

American Board of Surgical Assistants (ABSA) Certification Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

SAMPLE

- 1. What type of fracture involves the bone being shattered into multiple pieces?**
 - A. Comminuted fracture**
 - B. Cortical fracture**
 - C. Displaced fracture**
 - D. Simple fracture**
- 2. Which condition is known to reduce the shelf life of sterile items?**
 - A. High temperature**
 - B. Low humidity**
 - C. Proper ventilation**
 - D. Minimal handling**
- 3. Which arteries supply blood to the stomach?**
 - A. Femoral and radial arteries**
 - B. Right/left gastroepiploic and gastric arteries**
 - C. Coronary arteries**
 - D. Carotid arteries**
- 4. What is the primary function of using a water seal in medical procedures?**
 - A. To enhance blood circulation**
 - B. For drainage collection and suction control**
 - C. To provide constant oxygen flow**
 - D. To stabilize patient temperature**
- 5. What is a common symptom associated with dumping syndrome?**
 - A. Nausea and vomiting**
 - B. Severe abdominal pain**
 - C. Excessive thirst**
 - D. Colon spasms**

- 6. What condition is characterized by cessation of intestinal peristalsis?**
- A. Incarcerated hernia**
 - B. Paralytic ileus**
 - C. Diverticulum**
 - D. Esophageal varices**
- 7. What is the condition known to be caused by gonorrhea, tubercle bacilli, and gram-negative bacteria?**
- A. Infertility**
 - B. Pelvic inflammatory disease**
 - C. Hypospadias**
 - D. Uterine fibroids**
- 8. Which heart structure is responsible for rhythmically initiating heartbeats?**
- A. Atrioventricular node**
 - B. Purkinje fibers**
 - C. Sino-atrial node**
 - D. Cardiac muscle tissue**
- 9. Which term describes the twisting of the intestine?**
- A. Intestinal obstruction**
 - B. Volvulus**
 - C. Intussusception**
 - D. Peritonitis**
- 10. What does a ureterosigmoidostomy involve?**
- A. Transplanting ureters to the skin**
 - B. Creating a connection of ureters to the sigmoid colon**
 - C. Using a segment of ileum for urine diversion**
 - D. Performing a partial gastrectomy**

Answers

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

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Explanations

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1. What type of fracture involves the bone being shattered into multiple pieces?

A. Comminuted fracture

B. Cortical fracture

C. Displaced fracture

D. Simple fracture

A comminuted fracture is characterized by the bone breaking into three or more pieces. This type of fracture typically results from high-impact trauma, such as in car accidents or falls from significant heights. The fragmentation of the bone complicates the healing process and often requires surgical intervention to realign and stabilize the fragments. In contrast, other fracture types do not involve such extensive shattering. For instance, a cortical fracture refers to a fracture in the outer layer of the bone rather than multiple pieces, while a displaced fracture indicates that the bone ends are not aligned but still may remain in fewer segments. A simple fracture (also known as a closed fracture) describes a situation where the bone is broken in one place without breaking through the skin and usually involves only two pieces. Therefore, the nature of the comminuted fracture distinguishes it as the correct answer regarding the shattering of the bone into multiple fragments.

2. Which condition is known to reduce the shelf life of sterile items?

A. High temperature

B. Low humidity

C. Proper ventilation

D. Minimal handling

High temperature is known to reduce the shelf life of sterile items because elevated temperatures can lead to the degradation of packaging materials and the sterilization process itself. The integrity of sterile barriers is compromised in high heat, which can foster the growth of microorganisms if the sterilization is even slightly impaired. The heat can also cause chemical changes in the materials, altering their protective properties and potentially leading to contamination or ineffective sterilization. In contrast, low humidity typically helps maintain the stability of sterile items, as it prevents moisture-related issues that can lead to microbial growth. Proper ventilation is important for maintaining a sterile environment but does not directly influence the shelf life of items in the same way that temperature does. Minimal handling can reduce the risk of contamination but does not extend the shelf life on its own; rather, it is a practice that supports the maintenance of sterility. Overall, high temperature is the key factor that negatively impacts the longevity and safety of sterile items.

3. Which arteries supply blood to the stomach?

- A. Femoral and radial arteries
- B. Right/left gastroepiploic and gastric arteries**
- C. Coronary arteries
- D. Carotid arteries

The correct choice identifies the right and left gastroepiploic arteries, along with the gastric arteries, as the primary suppliers of blood to the stomach. The right gastroepiploic artery branches from the gastroduodenal artery, while the left gastroepiploic artery branches from the splenic artery. These arteries are essential in providing blood to the greater curvature of the stomach. The gastric arteries, which include the right and left gastric arteries, provide blood to the lesser curvature and the body of the stomach. Collectively, these arteries ensure that the stomach receives an adequate blood supply for its functions, including digestion and nutrient absorption. Other choices do not pertain to the vascularization of the stomach. For instance, the femoral and radial arteries primarily supply the lower and upper extremities, respectively, while the coronary arteries supply blood to the heart. The carotid arteries are primarily responsible for supplying the head and neck. Understanding the anatomical relationships and functions of these arteries is crucial for anyone studying surgical techniques and anatomy.

4. What is the primary function of using a water seal in medical procedures?

- A. To enhance blood circulation
- B. For drainage collection and suction control**
- C. To provide constant oxygen flow
- D. To stabilize patient temperature

The primary function of using a water seal in medical procedures is for drainage collection and suction control. A water seal acts as a one-way valve that allows air or fluid to escape from the pleural space or other body cavities, while preventing the backflow of air and fluids. This mechanism is especially crucial in managing conditions such as pneumothorax or post-surgical drainage, where it's vital to maintain negative pressure and promote drainage without external interference. In procedures involving chest drainage, the water seal helps ensure that air does not re-enter the pleural space, thus promoting lung expansion and preventing complications. It also provides an effective way of monitoring drainage output and fluid levels, contributing to better patient management during recovery. Other options such as enhancing blood circulation, providing constant oxygen flow, or stabilizing patient temperature do not involve the primary role of a water seal. While these aspects are important in patient care, they are not directly related to the function of a water seal, which primarily focuses on drainage and controlling the dynamics of pressure within the body.

5. What is a common symptom associated with dumping syndrome?

- A. Nausea and vomiting**
- B. Severe abdominal pain**
- C. Excessive thirst**
- D. Colon spasms**

Nausea and vomiting are common symptoms associated with dumping syndrome, which often occurs after gastric surgery, particularly procedures that alter the normal anatomy of the stomach and intestines, such as gastric bypass. This condition is characterized by the rapid passage of food from the stomach into the small intestine, which can trigger a cascade of gastrointestinal responses. In the context of dumping syndrome, as food moves too quickly into the small intestine, the osmotic load increases, drawing extra fluid into the intestinal lumen. This can lead to gastrointestinal discomfort, including nausea and vomiting, as the body reacts to the overload. Other symptoms may include abdominal cramps, diarrhea, and feelings of fullness. While other symptoms like severe abdominal pain, excessive thirst, and colon spasms may occur in various conditions, they are not specifically associated with dumping syndrome the way nausea and vomiting are. Understanding the distinct symptoms helps in diagnosing and managing the condition effectively.

6. What condition is characterized by cessation of intestinal peristalsis?

- A. Incarcerated hernia**
- B. Paralytic ileus**
- C. Diverticulum**
- D. Esophageal varices**

The condition characterized by the cessation of intestinal peristalsis is paralytic ileus. This condition occurs when there is a lack of movement in the intestines, which prevents the normal progression of intestinal contents. In a healthy digestive system, peristalsis is the wave-like muscle contractions that move food and waste through the gastrointestinal tract. When peristalsis ceases, it can lead to symptoms such as abdominal distension, pain, and constipation, as well as bile and fecal material building up in the intestine. Paralytic ileus can be caused by various factors, including postoperative states, electrolyte imbalances, and certain medications. It typically requires supportive care and treatment of the underlying cause to restore normal intestinal function. Understanding this condition is vital for those in the surgical profession and for managing patients after surgical procedures, making it particularly relevant for candidates preparing for the ABSA certification exam.

7. What is the condition known to be caused by gonorrhea, tubercle bacilli, and gram-negative bacteria?

A. Infertility

B. Pelvic inflammatory disease

C. Hypospadias

D. Uterine fibroids

Pelvic inflammatory disease (PID) is a condition that results from infections of the female reproductive organs, commonly caused by sexually transmitted infections such as gonorrhea and chlamydia. The bacteria responsible, including gonorrhea and tubercle bacilli (which is associated with tuberculosis), can ascend from the cervix to the uterus, fallopian tubes, and surrounding structures, leading to inflammation and complications. Ultimately, PID can result in significant health issues, including chronic pelvic pain, ectopic pregnancy, and infertility. It is important to recognize PID not only due to the immediate symptoms it can cause but also because of its long-term reproductive implications. The other choices pertain to different conditions that are not directly linked to the infections mentioned. Infertility may arise as a consequence of PID but is not a direct result of the infections themselves. Hypospadias and uterine fibroids are unrelated conditions that do not stem from bacterial infections like those listed in the question. Therefore, PID is correctly identified as the condition caused by gonorrhea, tubercle bacilli, and gram-negative bacteria.

8. Which heart structure is responsible for rhythmically initiating heartbeats?

A. Atrioventricular node

B. Purkinje fibers

C. Sino-atrial node

D. Cardiac muscle tissue

The sinoatrial node, often referred to as the SA node, is the primary pacemaker of the heart. It is located in the right atrium and is responsible for generating electrical impulses that initiate each heartbeat. These impulses spread through the atria, causing them to contract and push blood into the ventricles. The SA node's rhythmic firing is what sets the pace for the entire heart, making it key to maintaining a regular heart rhythm. In contrast, other heart structures play different roles. The atrioventricular node acts as a gateway between the atria and ventricles, delaying the impulse slightly to ensure that the ventricles fill with blood before contracting. Purkinje fibers are specialized fibers that distribute the electrical impulse quickly throughout the ventricles, facilitating their contraction. While cardiac muscle tissue does contract to pump blood, it does not initiate the heartbeat; rather, it responds to the impulses generated by the SA node.

9. Which term describes the twisting of the intestine?

- A. Intestinal obstruction
- B. Volvulus**
- C. Intussusception
- D. Peritonitis

The term that describes the twisting of the intestine is volvulus. This condition occurs when a portion of the intestine twists around itself, leading to an obstruction of blood flow and potentially compromising the integrity of the affected bowel segment. Volvulus can cause severe complications, including ischemia, perforation, and necrosis if not treated promptly. In a clinical context, identifying volvulus is crucial for surgical intervention since it can lead to life-threatening situations if the twisting is not resolved quickly. Symptoms may include abdominal pain, distension, and vomiting, which are often similar to other gastrointestinal issues, making accurate diagnosis vital. The other terms refer to different conditions: intestinal obstruction indicates a blockage without specifying the cause; intussusception is when a segment of the intestine telescopes into an adjacent segment; and peritonitis is the inflammation of the peritoneum, usually due to infection or rupture. Each of these conditions has distinct characteristics and implications for treatment, emphasizing why understanding and accurately naming conditions like volvulus is critical in surgical practice.

10. What does a ureterosigmoidostomy involve?

- A. Transplanting ureters to the skin
- B. Creating a connection of ureters to the sigmoid colon**
- C. Using a segment of ileum for urine diversion
- D. Performing a partial gastrectomy

A ureterosigmoidostomy involves creating a connection between the ureters and the sigmoid colon. This surgical procedure is performed when a patient's bladder is removed or not functional due to disease, injury, or congenital abnormalities. By connecting the ureters directly to the sigmoid colon, urine can be expelled through the rectum instead of through the urethra. This approach provides a means of urinary diversion while preserving some normal bowel function. The correct answer highlights the significance of this connection, which allows the body to adapt to the loss of bladder function. This procedure also exemplifies the principle of utilizing existing anatomical structures, such as the sigmoid colon, for urinary management. Other choices do not accurately describe ureterosigmoidostomy. Transplanting ureters to the skin refers to a different surgical technique typically related to urinary diversion. Using a segment of ileum for urine diversion describes ileal conduit diversion, another form of urinary diversion, but not ureterosigmoidostomy. Performing a partial gastrectomy pertains to the stomach rather than the urinary or gastrointestinal systems in context to ureterosigmoidostomy. Thus, option B is the clear and accurate choice.