

Question 1 (2.5 points)

The nurse practitioner knows that a highly valuable assessment tool for evaluating urinary incontinence and contributing factors in daily life is:

Question 1 options:

- A) the interview
- B) a voiding diary
- C) the physical exam
- D) the patient's response to non-pharmacologic treatments

Save

Question 2 (2.5 points)

The nurse practitioner is counseling a 57 year-old patient with urinary incontinence. The patient desires to try non-pharmacological, non-invasive methods of treatment at this time. Which of the following should be included in the patient's plan of care? **Select all that apply.**

Question 2 options:

- Bladder training
- Kegel exercises
- Eliminate caffeine and alcohol consumption
- Use of bulking agents

Save

Question 3 (2.5 points)

The nurse practitioner is performing a bimanual exam on a new OB patient and notices that the lower portion of the patient's uterus is soft. This is known as:

Question 3 options:

- A) Hegar's Sign
- B) Chadwick's Sign
- C) Nightingale's Sign
- D) Goodell's Sign

Save

Question 4 (2.5 points)

Your female patient presents for vaginal discharge with an odor, and has noticed painless "bumps" on her vaginal area. Sexual history includes past male partners and her current female partner. On exam you note beefy red papules and an ulcerative lesion on her vulva, granular tissue and scarring, and inguinal adenopathy. You suspect she has:

Question 4 options:

- A) HSV-2
- B) Granuloma Inguinale
- C) Chancroid
- D) Molluscum Contagiosum

Save

Question 5 (2.5 points)

The physical examination of any woman suspected of being abused or battered includes all of the following **except**:

Question 5 options:

- A) a thorough inspection for signs of injury, past and present
- B) a physical assessment just like that of any other adult female
- C) a focus on the patient's physical appearance, not her behavior
- D) the use of body maps and diagrams to accurately portray the patient's physical condition

Save

Question 6 (2.5 points)

The most effective means of obtaining the history of abuse is to use a communication model that:

Question 6 options:

- A) avoids having the patient's children present during the discussion
- B) signals someone is interested and that the woman is not alone
- C) emphasizes the belief that violence is not acceptable, no matter what the batterer might have said to the patient
- D) allows the patient to talk without interruption and with time to relate, emphasize, and repeat her full story

Save

Question 7 (2.5 points)

Clinicians should routinely consider intimate partner violence (IPV) as a possible diagnosis for women who present with all of the following **except**:

Question 7 options:

- A) chronic stress-related symptoms

- B) denial of any physical health problems
- C) central nervous system (CNS) symptoms
- D) gynecologic problems, especially multiple ones

Save

Question 8 (2.5 points)

The factors that enable women to enjoy and control their sexual and reproductive lives, including a physical and emotional state of well-being and the quality of sexual and other close relationships, make up a woman's:

Question 8 options:

- A) sexual health
- B) gender identit
- C) gender role behaviors
- D) psychosocial orientation

Save

Question 9 (2.5 points)

Which one of the following is **not** among the ways clinicians can provide a welcoming, safe environment for Lesbian, Gay, Bisexual, or Transgender (LGBT) patients?

Question 9 options:

- A) Avoid the heterosexual assumption by using gender-neutral language.
- B) Explain whether and how information will be documented in the patient's medical record.

- C) Ignore the sexual status or gender identity of all patients.
- D) Offer mainstream referrals that are culturally sensitive to SGMs.

Save

Question 10 (2.5 points)

Which one of the following is the definition of the term "gender identity"?

Question 10 options:

- A) People who respond erotically to both sexes
- B) A self-label, regardless of biologic or natal sex
- C) People who are similar in age, class, and sexual status
- D) A label for behavior not usually associated with one's natal sex

Save

Question 11 (2.5 points)

Which one of the following statements about sexually transmitted infections (STIs) is **false**?

Question 11 options:

- A) Lesbians are at very low risk for development of STIs and vaginal infections.
- B) HIV has been identified in case studies of women who report sex only with women.
- C) Transgender women (Male to Female) have extremely high rates of HIV infection.
- D) Risky behaviors for STIs include sex during menses.

Save

Question 12 (2.5 points)

Among the midlife health issues of women, the number one cause of mortality in the United States is:

Question 12 options:

- A) primary osteoporosis
- B) cardiovascular disease
- C) overweight and obesity
- D) cancer

Save

Question 13 (2.5 points)

Lifestyle approaches to manage menopause related vasomotor symptoms include:

Question 13 options:

- A) sleeping more than 8 hours per night
- B) avoiding spicy foods, hot drinks, caffeine, and alcohol
- C) decreasing levels of physical activity
- D) more than 1,000 international units/day of vitamin E

Save

Question 14 (2.5 points)

The standard for managing moderate to severe menopausal symptoms is:

Question 14 options:

- A) lifestyle changes, such as dieting and exercising
- B) nonhormone products, such as antidepressant medications

- C) alternative care, such as acupuncture, combined with organic herbs
- D) prescription systemic hormone products, such as estrogen and progestogen

Save

Question 15 (2.5 points)

The nurse practitioner is managing an adolescent with a 4 cm functional ovarian cyst that was confirmed on a recent ultrasound. What plan of care should be anticipated for this patient?

Question 15 options:

- A) Repeat bimanual exam in 1 week
- B) Refer for surgical consult
- C) Repeat ultrasound in 2 months
- D) Stop all ovulatory inhibitor meds

Save

Question 16 (2.5 points)

Non-pharmacologic therapy for chronic pelvic pain includes the following: Select all that apply.

Question 16 options:

- A) Vitamin B6
- B) Physical therapy
- C) Aerobic and nonaerobic exercise
- D) Antidepressants

Save

Question 17 (2.5 points)

The nurse practitioner understands that all of the following organisms are responsible for infection of the Bartholin's gland **except**:

Question 17 options:

Streptococcus faecalis

Klebsiella

Staphylococcus aureus

E. Coli

Save

Question 18 (2.5 points)

Treatment of a large, symptomatic Bartholin's cyst includes all of the following **except**:

Question 18 options:

Sitz baths

Incision and drainage

Topical corticosteroids

Antibiotics

Save

Question 19 (2.5 points)

A 44 year-old African American female presents with complaints of menorrhagia x 15 months. Pelvic

ultrasound confirms the presence of a large intramural leiomyomata. The nurse practitioner should discuss all of the following options with the patient **except**:

Question 19 options:

- GnRH agonist therapy
- Referral for surgical consult
- Progestin therapy
- Estrogen therapy

Save

Question 20 (2.5 points)

The nurse practitioner is treating a patient with Elimite for scabies. The proper instructions to the patient should include:

Question 20 options:

- All household contacts should be treated with Elimite regardless of symptoms.
- The medication should be taken orally in one single dose and repeated in 2 weeks.
- Apply only to the body area infested with scabies and repeat treatment in 5 days.
- Apply to all areas of the body from the neck down, wash off after 8 to 14 hours, then repeat treatment in one week

Save

Question 21 (2.5 points)

The nurse practitioner understands that the proper management of an asymptomatic woman with a small fibroid should include:

Question 21 options:

- Start combination COC therapy.

Repeat ultrasound in 3-4 months.

Reassess in 6 to 12 months.

Refer for myomectomy.

Save

Question 22 (2.5 points)

The nurse practitioner is teaching a patient about pediculosis. Which of the following statements by the nurse practitioner is correct?

Question 22 options:

Nits can survive in hot and humid climates up to 21 days.”

“Adult pubic lice can survive 72 hours off their host.”

“Pruritus is not a common manifestation.”

“The condition is treated with Permethrin cream.”

Save

Question 23 (2.5 points)

All of the following medications may be used for neuropathic pain management of vulvodynia, **except**:

Question 23 options:

Neurontin

SSRIs

Methotrexate

- Tricyclics

Save

Question 24 (2.5 points)

The nurse practitioner understands that which of the following lab tests is appropriate for the patient who presents with symptoms of dysesthetic vulvodynia?

Question 24 options:

- RPR
- Pap smear
- Wet mount
- Endometrial biopsy

Save

Question 25 (2.5 points)

Which of the following is a common antibiotic for treatment of an infected Bartholin's cyst?

Question 25 options:

- Minocycline
- Levaquin
- Bactrim
- Ampicillin

Save

Question 26 (2.5 points)

The patient presents with complaints of a painful, swollen lump in her vaginal area. She reports difficulty sitting and

walking due to the pain. Which of the following is a likely diagnosis for this patient?

Question 26 options:

Syphilis chancre

Lichen Planus

Genital Wart

Bartholin's cyst

Save

Question 27 (2.5 points)

The nurse practitioner understands that which of the following are differential diagnoses in an adult female patient with acute pelvic pain. Select all that apply:

Question 27 options:

A) Ectopic pregnancy

B) Appendicitis

C) Ovarian cyst with rupture

D) Pelvic Congestion Syndrome

Save

Question 28 (2.5 points)

When women experience mild premenstrual symptoms, such as mild breast tenderness, abdominal bloating, and mild weight gain from water retention, this is known as:

Question 28 options:

Luteal phase deficiency

Premenstrual dysmorphic disorder

Premenstrual syndrome

Follicular phase deficiency

Save

Question 29 (2.5 points)

A patient with intraductal papilloma will commonly present with a chief complaint of:

Question 29 options:

A palpable mass

Bloody nipple discharge

Bilateral milky discharge

Mild localized pain

Save

Question 30 (2.5 points)

The nurse practitioner understands that the necessary screening techniques in a patient suspicious of ovarian cancer should include the following: Select all that apply.

Question 30 options:

CA-125

Transvaginal ultrasound

Bimanual pelvic exam

Pap smear

Save

Question 31 (2.5 points)

Early symptoms experienced by a woman with ovarian cancer include all of the following **except**:

Question 31 options:

- Vague abdominal pain
- Abdominal bloating
- Fatigue
- Unexplained weight gain

Save

Question 32 (2.5 points)

The nurse practitioner is evaluating a patient's risk of ovarian cancer. All of the following factors are associated with an increased risk for ovarian cancer **except**:

Question 32 options:

- First degree relative with ovarian cancer
- BRCA -1 and 2 mutations
- Obesity
- Oral Contraceptive Use

Save

Question 33 (2.5 points)

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

Question 33 options:

- The cause of the condition is a virus of the HPV type
- Sexual partners should be checked and condoms used to decrease incidence of transmission
- Treatment and elimination of visible warts is a sign of cure, and transmission will not occur
- The virus does not always cause a lesion, subclinical infection may occur

Save

Question 34 (2.5 points)

Tina is evaluated and diagnosed with Molluscum Contagiosum. The nurse practitioner understands that clinical presentation of this disease is characterized by:

Question 34 options:

- Fleshy, papular skin colored lesions with indented centers that contain white curdlike material.
- Ulcerated ragged edge lesions that are painful
- Clusters of vesicles that itch and are painful to palpation
- Painless fleshy clusters of growths that resemble grapes or cauliflower

Save

Question 35 (2.5 points)

Sara is 72 years old and has been a widow for 12 years. She presents for her yearly well woman exam. Sara has not been sexually active since age 60. She has had regular pap screenings in her life and has had no abnormal pap tests. Sara asks if she needs a Pap test. Your response would be:

Question 35 options:

- Yes, you need a Pap test with HPV testing every 5 years.
- Yes, you should have a Pap test every 3 years.



No, you do not need a Pap test or a pelvic exam again, unless you notice a vaginal discharge, have discomforts, or anything of the ordinary.



No, you do not need a Pap test, but I do recommend we do a pelvic exam to assess for abnormalities.

Save

Question 36 (2.5 points)

Misty presents with a painful “sores” in her perineal area, dysuria and dyspareunia. On exam she has 2 shallow ulcerated lesions on the right labia majora and one on the left. She also presents with enlarged inguinal lymph nodes. Based on these findings you suspect she has:

Question 36 options:



HSV-2



Genital warts



Chancroid



Syphilis lesions

Save

Question 37 (2.5 points)

Which of the following is not true for HIV infection evaluation?

Question 37 options:



The CDC recommends HIV testing for all persons seeking evaluation for STIs.



HIV evaluation is recommended if a patient has a history of unprotected sex with a previously incarcerated male, an uncircumcised male, or participates in anal penetration.



If a patient is fearful they have been exposed to HIV, but denies all risk factors, it is not recommended to test for HIV.



Aids is caused by HIV, mainly by sexual contact (anal, vaginal, or oral), contaminated blood and blood products, contaminated semen used for artificial insemination, intrauterine acquisition, and breastmilk.

Save

Question 38 (2.5 points)

The nurse practitioner understands that the risk factors for developing vaginal candidiasis include which of the following?

Question 38 options:



Hypoglycemia



A diet high in refined sugar



Use of Vit C supplement



A habit of consuming live culture yogurt several times a week

Save

Question 39 (2.5 points)

Cindy presents to your clinic for STI testing after realizing her current boyfriend has been seeing other women. She states she was told that one of the women has hepatitis B. Your patient education regarding hepatitis B includes all the following **except**:

Question 39 options:



Hepatitis B is transmitted enterically



Hepatitis B has an incubation period of 6 weeks to 6 months



Hepatitis B surface antigen (HBsAG) indicates if the patient has hepatitis B infection



Hepatitis B infection primarily affects the liver

Save

Question 40 (2.5 points)

Stacy has made an appointment at your clinic for c/o dysuria. During the HPI she explains, "My bottom hurts when I pee, and I have bumps there". She has never had this before and is worried. She denies fever, although she feels "a little like I have the flu" explaining she has a headache and feels achy and tired. She denies exposure to a STI noting she and her partner have been monogamous for 6 years. On exam you notice a cluster of painful vesicles adjacent to the vaginal introitus. The most likely diagnosis is:

Question 40 options:

- Syphilis
- Genital Herpes
- Chancroid
- Chlamydia

Save

Question 41 (2.5 points)

You see an 18-year-old woman with a history of Chlamydia infection and a total of five lifetime partners. Based on the latest evidence-based guidelines, you recommend:

Question 41 options:

- Pap smear only
- Pap smear with HPV testing

Pap smear and STI testing

STI testing only

Save

Question 42 (2.5 points)

Karen was recently diagnosed with primary syphilis. The nurse practitioner understands that the first-line treatment option for primary syphilis include:

Question 42 options:

Penicillin

Ciprofloxacin

Erythromycin

Ceftriaxone

Save

Question 43 (2.5 points)

While educating Karen about the different stages of syphilis, which of the following is not representative of the presentation of secondary syphilis?

Question 43 options:

generalized rash

chancre

arthralgia

lymphadenopathy

Save

Question 44 (2.5 points)

Karen was recently diagnosed with primary syphilis by her primary care provider, she is very upset and inquires how long after sexual contact do syphilis symptoms typically occur. What is the correct response by the primary care provider?

Question 44 options:

3-4 days

1 week

3 weeks

6 weeks

Save

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Question 45 (2.5 points)

Which of the following terms describe the mechanism of action of Imiquimod (Aldara) in the management of genital warts?

Question 45 options:

keratolytic

immune modifier

cryogenic

cytolytic

Save

Question 46 (2.5 points)

The nurse practitioner understands that HPV types _____ and _____ are most often associated with cervical and anogenital cancer.

Question 46 options:

1, 2, and 3

6 and 11

16 and 18

22 and 24

Save

Question 47 (2.5 points)

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

Question 47 options:

A) Topical acyclovir

B) Cryotherapy

C) Podofilox

D) Tricholoroacetic acid .

Save

Question 48 (2.5 points)

Which of the following is a treatment option for a 30-year-old woman with PID and a history of severe hive-form reaction when taking a penicillin or cephalosporin?

Question 48 options:

- A) Ofloxacin with metronidazole
- B) Amoxicillin with gentamicin
- C) Cefixime with vancomycin
- D) Clindamycin with azithromycin

Save

Question 49 (2.5 points)

The nurse practitioner understands that a complication of gonococcal and chlamydial genitourinary infection in women include which of the following:

Question 49 options:

- A) Pelvic inflammatory disease (PID)
- B) Conjunctivitis
- C) Acute pyelonephritis
- D) Prostatitis

Save

Question 50 (2.5 points)

The nurse practitioner understands that women with PID typically present with all of the following **except**:

Question 50 options:

- A) Fever
- B) Leukopenia
- C) Cervical motion tenderness

- D) abdominal pain

Save

Question 51 (2.5 points)

Elizabeth was evaluated and diagnosed with a primary outbreak of genital herpes in the clinic today. The treatment plan for Elizabeth will include a prescription for:

Question 51 options:

- A) Ribavirin
- B) Indinavir
- C) Valacyclovir
- D) Cyclosporine

Save

Question 52 (2.5 points)

Elizabeth was recently diagnosed with genital herpes after having unprotected intercourse with a new partner. The nurse practitioner explains to Christine that the incubation period for HSV Type 2 is approximately:

Question 52 options:

- A) 4 to 7 days up to 4 weeks
- B) 24 hours
- C) 24 days
- D) 1 to 3 days up to 14 days

Save

Question 53 (2.5 points)

Kristin returns to the clinic for follow-up on STI results. The nurse practitioner informs her the Chlamydia test was positive. Which of the following agents will the nurse practitioner prescribe for treatment?

Question 53 options:

- A) Amoxicillin
- B) Metronidazole
- C) Azithromycin
- D) Tinidazole

Save

Question 54 (2.5 points)

The nurse practitioner student is studying the CDC guidelines for treating sexually transmitted infections. Which of the following agents is recommended for Gonorrhea treatment?

Question 54 options:

- A) Ceftriaxone
- B) Doxycycline
- C) Ketoconazole
- D) Amoxicillin

Save

Question 55 (2.5 points)

A 30-year-old woman presents without symptoms but states that her male partner has dysuria without penile discharge. Examination of the woman reveals a friable cervix with yellow discharge from the cervical os. This description is most consistent with an infection caused by: Select all that apply.

Question 55 options:

- A) Chlamydia trachomatis
- B) Neisseria gonorrhoeae
- C) Human papilloma virus (HPV)
- D) Trichomonas vaginalis

Save

Question 56 (2.5 points)

Karen was diagnosed with trichomoniasis by her primary care provider and treated with:

Question 56 options:

- A) Metronidazole 500 mg po BID x 7 days

(If single-dose metronidazole treatment fails and reinfection is excluded, metronidazole 500 mg orally twice a day for 7 days should be prescribed.) this is the correct answer if first treatment doesn't work
- B) Terconazole vaginally Q HS x 5 days
- C) Azithromycin 1 gm po x 1 dose
- D) Bactrim DS i po Q 12 hours x 3 days

Save

Question 57 (2.5 points)

A 24-year-old woman presents with a 1-week history of thin, greenish yellow vaginal discharge with perivaginal irritation. Physical examination findings include vaginal erythema with petechial hemorrhages on the cervix, numerous white blood cells, and motile organisms on microscopic examination. These findings most likely represent:

Question 57 options:

- A) motile sperm with irritative vaginitis
- B) trichomoniasis
- C) bacterial vaginosis
- D) condyloma acuminatum

Save

Question 58 (2.5 points)

For patients needing topical treatment for vulvovaginitis caused by *Candida albicans*, the nurse practitioner will prescribe:

Question 58 options:

- A) metronidazole gel
- B) clotrimazole cream
- C) hydrocortisone ointment
- D) clindamycin cream

Save

Question 59 (2.5 points)

The nurse practitioner understands that women with bacterial vaginosis typically present with:

Question 59 options:

- A) vulvitis
- B) pruritus
- C) dysuria
- D) malodorous discharge

Save

Question 60 (2.5 points)

The U.S. Preventative Services Task Force (USPSTF) recommends _____ of folic acid supplement daily at least one month before conception for all women with average risk for neural tube defects.

Question 60 options:

- A) 8000 mg
- B) .4 to .8 mg
- C) 4 to 8 mg
- D) 4000 mg

Save

Question 61 (2.5 points)

The American College of Obstetrician &Gynecologists recommend that all pregnant women be offered aneuploidy screening before 20 weeks gestation. This test identifies women whose fetuses are at increased risk for which of the following? Select all that apply.

Question 61 options:

A) Trisomy 11

B) Trisomy 13

C) Trisomy 18

D) Trisomy 21

Save

Question 62 (2.5 points)

An important part of patient education for the patient with bacterial vaginosis who is receiving a prescription for oral Metronidazole is:

Question 62 options:

The patient should be treated prophylactically for a yeast infection.

The medication may cause constipation.

Avoid alcohol for 48 hours after completing medication.

The patient's partner will need treatment also.

Save

Question 63 (2.5 points)

For the patient with chronic bacterial vaginosis, the nurse practitioner will prescribe:

Question 63 options:

A) Metronidazole 500 mg po weekly for 2 months

B) Metronidazole 500 mg po BID x 7 days

C) Metronidazole gel .75% vaginally BID x 5 days



- D) Metronidazole gel .75% vaginally 1-2 times a week for 4 to 6 months

Save

Question 64 (2.5 points)

The nurse practitioner's exam findings on a patient with vaginal Candidiasis is positive for all of the following **except**:

Question 64 options:

- A) erythematous vaginal mucosa
- B) thick, white, curd-like vaginal discharge
- C) vaginal ph of 7
- D) hyphae visualized on wet prep

Save

Question 65 (2.5 points)

A woman arrives at the clinic for a pregnancy test. Her last menstrual period (LMP) was February 14, 2017. Using Nageles Rule, what is the client's expected date of birth (EDB)?

Question 65 options:

- A) September 17, 2017
- B) November 7, 2017
- C) November 21, 2017
- D) December 17, 2017

Save

Question 66 (2.5 points)

Which documentation on a woman's chart on postpartum day 14 indicates a normal involution process?

Question 66 options:

- A) Moderate lochia rubra
- B) Breasts soft and symmetrical
- C) Fundus below the symphysis pubis and nonpalpable
- D) Episiotomy pink and healing

Save

Question 67 (2.5 points)

The nurse practitioner understands that the hormone, _____, remains elevated in breastfeeding women in the postpartum period.

Question 67 options:

- A) Estrogen
- B) Progesterone
- C) Prolactin
- D) Human placental lactogen

Save

Question 68 (2.5 points)

The nurse practitioner is recommending daily Calcium supplementation of _____ to her female patients that are older than 50 years of age.

Question 68 options:

A) 800 mg

B) 1000 mg

C) 1200 mg

D) 1500 mg

Save

Question 69 (2.5 points)

Osteoporosis is diagnosed when the patient's bone density is more than _____ standard deviation(s) below the average bone mass for women younger than 35 years old.

Question 69 options:

A) 1

B) 1.5

C) 2.5

D) 4

Save

Question 70 (2.5 points)

Based on the latest ACOG guidelines, the nurse practitioner understands that the recommended time to initiate screening for cervical cancer in women is:

Question 70 options:

A) prior to becoming sexually active

B) at age 18 years



C) at age 21 years



D) three years after first sexual intercourse

Save

Question 71 (2.5 points)

The nurse practitioner understands the following lifestyle approaches may be used to prevent osteoporosis after menopause: Select all that apply.

Question 71 options:



Limit alcohol intake



Performance of regular weight-bearing activities



Increase caffeine consumption



Adequate calcium & vitamin D intake

Save

Question 72 (2.5 points)

What is the primary role of a nurse practitioner in the research process?

Question 72 options:



A) Designing research studies



B) Collecting data for other researchers



C) Identifying researchable problems



D) Seeking funding to support research studies

Save

Question 73 (2.5 points)

Whether you order diagnostic testing or refer the patient to an HIV-specific facility, laboratory confirmation is rendered. The test confirming HIV infection is _____.

Question 73 options:

- A) Western blot assay
- B) enzyme-linked immunosorbent HIV RNA
- C) CD4+ lymphocyte count
- D) quantitative plasma HIV RNA

Save

Question 74 (2.5 points)

The nurse practitioner is examining a twenty-nine-year-old female with a three day history of dysuria and urinary frequency. On examination, the patient is positive for suprapubic tenderness and negative for costovertebral angle (CVA) tenderness. This most likely represents which of the following?

Question 74 options:

- A) Pyelonephritis
- B) Cystitis
- C) Ectopic pregnancy
- D) Asymptomatic Bacteriuria

Save

Question 75 (2.5 points)

A patient has been diagnosed with trichomoniasis. Which of the following single dose medications would be the best option?

Question 75 options:

- A) Azithromycin 1 g
- B) Clindamycin 300 mg
- C) Ofloxacin 500 mg
- D) Metronidazole 2 g

Save

Question 76 (2.5 points)

When educating patients about the use of combination oral contraceptive medications, they should be advised that pregnancy is prevented primarily by _____.

Question 76 options:

- A) cervical mucus thinning
- B) inflammation of the endometrium
- C) ovulation suppression
- D) decreased fallopian tube motility

Save

Question 77 (2.5 points)

A twenty-four-year-old female presents to the office with a complaint of a “yucky” vaginal discharge. On exam, a milky vaginal discharge is noted. A wet mount preparation reveals a positive whiff test and 75% clue

cells. There were no trichomonads or WBCs visualized. Which of the following would be the most likely diagnosis in this patient?

Question 77 options:

- A) Bacterial vaginosis
- B) Herpes simplex
- C) Chlamydia
- D) Cystitis with cervicitis

Save

Question 78 (2.5 points)

A fifty-five-year-old postmenopausal female patient presents with pain in the upper outer quadrant of her left breast for over one month now. The best course of action would be to _____.

Question 78 options:

- A) reassure the patient that pain is often not a presenting symptom of breast cancer
- B) teach the patient breast self-examination
- C) order laboratory studies as most likely this is secondary to a hormonal fluctuation
- D) perform a breast examination and order a mammogram

Save

Question 79 (2.5 points)

A thirty-nine-year-old female has just completed a course of Amoxicillin for the treatment of streptococcal pharyngitis. Her LMP was two weeks ago and reports that it was normal for her. On physical examination, there is

some erythema of the external genitalia with a small amount of white discharge. The microscopic wet prep examination reveals few clue cells but an abundance of budding hyphae. There are no WBCs present. Considering the differential diagnoses and results of the microscopic examination, which of the following would be the most appropriate treatment?

Question 79 options:

- A) Metronidazole 500 mg BID for seven days
- B) OTC hydrocortisone 1% cream TID
- C) Fluconazole 150 mg tablet as a onetime dose
- D) Erythromycin 500 mg TID for ten days

Save

Question 80 (2.5 points)

A forty-nine-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 on physical examination in patients with cervical cancer?

Question 80 options:

- A) Ulcerated firm cervix
- B) Lower abdominal pain that is vague
- C) Enlarged tender femoral lymph nodes
- D) Soft, still shaped cervix

Save

Question 81 (2.5 points)

A twenty-five-year-old female presents with vaginal irritation and discharge. On examination, the cervix is easily friable and erythematous. There is no adnexal tenderness. The wet prep (wet mount) microscopic examination reveals mobile protozoa on the normal saline slide. This most likely represents _____.

Question 81 options:

- A) trichomoniasis
- B) mucopurulent cervicitis
- C) bacterial vaginosis
- D) gonorrhea

Save

Question 82 (2.5 points)

A twenty-two-year-old female presents with an initial onset of herpes simplex on the external genitalia. During the patient education, which of the following statements is most important to include?

Question 82 options:

- A) Cesarean section will be necessary for any pregnancy and delivery.
- B) Antiviral medications will be useful in treating and curing an outbreak.
- C) The sexual partner will not contract herpes if lesions are not present.
- D) Symptoms of the initial outbreak of the lesions are typically worse than subsequent outbreaks.

Save

Question 83 (2.5 points)

Follicle-stimulating hormone (FSH) is released from the anterior pituitary gland and is responsible for which of the following normal physiologic response of the female menstrual cycle?

Question 83 options:

- A) Breast milk production
- B) Stimulation of ovarian follicles
- C) Maturation of ovarian follicles
- D) Luteinizing hormone (LH) inhibition

Save

Question 84 (2.5 points)

A thirty-two-year-old patient comes in for a workup of infertility. During the history, the nurse practitioner suspects that the patient may be experiencing anovulatory cycles. In order to confirm ovulation, which of the following tests would be most appropriate to order?

Question 84 options:

- A) Endometrial biopsy
- B) Basal body temperature
- C) Hysterosalpingogram
- D) Postcoital testing

Save

Question 85 (2.5 points)

A nurse practitioner is performing a wet mount with potassium hydroxide (KOH) to assist with a diagnosis in a

woman experiencing vaginal discharge. Which of the following would this confirm?

Question 85 options:

- A) Herpes simplex
- B) Trichomonas
- C) Candidiasis
- D) Chlamydia

Save

Question 86 (2.5 points)

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?

Question 86 options:

- A) Small, yellow, raised area on the cervix
- B) Friable, bleeding tissue opening of the cervical os
- C) Red patch areas with occasional white spots
- D) Irregular, granular surface with red patches

Save

Question 87 (2.5 points)

There are several phases to the menstrual cycle. What phase begins with menses cessation and ends with ovulation?

Question 87 options:

- A) Ovulatory phase

- B) Follicular phase
- C) **Proliferative phase**
- D) Luteal phase

Save

Question 88 (2.5 points)

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**?

Question 88 options:

- A) Pregnancy after age of thirty-five years
- B) Late menopause after age of fifty-seven years
- C) History of maternal breast cancer
- D) Fibrocystic breast disease

Save

Question 89 (2.5 points)

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

Question 89 options:

- A) Acetaminophen
- B) **Ibuprofen**

- C) Combination hormone replacement therapy (HRT)
- D) Amitriptyline

Save

Question 90 (2.5 points)

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

Question 90 options:

- A) Syphilis
- B) Bartholin's cyst
- C) Labial adhesion
- D) Herpes simplex type 2

Save

Question 91 (2.5 points)

A woman is concerned that she may develop breast cancer and is discussing her concerns with the nurse practitioner. Which of the following is **not** an associated risk factor for this?

Question 91 options:

- A) Late menarche
- B) Family history
- C) Nulliparity
- D) Late menopause

Save

Question 92 (2.5 points)

A sixty-one-year-old thin, Caucasian female presents to your practice for a well-woman examination. She remarks that she feels like she is shrinking over the past year, despite keeping active and incorporating sources of calcium in her diet. Which of the following is **not** a risk factor for osteoporosis?

Question 92 options:

- A) Excessive exercise
- B) History of maternal osteoporosis
- C) Smoking
- D) Using hormone therapy

Save

Question 93 (2.5 points)

A thirty-five-year-old woman, presents with a six-month history of hypermenorrhea, backache, and pelvic pressure. On examination, you discover a twelve-week size uterus with irregular contour. Which of the following does this most likely represent?

Question 93 options:

- A) Uterine cancer
- B) Dysfunctional uterine bleeding (DUB)
- C) Uterine fibroid
- D) Fecal impaction

Save

Question 94 (2.5 points)

It is known that a woman who is menopausal has an increased risk of heart disease. Which of the following lipid changes occur with estrogen withdrawal in menopause?

Question 94 options:

- A) Decrease in HDL, LDL, and triglycerides
- B) Decrease in HDL, LDL, and increase in triglycerides
- C) Increase in HDL with a decrease in LDL and triglycerides
- D) Decrease in HDL with an increase in LDL and triglycerides

Save

Question 95 (2.5 points)

Which of the following is true regarding education of a forty-two-year-old woman diagnosed with a uterine myoma?

Question 95 options:

- A) Myomas usually does not resolve with menopause.
- B) Myomas will decrease with the withdrawal of estrogen.
- C) Hysterectomy is the treatment of choice.
- D) Myomas are never responsible for uterine bleeding.

Save

Question 96 (2.5 points)

Sheryl, a seventeen-year-old, complains of a vaginal discharge for the past month. When she wipes after

urinating, there is "white stuff" on the tissue. Sheryl denies urinary problems but has had some genital itching, but no odor. She also denies sexual activity. Her vaginal discharge is most likely a result of _____.

Question 96 options:

- A) a yeast infection
- B) a chlamydia infection
- C) retained foreign body
- D) physiologic leukorrhea

Save

Question 97 (2.5 points)

Urinary tract infections are commonly seen in primary care. A twenty-five-year-old female presents with a new onset of dysuria and suprapubic pain for the last twenty-four hours. The examination reveals only mild tenderness without any peritoneal signs on the lower abdomen. A urinalysis reveals the presence of WBCs. The urine is sent for a culture and sensitivity. In addition to *Escherichia coli* one might typically expect to see the presence of which bacterium?

Question 97 options:

- A) *Klebsiella*
- B) *Staphylococcus aureus*
- C) *Staphylococcus saprophyticus*
- D) *Pseudomonas*

Save

Question 98 (2.5 points)

The pituitary gland is responsible for a variety of functions with respect to hormonal regulation and is composed of two lobes, the anterior and posterior sections. Which of the following list of hormones are secreted by the anterior pituitary gland?

Question 98 options:

- A) Growth hormone (GH) and thyroid-stimulating hormone
- B) Prolactin and T4
- C) Follicle-stimulating hormone (FSH) and T3
- D) Luteinizing hormone (LH) and oxytocin

Save

Question 99 (2.5 points)

The nurse practitioner is counseling a patient on the side effects associated with some birth control methods. The woman complains that she has developed acne and hirsutism while taking oral contraceptives. The nurse practitioner understands that these changes result from _____.

Question 99 options:

- A) increased estrogen levels
- B) decreased estrogen levels
- C) increased free androgens
- D) decreased free androgens

Save

Question 100 (2.5 points)

You are meeting with twenty-two-year-old Emily to discuss birth control options. She has tried “the pill” in the past but failed to take it regularly. She is interested in depo because she only has to come in every three months for a shot. She also heard that one does not get a period on depo, and she likes the thought of that. Which of the following would be a **specific consideration** with depo that you would need to discuss with Emily based on her desires for a birth control method?

Question 100 options:

- A) Depo offers no protection from STIs.
- B) Depo can cause break through bleeding up to the second or third injection
- C) As with any hormonal birth control, changes in weight can occur.
- D) Depo does not offer pregnancy protection for those who are obese.