

**Laser Safety PowerPoint Inservice  
Post-Test Registration Form, v090129**

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Please complete this form and return with your test for grading. A score of 70% or higher is required to pass, and a Certificate and Credits will be mailed to you at the address you list here. An email notification will be sent as well. You can fax these back to us at 305-946-0232 (Use this Registration form as your cover sheet), or you can scan it and email it to us at [info@LaserTraining.org](mailto:info@LaserTraining.org). Please call at 305-851-8081 if you have any questions. If required you can retake this test without limit at no additional charge.

**PLEASE CLEARLY PRINT OR TYPE:** **DATE:** \_\_\_\_\_

**Name** (as it should appear on Certificate):

\_\_\_\_\_

**Nursing License # & State**, or Soc Security # (Required *only* for nurses requiring the credits – this is a documentation requirement by the Board of Nursing):

\_\_\_\_\_

**Telephone :** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Mailing Address for Certificate:**

\_\_\_\_\_

\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Registration # on Video** \_\_\_\_\_

Certificates are available for **\$35 each from this presentation.**

You are not required to have these certificates for your inservices though – just a copy of your attendance list to be maintained by the laser safety officer, so you can just have them take the test and keep it.

**Payment for Testing & Certificate** – ( if beyond the initial two free certificates.)

**CREDIT CARD:** VISA\_\_ MASTERCARD\_\_ AMER EXPRESS\_\_ DISCOVER\_\_

**CARD NUMBER:** \_\_\_\_\_ **Expiration** \_\_\_\_\_

**CARDHOLDERS NAME** \_\_\_\_\_

**CARDHOLDER SIGNATURE** (Required) \_\_\_\_\_

**Internal Use Only:** Received \_\_\_\_\_ Graded \_\_\_\_\_ Score \_\_\_\_\_ Email Notice \_\_\_\_\_  
Mailed Certificate \_\_\_\_\_

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1. **What does L-A-S-E-R stand for?**
  - a. Laser And Stimulated Emission of Radiation
  - b. Light And Sound Emitters of Radiation
  - c. Laser Amplification by Solid-State Electronic Remissions
  - d. Light Amplification by Stimulated Emission of Radiation
  
2. **For which laser does the glass in the windows of the treatment room offer protection to viewers outside the room, so that NO additional window coverings are required:**
  - a. CO2 laser
  - b. Nd:Yag laser
  - c. Argon laser
  - d. Pulsed dye laser, yellow
  
3. **Which one of the following statements regarding the radiation risks of the laser "environment" to pregnant women is most true:**
  - a. Pregnant women should avoid working around lasers during the first trimester.
  - b. Pregnant women should avoid working around lasers during their entire term of pregnancy.
  - c. Laser "radiation" presents no risks to women in any stage of pregnancy.
  - d. Pregnant women should simply wear the radiation dosage tags to monitor
  
4. **Which item below which is NOT a responsibility of the laser nurse/technician, functioning under the authority of the laser safety officer, during a laser procedure:**
  - a. Post appropriate Laser Danger signs on the door(s) to the room
  - b. Ensure that the correct laser safety glasses are available and worn
  - c. Inform the operating physician of the correct laser power and other laser settings to use for the procedure.
  - d. Ensure compliance with the institutions safety policies and procedures
  
5. **Who provides voluntary laser certification for laser nurses, operators & technicians?**
  - A. The FDA
  - B. ANSI (American National Standards Institute)
  - C. The Laser Training Institute
  - D. National Council on Laser Excellence (NCLE)

- 6. The NHZ (Nominal Hazard Zone) requires that:**
- A. All personnel must wear safety eyewear upon entering the treatment room
  - B. All personnel must wear safety eyewear when inside the NHZ boundary
  - C. Only Certified individuals are allowed in this NHZ
  - D. Only patients are required to wear the safety eyewear in the NHZ
- 7. Who determines the boundaries of the Nominal Hazard Zone**
- A. The operating physician
  - B. The Laser Safety Officer
  - C. The Laser Nurse/Operator in the room
  - D. No one, it is already set as the entire room for any medical use
- 8. Which of these three is a non-beam laser hazard?**
- A. Laser Plume
  - B. Burns
  - C. Eye Hazards
- 9. Laser Safety Eyewear should:**
- a. Be labeled with the wavelength and Optical Density (OD) for that specific laser.
  - b. Be available at entry to the Laser Treatment Controlled Area
  - c. Be worn within the Nominal Hazard Zone
  - d. All of the above
- 10. Laser Safety Eyewear will protect the wearer from even direct laser impacts into their eyes.**
- a. True
  - b. False