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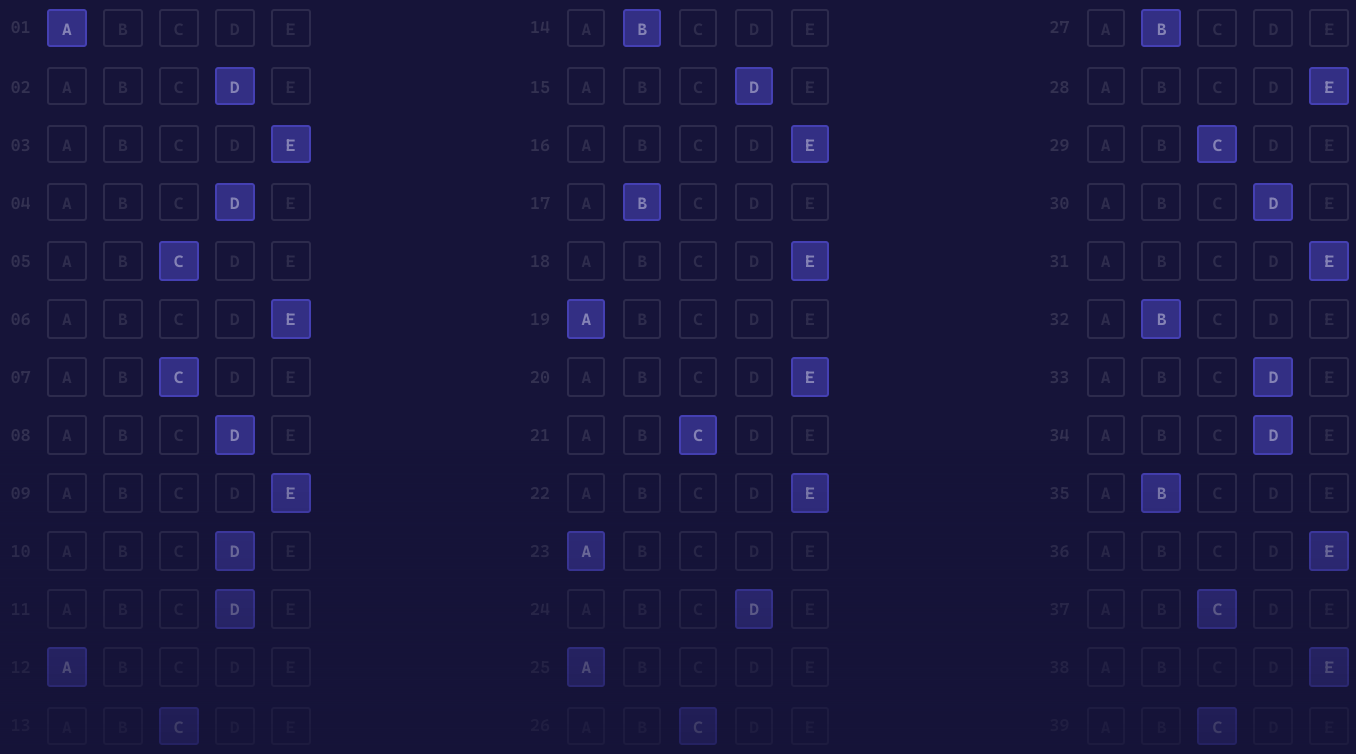

PRACTICE QUESTIONS

Healthcare Sterile Processing Association (HSPA)

CER

Certified Endoscope Reprocessor

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

WEB www.mometrix.net

SUPPORT support@mometrix.net

Before you begin

What this is

9 practice questions for Healthcare Sterile Processing Association (HSPA) `CER`, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, `CER`
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1 SINGLE CHOICE

Immediately after the endoscopic procedure and before transport to the reprocessing area, the flexible endoscope should be:

A Fully immersed in enzymatic detergent to begin the cleaning cycle

B **Point-of-use treated by flushing channels with detergent solution and wiping the exterior, then transported in a closed container**

C Stored vertically in a drying cabinet until reprocessing can begin

D Rinsed with high-level disinfectant to reduce bioburden during transport

ANSWER **B**

WHY Current HSPA/Multi-Society guidance and the CER exam objectives require point-of-use pre-cleaning at the bedside: flushing detergent through all channels and wiping the insertion tube to prevent drying of organic soil. The scope is then transported moist in a closed, leak-proof container. Pre-cleaning with detergent (not high-level disinfectant) is required, immersion in detergent is not done at the bedside, and scopes are not placed in a drying cabinet prior to cleaning.

QUESTION 2 SINGLE CHOICE

During manual leak testing of a flexible endoscope, the result that requires the scope to be removed from service and sent for repair is:

A The pressure gauge holds steady at the manufacturer's specified pressure for the required dwell time

B No bubbles are observed when the distal tip is submerged in water while the angulation levers are deflected

C Continuous bubbling is seen from the bending section while the scope is pressurized

D The light guide connector cap is dry and the manual inflation bulb returns to its resting shape

ANSWER C

WHY A leak is indicated by a drop in pressure on the gauge and/or a stream of bubbles from the scope while submerged. Continuous bubbling from the bending section is a positive leak test result and the scope must be removed from service to prevent fluid invasion of the internal channels. Options A, B, and D describe normal/expected findings.

QUESTION 3 SINGLE CHOICE

Which device is used to flush and brush the working channels of a flexible endoscope during manual cleaning?

A An automatic endoscope reprocessor detergent reservoir

B Channel-cleaning brushes sized to the specific channel and a cleaning adapter that flushes detergent through each channel

C An ultrasonic cleaner with a basket specifically for endoscopes

D The endoscope's own air/water and suction pumps running detergent through the channels

ANSWER B

WHY Manual cleaning requires brushing each channel with appropriately sized channel brushes and then flushing all accessible channels with detergent using the manufacturer's cleaning adapter. AERs run the automated high-level disinfection phase, not the manual cleaning phase. Ultrasonic cleaners are not used on flexible endoscopes, and the scope's pumps must never be used to circulate cleaning solution.

QUESTION 4 SINGLE CHOICE

An FDA-cleared high-level disinfectant for semi-critical devices such as flexible endoscopes is selected primarily based on:

A The lowest purchase cost per liter

B **Compatibility with the endoscope manufacturer's reprocessing instructions, mycobactericidal activity, and the device's validated reuse life**

C The fragrance and color preferred by the reprocessing staff

D Using the same product that the previous shift used, regardless of immersion time

ANSWER **B**

WHY HLD selection must follow the endoscope manufacturer's validated IFU and the HLD manufacturer's label, including confirmed mycobactericidal activity (the minimum requirement for a semi-critical device) and the documented maximum reuse life (number of days or cycles). Cost, fragrance, and shift-to-shift consistency are not appropriate selection criteria and selecting a product not validated for the specific endoscope model is an off-label use.

QUESTION 5 SINGLE CHOICE

After high-level disinfection of a flexible endoscope is complete and before patient use, the channels must be:

A Rinsed with the same HLD solution to maintain contact activity

B Rinsed with copious amounts of sterile or filtered water followed by alcohol purge and forced-air drying, per the endoscope and AER manufacturers' IFU

C Rinsed only if visible residue is seen on the channel walls

D Rinsed with tap water and then placed directly into storage

ANSWER B

WHY Residual HLD is a chemical hazard to patients, so scopes must be thoroughly rinsed with sterile, filtered, or other water of appropriate quality per the manufacturer's IFU, followed by a forced-air drying step. An alcohol flush followed by pressurized air helps remove residual moisture that supports microbial growth. Rinsing with the HLD itself, rinsing only when visible residue is present, or skipping drying are all non-compliant.

QUESTION 6 SINGLE CHOICE

Proper storage of a reprocessed, dried flexible endoscope between uses includes:

A **Hanging the scope vertically in a closed, HEPA-filtered cabinet with valves and detachable components removed or open to allow continued drying**

B Coiling the scope tightly in its carrying case with the distal cap secured

C Hanging the scope vertically with all suction and biopsy valves left in place to keep the channels sealed

D Laying the scope horizontally in a drawer with a humidifier pad to keep channels moist

ANSWER **A**

WHY Reprocessed, dried flexible endoscopes are stored vertically in a clean, dry, closed cabinet (typically HEPA-filtered) with removable valves, caps, and irrigation adapters detached and the elevator mechanism (for duodenoscopes) in the open/lower position to facilitate ongoing drying. Carrying cases are for transport, not storage. Keeping valves in place traps moisture and is non-compliant; humid storage promotes biofilm growth.

QUESTION 7 SINGLE CHOICE

The primary purpose of routine surveillance cultures (microbiological testing) of reprocessed flexible endoscopes is to:

A Replace manual cleaning and high-level disinfection as the primary decontamination method

B **Detect failures in the reprocessing workflow such as inadequate cleaning, damaged channels, or AER malfunctions, and verify that the process consistently yields a safe device**

C Document a negative culture so the facility can defer required equipment maintenance

D Satisfy the manufacturer's recommendation that every individual endoscope be sterilized instead of high-level disinfected

ANSWER B

WHY Surveillance cultures are a quality assurance tool used to monitor the effectiveness of the entire reprocessing program and to identify process breakdowns (e.g., damaged internal channels, inadequate brushing, AER failures, drying failures). They do not replace cleaning and HLD/sterilization, are not a substitute for equipment maintenance, and do not change the device's required reprocessing classification.

QUESTION 8 SINGLE CHOICE

A complete reprocessing record for a flexible endoscope must, at minimum, include:

A Only the patient's name and the date of the procedure

B **The endoscope identifier (serial/asset number), date and time of each reprocessing step, the technician's identity, the HLD lot and contact time/temperature, the AER cycle result, and the staff member who released the scope for use**

C The endoscope's purchase invoice and the storage cabinet temperature log

D Only the AER printout, since the machine records the cycle parameters

ANSWER B

WHY HSPA and accrediting bodies require a complete, traceable record that links the specific endoscope (by serial/asset number) to each reprocessing cycle, including manual cleaning, leak test, HLD product/contact conditions, AER cycle outcome, drying, and the identity of the technician and the person who released the scope. The AER printout alone is not sufficient, and patient/procedure data do not document reprocessing.

QUESTION 9 MULTIPLE CHOICE

According to the Spaulding classification, which of the following items are classified as semi-critical and therefore require, at a minimum, high-level disinfection after each use? (Choose two.)

A **A flexible bronchoscope that contacts intact mucous membranes of the lower airway**

B **A colonoscope that contacts intact colonic mucosa**

C A surgical instrument that penetrates bone

D A non-critical blood pressure cuff that contacts only intact skin

ANSWER **A** · **B**

WHY Semi-critical devices contact intact mucous membranes or non-intact skin and require high-level disinfection (e.g., flexible bronchoscopes, colonoscopes, gastroscopes, duodenoscopes). Critical devices that penetrate sterile tissue (such as bone-cutting instruments) require sterilization. Non-critical devices that contact only intact skin (such as a blood pressure cuff) require only low-level disinfection.