

# Gynecologist Interview Questions And Answers Guide.



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## Gynecologist Job Interview Preparation Guide.

### Question # 1

Tell us is Some Bleeding Normal When Starting Hormone Replacement Therapy?

#### Answer:-

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

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### Question # 2

Tell us in Scanning Report Of My Wife At Gender Column It Is Written As Iii, What Is The Meaning?

#### Answer:-

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

[Read More Answers.](#)

### Question # 3

Tell us what qualities should a resident medical officer posses? Which ones do you have and which ones do you lack?

#### Answer:-

This is basically a variation of the strengths and weaknesses question.

But there is also a big hint stating you in the face. The position description, in particular the role statement and the selection criteria. So you can use these to your advantage.

You might start by saying something like:

"Well I understand from reading the position description that the key roles and capabilities are as such..."

This shows you have done your research and you are willing to align your opinions with the panels views of what a good resident medical officer is.

You can then go on to highlight the sort of qualities that an individual might need to meet these criteria and match them to your own.

So for example. Ability to work under pressure is often a selection criteria. So you could talk about this requires a quality of being calm in a crisis and being able to juggle a number of tasks.

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### Question # 4

Please explain have you ever participated in patient education?

#### Answer:-

Tests the candidate's experience with educating their patients.

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### Question # 5

Do you know what Is Azathioprine?

#### Answer:-

Azathioprine takes a number of months to exert its anti-inflammatory effect and therefore has a limited role in the acute management of Crohn's disease, though it can be started at the time of an acute flare of Crohn's.

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### Question # 6

Tell us can Medication Is Known To Cause Hypokalaemia?

#### Answer:-

The medication is most likely to be a selective 2-agonist such as salbutamol, which leads to a tremor, palpitations, headaches and hypokalaemia at high doses. Washing the mouth after administration of inhaled steroids is recommended, no matter what dose is given. Atrovent is the trade name for ipratropium bromide, which is more useful in chronic obstructive pulmonary disease than in asthma, although it can be used in an acute asthma attack.



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### **Question # 7**

Tell us what Medications Are Acceptable During Pregnancy?

#### **Answer:-**

The universal disclaimer on medications during pregnancy is no medication has been studied completely. No study could take into account all the variables of human development that pertain to the specific medication. That being said, avoid taking unnecessary medications. This is most important during the first eight weeks of the pregnancy. Certainly, there are chronically prescribed medications such as anti-depressants, anti-hypertensives and thyroid medication, to name a few, which can be very important to the mother's well-being during pregnancy and will be continued. Sometimes, a medication will be changed to a safer alternative. Specific questions regarding medications can be handled at clinic appointments.

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### **Question # 8**

Explain me is It Possible To Have A Polyp In The Uterus?

#### **Answer:-**

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

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### **Question # 9**

Suppose A 35 Year Old Woman Has Been Listed For Hysteroscopy. What Are The Indications For Hysteroscopy In A Woman Of This Age?

#### **Answer:-**

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

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### **Question # 10**

Explain me a situation where you displayed teamwork?

#### **Answer:-**

Again. We are starting to repeat ourselves with this question and questions about communication, conflict and leadership.

Great examples here are situations where you noticed your colleague was struggling. Perhaps they had a bigger caseload than you. And you stepped in. Others might include helping to onboard a new doctor to the team.

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### **Question # 11**

Tell us what has been your most stressful experience? How did you cope with it?

#### **Answer:-**

Reveals how the candidate handles stress.

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### **Question # 12**

Tell me what has been one of the most difficult cases you've worked with?

#### **Answer:-**

Tests the candidate's ability to overcome a crisis and work under pressure.

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### **Question # 13**

If I Am Patient Of Acid Reflux, How Can I Get Rid Off?

#### **Answer:-**

Fortunately, there are things that can be done to help with reflux. The most obvious answer is some of the many medications that are available to help reduce stomach acid. Some of the least expensive and most effective are even available over the counter, but should be used after discussing your symptoms with your doctor. There are some medications, such as ranitidine and other anti histamine medications (H2 blockers as they are sometimes called), that can be very effective for many people and have a very mild side effect profile.

They are most effective when taken as directed, and the efficacy does tend to decrease if they are not timed appropriately with regards to the meals. Other excellent medications are those that are known as proton pump inhibitors, or PPIs, which can be even more effective. The over the counter doses are effective for most people, but in severe cases prescription strength doses can also be used. These medications also have relatively mild side effects, but should be discussed with your doctor. In addition to these medications, lifestyle changes should be tried before any medications.

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### **Question # 14**

Please explain what Are The Testing Options Available For Assessing The Risk Of Down's Syndrome?

#### **Answer:-**

Most people understand that Down's syndrome is a group of problems caused by having an extra 21st chromosome (3 instead of 2). These children have numerous



issues including mental retardation. The risk of having a baby with Down's syndrome increases with maternal age. The risk at...

- \* Age 20 is 1/1,667
- \* Age 25 is 1/1,250
- \* Age 30 is 1/952
- \* Age 35 is 1/385
- \* Age 40 is 1/106
- \* Age 45 is 1/30

All women are offered screening options during pregnancy. All women 35 and over are considered to be high risk and are offered diagnostic services as well. I add this one caveat. Think about what you will do with information before you obtain it. Are you getting this information so that you may avoid having a Down's baby with a potential abortion? Is it valuable to you to know the answer to this question before delivery, just to be prepared? Just because there is testing available doesn't mean you have to do it

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### **Question # 15**

Explain me is Irregular Bleeding Common When Starting A New Birth Control Pill?

**Answer:-**

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

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### **Question # 16**

Do you know what Is The Most Effective Form Of Birth Control?

**Answer:-**

There are many birth control methods on the market today that are highly effective. The primary methods of birth control available include  
Barrier Methods - Generally speaking, barrier methods do not prevent pregnancy as effectively as hormonal methods or IUD's, and they must be used EVERY TIME that you have sex. Barrier methods Include condoms, sponges, and diaphragms.  
Hormonal Methods - Statistically very good at preventing pregnancy. Hormonal methods include birth control pills, shots (Depo-Provera), and the vaginal ring.  
Intrauterine Devices (IUD's) - IUD's are inserted into your uterus, work for 5-10 years at a time, and are a generally safe and effective way to prevent pregnancy. The Mirena IUD contains a hormone that can help with heavy periods and cramping.  
Natural Family Planning - Also referred to as "fertility awareness," Natural Family Planning can be effective provided that you and your sexual partner are extremely careful, and are especially mindful of what times of the month are best to engage in sexual activity. Women practicing natural family planning are strongly encouraged to keep good records so as to know when they are fertile; and for times when you ARE fertile, you will need to abstain from sex, or use a barrier method. With all of this in mind, it's important to remember that all women are different, and that the best way to find out what method is best for you is by consulting with a licensed OB GYN.

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### **Question # 17**

Tell us you are covering the obstetrics and gynaecology wards one evening and a 35 year old female patient who had a caesarian section 2 days ago is now presenting with severe shortness of breath and chest pain. What is your approach?

**Answer:-**

You can insert here any typical clinical scenario which might happen on the ward where the resident medical officer is called to review. Chest pain and other types of escalating pain are favourite scenarios. Usually the scenario is in two parts. The initial question which is in the form of the information you might be given when a member of nursing staff calls you.

The next bit is the examination findings. Generally the examination findings are either of a patient who is deteriorating or already in need of an emergency response. So the key aspects of responding to these questions are not to give a textbook answer to the clinical problem. But to frame it in terms of your role as a very junior member of staff. You need to spell it out to the panel. You need to let them know that:

- \* You would prioritise the call - Go Straight Away.
- \* You would ask for vital signs over the phone.
- \* You would ask the nurse to call an emergency response. If the vitals warranted it.
- \* You would ask the nurse to stay with you to help.
- \* You would have in the back of your mind a question about "What could be the worst case scenario here?" for example a pulmonary embolus.
- \* You would take a quick history and examine the patient.
- \* You would have a low threshold for calling a senior colleague and/or an emergency response.

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### **Question # 18**

Suppose patient Feeling Randomly Sick With Headaches. What Could It Be?

**Answer:-**

Persistent headaches are not something that can be ignored, as this could be your body trying to send you a signal that there is something wrong. Often, the history and description of the headache can be quite helpful as you attempt to determine what is the cause of your headaches so that you can know how to get better. If your headaches are associated with certain movements, activities, foods, or other triggers, than this can serve as a clue to you and your doctor to help you feel better.

If, on the other hand, your symptoms are somewhat predictable and come on in the same way, then it is also possible to use this information to diagnose the type of headache, which then gets you closer to getting some help with your pain and other symptoms. Migraines are classically associated with light sensitivity, nausea and vomiting, and intractable and incapacitating pain. People with migraines may have a family history of them, and they may have an aura, or symptoms that routinely come before the headache and let them know it is coming.

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### **Question # 19**

If Patient Having Chronic Neck Pain For 4 Days. Medication And Rmt Massage Have Done Nothing, Pain Is 10/10 Now. What Could It Be?

**Answer:-**



It is not normal for pain to become so severe and fail to respond in any way to conservative therapy, and so your doctor should discuss this with you in more detail to make sure that there is nothing serious that is causing your symptoms. Neck and muscle spasms can be common in some people with a history of spine injury or trauma, and can be severe and debilitating. They should not be a new onset symptom for most people, however, unless you have had some precipitating event. Massage and things to help the muscles relax is often a great idea to help with some of the mild aches and pains that we can have from time to time, and the fact that you had no improvement is worrisome. Your doctor may entertain other possible explanations for this pain in addition to trauma and misuse injuries. He or she may decide it is important to get some imaging and complete a physical exam looking for things that might be amiss. Shooting pain can be a concern for nerve injury.

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### **Question # 20**

Explain me should I Continue To Have A Pelvic Exam Each Year If I Have Had A Hysterectomy?

#### **Answer:-**

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

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### **Question # 21**

If Patient Have Unbearable Neck To Shoulder Pain Only While On His Period. What Could It Be?

#### **Answer:-**

This is a somewhat interesting phenomenon that will take more visits to your doctor to help explain. Your OB/GYN is likely a good place to start, as he or she will be best positioned to help sort out the hormonal element to your symptoms. Another option might be a neurologist or spine surgeon, either of which may be able to help with your symptoms at the level of your neck. An ear nose and throat surgeon may offer some other insight that could be helpful. Which ever you choose, the approach to your problem will likely be different. Primary care and medical doctors are more likely to use lab work and your symptoms to help arrive at an answer, and may use medications empirically to see what helps to make you better. A surgeon, on the other hand, is more likely to listen to your symptoms, complete an exam, and recommend imaging and other anatomic studies that can help to determine what is causing your symptoms. The pain may have a component of something that changes on a monthly basis with your menstrual cycle. This could be a swelling, or even something as simple as a change in the blood flow.

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### **Question # 22**

Explain a time when you were able to console an emotional patient. How did you do it?

#### **Answer:-**

Shows compassion.

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### **Question # 23**

Suppose a patient has been experiencing abdominal pain after getting a Nexplanon implant. How do you proceed?

#### **Answer:-**

Tests the candidate's knowledge and diagnostic capabilities.

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### **Question # 24**

Suppose A 34 Year Old Woman Is Found To Have A Monochorionic Twin Pregnancy At 12 Weeks Gestation In Her First Pregnancy. She Requests Information On The Antenatal Risks To Her And Her Fetuses And Their Management. How Would You Counsel Her?

#### **Answer:-**

because of the age of the woman, it will be too difficult to continue the pregnancy. Other than the multiple pregnancy, She have only one placenta for both child. so better she can do LSCS at the onset of labour. Tell the possibility and de merits of the LSCS to the PT.

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### **Question # 25**

Suppose 35 Year Old Woman Is Thought To Have A Vesico-vaginal Fistula. What Are The Main Causes Of Vesico-vaginal Fistulas?

#### **Answer:-**

The most common cause of fistula was trauma associated with pelvic operation, and the operation most often involved was total abdominal hysterectomy. Malignant disease of the pelvic organs was the second most common cause, while radiation therapy and obstetrical causes were next in the order of frequency.

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### **Question # 26**

Tell us how Would You Assess And Treat A 52 Year Old Woman Who Complains Of Heavy Prolonged Menstrual Bleeding?

#### **Answer:-**

It may or maynot be any symptom of ovarian Ca, or fibrous formation of the uterus or any other complications. So better she go for hysteroscopy, and blood study for any infestations of micro organism. check the platelet level in blood, and WBC count and BT,CT .

Her age is above 50. so in this age there is less chance menstruation.

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### **Question # 27**

Suppose a 14year Old Woman Attends With Her Mother Because She Has Not Started Menstruating. Outline Your Initial Assessment?

#### **Answer:-**

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

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### **Question # 28**

Tell me have you ever disagreed with a doctor about a patient's care plan? What did you do?

#### **Answer:-**

Tests conflict resolution skills.

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### **Question # 29**

Explain me why Do In Some Cases Patients Feel Chest, Neck And Hands Flush?

#### **Answer:-**

Certainly the thought of carcinoid syndrome is something that crosses the mind in hearing about your symptoms. That is, however, a rather rare process that would be unusual for most people to have. In such a situation, it is good to describe your symptoms and your concerns to your doctor so that he or she can test for the possibility of something as serious or as rare as that condition. There are many other possible explanations, however, many of which are much more common.

It is not unusual for some people to have changes of flushing and some of the other feelings that you describe when they are in stressful or unusual situations. Some of this can sometimes be understood in context of the response that some people have to loud noises or fright, ie, they can faint. This reaction is one extreme on the spectrum of a vagal reaction that can occur in some. On a less extreme note, other can have some of the same symptoms you describe without having something as notable as a syncopal episode. There are often things that can be done to help.

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### **Question # 30**

Tell me is There A Screening Test For Ovarian Cancer?

#### **Answer:-**

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

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### **Question # 31**

Explain me a situation where there was conflict between yourself and another member of a team?

#### **Answer:-**

This question is a big but avoidable trap. You can avoid it by being prepared for it and having an example. Again. The STAR method is your friend and the key here is to be able to demonstrate that you managed the conflict to a point where you were at least able to have a good ongoing working relationship with your colleague.

Its important to not only describe the situation and the conflict. But also take the panel through the steps you took in terms of your communication and collaboration to work with your colleague on the conflict and how you showed respect to them.

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### **Question # 32**

Explain me have you had experience diagnosing and treating postpartum depression?

#### **Answer:-**

Tests the candidate's experience with mental health issues for women.

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### **Question # 33**

Tell us how do you balance medical needs and emotional needs?

#### **Answer:-**

Shows emotional intelligence.

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### **Question # 34**

Tell me what Are The Side-effects Of Magnesium Sulphate Therapy?

#### **Answer:-**

- \* Nausea
- \* Vomiting
- \* Thirst
- \* Flushing of skin
- \* Muscle weakness
- \* Loss of deep tendon reflexes



- \* Respiratory depression
- \* Confusion, drowsiness, coma
- \* Hypotension
- \* Arrhythmias.

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### **Question # 35**

If A Patient Have Abnormal Blood On His Underwear How You Deal?

#### **Answer:-**

Abnormal bleeding can have many different causes, but you have provided some valuable information. First, we have to clarify where exactly the bleeding is coming from. While vaginal bleeding is perhaps the most likely, both the urinary tract and the GI tract can also be a source of bleeding. Either of those would have different causes and explanations, with infections and small sources of bleeding such as hemorrhoids being among the most common reasons for abnormal or untimely bleeding.

With regards to vaginal bleeding, there is a clue that is suggested by the fact that the blood is bright red in color. In general, this can reflect fresher blood that has not started to be broken down. It may also suggest blood that is coming from a source further down the vaginal tract, although that is not necessarily true. There are different conditions that can affect the vaginal or uterine lining and are common explanations for symptoms such as you describe. There are also tumors that can result in abnormal bleeding, and these tumors can be both benign and malignant.

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### **Question # 36**

Tell me is There An Ovarian Tumor With Hair And Teeth?

#### **Answer:-**

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

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### **Question # 37**

Tell us who Is A Specialists Doctor?

#### **Answer:-**

Some doctors specialise in a certain kind of medicine. These physicians are called specialists. They may only treat injuries to a certain part of the body, or only treat patients who have certain diseases. For example, there are physicians who specialise in diseases of the stomach or intestines. Other physicians are "general practitioners" or "family practitioners". This means that they do a little bit of everything. They try to deal with as much of a patient's health problems as they can without sending them to a specialist. A doctor who performs surgery is called a surgeon.

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### **Question # 38**

Can you explain me how Doctor Treat Patients?

#### **Answer:-**

Physicians treat patients by diagnosing them, or figuring out what is wrong. When Physicians diagnose a patient, they begin by asking questions about the patient's symptoms such as fever, headache, or stomach ache. They may ask other questions about things like past illnesses or family members who have been sick. They will then examine the patient, often looking at different parts of the body and listening to the heart and lungs with a stethoscope.

Sometimes they may need to collect blood, use an x-ray machine, or use other tools to look for things they cannot see when examining the patient. Usually, when they have gathered enough information, a doctor can make a diagnosis and then prescribe a treatment. Often they prescribe drugs.

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### **Question # 39**

Explain me what Is Bendroflumethiazide?

#### **Answer:-**

Treatment of hypercalcaemia can include fluid rehydration, loop diuretics, bisphosphonates, steroids, salmon calcitonin and chemotherapy.

In clinical practice intravenous fluids are the first-line agent used to treat hypercalcaemia, both rehydrating the patient and helping to lower the calcium levels. This is combined with the co-administration of bisphosphonates such as pamidronate, which exert their maximal effect 5-7 days after administration.

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### **Question # 40**

Can you explain me what Are The Parameters Of Life-threatening Asthma?

#### **Answer:-**

Peak expiratory flow rate of < 33% of best or predicted, Silent chest, Exhaustion, Hypotension, Bradycardia, Coma, Rising PaCO<sub>2</sub> 13) What are the parameters for diagnosing a severe asthma attack are, Peak expiratory flow rate of between 30% and 50% of expected ? Respiratory rate greater than 25 breaths/minute -> Tachycardia: heart rate > 100 beats per minute

Inability to complete sentences with one breath

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### **Question # 41**

Explain me a situation where you displayed effective communication skills?

#### **Answer:-**



This is similar to the conflict question above. And in fact. It is perfectly okay to use the same example to answer more than one question. Other typical situations to think about for this question, include complex patients and / or patients and families with communication challenges and / or patients and families who are upset with their care.

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### **Question # 42**

Tell me what do you do to stay current with medical findings and practices?

#### **Answer:-**

A good candidate is interested in the latest developments in medical research and patient care.

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### **Question # 43**

Explain me how Communication Skills Help Patient?

#### **Answer:-**

Once a patient begins developing trust in a doctor, the chances of him/her recovering increases as his/her confidence in the doctor goes up and s/he begins to believe that s/he can recover.

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### **Question # 44**

Tell us can An Ovarian Cyst Be Normal?

#### **Answer:-**

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

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### **Question # 45**

Explain me what Is C-reactive Protein?

#### **Answer:-**

In SLE the erythrocyte sedimentation rate is classically raised while C-reactive protein levels can stay normal and therefore CRP is also not as useful as the other investigations to monitor disease activity and progression.

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### **Question # 46**

Tell us what is your favorite area of women's healthcare to work in?

#### **Answer:-**

Tests the candidate's passion for women's health.

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### **Question # 47**

Do you know what Is Anti-histone Antibody?

#### **Answer:-**

In drug-induced SLE anti-histone antibody is present in 90% of patients, although this is not specific for the condition. Anti-nuclear antibody is positive in 50% of patients as opposed to 95% of patients with idiopathic SLE.

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### **Question # 48**

Do you know what Is Venous Thrombosis?

#### **Answer:-**

There are numerous extra-gastrointestinal manifestations of inflammatory bowel disease that occur in both ulcerative colitis and Crohn's disease, such as uveitis, conjunctivitis, arthritis, pyoderma gangrenosum and erythema nodosum. Some occur primarily in Crohn's, such as gallstones and renal stones due to the area of bowel affected, while patients with ulcerative colitis are more likely to develop primary sclerosing cholangitis and venous thromboses.

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### **Question # 49**

Suppose a 35 Year Second Gravida With Single Umbilical Artery And Ctev (club Foot)?

#### **Answer:-**

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

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### **Question # 50**



Tell me what Are Fibroids?

**Answer:-**

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

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**Question # 51**

Tell us what Is Terbutaline 10 Mg Nebulised?

**Answer:-**

In the management of asthma, patients should be sitting upright in bed and receiving 100% oxygen. Salbutamol is given at a dose of 5 mg nebulised, not 500 micrograms. Ipratropium bromide and steroids should then be considered.

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**Question # 52**

Tell me why Doctors Should Learn Communication Skills?

**Answer:-**

Communication skills play a major role in developing patient-doctor relationship. And miscommunication could lead to clashes with relatives/friends of patients over care given to the latter.

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**Question # 53**

Explain me what Is Ceftriaxone?

**Answer:-**

A cephalosporin such as ceftriaxone is first-line treatment in patients with streptococcal meningitis. Benzylpenicillin would be more appropriate if Neisseria meningitidis was suspected.

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