The most common cause of pulmonary embolism is:
DVT – deep vein thrombosis

Which hormone regulates sodium/potassium in the renal tubules?
Aldosterone

Which is NOT a cause of hyperkalemia?
Cushing’s. Addison’s however does come with hyperkalemia.

Titanic muscle spasms w/ Chvostek sign and Trousseau’s sign is a manifestation of Hypokalemia, or lower potassium.

The most common cause of hyperphosphotemia is:
renal failure. Kidney fails to remove the phosphates from the blood stream

Fever, flank pain, and ileus (loss of bowel motility) = kidney stone, probably.

The common organism responsible for an UTI is:
ecoli

When presented with UTI’s in males & children, consider looking for other underlying pathologies.
True

2 factors for UTI’s:
- Catheterization
- Being female (shortness of urethra)

Children & elderly usually present with typical symptoms of UTI’s.
False!

The leading cause of chronic renal failure is:
Diabetes

2 causes of prerenal failure (inadequate blood to kidney, cannot filter properly):
- hypotension (decreased blood supply, i.e., from shock)
- liver failure

2 causes of urinary obstruction:
- Kidney stones
- prostate enlargement

Stress urinary incontinence is due to
- a loss of posterior urinary angle.

Urge incontinence is due to spasms and is seen in what 2 diseases?
- Parkinson’s
- MS

Overflow incontinence is due to retention of too much urine and is often seen in spinal cord injuries.
The presence of bright red blood in vomit (hematemesis) is most likely due to
• ST ulcer.

3 specific causes of hematochezia (passing blood rectally):
• Crohn’s Disease
• Ulcerative Colitis
• Colon Cancer

The most common cause of gastritis & peptic ulcers is:
• H pylori

The most common cancer death WORLDWIDE is:
• ST Cancer

A functional GI disorder is:
• IBS

2 differences between Crohn’s & ulcerative colitis:
• Chron’s disease has skip lesions and all layers of the bowel wall are affected.
• Ulcerative colitis does not have skip lesions and only the mucosal layer is involved.

17 yo female presents w/ LRQ pain, fever, & elevated WBC:
• appendicitis

What IS associated with diarrhea:
• infection
• food intolerance
• drugs
• intestinal diseases

3 risk factors for colon cancer:
• Age
• Genetics
• Diet

Hep A oral fecal, jaundice, no carrier, vaccine
Hep B sexual contact, cirrhosis, mother>baby, carrier, vaccine
Hep C needles, asymptomatic, cirrhosis, mother>baby, no vaccine
Hep A & B have a vaccine
Hep B & C mother>baby, sexual contact, most have no sx’s

6 physical findings in cirrhosis:
• Ascites (fluid accum in ab cavity)
• Edema (excess fluid in body tissues)
• Jaundice
- Impaired production of clotting factors
- Portal hypertension (normal flow of blood thru liver is blocked or slowed by the scarring in the liver. Creates high pressure in the portal vein)
- palmar erythema (red palms)

2 causes of cirrhosis:
- alcohol
- Hep B

41 yo female Hispanic presents w/ RUQ pain & nausea following a fatty meal:
- cholelithiasis (gallstones)

What IS a cause of pancreatitis?
- gallstone obstruction
- alcohol
- hyperparathyroidism
- hyperlipidemia
- infection
- drugs
- cystic fibrosis

Which IS a common cause of death from cirrhosis?
- esophageal varices (stretched veins in the esophagus indicating portal hypertension and cirrhosis.
- Encephalopathy (brain disease, blood bypasses the liver = drowsiness, coma, confusion, etc)
- hepatorenal syndrome (renal failure assoc’d with cirrhosis)

BONUS

Cirrhosis

Replacement of functional liver tissue by fibrosis = portal hypertension, biliary obstruction, loss of liver cells.

Renal Failure

Prerenal failure = most common form of acute renal failure