

1. Which of the following has the lowest pressure?
 - a. the aorta at the end of systole
 - b. the aorta at the end of diastole
 - c. a coronary artery at any time during the cardiac cycle
 - d. the pulmonary trunk at the end of systole
 - e. the pulmonary trunk at the end of diastole**

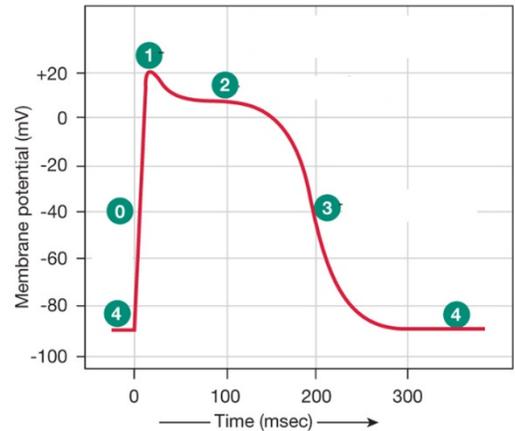
2. Which of the following is TRUE about papillary muscles?
 - a. are the last part of the heart to contract during systole
 - b. are located in the atria
 - c. their contraction prevents stenosis of the semilunar valves
 - d. their contraction prevents prolapse of the AV valves**
 - e. their contraction causes the AV valves to close

3. Which of the following causes the second heart sound at the beginning of diastole?
 - a. turbulent blood flow through the AV valves
 - b. opening of the AV valves
 - c. closing of the AV valves
 - d. closing of the pulmonary and aortic valves**
 - e. turbulent blood flow through the pulmonary and aortic valves

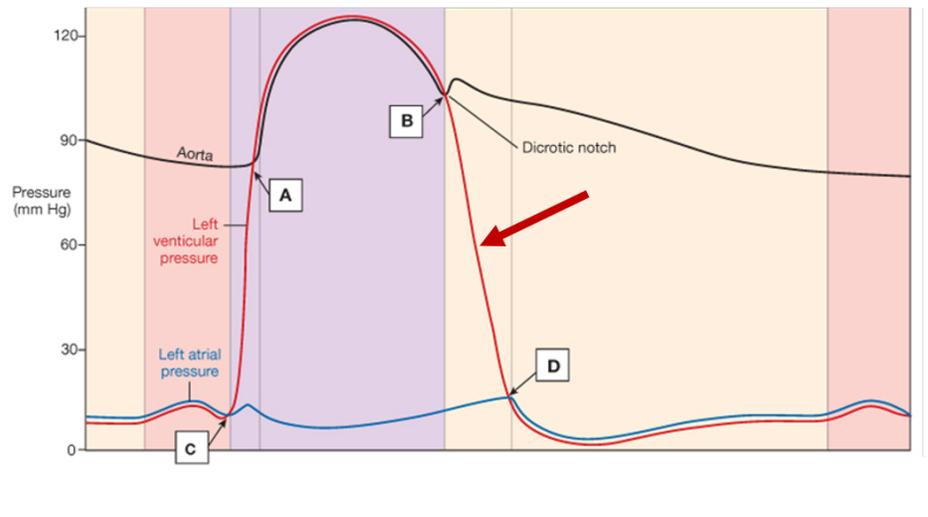
4. In the SA node, what type of ion channel is responsible for repolarization (returning to a negative membrane potential)?
 - a. “funny” channel that opens in response to hyperpolarization
 - b. voltage-gated K⁺ channel**
 - c. voltage-gated Na⁺ channel
 - d. voltage-gated Ca⁺⁺ channel
 - e. ligand-gated K⁺ channel

5. What prevents contractile cells from firing action potentials in rapid succession, allowing the heart time to relax between contractions so that it can pump?
 - a. inhibition by parasympathetic nerve fibers
 - b. long refractory period**
 - c. intercalated discs
 - d. fibrous connective tissue of the cardiac skeleton

6. Refer to the figure at right, showing the action potential in a cardiac muscle cell. Which phase corresponds to the time when voltage-gated Ca^{++} channels are open?
- phase 0
 - phase 1
 - phase 2**
 - phase 3
 - phase 4



7. Refer to the figure at right. Which letter indicates the time when the left AV (mitral valve) closes after being open?
- A
 - B
 - C**
 - D



8. Refer to the figure above. Which of the following best explains the rapid change in pressure indicated by the arrow?
- all the valves are closed**
 - all the valves are open
 - the ventricles are contracting
 - the atria are contracting
 - heart muscle is being activated by the sympathetic nervous system
9. Heart failure
- is a term that is used to mean cardiac arrest.
 - can occur when the ventricles don't fill properly.**
 - usually leads to decreased extracellular fluid volume.
 - can result from an abnormally high cardiac output.
 - is associated with decreased peripheral resistance

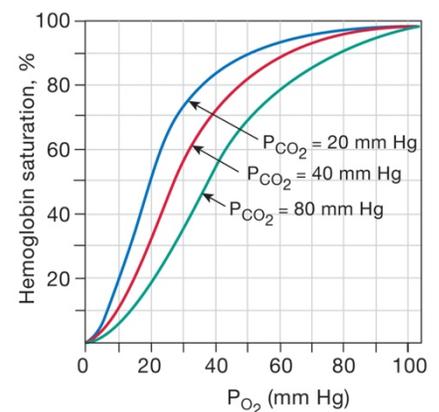
10. What is the effect of norepinephrine at the SA node?
- increases K^+ permeability
 - causes a longer opening time for I_f ("funny") channels to speed depolarization**
 - makes the pacemaker potential take longer to get to threshold
 - hyperpolarizes pacemaker cells
 - decreases contractility
11. Fill in the blank. According to the Frank-Starling law of the heart, stroke volume is increased by increasing the _____.
- afterload
 - peripheral resistance
 - heart rate
 - end-systolic volume
 - end-diastolic volume**
12. Which of the following causes constriction of the veins to preserve blood pressure following a hemorrhage?
- increased activity of the sympathetic nervous system**
 - decreased activity of the parasympathetic nervous system
 - nitric oxide
 - acetylcholine
 - increased compliance of the veins
13. Which of the following is responsible for short term regulation of the mean arterial pressure?
- Frank-Starling law of the heart
 - baroreceptor reflex**
 - kidney regulation of ECF osmolarity
 - increased ventilation
14. Heart failure causes decreased blood flow to the kidneys, resulting in which of the following pathological changes?
- low ECF osmolarity
 - dilation of arterioles and decrease in peripheral resistance
 - edema (fluid accumulation in the tissues)**
 - decreased formation of angiotensin II
 - orthostatic hypotension

15. Which of the following is a treatment for hypertension?
- a. angiotensin II agonist
 - b. drug that increases urine volume by inhibiting Na⁺ reabsorption**
 - c. muscarinic agonist
 - d. muscarinic antagonist
 - e. beta adrenergic agonist
16. What type of protein is defective in cystic fibrosis?
- a. chloride channel**
 - b. glucose transporter
 - c. mucus protein
 - d. neurotransmitter receptor
 - e. cilia protein
17. Which of the following is a role of the Type II alveolar cells?
- a. form the delicate gas exchange barrier
 - b. produce the connective tissue framework of the lungs
 - c. secrete mucus in the airways
 - d. protect against pathogens
 - e. secrete surfactant**
18. What is the key problem in asthma?
- a. increased compliance of the lung
 - b. increased connective tissue surrounding the alveoli
 - c. hyperresponsiveness of airways causing increased airway resistance**
 - d. deficient secretion by submucosal glands
 - e. fluid accumulation in the alveoli
19. Which of the following is responsible for inhalation during quiet breathing?
- a. internal intercostals
 - b. abdominal muscles
 - c. diaphragm**
 - d. elastic recoil of the lungs
 - e. relaxation of airway smooth muscle

20. Which of the following is a characteristic seen in chronic obstructive pulmonary disease (COPD)?
- compliance of the lungs is too high
 - reduced FEV₁/FVC ratio in spirometry testing
 - decreased alveolar ventilation
 - destruction of alveoli so that there is decreased surface area available for gas exchange
 - ALL of the above are characteristics seen in COPD.**
21. Which of the following is TRUE about surfactant?
- Surfactant contains amphipathic molecules that collect at the air-water interface.**
 - Surfactant increases surface tension in the fluid lining the alveoli.
 - Excess surfactant causes restrictive lung disease.
 - Surfactant is the substance that causes the pleural membranes to stick together.
 - Surfactant decreases the compliance of the lungs.
22. Efficient amounts of oxygen are transported in the blood because
- oxygen has a high solubility in plasma.
 - oxygen reacts with water to form bicarbonate.
 - oxygen binds to plasma proteins.
 - oxygen binds to hemoglobin.**
23. Which of the following reduces the partial pressure of oxygen in alveoli?
- breathing air at high altitude**
 - hyperventilation
 - iron deficiency
 - anemia
 - metabolic acidosis

24. **Refer to the graph.** Given that CO₂ is produced by metabolism, the effect of PCO₂ depicted means that
- pH increases in metabolically active tissues.
 - there is increased dissociation of O₂ from hemoglobin in metabolically active tissues.**
 - there is increased binding of O₂ to hemoglobin in metabolically active tissues.
 - PCO₂ decreases when hemoglobin is saturated.
 - PCO₂ increases when hemoglobin is saturated.

(e) Effect of P_{CO₂}



25. What is the neurotransmitter released by neurons that stimulate contraction of respiratory muscles?
- dopamine
 - GABA
 - norepinephrine
 - acetylcholine**
 - glutamate
26. Which of the following is monitored by central chemoreceptors?
- arterial PCO₂**
 - arterial PO₂
 - arterial pH
27. Which of the following is most likely to double the rate of ventilation?
- arterial PCO₂ decreases from 40 to 35 mm Hg
 - arterial PO₂ increases from 90 to 100 mm Hg
 - arterial PO₂ decreases from 100 to 90 mm Hg
 - pH increases from 7.42 to 7.44
 - arterial PCO₂ increases from 40 to 45 mm Hg**
28. Which of the following factors most directly stimulates hyperventilation during strenuous exercise?
- decrease in arterial PO₂
 - decrease in arterial PCO₂
 - increased lactate in the circulation
 - increased [H⁺] in the circulation**
 - increased [HCO₃⁻] in the circulation
29. During strenuous exercise
- increased ventilation leads to metabolic acidosis.
 - increased anaerobic metabolism leads to metabolic acidosis.**
 - increased ventilation leads to respiratory acidosis.
30. Active hyperemia is responsible for
- increasing ventilation to keep pace with the body's needs during moderate exercise.
 - stimulating hyperventilation during strenuous exercise.
 - increasing peripheral resistance during exercise.
 - increasing blood flow to skeletal muscles during exercise.**
 - increasing contractility in the heart.