

# Genitourinary (GU) Examination and Assessment Questionnaire (EAQ) Practice Exam (Sample)

## Study Guide



**Everything you need from our exam experts!**

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**SAMPLE**

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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

**Remember:** successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

**This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:**

## **1. Start with a Diagnostic Review**

**Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.**

## **2. Study in Short, Focused Sessions**

**Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.**

## **3. Learn from the Explanations**

**After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.**

## **4. Track Your Progress**

**Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.**

## **5. Simulate the Real Exam**

**Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.**

## **6. Repeat and Review**

**Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.**

**There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!**

## Questions

- 1. Which factors might lead to overactive bladder syndrome?**
  - A. Diet changes and lack of exercise**
  - B. Neurological conditions, medications, and lifestyle factors**
  - C. Excessive hydration only**
  - D. Genetic predisposition alone**
  
- 2. What is considered a significant finding in a renal ultrasound?**
  - A. Presence of fluid in the bladder**
  - B. Presence of cysts, stones, or tumors**
  - C. Normal kidney size**
  - D. Presence of excess blood flow**
  
- 3. What does the "post-void residual" measure?**
  - A. The volume of urine expelled during urination**
  - B. The amount of bladder capacity**
  - C. The amount of urine left in the bladder after urination**
  - D. The total daily urine output**
  
- 4. An elevated serum creatinine level may indicate which of the following conditions?**
  - A. Dehydration**
  - B. Impaired kidney function or kidney disease**
  - C. Liver dysfunction**
  - D. Pancreatic issues**
  
- 5. What dietary restriction is important for kidney disease patients to manage fluid retention?**
  - A. High-protein foods**
  - B. All salt substitutes**
  - C. Increased potassium**
  - D. Excessive carbohydrates**

- 6. Which type of food should be encouraged for a client on hemodialysis?**
- A. Rice.**
  - B. Potatoes.**
  - C. Canned salmon.**
  - D. Barbecued beef.**
- 7. When is a urinalysis typically performed?**
- A. Only during surgery**
  - B. When assessing urinary symptoms**
  - C. After a long illness**
  - D. Only for kidney transplant candidates**
- 8. What anatomical structure does the urethra connect?**
- A. The bladder to the external environment**
  - B. The kidneys to the bladder**
  - C. The ureters to the bladder**
  - D. The genitalia to the rectum**
- 9. Which of the following findings may indicate the need for a referral to a urologist?**
- A. Frequent urination without pain**
  - B. Persistent hematuria**
  - C. Occasional back pain**
  - D. Simple urinary tract infections**
- 10. What is considered a normal urine pH range?**
- A. 5.0 to 9.0**
  - B. 4.5 to 8.0**
  - C. 6.0 to 7.5**
  - D. 3.5 to 7.0**



## **Answers**

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1. B
2. B
3. C
4. B
5. B
6. A
7. B
8. A
9. B
10. B

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## **Explanations**

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## 1. Which factors might lead to overactive bladder syndrome?

- A. Diet changes and lack of exercise
- B. Neurological conditions, medications, and lifestyle factors**
- C. Excessive hydration only
- D. Genetic predisposition alone

Overactive bladder syndrome is a complex condition that can result from a variety of factors. The correct choice highlights that neurological conditions, certain medications, and various lifestyle factors can all contribute to its development. Neurological conditions such as multiple sclerosis, Parkinson's disease, or stroke can affect the nerves that control bladder function, leading to urinary urgency and frequency. Specific medications, particularly diuretics, can increase the urgency of needing to urinate as they promote increased urine production. Additionally, lifestyle factors including high caffeine or alcohol intake, obesity, and physical inactivity can exacerbate symptoms by either irritating the bladder or affecting overall bladder health. This multifactorial approach is crucial in understanding overactive bladder syndrome, as it emphasizes the interplay between various elements rather than attributing it to a single cause such as excessive hydration or genetic predisposition alone. These factors may contribute to the syndrome, but they do not encompass the broader range of influences that can lead to its manifestation.

## 2. What is considered a significant finding in a renal ultrasound?

- A. Presence of fluid in the bladder
- B. Presence of cysts, stones, or tumors**
- C. Normal kidney size
- D. Presence of excess blood flow

A significant finding in a renal ultrasound is the presence of cysts, stones, or tumors. This is because these abnormalities can indicate various underlying medical conditions that may require further evaluation or treatment. For instance, renal cysts can be benign or may signify more serious issues if they are complex, while renal tumors can be indicative of malignancies. Stones can lead to obstructions or infections, which also require clinical intervention. Normal kidney size is not considered a significant finding, as it does not provide useful diagnostic information on its own; it suggests that no apparent enlargement or shrinkage is present, but does not rule out the presence of other issues. The presence of fluid in the bladder is typically a normal finding unless there are other symptoms, as it indicates that the bladder is functioning properly. Excess blood flow may raise concerns in certain clinical settings, but it is abnormally high blood flow that often creates a significant concern, not simply the presence of excess blood flow itself without context. Thus, the identification of cysts, stones, or tumors stands out as a directly actionable and critical finding in a renal ultrasound.

### 3. What does the "post-void residual" measure?

- A. The volume of urine expelled during urination
- B. The amount of bladder capacity
- C. The amount of urine left in the bladder after urination**
- D. The total daily urine output

The post-void residual (PVR) measurement assesses the amount of urine remaining in the bladder after a person has completed urination. This assessment provides valuable insights into bladder function and can indicate issues such as urinary retention, where the bladder does not empty completely, or other underlying conditions affecting urinary tract health. By measuring the residual urine, healthcare providers can evaluate how well the bladder is functioning and whether further investigation or intervention may be needed. In contrast, the other options generally refer to different aspects of urinary function. The volume of urine expelled during urination reflects one part of the bladder's work but does not capture residual volume. Bladder capacity pertains to the maximum volume the bladder can hold, which is unrelated to how much urine remains after voiding. Total daily urine output measures the overall quantity of urine produced within a 24-hour period and does not provide specific information about post-void residual volume.

### 4. An elevated serum creatinine level may indicate which of the following conditions?

- A. Dehydration
- B. Impaired kidney function or kidney disease**
- C. Liver dysfunction
- D. Pancreatic issues

An elevated serum creatinine level is a key indicator of kidney function. Creatinine is a waste product produced from muscle metabolism and is usually excreted by the kidneys. When kidney function is impaired, whether due to acute or chronic kidney disease, the ability to filter and excrete creatinine diminishes, leading to increased levels in the serum. Therefore, a higher-than-normal serum creatinine level strongly suggests that the kidneys are not functioning adequately, making it a reliable marker for assessing kidney health. In conditions like dehydration, creatinine can also rise, but this elevation is typically due to a concentration effect rather than direct impairment of kidney function. Liver dysfunction and pancreatic issues do not primarily affect serum creatinine levels, as these organs are not involved in the metabolism or elimination of this waste product. Rather, liver dysfunction could influence other lab tests such as liver enzymes or bilirubin levels, and pancreatic issues are more related to digestive functions than to renal clearance. Thus, the specific relationship of elevated serum creatinine to impaired kidney function is definitive, making it the correct choice in this context.

**5. What dietary restriction is important for kidney disease patients to manage fluid retention?**

- A. High-protein foods**
- B. All salt substitutes**
- C. Increased potassium**
- D. Excessive carbohydrates**

For patients with kidney disease, managing fluid retention is crucial, and one important dietary restriction involves salt substitutes. Many salt substitutes contain potassium, which can be problematic for individuals with compromised kidney function. The kidneys are responsible for regulating potassium levels, and if they are not functioning optimally, high potassium levels can lead to serious complications, including cardiac issues. Therefore, avoiding all salt substitutes that contain potassium helps to prevent excess potassium buildup, thus managing fluid retention more effectively. In contrast, high-protein foods may need to be limited, but the primary focus in this context is on the sodium and potassium content related to fluid retention. Similarly, while excessive carbohydrates might not be ideal for overall health, they are not directly tied to fluid retention in the same way that salt substitutes are. Increased potassium is problematic for kidney disease patients rather than beneficial, as it can exacerbate complications.

**6. Which type of food should be encouraged for a client on hemodialysis?**

- A. Rice.**
- B. Potatoes.**
- C. Canned salmon.**
- D. Barbecued beef.**

In the context of dietary considerations for a client on hemodialysis, rice is often encouraged due to its low potassium and phosphorus content compared to other options. Individuals undergoing hemodialysis typically require careful management of electrolyte levels, particularly potassium and phosphorus, to prevent complications such as hyperkalemia and other mineral imbalances. Rice, being a low-protein and easy-to-digest carbohydrate, serves as a suitable energy source without putting excessive strain on the kidneys. While potatoes are nutritious, they are high in potassium and can potentially cause elevation in potassium levels, which is a concern for patients on hemodialysis. Canned salmon, although a good source of protein and omega-3 fatty acids, contains phosphorus and may lead to an imbalance if consumed in excess. Barbecued beef is also high in protein and phosphorus, which are not ideal for someone on hemodialysis as they need to limit these nutrients to manage their condition effectively. In summary, the recommendation of rice aligns with the dietary restrictions often necessary for clients on hemodialysis, making it a safer and more appropriate choice for them.

## 7. When is a urinalysis typically performed?

- A. Only during surgery
- B. When assessing urinary symptoms**
- C. After a long illness
- D. Only for kidney transplant candidates

A urinalysis is typically performed when assessing urinary symptoms because it is a crucial diagnostic tool that provides valuable information about the condition of the urinary tract and kidneys. This analysis can help identify issues such as infections, blood in the urine, glucose levels, and other abnormalities that may require further investigation or treatment. Conducting a urinalysis when urinary symptoms are present allows healthcare providers to quickly gather essential data that can aid in diagnosing conditions like urinary tract infections (UTIs), kidney stones, and other disorders that may present with symptoms like pain during urination, frequent urination, or changes in urine color and odor. While urinalysis can also be relevant after a long illness or in the context of other specific health scenarios, its primary purpose is to evaluate urinary symptoms, making it a standard practice in such cases. It is not exclusive to surgical settings or restricted solely to kidney transplant evaluations, which highlights its broader diagnostic utility in routine clinical practice.

## 8. What anatomical structure does the urethra connect?

- A. The bladder to the external environment**
- B. The kidneys to the bladder
- C. The ureters to the bladder
- D. The genitalia to the rectum

The urethra serves a critical role in the urinary system by connecting the bladder to the external environment. Its primary function is to facilitate the passage of urine from the bladder out of the body during the process of urination. The urethra is a tubular structure that varies in length and diameter between males and females, with particular anatomical differences influencing its role in both urinary and reproductive functions. The other options describe connections that the urethra does not make. The kidneys are connected to the bladder by the ureters, which transport urine from the kidneys to the bladder for storage before it is expelled through the urethra. The urethra does not connect directly to the ureters, nor does it serve as a link between the genitalia and the rectum, which represents a distinctly different anatomical pathway. Understanding these connections is essential for comprehending the overall function of the genitourinary system.

**9. Which of the following findings may indicate the need for a referral to a urologist?**

- A. Frequent urination without pain**
- B. Persistent hematuria**
- C. Occasional back pain**
- D. Simple urinary tract infections**

The identification of persistent hematuria as a reason for referral to a urologist is grounded in the need to investigate potential underlying causes that could indicate more serious conditions, such as urinary tract abnormalities, kidney stones, or malignancies of the urinary system. Hematuria, defined as the presence of blood in the urine, can be a significant clinical finding that warrants further evaluation to ensure that there are no obstructive or malignant processes at play. In clinical practice, while some urinary symptoms like frequent urination without pain or occasional back pain may require assessment and management, they are often related to less severe conditions. Simple urinary tract infections, while potentially requiring treatment, typically do not necessitate referral unless there are recurrent infections or complications. Therefore, the urgency and potential seriousness of persistent hematuria make it a clear indication for referral to a urologist for further examination and diagnosis.

**10. What is considered a normal urine pH range?**

- A. 5.0 to 9.0**
- B. 4.5 to 8.0**
- C. 6.0 to 7.5**
- D. 3.5 to 7.0**

The normal urine pH range is typically between 4.5 and 8.0, with most healthy individuals having a urine pH that averages around 6.0. This range is indicative of the body's ability to maintain acid-base balance and can vary based on diet, hydration status, and metabolic factors. Urine pH is influenced by various factors; for instance, a diet high in protein may produce more acidic urine (lower pH), while a vegetarian diet may result in more alkaline urine (higher pH). Additionally, certain medical conditions can lead to deviations from this normal range. Understanding the normal pH range is crucial for interpreting urine tests, as abnormal values could indicate underlying health issues, such as urinary tract infections or metabolic disorders. The other provided ranges either extend beyond the typical physiological limits or do not completely encompass the normal conditions generally observed in human urine samples.



## Next Steps

**Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.**

**As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.**

**If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://genitourinaryeq.examzify.com>**

**We wish you the very best on your exam journey. You've got this!**