Breathing Cycle Lab: Focus on Respiratory Gases Analysis

- 1. What system does the respiratory system function closely with in order to maintain homeostasis?
- 2. Where in the lungs does gas exchange take place?
- 3. Explain each of the following steps involved in respiration:
 - a. Ventilation:

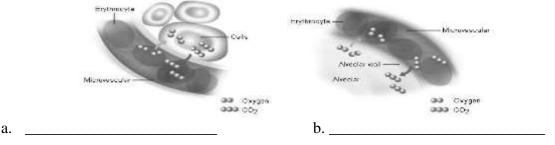
c. Transportation:

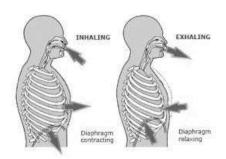
b. External respiration:

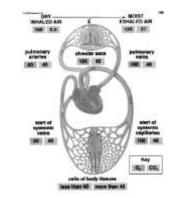
- d. Internal respiration:
- 4. What causes oxygen to move from the alveoli into the blood and carbon dioxide to move from the blood into the alveoli?
- 5. What causes oxygen to leave the arterioles and enter cells and carbon dioxide to leave cells and enter the arterioles?
- 6. How would you define gas exchange?
- 7. What protein on red blood cells delivers oxygen throughout the body?
- 8. Name the three ways CO₂ is transported throughout the body

a. b. c.

9. Identify the step of the breathing cycle represented by each picture using the following words: external respiration, internal respiration, transportation, ventilation.



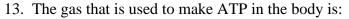


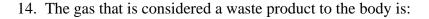


d.

- 10. On the image right:
 - a. Label the alveolus.
 - b. Label the capillary.
 - c. Color the deoxygenated blood cells blue.
 - d. Color the oxygenated blood cells red.
 - e. Label an arrow that shows the flow of CO₂.
 - f. Label an arrow that shows the flow of O_2 .
- 11. Select the best title for this diagram?
 - a. Ventilation
 - b. External Respiration
 - c. Transportation
 - d. Internal Respiration
- 12. The exchange of gases is occurring because of differences in .







- 15. The gas that is most responsible for stimulating increases and decreases in the breathing cycle is:
- 16. What causes diffusion of gases between the alveoli and the blood?
- 17. Increases in activity will increase respiration rate. Why?
- 18. Hyperventilating will decrease respiration rate. Why?
- 19. Some patients with severe emphysema have constant high levels of CO₂ because of inadequate ventilation. The central nervous system breathing center in these patients becomes insensitive to CO₂ and more dependent on the level of O₂, which is low. These patients are said to have "oxygendependent respiratory drive". What might happen if you give such a person high levels of supplemental O₂?

