

Individual Readiness Questions:

GESTATIONAL DIABETES: DIAGNOSES AND MANAGEMENT WITH A RURAL TWIST

After reviewing the pre-session content, answer the questions below. Print out this sheet with your answers to use in a team activity.

1.	According to Garrison's (2015)	article, Gestational Diabetes Mellitus (GDM) affect
	approximately	of pregnancies in the United States?

- a. 50%
- b. 1%
- c. 6%
- d. 99%
- 2. According to Garrison's (2015) article, fetal complications associated with GDM include
 - a. Shoulder dystocia and Macrosomia
 - b. Gestational hypertension and preeclampsia
 - c. Low glycemic index and decreased A1C levels
 - d. None of the above
- 3. According to Garrison's (2015) article, initial treatment for GDM involves
 - a. Oral medications
 - b. Life style modifications
 - c. Insulin therapy
 - d. All of the above



4.	According to Garrison's (2015) article, the ideal fasting blood glucose level for wome	'n
	with GDM should be less than	

- a. 140 mg per dL
- b. 7.8 mg per dL
- c. 120 mg per dL
- d. 95 mg per dL
- 5. According to Garrison's (2015) article, how often should women with history of GDM be screened for overt diabetes?
 - a. Every three years
 - b. Every 24 weeks
 - c. Every six to 12 weeks
 - d. Never
- 6. According to the ACOG Practice Bulletin (2017) article, screening for GDM is typically performed at
 - a. When pregnancy is confirmed
 - b. 32-36 weeks of gestation
 - c. 12-16 weeks of gestation
 - d. 24-28 weeks of gestation
- 7. According to the ACOG Practice Bulletin (2017) article, when pharmacological treatment is indicated for GDM, ______ is considered the first-line treatment
 - a. Glyburide
 - b. Metformin
 - c. Insulin
 - d. 5% Saline