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Question 82

The correct way to handle a needle that falls off the sterile field is to:

- A. Retrieve it with a magnet and resterilize if possible
- B. Leave it on the floor
- C. Pick it up with bare hands
- D. Ignore it
- E. Use another needle without accounting for it

Answer: A

Rationale: Fallen needles must be accounted for; retrieve with magnet or safe method, and ensure counts are correct. Do not leave unaccounted.

Question 83

Which of the following is a common complication of a laparoscopic cholecystectomy?

- A. Common bile duct injury
- B. Pneumonia
- C. DVT only
- D. UTI only
- E. No risks

Question 129

The correct method to prevent corneal abrasions in the supine position is to:

- A. Tape the eyes closed after induction
- B. Leave eyes open
- C. Use only ointment without taping
- D. No protection needed
- E. Place a surgical mask over the eyes

Answer: A

Rationale: Eyes should be taped closed after induction to prevent corneal drying and abrasion.

Question 130

A patient with a history of severe aortic stenosis is at high risk for which intraoperative complication?

- A. Hypotension and cardiac arrest
- B. Hypertension only
- C. Hypoglycemia only
- D. DVT only
- E. No increased risk

Answer: A

Rationale: Severe aortic stenosis causes fixed cardiac output;

Answer: A

Rationale: BPH and opioids can cause urinary retention postoperatively.

Question 138

The correct way to handle a patient with a pacemaker during surgery is to:

- A. Avoid monopolar electrosurgery near the pacemaker or use bipolar, and have pacemaker interrogation available
- B. Use monopolar electrosurgery freely
- C. No special precautions
- D. Turn off the pacemaker always
- E. Avoid all monitoring

Answer: A

Rationale: Monopolar electrosurgery can interfere with pacemakers; bipolar is safer, and pacemaker should be checked postop.

Question 139

A patient with a history of deep vein thrombosis is at increased risk for which postoperative complication?

- A. Pulmonary embolism
- B. Pneumonia

Answer: A

Rationale: Mastectomy is performed supine with the arm extended on an arm board, allowing access to the axilla.

Question 143

A patient with a history of glaucoma should avoid which medication during surgery?

- A. Atropine and other anticholinergics
- B. Opioids
- C. Beta-blockers
- D. Antibiotics
- E. Local anesthetics

Answer: A

Rationale: Anticholinergics (atropine) can precipitate acute angle-closure glaucoma; avoid if possible.

Question 144

Which of the following is a sign of inadequate anesthesia during surgery?

- A. Tachycardia, hypertension, and movement
- B. Bradycardia and hypotension
- C. Decreased end-tidal CO₂

- D. Apply only to dirty areas
- E. No dry time needed

Answer: A

Rationale: Povidone-iodine should be applied from center outward and allowed to dry to achieve antimicrobial effect.

Question 171

A patient in the Trendelenburg position for a prolonged period may experience:

- A. Increased intracranial pressure and impaired ventilation
- B. Hypotension and improved ventilation
- C. Decreased ICP
- D. No changes
- E. Bradycardia only

Answer: A

Rationale: Trendelenburg increases ICP and can impair ventilation due to abdominal pressure on diaphragm.

Question 172

Which of the following is a common cause of postoperative urinary retention in males?

- A. Benign prostatic hyperplasia and opioid use
- B. Early ambulation

obstruction, especially with opioids; use CPAP and cautious sedation.

Question 231

Which of the following is a sign of a postoperative deep vein thrombosis?

- A. Unilateral calf swelling, pain, and warmth
- B. Bilateral edema only
- C. No symptoms
- D. Only cough
- E. Only fever

Answer: A

Rationale: DVT presents with unilateral calf swelling, pain, and warmth; Homan's sign is unreliable.

Question 232

The correct method to prevent hypothermia during a pediatric surgery is to:

- A. Use warming blankets, warm fluids, and maintain room temperature
- B. Leave the patient uncovered
- C. Use only cold irrigation

Answer: A

Rationale: Severe aortic stenosis causes fixed cardiac output; hypotension is poorly tolerated.

Question 255

Which of the following is the most appropriate suture for a vascular graft anastomosis?

- A. 6-0 or 7-0 polypropylene
- B. 2-0 silk
- C. 3-0 Vicryl
- D. 0 nylon
- E. 5-0 chromic gut

Answer: A

Rationale: Vascular anastomoses use fine monofilament non-absorbable (Prolene).

Question 256

The correct way to position a patient for a craniotomy in the supine position is:

- A. Head elevated and turned, fixed in pins, with careful padding
- B. Flat with no head support
- C. Trendelenburg

- A. Seizures, especially if medications are held or with certain anesthetics
- B. Hypotension only
- C. DVT only
- D. Wound infection only
- E. No risk

Answer: A

Rationale: Epilepsy may increase seizure risk during surgery.

Question 261

Which of the following is a sign of a postoperative surgical site infection?

- A. Purulent drainage and surrounding erythema
- B. Only serous drainage
- C. No pain
- D. Normal temperature
- E. No redness

Answer: A

Rationale: SSI presents with purulent drainage, erythema, warmth, pain, and possibly fever.

Question 262

- D. No changes
- E. Bradycardia only

Answer: A

Rationale: Trendelenburg increases ICP and can impair ventilation.

Question 277

Which of the following is a common cause of postoperative urinary retention in males?

- A. Benign prostatic hyperplasia and opioid use
- B. Early ambulation
- C. Adequate fluids
- D. No catheter use
- E. Normal voiding

Answer: A

Rationale: BPH and opioids can cause urinary retention postoperatively.

Question 278

The correct way to handle a patient with a pacemaker during surgery is to:

- A. Avoid monopolar electrosurgery near the pacemaker or use bipolar, and have pacemaker interrogation available