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Course Name: [The Health Consequences of Smoking-34 Nursing Contact Hours](#)

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Test Questions

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CHAPTER 1: Introduction, Summary, and Conclusions

1. How many levels of hierarchy for classifying the strength of causal inferences from available evidence are introduced in the report?
 - A. One
 - B. Two
 - C. Three
 - D. Four
2. Which of the following health consequences causally linked to smoking?
 - A. Cancers
 - B. Chronic diseases
 - C. Ectopic Pregnancies
 - D. All of the above
3. On the basis of more than 7,000 articles in the biomedical literature relating to smoking and disease that were available at the time, the Advisory Committee concluded that cigarette smoking is associated with ____ higher all-cause mortality rates among men.
 - A. 70%
 - B. 60%
 - C. 50%
 - D. 40%

CHAPTER 2: Fifty Years of Change 1964–2014

4. Beginning as early as the 1920s, the rise of _____ prompted epidemiologic research on its causes that was carried out in the United States and Europe.
 - A. Thyroid cancer
 - B. Brain tumor
 - C. Breast cancer
 - D. Lung cancer
5. Tobacco smoke contains more than 7,000 chemicals, and at least 69 of these can cause cancer.
 - A. 700
 - B. 7,000
 - C. 500
 - D. 300

CHAPTER THREE: Producing the Surgeon General's Report From 1964–2014: Process and Purpose

6. Which of the following year did the first official report of the federal government on smoking and health published?
 - A. 1964
 - B. 1967
 - C. 1968
 - D. 1969
7. In _____ the health consequences of smoking report found that "Maternal smoking during pregnancy exerts a retarding influence on fetal growth"
 - A. 1971
 - B. 1972
 - C. 1973

D.1974

8. In 1974 the tenth anniversary report reviewed evidence on association between smoking and atherosclerotic brain infarction and on synergistic effect of smoking and asbestos exposure in causing _____.

- A. Thyroid cancer
- B. Brain tumor
- C. Breast cancer
- D. Lung cancer

9. A Special report of advisory committee appointed by the Surgeon General to study the health consequences of smokeless tobacco concluded that the use of smokeless tobacco can cause cancer in humans and can lead to _____addiction.

- A. Alcohol
- B. nicotine
- C. Painkillers
- D. Marijuana

10. In year 2000, the first report to offer a composite review of the various methods used to reduce and prevent tobacco use. This report evaluated which of the following approaches to reducing tobacco use?

- A. educational and clinical
- B. regulatory and economic
- C. comprehensive
- D. All of the above

11. In year _____, concluded that the increased likelihood of lung cancer, cardiovascular disease, and reproductive health problems among female smokers make tobacco use a serious women's health issue.

- A. 2000
- B. 2001
- C. 2004
- D. 2006

12. In 2004, the study concluded that smoking causes diseases in nearly every organ of the body and causally linked to which of the following?

- A. leukemia and cataracts
- B. pneumonia
- C. Cancers of the cervix, kidney, pancreas, and stomach
- D. linked to all of the above

13. In 1994, the report addressed the crucial problems of _____tobacco use by providing a detailed look at the time of life when most tobacco users begin, develop, and establish their smoking behavior.

- A. Adult males
- B. Seniors
- C. Adult females
- D. adolescent

14. Which of the following year updated the 1994 report on youth and described the epidemic of tobacco use among youth 12–17 years of age and young adults 18–25 years of age, including the epidemiology, causes, and health effects of this tobacco use and interventions proven to prevent it?

- A. 2011
- B. 2012
- C. 2013
- D. 2014

CHAPTER FOUR: Advances in Knowledge of the Health Consequences of Smoking: From 1964–2014

15. The 50-year span beginning in 1964 and ending in 2014 covers an era of remarkable advances in the under-standing of disease etiology and opportunities for which of the following?

- A. The pre-vention
- B. Diagnosis
- C. Treatment of disease.
- D. All of the above

16. According to figure 4.3 in the report, which of the following cancers have high mortality rates among men in the United States, 1930–2008a?

- A. Colon and rectum
- B. Prostate
- C. Lung and bronchus
- D. Pancreas

17. The involuntary inhalation of tobacco smoke by nonsmokers has been referred to in the Surgeon General's reports as:

- A. involuntary smoking
- B. passive smoking
- C. Both A and B
- D. None of the above

18. The 2001 report, *Women and Smoking*, had considered the relationship between exposure to secondhand smoke and _____, and that topic was discussed in the 2006 report as well.

- A. breast cancer
- B. uterine cancer
- C. endometrial cancer
- D. thyroid cancer

19. According to the Conclusion(s) from the 2006 Surgeon General's report, "The evidence is sufficient to infer a causal relationship between maternal exposure to _____ during pregnancy and a small reduction in birth weight."

- A. secondhand smoke
- B. pollution
- C. radiation
- D. alcohol

20. Which of the following year concludes "Cigarette smoking is associated with a 70 percent increase in the age specific death rates of males, and to a lesser extent with increased death rates of females? The total number of excess deaths causally related to cigarette smoking in the U.S. population cannot be accurately estimated. In view of the continuing and mounting evidence from many sources, it is the judgment of the Committee that cigarette smoking contributes substantially to mortality from certain specific diseases and to the overall death rate."?

- A. 1964
- B. 1967
- C. 1968
- D. 1978

21. Which of the following year concludes that "Cigarette smokers have substantially higher rates of death and disability than their nonsmoking counterparts in the population? This means that cigarette smokers tend to die at earlier ages and experience more days of disability than comparable nonsmokers.

- A. 1964
- B. 1967
- C. 1968
- D. 1978

22. Which of the following year concluded that overall mortality ratios are higher for those who initiated their cigarette smoking at younger ages compared to those who began smoking later?

- A. 1964
- B. 1967
- C. 1968
- D. 1979

23. According to 1980 conclusion, the mortality ratio for women who smoke cigarettes is about _____.

- A. 1.2 or 1.3
- B. 2.2 or 2.3
- C. 3.2 or 3.3
- D. 4.2 or 4.3

24. Which of the following year concluded that "Smoking is responsible for more than one of every six deaths in the United States? Smoking remains the single most important preventable cause of death in our society."

- A. 1980
- B. 1989
- C. 2001
- D. 2004

25. Which of the following year concluded that "There have been more than 12 million premature deaths attributable to smoking since the first published Surgeon General's report on smoking and health in 1964? Smoking remains the leading preventable cause of premature death in the United States."?

- A. 2001
- B. 2004
- C. 2006
- D. 2007

26. According to 2006 report, secondhand smoke does not cause premature death and disease in children and in adults who do not smoke.

- A. TRUE
- B. FALSE

27. According to the report, Women who smoke cigarettes during pregnancy tend to have babies of which type of following birth weight?

- A. higher
- B. lower
- C. normal
- D. smoking does not affect birth weight

CHAPTER FIVE: Nicotine

28. The 1988 Surgeon General's report, The Health Consequences of Smoking: Nicotine Addiction, concluded that cigarettes and tobacco products are addicting and that "Nicotine is the drug in tobacco that causes addiction"

- A. TRUE
- B. FALSE

29. Which of the following increases the potential for nicotine addiction?

- A. the dose delivery rate
- B. the rate of absorption
- C. the attained concentration of nicotine
- D. All of the above increases the risk for nicotine addiction

30. According to the report, more than _____ of nicotine absorbed into the body undergoes metabolism in the liver, principally by CYP2A6, UDP-glucuronosyltransferase, and flavin-containing monooxygenase.

- A. 60%
- B. 70%
- C. 80%
- D. 90%

31. The lag time between puffs on a cigarette until nicotine reaches the brain is _____ seconds.

- A. 20-25
- B. 10-20
- C. 5-10
- D. 25-30

32. Nicotine in tobacco smoke inhaled into the lung is rapidly absorbed because of the _____ of the alveoli and small airways and the dissolution of nicotine in the fluid coating the lung's epithelial layer, which has a physiological pH that facilitates absorption.

- A. large surface area
- B. small surface area
- C. size

D. shape

33. Acute toxicologic data on nicotine is limited. Such information comes from which of the following sources?

- A. animal studies
- B. studies investigating nicotine as a therapeutic agent (including NRT)
- C. poisonings involving nicotine
- D. All of the above

34. Although the nicotine intoxication syndrome is not fully characterized, symptoms of mild acute toxicity might include nausea and vomiting, progressing with increased exposure to cholinergic syndrome, which includes what?

- A. diarrhea
- B. increased salivation and respiratory secretions
- C. bradycardia
- D. all of the above

35. Dependence on nicotine is characterized by which of the following?

- A. the persistence of a drug-taking behavior
- B. the emergence of withdrawal symptoms upon the abrupt cessation of nicotine administration
- C. Sex of the person
- D. Both A & B

36. Nicotine is a highly _____ compound with effects ranging from being a natural pesticide in tobacco leaves that causes addiction in tobacco users.

- A. ionic
- B. bioactive
- C. binary
- D. covalent

37. The 2004 Surgeon General's report concluded that "the evidence is sufficient to infer a causal relationship between maternal smoking during pregnancy and a reduction of _____ function in infants"

- A. lung
- B. liver
- C. kidney
- D. heart

38. The evidence supports the hypothesis that nicotine plays a key role in mediating adverse effects of smoking on which of the following?

- A. reproductive health,
- B. preterm delivery
- C. stillbirth
- D. All of the above

39. Researchers have suggested that smoking may have cognition-enhancing properties, such as:

- A. improvements in sustained attention,
- B. reaction time
- C. memory
- D. All of the above

40. In adults, the _____ effects of nicotine withdrawal on cognitive function have been documented in both humans and animals, and the administration of nicotine during withdrawal mitigates cognitive impairment.

- A. positive
- B. negative
- C. neutral
- D. none of the above

41. Tobacco industry documents indicate that the industry funded research for the specific purpose of perpetuating the belief that smoking improves symptoms in _____ patients, advocated for exceptions for smoking in hospitalized psychiatric patients, and funded studies of medicinal uses of nicotine analogs to treat mental illnesses.

- A. schizophrenic
- B. cancer

- C. diabetic
- D. all of the above

42. Evidence of the tobacco industry's interest in the cognitive-enhancing properties of nicotine comes from which of the following year that provides review of publications investigating the effects of tobacco and nicotine on cognitive performance?

- A. 1996
- B. 1997
- C. 1998
- D. 1999

43. The evidence is already sufficient to provide appropriately cautious messages to which of the following populations about the use of nicotine-containing products such as smokeless tobacco and electronic cigarettes, and newer forms of nicotine-containing tobacco products, as alternatives to smoking?

- A. pregnant women
- B. women of reproductive age
- C. adolescents
- D. All of the above

CHAPTER SIX: CANCER

44. In which of the following year tobacco advertising on radio and television was banned in U.S?

- A. 1970
- B. 1980
- C. 1990
- D. 2000

45. People begin to smoke cigarettes at a relatively _____ age, typically have difficulty stopping, and may continue to smoke for decades.

- A. young
- B. middle
- C. old
- D. all of the above

46. Since the 1950s, cigarettes have undergone changes in their design and composition (Hoffmann and Hoffmann 1997; NCI 2001). The most prominent changes have been the addition of _____.

- A. size
- B. thickness
- C. filters
- D. all of the above

47. Which of the following country sells most Cigarettes brands that are made primarily of a blend of air-cured tobaccos?

- A. Australia,
- B. Canada
- C. United Kingdom
- D. United States

48. Low-tar cigarettes reduce risk of lung cancer.

- A. TRUE
- B. FALSE

49. Which of the following type of lung cancer has been increasing in the United States since the 1970s?

- A. Adenocarcinoma
- B. Squamous cell carcinoma
- C. Small cell carcinoma
- D. Large cell carcinoma

50. According to the article, differences in the prevalence of current and former smoking and differences in the distribution of the duration of smoking and the duration of abstinence from smoking vary markedly across birth cohorts and contribute to differences in risks of _____.

- A. lung cancer

- B. liver cancer
- C. brain cancer
- D. esophageal cancer

51. Within birth cohorts, an increasing proportion of smokers come from which of the following population groups?

- A. less education group
- B. lower income group
- C. higher income group
- D. A and B only

52. The flue-cured cigarettes of the type preferred in Australia, Canada, and the United Kingdom have substantially higher levels of tobacco-specific nitrosamines than do U.S.-style blended cigarettes and have higher levels of B[a]P.

- A. TRUE
- B. FALSE

53. In a population, which of the following are the principal determinants of risk for lung cancer?

- A. The prevalence of current smoking
- B. The distribution of the duration of smoking among current and former smokers.
- C. Sex of the smoker
- D. Only A and B

54. According to the report, smokers who shift to cigarette brands with nominally lower machine-measured yields with _____ change their smoking pattern to restore their nicotine delivery to the level needed to sustain their addiction.

- A. size
- B. thickness
- C. ventilated filters
- D. tobacco amount

CHAPTER SEVEN: Respiratory Diseases

55. Smoking has long been linked to adverse effects on the respiratory system, causing which of the following?

- A. malignant and nonmalignant diseases
- B. exacerbating chronic lung diseases
- C. increasing the risk for respiratory infections
- D. All of the above

56. Asthma is the most common chronic disease of childhood and is also very common among adults.

- A. TRUE
- B. FALSE

57. A series of observations during the past decade indicate that women seem to develop more severe _____ at an earlier age, in comparison with men who smoked the same cumulative number of cigarettes.

- A. gastritis
- B. COPD
- C. liver disease
- D. skin cancer

58. Individuals that inherit two severe deficiency variants—most commonly genotype PI ZZ—are at substantially increased risk for early-onset of _____.

- A. gastritis
- B. COPD
- C. liver disease
- D. skin cancer

59. It is possible that genetic determinants of COPD risk may act through genetic effects which may increase _____ addiction or smoking intensity. Additional research will be required to determine whether this addiction is the mechanism that links these genetic loci to COPD susceptibility.

- A. Alcohol
- B. Narcotics
- C. Nicotine
- D. all of the above

60. _____ is defined pathologically as the destruction of alveolar tissue with coalescence and enlargement of airspaces.

- A. Emphysema
- B. Tuberculosis
- C. Pneumothorax
- D. Cold

61. _____ are the main inflammatory cells patrol-ling the normal lung parenchyma and their numbers are greatly expanded with long-term smoking.

- A. Macrophages
- B. Leukocytes
- C. Mast cells
- D. Endothelial cells

62. Cigarette smoke initiates a/an _____ process that later becomes more complex and independent of smoking over time.

- A. fermentation
- B. viral
- C. inflammatory
- D. growth

63. The evolution of which of the following, over the past several decades, has created a robust technology for deriving image-based biomarkers that can be used to both visualize and quantify major COPD subtypes.

- A. MRI
- B. Ultrasound
- C. Chest CT
- D. Nuclear Medicine

64. Asthma is one of the most common chronic respiratory diseases, affecting approximately ____% of the U.S. population.

- A. 1-5
- B. 5-10
- C. 10-15
- D. 15-20

65. The mechanisms by which active smoking could contribute to the causation of asthma include which of the following?

- A. chronic airways inflammation,
- B. impaired mucociliary clearance
- C. impaired growth of the lungs during childhood, and increased bronchial hyperresponsiveness
- D. All of the above

66. The evidence is suggestive but not sufficient to infer a causal relationship between active smoking and the incidence of _____ in adults.

- A. asthma
- B. COPD
- C. cough
- D. cold

CHAPTER TEN: Other Specific Outcomes

67. The evidence is suggestive and sufficient to infer a causal relationship between current and past smoking, especially heavy smoking, with risk of exudative (neovascular) age-related macular degeneration.

- A. TRUE
- B. FALSE

68. In 2009, more than _____billion was spent on dental care in the United States (National Center for Health Statistics 2012), and acute dental conditions resulted in an estimated 1.6 million days of missed school and 2.4 million days of lost work annually.

- A. \$102
- B. \$ 300
- C. \$ 500
- D. None of the above

69. The report concluded that the evidence was sufficient to infer a causal relationship between smoking and _____.

- A. periodontitis
- B. inflammation around the tooth
- C. gum inflammation
- D. all of the above

70. Smoking increases and impairs which of the following mechanisms that have been strongly implicated in the development of insulin resistance and irregularities in glucose metabolism?

- A. Inflammatory markers
- B. Oxidative stress
- C. Endothelial function
- D. All of the above

71. The risk of developing diabetes is _____higher for active smokers than nonsmokers.

- A. 10-20%
- B. 20-30%
- C. 30-40%
- D. 45-50%

72. According to the report, the evidence is sufficient to infer a causal relationship between active smoking and respiratory symptoms in children and adolescents that includes which of the following?

- A. coughing
- B. phlegm
- C. wheezing and dyspnea
- D. All of the above

73. Cigarette smoke is a damaging and proinflammatory complex mixture that can also directly suppress innate and adaptive immune processes making it a highly unusual insult in the context of immunity.

- A. TRUE
- B. FALSE

74. Cigarette smoke disrupts the tight bonds at the adherent junctions between epithelial cells, compromising the integrity of the physical epithelial barrier and leading to _____ alveolar epithelial permeability.

- A. decreased
- B. increased
- C. obstructed
- D. none of the above

75. Smoking compromises airway epithelial host defense by altering the lining fluid, usually by doing which of the following between airway epithelial cells?

- A. Chemical or oxidative inactivation
- B. Paralyzing ciliary beating
- C. Damaging the tight junctions
- D. All of the above

76. _____are centrally important immune initiators, regulators, and effectors.

- A. T cells
- B. Mast cells
- C. Dendritic Cells
- D. NK and NKT Cells

77. Which of the following conclusions can be drawn from the current knowledge about the impact of cigarette smoke on the immune system?

- A. Smoking affects components of the innate and adaptive immune system

- B. Cigarette smoke activates certain facets of the immune system
- C. Cigarette smoke suppresses certain facets of the immune system
- D. All of the above

78. Cigarette smoke impacts several key antiviral host defense mechanisms that likely contribute to _____ risk of respiratory viral infection.

- A. increased
- B. decreased
- C. zero
- D. lower

79. Which of the following bacterial agents compromise bacterial host defense that is associated with an increased risk of infection and with COPD exacerbation?

- A. *S. pneumonia* and *NTHi*
- B. *Moraxella catarrhalis*
- C. *P. aeruginosa* and *M. tuberculosis*
- D. All of the above

80. The ability of _____ to mount an inflammatory attack is counter regulated by regulatory T cells whose activity is diminished by chronic smoking.

- A. lymphocytes
- B. platelets
- C. Thrombocytes
- D. macrophages

81. Smoking cigarettes is a risk factor for developing which of the following autoimmune diseases?

- A. Rheumatoid arthritis and SLE
- B. Multiple sclerosis and Graves' hyperthyroidism
- C. Primary biliary cirrhosis
- D. All of the above

82. The evidence is sufficient to infer that cigarette smoke compromises immune homeostasis and that altered immunity is associated with an/a _____ risk for several disorders with an underlying immune diathesis.

- A. increased
- B. decreased
- C. zero
- D. lower

83. Cigarette smoking has been cited as the most conclusively established _____ risk factor for seropositive RA (rheumatoid arthritis).

- A. psychological
- B. sociological
- C. environmental
- D. None of the above

84. _____ is the hallmark of RA, but its systemic nature is manifested by the involvement of many other organs including skin, eyes, lungs, blood vessels, and bone marrow.

- A. Deforming arthritis
- B. Bursitis
- C. Tendonitis
- D. All of the above

85. The incidence of Crohn's disease in North America ranges between _____ cases per 100,000 compared with 4–10 in Northern Europe, 1–5 in Southern Europe, and 0–4 in Africa, Asia, and Latin America.

- A. 3–10
- B. 5–10
- C. 4–16
- D. 6–20

86. The evidence is suggestive but not sufficient to infer a causal relationship between cigarette smoking and Crohn's disease.

- A. TRUE
- B. FALSE

CHAPTER 12: Smoking-Attributable Morbidity, Mortality, and Economic Costs

87. The average annual SAM for the United States for 2010–2014 (Table 12.15) is at least _____ premature deaths caused by cigarette smoking and exposure to secondhand smoke.

- A. 350,000
- B. 480,000
- C. 550,000
- D. 600,000

88. Evidence indicates that CHD is the underlying cause for approximately _____ of CHF cases and that smoking is a major contributing factor in the atherosclerotic disease process that leads to CHD.

- A. 65%
- B. 70%
- C. 75%
- D. 80%

89. Internationally, it has been estimated that approximately 15% of acute myocardial infarction events could be caused by exposure to secondhand smoke.

- A. TRUE
- B. FALSE

90. Approximately ____ million persons in the United States had an estimated 12.7 million smoking-attributable serious medical conditions in 2000.

- A. 5.6
- B. 6.6
- C. 7.6
- D. 8.6