

SPD Panel Interview

Mock Interview Study Guide

Bay Area Healthcare — Sterile Processing Department

Meet the Panel

You may face up to five panelists, each representing a different part of the hospital. Here's who to expect:

HR Sandra T. HR Recruiter	MG David R. SPD Manager	LT Marcus W. Lead Technician	IC Priya N. Infection Control	RN Lena M. Charge Nurse
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Question Types

Behavioral	"Tell me about a time..." — Use the STAR method: Situation, Task, Action, Result.
Technical	Tests your SPD knowledge — sterilization methods, instrument handling, Spaulding's classification, BIs.
Situational	"What would you do if..." — Tests judgment, safety thinking, and how you respond to pressure.
Culture Fit	About your goals, personality, and team fit — often asked by HR or the manager.

Questions, Tips & Sample Answers

Q1 Sandra T. HR Recruiter
<i>"Tell us a little about yourself and why you're interested in sterile processing."</i>
CULTURE FIT
Coaching tip: Keep it under 2 minutes. Focus on your interest in healthcare, attention to detail, and why SPD specifically.
Sample answer: I've always been drawn to healthcare and the behind-the-scenes work that makes patient care

possible. When I learned about sterile processing, I was immediately drawn to the precision and responsibility involved — every instrument I process directly impacts patient safety. I'm detail-oriented, I thrive in structured environments, and I'm committed to learning the protocols and standards that make this role so critical. I'm pursuing my CRCST certification and I'm genuinely excited about building a long-term career in this field.

Q2 David R. | SPD Manager

"Tell me about a time you had to manage multiple tasks under pressure. How did you prioritize and what was the outcome?"

BEHAVIORAL

Coaching tip: Use the STAR method: Situation, Task, Action, Result. Be specific — avoid vague answers like 'I stay calm under pressure.'

Sample answer:

In a previous role, we had a surge in volume during a shift and I had three trays that all needed to be processed urgently. I quickly assessed which trays were needed first based on scheduled OR cases, communicated with my lead tech so she could notify the OR team of realistic timelines, and then worked systematically through decontamination without cutting corners. By staying organized and communicating proactively, all three trays were delivered on time. That experience reinforced that prioritization and communication are just as important as speed.

Q3 Marcus W. | Lead Technician

"Can you walk us through the difference between sterilization and disinfection, and give an example of when each is used in an SPD setting?"

TECHNICAL

Coaching tip: Reference Spaulding's classification: critical items require sterilization, semi-critical require high-level disinfection, non-critical require low-level disinfection.

Sample answer:

Sterilization eliminates all forms of microbial life, including bacterial spores, and is required for critical items — instruments that enter sterile tissue or the bloodstream, like surgical instruments and implants. We use steam autoclave, ethylene oxide, or hydrogen peroxide plasma for these. Disinfection reduces the number of microorganisms but may not eliminate spores, and is used for semi-critical items like endoscopes that contact mucous membranes. High-level disinfection with glutaraldehyde or ortho-phthalaldehyde is appropriate there. Spaulding's classification guides which level is required based on how the item will be used.

Q4 Priya N. | Infection Control

"You're decontaminating instruments and notice a tray came back from the OR with a 'STAT'"

label but the instruments appear heavily soiled. What do you do?"

SITUATIONA
L

Coaching tip: They want to see that you follow protocol even under pressure. Proper decontamination cannot be skipped — patient safety always comes first.

Sample answer:

Patient safety is non-negotiable, so I would not rush or skip any step in the decontamination process regardless of the STAT label. Heavily soiled instruments require thorough manual pre-cleaning before going through the washer-disinfector. I would immediately notify my supervisor and ask them to contact the charge nurse or OR coordinator to communicate the realistic processing time. I'd document the condition of the tray on receipt. Rushing decontamination risks inadequate sterilization, which could cause a patient infection — that's never worth it.

Q5 Marcus W. | Lead Technician

"What is a biological indicator and why is it important in steam sterilization?"

TECHNICAL

Coaching tip: A biological indicator (BI) contains *Geobacillus stearothermophilus* spores — the most resistant to steam. Explain why this matters for patient safety.

Sample answer:

A biological indicator, or BI, is a test system that contains live bacterial spores — specifically *Geobacillus stearothermophilus* for steam sterilization — which are the most resistant organisms to that sterilization method. After a sterilization cycle, the BI is incubated. If the spores are killed, it confirms the sterilizer is functioning correctly and that the cycle achieved the conditions needed to destroy all microorganisms. BIs are the gold standard for validating sterilizer performance because they directly test the kill of the most resistant organism. We run them with each load that contains implantable devices, and as part of routine quality monitoring.

Q6 Sandra T. | HR Recruiter

"Describe a time you caught an error before it became a bigger problem. What did you do?"

BEHAVIORA
L

Coaching tip: SPD managers love this question — it tests attention to detail and accountability. Be honest and emphasize the process you used to prevent the error.

Sample answer:

During an assembly check, I noticed that a laparoscopic tray was missing a trocar that was listed on the count sheet. Before releasing the tray, I flagged it to my lead tech, we located the instrument in the washer from a previous cycle, completed the tray correctly, and documented the near-miss. I also mentioned it in the team huddle so everyone was aware. Catching that before it reached the OR prevented a potential instrument shortage mid-surgery. It reinforced for me why count sheets and systematic assembly checks are so important — they're not just paperwork, they're a safety net.

Q7 Lena M. | Charge Nurse

"A surgeon calls down and says they need a specific instrument tray in 20 minutes but you just started processing it. How do you handle that situation?"

SITUATION
L

Coaching tip: Show communication skills and teamwork. Never compromise sterilization for speed — but do show you understand urgency and how to problem-solve.

Sample answer:

First, I'd immediately alert my supervisor so they're aware and can help coordinate. I'd check if there's a backup tray available or if any instruments from another set could serve as substitutes. If the tray truly can't be ready safely in 20 minutes, my supervisor would communicate that realistic timeline to the OR — they'd rather know now than be surprised. I would never release a tray that hasn't completed the full sterilization cycle, regardless of pressure. What I can do is work as efficiently as possible within proper protocol and keep communication open throughout the process.

Q8 David R. | SPD Manager

"Where do you see yourself in this role in two to three years? What are your goals in sterile processing?"

BEHAVIOR
L

Coaching tip: Show ambition within the field — mention certification, becoming a lead tech, or moving into education or quality. Employers want people who plan to grow.

Sample answer:

My first priority is to earn my CRCST certification and become highly proficient in all areas of the department — decontamination, assembly, sterilization, and quality monitoring. In two to three years, I'd love to be a resource for newer techs and potentially move into a lead tech role. I'm also interested in quality improvement — understanding where errors happen and helping build better processes. I see SPD as a real career, not just a job, and I want to keep growing within it.

Q9 All Panelists | Panel

"Do you have any questions for us?"

CULTURE
FIT

Coaching tip: Always have 2–3 ready. Focus on the role, the team, and growth opportunities. Avoid asking about salary or PTO at this stage.

Sample answer:

Suggested questions to ask the panel: 1. "What does success look like in the first 90 days for someone in this role?" 2. "How would you describe the culture and communication between SPD and the OR teams here?" 3. "What continuing education or certification support does the department offer?" 4. "What do you enjoy most about working in this department?" (Great for the lead tech or manager — builds rapport and shows genuine interest.)

Key Reminders

- Bring enough printed resumes for every panelist (5–6 copies).
- Make eye contact with the person asking the question, then naturally include others as you answer.
- Use the STAR method (Situation, Task, Action, Result) for all behavioral questions.
- It is okay to pause and think before answering — panels respect composure.
- Patient safety always comes before speed — never skip a step under pressure.
- Have 2–3 thoughtful questions ready to ask the panel at the end.
- Send a thank-you email to HR within 24 hours, addressed to the full panel.