MA112 Lab 2

Critical Thinking Questions

Week 6

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All Answers Must be in Complete Sentences

1. Why are females more prone to urinary tract infections than males? How can females decrease susceptibility?

Answer: The reason that females are more prone to get UTI'S then males is because the female has a shorter urethra this means that the bacteria does not have as long to travel to get to the bladder or other parts or the urinary tract. In class and reading from the text book we have talked about how a female patient needs to wipe front to back, drink plenty of water and have proper self-care. Females should make sure they clean very well before and after having intercourse and with doing this their risk of getting a UTI becomes less likely.

2. What is the difference between enuresis and urinary incontinence?

Answer: The difference between enuresis and urinary incontinence is, urinary incontinence is accidental, this is when you lose full control of the bladder and it causing loss of urine. This can happen for many different reasons, such as nerve damage, weak or overactive bladder muscles, pregnancy, childbirth or even aging. Enuresis is when you have involuntary urination, this is also known most times as bedwetting, this is mostly seen in children at night but is could also occur due to medical issues such as diabetes, urinary tract abnormalities in adults. There is also other things that could contribute to this such as stress, or alcohol intoxication. It is said that enuresis can and cannot be on purpose.

3. What is the difference in an indwelling catheter and an in-and-out catheter and why is each used?

Answer: The difference between an indwelling catheter and an in and out catheter is, and indwelling catheter is inside the body, this type of catheter drain urine from the bladder into a bag that is outside the body. The reason this catheter is normally used is due to leakage (or incontinence) even after a surgery. The in and out catheter is only used temporarily to empty the bladder, meaning it is inserted to drain the bladder and only left in long enough to empty the bladder and then it would be removed. This is how you can monitor the output of an ill patient that is having trouble urinating, urine during surgery is monitored with an indwelling cath.

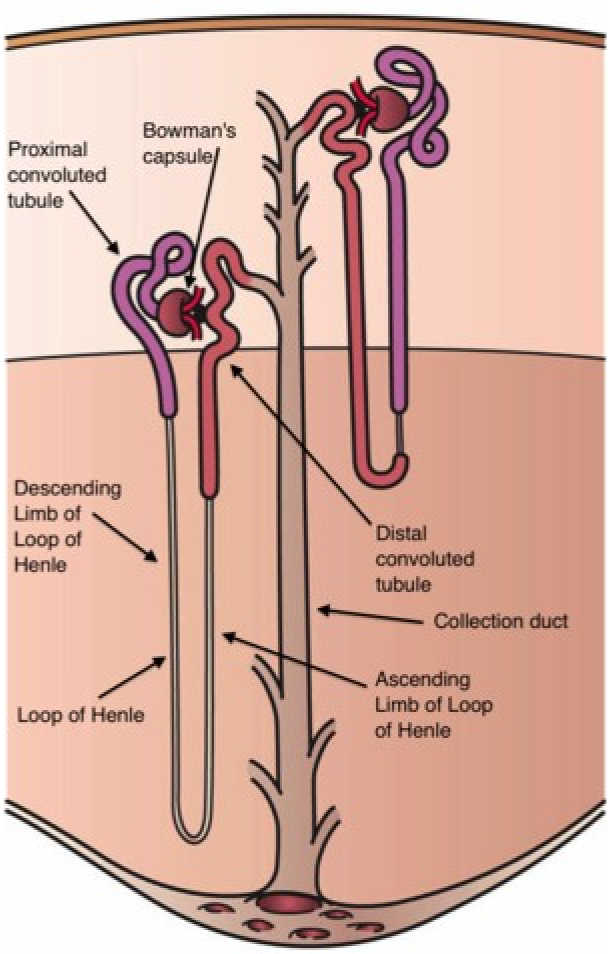
4. Why is it important to teach young men to do a monthly testicular examination?

Answer: It is important to teach young men to do a monthly testicular exam because if anything is found during an exam and it is early enough the is a potential for a cure. They recommend that do this exam after a shower and this is because the scrotal skin is more relaxed making it a little bit easier to feel everything and know what you are feeling for. When performing this we are asking them to look for lumps, swelling, shape/size difference even texture changes. If any abnormalities are found we has for the patient to call the office and have an examination.

5. Describe the structure of a nephron. Your answer should describe the appearance of the nephron and include the renal corpuscle and renal tubule.

Answer: The Nephron is found in the kidneys, the structure of a nephron includes the renal corpuscle and renal tubule, the renal corpuscle consists of a bunch of capillaries that are also known as a glomerulus. The renal tubule extends from the capsule, the capsule and tubule are connected and consist of epithelial cell and lumen. there are some other structures of the nephron that are called, proximal tube, Henle loop, distal tubule, and collecting duct. The nephron is known for the reabsorption and filtration in the blood. The renal corpuscle filtrates water, electrolyte ions (sodium, chloride, potassium, urea, glucose and amino acids.

The proximal tubule reabsorbs the water, glucose , amino acids, urea, and electrolyte ions, (sodium, chloride, phosphate). The henle loop reabsorbs water and electrolyte ions (chloride and sodium), the distal tubule reabsorbs electrolyte ions (chloride, sodium) and water (only in the presences of ADH) . The collecting duct reabsorbs electrolyte ions (sodium) urea, water (only in the presence of ADH) . Yhe nephron also has a part called secretion and this is something that moves blood to filtrate in the henle loop and secretes the urea, The distal tubule secretes ammonium, potassium, hydrogen, and some drugs, the collecting duct secrets ammonium , potassium, hydrogen, some drugs as well. (SEE DIAGRAM BELOW)



Website : https://en.wikipedia.org/wiki/Nephron

6. Explain the purpose of the ureterovesical junction.

Answer: The ureterovesical junction is located were the ureter (the tube that drains the urine from the kidneys) meets the bladder. Thus, ureterovesical junction obstruction is referring to a blockage in this area, the blockage will impede the flow of urine down to the bladder causing the urine to back up into the dilate and ureters and kidney. It is said that almost every year there is near 100 children that are treated with UVJ obstruction

7. Describe what occurs when the detrusor muscle in the bladder relaxes and contracts.

Answer: When the detrusor muscle is relaxed this is allowing the bladder to store with urine, when the detrusor muscle is contracts this is when one is currently urinating and releasing the urine.