

Ectopic Pregnancy – Self Assessment

- 1) **Risk factors for ectopic pregnancy include all of the following EXCEPT:**
 - a) living in the western United States
 - b) *in utero* diethylstilbestrol (DES) exposure
 - c) previous tubal ligation
 - d) age less than 25
- 2) **The most common symptom of ectopic pregnancy is:**
 - a) pelvic pain
 - b) amenorrhea
 - c) abnormal bleeding
 - d) dizziness
- 3) **Currently, a gestational sac can be reliably identified with sonography when the b-hCG level in a normal pregnancy is:**
 - a) 1000 mIU/ml or greater
 - b) 1800 mIU/ml or greater
 - c) 6500 mIU/ml or greater
 - d) 9000 mIU/ml or greater
- 4) **In a 48 hour interval, the minimum increase in b-hCG levels in a normal pregnancy is:**
 - a) 50%
 - b) 66%
 - c) 100%
 - d) 150%
- 5) **In patients treated with salpingectomy for ectopic pregnancy, what percentage will result in a term pregnancy?**
 - a) 30%
 - b) 50%
 - c) 70%
 - d) 90%
- 6) **The current treatment of choice for an unruptured isthmic pregnancy in a woman who wishes to preserve her fertility potential is:**
 - a) fimbrial expression
 - b) linear salpingostomy
 - c) segmental resection and subsequent anastomosis
 - d) salpingectomy
- 7) **Spontaneous resolution of a tubal pregnancy:**
 - a) occurs very rarely
 - b) is associated with better future fertility potential than with surgical therapy
 - c) may be considered if serial β -hCG levels are declining
 - d) should be attempted in patients seeking to avoid surgery
- 8) **Recommended post-operative care following conservative surgery for ectopic pregnancy includes:**
 - a) hydrotubations
 - b) follow-up sonograms
 - c) glucocorticoids
 - d) weekly β -hCG determinations
- 9) **The risk of a subsequent ectopic pregnancy after a single ectopic pregnancy treated with conservative surgery is:**
 - a) 72 – 75%
 - b) 50 – 53%
 - c) 25 – 28%
 - d) 12 – 15%

Click [here](#) for correct answers to the above questions