

# Certified Nurses Operating Room (CNOR) Practice Exam (Sample)

## Study Guide



**Everything you need from our exam experts!**

**This is a sample study guide. To access the full version with hundreds of 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.

# 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. Don't worry about getting everything right, 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, and take breaks to retain information better.**

## 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.**

## 7. Use Other Tools

**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. Which factor is critical to monitor to prevent complications in postoperative patients?**
  - A. Patient's comfort level**
  - B. Fluid balance**
  - C. Family preferences**
  - D. Previous hospital stays**
  
- 2. What is the formula for converting Fahrenheit to Celsius?**
  - A. Add 32 then multiply by 1.8**
  - B. Subtract 32 then divide by 1.8**
  - C. Multiply by 1.8 then subtract 32**
  - D. Multiply by 2 then add 30**
  
- 3. Which medication combination is used to treat hyperkalemia in a patient with Malignant Hyperthermia (MH)?**
  - A. Insulin and dextrose 50%**
  - B. Calcium chloride and lidocaine**
  - C. Dextrose and beta blockers**
  - D. Calcium gluconate and Lactated Ringers**
  
- 4. What is the recommended action if a patient exhibits signs of toxicity from local anesthetics?**
  - A. Administer oxygen**
  - B. Administer antihistamines**
  - C. Increase fluid infusion**
  - D. Perform cardiopulmonary resuscitation**
  
- 5. Which condition may produce reactions similar to malignant hyperthermia?**
  - A. Allergy to anesthesia**
  - B. Sepsis**
  - C. Acid-base disorder**
  - D. Myocardial infarction**

- 6. Which injectable agent is preferred for faster spread and to resolve local edema?**
- A. Lidocaine**
  - B. Bupivacaine**
  - C. Sodium bicarbonate**
  - D. Wydase**
- 7. What does the ANA Code provide for perioperative nurses?**
- A. A checklist for surgical procedures**
  - B. A framework for ethical decision-making**
  - C. Guidelines for patient assessments**
  - D. Recommendations for staff training**
- 8. Which nerve is primarily affected when a patient is in a supine position?**
- A. Femoral nerve**
  - B. Radial nerve**
  - C. Ulnar nerve**
  - D. Brachial nerve**
- 9. What occurs to potassium levels in burn patients and those with tissue trauma when succinylcholine is administered?**
- A. Decrease potassium levels**
  - B. No effect on potassium levels**
  - C. Increase potassium levels**
  - D. Stabilize potassium levels**
- 10. What is a significant indicator of life-threatening status in ASA classification?**
- A. PS-3**
  - B. PS-4**
  - C. PS-5**
  - D. PS-2**

## **Answers**

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

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## **Explanations**

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**1. Which factor is critical to monitor to prevent complications in postoperative patients?**

- A. Patient's comfort level**
- B. Fluid balance**
- C. Family preferences**
- D. Previous hospital stays**

Monitoring fluid balance is critical in the postoperative setting to prevent complications such as dehydration, fluid overload, and electrolyte imbalances. After surgery, patients are at risk for various complications that can stem from inadequate or excessive fluid intake. Maintaining an appropriate fluid balance helps to ensure that the patient's circulatory volume is adequate, which is essential for maintaining blood pressure and organ function. Fluid balance involves tracking both fluid intake and outputs, including urine, surgical drains, and any other losses. Adequate fluid management supports wound healing, reduces the risk of thrombosis, and helps in the proper functioning of the kidneys and other organs. Monitoring fluid status allows healthcare providers to make timely interventions to address any imbalances, which is essential for the overall recovery process and to minimize potential complications that could arise from postoperative care. While aspects like patient comfort, family preferences, and previous hospital stays are important in providing holistic care and tailoring the recovery plan, they do not directly influence the immediate physiological status that fluid balance does. Therefore, ensuring proper fluid management remains a paramount concern in postoperative patient care.

**2. What is the formula for converting Fahrenheit to Celsius?**

- A. Add 32 then multiply by 1.8**
- B. Subtract 32 then divide by 1.8**
- C. Multiply by 1.8 then subtract 32**
- D. Multiply by 2 then add 30**

The formula for converting Fahrenheit to Celsius involves first subtracting 32 from the Fahrenheit temperature and then dividing the result by 1.8. This method is based on the relationship between the two temperature scales, where the freezing point of water is 32 degrees Fahrenheit and 0 degrees Celsius, and the boiling point is 212 degrees Fahrenheit and 100 degrees Celsius. By subtracting 32, you are determining how many degrees above freezing the Fahrenheit measurement is. Dividing by 1.8 then converts this temperature difference into the Celsius scale. This conversion is essential for accuracy in scientific, medical, and everyday contexts, as temperatures are often reported in different units depending on the region or field of study. In summary, the correct conversion method utilizes subtraction and division as highlighted in the chosen answer, ensuring precise conversion from Fahrenheit to the Celsius scale.

**3. Which medication combination is used to treat hyperkalemia in a patient with Malignant Hyperthermia (MH)?**

- A. Insulin and dextrose 50%**
- B. Calcium chloride and lidocaine**
- C. Dextrose and beta blockers**
- D. Calcium gluconate and Lactated Ringers**

The treatment of hyperkalemia, especially in the context of Malignant Hyperthermia, involves using a combination of insulin and dextrose. Insulin facilitates the uptake of potassium into the cells, thereby lowering the serum potassium levels, while dextrose is administered to prevent hypoglycemia that can occur due to insulin administration. This combination is particularly effective in managing elevated potassium levels, which can be critically high during episodes of Malignant Hyperthermia, a condition that can lead to severe metabolic disturbances. Other options provided may not address hyperkalemia effectively in the context of MH. While calcium chloride does play a role in stabilizing myocardial membranes in the presence of elevated potassium, it does not actively lower serum potassium levels like insulin does. Dextrose and beta blockers do not effectively treat hyperkalemia and could potentially worsen metabolic control. Calcium gluconate and Lactated Ringer's solution do not directly lower potassium levels in the same manner as insulin, making the combination of insulin and dextrose the most appropriate choice for treating hyperkalemia in this situation.

**4. What is the recommended action if a patient exhibits signs of toxicity from local anesthetics?**

- A. Administer oxygen**
- B. Administer antihistamines**
- C. Increase fluid infusion**
- D. Perform cardiopulmonary resuscitation**

Administering oxygen is the correct action when a patient exhibits signs of toxicity from local anesthetics due to the potential effects these substances can have on the central nervous system and cardiovascular system. Local anesthetic toxicity can lead to symptoms such as confusion, seizures, and even respiratory depression or cardiac arrest. Oxygen support is crucial because it helps maintain adequate oxygenation, especially if the patient's airway is compromised or if they are experiencing respiratory distress. This intervention can stabilize the patient's condition and buy time while additional treatment measures are implemented. Ensuring the patient has adequate oxygenation is a primary concern in any emergent situation, particularly when there are symptoms that could impair breathing or circulation. Other actions, while potentially relevant in a broader context, do not address the immediate risks associated with local anesthetic toxicity in the same direct manner. Administering antihistamines would not be appropriate as they are intended for allergic reactions rather than toxic effects. Increasing fluid infusion could be helpful in managing certain conditions, such as hypotension, but it does not directly counteract the effects of local anesthetic toxicity. Performing cardiopulmonary resuscitation might be necessary in severe cases, but the immediate first step would be to ensure adequate oxygenation. Thus, providing oxygen is the prudent

**5. Which condition may produce reactions similar to malignant hyperthermia?**

- A. Allergy to anesthesia**
- B. Sepsis**
- C. Acid-base disorder**
- D. Myocardial infarction**

The condition that may produce reactions similar to malignant hyperthermia is an allergy to anesthesia. When a patient has an allergic reaction to anesthesia, it can lead to a variety of symptoms, some of which may mimic those of malignant hyperthermia. These can include increased heart rate, changes in blood pressure, and elevated temperature, all of which are central features of malignant hyperthermia as well. Malignant hyperthermia is a life-threatening condition triggered by certain anesthetic agents and is characterized by rapid rise in body temperature and severe muscle contractions. The similarities in the physiological responses, such as hypermetabolic state and potential cardiovascular instability, can make it difficult to differentiate between an allergic reaction and malignant hyperthermia during intraoperative monitoring. In contrast, other conditions listed do not typically produce the same profile of symptoms or reach the same urgency of reactions associated with malignant hyperthermia. For instance, while sepsis can present with elevated temperatures and cardiovascular changes, the mechanisms and the clinical context leading to these symptoms differ from those seen in malignant hyperthermia. Acid-base disorders and myocardial infarction also present distinct symptomatology, thus further emphasizing the uniqueness of allergic reactions to anesthetics in this context.

**6. Which injectable agent is preferred for faster spread and to resolve local edema?**

- A. Lidocaine**
- B. Bupivacaine**
- C. Sodium bicarbonate**
- D. Wydase**

Wydase, also known as hyaluronidase, is the preferred injectable agent for faster spread and to resolve local edema. This enzyme facilitates the dispersion of injected fluids in the tissue, enhancing the permeability of the extracellular matrix. As a result, it allows for quicker diffusion of local anesthetics and other substances, which is particularly beneficial in situations requiring rapid onset of action or reducing localized swelling. Lidocaine and bupivacaine are both local anesthetics but do not have the same properties for dispersing fluid or reducing local edema efficiently. Sodium bicarbonate, while sometimes used to adjust the pH of anesthetics for increased comfort during injection, does not directly contribute to fluid spread or edema resolution like Wydase does. Therefore, Wydase stands out in this context due to its unique mechanism and effectiveness in achieving faster distribution and addressing swelling.

## 7. What does the ANA Code provide for perioperative nurses?

- A. A checklist for surgical procedures
- B. A framework for ethical decision-making**
- C. Guidelines for patient assessments
- D. Recommendations for staff training

The ANA Code, or the American Nurses Association Code of Ethics for Nurses, provides a vital framework for ethical decision-making for perioperative nurses. This code outlines the ethical responsibilities and obligations of nurses in their practice, emphasizing values such as respect for patient autonomy, beneficence, non-maleficence, and justice. For perioperative nurses, who often face complex situations where ethical considerations are paramount, the code serves as a guide for navigating dilemmas related to patient care, informed consent, and professional conduct in the operating room environment. By adhering to the principles outlined in the ANA Code, nurses can ensure that their decisions align with the highest standards of ethical practice, thereby enhancing the quality of care provided to patients undergoing surgical procedures. This framework empowers nurses to advocate for patients effectively, ensure safe practices, and foster collaborative relationships within the surgical team while upholding the dignity and rights of those they serve.

## 8. Which nerve is primarily affected when a patient is in a supine position?

- A. Femoral nerve
- B. Radial nerve
- C. Ulnar nerve
- D. Brachial nerve**

In a supine position, the brachial nerve plexus is primarily at risk due to the stress placed on the shoulder area. When patients are positioned supine, particularly for extended periods or if the arms are positioned improperly, there is a potential for excessive stretching or compression of the nerves that branch from the brachial plexus, which can lead to neuropathies. Maintaining proper arm positioning is crucial in surgical settings to prevent complications such as nerve damage. The brachial plexus, which innervates the upper limbs, can be compromised if arms are abducted excessively or left unsupported. This increases the risk of shoulder and upper limb dysfunction following surgery. The other nerves listed—femoral, radial, and ulnar—are technically associated with different regions and functions of the body. During supine positioning specifically, they are less susceptible to injury caused by posture-related strain compared to the brachial plexus. The femoral nerve affects the lower extremities, and radial and ulnar nerves are lower arms nerves, which are not primarily influenced by the posture of being supine. Therefore, the risk of injury to the brachial nerve plexus makes it the most relevant nerve to consider in this scenario.

**9. What occurs to potassium levels in burn patients and those with tissue trauma when succinylcholine is administered?**

- A. Decrease potassium levels**
- B. No effect on potassium levels**
- C. Increase potassium levels**
- D. Stabilize potassium levels**

When succinylcholine is administered, especially in burn patients and individuals with significant tissue trauma, there is a notable rise in potassium levels in the bloodstream. This is primarily due to the drug's mechanism of action as a depolarizing neuromuscular blocker, which mimics acetylcholine at the neuromuscular junction. In the context of burn injuries or tissue damage, there can be a disruption in the normal cellular membrane integrity, leading to an efflux of potassium ions from the intracellular space to the extracellular space. This is exacerbated when succinylcholine is used, as the drug causes muscle fasciculations and subsequent depolarization, promoting further potassium release from damaged tissues. The rise in potassium levels can be particularly concerning in these patient populations because it can lead to hyperkalemia, a condition where elevated potassium causes disturbances in cardiac rhythm and can lead to severe complications. Thus, monitoring potassium levels becomes critical when administering succinylcholine in patients with burns or significant tissue injuries.

**10. What is a significant indicator of life-threatening status in ASA classification?**

- A. PS-3**
- B. PS-4**
- C. PS-5**
- D. PS-2**

The ASA (American Society of Anesthesiologists) classification system is widely used to assess the physical status of patients prior to undergoing anesthesia and surgery. In this classification, each category indicates the severity of a patient's medical condition and potential risks associated with anesthesia. PS-4 indicates a patient with a severe systemic disease that is a constant threat to life. This classification is significant because it reflects a higher level of concern about the patient's ability to withstand the stress of surgery and anesthesia. Patients categorized as PS-4 are typically at increased risk for complications during and after surgical procedures, making it a critical indicator in determining readiness for surgery. It's important to understand that while other categories in the ASA classification, such as PS-3 or PS-2, indicate various levels of health statuses, neither of these suggests an immediate threat to life. PS-5 refers to a moribund patient who is not expected to survive without the procedure, indicating an even more critical state than PS-4. Therefore, PS-4 stands out as the significant indicator of life-threatening status within the ASA classification, illustrating the essential role it plays in preoperative assessment and decision-making.

# 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](mailto:hello@examzify.com).**

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

**<https://cnor.examzify.com>**

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

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