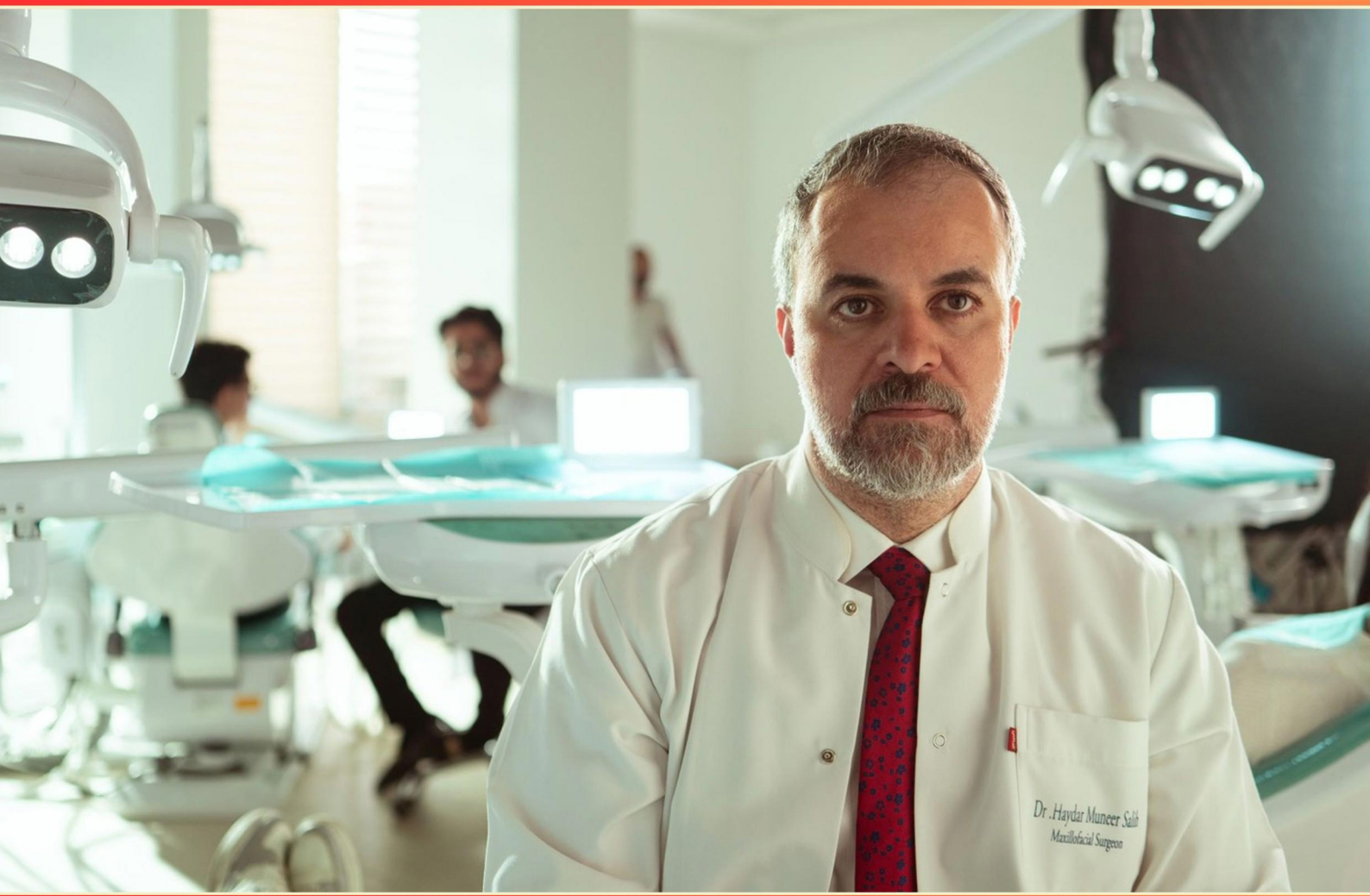
# SAUNDERS RESPIRATORY PRACTICE (SAMPLE)

## STUDY GUIDE




## SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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

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# 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 ..... 15


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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.

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# 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!

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# Questions

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**1. What is pleural effusion?**

A. Inflammation of the bronchial tubes

B. Accumulation of fluid in the pleural space

C. Expansion of air spaces in the lungs

D. Constriction of airway passages

**2. What finding should the nurse expect when collecting data from a client with tuberculosis (TB)?**

A. Productive cough

B. Rapid weight gain

C. High fever

D. Complaints of night sweats

**3. What laboratory finding would suggest a client is suffering from metabolic acidosis?**

A. pH of 7.50, Pco2 of 30 mm Hg, HCO3- of 15 mEq/L

B. pH of 7.40, Pco2 of 35 mm Hg, HCO3- of 22 mEq/L

C. pH of 7.45, Pco2 of 45 mm Hg, HCO3- of 28 mEq/L

D. pH of 7.30, Pco2 of 40 mm Hg, HCO3- of 18 mEq/L

**4. What is the primary purpose of pursed lip breathing?**

A. Increase respiratory rate

B. Enhance oxygen intake

C. Improve lung capacity

D. Promote carbon dioxide elimination

**5. Which characteristic differentiates bronchial breath sounds from tracheal sounds?**

A. Bronchial sounds are low-pitched

B. Tracheal sounds are harsher

C. Bronchial sounds are soft

D. Tracheal sounds are loud

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**6. What effect does aging have on respiratory function?**

A. It has a positive effect on lung elasticity

B. It has no effect on respiratory strength

C. It can lead to decreased lung elasticity and reduced muscle strength

D. It improves gas exchange efficiency

**7. Which action is essential before a thoracentesis procedure?**

A. Administering a sedative

B. Performing a time-out

C. Starting IV fluids

D. Reassuring the family

**8. Which of the following is essential for reinforcing the effectiveness of an asthma action plan?**

A. Visual aids for children

B. Regular follow-ups with healthcare providers

C. Developing an online app for tracking

D. Presentation workshops for patients

**9. What is the priority action when a nurse notes a positive reaction to the tuberculin skin test?**

A. Provide the patient with educational materials

B. Schedule a follow-up appointment

C. Implement airborne precautions

D. Report the findings

**10. What is the main characteristic of restrictive lung disorders?**

A. They impede airflow due to airway narrowing or blockages

B. They result in reduced lung volume

C. They cause inflammation of the air sacs

D. They are primarily caused by infections

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# Answers

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

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# Explanations

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## 1. What is pleural effusion?

A. Inflammation of the bronchial tubes

B. Accumulation of fluid in the pleural space

C. Expansion of air spaces in the lungs

D. Constriction of airway passages

*Pleural effusion refers to the accumulation of fluid within the pleural space, which is the thin cavity between the lungs and the chest wall. This condition can occur due to various reasons, including infections, heart failure, malignancies, or inflammatory processes, leading to symptoms such as difficulty breathing, chest pain, and cough. Understanding pleural effusion is crucial in respiratory practice as it can significantly impact respiratory function and needs to be differentiated from other respiratory conditions like pneumonia or pulmonary embolism. By identifying pleural effusion correctly, appropriate diagnostic measures such as imaging and possible therapeutic interventions, like thoracentesis, can be employed to manage the patient's condition effectively. In contrast, the other options pertain to different respiratory issues, such as bronchitis, which involves inflammation of the bronchial tubes, or conditions affecting airflow and lung capacity, like airway constriction or abnormal lung expansion. Recognizing pleural effusion specifically helps healthcare professionals provide focused and effective care for respiratory complications.*

## 2. What finding should the nurse expect when collecting data from a client with tuberculosis (TB)?

A. Productive cough

B. Rapid weight gain

C. High fever

D. Complaints of night sweats

*In the context of tuberculosis (TB), a finding that a nurse should anticipate when collecting data from a client is complaints of night sweats. Night sweats are a common symptom of TB due to the body's response to the infection. The bacterium Mycobacterium tuberculosis can cause systemic manifestations, and excessive sweating at night is often reported by individuals with active TB. This symptom, alongside others such as a chronic cough and potential weight loss, is indicative of the body's attempt to fight off the infection. While the presence of a productive cough can also be associated with TB, it is not guaranteed in every case and may not be the most consistent finding, especially in the early stages. Rapid weight gain is not characteristic of TB, as the disease typically leads to weight loss and anorexia due to increased metabolic demands and overall systemic impact. A high fever might occur but is not as consistently reported as night sweats; TB often features low-grade fevers, rather than persistent high fevers. Therefore, among the options presented, complaints of night sweats stand out as a notable and expectable finding in patients with tuberculosis.*

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## 3. What laboratory finding would suggest a client is suffering from metabolic acidosis?

A. pH of 7.50, Pco2 of 30 mm Hg, HCO3- of 15 mEq/L

B. pH of 7.40, Pco2 of 35 mm Hg, HCO3- of 22 mEq/L

C. pH of 7.45, Pco2 of 45 mm Hg, HCO3- of 28 mEq/L

D. pH of 7.30, Pco2 of 40 mm Hg, HCO3- of 18 mEq/L

*The laboratory finding consistent with metabolic acidosis is indicated by a low pH, typically below 7.35, and a decreased bicarbonate (HCO3-) level, generally less than 22 mEq/L. In this case, the provided values of a pH of 7.30 and an HCO3- of 18 mEq/L fit these criteria perfectly. This combination reveals that the acidity in the blood is high, which is characteristic of metabolic acidosis. In metabolic acidosis, the primary disturbance is a decrease in the bicarbonate concentration, leading to a lower pH level. The Pco2, or partial pressure of carbon dioxide, remains relatively stable at 40 mm Hg in this example, suggesting that the respiratory system is compensating or that a primary metabolic issue is present. In contrast, the other choices present values that do not align with metabolic acidosis. For instance, the first choice shows a high pH, indicating alkalosis rather than acidosis. The second choice shows values within a normal range, suggesting a compensated state. The third choice presents a slightly elevated pH and HCO3- level that again does not indicate acidosis. Thus, the selected values in option D clearly identify a*

## 4. What is the primary purpose of pursed lip breathing?

A. Increase respiratory rate

B. Enhance oxygen intake

C. Improve lung capacity

D. Promote carbon dioxide elimination

*Pursed lip breathing is primarily designed to promote carbon dioxide elimination, which helps regulate the balance of oxygen and carbon dioxide in the body. This technique involves inhaling through the nose and exhaling slowly through pursed lips, creating resistance that helps keep the airways open longer during exhalation. This extended exhalation allows for better removal of carbon dioxide from the lungs, thus enhancing overall respiratory efficiency. While increased respiratory rate and enhanced oxygen intake are beneficial byproducts of this breathing technique, the main focus is on effectively expelling carbon dioxide, which is crucial for individuals with respiratory conditions who struggle with the proper exchange of gases in their lungs. Improving lung capacity can be a potential benefit of practicing pursed lip breathing over time, but it is not the primary purpose of the technique.*

## 5. Which characteristic differentiates bronchial breath sounds from tracheal sounds?

A. Bronchial sounds are low-pitched

B. Tracheal sounds are harsher

C. Bronchial sounds are soft

D. Tracheal sounds are loud

*Bronchial breath sounds and tracheal breath sounds differ significantly in terms of their intensity and quality. Tracheal sounds are indeed characterized by being loud and can be described as harsh and high-pitched due to the airflow being conducted directly through the trachea. This sound is often easily heard over the trachea in the neck area, where the sound amplification occurs. On the other hand, bronchial breath sounds are generally softer than tracheal sounds. They are typically heard over the larger airways. The distinction lies in the intrinsic volume and quality of the sounds produced. Understanding that tracheal sounds are louder helps to recognize normal versus abnormal breath sounds when assessing respiratory conditions.*

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## 6. What effect does aging have on respiratory function?

A. It has a positive effect on lung elasticity

B. It has no effect on respiratory strength

C. It can lead to decreased lung elasticity and reduced muscle strength

D. It improves gas exchange efficiency

*Aging significantly affects respiratory function, primarily leading to decreased lung elasticity and reduced muscle strength. As individuals age, the connective tissue in the lungs becomes stiffer, impacting the ability of the lungs to expand and contract efficiently. This decline in lung elasticity can hinder the overall ventilation process, making it more challenging to take deep breaths and effectively expel air during exhalation. Additionally, muscle strength, particularly in the respiratory muscles such as the diaphragm and intercostal muscles, tends to diminish with age. This reduction can result in lower tidal volumes and an increased work of breathing, further compromising respiratory efficiency. As a consequence, older adults may be more susceptible to respiratory conditions and may demonstrate a decreased overall capacity for physical exertion and reduced endurance during activities that require increased respiratory effort. In contrast, options that suggest an improvement in lung elasticity, no effect on respiratory strength, or enhanced gas exchange efficiency do not accurately reflect the physiological changes associated with aging. These other responses do not consider the comprehensive impacts that aging has on both lung structure and function.*

## 7. Which action is essential before a thoracentesis procedure?

A. Administering a sedative

B. Performing a time-out

C. Starting IV fluids

D. Reassuring the family

*Performing a time-out is vital before a thoracentesis procedure because it serves as a critical safety measure to prevent errors. The time-out is a standardized practice in many healthcare settings which involves pausing right before a procedure to ensure that the surgical team agrees on the patient's identity, the procedure to be performed, and the correct site for the procedure. This step is essential in enhancing patient safety and positive outcomes by verifying that all necessary preparations have been made and that there are no misunderstandings about the planned intervention. While sedatives, starting IV fluids, and reassuring the family may play roles in the overall care process, they do not specifically address the immediate safety checks that the time-out provides just prior to thoracentesis.*

## 8. Which of the following is essential for reinforcing the effectiveness of an asthma action plan?

A. Visual aids for children

B. Regular follow-ups with healthcare providers

C. Developing an online app for tracking

D. Presentation workshops for patients

*Regular follow-ups with healthcare providers are essential for reinforcing the effectiveness of an asthma action plan because they provide opportunities for ongoing assessment and management of the patient's condition. Consistent follow-up appointments allow healthcare providers to evaluate the patient's asthma control, make necessary adjustments to medications, and ensure adherence to the action plan. These sessions also serve as an opportunity for education, enabling healthcare providers to address any concerns or challenges the patient may be facing in managing their asthma. Continuous interaction with healthcare providers fosters a supportive environment where patients feel empowered to effectively use their action plan, leading to improved outcomes and overall asthma management.*

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## 9. What is the priority action when a nurse notes a positive reaction to the tuberculin skin test?

A. Provide the patient with educational materials

B. Schedule a follow-up appointment

C. Implement airborne precautions

D. Report the findings

*When a nurse notes a positive reaction to the tuberculin skin test (TST), the priority action is to report the findings. Reporting is essential as a positive TST indicates exposure to the tuberculosis (TB) bacterium and can signify an active or latent infection. This information is crucial for further evaluation, management, and treatment of the patient, as well as for public health measures and potential contact tracing. Timely communication of the results enables the healthcare team to initiate appropriate diagnostic procedures, such as chest X-rays or sputum tests, to determine whether the patient has active TB disease. Early identification is critical in preventing the spread of TB, as the disease can be contagious if it is active. While educational materials and scheduling follow-up appointments are important steps in patient care, they occur after the immediate need to report and assess the situation. Airborne precautions may also be necessary, but they would typically be implemented after confirming the likelihood of active TB and in accordance with the facility's protocols. Thus, reporting the positive result remains the priority action.*

## 10. What is the main characteristic of restrictive lung disorders?

A. They impede airflow due to airway narrowing or blockages

B. They result in reduced lung volume

C. They cause inflammation of the air sacs

D. They are primarily caused by infections

*Restrictive lung disorders are primarily characterized by a reduced lung volume. This reduction means that the lungs are unable to expand fully during inhalation, leading to a decrease in the total amount of air that can be inhaled. This can occur due to various factors such as stiffness of the lung tissue, abnormalities in the pleura, or conditions affecting the chest wall that limit its ability to expand. In restrictive lung disorders, although airflow may still be relatively unobstructed compared to obstructive disorders, the critical issue lies in the decrease in compliance or the ability of the lungs to expand, which ultimately affects the volume of air exchanged during respiration. This characteristic is fundamental in defining restrictive lung conditions and is key to distinguishing these disorders from obstructive types, where the primary issue involves difficulty in airflow due to narrowed or blocked airways. The other options focus on aspects such as airway obstruction, inflammation, and infections, which are not defining features of restrictive lung disorders. Instead, they point to different mechanisms or causes found in other respiratory conditions.*

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# 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!

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