyspensary record. In the previous pregnancy there took place hydramnion, the child`s birth weight was 4086. What method of exami-nation is necessary for carrying out, first of all? |
| Task | The test for tolerance to glucose |
| Correct answer | Determiration of the contents of fetoproteinum |
| B | Bacteriological investigation of di-scharge from the vagina |
| C | A cardiophonography of fetus |
| D | USI of the fetus |
| E | |

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| № | krok 2007 |
| Topic | Female urogynecological inflammatory diseases. |
| Task | A 40 y.o. patient complains of yellowish discharges from the vagina. Bimanual examination: no pathological changes. The smear contains Trichomonas vaginalis and blended flora. Colposcopy: two hazy fields on the front labium, with a negative Iodum test. Your tactics: |
| Correct answer | Treatment of specific colpitis and with the subsequent biopsy |
| B | Diathermocoagulation of the cervix of the uterus |
| C | Specific treatment of Trichomonas colpitis |
| D | Cervix ectomy |
| E | Cryolysis of cervix of the uterus |
| № | krok 2007 |
| Topic | Surgical operations in gynecology. Preparation and postoperative care of gynaecological patients during emergency and planned operations. Prophylaxis of HIV-infecting. |
| Task | Laparotomy was performed to a 54 y.o. woman on account of big formation in pelvis that turned out to be one-sided ovarian tumor along with considerable omental metastases. The most appropriate intraoperative tactics involves: |
| Correct answer | Ablation of omentum, uterus and both ovaries with tubes |
| B | Biopsy of omentum |
| C | Biopsy of an ovary |
| D | Ablation of an ovary and omental metastases |
| E | Ablation of omentum and both ovaries with tubes |
| № | krok 2007 |
| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 43 y.o. woman complains of contact hemorrhages during the last 6 months. Bi-manual examination: cervix of the uterus is enlarged, its mobility is reduced. Mirrors showed the following: cervix of the uterus is in the form of cauliflower. Chrobak and Schiller tests are positive. What is the most probable diagnosis? |
| Correct answer | Cancer of cervix of the uterus |
| B | Polypus of the cervix of the uterus |
| C | Cervical pregnancy |
| D | Nascent fibroid |
| E | Leukoplakia |
| № | krok 2007 |

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| Topic | Precancerous diseases of the female genitalia. Malignant tumors of the genitalia. |
| Task | A 43 y.o. woman complains of contact hemorrhages during the last 6 months. Bi-manual examination: cervix of the uterus is enlarged, its mobility is reduced. Mirrors showed the following: cervix of the uterus is in the form of cauliflower. Chrobak and Schiller tests are positive. What is the most probable diagnosis? |
| Correct answer | A. Cancer of cervix of the uterus |
| B | B. Polypus of the cervix of the uterus |
| C | C. Cervical pregnancy |
| D | D. Nascent fibroid |
| E | E. Leukoplakia |
| № | krok 2007 |
| Topic | Benign tumors of the female genitalia. Dishormonal diseases of breasts. Endometriosis. |
| Task | A patient was admitted to the hospital with complaints of periodical pain in the lower part of abdomen that gets worse during menses, weakness, malaise, nervousness, dark bloody smears from vagina directly before and after menses. Bimanual examination revealed that uterus body is enlarged, appendages cannot be palpated, posterior fornix has tuberos surface. Laparoscopy revealed: ovaries, peritoneum of rectouterine pouch and pararectal fat have "cyanotic eyes". What is the most probable diagnosis? |
| Correct answer | Disseminated form of endometriosis |
| B | B. Polycystic ovaries |
| C | C. Chronic salpingitis |
| D | D. Tuberculosis of genital organs |
| E | E. Ovarian cystoma |
| № | krok 2007 |
| Topic | Operative obstetrics. |
| Task | A 30 y.o. primigravida woman has got intensive labor pain every 1-2 minutes that lasts 50 seconds. The disengagement has started. The perineum with the height of 4 cm has grown pale. What actions are necessary in this situation? |
| Correct answer | Episiotomy |
| B | B. Perineum protection |
| C | C. Perineotomy |
| D | D. Vacuum extraction of fetus |
| E | E. Expectant management |
| № | krok 2007 |
| Topic | Operative obstetrics. |

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| Task | A 30 y.o. woman has the 2-nd labour that has been lasting for 14 hours. Hearbeat of fetus is muffled, arrhythmic, 100/min. Vaginal examination: cervix of uterus is completely opened, fetus head is level with outlet from small pelvis. Saggital suture is in the straight diameter, small crown is near symphysis. What is the further tactics of handling the delivery? |
| Correct answer | Use of obstetrical forceps |
| B | Stimulation of labour activity by oxytocin |
| C | Cesarean section |
| D | Cranio-cutaneous (Ivanov's) forceps |
| E | Use of cavity forceps |
| № | krok 2007 |
| Topic | Disorders of the menstrual function in reproductive age. Neuroendocrine syndromes in gynecology. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 20 y.o. patient complains of amenorrhea. Objectively: hirsutism, obesity with fat tissue prevailing on the face, neck, upper part of body. On the face there are <i>acne vulgaris</i> , on the skin - striae cutis distense. Psychological and intellectual development is normal. Gynecological condition: external geni-tals are moderately hairy, acute vaginal and uterine hypoplasia. What diagnosis is the most probable? |
| Correct answer | Itsenko-Cushing syndrome |
| B | Turner's syndrome |
| C | Stein-Levental's syndrome |
| D | Shichan's syndrome |
| E | E. Babinski-Froehlich syndrome |
| № | krok 2007 |
| Topic | Urgent conditions in gynecology. |
| Task | A 22 y.o. patient complains of having boring pain in the right iliac region for one week, morning sickness, taste change. Delay of menstruation is 3 weeks. Objecti-vely: AP- 110/70 mm Hg, Ps- 78/min, t^0 - 0^0 . Bimanual examination revealed that uterus is a little enlarged, soft, movable, painless. Appendages palpation: a painful formation 3x4 cm large on the right, it is dense and elastic, moderately movable. What is the most probable diagnosis? |
| Correct answer | Progressing tubal pregnancy |
| B | Interrupted tubal pregnancy |
| C | Cyst of the right ovary |
| D | Uterine pregnancy |
| E | Acute appendicitis |

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| № | krok 2007 |
| Topic | Anomalies of the contraction activity of the uterus. Birth and maternal traumatism. Modern approaches to diagnostics and treatment of birth and maternal trauma. |
| Task | A 30 y.o. parturient woman was taken to the maternity house with complaints of having acute, regular labour pains that last 25-30 seconds every 1,5-2 minutes. Labour activity began 6 hours ago. Uterus is in higher tonus, head of the fetus is above the opening into the small pelvis. Fetal heartbeat is 136/min. P.V: cervical dilatation is 4 cm, uterine fauces is spasming at a height of parodynia. Head is level with opening into the small pelvis, it is being pushed off. What is the most probable diagnosis? |
| Correct answer | Discoordinated labour activity |
| B | Secondary powerless labour activity |
| C | Pathological preliminary period |
| D | Primary powerless labour activity |
| E | Normal labour activity |
| № | krok 2007 |
| Topic | Premature breaking of pregnancy. Prolonged pregnancy. Multi-fetal (multiple) pregnancy. |
| Task | A primigravida woman appealed to the antenatal clinic on the 22.03.03 with complaints of boring pain in the lower part of abdomen. Anamnesis registered that her last menstruation was on the 01.03. Bimanual examination revealed that uterine cervix is intact, external fauces is closed, uterus is enlarged up to the 9-th week of pregnancy, movable, painless. What complication can be suspected? |
| Correct answer | Risk of abortion in the 9-th week of pregnancy |
| B | Abortion that started in the 9-th week of pregnancy |
| C | Hysteromyoma |
| D | Vesicular mole |
| E | - |
| № | krok 2007 |
| Topic | Infertile marriage. |
| Task | A 33 y.o. woman survived two operations on account of extrauterine pregnancy, both uterine tubes were removed. She consulted a doctor with a question about possibility of having a child. What can be advised in this case? |
| Correct answer | Extracorporal fertilization |
| B | Insemination with her husband's semen |
| C | Substitutional maternity |
| D | Artificial fertilization with donor's semen |
| E | E. Induction of ovulation |

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| № | krok 2018 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. |
| Task | An infant has been born at the 41st week of gestation. The pregnancy was complicated with severe gestosis of the second semester. The weight of the baby is 2300 g, the height is 49 cm. Objectively: the skin is flabby, the layer of subcutaneous fat is thin, hypomyotonia, neonatal reflexes are weak. The internal organs are without pathologic changes. This newborn can be assessed as a: |
| Correct answer | Full-term infant with intrauterine growth retardation |
| B | Premature infant |
| C | Immature infant |
| D | Postmature infant |
| E | Full-term infant with normal body weight |
| № | krok 2018 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | The pregnancy is full term. The body weight of the parturient woman is 62 kg. Fetus is in a longitudinal lie, the head is engaged to the pelvic inlet. Belly circumference is 100 cm. Uterine fundus height is 35 cm. What body weight of the fetus can be expected? |
| Correct answer | 3.5 kg |
| B | 4 kg |
| C | 2.5 kg |
| D | 3 kg |
| E | 4.5 kg |
| № | krok 2018 |
| Topic | ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. MODERN APPROACHES TO DIAGNOSTICS AND TREATMENT OF BIRTH AND MATERNAL TRAUMA. |
| Task | The right arm of a newborn is stretched along the torso with all its joints extended; the shoulder is rotated inwards, while the forearm is pronated, the hand is in the position of palmar flexion. Spontaneous movements are absent in the shoulder and elbow joints, passive movements are painless. What is the most likely diagnosis? |
| Correct answer | Duchenne-Erb palsy, superior proximal type |
| B | Dejerine-Klumpke palsy, inferior distal type |
| C | Total obstetric palsy |
| D | Osteomyelitis of the right humerus |
| E | Poliomyelitis |

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| № | krok 2018 |
| Topic | ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. MODERN APPROACHES TO DIAGNOSTICS AND TREATMENT OF BIRTH AND MATERNAL TRAUMA. |
| Task | A 22-year-old woman, gravida 1, para 0 arrived with complaints of sharply painful contractions that occur every 4-5 minutes and last for 25-30 seconds. Amniotic fluid did not burst. The fetus is in transverse lie, fetal heartbeats are not affected. Contraction ring is acutely painful, located obliquely at the umbilicus. What is the most likely diagnosis? |
| Correct answer | Impending uterine rupture |
| B | Uterine tetany |
| C | Excessive uterine activity during labor |
| D | Discoordinated labor |
| E | Uterine rupture |
| № | krok 2018 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A 16-year-old girl has primary amenorrhea, no pubic hair growth, normally developed mammary glands; her genotype is 46 XY; uterus and vagina are absent. What is your diagnosis? |
| Correct answer | Testicular feminization syndrome |
| B | Mayer-Rokitansky-Kuster-Hauser syndrome |
| C | Cushing syndrome |
| D | Sheehan syndrome |
| E | Cushing disease |
| № | krok 2018 |
| Topic | ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. MODERN APPROACHES TO DIAGNOSTICS AND TREATMENT OF BIRTH AND MATERNAL TRAUMA. |
| Task | 6 hours ago the waters of a 30-year-old gravida 1, para 0, burst; her preliminary period was pathologic and lasted for over 2 days; the term of pregnancy is 39 weeks. No labor activity is observed. Fetal head presents above the pelvic inlet. Fetal heartbeats are 142/min., clear and rhythmic. On vaginal examination the uterine cervix is not dilated. What further tactics should the doctor choose? |
| Correct answer | Perform cesarean section |
| B | Induce cervical dilation with prostaglandins |
| C | Stimulate the labor with oxytocin |
| D | Wait for the onset of spontaneous labor |

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| E | Prolong the pregnancy, while providing antibacterial treatment |
| № | krok 2018 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A newborn has Apgar score of 9. When should the infant be put to the breast? |
| Correct answer | In the delivery room |
| B | After 12 hours |
| C | After 2 hours |
| D | On the 2nd day |
| E | On the 3rd day |
| № | krok 2018 |
| Topic | URGENT CONDITIONS IN GYNECOLOGY. |
| Task | A 23-year-old woman came the the gynecologist with complaints of blood smears from her genital tracts that have been observed for a long time. Her menstruation has been delayed for 8 weeks. Examination shows the uterine body to be enlarged up to 14 weeks of pregnancy. US detected a vesicular mole. What tactics should the doctor choose? |
| Correct answer | Curettage of the uterine cavity |
| B | Hormonal treatment |
| C | Hemostatic treatment |
| D | Supravaginal uterine amputation |
| E | Uterectomy |
| № | krok 2018 |
| Topic | URGENT CONDITIONS IN GYNECOLOGY. |
| Task | The gynecology unit received a patient with uterine bleeding that started 6 hours after induced abortion at the term of 11-12 weeks. Objectively the skin is pale, pulse is 100/min., blood pressure is 100/70 mm Hg. On vaginal examination the uterus is painless, its enlargement corresponds to the 10th week of pregnancy; uterine cervix is dilated enough to let in one finger, there are fragments of the fertilized ovum. What actions should be taken next: |
| Correct answer | Urgent repeated curettage of the uterine cavity |
| B | Uterotonic drugs |
| C | Treatment for acute anemia |
| D | Antibacterial agents |
| E | Prescribe rest and continue to monitor the patient's condition |

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| № | krok 2018 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A woman came to the general practitioner with complaints of fatigability, significant weight loss, weakness, and loss of appetite. She has been presenting with amenorrhea for the last 8 month. One year ago she gave birth to a live full-term child. Blood loss during delivery was 2 liters. The woman received blood transfusion and blood components. What is the most likely diagnosis? |
| Correct answer | Sheehan's syndrome (postpartum hypopituitarism) |
| B | Stein-Leventhal syndrome (polycystic ovary) |
| C | Turner's syndrome |
| D | Homologous blood syndrome |
| E | Somatoform autonomic dysfunction |
| № | krok 2018 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 22-year-old woman complains of itching and profuse discharge from her genital tracts. The condition developed 10 days ago after a sexual contact. Bacterioscopy of a discharge sample detected trichomonads. What drug should be prescribed for treatment in this case? |
| Correct answer | Metronidazole |
| B | Ampicillin |
| C | Erythromycin |
| D | Zovirax (Acyclovir) |
| E | Valcyclovir |
| № | krok 2018 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A woman with blood group B(III) Rh(+) gave birth to a full-term healthy boy. Examination on the 3rd day of the infant's life shows him to have icteric tint to his skin. The child has no problems with suckling, sleep is nondisturbed. The abdomen is soft, the liver protrudes by 2 cm from under the costal margin. Complete blood count: hemoglobin -200 g/L , erythrocytes - $5.5 \cdot 10^{12}/L$, total bilirubin - 62 mcmmol/L, indirect bilirubin - 52 mcmmol/L. What condition can be suspected? |
| Correct answer | Physiologic jaundice |
| B | Congenital hepatitis |
| C | Hemolytic disease of the newborn due to Rh incompatibility |

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| D | Biliary atresia |
| E | Hemolytic disease of the newborn due to ABO incompatibility |
| № | krok 2018 |
| Topic | EARLY GESTOSIS. HYPERTENSIVE CONDITIONS DURING PREGNANCY. PREECLAMPSIA. ECLAMPSIA. |
| Task | A multigravida on the 38th week of her pregnancy complains of increased BP up to 140/90 mm Hg, edema of the shins for 3 weeks. In the last month she gained 4 kg of weight. Urine analysis: protein - 0.03 g/L. Make the diagnosis: |
| Correct answer | Mild preeclampsia |
| B | Moderate preeclampsia |
| C | Pregnancy hypertension |
| D | Severe preeclampsia |
| E | Pregnancy edema |
| № | krok 2018 |
| Topic | GYNECOLOGICAL DISEASES IN CHILDREN AND TEENAGERS. METHODS OF CONTRACEPTION FOR TEENAGERS. |
| Task | A 15-year-old adolescent girl came the gynecologist with complaints of painful menstruations that are accompanied by nausea, vomiting, and dizziness. Her menarche was at 12. Menstruations became painful since she was 14, remain regular. What treatment should be prescribed in this case? |
| Correct answer | Analgesics, antispasmodics, antiprostaglandine therapy |
| B | Antiinflammatory treatment only |
| C | Antihemorrhagic agents |
| D | Antiandrogen therapy |
| E | Vitamin supplements |
| № | krok 2018 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A 20-year-old woman, gravida 2, para 1 has been in labor for 4 hours. Her condition is satisfactory. Moderately painful contractions occur every 3 minutes and last for 35-40 seconds. The waters have not burst yet. The fetus is in longitudinal position. Fetal heartbeats are 136/min., clear and rhythmic. Major segment of the fetal head is engaged to the pelvic inlet. Vaginal examination shows smooth cervix of 6 cm, amniotic sac is intact, sagittal suture is in the left oblique diameter, occipital fontanel is on the right near the symphysis pubis. What stage of the labor is it? |
| Correct answer | Active phase of the first stage of normal labor |

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| B | Latent phase of the first stage of normal labor |
| C | The second stage of normal labor |
| D | Precursors of childbirth |
| E | Preliminary stage |
| № | krok 2018 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | It is the 3rd day after the normal term labor; the infant is rooming in with the mother and is on breastfeeding. Objectively: the mother's general condition is satisfactory. Temperature is 36.4°C, heart rate is 80/min., BP is 120/80 mm Hg. Mammary glands are soft and painless; lactation is moderate, unrestricted milk flow. The uterus is dense, the uterine fundus is located by 3 fingers width below the navel. Lochia are sanguinoserous, moderate in volume. Assess the dynamics of uterine involution: |
| Correct answer | Physiological involution |
| B | Subinvolution |
| C | Lochiometra |
| D | Pathologic involution |
| E | Hematometra |
| № | krok 2018 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. Physiological and pathological conditions in the perimenopausal period. |
| Task | A 24-year-old woman complains of milk discharge from her breasts and no menstruation for the last 3 months. One physiologic childbirth was 2 years ago. There are no maldevelopments of mammary glands. Bimanual examination revealed diminished uterus and normal sized ovaries. MRI-scan shows no brain pathologies. Thyroidstimulating hormone is within normal limits. Serum prolactin is high. What is the most likely diagnosis? |
| Correct answer | Hyperprolactinemia |
| B | Hypothyroidism |
| C | Polycystic ovaries |
| D | Pituitary adenoma |
| E | Sheehan's syndrome (postpartum hypopituitarism) |
| № | krok 2018 |
| Topic | BENIGN TUMORS OF THE FEMALE GENITALIA. DISHORMONAL DISEASES OF BREASTS. ENDOMETRIOSIS. |

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| Task | A 25-year-old woman during self-examination detected a tumor in the upper external quadrant of her right mammary gland. On palpation: painless, dense, mobile growth 2 cm in diameter is detected in the mammary gland; no changes in the peripheral lymph nodes are observed. On US of the mammary glands: in the upper external quadrant of the right mammary gland there is a spaceoccupying lesion of increased echogenicity 21x18 mm in size. The most likely diagnosis is: |
| Correct answer | Fibrous adenoma |
| B | Breast cyst |
| C | Diffuse mastopathy |
| D | Breast cancer |
| E | Mastitis |
| № | krok 2018 |
| Topic | BENIGN TUMORS OF THE FEMALE GENITALIA. DISHORMONAL DISEASES OF BREASTS. ENDOMETRIOSIS. |
| Task | A 45-year-old woman came to the maternity clinic with complaints of periodical pains in her mammary glands that start 1 day before menstruation and stop after the menstruation begins. Palpation of the mammary glands detects diffuse nodes predominantly in the upper outer quadrants. What is the most likely diagnosis? |
| Correct answer | Fibrocystic mastopathy |
| B | Breast cancer |
| C | Mastitis |
| D | Hyperprolactinemia |
| E | Breast cyst |
| № | krok 2018 |
| Topic | URGENT CONDITIONS IN GYNECOLOGY. |
| Task | A woman complains of temperature increase up to 39° C, sharp pains in her lower abdomen, and sanguinopurulent discharge from her genital tracts. From her case history it is known that 6 days ago she underwent illegal abortion. Objectively her blood pressure is 100/60 mm Hg, pulse is 110/min. Abdominal rigidity, rebound tenderness (Bloomberg's sign), and painful palpation of the lower abdomen are observed. On bimanual examination the uterus is enlarged up to 7 weeks of pregnancy, painful, and soft; posterior vaginal fornix overhangs. Make the diagnosis: |
| Correct answer | Pelvipерitonitis |
| B | Endometritis |
| C | Acute adnexitis |
| D | Pyosalpinx |
| E | Metroendometritis |

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| № | krok 2018 |
| Topic | PRECANCEROUS DISEASES OF THE FEMALE GENITALIA. MALIGNANT TUMORS OF THE GENITALIA. |
| Task | A 55-year-old woman came to a gynecologist with complaints of leukorrhoea and bloody discharge from the vagina after 5 years of menopause. Anamnesis states no pregnancies. Bimanual examination: the uterus and uterine appendages are without changes. During diagnostic curettage of the uterine cavity the physician scraped off encephaloid matter. What is the most likely diagnosis in this case? |
| Correct answer | Endometrial carcinoma |
| B | Adenomyosis |
| C | Subserous uterine myoma |
| D | Cervical carcinoma |
| E | Ovarian carcinoma |
| № | krok 2018 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. |
| Task | A 24-year-old pregnant woman on her 36th week of pregnancy has been delivered to a maternity obstetric service with complaints of weak fetal movements. Fetal heartbeats are 90/min. On vaginal examination the uterine cervix is tilted backwards, 2.5 cm long, external orifice allows inserting a fingertip. Biophysical profile of the fetus equals 3 points. What tactics of pregnancy management should be chosen? |
| Correct answer | Urgent delivery via cesarean section |
| B | Treatment of placental dysfunction and repeated analysis of the fetal biophysical profile on the next day |
| C | Doppler measurement of blood velocity in the umbilical artery |
| D | Urgent preparation of the uterine cervix for delivery |
| E | Treatment of fetal distress, if ineffective, then elective cesarean section on the next day |
| № | krok 2018 |
| Topic | POSTNATAL SEPTIC DISEASES. |
| Task | A postparturient woman, who has been breastfeeding for 3 weeks, made an appointment with the doctor. For the last 6 days she has been feeling unwell, complains of body temperature of 38-39°C, general weakness; within the last 2 days she developed pain and redness in the area of her right mammary gland. Examination revealed her mammary gland to be significantly enlarged and deformed; breast tissue fluctuations and lymphadenitis are observed. What type of mastitis is the most likely? |
| Correct answer | Phlegmonous mastitis |
| B | Serous mastitis |
| C | Infiltrative mastitis |
| D | Lactostasis |

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| E | Mammary edema |
| № | krok 2018 |
| Topic | POSTNATAL SEPTIC DISEASES. |
| Task | On the 9th day after childbirth the obstetric patient developed high fever up to 38°C. She complains of pain in the right mammary gland. The examination revealed the following: a sharply painful infiltrate can be palpated in the right mammary gland, the skin over the infiltrate is red, subareolar area and nipple are swollen and painful. What is your diagnosis? |
| Correct answer | Abscess of the right mammary gland |
| B | Mastopathy |
| C | Cancer of the right mammary gland |
| D | Serous mastitis |
| E | Fibrous cystic degeneration of the right mammary gland |
| № | krok 2018 |
| Topic | GYNECOLOGICAL DISEASES IN CHILDREN AND TEENAGERS. METHODS OF CONTRACEPTION FOR TEENAGERS. |
| Task | A 17-year-old girl has made an appointment with the doctor. She plans to begin her sex life. No signs of gynecological pathology were detected. In the family history there was a case of cervical cancer that occurred to the patient's grandmother. The patient was consulted about the maintenance of her reproductive health. What recommendation will be the most helpful for prevention of invasive cervical cancer? |
| Correct answer | Vaccination against human papillomavirus (HPV) |
| B | Vitamins, calcium, omega-3 |
| C | Immunomodulators |
| D | Antiviral and antibacterial drugs |
| E | Timely treatment of sexually transmitted diseases |
| № | krok 2019 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 30-year-old woman came to the gynecological department. She complains of sharp pain in her lower abdomen and temperature of 38.8 C. She has a history of extramarital sexual activity and 2 artificial abortions. On gynecological examination: the uterus is unchanged. The appendages are bilaterally enlarged and painful. Profuse purulent discharge is being produced from the vagina. What examination needs to be conducted to clarify the diagnosis? |
| Correct answer | Bacteriological and bacterioscopic analysis |
| B | Laparoscopy |

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| C | Colposcopy |
| D | Hysteroscopy |
| E | Curettage of the uterine cavity |
| № | krok 2019 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A newborn has Apgar score of 8. When should this infant be put to the breast? |
| Correct answer | In the delivery room |
| B | On the 3rd day |
| C | On the 2nd day |
| D | After 2 hours |
| E | After 12 hours |
| № | krok 2019 |
| Topic | GYNECOLOGICAL DISEASES IN CHILDREN AND TEENAGERS. METHODS OF CONTRACEPTION FOR TEENAGERS. |
| Task | A 14-year-old girl came to the general practitioner with complaints of weakness, loss of appetite, headache, rapid fatigability. Her last menstruation was profuse and lasted for 14 days after the previous delay of 2 months. Objectively: the skin is pale, heart rate is 90/min., BP is 110/70 mmHg. Hb is 88 g/L. Rectal examination: the uterus and its appendages are without changes, no discharge from the genital tracts. What complication occurred in the patient? |
| Correct answer | Posthemorrhagic anemia |
| B | Dysmenorrhea |
| C | Somatoform autonomic dysfunction of hypotonic type |
| D | Migraine |
| E | Gastritis |
| № | krok 2019 |
| Topic | ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. MODERN APPROACHES TO DIAGNOSTICS AND TREATMENT OF BIRTH AND MATERNAL TRAUMA. |
| Task | A 30-year-old multigravida has been in labour for 18 hours. Two hours ago the pushing stage began. Fetal heart rate is clear, rhythmic, 136/min. Vaginal examination reveals complete cervical dilatation, the fetal head in the pelvic outlet plane. Sagittal suture is in direct diameter, the occipital fontanel is near the pubis. The patient has been diagnosed with primary uterine inertia. What is the further tactics of labor management? |

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| Correct answer | Vacuum extraction of the fetus |
| B | Labour stimulation |
| C | Outlet forceps |
| D | Cesarean section |
| E | Skin-head Ivanov's forceps |
| № | krok 2019 |
| Topic | OBSTETRICAL BLEEDINGS DURING PREGNANCY, DURING LABOR AND IN THE POSTNATAL PERIOD. HEMORRAGIC SHOCK. DIC - SYNDROME. INTENSIVE THERAPY AND RESUSCITATION DURING BLEEDING IN OBSTETRICS. |
| Task | A 25-year-old woman was brought into the gynecological department with profuse bloody discharge from her genital tracts. She is 12 weeks pregnant, the pregnancy is planned. Within the last 3 days she was experiencing pains in her lower abdomen that eventually started resembling cramps, she developed bleeding. Her skin is pale, pulse - 88/min., blood pressure - 100/60 mm Hg, body temperature - 36.8°C. Vaginal examination: the uterus size corresponds with 11 weeks of pregnancy, the cervical canal allows inserting 1 finger and contains fragments of the fertilized ovum, the discharge is bloody and profuse. What is the most likely diagnosis? |
| Correct answer | 12-week pregnancy, spontaneous abortion in progress |
| B | Full-term pregnancy, term labor |
| C | 12-week pregnanc, threatened spontaneous abortion |
| D | Disturbed menstrual cycle, amenorrhea |
| E | Disturbed menstrual cycle, hyperpolymenorrhea |
| № | krok 2019 |
| Topic | PREGNANCY AND LABOR OF WOMEN WITH EXTRAGENITAL DISEASES. PERINATAL INFECTIONS. PROPHYLAXIS TO PREVENT VERTICAL HIV TRANSMISSION. |
| Task | A woman with the pregnancy term of 8 weeks complains of elevated temperature up to 37.6°C, skin rash that can be characterized as macular exanthema, enlargement of posterior cervical and occipital lymph nodes. Small amount of bloody discharge from the genital tracts. She was examined by the infectious diseases specialist and diagnosed with acute rubella. What tactics should the obstetrician-gyneecologist choose? |
| Correct answer | Abortion |
| B | Treatment of incipient abortion |
| C | Prescription of hemostatic therapy |
| D | Prescription of antibacterial therapy |
| E | Prescription of antiviral therapy |

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| № | krok 2019 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. |
| Task | A 24-year-old pregnant woman on her 38 th week of pregnancy has been brought to the maternity obstetric service with complaints of weak fetal movements. Fetal heartbeats are 90/min. On vaginal examination the uterine cervix is tilted backwards, 2 cm long, external orifice allows inserting a fingertip. Biophysical profile of the fetus equals 3 points. What tactics of pregnancy management should be chosen? |
| Correct answer | Urgent delivery via a cesarean section |
| B | Urgent preparation of the uterine cervix for delivery |
| C | Doppler measurement of blood velocity in the umbilical artery |
| D | Treatment of placental dysfunction and repeated analysis of the fetal biophysical profile on the next day |
| E | Treatment of fetal distress; if ineffective, then elective cesarean section on the next day' |
| № | krok 2019 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A 48-year-old woman complains of disturbed menstrual cycle: her periods last for 7-9 days and are excessively profuse throughout the last half-year. She notes occasional hot flashes in her head, insomnia, irritability and headaches. Her skin is of normal color. Blood pressure - 150/90 mmHg, pulse - 90/min., rhythmic. The abdomen is soft and painless. Bimanual examination shows no uterine enlargement, the appendages cannot be detected. The vaginal fornices are free. What is the most likely diagnosis? |
| Correct answer | Climacteric syndrome |
| B | Stein-Leventhal syndrome (polycystic ovary syndrome) |
| C | Adrenogenital syndrome |
| D | Premenstrual syndrome |
| E | Uterine myoma |
| № | krok 2019 |
| Topic | PRECANCEROUS DISEASES OF THE FEMALE GENITALIA. MALIGNANT TUMORS OF THE GENITALIA. |
| Task | A 58-year-old woman came to the gynecological clinic. She complains of bloody discharge from her genital tracts. Menopause is 8 years. Gynecological examination: the uterus is slightly enlarged, dense to touch, with limited mobility; the uterine appendages cannot be detected; parametrium is free. Fractional curettage of the uterine cavity yields a significant amount of medullary substance in the scrape. What is the most likely diagnosis? |
| Correct answer | Uterine corpus cancer |
| B | Adenomyosis |

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| C | Chorioepithelioma |
| D | Hormone-producing ovarian tumor |
| E | Uterine cervix cancer |
| № | krok 2019 |
| Topic | PREMATURE BREAKING OF PREGNANCY. PROLONGED PREGNANCY. MULTI-FETAL (MULTIPLE) PREGNANCY. |
| Task | A pregnant woman is 28 years old. Anamnesis: accelerated labor complicated by the II degree cervical rupture. The following two pregnancies resulted in spontaneous abortions at the terms of 12 and 14 weeks. On speculum examination: the uterine cervix is scarred from previous ruptures at 9 and 3 hours, the cervical canal is gaping. On vaginal examination: the cervix is 2 cm long, the external orifice is open by 1 cm, the internal orifice is half-opened; the uterus is enlarged up to 12th week of pregnancy, soft, mobile, painless, the appendages are without changes. What diagnosis can be made? |
| Correct answer | Cervical insufficiency. Habitual abortion |
| B | Threatened spontaneous abortion |
| C | Cervical pregnancy, 12 weeks |
| D | Cervical hysteromyoma, habitual abortion |
| E | Inevitable abortion |
| № | krok 2019 |
| Topic | GYNECOLOGICAL DISEASES IN CHILDREN AND TEENAGERS. METHODS OF CONTRACEPTION FOR TEENAGERS. |
| Task | A 16-year-old girl has primary amenorrhea, no pubic hair growth and normally developed mammary glands. Her genotype is 46 XY; uterus and vagina are absent. What is your diagnosis? |
| Correct answer | Testicular feminization syndrome |
| B | Mayer-Rokitansky-Kuster-Hauser syndrome |
| C | Cushing disease |
| D | Sheehan syndrome |
| E | Cushing syndrome |
| № | krok 2019 |
| Topic | URGENT CONDITIONS IN GYNECOLOGY. |

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| Task | A 27-year-old woman complains of foul-smelling discharge from her genital tracts, lower abdominal pain and elevated body temperature. The complaints arose 2 days ago. She has a history of surgical abortion at the term of 8 weeks one week ago. On speculum examination: the uterine cervix is clear, external orifice produces foul-smelling discharge. On vaginal examination: the uterus is in ante flexion, mobile, painful and slightly enlarged. The appendages are without changes. Make the provisional diagnosis: |
| Correct answer | Postabortal endometritis |
| B | Salpingoophoritis |
| C | Appendicitis |
| D | Acute respiratory disease |
| E | Enterocolitis |
| № | krok 2019 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A 28-year-old woman came to the gynecological clinic with complaints of irregular menstruations and infertility. Menstruations occur since the age of 15, irregular with delays up to 2 months. On examination she presents with marked hirsutism and excessive body weight. On vaginal examination: the uterus is reduced in size and painless. The ovaries on the both sides are dense and enlarged. Ultrasound shows microcystic changes in the ovaries, the ovaries are 5x4 cm and 4.5x4 cm in size with dense ovarian capsule. Basal body temperature is monophasic. What is the most likely diagnosis? |
| Correct answer | Polycystic ovary syndrome |
| B | Endometrioid cysts |
| C | Ovarian carcinoma |
| D | Bilateral adnexitis |
| E | Krukenberg tumor |
| № | krok 2019 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A 26-year-old woman complains of amenorrhea. 10 months ago she gave birth for a second time. Early postpartum period was complicated by massive hypotonic hemorrhage. No breastfeeding. Lately she has been presenting with loss of weight, loss of hair and indisposition. Gynecological examination revealed atrophy of the external genitals, the uterus is abnormally small, no uterine appendages can be detected. What is the most likely diagnosis? |
| Correct answer | Sheehan syndrome (postpartum pituitary gland necrosis) |
| B | Galaetorrhea-amenorrhea syndrome |

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| C | Suspected progressing ec pregnancy |
| D | Stein-Leventhal syndrome (polycystic ovary syndrome) |
| E | Physiological amenorrhea |
| № | krok 2019 |
| Topic | POSTNATAL SEPTIC DISEASES. |
| Task | A 22-year-old postpartum woman on the 12th day after the normal childbirth informs of elevated body temperature up to 39 ⁰ C for the last 3 days and pain in her right mammary gland. The right mammary gland is enlarged, hot to touch, dense, hyperemic and painful. Palpation reveals there a dense infiltration 8x8 cm with a fluctuation in its center. What is the most likely diagnosis? |
| Correct answer | Postpartum period, day 11. Right-sided gangrenous mastitis |
| B | Postpartum period, day 11. Right-sided serous mastitis |
| C | Postpartum period, day 11. Right-sided infiltrative-purulent mastitis |
| D | Postpartum period, day 12. Right-sided phlegmonous mastitis |
| E | Postpartum period, day 12. Right-sided lactostasis |
| № | krok 2019 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 23-year-old woman came to the gynecological clinic. She complains of pain, itching, and burning in her vulva, general weakness, indisposition, elevated body temperature up to 37.2 ⁰ C and headache. On examination in the vulva there are multiple vesicles up to 2-3 mm in diameter with clear contents against the background of hyperemia and mucosal edema. Make the provisional diagnosis: |
| Correct answer | Genital herpes infection |
| B | Cytomegalovirus infection |
| C | Vulvar cancer |
| D | Papillomavirus infection |
| E | Primary syphilis |
| № | krok 2019 |
| Topic | ANOMALIES OF THE PELVIC BONE. MACROSOMIA IN OBSTETRICS. THE DISPARITY BETWEEN THE SIZE OF THE FETAL HEAD AND MOTHER'S PELVIS. ANOMALIES OF POSITION OF THE FETUS. PELVIC PRESENTATION OF THE FETUS. |

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| Task | A woman is 40 weeks pregnant. The fetus is in the longitudinal lie and cephalic presentation. Pelvic size is 26-29-31-20. Expected weight of the fetus is 4800 grams. The labor contractions has been lasting for 12 hours, within the last 2 hours they were extremely painful, the parturient woman is anxious. The waters broke 4 hours ago. On external examination the contraction ring is located 2 finger widths above the navel, Henkel-Vasten sign is positive. Fetal heart rate is 160/min., muffled. On internal examination the uterine cervix is fully opened, the fetal head is engaged to the pelvic inlet. What is the most likely diagnosis? |
| Correct answer | Threatened uterine rupture |
| B | Hyperactive uterine contractions |
| C | Anatomically contracted pelvis |
| D | Abruption of the normally positioned placenta |
| E | Complete uterine rupture |
| № | krok 2019 |
| Topic | GYNECOLOGICAL DISEASES IN CHILDREN AND TEENAGERS. METHODS OF CONTRACEPTION FOR TEENAGERS. |
| Task | A 17-year-old girl has made an appointment with the doctor. She plans to begin her sex life. No signs of gynecological pathology were detected. In the family history the patient's grandmother had cervical cancer. The patient was consulted about the maintenance of her reproductive health. What recommendation will be the most helpful for prevention of invasive cervical cancer? |
| Correct answer | Vaccination against human papillomavirus (HPV) |
| B | Timely treatment of sexually transmitted diseases |
| C | Antiviral and antibacterial drugs |
| D | Irrnmunomodulators |
| E | Vitamins, calcium, omega-3 |
| № | krok 2019 |
| Topic | ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. MODERN APPROACHES TO DIAGNOSTICS AND TREATMENT OF BIRTH AND MATERNAL TRAUMA. |
| Task | A newborn girl has Apgar score of 7-8 points at the 1-5 minutes after birth. During the labor there was a brief difficulty with extraction of the shoulder girdle. After birth the baby presents with disturbed function of the proximal segment and forced position of the right arm. The shoulder is rotated inwards, the elbow is extended the forearm is pronated, and the whole upper limb resembles an arm of a doll. What is the most likely clinical diagnosis in this case? |
| Correct answer | Erb-Duchenne palsy |
| B | Thoracic spine trauma |
| C | Intracranial hemorrhage |

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| D | Soft tissue injury of the right arm |
| E | Osteomyelitis of the right arm |
| № | krok 2019 |
| Topic | BENIGN TUMORS OF THE FEMALE GENITALIA. DISHORMONAL DISEASES OF BREASTS. ENDOMETRIOSIS. |
| Task | A 45-year-old woman came to the maternity clinic with complaints of periodical pains in her mammary glands that start 1 day before menstruation and stop after the menstruation begins. Palpation of the mammary glands detects diffuse nodes predominantly in the upper outer quadrants. What is the most likely diagnosis? |
| Correct answer | Fibrocystic mastopathy |
| B | Breast cyst |
| C | Hyperprolactinemia |
| D | Mastitis |
| E | Breast cancer |
| № | krok 2019 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS IN THE PERIMENOPAUSAL PERIOD. |
| Task | A 46-year-old woman came to the maternity clinic with complaints of moderate bloody discharge from the vagina, which developed after the menstruation delay of 1.5 months. On vaginal examination: the cervix is clean; the uterus is not enlarged, mobile, painless; appendages without changes. Make the diagnosis: |
| Correct answer | Abnormal uterine bleeding |
| B | Ec pregnancy |
| C | Adenomyosis |
| D | Cancer of the uterine body |
| E | Submucous uterine myoma |
| № | krok 2019 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | It is the 3rd day after the vaginal delivery. The infant is on breastfeeding. The mother's general condition is satisfactory. Body temperature is 36.4°C, heart rate is 80/min., BP is 120/80 mmHg. Mammary glands are soft and painless; lactation is moderate, unrestricted milk flow. The uterus is dense, the uterine fundus is located 3 finger widths below the navel. Lochia are bloody-serous, moderate in volume. Assess the dynamics of uterine involution: |
| Correct answer | Physiological involution |

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| B | Subinvolution |
| C | Hematometra |
| D | Pathologic involution |
| E | Lochiometra |
| № | krok 2019 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. |
| Task | A parturient woman is 30 years old, stage I of the labor is ongoing. The fetus is in the cephalic presentation. Auscultation of the fetal heart sounds detects bradycardia. Evaluation of cardiotocogram yielded the following data: decrease of basal heart rate down to 90/min., variability - monotonous (2 and less); late decelerations with amplitude of 50/min. Make the diagnosis and choose the obstetrical tactics necessary in this case: |
| Correct answer | Fetal distress. Urgent cesarean section delivery |
| B | Fetal distress. Vacuum extraction delivery |
| C | Fetal distress. Stimulation of uterine contractions |
| D | Fetal distress. Forceps delivery |
| E | Normal condition of the fetus. Vaginal birth |
| № | krok 2019 |
| Topic | EARLY GESTOSIS. HYPERTENSIVE CONDITIONS DURING PREGNANCY. PREECLAMPSIA. ECLAMPSIA. |
| Task | A 35-year-old pregnant woman with degree 1 essential hypertension, developed edemas and headache at the 33 week of her pregnancy. Objectively her general condition is satisfactory, blood pressure is 165/100 mm Hg. Uterine tonus is normal. Fetal heart rate is 140/min., rhythmic. She was diagnosed with daily proteinuria - 4 g/L, daily diuresis — 1100 mL. Creatinine - 80 mcmol/L., urea - 7 mmol/L, platelets - 100 - 109/L. What complication of pregnancy occurred? |
| Correct answer | Severe preeclampsia |
| B | Renal failure |
| C | Mild preeclampsia |
| D | Hypertensive crisis |
| E | Moderate preeclampsia |
| № | krok 2019 |
| Topic | URGENT CONDITIONS IN GYNECOLOGY. |
| Task | An 18-year-old girl was brought into the gynecology department with complaints of elevated body temperature up to 37.8°C, sharp pain in her lower abdomen, more intense on the right, and difficult defecation. Vaginal examination detected a painful dense elastic formation 5x6 cm in the area of her right ovary. Pregnancy test is negative. What is the most likely diagnosis? |

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| Correct answer | Torsion of ovarian tumor |
| B | Ec pregnancy |
| C | Appendicitis |
| D | Ovarian cyst rupture |
| E | Ovarian apoplexy |
| № | krok 2019 |
| Topic | POSTNATAL SEPTIC DISEASES. |
| Task | On the 4 th day after the cesarean section a woman developed fever with body temperature up to 39°C and abdominal pain. Pulse is 104/min. She vomited twice. The patient is sluggish. Her tongue is dry and has gray coating. The abdomen is distended. Signs of peritoneal irritation are positive in all segments. Peristalsis cannot be auscultated. No passage of gas occurs. Uterine fundus is located at the level of the navel. The uterus is painful on palpation. The discharge is moderate and contains blood and pus. What is the most likely diagnosis? |
| Correct answer | Diffuse peritonitis |
| B | Pelvic peritonitis |
| C | Progressive thrombophlebitis |
| D | Metroendometritis |
| E | Parametritis |
| № | krok 2020 |
| Topic | OPERATIVE OBSTETRICS. POSTPARTUM SEPTIC DISEASES. |
| Task | A 22-year-old postparturient woman on the 12th day after the normal childbirth informs of fever up to 39°C for the last 3 days and pain in her right mammary gland. The right mammary gland is enlarged, hot to touch, tense, hyperemic, and painful. Palpation reveals there a dense infiltration 8x8 cm with a fluctuation in its center. What is the most likely diagnosis? |
| Correct answer | Postpartum period, day 12. Right-sided phlegmonous mastitis |
| B | Postpartum period, day 12. Right-sided gangrenous mastitis |
| C | Postpartum period, day 12. Right-sided serous mastitis |
| D | Postpartum period, day 12. Right-sided lactostasis |
| E | Postpartum period, day 12. Right-sided infiltrative-purulent mastitis |
| № | krok 2020 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. ANOMALIES OF DEVELOPMENT OF FERTILIZED OVUM. |

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| Task | A newborn has a round red formation in the suprapubic region. Examination shows that urine is being discharged in pulses from the two orifices located in the lower part of this formation. Name this developmental anomaly: |
| Correct answer | Bladder exstrophy |
| B | Bladder agenesis |
| C | Urachal cyst |
| D | Bladder diverticulum |
| E | Vesico-umbilical fistula |
| № | krok 2021 |
| Topic | PREMATURE BREAKING OF PREGNANCY. PROLONGED PREGNANCY. MULTI-FETAL (MULTIPLE) PREGNANCY. |
| Task | A pregnant woman at 32 weeks of gestation with the risk of preterm labor undergoes a treatment to prevent fetal respiratory distress syndrome. What medicine was she prescribed? |
| Correct answer | Dexamethasone |
| B | Gynipral (hexoprenaline) |
| C | Misoprostol |
| D | Oxytocin |
| E | Progesterone |
| № | krok 2020 |
| Topic | PREGNANCY AND LABOR OF WOMEN WITH EXTRAGENITAL DISEASES. IMMUNOLOGICAL INCOMPATIBILITY OF MATERNAL AND FETAL BLOOD. PERINATAL INFECTIONS. PROPHYLAXIS TO PREVENT VERTICAL HIV TRANSMISSION. |
| Task | A woman with the pregnancy term of 8 weeks complains of elevated temperature, skin rash that can be characterized as macular exanthema, enlargement of posterior cervical and occipital lymph nodes, small amount of bloody discharge from the genital tracts. She was examined by the infectious diseases specialist and diagnosed with rubella. What tactics should the obstetrician-gynecologist choose? |
| Correct answer | Abortion |
| B | Prescription of antibacterial therapy |
| C | Prescription of hemostatic therapy |
| D | Prescription of antiviral therapy |
| E | Treatment of incipient abortion |
| № | krok 2020 |

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| Topic | ANOMALIES OF THE PELVIC BONE. MACROSOMIA IN OBSTETRICS. THE DISPARITY BETWEEN THE SIZE OF THE FETAL HEAD AND MOTHER'S PELVIS. ANOMALIES OF POSITION OF THE FETUS. PELVIC PRESENTATION OF THE FETUS. ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. |
| Task | A 34-year-old multipara was brought to the labor ward with regular labor activity. Her pelvic size is 26-29-32-22 cm. Vaginal examination shows 6 cm cervical dilation, the amniotic sac is unbroken. The fetus is in the breech presentation, with buttocks pressed to the entrance into the lesser pelvis. The promontory cannot be reached, no exostoses. Fetal heart rate is 140/min., expected fetal weight is 2800 g. What labor tactics should be chosen? |
| Correct answer | Delivery through the natural birth canal |
| B | External obstetric version of the fetus |
| C | Fetal extraction from the pelvic end |
| D | Classic combined external-internal version of the fetus |
| E | Urgent cesarean section |
| № | krok 2020 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 35-year-old woman came to the family doctor with complaints of profuse menstruations that last up to 10 days. Gynecological examination shows that the uterine cervix is without changes, the uterus is in <i>anterflexio</i> , has normal size, is mobile and painless. The uterine appendages on the both sides are without peculiarities. The family doctor made the provisional diagnosis of abnormal uterine bleeding. What instrumental method of examination needs to be performed first to diagnose this pathology? |
| Correct answer | Transvaginal ultrasound |
| B | Transabdominal ultrasound |
| C | Culdoscopy |
| D | Laparoscopy |
| E | Colposcopy |
| № | krok 2020 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |

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| Task | A 20-year-old woman complains of headaches, vertigo, tearfulness, vomiting, pain in the area of the heart, and tachycardia. The signs appear 6-7 days before menstruation and disappear in the first days of menstruation. Make the diagnosis: |
| Correct answer | Premenstrual syndrome |
| B | Diencephalic syndrome |
| C | Algomenorrhea |
| D | Metabolic craniopathy |
| E | Stein-Leventhal syndrome |
| № | krok 2020 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A woman came to the gynecologist to plan her pregnancy. She was advised to increase her intake of the products rich in folic acid, particularly soy beans, bread made of coarsely ground flour, fruits, leafy green vegetables. Such changes in her diet will work toward the prevention of: |
| Correct answer | Non-closure of the neural tube in the fetus |
| B | Iron-deficiency anemia in the pregnant woman |
| C | Rickets |
| D | Polyhydramnios |
| E | Non-closure of the fontanel |
| № | krok 2020 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 48-year-old woman complains of disturbed menstrual cycle: her periods last for 7-9 days and are excessively profuse throughout the last half-year. She notes occasional hot flashes in her head, insomnia, irritability, and headaches. Her skin is of normal color. Blood pressure - 150/90 mm Hg, pulse - 90/min., rhythmic. The abdomen is soft and painless. Bimanual examination shows no uterine enlargement, the appendages cannot be detected. The vaginal fornices are free. What is the most likely diagnosis? |
| Correct answer | Climacteric syndrome |
| B | Uterine myoma |
| C | Premenstrual syndrome |
| D | Adrenogenital syndrome |
| E | Stein-Leventhal syndrome (polycystic ovary syndrome) |

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| № | krok 2020 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. ANOMALIES OF DEVELOPMENT OF FERTILIZED OVUM. |
| Task | A pregnant woman at 34 weeks of gestation underwent dopplerometry of umbilical circulation, which revealed a reverse diastolic component. Objectively, the height of the uterus is 27 cm above the pubic bone, the head of the fetus is mobile and located above the entrance to the lesser pelvis. Fetal heartbeat is 136/min. Vaginal examination shows that the uterine cervix is closed, its length is 3 cm. What tactics should the obstetrician choose? |
| Correct answer | Urgent cesarean section |
| B | Fetal biophysical profile |
| C | Repeated dopplerometry next day |
| D | Labor induction with oxytocin |
| E | Ultrasound photometry of the fetus |
| № | krok 2020 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 26-year-old woman was hospitalized into the gynecological department with complaints of body temperature up to 38.2°C, fever, general weakness, and dirty- red blood discharge from her genital tracts. She is hemodynamically stable. Two days ago she underwent a medical abortion on the 8th week of pregnancy. Ultrasound detects the remains of the fertilized egg in her uterine cavity. What are the tactics of the patient management in this case? |
| Correct answer | Revision of the uterine cavity with vacuum aspirator. Antibiotic therapy |
| B | Pipelle biopsy |
| C | Uterine cavity treatment with antibiotic solutions |
| D | Laparotomy. Supravaginal uterine amputation. Abdominal drainage |
| E | Laparotomy. Extirpation of the uterus and tubes. Abdominal drainage |
| № | krok 2020 |
| Topic | OPERATIVE OBSTETRICS. POSTPARTUM SEPTIC DISEASES. |
| Task | On the 5th day after giving birth a postparturient woman complains of a pain in her left mammary gland and body temperature up to 38.1°C. Examination shows that her mammary gland is enlarged and painful on palpation, the nipple is edematous and has fissures, the upper external quadrant of the gland is hyperemic. Name the measures that would have prevented the development of this complication in the patient: |
| Correct answer | Feeding on demand, expression of breast milk, prevention of nipple fissures |
| B | Stop breastfeeding when fissures appear |

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| C | Feeding no longer that 10 minutes through an overlay |
| D | Constant expression of breast milk |
| E | Feeding on schedule |
| № | krok 2020 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A family doctor performed an external obstetrical examination of a pregnant woman and determined that her uterine fundus is located at the level of the navel. What is the most likely term of pregnancy in this woman? |
| Correct answer | 24 weeks |
| B | 16 weeks |
| C | 40 weeks |
| D | 32 weeks |
| E | 8 weeks |
| № | krok 2020 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 23-year-old woman came to the gynecological clinic. She complains of pain, itching, and burning in her vulva, general weakness, indisposition, elevated body temperature up to 37.2°C, and headache. On examination in the vulva there are multiple vesicles up to 2-3 mm in diameter with clear contents against the background of hyperemia and mucosal edema. Make the provisional diagnosis: |
| Correct answer | Genital herpes infection |
| B | Primary syphilis |
| C | Cytomegalovirus infection |
| D | Vulvar cancer |
| E | Papillomavirus infection |
| № | krok 2020 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A 20-year-old woman, gravida 2, para 1 has been in labor for 4 hours. Her condition is satisfactory. Moderately painful contractions occur every 3 minutes and last for 35-40 seconds. The waters have not burst yet. The fetus is in longitudinal position. Fetal heartbeats are 136/min., clear and rhythmic. Major segment of the fetal head is engaged to the pelvic inlet. Vaginal examination shows smooth cervix of 6 cm, amniotic sac is intact, sagittal suture is in the left oblique diameter, occipital fontanel is on the right near the symphysis pubis. What stage of the labor is it? |

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| Correct answer | Active phase of the first stage of normal labor |
| B | Preliminary stage |
| C | Latent phase of the first stage of normal labor |
| D | Precursors of childbirth |
| E | The second stage of normal labor |
| № | krok 2020 |
| Topic | OBSTETRICAL BLEEDINGS DURING PREGNANCY, DURING LABOR AND IN THE POSTNATAL PERIOD. HEMORRAGIC SHOCK. DIC - SYNDROME. INTENSIVE THERAPY AND RESUSCITATION DURING BLEEDING IN OBSTETRICS. |
| Task | A multigravida, labor II, 36-37 weeks of gestation, has gone into labor. Her waters broke 8 hours ago, the labor activity continues for the last 4 hours, it is regular, with contractions that last 35 seconds and occur every 3-4 minutes. The child is in the cephalic presentation, with the head pressed to the entrance into the lesser pelvis. The parturient woman complains of a sudden sharp abdominal pain. Her pulse is 100/min., blood pressure is 110/70 - 100/70 mm Hg. The uterus is tense and does not relax between the contractions. Fetal heartbeat is muffled - 100/min. The amniotic fluid is blood-colored and continues to leak. What is the most likely diagnosis? |
| Correct answer | Premature detachment of the normally positioned placenta |
| B | Partial placenta previa |
| C | Rupture of the umbilical vessels |
| D | Cervical rupture |
| E | Uterine rupture |
| № | krok 2020 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | On the 3rd day after the artificial abortion the woman was hospitalized into the gynecological department in a severe condition with signs of intoxication, abdominal pain, and purulent discharge from the vagina. Objectively, the patient's condition is severe, her body temperature is 38.8°C, pulse is 100/min., blood pressure is 110/70 mm Hg. the uterus is soft, the uterine fundus is located at the level of the navel, there are positive signs of peritoneal irritation. What is the most likely diagnosis? |
| Correct answer | Pelvipерitonitis |
| B | Acute metroendometritis |
| C | Ectopic pregnancy |
| D | Uterine perforation |
| E | Acute suppurative salpingo-oophoritis |

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| № | krok 2020 |
| Topic | PRECANCEROUS DISEASES OF THE FEMALE GENITALIA. MALIGNANT TUMORS OF THE GENITALIA. |
| Task | A 55-year-old woman came to a gynecologist with complaints of leukorrhea and bloody discharge from the vagina after 5 years of menopause. Anamnesis states no pregnancies. Bimanual examination: the uterus and uterine appendages are without changes. During diagnostic curettage of the uterine cavity the physician scraped off a sample of enchephaloid matter. What is the most likely diagnosis in this case? |
| Correct answer | Endometrial carcinoma |
| B | Cervical carcinoma |
| C | Adenomyosis |
| D | Ovarian carcinoma |
| E | Subserous uterine myoma |
| № | krok 2020 |
| Topic | OBSTETRICAL BLEEDINGS DURING PREGNANCY, DURING LABOR AND IN THE POSTNATAL PERIOD. HEMORRAGIC SHOCK. DIC - SYNDROME. INTENSIVE THERAPY AND RESUSCITATION DURING BLEEDING IN OBSTETRICS. |
| Task | A 25-year-old woman was brought into the gynecological department with profuse bloody discharge from her genital tracts. She is 12 weeks pregnant, the pregnancy is planned. Within the last 3 days she was experiencing pains in her lower abdomen that eventually started resembling cramps, she developed bleeding. Her skin is pale, pulse - 88/min., blood pressure - 100/60 mm Hg, body temperature - 36.8°C. Vaginal examination: the uterus size corresponds to 11 weeks of gestation, the cervical canal allows inserting 1 finger and contains fragments of the fertilized ovum, the discharge is bloody and profuse. What is the most likely diagnosis? |
| Correct answer | 12-week pregnancy, spontaneous abortion in progress |
| B | 12-week pregnancy, threatened spontaneous abortion |
| C | Disturbed menstrual cycle, amenorrhea |
| D | Disturbed menstrual cycle, hyperpolymenorrhea |
| E | Full-term pregnancy, term labor |
| № | krok 2021 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |

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| Task | On the 5th day after giving birth a postparturient woman complains of a pain in her left mammary gland and body temperature up to 38.1°C. Examination shows that her mammary gland is enlarged and painful on palpation, the nipple is edematous and has fissures, the upper external quadrant of the gland is hyperemic. Name the measures that would have prevented the development of this complication in the patient: |
| Correct answer | Feeding on demand, expression of breast milk, prevention of nipple fissures |
| B | Feeding no longer that 10 minutes through an overlay |
| C | Constant expression of breast milk |
| D | Stop breastfeeding when fissures appear |
| E | Feeding on schedule |
| № | krok 2021 |
| Topic | OPERATIVE OBSTETRICS. POSTPARTUM SEPTIC DISEASES. |
| Task | On the 4th day after giving birth a postparturient woman complains of a pain in her right mammary gland and body temperature up to 38.5°C. Examination shows that her mammary gland is enlarged and painful on palpation, the nipple is edematous and has fissures, the upper external quadrant of the gland is hyperemic. Name the measures that would have prevented the development of this complication in the patient: |
| Correct answer | Feeding on demand, expression of breast milk, prevention of nipple fissures |
| B | Feeding no longer that 10 minutes through an overlay |
| C | Constant expression of breast milk |
| D | Stop breastfeeding when fissures appear |
| E | Feeding on schedule |
| № | krok 2021 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 22-year-old woman complains of itching and profuse discharge from her genital tracts. The condition developed 10 days ago after a sexual contact. Bacterioscopy of a discharge sample detected trichomonads. What drug should be prescribed for treatment in this case? |
| Correct answer | Metronidazole |
| B | Zovirax (Acyclovir) |
| C | Ampiox (Ampicillin + Oxacillin) |
| D | Erythromycin |
| E | Valtrex (Valaciclovir) |
| № | krok 2021 |

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| Topic | OBSTETRICAL BLEEDINGS DURING PREGNANCY, DURING LABOR AND IN THE POSTNATAL PERIOD. HEMORRAGIC SHOCK. DIC-SYNDROME. INTENSIVE THERAPY AND RESUSCITATION DURING BLEEDING IN OBSTETRICS. |
| Task | A 29-year-old woman complains of a general weakness, increased fatigability, weight loss, and infrequent scanty periods. One year ago she had a childbirth, complicated with a massive bleeding. Objectively, the woman is asthenic, her skin is pale and dry, the hair cover is thin on her scalp and absent in her armpits. Her mammary glands and genitals are hypotrophic. Make the provisional diagnosis: |
| Correct answer | Sheehan's syndrome |
| B | Anorexia nervosa |
| C | Pituitary tumor |
| D | Asthcnoneurotic syndrome |
| E | Hypoplastic anemia |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 29-year-old woman complains of a general weakness, increased fatigability, weight loss, and infrequent scanty periods. One year ago she had a childbirth, complicated with a massive bleeding. Objectively, the woman is asthenic, her skin is pale and dry, the hair cover is thin on her scalp and absent in her armpits. Her mammary glands and genitals are hypotrophic. Make the provisional diagnosis: |
| Correct answer | Sheehan's syndrome |
| B | Anorexia nervosa |
| C | Pituitary tumor |
| D | Asthcnoneurotic syndrome |
| E | Hypoplastic anemia |
| № | krok 2021 |
| Topic | PLACENTAL DYSFUNCTION, HYPOTROPHY OF THE FETUS, FETAL DISTRESS SYMPTOMS. ANOMALIES OF DEVELOPMENT OF FERTILIZED OVUM. |

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| Task | A 7-day-old girl is markedly inert and suffers from recurrent (sometimes projectile) vomiting, liquid stools, exicosis, and marked progressing hypotension. She gains no weight. Her skin is earthy gray and her nipples are pigmented. She presents with enlarged clitoris, incomplete union of the vulvar lips, and incomplete separation of the urethra and vagina. She has marked hyperkalemia and hyponatremia, metabolic acidosis, and hypoglycemia. Her blood aldosterone levels are low, while her plasma renin activity is high. Make the provisional diagnosis: |
| Correct answer | Adrenogenital syndrome, salt-wasting form |
| B | Adrenogenital syndrome, simple-virilizing form |
| C | Turner syndrome |
| D | Adrenogenital syndrome, hypertensive form |
| E | Hermaphroditism |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 48-year-old woman complains of disturbed menstrual cycle: her periods last for 7-9 days and are excessively profuse throughout the last half-year. She notes occasional hot flashes in her head, insomnia, irritability, and headaches. Her skin is of normal color. Blood pressure - 150/90 mm Hg, pulse - 90/min., rhythmic. The abdomen is soft and painless. Bimanual examination shows no uterine enlargement, the appendages cannot be detected. The vaginal fornices are free. What is the most likely diagnosis? |
| Correct answer | Climacteric syndrome |
| B | Adrenogenital syndrome |
| C | Premenstrual syndrome |
| D | Uterine myoma |
| E | Stein-Leventhal syndrome (polycystic ovary syndrome) |
| № | krok 2021 |
| Topic | ANOMALIES OF THE PELVIC BONE. MACROSOMIA IN OBSTETRICS. THE DISPARITY BETWEEN THE SIZE OF THE FETAL HEAD AND MOTHER'S PELVIS. ANOMALIES OF POSITION OF THE FETUS. PELVIC PRESENTATION OF THE FETUS. ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. |

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| Task | A 25-year-old parturient woman is hospitalized with contractions that have been occurring for 12 hours already. The contractions last 25 seconds, while the intervals between them last 4-7 minutes. The contractions are irregular and sharply painful, with pain spreading upwards from the lower uterine segment. The baby is in the cephalic presentation, the head is pressed to the entrance into the lesser pelvis. Uterine hypertonus is observed. Internal obstetric examination shows that the cervix is smoothed out and the opening of the external orifice of uterus is 3 cm. The amniotic sac is intact. Make the provisional diagnosis: |
| Correct answer | Discoordinated labor activity |
| B | Primary weakness of the labor activity |
| C | Secondary weakness of the labor activity |
| D | Physiological course of the labor |
| E | Cervical dystocia |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 13-year-old girl was brought into the gynecological department with complaints of profuse bloody discharge from her genital tracts for the last 10 days. Menarche was at the age of 11, the menstrual cycle is irregular. Rectoabdominal examination detects no pathology. Make the provisional diagnosis: |
| Correct answer | Juvenile uterine bleeding |
| B | External genital tract injury |
| C | Adenomyosis |
| D | Werlhof's disease (immune thrombocytopenic purpura) |
| E | Endometrial polyp |
| № | krok 2021 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | A 25-year-old woman was hospitalized into the gynecological department with complaints of pain in her lower abdomen and high temperature of 39.7°C. Objectively, her blood pressure is 120/80 mm Hg, pulse - 108/min., of satisfactory strength and volume. The abdomen is moderately distended and sharply painful in its lower segments. The Bloomberg's sign is positive in the hypogastrium. During vaginal examination, the uterus and its appendages cannot be palpated because of anterior abdominal wall rigidity. The posterior vaginal fornix is overhanging and sharply painful. What is the most likely diagnosis in this case? |
| Correct answer | Pelvioperitonitis |
| B | Acute endometritis |

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| C | Ectopic pregnancy |
| D | Acute adnexitis |
| E | Ovarian apoplexy |
| № | krok 2021 |
| Topic | EARLY GESTOSIS. HYPERTENSIVE CONDITIONS DURING PREGNANCY. PREECLAMPSIA. ECLAMPSIA. |
| Task | A 35-year-old pregnant woman with hypertension, developed edemas and headache at the 33 week of her pregnancy. Objectively her general condition is satisfactory, blood pressure - 160/100 mm Hg, normal uterine tone. Fetal heart rate is 140/min., rhythmic. She was diagnosed with daily proteinuria - 4 g/L, daily diuresis - 1100 mL. creatinine - 80 mcmol/L, platelets - $100 \cdot 10^9/L$. What complication of pregnancy occurred? |
| Correct answer | Severe preclampsia |
| B | Hypertensive crisis |
| C | Mild preeclampsia |
| D | Moderate preclampsia |
| E | Renal failure |
| № | krok 2021 |
| Topic | PREGNANCY AND LABOR OF WOMEN WITH EXTRAGENITAL DISEASES. IMMUNOLOGICAL INCOMPATIBILITY OF MATERNAL AND FETAL BLOOD. PERINATAL INFECTIONS. PROPHYLAXIS TO PREVENT VERTICAL HIV TRANSMISSION. |
| Task | The condition of a full-term newborn deteriorated on the first day of life. The baby was born from the third pregnancy, during the second half of which gestosis was observed. The mother's blood group is 0(1) Rh negative. Examination shows that the baby is inert and has icteric skin and mucosa; baby's urine and stool are of normal color. Blood serum bilirubin is 248 mcmol/L, because of indirect bilirubin levels. What is the most likely cause of this pathologic condition? |
| Correct answer | Rh incompatibility |
| B | Physiological jaundice |
| C | Fetal hepatitis |
| D | ABO incompatibility |
| E | Biliary atresia |
| № | krok 2021 |
| Topic | INFERTILE MARRIAGE. MODERN ASPECTS OF PLANNING OF A FAMILY. METHODS OF CONTRACEPTION. THE CRITERIA FOR THE USE OF CONTRACEPTIVE METHODS BY THE WHO. |

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| Task | A 28-year-old woman came to a gynecologist with complaints of infertility for the last 3 years. Her menstrual function is normal. She has a history of one artificial abortion and chronic salpingo- oophoritis. She uses no contraception. The spermogram of her husband is normal. What method should be used first to determine the cause of this woman's infertility? |
| Correct answer | Hysterosalpingography |
| B | Hysteroscopy |
| C | Hormone testing |
| D | Laparoscopy |
| E | Diagnostic uterine curettage |
| № | krok 2021 |
| Topic | FEMALE UROGYNECOLOGICAL INFLAMMATORY DISEASES. |
| Task | An 8-year-old girl with complaints of painful urination, frequent low-volume urination, and leukocyturia was diagnosed with acute cystitis. 10 days before the disease onset she was treated by the gynecologist for acute vulvitis. 5 days ago she presented with mild catarrhal symptoms. Her mother ascribes the child's disease to her overexposure to cold. Specify the most likely infection route: |
| Correct answer | Ascending |
| B | Descending |
| C | Contact |
| D | Lymphogenic |
| E | Hematogenic |
| № | krok 2021 |
| Topic | ANOMALIES OF THE PELVIC BONE. MACROSOMIA IN OBSTETRICS. THE DISPARITY BETWEEN THE SIZE OF THE FETAL HEAD AND MOTHER'S PELVIS. ANOMALIES OF POSITION OF THE FETUS. PELVIC PRESENTATION OF THE FETUS. ANOMALIES OF THE CONTRACTION ACTIVITY OF THE UTERUS. BIRTH AND MATERNAL TRAUMATISM. |
| Task | A parturient woman has been in labor for 8 hours. The labor activity is weak, contractions last for 25 seconds and occur twice per 10 minutes. Vaginal examination shows cervical opening of 4 cm, the baby is in the cephalic presentation. During examination the woman's waters broke. The waters contained meconium. Fetal heart rate is 90/min., dull. What tactics of labor management must be chosen in this case? |
| Correct answer | Urgent delivery by means of a cesarean section |
| B | Prescribe labor stimulation with oxytocin solution |
| C | Continue the conservative management of labor with continuous monitoring of the fetus |
| D | Apply obstetric forceps |

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| E | Observation and treatment of fetal distress |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | One year ago a 46-year-old woman underwent a partial thyroidectomy due to multinodular goiter. Now she complains of general weakness, drowsiness, constant fatigue, low working ability, constipations, edema of her face and limbs. Objectively, her body temperature is 36°C. Her skin is dry and wrinkled. She started losing her hair and developed amenorrhea. What condition is it? |
| Correct answer | Primary hypothyroidism |
| B | Subclinical hypothyroidism |
| C | Thyrotoxicosis |
| D | Chronic thyroiditis |
| E | Hypoparathyroidism |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 32-year-old woman presents with obesity (mostly her shoulders and torso are affected), hirsutism, and menstrual irregularities. She has purple-cyanotic striae and stretch marks on her shoulders, chest, abdomen, and thighs. What is the cause of striae development in this case? |
| Correct answer | Catabolic effect of corticosteroid excess |
| B | Insulin resistance |
| C | Hypergonadotropinemia |
| D | Overproduction of androgens |
| E | Hypoestrogenemia |
| № | krok 2021 |
| Topic | PREMATURE BREAKING OF PREGNANCY. PROLONGED PREGNANCY. MULTI-FETAL (MULTIPLE) PREGNANCY. |
| Task | A pregnant woman at 32 weeks of gestation with the risk of preterm labor undergoes a treatment to prevent fetal respiratory distress syndrome. What medicine was she prescribed? |
| Correct answer | Dexamethasone |

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| B | Gynipral (hexoprenaline) |
| C | Misoprostol |
| D | Oxytocin |
| E | Progesterone |
| № | krok 2021 |
| Topic | DISORDERS OF THE MENSTRUAL FUNCTION IN REPRODUCTIVE AGE. NEUROENDOCRINE SYNDROMES IN GYNECOLOGY. PHYSIOLOGICAL AND PATHOLOGICAL CONDITIONS OF THE REPRODUCTIVE SYSTEM AT DIFFERENT AGES. |
| Task | A 38-year-old woman complains of weakness, sleepiness, pain in the joints, weight gain despite low appetite, and constipations. She presents with dry and thickened skin, puffy and amimic face, narrowed palpebral fissures, thick tongue, and deep hoarse voice. Her heart sounds are weak, pulse is 56/min. Low levels of free T4 are observed. This patient needs to take the following on a regular basis: |
| Correct answer | Thyroxine |
| B | Furosemide |
| C | Lithium carbonate |
| D | Calcium gluconate |
| E | Mercazolil (Thiamazole) |
| № | krok 2021 |
| Topic | BENIGN TUMORS OF THE FEMALE GENITALIA. DISHORMONAL DISEASES OF BREASTS. ENDOMETRIOSIS. |
| Task | A 38-year-old woman complains of a tensive pain in her lower abdomen and the small of her back that is observed within the last month and intensifies on the day before menstruation. Premenstrual dark bloody discharge was observed. She has a history of four medical abortions and one birth. Ultrasound shows isolated foci of increased echogenicity in the myometrium, increased anteroposterior size of the uterus, and round hypoechogenic inclusions 2 mm in diameter. What is the most likely diagnosis in this case? |
| Correct answer | Adenomyosis |
| B | Retrocervical endometriosis |
| C | Hormone-producing ovarian tumor |
| D | Ovarian endometriosis |
| E | Chorionepithelioma |
| № | krok 2021 |
| Topic | BENIGN TUMORS OF THE FEMALE GENITALIA. DISHORMONAL DISEASES OF BREASTS. ENDOMETRIOSIS. |

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| Task | A 45-year-old woman complains of general weakness, dyspnea, and dizziness. Within one year her hair became gray, her nails started peeling, and she developed gustatory disorders. For the last 5 years she has been registered for regular check-ups with a gynecologist for uterine fibromyoma. Her blood test shows the following: erythrocytes - $3.0 \cdot 10^{12}/L$, Hb -76 g/L, color index - 0.7, reticulocytes - 0.7%, platelets - $160 \cdot 10^9/L$, leukocytes $5.0 \cdot 10^9/L$, eosinophils - 2%, band neutrophils - 3%, segmented neutrophils 63%, lymphocytes - 28%, monocytes 4%, aniso- and microcytosis, ESR - 30 mm/hour. What type of anemia can be suspected in this case? |
| Correct answer | Iron-deficiency anemia |
| B | Hypoplastic anemia |
| C | B ₁₂ -deficiency anemia |
| D | Autoimmune hemolytic anemia |
| E | Minkowski-Chauffard syndrome |
| № | krok 2021 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A woman with blood group B (III) Rh(+) gave birth to a full-term healthy boy. Examination on the 3rd day of the infant's life shows him to have icteric tint to his skin. The child has no problems with suckling, sleep is nondisturbed. The abdomen is soft, the liver protrudes by 2 cm from under the costal margin. Complete blood count: hemoglobin - 200 g/L, erythrocytes - $5.5 \cdot 10^{12}/L$, total bilirubin - 62 mcmol/L, indirect bilirubin - 52 mcmol/L. What condition can be suspected? |
| Correct answer | Physiological jaundice |
| B | Biliary atresia |
| C | Congenital hepatitis |
| D | Hemolytic disease of the newborn due to Rh incompatibility |
| E | Hemolytic disease of the newborn due to ABO incompatibility |
| № | krok 2021 |
| Topic | PRECANCEROUS DISEASES OF THE FEMALE GENITALIA. MALIGNANT TUMORS OF THE GENITALIA. |
| Task | A 17-year-old girl has made an appointment with the doctor. She plans to begin her sex life. No signs of gynecological pathology were detected. In the family history there was a case of cervical cancer that occurred to the patient's grandmother. The patient was consulted about the maintenance of her reproductive health. What recommendation will be the most helpful for prevention of invasive cervical cancer? |
| Correct answer | Vaccination against human papillomavirus (HPV) |
| B | Immunomodulators |

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| C | Vitamins, calcium, omega-3 |
| D | Timely treatment of sexually transmitted diseases |
| E | Antiviral and antibacterial drugs |
| № | krok 2021 |
| Topic | PREGNANCY AND LABOR OF WOMEN WITH EXTRAGENITAL DISEASES. IMMUNOLOGICAL INCOMPATIBILITY OF MATERNAL AND FETAL BLOOD. PERINATAL INFECTIONS. PROPHYLAXIS TO PREVENT VERTICAL HIV TRANSMISSION. |
| Task | A newborn boy, born at 38 weeks of gestation with weight of 2200 g, presents with a ventricular septal defect, cataracts in both eyes, and sensorineural deafness. At the term of 12 weeks, the mother of the boy had a case of an influenza-like disease accompanied by a rash. In this case, the newborn will most likely be diagnosed with: |
| Correct answer | Congenital rubella syndrome |
| B | Cytomegalovirus infection |
| C | Toxoplasmosis |
| D | Congenital listeriosis |
| E | Congenital varicella syndrome |
| № | krok 2021 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | A 23-year-old woman, para 2, full term, is in labor. Her waters were clear and broke three hours ago. The labor activity is regular. The contractions last 25-30 seconds, with intervals of 4-5 minutes. The baby is in the longitudinal lie, cephalic presentation. The head is pressed to the entrance into the lesser pelvis. Fetal heart rate is 136/min. Internal examination shows that the cervix is smoothed out, the opening of the external orifice of uterus is 3 cm, no amniotic sac, the lower pole of the fetal head is at the level of linea terminalis. What stage of labor is it? |
| Correct answer | Stage I of labor |
| B | Labor precursors |
| C | Stage III of labor |
| D | Stage II of labor |
| E | Preliminary stage |
| № | krok 2021 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |

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| Task | On the 10th day after giving birth a woman came to a doctor complaining of high temperature of 38°C and sudden pain, hyperemia, and an induration in her left breast. Objectively, the skin of her left mammary gland has local hyperemia in its upper outer quadrant. During its palpation the pain intensifies. What is the most likely diagnosis in this case? |
| Correct answer | Lactational mastitis |
| B | Left breast cancer |
| C | Breast hemangioma |
| D | Cyst of the left breast with suppuration |
| E | Fibroadenoma of the left breast |
| № | krok 2021 |
| Topic | THE PHYSIOLOGY OF PREGNANCY, LABOR AND POSTPARTUM PERIOD. PERINATAL PROTECTION OF FETUS. PHARMACOTHERAPY IN OBSTETRICS. |
| Task | It is the 11th day after a woman has given birth and for the last 5 days she has been ill. She complains of chills. Her body temperature fluctuates between 35.8°C and 39.9°C. She cannot pump milk from her left breast. Objectively, her skin and mucosa are pale, her left mammary gland is significantly larger than the right one, the skin there is hyperemic, the upper and lower quadrants are dense, palpation detects a fluctuation and provokes sharp pain. The nipple is edematous and has a fissure with a purulent crust. The right mammary gland is normal. Make the provisional diagnosis: |
| Correct answer | Postpartum period. Right breast abscess |
| B | Postpartum period. Serous mastitis of the right breast |
| C | Postpartum period. Right breast cancer |
| D | Postpartum period. Physiological course |
| E | Postpartum period. Sepsis |
| № | krok 2021 |
| Topic | PREMATURE BREAKING OF PREGNANCY. PROLONGED PREGNANCY. MULTI-FETAL (MULTIPLE) PREGNANCY. |
| Task | A pregnant woman at the term of 11-12 weeks was hospitalized into the gynecological department with uterine bleeding and cramping pain in her lower abdomen. Vaginal examination shows that her vagina is filled with blood clots and her cervical opening is 2 cm. A tense amniotic sac can be detected in the birth canal. The uterus is tense and enlarged to the size that corresponds to the period of 11-12 weeks of pregnancy. The discharge is profuse and bloody What must the doctor do in this case? |
| Correct answer | Perform uterine curettage |
| B | Conduct blood transfusion |
| C | Conduct tocolytic therapy |

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| D | Prescribe progesterone |
| E | Perform conservative monitoring |