Answer form for the article titled “Endometrial “Scratching” within the scope of CME/CPD

1. Implantation
   a. Is also known as nidation
   b. The endometrium has to be receptive
   c. Starts on day 5 post conception
   d. All of the above

2. What is usually not responsible for a recurrent implantation failure?
   a. An uterine polyp
   b. Chromosomal abnormality
   c. A trilaminar endometrium
   d. Endometriosis

3. When should endometrial scratching be performed?
   a. In the luteal phase of the cycle preceding IVF
   b. In the proliferation phase of the transfer cycle
   c. In the proliferation phase of the cycle preceding IVF
   d. Two days before embryo transfer

4. How should endometrial scratching be performed?
   a. The procedure is painful and should be performed under anaesthesia
   b. The cervix must be hooked
   c. A laparoscopy is necessary for endometrial scratching
   d. A small catheter is pushed forward through the cervix, and then retracted in circular movements

5. What is not a possible pathomechanism of endometrial scratching?
   a. Local stimulation of the endometrium induces decidualization
   b. Endometrial scratching causes an increase of uterine killer cells
   c. Endometrial scratching causes an increase in macrophages, dendritic cells, and proinflammatory cytokines
   d. Endometrial scratching optimizes synchronicity between the endometrium and the embryo to be transferred

6. What results could be shown by the large (including 1364 patients) randomized multicenter study from New Zealand (Dr. S. Lensen)?
   a. All patients undergoing IVF treatment should get an endometrial scratching before
   b. Women older than 40 years benefit from endometrial scratching
   c. No increases in live birth rate after endometrial scratching could be noticed
   d. Women younger than 40 years benefit from endometrial scratching
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1st Question

A  B  C  D

2nd Question

A  B  C  D

3rd Question

A  B  C  D

4th Question

A  B  C  D

5th Question

A  B  C  D

6th Question

A  B  C  D

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