

Certified Surgical First Assistant (CSFA) 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

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- 1. Which drug is used in emergencies to treat ventricular fibrillation or tachycardia?**
 - A. Amiodarone**
 - B. Inderal**
 - C. Atropine**
 - D. Adrenaline**

- 2. What is a notable intraoperative hazard when performing laparoscopic surgery?**
 - A. Vascular injury**
 - B. Perforation**
 - C. Infection**
 - D. Hematoma formation**

- 3. In a Nissen procedure, which section of the stomach is wrapped around the esophagus?**
 - A. Body**
 - B. Pylorus**
 - C. Fundus**
 - D. Cardia**

- 4. What is the most common type of liver cancer encountered in clinical practice?**
 - A. Hepatocellular carcinoma**
 - B. Cholangiocarcinoma**
 - C. Metastatic disease**
 - D. Angiosarcoma**

- 5. What is found at the base of each internal carotid artery?**
 - A. Sinus**
 - B. Node**
 - C. Fossa**
 - D. Vein**

6. What is the flexure between the transverse colon and the descending colon called?

- A. Hepatic flexure**
- B. Splenic flexure**
- C. Sigmoid flexure**
- D. Rectosigmoid junction**

7. What is the name of the great sensory nerve of the face and head?

- A. Facial nerve**
- B. Trigeminal nerve**
- C. Vagus nerve**
- D. Optic nerve**

8. What is the measurement of the pressure of carbon dioxide in arterial blood known as?

- A. HCO3**
- B. PaCO2**
- C. pH**
- D. PaO2**

9. Which arteries are found within the cardinal ligament?

- A. Ovarian arteries**
- B. Uterine arteries**
- C. Vaginal arteries**
- D. Fetal arteries**

10. What is an emergency drug that increases myocardial contractility?

- A. Adrenaline**
- B. Sodium bicarbonate**
- C. Calcium chloride**
- D. Atropine**

Answers

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

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Explanations

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1. Which drug is used in emergencies to treat ventricular fibrillation or tachycardia?

A. Amiodarone

B. Inderal

C. Atropine

D. Adrenaline

Amiodarone is a key drug used in emergencies, particularly for treating ventricular fibrillation and ventricular tachycardia. This medication is classified as an antiarrhythmic agent and is effective due to its ability to prolong the action potential and refractory period in cardiac tissues. This action stabilizes the cardiac rhythm and helps restore normal heart function during critical conditions such as cardiac arrest. In emergency situations, when a patient presents with ventricular fibrillation, rapid intervention is crucial, and amiodarone serves as a first-line treatment. The drug can be administered through various routes, including intravenous injection, making it suitable for use in acute care settings. While other medications listed serve important roles in cardiac and other emergency interventions, they do not have the same specific application in the management of ventricular fibrillation or tachycardia as amiodarone does.

2. What is a notable intraoperative hazard when performing laparoscopic surgery?

A. Vascular injury

B. Perforation

C. Infection

D. Hematoma formation

In laparoscopic surgery, perforation is a significant intraoperative hazard due to the nature of the procedures being performed. This technique involves creating small incisions through which surgical instruments are inserted, and a camera is used to visualize the operative field. During this process, there is a risk of inadvertently puncturing a hollow organ, such as the intestine or bladder. This can lead to the spillage of contents into the abdominal cavity, which may result in peritonitis or other complications requiring further intervention. Perforation can occur during the initial access using Veress needles or trocars and can also happen while manipulating instruments or cauterizing tissue. Recognizing the potential for perforation is essential for maintaining patient safety and successful surgical outcomes. The surgical team must be vigilant in assessing anatomical landmarks and tissue integrity during the procedure to mitigate this risk. Understanding perforation as a notable hazard equips surgical personnel to prepare adequately and respond effectively if such an event occurs.

3. In a Nissen procedure, which section of the stomach is wrapped around the esophagus?

- A. Body**
- B. Pylorus**
- C. Fundus**
- D. Cardia**

In a Nissen procedure, the fundus of the stomach is wrapped around the esophagus to create a tighter junction between the esophagus and the stomach. This technique is primarily used to treat gastroesophageal reflux disease (GERD) by preventing the backflow of stomach contents into the esophagus. The fundus, being the uppermost part of the stomach, provides adequate tissue to encircle the esophagus without compromising the stomach's ability to digest food. The body of the stomach contains the bulk of the stomach's contents but is not primarily involved in the anchoring process of the esophagus during the Nissen procedure. The pylorus, the region of the stomach that connects to the duodenum, and the cardia, which is the area nearest to the esophagus, do not provide the necessary ample tissue needed for the fundoplication. Thus, it is the fundus that plays a crucial role in establishing a functional barrier to reflux in this surgical procedure.

4. What is the most common type of liver cancer encountered in clinical practice?

- A. Hepatocellular carcinoma**
- B. Cholangiocarcinoma**
- C. Metastatic disease**
- D. Angiosarcoma**

Hepatocellular carcinoma is recognized as the most common type of liver cancer diagnosed in clinical practice. This carcinoma arises from hepatocytes, the main functional cells of the liver, and is closely associated with chronic liver diseases such as hepatitis B and C infections, as well as cirrhosis stemming from various causes including alcohol use and non-alcoholic fatty liver disease. The prevalence of hepatocellular carcinoma is a significant factor in understanding liver cancer as it highlights the importance of early detection and management of liver cirrhosis and viral hepatitis, which can lead to its development. This type of cancer often presents with symptoms such as abdominal pain, weight loss, and liver dysfunction, but in many cases, it may also be asymptomatic until it reaches an advanced stage. While cholangiocarcinoma, metastatic disease, and angiosarcoma are important in the context of liver tumors, they are less frequently encountered compared to hepatocellular carcinoma. Cholangiocarcinoma originates from the bile ducts and can occur but is less common overall. Metastatic disease refers to cancers that spread to the liver from other organs, which, while prevalent, are a secondary manifestation rather than a primary liver cancer. Angiosarcoma is a rare

5. What is found at the base of each internal carotid artery?

- A. Sinus**
- B. Node**
- C. Fossa**
- D. Vein**

The correct answer is sinus, specifically referring to the carotid sinus, which is a dilated area located at the base of each internal carotid artery. The carotid sinus plays a critical role in the body's regulation of blood pressure. It contains baroreceptors that detect changes in blood pressure and send signals to the central nervous system to help regulate cardiovascular function. This area is essential for maintaining hemodynamic stability and is an important anatomical feature within the vascular system. This includes its involvement in reflexive responses to blood pressure changes, contributing to both the short-term and long-term regulation of blood pressure. The other options, while they may represent anatomical structures found in the body, do not accurately describe what is located specifically at the base of the internal carotid arteries. A node typically refers to structures associated with the lymphatic system; a fossa generally describes a depression in a bone; and a vein is a blood vessel but does not exist at that specific anatomical location related to the internal carotid artery.

6. What is the flexure between the transverse colon and the descending colon called?

- A. Hepatic flexure**
- B. Splenic flexure**
- C. Sigmoid flexure**
- D. Rectosigmoid junction**

The flexure between the transverse colon and the descending colon is referred to as the splenic flexure. This specific anatomical feature is located in the upper left part of the abdomen and plays a significant role in the anatomy of the colon. The splenic flexure serves as a transition point where the colon changes direction from the horizontal orientation of the transverse colon to the vertical orientation of the descending colon. Its name is derived from its proximity to the spleen. The significance of this flexure includes its implications for the function of the colon as well as its importance in surgical procedures involving the gastrointestinal tract. In contrast, the hepatic flexure is located between the ascending colon and the transverse colon and is associated with the liver; the sigmoid flexure refers to the S-shaped segment of the colon leading into the rectum; and the rectosigmoid junction is the area where the sigmoid colon connects to the rectum. Understanding the specific locations and names of these anatomical points is crucial for anyone studying human anatomy, especially in the context of surgical procedures and gastrointestinal health.

7. What is the name of the great sensory nerve of the face and head?

- A. Facial nerve**
- B. Trigeminal nerve**
- C. Vagus nerve**
- D. Optic nerve**

The trigeminal nerve is known as the great sensory nerve of the face and head because it is the largest cranial nerve and is responsible for transmitting sensory information from the face to the brain. It has three major branches: the ophthalmic, maxillary, and mandibular nerves, each of which supplies sensation to different areas of the facial structure. This extensive distribution allows it to relay sensations of touch, pain, and temperature from the forehead, cheeks, jaw, and various other regions. In contrast, while the facial nerve primarily governs the muscles of facial expression and some aspects of taste and secretion, it does not handle sensory information in the same comprehensive way as the trigeminal nerve. The vagus nerve plays a significant role in autonomic functions, particularly those related to the thoracic and abdominal organs, rather than serving sensory functions in the face. The optic nerve is strictly involved in vision and is not related to sensory perception across the face and head. Therefore, the trigeminal nerve's specific role in sensation makes it the appropriate choice for this question.

8. What is the measurement of the pressure of carbon dioxide in arterial blood known as?

- A. HCO3**
- B. PaCO2**
- C. pH**
- D. PaO2**

The measurement of the pressure of carbon dioxide in arterial blood is known as PaCO2. This parameter is crucial for evaluating a patient's respiratory function and acid-base balance. PaCO2 indicates the amount of carbon dioxide dissolved in arterial blood, reflecting the effectiveness of ventilation and the overall status of pulmonary gas exchange. In clinical practice, monitoring PaCO2 levels helps in diagnosing respiratory disorders and managing patients on mechanical ventilation, as changes in this pressure can indicate hypoventilation or hyperventilation. Understanding and interpreting PaCO2 alongside other blood gas measurements are vital for a comprehensive assessment of a patient's respiratory and metabolic status.

9. Which arteries are found within the cardinal ligament?

- A. Ovarian arteries
- B. Uterine arteries**
- C. Vaginal arteries
- D. Fetal arteries

The arteries found within the cardinal ligament include the uterine arteries. The cardinal ligament, also known as the transverse cervical ligament, is an important anatomical structure in the female pelvis that provides support to the cervix and uterus. It contains key vascular structures that supply blood to these organs. The uterine arteries, which branch off from the internal iliac arteries, travel within the cardinal ligament to reach the uterus. They are crucial for providing the necessary blood supply to the uterus, especially during pregnancy. This is why the correct answer is the uterine arteries, as they are specifically associated with the vascular supply in this region. Other arteries mentioned, such as ovarian and vaginal arteries, are distinct in their anatomical locations and do not run within the cardinal ligament itself. Fetal arteries are not applicable as they relate to the fetal circulation and do not pertain to the anatomical structures of the cardinal ligament in the female pelvis.

10. What is an emergency drug that increases myocardial contractility?

- A. Adrenaline
- B. Sodium bicarbonate
- C. Calcium chloride**
- D. Atropine

The choice of calcium chloride as an emergency drug that increases myocardial contractility is correct because calcium plays a crucial role in cardiac muscle contraction. Calcium ions facilitate the interaction between actin and myosin filaments in the cardiac myocytes, which is essential for muscle contraction. In emergency situations, especially in cases of certain types of cardiac arrest or dysrhythmias, administering calcium chloride can help restore normal myocardial function by increasing the availability of calcium in the cardiac tissue, thereby enhancing contractility. In contrast, adrenaline (also known as epinephrine) primarily acts as a stimulant that increases heart rate and improves blood flow during resuscitation but does not directly enhance myocardial contractility to the same extent as calcium chloride. Sodium bicarbonate is used to manage acidosis but does not play a role in increasing contractility. Atropine is an anticholinergic drug that increases heart rate by blocking vagal effects on the heart, but it also does not increase myocardial contractility directly. Therefore, calcium chloride is the most appropriate choice for improving myocardial contractility in emergency situations.

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://csfa.examzify.com>

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

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