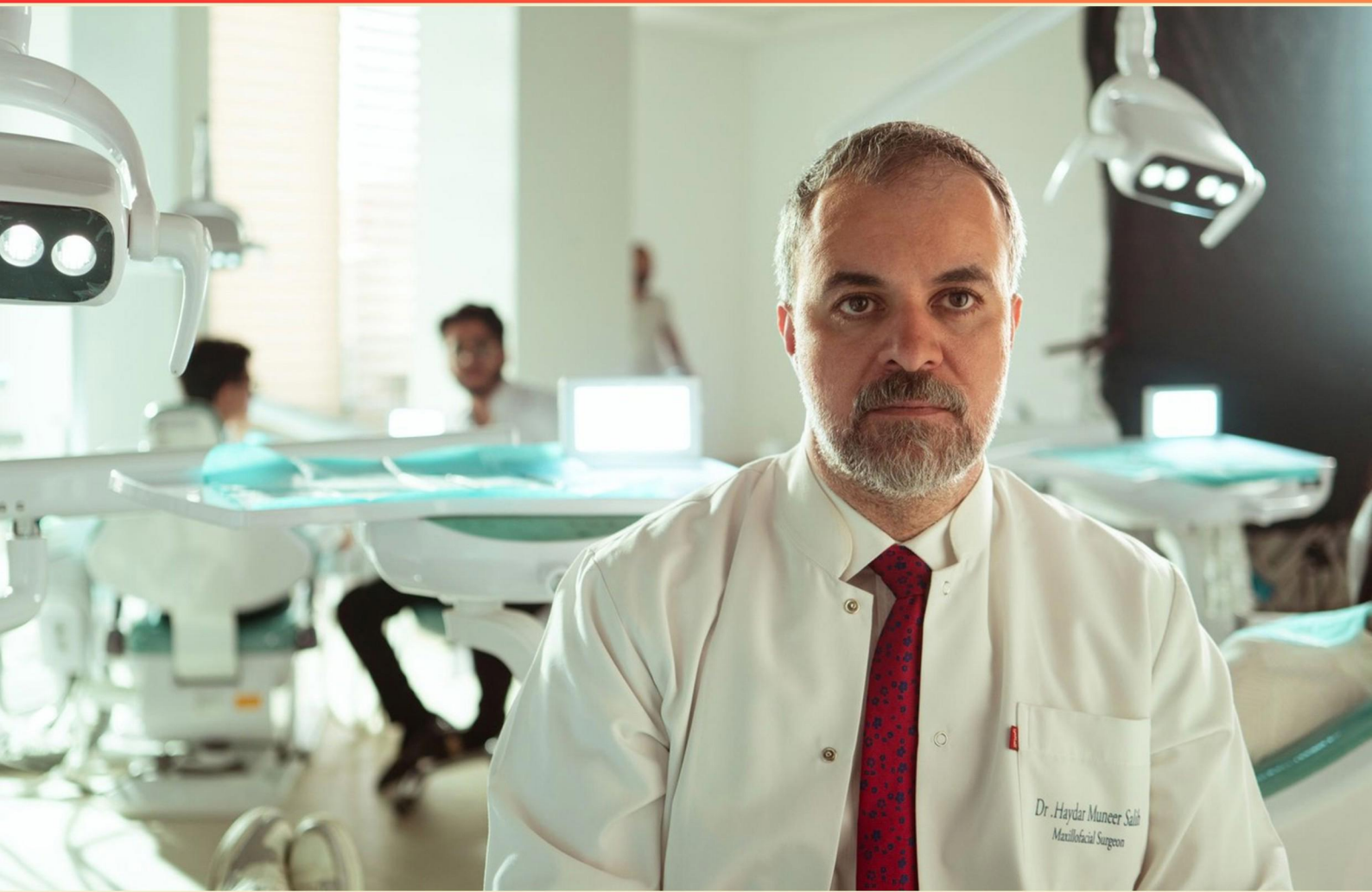


SAUNDERS RESPIRATORY PRACTICE (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE**

<https://saundersrespiratory.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	16

SAMPLE

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

SAMPLE

- 1. What is the significance of surfactant in the lungs?**
 - A. It prevents gas exchange
 - B. It increases surface tension
 - C. It reduces surface tension
 - D. It filters air
- 2. What is the primary purpose of a nebulizer in respiratory therapy?**
 - A. To facilitate deep breathing exercises
 - B. To deliver medication directly to the lungs
 - C. To monitor patient vitals
 - D. To improve oxygenation levels
- 3. What item should a client with silicosis wear during periods of exposure to silica particles?**
 - A. Gloves
 - B. Face shield
 - C. Goggles
 - D. Mask
- 4. What is the duration for which a tuberculosis client is typically considered contagious?**
 - A. Less than 1 week
 - B. About 2 to 3 weeks of medication
 - C. Over 6 weeks
 - D. Only while symptomatic
- 5. What should the nurse do first when the low-pressure alarm sounds on a ventilator?**
 - A. Call the respiratory therapist
 - B. Ventilate the client manually
 - C. Check the ventilator settings
 - D. Assess the patient's vitals

- 6. When providing instructions about using an incentive spirometer, what statement indicates the client needs further teaching?**
- A. "I will use it every hour while awake."
 - B. "I should exhale completely before inhaling."
 - C. "I will hold my breath for 10 seconds after maximal inspiration."
 - D. "I need to keep the gauge in the green zone."
- 7. What role do chemoreceptors play in respiratory regulation?**
- A. They enhance lung capacity
 - B. They detect changes in blood gas levels
 - C. They directly control heart rate
 - D. They aid in producing mucus
- 8. Which action helps to improve the effectiveness of pursed lip breathing?**
- A. Inhale rapidly through the mouth
 - B. Exhale slowly through pursed lips
 - C. Hold breath for several seconds
 - D. Practice only while resting
- 9. What is the significance of the cough reflex in the respiratory system?**
- A. A protective mechanism to clear airways of irritants
 - B. A method to enhance lung capacity
 - C. A method of maintaining heart rate during emergencies
 - D. A voluntary action to improve breathing
- 10. What is the correct approach to assess for normal breath sounds in a client?**
- A. Auscultate while the patient is resting quietly
 - B. Assess only when the patient is standing
 - C. Auscultate after the patient has just exercised
 - D. Check breath sounds when the patient is speaking

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is the significance of surfactant in the lungs?

- A. It prevents gas exchange
- B. It increases surface tension
- C. It reduces surface tension**
- D. It filters air

Surfactant plays a crucial role in the lungs by reducing surface tension within the alveoli, the tiny air sacs where gas exchange occurs. By decreasing surface tension, surfactant helps to prevent the alveoli from collapsing during exhalation, thereby maintaining their stability and ensuring efficient gas exchange during breathing. Without sufficient surfactant, the alveoli would have a higher tendency to collapse, leading to increased work of breathing and reduced oxygenation of the blood. This is particularly significant in conditions such as neonatal respiratory distress syndrome, where premature infants lack enough surfactant, resulting in respiratory difficulties. The presence of surfactant is essential for normal lung function and optimum respiratory mechanics.

2. What is the primary purpose of a nebulizer in respiratory therapy?

- A. To facilitate deep breathing exercises
- B. To deliver medication directly to the lungs**
- C. To monitor patient vitals
- D. To improve oxygenation levels

The primary purpose of a nebulizer in respiratory therapy is to deliver medication directly to the lungs. This device converts liquid medication into a fine mist that can be inhaled, allowing for rapid absorption and effectiveness against respiratory conditions such as asthma, COPD, and other airway obstructive diseases. By delivering medication directly to the site of action—the lungs—nebulizers help in achieving a quicker therapeutic effect compared to oral or injected routes, which may need to pass through other body systems before reaching the lungs. In contrast, while deep breathing exercises can enhance lung function and improve overall respiratory health, they do not involve the delivery of medication, which is the core function of a nebulizer. Monitoring patient vitals is essential in a clinical setting but is not a direct function of nebulization therapy. Similarly, while nebulizers can indirectly contribute to improved oxygenation by alleviating bronchoconstriction through medication, their primary role remains focused on delivering specific medications to treat the underlying respiratory issues.

3. What item should a client with silicosis wear during periods of exposure to silica particles?

- A. Gloves
- B. Face shield
- C. Goggles
- D. Mask**

In the context of silicosis, which is a lung disease caused by inhaling fine silica dust, the most crucial protective measure is to prevent inhalation of these particles. Wearing a mask specifically designed to filter out dust and particulate matter is essential for minimizing respiratory exposure during periods when a client is potentially exposed to silica particles. A mask that provides a proper seal and is rated for respirable particles will significantly reduce the risk of inhaling silica, thereby protecting the lungs and reducing the likelihood of silicosis progression. While gloves, face shields, and goggles are important for protecting other parts of the body during exposure to hazardous materials, they do not address the primary concern of respiratory protection in cases of silicosis. Thus, the focus is on utilizing a mask designed for respiratory protection in environments where silica dust is present.

4. What is the duration for which a tuberculosis client is typically considered contagious?

- A. Less than 1 week
- B. About 2 to 3 weeks of medication**
- C. Over 6 weeks
- D. Only while symptomatic

The correct choice indicates that a tuberculosis (TB) client is typically considered contagious for about 2 to 3 weeks of medication after treatment begins. This timeframe is important because it aligns with the understanding of how TB spreads and the effectiveness of initial treatment. When a person with active TB starts appropriate anti-tubercular medication, the likelihood of transmission decreases significantly after just a few days, but the recognized period for ongoing contagiousness is generally around 2 to 3 weeks into treatment. By then, most patients begin showing improvement and significantly reduce the risk of spreading the bacteria to others. Understanding this timeline is crucial for managing TB cases effectively, particularly in terms of public health measures, isolating patients, and controlling outbreaks. It provides a practical framework for healthcare professionals when advising patients and planning their care.

5. What should the nurse do first when the low-pressure alarm sounds on a ventilator?

- A. Call the respiratory therapist
- B. Ventilate the client manually**
- C. Check the ventilator settings
- D. Assess the patient's vitals

When the low-pressure alarm sounds on a ventilator, the most immediate action for the nurse is to ventilate the client manually. This is crucial because a low-pressure alarm typically indicates that there may be a disconnection in the ventilator circuit or a significant change in the patient's respiratory status, such as an accidental extubation. Manually ventilating the patient ensures that they continue to receive oxygen until the cause of the alarm is identified and resolved, thereby maintaining effective ventilation and preventing potential hypoxia or respiratory distress. After establishing manual ventilation, the nurse can proceed to investigate the cause of the alarm by checking the ventilator settings, assessing the patient's vital signs, or calling the respiratory therapist if needed. However, priority is given to providing adequate respiratory support immediately when the alarm indicates a potential threat to the patient's airway and breathing.

6. When providing instructions about using an incentive spirometer, what statement indicates the client needs further teaching?

- A. "I will use it every hour while awake."
- B. "I should exhale completely before inhaling."
- C. "I will hold my breath for 10 seconds after maximal inspiration."**
- D. "I need to keep the gauge in the green zone."

The statement regarding holding the breath for 10 seconds after maximal inspiration suggests a misunderstanding of the purpose and technique of using an incentive spirometer. While it is beneficial for a patient to take deep breaths and hold them after inhalation to maximize lung expansion, the specific duration of 10 seconds may not be universally applicable or necessary for everyone. Typically, the guidelines for using an incentive spirometer focus on taking slow, deep breaths to help expand the lungs and prevent complications such as atelectasis. The emphasis is on achieving maximal inspiratory levels indicated by the gauge rather than a rigid time duration for holding the breath. In contrast, the other statements reflect proper understanding. Using the device every hour while awake promotes regular lung expansion, exhaling completely before inhaling ensures that the client inhales fresh air to maximize lung volume, and keeping the gauge in the green zone indicates that the patient is achieving their targeted airflow and lung capacity goals. These responsibilities and expectations are key elements in effective incentive spirometer usage for improving respiratory function.

7. What role do chemoreceptors play in respiratory regulation?

- A. They enhance lung capacity
- B. They detect changes in blood gas levels**
- C. They directly control heart rate
- D. They aid in producing mucus

Chemoreceptors play a crucial role in respiratory regulation by detecting changes in blood gas levels, particularly oxygen (O₂) and carbon dioxide (CO₂) concentrations. Located primarily in the carotid and aortic bodies, as well as within the central nervous system, these specialized receptors monitor the chemical composition of the blood. When levels of CO₂ rise or O₂ levels drop, chemoreceptors send signals to the respiratory center in the brainstem to adjust breathing rates and depth. This ensures that the body maintains homeostasis by regulating gas exchange in the lungs, ultimately balancing the levels of oxygen and carbon dioxide in the blood. This responsive mechanism is vital for maintaining adequate oxygen supply and removing metabolic waste gases, especially during times of increased physical activity or respiratory distress. The other options do not accurately represent the role of chemoreceptors, as they do not enhance lung capacity, control heart rate directly, or produce mucus. Chemoreceptors are specifically focused on monitoring and responding to changes in blood gases.

8. Which action helps to improve the effectiveness of pursed lip breathing?

- A. Inhale rapidly through the mouth
- B. Exhale slowly through pursed lips**
- C. Hold breath for several seconds
- D. Practice only while resting

Exhaling slowly through pursed lips is a key component of pursed lip breathing, as it encourages prolonged exhalation, which can help improve air exchange and reduce the feeling of breathlessness. This technique creates a slight back pressure in the airways, keeping them open longer during exhalation and preventing premature closure of the small airways. This extended exhalation can lead to improved ventilation and is particularly beneficial for individuals with respiratory conditions such as COPD. The other choices do not contribute effectively to the goals of pursed lip breathing. Rapid inhalation could lead to hyperventilation and may not allow for the controlled breathing pattern that is essential to this technique. Holding the breath for several seconds is not a component of pursed lip breathing, as it does not facilitate the prolonged exhalation that helps improve lung function. Practicing only while resting limits the application of this technique, which is also beneficial during physical activity to manage dyspnea and enhance respiratory efficiency.

9. What is the significance of the cough reflex in the respiratory system?

- A. A protective mechanism to clear airways of irritants**
- B. A method to enhance lung capacity
- C. A method of maintaining heart rate during emergencies
- D. A voluntary action to improve breathing

The cough reflex serves as a vital protective mechanism within the respiratory system, primarily functioning to clear the airways of irritants, such as dust, smoke, mucus, or pathogens. When these irritants stimulate sensory receptors in the airway, a signal is sent to the cough center in the brain, prompting a forceful expulsion of air from the lungs. This process helps to remove unwanted substances from the airways, thereby preventing them from entering the lungs and potentially causing infection or other respiratory issues. The significance of the cough reflex extends beyond simple airway clearance; it is an essential component of respiratory health, as it aids in maintaining clear air passages and ensuring optimal gas exchange. Without an effective cough reflex, the body would be more susceptible to respiratory infections and irritations, highlighting the protective role it plays in overall respiratory function.

10. What is the correct approach to assess for normal breath sounds in a client?

- A. Auscultate while the patient is resting quietly**
- B. Assess only when the patient is standing
- C. Auscultate after the patient has just exercised
- D. Check breath sounds when the patient is speaking

Auscultating while the patient is resting quietly is the correct approach to assess for normal breath sounds because this creates a stable environment that allows for a clear evaluation of lung sounds. When a patient is at rest, their breathing is typically more regulated and less influenced by external factors, such as exertion or stress. This provides a reliable baseline for understanding the normal physiological sounds produced by the lungs, which include bronchial, bronchiovesicular, and vesicular breath sounds. In contrast, conducting the assessment in other conditions, such as when the patient is standing, may not produce the same clarity in breath sounds, as some sounds can be altered by body positioning due to gravitational influences on lung volumes. Assessing breath sounds immediately after exercise could lead to the identification of abnormal sounds that do not reflect the patient's resting state. Lastly, checking breath sounds while the patient is speaking may introduce additional noise, thus compromising the clarity and accuracy of the assessment. Therefore, auscultation during a period of quiet rest is essential for obtaining the best representation of normal breath sounds.

SAMPLE

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://saundersrespiratory.examzify.com>

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

SAMPLE