

Nr 602 wk 8 poss questions

ACOG guidelines regarding well women exams

What is the ASCCP recommended management for an ASCUS (atypical squamous cells of undetermined significance) pap result with a positive high-risk HPV 16 cotest in a 26-year-old woman without a history of abnormal pap smears?

- **Colposcopy**

A well-woman visit for an adolescent should include which of the following?

- **A general health history focusing on reproductive and sexual health concerns (menses, gynecologic, and pregnancy related) and psychosocial (family related, peer related, emotional, and physical as well as related to abuse, drug use, and alcohol use) concerns**
Physical exam, screening tests, and immunizations as indicated by the health history and gynecologic considerations for an external-only inspection of the genitalia

ACOG Pap smear guidelines

A Bethesda system Pap smear report that reads LSIL is most consistent with which classification?

- **CIN 1**

A single Pap smear reading of ASCUS in a patient negative for HPV infection should have what as follow-up?

- **Routine screening**

A female patient is 35 years old. She has never had an abnormal PAP smear and has had regular screening since age 18. If she has a normal PAP smear with HPV testing today, when should she have the next cervical cancer screening?

- **5 years**

A young sexually active client at the family planning clinic is advised to have a Papanicolaou (Pap) smear. She has never had a Pap smear before. What should the nurse include in the explanation of this procedure?

- **The Pap smear can detect cancer of the cervix**

Lab results on your 26-year-old patient show a negative Pap smear with a positive human papillomavirus (HPV) screen. Which procedure will be required next?

- **Repeat Pap and HPV screen**

Which of the following is not part of the criteria for an older woman to cease having any future Pap tests performed?

- **Over 55 years of age**

Amenorrhea (Primary and Secondary)

You are evaluating a 17-year-old Emily who presented with amenorrhea and normal secondary sex characteristics. The purpose of the progesterone challenge is to ascertain the presence of?

- **Endogenous estrogen**

A 17-year-old female patient presents with amenorrhea for 4 months she did experience menarche at age 15 but had not had a menstrual cycle since. On physical examination, it is noticed that she has normal secondary sexual characteristics. The nurse practitioner will consider a progesterone challenge to determine the presence of adequate

- **Endogenous estrogen**

A teenage patient presents with amenorrhea and normal secondary sex characteristics. A progesterone challenge is ordered. The purpose is to determine the presence of _____?

- **Endogenous estrogen**

A 16-year-old girl who comes to your office with a history of secondary amenorrhea. She experienced menarche at age 10, regular cycles for 2 years. She has not menstruated now for 4 years. In your initial consideration of differential diagnoses, what is the most frequent etiology of this problem:

- **Eating disorder**

18yo female c/o secondary amenorrhea. On exam, there is normal secondary sex characteristics and normal genitalia. Pregnancy is ruled out. What would necessitate further eval?

- **Galactorrhea**

Primary amenorrhea is best described as:

- **Failure to menstruation to occur by 13 yr**

A nurse practitioner is caring for a woman with primary and secondary amenorrhea. The pelvic exam was normal. Which of the following may be the cause if etiology originates in the hypothalamus?

- **Sheehan's syndrome**

American Cancer Society recommendations

A nurse practitioner is participating in a women's health fair. When educating the women about risk factors for breast cancer, which of the following statements is incorrect?

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- **Fibrocystic breast disease**

When educating women about breast cancer risk factors, which statement is incorrect?

- **Fibrocystic breast disease**

A woman with lobular carcinoma in situ has a relative risk of developing invasive breast cancer of

- **8.0**

Androgen insensitivity/resistance syndrome

Changes in hormonal regulation during menopause result in the gradual cessation of menstruation. From which gland is Androstenedione secreted?

- **Adrenals**

ASCUS/HSIL results from Paper Test Report

A Pap smear result of atypical squamous cells of undetermined significance—rule out high-grade squamous intraepithelial lesion (ASCUS r/o HGSIL) will require which procedure next?

- **Colposcopy**

A Pap smear result of atypical squamous cells of undetermined significance (ASCUS) will require which procedure next?

- **Follow up pap smear**

Bartholin glands and cysts

A 25-year-old presents with a report of a very tender area just near her introitus and to the left of her perineum. Very painful sex is how she knew "something wasn't right." She showered and when washing, she felt a "pea-sized" painful lump on the left side of her "bottom." She tells you she looked at it with a mirror and it was very small, but now it is the size of a ping-pong ball and getting worse.

When you inspect her external genitalia, you are amazed at the size and appearance of the "lump."

You note what appears to be an abscess on the left medial side of the labia minora, and there is some edema extending into the perineum. Your diagnosis for this presentation is:

- **Bartholin's cyst**

You explain to this young woman what this "lump" is and let her know you will be referring her to a gynecologist you consult with regularly. You explain to her the likely treatment as follows:

- **A possible incision might be necessary and a catheter placed for two to four weeks to allow for drainage and appropriate healing.**

A client at the women's health clinic complains of swelling of the labia and throbbing pain in the labial area after sexual intercourse. For what condition does the nurse anticipate the client will be treated?

- **Bartholinitis**

25yo female c/o tender area near her introitus and to the L of her perineum. Very painful sex was first sign. Initially bump was very small, but now is ping-pong ball size. On exam, abscess is present on L medial side of labia minora and there's edema extending into perineum. What is dx?

- **Bartholin's cyst**

Which of the following choices represents a disorder of the reproductive tract that causes pain, erythema, dyspareunia, and a perineal mass?

- **Bartholin's cyst**

A nurse practitioner instructor is reviewing the anatomy of the external genitalia. At the opening of the vagina are the Bartholin's glands. Which of the following describes the function of these glands?

- **Production of alkaline secretions for sperm viability**

BMI

CDC recommendations regarding STDs and PID

Cervical cancer screening

A 23-year-old women presents to your practice with a chief complaint of postcoital bleeding. Which of the following would NOT be included in the initial assessment of this patient?

- **Uterine biopsy**

a nurse practitioner is educating a woman who has a colposcopy ordered. Which of the following most accurately describes a colposcopy?

- **A procedure that visualizes the vaginal, vulvar or cervical epithelium with magnification to identify abnormal areas that may need to be biopsied**

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A 33-year-old woman presents to your clinic complaining of a dark brown watery vaginal discharge and postcoital bleeding. There is a strong history of multiple unprotected sexual encounters. Which of the following findings on examination would be suspicious for cervical cancer?

- **A very firm, easily friable cervix**

A 23-year-old woman comes to the clinic for a Pap smear. After the examination, the client confides that her mother died of endometrial cancer 1 year ago and says that she is afraid that she will die of the same cancer. Which risk factor stated by the client after an education session on risk factors indicates that further teaching is needed?

- **Late onset menarche**

The frequency for cervical screening depends on the patient and her age. What is the longest recommended time interval between cervical screens for patients who are 65 years-old or younger?

- **5 years**

What is the leading cause of death from a gynecologic malignancy in American women?

- **Cervical cancer**

Cervix/Uterus examination

A 49-year-old female patient presents with a chief complaint of dark, watery brown vaginal discharge. Part of the differential diagnosis includes that of cervical cancer. Which of the following best describes what might be visualized?

- **Ulcerated firm cervix**

A nurse practitioner is completing a speculum exam on a female patient. Which of the following findings would be considered a normal surface characteristic of the cervix?

- **Small, yellow, raised around area on the cervix**

In collection of a specimen for a PAP smear, how is the endocervical specimen collected?

- **After the ectocervical specimen with a brush**

Cimetidine

Condyloma acuminata

Treatment options for patients with condyloma acuminatum include:

- **Imiquimod (aldara)**

Which of the following best describes lesions associated with condyloma acuminatum?

- **Verruciform**

Treatment options for patients with condyloma acuminatum include all of the following except:

- **Topical acyclovir**

All of the following findings are associated with secondary stage of an infection by the organism *Treponema pallidum* except :

- **Condyloma acuminata**

Patient education for condylomata acuminata should include all the following **except**:

- **Treatment and elimination of visible warts is a sign of cure, and transmission will not occur**

Jenna was evaluated and diagnosed with condyloma acuminatum. Treatment options for Jenna will include all of the following **except**:

- **Topical acyclovir**

Condyloma lata

Which condyloma do we see in syphilis?

- **Condyloma lata-flat**

Contraceptives

the cytology (Pap smear) result for a 21-year-old sexually active student whose partner uses condoms inconsistently shows a large amount of inflammation. Which of the following is the best follow-up?

- **Call the patient and tell her that she needs return to the clinic for chlamydia and gonorrhea testing**

A college freshman who is using oral contraceptives calls the nurse practitioner's office asking for advice. She forgot to take her pills 2 days in a row during the second week of the pill cycle and wants to know what to do. What is the best advice?

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- **Take 2 pills today and two pills tomorrow, and have your partner use condoms for the rest of the pill cycle**

A 17-year-old high school student is considering her birth control options. She wants to know more about Seasonale. Which of the following statements is false?

- **It is a progesterone only method of birth control and does not contain estrogen**

A 35-year-old smoker is being evaluated for birth control choices. The patient has a history of pelvic inflammatory disease (PID) along with an embolic episode after her last pregnancy. Which of the following methods of birth control would you recommend?

- **Condoms and the vaginal sponge (TODAY sponge)**

A 20-year-old woman visiting the clinic says that she wishes to begin using depot medroxyprogesterone acetate (Depo-Provera) as a form of birth control. What important information should the nurse include when teaching the client about Depo-Provera?

- **Calcium intake and exercise should be increased because of the possible loss of bone mineral density with increasing duration of use**

A woman questions the nurse about the effectiveness of oral contraceptives. What most important factor about the effectiveness of oral contraceptives should be included in the reply to this question?

- **User motivation**

A female client who has been sexually active for 5 years is found to have gonorrhea. The client is upset and asks the nurse, "What can I do to keep from getting another infection in the future?" Which statement by the client indicates that the teaching by the nurse was effective?

- **My partner has to use a condom all the time**

Contraceptives that contain estrogen-like and/or progesterone-like compounds are prepared in a variety of forms. Which contraceptives should the nurse tell clients have a hormonal component?

- **Oral drugs, transdermal agents**

A client seeking advice about contraception asks a nurse about how an intrauterine device (IUD) prevents pregnancy. How should the nurse respond?

- **It produces a spermicidal intrauterine environment**

A nurse is teaching a group of women about the side effects of different types of contraceptives. What frequent side effect associated with the use of an intrauterine device (IUD) should the nurse discuss during the teaching session?

- **Excessive menstrual flow**

A nurse is teaching a female client about the side effects of estrogen in an oral contraceptive. Which common side effect identified by the client indicates to the nurse that the teaching was effective?

- **Nausea**

A nurse is counseling a female client with type 1 diabetes who requests contraceptive information. What contraceptive method should the nurse recommend?

- **Diaphragm with spermicide**

What instruction should a nurse include when teaching about the correct use of a female condom?

- **Remove the condom before standing up**

A client asks the nurse about the use of an intrauterine device (IUD) for contraception. What information should the nurse include in the response?

- **Expulsion of the device, occasional dyspareunia, risk for perforation of the uterus**

A 16-year-old client has a steady boyfriend with whom she is having sexual relations. She asks the nurse how she can protect herself from contracting HIV. What should the nurse advise her to do?

- **Insist that her partner use a condom when having sex**

Which form of birth control presents the highest risk to a female patient if she is exposed to a sexually transmitted disease (STD)?

- **Intrauterine device**

What choice below has no precautions for oral contraceptive pill use?

- **Varicose veins**

A 21-year-old woman comes into your practice seeking birth control. She has only recently become sexually active and has consistently used condoms for safe sex. Your history reveals that she does not use tampons during her menses and has very little knowledge about female reproductive anatomy. Based on this information, which of the following birth control choices would be least likely to meet her needs for contraceptive management?

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- **Nuvaring**

Cystocele

Cystocele is best defined as

- **Descent or prolapse of the bladder**

While a speculum is retracting the posterior vaginal wall, a 51-year-old patient is asked to strain down. There is a bulge from the anterior vaginal wall. This is most likely

- **Cystocele**

The situation where the bladder forces the anterior vaginal wall down and out is termed

- **Cystocele**

Which of the following is an effect of estrogen deficiency on paravaginal tissue?

- **Cystocele**

A woman is admitted for repair of cystocele and rectocele. She has nine living children. In taking her health history, which of the following would the nurse expect to find?

- **Stress incontinence with feeling low abdominal pressure**

Dysmenorrhea

Which of the following substances is responsible for the symptoms of dysmenorrhea?

- **Prostaglandins**

the first line treatment of severe menstrual cramps that having been occurring for 4 months in a patient with primary dysmenorrhea includes which of the following?

- **Ibuprofen**

A 40-year-old female presents with an abnormal menstrual cycle with menorrhagia and intermenstrual bleeding. The nurse practitioner suspects the patient may have dysfunctional uterine bleeding (DUB) and orders tests for follicle stimulating hormone (FSH) and luteinizing hormone (LH) levels. Both of these lab values are elevated. What is the most likely cause of DUB in this patient?

- **Onset of climacteric**

A patient who a nurse practitioner is seeing for the first time has the past medical history of primary dysmenorrhea. She recalls that which of the following is considered as the primary etiology?

- **Prostaglandin production**

Dysfunctional uterine bleeding (DUB). She is concerned about why this is happening to her. You recall which of the following is the most common cause of DUB?

- **Anovulation**

Sylvia is 44-year-old women with dysfunctional uterine bleeding (DUB) and is unable to use oral contraceptives. Which of the following medications can be used for management of DUB?

- **Medroxyprogesterone**

a 24-year-old female patient has been diagnosed with primary dysmenorrhea. Which of the following medications would be used as a first line to help control her symptoms?

- **Non-steroidal anti-inflammatory drugs**

A nurse practitioner is teaching an undergraduate course in women's health. A student asks about the etiology of the pain that occurs with primary dysmenorrhea. Which of the following response is correct?

- **Prostaglandin release and synthesis**

Anna, 25-year-old, presents with dysmenorrhea. She states that her sister and mother have endometriosis, so she would like to be evaluated for it. Which of the following is consistent with a diagnosis of endometriosis?

- **Pelvic pain and dyspareunia**

Which is not a common cause of irregular menstrual bleeding?

- **Anovulation**

Which of the following is a "classic" symptom of endometriosis?

- **Progressive dysmenorrhea**

A 16-year-old female is diagnosed with primary dysmenorrhea. She has taken over the counter ibuprofen in 800 mg increments every 8 hours during menses for the past 3 months with minimal relief of symptoms. What intervention will provide greatest relief of dysmenorrhea symptoms?

- **Combined oral contraceptives**

A woman visits the clinic because she has dysmenorrhea. What goal should the nurse identify for this client?

- **Easing the pain of the client's menstruation**