Supplemental Oxygen and Oxygen Management Practice Test (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. Low O2 content in body tissues is called what?

A. Hypoxemia

B. Hypoxia

C. Anoxia

D. Hyperoxia

2. With a bag valve mask (ambu-bag) used for mobility, which additional equipment should be used?

A. nasal cannula adapter

B. portable humidifier with filter

C. trach swivel connector with expandable tubing

D. oxygen blender with regulator

3. When using reservoir masks, inflate the bag by placing a finger over which valve before placing the mask on the patient?

A. Exhalation valve

B. Inhalation valve

C. Reservoir valve

D. Ventilation valve

4. Self-monitoring during activity and rest includes which two measures?

A. Heart rate and blood pressure

B. SpO2 and titration

C. Respiratory rate and oxygen flow

D. Temperature and sleep quality

5. Which oxygen delivery device covers both the mouth and nose, making it more suitable for mouth breathers than a standard nasal cannula?

A. Nasal cannula

B. Simple face mask

C. Non-rebreather mask

D. Venturi mask

6. The Minnesota State Practice Act clearly states the scope of PT practice and oxygen administration. True or False?

A. True

B. Not specified

C. Only under direct supervision

D. False

7. Compared with ambient air, supplemental oxygen increases FiO2 by raising it above what baseline percentage?

A. Below 21%

B. Zero change in FiO2 from baseline air

C. Exactly 15%

D. Above 21%

8. A reservoir mask with OPEN exhalation ports is classified as which type?

A. Non-rebreather

B. Partial rebreather

C. Simple mask

D. Nasal cannula

9. Which delivers much higher flow rates, a high flow high humidity nasal cannula OR high flow nasal cannula?

A. Oxymizer

B. Venturi Mask

C. Standard Nasal Cannula

D. High Flow High Humidity Nasal Cannula

10. Which oxygen delivery device can dry out airways and cause nose bleeds at higher flows?

A. Venturi mask

B. Simple mask

C. Standard nasal cannula

D. Non-rebreather mask

Answers

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

Explanations

1. Low O2 content in body tissues is called what?

A. Hypoxemia

B. Hypoxia

C. Anoxia

D. Hyperoxia

Oxygen delivery to tissues is what keeps cells functioning, and when tissues don't receive enough oxygen, that condition is called hypoxia. Low O2 content in body tissues means the cells aren't getting the oxygen they need to meet metabolic demands, so tissue hypoxia occurs. It's helpful to distinguish related terms: hypoxemia is low oxygen in the blood (arterial oxygen), which can lead to tissue hypoxia but is a different measure; anoxia is a complete lack of oxygen; and hyperoxia is an excess of oxygen. In practice, tissue hypoxia can arise from problems with oxygen delivery (like poor blood flow or anemia) or from poor oxygen utilization, even if the blood's oxygen content isn't severely low.

2. With a bag valve mask (ambu-bag) used for mobility, which additional equipment should be used?

A. nasal cannula adapter

B. portable humidifier with filter

C. trach swivel connector with expandable tubing

D. oxygen blender with regulator

Delivering ventilation with a bag-valve mask during movement requires a flexible, secure connection to the airway that won't kink or pull as you move. A trach swivel connector with expandable tubing provides that, connecting the ambu-bag to a tracheostomy tube (or airway adaptor) while allowing rotation and movement. The expandable tubing adds length and flexibility so you can reposition or transport the patient without compromising the seal or dislodging the tube. The other options don't address the practical hardware needed for a moving patient: a nasal cannula adapter isn't compatible with a bag-valve mask; a portable humidifier with filter adds bulk without improving the airway interface; and a regulator-equipped oxygen blender changes FiO2 but isn't the essential mobility-compatible interface for BVM ventilation.

3. When using reservoir masks, inflate the bag by placing a finger over which valve before placing the mask on the patient?

A. Exhalation valve

B. Inhalation valve

C. Reservoir valve

D. Ventilation valve

To ensure the reservoir bag is ready with oxygen, you want to fill it before placing the mask on the patient. The inhalation path is the route that feeds gas from the source into the reservoir and then toward the patient during inhalation. By placing a finger over the inhalation valve, you momentarily block that path, forcing the oxygen flow to push into the reservoir bag and inflate it. Once the bag is full, you remove your finger and place the mask on the patient, so inhalation draws from that prefilled reservoir while exhaled air exits through the appropriate port. Covering other valves wouldn't reliably inflate the bag and could disrupt proper function of the mask system.

4. Self-monitoring during activity and rest includes which two measures?

A. Heart rate and blood pressure

B. SpO2 and titration

C. Respiratory rate and oxygen flow

D. Temperature and sleep quality

Monitoring oxygenation during activity and rest hinges on two things: the oxygen saturation level and the corresponding adjustment of delivery to keep that level in the target range. SpO2, measured with a pulse oximeter, tells you how well the blood is carrying oxygen at any moment. Titration is the process of adjusting the oxygen delivery (flow or FiO2) based on that SpO2 reading to maintain the desired saturation. Together, they capture both the feedback you need from the body and the action you take to keep oxygenation safe and effective. Other options don't provide this direct link between oxygenation status and management. Heart rate and blood pressure are general vitals and don't reflect how well tissues are oxygenated. Respiratory rate alone isn't enough to judge oxygenation without SpO2, and oxygen flow or temperature and sleep quality don't convey the monitoring-and-adjustment loop essential for self-managed oxygen therapy.

5. Which oxygen delivery device covers both the mouth and nose, making it more suitable for mouth breathers than a standard nasal cannula?

A. Nasal cannula

B. Simple face mask

C. Non-rebreather mask

D. Venturi mask

When oxygen needs to reach through both airway passages, the interface that covers both the mouth and the nose provides more reliable delivery for someone who breathes through the mouth. A simple face mask sits over the nose and mouth, creating a seal that minimizes oxygen loss through the mouth and delivers a higher effective FiO2 at modest flow rates compared to a nasal cannula, which only feeds oxygen through the nostrils. This makes it a better choice for mouth breathers. While other masks can also cover both areas, the simple face mask is the straightforward option designed for this purpose, giving a practical balance of coverage and ease of use.

6. The Minnesota State Practice Act clearly states the scope of PT practice and oxygen administration. True or False?

A. True

B. Not specified

C. Only under direct supervision

D. False

Oxygen administration isn't clearly defined as part of a physical therapist's scope in Minnesota law. The PT Practice Act describes what physical therapists may evaluate and treat to improve movement and function, but it does not explicitly authorize or spell out oxygen administration within that scope. Oxygen therapy is typically regulated under medical gas/respiratory care rules and requires physician orders and appropriate supervision and protocols. Because the act itself doesn't unambiguously include oxygen administration, the statement is not true. Always refer to the related rules and statutes governing oxygen therapy for precise requirements.

7. Compared with ambient air, supplemental oxygen increases FiO2 by raising it above what baseline percentage?

A. Below 21%

B. Zero change in FiO2 from baseline air

C. Exactly 15%

D. Above 21%

The key idea is that the oxygen content of room air is about 21%. When you give supplemental oxygen, you increase the fraction of inspired oxygen, so the FiO2 rises above that 21% baseline. Therefore, the correct understanding is that supplemental oxygen raises FiO2 above 21%. The other ideas don't fit because room air already has its FiO2 at about 21%, so it wouldn't be described as below that, and providing oxygen does not keep FiO2 at the exact same level. An exact value like 15% would be lower than ambient air, which isn't how supplemental oxygen works in practice.

8. A reservoir mask with OPEN exhalation ports is classified as which type?

A. Non-rebreather

B. Partial rebreather

C. Simple mask

D. Nasal cannula

The key idea is whether exhaled breath can mix back into the oxygen reservoir for the next inhalation. A reservoir mask with open exhalation ports allows some of the exhaled gas to be drawn back into the reservoir and rebreathed on the next breath, which is the defining feature of a partial rebreather. The open vents simply vent what's being exhaled to the atmosphere, but without a one-way valve preventing backflow, the bag can still contain a mix of fresh oxygen and exhaled gas. That's why this setup is classified as a partial rebreather. It's not a non-rebreather, because a non-rebreather uses valves to prevent any exhaled gas from entering the reservoir, delivering oxygen with little to no rebreathing. It's not a simple mask or a nasal cannula, since those lack a reservoir for storing oxygen for the next breath.

9. Which delivers much higher flow rates, a high flow high humidity nasal cannula OR high flow nasal cannula?

A. Oxymizer

B. Venturi Mask

C. Standard Nasal Cannula

D. High Flow High Humidity Nasal Cannula

The important idea is that true high-flow delivery requires a system that can push large volumes of gas while conditioning it for the patient. A high-flow nasal cannula that provides heated, humidified gas is designed to do just that, allowing flows up to about 60 L/min while keeping the gas warm and moist. The humidification is a key part of enabling these higher flows without drying the airway, making it the option capable of delivering much higher flow rates. Other devices in the list are either limited to low flows or deliver fixed, smaller amounts of flow, so they cannot match the high-flow, humidified capability of the high-flow high humidity nasal cannula.

10. Which oxygen delivery device can dry out airways and cause nose bleeds at higher flows?

A. Venturi mask

B. Simple mask

C. Standard nasal cannula

D. Non-rebreather mask

The main idea is that dry oxygen delivered through the nose can irritate and dry the nasal mucosa, especially at higher flow rates. A nasal cannula sends gas directly into the nostrils, so when you push up the flow without humidification, the dry oxygen can dehydrate the mucosa, leading to crusting and nosebleeds. Masks sit over the nose and mouth and are often used with humidified systems or in ways that don't expose the nasal passages as directly, so dryness and bleeding are less likely to be the main issue at typical use. In clinical practice, if you need higher flows through a nasal cannula, humidification is important to prevent drying and epistaxis.

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://supplementaloxygenmgmt.examzify.com

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