Nursing

NCC-WHNP-BC

NCC Women's Health Care Practitioner (WHNP)

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Question: 1

An inspection of the external genitalia is conducted before the internal gynecological exam. It should begin by viewing which of the following first?

A. vaginal introitus
B. clitoris
C. suprapubic and inguinal regions superiorly
D. anal and sacral areas

Answer: C

Explanation:
The correct answer to the question regarding where an inspection of the external genitalia should begin is: "suprapubic and inguinal regions superiorly."
The rationale behind this approach in a gynecological examination is systematic and methodological. Starting the visual inspection from the suprapubic and inguinal regions superiorly allows the healthcare provider to first assess areas that are often overlooked but can harbor significant health issues, such as hernias, skin infections, or abnormal growths. This top-down approach ensures a thorough examination of all relevant anatomical structures in a logical sequence.
After evaluating the suprapubic and inguinal regions, the exam progresses inferiorly. The next areas of focus include the clitoral hood and the clitoris. This is followed by an examination of the urethral meatus, which is essential for identifying any abnormalities such as urethral prolapse or signs of infection. Next, the inspection moves to the vaginal introitus, which is the opening to the vagina. This area is checked for signs of atrophy, inflammation, discharge, or other lesions.
Following the vaginal introitus, the examination continues to the fourchette, which is the fold of skin below the vaginal opening, and then posteriorly to the anal and sacral areas. Inspecting these areas is crucial for detecting issues like fissures, hemorrhoids, or other abnormalities that could impact the patient's health and quality of life.
By beginning the examination at the suprapubic and inguinal regions and moving inferiorly and posteriorly, the healthcare provider conducts a comprehensive review that maximizes the chance of detecting any potential issues in a structured and efficient manner. This systematic approach helps ensure that no part of the external genitalia is neglected during the physical examination.

Question: 2

Of the following laboratory procedures, which one is used as an adjunct for evaluating herpetic infections?

A. Pap smear
B. Tzanck smear
C. Gram stain

D. KOH slide

Answer: B

Explanation:
*PThe correct answer to the question is the Tzanck smear. This laboratory procedure is valuable as an adjunct tool for the diagnosis of herpetic infections, which include infections caused by herpes simplex virus types 1 and 2, and varicella-zoster virus. *PThe Tzanck smear test involves scraping the base of an ulcer or vesicle and examining the cells under a microscope after staining. The primary feature of a positive Tzanck smear in the context of herpes infections is the appearance of multinucleated giant cells and acantholytic cells. These cells display large, abnormal nuclei, which are a sign of the cytopathic effect caused by herpesvirus infection on epithelial cells. *PAlthough a Tzanck smear can quickly suggest a herpes infection, it is not specific for distinguishing between types of herpesviruses (such as herpes simplex virus type 1, herpes simplex virus type 2, or varicella-zoster virus). Therefore, while it is useful for a presumptive diagnosis, further specific tests, such as viral culture or PCR, are required for definitive identification of the virus type. *PComparatively, other listed laboratory procedures serve different diagnostic purposes. A Pap smear is primarily used for screening for cervical cancer and its precursors, not for diagnosing viral infections. A Gram stain is used to detect bacterial infections, characterizing bacteria as Gram-positive or Gram-negative, which is not helpful in viral infections. A KOH slide is mainly used for diagnosing fungal infections by dissolving keratin and leaving fungal cells intact for examination. *PIn summary, among the options provided, the Tzanck smear is the most appropriate and commonly used test to help in the evaluation of herpetic infections, providing quick, though not specific, results. For more accurate virus identification, additional specific testing is recommended.

Question: 3

A patient with a total cholesterol level of 175 mg/dL has:

A. A desirable blood cholesterol level.
B. Low blood cholesterol level.
C. Borderline high blood cholesterol level.
D. High blood cholesterol level.

Answer: A

Explanation:
The correct interpretation of a total cholesterol level of 175 mg/dL indicates that the patient has a desirable blood cholesterol level. Total cholesterol is a collective measure that includes Low-Density Lipoprotein (LDL), High-Density Lipoprotein (HDL), and other lipid components such as triglycerides. LDL is often referred to as "bad" cholesterol because high levels can lead to plaque buildup in arteries, increasing the risk of heart disease. HDL, known as "good" cholesterol, helps remove cholesterol from the arteries.
The American Heart Association and other health guidelines categorize total cholesterol levels as follows: a reading below 200 mg/dL is considered desirable because it suggests a lower risk of heart disease. A reading between 200 and 239 mg/dL is considered borderline high and may require lifestyle

changes or more in-depth monitoring. A reading of 240 mg/dL and above is considered high and usually calls for medical intervention to reduce the risk of cardiovascular disease.
Given that the patient's cholesterol level is 175 mg/dL, it falls well within the desirable range. This level indicates a lower risk of developing problems related to cholesterol buildup in the arteries. However, it is important to consider other factors such as the balance between LDL and HDL levels, the individual's overall health, lifestyle, and risk factors for heart disease. Regular monitoring and maintaining a healthy diet, regular physical activity, and avoiding smoking can help manage cholesterol levels effectively.

Question: 4

Endocervical cells are less frequently identified in women who are all of the following EXCEPT:

A. post-menopausal
B. using physical contraceptives
C. using oral contraceptives
D. pregnant

Answer: B

Explanation:
The original question asks which group of women is the exception when it comes to the lesser identification of endocervical cells. The correct interpretation of the question and the explanation requires understanding the typical reasons for decreased detection of endocervical cells in certain groups. Here's an expanded explanation:
Endocervical cells are an important component of cervical cytology (Pap smear tests) because their presence can help in assessing the sampling of the transformation zone, an area critical for detecting precancerous changes. The absence of these cells in a Pap test can suggest insufficient sampling, which might miss potential abnormalities.
In general, certain physiological and hormonal factors influence the likelihood of identifying endocervical cells during a Pap smear. These factors include hormonal contraception usage, pregnancy, and menopausal status: 1. **Post-menopausal women**: The hormonal changes associated with menopause often lead to atrophic changes in the cervix, making it less likely for endocervical cells to be shed during a Pap test. This can result in Pap smears that lack endocervical/transformation zone (EC/TZ) cells. 2. **Women using oral contraceptives**: Hormonal contraceptives, particularly those that are oral, can influence the cervical epithelium and its secretions. They often lead to a thicker cervical mucus and potentially less shedding of endocervical cells. Consequently, women using oral contraceptives might have fewer endocervical cells in their Pap smears. 3. **Pregnant women**: Pregnancy also induces significant hormonal changes that affect the cervix. The increased estrogen levels typically lead to an increase in cervical mucus and cellular activity, but the physiological changes can sometimes make the sampling of endocervical cells more challenging, particularly later in the pregnancy when the cervical glandular activity is more pronounced.
Contrary to the above situations, the use of "physical contraceptives" like condoms or diaphragms generally does not impact the hormonal balance or the physiological state of the cervix in a way that would reduce the presence of endocervical cells in a Pap smear. Therefore, women using physical contraceptives should not experience a decreased frequency of identifying endocervical cells due to the contraceptive method itself.

Thus, among the choices given - post-menopausal women, women using oral contraceptives, pregnant women, and women using physical contraceptives - the group that does not fit the pattern of less frequent identification of endocervical cells is the "women using physical contraceptives." This option is the exception, as physical contraceptives do not influence the hormonal or cellular environment of the cervix in a way that would reduce the presence of endocervical cells in Pap smears.

Question: 5

During a pelvic examination, women's hands should be:

A. over her abdomen
B. at her sides
C. above her head
D. behind her head

Answer: B

Explanation:
During a pelvic examination, it is crucial for the patient to be in a position that not only allows for an effective examination but also maximizes her comfort. Typically, the recommended position for a woman during this type of examination is the lithotomy position. This position involves the woman lying on her back on the examination table with her knees bent, feet supported in stirrups, and her legs spread apart.
In this position, the placement of the woman's hands is important as it can affect the relaxation of the abdominal muscles, which is essential for a successful pelvic exam. Ideally, the woman's hands should either be placed at her sides or across her chest. Both positions help in reducing any involuntary tension in the abdominal area, thereby facilitating a smoother examination process. Placing the hands at the sides is often most recommended because it helps keep the upper body relaxed without any strain, which can inadvertently happen if the hands are placed behind the head or above the head.
Placing the hands behind the head or above the head can tighten the abdominal muscles, which may make the pelvic examination more difficult. These positions can also be uncomfortable for the patient, further complicating the process. By keeping the hands at the sides or across the chest, the patient can maintain a posture that supports both physical ease and emotional calmness during the examination.
Therefore, to ensure that the pelvic examination proceeds as smoothly as possible, it is advisable for the patient to place her hands at her sides. This position not only helps in maintaining the necessary relaxation of the abdominal muscles but also aids in creating a less stressful environment for the patient during the examination.

Question: 6

A total cholesterol level of 210 mg/dL is:

A. Low.
B. Borderline high.
C. Desirable.
D. High.

Answer: B

Explanation:
The appropriate categorization for a total cholesterol level of 210 mg/dL is "Borderline high." Cholesterol levels are a crucial indicator of cardiovascular health, with total cholesterol being a composite measure that includes Low-Density Lipoprotein (LDL), High-Density Lipoprotein (HDL), and other lipid components such as triglycerides.
LDL is often referred to as "bad" cholesterol because high levels can lead to plaque buildup in the arteries, increasing the risk of heart disease and stroke. Conversely, HDL is known as "good" cholesterol because it helps remove other forms of cholesterol from the bloodstream. The balance and levels of these lipids are critical in assessing overall cardiovascular risk.
According to guidelines, total cholesterol levels are classified as follows: - **Desirable**: Less than 200 mg/dL - **Borderline high**: 200 - 239 mg/dL - **High**: 240 mg/dL and above
Therefore, a total cholesterol level of 210 mg/dL falls within the "Borderline high" category. This indicates that while not yet in the high risk zone, it is above the optimal range and suggests that there may be a higher risk of developing heart disease if it increases further or remains unmanaged.
Individuals with "Borderline high" cholesterol levels are often advised to consider lifestyle changes such as improving diet, increasing physical activity, and possibly, depending on other risk factors, starting medication to help lower cholesterol levels.

Question: 7

Which of these describes a patient with a triglyceride level of 561 mg/dL?

A. Normal.
B. Borderline high.
C. High.
D. Very high.

Answer: D

Explanation:
Triglycerides are a type of lipid, or fat, found in the blood and are crucial for storing energy and serving as a source of fuel for the body. However, having high levels of triglycerides can be a health concern. Various health organizations categorize triglyceride levels to help identify potential risks and manage them effectively.
The categorization typically includes: - **Normal**: Less than 150 milligrams per deciliter (mg/dL) - **Borderline high**: 150 to 199 mg/dL - **High**: 200 to 499 mg/dL - **Very high**: 500 mg/dL and above
In this scenario, a patient with a triglyceride level of 561 mg/dL falls into the "Very high" category. This level is significantly above the normal range and indicates that the patient might be at risk for various health issues. High triglyceride levels can contribute to the hardening of arteries or thickening of arterial walls (atherosclerosis), which increases the risk of stroke, heart attack, and heart disease. Additionally, extremely high levels can also lead to pancreatitis, a serious inflammation of the pancreas.

It is important for individuals with very high triglyceride levels to seek medical advice. Management typically includes lifestyle changes such as diet modification, increased physical activity, and possibly medication to help lower triglyceride levels and reduce the risk of associated health problems. In conclusion, the patient described with a triglyceride level of 561 mg/dL is correctly identified as having a "Very high" triglyceride level, necessitating further evaluation and management by healthcare professionals.

Question: 8

Which of the following is NOT an advantage of using the broom for endocervical samples?

A. causes less spotting
B. highly effective for endocervical cell collection
C. simultaneously collects both endocervical and ectocervical sample
D. can be used during pregnancy

Answer: D

Explanation:
The question provided is asking about the disadvantages of using the broom device for collecting endocervical samples, specifically which listed feature is NOT an advantage of using the broom.
To understand this, it's essential to first know what the broom device is. The broom device is a type of cervical sampling tool used in gynecological exams, particularly for Pap tests. It is designed to collect cells from both the endocervix and ectocervix simultaneously. The design typically features a central brush surrounded by several peripheral bristles that can sweep cells from a larger cervical area.
The first option states that the broom causes less spotting, which is generally considered an advantage. Using the broom can be less invasive and gentle, thereby reducing the likelihood of causing bleeding or spotting compared to other methods like the endocervical brush or spatula.
The second option wrongly assumes that the broom can be used during pregnancy. However, it is generally not recommended to use the broom during pregnancy. This is because the manipulation required to collect cells could potentially disturb the cervix, which is more sensitive during pregnancy. Hence, this statement is actually a disadvantage.
The third statement claims that the broom is highly effective for endocervical cell collection. This is true and is considered an advantage. The design of the broom allows effective sampling of both the endocervical and ectocervical areas, making it highly efficient for collecting adequate samples for cytological examination.
The fourth option also incorrectly states that the broom can be used during pregnancy. As mentioned earlier, this is not recommended and thus is not an advantage.
The fifth statement mentions that the broom simultaneously collects both endocervical and ectocervical samples. This is indeed an advantage as it ensures that a comprehensive sample is taken, which is crucial for accurate cervical cancer screening.
In summary, the statements claiming that the broom "can be used during pregnancy" are incorrect and represent a disadvantage of using the broom device. It should be noted that the use of the broom during pregnancy is generally contraindicated due to the sensitivity of the cervix during this period.

Question: 9

Thyroid dysfunction has been known to cause all of the following EXCEPT:

A. irregular menses
B. anovulation
C. endometriosis
D. infertility

Answer: C

Explanation:
The examination of the thyroid gland is included in the physical examination of women. Thyroid dysfunction can cause irregular menses, anovulation, and infertility.

Question: 10

Hemoglobin is found where?

A. In white blood cells.
B. In red blood cells.
C. In both white and red blood cells.
D. In yellow bone marrow.

Answer: B

Explanation:
Hemoglobin is a protein molecule primarily found in red blood cells. It is crucial for transporting oxygen from the lungs to the tissues and organs throughout the body and carrying carbon dioxide back to the lungs for exhalation. The primary function of hemoglobin is to maintain the shape of the red blood cells, which are typically smooth and round, allowing them to flow freely through the blood vessels.
Contrary to some misconceptions, hemoglobin is not found in white blood cells. White blood cells, or leukocytes, have a completely different role in the body, primarily involved in the immune response and fighting infections. Hemoglobin is also not present in yellow bone marrow, which mainly functions as a site of fat storage and some types of white blood cell production.
The presence of hemoglobin is critical for red blood cells' function, which is why disorders affecting hemoglobin, such as sickle cell anemia or thalassemia, lead to significant health issues. These disorders can be diagnosed using tests such as hemoglobin electrophoresis, which analyzes the different types of hemoglobin in the blood. This test helps in identifying abnormal hemoglobin which can affect the oxygen-carrying capacity of the blood.
In summary, hemoglobin is exclusively found in red blood cells and is essential for oxygen transport in the body. It is not present in white blood cells, yellow bone marrow, or any other body tissues. Hemoglobin electrophoresis is a valuable diagnostic tool for assessing hemoglobin variants and managing related blood disorders effectively.

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