# Podcast Series

**Reynolds Geriatrics Series • USMLE Step 2CK Prep**

**Episode Title & Question Number**

“Swelling Sammy,” based on Question 24 of the 2010 USMLE sample exam

**Personnel**

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**Recording Date**

November 2, 2010

**USMLE Question**

A 78-year-old man comes to the physician because of swelling of both ankles for 4 days. He has been taking indomethacin for low back pain for 2 weeks with partial relief of symptoms. Examination confirms the pedal edema but is otherwise unremarkable; the bladder is not distended. His serum urea nitrogen concentration is 56 mg/dL, and creatinine level is 2.9 mg/dL; these values were previously within normal limits. Which of the following is the most appropriate next step?

- (A) Discontinuation of indomethacin
- (B) Prescription for a thiazide diuretic
- (C) Evaluation for multiple myeloma
- (D) Measurement of urine sodium and creatinine concentrations
- (E) Renal ultrasonography

**Learning Objectives**

The listener should be able to:

1. Recognize the signs and symptoms of acute kidney failure and know how to diagnose it.
2. Recognize that NSAIDS such as indomethacin can cause kidney failure.
3. Determine what the next step in management is for a patient in acute kidney failure, and why that is the best choice.
### Key Teaching Points

1. NSAIDS are a common cause of renal insufficiency when used for extended periods.
2. Signs of renal failure can be edema, decreased urine output, and increased levels of BUN or creatinine in the blood.
3. The first step in treatment of acute renal failure is to discontinue any agent that could be causing it.
4. If discontinuation of any offending agent does not improve renal function, the next step would be to obtain a renal ultrasound.
5. Use of diuretics in patients with acute renal failure has not been shown to be helpful.

### Comments

### References