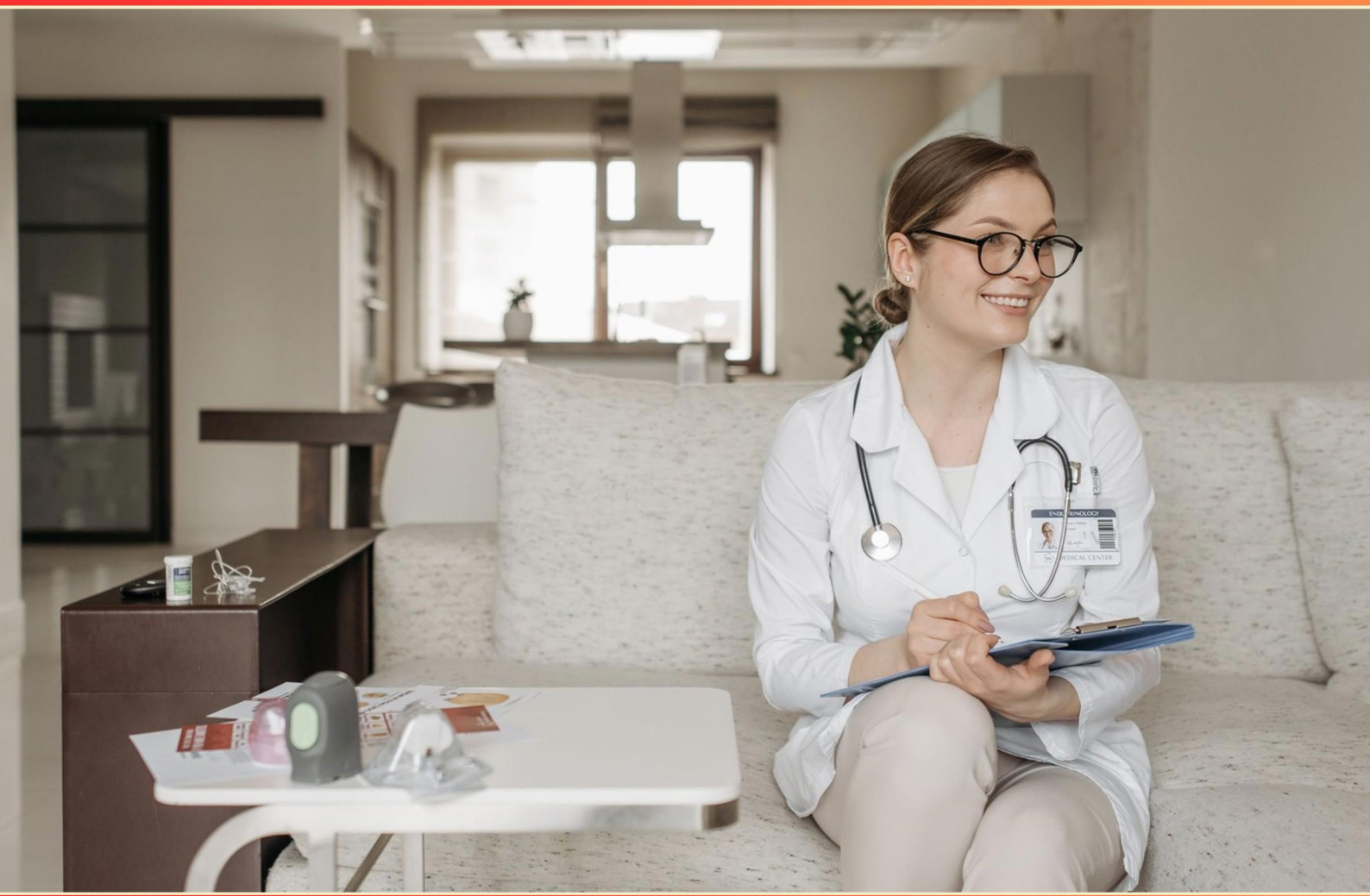
NCC WOMEN'S HEALTH CARE NURSE PRACTITIONER (WHNP) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

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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.

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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!

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Questions

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1. What does a positive Murphy's sign indicate?

A. Pain with palpation of the gallbladder

B. Asymmetrical enlargement of the uterus

C. RLQ pain with hip extension

D. Dull sound over the spleen

2. What condition is characterized by hyperprolactinemia?

A. Adrenal tumor

B. Hypothalamic dysfunction

C. Ovarian dysfunction

D. Pituitary tumor

3. What hormone does the placenta primarily produce during pregnancy to maintain the corpus luteum?

A. Estrogen

B. Progesterone

C. Human chorionic gonadotropin (hCG)

D. Luteinizing hormone

4. What is a common symptom of adenomyosis?

A. Menorrhagia

B. Decreased appetit

C. Insomnia

D. Nausea

5. What age group is primarily at risk for developing herpes zoster?

A. Under 30

B. 30-39

C. 40-49

D. 50-59

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6. What dietary recommendation is essential for a pregnant woman to prevent neural tube defects?

A. Increase iron intake

B. Increase calcium intake

C. Increase fiber intake

D. Increase folate intake

7. What does a Hepatitis B screening result of HBsAg positive, anti-HBc positive, and IgM anti-HBc positive signify?

A. Chronic infection

B. Vaccine immunity

C. Acute infection

D. Natural immunity

8. What is the lay term for herpes zoster?

A. Shingles

B. Chickenpox

C. Cold sores

D. Skin rash

9. What are the key components of a comprehensive sexual history?

A. Sexual orientation, number of partners, contraception use, and history of STIs

B. Frequency of sexual activity and history of pregnancies

C. Sexual preferences and sexual health treatments

D. Personal hygiene practices and partner demographics

10. What condition does the 17-hydroxyprogesterone test primarily screen for?

A. Ovarian cancer

B. Chronic kidney disease

C. Congenital adrenal hyperplasia

D. Polycystic ovary syndrome

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Answers

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

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Explanations

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1. What does a positive Murphy's sign indicate?

A. Pain with palpation of the gallbladder

B. Asymmetrical enlargement of the uterus

C. RLQ pain with hip extension

D. Dull sound over the spleen

A positive Murphy's sign indicates pain with palpation of the gallbladder, which is a clinical finding associated with cholecystitis, or inflammation of the gallbladder. When a healthcare provider palpates the right upper quadrant of the abdomen during an examination and the patient experiences sudden pain or tenderness, it suggests that the gallbladder is inflamed or diseased. The positive Murphy's sign is thus a valuable tool in assessing gallbladder health and can guide further diagnostic testing, such as ultrasound or other imaging studies. Regarding the other choices, asymmetrical enlargement of the uterus relates more to conditions such as fibroids or pregnancy complications, rather than gallbladder issues. RLQ pain with hip extension is more representative of appendicitis and not associated with Murphy's sign. Finally, a dull sound over the spleen could be indicative of splenic enlargement or other issues, but it does not relate to the assessment of the gallbladder.

2. What condition is characterized by hyperprolactinemia?

A. Adrenal tumor

B. Hypothalamic dysfunction

C. Ovarian dysfunction

D. Pituitary tumor

Hyperprolactinemia is primarily characterized by an elevated level of prolactin in the blood, often resulting from abnormal function of the pituitary gland, specifically when a pituitary tumor, such as a prolactinoma, is present. These tumors produce excess prolactin, leading to a spectrum of clinical symptoms, including irregular menstrual cycles, galactorrhea (milk production), and infertility in women. While other conditions like adrenal tumors, hypothalamic dysfunction, and ovarian dysfunction can influence hormone levels and reproductive health, pituitary tumors are the most direct cause of hyperprolactinemia. Thus, understanding the role of the pituitary gland in hormone regulation highlights why a pituitary tumor is the correct association with hyperprolactinemia in this context.

3. What hormone does the placenta primarily produce during pregnancy to maintain the corpus luteum?

A. Estrogen

B. Progesterone

C. Human chorionic gonadotropin (hCG)

D. Luteinizing hormone

The hormone primarily produced by the placenta during pregnancy to maintain the corpus luteum is human chorionic gonadotropin (hCG). Shortly after implantation of the embryo into the uterine lining, the placenta begins to secrete hCG. This hormone plays a critical role in signaling the corpus luteum to continue its production of progesterone, which is essential for maintaining the uterine lining and supporting the early stages of pregnancy. The corpus luteum is responsible for producing progesterone during the first trimester until the placenta takes over this role. The presence of hCG in the bloodstream is also what pregnancy tests detect, making it an important marker for confirming pregnancy. Thus, hCG not only maintains the corpus luteum but is also vital for the continuation of pregnancy during its early phases.

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4. What is a common symptom of adenomyosis?

A. Menorrhagia

B. Decreased appetit

C. Insomnia

D. Nausea

Adenomyosis is a condition where the endometrial tissue grows into the muscular wall of the uterus. One of the hallmark symptoms of this condition is menorrhagia, which refers to heavy or prolonged menstrual bleeding. This occurs because the abnormal tissue growth can lead to a thicker endometrial lining and more extensive bleeding during menstruation. Additionally, adenomyosis can also cause significant uterine enlargement and discomfort, which may contribute to heavier menstrual flows. This is why menorrhagia is recognized as a common symptom associated with adenomyosis, making it a critical indicator when diagnosing the condition. The other symptoms listed, such as decreased appetite, insomnia, and nausea, are not typically associated with adenomyosis and may indicate other health issues.

5. What age group is primarily at risk for developing herpes zoster?

A. Under 30

B. 30-39

C. 40-49

D. 50-59

Individuals aged 50 years and older are primarily at risk for developing herpes zoster, also known as shingles. The rationale behind this increased risk is closely tied to the natural aging process, which often results in a decline in the immune response. As people age, the varicella-zoster virus, which causes both chickenpox in children and shingles in adults, can reactivate after remaining dormant in the sensory nerve ganglia. Research indicates that being 50 and older presents a significantly higher likelihood of experiencing herpes zoster, with incidence rates increasing notably after this age threshold. This is why vaccination recommendations, such as the Shingrix vaccine, emphasize immunization for individuals in this age group to help prevent the reactivation of the virus. Considering the other age groups, while individuals under 30, aged 30-39, and aged 40-49 can contract herpes zoster, their incidence rates are lower compared to those aged 50 and above. This makes the older age group the primary focus for prevention and awareness regarding herpes zoster.

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6. What dietary recommendation is essential for a pregnant woman to prevent neural tube defects?

A. Increase iron intake

B. Increase calcium intake

C. Increase fiber intake

D. Increase folate intake

Increasing folate intake is essential for a pregnant woman to help prevent neural tube defects (NTDs) in the developing fetus. Folate, also known as vitamin B9, plays a crucial role in DNA synthesis and repair, as well as in cell division and growth. Adequate folate levels before conception and during early pregnancy are vital because they support the proper development of the neural tube, which eventually forms the brain and spinal cord. Neural tube defects can occur when the neural tube does not close properly during the first few weeks of pregnancy, often before a woman even knows she is pregnant. Studies have shown that women who consume sufficient amounts of folate around the time of conception and during the first trimester significantly reduce the risk of NTDs, such as spina bifida and anencephaly. While iron, calcium, and fiber are important for pregnancy health, their roles do not specifically address the prevention of neural tube defects in the same direct manner that folate does. Iron is vital for preventing anemia, calcium supports bone health, and fiber aids in digestion, but folate's unique impact on neural tube development makes it the key nutritional recommendation during pregnancy for preventing these defects.

7. What does a Hepatitis B screening result of HBsAg positive, anti-HBc positive, and IgM anti-HBc positive signify?

A. Chronic infection

B. Vaccine immunity

C. Acute infection

D. Natural immunity

A Hepatitis B screening result that shows HBsAg positive, anti-HBc positive, and IgM anti-HBc positive indicates that there is an acute Hepatitis B infection currently occurring. HBsAg (Hepatitis B surface antigen) positivity means that the virus is present in the bloodstream, which is indicative of active infection. The presence of anti-HBc (antibody to Hepatitis B core antigen) suggests that the individual has been exposed to the virus, and when this is accompanied by IgM anti-HBc positivity, it strongly suggests that the infection is recent or acute. The IgM form of the antibody typically appears shortly after infection, suggesting that the body is still responding to the initial infection phase. This combination of serological markers provides a clear indication that the patient is experiencing an acute phase of Hepatitis B virus infection, distinguishing it from other possibilities such as chronic infection, where HBsAg would persist but IgM anti-HBc would typically be negative. Similarly, a vaccine-induced immunity would present only with anti-HBs positivity, not involving anti-HBc, because the vaccine does not introduce core antigens. The presence of anti-HBc alone without IgM would suggest past infection rather than an acute one. In summary

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8. What is the lay term for herpes zoster?

A. Shingles

B. Chickenpox

C. Cold sores

D. Skin rash

Herpes zoster is commonly known as shingles. This term is used to describe a reactivation of the varicella-zoster virus, which originally causes chickenpox. After an individual recovers from chickenpox, the virus remains dormant in the nerve tissues and can reactivate later in life, leading to shingles. The condition is characterized by a painful rash that typically appears as a stripe of blisters on one side of the body, often accompanied by burning or stabbing pain. The other terms listed represent different conditions: chickenpox refers to the primary infection caused by the same virus (varicella-zoster), cold sores are typically associated with herpes simplex virus infections affecting the lips or mouth, and a skin rash is a non-specific term that could refer to any number of dermatological conditions and is not specific to herpes zoster. Therefore, shingles is the accurate lay term specifically for herpes zoster.

9. What are the key components of a comprehensive sexual history?

A. Sexual orientation, number of partners, contraception use, and history of STIs

B. Frequency of sexual activity and history of pregnancies

C. Sexual preferences and sexual health treatments

D. Personal hygiene practices and partner demographics

The key components of a comprehensive sexual history include sexual orientation, number of partners, contraception use, and history of STIs. This selection encompasses essential details that help healthcare providers assess a patient's sexual health accurately and identify any potential risks or concerns. Understanding sexual orientation is important for providing appropriate care and addressing the unique health needs of individuals in different sexual communities. Knowing the number of sexual partners is vital for evaluating risk exposure to sexually transmitted infections (STIs) and for assessing practices related to safer sex. Contraception use is equally crucial, as it informs providers about potential pregnancy risks and aids in discussions about family planning and contraceptive counseling. Additionally, a history of STIs is significant not only for understanding an individual's past health issues but also for determining necessary screenings and preventive measures for future care. In contrast, while frequency of sexual activity and history of pregnancies can provide some context, they do not cover all pertinent aspects of sexual health that a comprehensive assessment requires. Sexual preferences and health treatments, while relevant in certain contexts, do not encompass the basic data needed for a well-rounded sexual history. Finally, personal hygiene practices and partner demographics, though they might contribute to the overall understanding of a sexual health profile, do not directly relate to the medical or health implications

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10. What condition does the 17-hydroxyprogesterone test primarily screen for?

A. Ovarian cancer

B. Chronic kidney disease

C. Congenital adrenal hyperplasia

D. Polycystic ovary syndrome

The 17-hydroxyprogesterone (17-OHP) test is primarily used to screen for congenital adrenal hyperplasia (CAH), which is a genetic disorder affecting adrenal hormone production. In individuals with CAH, there is a deficiency in the enzyme that converts 17-OHP to cortisol, leading to an accumulation of 17-OHP. The test is particularly important in newborn screening, as untreated CAH can result in serious health issues, including adrenal crisis and abnormal growth and development. By measuring the levels of 17-OHP in the blood, healthcare providers can quickly identify individuals who may require further testing and management for CAH. The other conditions mentioned—ovarian cancer, chronic kidney disease, and polycystic ovary syndrome—are not screened for using the 17-hydroxyprogesterone test. Ovarian cancer does not have a specific screening test that utilizes 17-OHP. Chronic kidney disease is primarily monitored through blood urea nitrogen (BUN), creatinine levels, and urine analysis rather than hormone levels. Polycystic ovary syndrome (PCOS) is typically diagnosed based on clinical symptoms and criteria such as irregular menstrual cycles, hirsutism, and ultrasound findings, rather

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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:

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

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