

091205T4PTT

PERIOPERATIVE THEATRE TECHNOLOGY 5

HE/OS/TT/CR/01/5/A

Execute Perioperative Safety Precautions

Nov/Dec 2023



**TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION
COUNCIL (TVET CDACC)**

WRITTEN ASSESSMENT

Time: 3 Hours

INSTRUCTIONS TO CANDIDATES

1. This paper has three sections **A, B** and **C**.
2. Marks for each question are as indicated.
3. You are provided with a separate answer booklet.
4. Do not write on the question paper.

This paper consists of 7 printed pages.

Candidates should check the question paper to ascertain that all pages are printed as indicated and that no questions are missing.

SECTION A: (20 MARKS)

Answer all questions in this section.

Each question carries one Mark.

1. A Surgical Safety Checklist (SSC) is defined as:
 - A. A list of equipment that will be required during the surgery for safety of the patient
 - B. A tool to ensure that all staff in the practice are prepared for an emergency situation
 - C. A tool to reduce the risk of preventable complications during the perioperative period
 - D. A document listing all the roles of staff members in the operating theatre
2. The main purpose of practicing strict infection prevention in the operating room is to:
 - A. Break the disease transmission cycle
 - B. Protect the members of the sterile team
 - C. Sterilize the operating environment
 - D. Protect the patient
3. Restricted area in the operation theatre consists of all rooms in which:
 - A. Sterile goods are opened or exposed and patients are handled
 - B. Sterile goods are opened or exposed and sterile scrubs are worn
 - C. Sterile procedures are done and sterile goods are opened or exposed
 - D. Sterile procedures are done and sterile goods are sterilized
4. The circulating personnel and the scrub technician find a discrepancy in the sponge count after surgery. The appropriate intervention to be taken is:
 - A. Contact the surgical manager.
 - B. Re-count all sponges.
 - C. Complete an occurrence report.
 - D. Notify the client's surgeon.
5. The primary focus of the perioperative technician during the perioperative period is:
 - A. Managing the operating room environment
 - B. Supervising the scrub person and the circulating personnel
 - C. Documenting Intraoperative patient care procedures
 - D. Patient safety and achieving the desired patient outcomes
6. If the walls or floors becomes contaminated with organic debris during a case, the circulating personnel should:
 - A. Call housekeeping immediately
 - B. Decontaminate immediately
 - C. Defers for terminal cleaning

- D. Clean after the case is completed
7. The intervention that is included in the preoperative checklist is:
 - A. Conducting the Time Out
 - B. Performing sign out
 - C. Assessing for allergies
 - D. Feeding the patient
 8. The action that should be given the highest priority while admitting a patient in the operating room is:
 - A. Assessing the patient's level of consciousness.
 - B. Checking the patient's vital signs.
 - C. Checking the patient's identification and correct operative consent.
 - D. Positioning and performing skin preparation to the patient
 9. The best position for kidney surgery is:
 - A. Supine
 - B. Trendelenburg
 - C. Lithotomy
 - D. Lateral
 10. The primary purpose of maintaining NPO for 6 to 8 hours before surgery is:
 - A. To prevent malnutrition.
 - B. To prevent electrolyte imbalance.
 - C. To prevent intestinal obstruction.
 - D. To prevent aspiration
 11. Ideally, marking of the surgical site as part of the surgical check in the ward checklist should be made by the:
 - A. Nurse In charge
 - B. Clinician on duty
 - C. Operating surgeon
 - D. Perioperative technician
 12. Fresh air in the operation theatre is introduced through:
 - A. Walls
 - B. Windows
 - C. Floors
 - D. Ceiling

13. The sterile members of a surgical team includes:
 - A. The patient and the circulating personnel
 - B. The anaesthetist and the surgeon
 - C. The scrub person and the assistant surgeon
 - D. The patient and the anaesthetist
14. Fire extinguishers that puts off fires by taking away the oxygen element of the fire triangle are:
 - A. Carbon dioxide fire extinguishers
 - B. Water and foam fire extinguishers
 - C. Dry chemical fire extinguishers
 - D. Halogenated fire extinguishers
15. Instruments and sharps counts should be undertaken at strategic points during surgery to:
 - A. Prevent infection transmission between the staffs and clients
 - B. Ensure no foreign body remains in a patient after closure of a wound
 - C. Prevent stealing of theatre items by the staff member or patients
 - D. Promote knowledge of the staffs by reminding them of the items used
16. A machine that uses light beams to perform surgical procedures is called:
 - A. Electrocautery
 - B. Diathermy
 - C. Laser
 - D. Debakey
17. Immediately after surgery, the patient is usually shifted to:
 - A. Post anaesthesia care unit
 - B. High dependence unit
 - C. Surgical ward
 - D. Intensive care unit
18. Intraoperative phase begins when:
 - A. The patient arrives at the hospital for surgery.
 - B. The patient enters the operating room.
 - C. The anaesthesia provider induces the patient.
 - D. The surgeon makes the initial incision

19. Proper handling of ergonomic hazards in operation theatre includes:
- A. Appropriate handling and disposal of human waste, hepatitis B vaccination, use of PPEs,
 - B. Proper organization of the theatre equipment and ensure the floors are not slippery.
 - C. Ensuring proper electrical wiring and connection of electrical machines.
 - D. Proper positioning of patient and use of comfortable operation tables.
20. The absence of all microorganisms within any type of invasive procedure is:
- A. Surgical sepsis
 - B. Invasive sepsis
 - C. Surgical asepsis
 - D. Non-invasive asepsis

SECTION B: (40 MARKS)

*Answer **all** questions in this section.*

21. State THREE safety features of an anaesthesia machine, which prevents harm to both patient and users. (3 marks)
22. Outline FIVE principles that should be in place to ensure a patient is positioned safely before operation. (5 marks)
23. Outline FOUR components of a surgical safety checklist during sign out. (4 marks)
24. Identify the difference between decontamination and sterilization of surgical instruments. (2 marks)
25. List FIVE sub areas in the operation theatre. (5 marks)
26. Highlight FOUR causes of alarm signals on a patient monitor in theatre. (4 marks)
27. State FIVE procedures that require a written informed consent. (5 marks)
28. Identify FOUR consumables commonly used in an operating theatre. (4 marks)
29. Highlight FOUR important information contained in the written consent form. (4 marks)
30. Outline FOUR safety measures that should applied when handling sharp objects in the operation theatre. (4 marks)

SECTION C: (40 MARKS)

Answer any two questions in this section.

31. As a perioperative technician, you are part of a team that is expected to carry out an abdominal operation.
- a. Describe any FOUR personal protective gears that will be donned during the procedure. (12 marks)
 - b. Explain FOUR specific interventions that should be applied to ensure safety when using a surgical diathermy. (8 marks)
32. A patient dies on the table during surgery. You are required to participate in the writing of an incident report for the death case
- a. Explain FOUR other safety incidents that might occur in operation theatre. (8 marks)
 - b. Describe FOUR reasons for writing incidence reports. (12 marks)
33. Proper clinical waste handling is important to ensure the safety of both healthcare workers and clients.
- a. Discuss waste segregation in hospital using FOUR waste bins found in health care facilities. (12 marks)
 - b. Briefly explain any FOUR methods that are used to dispose medical waste. (8 marks)

END