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### OPERATING ROOM EXAM

1. Which of the following correctly states an Occupational Safety and Health Administration (OSHA) regulation established to prevent occupational exposure to blood-borne pathogens?
  - a. Masks, gowns, eye protection, and fluid-proof shoe covers shall be worn at all times by employees to prevent blood-borne pathogen exposure.
  - b. The employee is responsible for providing and cleaning personal protective equipment.
  - c. The employer is responsible for ensuring that appropriate protective equipment is readily accessible to each employee.
  - d. Only disposable gowns, gloves, and head and foot coverings are acceptable as personal protective clothing to prevent blood-borne pathogen exposure.
  
2. Which of the following surgical hand-scrub agents is ineffective against Gram-negative bacilli?
  - a. Hexachlorophene (pHisoHex).
  - b. Triclosan.
  - c. Povidone-iodine (Betadine).
  - d. Chlorhexidine.
  
3. During a carotid endarterectomy, the circulating nurse notices blood on the floor. According to ARON Recommended Practices, the nurse should:
  - a. Don gloves, pour hydrogen peroxide on the area, and wipe the area clean.
  - b. Don gloves and clean the area with a disinfectant.
  - c. Cover the area with a dry towel to soak up the blood and clean after the procedure.
  - d. Spray the area with disinfectant and leave it to be cleaned after the procedure.
  
4. An oral surgeon has requested that all procedures be supplied with ethylene-oxide-sterilized lidocaine in single-dose vials. The request should be denied for what reason?
  - a. The oral cavity is contaminated, so there is no need to provide sterile cartridges.
  - b. Local anesthesia of the oral cavity can be accomplished by using lidocaine from a multi-dose vial.
  - c. The ethylene oxide may enter the solution through the rubber stopper.
  - d. Ethylene oxide sterilization is not cost effective for this procedure.

5. During the preoperative assessment, a patient reports an allergy to shellfish and to IVP contrast media. Based on this information, the preoperative nurse should recognize the need to prep with:
  - a. A substitute antimicrobial agent.
  - b. A mild detergent.
  - c. The surgeon's preference.
  - d. A povidone solution.
  
6. The correct protocol for self-gowning and gloving of relief members for a surgical team is to:
  - a. Open a sterile gown and gloves on a separate surface using aseptic technique.
  - b. Open a sterile gown and gloves on the back table and have the incoming team member function independently.
  - c. Permit the scrub nurse to gown and glove the incoming team member.
  - d. Use the gown and glove on the back table as a cost-effective measure.
  
7. A patient scheduled for a radical nephrectomy will be placed with:
  - a. Both legs straight or slightly flexed.
  - b. The lower leg straight at the hip and knee and the upper leg flexed at the hip and knee.
  - c. Both legs flexed at the knees and hips.
  - d. The lower leg flexed at the hip and knee and the upper leg straight or slightly flexed.
  
8. A patient exhibits a dramatic drop in BP when her legs are lowered from the lithotomy position following a vaginal hysterectomy. This finding is most likely due to:
  - a. Pooling of circulation in the splanchnic area masking an operative blood loss.
  - b. Premature movement stimulating the pain reflex.
  - c. Diaphragmatic pressure reduction that encourages respiratory insufficiency.
  - d. Bleeding induced by the change in pressure in the femoral area.

9. A neonatal surgery patient is best transferred by being:
- Placed in an infant care unit.
  - Placed in a nursery crib.
  - Carried by the neonatal/nursery nurse.
  - Placed on a pediatric stretcher.
10. A patient who has just been transferred to the OR bed for a cesarean section should be positioned supine with:
- Padding under the left hip.
  - The head elevated.
  - The legs elevated.
  - Padding under the right hip.
11. When positioning a patient on the transportation vehicle after carpal tunnel release under local anesthesia, the perioperative nurse ensures that the operative wrist is:
- Lowered to allow increased blood flow to the site and decrease potential for infection.
  - Elevated to increase venous return and decrease swelling.
  - Placed across the chest so that the hand can be easily observed during transfer.
  - Held level to minimize circulatory compromise.
12. A patient scheduled for a lumbar laminectomy is to be placed prone on a positioning frame. The perioperative nurse determines the patient outcome to be “the patient is free from injury related to position.” In planning for safe transfer, the most important nursing action would be to:
- Provide a draw sheet to facilitate turning.
  - Provide a minimum of four people.
  - Move the patient quickly into place.
  - Be positioned at the patient’s head.
13. A 43-year-old patient undergoing a lumbar laminectomy with spinal fusion is anesthetized and rotated into the prone position. A potential adverse side effect of the prone position in this situation is:
- Hypotension related to pressure on the vena cava and femoral veins.
  - Hypertension related to the excessive vascular pooling in the thorax.
  - Tachycardia related to compression of the sacroiliac arteries.
  - Bradycardia related to anesthesia-induced muscle relaxation.

14. Constant monitoring and documenting of the temperature of a pediatric patient is essential during the intraoperative period because:
- Significant heat loss can occur from exposure of the child.
  - Anesthesia may cause vasoconstriction and an increase in body temperature.
  - A sudden decrease in temperature is indicative of the need for fluid replacement.
  - A wide range of temperature variations is usually indicative of serious complications.
15. An 8-year-old boy is being prepared for a bilateral inguinal herniorrhaphy. As the anesthesiologist is about to start the IV, the boy begins to cry. The most appropriate action at this point would be to:
- Provide psychological support through tactile contact and verbal reassurance.
  - Impress upon the patient how important it is to be brave and not to cry.
  - Distract the patient's attention from the venipuncture by asking if he has a pet or hobby.
  - Turn the patient's head to the side so he cannot see the venipuncture.
16. Which of the following factors must be considered when applying and inflating a pneumatic tourniquet?
- Patient's age, BP, size of extremity, and vascular supply.
  - Length of surgery, type of procedure, estimated blood loss, and presence of reflexes.
  - Length of surgery, patient's age, cardiac output, and degree of muscular development in the legs.
  - Size of extremity, presence of reflexes, cardiac output, and length of surgery.
17. During surgery on neonates, calculating blood loss by weighing sponges and carefully measuring suction bottle contents is especially important, because in infants:
- Blood replacement is more difficult than in adults.
  - The need for blood replacement is established upon loss of 15 % of total volume.
  - Blood loss is replaced with 5% dextrose in lactated Ringer's solution on an equal basis.
  - The blood lost is replaced with equal quantity of plasma expanders.

18. A 20-year-old patient is admitted to the OR for exploratory laparotomy one hour after sustaining a gunshot wound to the lower abdomen. The circulating nurse's primary concern during anesthesia induction is to:
- Ensure that the surgeon and surgeon's assistants are available.
  - Provide assistance to the anesthesiologist.
  - Ensure that the scrub person has all the necessary supplies.
  - Provide adequate supplies of blood and other IV fluids.
19. While monitoring a patient who is having a herniorrhaphy under local anesthesia, the perioperative nurse notes a sinus tachycardia. The patient has no known underlying cardiac disease. In this situation, the first intervention the nurse should employ would be to:
- Request that additional sedation be administered.
  - Encourage the patient to take deep breaths.
  - Increase the rate of the IV fluids.
  - Elevate the head of the OR bed.
20. According to AORN Recommended Practices, the perioperative nurse's care of patients receiving local anesthesia should include:
- Documenting all aspects of the surgical procedure being performed.
  - Monitoring vital signs at least every 30 minutes and after administration of the sedative agent.
  - Recognizing normal and abnormal reactions to medications used during the procedure.
  - Maintaining the room temperature at 60°F to ensure a comfortable environment.
21. The following data is obtained just after a 34-year-old patient is positioned in the OR bed in preparation for a repeat cesarean section:
- \* Heart rate increases from baseline 70 to 96
  - \* Respiration's increase from baseline 22 to 30
  - \* Patient complains of dizziness
- On the basis of this information, the perioperative nurse's first response should be to:
- Prepare to initiate cardiopulmonary resuscitation.
  - Elevate the foot of the OR bed.
  - Place a roll under the patient's right side.
  - Elevate the IV bag and open the IV to full flow.

22. A 4-1/2-year-old boy has just arrived in the OR and becomes curious about the anesthetic mask. The anesthesiologist begins to explain how the mask will be held over the patient's face. In this situation, the perioperative nurse might do all of the following except:
- a. Hold the patient's hand to provide reassurance.
  - b. Continue to protect the patient during the induction phase.
  - c. Allow the patient to hold the mask to his face.
  - d. Stand by the bed and hold the patient so that he is immobilized.
23. The perioperative nurse identifies lower-extremity venous pooling as a potential problem for an obese 65-year-old patient with diabetes who is scheduled for a craniotomy. Appropriate intraoperative nursing interventions for this patient would include:
- a. Suggesting that a heparin drip and hourly PT and PTT blood testing be initiated.
  - b. Wrapping the legs in warming blankets and performing frequent passive dorsiflexion of the feet.
  - c. Placement in reverse Trendelenburg position and periodic massaging of the legs.
  - d. Ensuring availability of antiembolism stockings and a sequential compression device.
24. During an outpatient procedure under local anesthesia, the patient suddenly becomes restless. The immediate response of the perioperative nurse monitoring the patient should be to:
- a. Increase the rate of the IV fluids.
  - b. Request additional sedation.
  - c. Check for signs of allergic reaction.
  - d. Check the patient's airway.
25. In caring for an elderly female patient who underwent a right breast needle localization, it is most important to:
- a. Avoid prepping with povidone-iodine (Betadine).
  - b. Evaluate the pressure sites.
  - c. Monitor the amount of pain.
  - d. Avoid dislocation of the needle.

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Signature

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Date