

Beckmann and Ling's Obstetrics and Gynecology / Edition 8/ 8th edition TESTBANK

Chapter 1: Women's Health Examination and Women's Health Care Management

1:

Elevating the head of the examining table approximately 30 degrees facilitates

a:

the observation of the patient's responses

b:

the ability of the patient to comfortably look around to distract her from the examination

c:

the contraction of the abdominal wall muscle groups, making the examination easier

d:

comfortable blood pressure measurement

e:

the physician not being distracted by eye contact with the patient

2:

Which of the following uterine positions is most associated with dyspareunia?

a:

Midposition, retroflexed

b:

Retroverted, anteflexed

c:

Anteverted, anteflexed

d:

Retroverted, retroflexed

e:

Midposition, anteflexed

3:

Inquiry concerning adult and child history of sexual abuse should be included in the sexual history

a:

if time permits

b:

in visits where there are suspicious physical findings but not otherwise

c:

in visits where sufficient time is allotted

d:

in all new patient visits

e:

in visits where a specific indication is noted

4:

Peau d'orange change in the breast is associated with

a:

edema of the lymphatics

b:

jaundice

c:

too vigorous breastfeeding

d:

overly tight undergarments

e:

galactorrhea

5:

Which kind of speculum is often most suitable for examination of the nulliparous patient?

a:

Morgan's speculum

b:

Endoscopic speculum

c:

Ling speculum

d:

Graves speculum

e:

Pederson speculum

6:

Which uterine configuration is most difficult to assess for size, shape, configuration, and mobility?

a:

Midposition

b:

Anteverted

c:

There is no difference in difficulty

d:

Retroverted

7:

Which type of speculum is most appropriate for the examination of a parous menstrual woman?

a:

Ling speculum

b:

Graves speculum

c:

Pederson speculum

d:

Endoscopic speculum

e:

Morgan's speculum

8:

Menopause is defined as the cessation of menses for greater than

a:

9 months

b:

36 months

c:

12 months

d:

18 months

e:

24 months

9:

In a woman describing sufficiently frequent sexual encounters, infertility typically is described as a failure to conceive after

a:

3 months

b:

9 months

c:

12 months

d:

18 months

e:

6 months

10:

During bimanual examination of the adnexa in normal premenopausal women, the ovaries are palpable

a:

all the time

b:

almost never

c:

about one-half of the time

d:

about three-quarters/most of the time

e:

about one-quarter of the time

11:

If a patient becomes uncomfortable with a topic during a history-taking session, the best response of the physician is to

a:

address the patient's discomfort in a positive and supportive manner

b:

discontinue discussion of the topic to avoid further patient discomfort

c:

discontinue discussion to avoid damage to the patient-physician relationship

d:

continue after making a joke to relieve tension

e:

ignore the discomfort and proceed with questioning

12:

Which of the following statements about the steps in the breast examination is correct?

a:

Palpation is done first

b:

Palpation and inspection are done simultaneously

c:

Palpation is only done if inspection is abnormal

d:

Palpation may be done with detailed inspection if a woman is especially modest

e:

Inspection is done first

13:

Questions that promote the physician's fullest understanding of the patient's situation are best characterized as

a:

compassionate

b:

chronological

c:

sympathetic

d:

emphatic

e:

evidence based

14:

The last menstrual period is dated from the

a:

first day of the last normal period

b:

last day of the last normal period

c:

first day of the last bleeding episode

d:

last day of the last bleeding episode

15:

The passage of clots during menstruation

a:

is always abnormal

b:

may be either normal or abnormal

c:

is always normal

d:

is extremely rare

16:

In the abbreviation of the obstetric history-G[1] P[2] [3] [4] [5]-"1" stands for the number of

a:

living children

b:

pregnancies

c:

term pregnancies

d:

preterm pregnancies

e:

abortions

17:

In the abbreviation of the obstetric history-G[1] P[2] [3] [4] [5]-"2" stands for the number of

a:

living children

b:

pregnancies

c:

term pregnancies

d:

preterm pregnancies

e:

abortions

18:

In the abbreviation of the obstetric history-G[1] P[2] [3] [4] [5]-"3" stands for the number of

a:

living children

b:

pregnancies

c:

term pregnancies

d:

preterm pregnancies

e:

abortions

19:

In the abbreviation of the obstetric history-G[1] P[2] [3] [4] [5]-"4" stands for the number of

a:

living children

b:

pregnancies

c:

term pregnancies

d:

preterm pregnancies

e:

abortions

20:

In the abbreviation of the obstetric history-G[1] P[2] [3] [4] [5] "5" stands for the number of

a:

living children

b:

pregnancies

c:

term pregnancies

d:

preterm pregnancies

e:

abortions

21:

Tanner's classification with respect to the breast relates to changes in the breast

a:

before and after lactation

b:

associated with malignancy

c:

associated with maturation

d:

associated with galactorrhea

e:

associated with fibrocystic changes

22:

The rectovaginal examination should be performed

a:

after 52 years of age

b:

at the initial patient visit

c:

only for the evaluation of chronic pelvic pain

d:

only when there are symptoms of pelvic relaxation

e:

at intervals of 5 years

23:

In the gynecologic history, it is often possible to distinguish between vaginitis and pelvic inflammatory disease by inquiring about

a:

the duration of the pain

b:

the symptoms present (fever/chills, itching)

c:

the timing of pain in relation to menses

d:

the association of pain with body position

e:

the use of topical medications

24:

The most common reason for failure to visualize the cervix during the speculum examination is

a:

failure to use lubricant

b:

a full bladder

c:

failure to fully insert the speculum

d:

use of a speculum that has not been warmed

e:

use of the wrong speculum

25:

Prehypertension is defined as a blood pressure range of

a:

80-90/120-139

b:

90-100/120-139

c:

80-90/110-129

d:

70-80/110-129

e:

70-80/120-139

ANS: 1-25. [A, D, D, A, E, D, B, C, C, C, A, E, D, A, B, B, C, D, E, A, C, B, E, C, A]

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Chapter 2: The Obstetrician–Gynecologist’s Role in Screening and Preventive Care

1:

The sensitivity of a screening test is defined as the proportion of

a:

unaffected individuals that test positive

b:

affected individuals that test positive

c:

unaffected individuals that test negative

d:

affected individuals that test negative

2:

The specificity of a screening test is defined as the proportion of

a:

affected individuals that test negative

b:

unaffected individuals that test positive

c:

affected individuals that test positive

d:

unaffected individuals that test negative

3:

Counseling an obese patient to lose weight is an example of

a:

secondary prevention

b:

primary prevention

c:

empathy

d:

engagement

4:

In women, the thyroid-stimulating hormone screening test should be performed at what interval?

a:

Every 1-2 years from age 40 years, then yearly after age 50 years

b:

Every 5 years after age 50 years

c:

Annually from puberty or from the onset of sexual activity

d:

Every 5 years from age 19 years, then every 3-5 years after age 65 years

5:

The Pap smear for cervical dysplasia should be performed at what interval?

a:

Every 2-3 years after age 30 years if three consecutive annual tests are negative

b:

Every 5 years from age 19 years, then every 3-5 years after age 65 years

c:

Every 1-2 years beginning at age 65 years

d:

Every 1-2 years from age 40 years, then yearly after age 50 years

6:

A cholesterol/lipid profile should be performed for women without risk factors at what interval?

a:

Every other year from age 40 years, then yearly after age 50 years

b:

Every 5 years after age 45 years

c:

Every 3-5 years after age 65 years

d:

Every 5 years from age 19 years, then every 3-4 years after age 65 years

7:

A mammography to detect breast cancer should be performed at what interval in women at average risk?

a:

Every 1-2 years after age 65 years

b:

Every 5 years after age 19 years, then every 3-4 years after age 65 years

c:

Every other year from age 40 years, then yearly after age 50 years

d:

Every 3-5 years after age 45 years

8:

A colonoscopy to detect colorectal cancer should be performed at what interval for women at average risk?

a:

Every 10 years starting at age 50 years

b:

Every 1-2 years starting at age 40 years

c:

Every 10 years starting at age 65 years

d:

Every 10 years from age 19 years, then every 3-4 years after age 65 years

9:

Which of the following is the most appropriate screening mechanism for cervical dysplasia?

a:

Pap smear

b:

Serum HPV titer

c:

HPV-DNA testing

d:

Colposcopy of suspicious lesions

10:

Which of the following is the most appropriate screening mechanism for colorectal cancer?

a:

Hemogram

b:

Colonoscopy

c:

Physical examination of suspicious lesions

d:

CT scan

11:

Which of the following is the most appropriate screening mechanism for thyroid disease?

a:

Thyroid-stimulating hormone

b:

Free thyroxine

c:

Yearly physician examination

d:

Thyroid-binding globulin

12:

What is the appropriate interval for Pap testing in women who have had a total hysterectomy for reasons other than cervical dysplasia?

a:

Every 2 years following the hysterectomy

b:

Every 5 years following the hysterectomy

c:

No additional Pap testing is needed

d:

Every year following the hysterectomy

13:

In sexually active women age 25 or younger, regular screening for Chlamydia should occur

a:

only if the woman is at high risk for infection

b:

every 3-5 years

c:

annually

d:

every 2 years

14:

Bone mineral density testing is recommended for women without risk factors for osteoporosis beginning at what age?

a:

40 years

b:

65 years

c:

50 years

d:

Testing is not recommended for women with no risk factors

15:

A 40-year-old woman comes for an initial visit. Her BMI is 30 and she had previously given birth to an infant weighing 9.5lb. Which of the following initial screening tests is indicated for this patient?

a:

Fasting blood glucose

b:

Colonoscopy

c:

TSH level

d:

Bone mineral density testing

ANS: [b,d,b,b,a,b,c,a,a,b,a,c,c,b,a]

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Chapter 3: Ethics, Liability, and Patient Safety in Obstetrics and Gynecology

1:

The principle that the patient should be given what is "due" most closely matches the principle of

a:

justice

b:

nonmaleficence

c:

beneficence

d:

autonomy

2:

The principle that there should be respect for the patient's right to make choices based on her beliefs and values best matches the principle of

a:

beneficence

b:

nonmaleficence

c:

justice

d:

autonomy

3:

The principle that there is a duty not to inflict harm or injury best matches the principle of

a:

nonmaleficence

b:

autonomy

c:

justice

d:

beneficence

4:

The principle that there is a duty to promote the well-being of the patient best matches the principle of

a:

justice

b:

autonomy

c:

beneficence

d:

nonmaleficence

5:

A 32-year-old patient has delivered at 23 weeks of gestation, 3 days after premature rupture of the membranes. She has discussed the circumstances with her obstetrician and requests that no attempts at

resuscitation should be made. At delivery there are rare gasping, breathing movements. The pediatrician recommends that intubation be done. In this case, the individual with the clearest primary responsibility for this decision is the

a:

obstetrician

b:

pediatrician

c:

hospital risk manager

d:

mother

e:

hospital attorney

6:

Respect for patient wishes (autonomy) primarily requires that there be assessment of which of the following?

a:

Cost of the proposed treatment

b:

The legal risk to the physician and hospital

c:

Patient's ability to consider information

d:

Physician's concurrence with the patient's wishes

e:

Standards of care

7:

A 62-year-old woman with newly diagnosed stage III ovarian cancer refuses chemotherapy. She wants to "go home to die." The next step in evaluating this patient is to

a:

determine insurance coverage for this action

b:

call the family for a conference

c:

accept the patient's wishes and discharge her from the hospital

d:

call the state medical licensing board and hospital attorney

e:

assess the patient's comprehension and look for evidence of impaired decision making

8:

If a pregnant woman rejects medical recommendations, relying on care given in similar cases would be an example of

a:

principle-based ethics

b:

virtue-based ethics

c:

feminist ethics

d:

communication-based ethics

e:

case-based ethics

9:

The concept of informed consent best relates to the principle of

a:

autonomy

b:

justice

c:

beneficence

d:

nonmaleficence

10:

Paternalism violates the ethical principle of

a:

nonmaleficence

b:

beneficence

c:

standard of care

d:

justice

e:

autonomy

11:

The person with primary responsibility to providing informed consent is

a:

the person or physician's staff assigned the task

b:

the patient

c:

the social worker assigned to the patient

d:

the hospital administrator

e:

the physician

12:

In medical liability cases the complaint comes from the

a:

defendant

b:

judge

c:

jury

d:

attorney

e:

plaintiff

13:

Most medical errors are associated with

a:

the use of care guidelines

b:

the use of medications

c:

the use of standards of care

d:

the use of hospital regulations

e:

the use of improper surgical technique

ANS:[a,d,a,c,d,c,e,a,e,e,e,b]

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Chapter 4: Embryology and Anatomy

1:

The genital system develops from the embryonic

a:

yolk sac

b:

endoderm

c:

mesoderm

d:

ectoderm

e:

cytotrophoblast

2:

The urogenital ridges give rise to elements of the

a:

cardiovascular system

b:

reproductive system

c:

muscular system

d:

skeletal system

e:

gastrointestinal system

3:

Congenital adrenal hyperplasia ultimately affects the development of the genitalia of female fetuses through the

a:

stimulation of cortisol production

b:

stimulation of cortisone production

c:

stimulation of androgen production

d:

inhibition of the SRY gene

e:

inhibition of the WNT4 gene

4:

Primary oocytes first appear at what stage of development

a:

In the primordial follicles

b:

At puberty

c:

In the primary sex cords

d:

At birth

e:

In the embryonic yolk sac

5:

Primordial germ cells can be identified during the third week of development in the

a:

vaginal plate

b:

urogenital sinus

c:

cortical cords

d:

gonadal ridge

e:

yolk sac

6:

In the female, which of the following persists to form the major parts of the reproductive tract?

a:

Mesonephric (wolffian) ducts

b:

Primary sex cords

c:

Paramesonephric (Mullerian) ducts

d:

Gubernaculum