



## Pelvic Inflammatory Disease

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1. The diagnosis of pelvic inflammatory disease is established on the basis of:
  - A. Laboratory findings
  - B. Culture results
  - C. Physical examination
  - D. Sonographic findings
  - E. Laparoscopic examination

2. A potentially life-threatening complication of pelvic inflammatory disease is:
- A. Recurrent abortion
  - B. Parametritis
  - C. Endocervicitis
  - D. Endometritis
  - E. Ruptured tuboovarian abscess
3. Long-term morbidity is most commonly associated with:
- A. Vaginitis
  - B. Cervicitis
  - C. Endometritis
  - D. Parametritis
  - E. Salpingitis
4. In a patient with suspected pelvic inflammatory disease, the absence of cervical abnormalities and no white blood cells present in vaginal secretions suggest that:
- A. Only upper tract disease is present
  - B. Pelvic infection has occurred by hematogenous spread
  - C. *Mycoplasma genitalium* is the cause of the pelvic infection
  - D. The infection is older than 72 hours
  - E. An alternative diagnosis should be considered
5. The peripheral white blood count in women with pelvic inflammatory disease is most commonly:
- A. One-half of normal
  - B. Normal
  - C. Slightly above the normal range
  - D. Two-fold higher than normal
  - E. Three- or more-fold above normal

6. Resistance by *Neisseria gonorrhoeae* is now common to which antibiotic(s)?

- A. Cefexime
- B. Azithromycin
- C. Metronidazole
- D. Fluoroquinolones
- E. Tetracyclines

7. Women with visually confirmed salpingitis have an increased risk of ectopic pregnancy that is approximately:

- A. 2-fold higher than controls
- B. 3-fold higher than controls
- C. 5-fold higher than controls
- D. 7-fold higher than controls
- E. 9-fold higher than controls

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