

Mock Test #3 – Pathophysiology II – NURS 2534

- 1) “The narrow, innermost tip of the pyramid” describes which of the following structures?
(Renal Lecture – Slide 2)
 - a. Renal Pelvis
 - b. Calyx
 - c. Papilla
 - d. Pyramids
 - e. Medulla
 - f. Cortex
 - g. Ureter

- 2) A patient is experiencing an obstructive urinary block due to an enlarged prostate gland. The nurse knows this type of underlying cause is classified as which of the following?
(Renal Lecture – Slide 5. Audio 6:35min)
 - a. Pre-Renal
 - b. Intra-Renal
 - c. Post-Renal
 - d. Complete-Renal

- 3) Which of the following are associated with Acute Complete Uropathy Obstructions?
Please select all that apply. (Renal Lecture – Slide 9)
 - a. Decreased pressure in the proximal tubule
 - b. Increased pressure in the proximal tubule
 - c. Decreased Glomerular Filtration Rate (GFR)
 - d. Increased Glomerular Filtration Rate (GFR)
 - e. Imminent Renal Failure
 - f. Intermediate Renal Failure

- 4) Which of the following are associated with Chronic Partial Uropathy Obstructions?
Please select all that apply. (Renal Lecture – Slide 10. Audio 11:00 min)
 - a. Acidosis
 - b. Alkalosis
 - c. Hypokalemia
 - d. Hyperkalemia

- 5) Which type of kidney stone is most likely to form in the renal pelvis and extend into the calyces? (Renal Lecture – Slide 20)
- Calcium Stones
 - Struvite Stones
 - Uric Acid Stones
 - Staghorn Calculi
 - Cystine Stones
- 6) A client who has recently been diagnosed with Benign Prostatic Hyperplasia asks the nurse which complications are associated with BPH. The nurse would include which of the following? *Please select all that apply.*(Renal Lecture – Slide 30)
- Urinary Tract Infections
 - Hydroureter
 - Oliguria
 - Nocturia
 - Hydronephrosis
 - He
 - maturia
- 7) What is the most common bacterial cause for Urinary Tract Infections? (Urinary Infections Slide Deck)
- E. Coli
 - Staphylococcus Aureus
 - MRSA
 - Clostridium
- 8) Which of the following is *not* an expected systemic effect resulting from a Urinary Tract Infections? (Urinary Infections Slide Deck - 8)
- Pyuria
 - Dysuria
 - Fever
 - Anuria
- 9) Urethritis is most often cause by? (Urinary Infections Slide Deck - 10)
- E. Coli
 - Chlamydia Trachomatis
 - Klebsiella
 - Staphylococcus Saprophyticus

10) Which of the following forms of Cystitis is the most severe? (Urinary Infections Slide Deck - 10)

- a. Ulcerative Cystitis
- b. Gangrenous Cystitis
- c. Hemorrhagic Cystitis
- d. Suppurative Cystitis

11) A patient who developed acute Pyelonephritis asks the nurse what caused the infection. Which should be included in the nurse's response. *Please select all that apply.* 2 (Urinary Infections Slide Deck - 17)

- a. Acute pyelonephritis is caused by bacterial infection
- b. Outflow obstruction, catheterization, and urinary instrumentation
- c. Severe hypertension is often a contributing factor in the progress of the disease
- d. E. Coli is the causative agent in the majority of the cases
- e. Reflux is the most common cause

12) A patient asks the nurse to describe what Chronic Interstitial Nephritis is. Which of the following would be the best response? (Urinary Infections Slide Deck - 26)

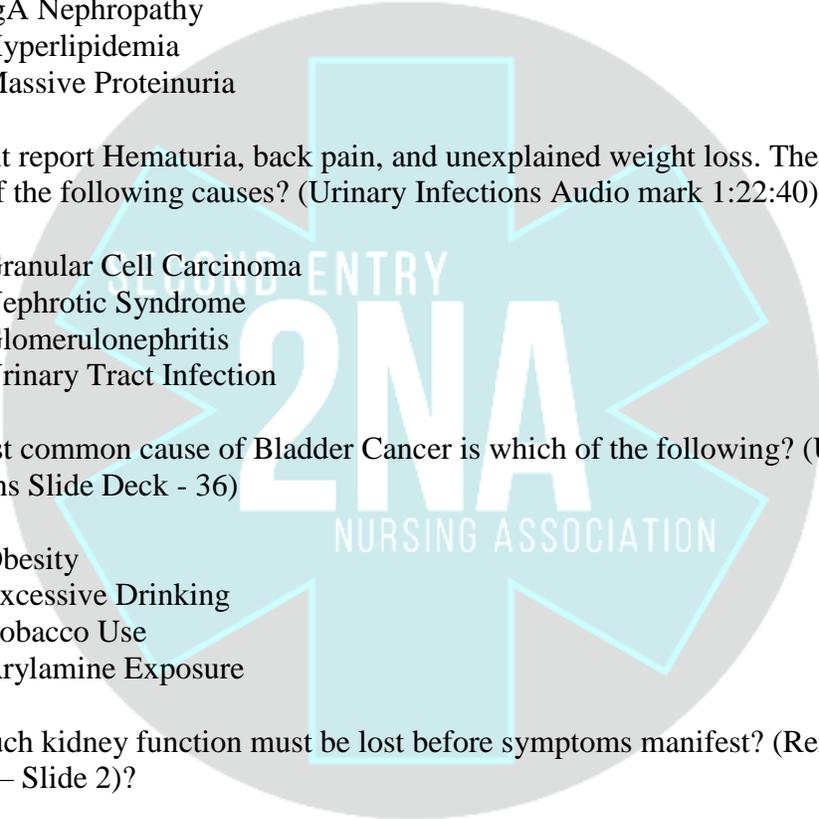
- a. An issue related to immune complex diseases
- b. Lesions that result from chronic pyelonephritis
- c. Caused by the infiltration of WBCs to the medulla
- d. Results from the chronic inflammation of the urinary bladder

13) Which of the following statements regarding the pathogenesis of Acute Poststreptococcal Glomerulonephritis is *untrue*. (Urinary Infections Slide Deck - 36)

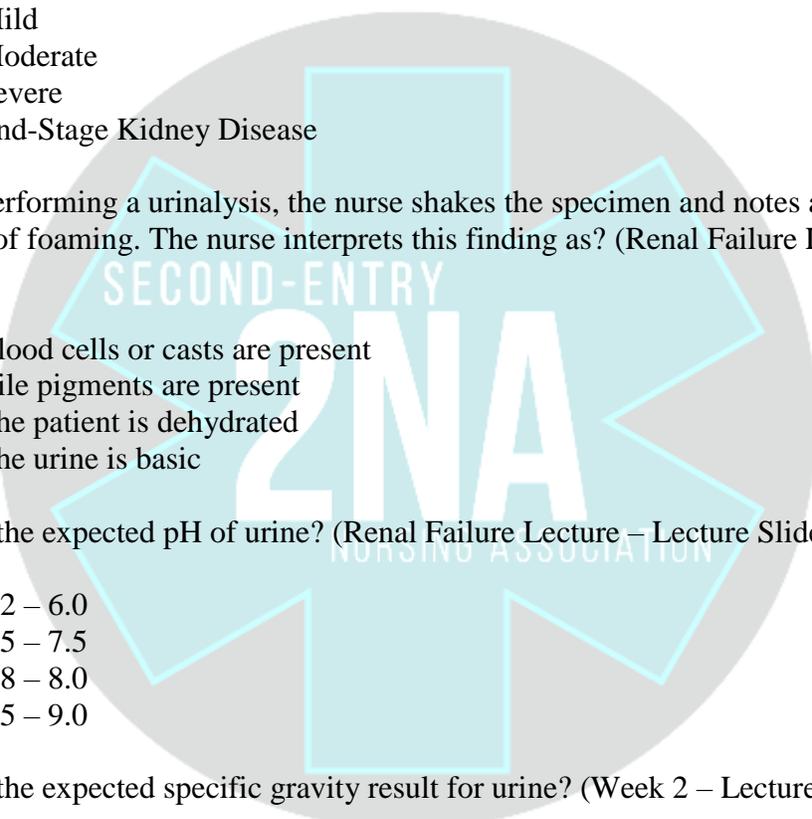
- a. Negatively-charged *Strep* antigen deposits in positively-charged glomerular basement membrane
- b. Neutrophils and macrophages are attracted to the area because of chemotaxis
- c. Inflammatory mediators damage cells lying on basement membrane
- d. Clinical manifestations appear 10-21 days after infection

14) Which of the following signs and symptoms would a nurse expect from a patient diagnosed with Glomerulonephritis. *Please select all that apply.* (Urinary Infections Audio mark 1:06)

- a. Proteinuria
- b. Hematuria
- c. Increased BP
- d. Facial Edema
- e. Low Grade Fever
- f. Oliguria
- g. Dysuria

- h. Headache
- 15) The nurse suspects a patient is living with Nephrotic Syndrome. Which signs and symptoms does the nurse expect the patient to exhibit? (Symptoms listed below are either Nephritic Syndrome or Nephrotic Syndrome) (Urinary Infections Audio mark 1:16)
- a. HTN
 - b. Hematuria
 - c. Hypoalbuminemia
 - d. Peripheral Edema
 - e. Oliguria
 - f. IgA Nephropathy
 - g. Hyperlipidemia
 - h. Massive Proteinuria
- 16) A patient report Hematuria, back pain, and unexplained weight loss. The nurse suspects which of the following causes? (Urinary Infections Audio mark 1:22:40)
- a. Granular Cell Carcinoma
 - b. Nephrotic Syndrome
 - c. Glomerulonephritis
 - d. Urinary Tract Infection
- 17) The most common cause of Bladder Cancer is which of the following? (Urinary Infections Slide Deck - 36)
- a. Obesity
 - b. Excessive Drinking
 - c. Tobacco Use
 - d. Arylamine Exposure
- 18) How much kidney function must be lost before symptoms manifest? (Renal Failure Lecture – Slide 2)?
- a. 10%
 - b. 25%
 - c. 50%
 - d. 75%
 - e. 90%
 - f. 95%
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- 19) A patient has 12% of their kidney function remaining. The nurse knows this patient's renal failure will be classified as? (Renal Failure Lecture – Slide 2)
- Renal Impairment
 - Renal Insufficiency
 - Renal Failure
 - End Stage Renal Failure
- 20) A patient's Creatinine has come back at 12.4 mg/dL. The nurse suspects the patient is at which stage of kidney function? (Renal Failure Lecture – Slide 5)
- Typical Renal Function
 - Renal Insufficiency
 - Renal Failure
 - End Stage Renal Failure
- 21) Your client has been diagnosed with a bladder outlet obstruction. This has led to kidney failure. The nurse knows to document this as which of the following. (Renal Failure Lecture – Slide 5)
- Prerenal Renal Failure
 - Intrarenal Renal Failure
 - Postrenal Renal Failure
 - Acute Renal Failure
- 22) A patient received a traumatic kidney injury two weeks ago and now has a urinary output of 300 mL within the last 24 hours. The nurse identifies this patient in which stage of Acute Renal Failure? (Renal Failure Lecture – Slide 17)
- Initiating
 - Oliguric Anuric
 - Diuretic
 - Recovery
- 23) Which is the most common cause of end-stage renal failure? (Renal Failure Lecture – Slide 28)
- Hypertension
 - Glomerulonephritis
 - Diabetic Nephropathy
 - Cystic Disease

- 24) Which of the following is not an expected impact on the cardiovascular system in a patient with renal failure? (Renal Failure Lecture – Slide 35)
- Hypotension
 - Pericarditis
 - Anemia
 - Bleeding Tendencies
- 25) A patient's GFR is 45 ml/min and Hypertension. The nurse suspects which stage of chronic kidney disease? (Renal Failure Lecture – Slide 41)
- Normal
 - Mild
 - Moderate
 - Severe
 - End-Stage Kidney Disease
- 26) While performing a urinalysis, the nurse shakes the specimen and notes a significant amount of foaming. The nurse interprets this finding as? (Renal Failure Lecture – Slide 43)
- Blood cells or casts are present
 - Bile pigments are present
 - The patient is dehydrated
 - The urine is basic
- 27) What is the expected pH of urine? (Renal Failure Lecture – Lecture Slide 44)
- 3.2 – 6.0
 - 3.5 – 7.5
 - 4.8 – 8.0
 - 5.5 – 9.0
- 28) What is the expected specific gravity result for urine? (Week 2 – Lecture Slide 82)
- 1.025 – 1.032
 - 1.015 – 1.048
 - 1.25 – 1.55
 - 1.55 – 1.64
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- 29) What is the expected Blood Urea Nitrogen (BUN) clearance? (Renal Failure Lecture – Lecture Slide 44)
- 5-10 mg/ dL
 - 10-20 mg/ dL
 - 20-40 mg/ dL
 - 20-30 mg/ dL
- 30) A nursing student correctly identifies which of the following as causes of Non-gonococcal urethritis (SATA) (GU male, oral 2:20)
- Chlamydia
 - Mycoplasma
 - Herpes simplex virus
 - Neisseria gonorrhoeae
- 31) Which antibiotic does the nurse recognize is a common medication for urethritis (GU male, oral 5:40)
- Erythromycin
 - Tobramycin
 - Moxifloxacin
 - Vancomycin
- 32) A nurse is caring for a client with a urethral stricture. Which surgical intervention might the nurse anticipate (GU male, recorded lecture slide 7:50)
- Penectomy
 - Urethrotomy
 - Cystectomy
 - Orchiectomy
- 33) Which of the following is best described as retracted foreskin too tight to be returned to cover glans (GU male, slide 10)
- Phimosis
 - Para-phimosis
 - Priopism
 - Para-priopism
- 34) Peyronie's disease results from thickening of which structure: (GU male, slide 12)
- Colles' fascia
 - Tunica albugenia
 - Corpus spongiosum
 - Urethra

- 35) Penile blood aspiration may be used to treat which condition (GU male, recorded lecture slide 15:20)
- Blanitis
 - Penile cancer
 - Peyronie's disease
 - Priapism
- 36) A nurse is examining a patient and notices small, flat ulcerative lesion on glans or foreskin. The nurse suspects the lesions to be the most common form of penile cancer: (GU male, slide 17)
- Squamous cell carcinomas
 - Columnar cell carcinoma
 - Glandular cell carcinoma
 - Adenocarcinoma
- 37) Which of the following testicular conditions does the nurse recognize to be associated with infertility (SATA) (GU male, slide 22/28)
- Vaicocele
 - Hydrocele
 - Spermatocele
 - Cryptorchidism
- 38) A testicular stromal tumor often originates from the: (GU male, recorded lecture slide 30:05)
- Wall of the GI tract
 - Peritoneal space
 - Epididymitis
 - Kidneys
- 39) Screening for testicular cancer may look for the levels of the following markers (SATA) (GU male, recorded lecture slide 31:00)
- hCG
 - Lactate dehydrogenase
 - Alpha-fetoprotein
 - Oxytocin

- 40) A nurse recognizes that antibiotic therapy may be difficult for chronic bacterial prostatitis because (GU male, recorded lecture slide 38:20)
- The patient often has a weakened immune system
 - The bacteria is most likely resistant to antibiotics
 - Fibrosis of the veins may prevent antibiotics from reaching the infected area
 - Patients experience urine retention which allows bacteria to live in the bladder
- 41) Most common sites for metastasis of the prostate(GU male slide 42)
- Bone, Liver, Brain
 - Bone, Lungs, Liver
 - Lungs, Heart, Kidneys
 - Lungs, brain, skin
- 42) Which of the following is true in regard to the neural control of sexual function: (GU male, slide 46)
- Penile sensation is controlled by the sympathetic nervous system
 - Erection is controlled by the somatic nervous system
 - Ejaculation is controlled by the parasympathetic nervous system
 - The penis is innervated by the autonomic & somatic nervous systems
- 43) A 54-year-old patient is expressing concerns surrounding erectile dysfunction. Which lifestyle modification is most important for the nurse to include in patient teaching for management of ED. (GU male, recorded lecture slide 47:16)
- Psychosexual counselling
 - Avoid smoking
 - The side effects of ED medications
 - Including more leafy greens in diet
- 44) Which of the following is true in regard to diseases of the external genitalia (GU male, recorded lecture slide 49:15)
- Haemophilus ducreyi is a gram positive bacteria
 - Lymphogranuloma venereum is often self limiting
 - Candidiasis is best managed with antibiotics
 - Trichomoniasis presents with a thick white mucus
- 45) Which phase of syphilis is most associated with the following manifestations: skin rash, stomatitis and conjunctivitis (GU male, slide 61)
- Primary
 - Secondary
 - Latent
 - Tertiary

- 46) Excess prostaglandins is a cause in which of the following: (GU female; slide 3)
- Primary Dysmenorrhea
 - Primary Amenorrhea
 - Secondary Amenorrhea
 - Dysfunctional uterine bleeding
- 47) Which of the following is FALSE in regard to polycystic ovaries (GU female; slide 7)
- HPG axis is intact
 - The ovary has no intrinsic defects
 - Associated with hypo-prolactinemia
 - Ovulation is inhibited by excessive androgens
- 48) Diagnostic criteria for infertility includes failure to conceive with regular unprotected intercourse for what period of time (GU female, recorded lecture slide 1:07:00)
- 3 months
 - 6 months
 - 1 year
 - 2 years
- 49) Salpingitis is best described as (GU female, oral 1:08:15)
- Inflammation of the uterus
 - inflammation of the fallopian tube
 - inflammation of the ovaries'
 - Inflammation of the peritoneal cavity
- 50) A nursing student correctly identified the following as the expected range for vaginal pH: (GU female, recorded lecture slide 1:10:45)
- 1.5-2.4
 - 3.8-4.5
 - 7.3-7.4
 - 7.8-8.5
- 51) A nurse is providing teaching for a client with a pelvic relaxation disorder after her fourth child. What should the nurse include in her teaching plan (SATA): (GU female, oral 1:16:05)
- Kegel exercises
 - High fiber diet
 - Maintain moderate weight
 - Lumbar support when sitting for extended periods of time

- 52) Which of the following is FALSE (GU female, slide 30):
- Follicular cysts develop from Graafian follicles
 - Corpus luteum cysts may require surgery if they rupture
 - Endometrial polyps are often malignant in post-menopausal women
 - Leiomyomas are benign tumors and are treated with estrogen
- 53) Which of the following statements best describes the difference between adenomyosis vs endometriosis (GU female, slide 33/34; oral 1:24:40 - 1:27:30)
- Adenomyosis occurs within the myometrium of the uterus; endometriosis can spread to outside the uterus
 - adenomyosis is asymptomatic; endometriosis is symptomatic
 - adenomyosis requires hysterectomy; endometriosis is managed with analgesics
 - Adenomyosis occurs after menopause; endometriosis occurs during puberty
- 54) An ovarian cancer that has affected one ovary and has spread to the peritoneum is best described as which stage (GU female; slide 48)
- Stage I
 - Stage II
 - Stage III
 - Stage IV
- 55) Which of the following is not a benign disorder of the breast (GU female; slide 53)
- Fibroadenoma
 - Galactorrhea
 - Adenocarcinoma
 - None of the above
- 56) The majority of breast tumors occur in which quadrant of the breast: (GU female; slide 62)
- Upper outer
 - Upper inner
 - Lower outer
 - Lower inner
- 57) A nurse is conducting a skin assessment and notes a palpable elevated solid mass. The mass has a flat surface and measures 3cm x 2.5cm. The nurse would document this finding as: (Integument, slide 3)
- Patchi
 - Papule
 - Plaque
 - Pustule

- 58) Which of the following is FALSE in regard to skin conditions: (Integument, slide 3)
- A flat and non-palpable freckle can be described as a macule
 - A second-degree burn may result in bulla
 - In children, Varicella-zoster virus often presents as many pustules
 - A 2cm palpable elevated solid mass may be considered a tumor
- 59) A nurse in a long term care facility is bathing a resident and notes a raised mass on their medial thigh. The mass is 2x1cm and is draining serous fluid. The mass is tender and warm to touch with redness extending 1cm into the surrounding skin. What is the nurse's best action: (Integument, oral 11:05)
- Start the patient on IV antibiotics
 - Consult the dermatologist
 - Put the patient on contact precautions
 - Ask the patient if they have travelled outside the country in the last year
- 60) Impetigo is caused by which of the following pathogens: (Integument, slide 8)
- Herpes Simplex Virus
 - Streptococcus Pyogenes
 - Staphylococcus Aureus
 - Herpes Zoster
- 61) A nurse is providing teaching about warts, what should the nurse NOT include: (Integument, slide 10)
- "Warts are caused by the Human Papilloma Virus"
 - "Warts are benign but some may become malignant"
 - "You can remove a wart at home with small sterile scissors"
 - "A weakened immune system can be a risk factor for warts"
- 62) Which of the following is FALSE: (Integument, slide 14)
- Tinea cruris is a superficial skin lesion caused by dermatophytes
 - Candidiasis can occur after systemic administration of antibiotics
 - Pediculosis burrow into skin and cause papules, blisters, nodules, and dry, itchy skin.
 - To effectively treat scabies clothing and linens must be dry cleaned in hot water or thrown away.

- 63) Which type of hypersensitivity is seen with Allergic contact dermatitis: (Integument, slide 16)
- Type I
 - Type II
 - Type III
 - Type IV
- 64) Which of the following is TRUE about psoriasis: (Integument, slide 23)
- Psoriasis often manifests around joint areas and is related to arthritis
 - T cells release cytokines and growth factors that cause abnormal growth of keratinocytes
 - Infiltration of basophils and eosinophils cause inflammation
 - An infectious process best treated with antibiotics
- 65) A butterfly rash is a sign of which skin condition: (Integument, slide 24)
- Systemic lupus erythematosus
 - Contact dermatitis
 - Psoriasis
 - Scleroderma
- 66) A burn that has affected the subcutaneous tissue is classified as: (Integument, slide 24/25)
- 1st degree
 - 2nd degree
 - 3rd degree
 - 4th degree
- 67) Which of the following skin tumors are malignant: (SATA) (Integument, slide 33-36)
- Seborrheic keratosis
 - Lentigo maligna
 - Karato-acanthoma
 - Acral lentiginous
- 68) The Breslow scale is best used to describe: (Integument, slide 38)
- The deepest layer of skin the tumor invades
 - The depth of tumor invasion in mm
 - The degree of metastasis
 - The involvement of lymph nodes

- 69) Which skin cancer typically has the worst prognosis: (Integument, oral 47:10)
- Basal cell carcinoma
 - Squamous cell carcinoma
 - Malignant melanoma
 - Kaposi sarcoma
- 70) A patient is pulled from a burning house is transported to the emergency department of a local hospital and found to have severe burns. The nurse is aware that the client is at risk for. *Please select all that apply.*
- Emotional Stress
 - Infection
 - Airway Problems
 - Pain
 - Fluid Gain
 - Hemodynamic Instability
- 71) A patient presents to the walk-in clinic and tells the nurse he came home from vacation 4 days ago and feels unwell. Upon assessment, the provider notes the patient's right upper thigh area is red, warm, and painful, and the lymph nodes are palpable. The patient states he had been swimming in a lake all week. The nurse recognizes these manifestations as?
- Impetigo
 - Cellulitis
 - Rosacea
 - Scabies
- 72) A patient has a burn that involves the entire epidermis and various degree of the dermis. It is painful, moist, and blistered. The nurse recognizes this as:
- Second-degree full thickness
 - Second-degree partial thickness
 - Third-degree full thickness
 - First-degree partial thickness
- 73) A 4-year old male child has several small pustules with honey-coloured crusted drainage on his face, but in no other location. The child is diagnosed with impetigo. The most appropriate treatment would be?
- As it's only located on the face, it does not need to be treated
 - Oral antibiotics
 - Topic mupirocin (Bactroban) and limiting exposure as it is transmitted easily
 - Oral antifungal, such as griseofulvin

- 74) A nurse is caring for a client with a stage II pressure ulcer. The most appropriate treatment for the nurse to implement would be?
- Application of semipermeable or occlusive dressing
 - Frequent repositioning and the use of pressure relieving devices
 - Application of wet-to-dry dressing to promote wound debridement with dressing changes
 - A myocutaneous flap as the treatment option
- 75) A client calls the clinic and tells the nurse she is concerned because her husband has developed contagious. The best response would be that herpes zoster (shingles) is:
- Contagious but only to children
 - Contagious and can be transmitted to nonimmune contacts
 - Not contagious because you're married
 - Not contagious and cannot be transmitted to nonimmune contacts
- 76) The nurse is teaching a class on health promotion to a group of high school students. A student asks how herpes simplex type 2 (HSV-2) is transmitted. The best response would be:
- Kissing
 - Sexual encounters
 - Fomites
 - Contaminated food or water
- 77) A 65-year-old patient presents with a noted of burning pain, tingling sensation, extreme sensitivity of the skin to touch, and pruritus along an affected dermatome. No rash is present at this time. The health care provider would interpret these assessment data as:
- Chicken Pox
 - Herpes Zoster
 - Impetigo
 - Psoriasis
- 