

Lippincott Respiratory Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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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. During the evaluation of a chest tube system, what indicates that the chest tube is not functioning effectively?**
 - A. Presence of fluctuation in the water-seal chamber**
 - B. Absence of bubbling in the suction chamber**
 - C. Continuous bubbling in the water-seal chamber**
 - D. An increase in respiratory rate**
- 2. Which strategy is most effective for managing severe pain in a client post-thoracotomy?**
 - A. Verbally reassuring the client after medication**
 - B. Reassessing the client 30 minutes after medication**
 - C. Repositioning the client immediately after medication**
 - D. Readjusting the medication dosage as needed**
- 3. A client on flunisolide reports painful, white patches in their mouth. What is the most appropriate nurse response?**
 - A. This is an expected effect and will resolve in a couple of weeks**
 - B. You need to improve your oral hygiene to prevent irritation**
 - C. You likely have a fungal infection that requires treatment**
 - D. This is a normal side effect of the medication**
- 4. What is the first step a client should take before using a metered-dose inhaler (MDI)?**
 - A. Activate the MDI while inhaling**
 - B. Breathe out through the mouth**
 - C. Shake the inhaler immediately before use**
 - D. Hold breath for 5 to 10 seconds**
- 5. What dietary recommendation is appropriate for a client post-laryngectomy?**
 - A. Encourage high fiber diet immediately**
 - B. Introduce solid foods as soon as possible**
 - C. Start with liquid diet only**
 - D. Progress to soft foods after edema subsides**

- 6. When a pharmacy sends an incorrect medication, what is the first action a nurse should take?**
- A. Administer the incorrect medication**
 - B. Verify the medication order**
 - C. Contact the pharmacy**
 - D. Request the correct medication**
- 7. Following a laryngectomy, what position should the client be maintained in to promote recovery?**
- A. Supine position**
 - B. Sitting position**
 - C. Flat position**
 - D. Head of the bed elevated 30 to 40 degrees**
- 8. A chest tube is inserted in a pneumothorax patient to achieve which of the following?**
- A. Remove air and fluid**
 - B. Administer oxygen**
 - C. Promote scar tissue formation**
 - D. Insert antibiotics into the pleural space**
- 9. What intervention is crucial for monitoring a patient with ARDS in relation to renal function?**
- A. Monitoring blood pressure**
 - B. Assessing fluid intake**
 - C. Monitoring serum creatinine levels**
 - D. Evaluating respiratory rate**
- 10. Which action does NOT fall under standard precautions in infection control?**
- A. Hand hygiene**
 - B. Use of gloves**
 - C. Isolation in a negative pressure room**
 - D. Safe injection practices**

Answers

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

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Explanations

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- 1. During the evaluation of a chest tube system, what indicates that the chest tube is not functioning effectively?**
- A. Presence of fluctuation in the water-seal chamber**
 - B. Absence of bubbling in the suction chamber**
 - C. Continuous bubbling in the water-seal chamber**
 - D. An increase in respiratory rate**

The indication that the chest tube is not functioning effectively is demonstrated by continuous bubbling in the water-seal chamber. A chest tube is designed to promote the evacuation of air or fluid from the pleural space, and the water-seal chamber should ideally maintain a level of water that allows for fluctuations in response to respiratory movements. Continuous bubbling in this chamber suggests a possible air leak in the system, indicating that air is entering the pleural space instead of being effectively drained. This leak could undermine the therapy's effectiveness and compromise lung expansion. Fluctuation in the water-seal chamber is a normal finding that indicates the system is working properly, as it corresponds to intrathoracic pressure changes during breathing. Absence of bubbling in the suction chamber is a normal state if the suction is not being actively used or if the system is properly functioning without needing additional suction pressure. An increase in respiratory rate may not directly correlate with the effectiveness of the chest tube, as it can occur for a variety of reasons unrelated to tube function. Thus, option C is the most definitive indicator of improper function in this scenario.

- 2. Which strategy is most effective for managing severe pain in a client post-thoracotomy?**
- A. Verbally reassuring the client after medication**
 - B. Reassessing the client 30 minutes after medication**
 - C. Repositioning the client immediately after medication**
 - D. Readjusting the medication dosage as needed**

Reassessing the client 30 minutes after medication administration is crucial in managing severe pain post-thoracotomy. This timeframe allows healthcare providers to evaluate the effectiveness of the medication and ascertain whether the pain relief is adequate. Monitoring the patient's response helps determine if additional interventions are necessary, such as administering a higher dose or adding adjunctive pain management strategies. Effective pain management involves not only administering analgesics but also regularly evaluating their effectiveness. Reassessing the pain level and any side effects after a specific duration provides valuable insights into the efficacy of the treatment. In post-thoracotomy cases, where patients may experience significant discomfort, timely assessment can facilitate prompt adjustments to the pain management plan to ensure the patient's comfort and recovery. While the other strategies mentioned are important elements of patient care, they do not directly address the need for timely evaluation of pain relief effectiveness as does reassessing after medication. For instance, verbally reassuring the client may help with anxiety but does not directly impact pain management; repositioning may provide some relief but also does not guarantee effective pain control; adjusting medication dosages is indeed a part of pain management but should be informed by the reassessment of the patient's condition.

3. A client on flunisolide reports painful, white patches in their mouth. What is the most appropriate nurse response?
- A. This is an expected effect and will resolve in a couple of weeks
 - B. You need to improve your oral hygiene to prevent irritation
 - C. You likely have a fungal infection that requires treatment**
 - D. This is a normal side effect of the medication

The presence of painful, white patches in the mouth, particularly in a client using flunisolide, raises concern for a potential fungal infection, commonly oral candidiasis (thrush). Flunisolide is an inhaled corticosteroid, and one of the well-known side effects of inhaled corticosteroids is the development of oral thrush due to local immune suppression in the oral cavity. When corticosteroids are used, they can alter the normal flora of the mouth, leading to overgrowth of *Candida* species. This makes it crucial for the nurse to assess the lesions more closely and consider that the patches might indeed be indicative of an infection rather than just a benign or expected side effect. Therefore, the most appropriate nursing response is to indicate that a fungal infection is likely and requires treatment to manage it effectively. Proper identification and management of this condition will help in alleviating the client's discomfort and prevent further complications. Options indicating that this symptom is expected or just a side effect downplay the seriousness of the situation and may delay appropriate treatment. Additionally, while improving oral hygiene can help in preventing the occurrence of thrush, it would not address the immediate need for treatment if there is an active infection present.

4. What is the first step a client should take before using a metered-dose inhaler (MDI)?
- A. Activate the MDI while inhaling
 - B. Breathe out through the mouth
 - C. Shake the inhaler immediately before use**
 - D. Hold breath for 5 to 10 seconds

Before using a metered-dose inhaler (MDI), shaking the inhaler immediately before use is an essential first step. This action ensures that the medication is properly mixed and ready for delivery. Many MDIs contain suspension formulations where the active ingredient may settle at the bottom of the canister. By shaking the inhaler, the patient helps to distribute the medication evenly within the propellant, facilitating a consistent dose with each use. Following this step, the client can then proceed with the sequence of inhalation, exhaling, and holding their breath as recommended for optimal medication delivery and absorption. Proper administration technique is crucial for maximizing the therapeutic effects of the inhaled medication, and shaking the MDI is foundational in ensuring the medication is effectively delivered to the lungs.

5. What dietary recommendation is appropriate for a client post-laryngectomy?

- A. Encourage high fiber diet immediately**
- B. Introduce solid foods as soon as possible**
- C. Start with liquid diet only**
- D. Progress to soft foods after edema subsides**

After a laryngectomy, the client's anatomy and physiology undergo significant changes, which directly influence their dietary needs. As healing progresses, it is crucial to start with softer foods once any postoperative swelling (edema) has subsided. Soft foods are easier to swallow and lessen the risk of choking, which is important given the changes in the swallowing mechanism that often occur after laryngectomy. This approach of gradually introducing foods acknowledges the potential difficulties with swallowing that the client may experience in the early post-operative phase. Maintaining a soft diet until the patient has regained sufficient swallowing function ensures safety and supports the healing process. Since the healing period can vary, progressing to this stage is tailored depending on individual recovery, making it a key consideration in dietary recommendations for laryngectomy patients.

6. When a pharmacy sends an incorrect medication, what is the first action a nurse should take?

- A. Administer the incorrect medication**
- B. Verify the medication order**
- C. Contact the pharmacy**
- D. Request the correct medication**

The first action a nurse should take when receiving an incorrect medication from the pharmacy is to verify the medication order. This step is crucial because it allows the nurse to ensure that the medication received does not match what was ordered, which provides a double-check against potential errors. It ensures that the nurse is fully informed about what was originally prescribed before taking any further action. This verification process helps to prevent unnecessary confusion and potential harm that may result from administering the wrong medication. Once the order has been confirmed, the nurse can then proceed to take appropriate actions, such as contacting the pharmacy or requesting the correct medication, based on the verified information. Prioritizing verification aligns with established safety protocols in medication administration, reflecting the importance of diligence in preventing medication errors.

7. Following a laryngectomy, what position should the client be maintained in to promote recovery?

- A. Supine position**
- B. Sitting position**
- C. Flat position**
- D. Head of the bed elevated 30 to 40 degrees**

Maintaining the head of the bed elevated at 30 to 40 degrees following a laryngectomy is important for several reasons that contribute to the client's recovery. This position assists in promoting optimal airway patency and ventilation, which is crucial after any surgical procedure involving the airway. Elevation helps reduce the risk of aspiration by allowing gravity to aid in the prevention of secretions pooling in the airway. Additionally, positioning the patient with the head of the bed elevated enhances comfort and facilitates easier breathing, decreasing the work of respiration. It allows for better drainage of any postoperative secretions and reduces the likelihood of edema in the postoperative period by promoting venous return and reducing pressure on the diaphragm. Furthermore, in the setting of recovery from a laryngectomy, it's critical to ensure that the patient can cough effectively and clear secretions. The elevated position supports this need while also helping to decrease potential complications such as pneumonia or atelectasis, which can occur if the client is positioned flat or supine for an extended period. Overall, maintaining the head of the bed elevated is a standard postoperative care measure that aligns with best practices for patient recovery in airway surgeries.

8. A chest tube is inserted in a pneumothorax patient to achieve which of the following?

- A. Remove air and fluid**
- B. Administer oxygen**
- C. Promote scar tissue formation**
- D. Insert antibiotics into the pleural space**

The correct choice is based on the primary purpose of a chest tube in the context of a pneumothorax. A chest tube is inserted to allow for the evacuation of air (and potentially fluid) from the pleural space. In a pneumothorax, air accumulates in the pleural cavity, leading to collapsed lung tissue and impaired respiratory function. By inserting a chest tube, healthcare providers can create a pathway for the trapped air to escape, thereby re-expanding the lung and restoring normal physiology. The action of removing air is crucial because it alleviates pressure on the lungs and facilitates proper breathing. While fluid drainage may also be necessary in cases of hemothorax or pleural effusion, the question specifically relates to pneumothorax, where the primary concern is the presence of air. In contrast, administering oxygen is a supportive measure and would not directly resolve the underlying issue of air in the pleural space. Promoting scar tissue formation is not a goal of chest tube insertion; in fact, the intent is for lung re-expansion, not to encourage scarring. Lastly, while there are instances where antibiotics may be required for infection, inserting them into the pleural space via a chest tube is not a standard practice.

9. What intervention is crucial for monitoring a patient with ARDS in relation to renal function?

- A. Monitoring blood pressure**
- B. Assessing fluid intake**
- C. Monitoring serum creatinine levels**
- D. Evaluating respiratory rate**

Monitoring serum creatinine levels is crucial for assessing renal function in a patient with Acute Respiratory Distress Syndrome (ARDS). ARDS can lead to impaired kidney function due to several factors, including hypoxia, fluid overload, and the effects of mechanical ventilation. Serum creatinine is a key indicator of renal function, and elevations in creatinine levels can signal acute kidney injury (AKI), which is a common complication in patients with ARDS. Monitoring these levels allows healthcare providers to detect changes in renal function early, facilitating timely interventions to prevent further deterioration. In contrast, while monitoring blood pressure is important for overall hemodynamic stability, it does not provide specific information about renal function. Assessing fluid intake is relevant, but it primarily helps manage fluid balance rather than directly indicating kidney health. Evaluating respiratory rate, although essential for assessing the patient's respiratory status, does not correlate with renal function. Therefore, focusing on serum creatinine offers the most critical insight into a patient's renal health in the context of ARDS.

10. Which action does NOT fall under standard precautions in infection control?

- A. Hand hygiene**
- B. Use of gloves**
- C. Isolation in a negative pressure room**
- D. Safe injection practices**

Standard precautions in infection control are a set of practices designed to prevent the transmission of infections in healthcare settings. These precautions are meant to be applied to all patients, regardless of their known or suspected infection status. They include hand hygiene, the use of personal protective equipment such as gloves, safe injection practices, and a range of other safe practices. The correct answer, isolation in a negative pressure room, is not considered a standard precaution but rather a transmission-based precaution. Negative pressure rooms are specifically designed for patients with airborne infections, such as tuberculosis, requiring additional measures beyond the basic standard precautions. Standard precautions are broadly applicable to all patient interactions, while isolation protocols like the use of negative pressure rooms are specific to certain infection types, emphasizing their targeted nature rather than general applicability. In contrast, actions like hand hygiene, the use of gloves, and safe injection practices are essential components of standard precautions and are designed to minimize the risk of infection transmission in all clinical settings. These practices are applicable to any situation involving patient care and are critical in controlling the spread of infectious diseases.

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.

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

<https://lippincottrespiratory.examzify.com>

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