SURGICAL TECHNOLOGY CERTIFICATION PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

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How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

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Questions

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1. What is the purpose of using a surgical drape?

A. To establish sterile field

B. To provide warmth to the patient

C. To reduce glare from lights

D. To offer extra padding for comfort

2. What is the medical term for a bunion?

A. Talipes valgus

B. Hallux valgus

C. Hallux varus

D. Talipes varus

3. If a Poole suction tip is dropped during an open laparotomy and must be re-sterilized, which sterilization method is the most suitable?

A. a ethylene oxide

B. a gravity displacement

C. a pre vac

D. a cobalt 60 radiation

4. Which gland functions as both an exocrine and endocrine gland?

A. Spleen

B. Liver

C. Pituitary

D. Pancreas

5. Satinsky, Herrick, and Mayo clamps may be specifically used on which of the following structures?

A. Kidney pedicle

B. Seminal vesicle

C. Bladder neck

D. Prostate gland

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6. The cartilaginous nasal septum is anterior to which bone?

A. Hyoid
B. Vomer
C. Mandible
D. Palatine

7. Which of the following incisions is oblique?

A. Epigastric
B. Kocher
C. Paramedian
D. Pfannenstiel

8. What type of acquired immunity is a vaccination?

A. Artificial passive
B. Artificial active
C. Natural passive
D. Natural active

9. Which structure is NOT ligated and divided during a cholecystectomy?

A. cystic duct
B. cystic artery
C. hepatic duct
D. cystic vein

10. A patient has a wound healing by secondary intention. Which dressing type is most suitable for this scenario?

A. a ABD
B. a bolsters
C. a bio-occlusive strips
D. a Steri-strips

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Answers

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1. A
2. B
3. C
4. D
5. A
6. B
7. B
8. B
9. C
10. A

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Explanations

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1. What is the purpose of using a surgical drape?

A. To establish sterile field

B. To provide warmth to the patient

C. To reduce glare from lights

D. To offer extra padding for comfort

The primary purpose of using a surgical drape is to establish a sterile field. In surgical procedures, maintaining a sterile environment is crucial to prevent infection and ensure patient safety. Surgical drapes are designed to cover the patient and the surgical area, creating a barrier that controls exposure to microorganisms. By achieving this sterile field, the drapes help protect the surgical site from potential contaminants that could lead to postoperative infections. While drapes may incidentally provide warmth and contribute to patient comfort, their main objective is not to serve these functions. Reducing glare from surgical lights and providing extra padding for comfort are not primary roles of drapes in a surgical setting. The emphasis remains on sterilization and infection control, which is essential in surgical technology.

2. What is the medical term for a bunion?

A. Talipes valgus

B. Hallux valgus

C. Hallux varus

D. Talipes varus

The medical term for a bunion is "Hallux valgus," which describes a specific deformity at the base of the big toe. In this condition, the big toe deviates laterally towards the other toes, while the first metatarsal bone shifts medially. This misalignment creates a prominent bump on the side of the foot, which is what is commonly referred to as a bunion. "Hallux" refers specifically to the big toe, and "valgus" indicates an outward angulation of the toe relative to the foot's midline. The combination of these terms accurately captures the nature of the bunion deformity. Other terms, such as "talipes," refer to different conditions involving the foot and ankle, specifically deformities related to misalignment of the foot and toes that do not specifically involve a bunion. Therefore, those options do not apply to the bunion condition. Understanding these terms helps to clarify the specifics of foot anatomy and the nature of various deformities encountered in medical contexts.

3. If a Poole suction tip is dropped during an open laparotomy and must be re-sterilized, which sterilization method is the most suitable?

A. a ethylene oxide

B. a gravity displacement

C. a pre vac

D. a cobalt 60 radiation

The most suitable sterilization method for re-sterilizing a Poole suction tip after it has been dropped during an open laparotomy is through a pre-vacuum sterilization process. This method, also known as pre-vac, is effective because it uses a vacuum to remove air from the sterilization chamber before steam is introduced; this ensures that steam can penetrate all surfaces of the instrument more thoroughly compared to methods that do not utilize a vacuum. Pre-vac sterilization is particularly advantageous for items like the Poole suction tip, which may have complex shapes and internal passages where air can become trapped, potentially compromising the sterilization process. By using a vacuum, the pre-vac method minimizes the chances of air entrapment, ensuring effective steam penetration for thorough sterilization. This method is also relatively fast, which is critical in a surgical environment where instruments need to be quickly available for use after contamination. The other methods listed, while effective in certain contexts, may not provide the same level of assurance for delicate instruments like the Poole suction tip due to their specific requirements for effective sterilization, such as time and temperature variations.

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4. Which gland functions as both an exocrine and endocrine gland?

A. Spleen

B. Liver

C. Pituitary

D. Pancreas

The pancreas uniquely serves as both an exocrine and endocrine gland, making it essential to various bodily functions. As an exocrine gland, the pancreas produces digestive enzymes that are secreted into the small intestine to aid in the digestion of food. These enzymes include amylase, lipase, and proteases, which facilitate the breakdown of carbohydrates, fats, and proteins, respectively. In its capacity as an endocrine gland, the pancreas regulates blood sugar levels by releasing hormones directly into the bloodstream. The primary hormones produced are insulin and glucagon, which play critical roles in glucose metabolism. Insulin lowers blood sugar levels by promoting cellular uptake of glucose, while glucagon raises blood sugar levels by stimulating the liver to release stored glucose. This dual functionality distinguishes the pancreas from other glands; for example, the spleen is primarily involved in immune responses and does not function as an endocrine gland. The liver, while crucial for metabolic processes and bile production, primarily serves as an exocrine gland with limited endocrine roles, chiefly in terms of producing certain hormones and proteins. The pituitary gland is strictly an endocrine gland, controlling various bodily functions through hormone release but does not produce other substances for exocrine secretion. Thus, the pancreas is the only

5. Satinsky, Herrick, and Mayo clamps may be specifically used on which of the following structures?

A. Kidney pedicle

B. Seminal vesicle

C. Bladder neck

D. Prostate gland

Satinsky, Herrick, and Mayo clamps are specifically designed for vascular surgery and are typically used to occlude blood vessels during surgical procedures. The kidney pedicle consists of both the renal artery and vein, which supply blood to and from the kidneys. Using these clamps on the kidney pedicle allows for control of vascular flow during nephrectomy or kidney surgery, which is vital for preventing excessive bleeding. Other structures listed, such as the seminal vesicle, bladder neck, and prostate gland, may require different types of clamps or instruments that are better suited to their specific anatomical and vascular characteristics. Therefore, the unique design and function of Satinsky, Herrick, and Mayo clamps make them most applicable for use in procedures involving the kidney pedicle.

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6. The cartilaginous nasal septum is anterior to which bone?

A. Hyoid

B. Vomer

C. Mandible

D. Palatine

The cartilaginous nasal septum is comprised primarily of hyaline cartilage and serves as a division between the right and left nasal cavities. Anatomically, it is situated anteriorly to the vomer bone, which forms the posterior and inferior part of the nasal septum. The vomer is a thin, plow-shaped bone that contributes to the support of the nasal septum, making it a key element in the nasal structure. Understanding this relationship is crucial because it highlights the importance of various structures in the nasal cavity's anatomy. The vomer, being posterior to the cartilaginous portion, indicates how the nasal septum is both a functional and structural component of the nasal passages. The other bones listed, such as the hyoid, mandible, and palatine, do not have a direct anatomical relationship with the nasal septum in the context of being located directly posterior to it. Therefore, the correct answer is grounded in the anatomical positioning and functional role of the vomer in supporting the structure of the nasal septum and delineating the anatomy of the nasal passages.

7. Which of the following incisions is oblique?

A. Epigastric

B. Kocher

C. Paramedian

D. Pfannenstiel

The Kocher incision is considered an oblique incision because it is made at an angle to the midline of the body. This type of incision is typically utilized during surgeries involving the upper abdomen, particularly for accessing the gallbladder or right upper quadrant structures. The oblique nature of the incision allows for better visualization and access to the organs of interest while minimizing damage to surrounding tissues. In contrast, other incisions have different orientations. For example, the epigastric incision is made horizontally or vertically through the upper abdomen, while the paramedian incision is made parallel to the midline but not at an angle, and the Pfannenstiel incision is a transverse incision that is commonly used for gynecological procedures. Each type of incision has specific uses based on the surgical approach required, but the distinguishing characteristic of the Kocher incision is its oblique angle relative to the body's midline.

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8. What type of acquired immunity is a vaccination?

A. Artificial passive

B. Artificial active

C. Natural passive

D. Natural active

A vaccination is a form of acquired immunity known as artificial active immunity. This type of immunity develops when a person is exposed to a controlled amount of an antigen through a vaccine, which stimulates the immune system to respond and create a defense against future infections. The vaccine essentially tricks the body into thinking it has been infected by introducing a harmless component of a pathogen, such as inactivated or weakened forms of the virus or bacteria, or even just pieces of its genetic material. In response to the vaccine, the body's immune system produces antibodies specific to the antigen and generates memory cells that remember how to fight off that pathogen if encountered again in the future. This process leads to long-term immunity, as the body is now better prepared to respond to a real infection. In contrast, the other types of acquired immunity involve either natural processes or the transfer of antibodies from one individual to another. Natural immunity occurs through exposure to pathogens in everyday life or through maternal antibodies passed to an infant. Passive immunity refers to the introduction of pre-formed antibodies into a person, which occurs in cases like maternal immunity or therapeutic administration of antibodies. Thus, the classification of vaccination as artificial active immunity highlights its function as a proactive method to stimulate the body's immune response through an artificial introduction of

9. Which structure is NOT ligated and divided during a cholecystectomy?

A. cystic duct

B. cystic artery

C. hepatic duct

D. cystic vein

During a cholecystectomy, the primary goal is to safely remove the gallbladder, which involves ligating and dividing specific structures connected to it. The cystic duct and cystic artery are essential structures that are ligated and divided to prevent any bile leakage and to ensure adequate blood supply is cut off to the gallbladder during its removal. The cystic vein, although not as commonly referenced as the cystic artery or duct, may also be considered a structure that can be ligated, depending on the surgical technique employed. However, the hepatic duct is integral to the biliary system's function and is the main channel through which bile travels from the liver. It is not ligated or divided during this procedure, as doing so could lead to significant complications such as bile duct injury or a disruption of bile flow. Thus, the hepatic duct remains intact to maintain normal biliary function post-surgery, making it the structure that is not ligated and divided during a cholecystectomy. Understanding the anatomy and the critical nature of these structures is essential for preventing postoperative complications and ensuring successful surgical outcomes.

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10. A patient has a wound healing by secondary intention. Which dressing type is most suitable for this scenario?

A. a ABD

B. a bolsters

C. a bio-occlusive strips

D. a Steri-strips

In cases where a wound is healing by secondary intention, the most suitable dressing type is one that can manage exudate while providing a barrier to external contaminants. ABD (Abdominal) pads are designed to absorb larger amounts of exudate, making them ideal for wounds that are healing more slowly due to the presence of granulation tissue and the formation of new epithelial cells, which is typical in secondary intention healing. These pads are thick and have high absorbency, which helps maintain a moist wound environment while also protecting the wound from infection. While other options such as bio-occlusive strips and Steri-strips are effective for primary closure and managing superficial wounds, they are not suitable for wounds healing by secondary intention where significant exudate and a more dynamic healing environment are present. Bolsters can provide support but are not specifically designed for proper absorption or protection in these scenarios. Therefore, ABD pads specifically address the needs of a wound healing by secondary intention by ensuring adequate absorption and protection.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

https://surgicaltechcert.examzify.com

We wish you the very best on your exam journey. You've got this!

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