Study Plan 2020-2021

For applicants sitting for the exam between July 1, 2020 and June 30, 2021

References Cited in This Plan:


AORN Position Statements and endorsed documents are found at
http://www.aorn.org/guidelines/clinical-resources/position-statements

NOTE: Bolded items appear in multiple subject areas
Subject Area 1: Pre/Postoperative Patient Assessment and Diagnosis 12%

Primary General Readings:

*Alexander’s Care of the Patient in Surgery*: Chapters 1, 2, 30

*Berry and Kohn’s Operating Room Technique*: Chapters 2, 3, 11, 21

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<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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<tbody>
<tr>
<td>3: Review relevant patient data</td>
<td>Allergies, diagnostic studies, laboratory results, medical history, surgical history, NPO status</td>
<td>AORN Guidelines for • Local Anesthesia, pp. 430-432 • Moderate Sedation, pp. 520-524 B&amp;K: Chapter 22</td>
</tr>
<tr>
<td>4: Use age and culturally appropriate health assessment techniques</td>
<td>Age appropriate, cultural competence, interview, observation</td>
<td>AORN Position Statement: Care of the Older Adult in Perioperative Settings Alexander’s: Chapters 26, 27 B&amp;K: Chapters 8,9; Chapter 21, p. 368</td>
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<tr>
<td>Step</td>
<td>Description</td>
<td>Details</td>
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</table>
| 6    | Conduct an individualized physical assessment | Age-appropriate, anatomy & physiology, assessment, body piercings, cognitive level, **diagnostic studies**, documentation, **laboratory results**, mobility, **NPO status**, **nursing process**, nutrition, pathophysiology, physical assessment, skin integrity, vital signs | AORN Guidelines for:  
- Information Management, p. 375; 377-378  
- Moderate Sedation/Analgesia, pp. 533-536; 548-549  
- Local Anesthesia: 444-446  
- Safe Patient Handling, pp. 841-845  
Alexander’s: Chapter 5, p. 112; Chapter 6, p. 160; Chapters 26, 27; Appendix A  
B&K: Chapters 7, 8, 9, 25 |
| 7    | Obtain a focused assessment relevant to the procedure | Aldrete score, neurological assessment | AORN Guideline: Positioning, pp. 653-654  
Alexanders: Chapter 21, pp. 778-780; Chapter 26, p. 1053  
B&K, Chapter 11, pp. 192-194 |
| 8    | Perform a pain assessment | Pain measurement techniques | Alexander’s: Chapters 5, 10, 26, 27  
B&K: Chapters 8, 9, 30 |
| 9    | Formulate nursing diagnoses | NANDA, **nursing diagnosis**, PNDS | AORN Guideline: Information Management, pp. 363-364  
AORN Endorsed Document: ANA Position Statement on Inclusion of Recognized Terminologies within HER and other HIT Solutions  
AORN Guideline: Information Management, pp. 363-365 |
| 10   | Confirm advance directive status and/or DNR status | Advance directive, DNR | AORN Position Statement: Perioperative Care of Patients with Do-Not-Resuscitate Orders |
| 11   | Conduct patient and family teaching as appropriate for procedure | Teaching and learning theories | Alexander’s: Chapter 10, p. 284; Chapter 26, p. 1009-1010  
B&K: Chapter 21, pp. 370-371 |
Subject Area 2: Individualized Plan of Care Development and Expected Outcome Identification 8%

**Primary General Readings:**

*Alexander’s Care of the Patient in Surgery*: Chapter 1; Unit II: Surgical interventions  
*Berry and Kohn’s Operating Room Technique*: Chapters 2, 7, 21

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<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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<tbody>
<tr>
<td>1: Identify measurable patient outcomes across the continuum of care</td>
<td>Outcome</td>
<td>Alexander’s: Chapter 10, pp. 263, 282</td>
</tr>
<tr>
<td>2: identify specific interventions for each nursing diagnosis to achieve expected outcomes</td>
<td>Disease processes, <strong>NANDA</strong>, <strong>nursing diagnoses</strong>, <strong>nursing process</strong></td>
<td>AORN Guideline: Information Management, pp. 363-364</td>
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<td>AORN Endorsed Document: ANA Position Statement on Inclusion of Recognized Terminologies within HER and other HIT Solutions</td>
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<td>AORN Guideline: Information Management, pp. 363-365</td>
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<tr>
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<td>Alexander’s: Chapter 1, pp. 4-5</td>
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<tr>
<td>3: Ensure care plan addresses specific patient considerations</td>
<td>Age-specific, <strong>behavioral responses</strong>, community resources, <strong>cultural/ethnic influences</strong>, disease processes, <strong>diversity</strong>, <strong>family patterns</strong>, institutional resources, legal/ethical standards, patient rights/responsibilities, perioperative safety, <strong>physiological responses</strong>, <strong>spirituality</strong></td>
<td>AORN Guidelines for:</td>
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<td></td>
<td>• Energy-Generating Devices, pp. 102-105; 498-499</td>
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<td>• Information Management, pp. 360-363; 378-384</td>
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<td>• Radiation Safety, pp. 719-724; 752</td>
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<td>• Positioning the Patient, pp. 641</td>
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<td>• Safe Patient Handling, pp. 811-812</td>
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<td>AORN Position Statement: Patient Safety</td>
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<td>AORN Endorsed Document: Free from Harm: Accelerating Patient</td>
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</tbody>
</table>
Subject Area 3: Intraoperative Activities 34% Total

Subject Area 3.a. Patient Care and Safety 25%

**Primary General Readings:**

*Alexander’s Care of the Patient in Surgery*: Unit II: Surgical interventions

*Berry and Kohn’s Operating Room Technique*: Section 12: Surgical Specialties

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<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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</thead>
</table>
| 1: Maintain patient and personnel safety by monitoring environmental hazards | Chemical, critical thinking skills, electrical, fire, expected outcomes, hazardous waste | AORN Guidelines:  
- Energy-Generating Devices  
- Environment of Care  
- Radiation Safety  
- Surgical Smoke  
AORN Position Statements for:  
- Distraction and Noise in the Perioperative Practice Setting |
<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
<th>Relevant Guidelines and Chapters</th>
</tr>
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<tbody>
<tr>
<td>2</td>
<td>2: Provide comfort measures to optimize behavioral responses to the surgical procedure</td>
<td><strong>Expected outcomes</strong>, psychological, spiritual, <strong>surgical procedure</strong>&lt;br&gt; AORN Guidelines:&lt;br&gt; - Complementary Care Interventions&lt;br&gt; Alexander’s: Chapter 30&lt;br&gt; B&amp;K: Chapter 7, pp. 94-97</td>
</tr>
<tr>
<td>3</td>
<td>3: Prepare the surgical site</td>
<td><strong>Anatomy and physiology, infection control, privacy, skin antisepsis</strong>&lt;br&gt; AORN Guidelines:&lt;br&gt; - Positioning the Patient&lt;br&gt; - Patient Skin Antisepsis&lt;br&gt; Alexander’s: Chapter 4, pp. 98-100&lt;br&gt; B&amp;K: Chapter 26, pp. 499-506</td>
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<tr>
<td>4</td>
<td>4: Ensure the selection of appropriate procedure-specific barrier materials</td>
<td><strong>Infection control</strong>&lt;br&gt; AORN Guidelines:&lt;br&gt; - Product Evaluation&lt;br&gt; Alexander’s: Chapter 4, pp. 100-102&lt;br&gt; B&amp;K: Chapter 26, pp. 506-509</td>
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<td>5</td>
<td>5: Evaluate patient response to pharmacological agents</td>
<td><strong>Pain management, pharmacology</strong>&lt;br&gt; AORN Guidelines for:&lt;br&gt; - Care of the Patient Receiving Moderate Sedation/Analgesia&lt;br&gt; - Medication safety&lt;br&gt; - Ambulatory supplement: Medication safety&lt;br&gt; - Care of the patient receiving local anesthesia&lt;br&gt; AORN Endorsed Document: CDC Position Statement on Single-Dose/Single Use Vials&lt;br&gt; Alexander’s: Chapters 5,10&lt;br&gt; B&amp;K: Chapter 23</td>
</tr>
<tr>
<td>6</td>
<td>6: Assist with anesthesia management</td>
<td><strong>Agents, cricoid pressure, intubation, monitors, pharmacology</strong>&lt;br&gt; AORN Guidelines for:&lt;br&gt; - Care of the Patient Receiving Moderate Sedation/Analgesia&lt;br&gt; - Care of the patient receiving local anesthesia&lt;br&gt; Alexander’s: Chapter 5&lt;br&gt; B&amp;K: Chapter 24</td>
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<tr>
<td>7</td>
<td>7: Control environmental factors</td>
<td><strong>Air exchange, humidity, infection</strong>&lt;br&gt; AORN Guidelines for:&lt;br&gt; - Design and Maintenance&lt;br&gt; - Environmental Cleaning</td>
</tr>
</tbody>
</table>
| Control, noise, standard precautions, temperature, traffic, transmission-based precautions | • Transmission-Based Precautions  
• Ambulatory Supplement: Transmission-Based Precautions  
AORN Position Statements: HVAC Interim Guidance Statement  
AORN Endorsed Documents:  
• ANA Position Statement on Immunizations  
• Joint Commission- OR Relative Humidity  
Alexander’s: Chapter 4, pp. 54-70  
B&K: Chapters 10, 12; Chapter 15, pp. 250, 254-256 |
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<tr>
<td><strong>8: Maintain a sterile field using aseptic technique</strong></td>
<td>Aseptic technique, infection control</td>
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</tbody>
</table>
| **AORN Guidelines for:** | • Surgical Attire  
• Hand Hygiene  
• Sterile Technique  
Alexander’s: Chapter 4, pp. 85-98  
B&K: Chapter 2, p.22; Chapters 15, 16 |
| **9: Utilize equipment according to manufacturer’s recommendations** | Instruments, manufacturer’s instructions, supplies |
| **AORN Guidelines:** | • Product Evaluation. p. 711  
• Sterilization, pp. 963-964  
B&K: Chapter 2, p. 23 |
| **10: Maintain the dignity and privacy of the patient** | Dignity, patient rights, privacy |
| **AORN Guidelines:** | • Positioning, pp. 6633-634  
Alexander’s: Chapter 2, pp. 31-32  
B&K: Chapter 3, pp. 39-40 |
| **11: Protect patients’ rights through advocacy** | Patient advocacy, patient rights, professional standards of care |
| **Alexander’s:** | Chapter 1, pp. 1-2; Chapter 2, p. 31  
B&K: Chapter 2, p. 16 |
| **12: Verify that specimens are prepared, labeled, and transported correctly** | Handling, regulatory guidelines |
| **AORN Guidelines:** | • Specimen Management  
• Autologous Tissue Management  
Alexander’s: Chapter 2, pp. 26-27  
B&K: Chapter 22 |
| **13: Verify that the correct implants are available** | Regulatory guidelines, tracking |
| **Alexander’s:** | Chapter 22, p. 817  
B&K: Chapter 28, pp. 553-558 |
<p>| <strong>14: Verify that the implants are correctly prepared</strong> | Handling, sterilization |
| <strong>AORN Guidelines:</strong> | • Sterilization, p. 969 |</p>
<table>
<thead>
<tr>
<th>Task</th>
<th>Material</th>
<th>Resources</th>
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<tbody>
<tr>
<td>15: Prepare explants for final disposition</td>
<td>Handling, regulatory guidelines, sterilization</td>
<td>Alexander’s: Chapter 22, p. 817</td>
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<td></td>
<td></td>
<td>B&amp;K: Chapter 28, pp. 553-558</td>
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<td>16: Label solutions, medications, and medication containers</td>
<td>Labeling, management, rights</td>
<td>Alexander’s: Chapter 2, p. 29</td>
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<td>B&amp;K: Chapter 2, p. 24; Chapter 23: pp. 407-409</td>
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<td>17: Perform appropriate surgical counts</td>
<td>Surgical counts</td>
<td>Alexander’s: Chapter 2, pp. 25-26</td>
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<td>B&amp;K: Chapter 2, pp. 22-23; Chapter 25, 471-475; Chapter 31, p. 606</td>
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<td>18: Perform universal protocol</td>
<td>Preoperative patient preparation activities, pre-procedure identification,</td>
<td>Alexander’s: Chapter 2, pp. 17-18; 23-25</td>
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<td>pre-procedure verification, regulatory guidelines, site marking, time</td>
<td>B&amp;K: Chapter 2, pp. 20-22</td>
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<td>19: Anticipate the need for intraoperative blood transfusion/salvage</td>
<td>Blood salvage, transfusion,</td>
<td>Alexander’s: Chapter 12, pp. 349-350; Chapter 28, pp. 1102-1104</td>
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<td>B&amp;K: Chapter 8, p. 133; Chapter 31, pp. 608-615; Chapter 44, pp. 915-916.</td>
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<td>20: Utilize proper body mechanics</td>
<td>Body mechanics, ergonomics</td>
<td>AORN Guidelines:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Safe Patient Handling</td>
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<td>B&amp;K: Chapter 13, pp. 209-211</td>
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<tr>
<td>21: Perform proper patient positioning</td>
<td>Anatomy and physiology; principles of positioning</td>
<td>AORN Guidelines:</td>
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<tr>
<td></td>
<td></td>
<td>• Positioning the Patient</td>
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<td></td>
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<td>Alexander’s: Chapter 6</td>
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<td>B&amp;K: Chapter 26</td>
</tr>
</tbody>
</table>
22: Intervene with impaired/disruptive behavior in patients, family members, and/or the perioperative team

Conflict management


Alexander’s: Chapter 3, pp. 51-52.
B&K: Chapter 1, pp. 11-12; Chapter 6, pp. 89-90

23: Identify wound classifications

**Principles of wound healing; wound classification**

AORN Guidelines:
- Sterile Technique, p. 948

Alexander’s: Chapter 9, pp. 250
B&K: Chapter 29, pp. 560-562


24: Maintain wound dressings

Drains, dressings, lines; principles of wound healing

Alexander’s: Chapter 9
B&K: Chapter 29, pp. 574-579

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**Subject Area 3.b. Management of Intraoperative Activities 9%**

**Primary General Readings:**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
</tr>
</thead>
</table>
| 1: Acquire needed equipment, supplies, and personnel | Room preparation | Alexander’s: Chapter 1, p. 12  
B&K: Chapter 25 |
| 2: Assess expiration date and package integrity of products | Packaging, sterilizing | AORN Guidelines:  
- Sterile Technique, p. 935  
Alexander’s: Chapter 4, p. 84  
B&K: Chapter 25: pp. 453-454 |
| 3: Implement cost-containment measure | Cost containment | AORN Guidelines for:  
- Product Evaluation  
Alexander’s: Chapter 4, p. 84  
B&K: Chapter 17, pp. 297-299; Chapter 25, pp. 477-478 |
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</table>
| 4: Participate in product evaluation/selection | Product evaluation | AORN Guidelines for:  
- Product Evaluation  
B&K: Chapter 6, p. 92 |
www.aorn.org, Clinical Resources, Code of Ethics (Member only).  
ANA. *Scope of practice*. Retrieved July 11, 2020 from  
B&K: Chapter 2, p. 25 |
| 6: Delegate tasks to appropriate personnel according to regulatory agencies and facility policies and procedures | Delegation, management technique, scope of practice | Alexander’s: Chapter 1, p. 8  
B&K: Chapter 6, p. 89  
https://www.ncsbn.org/1625.htm |
| 7: Supervise visitors | Family, non-OR personnel, students | AORN Position Statements:  
- Allied Health Care Providers and Support Personnel in the Perioperative Setting  
- Value of Clinical Learning Activities in the Periop Setting in Undergraduate Nursing Curricula  
- Responsibility for Mentoring  
B&K: Chapter 1, pp. 2-5 |
https://www.aorn.org/guidelines/clinical-resources/position-statements  
B&K: Chapter 6, p. 92 |
| 9: Practice environmental stewardship | Go green, minimize waste | AORN Guidelines:  
- Product Evaluation, p. 711  
- Sterilization, pp. 980-981  
AORN Position Statements:  
- Environmental Responsibility  
- Healthy Perioperative Practice |
Subject Area 4: Communication and Documentation 11%

**Primary General Readings:**

*AORN Guidelines*: Information Management; Team Communication  
*Alexander’s Care of the Patient in Surgery*: Chapter 10  
*Berry and Kohn’s Operating Room Technique*: Chapter 30

<table>
<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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</thead>
</table>
| 1: Maintain accurate patient records/documentation of all care provided | Documentation tools, downtime forms, Electronic Health Record (EHR) nursing interventions, patient data, unusual occurrences, specimens, medications | AORN Guidelines:  
• Information Management  
B&K: Chapter 3, pp. 45-48 |
| 2: Collaborate with the interdisciplinary healthcare team | Interdisciplinary plan of care, interdisciplinary services for care coordination, medical reconciliation, nutrition, referrals, social work, transportation, Universal Protocol, visiting nurse, wound care | AORN Guidelines:  
• Team Communication  
Alexander’s: Chapter 2, pp. 21, 22, 24  
B&K: Chapter 25  
| 3: Communicate current patient status to the interdisciplinary healthcare providers | Allergies, communication techniques, critical lab values, implants/implantable devices, medical condition, medications | AORN Guidelines:  
• Team Communication  
Alexander’s: Chapter 1, p. 9; Chapter 2, pp. 21-22  
B&K: Chapter 1, pp. 11-12; Chapter 6, pp. 77-78 |
|   | Communication techniques, hand-offs | AORN Guidelines:  
- Team Communication, pp. 1041, 1047-1052  
- Alexander’s: Chapter 2, pp. 22-23; Chapter 10, pp. 261-262; Chapter 26, pp. 1004-1005; Chapter 27, p. 1156  
- B&K: Chapter 1, p. 11; Chapter 6, pp. 77-78; Chapter 25, pp. 470-471; Chapter 41, p. 839 |
|---|---|---|
| 5: Document perioperative education | Interviewing techniques, patient education techniques | AORN Guideline:  
- Care of the Patient Receiving Local Anesthesia, pp. 437-438  
- Medication Safety, pp. 457-458  
- Moderate Sedation, pp. 534-535  
- Alexander’s: Chapter 10, p. 284; Chapter 26, pp. 1009-1010; patient education is included in specialty-specific chapters, Unit II  
- B&K: Chapter 21, p. 368-371 |
| 6: Document post discharge follow up communication provided to patient | Postoperative complications, postoperative follow-up, regulatory guidelines | Alexander’s: Chapter 2, p. 18; each chapter in Unit II has discharge planning information pertinent to that specialty  
- B&K: Chapter 30, p. 589 |
| 7: Document preoperative assessment | Neuro checks, skin, site-surgery checklist | AORN Guidelines:  
- Information Management, pp. 360-361  
- Alexander’s: Chapter 1, p. 3-5; Chapter 26, pp. 1001-1003; Chapter 30, p. 1156  
- B&K: Chapter 21, pp. 368-370 |
| 8: Document transfer of care | Transfer of care criteria | Alexander’s: Chapter 10  
- B&K: Chapter 30 |
| 9: Document appropriate measures to prepare and track implantable tissue and other trackable items | Implant records | AORN Guidelines:  
- Autologous Tissue Management, pp. 27-28  
- Alexander’s: Chapter 20, pp. 683-684  
- B&K: Chapter 36, p. 737 |
**Subject Area 5: Infection Prevention and Control 16%**

**Primary General Readings:**

*AORN Guidelines:* Design and Maintenance; Environmental Cleaning; Environment of Care; Flexible Endoscopes; High-Level Disinfection; Instrument Cleaning; Packaging Systems; Sterilization  
*Alexander’s Care of the Patient in Surgery:* Chapter 4

<table>
<thead>
<tr>
<th>Item</th>
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<th>Source(s)</th>
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| 10: Evaluate patient status to facilitate transfer to the next level of care | Home, ICU, PACU | AORN Guidelines:  
- Care of the Patient Receiving Moderate Sedation/Analgesia, pp. 531-534  
 Alexander’s: Chapter 10  
 B&K: Chapter 30 |
| 11. Implement effective solutions to identified patient communication barriers | Barriers, *communication techniques* | Alexander’s: Chapter 16, p. 534; Chapter 30, p. 1156  
 B&K: Chapter 7, pp. 98-99; Chapter 41, p. 839 |
| 12: Provide information about the patient according to HIPAA guidelines | Confidentiality, regulatory guidelines, status, updates | AORN Guideline:  
 Information Management, pp. 370-373  
 AORN Endorsed Document: ANA Position Statement on Inclusion of Recognized Terminologies within EHR  
 B&K: Chapter 2, p. 18 |
| 13: Utilize read-back for verbal orders | *Communication techniques*, read back, verbal orders | AORN Guidelines:  
- Information Management, p. 368 |
| 14: Document surgical wound classification | Wound classification | AORN Guidelines:  
- Sterile Technique, p. 948  
 Alexander’s: Chapter 9, pp. 250  
 B&K: Chapter 29, pp. 560-562  
<table>
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<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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</table>
| 1: Ensure proper environmental cleaning for spills, room turnover, and/or terminal cleaning | Environmental cleaning, room turnover, spills, terminal cleaning | AORN Guidelines for:  
  - Environmental Cleaning  
AORN Position Statement:  
Alexander’s: Chapter 4, pp. 103-104  
B&K: Chapter 12 |
| 2: Select appropriate method for cleaning, disinfecting, packaging, sterilizing, transporting, and/or storage of instruments and reusable goods | Professional and regulatory standards (e.g., AORN Guidelines, OSHA, Association for the Advancement of Medical Instrumentation (AAMI), Association for Professionals in Infection Control (APIC))  
Principles of cleaning and disinfection of instruments/reusable goods  
Principles of packaging and sterilizing of instruments and reusable goods  
Spaulding Classification | See Primary Readings  
AORN Guidelines:  
  - Flexible Endoscopes, pp. 217-218  
AORN Position Statement:  
  - Immediate Use Steam Sterilization  
Alexander’s: Chapter 4, p. 74; Chapter 8, pp. 210-211  
B&K: Chapter 15, p. 249  
AAMI. [https://www.aami.org/](https://www.aami.org/)  
APIC. [https://apic.org/](https://apic.org/) |
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<th>Step</th>
<th>Instruction</th>
<th>Reference</th>
<th>AORN Guidelines</th>
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<tr>
<td>3</td>
<td>Select appropriate methods for transporting and storage of single-use items</td>
<td>Principles of transporting and storage of instruments, reusable goods, and single-use supplies</td>
<td>Patient skin antisepsis, p. 591; Sterilization, pp. 964-966</td>
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<td>Alexander’s: Chapter 4, pp. 84-85; Chapter 8, pp. 211-212</td>
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<td>B&amp;K: Chapter 17, pp. 297-299; Chapter 18, pp. 321-322</td>
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<tr>
<td>4</td>
<td>Maintain appropriate documentation for sterilization and disinfection</td>
<td>Documentation</td>
<td>High-Level Disinfection, pp. 317-318; Sterilization, pp. 982-983</td>
</tr>
<tr>
<td>5</td>
<td>Ensure proper handling and disposition of hazardous materials</td>
<td>Chemo drugs, Hazardous materials, radioactive materials</td>
<td>Environment of Care, pp. 134-139; Instrument Cleaning, pp. 424-430; Radiation Safety, p. 742</td>
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<td>Alexander’s: Chapter 3, pp. 45-46</td>
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<td>B&amp;K: Chapter 7, pp. 110-111; Chapter 13, pp. 220-222</td>
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<td>6</td>
<td>Ensure proper handling and disposition of biohazard materials</td>
<td>Biohazard materials, blood, Creutzfeldt-Jacob Disease, microbiology and infection control</td>
<td>Environmental Cleaning, pp. 162-164; Instrument Cleaning, pp. 410-416</td>
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<td>Alexander’s: Chapter 4, pp. 62-66</td>
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<td>B&amp;K: Chapter 13, pp. 222-224; Chapter 14, pp. 240-241</td>
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</table>
Subject Area 6: Emergency Situations 10%

Primary Chapter Readings:

*Alexander’s Care of the Patient in Surgery*: Chapter 28, Trauma Surgery

*Berry and Kohn’s Operating Room Technique*: Chapter 13, Potential sources of injury to the caregiver and the patient; Chapter 31, Potential Perioperative Complications
<table>
<thead>
<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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<tbody>
<tr>
<td>1: Identify emergency situations</td>
<td>Interventions, pathophysiology</td>
<td>See Primary Readings</td>
</tr>
<tr>
<td>2: Perform nursing interventions for malignant hyperthermia (MH)</td>
<td>Interventions, pathophysiology</td>
<td>Alexander’s: Chapter 5, pp. 138-139; Chapter 26, p. 1008 B&amp;K: Chapter 31, pp. 617-619; MHAUS website: <a href="https://www.mhaus.org/">https://www.mhaus.org/</a></td>
</tr>
</tbody>
</table>
| 3: Perform nursing interventions for anaphylaxis | Interventions, pathophysiology | AORN Guideline:  
- Environment of care, pp. 132-134  
- Alexander’s: Chapter 3, pp. 48-49; Chapter 4, p. 95  
- B&K: Chapter 13, pp. 24-225 |
| 4: Perform nursing interventions for cardiac arrest | Interventions, pathophysiology | AORN Guidelines:  
- Minimally Invasive Surgery, pp. 492; 506  
- Positioning, p. 681  
- Transmission-Based Precautions, p. 1075  
- B&K: Chapter 31, pp. 599-606 |
| 5: Perform nursing interventions for trauma | Interventions, pathophysiology | Alexander’s: Chapter 26, pp. 1051-1053; Chapter 28  
- B&K: Chapter 3, pp. 51-52;  
- Chapter 6, p. 80; Chapter 7, pp. 113-117; Chapter 8, p. 119;  
- Section 12, Surgical Specialties contains a section on trauma for each specialty |
| 6: Perform nursing interventions for hemorrhage | Interventions, pathophysiology | Alexander’s: Chapter 21, p. 766;  
- Chapter 25, p. 958; Chapter 28, pp. 1097-1105; Chapter 29, p. 1142  
- B&K: Chapter 31, pp. 608-616 |
| 7: Perform nursing interventions for local anesthetic systemic toxicity (LAST) | Interventions, pathophysiology | AORN Guidelines:  
- Local Anesthesia, pp. 434-437  
- Alexander’s: Chapter 5, p. 131  
- B&K: Chapter 24, pp. 434-435 |
| 8: Function as a member of the interdisciplinary team | Roles of the interdisciplinary team members | See Primary Readings  
AORN Guidelines:  
- Team Communication |
<table>
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<tr>
<th>Topic</th>
<th>Key Words</th>
<th>Additional Readings</th>
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<tr>
<td>2: Seek assistance for recognized personal limitations</td>
<td>Responsibilities regarding impaired and/or</td>
<td>B&amp;K: Chapter 1, pp. 10-12; Chapter 2, p. 25</td>
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Subject Area 7: Professional Accountabilities 6%

**General Chapter Readings:**


*Alexander’s Care of the Patient in Surgery*: Chapter 1

*Berry and Kohn’s Operating Room Technique*: Chapters 2, 4, 6
| disruptive behavior in interdisciplinary healthcare team | disruptive behavior (patient/family, interdisciplinary healthcare team members). | AORN Endorsed Document: ANA Position Statement on Incivility, Bullying, and Workplace Violence
Alexander’s: Chapter 3, pp. 51-52.
B&K: Chapter 1, pp. 11-12; Chapter 6, pp. 89-90 |
|---|---|---|
| 4: Uphold ethical and professional standards | Patient rights, regulatory standards (e.g., AORN Guidelines, OSHA, ANA Code of Ethics for Nurses with Explications for Perioperative Nurses, State Nurse Practice Act) | B&K: Chapter 2, pp. 17-20; Chapter 3, pp. 49-52
| 5: Utilize resources for personal growth | Resources for professional growth and personal accountability | See Primary General Readings
AORN Position Statement: Perioperative Nursing Certification
Alexander’s: Chapter 1, p. 12
B&K: Chapter 4, p. 54; 56-58 |
| 6: Participate in quality improvement activities | Evidence-based practice principles, research principles, performance improvement | Alexander’s: Chapter 1, pp. 9-12
B&K: Chapter 2, pp. 26,34; Chapter 6, p. 85-86 |
| 7: Participate in interdisciplinary teams | Committees, principles of shared governance, staff education | AORN Guidelines:
- Team Communication
AORN Position Statements:
- Orientation of the Registered Nurse and Surgical Technologist to the Perioperative Setting
B&K: Chapter 1; Chapter 6, pp. 76-77; pp. 83-86 |
| 8: Participate in professional organizations | Alexander’s: Chapter 2, p. 18 |
| AORN. [www.aorn.org](http://www.aorn.org) |
| ASPAN. [www.aspan.org](http://www.aspan.org) |
| APIC. [www.apic.org](http://www.apic.org) |
| Association for Nursing Professional Development. [www.anpd.org](http://www.anpd.org) |
| IAHCSMM. [https://www.iahcsmm.org/](https://www.iahcsmm.org/) |