

# Upper Respiratory Disorders 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

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- 1. What should patients be taught regarding nasal care post-surgery?**
  - A. To blow their nose frequently**
  - B. To avoid blowing their nose**
  - C. To use saline sprays generously**
  - D. To avoid dairy products**
  
- 2. What is one of the clinical manifestations of pharyngitis?**
  - A. Rash on the torso**
  - B. Odynophagia**
  - C. Cough with phlegm**
  - D. Shortness of breath**
  
- 3. What should be assessed to ensure the patient does not aspirate after a laryngectomy?**
  - A. Hydration levels**
  - B. Gag reflex**
  - C. Speech clarity**
  - D. Emotional state**
  
- 4. Which of the following is considered the most common form of apnea?**
  - A. Central sleep apnea**
  - B. Mixed sleep apnea**
  - C. Obstructive sleep apnea**
  - D. Hypopnea syndrome**
  
- 5. In most cases, epistaxis is considered what kind of phenomenon?**
  - A. Malignant**
  - B. Benign**
  - C. Critical**
  - D. Chronic**

- 6. Which intervention is essential for patients with hypertension taking oral decongestants?**
- A. They should take higher doses of decongestants**
  - B. Use caution due to potential blood pressure increase**
  - C. They should avoid all medications**
  - D. They can use any decongestants freely**
- 7. Which nursing care action is crucial for a postoperative larynx cancer patient?**
- A. Providing nutrition counseling**
  - B. Elevating the head of the bed**
  - C. Regular vocal exercises**
  - D. Monitoring pain levels**
- 8. Which class of drugs is commonly used to relieve pain in rhinosinusitis?**
- A. Antihistamines**
  - B. Narcotics**
  - C. NSAIDs**
  - D. Antibiotics**
- 9. What should be used if a patient is allergic to penicillin or cephalosporins?**
- A. Cephalosporin**
  - B. Vancomycin**
  - C. Macrolide such as azithromycin**
  - D. Amoxicillin**
- 10. What is the medical term for a nosebleed?**
- A. Epistaxis**
  - B. Rhinorrhea**
  - C. Rhinitis**
  - D. Coryza**

## Answers

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

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## **Explanations**

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**1. What should patients be taught regarding nasal care post-surgery?**

- A. To blow their nose frequently
- B. To avoid blowing their nose**
- C. To use saline sprays generously
- D. To avoid dairy products

In the context of nasal care following surgery, it is essential for patients to be informed that blowing their nose should be avoided. This is primarily because blowing the nose can create pressure in the nasal passages, which could disrupt healing and lead to complications such as bleeding or even displacement of any surgical alterations made during the procedure. By not engaging in this action, patients help ensure a more stable healing environment for the nasal tissues, allowing for optimal recovery and reducing the risk of post-operative complications. Other practices, such as using saline sprays, can support nasal moisture and help with healing, but the key principle emphasized in post-surgical care is the importance of avoiding any activities that could jeopardize the surgical results.

**2. What is one of the clinical manifestations of pharyngitis?**

- A. Rash on the torso
- B. Odynophagia**
- C. Cough with phlegm
- D. Shortness of breath

Odynophagia, or painful swallowing, is a common clinical manifestation of pharyngitis. This condition often arises due to inflammation and irritation of the throat, which can result from viral or bacterial infections. As the inflamed tissues come into contact with food or liquids during swallowing, discomfort can occur, leading to the characteristic pain associated with odynophagia. This symptom is particularly relevant when evaluating patients with pharyngitis, as it directly relates to the physiological irritation of the throat. In contrast, the other choices do not typically align with the specific clinical presentations of pharyngitis. For instance, a rash on the torso may indicate a different condition, such as an allergic reaction or a systemic viral infection, rather than being a characteristic of pharyngitis itself. Similarly, a cough with phlegm is more indicative of a lower respiratory tract issue, such as bronchitis or pneumonia, rather than isolated pharyngitis. Lastly, shortness of breath is not a primary symptom of pharyngitis, as this condition primarily affects the throat rather than the respiratory system's airflow. Therefore, odynophagia stands out as a direct symptom of pharyngitis, helping to confirm the diagnosis.

**3. What should be assessed to ensure the patient does not aspirate after a laryngectomy?**

- A. Hydration levels**
- B. Gag reflex**
- C. Speech clarity**
- D. Emotional state**

After a laryngectomy, the patient's ability to protect their airway is compromised, making the assessment of the gag reflex crucial. The gag reflex is an important protective mechanism that helps prevent aspiration by triggering a contraction of the muscles in the throat if an object or food is accidentally entered into the airway. If the gag reflex is absent or diminished, the patient is at higher risk for aspiration when eating or drinking, which can lead to serious complications such as aspiration pneumonia. While hydration levels, speech clarity, and emotional state are all important aspects of post-operative care, they do not directly address the immediate risk of aspiration as the gag reflex does. Assessing the gag reflex allows healthcare providers to determine if the patient can safely swallow without risking the inhalation of food or fluid into the lungs. This assessment is an essential part of ensuring the patient's safety in their recovery process following a laryngectomy.

**4. Which of the following is considered the most common form of apnea?**

- A. Central sleep apnea**
- B. Mixed sleep apnea**
- C. Obstructive sleep apnea**
- D. Hypopnea syndrome**

Obstructive sleep apnea is recognized as the most prevalent form of sleep apnea, affecting a significant portion of the population. This condition occurs when the muscles in the throat relax excessively during sleep, leading to repeated interruptions in breathing. These interruptions can result in fragmented sleep and can cause various health issues due to inadequate oxygen flow to the body. Obstructive sleep apnea is particularly notable for its association with risk factors such as obesity, age, and anatomical factors of the airway, making it a common diagnosis during sleep studies. While central sleep apnea and mixed sleep apnea involve different mechanisms relating to the brain's control over breathing, they occur less frequently compared to obstructive sleep apnea. Hypopnea syndrome, characterized by periods of shallow breathing or significantly reduced airflow, also does not occur with the same frequency as obstructive sleep apnea. Thus, the recognition of obstructive sleep apnea as the most common form is well-supported by clinical evidence and observational data.

**5. In most cases, epistaxis is considered what kind of phenomenon?**

- A. Malignant**
- B. Benign**
- C. Critical**
- D. Chronic**

Epistaxis, commonly referred to as a nosebleed, is typically viewed as a benign phenomenon in most cases. This classification stems from the fact that the vast majority of nosebleeds are self-limiting and occur due to minor causes such as nasal dryness, irritation, or minor trauma. They are usually not indicative of a serious underlying medical condition, and the vast majority can be effectively managed at home with simple first-aid measures. While there are instances where epistaxis can be associated with more serious health issues, such as coagulopathies or vascular malformations, these cases are much less common. The benign nature of most epistaxis makes it an important distinction in medical training, as it guides healthcare providers in assessing the urgency of the situation and determining the appropriate response for patients experiencing this condition.

**6. Which intervention is essential for patients with hypertension taking oral decongestants?**

- A. They should take higher doses of decongestants**
- B. Use caution due to potential blood pressure increase**
- C. They should avoid all medications**
- D. They can use any decongestants freely**

For patients with hypertension who are taking oral decongestants, it is crucial to use caution due to the potential increase in blood pressure. Oral decongestants, such as pseudoephedrine, work by constricting blood vessels to decrease swelling and congestion in the nasal passages. However, this vasoconstrictive effect can also raise blood pressure, which poses a risk for individuals with hypertension. Monitoring blood pressure and advising patients to consult their healthcare provider before using oral decongestants can help mitigate risks. While some might think that avoiding medications altogether is the safest route, patients often need treatment for nasal congestion, especially if it affects their quality of life. Thus, understanding the impact of decongestants on their blood pressure is essential for managing their overall health effectively.

**7. Which nursing care action is crucial for a postoperative larynx cancer patient?**

- A. Providing nutrition counseling**
- B. Elevating the head of the bed**
- C. Regular vocal exercises**
- D. Monitoring pain levels**

Elevating the head of the bed is crucial for a postoperative larynx cancer patient because it facilitates easier breathing and can help prevent complications such as aspiration and respiratory distress. After surgery, patients may have swelling or other issues related to their airway, and having the head elevated can reduce pressure on the airway structures. This position also aids in the drainage of secretions and promotes better pulmonary function. For a patient recovering from laryngeal surgery, ensuring adequate airway clearance and comfort is paramount, making this nursing action particularly vital in the postoperative phase. Other actions such as nutrition counseling, vocal exercises, and pain management are also important but do not have the same immediate impact on the patient's airway safety and comfort as elevating the head of the bed does.

**8. Which class of drugs is commonly used to relieve pain in rhinosinusitis?**

- A. Antihistamines**
- B. Narcotics**
- C. NSAIDs**
- D. Antibiotics**

Nonsteroidal anti-inflammatory drugs (NSAIDs) are commonly used to relieve pain in cases of rhinosinusitis. These medications function by reducing inflammation and alleviating pain, making them an effective choice for managing the discomfort associated with sinus pressure and inflammation. Rhinosinusitis often causes symptoms such as facial pain or pressure, sinus headache, and generalized discomfort, all of which NSAIDs are designed to address. Additionally, these drugs can help decrease fever, which may occasionally accompany rhinosinusitis, further enhancing patient comfort. Other classes of drugs mentioned may play supportive roles in the overall management of rhinosinusitis but are not primarily indicated for pain relief. Antihistamines are used primarily for allergy control and may not be effective for pain relief. Narcotics are typically reserved for severe pain and have a potential for dependence and side effects that make them less suitable for treating mild to moderate pain in this context. Antibiotics are used to treat bacterial infections but do not provide relief from pain directly related to inflammation and swelling associated with rhinosinusitis.

**9. What should be used if a patient is allergic to penicillin or cephalosporins?**

- A. Cephalosporin**
- B. Vancomycin**
- C. Macrolide such as azithromycin**
- D. Amoxicillin**

The use of macrolides, such as azithromycin, is a suitable choice for patients with allergies to penicillin or cephalosporins. Macrolides work by inhibiting bacterial protein synthesis, making them effective against various bacterial infections that could otherwise be treated with penicillin or cephalosporins. They are often utilized in cases where patients have a known allergy to these antibiotics because they have a different chemical structure and mechanism of action, reducing the risk of an allergic reaction. In this context, the alternatives would present issues. Cephalosporins, although structurally related to penicillins, can provoke cross-reactivity in individuals who are allergic to penicillin. Vancomycin is typically reserved for more serious infections, particularly those involving resistant organisms such as MRSA, and is not the first-line treatment for infections that could be managed by a macrolide. Amoxicillin, being a derivative of penicillin, is contraindicated in patients with penicillin allergies. Using a macrolide in this case allows healthcare providers to treat infections effectively while also maintaining patient safety, demonstrating the importance of understanding antibiotic classifications and their implications based on patient history.

**10. What is the medical term for a nosebleed?**

- A. Epistaxis**
- B. Rhinorrhea**
- C. Rhinitis**
- D. Coryza**

The medical term for a nosebleed is epistaxis. This term specifically refers to bleeding from the nasal cavity and is commonly used in both clinical and non-clinical settings. Nosebleeds can occur due to a variety of reasons, including trauma, environmental factors, or health conditions, and calling it epistaxis provides a precise language for medical professionals to assess and discuss the condition accurately. Rhinorrhea refers to a condition where there is a discharge of thin, watery mucus from the nasal passages, often associated with allergies or respiratory infections, rather than bleeding. Rhinitis is the inflammation of the nasal mucosa, which could lead to symptoms like congestion and nasal discharge but does not specifically denote bleeding. Coryza is another term that describes a cold or the symptoms associated with upper respiratory infections, such as a runny nose, but it also doesn't refer to the act of bleeding from the nose. Thus, epistaxis is the correct term to use when discussing nosebleeds.

## 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:**

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

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