

BoardVitals Intra-Op Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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.

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!

Questions

- 1. What is the surgical procedure that allows viewing a joint?**
 - A. Arthroscopy**
 - B. Arthroplasty**
 - C. Arthrocentesis**
 - D. Osteotomy**

- 2. What should the surgical technologist have available when the surgeon is going to repair a facial laceration?**
 - A. Sutures**
 - B. Steri Strips**
 - C. Gauze pads**
 - D. Antiseptic solution**

- 3. What should the CST always have ready for abdominal cases?**
 - A. Electrocautery devices**
 - B. Wet sponges**
 - C. Scissors**
 - D. Suction devices**

- 4. Which instrument is appropriate for dissecting the external oblique muscle?**
 - A. Scalpel**
 - B. Curved Mayo Scissors**
 - C. Metzenbaum Scissors**
 - D. Needle holder**

- 5. During a tympanoplasty, what medication is typically administered with epinephrine?**
 - A. Ropivacaine**
 - B. Lidocaine 1%**
 - C. Bupivacaine**
 - D. Fentanyl**

- 6. What is the primary purpose of a cardiac catheterization?**
- A. To repair heart valves**
 - B. To diagnose coronary artery disease**
 - C. To implant pacemakers**
 - D. To perform heart transplants**
- 7. Which of the following is true regarding the positioning and prepping of a patient undergoing ophthalmic surgery?**
- A. Patients are generally in the prone position, prepped with a saline solution**
 - B. Patients are generally in the supine position, prepped with betadine solution and paint**
 - C. Patients must remain standing during the procedure**
 - D. Patients are placed in a lateral position, and prepped with alcohol**
- 8. Which of the following procedures would be recommended for a patient diagnosed with gastroesophageal reflux disease (GERD)?**
- A. Laparoscopic cholecystectomy**
 - B. Nissen fundoplication**
 - C. Fundoplication alone**
 - D. Open appendectomy**
- 9. In the case of a patient with a tympanic membrane injury from an explosion, what procedure is indicated?**
- A. Tympanoplasty**
 - B. Myringotomy**
 - C. Otoplasty**
 - D. Ear irrigation**
- 10. What is the primary indication for a Doppler ultrasound in vascular surgery?**
- A. To assess tissue viability**
 - B. To evaluate venous reflux**
 - C. To locate blood clots**
 - D. To monitor arterial blood flow**

Answers

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

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Explanations

1. What is the surgical procedure that allows viewing a joint?

- A. Arthroscopy**
- B. Arthroplasty**
- C. Arthrocentesis**
- D. Osteotomy**

Arthroscopy is the surgical procedure that enables visualization of a joint using an arthroscope, which is a small, flexible tube equipped with a camera and light. This minimally invasive technique allows surgeons to examine the interior of the joint and, if necessary, perform repairs or other interventions such as removing damaged tissue or cartilage, without requiring a large incision. The unique benefit of arthroscopy lies in its ability to provide a clear view of the joint structure, aiding in accurate diagnosis and treatment of various joint issues, such as tears, inflammation, and other abnormalities. This procedure can be performed on various joints, including the knee, shoulder, and ankle. While other options, such as arthroplasty, arthrocentesis, and osteotomy, are related to joint surgery, they serve different purposes. Arthroplasty refers to the surgical reconstruction or replacement of a joint. Arthrocentesis involves the aspiration of fluid from a joint space, usually for diagnostic purposes or to relieve swelling. Osteotomy is a surgical procedure where a bone is cut to allow for realignment or adjustment of the bone structure. Each of these procedures has its own indications and uses, contrasting with the diagnostic and observational focus of arthroscopy.

2. What should the surgical technologist have available when the surgeon is going to repair a facial laceration?

- A. Sutures**
- B. Steri Strips**
- C. Gauze pads**
- D. Antiseptic solution**

In the context of repairing a facial laceration, having Steri Strips available is particularly important because they are specifically designed for wound closure without the need for deeper sutures. Steri Strips provide a simple and effective way to approximate wound edges and promote healing, especially in areas such as the face, where minimizing scarring and ensuring aesthetic results are crucial. This choice reflects an understanding of the appropriate materials used for superficial wound management, especially in delicate areas like the face. While sutures are commonly used in many surgical repairs, tightly repairing facial lacerations often benefits from the lower tension that Steri Strips provide. Having them on hand allows for immediate application if the surgeon determines that this method is most suitable for the specific laceration being addressed. The other materials, such as sutures and gauze pads, have their roles in wound management, but they may not be the first choice in all scenarios involving facial lacerations. Antiseptic solutions are important for cleaning the area before the procedure but do not play a direct role in the actual closure of the wound. Thus, being prepared with Steri Strips aligns with best practices in facial laceration repair.

3. What should the CST always have ready for abdominal cases?

- A. Electrocautery devices**
- B. Wet sponges**
- C. Scissors**
- D. Suction devices**

For abdominal cases, the presence of wet sponges is crucial because they serve multiple important functions. Wet sponges are essential for maintaining a clear surgical field by absorbing blood and other fluids, which helps in visualizing the operative area accurately. They also help in preventing contamination and maintaining hemostasis. The use of wet sponges is particularly important in abdominal surgery where there may be significant fluid loss and the potential for blood accumulation. While items like electrocautery devices, scissors, and suction devices are indeed important in a surgical setting, they do not fulfill the same role in terms of maintaining a clear and clean surgical site as effectively as wet sponges do. Having these sponges readily available allows the surgical team to manage the environment effectively during challenging procedures.

4. Which instrument is appropriate for dissecting the external oblique muscle?

- A. Scalpel**
- B. Curved Mayo Scissors**
- C. Metzenbaum Scissors**
- D. Needle holder**

The appropriate choice for dissecting the external oblique muscle is curved Mayo scissors. These scissors are specifically designed for cutting and dissecting tissue with precision. Their shape allows for better visibility and access to deeper structures, which is particularly useful when working on layered abdominal tissues like the external oblique. The curved design facilitates a more controlled and efficient dissection without excessive trauma to surrounding tissues. Scalpels are primarily used for making incisions and not for delicate dissection, making them less suitable for this specific task. Metzenbaum scissors, while also designed for dissection, are generally more appropriate for finer, softer tissues rather than the tougher fibers of the external oblique muscle. A needle holder is used for grasping needles during suturing, and while it serves an important role in surgical procedures, it does not have the function needed for dissecting muscle tissue. Thus, the curved Mayo scissors are the best instrument for this purpose due to their design and intended use in surgical dissection.

5. During a tympanoplasty, what medication is typically administered with epinephrine?

- A. Ropivacaine**
- B. Lidocaine 1%**
- C. Bupivacaine**
- D. Fentanyl**

During a tympanoplasty, lidocaine 1% is commonly administered alongside epinephrine to provide local anesthesia and vasoconstriction. The lidocaine offers analgesia, which helps manage pain in the targeted area during the surgical procedure. The addition of epinephrine, which causes vasoconstriction, is essential as it helps to minimize bleeding by reducing blood flow to the surgical site. This combination enhances the effectiveness of the procedure by allowing a clearer surgical field and more effective pain control. Other options like ropivacaine and bupivacaine may also provide local anesthesia, but they are not as commonly paired with epinephrine during tympanoplasty procedures as lidocaine is. Fentanyl, being an opioid analgesic, is used for systemic pain relief, but it does not have local anesthetic properties and is not used in the same context as lidocaine with epinephrine. Thus, the choice of lidocaine 1% aligns perfectly with the standard practices for optimizing surgical outcomes in tympanoplasty.

6. What is the primary purpose of a cardiac catheterization?

- A. To repair heart valves**
- B. To diagnose coronary artery disease**
- C. To implant pacemakers**
- D. To perform heart transplants**

The primary purpose of cardiac catheterization is to diagnose coronary artery disease. During this procedure, a thin tube (catheter) is inserted into a blood vessel and guided to the heart, allowing physicians to obtain detailed information about the heart's structure and the state of the coronary arteries. This technique can reveal blockages or narrowing in the arteries that supply blood to the heart muscle, which is essential for determining appropriate treatment options. While some cardiac procedures, such as repairing heart valves or implanting pacemakers, may involve catheterization, these interventions are not the primary goals of the procedure. Similarly, heart transplants are complex surgeries that require extensive preparation and do not rely on cardiac catheterization for their main function. Thus, diagnosis of coronary artery disease stands out as the fundamental application of cardiac catheterization.

7. Which of the following is true regarding the positioning and prepping of a patient undergoing ophthalmic surgery?

- A. Patients are generally in the prone position, prepped with a saline solution**
- B. Patients are generally in the supine position, prepped with betadine solution and paint**
- C. Patients must remain standing during the procedure**
- D. Patients are placed in a lateral position, and prepped with alcohol**

In ophthalmic surgery, the patient is typically positioned in the supine position, which allows the surgeon optimal access to the eye while ensuring the safety and comfort of the patient. This positioning is critical because it provides stability and reduces movement during the delicate procedure. In terms of prepping, the use of betadine solution is standard practice due to its efficacy as an antiseptic agent that reduces the risk of infection. The prepping process typically involves painting the betadine solution onto the area around the eye, which helps to create a sterile field necessary for surgery. This combination of supine positioning and the use of betadine is crucial for achieving the best outcomes in ophthalmic procedures. The other options present incorrect practices that would not align with standard protocols for ophthalmic surgery, such as inappropriate positioning or using non-standard antiseptics. Thus, the correct approach reinforced by the answer highlights important principles of both patient preparation and surgical positioning specific to ophthalmic procedures.

8. Which of the following procedures would be recommended for a patient diagnosed with gastroesophageal reflux disease (GERD)?

- A. Laparoscopic cholecystectomy**
- B. Nissen fundoplication**
- C. Fundoplication alone**
- D. Open appendectomy**

The recommended procedure for a patient diagnosed with gastroesophageal reflux disease (GERD) is Nissen fundoplication. This surgical intervention involves wrapping the top part of the stomach (the fundus) around the lower esophagus to reinforce the lower esophageal sphincter, preventing the backflow of stomach contents into the esophagus. It is particularly effective for patients who have severe GERD symptoms that are not adequately controlled through lifestyle changes and medication. Nissen fundoplication is specifically designed to address the anatomical and physiological issues associated with GERD. By enhancing the competency of the lower esophageal sphincter, this procedure provides long-term relief from symptoms such as heartburn and regurgitation, which are hallmark characteristics of GERD. Other surgical procedures listed, such as laparoscopic cholecystectomy and open appendectomy, are unrelated to the treatment of GERD and do not address the underlying causes of esophageal reflux. Fundoplication alone, without the "Nissen" descriptor, might imply variations of the fundoplication technique that may not have the same established efficacy for treating GERD as the Nissen method does. Thus, the Nissen fundoplication remains the most recognized and effective surgical intervention for managing GERD symptoms in

9. In the case of a patient with a tympanic membrane injury from an explosion, what procedure is indicated?

- A. Tympanoplasty**
- B. Myringotomy**
- C. Otoplasty**
- D. Ear irrigation**

In the context of a patient with a tympanic membrane injury due to an explosion, tympanoplasty is the recommended procedure. Tympanoplasty is a surgical technique aimed at repairing a perforated tympanic membrane (eardrum) and is suitable for cases where there's significant damage, such as that resulting from trauma like an explosion. The goal of this surgery is to restore the integrity of the tympanic membrane, which not only helps in restoring hearing but also reduces the risk of recurrent ear infections and further complications. Myringotomy, another procedure, typically involves making an incision in the tympanic membrane to relieve pressure or drain fluid, which may be indicated in cases of acute otitis media rather than a traumatic rupture. Otoplasty is focused on reconstructing or reshaping the external ear and does not address tympanic membrane injuries. Ear irrigation is used to remove debris or wax from the ear canal, which is not indicated in the scenario of a tympanic membrane injury. Thus, tympanoplasty stands out as the most appropriate intervention for repairing significant tympanic membrane injuries sustained from traumatic events.

10. What is the primary indication for a Doppler ultrasound in vascular surgery?

- A. To assess tissue viability**
- B. To evaluate venous reflux**
- C. To locate blood clots**
- D. To monitor arterial blood flow**

The primary indication for a Doppler ultrasound in vascular surgery is to monitor arterial blood flow. This technique is especially useful in evaluating the patency of arteries and assessing hemodynamics, which can help identify blockages, stenosis, or other vascular anomalies. By measuring the speed and direction of blood flow, Doppler ultrasound provides critical information about whether blood is flowing properly in the arterial system. Monitoring arterial blood flow is essential during various procedures, including the assessment of grafts and fistulas in patients requiring hemodialysis. It can also determine the effectiveness of surgical interventions by allowing surgeons to visualize blood flow in real-time. This application makes Doppler ultrasound a vital tool for vascular surgeons in both preoperative assessments and postoperative monitoring. While assessing tissue viability, evaluating venous reflux, and locating blood clots are important components of vascular assessments, they are not the primary focus of Doppler ultrasound. Tissue viability, for instance, often requires additional imaging techniques for comprehensive evaluation, venous reflux is typically assessed using other modalities, and while Doppler can assist in identifying clots, it's primarily the arterial flow monitoring that stands out as the main indication.

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://boardvitalsintraop.examzify.com>

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