

CERTIFIED PROCUREMENT TRANSPLANT COORDINATOR (CPTC) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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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

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- 1. Which act supports the right to inform donor families rather than ask for authorization upon death?**
 - A. The Uniform Anatomical Gift Act (UAGA)
 - B. The Uniform Determination of Death Act (UDDA)
 - C. The Centers for Medicare and Medicaid Services (CMS)
 - D. The Donation Act of 1997 (DA)
- 2. Manipulation of the liver during surgical recovery can commonly result in:**
 - A. Transient hypertension
 - B. Increased liver enzymes
 - C. Bleeding tendencies
 - D. Electrolyte imbalances
- 3. Which of the following methods of packaging a kidney recovered for transplantation is compliant with UNOS policy?**
 - A. The kidney has 3 sterile barriers and is placed in a rigid container
 - B. The kidney is placed in a single non-sterile bag
 - C. The kidney is wrapped in gauze and sealed in a cardboard box
 - D. The kidney is submerged in saline solution
- 4. For an adult donor with a heart rate of 140, BP of 90/60, and Na⁺ of 168, what should the Procurement Coordinator administer?**
 - A. Dopamine
 - B. LR
 - C. 0.45% NS
 - D. Hespan
- 5. What is the purpose of the National Organ Transplant Act (NOTA)?**
 - A. To regulate vaccine development
 - B. To improve organ allocation
 - C. To authorize first person approval of donation
 - D. To monitor kidney disease treatment

- 6. Which medications would be effective in resuscitating an organ donor during cardiac arrest?**
- A. Atropine
 - B. Epinephrine
 - C. Lidocaine (Xylocaine)
 - D. Isoproterenol (Isuprel)
- 7. What is the first step recommended for Donor Hospital Development?**
- A. Training ICU staff
 - B. Reviewing the donation policy
 - C. Assessing the donor potential
 - D. Implementing routine referrals
- 8. In cases of cardiac arrest during organ recovery, which of the following actions can help maintain organ viability?**
- A. Adequate Blood Flow
 - B. Temperature Control
 - C. Monitoring Electrolytes
 - D. Administering Sedatives
- 9. The United Network for Organ Sharing (UNOS) was created for which of the following purposes?**
- A. Coordinate the allocation of organs
 - B. Collect clinical data about donors, candidates, and recipients
 - C. Manage disputes between organ procurement organizations and transplant centers
 - D. All of the above
- 10. What does organs transplanted per donor refer to?**
- A. The number of patients referred
 - B. The average organs received by a single donor
 - C. The overall consent rate
 - D. The percentage of eligible donors

Answers

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

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Explanations

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1. Which act supports the right to inform donor families rather than ask for authorization upon death?

- A. The Uniform Anatomical Gift Act (UAGA)**
- B. The Uniform Determination of Death Act (UDDA)
- C. The Centers for Medicare and Medicaid Services (CMS)
- D. The Donation Act of 1997 (DA)

The Uniform Anatomical Gift Act (UAGA) plays a crucial role in facilitating the process of organ donation by outlining the rights of individuals regarding organ donation, including the ability to make anatomical gifts. One significant aspect of the UAGA is that it allows for donor families to be informed about the potential for organ donation upon the death of a loved one, rather than requiring explicit authorization at that moment. This provision helps to create an environment where families can have open discussions about organ donation, ultimately increasing the likelihood of consent and supporting the timely recovery of organs for transplantation. This approach helps to alleviate some of the emotional burden that families may face during a challenging time by providing clarity around the process and respecting their right to be informed. In contrast, the other options such as the Uniform Determination of Death Act (UDDA), Centers for Medicare and Medicaid Services (CMS) regulations, and the Donation Act of 1997 (DA) serve different purposes in the context of organ donation and transplantation, either focusing on definitions and standards around death or regulations for transplantation funding and oversight, rather than directly addressing the communication with donor families. Thus, the UAGA is the most relevant act in supporting the right to inform donor families instead of seeking authorization at the time of death

2. Manipulation of the liver during surgical recovery can commonly result in:

- A. Transient hypertension**
- B. Increased liver enzymes
- C. Bleeding tendencies
- D. Electrolyte imbalances

The manipulation of the liver during surgical recovery is a significant concern due to the liver's crucial role in various physiological processes, including blood clotting, metabolism, and the detoxification of substances. One of the primary outcomes from surgery involving the liver can be transient hypertension. This can occur due to several factors related to the surgical procedure itself, such as changes in blood volume, the release of stress hormones, or due to impaired venous return from the liver which can lead to increased systemic vascular resistance. Additionally, certain manipulations can alter hemodynamics by affecting the portal and systemic circulation, which may cause temporary spikes in blood pressure. In surgical contexts, the liver's response to trauma or manipulation can also lead to other complications such as increased liver enzymes or bleeding tendencies, as the liver is involved in the production of clotting factors. However, these effects may not necessarily be direct results of manipulation during recovery and may arise from other underlying factors or complications. Transient hypertension specifically highlights the immediate cardiovascular effects that can arise from the surgical impact on the liver and surrounding structures, making it a key consideration for monitoring during the recovery phase.

3. Which of the following methods of packaging a kidney recovered for transplantation is compliant with UNOS policy?

- A. The kidney has 3 sterile barriers and is placed in a rigid container**
- B. The kidney is placed in a single non-sterile bag
- C. The kidney is wrapped in gauze and sealed in a cardboard box
- D. The kidney is submerged in saline solution

The correct method of packaging a kidney for transplantation, compliant with UNOS policy, involves using three sterile barriers and placing the kidney in a rigid container. This approach is essential for ensuring the safety and integrity of the organ during transport. The three sterile barriers serve to protect the organ from contamination, which is vital to preventing infection and ensuring successful transplantation. Additionally, using a rigid container provides added support and protection during transport, reducing the risk of damage from physical impacts. This method adheres to best practices for organ preservation and transport, reflecting a commitment to maintaining organ quality and safety standards as outlined by UNOS. The other methods listed do not meet these critical safety and quality requirements. For instance, using a single non-sterile bag or wrapping the kidney in gauze and sealing it in a cardboard box compromises sterility and increases the risk of contamination. Submerging the kidney in saline solution, while it may provide some level of preservation, does not provide the necessary protective barriers required for safe transport and is not compliant with established guidelines. Thus, the first method is the only option that adequately addresses both sterility and protection, aligning with UNOS policy.

4. For an adult donor with a heart rate of 140, BP of 90/60, and Na⁺ of 168, what should the Procurement Coordinator administer?

- A. Dopamine
- B. LR
- C. 0.45% NS**
- D. Hespan

In this scenario, the physiological parameters indicate that the donor is likely experiencing dehydration or hypovolemia, as evidenced by the elevated heart rate (tachycardia), low blood pressure (hypotension), and elevated sodium level (hypernatremia). The appropriate intervention in such cases is to administer a fluid that can help restore the intravascular volume and normalize these parameters. 0.45% NS, or half-normal saline, is a hypotonic solution that can help improve hydration status by providing free water and allowing for sodium correction. It gently addresses dehydration without introducing high sodium content, which can be crucial for managing the donor's elevated sodium levels. Furthermore, the hypotonic nature of 0.45% NS helps decrease the osmolality of the extracellular fluid, thereby facilitating a balance in fluid distribution among compartments. In contrast, the other options are not suitable for the desired fluid replacement and electrolyte management in this instance. Dopamine is primarily a vasopressor and would not correct the underlying fluid deficit. Lactated Ringer's (LR) is an isotonic solution and might have been considered, but it is not specifically tailored to address the hypernatremia alongside fluid deficit. Hespan, a volume expander, may be

5. What is the purpose of the National Organ Transplant Act (NOTA)?

- A. To regulate vaccine development
- B. To improve organ allocation**
- C. To authorize first person approval of donation
- D. To monitor kidney disease treatment

The National Organ Transplant Act (NOTA) was established to address the operational aspects of organ transplantation in the United States. One of its key purposes is to improve the allocation of organs to ensure that they are distributed fairly and efficiently to patients in need. This Act set the framework for the creation of the Organ Procurement and Transplantation Network (OPTN), which is responsible for overseeing organ allocation and ensuring that transplant candidates are prioritized based on medical need and suitability. By focusing on improving organ allocation, NOTA plays a critical role in enhancing access to transplantation for those waiting for an organ, fostering a system that strives to be equitable and transparent. This foundational regulation helps to guide the ethical and logistical components involved in the transplantation process, aiming to save lives and improve the overall outcomes for patients requiring organ transplants. The other options do not align with the primary focus and provisions of NOTA; for instance, it does not address vaccine development, first-person consent for organ donation, or monitoring kidney disease treatments. Each of these areas falls outside the scope of what NOTA was designed to tackle, which makes the role of improving organ allocation the most pertinent and correct answer in this context.

6. Which medications would be effective in resuscitating an organ donor during cardiac arrest?

- A. Atropine
- B. Epinephrine**
- C. Lidocaine (Xylocaine)
- D. Isoproterenol (Isuprel)

Epinephrine is a critical medication used during resuscitation efforts, particularly in cases of cardiac arrest. It is a sympathomimetic agent that stimulates both alpha and beta-adrenergic receptors, which leads to several physiological responses that are beneficial during life-threatening emergencies. In the context of cardiac arrest, epinephrine primarily functions to increase systemic vascular resistance through vasoconstriction, which can enhance coronary blood flow during cardiopulmonary resuscitation (CPR). This increased blood flow to the heart and brain is crucial for maintaining perfusion and improving the chances of successful resuscitation. Additionally, epinephrine can also help to restore a more effective heart rhythm when used appropriately, contributing to the overall success of resuscitative efforts. The other medications listed have specific uses, but they don't directly serve the primary function of supporting circulation and increasing the probability of restoring a normal cardiac rhythm during cardiac arrest in the same immediate and effective manner as epinephrine.

7. What is the first step recommended for Donor Hospital Development?

- A. Training ICU staff
- B. Reviewing the donation policy
- C. Assessing the donor potential**
- D. Implementing routine referrals

The first step recommended for Donor Hospital Development is assessing the donor potential. This step is crucial because it involves evaluating the specific characteristics and circumstances within a hospital that can contribute to successful organ and tissue donation. By assessing donor potential, the healthcare team can identify possible donors in a timely manner, leading to better outcomes for recipients. This assessment includes understanding patient demographics, reviewing clinical criteria for organ donation, and analyzing data from past donation efforts. It sets the stage for the development of strategies and training programs that will be more effective if based on a thorough understanding of the hospital's unique donor potential. Recognizing this potential early enables hospitals to tailor their approach to both staff training and policy implementation, ultimately maximizing the chances of successful donation processes. The other options, while important in their own right, support this foundational step. Training ICU staff is essential, but it is most effective when there is a clear understanding of donor potential. Reviewing the donation policy is also necessary, but without assessing potential donors, the policy may not be effectively applied. Implementing routine referrals is beneficial for increasing donation rates, yet it is most impactful when there is already a clear understanding of the donor potential within the institution. Thus, assessing donor potential serves as the critical first step in effectively developing

8. In cases of cardiac arrest during organ recovery, which of the following actions can help maintain organ viability?

- A. Adequate Blood Flow**
- B. Temperature Control
- C. Monitoring Electrolytes
- D. Administering Sedatives

Maintaining adequate blood flow during organ recovery is crucial for preserving the viability of organs. Blood flow ensures that the organs receive essential nutrients and oxygen, which are vital for cellular metabolism and function. In the event of cardiac arrest, immediate actions must be taken to restore or maintain perfusion to the organs, as a lack of blood flow can lead to ischemic injury, thereby compromising the function and viability of the organs for transplantation. In this context, while temperature control is important for organ preservation during the recovery and transportation phases—maintaining organs at optimal temperatures can slow metabolic processes and reduce cellular damage—adequate blood flow addresses the immediate need for oxygen and nutrient supply during a cardiac event. Monitoring electrolytes is also necessary, but it typically occurs in the context of pre-operational care rather than during acute situations. Administering sedatives is not relevant in this scenario as the focus must be on ensuring that organs are adequately perfused to maintain their viability post-recovery. Thus, ensuring blood flow remains the most critical action in this context to preserve organ viability during cardiac arrest.

9. The United Network for Organ Sharing (UNOS) was created for which of the following purposes?

- A. Coordinate the allocation of organs
- B. Collect clinical data about donors, candidates, and recipients
- C. Manage disputes between organ procurement organizations and transplant centers
- D. All of the above**

The United Network for Organ Sharing (UNOS) serves a multifaceted role in the organ transplantation system, which is why the most comprehensive answer indicating all of its purposes is correct. Firstly, UNOS coordinates the allocation of organs to ensure that the distribution of donated organs is done fairly, efficiently, and in accordance with established medical criteria. This involves managing the national waiting list for available organs and matching them to candidates based on various factors, including medical urgency and compatibility. Secondly, UNOS is responsible for collecting and maintaining clinical data concerning donors, candidates, and recipients. This data is vital for monitoring transplant outcomes, improving transplant policies, and informing public health initiatives. Thirdly, UNOS provides a framework for managing disputes that may arise between organ procurement organizations and transplant centers. Effective resolution of these disputes is crucial for maintaining the integrity of the transplantation process and ensuring that all parties adhere to ethical and regulatory standards. The combination of these functions illustrates the comprehensive nature of UNOS in managing the U.S. transplant system, which justifies the conclusion that all listed purposes are integral to its mission.

10. What does organs transplanted per donor refer to?

- A. The number of patients referred
- B. The average organs received by a single donor**
- C. The overall consent rate
- D. The percentage of eligible donors

The term "organs transplanted per donor" specifically refers to the average number of organs that are successfully transplanted from a single organ donor to recipients. This metric provides insight into the effectiveness and efficiency of the organ donation process, reflecting both the biological capability of donors to provide multiple organs and the practices in place for maximizing organ utilization. Understanding this metric is crucial in evaluating transplantation programs, as it helps to identify how many lives can potentially be saved or improved through organ donation. In contrast, the other options pertain to different aspects of the organ donation and transplantation process. The number of patients referred relates to the initial identification and communication with potential donors; the overall consent rate refers to the percentage of families who agree to donate organs; and the percentage of eligible donors indicates how many from a larger population meet the criteria for organ donation. None of these options specifically addresses the average yield of organs from each donor, which is why the focus on the average organs received by a single donor is the most relevant answer in this context.

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://procurementtransplantcoord.examzify.com>

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

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