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**Nursing**

**CFPN**

*CCI Certified Foundational Perioperative Nurse*

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### **Question: 1**

In the management of personnel, services, and materials, the nurse's responsibility includes:

- A. Disregarding the principles of delegation and supervision.
- B. Assigning tasks to untrained individuals for efficiency.
- C. Neglecting staff education and professional development.
- D. Ensuring an adequate supply of medications and equipment.

Answer: D

Explanation: In the management of personnel, services, and materials, the nurse's responsibility includes ensuring an adequate supply of medications and equipment. This involves maintaining inventory, restocking supplies, and coordinating with other healthcare professionals to meet the patient's needs.

### **Question: 2**

Which of the following actions should the perioperative nurse prioritize during the preoperative patient assessment?

- A. Administering preoperative medications.
- B. Conducting a comprehensive physical examination.
- C. Reviewing the patient's medical history.
- D. Ensuring the availability of necessary surgical equipment.

Answer: C

Explanation: Prioritizing the review of the patient's medical history is crucial during the preoperative patient assessment. It helps in identifying any preexisting medical conditions, allergies, or other factors that may affect the surgical procedure or anesthesia administration. This information guides the

development of an individualized plan of care and ensures the patient's safety during the perioperative period.

### **Question: 3**

Which of the following is a primary responsibility of the perioperative nurse in managing personnel, services, and materials?

- A. Coordinating the scheduling of surgical procedures.
- B. Ensuring the availability of sterile instruments and supplies.
- C. Training surgeons on the latest surgical techniques.
- D. Managing the hospital's budget and financial resources.

Answer: B

Explanation: Managing personnel, services, and materials in perioperative nursing involves various responsibilities. One of the primary responsibilities is ensuring the availability of sterile instruments and supplies necessary for surgical procedures. This includes proper inventory management, sterilization processes, and coordination with the central supply department to maintain a sufficient stock of sterile items.

### **Question: 4**

Which of the following actions promotes patient care and safety in the perioperative setting?

- A. Allowing unauthorized personnel to access the sterile field.
- B. Failing to verify the patient's identity and surgical site.
- C. Disregarding the patient's informed consent.
- D. Performing hand hygiene before and after patient contact.

Answer: D

Explanation: Performing hand hygiene before and after patient contact is crucial for promoting patient care and safety in the perioperative setting. Hand hygiene helps prevent the spread of infection and protects both the patient and the healthcare providers.

### Question: 5

Which of the following is a characteristic of emergency situations in the perioperative setting?

- A. They rarely require immediate intervention.
- B. They can be effectively managed by non-medical personnel.
- C. They are predictable and can be prevented with proper planning.
- D. They may involve life-threatening events requiring rapid response.

Answer: D

Explanation: Emergency situations in the perioperative setting can occur unexpectedly and may involve life-threatening events. These situations require immediate intervention and a rapid response to ensure the safety and well-being of the patient. Perioperative nurses should be trained in emergency protocols and possess the necessary skills to effectively manage such situations.

### Question: 6

Which of the following is a recommended practice for infection prevention and control in the perioperative environment?

- A. Regularly cleaning and disinfecting the operating room surfaces.
- B. Wearing gloves only during invasive procedures.
- C. Reusing surgical instruments after thorough cleaning.

D. Allowing visitors to enter the operating room during surgery.

**Answer: A**

**Explanation:** Infection prevention and control are critical aspects of perioperative nursing. Regularly cleaning and disinfecting the operating room surfaces is a recommended practice to maintain a clean and sterile environment. This includes thorough cleaning of surfaces and equipment between procedures and following established protocols for disinfection and sterilization to minimize the risk of healthcare-associated infections.

**Question: 7**

Which of the following best describes the concept of patient advocacy in perioperative nursing?

- A. Ensuring patient comfort during the intraoperative phase.
- B. Protecting the patient's rights and promoting their best interests.
- C. Educating the patient about postoperative care instructions.
- D. Coordinating the activities of the surgical team.

**Answer: B**

**Explanation:** Patient advocacy is a fundamental responsibility of perioperative nurses. It involves protecting the patient's rights, ensuring informed consent, respecting their autonomy, and promoting their best interests throughout the perioperative process. Patient advocacy requires effective communication, ethical decision-making, and a commitment to providing safe and quality care.

**Question: 8**



During an emergency situation in the perioperative setting, the nurse's priority is to:

- A. Panic and alert others about the emergency.
- B. Ignore the emergency and continue with routine tasks.
- C. Evacuate the entire healthcare facility immediately.
- D. Follow established protocols and initiate appropriate interventions.

Answer: D

Explanation: During an emergency situation in the perioperative setting, the nurse's priority is to follow established protocols and initiate appropriate interventions. This includes providing immediate care to the patient, ensuring safety, and effectively communicating with the healthcare team.

### Question: 9

Which of the following is an essential aspect of effective communication in the perioperative setting?

- A. Withholding information from the patient to prevent anxiety.
- B. Documenting important information accurately and promptly.
- C. Using medical jargon that the patient may not understand.
- D. Avoiding collaboration and teamwork with other healthcare providers.

Answer: B

Explanation: Documenting important information accurately and promptly is an essential aspect of effective communication in the perioperative setting. Accurate documentation ensures continuity of care, facilitates communication among healthcare providers, and promotes patient safety.

### Question: 10

Which of the following practices promotes infection prevention and control in the perioperative environment?

- A. Reusing single-use surgical instruments to reduce costs.
- B. Performing hand hygiene only when visibly soiled.
- C. Allowing visitors to enter the operating room during surgery.
- D. Properly cleaning and sterilizing surgical instruments.

Answer: D

Explanation: Properly cleaning and sterilizing surgical instruments promotes infection prevention and control in the perioperative environment. Sterilization procedures are essential to eliminate microorganisms and prevent surgical site infections.

### Question: 11

Which of the following is an appropriate action for a nurse to take during the preoperative patient assessment phase?

- A. Skip the physical examination if the patient appears healthy and asymptomatic.
- B. Administer preoperative medications without consulting the healthcare provider.
- C. Review the patient's medical history and identify any relevant allergies or chronic conditions.
- D. Disregard the patient's concerns about the surgery to maintain a professional demeanor.

Answer: C

**Explanation:** During the preoperative patient assessment phase, it is crucial for the nurse to review the patient's medical history and identify any relevant allergies or chronic conditions. This information helps in developing an individualized plan of care and ensures the patient's safety during the perioperative period.

### **Question: 12**

Which of the following is an example of a professional accountability for perioperative nurses?

- A. Advocating for patient preferences in surgical decision-making.
- B. Participating in research studies to advance perioperative care.
- C. Performing surgical procedures independently without supervision.
- D. Ensuring compliance with hospital policies and regulatory standards.

**Answer: D**

**Explanation:** Professional accountability is an important aspect of perioperative nursing practice. Ensuring compliance with hospital policies and regulatory standards is an example of professional accountability. Perioperative nurses are responsible for adhering to established protocols, guidelines, and legal requirements to provide safe and high-quality care to patients.

### **Question: 13**

Which of the following is an expected outcome identified during the development of an individualized plan of care for a postoperative patient?

- A. The patient will maintain stable vital signs throughout the postoperative period.



- B. The patient will develop a surgical site infection within 24 hours.
- C. The patient will experience severe pain for 48 hours after surgery.
- D. The patient will require prolonged immobilization after surgery.

Answer: A

Explanation: An expected outcome identified during the development of an individualized plan of care for a postoperative patient is that the patient will maintain stable vital signs throughout the postoperative period. Monitoring the patient's vital signs is essential for detecting any complications or changes in the patient's condition.

**Question: 14**

Which of the following is an example of an expected outcome in perioperative nursing?

- A. The patient will experience minimal pain during the surgical procedure.
- B. The patient will remain in the same position throughout the surgery.
- C. The patient will demonstrate proper hand hygiene techniques.
- D. The patient will be informed about the risks and benefits of surgery.

Answer: C

Explanation: Expected outcomes in perioperative nursing are specific goals that the patient is expected to achieve during the perioperative period. These outcomes are measurable and indicate the desired results of nursing interventions. In this case, proper hand hygiene techniques are an important aspect of infection prevention and control, and ensuring that the patient demonstrates this behavior is an expected outcome.

### Question: 15

During the intraoperative phase, which of the following is the responsibility of the perioperative nurse?

- A. Administering anesthesia.
- B. Performing the surgical procedure.
- C. Monitoring the patient's vital signs.
- D. Managing the sterile field.

Answer: C

Explanation: During the intraoperative phase, the perioperative nurse plays a critical role in monitoring the patient's vital signs. This includes assessing and recording parameters such as blood pressure, heart rate, respiratory rate, and oxygen saturation. Monitoring vital signs helps in identifying any changes or abnormalities that may require immediate intervention or adjustment of anesthesia or surgical procedures.

### Question: 16

During the intraoperative phase, the nurse's role includes:

- A. Administering anesthesia and performing surgical procedures.
- B. Monitoring the patient's vital signs and providing intraoperative care.
- C. Cleaning and sterilizing surgical instruments.
- D. Documenting the postoperative outcomes and recovery process.

Answer: B

Explanation: During the intraoperative phase, the nurse's role includes

monitoring the patient's vital signs, providing intraoperative care, and assisting the surgical team. The nurse ensures the patient's safety, advocates for the patient, and communicates important information to the healthcare team.

### **Question: 17**

Which of the following is an essential component of effective communication and documentation in perioperative nursing?

- A. Using medical jargon and abbreviations for concise documentation.
- B. Documenting only significant events or deviations from the standard procedure.
- C. Communicating critical information verbally without written documentation.
- D. Verifying and documenting the patient's identity before any procedure.

Answer: D

Explanation: Effective communication and documentation are vital in perioperative nursing to ensure patient safety and continuity of care. Verifying and documenting the patient's identity before any procedure is a crucial step in preventing patient misidentification and potential errors. This includes confirming the patient's identity using at least two patient identifiers (e.g., name, date of birth) and documenting this verification in the medical record.

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