R4S/LEAP Provider Training on the Hormonal IUD

Pre/Post Knowledge Evaluation Questionnaire

C1	The best person to make the choice about which contraceptive method to use should be	a. Midwife b. Physician providing health services to the woman c. Partner d. Client
C2	Good counselling should include which of the following elements (check all that apply):	a. Getting permission from the client's partner for her to use contraception. b. Identifying the woman's concerns about using contraceptives and answering her questions c. Identifying a client's reproductive needs d. Describing adverse side effects e. Telling a client what method she should choose
C3	During counseling, allowing the client to handle a sample of **hormonal IUD** should be:	a. Discouraged because it will only frighten her b. Encouraged because it will help her to make a more informed decision and help her understand what the device and strings feel like c. Avoided because it is a waste of expensive material and she probably will not understand what she is looking at d. Avoided because it will neither reassure her nor help her to know what the device feels like
C4	The **hormonal IUD** contains the hormone:	a. Oestrogen b. Levonorgestrel c. Desogestrel d. Etonorgestrel
C5	What is the primary mechanism of action through which the **hormonal IUD** prevents pregnancy:	a. Thickening the cervical mucus b. Preventing ovulation c. Altering the lining of the uterus d. Shortening the menstrual cycle
C6	Which of the following conditions suggests a woman should not have a **hormonal IUD** inserted?	a. Retroverted uterus b. Three or more children c. Has mild clinical HIV and is taking ARVs d. Current pelvic infection
C7	These women can use **hormonal IUD** without restrictions (WHO MEC Category 1)	a. Women who are at increased individual risk of STI. b. Women between 48hrs and 6wks post-partum c. Women who smoke irrespective of age. d. Women with benign gestational trophoblastic disease
C8	These women should NOT have **hormonal IUD** inserted (WHO MEC Category 4) (Check all that apply)	a. Women who currently have Gonorrhea or Chlamydia b. Women who have fibroids with cavity distortion c. Women who have menstrual irregularities d. Women with history of venous thromboembolism
C9	Women living with HIV:	a. Should never get a hormonal IUD b. Must start ARVs before they can get an hormonal IUD c. Can safely use hormonal IUD if they have mild or no clinical disease, whether or not they are on ARVs d. Should have their hormonal IUD removed in their clinical disease becomes advanced or severe

C10	Which of the following clients could be a candidate for using the **Implant?** (check all that apply)	a. A woman who has acute hepatitis b. A woman who has unexplained abnormal genital bleeding c. A woman with breast cancer d. A woman who cannot use contraceptives containing oestrogen
C11	Which of the following clients could be a candidate for using the **hormonal IUD**? (check all that apply)	a. A woman who wants to prevent pregnancy for 1 year b. A woman who does not need contraception but does need treatment for heavy/disordered bleeding c. A woman who does hard physical work d. A nulliparous woman under age 25
C12	If inserted within the first seven days of the menstrual cycle, the **Implants** become effective in preventing pregnancy:	a. After one (1) month b. After seven (7) days c. Immediately d. After ten (10) days
C13	The **Copper IUD** should not be left in place for more than:	a. 2 years b. 6 years c. 8 years d. 12 years
C14	One of the characteristics of the **hormonal IUD** is:	a. It is effective for up to 8 years b. It can shrink large fibroids c. It reduces menstrual blood loss d. It lengthens the menstrual period
C15	Potential health benefits of the **hormonal IUD** include (check all that apply):	a. Protection from endometrial and cervical cancers b. Protection from ovarian cancer c. Decrease in blood cholesterol level d. Reduction of iron deficiency anemia
C16	Physical examination of a prospective IUD client must include at least:	a. Abdominal and bimanual pelvic examination b. Abdominal, speculum and bimanual pelvic examinations c. Breast and bimanual examinations d. General, breast, abdominal, speculum and bimanual (pelvic) examination
C17	Which is a reason for sounding the uterus before a **hormonal IUD** insertion is:	a. To align the cervical canal and uterine cavity b. To determine the position of the uterus c. To measure the depth of the uterus (from cervical os to fundus)
C18	During counseling about the side effects of the **hormonal IUD**, it is important to explain that:	a. A lighter menstrual flow pattern or absence of bleeding is to be expected and is normal b. Cramping is a signal that the hormonal IUD should be removed c. After removal, fertility returns in 1–3 months d. The hormonal IUD is generally free of side effects
C19	Which of the following FP methods can allow an immediate return to fertility? (Check all that apply)	a. Hormonal IUD b. Injectables c. Pills d. Implants
C20	A woman who has had a **hormonal IUD** placed (either immediately postpartum or any time after 4 weeks postpartum) should have a follow-up exam (check all that apply):	a. Every month in the 1st year to see that the IUD is in place b. Every 3 months in the 1st year to check for side effects c. 3-6 weeks after insertion d. Anytime the woman comes back with problems or concerns about IUD. e. Annually to check the strings

C21	Which of the following is NOT a warning sign that indicates that she may be having a problem with her **hormonal IUD** and should seek medical attention?	a. Lower abdominal pain or pain during intercourse b. Acute abdominal cramping during the first three to five days after insertion c. Unusual Vaginal discharge d. Amenorrhea
C22	Clinical trials have shown that some brands of the **hormonal IUD** are effective at preventing pregnancy for up to:	a. 3 years b. 6 years c. 8 years d. 10 years
C23	Which of these methods can offer clients the benefit of predictable periods (periods that begin at roughly the same time each cycle)? (check all that apply)	a. Hormonal IUD b. IUD c. Implant d. Pills (COCs)
C24	If a client wishes to have her **hormonal IUD** removed because she is experiencing unwanted side effects, which of the following steps should you follow: (check all that apply)	a. Tell her to wait 1-3 months to see if her side effects subside before removing the hormonal IUD b. Ask her if she would like your help to manage side effects prior to removal c. Counsel her on alternative methods that may better suit her and provide her with another method if she chooses d. Help her to understand any myths and misconceptions she may have around the side effects she is experiencing e. Following counseling, remove her hormonal IUD if she still desires
C25	Which of the following side effects are sometimes associated with the use of the **hormonal IUD**: (Check all that apply)	a. Nausea b. Acne c. Headache d. Breast Tenderness e. Heavy bleeding
C26	Prolonged bleeding (bleeding lasting longer than 8 days) is associated with the use of which methods: (check all that apply)	a. Injectables b. Hormonal IUD c. Copper IUD d. Combined Oral Contraceptives e. Emergency Contraceptive Pills
C27	Rare complications and known health **risks** of the **hormonal IUD** include:	a. Perforation b. PID c. Anemia d. Increased risk of ectopic pregnancy
Check off either "True" (T) or "False" (F) in the space provided.		
C28	**Hormonal IUD** provides protection against sexually transmitted infections.	a. True b. False
C29	**Hormonal IUD** is more than 99 percent effective in preventing pregnancy.	a. True b. False
C30	Women can initiate **hormonal IUD** use within 48 hours after giving birth	a. True b. False
C31	The **hormonal IUD** is better for client's who do not want any more children in the future	a. True b. False
C32	**Emergency Contraceptive Pills** are indicated for a woman who had unprotected sex 4 days ago	a. True b. False

C33	The absence of bleeding (periods) is normal when using a **copper IUD** as an FP method.	a. True b. False
C34	When preparing to insert an **Implant**, the client must be asked to empty the bladder	a. True b. False
C35	Both **copper IUD** and **hormonal IUD** may be inserted at any time during the menstrual cycle, if the provider is reasonably certain that the client is not pregnant	a. True b. False
C36	A **hormonal IUD** cannot be used by a nulliparous woman.	a. True b. False
C37	All long-acting reversible contraceptive methods can be safely provided in an immediate post-partum woman (before 48h)	a. True b. False
C38	Following **hormonal IUD** insertion, heavy, yellow vaginal discharge is common.	a. True b. False
C39	A **hormonal IUD** may be inserted at any time during the menstrual cycle, if the provider is reasonably certain that the client is not pregnant.	a. True b. False
C40	It is better to change all **hormonal IUD** after two years, because leaving them in the uterus for a longer period may lead to development of complications.	a. True b. False
C41	If a client already has a method in mind prior to counseling, she does not need to be offered information about other available methods	a. True b. False
C42	A client should always be encouraged to choose the most effective method of contraception, regardless of her lifestyle needs	a. True b. False
C43	A client has the right to discontinue using her chosen method at any time, for any reason.	a. True b. False
C44	Partial or unnoticed expulsion of the **hormonal IUD** could result in pregnancy	a. True b. False