

# BREATHING AND EXCHANGE OF GASES SOLUTIONS

## LEVEL – I

#### **RESPIRATORY ORGAN**

**1.** Simplest respiratory organ is

(1) gills (3) skin

- (2) lungs
- (4) contractile vacuole

(2) A-i, B-iv, C-ii, D-iii

(4) A-i, B-ii, C-iv, D-iii

Porifera to annelida, animals respire through their body surface or skin. Gills are organs of breathing for most aquatic animals and lungs are organs of breathing for terrestrial vertebrates. Contractile vacuole are organelles found in protozoan for osmoregulation.

- 2. Match the following animals with their respiratory organ:
  - A. Earthworm i. Moist cuticle
  - B. Insects ii. Gills
  - C. Fishes iii. Lungs
  - D. Birds/ Reptiles iv. Trachea
  - (1) A-ii, B-i, C-iv, D-iii
  - (3) A-i, B-iii, C-ii, D-iv

## HUMAN RESPIRATORY SYSTEM

- **3.** Which of the following is not a function of the nasal cavity in humans?
  - (1) Filtration of the air (2) Humidification of the air
  - (3) Warming of the air (4) Removal of carbon dioxide from the air

XI NCERT pg 270. Filtration of the air, Humidification of the air and Warming of the air are functions of the conducting system of respiratory tract.

- Which of the following is the last structure through which the exhaled air passes?
   (1) bronchiole
   (2) larynx
   (3) pharynx
   (4) trachea
   Respiratory tract begins from nose pharyx larynx trachea bronchi-bronchioles- alveoli.
- 5. The division of the respiratory tree from which the alveoli branch off are the
  - (1) tertiary bronchi (2) bronchioles
  - (3) terminal bronchioles (4) respiratory bronchioles

Branching tree inside lungs comprises of, Primary bronchus - Secondary bronchus - Tertiary bronchus - Initial Bronchiole - Terminal bronchiole- Respiratory bronchiole - Alveolar duct - Alveoli.

6. In the human respiratory system, which of these following structures is the actual gas exchange surface?

(1) Bronchus(2) Alveolus(3) Bronchiole(4) TracheaAlveolus lined by squamous epithelium for diffusion of gases.

- 7. Air is breathed through
  - (1) Trachea  $\rightarrow$  Lungs  $\rightarrow$  Larynx  $\rightarrow$  Pharynx  $\rightarrow$  Alveoli
  - (2) Nose  $\rightarrow$  Larynx  $\rightarrow$  Pharynx  $\rightarrow$  Bronchus  $\rightarrow$  Alveoli  $\rightarrow$  Bronchioles
  - (3) Nostrils  $\rightarrow$  Pharynx  $\rightarrow$  Larynx  $\rightarrow$  Trachea  $\rightarrow$ Bronchus $\rightarrow$ Bronchioles $\rightarrow$ Alveoli



Zol. XI

	(4) Nose $\rightarrow$ Mouth $\rightarrow$ Lungs Larynx $\rightarrow$ Pharynx $\rightarrow$ Alveoli XI NCERT pg 269
8.	Epithelium of respiratory bronchioles is(1) pseudostratified and columnar(2) squamous and sensory(3) pseudostratified and sensory(4) cuboidal and columnarRespiratory bronchiole branches out into alveolar duct to form alveoli and hence is lined with squamous epithelium to allow diffusion of gases.
9.	Cartilaginous rings are incomplete in trachea at surface(1) dorsal(2) ventral(3) lateral(4) ventrolateralTrachea is lined with dorsally incomplete C shaped cartilaginous rings to prevent it from collapsing.
10.	The function of cilia in trachea is to pass(1) mucus out(2) mucus in(3) air out(4) air inThe respiratory tract is mucous coated to trap dust particles and the ciliary action of the innerlining pushes the dust particle upwards to be thrown out of body via sneezing or coughing.
11.	The alveolar epithelium in lung is(1) non-ciliated columnar(2) non-ciliated squamous(3) ciliated columnar(4) ciliated squamousThe alveolar epithelium in lung is non-ciliated squamous epithelium for diffusion of gases.
12.	Pulmonary Surfactant(2) is a Mucin(1) is a lipoprotein(2) is a Mucin(3) Present in bronchi(4) Maintain alveolar integrityPulmonary Surfactant ie Lecithin is a phospholipid present in alveoli to prevent it from collapsing ie maintain alveolar integrity
13.	The most important muscular structure in respiratory system of rabbit is(1) external intercostal muscles(2) internal intercostal muscles(3) diaphragm(4) vertebral columnRabbit being mammal has diaphragm that accounts for 70% change in thoracic volume during breathing and hence major muscle compared to inter coastal muscles.
	MECHANISM OF BREATHING
14.	Breathing refers to exchange of gases between (1) inspired air and blood (2) blood and tissue fluid (3) alveolar and blood (4) environmental air and lungs Breathing or ventilation is part of respiration.
15.	With respect to normal breathing, mark the true statement among the following

- (1) Inspiration is a passive process while expiration is active
- (2) Inspiration is an active process while expiration is passive
- (3) Both inspiration and expiration are passive processes
- (4) Both inspiration and expiration are active processes

Inspiration involves contraction of EICM and diaphragm, requires ATP and hence is an active process. Expiration involves muscle relaxation, so no ATP needed and hence passive process.



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16. Which of the following leads to expiration? (1) Contraction of diaphragm (2) Elevation of the rib cage (3) Contraction of internal intercostal muscles (4) Contraction of external intercostal muscles EICM, diaphragm relax during expiration bringing the rib cage back to its original position. IICM contracts during forceful expiration. 17. What happens to the diaphragm when a person exhales? (1) relaxes and arches. (2) relaxes and flattens (3) contracts and arches (4) contracts and flattens. XI NCERT pg 271. Diaphragm relaxes and becomes dome shaped during expiration. 18. Consider the following: Contraction of the diaphragm I. II. Relaxation of the diaphragm III. Contraction of internal intercostals IV. Contraction of external intercostals Inhalation would be brought about by: (3) I and IV (1) I, and III (2) II and III (4) II and IV. XI NCERT pg 271. EICM and diaphragm contracts during inspiration. 19. Expiratory muscles contract at the time of (1) deep inspiration (2) normal inspiration (3) forceful expiration (4) normal expiration IICM is an expiratory muscles, that contracts at the time of forceful expiration and remains relaxed during normal breathing. 20. Abdominal breathing refers to (1) normal breathing (2) slow breathing (3) fast breathing (4) voluntary breathing Normal breathing includes thoracic breathing (due to EICM) and abdominal breathing (due to diaphragm) 21. During the initial part of inspiration, which of the following does not occur? (1) Intrapulmonary pressure falls (2) Intra thoracic pressure rises (3) Intra abdominal pressure rises (4) The lungs start to expand Intra thoracic pressure decreases as thoracic volume increases. 22. Effort during normal respiration is done due to (1) Lung elasticity (2) Respiratory air passages (3) Alveolar air spaces (4) Creating negative pleural pressure Lungs are balloon like elastic and naturally collapsible organ and hence effort is required to expand it during inspiration. 23. The intrapleural pressure at the end of deep inspiration is (4) +18 mm Hg (1) -4 mm Hg(2) +4 mm Hg (3) -16 mm HgIntrapleural pressure is always negative to prevent lungs from collapsing and it becomes more negative during inspiration.



- 24. True about inspiration, the intrapleural pressure becomes
  - (1) More ve (2) More + ve
    - (4) Initially +ve. then -ve

Intrapleural pressure is always negative to prevent lungs from collapsing and it becomes more negative during inspiration.

## **RESPIRATORY VOLUMES**

- **25.** Functional residual capacity of lung is defined as
  - (1) Volume expired after normal expiration
  - (2) Volume remaining after forced expiration
  - (3) ERV + RV

(3) Same

(4) Tidal volume + volume inspired forcefully

XI NCERT pg 272, FRC= RV+ERV

- **26.** Tidal volume is calculated by
  - (1) Inspiratory capacity minus the inspiratory reserve volume
  - (2) Total lung capacity minus the reserve volume
  - (3) Functional residual capacity minus residual volume
  - (4) Vital capacity minus expiratory reserve volumes
  - TV=IC-IRV OR TV=EC-ERV

TLC-RV=VC, FRC-RV=ERV, VC-ERV=IC

- **27.** Total lung capacity depends upon
  - (1) Size of airway

(2) Closing volume

(3) Lung compliance

(4) Residual volume

Lung compliance means elasticity of lungs ie how much it can expand to accommodate extra volume of air inspired during forceful breathing.

- **28.** Functional residual capacity is
  - (1) Volume remaining after forced expiration
  - (2) Tidal volume + volume inspired forcefully
  - (3) Volume remaining after normal expiration
  - (4) Tidal volume + volume expired by forced expiration
  - XI NCERT pg 272 , FRC= RV+ERV
- **29.** Volume of air taken in and given out during normal respiration is referred to as(1) IRV(2) TV(3) ERV(4) VCXI NCERT pg 271, last para
- **30.** A person breathes in some volume of air by forced inspiration after having a forced expiration. The quantity of air taken in is
  - (1) total lung capacity
  - (3) vital capacity XI NCERT pg 272

- (2) tidal volume
- (4) inspiratory capacity

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31. After deep inspiration, capacity of maximum expiration of lung is (2) tidal volume (1) total lung capacity (3) vital capacity (4) inspiratory capacity XI NCERT pg 272 32. Total alveolar ventilation volume (in L/min) is: (1) 1.5 (3) 4.2 (2) 3.5 (4) 8.0 Total alveolar ventilation volume means volume of air actually available for diffusion of gases ie volume of air in alveoli. Volume of air present in the conducting part ie from nose to tertiary bronchiole and is unavailable for exchange of gases is called dead space volume. Dead space volume = 150ml/breath Total alveolar ventilation volume = (TV - dead space vol) x breathing rate  $= (500-150) \times (12 \text{ to } 16) = 350 \times (12 \text{ to } 16) = 4200 \text{ to } 5600 \text{ ml/min}$ Calculate the alveolar ventilation per minute of a patient with respiratory rate 14/min, Tidal 33. volume 500 ml with a vital capacity 7000 ml (2) 2000 ml (1) 4900 ml (3) 7700 ml (4) 7000 ml Dead space volume = 150ml/breath Total alveolar ventilation volume = (TV - dead space vol) x breathing rate = (500-150) x 14=350 x 14 = 4900ml 34. Spirometry can demonstrate and measure all of the following except (1) Tidal volume (2) Residual volume (3) Vital capacity (4) Inspiratory reserve capacity Spirometer instrument can measure volume of air that can be inspired or expired and not the volume of air always trapped in lungs ie RV. 35. Routine spirometry can't estimate (1) FRC (3) IRC (4) ERV (2) VC FRC=ERV + RV, As FRC includes RV, it cannot be measured by spirometry .Spirometer instrument can measure volume of air that can be inspired or expired and not the volume of air always trapped in lungs ie RV. **EXCHANGE OF GASES** The thickness of the respiratory membrane is 36. (1) more than a millimeter but less than a centimeter (2) more than a centimeter but less than 5 centimeters (3) more than a millimeter but less than a meter (4) less than a millimeter Thinner the membrane more shall be the diffusion of gases. 37. Mouth-to-mouth respiration provides an oxygen concentration is (1) 16% (2) 20% (3) 22% (4) 24% Inspired air has 21% oxygen and expired air has 16% oxygen because under normal condition only 25% oxygen gets exchanged in lungs.

## TRANSPORT OF GASES

**38.** The state of iron responsible for  $O_2$  transport (1) Fe<sup>++</sup> (2) Fe<sup>+++</sup> (3) Both (4) None of these Hb has 4 Fe<sup>++</sup> that binds loosely with 4 oxygen molecules.

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Methaemoglobin refers to

39.

- (1) a colourless respiratory pigment (2) oxidized haemoglobin (4) deoxygenated haemoglobin (3) oxygenated hemoglobin Approx. 99%Hb gets oxygenated to form oxyhaemoglobin, about 1% Hb gets oxidized to form methaemoglobin. 40. In one circulation, how much oxygen does the blood supply to tissues? (1) 75% (2) 1.34% (3) 25%(4) 7% Under resting condition every 100ml of arterial blood having approx 20ml oxygen delivers 5ml oxygen to tissues, hence 25% of its transport capacity. 41. Amount of oxygen present in one gram of haemoglobin is (1) 20 ml (2) 1.34 ml (3) 13.4 ml (4) none of these Every 100ml or dl of blood has approx. 15gm Hb. Each gm of Hb carries approx. 1.3ml oxygen. 42. In lungs, air is separated from venous blood by (1) squamous epithelium + tunica externa of blood vessel (2) squamous epithelium + endothelium of blood vessel (3) transitional epithelium + tunica media of blood vessel (4) columnar epithelium + three layered wall of blood vessel Respiratory membrane is made of alveolar membrane (squamous ep.) and capillary membrane (endothelium). **43**. Exchange of gases in lung alveoli occurs through (3) simple diffusion (1) active transport (2) osmosis (4) passive transport Exchange of gases in lung alveoli occurs through simple diffusion due to difference in partial pressure of gases. 44. O<sub>2</sub> delivery to tissues depends on all/except (1) Cardiac output (2) Type of fluid administered (3) Hemoglobin concentration (4) Affinity of hemoglobin for  $O_2$ O2 delivery to tissues increases with Cardiac output . O2 delivery to tissues increases with increasing Hb content. **TRANSPORT OF O2 (oxygen dissociation curve)** 45. Arterial blood O<sub>2</sub> in ml of O<sub>2</sub> per dl is (1) 12.1 (2) 19.8 (3) 15.6 (4) 27.8 Every 100ml or dl of blood has approx. 15gm Hb. Each gm of Hb carries approx. 1.3ml oxygen. Therefore each dl of arterial blood carries 15 x 1.3=19.5ml oxygen 46. Percentage of O<sub>2</sub> carried in chemical combination <u>(1) 97%</u> (4) 33% (2) 3% (3) 66% Approx 97% of O<sub>2</sub> carried in chemical combination as oxyhaemoglobin. 47. During exercise increase in O<sub>2</sub> delivery to muscles is because of all except
- (1) Oxygen dissociation curve shifts to left (2) Increased stroke volume
- 6 COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE



48.

49.

(3) More extraction of oxygen from blood (4) Increased blood flow to muscles Oxygen dissociation curve shifts to left means association of Hb with oxygen so during exercise Oxygen dissociation curve shifts to right indicating dissociation. Binding of oxygen with haemoglobin is primarily related to (1) partial pressure of oxygen (2) partial pressure of carbon dioxide (3) hydrogen ion concentration (4) temperature Binding of oxygen with haemoglobin is primarily related to high partial pressure of oxygen. Which of the following factors can interfere with binding of oxygen with haemoglobin? (a)  $pO_2$ (b)  $pCO_2$ (c)  $H^+$  concentration (d) Temperature (1) only a (2) b, c and d (3) a and d (4) a, b, c and d Affinity of Hb towards oxygen changes due to factors like pO<sub>2</sub> (affinity increases), pCO<sub>2</sub> (affinity decreases with increase in carbondioxide), H<sup>+</sup> concentration (affinity decreases with increase in H ions) and Temperature (affinity increases with temperature increase) What will happen to the oxygen dissociation curve if pH is decreased?

50.

(1) shift to left

- (2) shift to right
- (3) remains unchanged (4) oscillates erratically

pH decreased means blood becomes acidic due to presence of more H ions causing oxygen dissociation curve to shift right ie causing dissociation of Hb from oxygen .

- Decreased O<sub>2</sub> affinity of Hb in blood with decreased pH is 51.
  - (1) Haldane effect (3) Bohr's effect

- (2) Double Haldane effect
- (4) Double Bohr effect

Bohr effect due to high pCO<sub>2</sub> is mainly responsible for delivery of oxygen to tissues

- 52. Which of the following does not occur as the blood passes through systemic capillaries?
  - (1) Increased protein content
  - (2) Shift of Hemoglobin dissociation curve to left
  - (3) Increased hematocrit
  - (4) Decreased pH

As the blood passes through systemic capillaries ie near tissues, Hb shall undergo dissociation ,so Shift of Hemoglobin dissociation curve to right.

At rest, about \_\_\_\_\_ of the oxyhemoglobin in the arterial blood dissociates (unloads its 53. oxygen) in one pass through the systemic capillaries, (1) 10-12% (2) 20-25% (3) 50-60% (4) 85-97% Under resting condition every 100ml of arterial blood having approx 20ml oxygen delivers 5ml oxygen to tissues, hence 25% of its transport capacity.

54. The oxygen dissociation curve of foetal haemoglobin is (1) sigmoid and lies on the left of the oxygen dissociation curve of maternal haemoglobin (2) sigmoid and lies on the right of the oxygen dissociation curve of maternal haemoglobin

(3) parabolic and lies on the left of the oxygen dissociation curve of maternal haemoglobin

(4) parabolic and lies on the right of the oxygen dissociation curve of maternal haemoglobin Foetal Hb shows more affinity towards oxygen compared to adult Hb.

55. An increase in which of the following parameters will shift the O<sub>2</sub> dissociation curve to the left (1) Temperature (2) Partial pressure of  $CO_2$ 



(3) 2, 3 DPG concentration
 (4) Oxygen affinity of hemoglobin
 O<sub>2</sub> dissociation curve shift to the left means association of Hb with oxygen and that shall be

more when Hb shows more affinity towards oxygen .

- **56.** The sigmoid nature of  $Hb-O_2$  dissociation curve is because of
  - (1) Binding of one O<sub>2</sub> molecule increases the affinity for the next O<sub>2</sub> molecule
  - (2) Alpha chain has more affinity for  $O_2$  than beta chain
  - (3) Beta chain has more affinity for  $O_2$  than alpha chain
  - (4) Hemoglobin is acidic in nature

Each Hb molecule binds with 4 oxygen molecules but all don't get attached together.

- **57.** The factor responsible for the left shift of Hb-O<sub>2</sub> dissociation curve is
  - (1) Increase in 2, 3 DPG in RBC (2) Fall in temperature
  - (3) Fall in pH (4) Increase level of CO<sub>2</sub> in blood

Decrease in temperature associates Hb with oxygen shifting the curve towards left.

- **58.** Role of 2, 3 DPG in hemoglobin
  - (1) Unloading oxygen to tissues
  - (3) Buffering capacity

- (2) Increased affinity for oxygen
- (4) Osmotic fragility

2, 3 DPG (diphosphoglycerate) in hemoglobin decreases affinity of Hb for oxygen causing right shift in oxygen dissociation curve.

- **59.** During acclimatization to high altitude all of the following take place except
  - (1) Increase in minute ventilation
  - (2) Increase in the sensitivity of central chemoreceptors
  - (3) Increase in the sensitivity of carotid body to hypoxia
  - (4) Shift in the oxygen dissociation curve to the left

During acclimatization to high altitude Shift in the oxygen dissociation curve is to right as partial pressure of oxygen is less decreasing affinity of Hb for oxygen.

- 60.Myoglobin binds with \_\_\_\_\_ mole/s of oxygen .(1) 1(2) 2(3) 3(4) 4Hb has 4 Fe and myoglobin has only 1 Fe.
- 61. The affinity of oxygen for Hb decreases with fall in pH. This is called
  - (1) Brain bridge effect (2) Bohr's effect
  - (3) Haldane effect (4) Herring effect

Bohr effect due to high pCO2 is mainly responsible for delivery of oxygen to tissues

## TRANSPORT OF CARBON DIOXIDE

62. Which ion replaces  $HCO_3^-$  when it diffuses out of the red blood cells into the plasma in systemic capillaries?

(1) hydrogen ion  $(H^+)$ 

(2) hydroxyl ion (OH<sup>-</sup>)

(3) chloride ion (CI<sup>-</sup>) (4) sodium ion (Na<sup>+</sup>)

Near tissues efflux of bicarbonates from RBCs is balanced by influx of choride ions (chloride shift ).

**63.** Largest fraction of  $CO_2$  is present in blood as:

8 COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE



(1) Attached with RBC

(2) Dissolved in blood

(3) Carbaminohaemoglobin

(4) Bicarbonate

About 70% CO<sub>2</sub> is present in blood is carried as Na bicarbonates.

64. Arterial carbon dioxide level is (1) 40 mm Hg (2) 37 mm Hg (3) 45 mm Hg (4) 60 mm Hg Arterial carbon dioxide level ie carbon dioxide level in oxygenated blood =40mm Hg. XI NCERT pg 272, table 17.1

65. Which of the following statement/s is/are correct?

(1) neutralization of  $H_2CO_3$  by  $Na_2CO_3$ 

- (a) A high concentration of carbonic anhydrase is present in RBC.
- (b) Minute concentration of carbonic anhydrase is present in plasma.
- (c) Every 100 ml blood delivers approximately 4 ml of CO<sub>2</sub> to alveoli.
- (d) 20-25% CO<sub>2</sub> is carried by haemoglobin as carbaminohaemoglobin.
- (1) a, c and d (2) a and d (3) a, b, c and d (4) only a
- XI NCERT pg 274,275

66. Carbon dioxide is carried in the blood in all of the following ways except as

(1) dissolved gas

- (2) bicarbonate ion
- (3) carbaminohaemoglobin (4) carboxyhaemoglobin

Hb shows max. affinity towards carbon monoxide and binds irreversibly with it.

- 67. During transport of carbon dioxide, blood doesn't become acidic due to
  - (2) absorption of leucocytes
    - (4) non accumulation

(3) blood buffers Blood buffers like Na bicarbonate (alkali ) and carbonic acid (acid ). Hb also act as buffer, oxyhaemoglobin (acid) and reduced Hb (alkali).

The enzyme required to form carbonic acid from carbon dioxide in erythrocytes is **68**.

(1) carbonic amidase

(2) carbonate hydrogenase

(3) carbonic anhydrase

(4) carboxypeptidase

Carbonic anhydrase is present in abundance inside RBCs and in negligible amounts in plasma.

## **REGULATION OF RESPIRATION**

69. Hering-Breuer reflex is related to effect of \_\_\_\_\_ on respiratory centre. (3) nerves (4) temperature (1) pH (2)  $CO_2$ Hering-Breuer reflex is a protective reflex which prevents the alveoli from overstretching or bursting. 70. Respiratory centre in brain is stimulated by (1) CO<sub>2</sub> content in venous blood (2) CO<sub>2</sub> content in arterial blood (3)  $O_2$  content in venous blood (4) O<sub>2</sub> content in arterial blood Chemoreceptors in aorta (artery) and carotid artery are highly sensitive to increased pCO<sub>2</sub>

- 71. A chemosensitive area is situated adjacent to the respiratory rhythm centre which is highly sensitive to \_\_\_\_\_ and \_\_\_\_\_ ions
  - (1)  $O_2, H^+$ (2)  $CO_2, OH^-$ (3)  $CO_2, H^+$ (4)  $O_2, OH^-$

Chemoreceptors in aorta (artery) and carotid artery are highly sensitive to increased pCO<sub>2 and</sub> increased H ion conc. ie acidity of blood.

72. True statement regarding respiratory centre is (1) Directly stimulated by fall in  $PaO_2$ 

(2) Inhibited during swallowing

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Breath 73.	(3) Connected with cardiac centre ing stops during swallowing as epiglottis closes of Hering – Breuer's reflex – mainly related to	· · ·	Situated in midbrain ng of trachea to prevent entry of food.
15.	(1) Normal centre of ventilation	(2)	Control of pneumotaxic centre
	(3) Prevent excess lung inflation		Prevent collapsing of alveoli
Hering	g-Breuer reflex is a protective reflex which prever		
	DISORDEI	RS	
74.	A person is having normal lung compliance	and	increased airway resistance. The most
	economical way of breathing for him		
	(1) Rapid & deep (2) Rapid & shallow	(3)	Slow & deep (4) Slow &
•	shallow		instance and see a light house differenties in
A pers	son with normal lung structure but obstructed breathing so most efficient is slow (as pathway is	-	
75.	Ascent of high mountains causes altitude sicknes	s in :	men. Prime cause of this is
	(1) excess of carbon dioxide in blood		decreased efficiency of haemoglobin
	(3) decreased partial pressure of oxygen		decreased proportion of oxygen in air
The ai	r becomes thinner at higher altitude so the percen	-	
	as the pressure decreases at higher altitude, the p	oartia	Il pressure of each gas decreases too.
76.	Hemoglobin that is bonded to carbon monoxid	de a	nd therefore cannot transport oxygen, is
	called		
	(1) carboxyhaemoglobin	(2)	methaemoglobin
	(3) reduced hemoglobin		carbaminohaemoglobin
	ows max. affinity towards carbon monoxide and b	inds	irreversibly with it.
77.	Apnoea is defined as	( <b>2</b> )	Constinue of manimution
	<ol> <li>(1) Stoppage of heart beat</li> <li>(3) Irregular respiration</li> </ol>		Cessation of respiration Regular respiration
Annoe	a means when breathing stops .	(4)	Regular respiration
78.	Emphysema is a disease characterized by		
101	(1) haemorrhage of pulmonary capillaries	(2)	increase in number of air sacs
	(3) infection of <i>Mycobacterium</i>	• /	over-inflation of alveolar sacs
Emphy	ysema cause damage to alveolar membrane decrea	× /	
79.	Asthma is a respiratory disease caused due to	U	
	(1) infection of trachea	(2)	infection of lungs
	(3) bleeding into pleural cavity		spasm in bronchial muscles
Spasm	in bronchial muscles due to allergens like dust or	smo	ke causes asthma.
80.	Cigarette smoking is one of the major causes of		
	(1) asthma (2) bronchitis		emphysema (4) fibrosis
Emphy	ysema is a chronic disorder most common in smok	ters.	
81.	In which of these would you expect to find	an	increase in thickness of the respiratory
	membrane		i i i i i i i i i i i i i i i i i i i
	(1) Emphysema	(2)	Asthma

- (3) Pulmonary artery thrombosis
- (4) Pulmonary edema

- Emphysema cause damage to alveolar membrane decreasing the overall surface area for diffusion. Asthma doesn't affect alveoli. Pulmonary artery thrombosis is thickening of Pulmonary artery wall. Pulmonary oedema shall increase the respiratory membrane due to accumulation of fluids.
- 82. Emphysema is a condition in which
  - (1) respiratory centre is inhibited
- (2) fluid accumulates in lungs
- (3) the walls separating the alveoli break
- (4) lungs have more oxygen

Emphysema is a chronic disorder most common in smokers. Emphysema cause damage to alveolar membrane decreasing the overall surface area for diffusion.

## LEVEL - II

## HUMAN RESPIRATORY SYSTEM

Which of the following is not a function of conducting part of the respiratory system? 1. (2) Clears the air from foreign particles (1) Diffusion of  $O_2$  and  $CO_2$ 

(3) Humidifies the air

- (4) Brings the air to body temperature
- Conducting part of the respiratory system, as its lined with either compound ep or ciliated ep., and hence have no role in exchange of gases.
- Choose the incorrect statement 2.
  - (1) At the level of 5<sup>th</sup> thoracic vertebra, trachea divides into right and left primary bronchi
  - (2) Larynx is a cartilaginous box which helps in sound production and hence called sound box
  - (3) Outer pleural membrane is in close contact with thoracic lining whereas the inner pleural membrane is in contact with the lungs surface

(4) Thoracic chamber is formed dorsally by sternum ventrally by vertebral column, laterally by ribs and on lower side by dome-shaped diaphragm

- Thoracic chamber is formed ventrally by sternum dorsally by vertebral column, laterally by ribs and on lower side by dome-shaped diaphragm
- 3. Which of the following organ is not considered as major organ during vocalization? (2) Tongue (3) Soft palate (1) Lips (4) Hyoid bone Hyoid bone only helps to support organs in throat and provide site for attachment of muscles.
- 4. Which of the following pressure always maintain -ve with respect to atmospheric pressure?
  - (1) Pleural pressure

(2) Alveolar pressure

(3) Transpulmonary pressure

(4) Recoil pressure

Intrapleural pressure is always maintain -ve with respect to atmospheric pressure to prevent lungs from collapsing.

- 5. In humans, respiration takes place in
  - (1) cells lining the lung cavity
- (2) cells found in blood
- (3) all living cells of the body
- (4) only RBC

Respiration takes place in all living cells of the body to produce energy aerobically or anerobically.

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6. Each lung is enclosed in a double membrane called pleura. The part which closely covers the lung is

(1) pulmonary pleura (2) visceral pleura
 (3) peritoneal pleura
 (4) parietal pleura
 Outer pleural membrane is in close contact with thoracic lining whereas the inner pleural membrane is in contact with the lungs surface

- 7. If the thoracic wall is ruptured but the lungs aren't
  - (1) the lungs get inflated

- (2) the lungs get collapsed
- (3) the breathing rate decreases (4) the breathing rate increases

Lungs are situated in thoracic cavity which is an anatomically air tight chamber and any change in its volume causes changes in lungs volume. So if the thoracic wall is ruptured but the lungs aren't shall make the lungs collapse as thoracic cavity is no longer an anatomically air tight chamber.

- 8. The most important function of diaphragm of mammals is
  - (1) to divide the body cavity into compartments
  - (2) to protect lungs
  - (3) to aid in respiration
  - (4) to aid in ventilation

Only mammals have diaphragm to do abdominal breathing or ventilation. Respiration is precisely happening in each cell. Breathing is a part of respiration.

- 9. The conducting zone of the respiratory system includes all of the following passages, except
  - (1) the trachea
- (2) alveolar ducts(4) terminal bronchioles

(3) tertiary bronchi
 (4) terminal bronchioles
 The conducting zone of the respiratory system includes all of the following passages, except alveolar ducts and alveoli as they allow diffusion of gases.

**10.** Bronchioles don't collapse when there is no air in them. This is due to presence of

(1) lecithin

(3) Bronchi

- (2) incomplete cartilaginous rings
- (3) complete cartilaginous rings (4) mucous

Incomplete cartilaginous rings around conducting pathway (trachea to bronchiole ) prevents their collapsing.

**11.** Narrowest and most abundant tubes of lungs are

(1) trachea (2) bronchi (3) bronchioles (4) alveoli The diameter of the respiratory tract keeps decreasing as we do deeper ie trachea is widest and

- bronchiole is narrowest. Alveoli are sac like structure and not tubular.
- **12.** In which of the following cilia is not present:
  - (1) Respiratory bronchioles (2) Trachea
    - (4) Terminal bronchioles

Conducting pathway ie from trachea to terminal bronchioles is ciliated. Part after that ie respiratory bronchioles, alveolar ducts and alveoli are non ciliated.

- **13.** The function of the lung surfactant compounds is to
  - (1) filter impurities from the inspired air.
  - (2) increase the intrapulmonary pressure.
  - (3) reduce the surface tension in the alveoli.
  - (4) keep the lungs moist so gas diffusion can occur.

Surfactant lecithin prevents collapsing of the alveoli.



- 14. Which of the following part of respiratory tree is most sensitive to initiate coughing reflex?
  - (1) Respiratory bronchioles (2) Alveoli
    - (3) Alveolar duct
- (4) Secondary bronchi
- Conducting pathway ie from trachea to terminal bronchioles is ciliated. Part after that ie respiratory bronchioles, alveolar ducts and alveoli are non ciliated. Since secondary bronchi is ciliated ,hence its sensitive to dust particles to initiate process of coughing.

### **MECHANISM OF BREATHING**

- 15. During inspiration, contraction in diaphragm increase volume of thoracic cavity
  - (1) Dorso ventrally

- (2) Antero posteriorly
- (3) Laterally (4) Dorso laterally.

- 16. Which of the following muscle/s is/are contracted during forceful expiration?
  - (1) Abdominal muscles

(2) External intercostal muscles

(3) Phrenic muscles

(4) Both (1) and (2)

Expiration being a passive process involves relaxation of EICM and diaphragm, but forceful expiration involves contraction of abdominal muscle sand IICM.

- **17.** Among mammals, the efficiency of ventilation of lungs as compared to reptiles and birds is better developed by the presence of
  - (1) ribs and costal muscles
     (3) only costal muscles

(2) only ribs(4) diaphragm

Reptiles ,aves and mammals, all have rib cage and ICM but only mammals have diaphragm .

- **18.** Breathing by ribs is more pronounced in
- (1) male
   (2) female
   (3) pregnant female
   (4) none of these
   Breathing by ribs is called thoracic breathing ,which is more pronounced in pregnant female as diaphragm does not get sufficient space to contract as most of the abdominal space is occupied by the growing foetus .Hence in a pregnant female breathing is mostly thoracic , rapid and shallow.

## **RESPIRATORY VOLUMES**

Maximum inspiration after full expiration is called

 (1) vital capacity
 (2) lung capacity
 (3) tidal volume
 (4) residual volume

 XI NCERT pg 272

- 20. About 1200 ml air left in the lungs is called
   (1) tidal volume
   (2) vital capacity
   volume
- XI NCERT pg 272
- **21.** Which of the following prevents the  $O_2$  and  $CO_2$  concentration in the lungs from fluctuating greatly with each breath?
  - (1) Anatomical dead space
- (2) Physiological dead space

(3) reserve volume

(4) residual

Since diaphragm is present as muscular plate between thoracic and abdominal cavity, its contraction (becomes flat) increases thoracic volume up to down ie in Antero posterior axis of body.



- (3) Residual volume (4) Alveolar dead space Certain volume of air always remains in lungs even after forceful expiration ie RV, that prevents the O<sub>2</sub> and CO<sub>2</sub> concentration in the lungs from fluctuating greatly with each breath 22. The maximum volume of air a person can contain in the lungs after maximum inspiration is (1) Inspiratory reserve volume (2) Expiratory reserve volume (3) Vital capacity (4) Total lung capacity. XI NCERT pg 272 23. Arrange the following in the order of increasing volume Tidal volume b. Residual volume a. c. Inspiratory reserve volume d. Vital capacity (1) a < b < d < c(2) a > b > c > d(3) a < b < c < d(4) b < c < a < dXI NCERT pg 272
- 24. Alveolar ventilation is
  - (1)  $TV \times Breathing rate$
  - rate
  - (3) VC + RV

(4) TV + IRV + ERV

- Total alveolar ventilation volume means volume of air actually available for diffusion of gases ie volume of air in alveoli. Volume of air present in the conducting part ie from nose to tertiary bronchiole and is unavailable for exchange of gases is called dead space volume.
- 25. A patient with respiratory rate of 30 per minute and Tidal volume of 250 ml
  - (1) His pulmonary ventilation is 6L/min
- (2) His alveolar ventilation is 3L/min.
- (3) He is likely to have normal arterial  $Po_2$
- (4) He is likely to have normal arterial  $PCo_2$ Total alveolar ventilation volume means volume of air actually available for diffusion of gases ie volume of air in alveoli. Volume of air present in the conducting part ie from nose to tertiary bronchiole and is unavailable for exchange of gases is called dead space volume.dead space vol. is 150ml.
- Alveolar ventilation =  $(TV Dead space volume) \times Breathing rate$ =(250-150)x30=3000ml/min
- 26. Whether a child died after normal birth or died before birth can be confirmed by measuring
  - (1) tidal volume of air

- (2) residual volume of air
- (3) the weight of the child (4) the dead space air

A child after birth who has breathed can only have residual volume of air in lungs.

- Which of the following correctly explain the pulmonary ventilation? 27.
  - (1) Transport of  $O_2$  and  $CO_2$  in the blood and body fluids to and from the cells
  - (2) Diffusion of  $O_2$  and  $CO_2$  between the alveoli and blood cells
  - (3) In flow and outflow of air between the atmosphere and the lung alveoli

(4) Downward and upward movement of the diaphragms to lengthen or shorter the chest cavity.

The pulmonary ventilation means volume of air inhaled or exhaled per minute.

The air which is not participating in the exchange of gases 28.

(2) Vital air (1) Tidal air (3) Dead space air (4) Residual air Air trapped in the conducting part and not available for diffusion is called dead space volume air.

## **EXCHANGE OF GASES**

29. Alveoli are the primary sites of exchange of gases O<sub>2</sub> and CO<sub>2</sub> are exchanged in these sites by simple diffusion which is based on

(2)  $(TV - Dead space volume) \times Breathing$ 



	(1) Pressure/concentration gradient	(2) Solubility o	f gases
	(3) Thickness of membranes	(4) All of these	-
Pressu	re/concentration gradient is directly proportiona	to diffusion. S	olubility of gases is directly
	proportional to diffusion. Thickness of membran		
30.	$PO_2$ and $PCO_2$ in oxygenated blood is		
	(1) 95 and 40 mmHg respectively	(2) 40 and 45 n	nmHg respectively
	(3) 159 and 0.3 mmHg respectively		nmHg respectively.
XI NC	ERT pg 272		
31.	The amount of oxygen in expired air is		
	(1) 10% (2) 16%	(3) 19%	(4) 4%
Inspire	d air has 21% oxygen and expired air has 16%	oxygen because	under normal condition only
_	25% oxygen gets exchanged in lungs.		
32.	Which of the following has minimum amount of	$O_2$ content?	
	(1) Expired air (2) Venous blood	(3) Inspired air	(4) Arterial blood
pO <sub>2</sub> in	inspired air=159mmHg, pO <sub>2</sub> in expired air= 121	nm Hg, pO <sub>2</sub> in A	rterial blood= 95mmHg, pO <sub>2</sub>
	in venous blood = 40mmHg		
33.	Which of the following has maximum amount of	O <sub>2</sub> content?	
	(1) Inspired air (2) Arterial blood	(3) Alveolar air	(4) Venous blood
pO <sub>2</sub> in	inspired air=159mmHg, pO <sub>2</sub> in alveolar air= 104		
-	in venous blood = 40mmHg		
34.	Which of the following is the correct order of	liffusion rate of	oxygen, carbon dioxide and
	nitrogen from lungs to blood through the respirat	ory membrane?	
	(1) $CO_2 > O_2 > N_2$	(2) $CO_2 > N_2 >$	O <sub>2</sub>
	(3) $O_2 > CO_2 > N_2$	(4) $O_2 > N_2 > CO$	D <sub>2</sub> .
Carbor	n dioxide being most soluble hence shows max di	usion and nitrog	en is least soluble.

### TRANSPORT OF GASES

- **35.** The combination of oxygen and haemoglobin is called
- (1) oxidation (2) oxygenation (3) reduction (4) none of these Oxygen is loosely attached to Fe of haemoglobin and hence its oxygenation reaction and not oxidation reaction as ferrous ion is not converted to ferric ions.
- **36.** How much percent of  $CO_2$  is transported by hemoglobin as carbamino-hemoglobin? (1) 3% (2) 7% (3) 20-25% (4) 70

### Approx- 20-25% CO<sub>2</sub> is transported by hemoglobin as carbamino-hemoglobin

## **37.** Which of the following statement is correct with respect to transport of gases?

- (i) 97% of  $O_2$  is transported by RBC in the blood
- (ii) 3% of  $O_2$  carried in a dissolved state through the RBC
- (iii) 70%  $CO_2$  is carried as bicarbonate.
- (iv) 7% of  $CO_2$  is carried in a dissolved state through plasma.
- (1) (i), (iii) & (iv) (2) (i), (ii) & (iii) (3) Only (i) (4) All are correct. 3% of  $O_2$  carried in a dissolved state in plasma.

## **38.** Which of the following is false concerning the haemoglobin molecule ?

(1) It contains amino acids

(2) It contains iron(4) It is found in humans only

(3) It can bind four O<sub>2</sub> molecules Haemoglobin is found in vertebrates and annelids.

## TRANSPORT OF O2 (oxygen dissociation curve)



- Which of the following change of pressure difference at O<sub>2</sub> arterial blood leads to maximum 39. saturation of hemoglobin?
  - (1)  $10 \rightarrow 20 \text{ mm Hg}$ (3)  $40 \rightarrow 50 \text{ mm Hg}$

- (2)  $20 \rightarrow 30 \text{ mm Hg}$
- (4)  $70 \rightarrow 80 \text{ mm Hg}$
- XI NCERT pg 274, figure 17.5. Nearly 20% saturation at  $10 \rightarrow 20$  mm Hg, Nearly 30% saturation at  $20 \rightarrow 30$  mm Hg, and just 10% saturation at  $40 \rightarrow 50$  mm Hg, and hardly 5% saturation at 70  $\rightarrow 80 \text{ mm Hg}$
- 40. In comparison to adult haemoglobin, the oxygen dissociation curve of myoglobin is situated towards
  - (1) Right side (2) Left side (3) Either 1 or 2(4) No change.
- Myoglobin shows more affinity for oxygen than Hb and hence its curve shall be on the left side of oxygen dissociation curve.
- 41. Which of the following statement correctly defines Bohr's effect?
  - (1) Rise in  $P_{50}$  with a decrease in  $CO_2$  concentration
  - (2) Rise in  $P_{50}$  with decrease in pH
  - (3) Rise in  $P_{50}$  with increase in  $O_2$
  - (4) Fall in  $P_{50}$  with decrease in pH
- Bohr effect is due to increased pCO2 and reduced blood pH ie acidic blood causing dissociation making the curve shift right.
- 42. Select what is true about Haldane's effect
  - (1) It operates in body tissues
  - (2) Dissociation of  $CO_2$  from Hb takes place due to formation of oxyhaemoglobin
  - (3) Reciprocal exchange of  $O_2$  and  $CO_2$  between the foetal blood and maternal blood
  - (4) Both (2) & (3).
- Haldane effect is due to increased pO<sub>2</sub> in lungs causing formation of oxyhaemoglobin and release of CO<sub>2</sub> from body.
- 43. The oxygen hemoglobin dissociation curve is sigmoid. At which partial pressure of oxygen the Hb is 75% saturated? (3) 40 mm Hg (4) 98 mm Hg
  - (1) 20 mm Hg (2) 30 mm Hg
- XI NCERT pg 274, figure 17.5.
- The oxygen dissociation curve will not shift to left in 44.
  - (1) Foetal blood

- (2) Decrease in pH
- (3) Decrease in hydrogen ion concentration (4) Low temperature.

Decrease in pH shall cause dissociation making the oxygen dissociation curve will shift to right.

- 45. Mark the factors which are favorable for the formation of oxyhaemoglobin at the level of alveoli
  - (i) High  $pO_2$ (ii) Lesser  $H^+$  conc (iii) Low pCO<sub>2</sub> (iv) Lower temperature (1) (i), (ii) & (iv) (2) (i), (ii) & (iii) (3) (ii), (iii) & (iv) (4) (i), (ii), (iii) & (iv)

XI NCERT pg 274, 2<sup>nd</sup> para.

P<sub>50</sub> value in adult human at which haemoglobin is 50% saturated with oxygen is a \_\_\_\_\_ **46**. (1) 10 mm Hg of  $pO_2$ (2) 18 mm Hg of  $pO_2$ (3) 27 mm Hg of pO<sub>2</sub> (4) 50 mm Hg of  $pO_2$ 



### XI NCERT pg 274, figure 17.5.

- **47.** Which of the following best explain the Haldane effect?
  - (1) Increase in  $CO_2$  in the blood will cause  $O_2$  to be displaced from the Hb
  - (2) Binding of  $O_2$  with Hb tend to displace carbon dioxide from the blood
  - (3) Decrease in arterial  $PO_2$  tends to displace more amount of  $CO_2$  from the blood
  - (4) Decrease in arterial  $PCO_2$  tend to displace  $O_2$  from the Hb.
- Haldane effect is due to increased  $pO_2$  in lungs causing formation of oxyhaemoglobin and release of  $CO_2$  from body.
- **48.** Which of the following is not correct about Haldane effect?
  - (1) In the tissue capillaries, Haldane effect causes increased pickup of  $CO_2$
  - (2) In lungs, it causes increased release of  $CO_2$
  - (3) Haldane effects acts opposite to Bohr's effect
  - (4) In the tissue capillaries Haldane effect causes increased pickup of  $O_2$
- Haldane effect is due to increased  $pO_2$  in lungs causing formation of oxyhaemoglobin and release of  $CO_2$  from body. Its mainly for transport of  $CO_2$  in lungs as well as near tissues. In the tissue capillaries Bohr effect causes increased pickup of  $O_2$
- **49.** Around 50 ml of  $O_2$  to the tissues under normal physiological conditions is transported by
  - (1) 100 ml of oxygenated blood (2) 1000 ml of oxygenated blood
  - (3) 1000 ml of deoxygenated blood (4) 200 ml of oxygenated blood.
- As each 100ml of oxygenated blood delivers 5ml oxygen to tissues ,hence every 1000 ml of oxygenated blood shall deliver 50 ml of O<sub>2</sub> to the tissues under normal physiological conditions
- **50.** Which of the following takes place when blood becomes acidic?
  - (1) Binding of oxygen with haemoglobin increases
  - (2) Red blood corpuscles are formed in higher number
  - (3) Binding of oxygen with haemoglobin decreases
  - (4) There is no change in the binding of oxygen and number of RBCs
- When blood becomes acidic due to increased H ions, it causes Bohr effect, oxygen dissociates from Hb.
- **51.** Haldane effect is due to
  - (1) CO<sub>2</sub> (2) lactic acid (3) pH oxyhaemoglobin

<mark>(4)</mark>

- Haldane effect is due to increased  $pO_2$  in lungs causing formation of oxyhaemoglobin and release of  $CO_2$  from body.
- 52. Ratio of oxyhaemoglobin and haemoglobin in blood is based upon
  (1) oxygen tension
  (2) CO<sub>2</sub> tension
  (3) carbonate tension
  (4) bicarbonate tension
- pO<sub>2</sub> or oxygen tension shall mainly decide the state of Hb.
- **53.** Breathing 100% oxygen is likely to produce all of the following except?
  - (1) Marked increase in alveolar  $PO_2$
  - (2) Marked increase in arterial blood PO<sub>2</sub>
  - (3) Marked increase in arterial blood O<sub>2</sub> content
  - (4) Almost no change is arterial blood PCO<sub>2</sub>
- Breathing 100% oxygen shall not increase in arterial blood O<sub>2</sub> content as it shall still remain the same as each Hb molecule can still combine with only 4 oxygen molecules .Each 100ml of arterial blood shall carry aprrox. 20ml oxygen.



Zol. XI	
	<u>Zol. X</u> I

	The utilization coefficient of body tissue wher rate is high will be	e the blood flow is extrem	ely slow and metabolic
	$\begin{array}{c} (1) & 25\% \\ \end{array} \qquad \begin{array}{c} (2) & 75\% \\ \end{array}$	(3) 100%	(4) 50%
At res	sting condition every 100ml of blood delivers		
	capacity .So during increased activity as Bl increases making this delivery capacity reach the pH of blood.	75% but never 100% be	
55.	Amount of oxygen transported by one gram of	-	
~	(1) 1.34 ml (2) 13.4 ml	(3)  20  ml	(4) 3.7 ml.
<u> </u>	ram of hemoglobin carries 1.34ml oxygen.		
56.	Oxyhaemoglobin acts as	(2) 1ff	(4)
The	(1) alkali (2) acid to as a huffer, anythermorphic acts as acid and	(3) buffer	(4) neutral
57.	ts as a buffer –oxyhaemoglobin acts as acid and Amount of O <sub>2</sub> transported by 100 ml of blood	reduced naemogroum act	s as aikaii.
57.	(1) $50 \text{ ml}$ (2) $20 \text{ ml}$	(3) 80 ml	(4) 100 ml
Each	gm of Hb carries $1.34$ ml O <sub>2</sub> .100ml of blood has		(4) 100 III
Lucii		approx 155m 110.	
	TRANSPORT OF CA	<b>RBON DIOXIDE</b>	
58.	Every 100 ml of deoxygenated blood delivers	approximately n	nl of $CO_2$ to the alveoli
	(1) 2 ml (2) 16 ml	(3) 4 ml	(4) 6 ml.
XI NO	CERT pg 275,2 <sup>nd</sup> para ,last line.Every 100 ml of	deoxygenated blood deliv	vers approximately 4ml
	of $CO_2$ to the alveoli.		
59.	Carbonic anhydrase is most abundant in (1) RBC (2) WBC	(2) blood plasma	(1) mlatalata
VINO	(1) RBC (2) WBC CERT pg $275,1^{\text{st}}$ para, $2^{\text{nd}}$ line.	(3) blood plasma	(4) platelets
	2LK I $pg 2/3$ , I $para, 2$ IIIC.		
		spiratory surface by	
60.	Carbon dioxide is transported from tissue to re		(4) <b>RBCs</b> and
00.	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes	espiratory surface by (3) both (1) and (2)	(4) RBCs and
	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes WBCs	(3) both (1) and (2)	(4) RBCs and
	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes WBCs n dioxide is dissolved in plasma and carried by	(3) both (1) and (2) Hb in RBCs.	(4) RBCs and
Carbo	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes WBCs	(3) both (1) and (2) Hb in RBCs.	(4) RBCs and
Carbo	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes WBCs n dioxide is dissolved in plasma and carried by For proper transport of oxygen and carbon dio	(3) both (1) and (2) Hb in RBCs. xide, blood should be	(4) RBCs and
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Carbo 61. For pr 62. Conce 63.	Carbon dioxide is transported from tissue to re (1) plasma (2) erythrocytes WBCs n dioxide is dissolved in plasma and carried by For proper transport of oxygen and carbon dio (1) slightly acidic (3) slightly alkaline oper transport of oxygen and carbon dioxide, bl Concentration of carbonic acid doesn't increas (1) Na <sup>+</sup> (2) Mg <sup>+2</sup> entration of carbonic acid in blood is balanced by Which one is correct with respect to reverse ch (1) Cl <sup>-</sup> moves in the RBC (3) HCO <sub>3</sub> <sup>-</sup> moves out the RBC se chloride shift taking place in lungs causes C	<ul> <li>(3) both (1) and (2)</li> <li>Hb in RBCs.</li> <li>xide, blood should be <ul> <li>(2) strongly acidic</li> <li>(4) strongly alkaline</li> </ul> </li> <li>ood should be of pH 7.4.</li> <li>as in blood due to presence</li> <li>(3) Ca<sup>+2</sup></li> <li>y Na bicarbonates.</li> <li>hloride shift?</li> <li>(2) HCO<sup>-</sup><sub>3</sub> moves in the</li> <li>(4) O<sub>2</sub> moves out the</li> </ul>	e of (4) K <sup>+</sup> the RBC RBC

- The impulse for voluntary muscles for forced breathing starts in **64**.
  - (1) medulla oblongata (2) vagus nerve (4) cerebrum
  - (3) cerebellum



- The impulse for voluntary muscles for forced breathing starts in cerebrum and the impulse for voluntary muscles for normal breathing starts in medulla oblongata.
- **65.** Which of the respiratory centre present in the pons region of the brain moderate the function of the respiratory rhythm centre?
  - (1) Pneumotaxic centre

(2) DRG

(3) VRG

(4) Both (2) & (3).

- XI NCERT pg 275, 3<sup>rd</sup> para
- 66. Nerve impulses from the dorsal respiratory group of neurons stimulate the(1) Diaphragm to become flat shaped
  - (2) Abdominal muscle to relax completely
  - (2) Abdominal muscle to relax completely(3) External intercostal muscle to lower the rib cage
  - (4) Internal intercostal muscle to raise the rib cage.
- Nerve impulses from the dorsal respiratory group of neurons stimulate to cause inspiration by contracting EICM and diaphragm.
- 67. If the pneumotaxic centre is sending weak inhibitory signals to DRG
  - (1) duration of inspiration increases, decreasing the respiratory rate
    - (2) duration of inspiration increases, increasing the respiratory rate
    - (3) duration of inspiration decreases, increasing the respiratory rate
    - (4) duration of inspiration decreases, decreasing the respiratory rate  $\$
- Pneumotaxic centre of pons inhibits respiratory rhythm centre of medulla and hence decreases the duration of inspiration and increases the breathing rate. But if these signals are weak then the effect shall be opposite.
- **68.** Select the correct statement w.r.t. regulation of respiration

### (1) Role of oxygen in regulation of respiratory rhythm is insignificant

- (2) Chemosensitive area is highly sensitive to  $O_2$  and hydrogen ions
- (3) Medulla region of the brain has Pneumotaxic centre
- (4) Respiratory rhythm centre is the pons varolii region of brain can reduce duration of inspiration.
- Chemosensitive area is highly sensitive to CO<sub>2</sub> and hydrogen ions . Pons region of the brain has Pneumotaxic centre. Respiratory rhythm centre is in the medulla region of brain .
- **69.** Which respiratory centre primarily limits inspiration?
  - (1) Dorsal respiratory group of neurons
- (2) Ventral respiratory group of neurons

(3) Pneumotaxic centre

- (2) Ventral respiratory group(4) Apneustic centre.
- Pneumotaxic centre of pons inhibits respiratory rhythm centre of medulla and hence decreases the duration of inspiration and increases the breathing rate.
- **70.** Respiratory centres of brain are highly sensitive to
  - (2)  $CO_2$  concentration in blood
  - (3) High pH of blood (4) Body temperature.
- Chemosensitive area is highly sensitive to CO<sub>2</sub> and hydrogen ions conc of arterial blood.
- 71. Rate of respiration is directly affected by

(1)  $O_2$  concentration in blood

(1)  $CO_2$  conc.

(2)  $O_2$  in trachea

(3)  $O_2$  concentration

(4) diaphragm expansion

Chemosensitive area is highly sensitive to  $CO_2$  and hydrogen ions and hence if CO2 conc. increases ,rate of breathing too increases.

### DISORDERS

72. Carbon monoxide has times affinity greater than oxygen with haemoglobin.



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(1) 1000 (2) 200 (3) 20 (4) 2 Carbon monoxide has 200-250 times affinity greater than oxygen with Hb.

- 73. Carbon monoxide prevents transport of oxygen by
  - (1) forming stable compound with haemoglobin
  - (2) destroying haemoglobin
  - (3) forming carbon dioxide from oxygen
  - (4) destroying RBCs

Carbon monoxide binds irreversibly with Hb to form carboxy haemoglobin.

### 74. Ascent to high mountains may cause altitude sickness in human. Prime cause of this is

- (1) Excess of  $CO_2$  in blood
- (2) Decreased efficiency of hemoglobin to bind with oxygen
- (3) Decreased amount of hemoglobin in blood
- (4) Decreased partial pressure of oxygen

At high altitude air becomes thin and hence partial pressure of individual gases is reduced.

- **75.** In carbon monoxide poisoning, there is
  - (1) increase in  $CO_2$  concentration
- (2) decrease in oxygen availability
- (3) decrease in free haemoglobin
- (4) none of these

In carbon monoxide poisoning, there is decrease in free haemoglobin as CO binds irreversibly with Hb.

**76.** A chronic disorder, mainly caused due to cigarette smoking, in which alveolar walls are damaged due to which respiratory surface is decreased, called

(1) Asthma (2) Bronchitis (3) Emphysema (4) Atelectasis. Emphysema cause damage to alveolar membrane decreasing the overall surface area for diffusion.

- 77. Respiratory distress syndrome of new borns is primarily due to
  - (1) Non functioning of diaphragm
  - (2) Non functioning of intercostals
  - (3) Little or no surfactant formation in alveoli
  - (4) Inability of secretion of nitric oxide

Respiratory distress syndrome of new borns means the lungs fail to expand ie baby is born with collapsed lungs mainly due to severe deficiency of lecithin in alveoli.

- **78.** Which of the following is not correct about chronic asthma?
  - (1) Increase in FRC (2) Dyspnoea
  - (3) Barrel chest (4) Decrease intrapulmonary pressure

Chronic asthma causes Barrel chest reducing lungs size and hence intrapulmonary pressure slightly increases. Dyspnoea means difficulty in breathing. Since expiration is difficult so more air remains in lungs as FRC.

## PREVIOUS YEARS QUESTIONS

- **1.** If the total pressure of the gases is 760 mmHg and its composition is 20% oxygen, 0.04% carbon dioxide, 75% nitrogen and 5% water vapour, the partial pressure of oxygen is:
- 20 COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE

B. Scorpion – book lungs A. Silver fish – trachea C. Sea squirt – pharyngeal gills D. Dolphin - skin

- Respiratory centre that controls normal breathing lies in: [CPMT 2002] (1) Midbrain (2) Cerebrum (3) Cerebellum (4) Medulla oblongata.
- (4) all times irrespective of  $O_2$  pressure. Oxyhaemoglobin dissociates into oxygen and deoxyhaemoglobin at tissues due to low pO2, high pCO2, high temperature etc. Respiratory rhythm centre that controls normal breathing lies in medulla region of brain. Given below are four matching of an animal and its kind of respiratory organ: [CBSE 2003]

(4) Hamburger phenomenon. [Kerala PMT 2001, 02] (1) Tidal volume (2) Vital capacity

(1) Haldane effect

(1) 15.2 mmHg

(3) 152 mmHg

 $pO_2$  in atmospheric air is 159mm Hg.

(1) Less  $O_2$  in blood

(3) Bicarbonate shift

(3) equal  $O_2$  pressure inside and outside tissue

(2) C and D

Carbon monoxide contained in tobacco smoke

Dolphin – lungs. All mammals terrestrial or aquatic has lungs as organ of breathing.

Hamburger phenomenon is also called as chloride shift.

4. The volume of air breathed in and out during a normal breathing by man is called:

Oxyhaemoglobin dissociates into oxygen and deoxyhaemoglobin at:

XI NCERT pg 271 ,last para

(3) Residual volume

(1) low  $O_2$  pressure in tissue

(2) high  $O_2$  pressure in tissue

The correct matching are:

(1) B and D

(4) Inspiratory reserve volume.

- (3) Less  $CO_2$  in blood (4) More  $CO_2$  in blood. Breathing rate and type of breath is most affected by conc of CO2 and H ions in blood.
- 3. During CO<sub>2</sub> transport, HCO<sub>3</sub><sup>-</sup> diffuses from erythrocytes to plasma and in turn upsets the ionic equilibrium momentary. In order to keep the ionic balance, an equal number of Cl<sup>-</sup> ions pass into the erythrocytes from plasma. This process is known as:

## Breathing and Exchange of Gases

(2) 118 mmHg

(4) 20 mmHg.

(2) More  $O_2$  in blood

After taking a long deep breath we do not respire for some seconds due to: [Kerala PMT 2001]

#### COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE

(3) A and D

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[Orissa JEE 2003]

(4) A, B, and C.

[Kerala PMT 2001]

[Kerala PMT 2001]

- (2) Bohr effect



2.

5.

6.

7.

8.

- [JIPMER 2002]



- (1) Is carcinogenic
- (2) Causes gastric ulcers

(3) Reduces oxygen carrying capacity of blood

(4) Raises blood pressure

CO binds irreversibly with Hb.

9. When man inhales air containing normal concentration of O<sub>2</sub>, but also carbon monoxide, he suffers from suffocation because: [BV Pune 2003]

(1) Haemoglobin combines with CO instead of with O<sub>2</sub> and product cannot dissociate

- (2) CO react with  $O_2$  reducing percentage of  $O_2$  in the air
- (3) CO affects the diaphragm and intercostal muscles
- (4) CO affects the nerves of the lungs.

Hb has max. affinity for CO.

- 10. Ravi, who lived at sea level, had around 5 million RBCs per cubic millimeter of his blood. Later when he lived at an altitude of 18,000 ft, showed around 8 million RBCs per other millimeter of blood. This is an adaptation because.
  - (1) He had pollution free air to breathe
  - (2) At high altitude he ate more nutritive food
  - (3) At high altitude, O<sub>2</sub> level is less hence more RCBs were required to absorb enough oxygen
  - (4) At high altitude there is more of UV-radiation which enhances RBCs production.
- At high altitude as partial pressure of oxygen is less, people need to get acclimatize . Hb content increases as RBC count increases.
- **11.** What is true about hemoglobin?
  - (1) It is a dipeptide and present in red blood corpuscles in blood worm
  - (2) It is present in the dissolved state in blood plasma in earthworm
  - (3) It is a dipeptide in mammals and localized in red blood corpuscles
  - (4) It is present in dissolved state in blood plasma in scorpion.
- Hb is a tetrapeptide and present in red blood corpuscles in vertebrates. Scorpion lacks Hb, they have haemocyanin to impart blue colour to blood.
- 12. The rhythmic control of breathing is produced by the activity of inspiratory and expiratory neurons in:
   [CPMT 2005]
  - (1) Cerebral cortex (2) Medulla oblongata
  - (3) Apneustic centre of the pons (4) Pneumotaxic centre of the pons.

Respiratory rhythm centre that controls normal breathing lies in medulla region of brain.

- 13. Dissociation curve shifts to the right when2005]
  - O<sub>2</sub> concentration increases
     CO<sub>2</sub> concentration increase
- (2) CO<sub>2</sub> concentration decreases(4) Chloride concentration increase
- XI NCERT pg 274. Increase in CO2 concentration in blood causes Bohr effect as a result of which Hb affinity towards oxygen is decreased making the dissociation curve shift towards right.
- 22 COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE

[CPMT

[AIEEE 2004]



**Answer Codes:** 

14.	In lungs, there is definite exchange of ions betw	•
	blood involves:	[CPMT 2005]
		Efflux of Na from RBC
P		Efflux of $HCO_3^-$ ions from RBC.
Reve	erse chloride shift in lungs causes Influx of $HCO_3^-$	ions into RBC and efflux of Cl <sup>-</sup> ions from
	RBC.	
15.	If the level of carboxyhaemoglobin in blood	
	nervous system is severely affected which results $(1)$ 1 to $0.5\%$ $(2)$ $(2)$	
Carbo		0.20 to 0.30% (4) 0.30 to 0.40%.
Carbo	bon monoxide is a very poisonous gas as it binds i gases in body stops mainly oxygen.	neversiony with Ho hence transport of other
	gases in body stops manny oxygen.	
16.	Asthma is caused due to:	[WB-JEE 2006]
200		Infection of trachea
		Bleeding into pleural cavity
Asthr	nma is an allergy caused due to exposure to dust or sr	
		5
17.	Combining of hemoglobin with oxygen in lungs of	can be promoted by: [MPPMT 2006]
	(1) Introducing CO into blood (2)	Decreasing $O_2$ concentration in blood
	(3) Increasing O <sub>2</sub> concentration in blood (4)	Increasing CO <sub>2</sub> concentration in blood.
Asso	ociation of Hb with oxygen is mainly due to increase	d pO2.
18.	The function/s of surface tonsion on the almost	[WB-JEE 2007]
	<ul><li>(1) To reduce the surface tension on the alveoli</li><li>(2) Maintaining the stable size of the alveoli</li></ul>	
	(3) Facilitating lung expansion	
	(4) All of the above	
Lecitl	ithin is the surfactant present in alveoli. To prevent it	s collapsing.
10		
19.	Vital capacity of lungs is:	[Kerala PMT 2007]
		$\frac{IRV + ERV + TV}{IRV + ERV + TV + RV}$
VIN		$\mathbf{I}\mathbf{K}\mathbf{v} + \mathbf{E}\mathbf{K}\mathbf{v} + \mathbf{I}\mathbf{v} + \mathbf{K}\mathbf{v}$
	NCERT pg 272	
20.	Match the items in Column I with Column II and	choose the correct option.
-01		Column II
		2500 to 3000 mL of air
		1000 mL of air
	1 2	500 mL of air
	•	3400 to 4800 mL of air
		1200 mL of air

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[Kerala PMT 2007]

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	(1) $(A-3); (B-4); (C-2); (D-1); (E-5)$		
	(2) $(A-3); (B-1); (C-4); (D-5); (E-2)$		
	(3) $(A-5); (B-4); (C-2); (D-1); (E-3)$		
	(4) $(A-3); (B-1); (C-2); (D-5); (E-4)$		
	(5) $(A-4); (B-3); (C-2); (D-1); (E-5)$		
XI NC	ERT pg 272		
21.	Lungs are not affected by the disease		[DPMT
	2007]		
	(1) Pneumonia (2) Bronchitis	(3) Polio	(4) Asthma
XI NC	ERT pg 275. Polio is a neural disorder.		

- 22. Which of the following factors raise the P<sub>50</sub> value and shifts the HbO<sub>2</sub> dissociation curve to right? [BHU 2007]
  - (a) Rise in  $P_{CO_2}$
  - (c) Rise in  $H^+$  ions (= fall in pH)
  - (1) (a) and (b) are correct
  - (3) (a) and (c) are correct

(2) (b) and (d) are correct

(d) Fall in diphosphoglyceric acid

(b) Fall in temperature

(4) (a), (b) and (c) are correct.

Rise in  $P_{CO_2}$  and Rise in H<sup>+</sup> ions (= fall in pH) both causes dissociation making the curve shifted right, whereas Fall in temperature and Fall in diphosphoglyceric acid shall cause left shift.

**23.** Which of the following statements is not true?

(1) The partial pressure of oxygen in deoxygenated blood is 40 mmHg

- (2) The partial pressure of oxygen in oxygenated blood is 95 mmHg
- (3) The partial pressure of carbon dioxide in oxygenated blood is 95 mmHg
- (4) The partial pressure of carbon dioxide in the alveolar air is 40 mmHg.

The partial pressure of carbon dioxide in oxygenated blood is 40 mmHg

- 24. The number of RBCs in man increases if he lives at a higher altitude because:
  - (1) There is less oxygen at mountains
  - (2) There is more oxygen at the mountains
  - (3) There are no germs in the air in mountain
  - (4) More heat is required to be produced in the body for keeping warm.

At high altitude as partial pressure of oxygen is less, people need to get acclimatize . Hb content increases as RBC count increases.

- **25.** During inspiration, the diaphragm:
  - (1) Relaxes to become dome-shaped
  - (3) Shows no change

During inspiration, the diaphragm Contract and flattens.

- **26.** The alveoli of lungs are lined by \_\_\_\_\_ epithelium
- 24 COLLEGES: ANDHERI / BORIVALI / CHEMBUR / DADAR / KALYAN / KHARGHAR / NERUL / POWAI / THANE

[Kerala PMT 2007]

[WB-JEE 2007]

## [CPMT 2008; Manipal 2008]

- (2) Contract and flattens
- (4) Expands.

[Kerala PMT 2008]

(1) Simple (2) Squamous (3) Cuboidal (4) Columnar epithelium The alveoli of lungs and endothelium of lung capillary both are lined by squamous epithelium

**27.** How many haem molecules are present in one molecule of haemoglobin?

(1) 1 (2) 2 (3) 3 (4) 4

Each Hb molecule has 4 Fe containing porphyrin rings and hence can bind with 4 oxygen molecules.

- 28. According to Boyle's law, the product of pressure and volume is a constant. Hence [KCET 2010]
   (1) If the volume of the lungs is increased, the pressure decreases proportionately
  - (2) If the volume of the lungs is increased, the pressure also increases proportionately
  - (3) If the volume of the lungs is increased, the pressure decreases disproportionately
  - (4) If the volume of the lungs is increased, the pressure remains same

According to Boyle's law, volume is inversely proportional to pressure.

- 29.Which of the following statements is correct?[UP-CPMT 2010]
  - (1) During inspiration, external intercostals muscles and diaphragm contract
  - (2) Cyanosis means collapse of alveoli
  - (3) Eupnoea means slow breathing
  - (4) Coryza is caused by human corona virus

Cyanosis means bluish skin colour due to hypoxia. Eupnoea means normal breathing. Coryza is caused by Rhino virus.

- **30.** The urge to inhale in humans results from:
   [DUMET 2010]

   (1) Rising PCO2
   (2) Rising PO2
   (3) Falling Pco2
   (4) Falling PO2

   Breathing rate and type of breath is most affected by conc of CO2 and H ions in blood.
- 31. In which of the following subjects, the dead space is highest?
   [WB-JEE 2010]

   (1) Old man
   (2) Old woman
   (3) Young man
   (4) Young woman

   Lungs
   are comparatively larger in males than females . So male dead space area too shall be larger.
   With increasing age efficiency of lungs decreases and that adds extra physiological dead space in old males.
- **32.** Which of the following is the cofactor of carbonic anhydrase?[WB-JEE 2010](1) Fe(2) Zn(3) Cu(4) MgZn is co-factor for enzyme carbonic anhydrase.(4) Mg
- **33.**Skin is an accessory organ of respiration in:[WB-JEE 2010](1) Humans(2) Frogs(3) Rabbit(4) Lizard

Skin is an accessory organ of respiration in amphibians as they lack exoskeleton and their skin is moist and glandular.

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- 34. Between breaths, the intrapleural pressure is approximately ..... mmHg less than atmospheric pressure
   [AMU 2010]
  - (1) 1 (2) 4 (3) 8 (4) 10
- The intrapleural pressure is always negative to prevent lungs from collapsing. During inspiration its -16mm hg and at end of expiration its -4mm hg.
- 35. The figure given below shows a small part of human lung where exchange of gases takes place. In which one of the options given below, the one part A, B, C and D is correctly identified along with its function: [CBSE 2011]



- (1) C Artery capillary passes oxygen to tissues
- (2) A Alveolar cavity main site of exchange of gases
- (3) D Capillary wall exchange of  $O_2$  and  $CO_2$  takes place
- (4) B Red blood cells transport of CO<sub>2</sub> mainly
- $C-Artery\ capillary-passes\ carbon\ dioxide\ to\ lungs.\ D-alveolar\ wall-exchange\ of\ O_2\ and\ CO_2\ takes\ place\ .\ B-Red\ blood\ cells-transport\ of\ both\ O2\ and\ CO_2$
- **36.** A large proportion of oxygen is left unused in the human blood even after its uptake by the body tissues. This O<sub>2</sub> [CBSE 2011]
  - (1) Acts as a reserve during muscular exercise
  - (2) Raises the  $pCO_2$  of blood to 75 mm of Hg
  - (3) Is enough to keep oxy hemoglobin saturation at 96%
  - (4) Helps in releasing ore  $O_2$  to the epithelial tissues

## Both Hb in blood and myoglobin in muscles stores oxygen.

- **37.** Two friends are eating together on a dining table, one of them suddenly starts coughing while swallowing some food. This coughing would have been due to improper movement of:
  - (1) Epiglottis(2) Diaphragm[CBSE 2011](3) Lungs(4) Tongue

Epiglottis prevents entry of food in trachea.

38. Which one of the following can bind several times more strongly to the haemoglobin than oxygen? [AMU 2011]

(1) CO (2) CO<sub>2</sub> (3) SO<sub>2</sub> (4)  $H_2CO_3$ 

Carbon monoxide is a very poisonous gas as it binds irreversibly with Hb hence transport of other gases in body stops mainly oxygen.



- The factor which does not affect the rate of alveolar diffusion is 39. [Kerala PMT 2011] (1) Solubility of gases (2) Thickness of respiratory membrane (4) Reactivity of gases (3) Pressure gradient The rate of alveolar diffusion is directly proportional to Solubility of gases and Pressure gradient, rate of alveolar diffusion is inversely proportional to Thickness of respiratory membrane. 40. Congestion of the lungs is one of the main symptoms in: [Kerala PMT 2011] (1) Hypotension (2) Coronary heart disease (4) Heart failure (3) Angina Congestive heart failure is a chronic heart problem .
- 41. Amount of  $CO_2$  in expired air is:
   [J&K CET 2011]

   (1) 0.04%
   (2) 0.03%
   (3) 3.6%
   (4) 21%

Amount of CO2 in expired air is 100 times more than in inspired air.

- 42. Which one of the following is the correct statement for respiration in humans? [AIPMT 2012]
   (1) Workers in grinding and stone-breaking industries may suffer, from lung fibrosis
  - (2) About 90% of carbon dioxide ( $CO_2$ ) is carried by haemoglobin as carbaminohaemoglobin
  - (3) Cigarette smoking may lead to asthma.
  - (4) Neural signals from pneumotoxic centre in pons region of brain can increase the duration of inspiration
- About 20-25% of carbon dioxide (CO<sub>2</sub>) is carried by haemoglobin as carbaminohaemoglobin . Cigarette smoking may lead to emphysema. Neural signals from pneumotoxic centre in pons region of brain can decrease the duration of inspiration
- 43. People who have migrated from the planes to an area adjoining Rohtang Pass about six months back [AIPMT 2012]
  - (1) Suffer from altitude sickness with symptoms like nausea, fatigue, etc
  - (2) Have the usual RBC count but their haemoglobin has very high binding affinity to  $O_2$
  - (3) Have more RBCs and their haemoglobin has a lower binding affinity to  $O_2$
  - (4) Are not physically fit to play games like football
- As a result of acclimatization to higher altitude, the RBC count increases as the pO2 at high altitude is less and due to less pO2 the Hb affinity for O2 is lowered.
- **44.** The figure shows a diagrammatic view of human respiratory system with labels A, B, C and D. Select the option which gives correct identification and main function and / or characteristics

[NEET - 2013]



- (1) D lower end of lungs diaphragm pulls it down during inspiration
- (2) A-trachea-long tube supported by complete cartilaginous rings for conducting inspired air
- (3) B-pleural membrane surround ribs on both sides to provide cushion against rubbing
- (4) C Alveoli thin walled vascular bag like structures for exchange of gases

A-trachea-long tube supported by incomplete cartilaginous rings.

B-pleural membrane – surrounds lungs and present inner to ribs.

- D diaphragm- pulls lungs down during inspiration
- 45. Approximately seventy percent of carbon-dioxide absorbed by the blood will be transported to the lungs: [AIPMT

2014]

(1) by binding to R.B.C.

(2) as carbamino – haemoglobin

(3) as bicarbonate ions

(4) in the form of dissolved gas molecules

- 70% CO2 carried as bicarbonates of Na ,20-25% as carbamino-haemoglobin and 7% dissolved in plasma.
- 46. When you hold your breath, which of the following gas changes in blood would first lead to the urge to breathe? [AIPMT –

2015]

(1) rising  $CO_2$  concentration

(2) falling  $CO_2$  concentration

(4) Respiratory acidosis

(3) rising  $CO_2$  and falling  $O_2$  concentration (4) falling  $O_2$  concentration

Chemoreceptors present in the wall of aorta and carotid artery are highly sensitive to increased partial pressure of carbon dioxide and reduced oxygen level has a very negligible role to play.

- 47. Name the chronic respiratory disorder caused mainly by cigarette smoking: [NEET-1 2016] (1) Respiratory alkalosis (2) Emphysema
  - (3) Asthma

Chronic smokers are at high risk to suffer from Emphysema. Cigarette Smoke destroys alveolar wall.

**48**. Reduction in pH of blood will:

(1) release bicarbonate ions by the liver.

[NEET-1 2016]



2016]

(2) reduce the rate of heart beat.

- (3) reduce the blood supply to the brain
- (4) decrease the affinity of hemoglobin with oxygen.

Reduction in pH of blood is acidic pH causes Bohr effect near tissues enabling O2 transport to tissues.

49. The partial pressure of oxygen in the alveoli of the lungs is

### **INEET-2**

(1) Less than that in the blood (2) Less than that of carbon dioxide

(3) Equal to that in the blood (4) More than that in the blood

The partial pressure of oxygen in the alveoli of the lungs is 104mmHg and the partial pressure of oxygen in oxygenated blood is 95 mm Hg and in deoxygenated blood is 40mm Hg.

- 50. Lungs do not collapse between breaths and some air always remains in the lungs which can [NEET-2 2016] never be expelled because:
  - (1) There is a positive intrapleural pressure
  - (2) Pressure in the lungs is higher than the atmospheric pressure.
  - (3) There is a negative pressure in the lungs.
  - (4) There is a negative intrapleural pressure pulling at the lung walls
- Intrapleural pressure is always negative to prevent lungs from collapsing. Hence certain volume of air always remains in lungs to prevent them from collapsing called as Residual volume .Intrapulmonary pressure is negative during inspiration and positive during expiration.
- 51. Lungs are made up of air-filled sacs, the alveoli. They do not collapse even after forceful expiration, because of: [NEET- 2017]
  - (1) Residual Volume

(2) Inspiratory Reserve Volume

(3) Tidal Volume

(4) Expiratory Reserve Volume

Intrapleural pressure is always negative to prevent lungs from collapsing. Hence certain volume of air always remains in lungs to prevent them from collapsing called as Residual volume

52. Match the items given in Column I with those in Column II and select the correct option given below [NEET 2018]

	Column I					Column II
1.	Tida	al volu	me		(i)	2500 – 3000 mL
2.	Inspiratory reserve		(ii)	1100 – 1200 mL		
	volu	ime				
3.	Expiratory reserve		(iii)	500 - 550  mL		
	volume					
4.	Res	idual v	volume	e	(iv)	1000 – 1100 mL
	1	2	3	4		
(1)	i	iv	ii	iii		
(2)	iii	i	iv	ii		
(3)	iii	ii	i	iv		
(4)	iv	iii	ii	i		
(2)						

Tidal Volume (TV) is the volume of air inspired or expired during normal breath. It is about 500-550 mL. Inspiratory Reserve Volume (IRV) is the extra amount of air that can be inspired directly after a normal inspiration. It is about 2500-3000 mL. Expiratory Reserve Volume (ERV) is the extra amount of air that can be expired forcibly after a normal expiration. It is about 1000-1100 mL Residual Volume (RV) is the volume of air which remains still in the lung after the most forceful expiration. It is about 1100-1200 mL. Therefore, option (b) is correct.

53.	Which of the following	ng is an Occupational	respiratory disorder?	[NEET 2018]
	(1) Botulism	(2) Silicosis	(3) Anthracis	(4) Emphysema
	(2)			

Silicosis is an occupational respiratory disorder which is caused due to excessive inhalation of silica dust. It usually affects the workers of grinding or stone breaking industries. The long-term exposure can cause lung fibrosis (or stiffening), leading to breathing difficulties. Anthracis or Anthrax is a bacterial infection caused by Bacillus anthracis. Botulism is food poisoning Infection caused by Clostridium botulinum. Its symptoms include diarrhoea, vomiting, abdominal distention, etc.

- 54. Which one of the following options correctly represents the lung conditions in asthma and emphysema, respectively? [NEET 2018]
  - (1) Increased respiratory surface: Inflammation of bronchioles
  - (2) Increased number of bronchioles; Increased respiratory surface
  - (3) Inflammation of bronchioles; Decreased respiratory surface
  - (4) Decreased respiratory surface; Inflammation of bronchioles(3)

Asthma is inflammation of bronchioles. Its symptoms include wheezing, coughing and difficulty in breathing mainly during expiration. Emphysema is an inflation or abnormal distension of the bronchioles or alveolar sacs of the lungs. Many of the septa between the alveoli are destroyed and much of the elastic tissue of the lungs is replaced by connective tissue. As a result alveolar septa collapse and the surface area get greatly reduced.

55. Select the CORRECT statement.

### [NEET (Odisha) 2019]

[NEET (Odisha) 2019]

(1) Expiration occurs due to external intercostal muscles

(2) Intrapulmonary pressure is lower than the atmospheric pressure during inspiration

- (3) Inspiration occurs when atmospheric pressure is less than intrapulmonary pressure
- (4) Expiration is initiated due to contraction of diaphragm
- (2)

Statement (2) is Correct as intrapulmonary pressure is lower than the atmospheric pressure During inspiration. Other statements can be Corrected as

- (1) Inspiration occurs due to external intercoastal muscles.
- (2) Inspiration occurs when atmospheric pressure is more than intrapulmonary pressure.
- (3) Inspiration is initiated due to contraction of diaphragm.
- 56. The maximum volume of air a person can breathe in after a forced expiration is known as
  - (1) expiratory capacity(3) inspiratory capacity

(2) vital capacity

(3) inspiratory capacity(2)

(4) total lung capacity

Vital Capacity (VC) is the maximum Volume of air a person can breathe in after a forced expiration. This includes ERV, TV and IRV or the maximum volume of air a person can



breathe out after a forced inspiration.

- 57. Tidal Volume and Expiratory Reserve Volume of an athlete is 500 mL and 1000 mL, respectively. What will be his Expiratory Capacity if the Residual Volume is 1200 mL? [NEET (National) 2019] (3) 2700 mL (1) 1700 mL (2) 2200 mL (4) 1500 mL (4) The Expiratory Capacity of athlete will be 1500 mL. It can be calculated as Given, Tidal Volume (TV)= 500 mL Expiratory Reserve Volume(ERV)=1000 mL Expiratory Capacity = TV+ERV = 500 + 1000 = 1500 mL58. Select the correct events that occur during inspiration. [NEET (Sep.) 2020] I. Contraction of diaphragm. II. Contraction of external inter-costal muscles. III. Pulmonary volume decreases. IV. Intra pulmonary pressure increases.
  - (1) II and IV (2) I, II and IV (3) Only IV (4) I and II (4)
  - Statement I and II are correct as during inspiration, the contraction of diaphragm occurs which pulls it downward, while the external intercostal muscles contract and lifts up the ribs and sternum. This increases the size of the thoracic cavity and decreases the pressure inside. As a result, air rushes in and fills the lungs. Statement III and IV are incorrect because during inspiration, the volume of the thoracic cavity increases. This causes a similar increase in pulmonary volume. An increase in pulmonary Volume decreases the intrapulmonary pressure to less than the atmospheric pressure which forces the air from Outside to move into the lungs.



- 59. The Total Lung Capacity (TLC) is the total volume of air accommodated in the lungs at the end of a forced inspiration. This includes [NEET (Oct.) 2020]
  - (1) RV, IC (Inspiratory Capacity), EC Expiratory Capacity) and ERV
  - (2) RV, ERV, IC and EC
  - (3) RV, ERV, VC(Vital Capacity) and FRC (Functional Residual Capacity)
  - (4) RV (Residual Volume), ERV(Expiratory Reserve Volume), TV(Tidal Volume)
  - and IRV (Inspiratory Reserve Volume)

(4)

The Total Lung Capacity(TLC) is the total volume of air accommodated in the lungs at the end of a forced inspiration. This includes Residual Volume (RV), Expiratory Reserve Volume (ERV), Tidal Volume(TV) and Inspiratory Reserve Volume (IRV). TLC is also equals to vital



capacity Of residual volume. Thus, option(d)is Correct.

60. Match the following columns and select the correct option from the codes given below.
[NEET (Oct.) 2020]

	Column I		Column II
A.	Pneumotaxic centre	1.	Alveoli
B.	O <sub>2</sub> dissociation curve	2.	Pons region of brain
C.	Carbonic anhydrase	3.	Haemoglobin
D.	Primary site of	4.	RBC
	exchange of gases		

	Α	В	С	D
(1)	1	3	2	4
(2)	2	3	4	1
(3)	3	2	4	1
(4)	4	1	3	2

(2)

Option (2) is correct match, which is as follows. Pneumotaxic centre is present in the pons region of the brain.  $O_2$ , dissociation curve is useful in studying the effect of factors like pCO<sub>2</sub>, H<sup>+</sup> concentration, etc., on binding of O<sub>2</sub>, with haemoglobin. Carbonic anhydrase is an enzyme present on the surface of RBC. Primary site of exchange of gases is the alveoli of the lungs.

61. Identify the wrong statement with reference to transport of oxygen.

### [NEET (Sep.) 2020]

(1) Partial pressure of  $CO_2$  can interfere with  $O_2$  binding with haemoglobin

(2) Higher H<sup>+</sup> concentration in alveoli favours the formation of oxyhaemoglobin

(3) Low  $pCO_2$ , in alveoli favours the formation of oxyhaemoglobin

(4) Binding of oxygen with haemoglobin is mainly related to partial pressure of  $O_2$  (2)

Statement in option (2) is incorrect with reference to transport of oxygen. It can be corrected as In alveoli high  $pO_2$ , low  $pCO_2$ , . low  $H^+$  Concentration and lower temperature are the factors that favour the formation of oxyhaemoglobin.

62. **Assertion** (A) A person goes to high altitude and experiences 'altitude sickness' with symptoms like breathing difficulty and heart palpitations.

**Reason** (**R**) Due to low atmospheric pressure at high altitude, the body does not get sufficient oxygen.

In the light of the above statements, choose the correct answer from the options given below.

[NEET 2021]

- (1) Both A and R are true and R is the correct explanation of A
- (2) Both A and Rare true, but R is not the Correct explanation of A
- (3) A is true, but R is false
- (4) A is false, butR is true
- (1)



Both A and R are true and R is the correct explanation of A. A person goes to the high altitude And experiences altitude sickness like heavy breathing and heart palpitation. It is due to low atmospheric pressure at high altitude, the body does not get sufficient oxygen.

63. Select the favourable conditions required for the formation of oxyhaemoglobin at the alveoli. [NEET 2021]

(1) High pO<sub>2</sub>, low pCO<sub>2</sub>, less H<sup>+</sup>, lower temperature

(2) Low  $pO_2$ , high  $pCO_2$ , more  $H^+$ , higher temperature

(3) High  $pO_2$ , high  $pCO_2$ , less H<sup>+</sup>, higher temperature

(4) Low  $pO_2$ , low  $pCO_2$ , more  $H^+$ , higher temperature

(1)

The favourable conditions for the formation of oxyhaemoglobin is high  $pO_2$  lesser H<sup>+</sup> concentration and lower temperature found in alveoli, whereas low PO<sub>2</sub>, high H' concentration and high temperature are favourable for dissociation of oxygen from the Oxyhaemoglobin found in tissues.

64. The partial pressures (in mm Hg) of Oxygen (0<sub>2</sub>) and carbon dioxide (CO<sub>2</sub>) at alveoli (the site of diffusion) are **[NEET 2021]** 

(1)  $pO_2 = 104$  and  $pCO_2 = 40$ 

(2)  $pO_2 = 40$  and  $pCO_2 = 45$ 

(3)  $pO_2 = 95$  and  $pCO_2 = 40$ 

(2)  $pO_2 = 40$  and  $pCO_2 = 43$ (4)  $pO_2 = 159$  and  $pCO_2 = 0.3$ 

(1)

Partial pressures of oxygen (in mm Hg) and carbon dioxide at alveoli are  $pO_2$ , 104 and  $pCO_2 = 40$ .

	Atmos- pheric air		Blood (deoxy genated)	Blood (oxyge nated)	Tissue
02	159	104	40	95	40
CO <sub>2</sub>	0.3	40	45	40	45

- 65. Under normal physiological conditions in human being every 100 ml of oxygenated blood can deliver \_\_\_\_\_ml of O<sub>2</sub> to the tissues [NEET 2022]
  (1) 5 ml (2) 4 ml (3) 10 ml (4) 2 ml 5 ml of O<sub>2</sub> is delivered by 100ml of oxygenated blood to the tissues under normal physiological conditions.
- **66.** Which of the following is not the function of conducting part of respiratory system?
  - (1) Inhaled air is humidified

[NEET 2022]

[NEET 2023]

- (2) Temperature of inhaled air is brought to body temperature
- (3) Provides surface for diffusion of  $O_2$  and  $CO_2$
- (4) It clears inhaled air from foreign particles

The conducting part of respiratory system is to keep the inhaled air warm, moist and filtered

67. Vital capacity of lung is [NI (1) IRV+ERV+TV+RV (2) IRV+ERV+TV-RV(3) IRV+ERV+TV (4) IRV+ERVNCERT, Page no. 272; 4<sup>th</sup> paragraph 'Vital capacity'