

# JBL Airway Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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**SAMPLE**

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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

**Remember:** successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

**This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:**

## **1. Start with a Diagnostic Review**

**Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.**

## **2. Study in Short, Focused Sessions**

**Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.**

## **3. Learn from the Explanations**

**After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.**

## **4. Track Your Progress**

**Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.**

## **5. Simulate the Real Exam**

**Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.**

## **6. Repeat and Review**

**Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.**

**There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!**

## Questions

- 1. When suctioning a semiconscious adult, you should avoid doing what?**
  - A. Suctioning for more than 20 seconds.**
  - B. Applying suction while inserting the catheter.**
  - C. Touching the back of the airway with the suction catheter.**
  - D. Using a flexible catheter to remove secretions faster.**
- 2. Which of the following is a common action to perform when a patient is in respiratory distress?**
  - A. Leave the patient alone for reassurance**
  - B. Encourage deep breathing exercises**
  - C. Monitor and assist ventilations**
  - D. Restrict fluid intake**
- 3. In the event of a patient being unresponsive during airway management, what should be prioritized?**
  - A. Administering oxygen immediately.**
  - B. Suctioning the airway if there is severe bleeding.**
  - C. Placement of an oral airway.**
  - D. Reassuring the patient.**
- 4. A patient who breathes through his or her mouth is least likely to benefit from which oxygen delivery method?**
  - A. Nasal cannula**
  - B. Simple face mask**
  - C. Non-rebreather mask**
  - D. Biphaseic positive airway pressure**
- 5. What is the consequence of decreased hemoglobin levels in a patient?**
  - A. Increased oxygen delivery to tissues.**
  - B. Reduced oxygen-carrying capacity of the blood.**
  - C. Increased carbon dioxide excretion.**
  - D. Enhanced gas exchange efficiency.**

- 6. Which is the appropriate technique for ventilating an apneic adult who has a pulse?**
- A. Ventilate at a rate between 20 and 24 breaths/min**
  - B. Deliver each breath over 1 second at a rate of 10 breaths/min**
  - C. Deliver each breath over 2 seconds at a rate of 14 breaths/min**
  - D. Ventilate at a rate of 16 breaths/min**
- 7. What happens to the respiratory rate if the level of carbon dioxide in the arterial blood increases?**
- A. A reduction in tidal volume will occur.**
  - B. The respiratory rate and depth increase.**
  - C. The respiratory rate slows significantly.**
  - D. The respiratory rate and depth decrease.**
- 8. What is the recommended technique for performing bag-mask ventilation?**
- A. Use a one-hand method**
  - B. Ensure a good seal while using the E-C clamp technique**
  - C. Provide gentle pressure on the abdomen**
  - D. Alternate breathing and chest compressions**
- 9. In which scenario would CPAP therapy be contraindicated?**
- A. Confused but conscious patient with normal vital signs**
  - B. Hypotensive patient with respiratory distress**
  - C. Patient with clear lung sounds and difficulty breathing**
  - D. A patient who is fully conscious and calm**
- 10. The method of administering supplemental oxygen depends largely on what factors?**
- A. Presence of cyanosis and the patient's heart rate.**
  - B. Severity of hypoxemia and adequacy of breathing.**
  - C. Underlying cause of hypoxemia.**
  - D. Patient's level of consciousness.**



## **Answers**

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1. C
2. C
3. B
4. A
5. B
6. B
7. B
8. B
9. B
10. B

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## **Explanations**

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**1. When suctioning a semiconscious adult, you should avoid doing what?**

- A. Suctioning for more than 20 seconds.**
- B. Applying suction while inserting the catheter.**
- C. Touching the back of the airway with the suction catheter.**
- D. Using a flexible catheter to remove secretions faster.**

Avoiding contact with the back of the airway when suctioning a semiconscious adult is critical for a few reasons. Firstly, the back of the airway contains sensitive structures that can be easily damaged, potentially leading to complications such as bleeding or additional obstruction if trauma occurs. Additionally, touching these structures can trigger a gag reflex or lead to discomfort, which may result in the patient having difficulty breathing. In suctioning practice, the primary objective is to clear any secretions or blockages without causing further harm. Therefore, careful maneuvering of the suction catheter is essential. When suctioning, insertion should be done gently and without excessive force to maintain the integrity of the airway and ensure patient safety. The guidelines for suctioning emphasize duration and technique; for instance, suctioning should typically not exceed a certain period to prevent hypoxia, and suctioning should be applied only when withdrawing the catheter to ensure the effective removal of secretions while minimizing injury. Using flexible catheters can enhance the suction process but should be done with care to not make contact with the delicate airway structures.

**2. Which of the following is a common action to perform when a patient is in respiratory distress?**

- A. Leave the patient alone for reassurance**
- B. Encourage deep breathing exercises**
- C. Monitor and assist ventilations**
- D. Restrict fluid intake**

In situations of respiratory distress, monitoring and assisting ventilations is a critical action to take. When a patient is experiencing difficulty breathing, it is essential to ensure that they are receiving adequate ventilation to maintain oxygenation and prevent further complications. This may involve providing supplemental oxygen or physically assisting the patient with their breathing, depending on the severity of their condition. In contrast, leaving a patient alone can increase their anxiety and may worsen their respiratory status. Encouraging deep breathing might not be practical or effective, as the patient is already having difficulty; they may be unable to take deep breaths effectively. Regarding fluid restriction, this is typically not relevant in immediate respiratory distress and may not address the root of the problem effectively. Therefore, focusing on monitoring and assisting with ventilations directly addresses the immediate needs of a patient in respiratory distress.

**3. In the event of a patient being unresponsive during airway management, what should be prioritized?**

- A. Administering oxygen immediately.**
- B. Suctioning the airway if there is severe bleeding.**
- C. Placement of an oral airway.**
- D. Reassuring the patient.**

In situations where a patient is unresponsive, the priority in airway management should be to ensure that the airway remains clear and unobstructed. If there is severe bleeding present, suctioning the airway becomes critical as it allows for the removal of any blood or secretions that could compromise the patient's ability to breathe. Managing such obstruction is essential to prevent asphyxiation and ensure that oxygen can reach the lungs efficiently. While administering oxygen and placing an oral airway are also important components of airway management, they can only be effectively implemented once it is ensured that the airway is clear. If the airway is filled with blood or obstructed by other materials, simply providing oxygen may not be beneficial. Thus, addressing severe bleeding and suctioning the airway takes precedence in ensuring patient safety and efficacy of subsequent interventions.

**4. A patient who breathes through his or her mouth is least likely to benefit from which oxygen delivery method?**

- A. Nasal cannula**
- B. Simple face mask**
- C. Non-rebreather mask**
- D. Biphasic positive airway pressure**

A patient who breathes through their mouth is least likely to benefit from the nasal cannula because this method delivers oxygen through two small prongs that are inserted into the nostrils. Effective oxygen delivery through a nasal cannula relies on the patient's ability to breathe through their nose, as oxygen is delivered directly into the nasal passages and is primarily intended for patients who can maintain nasal breathing. In contrast, other methods such as the simple face mask, non-rebreather mask, and biphasic positive airway pressure provide oxygen directly over the mouth and nose, making them suitable for mouth breathers. The face mask covers both the mouth and nose to ensure inhalation of oxygen, the non-rebreather mask creates a seal around the mouth and nose to provide high concentrations of oxygen, and biphasic positive airway pressure supports breathing during both inhalation and exhalation. Therefore, for a mouth-breathing patient, those options would be more beneficial.

**5. What is the consequence of decreased hemoglobin levels in a patient?**

- A. Increased oxygen delivery to tissues.**
- B. Reduced oxygen-carrying capacity of the blood.**
- C. Increased carbon dioxide excretion.**
- D. Enhanced gas exchange efficiency.**

Decreased hemoglobin levels in a patient lead to a reduced oxygen-carrying capacity of the blood. Hemoglobin is a critical protein in red blood cells that binds to oxygen in the lungs and transports it to tissues throughout the body. When hemoglobin levels drop, there is less availability of this protein to carry oxygen, resulting in decreased oxygen delivery to vital tissues and organs. This condition can lead to various symptoms, such as fatigue, weakness, confusion, and in severe cases, can affect the overall metabolism and function of organs. While the body has some mechanisms to adapt to lower oxygen levels, such as increasing heart rate or enhancing respiratory rate, these compensatory responses can only partially mitigate the effects of reduced hemoglobin levels. Understanding the role of hemoglobin is crucial for assessing and managing patients with anemia or other conditions related to changes in blood composition.

**6. Which is the appropriate technique for ventilating an apneic adult who has a pulse?**

- A. Ventilate at a rate between 20 and 24 breaths/min**
- B. Deliver each breath over 1 second at a rate of 10 breaths/min**
- C. Deliver each breath over 2 seconds at a rate of 14 breaths/min**
- D. Ventilate at a rate of 16 breaths/min**

The appropriate technique for ventilating an apneic adult who has a pulse is to deliver each breath over 1 second at a rate of 10 breaths per minute. This rate and timing are crucial because they ensure that the breaths provided are adequate in volume and pressure while allowing for sufficient time for exhalation. When providing rescue breaths to an apneic patient who still has a pulse, the goal is to effectively oxygenate the lungs while preventing hyperventilation, which can lead to complications such as decreased venous return to the heart and potential respiratory alkalosis. The 1-second delivery time for each breath allows for optimal lung inflation without over-distending the lungs, and the rate of 10 breaths per minute provides a balance of enough breaths to maintain adequate oxygenation without causing excessive pressure or volume issues. This method aligns with current guidelines and objectives in airway management, ensuring that the patient receives the most effective ventilation to support their physiological needs.

**7. What happens to the respiratory rate if the level of carbon dioxide in the arterial blood increases?**

- A. A reduction in tidal volume will occur.**
- B. The respiratory rate and depth increase.**
- C. The respiratory rate slows significantly.**
- D. The respiratory rate and depth decrease.**

When the level of carbon dioxide in the arterial blood increases, the body responds by triggering mechanisms to enhance the elimination of carbon dioxide. The primary driver of this response is the increased concentration of carbon dioxide, which leads to a decrease in blood pH (making it more acidic). This phenomenon is detected by chemoreceptors in the body, particularly in the carotid bodies and the medulla oblongata. To counteract the increased carbon dioxide levels, the body increases both the respiratory rate and the depth of breathing. This combined action facilitates a greater exchange of gases in the lungs, allowing more carbon dioxide to be expelled and more oxygen to be taken in. In essence, the respiratory system actively adjusts to maintain homeostasis and ensure that carbon dioxide levels return to normal ranges. This adaptive mechanism is crucial for maintaining the acid-base balance in the body, illustrating the body's remarkable ability to respond to varying levels of gases in the bloodstream.

**8. What is the recommended technique for performing bag-mask ventilation?**

- A. Use a one-hand method**
- B. Ensure a good seal while using the E-C clamp technique**
- C. Provide gentle pressure on the abdomen**
- D. Alternate breathing and chest compressions**

The recommended technique for performing bag-mask ventilation emphasizes the importance of achieving a good seal while utilizing the E-C clamp technique. This technique involves forming a "C" shape with your thumb and index finger to grasp the mask and apply it to the patient's face, while using the other three fingers (forming an "E") to pull the mandible up towards the mask. This approach helps create a proper fit, ensuring that the airway is adequately sealed, which is crucial for effective ventilation. A good seal minimizes air leakage, allowing the delivered breaths to inflate the lungs properly. Additionally, it is essential to maintain the airway's patency during this process. Ensuring a tight fit enables the health care provider to effectively deliver breaths and ensures that the patient receives adequate oxygenation and ventilation. This technique is widely taught in advanced airway management courses and is foundational for effective bag-mask ventilation.

**9. In which scenario would CPAP therapy be contraindicated?**

- A. Confused but conscious patient with normal vital signs**
- B. Hypotensive patient with respiratory distress**
- C. Patient with clear lung sounds and difficulty breathing**
- D. A patient who is fully conscious and calm**

In the context of CPAP (Continuous Positive Airway Pressure) therapy, it is crucial to consider the patient's hemodynamics, particularly blood pressure and overall stability. CPAP therapy can exacerbate hypotension due to a decrease in venous return to the heart because the positive pressure can impede blood flow. Therefore, in the scenario of a hypotensive patient with respiratory distress, administering CPAP could worsen the patient's condition by further lowering blood pressure, potentially leading to more serious complications. In other situations, such as a confused but conscious patient with normal vital signs, a patient with clear lung sounds experiencing difficulty breathing, and a fully conscious and calm patient, the risks associated with CPAP are minimal when compared to the potential benefits. Each of these patients could potentially tolerate CPAP therapy without the added risk of exacerbating hypotension. Thus, when evaluating contraindications for CPAP therapy, the presence of hypotension in conjunction with respiratory distress clearly indicates that CPAP would not be appropriate.

**10. The method of administering supplemental oxygen depends largely on what factors?**

- A. Presence of cyanosis and the patient's heart rate.**
- B. Severity of hypoxemia and adequacy of breathing.**
- C. Underlying cause of hypoxemia.**
- D. Patient's level of consciousness.**

The method of administering supplemental oxygen is indeed primarily influenced by the severity of hypoxemia and the adequacy of breathing. When evaluating a patient, hypoxemia reflects the level of oxygen in the blood, and its severity can dictate the urgency and means of treatment. If a patient exhibits severe hypoxemia, they may require immediate and more intensive oxygen delivery methods, such as high-flow oxygen systems or non-rebreather masks, to ensure adequate oxygenation. Additionally, the adequacy of breathing is crucial because it can determine how well the patient can ventilate and oxygenate themselves. If a patient has compromised breathing—whether due to respiratory distress, airway obstruction, or other factors—they might need assistance beyond supplemental oxygen, such as positive pressure ventilation. Therefore, considering these two factors ensures that the oxygen delivery method chosen will be appropriate for the patient's specific condition, promoting effective oxygenation and preventing further complications.



## Next Steps

**Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.**

**As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.**

**If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://jblairway.examzify.com>**

**We wish you the very best on your exam journey. You've got this!**