# CERTIFICATE MAINTENANCE MODULE

Gynecologic, Sexual, Reproductive, and PrimaryCare 2025-2027

Online Submissions Must Be Completed By 12/15/2027

This module is worth 20 ACNM approved contact hours. 7 hours have been designated towards Pharmacology.

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# GYNECOLOGIC, SEXUAL, REPRODUCTIVE, AND PRIMARY CARE MODULE 2025-2027

The AMCB Certificate Maintenance Program (CMP) Modules are designed as self-learning tools to enable Certified Midwives and Certified Nurse-Midwives to learn new information in a subject area or to review evidence-based care for commonly encountered areas of midwifery practice.

A module consists of:

- 1. References
- 2. Objectives
- 3. Multiple-choice questions based on the references
- 4. Evaluation of the module

Answers are based on the references and have been chosen to educate you about new content. Therefore, please be aware that answering questions based on prior knowledge or experience may result in an incorrect answer. You are required to read the relevant references on each particular topic, and then complete the questions for that topic.

Choose the <u>one</u> most correct answer. Questions have been written to have a single best answer. The responses have been organized so that any "pattern" to the correct answers is accidental. Please do not worry if you see a "pattern" in your answers. Patterns are random.

Criteria for successfully passing this module are:

- 75% of module questions answered correctly.
- Completion of the module evaluation section.

Modules are now intended to be completed online. This service will allow you to receive your results instantly upon submission of your answers, as well as having the option to print a pass letter instantly. If you have not done so already, please call our office at 410-694-9424 to set up a username and password for this option. <u>Final deadline for submitting the GYN Module online will be 12/15/2027 at 11:59pm EST.</u>

If you are unable to have your Module scored through the AMCB Portal system, please contact our office at 410-694-9424.

Please be advised that some CMP modules contain sensitive or upsetting topics that may trigger an emotional response in some individuals. Please also be advised that the overall scope of midwifery practice extends beyond the Core Competencies; CMP module materials are for educational purposes only. It does not imply that every midwife's practice can or should include every potential practice area.

### REFERENCES FOR GYNECOLOGIC, SEXUAL, REPRODUCTIVE, AND PRIMARY CARE MODULE 2025-2027

#### **Provider Relationships**

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#### **Precepting**

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#### **Contraception in Medically Complex Individuals**

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#### **Pregnancy Options Counseling**

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#### Care of Elder Women

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#### **LARC**

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#### Low Libido

• Edinoff, A. N., Sanders, N. M., Lewis, K. B., Apgar, T. L., Cornett, E. M., Kaye, A. M., & Kaye, A. D. (2022). Bremelanotide for treatment of female hypoactive sexual desire. *Neurology International*, 14(1), 75–88. https://doi.org/10.3390/neurolint14010006

#### **Sexual History Taking**

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#### **Public Health and Preventable Disease**

• Jarrell, L., & Perryman, K. (2023). Mpox (monkeypox): Diagnosis, prevention, and management in adults: Diagnosis, prevention, and management in adults. *The Nurse Practitioner*, 48(4), 13–20. https://doi.org/10.1097/01.NPR.0000000000000005

#### **Abortion Laws**

• Jenkins, J., Pitney, C., Nuzzo, M., & Eagen-Torkko, M. (2023). Midwifery and APRN scope of practice in abortion care in the early post-roe era: Everything old is new again. *Journal of Midwifery & Women's Health*, 68(6), 734–743. https://doi.org/10.1111/jmwh.13599

#### **Abnormal Uterine Bleeding and Management**

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#### **Menopause Management**

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#### Weight Management

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#### **Diabetes Management in Primary Care**

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#### **Adolescent GYN**

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#### **Increasing Workforce Diversity**

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#### **Uro Gyn and Pelvic PT**

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#### **Vulvar Lesions Derm**

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#### **GYN Pain**

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#### **Abortion Management and Post Abortion Care**

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#### **Osteoporosis Screening and Management**

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#### Vaginal Infections Including BV, Candida, Ureaplasm and Mycoplasm

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# OBJECTIVES FOR GYNECOLOGIC, SEXUAL, REPRODUCTIVE, AND PRIMARY CARE MODULE 2025-2027

#### **Provider Relationships**

- Understand the four elements of patient-provider relationships and how they impact patient satisfaction
- Review the challenges associated with telehealth visits after COVID-19 pandemic
- Identify ways to improve patient-provider relationships

#### **Precepting**

- Understand strategies that facilitate knowledge and skill development for student midwives
- Identify qualities of effective clinical teachers
- Describe how different levels of support promote meeting student learning needs

#### **Contraception in Medically Complex Individuals**

- Understand what contraceptive methods have the highest efficacy in obese individuals
- Identify the risk associated with contraceptive use in obese individuals
- Recognize the challenges obese patients have when receiving contraceptive care

#### **Pregnancy Options Counseling**

- Review positive attributes of pregnancy options counseling
- Understand negative characteristics of pregnancy options counseling
- Identify best practices for pregnancy options counseling

#### **Care of Older Women**

- Identify effective and safe hormone replacement options for patients based on symptoms, medical history, and current medical conditions
- Identify how routes of hormone replacement options can impact current medical conditions
- Identify key components of patient education to include when reviewing hormone replacement options

#### LARC

- Understand concerns about long-acting reversable contraception (LARC) devices
- Describe LARC device mechanisms of action and benefits
- Recognize myths and barriers related to LARC devices

#### Low Libido

- Define Hypoactive Sexual Desire Disorder (HSDD)
- Understand how to diagnose and manage Hypoactive Sexual Desire Disorder (HSDD)
- Identify the risks and benefits of the medication bremelanotide

#### **Sexual History Taking**

- Understand the risks associated with undiagnosed sexually transmitted infections
- Identify key elements of taking a sexual health history
- Understand the Center for Disease Control's Guidelines 5 P's for taking a sexual history

#### **Public Health and Preventable Disease**

- Identify the symptoms of monkeypox
- Review how to prevent monkeypox
- Identify the current treatments available for monkeypox

#### **Abortion Laws**

- Describe the historical role of midwives in abortion care
- Identify the current practice issues for midwives in abortion care
- Identify the major arguments around practice scope for midwives in abortion care

#### **Abnormal Uterine Bleeding and Management**

- Define abnormal uterine bleeding (AUB)
- Understand causes of abnormal uterine bleeding
- Summarize options for the treatment of abnormal uterine bleeding

#### Menopause Management

- Describe options for menopausal hormone treatment
- Identify potential effects of menopausal hormone therapy on cardiovascular health
- Discuss risks related to menopausal hormone therapy treatment

#### Weight Management

- List key considerations for providers considering anti-obesity medication prescribing
- Identify potential benefits and risk of using anti-obesity drugs
- Review common barriers to prescribing anti-obesity drugs in practice

#### **Diabetes Management in Primary Care**

- Understand the health benefits of bariatric surgery for management of type 2 diabetes
- Define the recommended weight loss needed to slow the progression of type 2 diabetes
- Understand the use of weight loss medications for treatment of type 2 diabetes

#### **Adolescent GYN**

- Identify the factors and people that influence sexuality
- Understand the life behaviors that go into the development of a sexually healthy adult
- Understand advocating for adolescents through confidential interviews and screenings

#### **Increasing Workforce Diversity**

- Understand motivating factors and barriers for people of color who aspire to be midwives
- Review the benefits of racially and culturally concordant care
- Understand policy interventions to increase diversity in midwifery
- Recognize the benefits of racially and culturally concordant care

#### **Uro Gyn and Pelvic PT**

- Describe symptoms of myofascial pelvic pain
- Review screening questions for myofascial pelvic pain
- Identify treatment options for myofascial pelvic pain

#### **Vulvar Lesions Derm**

- Identify common and benign lesions
- Differentiate benign and suspicious lesions
- Identify normal perineal anatomy

#### **GYN Pain**

- Explore the historical use of cannabis in medical culture
- Understand the mechanisms of action of cannabis in the human body
- Review evidence of cannabis for gynecological pain conditions
- Define the risks and barriers to cannabis use for gynecological pain

#### **Abortion Management and Post Abortion Care**

- Identify the distinction between self-managed abortion and facility-based abortion.
- Understand legal considerations for self-managed abortion
- Describe potential patient benefits and risks of self-managed abortion

#### **Osteoporosis Screening and Management**

- Review criteria for osteoporosis screening inclusion
- Identify Dual-energy x-ray absorptiometry (DXA) T-score definitions
- Identify osteoporosis management options

#### Vaginal Infections Including BV, Candida, Ureaplasm and Mycoplasm

- Review prevalence of Mycoplasma genitalium
- Identify risk factors for Mycoplasma genitalium
- Identify treatments for Mycoplasma genitalium

# QUESTIONS FOR GYNECOLOGIC, SEXUAL, REPRODUCTIVE, AND PRIMARY CARE MODULE 2025-2027

I certify that I have read each of the articles in this module in their entirety.

\( \subset \text{YES} \)

**Provider Relationships** 

- 1. Which of the following is an element of the patient-provider relationship that contributes to patient satisfaction?
  - a. Provider knowledge
  - b. Provider personality
  - c. Appointment length
- 2. Approximately one year after the COVID-19 pandemic, what percentage of American adults reported using telehealth visits during the previous four weeks?
  - a. 25%
  - b. 35%
  - c. 45%
- 3. Which of the following themes was found during participant interviews?
  - a. Improved communication
  - b. Multitasking provider
  - c. Rapport building and alliance
- 4. What did both patients and providers report at the end of this study?
  - a. Improved empathy and attentiveness
  - b. Lost shared physical space and opportunity to build rapport face to face contact
  - c. Decreased insight into the patient's lives and living situation

#### **Precepting**

- 5. Which of the following is identified as a quality of an effective teacher?
  - a. Apprehension regarding personal skills
  - b. Concrete teaching strategies
  - c. Demonstration-Observation-Feedback
- 6. Which of the following promoted student's trust in the knowledge of the midwife?
  - a. Enthusiasm about evidence-based practice
  - b. Repetitive role-modeling
  - c. Lecture review of textbook content

- 7. What was identified as a key element of problematization by midwives that promoted student confidence?
  - a. Correction of a student in the presence of a patient
  - b. Student involvement in problem identification and resolution
  - c. Use of teaching methods by which the midwife was taught
- 8. What is a benefit of positive role modeling by midwives?
  - a. It is likely to be modelled by students
  - b. It saves time
  - c. It is likely to decrease efficiency

#### **Contraception in Medically Complex Individuals**

- 9. What method of contraception has a comparable efficacy as sterilization?
  - a. Depot medroxyprogesterone acetate
  - b. Combined hormonal transdermal patch
  - c. Contraceptive subdermal implant
- 10. Which of the following statements is true?
  - a. Individuals with BMI > 35 are less likely to use contraception
  - b. Most contraceptive methods are contraindicated for obese individuals
  - c. There is extensive research on contraceptive methods and obesity
- 11. Which of the following statements regarding combined oral contraceptive pills use in obesity is correct?
  - a. Individuals with BMI >30 kg requires higher doses of ethinyl estradiol
  - b. Cyclic dosing of 20mcg ethinyl estradiol in obese patients is most effective
  - c. Continuous dosing of 20mcg ethinyl estradiol in obese patients is most effective
- 12. The contraceptive patch may be less effective in individuals who weigh?
  - a.  $\geq 70 \text{ kg}$
  - b.  $\geq 80 \text{ kg}$
  - c.  $\geq 90 \text{ kg}$

#### **Pregnancy Options Counseling**

- 13. What is one reason that adolescents and young adults were more likely to present to care later in pregnancy?
  - a. Busy schedule
  - b. Concern regarding parental discovery
  - c. Denial of the pregnancy

- 14. Which of the following is a positive provider communication skill essential to pregnancy options counseling?
  - a. Directive
  - b. Attention to nonverbal cues
  - c. Being critical
- 15. Most of the participants wanted information about which of the following options?
  - a. Adoption
  - b. Abortion
  - c. All options
- 16. What limited the provider's ability to provide adequate pregnancy options counseling?
  - a. Establishing a connection
  - b. Rushed environments
  - c. Individualized discussion content

#### Care of Older Women

- 17. Of the medical societies identified in the article, which society recommends hormone therapy (HT) for cardiovascular disease (CVD) risk reduction?
  - a. The American College of Obstetricians and Gynecologists (ACOG)
  - b. The North American Menopause Society (NAMS)
  - c. None of the medical societies identified in the article
- 18. When considering Estring versus Femring for hormone replacement in the menopausal patient, which of the below considerations is true?
  - a. Femring and Estring are the same type of hormone therapy, just different brand names
  - b. Femring is a systemic replacement dose whereas Estring is a low dose vaginal estrogen
  - c. Femring is not associated with an increased risk of endometrial hyperplasia if given alone
- 19. When considering the following patient profiles, which patient should NOT be considered for low dose vaginal estrogen replacement?
  - a. A 60-year-old patient with painful intercourse and a history of estrogenresponsive cancer
  - b. A 72-year-old patient with vaginal dryness and is a cigarette smoker
  - c. A 56-year-old patient with hot flashes and history of stroke

- 20. Which hormone replacement should be considered in a patient with vasomotor symptoms, uterus & a history of intolerance to progestogen-related side effects?
  - a. An oral conjugated equine estrogen combined with a selective estrogen receptor modulator could be considered
  - b. An oral conjugated equine estrogen replacement treatment alone could be considered
  - c. This patient should not be considered for any hormone replacement treatment
- 21. When considering systemic hormone replacement routes, what considerations should be made for the patient with hyperlipidemia?
  - a. All systemic hormone replacement routes have an equal impact on lipid profiles
  - b. All systemic hormone replacement routes are contraindicated with hyperlipidemia
  - c. Transdermal routes have less of an impact on triglycerides when compared to oral routes

#### LARC

- 22. What is the estimated failure rate for long-acting reversable contraception (LARC) methods?
  - a. >5%.
  - b. 2-3%
  - c. < 1%
- 23. Which of the following is NOT a mechanism of action for long-acting reversable contraception (LARC) methods?
  - a. Uterine environment changes
  - b. Prevention of implantation of embryos
  - c. Thickening of cervical mucus
- 24. Which of the following is a myth associated with long-acting reversable contraception (LARC) methods?
  - a. Decreased risk of infection
  - b. Permanent infertility
  - c. Never covered by insurance
- 25. Which of the following Intrauterine Devices (IUDs) is most likely to reduce or suppress menstrual bleeding?
  - a. Levonorgestrel 13.5 mg
  - b. Levonorgestrel 52 mg
  - c. Levonorgestrel 19.5 mg

#### Low Libido

- 26. How is Hypoactive Sexual Desire Disorder (HSDD) defined?
  - a. Persistent deficiency of sexual desire resulting in distress
  - b. Physical inability to achieve orgasm resulting in anxiety
  - c. Intermittent decrease in desire resulting in depression
- 27. The risk of Hypoactive Sexual Desire Disorder (HSDD) is more prevalent in which of following?
  - a. 48-year-old female, premenopausal
  - b. 28-year-old female, pregnant
  - c. 38-year-old female, surgical menopausal
- 28. Which of the following are psychosocial treatments for Hypoactive Sexual Desire Disorder (HSDD)?
  - a. Cognitive behavioral and couples therapy
  - b. Eye movement desensitization and reprocessing (EMDR) and art therapy
  - c. Sex and brain spotting therapy
- 29. Which of the following is a contraindication to Bremelanotide?
  - a. Ductal carcinoma in-situ (DCIS)
  - b. Uncontrolled hypertension
  - c. Major depressive disorder

#### **Sexual History Taking**

- 30. Which of the following statements is inaccurate?
  - a. Cultural humility acknowledges one's own cultural biases to promote equitable care
  - b. Cultural humility restores balance between the patient and the provider
  - c. Cultural humility reduces trust and effective communication between the patient and the provider
- 31. According to this article, approximately what percentage of women have experienced some form of physical or sexual violence or stalking in their lifetime?
  - a. 25%
  - b. 35%
  - c. 45%
- 32. Which of the following sentences is a good example of how to take a sexual history?
  - a. Do you put your mouth on your partner's genitals such as their penis or vagina?
  - b. We do not need to collect a throat swab, correct?
  - c. We are going to talk about your sexual health at this time

- 33. Which of the following sentences includes gender-inclusive and trauma-informed care?
  - a. Do you know how you can prevent sexually transmitted infections?
  - b. Great news, your test results are all good
  - c. Let's talk about your sexual health goals today

#### **Public Health and Preventable Disease**

- 34. As of 2023, which of the following is TRUE regarding monkeypox?
  - a. Monkeypox is confined to the southwestern United States
  - b. Monkeypox has been reported in all 50 of the United States
  - c. Monkeypox is most common in the Pacific Northwest
- 35. The primary mode of monkeypox transmission is via which of the following?
  - a. Close contact with lesions
  - b. Respiratory droplets
  - c. Infected fomites
- 36. The CDC recommends vaccination as preexposure prophylaxis for monkeypox for which of the following?
  - a. People with more than one sex partner without diagnoses of other STIs
  - b. People having sex during a large public event where monkeypox is occurring
  - c. Sex partners of former commercial sex workers
- 37. Antiviral treatment may be considered for those at risk for severe disease, including which of the following populations?
  - a. Heterosexual people
  - b. Pregnant or breastfeeding individuals
  - c. People with current chlamydia infections

#### **Abortion Laws**

- 38. Which of these do the authors identify as a factor in exclusion of midwives from abortion care in the mid-19th century United States?
  - a. Solidifying the power of physicians
  - b. Concern for safety of patients
  - c. Inadvertent exclusion due to poorly written laws
- 39. In 2012, how many states included procedural abortion in the scope of practice for midwives?
  - a. 3, plus the District of Columbia
  - b. 5, plus the District of Columbia
  - c. 7, plus the District of Columbia

- 40. Which of the following is identified by the authors as a safety argument for including abortion in midwifery scope?
  - a. Lack of OB/GYNs in most states
  - b. Relative risk of abortion compared to birth
  - c. High rates of major abortion-related complications
- 41. What do the authors say about legal abortion access as a public health issue?
  - a. Access to legal abortion increases rates of abortion, lowering demand for social services
  - b. Access to legal abortion increases perinatal safety without increasing rates of abortion
  - c. Abortion access is irrelevant to perinatal safety in the United States

#### **Abnormal Uterine Bleeding and Management**

- 42. Which of the following is a structural cause of abnormal uterine bleeding (AUB)?
  - a. Adenomyosis
  - b. Cervical stenosis
  - c. Rectovaginal Fistula
- 43. Which body mass index (BMI) has been shown to have a four-fold increased risk for endometrial hyperplasia or malignancy?
  - a. 25-29 kg/m2
  - b.  $< 18.5 \text{ kg/m}^2$
  - c.  $>30 \text{ kg/m}^2$
- 44. Approximately 20% of people with abnormal uterine bleeding also have which of the following?
  - a. Chronic constipation
  - b. Migraines with aura
  - c. Bleeding disorders
- 45. Tranexamic acid (TXA) may be useful in the treatment of abnormal uterine bleeding (AUB) caused by leiomyomas through what mechanism of action?
  - a. Prevention of fibrin and clot degradation
  - b. Suppression of prostaglandin production
  - c. Enhancing aggregation of platelets

#### Menopause Management

- 46. DOPS (Danish Osteoporosis Prevention Study) found that those treated with hormone therapy experienced which of the following?
  - a. Increased rates of stroke and myocardial infarction
  - b. Lower rates of myocardial infarction and heart failure
  - c. Increased risk for thromboembolism
- 47. Which of the following is a proposed mechanism for how estrogen protects cardiovascular health?
  - a. Platelet adhesion to vascular endothelium
  - b. Arterial vasoconstricting effects
  - c. Anti-inflammatory and antioxidant effects
- 48. Evidence supports use of estradiol among women within ten years of menopause for prevention of which of the following?
  - a. Vasomotor symptoms and breast cancer
  - b. Osteoporosis and cardiovascular disease
  - c. Depression and sexual desire disorder
- 49. Initial testosterone therapy for postmenopausal hypoactive sexual desire disorder is?
  - a. About one-tenth the dose for men
  - b. Available in several FDA-approved options
  - c. Aimed at exceeding premenopausal levels

#### Weight Management

- 50. What is one benefit of the anti-obesity drugs approved after 2015?
  - a. Patients achieve a mean weight loss of eleven to twenty-one percent
  - b. They require an injection just once per month
  - c. They are less expensive compared to older medications
- 51. Which of the following are common side effects of Semaglutide?
  - a. Headache, dizziness, and depression
  - b. Nausea, vomiting, and constipation
  - c. Flatulence, fecal urgency, and dry mouth
- 52. Which of the following patients are best suited for Semaglutide or Tirzepatide?
  - a. Patients with no cardiovascular concerns but drug affordability is a concern
  - b. Patients with at least ten percent clinically indicated weight loss and diabetes
  - c. Patients with alcohol use disorder and depression but not hypertension

- 53. Which of the following is a common reason for discontinuing anti-obesity medications?
  - a. Cost and lack of insurance coverage
  - b. Weight loss is sufficient to not require continued use
  - c. Injection site reactions leading to blood dyscrasias

#### **Diabetes Management in Primary Care**

- 54. What percentage of sustained weight loss has been shown to slow the progression of type 2 diabetes?
  - a. 5%
  - b. 10%
  - c. 15%
- 55. Bariatric surgery has been shown to improve all of the following EXCEPT?
  - a. Reduction in blood pressure
  - b. Improvement of triglycerides
  - c. Vitamin deficiencies
- 56. According to this article, what medication used for the treatment of obesity in patients with type 2 diabetes resulted in the highest percentage of weight loss?
  - a. Naltrexone-bupropion
  - b. Phentermine-topiramate
  - c. Semaglutide
- 57. Which medication was shown to reduce cardiovascular events in patients who have type 2 diabetes?
  - a. Semaglutide
  - b. Orlistat
  - c. Phentermine

#### **Adolescent GYN**

- 58. Around what ages do children start to become aware of genital differences?
  - a. 1-2
  - b. 3-7
  - c. 8-10
- 59. What trend occurred in the incidence of reported sexual activity among adolescents between 2011 and 2021?
  - a. Increased
  - b. Decreased
  - c. No change

- 60. Which of the following is true about how an individual defines their sexual orientation?
  - a. It is defined at birth
  - b. It is concrete by age 16
  - c. It may change over time
- 61. Preventative sexual and reproductive health care visits with adolescents should include which of the following?
  - a. Human Papilloma Virus vaccine recommendation
  - b. Close ended questions throughout visit
  - c. A post-visit phone call with parents

#### **Increasing Workforce Diversity**

- 62. What is identified as an evidence-based intervention to improve perinatal health in the United States?
  - a. Decreasing the length of midwifery education and training programs
  - b. Increasing the number of midwives of color
  - c. Eliminating structural racism
- 63. What was the highest motivating factor for becoming a midwife for people of color?
  - a. Racially and ethnically concordant care
  - b. Reproductive justice issues
  - c. Prior experience with discrimination
- 64. What is an example of racial inequity in midwifery education?
  - a. The lack of educators and mentors who are people of color
  - b. The low cost of midwifery education and training
  - c. Ease of access to preceptors
- 65. What is one strategy that may attract more Black students into midwifery?
  - a. Banning affirmative action in college admissions
  - b. Opening midwifery schools in Historically Black Colleges and Universities
  - c. Decrease the focus on race and culture and increase the focus on skill competency in midwifery education

#### **Uro Gyn and Pelvic PT**

- 66. The pathophysiology behind myofascial pelvic pain includes which of the following?
  - a. Hormonal changes related to menarche
  - b. Taunt bands related to muscle fiber damage
  - c. Genetic factors affecting muscle strength

- 67. Physical exam findings consistent with myofascial pelvic pain include which of the following?
  - a. Whole body relaxation during band palpation
  - b. Fatigue, poor sleep, and cognitive problems
  - c. Twitch response to deep palpation of trigger points
- 68. One study found that self-treatment of trigger points with a personal wand resulted in which of the following?
  - a. Improved pain in more than ninety-five percent of patients
  - b. Electrical signals reduced pelvic muscle spasms
  - c. Severe adverse effects
- 69. Which of the following is true regarding vaginal diazepam for myofascial pelvic pain?
  - a. It is largely not supported by evidence
  - b. It has been shown to cure most patients
  - c. It is more effective than acetaminophen

#### **Vulvar Lesions Derm**

- 70. Which is a clinical manifestation of vestibular papillomatosis (VP) to help differentiate it from human papilloma virus (HPV) associated condylomas?
  - a. In VP, the filiform projections are fused at the base vice remaining separate and distinct
  - b. Condylomas tend to be firm and randomly distributed, VP is soft and symmetrically distributed
  - c. VP is typically found outside the labia majora and mons pubis
- 71. Which of the following represents the demonstrated "normal" range of labia majora length in a healthy pre-menopausal woman?
  - a. 1.0-6.0 CM
  - b. 7.0-12.0 CM
  - c. 14.0-19.0 CM
- 72. Which of the following is a characteristic of vulvar seborrheic keratosis?
  - a. Ill-defined borders
  - b. Smooth, dull surface
  - c. "Stuck-on" appearance
- 73. Which of the following best describes the typical location of hidradenoma papilliferum?
  - a. Almost always found on the clitoris
  - b. Typically affects the labia
  - c. Frequently affects the rectum

- 74. What characteristic aids with differentiating vestibular gland cysts (VGCs) from other vulvar cysts?
  - a. VGCs typically range in size from 5-7cm
  - b. VGCs are typically translucent
  - c. VGCs most commonly occur in post-menopausal individuals

#### **GYN Pain**

- 75. According to this article, in Western medicine cannabis has not been used to treat which of the following conditions?
  - a. Neuralgic dysmenorrhea
  - b. Chronic cystitis
  - c. Hypoactive sexual desire disorder (HSDD)
- 76. Targeting the endocannabinoid system may treat which gynecologic condition?
  - a. Amenorrhea
  - b. Endometriosis
  - c. Fibroids
- 77. According to this article, what percentage of patients with chronic pelvic pain report using cannabis as an adjunct to prescribed medications?
  - a. 15%
  - b. 25%
  - c. 35%
- 78. What is the more common reported side effect for cannabis usage for gynecological pain?
  - a. Migraine with aura
  - b. Hyperemesis syndrome
  - c. Feelings of euphoria

#### **Abortion Management and Post Abortion Care**

- 79. Which of the following is a characteristic of people who were found to experience barriers to abortion care?
  - a. Higher income
  - b. Residing in a state with minimally restrictive abortion laws
  - c. Being a person of color
- 80. After the leaking of the Dobbs 2022 decision, what happened with online searches for abortion medications?
  - a. Decreased by 62%
  - b. No change
  - c. Increased by 162%

- 81. In the United States, which of the following is true about public opinion about criminalizing self-managed abortion?
  - a. Against
  - b. Neutral
  - c. In favor of
- 82. What is the current law regarding the reporting of self-managed abortion in the United States?
  - a. Clinicians must anonymously report self-managed abortion
  - b. There is no mandate for reporting of self-managed abortion
  - c. Clinicians must seek written consent from patients prior to required reporting of self-managed abortion

#### Osteoporosis Screening and Management

- 83. Which of the following Dual-energy x-ray absorptiometry (DXA) T-scores is consistent with a diagnosis of osteoporosis?
  - a. 1.5
  - b. 2.0
  - c. 2.5
- 84. Which of the following do most guidelines recommend for initial treatment of postmenopausal women at high risk for fracture?
  - a. Vitamin D supplements
  - b. Bisphosphonates
  - c. Sclerostin Inhibitors
- 85. Oral bisphosphonates can be poorly absorbed or cause upper GI mucosal irritation, which of the following is the preferred treatment for these individuals?
  - a. Oral calcium supplementation
  - b. Intravenous zoledronate
  - c. Teriparatide (PTH 1-34)
- 86. Which if the following is the correct dosing regimen for zoledronic acid in the treatment of post-menopausal osteoporosis?
  - a. 2.5 mg PO daily
  - b. 5 mg IV yearly
  - c. 60 mg SQ twice yearly

#### Vaginal Infections Including BV, Candida, Ureaplasma and Mycoplasma

- 87. Which of the following is a risk factor for Mycoplasma genitalium (M. gen) infection?
  - a. Age <30 years
  - b. Female sex
  - c. Lower education level
- 88. What proportion of cervicitis is associated with Mycoplasma genitalium (M. gen)?
  - a. 10-30%
  - b. 40-60%
  - c. 70-90%
- 89. For people with bacterial vaginosis (BV), what is the co-occurrence risk of Mycoplasma genitalium (M. gen)?
  - a. Twice as high
  - b. Three times as high
  - c. Four times as high
- 90. What is the preferred treatment regimen for medication-resistant Mycoplasma genitalium (MRM)?
  - a. Doxycycline x 7 days with cefotin x 1 day
  - b. Azithromycin x 4 days with doxycycline x 7 days
  - c. Moxifloxacin x 7 days with doxycycline x 7 days

# FAILURE TO COMPLETE THE FOLLOWING MODULE EVALUATION WILL RESULT IN YOUR MODULE NOT BEING SCORED.

# PROGRAM EVALUATION FOR GYNECOLOGIC, SEXUAL, REPRODUCTIVE, AND PRIMARY CARE MODULE 2025-2027

1.	a. b.	icles for this module were relevant to my practice. Strongly Agree Agree Neutral	d. e.	Disagree Strongly Disagree
2.	The inf	practice.		
	a.	formation learned in these articles will affect my clini Strongly Agree	_	Disagree
		Agree	e.	a 1 D:
		Neutral		
3.	I am in	tograting anti-region and aquity motorials such as the		naludad in the CMD Madules in
3.		tegrating anti-racism and equity materials such as the ctice or teaching.	ise ii	included in the CMF Modules in
	a.	Strongly Agree	А	Disagree
		Agree	e.	Strongly Disagree
		Neutral	C.	Strongly Disagree
4.	The art	ricles provided me with new information.		
	a.	Strongly Agree	d.	Disagree
	b.	Agree	e.	Strongly Disagree
	c.	Neutral		
5.	The au	estions assessed my comprehension of the articles.		
٥.	a.	Strongly Agree	d.	Disagree
		Agree	e.	Strongly Disagree
		Neutral	С.	Strongly Disagree
	C.	reduct		
6.	I was a	ble to find the answers within the articles.		
	a.	Strongly Agree	d.	Disagree
	b.	Agree	e.	Strongly Disagree
	c.	Neutral		
7	I think	the website is user friendly.		
, .	a.	Strongly Agree	d.	Disagree
	b.	Agree	e.	Strongly Disagree
		Neutral	٠.	Strongly Blagree
	C.	Todda	b.	No
8.	Were the	he objectives clearly stated?		
	a.	Yes		
9.	Are the	e articles easy to obtain without purchasing them from	1 Δ N	ACR?
٦.	a.	Yes	1 /71/	nob.
	а. b.	No No		
		N/A		
	C.	1 1/11		
10.	Did yo	u purchase the articles from AMCB?		
	9	Vec		

b. No

11.	Were you satisfied with the time it took to receive your article order?
	a. Yes
	b. No
	c. N/A
12.	Do you think the cost of the article set is appropriate?
	a. Yes
	b. No
	c. N/A
12	Do you think the cost of CMP fees are appropriate for the service you receive?
13.	
	a. Yes b. No
	D. INO
14.	Did you receive a timely notice about my upcoming recertification deadline?
	a. Yes
	b. No
	c. N/A
15.	Did you receive the appropriate number of reminders before the recertification deadline?
	a. Yes
	b. No
	c. N/A
16.	What ideas are missing from the articles that you would recommend we include?
	Are there any other comments you would like to provide about the content or clarity of this
	module?
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