CEU TEST QUESTIONS
Select the best answer for each question.
Use the answer sheet to record your responses.

Article 1. To See or Not to See: A Question of Clinical Importance

1. Which of the following examinations provides visualization of all stages of swallowing function?
   A. Clinical Swallowing Examination
   B. Fiberoptic Endoscopic Examination of Swallowing
   C. Videofluoroscopic Examination of Swallowing

2. How many research articles have addressed the detection of specific physiologic swallowing problems using the Clinical Swallowing Examination?
   A. 0
   B. 2
   C. 5
   D. 10

3. Which of the following examinations should provide the most information regarding the patient’s natural feeding practices?
   A. Clinical Swallowing Examination
   B. Fiberoptic Endoscopic Examination of Swallowing
   C. Videofluoroscopic Examination of Swallowing

4. Which assessment tool is most likely (though not all the time) to be relied upon in a nursing home?
   A. Clinical Swallowing Examination
   B. Fiberoptic Endoscopic Examination of Swallowing
   C. Videofluoroscopic Examination of Swallowing
5. Research has clearly indicated that the lack of a pharyngeal gag reflex is indicative of dysphagia.
   A. true  
   B. false

Article 2. Pulse Oximetry as an Indicator for Aspiration: The State of the Art

6. The error rate for the pulse oximeter is:
   A. 1%  
   B. 2%  
   C. 3%  
   D. 4%

7. The international standard for a significant fall in SpO2 is:
   A. 2%  
   B. 3%  
   C. 4%  
   D. 5%

8. Dysphagic elderly individuals compared to normal elderly have:
   A. no changes in SpO2 levels  
   B. lower SpO2 levels  
   C. capricious SpO2 levels  
   D. higher SpO2 levels

9. Positioning of patients during feeding can affect SpO2 levels.
   A. true  
   B. false

10. Pulse oximetry is a reliable and valid indicator of aspiration.
    A. true  
    B. false
Article 3. The Utility of Cervical Auscultation in the Evaluation of Dysphagia

11. Screening tools for dysphagia serve which of the following functions?
   A. detection of a disorder
   B. identification of the underlying cause of the disorder
   C. triage
   D. both A and C

12. Which best describes the status of the two forms of auscultation?
   A. They are both screening tools.
   B. Neither is a screening tool.
   C. They are both evaluation tools.
   D. Neither is an evaluation tool.

13. The Littmann Cardiology II stethoscope was shown to be superior. The author of this article recommends that the:
   A. diaphragm be used for high frequencies only
   B. bell be used for low frequencies only
   C. bell be used for both high and low frequencies
   D. diaphragm be used for both high and low frequencies

14. Which of the following is true of a test regarding the detection of aspiration?
   A. A high sensitivity values means it is useful in detecting aspirators.
   B. A high specificity value means it is useful in detecting non-aspirators.
   C. A high specificity value means it is useful in detecting aspirators.
   D. both A and B

15. When assessing the sounds of the swallow with signal processing instrumentation a second peak has been identified in the signature of the swallow. It has been postulated that it is caused by:
   A. movement of the epiglottis and closure of the glottis
   B. the fluid pressure wave as the bolus enters the esophagus
   C. a combination of hyoid elevation and velopharyngeal closure
   D. the flow of the bolus through the pharynx
Article 4. Pediatric Feeding and Swallowing: Clinical Examination and Evaluation

16. The best source of information regarding an infant’s feeding and swallowing function is the infant’s:
   
   A. pediatrician
   B. primary caregiver/parents
   C. medical record

17. An instrumental assessment of swallowing is generally recommended if the child exhibits signs of:

   A. oral sensory and oral motor problems
   B. gastrointestinal problems
   C. pharyngeal sensory and/or motility problems

18. Respiration may be negatively affected by:

   A. oral motor and oral sensory issues only
   B. gastrointestinal issues only
   C. oral, pharyngeal, and gastrointestinal issues

19. Gastroesophageal reflux:

   A. may affect respiration and the airway
   B. is always observable
   C. contributes to constipation

20. Growth and development:

   A. is an underlying process which affects all aspects of feeding and swallowing
   B. only affects oral and pharyngeal issues
   C. only affects oral, pharyngeal, and gastrointestinal issues