

**MODERATE / DEEP SEDATION
COMPENTENCY EXAMINATION
FOR PHYSICIANS AND MID-LEVEL PROVIDERS**

Prior to taking this exam, the participant must have read the Network Policy 905 Moderate Sedation / Deep Sedation Policy and the Moderate Sedation Provider Course Module.

A passing score of 80% on this exam will be required to qualify for moderate sedation privileges.

Name

Department

Signature

Date

**If Attending Staff member return to:
If Mid-level Provider return to:**

**Attending Staff Office
1200 North State St., Room 1108
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Phone: 323-226-6225
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**If enrolled in a Resident Training Program,
Return completed test to:**

**Director of Specific Resident
Training Program**

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1. Which of the following are consistent with a state of moderate sedation?
 - A. A drug induced depression of consciousness which the patient response purposely to verbal commands.
 - B. No intervention is required to maintain a patent airway.
 - C. Spontaneous ventilation is maintain and adequate.
 - D. Cardiovascular function is usually not affected.
 - E. All of the above.

2. Prior to administering medication for attaining a state of moderate sedation/analgesia the practitioner **MUST** perform which of the following?
 - A. Obtain an informed consent in which the benefits, risk and alternatives of the procedure and moderate/deep sedation/analgesia are explained to the patient.
 - B. Examination of the patient's airway including documentation of a Mallampati classification.
 - C. Ensuring that the patient meet appropriate NPO status.
 - D. ASA risk classification is documented.
 - E. All of the above.

3. The monitoring equipment required for Moderate Sedation include all the following except:
 - A. Electrocardiogram (EKG) monitor
 - B. Blood pressure monitor
 - C. Temperature monitor
 - D. Pulse oximeter

4. A 43 year old female with Type II diabetes and hypertension is to undergo a colonoscopy examination. Both of her medical conditions are well controlled by diet and medications. Which of the following represents her ASA classification?
 - A. ASA I
 - B. ASA II
 - C. ASA III
 - D. ASA IV
 - E. ASA V

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5. The goals of moderate sedation include all of the following EXCEPT:
- A. Maintain unconsciousness.
 - B. Provide relief of pain.
 - C. Achieve control of the patient's physiologic parameters.
 - D. Maintain patient cooperation.
 - E. Provide relief of anxiety.
6. According to ASA guidelines regarding NPO status, a patient may ingest clear liquids up to 2 hours prior to receiving medication for moderate sedation. All of the following represents clear liquids EXCEPT:
- A. Water
 - B. Fruit juices without pulp
 - C. Carbonated beverages
 - D. Coffee with cream
 - E. Clear tea
7. Which of the following statements regarding the use of pulse oximetry is NOT TRUE?
- A. Pulse oximetry measures the amount of oxygen carried on hemoglobin in the arterial blood.
 - B. Pulse oximetry promptly and reliably identifies hypoxemia more quickly than clinical signs such as cyanosis or disorientation.
 - C. Pulse oximetry is an excellent measurement of a patient's ventilation.
 - D. A saturation value of 95% is approximately equal to a PaO₂ of 90 mmHg.
 - E. The accuracy of a pulse oximetry declines below a saturation of 60%.
8. Which of the following statements regarding the use of benzodiazepines such as midazolam (Versed) is FALSE?
- A. Midazolam has not only sedative and anxiolytic properties but also provides a state of amnesia.
 - B. Midazolam should be bolus quickly in order to achieve the desired sedative effects.
 - C. Care must be exercised with midazolam since respiratory depression may occur especially in the elderly.
 - D. Midazolam may have a synergistic effect when used along with opioids.
 - E. Midazolam is twice as potent and is shorter acting than diazepam.

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9. Airway obstruction is the most common complication associated with the administration of moderate sedation?
- A. True
 - B. False
10. The single best monitor for assessing whether the patient is adequately ventilating is the pulse oximetry?
- A. True
 - B. False
11. Naloxone (Narcan) is the drug of choice for reversing the effects of midazolam.
- A. True
 - B. False
12. Capnography while not a standard of care for moderate sedation may be helpful in assessing ventilation when visualization or auscultation of the patient cannot be performed?
- A. True
 - B. False
13. Which of the following is a pure antagonist for opioid overdose?
- A. Naloxone (Narcan)
 - B. Flumazenil (Romazicon)
14. Female gender is a risk factor for nausea and vomiting?
- A. True
 - B. False
15. Monitoring of the patient during the procedure and when administering moderate sedation does not have to be continuous?
- A. True
 - B. False

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16. The Moderate Sedation policy applies to all patients who receive medication by the intravenous route only.

- A. True
- B. False

17. During recovery a patient meets discharge criteria when the patient's Aldrete score of eight (8) or greater.

- A. True
- B. False

18. The use of methohexital for moderate sedation is an excellent choice since it is unlikely to result in deep sedation or a state of anesthesia.

- A. True
- B. False

19. When administering medication for moderate sedation, the practitioner should most importantly be able to recognize a compromised airway and rescue the patient.

- A. True
- B. False

20. During a procedure in which moderate sedation is being provided, all that is required to be readily available is a crash cart.

- A. True
- B. False