1. When performing sedation, the following are required:
   a. a minimum of two personnel, one of which is a physician with sedation privileges
   b. an assessment by the physician immediately prior to the sedation
   c. an assessment by the physician immediately after the procedure
   d. the person monitoring the patient is an RN with ACLS/PALS certification
   e. all of the above

2. A qualified RN in the ambulatory care setting may discharge a patient who had deep sedation after evaluation by the anesthesiologist or qualified independent practitioner and the patient has been assessed to have an Aldrete score of 8.
   a. True
   b. False

3. Which of the following medications will reverse the CNS depressant effects of benzodiazepines?
   a. Midazolam
   b. Naloxone
   c. Flumazenil
   d. Ketamine

4. Which of the following medications will reverse the respiratory depressant effects of narcotics?
   a. Fentanyl
   b. Flumazenil
   c. Naloxone
   d. Methohexital

5. The first action that should be taken for a patient under sedation who demonstrates respiratory effort with an obstructed upper airway, an oxygen saturation of 90%, and no response to verbal command is:
   a. Flex the head and open the mouth
   b. Intubate the patient and provide positive pressure ventilation
   c. Provide stimulation and open the airway using head tilt and chin lift
   d. Call OR for immediate assistance from anesthesia
   e. Administer Naloxone in incremental doses

6. Patients who have an increase risk during sedation include:
   a. patients with a history of significant snoring
   b. patients with symptoms of orthopnea
   c. patients with a Class IV airway exam
   d. patients using CNS depressants
   e. all of the above

7. During procedural sedation, vital signs (heart rate, BP, respiratory rate, and oxygen saturation) should be documented prior to sedation and then:
   a. at least every 5 minutes (deep sedation)
   b. at least every 15 minutes (moderate sedation)
   c. at least every 30 minutes
   d. only when clinically indicated

8. According to this hospital’s policies and procedures, which of the following patients is ready to undergo a scheduled at 10:00am requiring procedural sedation?
   a. a six year old who finished apple juice at 6:00 am
   b. an infant who finished nursing at 7:00am
   c. a four year old who had orange juice at 7:00am
   d. an infant who finished a bottle of formula at 6:00am
9. All of the following are considered clear liquids except:
   a. chicken broth
   b. cola soft drink
   c. apple juice
   d. breast milk
   e. water

10. Which of the following medications would be dosed in 0.01mg/kg up to 20 kg for respiratory depression due to opioids?
   a. Flumazenil
   b. Morphine
   c. Diazepam
   d. Fentanyl
   e. Naloxone

11. A 12 year old patient received IV Fentanyl plus IV Midazolam for a procedure. At the end of the procedure she was somnolent with a respiratory rate of 8/minute. Naloxone 0.1mg was administered. The patient was alert and following commands within 10 minutes, with a respiratory rate of 18/minute. At this point the patient would be able to bypass any further monitoring as long as a responsible adult drove her home.
   a. True
   b. False

12. When benzodiazepines are used alone there is no risk of respiratory depression or upper airway obstruction?
   a. True
   b. False

13. Which of the following is true concerning the use of oral airways?
   a. they are most useful when the patient is still responsive
   b. they are sized measuring from the front of the teeth to the angle of the mandible
   c. nosebleed is a risk associated with placement
   d. there are no infant sizes available

14. Which of the following is an indicator of moderate sedation?
   a. unresponsiveness to verbal stimulation
   b. slowing of the heart rate
   c. unresponsiveness to physical stimuli
   d. slurred speech
IF REQUESTING DEEP SEDATION PRIVILEGES, PLEASE RESPOND TO THE FOLLOWING TEST QUESTIONS:

15. All of the following are monitoring requirements for the sedated patient EXCEPT:
   a. blood pressure
   b. capillary refill
   c. pulse oximetry
   d. respiratory rate

16. What equipment must be used or available for patient monitoring during procedure related sedation?
   a. hospital code blue cart
   b. defibrillator
   c. functional self-inflating bag and mask system
   d. all of the above

17. What parameter must be monitored continuously during sedation:
   a. state of consciousness
   b. pulse oximetry
   c. blood pressure
   d. cardiac output

18. The first and most important action when a patient starts to vomit during a procedure is to:
   a. apply restraints
   b. give supplemental O2
   c. give a reversal agent
   d. reposition to lateral decubitus

19. The first response for an obstructed airway is to:
   a. suction the patient
   b. intubate the patient
   c. insert an oral airway
   d. perform a chin lift/neck extension

20. Which of the following statements about opioids are apnea is true?
    a. responsive patients can become apneic, especially with rapid intravenous administration of opioids
    b. apnea is an unlikely, uncommon adverse reaction
    c. apnea doesn’t usually lead to cardiac arrest
    d. apnea doesn’t occur, since the main effect of opioids is analgesia

21. Which of the following statements are true?
    a. naloxone can be used to reverse narcotic overdose.
    b. flumazenil can be used to reverse narcotic overdose.
    c. flumazenil can be used to reverse ketamine overdose.
    d. naloxone can be used to reverse barbiturate overdose.

22. Naloxone has a long half-life with little chance of renarcotization when used for opiate-induced respiratory depression.  TRUE  FALSE

23. When administering sedation in pediatric patients, it is important to administer a large, single dose of the agent(s) for rapid effectiveness  TRUE  FALSE

24. Geriatric patients have an increased requirement for sedative/analgesic agents  TRUE  FALSE
Risk factors that are most consistently associated with a difficult airway are:

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>25. obesity</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
</tr>
<tr>
<td>26. decreased head and neck movement</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
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<tr>
<td>27. receding mandible</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
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<tr>
<td>28. reduced jaw movement</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
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<tr>
<td>29. protruding teeth</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
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<tr>
<td>30. history of sleep apnea</td>
<td><strong>TRUE</strong></td>
<td><strong>FALSE</strong></td>
</tr>
</tbody>
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Print Name: ___________________________  Sign Name: ___________________________________

Date: _____________  Score for Moderate: ________/14  Score for Deep Sedation: ________/30