CE Exams

Alternatives to Blood Transfusions

- 1. Who was called the "bloodless surgeon of Vienna"?
 - a. Dr Denton
 - b. Dr Lorenz
 - c. Dr Witness
 - d. Dr Kipnis
- 2. When was the first bloodless open heart surgery performed?
 - a. 1952
 - b. 1926
 - c. 1962
 - d. 1936
- 3. ____ can be accomplished without using whole blood or blood plasma.
 - a. Volume replacement
 - b. Transfusions
 - c. Surgery
 - d. Cell replacement

4. Neupogen is a man-made form of protein that stimulates the growth of ____ in the body.

- a. Red blood cells
- b. Tissue
- c. Blood flow
- d. White blood cells
- 5. Recombinant human erythropoietin is a _____ used to stimulate the bone marrow to produce more red blood cells.
 - a. Synthetic hormone
 - b. Tool
 - c. Method
 - d. All of the above

- 6. A few of the intraoperative surgical techniques and instruments that are available are:
 - a. Gamma knife
 - b. Electrocautery
 - c. Argon Beam
 - d. All of the above
- 7. Argon gas prevents _____.
 - a. Burning
 - b. Oxidation
 - c. Cell loss
 - d. Blood transfusions
- 8. Dr Reichstein said that one of the greatest skills a surgeon can possess is _____.
 - a. To assist in surgery prep
 - b. To hold the patient's hand
 - c. The prevention of blood loss
 - d. To calm the patient

9. Intraoperative blood salvage is also known as the

- a. Cell saver
- b. Circulator
- c. Filter
- d. Blood saver
- 10. The cell salvage method along with acute normovolemic hemodilution may be acceptable to many including those who object due to _____
 - a. Religious reasons
 - b. Sporting beliefs
 - c. Both a and b
 - d. None of the above

Alternatives to Blood Transfusions questions continued

11. Electrocautery is a safe procedure that is routinely

- used in surgery to remove ____.
- a. Unwanted tissue
- b. Blood cells
- c. Harmful tissue
- d. Both a and c

12. Oxygent is a (n) <u>designed to augment oxygen</u> delivery in patients.

- a. Technique
- b. Life-saver
- c. Intravascular carrier
- d. Oxygen tool kit
- 13. The use of pharmaceutical agents, intravenous fluids and improved diagnostic procedures and surgical techniques can prevent and lessen _____ associated with surgery.
 - a. Pain
 - b. Anemia
 - c. Vision problems
 - d. Hot flashes

14. Dr Lorenz developed a reputation for his ability to

- treat _____
- a. Clubfeet
- b. Hip dysplasia
- c. Broken legs
- d. None of the above

15. The three most commonly used vasodilators are:

- a. Sodium nitroprusside
- b. Nitroglycerin
- c. Trimethaphan
- d. All of the above

Microbiology Review: Pathogens and Diseases

1. How many terms are there in the Linnaean system?

a.	6	c. 8
b.	7	d. 9

- 2. Mitochondria are considered the power house of
 - ___?
 - a. Organisms
 - b. Cell
 - c. Membranes
 - d. Tissue

3. DNA is composed of two strands of alternating _____.

- a. Sugars and phosphates
- b. Guanine and thymine
- c. Cells and tissue
- d. Membranes and nitrogenous bases
- 4. During telophase, membranes appear around each group of separated chromosomes forming new _____ completing the division of the cell.
 - a. Nucleus
 - b. Spindle fibers
 - c. Membrane structure
 - d. Nuclei

5. There are four types of passive transport including:

- a. Osmosis
- b. Diffusion
- c. Filtration
- d. All of the above

6. Streptococci means that bacteria cells appear in ____.

- a. Pairs
- b. Clusters
- c. Chains
- d. Boxes

7. All viruses are capable of _____.

- a. Damage
- b. Infection
- c. Mutation
- d. None of the above

8. Prions are unique because they lack a _____.

- a. Genome
- b. Cell structure
- c. Pair of membranes
- d. Infectious material

9. ER exists in two forms:

- a. Bumpy and hard
- b. Smooth and hard
- c. Rough and smooth
- d. Asymmetrical and smooth

10. _____ only applies to the formation of sex cells.

- a. Mutation
- b. Meiosis
- c. Anaphase
- d. Separation

Taking Control of Infection Control

- 1. The CDC estimates that there are as many as ____ SSIs each year.
 - a. 650,000
 - a. 050,000
 - b. 550,000
 - c. 500,000
 - d. 1,000,000
- 2. The first component of the E3 discipline is _____.
 - a. Empowerment
 - b. Education
 - c. Energy
 - d. Engagement
- 3. IPLS came to the conclusion that a combination of elements is crucial to reducing the number of SSIs at healthcare facilities. They do NOT include _____.
 - a. Leadership
 - b. Communication
 - c. Collaboration
 - d. Social activities
- 4. _____ is a great tool to help staff members see where their facility and department stands in the fight against SSIs.
 - a. Data sharing
 - b. Newsletters
 - c. Facebook posts
 - d. Team work
- 5. Which technique should be used if recapping of needles is necessary?
 - a. Two-handed placement
 - b. Two-person method
 - c. One-handed scoop
 - d. Instrument used to recap needle

- 6. The CDC recommends patients should be resuscitated with a/an?
 - a. Mouthpiece
 - b. Bag
 - c. Tube
 - d. Both a and b
- 7. Healthcare institutions should empower their staff by creating a (n) _____.
 - a. Culture of accountability
 - b. Respectful environment
 - c. Open-minded atmosphere
 - d. Positive workplace
- 8. Strong and effective communication can be linked to successful _____ in the surgical suite.
 - a. Team work
 - b. Collaboration
 - c. Surgery
 - d. Practices

9. Examples such as job shadowing, departmental open houses, briefing and debriefing meetings can help create a (n) _____ atmosphere among team members.

- a. Effective
- b. Happy
- c. Successful
- d. None of the above
- 10. When staff members are _____ in their position, they care about the well-being of the patient, their team members and themselves.
 - a. Energetic
 - b. Enthused
 - c. Engaged
 - d. Satisfied

The Modern–day C-Section

1. According to the National Center for Health Statistics, the C-section rate has climbed more than 50% since

a.	1973	c. 1996	c. 199
b.	1986	d. 2000	d. 200

- 2. For the Caesarean section, the <u>section</u> section is the procedure most commonly used.
 - a. Lower uterine segment
 - b. Upper uterine segment
 - c. Bladder
 - d. Mid-section
- 3. Though rarely performed today, the classical Caesarean section involves the ____ which allows a greater space to deliver the baby.
 - a. Longitudinal incision
 - b. Midline longitudinal incision
 - c. Midline lateral incision
 - d. None of the above
- 4. When an obstetrician determines a Caesarean may be necessary, the following may be present:
 - a. Failed labor induction
 - b. Cord prolapse
 - c. Placental previa
 - d. All of the above
- 5. A (n) <u>may result in a denser block, allowing some</u> sensation at the surgical site.
 - a. Spinal block c. Anesthesia
 - b. Epidural d. IV drugs
- 6. After anesthesia is administered, the positional effect on cardiac output is of major importance in avoiding maternal _____ and maintaining fetal well-being. .
 - a. Clotting c. Hypotension
 - b. Cramps d. Dizziness
- 7. A laparotomy drape is placed on the ____.
 - a. Right leg c. Upper thigh
 - b. Chest d. Abdomen
- 8. The peritoneal incision should not extend past the
 - a. Midline
 - b. Belly button
 - c. Bladder
 - d. All of the above

- 9. The baby's head is delivered through the _____ incision.
 - a. Uterine
 - b. Midline
 - c. Lateral
 - d. Peritoneal
- **10.** Post-delivery, the _____ is the most important layer to close since it is the support layer for the abdomen.
 - a. Peritoneal layer
 - b. Fascia layer
 - c. Stomach cavity
 - d. Uterine layer
- **11.** An average hospital stay for a Caesarean patient is approximately ____.
 - a. 24 hours
 - b. 1 to 3 days
 - c. 2 to 4 days
 - d. 5 to 7 days
- 12. Complications with a Caesarean procedure may include:
 - a. Surgical injury
 - b. Wound infection
 - c. Endometritis
 - d. All of the above
- 13. A stat emergency C-section is performed in a true obstetrical emergency, where complications of pregnancy onset suddenly during the process of labor and quick action is required to prevent the ____ in the mother, the baby or both.
 - a. Illness
 - b. Complications
 - c. Death
 - d. All of the above
- 14. A repeat Caesarean section is performed when a patient has had a previous Caesarean section and is typically performed through the _____.
 - a. Old scar incision
 - b. Open wound
 - c. Uterus
 - d. Lateral incision
- 15. C-section rates are on the rise for a variety of reasons including _____.
 - a. Rising obesity rate among expectant moms
 - b. Increase in multiple births
 - c. Average age of mother is higher
 - d. All of the above

Short- Scar Face-Lift/Simple MACS: Minimal Access Cranial Suspension

- 1. The traditional rhytidectomy encompasses the _____ region.
 - a. Temporal
 - b. Frontal
 - c. Parietal
 - d. Occipital
- 2. The buccinators muscle lies between the maxilla and the .
 - ne ___.
 - a. Trapeziusb. Levator scapulae
 - c. Zygomatic arch
 - d. Mandible
 - u. Manufole
- 3. The zygomatic major muscle controls the facial expressions of the ____.
 - a. Face
 - b. Mouth
 - c. Eyes
 - d. Nose
- 4. For a simple MACS procedure, the patient is placed in
 - a____ position.
 - a. Lateral
 - b. Seated
 - c. Supine
 - d. All of the above
- 5. Which instrument spreads the tissue to the deep temporal fascia?
 - a. Senn retractor
 - b. Sutures
 - c. Metzenbaum scissors
 - d. Adson forceps

- 6. An elastic wrap should be worn for how many days following the surgery?
 - a. 5 days
 - b. 2 days
 - c. 15 days
 - d. 7 days
- 7. A(n) _____ is used to control bleeding during the operation.
 - a. Adson forceps
 - b. Metzenbaum scissors
 - c. Electrosurgical pencil
 - d. Senn retractors

8. A short-scar face-lift can be performed under _____.

- a. General anesthesia
- b. With IV sedation
- c. Local anesthetic
- d. All of the above
- 9. The osseocutaneous ligaments support the ____ against the force of gravity.
 - a. Skin
 - b. Facial structures
 - c. Both a and b
 - d. Neither a or b

10. Possible complications of a simple MACS include:

- a. Swelling
- b. Bruising
- c. Scarring
- d. All of the above

Adenocarcinoma of the Appendix

- 1. The appendix is a small _____that extends off the cecum of the large intestine.
 - a. Muscle c. Gland
 - b. Organ d. Ligament
- 2. The function of the appendix is not fully understood, but some believe _____.
 - a. It helps balance the intestinal tract
 - b. It plays a special function in the immune system
 - c. Only b
 - d. Both a and b
- 3. Appendix cancer is rare, affecting as few as _____ Americans each year.
 - a.850c.600b.1,020d.200
- 4. The majority of ____ that are classified as carcinoid are found by accident.
 - a. Appendiceal Tumors
 - b. Non-carcinoid Tumors
 - c. Adenocarcinoid Tumors
 - d. Malignant Tumors
- 5. In initial stages of cancer in the appendix, pain usually occurs in the _____.
 - a. Upper left quadrant
 - b. Lower right quadrant
 - c. Stomach
 - d. Lower right thigh
- 6. An appendectomy is usually performed if the carcinoid tumor is less than __ in size with no metastasis.
 - a.1 cmc.2 cmb.11 cmd.0.5 cm
- 7. If the carcinoid has metastasized to the liver, the recommended surgery is ____ with cytoreductive surgery and hepatic resection.
 - a. Colectomy
 - b. Hemicolectomy
 - c. Right hemicolectomy
 - d. Right colectomy
- 8. An appendectomy procedure includes usage of the following:
 - a. Suction apparatus
 - b. Basin set
 - c. Electrosurgical pencil
 - d. All of the above

- 9. This incision is usually used to begin the removal of the appendix:
 - a. Crile
 - b. McBurney's
 - c. Longitudinal
 - d. Cherney
- **10.** Depending on the surgeon's preference, the crushed base of the appendix is amputated with (a) _____.
 - a. Scissors
 - b. Scalpel
 - c. Electrosurgical pencil
 - d. Any of the above
 - 11. The removal of the appendix may also be performed via (a) .
 - a. Laparoscopic approach
 - b. Laparotomy
 - c. Fistulotomy
 - d. Open Cholecystectomy

12. If cancer has not spread past the original site and has not invaded the organ, it is considered to be ____.

- a. Carcinomic
- b. Carcinoma in situ
- c. Malignant
- d. Benign
- 13. Malignant tumors in the ____ that occur outside of the lymphatic tissue are considered extranodal lymphomas.
 - a. Stomach
 - b. Brain
 - c. Both a and b
 - d. Neither a nor b
- 14. During an appendectomy, the surgical technologist should gently push the stump into the ____ with the Crile hemostat.
 - a. Stomach
 - b. Lumen
 - c. Intestine
 - d. Heart
- **15.** In which procedure is the ascending colon removed along with the appendix?
 - a. Right hemicolectomy
 - b. Right colectomy
 - c. Colectomy
 - d. All of the above

Single – Site Laparoscopic Total Hysterectomy

- 1. Advantages of LESS include ____.
 - a. Shorten hospital stay
 - b. Faster recovery time
 - c. Reduced bleeding
 - d. All of the above
- 2. The patient needs to be placed in the ____ position for a single-site laparoscopic hysterectomy.
 - a. Supine
 - b. Lithotomy
 - c. Reverse Trendelenburg
 - d. Kraske
- 3. A/an _____ is used to perform ligation of the round ligaments.
 - a. Electrosurgical pencil
 - b. Scissors
 - c. Ultrasonic scalpel
 - d. Curved Forceps

4. Trocars remain in place as the surgeon checks for

- a. Hemostasis
- b. Instruments
- c. Blood pressure
- d. Hemolysis

5. Complications from this procedure can include ____.

- a. Bowel injury
- b. Loss of appetite
- c. Nausea
- d. Loss of vision

- 6. With some of the studies that have been conducted, one of the biggest benefits for patients undergoing LESS procedures is ____.
 - a. Less operation time
 - b. Questionable aesthetics
 - c. Less prep time
 - d. Less postoperative pain

7. Following the procedure, the patient is monitored

- for ____
- a. Fluid maintenance
- b. Pain
- c. Voiding
- d. All of the above
- 8. If spontaneous voiding does not occur following the operation, the ____ may be drained.
 - a. Wound site
 - b. Bladder
 - c. Bowels
 - d. Stomach
- 9. During the procedure, a _____ incision is performed to open the peritoneal cavity.
 - a. Lateral
 - b. Distal
 - c. Longitudinal
 - d. Inferior

10. The pneumoperitoneum is released after the pelvis is and suctioned.

- a. Palpated
- b. Irrigated
- c. Sutured
- d. Cauterized

Sterile Processing: The Other Side of Surgical Services

- 1. An SPD technician's expertise includes:
 - a. Decontamination methods
 - b. Packaging material
 - c. Sterilization parameters
 - d. All of the above

2. PPE includes.

- a. Sleeved gown
- b. Jeans
- c. Contacts
- d. Booties
- 3. To loosen bioburden, the SPD technician may opt to soak or spray instruments with _____.
 - a. Water
 - b. Enzymatic solution
 - c. Antibacterial spray
 - d. Clorox
- 4. Mechanical cleaning may be used in conjunction with _____ cleaning.
 - a. Spray
 - b. Soak
 - c. Manual
 - d. Scrubbing
- 5. A washer-sterilizer is a form of what kind of decontamination?
 - a. Manual
 - b. Chemical
 - c. Mechanical
 - d. None of the above
- 6. To prevent cross-contamination, decontaminated instruments are placed in the ____.
 - a. Clean area
 - b. Dirty area
 - c. OR
 - d. Hallway
- 7. A count sheet is used to track instrument sets an SPD tech _____.
 - a. Cleans c. Packs
 - b. Sterilizes d. Assembles
- 8. The CDC recommends which method to sterilize items that can withstand heat and moisture?
 - a. Eto c. Steam
 - b. Manual d. Peracetic acid

- 9. Exposure time during steam sterilization features how many elements?
 - a. 5 c. 2
 - b. 4 d. 6
- 10. After about 20 minutes, a component in blood begins to cause damage that can lead to _____ of instruments.
 - a. Rusting
 - b. Cracking
 - c. Pitting
 - d. All of the above
- **11.** What can make the difference between resorting to immediate-use sterilization and receiving terminally sterile instruments sets?
 - a. Count sheets
 - b. Proper handling
 - c. Pre-cleaning
 - d. Bioburden
- 12. Wrapped items are particularly susceptible to damage due to:
 - a. Layers
 - b. Tearing
 - c. Waning
 - d. Weight
- 13. Before a tech opens any rigid container, they should check to ensure seals are intact and sterilization process indicators have changed ____.
 - a. Shape c. Color
 - b. Form d. Size
- 14. By flushing endoscopes before leaving the procedure room, this helps keep debris clear of the endoscope
 - a. Channels
 - b. Tubing
 - c. Covering
 - d. Opening

15. Contaminated instruments should be covered with a when transported to the SPD.

- a. Lid
- b. Plastic bag
- c. Damp towel
- d. Sheet

Rodeo – Not For the Faint of Heart

1. One of the most common injuries endured by rodeo

athletes includes:

- a. Groin sprain
- b. Eye lacerations
- c. Spinal Injuries
- d. Toe amputations

2. On average, a bull weighs ____.

- a. 7,000 pounds
- b. 2,200 pounds
- c. 2,000 pounds
- d. 5,000 pounds

3. The areas the Justin Sportsmedicine Team treats the most are:

- a. Cervical
- b. Thoracic
- c. Posterior
- d. Both a and c

4. General treatment for sprains does NOT include:

- a. Rest
- b. Weight lifting
- c. Compression
- d. Ice

5. Eye injuries occur from:

- a. Tail whip
- b. Hitting the ground
- c. Stepping off their horse
- d. Calf roping

6. The most common thoracic fractures that occur in rodeo include ____.

- a. Transverse process fractures
- b. Compression fractures
- c. Spinous process
- d. Both a and b

7. Examples of lower extremity injuries include:

- a. Ulnar fractures
- b. Pubalgia
- c. Concussions
- d. Carpal ligament injuries
- 8. _____ injuries are common as riders land or fall on a flexed, bent knee.
 - a. MCL c. PCL b. ACL d. Knee
 - b. ACL d. Knee
- 9. Pubalgia is also known as ____.

- a. Hernia
- b. Fascia transversalis
- c. Pubic tubercle
- d. Sportsman's hernia
- **10.** ACL injuries are usually graded on a severity scale with Grade 3 equaling:
 - a. Mild, slightly stretched ligaments
 - b. Complete tears
 - c. Loose, partial tear
 - d. Stable joint
- 11. A surgeon may perform a ____ test to determine the extent of ACL damage.
 - a. Lachman
 - b. MRI
 - c. Posterior pull
 - d. Blood

12. ____ are most frequently used to reconstruct an ACL.

- a. Autografts
- b. Allografts
- c. Xenograft
- d. Synthetic ligament

13. Approximately _____ of bone is removed to prevent impingement on the ACL graft.

- a. 1-3 mm
- b. 3-5 cm
- c. 3 -5 mm
- d. 3 mm
- 14. Femoral and _____ tunnels are created to ensure proper placement of the graft.
 - a. Tibial spine
 - b. Tibial
 - c. Lateral
 - d. Femur

15. A/an ____ clamp helps grab sutures and pulls them out of the tibial tunnel.

- a. Mosquito
- b. Schnidt
- c. Allis
- d. Hohmann

Rodeo Not For the Faint of Heart – questions cont.

- 16. Recovery time varies, but some patients may need to
 - stay off the injured leg post-operatively for:
 - a. 2 weeks
 - b. 4 weeks
 - c. 8 weeks
 - d. 10 weeks
- 17. Justin Sportsmedicine Team travels across the country and attends as many as __ rodeos per year.
 - a. 125
 - b. 225
 - c. 380
 - d. 400

18. Justin Sportsmedicine Team has funded free medical treatment to rodeo athletes since ____.

- a. 1978
- b. 1990
- c. 1981
- d. 2001

19. Some services that medical service can provide onsite includes:

- a. Massage
- b. Braces
- c. Ice
- d. All of the above

20. Finish this sentence: "If you're gonna rodeo, ____."

- a. You're gonna have some fun
- b. You're gonna win
- c. You're gonna want to run the other way
- d. You're gonna get hurt

Mammoplasty to Treat Macromastia

- 1. Reduction mammoplasty is performed to reestablish a functional and ____ bust to the patient's body.
 - a. Shapely c. Full
 - b. Proportional d. Round
- 2. Enlarged breasts can occur due to:
 - a. Genetic predisposition
 - b. Following child birth
 - c. During menopause
 - d. All of the above
- 3. The degree of breast ptosis is determined by the degree to which the nipple has fallen below the patient's ____.
 - a. Inframammary fold
 - b. Mammary fold
 - c. Retromammary lymph
 - d. Mammary artery

4. For a mammoplasty, the patient is placed in the _____ position.

- a. Lateral c. Supine
- b. Reverse d. Fowler's
- 5. The patient's arms are placed in a (n) ____ position to relax the pectoralis muscles during surgery.
 - a. Supine c. Superior
 - b. Abducted d. Adducted
- 6. Which technique features both an arterial and venous blood supply for the nipple areola complex?
 - a. Lateral pedicle
 - b. Inferior areola
 - c. Inferior pedicle
 - d. Anterior approach

7. Post-operative care includes removing drainage tubes around day ____ following the surgery.

- a. 4 c. 6
- b. 5 d. 7

8. The first wedge of fatty and glandular tissue is dissected from the body using _____.

- a. Adson forceps c. Bovie tip
- b. 10 blade d. Electrosurgical unit

- 9. The breast is reconstructed by rotating the _____ and breast tissues from the upper flap.
 - a. Lateral and inferior
 - b. Lateral and medial
 - c. Lateral and abducted
 - d. Medial and superior

10. The surgeon continues to evaluate the size, shape and _____ of the breast throughout the operation.

- a. Symmetry c. Bleeding
- b. Fullness d. Height

11. If a woman has breasts that require a large resection of tissue, a _____ technique may be used.

- a. Pedicle
- b. Nipple-graft
- c. Inframammary fold
- d. Contralateral

12. ____ can be a sign of subcutaneous bleeding.

- a. Dehydration
- b. Headache
- c. Numbness
- d. Unilateral swelling

13. Surgical scars usually will begin to fade and become less noticeable within ____.

- a. 12 days
- b. 12 months
- c. 16 months
- d. 8 months

14. The primary lymph drainage system is the _____.

- a. Retromammary lymph plexus
- b. Hypodermis
- c. Inframammary lymph
- d. Internal mammary system

15. ____ run in the subcutaneous layer of adipose tissue throughout the breast.

- a. Paxton's ligaments
- b. Pectoralis fascia
- c. Suspensory ligaments
- d. Intercostal nerves

Damage Control Surgery

1.	There are three phases of damage control surgery.		
	The first one is:		
	a. Decreasing contamination		
	b. Identifying injuries		
	c. Controlling hemorrhaging		
	d. Repairing injuries		
2.	A left lateral rotation allows for direct acc	cess to	
	the lateral aspect of the		
	a. Abdominal wall c. Kidn	evs	
	b. Aorta d. Bowe	•	
2		. 4.0	
3.	A FAST exam uses a portable sonography	10	
	detect in the peritoneal cavity.	l.,	
	a. Hemorrhaging c. Wou		
	b. Excess fluids d. Cont	amination	
4.	Once the patient is intubated, the surgeon		
	prep from the suprasternal notch down to	o the	
	midthighs and		
	a. Proximal c. Lateral		
	b. Superior d. Medi	al	
5.	Direct pressure can be applied to the infe	rior vena	
	cava and to any lacerations durin	g injury	
	identification.		
	a. Distal, lateral		
	b. Inferior, superior		
	c. Distal, proximal		
	d. Proximal, medial		
6.	The surgeon will attempt rapid entry into	the .	
	a. Peritoneal cavity		
	b. Right midthigh		
	c. Right abdominal cavity		
	d. Left upper quadrant		
7.	The surgeon will pack the abdominal cavi	ty with	
	following confirmation of blood suppl	-	
	a. Laparotomy sponges		
	b. Raytec sponges		
	c. ABD pads		
	d. Surgical towels		

- 8. The retroperitoneum is divided into three zones. Zone II includes:
 - a. Kidneys c. Small intestines
 - b. Adrenal glands d. Both a and b

- When inspecting the bowel for injury, ____ can be used to temporarily control bleeding.
 - a. Retractors

9.

- b. Sutures
- c. Babcock clamps
- d. Forrester sponge stick

10. A retractor is used on the abdominal wall to

expose the ____.

- a. Left quadrant
- b. Right upper quadrant
- c. Abdominal cavity
- d. Spleen
- 11. Packs are placed above and below the ____ while the surgeon is compressing it to ensure tamponade.
 - a. Spleen
 - b. Liver
 - c. Small intestines
 - d. Abdominal wall

12. When identifying injuries, the surgical technologist needs to be prepared by having _____ on passers.

- a. Clamps
- b. Sutures
- c. Retractors
- d. Sponges

13. Instrumentation for emergency surgeries include:

- a. Abdominal retractors
- b. Suture needles
- c. Cautery tips
- d. All of the above

14. Complications of damage control surgery include:

- a. Hemorrhaging
- b. Hypothermia
- c. Acidosis
- d. All of the above

15. In World War II, all colon injuries were treated by

a. Excision

___•

- b. Colostomy
- c. Compression
- d. Blood transfusion

Organ Procurement

- 1. Procurement is the surgical removal of _____ from either alive or dead donor and transplanted into another patient.
 - a. Tissue c. Both a and b
 - b. Organ d. Neither a or b
- 2. Live donors cannot donate which organ?
 - a. Kidney
 - b. Lung
 - c. Liver
 - d. Live donors can't donate any organs
- 3. The _____ is responsible for matching recipients with donors all across the United States.
 - a. Organ Center
 - b. Health and Human Services
 - c. FDA
 - d. Local hospitals
- 4. In a published study by the American Journal of Transplantation, the mean travel distance of most abdominal organs was _____.
 - a.23 milesc.223 milesb.222 milesd.13 miles
- 5. The sternotomy should be performed from cranial and brought _____ to ensure that the left innominate vein is not injured.
 - a. Laterally c. Distally
 - b. Medial d. Inferior
- 6. The surgeon divides the falciform ligament up to the IVC to provide ____.
 - a. Space
 - b. Mobility
 - c. Less trauma
 - d. Additional pathways
- 7. The surgical technologist should have a pair of __ in case of any adhesions that may stick to the inferior and lateral surfaces of the liver, which results in sharp dissection.
 - a. Crile hemostat c. DeBakey forceps
 - b. Mayo scissors d. Metzenbaum scissors
- 8. The IMV is most commonly used for access into the
 - a. Peritoneum
 - b. Portal system
 - c. Chest cavity
 - d. GU system

- 9. Once tape is placed, the surgeon places a clamp around the __ in preparation for the cross clamp.
 - a. Aorta c. Diaphragm
 - b. Liver d. Kidney
- **10.** After the surgeon opens the parietal pleura, the surgical technologist should ____.
 - a. Ensure flush lines are free of air
 - b. Have an ice bucket available with slush
 - c. Check that poole tips are attached to the suction tubing
 - d. All of the above
- 11. In warm dissection, exsanguination is performed by opening the ____.
 - a. Right atrium
 - b. Left atrium
 - c. Aorta
 - d. Liver

12. One of the remaining vascular structures a surgeon will dissect during a cold dissection of the liver is ____.

- a. Abdomen
- b. Diaphragm
- c. Suprarenal aorta
- d. Portal vein

13. Organ recovery has increased greatly with patients who receive a major organ transplant now having a _______ survival rate better than 90%.

- a. Three year
- b. One year
- c. Six months
- d. One month
- 14. In cold dissection of the liver, the last item the surgeon incises and divides away from the spine and diaphragmatic muscle to free the liver is ____.
 - Abdomen
 - a. Abdom b. SMA
 - c. Aorta
 - d. IVC
 - a. Ivc
- 15. In warm dissection, a midline incision is extended from the pubic bone to the ____.
 - a. Aorta
 - b. Liver
 - c. Xiphoid
 - d. Round Ligament

Answers ce credit pkg 15A: 16.5 CONTINUING EDUCATION CREDITS

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Alternatives to Blood Transfusions

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A Crash Course in Microbiology

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Taking Control of Infection Control

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The Modern-day C-section

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Adenocarcinoma of the Appendix

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Single-site Laparoscopic Total Hysterectomy

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Sterile Processing: The Other Side of Surgical Services

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Rodeo – Not for the Faint of Heart

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Mammoplasty to Treat Macromastia

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Damage Control Surgery

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Organ Procurement

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Sterile Processing: The Other Side of Surgical Services

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Rodeo – Not for the Faint of Heart

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Mammoplasty to Treat Macromastia

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Damage Control Surgery

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Organ Procurement

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