Across
6. once the patient is transferred from the operating table to the stretcher, what should be locked into place before moving the stretcher
9. what should be opened after the final count
13. what is not an immediate post operative patient care task
14. interrupted suture used to provide additional support to wound edges in abdominal surgeries
15. suture made from small sheep intestines
16. natural, braided, nonabsorbable, can wick contaminated material and serve as a source of infection
18. type of suture that is treated with acid salts to delay the absorption rate
19. wound is not properly closed and a space forms between the tissues
23. what item is taken with the patient after a tracheotomy
25. nylon, synthetic, monofilament, non-absorbable, doesn’t cause tissue reaction, typically used in skin where it will be removed
26. the amount of pull or weight necessary to break the suture
27. type of suture used when the sutures have to be left in for more than 2-3 weeks
28. what should the instruments be placed in when transferring them to the decontamination room
29. before the patient is transferred from the OR table to the stretcher, what should be removed from the skin
30. what PPE is removed prior to drape removal

Down
1. how many team members are required to move the patient from the OR bed to the stretcher
2. what type of suture makes a smooth cut through the tissue that have little, used internally.
3. used for external sutures or areas of high resistance
4. what will cause pitting on an instrument
5. what healing process progresses from side to side with no dead space
6. nonabsorbable, natural, doesn’t support bacterial growth, mono or multifilament, poor handling and tends to kink
7. who coordinates the transfer of the patient from the OR bed to the gurney
8. type of running suture normally used for cosmetic procedures
9. biosyn, synthetic, absorbable, monofilament, rapidly absorbed, only 25% strength at 28 days
10. type of running suture normally used for cosmetic procedures
11. who is responsible of the breakdown of the back table

Suturing and Post-operative
Across
F T C
O A S U
F U P A T
S I R N L T
R I T I
T W O N D D R E S S I N G S
I S N N S P L R T
F O L E Y C A T H E T E R
C Y C S D E
R E T E N T I O N S U R G I C A L G U T S I L K S
T O S I
A V E T A
C H R O M I C D E A D S P A C E P V
R E R O
G O B Y U T A R O S I S N P O L Y A M I D E D C
O T E N S I L E S T R E N G T H E U T
R G R T
N O N A S S O R B A B L E C A S E C A R T T I
A B PREP S O L U T I O N N G
L E G O T E R G L O V E S

9. what should be removed from the skin
20. what does the STSR hold in place while drapes are being removed
21. type of suture not treated with anything
22. type of suture when prolonged strength is not required and used when infection is present
24. post operatively, who is responsible of the breakdown of the back table