1. Penicillins, cephalosporins, carbapenems, monobactems, carbacephems, and glycopeptides affect bacteria by:

A. binding to 50S ribosomal subunits; block translation.
B. binding to 30S ribosomal subunits; block translation.
C. inhibiting peptidoglycan synthesis; cause osmotic lysis.
D. binding to bacterial DNA topoisomerase; block DNA replication.

2. Fluoroquinolones (norfloxacin, lomefloxacin, fleroxacin, ciprofloxacin) affect bacteria by:

A. binding to 50S ribosomal subunits; block translation.
B. binding to 30S ribosomal subunits; block translation.
C. inhibiting peptidoglycan synthesis; cause osmotic lysis.
D. binding to bacterial DNA topoisomerase; block DNA replication.

3. Penicillins and cephalosporins bind to bacterial transpeptidase. They ultimately harm bacteria by:

A. blocking protein synthesis.
B. blocking DNA replication.
C. causing osmotic lysis
D. causing leakage of cellular needs.

4. Macrolides, oxazolidinones, and streptogramins affect bacteria by:

A. binding to 50S ribosomal subunits; block translation.
B. binding to 30S ribosomal subunits; block translation.
C. inhibiting peptidoglycan synthesis; cause osmotic lysis.
D. binding to bacterial DNA topoisomerase; block DNA replication.

5. Aminoglycosides and tetracyclines affect bacteria by:

A. binding to 50S ribosomal subunits; block translation.
B. binding to 30S ribosomal subunits; block translation.
C. inhibiting peptidoglycan synthesis; cause osmotic lysis.
D. binding to bacterial DNA topoisomerase; block DNA replication.