NITROX 2 TEST QUESTIONS

1) The term EANx means (in English & German)….?
2) Nitrogen is an active gas that causes blistering when the zero time is exceeded. Right or wrong?
3) The term “satiation” refers to….?
4) I’m order to increase safety, to which gas should the present portion of rare and noble gases be added by rounding up (%)?
5) What are the other terms for nitrox 36 and nitrox 32?
6) The advantages of EANX are…….
7) The most known and common ENAx mixtures are…….
8) The term inert gas poisoning refers to…..
9) The critical partial pressure of oxygen at diving is…..
10) How much % oxygen contains a gnomonical inhaled mixture?
11) The best mixture for a dive at a depth of 30 meter is……
12) What is the EAD for a planned dive at the depth 25 meter with the use of Nitrox 1 and what would mean the term EAD in German language?
13) The own equipment (controller, BCD without diving bottle) should be made Oxygen – fit when Nitro 1 or Nitrox 2 are used. Right or wrong?
14) When/how often should be the oxygen analysis equipment calibrated?
15) Which factors increase the danger of deco-illness?
16) How/by means of what the CNS/Oxygen clock can be supervised?
17) By which ranges (Oxygen pressure) begin the O2 danger area (normal life-supporting breath)?
18) The M.O.D (Maximal Operation Depth) of air for normal risk/load is……
19) The M.O.D of ENAx 36% O2 for normal risk is….
20) What kind of Oxygen poisoning is caused by short breath and Oxygen pressure?
21) The recommended value of the maximum oxygen-partial pressure is ….
22) The maximum oxygen-partial pressure for UW easy work is…..
23) Bühlmann table: Nitrox 36. Which R.G. , deco-time/level are resulted by a dive at the depth of 30 meter/38 minutes?
24) The signs of oxygen poisoning in the sequence beginning from weak signs up to the strong ones (about).
25) What to do in case of oxygen poisoning?

26) What to do in deco-accident is there a difference here in the use of nitrox as inhaled gas at diving instead of oxygen?

27) Since when would be dived with Nitrox?

28) The use possibilities of EANX are……

29) The NOAA load limits & CNS % for 1,5 bar O2 are…..

30) The three “D’s” and their meaning……

31) An unhindered Oxygen can be supplied by a therapy of deco-illness. Right or wrong (explanation).

32) After long deep dive you are using 80th mixture as deco – gas (up which depth?). Is it convenient to us over it a pure Oxygen, or this will drive the OUT’s as far as away upward?

33) Oxygen cramps appear in deco – treatment and the diver becomes unconscious. Is this situation highly dangerous and what should be done?

34) Explain three procedures in which Nitrox can be filled in large steps?

35) How can I make Oxygen - pure bottle?

NITROX 2 TEST ANSWERS

1.) Enriched Air Nitrox.

2.) Wrong. Nitrogen is an inert gas. Blistering can just happen by pressure decrease.

3.) When more gas can be taken up than to be held (for example; through pressure reduction)/ Nitrogen - or when the body can consume the gas normally/Oxygen.

4.) Exactly Nitrogen 78,10 %, Oxygen 20,93%, Carbon Dioxide 0,03%, Argon 0,9325%, Hydrogen 0,01%, Neon 0,0018%, Helium 0,0005%, Krypton 0,0003%, Xenon 0,00004%.

Rounded up to: 79% N2+21% O2.

5.) EANx 32 or Nitrox 1, EANx 36 or Nitrox 2.

6.) Extends the zero-time. Reduces: deco –time, Nitrogen portion in the body, depth intoxication, the danger of deco illness, surface interval, and exhaustion after diving (there is here no medical proves).

7.) Nitrox 32 and Nitrox 36.

8.) Nitrogen.

9.) Up 1,6 bar.

10.) 21%.

11.) 35% O2 (1,4 bar) – or also up to 40% O2 (1,6 bar).

12.) EAD 20 = has the same meaning of 20 meter depth with normal air as inhaled gas.

13.) Wrong!

14.) Before each measurement and at least before each new use after deactivation.

15.) Wrong and hasty breathing, under cooling, stress, exhaustion, dehydration (lack of water), dives beyond the zero – time limit, effort (work) UW.

16.) Oxygen, partial pressure and diving time can be compared with the help of NOAA.

17.) Up 16% (0,16 bar) or less and/or up 50%(0,50 bar) and more.

18.) 66 meter diving depth (=max.!).

19.) 34 meter diving depth (=max.!).

20.) CNS.

21.) 1,4 bar PPO2.

22.) 1,4 bar PPO2 according to NOAA.

23.) 8 min. in 3 meter deco – stop, RG = F.

24.) Visual disturbances, irritation, breathing troubles, ears whistle, muscle – twitch especially in mouth and lips, nausea, swindle – uncoordination, strong cramps.....

25.) As long as there are no cramps the diver should descend as soon as it is allowed/safe. When the cramps begin, the diver should secure the mouth piece until cramps fade away. Then he should stretch over his head from the partner and descend slowly. Then to control the escape of the air from the lungs or if possible to press it out of the chest.
26.) No difference. To be treated normally. (for example; to administer Oxygen).
27.) 1879 Henry Fleuss.
28.) Inhaled gas for longer diivng time, inhaled gas during the decompression for shorter deco - times, gas therapy against bent in medical range.
29.) 120 minutes individual dive, 180 maximum day dive.
30.) Depth (max. PPO2?), duration (CNS load?), decompression (security stop or deco stop).
31.) Wrong. Also here partial oxygen phenomena can be developed and that's why the Oxygen artificial breathing should be partially interrupted.
32.) 10 m. at the earliest. Mostly, it is not convenient to breathe pure Oxygen because the gained time is very short, and there is a high risk of breathing too much Oxygen.
33.) Not dangerous because at land no one can be drowning if the controller is lost. Wait until the patient is conscious – he has enough Oxygen in his organism so that the damages caused by lack of Oxygen are not expected at all.
34.) Over-flow proceeding, partial pressure methods, molecular filter (to explain schematically).
35.) Empty it, degust it (sand-radiate), make it fet-free (Acetone or industrial cleaners that do not leave any residues and are suitable as food). Divide the vents and Acetone or US or industrial cleaner. Change suitable sits and sea ling's rings (Vinton), do not use fet.

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