

## Nursing Exam Study Guide GU Lecture

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### Key Topics to Review:

- Proper techniques for collecting urine samples from indwelling catheters.
- Steps for catheter insertion and removal in male and female patients.
- Understanding the risks of catheter-associated urinary tract infections (CAUTIs) and prevention strategies.
- How to assess the bladder, including conditions under which it is palpable.
- Documentation of urine output and characteristics, including expected values (e.g., 30 mL/hour).
- Hand hygiene and aseptic techniques during catheter-related procedures.
- Common causes and prevention of CAUTIs.
- The HOUDINI criteria for catheter removal decisions.
- Nursing responsibilities when administering diuretics like furosemide
- Interventions for acute urinary retention.
- Identifying and addressing catheter complications
- Steps for urinary catheter insertion, including patient positioning and sterile techniques.
- Patient education on catheter care and monitoring for signs of complications.
- Documentation requirements for catheter-related procedures.
- Definitions and care considerations for male-specific conditions like priapism, phimosis, hypospadias, and diphallia.
- Appropriate use of specialty catheters, such as coude-tip catheters.

## Practice Questions

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### Questions:

- 1. A nurse is caring for a male patient with suspected benign prostatic hyperplasia (BPH). Which clinical manifestation is most indicative of this condition?**
  - A. Hematuria
  - B. Increased urinary frequency
  - C. Nocturia
  - D. Severe flank pain
- 2. Which of the following interventions is a priority for a patient with acute urinary retention?**
  - A. Administering prescribed antibiotics
  - B. Performing a bladder scan to assess residual volume
  - C. Encouraging the patient to drink fluids
  - D. Teaching the patient pelvic floor exercises
- 3. A female patient reports frequent urination and burning sensation. Which diagnostic test is most appropriate to confirm a urinary tract infection (UTI)?**
  - A. Creatinine clearance test
  - B. Clean-catch urine culture
  - C. Bladder scan
  - D. Intravenous pyelogram
- 4. A patient with chronic urinary retention due to BPH is prescribed tamsulosin (Flomax). What is the primary action of this medication?**
  - A. Reduces prostate size
  - B. Prevents urinary tract infections
  - C. Relaxes smooth muscle in the bladder neck
  - D. Increases detrusor muscle tone

5. **What should the nurse include in teaching a patient performing pelvic floor exercises to treat stress incontinence?**
- A. Perform exercises once daily for 30 seconds.
  - B. Hold contractions for 5–10 seconds and relax for the same duration.
  - C. Perform the exercises only after drinking fluids.
  - D. Continue the exercises only if urine leakage occurs.
6. **A nurse is caring for a patient with a three-way catheter post-TURP. What is the nurse's priority intervention?**
- A. Administer prescribed antibiotics
  - B. Monitor continuous bladder irrigation for clots or blockages
  - C. Measure daily weight for fluid retention
  - D. Encourage the patient to void independently
7. **Which is the most common pathogen responsible for urinary tract infections?**
- A. Pseudomonas aeruginosa
  - B. Staphylococcus aureus
  - C. Escherichia coli
  - D. Klebsiella pneumoniae
8. **Which dietary recommendation helps prevent kidney stone formation?**
- A. Increase sodium intake
  - B. Limit calcium-rich foods
  - C. Maintain a balance between calcium and oxalate intake
  - D. Decrease fiber consumption

9. **A nurse suspects urosepsis in a patient. Which clinical manifestation supports this diagnosis?**
- A. Bradycardia and hypotension
  - B. Tachycardia and fever
  - C. Flank pain and hematuria
  - D. Increased urine output
10. **What is the priority action for a nurse caring for a patient with interstitial cystitis?**
- A. Encouraging frequent small meals
  - B. Administering antibiotics as prescribed
  - C. Promoting relaxation techniques to manage pain
  - D. Teaching pelvic floor exercises to improve bladder control
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**Answers and Rationales:**

1. **C. Nocturia**

*Rationale:* Nocturia is a common symptom of BPH due to obstruction of the bladder neck causing incomplete emptying and frequent urination at night.

2. **B. Performing a bladder scan to assess residual volume**

*Rationale:* Acute urinary retention requires immediate assessment of residual volume to determine the severity and guide interventions.

3. **B. Clean-catch urine culture**

*Rationale:* A clean-catch urine culture identifies the causative organism of a UTI, allowing for targeted antibiotic treatment.

4. **C. Relaxes smooth muscle in the bladder neck**

*Rationale:* Tamsulosin improves urine flow by relaxing smooth muscle in the bladder neck and prostate.

5. **B. Hold contractions for 5–10 seconds and relax for the same duration**

*Rationale:* Proper technique for pelvic floor exercises involves alternating contraction and relaxation to strengthen pelvic muscles.

6. **B. Monitor continuous bladder irrigation for clots or blockages**

*Rationale:* Maintaining catheter patency is critical to prevent obstruction and complications post-TURP.

7. **C. Escherichia coli**

*Rationale:* E. coli is the most common pathogen causing UTIs, particularly in women due to anatomical factors.

8. **C. Maintain a balance between calcium and oxalate intake**

*Rationale:* A balanced intake reduces the risk of calcium oxalate stone formation in the urinary tract.

9. **B. Tachycardia and fever**

*Rationale:* Urosepsis often presents with systemic signs of infection such as fever, tachycardia, and altered mental status.

10. **C. Promoting relaxation techniques to manage pain**

*Rationale:* Interstitial cystitis is not caused by infection; managing pain and triggers through non-pharmacological methods is essential.

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**Questions:**

1. **A patient reports painful urination and a reduced urine output of less than 400 mL/day. Which term best describes this condition?**

- A. Polyuria
- B. Dysuria
- C. Anuria
- D. Oliguria

2. **Which finding during a bladder scan indicates that immediate intervention is necessary?**

- A. Residual urine volume of 50 mL
- B. Residual urine volume of 200 mL with no symptoms
- C. Residual urine volume of 400 mL with discomfort
- D. Residual urine volume of 600 mL and pain

3. **Which of the following is the best intervention for a patient experiencing overflow incontinence due to BPH?**
- A. Prescribe anticholinergic medication
  - B. Perform intermittent catheterization
  - C. Encourage Kegel exercises
  - D. Increase fluid intake
4. **A nurse is caring for a patient post-TURP. Which sign indicates the need for urgent medical intervention?**
- A. Blood-tinged urine
  - B. Small blood clots in the catheter drainage
  - C. Bright red urine with continuous clots
  - D. Output greater than input in continuous bladder irrigation
5. **What should the nurse teach a patient about preventing catheter-associated urinary tract infections (CAUTIs)?**
- A. Change the catheter daily
  - B. Perform peri-care with antiseptic solution twice daily
  - C. Maintain a closed drainage system at all times
  - D. Flush the catheter with sterile saline every shift
6. **A nurse is teaching a group of older adults about maintaining GU health. Which instruction is most appropriate?**
- A. “Limit fluid intake to prevent frequent urination at night.”
  - B. “Perform pelvic floor exercises to strengthen bladder control.”
  - C. “Reduce fiber intake to minimize bladder pressure.”
  - D. “Drink caffeinated beverages to stimulate bladder emptying.”

7. **A nurse is caring for a patient with suspected pyelonephritis. Which symptom supports this diagnosis?**
- A. Suprapubic pain and dysuria
  - B. Flank pain and fever
  - C. Nocturia and urinary frequency
  - D. Pelvic pain and cloudy urine
8. **Which dietary modification is most beneficial for a patient with a history of calcium oxalate kidney stones?**
- A. Increase sodium intake
  - B. Limit oxalate-rich foods like spinach
  - C. Increase protein consumption
  - D. Avoid calcium-containing foods
9. **A nurse is caring for a patient with interstitial cystitis. Which statement by the patient indicates a need for further teaching?**
- A. "I should avoid caffeine, alcohol, and spicy foods."
  - B. "Pelvic floor exercises may help reduce my symptoms."
  - C. "Taking antibiotics will cure this condition."
  - D. "I should practice relaxation techniques to manage flare-ups."
10. **What is the priority nursing intervention for a patient with testicular torsion?**
- A. Administer prescribed pain medication
  - B. Prepare the patient for immediate surgical intervention
  - C. Apply ice packs to reduce swelling
  - D. Perform a manual detorsion procedure at the bedside
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## Answers and Rationales:

1. **D. Oliguria**

*Rationale:* Oliguria is defined as reduced urine output of less than 400 mL/day. Painful urination suggests an underlying GU issue.

2. **D. Residual urine volume of 600 mL and pain**

*Rationale:* A high residual volume with pain indicates significant urinary retention requiring immediate intervention.

3. **B. Perform intermittent catheterization**

*Rationale:* Intermittent catheterization helps relieve bladder overdistention in overflow incontinence caused by BPH.

4. **C. Bright red urine with continuous clots**

*Rationale:* This finding suggests significant bleeding post-TURP and requires urgent medical attention to prevent complications.

5. **C. Maintain a closed drainage system at all times**

*Rationale:* Maintaining a closed system reduces the risk of introducing pathogens and developing a CAUTI.

6. **B. “Perform pelvic floor exercises to strengthen bladder control.”**

*Rationale:* Pelvic floor exercises improve bladder control and are especially beneficial for older adults experiencing incontinence.

7. **B. Flank pain and fever**

*Rationale:* Flank pain and fever are hallmark symptoms of pyelonephritis, an upper urinary tract infection.

8. **B. Limit oxalate-rich foods like spinach**

*Rationale:* Reducing oxalate intake can help prevent calcium oxalate stone formation in patients with a history of kidney stones.

9. **C. “Taking antibiotics will cure this condition.”**

*Rationale:* Interstitial cystitis is not caused by infection and cannot be cured with antibiotics. This misconception needs to be corrected.

10. **B. Prepare the patient for immediate surgical intervention**

*Rationale:* Testicular torsion is a medical emergency, and surgical intervention within 6 hours is critical to restore blood flow and prevent testicular loss.