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MULTIPLE CHOICE

1. Who is responsible for documenting the final counts at the end of the case as correct or incorrect?
   a. Scrub person
   b. Surgeon
   c. Anesthesiologist
   d. Circulating nurse

   ANS: D
   The circulating nurse is responsible for final documentation.

   REF: 22

2. Optimal patient care requires which element?
   a. Deterring an admission of fault in sterile technique
   b. Anatomic separation
   c. Dynamic tension of surgical team members
   d. Application of asepsis and sterile technique principles

   ANS: D
   Asepsis and sterile technique are expected and necessary practices in the OR setting for favorable patient outcomes.

   REF

   REF: 21 | 22

3. The circulating nurse should assess a patient for which type of injury before entering the OR?
   a. Medication error
   b. Wrong IV site
   c. Skin injury
   d. Sharp object

   ANS: C
   Skin injuries can be caused by many things in the OR. The nurse should assess the skin before and after the procedure to make sure no damage has been done.

   REF: 24

4. Caregivers should always know why they are doing a particular action. Actions should be based on _____.
   a. self-taught methods
   b. preceptor actions
   c. nursing process
   d. evidence-based practice

   ANS: D

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Evidence-based practice is a systematic process that is based on research. The research is the base for best practices. Practices are constantly evaluated for the best methods for performing patient care.

REF: 26

5. When does the intraoperative phase begin?
   a. Placement of the patient on the OR bed
   b. When the patient enters the OR
   c. When waiting in the holding area
   d. When taken to the recovery area or PACU

   ANS: A
   The intraoperative phase begins with the patient on the OR bed and continues until the patient is transported to the PACU.

   REF: 28

6. What documentation goes into the patient's chart and becomes part of the permanent record?
   a. Specimen results
   b. Intraoperative notes only
   c. All routine and individualized care
   d. Physical changes

   ANS: C
   All patient care interventions and observations are documented. Standardized language provides legal evidence for the plans of care and revisions of those plans.

   REF: 31

7. Which identifies one aspect of safe patient movement from the OR table to the stretcher?
   a. The circulating nurse counts to synchronize the patient's movement.
   b. The person guiding the head counts to synchronize the movement.
   c. The person at the left side of the patient also guides the head and counts to start the movement.
   d. Two people are needed to move an anesthetized patient from the table to the stretcher.

   ANS: B
   There should be at least one person on either side of the patient, one at the foot, and one at the head to monitor the airway. The person guiding the patient's head should be the one who counts "one, two, three" to pace the synchronized movement from one surface to another.

   REF: 22

8. Which is one of the "seven rights" of medication administration for each patient?
   a. Right pharmacy
   b. Right color
   c. Right route
   d. Right answer

   ANS: C

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The seven rights of medication administration include right patient, right drug, right dose, right reason, right time, right route, and right documentation.

REF: 24

9. All are included in the definition of professionalism *except*
   a. self-centered for profit group.
   b. requires special skills and knowledge.
   c. has its own standards and code of ethics.
   d. acts responsibly to gain public trust.

   ANS: A
   Professionalism is the combination of knowledge, skills, ethics and ideas that regulate a profession. It also uses critical thinking and judgement.

   REF: 25

10. Which event is included on Medicare's "No Pay List" and will not be reimbursed?
    a. Myocardial infarction
    b. Wrong site surgery
    c. Documented Alzheimer's
    d. Incision and drainage of a chronic hip abscess

    ANS: B
    Wrong site surgery is an easily preventable occurrence and is not reimbursed for by Medicare.

    REF: 18

TRUE/FALSE

1. Surgical conscience is considered the Golden Rule: *Do unto the patient as you would have others do unto you.*

   ANS: T
   Surgical conscience develops over time. The caregiver should consider each patient as himself or herself or as a loved one. It is just one element for optimal patient care.

   REF: 16

2. A patient advocate is the person who accompanies the patient to the facility.

   ANS: F
   A patient advocate is a caregiver, who recognizes the patient and family's need for information and assistance. They act as the patient's representative to help make informed decisions. They identify specific care needs and assist in coping.

   REF: 16

3. Access to health care is a privilege of every human being.

   ANS: F

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Access is a right, not a privilege, of all patients.

REF: 16

4. Accountability means being responsible for only one's self.

   ANS: F
   Accountability means answering to someone for an obligatory action. Caregivers are accountable to their patients, employer, team members, profession, and upholding standards of practice.

   REF: 16

5. Failure of a caregiver to provide accountability is considered negligence.

   ANS: T
   Lack of accountability can result in patient injury. Health care providers have a legal and moral obligation to keep their patients safe. Every caregiver is responsible for his or her own negligent acts.

   REF: 16

6. Standards of care are guidelines put in place for all personnel to follow based on recommended practices and scientific research.

   ANS: T
   Every facility has written policies and procedures to standardize practice. Each profession has a set of standards that sets guidelines for behavior, education, responsibility, education, and performance. There are also agencies governed by laws to help keep patients safe.

   REF: 17

7. Health care providers are required to sign a document acknowledging policies, procedures, and HIPPA laws.

   ANS: T
   Some policies and procedures are for all employees, others may vary according to department. These documents are mandatory to follow and describe how to perform procedures correctly.

   REF: 18

8. A plastic identification wristband is the only way patients are identified.

   ANS: F
   The patient's wrist band is checked while they state or spell their name. They must also acknowledge their birthdate. If the patient cannot do this, a parent, guardian, or power of attorney may do this identification. At least two forms of identification are required.

   REF: 20

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9. A universal checklist provides documentation for each step of care for patients undergoing a surgical procedure.

   ANS: T
   Three points are confirmed by the surgical team throughout the process: “sign-in” (before administration of surgical drugs), “time-out” (identifying correct patient and surgical procedure), and “sign-out” summary of what was completed in surgery.

   REF: 21

10. Identifying the surgical site is always done by placing an “X” over the site.

    ANS: F
    An “X” is inappropriate because it may be misunderstood. Every facility has its policy for identifications.

    REF: 20

11. Postoperative infection can originate only in the OR from a break in technique by the surgeon or team.

    ANS: F
    Infection can occur in any area where microorganisms can be transferred into the body through any orifice.

    REF: 22

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