

# Certified Surgical Technologist (CST) Practice Exam (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 portion of the stomach surrounds the lower esophageal sphincter?**
  - A. Cardia**
  - B. Fundus**
  - C. Pylorus**
  - D. Antrum**
  
- 2. An injury a patient sustains as a result of the care given by a healthcare professional is called?**
  - A. Tort**
  - B. Liability**
  - C. Battery**
  - D. Iatrogenic**
  
- 3. Which postoperative complication is commonly associated with total hip arthroplasty?**
  - A. Compartment syndrome**
  - B. Upper extremity weakness**
  - C. Urinary incontinence**
  - D. Pulmonary embolism**
  
- 4. How long does thrombin maintain its potency?**
  - A. 30 minutes**
  - B. 60 minutes**
  - C. 2 hours**
  - D. 3 hours**
  
- 5. What term describes the condition of a twisted piece of intestine that can cut off blood supply?**
  - A. Incarcerated**
  - B. Strangulated**
  - C. Volvulated**
  - D. Obstructed**

- 6. Which type of disease is characterized by rapid onset and a quick recovery?**
- A. Acute**
  - B. Chronic**
  - C. Primary**
  - D. Asymptomatic**
- 7. Which surgical position provides optimal visualization of the lower abdomen or pelvis?**
- A. Fowler's**
  - B. Trendelenburg**
  - C. Reverse Trendelenburg**
  - D. Kraske**
- 8. Which neurosurgical pathway would a myelogram diagnose?**
- A. Subdural hematoma**
  - B. Creutzfeldt Jakob**
  - C. Spinal stenosis**
  - D. Myelomeningocele**
- 9. A Fogarty catheter is used during a/an:**
- A. Gastrectomy**
  - B. Thoracotomy**
  - C. Embolectomy**
  - D. Craniotomy**
- 10. Which of the following is a major source of distress for toddler and preschool age patients being transported to the operating room?**
- A. Fear of anesthesia**
  - B. Separation anxiety**
  - C. Room temperature change**
  - D. Lack of communication**

## Answers

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

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## **Explanations**

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**1. Which portion of the stomach surrounds the lower esophageal sphincter?**

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

The cardia is the portion of the stomach that is located nearest to the lower esophageal sphincter, which connects the esophagus to the stomach. This area acts as a transition zone, allowing the entrance of food into the stomach while also playing a critical role in preventing the backflow of stomach contents (reflux) into the esophagus. The anatomy of the cardia is especially important in understanding various gastrointestinal conditions, such as gastroesophageal reflux disease (GERD). In contrast, the fundus refers to the upper, dome-shaped region of the stomach, positioned above the cardia, while the pylorus constitutes the lower part of the stomach that connects to the small intestine. The antrum, also part of the lower stomach, is involved in grinding food before it goes through the pyloric sphincter into the duodenum. Thus, the relationship of the cardia to the lower esophageal sphincter is essential in maintaining the integrity of the gastroesophageal junction and ensuring proper digestive function.

**2. An injury a patient sustains as a result of the care given by a healthcare professional is called?**

- A. Tort**
- B. Liability**
- C. Battery**
- D. Iatrogenic**

An injury that a patient sustains as a result of the care given by a healthcare professional is termed "iatrogenic." This term specifically refers to an adverse condition or complication that is caused by medical treatment or diagnostic procedures. In the context of healthcare, iatrogenic injuries can occur due to a variety of factors, such as surgical errors, reactions to medications, or complications that arise from interventions. Iatrogenic injuries highlight the importance of careful medical practice and patient monitoring, as they underscore the potential risks associated with medical and surgical care. Identifying and understanding iatrogenic effects are crucial for healthcare professionals to improve patient safety and quality of care by minimizing avoidable adverse effects related to treatments. In contrast, tort refers to a wrongful act that causes harm to another person, which may or may not be related to medical care. Liability involves the legal responsibility one has for their actions or omissions, which can encompass various scenarios beyond just those directly related to medical treatment. Battery in a medical context pertains to performing a procedure without the patient's consent, which is a different legal issue. The concept of iatrogenesis specifically connects the idea of an injury to the action of a healthcare provider, making it the most accurate term for this scenario.

### 3. Which postoperative complication is commonly associated with total hip arthroplasty?

- A. Compartment syndrome
- B. Upper extremity weakness
- C. Urinary incontinence
- D. Pulmonary embolism**

Total hip arthroplasty, or hip replacement surgery, involves significant alterations to the musculoskeletal system, which can lead to various postoperative complications. One of the most critical complications associated with this procedure is pulmonary embolism. After hip surgery, particularly in patients who may have underlying risk factors such as obesity, prolonged immobility, or a history of thromboembolism, the risk of deep vein thrombosis (DVT) increases. DVT can occur when blood clots form in the deep veins of the legs due to reduced blood flow during and after surgery. If a portion of this clot dislodges, it can travel to the lungs, resulting in a pulmonary embolism. The significance of pulmonary embolism lies in its potential to be life-threatening, as it can obstruct blood flow to the lungs and reduce oxygen supply to the body. This complication can manifest with symptoms such as difficulty breathing, chest pain, rapid heart rate, and in severe cases, can lead to respiratory failure or cardiac arrest. In contrast, while complications like compartment syndrome, upper extremity weakness, and urinary incontinence are possible after surgical interventions, they are not specifically prevalent or directly associated with the surgical procedure of total hip arthroplasty as pulmonary embolism is

### 4. How long does thrombin maintain its potency?

- A. 30 minutes
- B. 60 minutes
- C. 2 hours
- D. 3 hours**

Thrombin, a critical enzyme involved in the coagulation cascade, is used in various surgical procedures for its ability to facilitate blood clotting. When discussing the potency of thrombin, it is important to note that its effectiveness is influenced by various factors, including its storage temperature, the formulation in which it is presented, and exposure to environmental elements. Thrombin is known to maintain its potency for a designated duration, which allows surgeons to utilize it effectively during procedures. The correct answer reflects the understanding that thrombin retains its potency for a period of up to three hours post-preparation or activation, as long as it is stored under appropriate conditions. Beyond this time frame, the efficacy of thrombin could begin to diminish, impacting its ability to promote hemostasis during surgical interventions. In the context of surgical practices, knowing the potency duration of thrombin is crucial for ensuring effective hemostatic measures. Using thrombin that has surpassed its optimal potency period could lead to inadequate hemostasis, potentially resulting in complications during and after the surgical procedure. Therefore, understanding the stable time frame for thrombin is essential for surgical technologists and other healthcare professionals involved in surgical care.

**5. What term describes the condition of a twisted piece of intestine that can cut off blood supply?**

- A. Incarcerated**
- B. Strangulated**
- C. Volvulated**
- D. Obstructed**

The condition described in the question refers to a twisted piece of intestine that can cut off blood supply, which is best captured by the term "strangulated." When a segment of the intestine becomes twisted or obstructed in a way that impairs blood flow, it leads to strangulation. This condition can result in tissue necrosis and requires immediate medical intervention to restore blood supply and prevent serious complications. Incarcerated refers to a piece of intestine that is trapped but may not necessarily have compromised blood flow. Volvulated describes the act of twisting itself but is less specific to the severe implications for blood supply. Obstructed pertains to any blockage in the intestine, which could arise from various factors, but it does not exclusively indicate affected blood flow. Thus, "strangulated" is the most accurate term for the scenario where a twisted intestine leads to a cutoff in blood supply.

**6. Which type of disease is characterized by rapid onset and a quick recovery?**

- A. Acute**
- B. Chronic**
- C. Primary**
- D. Asymptomatic**

The correct choice is acute disease, which is defined by its rapid onset and swift recovery. Acute diseases typically present suddenly and may lead to recognizable symptoms that require immediate attention. The body often has a robust ability to recover from these conditions, either naturally or through medical intervention. Common examples include infections, such as the flu or a cold, where individuals often return to normal health in a relatively short period of time. In contrast, chronic diseases evolve over a longer period and generally require ongoing management, showcasing persistent symptoms and challenges to recovery. Primary conditions refer to the main disease process rather than its duration or onset characteristics, while asymptomatic conditions are those that do not exhibit noticeable symptoms despite the presence of the disease. Thus, acute diseases are distinctly characterized by their swift trajectory, making this choice the most accurate.

**7. Which surgical position provides optimal visualization of the lower abdomen or pelvis?**

- A. Fowler's
- B. Trendelenburg**
- C. Reverse Trendelenburg
- D. Kraske

The Trendelenburg position is used to provide optimal visualization of the lower abdomen or pelvis during surgical procedures. In this position, the patient's body is laid flat on the operating table, with the legs raised higher than the head. This elevation enhances blood flow to the pelvic area and can help in relocating abdominal organs, which is particularly beneficial for surgeries involving the lower abdomen and pelvis. Using the Trendelenburg position can enhance the surgeon's access to structures in the lower abdomen, such as the reproductive organs, bladder, and intestines, allowing for clearer visibility without obstructing the surgical field. Additionally, this positioning can minimize potential complications during surgery by improving venous return and potentially counteracting hypotension. Other positions mentioned in the choices are generally suited for different surgical needs. For instance, Fowler's position is often used for upper body procedures, providing a sitting angle beneficial for thoracic surgeries or procedures involving the head and neck. Reverse Trendelenburg serves to elevate the head while lowering the legs, which is advantageous in certain upper abdominal surgeries but does not provide the same direct access to the pelvic structures. The Kraske position, also known as the prone position with hips elevated, is used for procedures involving the posterior pelvic area or rectum, but it

**8. Which neurosurgical pathway would a myelogram diagnose?**

- A. Subdural hematoma
- B. Creutzfeldt Jakob
- C. Spinal stenosis**
- D. Myelomeningocele

A myelogram is a diagnostic imaging procedure that involves the injection of a contrast dye into the spinal canal to improve the visualization of the spinal cord and nerve roots on X-rays or CT scans. This technique is particularly useful for identifying abnormalities in the spinal structures, including conditions that lead to compression of the spinal canal or nerve roots. The correct choice, spinal stenosis, is characterized by the narrowing of the spinal canal, which can lead to symptoms such as pain, numbness, and weakness due to pressure on the spinal cord or nerves. A myelogram would effectively reveal the narrowing by highlighting the anatomy of the spine and any obstructions. In contrast, conditions like subdural hematoma, Creutzfeldt-Jakob disease, and myelomeningocele would not be diagnosed through a myelogram. A subdural hematoma involves bleeding between the brain and its outermost covering and is typically assessed through different imaging modalities such as CT or MRI. Creutzfeldt-Jakob disease is a progressive neurological disorder that usually requires specialized tests, not typically involving myelograms. Myelomeningocele is a type of spina bifida visible through other imaging techniques and often diagnosed prenatally or through ultrasound rather than

**9. A Fogarty catheter is used during a/an:**

- A. Gastrectomy**
- B. Thoracotomy**
- C. Embolectomy**
- D. Craniotomy**

A Fogarty catheter is specifically designed to remove emboli from blood vessels, making it an essential tool during an embolectomy procedure. This procedure involves the surgical removal of an embolus that may be obstructing blood flow in arteries, most commonly in the context of peripheral vascular disease. The Fogarty catheter is passed through the vascular system to locate the embolus, and then the balloon at the tip of the catheter is inflated to capture and remove the clot or blockage. This is critical in restoring normal blood circulation and preventing tissue damage associated with prolonged ischemia. While the other procedures listed—gastrectomy, thoracotomy, and craniotomy—are significant surgical operations, they do not utilize the Fogarty catheter due to their different anatomical focus and surgical goals. Gastrectomy pertains to the stomach, thoracotomy involves the chest cavity and lungs, and craniotomy relates to the brain. Each of these would typically employ different instruments that are more suited for the respective contexts.

**10. Which of the following is a major source of distress for toddler and preschool age patients being transported to the operating room?**

- A. Fear of anesthesia**
- B. Separation anxiety**
- C. Room temperature change**
- D. Lack of communication**

Separation anxiety is a significant source of distress for toddler and preschool age patients during transport to the operating room. At this developmental stage, children often experience strong attachments to their primary caregivers, and being separated from them can lead to intense fear and anxiety. The transition to a medical environment, which is typically unfamiliar and can cause confusion, exacerbates these feelings. Regarding the other options, while fear of anesthesia, room temperature change, and lack of communication can indeed affect a child's comfort and psychological state, they do not generally have the same profound impact as separation anxiety. Toddler and preschool age children are particularly sensitive to being away from their parents or guardians, which can lead to heightened emotional distress and behavioral responses during medical procedures. Understanding this anxiety allows healthcare providers to implement strategies, such as involving a parent in the process or providing comfort items, to help ease the child's fears during this vulnerable time.

## 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://cst.examzify.com>**

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

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