

Urinary Class Prep- Day 3  
Elsevier Practice Questions

1. A 46-yr-old female patient returns to the clinic with continued dysuria after being treated with trimethoprim and sulfamethoxazole for 3 days. Which action will the nurse plan to take?
  - A. Remind the patient about the need to drink 1000 mL of fluids daily.
  - B. Obtain a midstream urine specimen for culture and sensitivity testing.**
  - C. Suggest that the patient use acetaminophen (Tylenol) to relieve symptoms.
  - D. Tell the patient to take the trimethoprim and sulfamethoxazole for 3 more days.
  
2. Which statement by a 22-yr-old female patient with cystitis indicates to the nurse that instruction about preventing future urinary tract infections (UTIs) has been effective?
  - A. "I can use vaginal antiseptic sprays to reduce bacteria."
  - B. "I will drink a quart of water or other fluids every day."
  - C. "I will wash with soap and water before sexual intercourse."
  - D. "I will empty my bladder every 3 to 4 hours during the day."**
  
3. Which information about phenazopyridine will the nurse teach the patient with a urinary tract infection (UTI)?
  - A. Take the drug for at least 7 days.**
  - B. The drug may cause photosensitivity.
  - C. The drug may change your urine color.
  - D. Take the drug before sexual intercourse.
  
4. Which finding by the nurse will be **most** helpful when differentiating an upper urinary tract infection (UTI) from a lower urinary tract infection (UTI) ?
  - A. Bladder distention
  - B. Foul-smelling urine
  - C. Suprapubic discomfort**
  - D. Costovertebral tenderness
  
5. Which statement by a patient with interstitial cystitis indicates to the nurse that further instruction is needed?
  - A. "I should stop having coffee and orange juice for breakfast."
  - B. "I will buy calcium glycerophosphate (Preliief) at the pharmacy."
  - C. "I will start taking high potency multiple vitamins every morning."**
  - D. "I should call the doctor about increased bladder pain or foul urine."
  
6. Which information in the patient history would indicate a possible cause of acute glomerulonephritis?
  - A. Recent bladder infection**
  - B. History of kidney stones
  - C. Recent sore throat and fever

- D. History of high blood pressure
7. Which finding for a patient admitted with glomerulonephritis indicates to the nurse that treatment has been effective?
- A. The urine dipstick is negative for nitrites.
  - B. The patient denies pain or burning with voiding.
  - C. The antistreptolysin-O (ASO) titer has decreased.
  - D. The periorbital and peripheral edema have resolved.**
8. A patient has had recurrent uric acid kidney stones. Which diet items would the nurse recommend that the patient avoid or limit?
- A. Milk and cheese
  - B. Sardines and liver**
  - C. Spinach and chocolate
  - D. and dried fruit
9. Which topic would the nurse include when teaching the patient ways to prevent the recurrence of kidney stones?
- A. Using a filter to strain all urine
  - B. Drinking 3000 mL of fluid each day**
  - C. Avoiding dietary sources of calcium
  - D. Choosing diuretic fluids such as coffee
10. Which topic would the nurse include when planning a teaching session for a patient with benign nephrosclerosis?
- A. Preventing bleeding with anticoagulants
  - B. Obtaining and documenting daily weight
  - C. Monitoring and recording blood pressure**
  - D. Measuring daily intake and output volumes
11. Which information is important to include in teaching for young clients with polycystic kidney disease?
- A. Complications of renal transplantation
  - B. Methods for treating severe chronic pain
  - C. Options to consider for genetic counseling**
  - D. Differences between hemodialysis and peritoneal dialysis
12. A young adult male patient seen at the primary care clinic reports feeling continued fullness after voiding and a split, spraying urine stream. Which item in the patient's history is consistent with the patient's reported concerns?
- A. Gonococcal urethritis
  - B. Recent kidney trauma
  - C. Recurrent bladder infection

**D. Benign prostatic hyperplasia**

13. An adult smokes two packs of cigarettes daily. For which condition is the individual at increased risk?
- A. Kidney stones
  - B. Bladder cancer**
  - C. Bladder infection
  - D. Interstitial cystitis
14. A 68-yr-old patient admitted to the hospital with dehydration is confused and incontinent of urine. Which action would the nurse include in the plan of care?
- A. Restrict fluids between meals and after the evening meal.
  - B. Insert an indwelling catheter until the symptoms have resolved.
  - C. Assist the patient to the bathroom every 2 hours during the day.**
  - D. Apply absorbent adult incontinence diapers and pads over the bed linens.
15. A 55-yr-old woman admitted for shoulder surgery asks the nurse for a perineal pad, stating that laughing or coughing causes leakage of urine. Which intervention is appropriate to include in the care plan?
- A. Place a commode at the patient's bedside.
  - B. Assist the patient to the bathroom every 3 hours.
  - C. Demonstrate how to perform the Credé maneuver.
  - D. Teach the patient how to perform Kegel exercises.**
16. Following rectal surgery, a patient voids about 50 mL of urine every 30 to 60 minutes for the first 4 hours. Which nursing action is the priority?
- A. Encourage the patient to drink more fluids.
  - B. Plan to monitor the patient's intake and output.
  - C. Use an ultrasound scanner to check the postvoiding residual volume.**
  - D. Reassure the patient that urinary problems are common after rectal surgery.
17. A patient admitted to the hospital with pneumonia has a history of functional urinary incontinence. Which nursing action will be included in the plan of care?
- A. Demonstrate the use of the Credé maneuver.
  - B. Teach exercises to strengthen the pelvic floor.
  - C. Place a bedside commode close to the patient's bed.**
  - D. Use an ultrasound scanner to check postvoiding residuals.
18. The home health nurse teaches a patient with a neurogenic bladder how to use intermittent catheterization for bladder emptying. Which patient statement indicates that the teaching has been effective?
- A. "I will use a sterile catheter and gloves for each catheterization."
  - B. "I will buy seven new catheters weekly and use a new one every day."

- C. "I will take prophylactic antibiotics to prevent urinary tract infections."
- D. **"I will wash the catheter carefully before and after each catheterization."**

19. After ureterolithotomy, a patient has a urethral catheter and a left ureteral catheter in place. Which action will the nurse include in the plan of care?

- A. Apply continuous steady tension to the ureteral catheter.
- B. Provide teaching about how to remove and replace the catheters at home.
- C. **Call the health care provider if the ureteral catheter output drops suddenly.**
- D. Clamp the ureteral catheter off when output from the urethral catheter stops.

20. An older adult with bladder cancer had a cystectomy with creation of a pouch. Which topic will the nurse include in patient teaching?

- A. Application of ostomy appliances
- B. Barrier products for skin protection
- C. **Catheterization technique and schedule**
- D. Analgesic use before emptying the pouch

21. After change-of-shift report, which patient would the nurse assess **first**?

- A. Patient who has cloudy urine after bladder reconstruction
- B. Patient with a urethral stricture who has not voided for 12 hours
- C. Patient who voided bright red urine after returning from lithotripsy
- D. **Patient with polycystic kidney disease whose blood pressure is 186/98 mm Hg**

22. Which information from a patient who had a transurethral resection with fulguration for bladder cancer 3 days ago is **most** important to report to the health care provider?

- A. The patient voids every 4 hours.
- B. The patient takes opioids for pain.
- C. **The patient reports clots in the urine.**
- D. The patient is anxious about the cancer.

23. Which topic would the nurse teach when preparing a patient with bladder cancer for intravesical chemotherapy?

- A. Coping with hair loss
- B. **Urinating before the instillation**
- C. Premedicating to prevent nausea
- D. Maintaining oral care during the treatments

24. Nursing staff on a hospital unit are reviewing rates of health care-associated infections (HAI) of the urinary tract. Which nursing action will be **most** helpful in decreasing the risk for urinary HAI in patients admitted to the hospital?

- A. Testing urine with a dipstick daily for nitrites
- B. **Avoiding unnecessary bladder catheterization**
- C. Encouraging adequate oral fluid and nutritional intake

D. Providing perineal hygiene to patients daily and as needed

25. Which assessment data reported by a patient is consistent with a lower urinary tract infection (UTI)?

- A. Low urine output
- B. Bilateral flank pain
- C. Nausea and vomiting
- D. Burning on urination**

26. Which finding for a patient who has just been admitted with acute pyelonephritis is **most** important for the nurse to report to the health care provider?

- A. Flank tenderness to palpation
- B. Blood pressure 90/48 mm Hg**
- C. Cloudy and foul-smelling urine
- D. Temperature 100.1°F (57.8°C)

27. A 76-yr-old with benign prostatic hyperplasia (BPH) is agitated and confused, with a markedly distended bladder. Which intervention prescribed by the health care provider would the nurse implement **first**?

- A. Insert an indwelling urinary catheter.**
- B. Draw blood for a serum creatinine level.
- C. Schedule an intravenous pyelogram (IVP).
- D. Administer lorazepam (Ativan) 0.5 mg PO.

28. Which nursing action is of **highest** priority for a patient with kidney stones who is being admitted to the hospital with gross hematuria and severe colicky left flank pain?

- A. Administer prescribed analgesics.**
- B. Monitor temperature every 4 hours.
- C. Encourage increased oral fluid intake.
- D. Give antiemetics as needed for nausea.

29. Which assessment finding is most important to report to the health care provider regarding a patient who has had a urethral stent placed for urinary calculi ?

- A. Blood in urine
- B. Left flank bruising
- C. Left flank discomfort
- D. Decreased urine output**

30. A patient is unable to void after having an open loop resection and fulguration of the bladder. Which action would the nurse implement?

- A. Assist the patient to soak in a 15-minute sitz bath.
- B. Restrict oral fluids to equal previous urine volume.
- C. Insert a straight urethral catheter and drain the bladder.**

D. Teach the patient how to do isometric perineal exercises.

31. The nurse observes unlicensed assistive personnel (AP) taking the following actions when caring for a female patient with a urethral catheter. Which action requires that the nurse intervene?

- A. Securing the catheter to the patient's upper inner thigh
- B. Cleaning around the patient's urinary meatus with soap and water
- C. Disconnecting the catheter from the drainage tube to obtain a specimen**
- D. Using an alcohol-based gel hand cleanser before performing catheter care

32. A 48-yr-old male patient who weighs 242 lb (110 kg) undergoes a left nephrectomy for massive kidney trauma from a motor vehicle crash. Which postoperative assessment finding is **most** important to communicate to the surgeon?

- A. Blood pressure is 102/58.
- B. Urine output is 20 mL/hr for 2 hours.**
- C. Incisional pain level reported as 9/10.
- D. Crackles present at bilateral lung bases.

33. A patient had a cystectomy with an ileal conduit yesterday. Which new assessment data is **most** important for the nurse to communicate to the health care provider?

- A. Cloudy appearing urine**
- B. Heart rate 102 beats/min
- C. Hypoactive bowel sounds
- D. Continuous stoma drainage

34. A patient seen in the clinic for a bladder infection describes the following symptoms. Which information is **most** important for the nurse to report to the health care provider?

- A. Urinary urgency
- B. Left-sided flank pain**
- C. Intermittent hematuria
- D. Burning with urination

35. A patient is admitted to the emergency department with possible renal trauma after an automobile accident. Which prescribed intervention will the nurse implement **first**?

- A. Check blood pressure and heart rate.**
- B. Administer morphine sulfate 4 mg IV.
- C. Transport to radiology for an intravenous pyelogram.
- D. Insert a urethral catheter and obtain a urine specimen.

36. A patient has been diagnosed with urinary tract stones that are high in uric acid. Which foods will the nurse teach the patient to avoid or limit? (*Select all that apply.*)

- A. Milk
- B. Liver**
- C. Spinach
- D. Chicken**
- E. Cabbage
- F. Chocolate