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*NCC Womens Health Care Nurse Practitioner*

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## Question: 1

A 32-year-old woman presents to the clinic with complaints of heavy menstrual bleeding and dysmenorrhea. She desires contraception. The nurse practitioner suspects adenomyosis based on the patient's history and examination findings. Which of the following contraceptive methods would be most appropriate for this patient?

- A. Combined oral contraceptive pill
- B. Copper intrauterine device (IUD)
- C. Levonorgestrel-releasing intrauterine device (IUD)

Answer: C

Explanation: Adenomyosis is a condition characterized by the presence of endometrial tissue within the myometrium of the uterus, which can lead to heavy menstrual bleeding and dysmenorrhea. In this patient, the most appropriate contraceptive method would be a levonorgestrel-releasing intrauterine device (IUD). The levonorgestrel-releasing IUD provides effective contraception while also reducing menstrual bleeding and symptoms associated with adenomyosis. The combined oral contraceptive pill may provide some relief of symptoms but is not as effective in managing heavy menstrual bleeding associated with adenomyosis. The copper IUD does not have the same effect on reducing menstrual bleeding and may actually worsen symptoms in this patient.

## Question: 2

A 36-year-old pregnant woman presents to the clinic at 32 weeks gestation. She has a history of gestational diabetes in a previous pregnancy. Which of the following screening tests should be performed to assess for gestational diabetes in this patient?

- A. Glycosylated hemoglobin (HbA1A. test
- B. Fasting plasma glucose (FPG)
- C. Oral glucose tolerance test (OGTT)

Answer: C

Explanation: In a pregnant woman with a history of gestational diabetes in a previous pregnancy, the appropriate screening test for gestational diabetes is the oral glucose tolerance test (OGTT). The OGTT involves measuring fasting blood glucose levels followed by administration of a glucose drink and subsequent blood glucose measurements at specific time intervals. The fasting plasma glucose (FPG) and glycosylated hemoglobin (HbA1c) tests are not specific screening tests for gestational diabetes.

**Question: 3**

A 28-year-old pregnant woman presents to the clinic for a prenatal visit at 20 weeks gestation. Which of the following assessments would be most appropriate to evaluate fetal well-being?

- A. Biophysical profile (BPP)
- B. Nonstress test (NST)
- C. Alpha-fetoprotein (AFP) screening

Answer: A

Explanation: To evaluate fetal well-being at 20 weeks gestation, the most appropriate assessment would be a biophysical profile (BPP). The BPP combines ultrasound evaluation of fetal movements, fetal tone, amniotic fluid volume, and assessment of fetal heart rate patterns. The nonstress test (NST) is typically performed in the third trimester to assess fetal well-being. Alpha-fetoprotein (AFP) screening is a prenatal screening test for neural tube defects

and chromosomal abnormalities and is not specifically used to evaluate fetal well-being.

**Question: 4**

A 28-year-old woman presents to the clinic with complaints of decreased libido and vaginal dryness. She is currently using a levonorgestrel-releasing intrauterine device (IUD) for contraception. Which of the following actions should the nurse practitioner take?

- A. Evaluate for other causes of decreased libido and vaginal dryness
- B. Recommend using a vaginal moisturizer for symptom relief
- C. Recommend switching to a combined hormonal contraceptive method

Answer: A

Explanation: Decreased libido and vaginal dryness can be potential side effects of the levonorgestrel-releasing intrauterine device (IUD). In this case, the nurse practitioner should evaluate for other potential causes of these symptoms, such as hormonal imbalances or underlying medical conditions. Switching to a combined hormonal contraceptive method may not necessarily resolve the symptoms, and using a vaginal moisturizer would only provide temporary relief without addressing the underlying cause.

**Question: 5**

A 35-year-old woman presents for her routine gynecologic examination. She is interested in using a non-hormonal contraceptive method. She has no contraindications to using an intrauterine device (IUD). Which of the following statements regarding the copper IUD is correct?

- A. It primarily works by inhibiting ovulation
- B. It can be used as a long-term contraceptive option for up to 10 years

C. It is associated with an increased risk of pelvic inflammatory disease (PID)

Answer: B

Explanation: The correct statement regarding the copper IUD (ParaGard) is that it can be used as a long-term contraceptive option for up to 10 years. The copper IUD does not inhibit ovulation; instead, it works by creating a spermicidal environment in the uterus. It is a highly effective contraceptive method and does not increase the risk of PID when properly inserted and managed.

**Question: 6**

A 24-year-old woman presents to the clinic for a routine gynecologic examination. She has a history of deep vein thrombosis (DVT) and pulmonary embolism (PE). Which of the following contraceptive methods should be avoided in this patient?

- A. Combined oral contraceptive pill
- B. Progestin-only pill
- C. Copper intrauterine device (IUD)

Answer: A

Explanation: In a patient with a history of deep vein thrombosis (DVT) and pulmonary embolism (PE), the combined oral contraceptive pill should be avoided. The estrogen component of the combined pill increases the risk of thromboembolic events. The progestin-only pill and copper IUD can be considered as contraceptive options in this patient as they do not carry the same risk of thromboembolism.

**Question: 7**

A 28-year-old sexually active woman presents to the clinic requesting emergency contraception after having unprotected intercourse 48 hours ago. She has a history of migraines with aura. Which of the following emergency contraception methods is contraindicated in this patient?

- A. Levonorgestrel emergency contraceptive pill
- B. Ulipristal acetate emergency contraceptive pill
- C. Copper intrauterine device (IUD)

Answer: B

Explanation: In a patient with a history of migraines with aura, ulipristal acetate emergency contraceptive pill is contraindicated. Ulipristal acetate is a selective progesterone receptor modulator and is contraindicated in individuals with a history of cerebrovascular disease, including migraines with aura. In this case, the patient should be offered the levonorgestrel emergency contraceptive pill or the copper IUD as alternative methods of emergency contraception.

### Question: 8

A 32-year-old woman with a history of multiple sexual partners presents to the clinic for a routine gynecologic examination. She requests a contraceptive method that provides protection against sexually transmitted infections (STIs). Which of the following contraceptive methods would be most appropriate for this patient?

- A. Levonorgestrel-releasing intrauterine device (IUD)
- B. Combined oral contraceptive pill
- C. Condoms

Answer: C

Explanation: In a patient who desires protection against sexually transmitted infections (STIs), the most appropriate contraceptive method would be condoms. Condoms provide a physical barrier and can help reduce the risk of STI transmission. The combined oral contraceptive pill and levonorgestrel-releasing IUD do not provide protection against STIs.



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