# **Cervical Cancer Screening Learning Module Pre-Test**

Please complete the following pre-test prior to proceeding to Section 2. The Answer Key is provided in Appendix 3.

## Instructions for Test Completion

- For **multiple choice questions**, please circle one or more answers as appropriate.
- For **open-ended questions**, please write your answers on the lines provided.
- For **short answer questions**, please write your answers in the space provided.
- 1. CervixCheck, CancerCare Manitoba is needed because (select all that apply):
  - **a.** organized cervical cancer screening programs reduce the cervical cancer incidence and mortality
  - **b.** participating in regular cervical cancer screening can prevent most cervical cancers
  - **c.** all patients who develop cervical cancer in Manitoba have not participated in regular cervical cancer screening
  - **d.** the majority of patients who develop cervical cancer in Manitoba have not participated in regular cervical cancer screening
  - e. the program will remind clients and physicians when cervical cancer screening testing or follow-up is overdue

### 2. Which of the following is not a risk factor for cervical cancer?

- a. Not participating in regular cervical cancer screening
- **b.** Persistent HPV infection
- c. A first degree relative diagnosed with cervical cancer
- 3. Name four higher risk groups who may be less likely to be screened for cervical cancer.
  - a. \_\_\_\_\_\_ b. \_\_\_\_\_\_ c. \_\_\_\_\_\_ d. \_\_\_\_\_

4. List five reasons why an eligible client may be reluctant to participate in regular cervical cancer screening.

a.	 
b.	 
c.	 
d.	 
e.	 

5. List six populations that may have special learning, counseling and/or educational needs.

a.			_
b.	 	 	 _
c.	 	 	 _
d.	 		 _
			 _
f.	 		 _

- 6. A persistent high-risk human papillomavirus (hrHPV) infection is recognized as the main risk factor for cervical cancer.
  - a. True
  - b. False



- 7. If a client appears apprehensive before the exam, it is best to:
  - a. reassure them and press forward
  - **b.** tell them that there is nothing to worry about
  - **c.** ask open-ended questions about their apprehension about the cervical cancer screening procedure
- 8. List three things that you can do to increase a client's physical and emotional comfort during the exam.
  - a. \_\_\_\_\_ b. \_\_\_\_\_ c.
- 9. According to the post-hysterectomy screening guidelines, screening of the vaginal vault is not necessary if the hysterectomy was performed for a malignant condition.
  - a. True
  - **b.** False
- **10.** Which of the following clients is at risk for infection with HPV? Select all that apply.
  - a. Mary who has only had sex once in her lifetime over 20 years ago
  - **b.** Eve who has worked as a sex trade worker for the last 15 years
  - **c.** Sally who started having sex at 14 and has smoked a pack of cigarettes every day for the past 5 years
- **11.** List five abnormal findings of the ectocervix.



- 12. Which of the following are abnormal findings on the cervix that should be investigated appropriately or referred to a specialist? Select all that apply.
  - **a.** Friable tissue (soft, eroded)
  - **b.** Red patchy areas
  - c. Abnormal bleeding, and inflammation
  - **d.** Granular areas, white patches
  - e. Pink colour
  - f. Lesions

#### 13. Name the three sampling areas of the cervix.

a.	
b	
с.	

#### 14. A smaller and narrower speculum should be used with:

- a. Clients with vaginismus
- **b.** Nulliparous clients
- **c.** Circumcised clients
- **d.** Clients whose vaginal orifices have contracted postmenopausally

#### 15. It is acceptable to lubricate the speculum with:

- a. Water-based lubricant
- **b.** Warm water
- c. Vaseline

### 16. An acceptable way to insert the speculum is (select all that apply):

- **a.** With the blade tips against the upper (anterior) wall of the vagina
- **b.** At an oblique angle
- c. With the speculum closed
- **d.** With the speculum slightly opened
- e. The speculum is angled 45° downward toward the small of the client's back

# **17.** The best way to reposition a speculum for a client with a cervix with posterior orientation is:

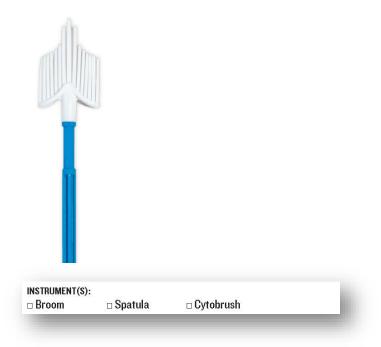
- a. to reinsert less deeply and anteriorly, with the base of the lower blade actually compressing the anterior wall of the vagina.
- **b.** to insert the speculum more deeply and posteriorly through compression of the perineal tissue. The blade tips will slip under the cervix into the posterior fornix.
- **c.** by choosing a plastic speculum of a larger size and reinserting as you did prior.

# 18. The correct way to obtain a broom specimen is by rotating the broom in the endocervical canal:

- **a.** Counterclockwise 360° once.
- **b.** Clockwise, 360° twice.
- **c.** Clockwise, 360° five times.
- 19. When using the dual sampling technique with a liquid medium, a plastic spatula and plastic cytobrush with perforated ends should be used in order to break off into the liquid medium.
  - a. True
  - b. False



- 20. If sexually transmitted infections specimens need to be collected, they should be taken prior to the cervical specimen.
  - a. True
  - b. False
- 21. The broom-like device collects cells from the ectocervix and endocervix simultaneously.
  - a. True
  - b. False
- 22. If a clinician uses the device pictured below to collect the cervical specimen, they should select 'Cytobrush' when completing the cytology requisition form instrument section.
  - a. True
  - **b.** False



- 23. The HCP should avoid touching the head of the broom while detaching it into the liquid medium.
  - a. True
  - b. False
- 24. The specimen and the cytology requisition should both be labeled with matching (select all that apply):
  - a. First name
  - **b.** Last name
  - c. PHIN
  - d. Date of birth
- 25. List four key things that should be discussed with the client after the examination.

a.	 
b.	 
c.	 
d.	 

26. Name four scenarios in which the laboratory would reject a specimen.

- a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_ d. \_\_\_\_
- 27. During a Pap test visit, when does the HCP seek to obtain informed verbal consent from the client?
  - **a.** At the start of the consultation
  - **b.** After you have explained the external exam, speculum exam and the cervical cancer sceening procedure and before you begin
  - **c.** After completing the external exam, speculum exam and the cervical cancer screening test

- 28. Is the HCP legally responsible to protect confidentiality of the client's health information?
  - a. Yes
  - **b.** No
- 29. In order for nurses, clinical assistants and physician assistants to properly identify themselves as the specimen taker on the cytology requisition form, they should obtain a CervixCheck Provider Number from CervixCheck.
  - a. True
  - b. False
- 30. A client had a colposcopy and was investigated and/or treated for a cervical abnormality. They completed their care with the colposcopist and the colposcopist has discharged them back to the routine care of their regular HCP. The HCP has just done a follow-up cervical cancer screen and it shows ASCUS. What is the recommended management?

31. A healthcare provider has a 31-year old client who was screened for cervical cancer with a cytology result of ASCUS and a positive high-risk HPV test. What is the recommended management?

