

## Female Urinary System Assessment

To assess the female urinary system, one must collect the patient's health history. This entails recording their past medical history, urination pattern, any medications they may be taking, and a urine collection. A physical assessment may be taken as well where the physician will inspect the areas over the kidney and bladder. Percussing kidneys over the costovertebral angle, also known as Murphy's percussion test or Murphy's punch sign, is used to rule out kidney involvement or pseudo-renal pain. Palpate the kidneys and bladder and note any abnormalities to finish off the physical assessment. Lastly, take an assessment of the urine itself by noting the patient's intake and output and the characteristics of urine.



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### Health History

#### Past Medical History

##### [Past Medical History Form](#)

This history includes an exploration of the patient's menstrual and obstetric history (GPAL for pregnancies, preventative care (e.g. PAP smear history), onset of menopause, acute pelvic pain and recurrence/onset of urinary tract signs and symptoms, vaginal discharge, sexuality (including preferred gender identity) and sexual activity (e.g. heterosexual, homosexual, bisexual, etc.), contraceptive use (e.g. presence of long-acting reversible contraception) and history of sexually transmitted infections.

#### Urination Pattern

##### [Urine Pattern](#)

If a pelvic examination is warranted, the patient will need to empty their bladder before the exam. If the collection of urine will contribute to further clinical understanding of the patient's genitourinary and gynecological health, then this is an optimal time to do so. The patient may show signs of frequency, nocturia or peeing at night, dysuria or pain with urination. Once collected, the practitioner can note urine color and characteristics (e.g. presence of sediment, cloudiness, odor) before sending the specimen to the lab for pathologic review.

#### Medications

##### [Med-bottle](#)

Current and past medication use can further reveal medical and social history. For example, repeated use of AZO, an over-the-counter medication used to treat urinary discomfort symptoms, could lead to further clinical inquiry and patient education on the treatment of possible urinary tract infections.

#### Urine Collection

##### [Urine Collections](#)

A clean catch wherein the patient cleans themselves first, then voids in a specimen collection cup, is a method used to further analyze if there is an infection. In acute care settings, a catheter may be placed if the patient is unable to void spontaneously, has incontinence, or is retaining urine. This ensures that a clean sample is obtained.

### Assessment

#### Inspect Areas Over Kidney and Bladder

##### [Inspecting Kidneys and Bladder](#)

The practitioner inspects the area over the kidney and bladder to assess for abnormal findings.

#### Percuss Kidneys

##### [Percuss Kidneys](#)

Percussing kidneys over the costovertebral angle, also known as Murphy's percussion test or Murphy's punch sign, is used to rule out kidney involvement or pseudo-renal pain. The patient can be sitting or prone when this test is performed.

## **Palpate Kidneys and Bladder**

### [Paw Kidneys and Bladder](#)

When palpating the kidneys, the patient is instructed to hold their breath, while the practitioner is holding their left hand against the patient's rib cage and iliac crest and their right hand below the right costal margin - which is on the lower edge of the chest. Repeat the same movement for the left kidney. To palpate the bladder, the bladder cannot be empty. Tenderness is noted when the urge to urinate is present as well as if there is a urinary infection.

## **Note Abnormal Findings**

### [Note with Abnormal Findings](#)

The practitioner will keep track of the patient's urinary system signs and symptoms in order to make a diagnosis and note abnormal findings.

## **Assessment of Urine**

### **Intake and Output**

#### [I & Os Scale](#)

Monitoring the intake will ensure that the patient is receiving enough nutrition and fluids. Keeping track of the output will reveal if there is adequate urine output and if there is a possibility of urinary retention.

### **Characteristic of Urine**

#### [Urine](#)

Assessing the patient's urine characteristics will provide data if there are signs of infection. Certain medications and nutrients can change aspects of urine so taking an appropriate medical history is imperative in diagnosing.