## **Chapter 11 – Genitourinary Injuries Test Questions**

- 1. A urine specimen is ordered on a patient diagnosed with bilateral pubic rami fractures. When preparing to catheterize the patient, the trauma nurse observes blood at the urinary meatus. The nurse's next steps are to:
  - a. Stop the insertion and notify the trauma surgeon
  - b. Insert the catheter and obtain the urine sample
  - c. Cleanse the meatus thoroughly and insert the catheter
  - d. Place the patient on a bedpan and obtain a mid-stream sample
- 2. A 20 year old male has suffered a gunshot wound to the upper left flank and abdomen. Your assessment reveals gross hematuria and an expanding palpable flank mass. He is complaining of flank pain and tenderness. HR 140, BP 80/40, RR 35. The trauma nurse should anticipate the following diagnosis:
  - a. Minor renal trauma
  - b. Major renal trauma
  - c. Grade III splenic laceration
  - d. Grade III liver laceration
- 3. A 67 year old unrestrained male driver arrives in the ED after a head-on MVC. He is unresponsive, has a flail chest, obvious abdominal trauma and a pelvic fx. He is going directly to the OR due to his BP being 70 by palpation. His rectal exam reveals a high riding boggy prostrate. The trauma nurse knows that they should:
  - a. Proceed with foley catheter insertion prior to taking to surgery
  - b. Rule out a urethral injury before foley catheter insertion.
  - c. Put a condom catheter on the patient and send him to the OR.
  - d. Tell surgical nurse to insert foley prior to prep and draping.

- 4. A 3 year old female is brought in to the ED by her mother. She says the child has been listless, complains of abdominal pain and has been complaining about having to go to the bathroom since she got up this AM. Child was reportedly fine yesterday. BP 40/80, P 100, RR 14, T 101.F. Has a firm, protruding, tense abdomen which is painful to touch. Bruising is noted on the abdomen and flank. Genitalia is swollen as well. Mother says child fell yesterday when playing outside. The trauma nurse knows to:
  - a. Prepare for abdominal CT Scan
  - b. Initiate a trauma work-up (start IVs, make NPO, send labs, do not attempt to insert a foley or straight cath the patient until the extent of injuries are known
  - c. Contact Social Work and let them know that there is suspected abuse case
  - d. All of the above.
- 5. A 34 year old male sustained a Grade II renal injury from a MVC. He has been managed non-operatively for over a week now. He was transferred 3 days ago from the step-down unit to the surgical floor. He has been ambulatory for past 24 hours. He now complains of increased flank pain and is pale and diaphoretic. BP 90/40, P 114, RR 20, T 99 F. The physician has been paged but is in the OR. The trauma nurse believes that the patient may have reinjured his kidney by his increased activities and obtains verbal orders for:
  - a. A stronger dose of pain medication to make him comfortable.
  - b. An IV, NPO, and STAT CT scan.
  - c. Pain medication and bed rest.
- 6. A 33 year old female who boxes for fun on the weekends has sustained blunt trauma to the left kidney during a boxing match. Her chief complaint is flank tenderness and she has developed a bruise. Her urinalysis reveals microscopic hematuria. All of her other laboratory data are within normal limits. The trauma nurse suspects:
  - a. Pulled muscles in the flank area
  - b. Fractured iliac bone
  - c. Retroperitoneal hematoma
  - d. All of the above

- 7. A 45 year old male who has sustained multiple injuries (liver, spleen, kidney and small bowel) along with a pelvic fracture from a MVC has begun to display signs and symptoms of acute renal failure. The trauma nurse suspects the oliguric phase which is reflected by which of the following?
  - a. Obstruction of the tubules by cellular debris, tubular casts or tissue swelling
  - b. A decrease in glomerular filtration rate
  - c. Large daily urinary output
  - d. Gradual improvement of renal function
- 8. A patient had a diagnostic IVP performed. Patient education should include instruction to:
  - a. Increase fluid intake
  - b. Limit fluid intake
  - c. Increase sodium intake
  - d. Take antibiotics as prescribed
- 9. Which trauma patient is at greatest risk for developing acute renal failure?
  - a. A dialysis patient who falls and breaks a wrist
  - b. A teenager who comes in with minor splenic laceration from mountain biking
  - c. A pregnant woman who sustains a fractured ankle falling down stairs.
  - d. An patient with diabetes and a history of coronary bypass who is diagnosed with a splenic hematoma and several rib fractures by a CT with contrast.