



QUIZ USING KAHOOT

1. *The WHO guidelines on contraception were developed primarily based on the following:*
 - a. Gathering consensus from opinions of experts
 - b. Developing recommendations from rigid review of the evidence
 - c. Compiling guideline statements from various country standards
 - d. Desk review of successful country practices

2. *The purpose of the WHO Medical Eligibility Criteria for contraceptive use guideline is to provide:*
 - a. information on the safety of contraceptives for health conditions
 - b. a manual that applies the recommendations from other WHO guidelines
 - c. educational modules based on the WHO guidelines on contraception
 - d. guidance for how to use contraceptive methods safely and effectively

3. *The purpose of the WHO Selected practice recommendations for contraceptive use is to provide:*
 - a. information on the safety of contraceptives for health conditions
 - b. a manual that applies the recommendations from other WHO guidelines
 - c. educational modules based on the WHO guidelines on contraception
 - d. guidance for how to use contraceptive methods safely and effectively

4. *The risk to develop breast cancer in BRCA 1 mutation carriers is around:*
 - a. 10-20%
 - b. 50-70%
 - c. 90%
 - d. Is only elevated for CHC users

5. *The following conditions is strictly not compatible with the use of CHC*
 - a. chronic headache
 - b. smoking and age > 45 years
 - c. depression
 - d. obesity in adolescents

6. *The risk for VTE in healthy users of a second generation COC (LNG) is:*
 - a. 4-6/100 000 women
 - b. six fold increased compared with nonusers
 - c. similar like the risk for the transdermal patch
 - d. 5-7/10 000 women

7. *For the prescription of CHC the family history for VTE:*
- Is not relevant.
 - Is positive if a first degree relative <50 years is affected.
 - Does not have a major influence on VTE risk.
 - Increases the VTE risk 80 fold, if it is positive.
8. *Which item is wrong for women with risk factors for VTE or medical conditions?*
- POC typically induce or can worsen migraine
 - Age > 35 years is an arterial risk factor
 - Obese women aged >35 years should not use CHC
 - Obese women and smokers can safely use POC and IUDs
9. *Which item is wrong with regard to depression and contraception?*
- Women with depression should not use hormones in general.
 - Amitriptyline decreases progestin plasma levels.
 - Some CHC have a positive impact on premenstrual negative moods.
 - Consider potential effect on mood before prescribing POC.
10. *Which statement is correct for COC with 3. generation progestin?*
- After VTE with those, use COC with natural estrogens.
 - VTE risk is lower with CVR and CTP.
 - After VTE you can advise POC or IUD.
 - Third generation progestins are LNG and DRSP.
11. *Which statement is correct*
- The CTP can be applied to the breast.
 - Estrogen exposure with CTP and CVR is the same.
 - The POP can be used if VTE family history is positive.
 - The implant typically induces acne (> 25 %).
12. *Which statement is wrong about POC*
- Counselling about bleeding irregularity is mandatory
 - The VTE risk is elevated only in implant users
 - Acne and weight gain occur in around 10-20 % of users
 - Irregular/ frequent bleeding often causes discontinuation

13. *Which statement is wrong about obesity ?*
- Obesity may impact the efficacy of CHC
 - Condoms are recommended in CHC newstarters for 10 days
 - WHO Class 1 obesity is defined as BMI 30– 34.9 kg/m²
 - The patch is highly effective in women weighting > 90 kg.
14. *What is the best contraceptive choice for a 15 year old adolescent with anorexia and amenorrhoea?*
- condom
 - DMPA
 - counseling on LARC or CHC
 - no method necessary (amenorrhoea)
15. *HIV-positive women with CD4 count > 200 cells/ μ L can use for contraception:*
- combined hormonal contraception
 - intrauterine contraception
 - progestogen implants
 - all of the previously mentioned methods
16. *Which of the following drugs doesn't reduce the efficacy of hormonal contraception?*
- carbamazepine
 - diazepam
 - rifampicin
 - St. John's wort (*Hypericum perforatum*)
17. *Which statement about copper IUDs is wrong?*
- The contraceptive action is mainly in the uterine cavity
 - They destroy embryos in the uterus.
 - Current PID or cervical infection is WHO MEC 4
 - Can be safely used in healthy adolescents
18. *Which of these procedures before a copper-IUD or LNG-IUS insertion is not recommended?*
- gynaecological examination
 - a transvaginal ultrasound
 - STI risk assessment
 - a blood test in order to diagnose an anaemia

19. *When can an Cu-IUD/LNG-IUS not be inserted*
- up to day 7 of the natural cycle
 - immediately or within 12 days after a first or second trimester abortion
 - After confirmation of complete medical abortion (5–9 days after mifepristone treatment)
 - 1-3 weeks after delivery
20. Which of the following statements is wrong?
- Daily release rate of the 52 mg LNG-IUS is 20 µg of LNG.
 - It is safe to perform MRI in a women with IUDs.
 - Frequent bleeding is common in LNG-IUS users in a long-term.
 - LNG-IUS may be useful in women with hypermenorrhoea.
21. *Which statement is wrong regarding the LNG-IUS?*
- Removal rate for pelvic pain is > 5 % within initial 12 months
 - Hormonal side effect include acne, nausea, depression
 - May have a protective effect on cervical cancer.
 - Is a contraceptive option for adolescents.
22. *Which of the following statements is wrong?*
- Adolescents can safely use intrauterine contraception.
 - Adolescents have high rates of PID when using IUDs.
 - Copper-IUDs increase the number of bleeding days.
 - The risk of VTE is not increased in LNG-IUS users.
23. *The strongest predictor for regret after female sterilisation is:*
- being unmarried
 - age at sterilisation
 - postpartum sterilisation
 - nulliparity



24. *Advantage of Essure hysteroscopic sterilisation as compared with laparoscopic is:*
- It is 99% successful at first attempt.
 - It is immediately effective.
 - Rate of successful reversal is higher.
 - Pelvic adhesions are no problem.
25. *The preferred method of postpartum sterilisation is:*
- partial salpingectomy
 - distal fimbriectomy
 - total salpingectomy
 - filshie clips
26. *An important cause of persistent post vasectomy pain is:*
- haematoma formation
 - recanalization
 - sperm granuloma
 - infection
27. *Which statement is wrong ?*
- More than 45% of DMPA users will be amenorrhoeic after 1 year
 - Vasectomy decreases risk for prostate cancer
 - Bleeding irregularity can be treated with NSAID
 - POC decrease dysmenorrhoea
28. *If a client is unsure about which method to use, the provider should:*
- Tell the client which method you think is best for her.
 - inform about all methods and allow time to reflect
 - Explore which method would best fit her goals, situation
 - Not mention methods the client might not use correctly.
29. *Which is the best way to counteract a rumor about a family planning method?*
- Tell the client that the rumor is very silly.
 - Ignore it because it is just a rumor.
 - Tell client that people who believe in this are stupid.
 - Explain that the rumor is not true and why it is not true.



30. *Which of the following statements is true for informed choice?*
- a. It is only necessary to decide about sterilization.
 - b. It is based on the information available from the internet.
 - c. Clients can choose a method from an array of FP options.
 - d. The provider decides after informing the client about the method.



QUIZ USING KAHOOT with solutions in bold

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