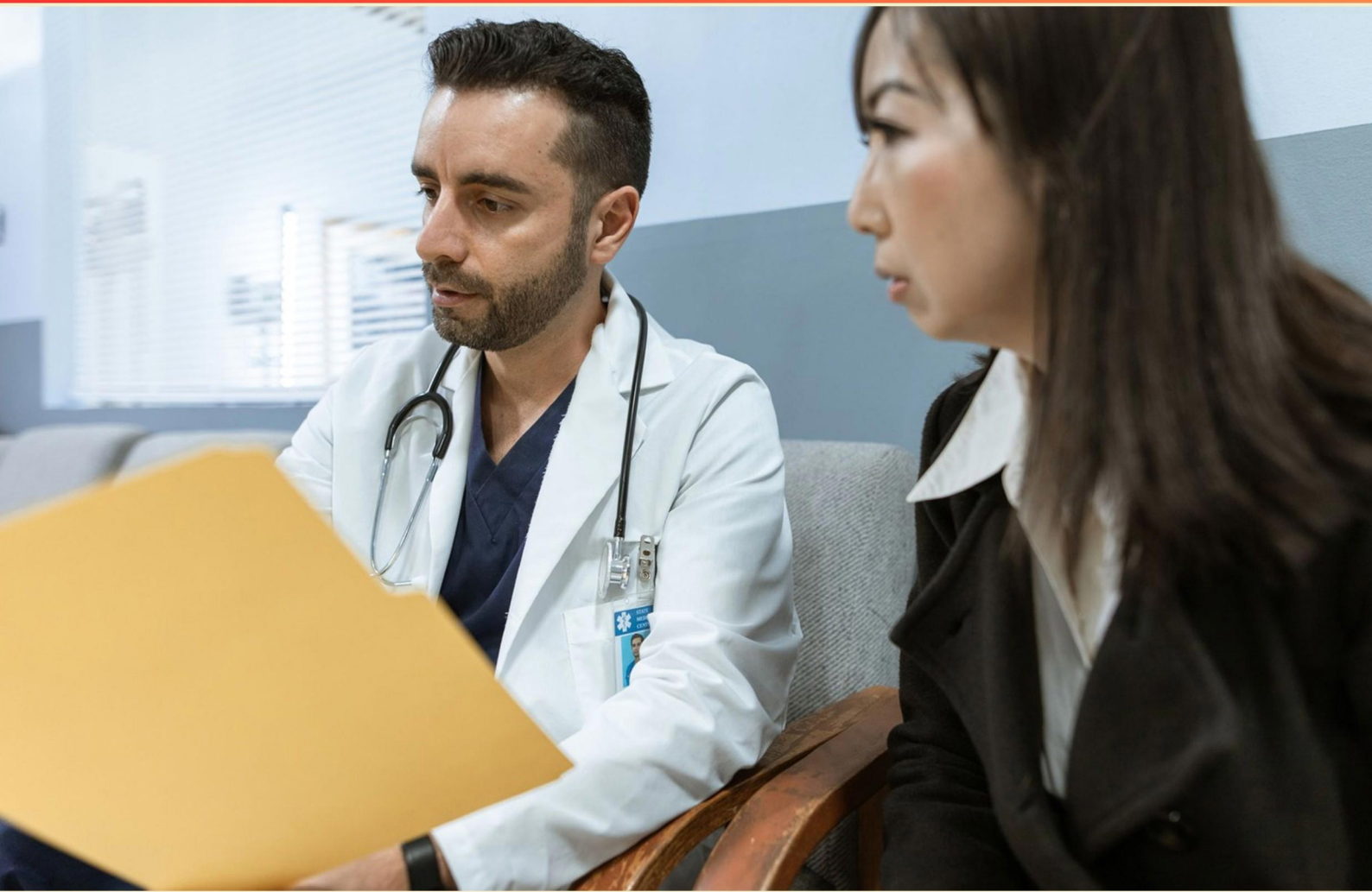


WOMEN'S HEALTH END OF ROTATION (EOR) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE**

<https://womenshealth.eor.examzify.com>



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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. What screening test is recommended for detecting cervical cancer?**
 - A. Ultrasound
 - B. CT scan
 - C. Pap smear
 - D. MRI
- 2. What is the most common cause of menorrhagia in a woman with an enlarged uterus?**
 - A. Hormonal imbalance
 - B. Fibroids
 - C. Polycystic ovary syndrome
 - D. Cervical cancer
- 3. What is the most appropriate intervention for a Pap smear showing atypical glandular cells (AGUS)?**
 - A. HPV DNA testing
 - B. Colposcopy with endometrial curettage (ECC)
 - C. Repeat Pap smear in 3 months
 - D. Colposcopy and endometrial sampling
- 4. What is the treatment for a patient with Pediculosis pubis?**
 - A. Permethrin (Nix) cream
 - B. Clotrimazole (Gyne-Lotrimin)
 - C. Podofilox (Condylox) solution
 - D. Selenium sulfide (Selsun) suspension
- 5. What condition is characterized by the presence of tissue similar to the lining of the uterus outside the uterus?**
 - A. Fibroids
 - B. Endometriosis
 - C. Pelvic inflammatory disease
 - D. Cervical cancer

- 6. What screening test is recommended for women starting at age 45 to 54 for breast cancer?**
- A. Ultrasound
 - B. Mammography
 - C. Breast MRI
 - D. Clinical breast exam
- 7. What is the most common reason for a woman to seek gynecologic care?**
- A. Menstrual irregularities
 - B. Routine health exams and preventive screenings
 - C. Pelvic pain
 - D. Contraceptive counseling
- 8. How does obesity relate to menstrual irregularities?**
- A. Obesity has no impact on menstrual cycle
 - B. Obesity can lead to hormonal imbalances causing irregular menstruation
 - C. Obesity only affects physical health
 - D. Obesity improves the regularity of menstruation
- 9. What is the term for the surgical procedure to remove the uterus?**
- A. Oophorectomy
 - B. Hysterectomy
 - C. Laparoscopy
 - D. Salpingectomy
- 10. What percentage of women typically experience postpartum depression?**
- A. Approximately 5-10%
 - B. Approximately 10-20%
 - C. Approximately 20-30%
 - D. Approximately 30-40%

Answers

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1. C
2. B
3. D
4. A
5. B
6. B
7. B
8. B
9. B
10. B

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Explanations

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1. What screening test is recommended for detecting cervical cancer?

- A. Ultrasound
- B. CT scan
- C. Pap smear**
- D. MRI

The recommended screening test for detecting cervical cancer is the Pap smear. This test is specifically designed to collect cells from the cervix to check for precancerous changes and the presence of cervical cancer. The Pap smear is vital because it can identify abnormal cervical cells before they develop into cancer, allowing for earlier intervention and treatment, which significantly increases the chances of successful outcomes. In conjunction with the Pap smear, the HPV (human papillomavirus) test may also be performed to determine if high-risk types of HPV are present, as persistent infection with these viruses is a major risk factor for developing cervical cancer. Other screening methods, such as ultrasound, CT scans, and MRI, are not appropriate for routine cervical cancer screening, as they serve different diagnostic purposes and are not effective in detecting cellular changes in cervical tissue. Ultrasound is more commonly used for assessing structural abnormalities of the reproductive organs, CT scans are primarily for imaging internal organs in detail, and MRI is often used for evaluating soft tissue structures. Thus, the Pap smear remains the gold standard for cervical cancer screening.

2. What is the most common cause of menorrhagia in a woman with an enlarged uterus?

- A. Hormonal imbalance
- B. Fibroids**
- C. Polycystic ovary syndrome
- D. Cervical cancer

The most common cause of menorrhagia in a woman with an enlarged uterus is fibroids. Uterine fibroids, also known as leiomyomas, are benign smooth muscle tumors of the uterus that can lead to heavy menstrual bleeding due to their location and size. Their growth can cause the uterus to enlarge, which directly contributes to the symptoms of menorrhagia. As fibroids increase the surface area of the endometrium (the lining of the uterus), they can cause prolonged or heavy menstrual periods. In contrast, while hormonal imbalances can contribute to menstrual irregularities, they do not necessarily cause uterine enlargement specifically. Polycystic ovary syndrome (PCOS) is primarily associated with anovulation and may cause irregular bleeding, but it typically does not result in an enlarged uterus. Cervical cancer can cause abnormal bleeding, but it is less frequently a direct cause of heavy menstrual bleeding and is not usually associated with an enlarged uterus in the context of menorrhagia. Therefore, among the options provided, fibroids are the most likely explanation for menorrhagia in a woman presenting with an enlarged uterus.

3. What is the most appropriate intervention for a Pap smear showing atypical glandular cells (AGUS)?

- A. HPV DNA testing
- B. Colposcopy with endometrial curettage (ECC)
- C. Repeat Pap smear in 3 months

D. Colposcopy and endometrial sampling

The presence of atypical glandular cells (AGUS) on a Pap smear indicates that there may be abnormal changes in the cervical or endometrial cells, suggesting a higher risk for pre-cancerous or cancerous lesions compared to other findings. Therefore, a more definitive evaluation is necessary. The most appropriate intervention in this scenario is colposcopy and endometrial sampling. Colposcopy allows for direct visualization of the cervix and can help identify areas in need of biopsy. Endometrial sampling is crucial because AGUS cells can originate from the endometrium, and sampling the endometrial tissue can help rule out any endometrial pathology, including hyperplasia or carcinoma. This combination provides a comprehensive approach to evaluate the source of the atypical cells effectively, ensuring that any potential lesions in both the cervix and endometrium are assessed and managed appropriately.

4. What is the treatment for a patient with Pediculosis pubis?

- A. Permethrin (Nix) cream**
- B. Clotrimazole (Gyne-Lotrimin)
- C. Podofilox (Condylox) solution
- D. Selenium sulfide (Selsun) suspension

The treatment for pediculosis pubis, also known as pubic lice, is permethrin cream. This is an effective topical insecticide that works by attacking the nervous system of the lice, leading to their death. Permethrin is often the first choice due to its efficacy and safety profile. It is typically applied to affected areas and left on for a specified amount of time before rinsing off. The other options listed do not specifically target the lice infesting the pubic area. Clotrimazole, primarily an antifungal medication, is used for fungal infections like yeast infections and does not address lice. Podofilox is used for the treatment of genital warts and is not effective for lice. Selenium sulfide is an anti-dandruff and anti-seborrheic agent primarily used to treat dandruff and seborrheic dermatitis, and it does not show effectiveness against parasites like pubic lice. Thus, permethrin is the appropriate choice in this context for treating pediculosis pubis.

5. What condition is characterized by the presence of tissue similar to the lining of the uterus outside the uterus?

- A. Fibroids
- B. Endometriosis**
- C. Pelvic inflammatory disease
- D. Cervical cancer

The presence of tissue similar to the lining of the uterus outside the uterus is characteristic of endometriosis. In this condition, endometrial-like tissue grows in locations such as the ovaries, fallopian tubes, and the organs within the pelvis, causing pain, irregular bleeding, and potentially contributing to infertility. This ectopic endometrial tissue responds to hormonal changes in the menstrual cycle, leading to inflammation and the formation of scar tissue. Fibroids, also known as uterine leiomyomas, are benign tumors of the uterus but do not involve tissue outside the uterus. Pelvic inflammatory disease is an infection that affects the female reproductive organs and does not describe the specific presence of endometrial-like tissue in abnormal locations. Cervical cancer arises from the cells of the cervix and is not related to endometrial tissue. Understanding the distinguishing features of these conditions helps clarify why endometriosis is the correct answer in this context.

6. What screening test is recommended for women starting at age 45 to 54 for breast cancer?

- A. Ultrasound
- B. Mammography**
- C. Breast MRI
- D. Clinical breast exam

Mammography is the recommended screening test for women starting at age 45 to 54 for breast cancer. This guideline is based on extensive research demonstrating that mammography significantly reduces breast cancer mortality by detecting tumors at an earlier, more treatable stage. Regular screening allows for the identification of breast cancer even before symptoms appear, which is crucial in improving outcomes for women. Mammography utilizes low-dose X-rays to create detailed images of the breast tissue, allowing healthcare providers to identify any suspicious areas that may indicate the presence of cancer. The process of routine mammography screening is well-established, and professional organizations endorse it as the most effective method for early detection of breast cancer in women within the specified age range. Other options, such as ultrasound or MRI, are typically used in specific situations, such as further evaluation of abnormalities detected by mammography or in women with a very high risk of breast cancer, rather than as a primary screening tool for the general population. Clinical breast exams are also important but serve as complementary measures rather than replacements for mammography in the screening process.

7. What is the most common reason for a woman to seek gynecologic care?

- A. Menstrual irregularities
- B. Routine health exams and preventive screenings**
- C. Pelvic pain
- D. Contraceptive counseling

The most common reason for a woman to seek gynecologic care is routine health exams and preventive screenings. These appointments provide an opportunity for women to obtain essential health services, including Pap smears, breast examinations, and discussions about reproductive health, which are crucial for early detection and prevention of conditions such as cervical cancer and breast cancer. Regular gynecological visits also facilitate discussions on overall health, lifestyle choices, and family planning. Therefore, these preventative services and routine checks form the cornerstone of women's health care, making them the primary reason for most visits to a gynecologist. While menstrual irregularities, pelvic pain, and contraceptive counseling are certainly significant reasons women may seek care, they are typically more specific issues encountered once a woman is already engaged in routine health care practices.

8. How does obesity relate to menstrual irregularities?

- A. Obesity has no impact on menstrual cycle
- B. Obesity can lead to hormonal imbalances causing irregular menstruation**
- C. Obesity only affects physical health
- D. Obesity improves the regularity of menstruation

Obesity is closely linked to hormonal imbalances that can disrupt the menstrual cycle. In individuals with obesity, excess adipose tissue can lead to an increase in estrogen levels; this condition is known as estrogen dominance. Elevated estrogen can interfere with the normal regulation of the menstrual cycle, potentially resulting in irregular or absent periods. Additionally, obesity is associated with insulin resistance, which can further alter the hormonal environment, contributing to conditions like polycystic ovary syndrome (PCOS), a common cause of menstrual irregularity characterized by hormonal imbalance and ovulatory dysfunction. The relationship between obesity and menstrual irregularities highlights the interconnectedness of body weight, metabolic health, and reproductive health. While it is important to consider various aspects of health, the impact of obesity on menstrual regularity is a significant concern that warrants attention.

9. What is the term for the surgical procedure to remove the uterus?

- A. Oophorectomy
- B. Hysterectomy**
- C. Laparoscopy
- D. Salpingectomy

The surgical procedure specifically aimed at removing the uterus is referred to as a hysterectomy. This procedure can be performed for various medical reasons, including uterine fibroids, abnormal bleeding, endometriosis, or certain types of cancer. There are different types of hysterectomies, such as total hysterectomy, where the entire uterus along with the cervix is removed, and partial or subtotal hysterectomy, where only part of the uterus is taken out. By contrast, the other terms are associated with different surgical procedures. Oophorectomy pertains to the removal of one or both ovaries, laparoscopy describes a minimally invasive technique used for various types of surgeries, and salpingectomy refers to the removal of one or both fallopian tubes. Each of these procedures has its specific indications and is not interchangeable with hysterectomy, highlighting the importance of understanding these distinctions in women's health.

10. What percentage of women typically experience postpartum depression?

- A. Approximately 5-10%
- B. Approximately 10-20%**
- C. Approximately 20-30%
- D. Approximately 30-40%

Postpartum depression (PPD) affects a significant number of women following childbirth. The research indicates that approximately 10-20% of women experience postpartum depression after giving birth. This figure takes into account the various factors contributing to PPD, including hormonal changes, psychological stressors, and the new demands of motherhood, all of which can impact mental health during the postpartum period.

Understanding this percentage is important for healthcare providers and new mothers alike, as it allows for appropriate screening, support, and treatment options to be implemented for those who may be struggling with their mental health after delivery. Acknowledging that 10-20% of women are affected may help in normalizing the conversation around maternal mental health and encourage women to seek help without stigma. Some studies may show varying rates based on different demographics or methodologies, but the consensus is that the prevalence of postpartum depression falls squarely within this range.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://womenshealthor.examzify.com>

We wish you the very best on your exam journey. You've got this!

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