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Arctic Fetal Alcohol Spectrum Disorder Regional Training Center Train-the-Trainer Workshop Follow-Up	
For each item, please choose the response that best completes the sentence or answers the question.	
The best public health message related to alcohol consumption by women of childbearing age is	
Women who know they are pregnant should not consume alcohol.	
Women who are pregnant or could become pregnant should not consume alcohol.	
All sexually active women should not consume alcohol.	
Women of childbearing age should not consume alcohol.	
Alcohol use, in moderation, is safe for all women.	
2. An episode of binge or risky drinking for women of childbearing age (18-44) is defined as more than standard drinks in about a two hour period. 2 3 4 5 6	
Which one of these is NOT considered a standard drink?	
12 ounces of beer	
12 ounces of wine cooler	
3 ounces of vodka	
All of the above are standard drinks	

The public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (XXXX-XXXX)

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4. Positive responses given to items on the TWEAK or the T-ACE screening instruments indicate	^
a diagnosis of alcoholism	
the likelihood that the woman will seek treatment for alcohol abuse	
the need for the health care provider to discuss the risks associated with drinking alcohol, especially when the woman is pregnant	
the difference between binge drinking and problem drinking	
the need for immediate admission to a treatment facility for further evaluation	
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5. Which of these is NOT part of the addictive disease process?	
Craving and compulsion	
O Violent behavior	
Loss of control	
Continued use despite adverse consequences	
All of the above are part of the addictive disease process	
6. Scientific studies of the effects of alcohol on the fetus have shown that	
Alcohol has no effect on the development of the fetus in the third trimester.	
Alcohol can only affect fetal development in the first trimester.	
A small to moderate amount of alcohol is safest during the second trimester.	
Of all the different types of alcohol, wine is the safest for a pregnant woman to consume.	
None of the above is correct.	
7. Although specific deficits experienced by individuals with an FASD vary widely, behavioral deficits are likely to include which of the following?	
Memory problems, underactivity, and self-injurious behavior	
 Inattention, memory problems and hyperactivity 	
Particular mannerisms, hoarding, and memory problems	
Emotion regulation, weight loss, fatigue, irritability	
 Auditory hallucinations, disorganized speech, and flat affect 	
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8. Which of the following include all three facial abnormalities associated with fetal alcohol syndrome?	
 Low set ears, large palpebral fissures, large forehead 	
Small palpebral fissures, smooth philtrum, thin upper lip	
Large palpebral fissures, smooth philtrum, thin upper lip	
Large forehead, flattened cheeks, small palpebral fissures	
Thin upper lip, distinct philtrum, ectropion	
9. Which of the following is NOT required to confirm a diagnosis of fetal alcohol syndrome (FAS)?	
Facial dysmorphia	
Growth retardation	
Central nervous system (CNS) abnormalities	
Documentation of prenatal alcohol exposure	
All of the above are required for a diagnosis of FAS	
10. Avariety of strategies have been found to be effective when working with individuals with an FASD. Which one of the following may not be as effective?	
Concise, explicit instructions	
Stable routines	
Social cues	
Visual aids	
© Repetition	
11. Which one of the following statements is NOT correct?	
Some women expose their fetus to alcohol because of alcohol dependence or addiction.	
 Health providers seek the best outcomes for women and fetuses by efforts to increase foreseeable benefits and minimize foreseeable harms. 	
Most medical societies advocate coercive methods as a first intervention for women who expose a fetus to alcohol.	
Health providers have an ethical duty to respect their patients.	
Confidentiality is an essential aspect of the health provider-patient relationship.	

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12. Which of the following is a validated screening tool commonly used to ascertain alcohol use among pregnant women?	
SASSI-3	
Addiction Severity Index	
MMPI	
DSM Screener	
13. Which organ system is primarily susceptible to damage or alteration caused by prenatal alcohol exposure?	
The circulatory system	
The skeletal system	
The central nervous system	
The reproductive system	
The digestive system	
14. Preventing the harms of prenatal alcohol exposure includes which of the following proactive measures?	Ε
© Education	
Substance abuse treatment	H
Alcohol screening and referral services	
Encouragement of preconception abstinence from alcohol	
All of the above	
15. Growth deficit, central nervous system abnormalities, and a specific set of craniofacial features are all necessary for a diagnosis of which of the following conditions?	
Fetal alcohol syndrome	
Fetal alcohol spectrum disorder	
Alcohol-related neurodevelopmental disorder	
Fetal alcohol effects	
Static encephalopathy/alcohol eposed	
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 16. How is the University of Washington 4-Digit Diagnostic Code System used to identify an FASD? A physician diagnoses based on medical history and anthropomorphic measurements. A multidisciplinary team diagnoses based on the individual's dysmorphic features, growth parameters, and neurodevelopmental functioning. A neurologist diagnoses based on MRI results. Either a physician or psychologist diagnoses based on evidence of prenatal alcohol exposure. A psychologist diagnoses based on results from a battery of neuropsychological tests. 17. Which of the following best describes common impairments of the central nervous system among individuals who experience FASDs? Abstract reasoning, eye-to-eye gaze, body postures, repetitive motor mannerisms Poor organization, trouble with transitions, visual-spatial deficits, clumsiness Hypervigilance, concentration, smooth handwriting, developmental milestone achievement Verbal ability, underactivity, capacity to self-monitor, appreciation of nonverbal cues All of the above
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All of the above
18. Which of the following is an exception to confidentiality in the health provider-patient relationship?
A case where the provider learns the patient has had a prior child who was prenatally exposed to alcohol.
When a sexually active woman of childbearing age reveals a binge-drinking pattern and the provider also learns that she is not using contraception.
When a pregnant woman admits to her health care provider that she has a recent history of alcohol addiction.
 A case where the provider learns of alcohol exposure by a pregnant patient, indicating serious bodily harm to herself and potentially her fetus.
There are never exceptions to confidentiality in health care.

19. Punitive approaches towards pregnant women who are at risk for having an alcohol-exposed pregnancy Build trust in the practitioner/patient relationship. Violate principals of autonomy and justice. Have been shown to decrease the incidence rate of FASDs. Enhance maternal-child attachments. Provide revenue for the legal system. 20. Which of the following includes an ethical and effective response to the risks of an FASD? Recognition that addiction is an illness that requires treatment. Understanding that women do not intend to expose their fetuses to the risks of compulsive and abusive drinking. Consideration that forced restraint from alcohol upon a woman can contribute to mistrust of health care providers when prenatal care is needed. Acknowledging that women who abuse alcohol during pregnancy may not be able to readily stop, nor are they morally culpable. All of the above. Please respond to the following questions about your professional experience. In your current position do you YES NO provide services to women of childbearing age? provide services to individuals who may be at risk of an FASD?	Bulld trust in the practitioner/patient relationship. Violate principals of autonomy and justice. Have been shown to decrease the incidence rate of FASDs. Enhance maternal-child attachments. Provide revenue for the legal system. 20. Which of the following includes an ethical and effective response to the risks of an FASD? Recognition that addiction is an illness that requires treatment. Understanding that women do not intend to expose their fetuses to the risks of compulsive and abusive drinking. Consideration that forced restraint from alcohol upon a woman can contribute to mistrust of health care providers when prenatal care is needed. Acknowledging that women who abuse alcohol during pregnancy may not be able to readily stop, nor are they morally culpable. All of the above. Please respond to the following questions about your professional experience. In your current position do you YES NO provide services to women of childbearing age? provide services to individuals			
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On a scale from 0 to 10 where 0 means "Not confident in my skills" and 10 means "Totally confident in my skills," how confident are you in your skills to do the following? 10 -0 - Not Totally confident confident in my in my skills 2 3 7 skills Screen women for risky or hazardous drinking Educate pregnant women about the effects of alcohol on their babies Conduct brief interventions for reducing alcohol consumption Utilize resources to refer patients who need formal 0 treatment for alcohol abuse Identify persons with possible FAS or other prenatal alcohol-0 related disorders Diagnose persons with possible FAS or other prenatal alcohol-related disorders Utilize resources to refer patients for diagnosis and/or treatment services Manage/coordinate the treatment of persons with 0 0 0 FASDs How have you used the information you received at the FASD Train-the-Trainer workshop 3 months ago? What additional information do you need to make changes in your practice related to the prevention, identification, and treatment of FASDs?