MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

1) Which of the following basic airway adjuncts prevents the tongue from falling back to occlude the airway?
   A) Laryngeal mask airway
   B) Nasal cannula
   C) Oropharyngeal airway
   D) Yankauer catheter

2) The aspiration of vomitus into the lungs may result in:
   A) pneumonia.
   B) tissue damage.
   C) pulmonary edema.
   D) all of the above.

3) Which of the following factors is related to an increased likelihood of airway burns?
   A) Screaming or yelling in a burning environment
   B) Inhalation of hot steam
   C) Unresponsiveness in the burning environment
   D) All of the above

4) End-tidal colorimetric capnography measures:
   A) carbon dioxide in exhaled air.
   B) the percentage of hemoglobin saturated with carbon dioxide.
   C) the partial pressure of carbon dioxide in arterial blood.
   D) the amount of carbon dioxide dissolved in plasma.

5) Progressively deeper, faster breathing alternating gradually with shallow, slower breathing is called:
   A) Cheyne-Stokes respirations.
   B) agonal respirations.
   C) Kussmaul's respirations.
   D) Biot's respirations.

6) Which of the following indicates an esophageal intubation?
   A) Maintaining a pulse oximetry reading of 80 to 85 percent
   B) Free return of air when aspirating with an esophageal detector device
   C) Color change from purple to yellow with a colorimetric ETCO$_2$ detector
   D) Not seeing the tip of the endotracheal tube pass through the vocal cords

7) Applying posteriorly directed pressure on the cricoid cartilage to facilitate endotracheal intubation is called:
   A) Sellick's maneuver.
   B) retrograde intubation.
   C) digital intubation.
   D) cricothyroidotomy.

8) What is, in liters per minute, the highest flow rate on a demand valve device?
   A) 15
   B) 20
   C) 30
   D) 40

9) The tip of a curved laryngoscope blade is placed correctly:
   A) under the epiglottis.
   B) at the glottic opening.
   C) in the vallecula.
   D) at the junction of the hard and soft palates.
10) The simplest airway management technique in a patient without suspected cervical spine injury is the:
   A) use of an oropharyngeal airway.  B) head-tilt/chin lift maneuver.
   C) modified jaw-thrust maneuver.  D) Sellick's maneuver.

11) In which of the following conditions is insertion of a nasogastric tube contraindicated?
   A) Having a gag reflex  B) Being awake and alert
   C) Facial fractures  D) All of the above

12) During a respiratory assessment, the absence of breath sounds may indicate a:
   A) pulmonary embolism.  B) flail chest.
   C) pneumothorax.  D) bronchitis.

13) Ventilation of _______ is the likely consequence of inserting an endotracheal tube too far.
   A) neither lung  B) the left lung only
   C) only the lower lobes of both lungs  D) the right lung only

14) Which of the following manual airway maneuvers should be used when caring for a patient with a suspected cervical spine injury?
   A) Jaw/tongue lift  B) Head-tilt/chin lift
   C) Jaw-thrust maneuver  D) Sellick's

15) Immediate intubation should be considered for trauma patients with a Glasgow Coma Scale score of _______ or lower.
   A) 2  B) 5  C) 8  D) 10

16) Which of the following statements about manual airway maneuvers is true?
   A) They require specialized equipment.
   B) They are difficult to learn.
   C) They are contraindicated in trauma patients.
   D) They are often neglected by EMTs and paramedics.

17) When correctly placed, the tip of a straight laryngoscope blade should be:
   A) at the soft palate.  B) under the epiglottis.
   C) in the vallecula.  D) at the uvula.

18) In an adult, the narrowest part of the airway is the:
   A) cricoid cartilage.  B) hypopharynx.
   C) larynx.  D) trachea.

19) The major drawback of mouth-to-mouth ventilations is:
   A) an oxygen level in the rescuer's exhaled air of only 10 to 12%.
   B) the inability to achieve adequate tidal volumes for ventilation.
   C) a high level of carbon dioxide in the rescuer's exhaled air.
   D) potential exposure of the rescuer to communicable disease.

20) A drop in blood pressure of greater than 10 torr during inspiration is called:
   A) pulsus paradoxus.  B) pulsus obliterans.
   C) pulsus alternans.  D) pulsus tardus.