

Chapter 43, Male and Female Hormones

1. An 80-year-old male client with chronic renal insufficiency is prescribed anabolic steroid therapy for the management of anemia associated with renal insufficiency. The nurse will carefully monitor the client for which potential disorder?
 - A) Hypoglycemic attacks
 - B) Serious cardiac disease
 - C) Hypotensive shock
 - D) Cancer of the prostate

Answer: D

Rationale: Elderly male clients undergoing anabolic steroid therapy are at an increased risk of developing cancer of the prostate gland. Therefore, anabolic steroid therapy needs to be administered cautiously in these clients. Hypoglycemic attacks, serious cardiac disease, and hypotensive shock are not seen in elderly clients on anabolic steroid therapy. Individuals with diabetes have an increased risk of developing hypoglycemia with the use of sulfonylureas and anabolic steroids if also given male hormones. Male hormones are contraindicated in clients with serious cardiac disease. Hypotensive shock can occur with the use of glucocorticoids.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 577, Anabolic Steroids

2. A nurse is caring for a client with advanced breast cancer who is receiving androgen therapy. Which signs might alert the nurse to the possibility of liver toxicity?
 - A) Edema of the feet
 - B) Increase in appetite
 - C) Clinical jaundice
 - D) Increase in weight

Answer: C

Rationale: Liver toxicity is indicated by the presence of jaundice. Edema of the feet and an increase in weight may be seen because of fluid and electrolyte imbalance but does not indicate liver toxicity. An increase in appetite shows that the client is responding well to the drug and is not a sign of liver toxicity.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 2

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 584, Client Receiving a Female Hormone

3. When caring for a client receiving estrogen replacement therapy for postmenopausal symptoms, the nurse documents a diagnosis of ineffective tissue perfusion. Which condition is the nurse **prioritizing** in the diagnosis?
- A) Thromboembolism
 - B) Edema of the feet
 - C) Gastrointestinal upset
 - D) Chloasma

Answer: A

Rationale: The nursing diagnosis of ineffective tissue perfusion is related to thromboembolism, which is a complication of estrogen replacement therapy. A nurse may note other female hormone-related adverse reactions such as edema of the feet due to excess fluid volume or gastrointestinal upset, which manifests as nausea, vomiting, abdominal cramps, and bloating. Chloasma is a dermatologic reaction due to female hormones, which results in excessive pigmentation of the skin.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 3

Cognitive Level: Understand

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 587, Altered Tissue Perfusion

4. A client with delayed puberty has been advised to undertake transdermal androgen therapy. Which instructions should the nurse **prioritize**?
- A) Apply the ointment to the underside of the scrotum.
 - B) Repeat the application to the scrotum after 3 days.
 - C) Moisten the skin before the application.
 - D) Apply immediately after removing the cover.

Answer: D

Rationale: Applying the system immediately after opening the pouch and removing the protective cover may help obtain an optimal response to the transdermal androgen delivery system. The drug should not be applied to the underside of the scrotum. It is applied to clean, dry skin on the abdomen, thigh, back, or upper arm. Thus, the skin should not be moistened before the application; rather, it should be dry. Seven days should be allowed between applications to a specific site, and application to the same site should not be repeated after 3 days.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 579, Client Receiving a Male Hormone

5. A female client receiving fluoxymesterone for metastatic breast cancer is disturbed by the physical changes seen in her body. The nurse provides support to the client based on assessment of which features the client is experiencing related to this therapy?
- A) Deepening of the voice
 - B) Hypopigmentation of the skin
 - C) Decrease in clitoris size
 - D) Increase in body weight

Answer: A

Rationale: Deepening of the voice may be seen as a feature of virilization following male hormone therapy in a female client. Virilization is the acquisition of male characteristics in the female. Other features of virilization include pigmentation, and not hypopigmentation, of the skin and an increase, not a decrease, in the size of the clitoris. An increase in body weight is not a sign of virilization. It may occur due to impaired nutrition of the body.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 3

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 584, Client Receiving a Female Hormone

6. A client taking oral contraceptive drugs reports occasional abdominal bloating. Which instruction should the nurse point out may be beneficial to help alleviate the condition?
- A) Limit fluid intake with meals.
 - B) Take the drug along with food.
 - C) Decrease the intake of salt.
 - D) Elevate the legs when sitting.

Answer: A

Rationale: The nurse should instruct the client to limit fluid intake with meals if they experience bloating of the abdomen after oral contraceptive use. Light to moderate exercise also may be helpful. Taking the drug with food alleviates nausea and GI irritation, and not the bloating of the abdomen. A decrease in salt intake causes a decrease in the intake of sodium, which may be beneficial when there is an excess fluid volume, and not when there is bloating of the abdomen. Elevating the legs when sitting prevents thromboembolism seen with oral contraceptive use. It does not prevent bloating of the abdomen.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 584, Client Receiving a Female Hormone

7. A nurse is preparing a presentation for a young adult women's group about oral contraceptives and the risks. Which conditions would the nurse include as having an increased risk of developing when prescribed contraceptives?
- A) Fibrocystic breast disease
 - B) Ovarian cysts
 - C) Endometrial cancer
 - D) Hepatic adenoma

Answer: D

Rationale: The risks of hepatic adenoma may be increased with the use of oral contraceptives. Oral contraceptives also increase the risk of cardiovascular diseases, thromboembolic disorders, strokes, visual disturbances, gallbladder disease, hypertension, and fetal abnormalities. The risks of fibrocystic breast disease, ovarian cysts, and endometrial cancer are decreased, not increased, with the use of oral contraceptives.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 582, Miscellaneous Reactions

8. A client has a levonorgestrel implant contraceptive system inserted. The nurse understands that this type of contraceptive provides protection for how long?
- A) 1 year
 - B) 3 years
 - C) 5 years
 - D) 7 years

Answer: C

Rationale: Levonorgestrel, a progestin, is available as an implant contraceptive system. Six capsules, each containing levonorgestrel, are implanted using local anesthesia in the subdermal tissues of the midportion of the upper arm. The capsules provide contraceptive protection for 5 years but may be removed at any time at the request of the client.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 585, Contraceptive Implant System

9. After explaining the various contraceptive options with a client, the client opts for the etonogestrel/ethinyl estradiol vaginal ring. After teaching the client about this choice, the nurse determines that the teaching was effective when the client makes which statement?
- A) "Once I insert the ring, it won't come out."
 - B) "The ring should stay in place for 3 weeks."
 - C) "When bleeding starts, that's the signal to change the ring."
 - D) "I can reuse the ring several times before discarding it."

Answer: B

Rationale: When using the vaginal ring, the client should insert the ring and keep it in place for 3 weeks and then remove it on the same day of the week it was inserted. The ring can be expelled accidentally, such as with straining on defecation or removing a tampon. Typically, bleeding occurs once the ring is removed. The ring should be discarded after each use.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 4

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 585, Etonogestrel/Ethinyl Estradiol Vaginal Ring (NuvaRing)

10. The nurse is scheduled to administer an oral contraceptive to a client admitted with type 2 diabetes. What is the **priority** teaching that would be provided regarding this medication?
- A) Take the medication the same time each day with food to decrease the development of nausea and vomiting.
 - B) If you skip a dose, use another form of contraception until the first week of the next cycle of the oral contraceptive.
 - C) Notify the primary care provider if your glucose is elevated because an adjustment in oral antidiabetic medications may be needed.
 - D) Call the primary care provider for any sudden onset of chest pain, shortness of breath, or redness, swelling, and pain in a leg.

Answer: D

Rationale: The priority for teaching in the situation is that the major adverse effect of taking oral contraceptives is the possibility for developing venous thromboembolism, a life-threatening emergency that must be reported to the primary care provider (PCP) right away. The nurse must teach the client on the signs and symptoms of a deep venous thrombosis: leg pain, redness, and edema. The client could also develop a pulmonary embolus with sudden dyspnea and chest pain. The other teaching points are not as high of a priority because they consist of how to take the medication to decrease the possible side effect of nausea, which usually decreases with taking the medication for a few months. Also, it is important to take the medication the same time of day to help remember to take it. Instructions about what to do if a dose is skipped is important to prevent pregnancy by instructing the client to use another form of contraception until the first week of the next cycle of the oral contraceptive. It is important for a client to report an elevated blood glucose level, so the PCP may consider what may be the cause for the increase and decide if an increase in the oral antidiabetic medications is necessary.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 4

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 587, Estrogens and Progestins

11. The nurse is scheduled to administer testosterone transdermal patch to a client admitted with primary hypogonadism. What is the **priority** teaching that would be provided regarding this medication?
- A) Apply nightly to clean, dry skin on the abdomen, thigh, back, or upper arm.
 - B) Rotate sites with 7 days between applications to any given site.
 - C) Remove old patch and fold in half and dispose of properly in trash can.
 - D) Report to primary care provider any leg pain, redness, and swelling right away.

Answer: D

Rationale: The priority for teaching in the situation is that the major adverse effect of taking testosterone is the possibility for developing venous thromboembolism, so the nurse must teach the client on the signs and symptoms of a deep venous thrombosis: leg pain, redness, and edema. The client could also develop a pulmonary embolus with sudden dyspnea and chest pain. The other teaching points are not as high of a priority because they consist of Androderm application instructions, which are included on the package that the delivery systems are dispensed.

Question format: Multiple Choice

Chapter: 43

Learning Objective: 4

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 579, Client Receiving a Male Hormone

12. A nursing instructor is explaining the role of androgens to a nursing class. The instructor determines that the class was successful when the students correctly choose which action(s) of androgens after the onset of puberty? Select all that apply.
- A) Body fat distribution
 - B) Muscle development
 - C) Epiphyseal growth
 - D) Glucose metabolism
 - E) Body hair

Answer: A, B, E

Rationale: From puberty onward, androgens continue to aid in the development and maintenance of secondary sex characteristics, which include facial hair, deep voice, body hair, body fat distribution, and muscle development. Individuals with diabetes are at risk of developing hyperglycemia when androgens are also prescribed and the combination must be monitored carefully. The growth hormone will affect the epiphyseal growth and clients must be monitored to ensure the client does not suffer any adverse reactions associated with GH.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Physiological Adaptation

Integrated Process: Teaching/Learning

Reference: p. 577, Male Hormones

13. A nurse is preparing to administer an androgen drug to a client. The nurse would anticipate which potential diagnos(es) in the client's medical record? Select all that apply.
- A) Anemia of renal insufficiency
 - B) Hypogonadism
 - C) Postmenopausal metastatic breast carcinoma
 - D) Male-pattern baldness
 - E) Benign prostatic hypertrophy

Answer: B, C

Rationale: A nurse may be asked to administer androgen drugs to clients with the following medical conditions: testosterone deficiency, hypogonadism, delayed puberty, testosterone deficiency after puberty, postmenopausal metastatic breast carcinoma, and premenopausal, hormone-dependent metastatic breast carcinoma. Male-pattern baldness is an adverse reaction to androgens.

Androgens are contraindicated in clients with prostate gland disorders such as carcinoma and enlargement.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 577, Male Hormones

14. A nurse is preparing to teach a client about the prescribed testosterone. Which potential adverse reaction(s) should the nurse point out to the client? Select all that apply.
- A) Impotence
 - B) Fluid imbalance
 - C) Male-pattern baldness
 - D) Somnolence
 - E) Mania

Answer: A, B, C

Rationale: A nurse should advise a client beginning therapy with testosterone of the following adverse effects: gynecomastia, testicular atrophy, inhibition of testicular function, impotence, enlargement of the penis, nausea, vomiting, jaundice, headache, anxiety, male-pattern baldness, acne, depression (not mania), and fluid and electrolyte imbalances (which include sodium, water, chloride, potassium, calcium, and phosphate retention). Insomnia and not somnolence is an adverse reaction to progesterone.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 578, Adverse Reactions

15. A client presents to the clinic with vague reports of not feeling well. Which assessment finding(s) would lead the nurse to suspect the client is abusing anabolic steroids? Select all that apply.
- A) Uncontrolled rage
 - B) Jaundice
 - C) Inability to concentrate
 - D) Hyperglycemia
 - E) Dehydration

Answer: A, B, C

Rationale: A client abusing anabolic steroids might exhibit the following signs: uncontrolled rage, severe depression, suicidal tendencies, malignant or benign liver tumors, aggressive behavior, inability to concentrate, personality changes, acne, jaundice, anorexia, male-pattern baldness, fluid and electrolyte imbalances, and muscle cramps. Clients with diabetes may experience glucose tolerance and should be monitored. The clients may also experience edema related to electrolyte imbalance instead of dehydration.

Question format: Multiple Select

Chapter: 43

Learning Objective: 2

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 578, Adverse Reactions

16. A nurse is teaching a client how estrogen acts in the female body. Which action(s) should the nurse point out to the client? Select all that apply.
- A) Diuresis
 - B) Calcium and phosphorus conservation
 - C) Thinning of the cervical mucus
 - D) Protein catabolism
 - E) Stimulation of fallopian tube contraction

Answer: B, C, E

Rationale: The actions of estrogen on the female body include fluid retention; calcium and phosphorus conservation; protein anabolism; thinning of the cervical mucus; stimulation of fallopian tube contraction; growth of axillary and pubic hair; restoration of the endometrium after menstruation; and at puberty promotion of growth and development of the vagina, uterus, fallopian tubes, and breasts. Mild diuresis is a sign of a therapeutic response to thyroid supplementation. Oxandrolone is given to treat protein catabolism.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Physiological Adaptation

Integrated Process: Teaching/Learning

Reference: p. 581, Female Hormones

17. A nurse is preparing to administer norethindrone to a client. The nurse will explain to the client that this drug can be used for which situation(s)? Select all that apply.
- A) Amenorrhea
 - B) Edema
 - C) Endometriosis
 - D) Pregnancy prevention
 - E) Prevention of estrogen-dependent breast carcinoma

Answer: A, C, D

Rationale: Progestins, like norethindrone, are used to treat amenorrhea, endometriosis, and functional uterine bleeding and to prevent pregnancy. Edema is a potential adverse reaction to progestins. Androgen therapy may be used for breast carcinoma; however, it is not used to prevent it.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 581, Female Hormones

18. A nurse is teaching a client about the use of estradiol. The nurse warns the client of which dermatologic reaction(s) that may continue after drug discontinuation? Select all that apply.

- A) Dermatitis
- B) Stevens–Johnson syndrome
- C) Pruritus
- D) Chloasma
- E) Melasma

Answer: D, E

Rationale: Chloasma and melasma are dermatologic reactions that can result from the use of estrogens, like estradiol, and may continue when use of the drug is discontinued. Dermatitis and pruritus are potential adverse reactions that should clear up when the drug is discontinued. Stevens–Johnson syndrome can be seen when the client uses any of the following: cephalosporins, lamotrigine, sulfonamides, or allopurinol. The symptoms should clear up after the drug is discontinued and the syndrome is properly treated.

Question format: Multiple Select

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 582, Dermatologic Reactions

19. A nurse is conducting the ongoing assessment on a client who has been prescribed estradiol and norethindrone combined medication. Which finding(s) on the assessment should the nurse **prioritize**? Select all that apply.

- A) Nausea
- B) Early breakthrough bleeding
- C) Cervical mucorrhea
- D) Edema
- E) Increased spotting

Answer: A, C, D

Rationale: Clients taking triphasic oral contraceptives are at an increased risk of developing an estrogen excess. Signs and symptoms of excess estrogen include nausea, bloating, cervical mucorrhea, polyposis, hypertension, migraine headache, breast fullness or tenderness, and edema. Early breakthrough bleeding and increased spotting are signs of estrogen deficiency and should be reported as well.

Question format: Multiple Select

Chapter: 43

Learning Objective: 3

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 583, Table 43.2 Estrogen and Progestin: Excess and Deficiency

20. A client presents to the client for routine follow-up for norethindrone therapy. The nurse predicts the client has developed progestin excess based on which assessed sign(s) and symptom(s)? Select all that apply.
- A) Amenorrhea
 - B) Late breakthrough bleeding
 - C) Hair loss
 - D) Weight gain
 - E) Hirsutism

Answer: C, D, E

Rationale: Signs of excess progestin include increased appetite, weight gain, tiredness, fatigue, hypomenorrhea, acne, oily scalp, hair loss, hirsutism, depression, monilial vaginitis, and breast regression. Amenorrhea and late breakthrough bleeding are signs of progestin deficiency.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 583, Table 43.2 Estrogen and Progestin: Excess and Deficiency

21. A nurse educating a 40-year-old client on oral contraceptives should strongly caution the client not to smoke. The nurse should point out that smoking increases the risk of which adverse event(s)? Select all that apply.
- A) Venous thromboembolism
 - B) Pulmonary hypertension
 - C) Hemorrhagic stroke
 - D) Myocardial infarction
 - E) Atrial fibrillation

Answer: A, C, D

Rationale: Smoking while taking oral contraceptives increases a client's risk for venous and arterial thromboembolism, myocardial infarction, and thrombotic and hemorrhagic stroke. Pulmonary hypertension and atrial fibrillation are not noted to be potential adverse effects.

Question format: Multiple Select

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 583, Adverse Reactions: Contraceptive Hormones

22. The nurse is completing the ongoing assessment of a client who has been receiving an estrogen/ progestin combination product. Which assessment(s) should the nurse prioritize? Select all that apply.
- A) Blood pressure
 - B) Pulse
 - C) Respiratory rate
 - D) Temperature
 - E) Therapeutic effects

Answer: A, B, C, E

Rationale: The nurse's ongoing assessment of clients receiving estrogen, progestin, or combination products should include blood pressure, pulse, respiratory rate, weight, and questioning about adverse effects and therapeutic effects. The temperature would be part of the general assessment but not priority for this evaluation as it would not help isolate a potential adverse reaction to the medication.

Question format: Multiple Select

Chapter: 43

Learning Objective: 2

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 584, Client Receiving a Female Hormone

23. A nurse is teaching a client about transdermal estrogen therapy. The nurse explains that this method of delivery has been found to be safer, especially for women with which diagnosed condition(s)? Select all that apply.
- A) Hypertriglyceridemia
 - B) Type 2 diabetes
 - C) Migraine headaches
 - D) Hypertension
 - E) Rheumatoid arthritis

Answer: A, B, C, D

Rationale: Transdermal delivery of estrogens has been found to be safer especially for women with hypertriglyceridemia, type 2 diabetes, hypertension, and migraine headaches and those who smoke. Individuals with arthritis may be given corticosteroids as treatment.

Question format: Multiple Select

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Teaching/Learning

Reference: p. 584, Client Receiving a Female Hormone

24. A nurse is developing a teaching plan for a client who is prescribed testosterone gel. The nurse instructs the client to apply the gel to which location(s)? Select all that apply.
- A) Shoulders
 - B) Upper arms
 - C) Abdomen
 - D) Thighs
 - E) Groin

Answer: A, B, C

Rationale: Testosterone gel is applied once daily (preferably in the morning) to clean, dry, intact skin of the shoulders, upper arms, or abdomen. The thighs and groin would not be appropriate.

Question format: Multiple Select

Chapter: 43

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 579, Client Receiving a Male Hormone

25. A group of nursing students are comparing male and female hormones. The instructor determines the session is successful after the students correctly choose which drug(s) as being anabolic steroids? Select all that apply.
- A) Estrogen
 - B) Oxymetholone
 - C) Oxandrolone
 - D) Testosterone
 - E) Fluoxymesterone

Answer: B, C

Rationale: Anabolic steroids include oxymetholone and oxandrolone.

Testosterone and fluoxymesterone are male hormones.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Remember

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 589, Summary Drug Table

26. The nurse examines the history of a client prescribed oral contraceptive with estrogen and progestin and should report which as contraindication(s)? Select all that apply.
- A) Deep vein thrombosis
 - B) Hypertension
 - C) Estrogen-dependent breast cancer
 - D) Fatty liver disease
 - E) Migraine headaches

Answer: A, C, D, E

Rationale: The nurse should examine the history noting that hypertension is not a contraindication for taking an oral contraceptive. Thromboembolism, including deep vein thrombosis or a pulmonary embolism, is a contraindication because oral contraceptives increase risks for the formation of blood clots. Primary breast cancer whether it is estrogen dependent or not is a contraindication for taking an oral contraceptive. Any estrogen-dependent neoplasm, such as uterine or ovarian, is also a contraindication. Any liver disease or a reduction of the liver function is a contraindication for progestin because the hormone will not be properly metabolized. Migraine is a contraindication for progestin, one of the ingredients of the listed oral contraceptive.

Question format: Multiple Select

Chapter: 43

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 583, Adverse Reactions: Contraceptive Hormones

27. The nurse is caring for a client in an outpatient clinic who plans to take an oral contraceptive. The nurse should perform which pre-administration assessment(s) before the client sees the primary care provider? Select all that apply.
- A) Determine menstrual history, including age of onset of menses, pattern of menses, and any changes to the pattern.
 - B) Assess sexual history, including number of partners, sexual practices, and reason for wanting the contraceptive.
 - C) Obtain an assessment of using tobacco products, smokeless tobacco, or any attempts to quit using tobacco.
 - D) Gather client history of any breast, uterine, or ovarian cancers, cardiovascular, or thromboembolism disorders.
 - E) Collect accurate blood pressure in both arms for comparison and orthostatic blood pressure readings supine and standing.

Answer: A, B, C, D

Rationale: The nurse should assess the client's complete menstrual history to determine if the menses are regular or irregular, and if there are any problems with menstruation. Sexual history is important to gain information as to the client's risk-taking behaviors, and understanding that oral contraceptives do not decrease the risks for sexually transmitted infections. It is important to determine the reasons why the client wants oral contraception. It is important to assess use of tobacco products, including smokeless products that contain nicotine, because they increase risks for developing blood clots and thromboembolism. A thorough history should be taken to determine if contraindications exist for taking an oral contraceptive. This includes primary breast cancer, estrogen neoplasms of the uterus or ovaries, cardiovascular diseases, such as heart valve disease, or stroke. Other contraindications include thromboembolism related disorders, including deep vein thrombosis or pulmonary embolism. The nurse should take vital signs and record them, but does not need to assess blood pressure in both arms and take an orthostatic blood pressure because the oral contraceptives do not cause postural hypotension.

Question format: Multiple Select

Chapter: 43

Learning Objective: 2

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 584, Client Receiving a Female Hormone