

LIPPINCOTT RESPIRATORY PRACTICE EXAM (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

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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

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- 1. What should be readily available at the bedside of a client with a chest tube in place to ensure safety?**
 - A. A tracheostomy tray
 - B. Another sterile chest tube
 - C. A bottle of sterile water
 - D. A spirometer
- 2. For a client expressing that he finds the opening in his throat disgusting after laryngectomy, which nursing diagnosis is most appropriate?**
 - A. Disturbed personal identity related to change in appearance
 - B. Deficient knowledge about stoma care
 - C. Hopelessness related to irreversible changes in body functioning
 - D. Disturbed body image related to neck surgery
- 3. 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
- 4. If a client who underwent a lobectomy reports pain while coughing after 48 hours, what should the nurse do?**
 - A. Encourage the client to rest to avoid coughing.
 - B. Encourage deep breathing to help manage pain.
 - C. Check that the PCA device is functioning properly.
 - D. Obtain a more detailed assessment of the client's pain using a pain scale.
- 5. Why might a client with tuberculosis be advised against using regular household items?**
 - A. They may retain infectious droplet nuclei
 - B. They can exacerbate coughing spells
 - C. They do not help in maintaining sanitation
 - D. They may harbor pathogens

- 6. Which home care instruction is appropriate for a client with a laryngectomy?**
- A. Maintain a soft and bland diet
 - B. Perform mouth care several times a day
 - C. Limit physical activity strictly
 - D. Ensure a dry environment to reduce moisture
- 7. What should a nurse advise a client with COPD when developing a discharge plan?**
- A. Maintain current health status
 - B. Expect to develop respiratory infections easily
 - C. Require less supplemental oxygen
 - D. Show permanent improvement
- 8. What areas of education should the nurse provide to employees in factories causing respiratory irritation to reduce laryngeal cancer risk?**
- A. Encourage smoking cessation and counseling
 - B. Promote regular alcohol consumption within limits
 - C. Advocate for brushing teeth after meals
 - D. Suggest limited use of HEPA filters in the home
- 9. Upon noticing respiratory distress, what should a nurse prioritize for a client in a tension pneumothorax situation?**
- A. Improving respiratory rate
 - B. Administering pain relief
 - C. Positioning for better airflow
 - D. Ensuring adequate oxygenation
- 10. What is an expected outcome for a client with pulmonary disease regarding ventilation-to-perfusion ratio?**
- A. A relatively matched ventilation-to-perfusion ratio.
 - B. A low ventilation-to-perfusion ratio.
 - C. A high ventilation-to-perfusion ratio.
 - D. An equal PaO₂ and PaCO₂ ratio.

Answers

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

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Explanations

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1. What should be readily available at the bedside of a client with a chest tube in place to ensure safety?

- A. A tracheostomy tray
- B. Another sterile chest tube
- C. A bottle of sterile water**
- D. A spirometer

Having a bottle of sterile water readily available at the bedside of a client with a chest tube is essential for safety because it serves a critical function in maintaining the patency and proper functioning of the chest tube drainage system. In the case of a disconnection between the chest tube and the drainage system, the sterile water can be used to submerge the end of the chest tube. This creates a water seal, preventing air from entering the pleural space, which could lead to tension pneumothorax or other complications. The sterile water also can be utilized to make adjustments to the drainage system, such as ensuring that the water seal chamber has the appropriate level to facilitate effective drainage and prevent backflow or air leaks. It is a simple yet vital measure that enhances patient safety in case of emergencies related to the chest tube. In contrast, the other items listed are not designed for the immediate needs associated with a chest tube's functionality. A tracheostomy tray is used for airway emergencies unrelated to chest tube placement. Having another sterile chest tube at the bedside may not be practical or necessary, as this scenario would typically require clinical intervention beyond simply having a replacement. A spirometer, while beneficial for promoting lung expansion and preventing atelectasis, does not directly

2. For a client expressing that he finds the opening in his throat disgusting after laryngectomy, which nursing diagnosis is most appropriate?

- A. Disturbed personal identity related to change in appearance
- B. Deficient knowledge about stoma care
- C. Hopelessness related to irreversible changes in body functioning
- D. Disturbed body image related to neck surgery**

The most appropriate nursing diagnosis in this scenario is related to disturbed body image resulting from the laryngectomy. Following such a surgical procedure, clients may experience significant changes in their appearance and the way they perceive their bodies. These changes can lead to feelings of disgust or distress, as expressed by the client regarding the opening in his throat. A laryngectomy not only alters the physical attributes of the throat but also impacts how individuals perceive themselves and how they believe others perceive them. This profound alteration can deeply affect self-esteem and body image, making it essential for healthcare providers to address these feelings. While other diagnoses could also be relevant in different contexts, the client's current expression of disgust and discomfort directly points to a struggle with how they view their body post-surgery, confirming that disturbed body image is the most fitting choice in this case.

3. 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.

4. If a client who underwent a lobectomy reports pain while coughing after 48 hours, what should the nurse do?

- A. Encourage the client to rest to avoid coughing.
- B. Encourage deep breathing to help manage pain.
- C. Check that the PCA device is functioning properly.
- D. Obtain a more detailed assessment of the client's pain using a pain scale.**

When a client reports pain while coughing 48 hours after a lobectomy, obtaining a more detailed assessment of the client's pain using a pain scale is crucial. This assessment allows the nurse to determine the severity and nature of the pain, which is essential for effective pain management. Understanding the specifics of the pain—such as its intensity, location, and any associated symptoms—guides the nurse in deciding on an appropriate intervention and ensures that the pain is managed effectively. Coughing can put significant strain on the surgical site, and pain is a common experience post-operatively; however, the need for further assessment indicates that simply managing pain or encouraging activities without understanding the underlying issue might not be sufficient. Detailed pain assessment can also help differentiate between expected post-operative pain and potential complications, such as infection or inadequate healing, enabling timely interventions when necessary. Thus, effective nursing care involves comprehensive assessment of pain to tailor management strategies appropriately.

5. Why might a client with tuberculosis be advised against using regular household items?

- A. They may retain infectious droplet nuclei**
- B. They can exacerbate coughing spells
- C. They do not help in maintaining sanitation
- D. They may harbor pathogens

A client with tuberculosis (TB) might be advised against using regular household items primarily because these items may retain infectious droplet nuclei. Tuberculosis is caused by Mycobacterium tuberculosis, which can be transmitted through airborne particles or droplet nuclei that remain suspended in the air after an infected individual coughs or sneezes. These tiny droplets can land on surfaces or items within a household, including bedding, curtains, or personal belongings. If a person with active TB uses these regular household items, there is a risk that the infectious droplet nuclei could be retained on them, posing a risk of transmission to others who come into contact with those items. This is particularly important in preventing the spread of TB to people who may be vulnerable, such as infants or those with weakened immune systems. While other options address valid concerns, they do not directly relate to the transmission of TB in the same way. For example, while some household items might exacerbate coughs or not contribute to sanitation, those issues are less critical to controlling the spread of an infectious disease like TB. The focus should remain on minimizing the risk of airborne transmission through conscientious management of potentially contaminated items.

6. Which home care instruction is appropriate for a client with a laryngectomy?

- A. Maintain a soft and bland diet
- B. Perform mouth care several times a day**
- C. Limit physical activity strictly
- D. Ensure a dry environment to reduce moisture

For a client with a laryngectomy, maintaining oral health is crucial due to the alteration in normal respiratory and swallowing functions. Performing mouth care several times a day helps to prevent aspiration pneumonia and ensures that the mouth remains clean, reducing the risk of infections. This is particularly important because laryngectomy patients breathe through a stoma, bypassing the natural filtration and humidification of air that occurs in the upper respiratory tract. In contrast, the other options do not address the unique needs of a laryngectomy patient as effectively. A soft and bland diet might be suitable for some patients, but it's not a primary concern for laryngectomy care, where maintaining oral hygiene takes precedence. Strictly limiting physical activity may unnecessarily hinder recovery and adaptation, as appropriate physical activity can be beneficial. Finally, while a dry environment could be seen as preventing excess moisture, it is critical for laryngectomy patients to have humidified air to prevent airway irritation and dehydration, making this option less suitable.

7. What should a nurse advise a client with COPD when developing a discharge plan?

- A. Maintain current health status
- B. Expect to develop respiratory infections easily**
- C. Require less supplemental oxygen
- D. Show permanent improvement

For a client with COPD, it is important for a nurse to provide realistic expectations regarding their condition, especially when developing a discharge plan. While patients may wish to maintain their health status or experience improvement, the progressive and chronic nature of COPD often means that individuals are at an increased risk for respiratory infections due to compromised lung function and mucus clearance. Advising clients that they can expect to develop respiratory infections more easily helps them understand the need for vigilance in managing their symptoms and recognizing potential exacerbations early. This knowledge can empower patients to adopt preventive measures, such as regular vaccinations, proper hand hygiene, and avoiding exposure to respiratory irritants, which can ultimately lead to a better quality of life. In contrast, maintaining the current health status, requiring less supplemental oxygen, and showing permanent improvement are either unrealistic or overly optimistic expectations for someone with a chronic condition like COPD. Such messages could lead to misunderstanding the nature of their disease management and the importance of ongoing care and symptom monitoring.

8. What areas of education should the nurse provide to employees in factories causing respiratory irritation to reduce laryngeal cancer risk?

- A. Encourage smoking cessation and counseling**
- B. Promote regular alcohol consumption within limits
- C. Advocate for brushing teeth after meals
- D. Suggest limited use of HEPA filters in the home

Encouraging smoking cessation and counseling is crucial in reducing the risk of laryngeal cancer, especially for employees in environments that expose them to respiratory irritants. Smoking is a significant risk factor for laryngeal cancer, and when combined with exposure to harmful substances in the workplace, such as chemicals, dust, and fumes, the risk is further amplified. Educating employees about the dangers of smoking and providing resources for cessation can significantly lower their overall risk of developing cancer. In addition, factors such as alcohol consumption can also play a role in increasing cancer risks; however, promoting regular alcohol consumption, even within limits, does not contribute positively to this health initiative. While maintaining good oral hygiene, like brushing teeth after meals, is important for general health, it does not specifically impact laryngeal cancer risk related to respiratory irritants. Finally, while HEPA filters can help improve indoor air quality, their limited use in the home does not directly address the workplace exposures that are relevant to the employees' health in factories where respiratory irritants are present. Therefore, the focus on smoking cessation stands out as the most impactful educational point for reducing laryngeal cancer risk among these factory employees.

9. Upon noticing respiratory distress, what should a nurse prioritize for a client in a tension pneumothorax situation?

- A. Improving respiratory rate
- B. Administering pain relief
- C. Positioning for better airflow
- D. Ensuring adequate oxygenation**

In a tension pneumothorax, there is a critical accumulation of air in the pleural space that compromises the integrity of the thoracic cavity. This condition leads to increased intrathoracic pressure, which can severely impair respiratory mechanics and reduce oxygenation to vital organs. Therefore, prioritizing adequate oxygenation is essential in managing a client experiencing respiratory distress from this life-threatening situation. Ensuring oxygenation involves administering supplemental oxygen and addressing the underlying cause of the hypoxia. In many cases, this entails immediate interventions such as needle decompression or chest tube placement to alleviate the pressure in the pleural space. By addressing oxygenation first, the nurse ensures that the client has the best chance of stabilizing their respiratory function and preventing further complications like cardiac arrest. While improving the respiratory rate, administering pain relief, and positioning for better airflow are also important aspects of care, they become secondary to the immediate need for adequate oxygenation in a tension pneumothorax scenario. Focusing on oxygen delivery is paramount, as hypoxia can quickly lead to serious outcomes. In summary, ensuring adequate oxygenation is the most critical priority in managing respiratory distress caused by tension pneumothorax.

10. What is an expected outcome for a client with pulmonary disease regarding ventilation-to-perfusion ratio?

- A. A relatively matched ventilation-to-perfusion ratio.**
- B. A low ventilation-to-perfusion ratio.
- C. A high ventilation-to-perfusion ratio.
- D. An equal PaO₂ and PaCO₂ ratio.

The expected outcome for a client with pulmonary disease regarding the ventilation-to-perfusion (V/Q) ratio is a relatively matched V/Q ratio. In a healthy lung, there is a balance between ventilation (the air that reaches the alveoli) and perfusion (the blood that reaches the alveoli). This optimal matching allows for effective gas exchange, resulting in proper oxygenation of the blood and removal of carbon dioxide. In various pulmonary diseases, while some changes may occur in the V/Q ratio due to impaired ventilation or altered perfusion, the goal or expected outcome is to maintain as much balance as possible to facilitate adequate gas exchange. A relatively matched V/Q ratio indicates that despite the underlying disease, efforts through therapy and treatment aim to optimize ventilation and maintain effective blood flow. This is crucial because significant mismatches can lead to decreased oxygenation and increased work of breathing, which are common complications in clients with pulmonary conditions. Thus, a relatively matched V/Q ratio in clients with pulmonary disease underscores the importance of treatment strategies that aim to improve both ventilation and perfusion to maintain effective respiratory function and gas exchange.

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:

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

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