HESI Review Questions- Genitourinary Disorders

1. The nurse is caring for a 4-year old who weighs 15 kg. At the end of a 10-hour period, the nurse notes the urine output to be 150 ml. What action does the nurse take?
   a) Notifies the physician because this urine output is too low.
   b) Encourages the child to increase oral intake to increase urine output.
   c) Records the child’s urine output in the chart.
   d) Administers isotonic fluid intravenously to help with rehydration.

2. Which is the best way to obtain a urine sample in an 8-month old being evaluated for a urinary tract infection (UTI)?
   a) Carefully cleanse the perineum from the front to the back and apply a self-adhesive urine collection bag to the perineum.
   b) Insert an indwelling Foley catheter, obtain the sample, and wait for results.
   c) Place a sterile cotton ball in the diaper, and immediately obtain the sample with a syringe after the first void.
   d) Using a straight catheter, obtain the sample, and immediately remove the catheter without waiting for the results of the urine sample.

3. Which child is at risk for developing glomerulonephritis?
   a) A 30-year old who had impetigo 1 week ago.
   b) A 5-year old with a history of five UTIs in the previous year.
   c) A 6-year old with new-onset type 1 diabetes.
   d) A 10-year old recovering from viral pneumonia.

4. Which combination of signs is commonly associated with glomerulonephritis?
   a) Massive proteinuria, hematuria, decreased urinary output, and lethargy.
   b) Mild proteinuria, increased urinary output, and lethargy.
   c) Mild proteinuria, hematuria, decreased urinary output, and lethargy.
   d) Massive proteinuria, decreased urinary output, and hypotension.

5. The parent of a child with glomerulonephritis asks the nurse why the urine is such a funny color. Which is the nurse’s best response?
   a) “It is not uncommon for the urine to be discolored when children are receiving steroids and blood pressure medications.”
   b) “There is blood in your child’s urine that causes it to be tea-colored.”
   c) “Your child’s urine is very concentrated, so it appears to be discolored.”
   d) “A ketogenic diet often causes the urine to be tea-colored.”
6. A child with minimal change nephritic syndrome (MCNS) has generalized edema. The skin appears stretched, and areas of breakdown are noted over the bony prominences. The child has been receiving Lasix twice daily for several days. Which does the nurse expect to be included in the treatment plan to reduce edema?
   a) An increase in the amount and frequency of Lasix.
   b) Addition of a second diuretic, such as mannitol.
   c) Administration of intravenous albumin.
   d) Elimination of all fluids and sodium from the child’s diet.

7. An adolescent woke up complaining of intense pain and swelling of the scrotal area and abdominal pain. He has vomited twice. Which should the nurse suggest?
   a) Encourage him to drink clear liquids until the vomiting subsides; if he gets worse, bring him to the emergency room.
   b) Bring him to the pediatrician’s office for evaluation.
   c) Take him to the emergency room immediately.
   d) Encourage him to rest; apply ice to the scrotal area, and go to the emergency room if the pain does not improve.

8. The parents of a 7-year old tell the nurse they do not understand the difference between chronic renal failure (CRF) and acute renal failure (ARF). Which is the nurse’s best response?
   a) “There really is not much difference because the terms are used interchangeably.”
   b) “Most children experience ARF. It is highly unusual for a child to experience CRF.”
   c) “CRF tends to occur suddenly and is irreversible.”
   d) “ARF is often reversible, whereas CRF results in permanent deterioration of kidney function.”

9. The parents of a 3-year old are concerned that the child is having “more accidents” during the day. Which question would be appropriate for the nurse to ask to obtain more information? Select all that apply.
   a) “Has there been a stressful event in the child’s life, such as the birth of a sibling?”
   b) “Has anyone else in the family had problems with accidents?”
   c) “Does your child seem to be drinking more than usual?”
   d) “Is your child more irritable, and does your child seem to be in pain when urinating?”
   e) “Is your child having difficulties at preschool?”