

# DIALOGUES

## I N C O N T R A C E P T I O N<sup>®</sup>



### Post-Test

The following Post-Test contains 10 multiple-choice questions based on information contained in the *Dialogues in Contraception*<sup>®</sup>, Volume 10, Number 3, newsletter. It is designed to enable practitioners to assess the knowledge they have gained from the newsletter and to identify areas for further study.

On the Answer Sheet, fill in all identifying information requested. Complete the Answer Sheet by circling, in each case, the one response that most accurately answers the question.

1. Women whose pregnancies are unintended are less likely than those whose pregnancies are intended to:
  - a. stop smoking during pregnancy
  - b. attend the recommended number of prenatal care visits
  - c. breastfeed their babies
  - d. all of the above
2. Compared with incidence of venous thromboembolism (VTE) during use of combination oral contraceptives (COCs), incidence of VTE during pregnancy is:
  - a. half as common
  - b. similar
  - c. twice as common
  - d. 3 times as common
3. Current use of COCs for at least 12 months reduces risk of hospitalization for pelvic inflammatory disease by approximately:
  - a. 10% to 20%
  - b. 30% to 40%
  - c. 50% to 60%
  - d. 60% to 80%
4. The major mechanism of action of combination hormonal contraceptive methods, depot medroxyprogesterone acetate (DMPA), and intrauterine contraceptives (IUCs) is prevention of fertilization, not prevention of implantation.
  - a. True
  - b. False
5. The Women's CARE 2002 case-control study, which demonstrated that current or previous use of COCs was not associated with increased risk of breast cancer, was conducted among women aged:
  - a. 15 to 24
  - b. 25 to 34
  - c. 35 to 64
  - d. all of the above
6. With regard to risk of ovarian cancer, studies have found that:
  - a. use of any type of COC reduces risk by at least 40% compared with COC never-use
  - b. the protective effect of COC use persists for 20 years or more
  - c. COC use reduces risk in women with *BRCA1* and *BRCA2* mutations and/or family history of ovarian cancer compared with nonuse
  - d. all of the above
7. Ever-use of COCs for as little as 1 year reduces risk of endometrial cancer by at least 40% compared with nonuse, and the protective effect persists for at least 20 years after COC discontinuation.
  - a. True
  - b. False
8. Sexually transmitted infection by human papillomavirus (HPV) is present in what percentage of cases of cervical cancer?
  - a. 49.7%
  - b. 59.7%
  - c. 69.7%
  - d. 99.7%
9. A 2002 World Health Organization (WHO) review of data from various studies concluded that an increased risk of cervical cancer with long-term COC use only occurs in women with persistent HPV infection.
  - a. True
  - b. False
10. Ever-use of DMPA has been found to increase risk of cervical cancer by 40% compared with never-use.
  - a. True
  - b. False

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## IN CONTRACEPTION®



### Post-Test Answer Sheet

- |    |   |   |   |   |     |   |   |   |   |
|----|---|---|---|---|-----|---|---|---|---|
| 1. | a | b | c | d | 6.  | a | b | c | d |
| 2. | a | b | c | d | 7.  | a | b |   |   |
| 3. | a | b | c | d | 8.  | a | b | c | d |
| 4. | a | b |   |   | 9.  | a | b |   |   |
| 5. | a | b | c | d | 10. | a | b |   |   |

### CME or Nursing Contact Hour Enrollment

(PRINT) NAME \_\_\_\_\_ DEGREE \_\_\_\_\_  
FIRST LAST

MEDICAL LICENSE # \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SPECIALTY \_\_\_\_\_ E-MAIL \_\_\_\_\_

**METHOD OF PAYMENT**

- Check (payable to USC or NPWH)
- Credit Card

Visa/MasterCard # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Amount \$ \_\_\_\_\_

To receive CME credit, please mail a check for \$15.00 (payable to USC) or credit card information and this Answer Sheet to:  
**Office of Continuing Education, Keck School of Medicine of the University of Southern California**  
**1975 Zonal Avenue, KAM 317, Los Angeles, CA 90033-1039**  
 (323) 442-2555 or (800) USC-1119 – FAX (323) 442-2152 (for credit card payment only)  
 Certificates will be sent approximately one month after submission.

To receive nursing contact hours, please mail a check for \$15.00 (payable to NPWH) or credit card information and this Answer Sheet to:  
**National Association of Nurse Practitioners in Women's Health**  
**505 C Street NE, Washington, DC 20002**  
 (202) 543-9693 – FAX (202) 543-9858 (for credit card payment only)

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## Evaluation Questionnaire

We would appreciate your comments.  
Please return completed questionnaire to our toll-free fax number: (888) 665-8650.

1. How long did it take you to complete this activity? \_\_\_\_\_

2. I found the content (check appropriate boxes):

Not practical

Poorly written

Too difficult

Moderately practical

Well written

Moderately difficult

Very practical

Expertly written

Too easy

3. The stated objectives were achieved.

Yes  No

4. The examination questions were:

Too difficult

Too short

Poorly written

Too easy

Too long

Well written

5. Did you find the program:

Biased for or against any particular drug?

Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Fairly balanced in terms of treatment options?

Yes  No

If no, please explain: \_\_\_\_\_

\_\_\_\_\_

6. Did this material enhance your professional effectiveness or change your clinical practice?  Yes  No

If yes, what changes do you plan to implement? \_\_\_\_\_

\_\_\_\_\_

Suggestions for future topics: \_\_\_\_\_

\_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

Name (optional): \_\_\_\_\_