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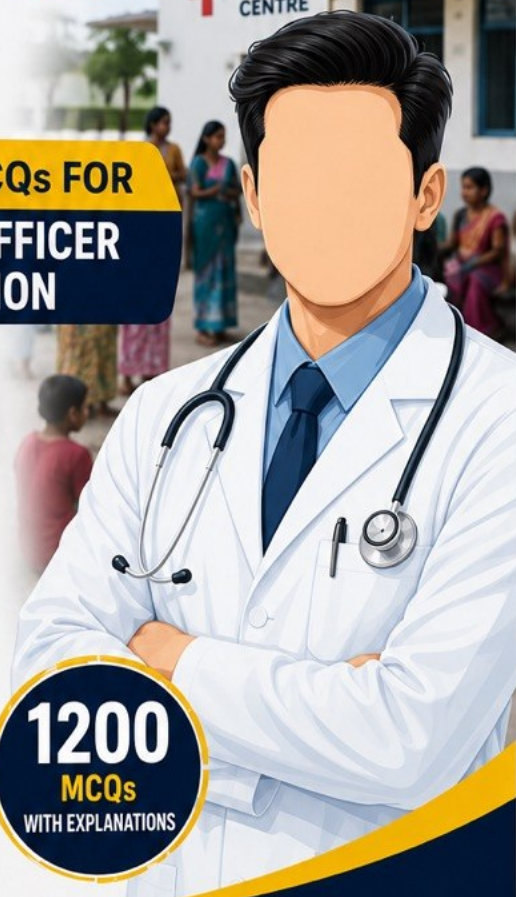


CRACK CHO 2026

IMPORTANT **1200** MCQs FOR
**COMMUNITY HEALTH OFFICER
(CHO) EXAM PREPARATION**

- Environmental Health
- Nutrition & Dietetics
- Anatomy & Physiology
- Epidemiology
- Communicable and Non Communicable Diseases
- Pharmacology
- Child Health
- Medical Surgical
- Maternal Health
- National Health Programme
- Behavioural Science

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MR. SANDEEP JOGDAND
(Govt. Nursing Tutor)



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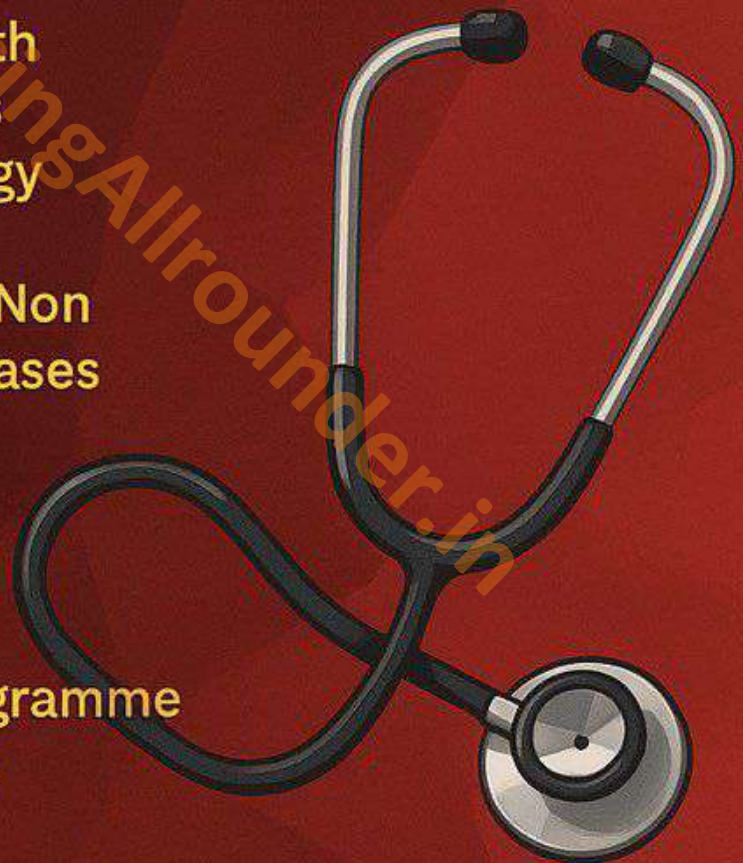


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CHO 1200+ IMPORTANT MCQ

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SR. NO	NAME OF TOPIC	PAGE NO
1	Concepts of Health & Disease	3
2	Levels of Prevention	37
3	Community Health Nursing	71
4	National Health Programmes	87
5	Child Health	121
6	Nursing Foundations & Infection Control	138
7	Pharmacology	156
8	Epidemiology & Surveillance	172
9	Environmental Health & Sanitation	189
10	Behavioural Science	206
11	First Aid & Emergency Nursing	40
12	Medical–Surgical Nursing	260
13	Maternal Health	277
14	CHILD HEALTH	295
15	COMMUNICABLE & NON-COMMUNICABLE DISEASES	313
16	PHARMACOLOGY	331
17	ANATOMY & PHYSIOLOGY	350
18	NUTRITION & DIETETICS	366
19	ENVIRONMENTAL HEALTH	386
20	NATIONAL HEALTH PROGRAMMES OF INDIA	422

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Concepts of Health & Disease – 50 MCQ

1. Health is defined by WHO as:

1. Absence of disease
2. Complete physical, mental & social well-being
3. Physical well-being only
4. Mental well-being only

Answer: 2

Explanation: WHO (1948) definition includes *physical, mental, and social* well-being, not just absence of disease.

2. A state of complete physical, mental, social well-being and not merely absence of disease describes:

1. Hygiene
2. Health
3. Wellness
4. Community health

Answer: 2

Explanation: This is the classic WHO definition of health.

3. “Health is a state of balance between man and his environment” was given by:

1. Ecological concept
2. Biomedical concept
3. Psychological concept
4. Holistic concept

Answer: 1

Explanation: The ecological concept emphasizes interaction between humans and environment.

4. Which concept views health as absence of disease?

1. Biomedical
2. Holistic
3. Ecological
4. Social

Answer: 1

Explanation: Biomedical concept = health means only "no disease".

5. Holistic concept of health includes:

1. Only physical
2. Only psychological
3. Body, mind and spirit
4. Only social

Answer: 3

Explanation: Holistic approach integrates physical, mental, social, and spiritual dimensions.

6. Determinants of health do NOT include:

1. Heredity
2. Lifestyle
3. Environment
4. Astrology

Answer: 4

Explanation: Astrology is not a scientific determinant of health.

7. According to Lalonde Report (1974), the major determinant of health is:

1. Lifestyle
2. Genetics
3. Environment
4. Health care services

Answer: 1

Explanation: Lalonde report—lifestyle contributes 50% to health.

8. Primordial prevention is aimed at:

1. Preventing risk factors from emerging
2. Early diagnosis
3. Rehabilitation
4. Preventing complications

Answer: 1

Explanation: Primordial = preventing development of risk factors.

9. Primary prevention includes all except:

1. Immunization
2. Health promotion
3. Early diagnosis
4. Safe water supply

Answer: 3

Explanation: Early diagnosis is secondary prevention.

10. Secondary prevention aims at:

1. Preventing risk factors
2. Early diagnosis and treatment
3. Limiting disability
4. Rehabilitation

Answer: 2

Explanation: Secondary prevention detects disease at early stage.

11. Tertiary prevention is concerned with:

1. Health promotion
2. Disability limitation & rehabilitation
3. Preventing disease occurrence
4. Risk factor prevention

Answer: 2

Explanation: Tertiary prevention includes rehab and disability limitation.

12. Example of primordial prevention:

1. Ban on junk food in schools
2. Immunization
3. Screening for diabetes
4. Physiotherapy

Answer: 1

Explanation: Prevents the development of risk factors in children.

13. Herd immunity is related to:

1. Nutrition
2. Immunization
3. Rehabilitation
4. Industrial health

Answer: 2

Explanation: Herd immunity develops when a large population is vaccinated or immune.

14. Incubation period is:

1. Time from exposure to onset of symptoms
2. Time from infection to death
3. Length of illness
4. Time from recovery to immunity

Answer: 1

Explanation: Incubation = exposure → symptoms.

15. A disease transmitted from animals to humans is called:

1. Zoonosis
2. Vector disease
3. Endemic
4. Pandemic

Answer: 1

Explanation: Zoonotic diseases come from animals.

16. Disease constantly present in an area is called:

1. Endemic
2. Epidemic
3. Pandemic
4. Sporadic

Answer: 1

Explanation: Endemic = habitual presence.

17. Sudden increase of cases in a community is:

1. Endemic
2. Epidemic
3. Pandemic
4. Sporadic

Answer: 2

Explanation: Epidemic = sudden rise above expected level.

18. Worldwide spread of disease is:

1. Endemic
2. Epidemic
3. Pandemic
4. Zoonotic

Answer: 3

Explanation: Example: COVID-19.

19. Sporadic disease means:

1. Occurs regularly
2. Occurs occasionally, irregularly
3. Occurs in epidemic form
4. Occurs globally

Answer: 2

Explanation: Sporadic = infrequent, irregular.

20. An agent that causes disease is called:

1. Host
2. Environment
3. Agent
4. Factor

Answer: 3

Explanation: Agent is the disease-causing organism.

21. The triangle of disease causation includes:

1. Host, agent, environment
2. Doctor, nurse, patient
3. Virus, bacteria, fungus
4. Air, water, food

Answer: 1

Explanation: Epidemiological triad.

22. "Iceberg phenomenon" is mostly seen in:

1. Non-communicable diseases
2. Communicable diseases
3. Water-borne diseases
4. Sexually transmitted diseases

Answer: 2

Explanation: Hidden cases are more than visible ones.

23. The visible part of the iceberg represents:

1. Hidden cases
2. Subclinical cases
3. Known clinical cases
4. Carrier states

Answer: 3

Explanation: Clinical cases appear above water.

24. A person who carries pathogen without symptoms is:

1. Susceptible
2. Carrier
3. Vector
4. Host

Answer: 2

Explanation: Carriers transmit disease silently.

25. Example of a chronic carrier:

1. Typhoid
2. Influenza
3. Cholera
4. Malaria

Answer: 1

Explanation: "Typhoid Mary" is a classic chronic carrier.

26. Incidence rate measures:

1. New cases
2. Old cases
3. Both new & old cases
4. Mortality

Answer: 1

Explanation: Incidence captures *new* occurrences.

27. Prevalence rate measures:

1. New cases
2. Existing cases
3. Only cured cases
4. Only dead cases

Answer: 2

Explanation: Prevalence = all existing cases.

28. High incidence and low prevalence indicates:

1. Long disease duration
2. Short disease duration / rapid recovery
3. Low cure rate
4. High mortality

Answer: 2

Explanation: If prevalence is low, recovery is fast.

29. Agent and host come into contact through:

1. Causal chain
2. Epidemiological triad
3. Modes of transmission
4. Natural history

Answer: 3

Explanation: Contact occurs via transmission routes.

30. Vector-borne disease example:

1. TB
2. Malaria
3. Measles
4. Cholera

Answer: 2

Explanation: Transmitted by Anopheles mosquito.

31. Airborne disease example:

1. Typhoid
2. Malaria
3. TB
4. Rabies

Answer: 3

Explanation: TB spreads by droplet nuclei.

32. Feco-oral transmission occurs in:

1. Measles
2. Cholera
3. TB
4. Influenza

Answer: 2

Explanation: Cholera spreads through contaminated food and water.

33. Natural history of disease begins with:

1. Symptoms
2. Exposure
3. Diagnosis
4. Treatment

Answer: 2

Explanation: First step: exposure to causative agent.

34. The pre-pathogenesis phase includes:

1. Disease present
2. Man + environment interaction before disease
3. Treatment
4. Rehabilitation

Answer: 2

Explanation: No disease yet, but risk factors exist.

35. Pathogenesis phase starts when:

1. Agent enters the body
2. Symptoms appear
3. Diagnosis made
4. Treatment starts

Answer: 1

Explanation: Disease starts after agent entry.

36. Disability limitation belongs to:

1. Primary
2. Secondary
3. Tertiary
4. Primordial

Answer: 3

Explanation: Part of tertiary prevention.

37. Health promotion activity example:

1. Immunization
2. Balanced diet
3. Early diagnosis
4. Surgery

Answer: 2

Explanation: Promotion improves overall well-being.

38. Disease elimination means:

1. Zero cases globally
2. Zero cases in a defined area
3. Zero deaths
4. Zero transmission worldwide

Answer: 2

Explanation: Elimination = regional.

39. Disease eradication means:

1. Zero transmission globally
2. Reduced cases
3. Limited spread
4. Elimination in one country

Answer: 1

Explanation: Eradication = worldwide elimination.

40. Example of eradicated disease:

1. TB
2. Smallpox
3. Polio
4. Measles

Answer: 2

Explanation: Smallpox eradicated in 1980.

41. Vector means:

1. Pathogen
2. Disease carrier (arthropod)
3. Person with disease
4. Environmental factor

Answer: 2

Explanation: Vectors transfer pathogens.

42. Incubation period of measles is:

1. 1–3 days
2. 7–14 days
3. 30 days
4. Few hours

Answer: 2

Explanation: Measles incubation = 10–14 days.

43. Latent period means:

1. Exposure → infectiousness
2. Exposure → symptoms
3. Recovery period
4. Contagious period

Answer: 1

Explanation: Latent = time before person becomes infectious.

44. Common indicator of health status:

1. Literacy rate
2. Infant mortality rate
3. Birth rate
4. GDP

Answer: 2

Explanation: IMR is a sensitive indicator of a country's health.

45. What is the basic requirement for health?

1. Money
2. Peace, shelter, clean water
3. Luxury
4. Technology

Answer: 2

Explanation: WHO says prerequisites include food, water, shelter, peace.

46. DALY stands for:

1. Daily-adjusted life year
2. Disability-adjusted life year
3. Disease-adjusted life year
4. Death-adjusted life year

Answer: 2

Explanation: DALY = years lost due to disability.

47. Quality of life is measured by:

1. IMR
2. HDI
3. Case fatality rate
4. Birth rate

Answer: 2

Explanation: HDI includes life expectancy, education, income.

48. Risk factor means:

1. A cause of death
2. Factor increasing probability of disease
3. Cure for disease
4. None

Answer: 2

Explanation: Risk factor increases chance of illness.

49. Communicable period means:

1. Person is contagious
2. Incubation
3. Recovery
4. Treatment

Answer: 1

Explanation: Communicable period = time when disease can spread.

50. Host susceptibility depends on:

1. Age
2. Immunity
3. Nutrition
4. All of the above

Answer: 4

Explanation: All factors influence how easily a host gets infected.

✓ Concepts of Health & Disease – MCQs 51 to 100 (with Answers & Explanations)

51. Man–Environment–Disease relationship is explained by:

1. Web of causation
2. Epidemiological triad
3. Iceberg phenomenon
4. Natural history

Answer: 2

Explanation: Epidemiological triad = agent + host + environment interaction.

52. Health indicator that best reflects overall health in a community:

1. Crude death rate
2. Infant mortality rate
3. Maternal mortality rate
4. Life expectancy

Answer: 2

Explanation: IMR is the most sensitive single indicator of community health.

53. Maternal mortality ratio measures:

1. Maternal deaths per 1000 women

2. Maternal deaths per 100,000 live births
3. Maternal deaths per 10,000 population
4. None

Answer: 2

Explanation: MMR = deaths / 100,000 live births.

54. Case fatality rate indicates:

1. Morbidity
2. Virulence of disease
3. Prevalence
4. Mortality

Answer: 2

Explanation: High CFR = high virulence.

55. Disability Adjusted Life Years (DALY) measures:

1. Illness only
2. Years lived with disability + years lost due to premature death
3. Only death
4. Adult morbidity

Answer: 2

Explanation: DALY = burden of disease.

56. Which is NOT a dimension of health?

1. Social

2. Emotional
3. Physical
4. Astrological

Answer: 4

Explanation: Astrological is not a health dimension.

57. Social determinant of health:

1. Age
2. Immunity
3. Education
4. Nutrition

Answer: 3

Explanation: Education affects lifestyle and health.

58. Example of behavioral determinant:

1. Smoking
2. Climate
3. Socioeconomic status
4. Genetics

Answer: 1

Explanation: Lifestyle behaviors affect health significantly.

59. "Web of causation" concept is used mainly for:

1. Communicable diseases

2. Simple diseases
3. Non-communicable diseases
4. All diseases

Answer: 3

Explanation: NCDs like diabetes have multifactorial causes.

60. Which indicator reflects the quality of maternity services?

1. IMR
2. MMR
3. CBR
4. CDR

Answer: 2

Explanation: MMR is a sensitive indicator for maternal care.

61. Biological determinant of health:

1. Literacy
2. Income
3. Age and sex
4. Housing

Answer: 3

Explanation: Biological determinants include heredity, age, sex.

62. Environment includes all EXCEPT:

1. Physical

2. Biological
3. Social
4. Spiritual

Answer: 4

Explanation: Spiritual is part of holistic health, not environment.

63. Best example of primary prevention:

1. Vaccination
2. Screening
3. Rehabilitation
4. Surgery

Answer: 1

Explanation: Primary prevention prevents disease occurrence.

64. Example of secondary prevention:

1. Growth monitoring
2. Mammography
3. Handwashing promotion
4. Sericulture

Answer: 2

Explanation: Screening tests = early diagnosis = secondary prevention.

65. Which is not included in tertiary prevention?

1. Rehabilitation

2. Physiotherapy
3. Prevention of complications
4. Immunization

Answer: 4

Explanation: Immunization is primary prevention.

66. A condition that cannot cause disease alone is called:

1. Sufficient cause
2. Necessary cause
3. Component cause
4. Indirect cause

Answer: 3

Explanation: Component cause forms part of causal pie.

67. "Agent" in epidemiology includes:

1. Only microorganisms
2. Nutrient deficiencies, chemicals, physical forces, microbes
3. Only chemical substances
4. Only physical agents

Answer: 2

Explanation: Agent can be biological, chemical, physical.

68. Herd immunity depends on:

1. Nutrition

2. Vaccination coverage
3. Physical fitness
4. Literacy

Answer: 2

Explanation: High coverage = strong herd immunity.

69. Iceberg phenomenon is best seen in:

1. Hypertension
2. Diabetes
3. Polio
4. Measles

Answer: 1

Explanation: Many undiagnosed cases → hidden iceberg portion.

70. A measure of speed of spread of disease:

1. Attack rate
2. CFR
3. MMR
4. IMR

Answer: 1

Explanation: Attack rate = rapid spread in outbreaks.

71. Basic reproductive number (R_0) refers to:

1. Number of secondary cases from one case

2. Birth rate
3. Death rate
4. Carrier rate

Answer: 1

Explanation: R0 measures transmission potential.

72. Communicable disease control is mainly achieved by:

1. Surgery
2. Vaccination
3. Rehabilitation
4. Physiotherapy

Answer: 2

Explanation: Vaccination breaks transmission chain.

73. Which disease has both high incidence and high prevalence?

1. TB
2. Measles
3. Malaria
4. Cholera

Answer: 1

Explanation: TB has long duration → high prevalence.

74. Host factor EXCEPT:

1. Age

2. Lifestyle
3. Immunity
4. Pathogen

Answer: 4

Explanation: Pathogen belongs to agent.

75. A person with infection but no symptoms and not contagious is:

1. Healthy
2. Carrier
3. Subclinical case
4. Infectious case

Answer: 3

Explanation: Disease present but no symptoms.

76. The period between infection and maximum infectivity:

1. Latent period
2. Incubation period
3. Generation time
4. Communicable period

Answer: 3

Explanation: Generation time = peak infectiousness.

77. "Spectrum of disease" includes:

1. Only clinical cases

2. Range from subclinical to fatal cases
3. Only fatal cases
4. Only mild cases

Answer: 2

Explanation: Shows full range of disease severity.

78. A disease that occurs more often than expected in a given area:

1. Sporadic
2. Endemic
3. Epidemic
4. Pandemic

Answer: 3

Explanation: Epidemic = unexpected increase.

79. Environmental sanitation includes:

1. Clean water supply
2. Sewage disposal
3. Waste management
4. All of the above

Answer: 4

Explanation: All are key components of sanitation.

80. Disability is measured by:

1. DALY

2. IMR
3. MMR
4. CBR

Answer: 1

Explanation: DALY = disability + premature death.

81. A vector which transmits disease mechanically:

1. Mosquito
2. Housefly
3. Louse
4. Tick

Answer: 2

Explanation: Houseflies carry pathogens mechanically.

82. Biological vector example:

1. Housefly
2. Louse
3. Flea
4. Both 2 & 3

Answer: 4

Explanation: Louse and flea allow pathogen multiplication.

83. A reservoir of infection is:

1. Only humans

2. Only animals
3. Soil, water, humans, animals
4. Only insects

Answer: 3

Explanation: Reservoir = where pathogen resides.

84. Example of anthroponosis:

1. Malaria
2. Rabies
3. Measles
4. TB

Answer: 2

Explanation: Rabies spreads animal → human.

85. The force that causes disease is:

1. Agent
2. Host
3. Environment
4. Adaptation

Answer: 1

Explanation: Agent initiates disease process.

86. A disease that spreads from humans to animals:

1. Zooanthroponosis

2. Anthropozoonosis
3. Zoonosis
4. Sapronosis

Answer: 1

Explanation: Human → animal transmission.

87. A chronic non-communicable disease:

1. Diabetes
2. Measles
3. Cholera
4. Influenza

Answer: 1

Explanation: NCDs have long duration and slow progression.

88. Indicator showing effectiveness of DOTS programme:

1. Cure rate
2. IMR
3. DALY
4. Fertility rate

Answer: 1

Explanation: Cure rate is key TB indicator.

89. Which is a social indicator?

1. Illiteracy

2. Blood pressure
3. Height
4. Weight

Answer: 1

Explanation: Illiteracy = social factor.

90. Health status of a community is best measured by:

1. Hospital beds
2. IMR
3. Number of doctors
4. Number of PHCs

Answer: 2

Explanation: IMR is the best single health measure.

91. Best method to reduce NCDs:

1. Screening
2. Lifestyle modification
3. Surgery
4. Chemotherapy

Answer: 2

Explanation: Diet, exercise, quitting tobacco/alcohol.

92. Physical quality of life index includes:

1. Literacy, IMR, Life expectancy

2. GDP, literacy, IMR
3. HDI
4. Age-specific death rate

Answer: 1

Explanation: PQLI = 3 components: IMR, life expectancy, literacy.

93. A disease with long incubation period:

1. Measles
2. Rabies
3. Influenza
4. Common cold

Answer: 2

Explanation: Rabies may take weeks to months.

94. Vector of dengue:

1. Anopheles
2. Culex
3. Aedes aegypti
4. Sandfly

Answer: 3

Explanation: Aedes causes dengue.

95. A disease with short incubation period:

1. Cholera

2. Hepatitis B
3. Chickenpox
4. TB

Answer: 1

Explanation: Cholera: 2 hours – 5 days.

96. First level of prevention:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 1

Explanation: Primordial prevents *risk factor* development.

97. Example of disease surveillance:

1. Iron tablets
2. Recording weekly dengue cases
3. Rehabilitation
4. Surgery

Answer: 2

Explanation: Surveillance = ongoing systematic data collection.

98. The most important factor for controlling diarrheal diseases:

1. Vaccination

2. Safe water supply
3. Surgery
4. Physiotherapy

Answer: 2

Explanation: Clean water prevents fecal–oral transmission.

99. What is epidemiology?

1. Study of hospitals
2. Study of distribution & determinants of diseases in populations
3. Study of drugs
4. Study of nursing

Answer: 2

Explanation: Epidemiology deals with disease patterns.

100. The ultimate goal of public health is:

1. Cure disease
2. Prevent disease and promote health
3. Build hospitals
4. Research only

Answer: 2

Explanation: Public health focuses on prevention & health promotion.



Levels of Prevention + Epidemiology + Indicators of Health — 100 MCQ

MCQs 1–100

1. Levels of prevention were first described by:

1. Leavell and Clark
2. Lalonde
3. Winslow
4. Snow

Answer: 1

Explanation: Leavell & Clark proposed 4 prevention levels: primordial, primary, secondary, tertiary.

2. Primordial prevention focuses on:

1. Preventing complications
2. Preventing risk factors
3. Early diagnosis
4. Rehabilitation

Answer: 2

Explanation: Primordial aims to stop emergence of risk factors.

3. Health education in schools is an example of:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 1

Explanation: Helps prevent development of unhealthy lifestyle.

4. Primary prevention aims to:

1. Prevent occurrence of disease
2. Diagnose early
3. Limit disability
4. Restore function

Answer: 1

Explanation: Primary includes health promotion and specific protection.

5. Immunization is a form of:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 2

Explanation: Prevents occurrence of disease.

6. Secondary prevention includes:

1. Rehabilitation
2. Screening and early detection
3. Lifestyle advice
4. Health promotion

Answer: 2

Explanation: Detects disease early for prompt treatment.

7. Mammography is an example of:

1. Primary prevention
2. Secondary prevention
3. Tertiary prevention
4. Primordial prevention

Answer: 2

Explanation: It is a screening method.

8. Tertiary prevention focuses on:

1. Preventing risk factors
2. Early diagnosis
3. Limiting disability and rehab
4. Promotion of health

Answer: 3

Explanation: Aims to reduce complications.

9. Examples of specific protection include:

1. Nutrition
2. Immunization
3. Exercise
4. Yoga

Answer: 2

Explanation: Specific protection targets a specific disease.

10. Rehabilitation includes all EXCEPT:

1. Physiotherapy
2. Vocational training
3. Immunization
4. Speech therapy

Answer: 3

Explanation: Immunization is primary prevention.

11. Epidemiology is the study of:

1. Diseases in an individual
2. Distribution & determinants of diseases in populations
3. Treatment of diseases
4. Hospital functioning

Answer: 2

Explanation: Classic definition of epidemiology.

12. Father of epidemiology:

1. John Snow
2. Charles Winslow
3. Robert Koch
4. Hippocrates

Answer: 4

Explanation: Hippocrates first linked environment and disease.

13. Modern father of epidemiology:

1. John Snow
2. Pasteur
3. Ross
4. Jenner

Answer: 1

Explanation: Known for cholera transmission studies.

14. Epidemiological triad includes:

1. Host, agent, environment
2. Time, place, person
3. Virus, bacteria, fungi
4. Prevention, diagnosis, treatment

Answer: 1

Explanation: Represents disease causation.

15. Natural history of disease begins with:

1. Clinical stage
2. Exposure to agent
3. Diagnosis
4. Treatment

Answer: 2

Explanation: Exposure is first step.

16. Pre-pathogenesis phase means:

1. Disease has started
2. Interaction of host and environment before agent enters
3. Rehabilitation stage
4. Terminal illness

Answer: 2

Explanation: Before disease begins.

17. Pathogenesis phase starts with:

1. Appearance of signs
2. Agent entry and multiplication
3. Laboratory diagnosis
4. Rehabilitation

Answer: 2

Explanation: Pathogenesis = disease phase.

18. Incidence rate measures:

1. New cases
2. Old cases
3. Both new and old
4. Deaths

Answer: 1

Explanation: Incidence = new cases.

19. Prevalence rate measures:

1. Only new cases
2. Existing cases
3. Deaths
4. Risk factors

Answer: 2

Explanation: Prevalence = total disease load.

20. A disease with high incidence but short duration will have:

1. High prevalence
2. Low prevalence
3. No prevalence
4. High mortality

Answer: 2

Explanation: Short duration results in fewer existing cases.

21. Attack rate measures:

1. Chronic diseases
2. Rapid spread in an outbreak
3. Death rate
4. Carrier rate

Answer: 2

Explanation: Used in epidemics.

22. Case fatality rate (CFR) indicates:

1. Infectivity
2. Virulence
3. Prevalence
4. Immunity

Answer: 2

Explanation: High CFR = severe disease.

23. Carrier state is important in:

1. Rabies
2. Measles
3. Typhoid
4. Tetanus

Answer: 3

Explanation: Typhoid Mary = chronic carrier.

24. Iceberg phenomenon is seen primarily in:

1. TB
2. Polio
3. Hypertension
4. All of the above

Answer: 4

Explanation: All have many hidden subclinical cases.

25. A disease always present in a community is:

1. Epidemic
2. Endemic
3. Pandemic
4. Sporadic

Answer: 2

Explanation: Endemic = constant presence.

26. Worldwide spread of disease is known as:

1. Sporadic
2. Endemic
3. Pandemic
4. Zoonotic

Answer: 3

Explanation: Example COVID-19.

27. Zoonotic disease example:

1. Measles
2. Rabies
3. Mumps
4. Polio

Answer: 2

Explanation: Rabies spreads animal → human.

28. Vector-borne disease example:

1. TB
2. Malaria
3. Cholera
4. Measles

Answer: 2

Explanation: Spread by mosquitoes.

29. Incubation period means:

1. Exposure → onset of symptoms
2. Symptoms → recovery
3. Infection → death
4. Treatment → cure

Answer: 1

Explanation: Incubation = symptom-free interval.

30. Herd immunity depends on:

1. Weather
2. Nutrition
3. Vaccination coverage
4. Health education

Answer: 3

Explanation: High coverage = strong herd immunity.

31. Indicator used to measure quality of life:

1. GDP
2. DALY
3. HDI
4. MMR

Answer: 3

Explanation: HDI includes literacy, life expectancy, income.

32. Most sensitive indicator of community health:

1. IMR
2. CDR
3. CBR
4. Fertility rate

Answer: 1

Explanation: IMR reflects overall health status.

33. Example of mortality indicator:

1. CBR
2. MMR
3. Literacy rate
4. Nutritional status

Answer: 2

Explanation: MMR is maternal deaths per 100,000 live births.

34. Best indicator of health status of mothers:

1. MMR
2. CDR
3. IMR
4. Stillbirth rate

Answer: 1

Explanation: MMR reflects maternal care quality.

35. Perinatal mortality includes:

1. Stillbirth + neonatal deaths (<7 days)
2. All infant deaths
3. All childhood deaths
4. Only stillbirth

Answer: 1

Explanation: Perinatal covers late fetal + early neonatal deaths.

36. Sensitive indicator of socio-economic development:

1. CBR
2. IMR
3. Gini index
4. Crude death rate

Answer: 2

Explanation: IMR is sensitive to socioeconomic conditions.

37. Disease elimination means:

1. Zero global cases
2. Zero regional cases
3. Zero mortality
4. Zero incidence worldwide

Answer: 2

Explanation: Elimination = regional.

38. Disease eradication means:

1. Zero cases worldwide
2. Zero cases regionally
3. Only control
4. Reduction in incidence

Answer: 1

Explanation: Example: smallpox.

39. Example of eradicated disease:

1. Polio
2. Smallpox
3. Measles
4. Malaria

Answer: 2

Explanation: Eradicated in 1980.

40. Example of controlled disease:

1. Smallpox
2. Polio
3. Influenza
4. HIV

Answer: 2

Explanation: Polio is eliminated in many regions.

41. Host factor includes:

1. Age
2. Sex
3. Immunity
4. All

Answer: 4

Explanation: Age, sex, immunity all affect susceptibility.

42. A vector transmits disease:

1. Mechanically
2. Biologically
3. Both
4. None

Answer: 3

Explanation: Vectors may transmit either way.

43. Housefly transmits diseases by:

1. Mechanical transmission
2. Biological transmission
3. Vertical transmission
4. Genetic transmission

Answer: 1

Explanation: Pathogens do not multiply inside flies.

44. Basic reproductive number R_0 indicates:

1. Death rate
2. Number of secondary cases per case
3. Birth rate
4. Carrier rate

Answer: 2

Explanation: $R_0 > 1$ = epidemic potential.

45. Indicator of burden of NCDs:

1. CFR
2. DALY
3. CBR
4. MMR

Answer: 2

Explanation: DALY shows disease burden including disability.

46. Disability limitation belongs to:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 4

Explanation: Tertiary = reduce disability.

47. Screening test is used in:

1. Primary prevention
2. Secondary prevention
3. Tertiary prevention
4. Primordial prevention

Answer: 2

Explanation: Early detection.

48. Prevalence increases when:

1. Cure rate improves
2. Death rate increases
3. Disease duration increases
4. Incidence decreases

Answer: 3

Explanation: Long-lasting diseases → high prevalence.

49. Example of direct transmission:

1. Droplet infection
2. Mosquito bite
3. Contaminated water
4. Houseflies

Answer: 1

Explanation: Sneezing, coughing.

50. Indirect transmission example:

1. Sexual contact
2. Droplet spread
3. Vector-borne
4. Touch

Answer: 3

Explanation: Mosquito → malaria.

Next 50 MCQs (51–100)

(Continuing the same topic)

51. Incubation period of hepatitis A:

1. 2–6 days
2. 15–50 days
3. 1–2 days
4. 1 year

Answer: 2

Explanation: Average 28 days.

52. Latent period means:

1. Exposure → infectiousness
2. Exposure → symptoms
3. Symptoms → recovery
4. Infectious → non-infectious

Answer: 1

Explanation: Latent = time before becoming infectious.

53. Communicable period refers to:

1. Time when disease is contagious
2. Time before symptoms
3. Recovery period
4. Treatment period

Answer: 1

Explanation: Disease can spread during this time.

54. Generation time refers to:

1. Infection → peak infectivity
2. Infection → symptoms
3. Symptoms → recovery
4. Vector lifespan

Answer: 1

Explanation: Time when infectivity is maximum.

55. Strongest predictor of infant mortality:

1. Immunization
2. Maternal education
3. Income
4. Sanitation

Answer: 2

Explanation: Mother's literacy strongly affects child survival.

56. Most sensitive indicator for malnutrition in a community:

1. Stunting
2. Wasting
3. Underweight
4. MUAC

Answer: 2

Explanation: Wasting indicates acute malnutrition.

57. Indicator of long-term malnutrition:

1. Wasting
2. Stunting
3. MUAC
4. CFR

Answer: 2

Explanation: Stunting = chronic malnutrition.

58. Example of anthropometric indicator:

1. IMR
2. Weight-for-age
3. CDR
4. Literacy

Answer: 2

Explanation: Anthropometry assesses nutrition.

59. IMR is calculated per:

1. 100 live births
2. 1000 live births
3. 10,000 population
4. 100,000 live births

Answer: 2

Explanation: Standard denominator is 1000 live births.

60. MMR is expressed per:

1. 1000 live births
2. 10,000 women
3. 1000 mothers
4. 100,000 live births

Answer: 4

Explanation: MMR units = maternal deaths per 100,000 LB.

61. Best measure of burden of chronic diseases:

1. CFR
2. DALY
3. IMR
4. Incidence

Answer: 2

Explanation: DALY includes disability + death.

62. Which is NOT a component of PQLI?

1. IMR
2. Life expectancy
3. Literacy rate
4. GDP

Answer: 4

Explanation: GDP not included.

63. Most sensitive index for measuring health services quality:

1. IMR
2. Birth rate
3. CDR
4. MMR

Answer: 1

Explanation: Reflects overall community healthcare.

64. High prevalence but low incidence indicates:

1. Rapid recovery
2. Chronic disease
3. Poor reporting
4. High mortality

Answer: 2

Explanation: Long duration → high prevalence.

65. Which is NOT a factor in the epidemiological triad?

1. Agent
2. Host
3. Environment
4. Pathogenesis

Answer: 4

Explanation: Pathogenesis is disease stage, not a factor.

66. Best indicator of fertility:

1. CBR
2. TFR
3. GFR
4. NRR

Answer: 2

Explanation: TFR = average children per woman.

67. Net reproduction rate (NRR) of 1 means:

1. Population declining
2. Population stable
3. Population increasing
4. No births

Answer: 2

Explanation: $NRR=1 \rightarrow$ replacement level.

68. Most accurate indicator of mortality:

1. CDR
2. Age-specific death rate
3. IMR
4. MMR

Answer: 2

Explanation: Age-specific rates are more precise.

69. Health care delivery indicator:

1. Number of beds
2. IMR
3. CDR
4. Literacy

Answer: 1

Explanation: Structural indicator of health services.

70. An epidemic curve helps determine:

1. Cause
2. Source and type of epidemic
3. Treatment
4. Antibiotic sensitivity

Answer: 2

Explanation: Point source, propagated, continuous.

71. Vertical transmission occurs in:

1. Measles
2. HIV
3. Rabies
4. Cholera

Answer: 2

Explanation: Mother-to-child transmission.

72. Best example of zoonosis:

1. Polio
2. HIV
3. TB
4. Rabies

Answer: 4

Explanation: Classically zoonotic.

73. Feco-oral route example:

1. Malaria
2. Cholera
3. TB
4. HIV

Answer: 2

Explanation: Spread through contaminated water.

74. Incubation period of measles:

1. 1–3 days
2. 7–14 days
3. 40–60 days
4. 90 days

Answer: 2

Explanation: Average 10–12 days.

75. Malaria is transmitted by:

1. Aedes
2. Culex
3. Anopheles
4. Sandfly

Answer: 3

Explanation: Female Anopheles mosquito.

76. Dengue vector:

1. Aedes
2. Culex
3. Anopheles
4. Tick

Answer: 1

Explanation: Aedes aegypti.

77. Best test for screening:

1. Highly sensitive
2. Highly specific
3. Highly expensive
4. Highly invasive

Answer: 1

Explanation: Sensitivity avoids false negatives.

78. Best test for confirmation:

1. Sensitive
2. Specific
3. Rapid
4. Cheap

Answer: 2

Explanation: Specific tests have fewer false positives.

79. High specificity means:

1. Few false positives
2. Few false negatives
3. Cannot detect disease
4. Poor test

Answer: 1

Explanation: Specificity = true negative rate.

80. High sensitivity means:

1. Few false negatives
2. Few false positives
3. High accuracy
4. Low cost

Answer: 1

Explanation: Sensitive tests detect almost all cases.

81. $R_0 < 1$ indicates:

1. Disease will spread
2. Epidemic will occur
3. Disease will decline
4. Pandemic likely

Answer: 3

Explanation: Each case infects less than one person.

82. Health promotion activities include all EXCEPT:

1. Yoga
2. Balanced diet
3. Exercise
4. Immunization

Answer: 4

Explanation: Immunization is specific protection.

83. Most important indicator for global health comparisons:

1. IMR
2. HDI
3. DALY
4. Life expectancy

Answer: 2

Explanation: HDI compares nations.

84. Epidemiological methods include:

1. Descriptive
2. Analytical
3. Experimental
4. All

Answer: 4

Explanation: All are types of study designs.

85. Cohort study is:

1. Prospective
2. Retrospective
3. Experimental
4. Case-control

Answer: 1

Explanation: Follows groups over time.

86. Case-control study is:

1. Prospective
2. Retrospective
3. Experimental
4. Cross-sectional

Answer: 2

Explanation: Begins with disease and looks backward.

87. Best study for rare diseases:

1. Cohort
2. Case-control
3. RCT
4. Cross-sectional

Answer: 2

Explanation: Efficient for rare outcomes.

88. Best study to test effectiveness of new drug:

1. Cohort
2. Case-control
3. RCT
4. Cross-sectional

Answer: 3

Explanation: RCT = gold standard.

89. A screening test must have high:

1. Sensitivity
2. Specificity
3. PPV
4. NPV

Answer: 1

Explanation: To catch most cases.

90. A confirmatory test must have high:

1. Sensitivity
2. Specificity
3. PPV
4. Incidence

Answer: 2

Explanation: Ensures accuracy.

91. Example of descriptive epidemiology:

1. Case-control study
2. Time-place-person analysis
3. RCT
4. Cohort

Answer: 2

Explanation: Describes distribution.

92. Denominator for attack rate:

1. Whole population
2. Exposed population
3. Sick population
4. Recovered population

Answer: 2

Explanation: Measures spread among exposed.

93. Disease transmitted through soil:

1. Tetanus
2. TB
3. Measles
4. Influenza

Answer: 1

Explanation: Clostridium tetani lives in soil.

94. Best indicator for planning health services:

1. Morbidity data
2. Mortality data
3. Incidence
4. CBR

Answer: 1

Explanation: Morbidity shows disease burden.

95. Crude death rate measures:

1. Deaths per total population
2. Deaths per live births
3. Deaths <1 year
4. All deaths due to maternal causes

Answer: 1

Explanation: CDR = deaths per 1000 population.

96. Median survival time is used in:

1. Cancer
2. Diarrhea
3. Influenza
4. Measles

Answer: 1

Explanation: Cancer prognosis.

97. Risk factor for NCDs:

1. Smoking
2. Alcohol
3. Obesity
4. All

Answer: 4

Explanation: All are major NCD risks.

98. Best indicator to compare nations:

1. GDP
2. IMR
3. HDI
4. Literacy

Answer: 3

Explanation: HDI = global comparison tool.

99. Motivating community for vaccination is:

1. Health education
2. Treatment
3. Rehabilitation
4. Screening

Answer: 1

Explanation: Health education creates awareness.

100. Ultimate goal of epidemiology:

1. Collect data
2. Prevent disease & promote health
3. Conduct research
4. Test drugs

Answer: 2

Explanation: Prevention and promotion are core aims.

NURSING ALL ROUNDER.IN



Community Health Nursing – 50 Important MCQs

(With Options, Correct Answer & Explanation)

1. The focus of Community Health Nursing is:

1. Individual only
2. Family only
3. Community as a whole
4. Hospital patients

Answer: 3

Explanation: CHN focuses on health promotion of the entire community.

2. Primary Health Care was first introduced in:

1. Alma-Ata, 1978
2. Geneva, 1980
3. USA, 1970
4. UK, 1960

Answer: 1

Explanation: Alma-Ata conference defined PHC concepts.

3. The main principle of Primary Health Care is:

1. Hospital care
2. Curative care
3. Community participation
4. Advanced care

Answer: 3

Explanation: Community involvement is key to PHC.

4. Elements of PHC include all EXCEPT:

1. Safe water
2. Immunization
3. Treatment of common diseases
4. Organ transplantation

Answer: 4

Explanation: Organ transplantation is specialized tertiary care.

5. Health worker responsible for household surveys is:

1. ASHA
2. ANM
3. LHV
4. MPW

Answer: 1

Explanation: ASHA conducts home visits & surveys.

6. ASHA worker is appointed under:

1. ICDS
2. NRHM/NHM
3. RCH
4. RMNCH+A

Answer: 2

Explanation: ASHA is part of NHM strategy.

7. Minimum population for 1 ASHA:

1. 1000
2. 500
3. 2000
4. 5000

Answer: 1

Explanation: 1 ASHA per 1000 population.

8. ANM stands for:

1. Auxiliary Nursing Midwife
2. Assistant Nursing Member
3. Accredited Nurse Midwife
4. Allied Nursing Manager

Answer: 1

Explanation: ANM provides maternal & child health services.

9. The sub-centre is the:

1. First contact point between community and health system
2. Secondary care unit
3. Tertiary care hospital
4. Emergency centre

Answer: 1

Explanation: SC is the primary level unit.

10. Population norm for one Sub-centre in rural area:

1. 1000
2. 3000–5000
3. 10,000
4. 25,000

Answer: 2

Explanation: Rural SC: 3000 (hilly) – 5000 (plain).

11. PHC covers population of:

1. 5000
2. 20,000–30,000
3. 1 lakh
4. 50,000

Answer: 2

Explanation: Rural PHC covers 30,000 (plain) / 20,000 (hilly).

12. CHC covers population of:

1. 10,000
2. 30,000
3. 80,000–120,000
4. 200,000

Answer: 3

Explanation: CHC = 80,000 (hilly) – 1.2 lakh (plain).

13. Number of beds in a CHC:

1. 10
2. 20
3. 30
4. 50

Answer: 3

Explanation: CHC is a 30-bed block-level hospital.

14. PHC doctor in-charge is known as:

1. MO
2. CEO
3. RMO
4. NIC

Answer: 1

Explanation: Medical Officer manages PHC services.

15. ANM role does NOT include:

1. Immunization
2. ANC check-ups
3. Conducting normal deliveries
4. Performing surgeries

Answer: 4

Explanation: ANM does not perform surgical procedures.

16. ASHA stands for:

1. Accredited Social Health Activist
2. Active Social Health Advisor
3. Accredited Service Health Aide
4. Auxiliary Social Health Agent

Answer: 1

Explanation: ASHA = community-level female volunteer.

17. Service not provided at Sub-centre:

1. Delivery services
2. Contraceptives
3. Immunization
4. Surgical operations

Answer: 4

Explanation: Operations are done at CHC/PHC.

18. Community diagnosis means:

1. Laboratory diagnosis
2. Identifying community health problems
3. Individual diagnosis
4. Medical diagnosis

Answer: 2

Explanation: It evaluates community health needs.

19. Bag technique is used by:

1. ASHA
2. ANM
3. Specialist
4. Surgeon

Answer: 2

Explanation: ANM uses bag technique for home visits.

20. Home visit frequency for newborn by ANM:

1. 1 visit
2. 2 visits
3. 6 visits
4. 10 visits

Answer: 3

Explanation: As per guidelines – 6 visits in 42 days.

21. One PHC supervises how many Sub-centres?

1. 1–2
2. 2–4
3. 4–6
4. 5–6

Answer: 4

Explanation: PHC supervises 5–6 SCs.

22. Community participation means:

1. Doctor controls everything
2. Community involvement in planning
3. No community involvement
4. Only government involvement

Answer: 2

Explanation: Core principle of PHC.

23. Example of community-based approach:

1. NICU care
2. ASHA home visit
3. Major surgery
4. MRI scan

Answer: 2

Explanation: Provided at home level.

24. Village Health Sanitation & Nutrition Committee (VHSNC) is headed by:

1. ASHA
2. Sarpanch
3. ANM
4. MPW

Answer: 2

Explanation: Sarpanch leads VHSNC.

25. Highest community-level health committee:

1. VHSNC
2. RKS
3. VHC
4. VHND

Answer: 1

Explanation: VHSNC is village-level body.

26. The role of ASHA includes all EXCEPT:

1. Identifying pregnant mothers
2. Providing counselling
3. Giving injections
4. Escorting to health facility

Answer: 3

Explanation: ASHA cannot give injections.

27. Skill ANM must have:

1. Minor OT assistance
2. Conducting normal deliveries
3. Radiology
4. Surgery

Answer: 2

Explanation: ANM is trained in midwifery.

28. MPHW male focuses mainly on:

1. Pregnancy check-ups
2. Immunization and vector control
3. Nursing care
4. Nutrition counseling

Answer: 2

Explanation: MPW male works in public health & vector control.

29. Cold chain maintenance at sub-centre is done by:

1. ASHA
2. ANM
3. MO
4. LHV

Answer: 2

Explanation: ANM manages vaccines at SC.

30. Health team is headed at PHC by:

1. ANM
2. ASHA
3. Medical Officer
4. LHV

Answer: 3

Explanation: MO leads PHC team.

31. Domiciliary midwifery means:

1. Deliveries in hospital
2. Deliveries at home
3. Deliveries in CHC
4. Deliveries in PHC

Answer: 2

Explanation: Domiciliary = home-based.

32. National health programmes implemented at SC by:

1. Surgeon
2. ANM
3. RMO
4. Consultant

Answer: 2

Explanation: ANM implements NHM programmes.

33. CHO is posted at:

1. CHC
2. Medical college
3. Health & Wellness Centre
4. Sub-centre only

Answer: 3

Explanation: CHO leads HWC (Sub-centre upgraded).

34. Health & Wellness Centres provide:

1. Only maternal care
2. Only child care
3. Comprehensive primary health care
4. ICU services

Answer: 3

Explanation: HWC covers 12 essential services.

35. Services at HWC include all EXCEPT:

1. NCD screening
2. Dental care
3. Mental health
4. Dialysis

Answer: 4

Explanation: Dialysis = tertiary care.

36. Village Health & Nutrition Day (VHND) occurs:

1. Daily
2. Weekly
3. Monthly
4. Yearly

Answer: 3

Explanation: Conducted every month.

37. VHND is primarily conducted by:

1. Teacher
2. ANM
3. Surgeon
4. MPW

Answer: 2

Explanation: ANM leads VHND activities.

38. ASHA incentive for institutional delivery is under:

1. JSY
2. RCH
3. ICDS
4. NPCB

Answer: 1

Explanation: JSY promotes institutional delivery.

39. Primary function of LHV:

1. Deliveries
2. Supervision of ANMs
3. Surgery
4. Dispensing drugs

Answer: 2

Explanation: Lady Health Visitor supervises SCs.

40. Primary role of MPW male:

1. Diabetes management
2. Vector control & surveillance
3. Delivery care
4. NICU care

Answer: 2

Explanation: MPW male works in communicable disease control.

41. Panchayati Raj in health involves:

1. Community planning
2. Specialist care
3. Hospital care
4. Urban care only

Answer: 1

Explanation: Panchayat system strengthens community involvement.

42. ANM maintains which register?

1. Immunization register
2. OPD register
3. ICU register
4. Operation theatre register

Answer: 1

Explanation: Maintains immunization, ANC, PNC records.

43. Referral PHC is also called:

1. Level I PHC
2. Level II PHC
3. CHC
4. Sub-centre

Answer: 2

Explanation: Level II PHC provides additional services.

44. Community bag technique prevents:

1. Medicine wastage
2. Cross infection
3. Communication gap
4. Overcrowding

Answer: 2

Explanation: Bag technique maintains asepsis.

45. Home visit principle includes:

1. Flexibility
2. Privacy
3. Planning
4. All of the above

Answer: 4

Explanation: All are core principles.

46. First contact person at community level:

1. ANM
2. ASHA
3. MO
4. LHV

Answer: 2

Explanation: ASHA is first point of contact.

47. Community needs assessment is done by:

1. MO
2. ASHA
3. ANM
4. All of the above

Answer: 4

Explanation: All contribute in different ways.

48. Health worker responsible for ORS distribution:

1. Surgeon
2. ASHA
3. RMO
4. Radiologist

Answer: 2

Explanation: ASHA provides ORS packets.

49. Main aim of community health nursing:

1. Cure disease
2. Promote and protect health
3. Do surgeries
4. Hospitalize all patients

Answer: 2

Explanation: CHN aims for prevention and promotion.

50. Essential skill for CHO:

1. Managing ICU
2. Community-based assessment
3. Performing surgeries
4. CT scan reading

Answer: 2

Explanation: CHO leads primary care at community level.

NURSING ALL ROUNDER.IN



National Health Programmes – 50 MCQs

(With Options, Correct Answer & Explanation)

1. NHM was launched in:

1. 2000
2. 2005
3. 2010
4. 1995

Answer: 2

Explanation: National Health Mission was launched in 2005.

2. NHM includes:

1. NRHM + NUHM
2. RNTCP + NACP
3. ICDS + NIDDCP
4. NPCB + UIP

Answer: 1

Explanation: NHM = Rural and Urban Health Missions.

3. RCH stands for:

1. Reproductive and Child Health
2. Reproductive and Comprehensive Health
3. Rural Child Health
4. Reproductive Care for Health

Answer: 1

Explanation: RCH covers maternal, child, and reproductive health services.

4. RCH Phase II started in:

1. 1997
2. 2000
3. 2005
4. 2010

Answer: 3

Explanation: RCH-II started under NRHM in 2005.

5. JSY (Janani Suraksha Yojana) was launched in:

1. 2000
2. 2003
3. 2005
4. 2010

Answer: 3

Explanation: JSY started with the launch of NRHM 2005.

6. JSY mainly aims to improve:

1. Nutrition
2. Institutional deliveries
3. HIV diagnosis
4. Eye care

Answer: 2

Explanation: JSY encourages hospital deliveries to reduce maternal mortality.

7. JSSK (Janani Shishu Suraksha Karyakram) provides:

1. Free HIV test
2. Free dialysis
3. Free delivery, C-section, drugs, diagnostics for mother & newborn
4. Free surgeries

Answer: 3

Explanation: 100% free maternal & newborn care.

8. RMNCH+A was launched in:

1. 2010
2. 2012
3. 2013
4. 2015

Answer: 3

Explanation: A = Adolescents added in 2013.

9. RMNCH+A includes adolescent programme named:

1. RBSK
2. WIFS
3. RKSK
4. RNTCP

Answer: 3

Explanation: RKSK = Rashtriya Kishor Swasthya Karyakram.

10. Rashtriya Bal Swasthya Karyakram (RBSK) screens children for:

1. Diarrhea only
2. Disabilities only
3. 4Ds: Defects, Diseases, Deficiencies, Developmental delays
4. All communicable diseases

Answer: 3

Explanation: Covers birth to 18 years.

11. NTEP (National TB Elimination Programme) aims to eliminate TB by:

1. 2022
2. 2025
3. 2030
4. 2035

Answer: 2

Explanation: India targets TB elimination by 2025.

12. The drug regimen for TB is based on:

1. RNTCP
2. DOTS strategy
3. UIP
4. NACP

Answer: 2

Explanation: DOTS = Directly Observed Treatment Short-course.

13. NACP focuses on prevention & control of:

1. Cholera
2. HIV/AIDS
3. Tuberculosis
4. Malaria

Answer: 2

Explanation: National AIDS Control Programme.

14. HIV testing during pregnancy is part of:

1. NTEP
2. NACP
3. NPCB
4. NIDDCP

Answer: 2

Explanation: NACP ensures PPTCT (Prevention of Parent to Child Transmission).

15. PPTCT refers to:

1. Prevention of parent to child transmission of HIV
2. Prevention of pneumonia in children
3. Polio prevention programme
4. Prevention of measles

Answer: 1

Explanation: Prevents mother-to-child HIV transmission.

16. NPCBVI deals with:

1. Vector-borne diseases
2. Blindness and visual impairment
3. Ear diseases
4. Nutrition

Answer: 2

Explanation: National Programme for Control of Blindness & Visual Impairment.

17. Vitamin A supplementation is part of:

1. ICDS
2. UIP
3. RCH
4. NPCB

Answer: 1

Explanation: ICDS provides Vit A through anganwadi.

18. UIP provides all EXCEPT:

1. BCG
2. OPV
3. DT
4. Rabies vaccine

Answer: 4

Explanation: Rabies vaccine is not part of routine UIP.

19. Mission Indradhanush aims to:

1. Reduce HIV
2. Increase immunization coverage
3. Reduce malaria
4. Improve nutrition

Answer: 2

Explanation: Covers fully immunized child targets.

20. Intensified Mission Indradhanush (IMI) aims for coverage of:

1. 50%
2. 60%
3. 80%
4. 90%

Answer: 4

Explanation: Goal = more than 90% full immunization.

21. National Iron Plus Initiative (NIPI) covers age group:

1. Pregnant women only
2. 6 months to 60 years
3. Only adolescents
4. Only newborns

Answer: 2

Explanation: Covers infants → elderly.

22. Weekly Iron Folic Acid Supplementation (WIFS) is for:

1. Pregnant women
2. Adolescents 10–19 years
3. Newborns
4. Elderly

Answer: 2

Explanation: WIFS gives weekly IFA for adolescents.

23. Albendazole in NDD (National Deworming Day) is given:

1. Once a day
2. Once a month
3. Twice a year
4. Once in 5 years

Answer: 3

Explanation: NDD is observed biannually.

24. Mid-Day Meal Scheme prevents:

1. Vitamin A deficiency
2. Protein-energy malnutrition
3. Blindness
4. Hypertension

Answer: 2

Explanation: Improves nutrition in school children.

25. ICDS beneficiaries include:

1. Children only
2. Children, pregnant women, lactating mothers
3. Only lactating mothers
4. Only adolescents

Answer: 2

Explanation: ICDS provides services to 3 groups.

26. Services given by Anganwadi include:

1. Immunization
2. Health check-up
3. Supplementary nutrition
4. All of the above

Answer: 4

Explanation: All services provided via AWCs.

27. Exclusive breastfeeding promotion comes under:

1. NPCB
2. NIDDCP
3. RCH
4. NACP

Answer: 3

Explanation: RCH includes maternal & child nutrition.

28. IFA supplementation to pregnant women includes:

1. 60 mg iron + 500 mcg folic acid
2. 100 mg iron + 1 mg folic acid
3. 30 mg iron + 300 mcg folic acid
4. 50 mg iron + 1 mg folic acid

Answer: 1

Explanation: Standard IFA tablet.

29. National Iodine Deficiency Disorders Control Programme (NIDDCP) ensures:

1. Salt iodization
2. Polio vaccination
3. HIV testing
4. Anaemia treatment

Answer: 1

Explanation: Iodized salt prevents goiter.

30. Iodized salt should contain:

1. 5 ppm
2. 10 ppm
3. 15 ppm
4. 50 ppm

Answer: 3

Explanation: Minimum 15 ppm at consumption level.

31. National Vector Borne Disease Control Programme includes all EXCEPT:

1. Malaria
2. Dengue
3. Chikungunya
4. HIV

Answer: 4

Explanation: HIV = NACP.

32. Malaria diagnosis gold standard:

1. RDT
2. Thick & Thin smear microscopy
3. ELISA
4. PCR

Answer: 2

Explanation: Microscopy remains gold standard.

33. National Leprosy Eradication Programme cured leprosy by:

1. DOTS
2. MDT (multi-drug therapy)
3. OPV
4. ART

Answer: 2

Explanation: MDT is highly effective for leprosy.

34. ELISA test is mainly used to diagnose:

1. TB
2. HIV
3. Malaria
4. Leprosy

Answer: 2

Explanation: ELISA is screening for HIV.

35. Polio eradication is achieved through:

1. IMNCI
2. Pulse Polio Programme
3. RNTCP
4. RCH-II

Answer: 2

Explanation: Pulse Polio rounds with OPV.

36. AFP surveillance is used for:

1. Malaria
2. HIV
3. Polio
4. TB

Answer: 3

Explanation: Acute flaccid paralysis = polio surveillance tool.

37. Cataract surgery is promoted under:

1. NPCBVI
2. NVBDCP
3. NTEP
4. NACP

Answer: 1

Explanation: NPCBVI reduces blindness.

38. National Mental Health Programme launched in:

1. 1982
2. 1992
3. 2002
4. 2010

Answer: 1

Explanation: One of oldest national health programmes.

39. National Programme for Prevention & Control of Cancer, Diabetes, CVD & Stroke is:

1. NPCDS
2. NCDCP
3. NPCDCS
4. NCM

Answer: 3

Explanation: NPCDCS covers major NCDs.

40. NACO stands for:

1. National AIDS Control Office
2. National Adult Care Office
3. National Accident Care Office
4. None

Answer: 1

Explanation: NACO implements NACP.

41. Under JSY, cash incentives are given to:

1. Only mothers
2. Mothers & ASHA
3. Only newborn
4. Only father

Answer: 2

Explanation: Both mother & ASHA get incentives.

42. RBSK teams consist of:

1. Doctor + ANM
2. 2 doctors + 1 ANM + 1 pharmacist
3. Doctor + nurse + pharmacist
4. ASHA + ANM

Answer: 2

Explanation: Mobile health team.

43. Anemia Mukht Bharat uses:

1. 6×6×6 strategy
2. 5×5 strategy
3. 10×10 strategy
4. None

Answer: 1

Explanation: Covers 6 target groups, 6 interventions, 6 institutions.

44. Intensified Diarrhea Control Fortnight (IDCF) focuses on:

1. ORS + Zinc
2. Antibiotics
3. IV fluids
4. Vaccination

Answer: 1

Explanation: ORS and Zinc for diarrhea control.

45. Kangaroo Mother Care is promoted under:

1. NTEP
2. NACP
3. RMNCH+A
4. NVBDCP

Answer: 3

Explanation: RMNCH+A improves newborn survival.

46. Under NIDDCP, goiter is prevented by:

1. Vaccination
2. Iodized salt
3. Iron tablets
4. Protein powder

Answer: 2

Explanation: Iodine deficiency → goiter.

47. Important indicator for HIV control:

1. Viral load suppression
2. RBC count
3. MUAC
4. BMI

Answer: 1

Explanation: Viral load indicates treatment success.

48. NTEP ensures TB diagnosis using:

1. X-ray only
2. Sputum microscopy + CBNAAT
3. Urine test
4. Blood test

Answer: 2

Explanation: CBNAAT = rapid TB detection method.

49. National Programme for Filariasis control uses:

1. OPV
2. MDA (Mass Drug Administration)
3. Zinc
4. IFA

Answer: 2

Explanation: DEC + Albendazole yearly.

50. National Health Policy latest version:

1. 1983
2. 2002
3. 2017
4. 2020

Answer: 3

Explanation: NHP 2017 — universal health coverage focus.

NURSING ALL ROUNDERS.IN



Maternal Health – 50 MCQs

(ANC, PNC, Danger Signs, Labour, Complications, Partograph, JSY/JSSK)

1. Minimum number of ANC visits recommended by WHO (2016 model):

1. 3
2. 4
3. 5
4. 8

Answer: 4

Explanation: WHO recommends 8-contact ANC model.

2. Minimum ANC visits under Indian guidelines:

1. 2
2. 3
3. 4
4. 8

Answer: 3

Explanation: India still follows minimum 4 ANC visits.

3. First ANC visit should be done:

1. Within 3 months
2. At 4–5 months
3. At 8 months
4. After delivery

Answer: 1

Explanation: First visit during 1st trimester (up to 12 weeks).

4. Fundal height reaches umbilicus at:

1. 12 weeks
2. 20 weeks
3. 28 weeks
4. 36 weeks

Answer: 2

Explanation: At 20 weeks fundus is at the umbilicus.

5. Fetal heart rate can be heard by Doppler at:

1. 6 weeks
2. 10–12 weeks
3. 20 weeks
4. 24 weeks

Answer: 2

Explanation: Doppler detects FHR by 10–12 weeks.

6. Danger sign in pregnancy:

1. Nausea
2. Mild headache
3. Vaginal bleeding
4. Leg cramps

Answer: 3

Explanation: Bleeding is a major danger sign.

7. Preeclampsia is diagnosed with high BP and:

1. Anemia
2. Proteinuria
3. Hyperglycemia
4. Hypocalcemia

Answer: 2

Explanation: Key feature = BP + protein in urine.

8. Eclampsia means:

1. Convulsions in pregnancy
2. High fever
3. Severe anemia
4. Low BP

Answer: 1

Explanation: Eclampsia = preeclampsia + seizures.

9. Preferred drug for eclampsia:

1. Diazepam
2. Magnesium sulphate
3. Phenobarbital
4. Calcium gluconate

Answer: 2

Explanation: MgSO_4 is the drug of choice.

10. Antidote for magnesium sulphate toxicity:

1. Potassium chloride
2. Calcium gluconate
3. Atropine
4. Adrenaline

Answer: 2

Explanation: Calcium gluconate reverses Mg toxicity.

11. Normal duration of pregnancy is:

1. 32 weeks
2. 36 weeks
3. 37–42 weeks
4. 45 weeks

Answer: 3

Explanation: Term = 37–42 weeks.

12. Normal hemoglobin in pregnancy should be at least:

1. 7 g/dL
2. 9 g/dL
3. 11 g/dL
4. 14 g/dL

Answer: 3

Explanation: WHO defines anemia <11 g/dL in pregnancy.

13. Daily IFA dose for pregnant women in India:

1. 30 mg Fe + 250 mcg FA
2. 60 mg Fe + 500 mcg FA
3. 100 mg Fe + 1 mg FA
4. 20 mg Fe + 50 mcg FA

Answer: 2

Explanation: Standard IFA tablet.

14. Calcium supplementation in pregnancy:

1. 200 mg/day
2. 500 mg/day
3. 1200 mg/day
4. 100 mg/day

Answer: 3

Explanation: 1200 mg/day (500 mg tablets BID).

15. TT immunization in pregnancy protects against:

1. Child TB
2. Neonatal tetanus
3. Maternal anemia
4. Malaria

Answer: 2

Explanation: Prevents tetanus in newborn.

16. One TT injection gives protection for:

1. 6 months
2. 1 year
3. 3 years
4. 5 years

Answer: 3

Explanation: TT gives protection for 3 years.

17. Severe anemia in pregnancy is defined as Hb below:

1. 7 g/dL
2. 9 g/dL
3. 10 g/dL
4. 8 g/dL

Answer: 1

Explanation: <7 g/dL = severe.

18. First stage of labour ends with:

1. Delivery of baby
2. Delivery of placenta
3. Full cervical dilation
4. Onset of contractions

Answer: 3

Explanation: Ends at 10 cm dilation.

19. Second stage of labour is from:

1. Onset of labour → full dilation
2. Full dilation → birth of baby
3. Birth of baby → placenta expelled
4. Placenta → postpartum

Answer: 2

Explanation: Second stage = pushing stage.

20. Third stage of labour ends with:

1. Delivery of baby
2. Delivery of placenta
3. Cutting the cord
4. Postpartum exam

Answer: 2

Explanation: Stage ends after placenta expulsion.

21. Duration of first stage in a primigravida:

1. 2 hours
2. 6 hours
3. 10–12 hours
4. 24 hours

Answer: 3

Explanation: Primigravida = slower labour.

22. Normal blood loss during vaginal delivery:

1. 200 ml
2. 250 ml
3. 500 ml
4. 1000 ml

Answer: 3

Explanation: Up to 500 ml is normal.

23. PPH (Postpartum hemorrhage) is blood loss:

1. 300 ml
2. 400 ml
3. 500 ml
4. 700 ml

Answer: 3

Explanation: >500 mL after vaginal delivery.

24. Most common cause of PPH:

1. Trauma
2. Atony
3. Retained placenta
4. Coagulation disorder

Answer: 2

Explanation: Uterine atony = most common.

25. Drug of choice for PPH:

1. Misoprostol
2. Oxytocin
3. Ergometrine
4. Carboprost

Answer: 2

Explanation: Oxytocin is first-line.

26. Best position during labour:

1. Supine
2. Lithotomy
3. Left lateral
4. Prone

Answer: 3

Explanation: Improves blood flow and comfort.

27. Main purpose of the partograph:

1. Detect early complications
2. Determine sex of fetus
3. Diagnose anemia
4. Detect diabetes

Answer: 1

Explanation: Used to monitor labour & detect abnormal progress.

28. Alert line in partograph indicates:

1. Immediate action required
2. Abnormal labour
3. Normal labour progress
4. End of labour

Answer: 3

Explanation: Alert line = acceptable progress.

29. Action line means:

1. Shift to C-section
2. Labour is normal
3. Need intervention
4. No intervention required

Answer: 3

Explanation: Action line → active management needed.

30. Preterm labour occurs before:

1. 28 weeks
2. 32 weeks
3. 34 weeks
4. 37 weeks

Answer: 4

Explanation: Preterm = <37 weeks.

31. Proteinuria in preeclampsia is:

1. 300 mg/24 hrs
2. 100 mg/24 hrs
3. 500 mg/24 hrs
4. 1 g/24 hrs

Answer: 1

Explanation: >300 mg = diagnostic.

32. True labour pains:

1. Pain relieved by rest
2. Irregular
3. Causes cervical dilation
4. Felt in abdomen only

Answer: 3

Explanation: True labour causes actual cervical change.

33. False labour pains:

1. Regular
2. Progressively stronger
3. No cervical dilation

4. Very painful

Answer: 3

Explanation: False pains do not dilate cervix.

34. Fetal distress is indicated by FHR:

1. 110–160 bpm
2. <110 bpm or >160 bpm
3. 100–200 bpm
4. 70–100 bpm

Answer: 2

Explanation: FHR below 110 or above 160 is abnormal.

35. MTP Act allows medical abortion up to:

1. 8 weeks
2. 12 weeks
3. 20 weeks
4. 24 weeks

Answer: 4

Explanation: Current rule allows up to 24 weeks.

36. When Rh-negative mother carries Rh-positive baby:

1. No risk
2. Baby develops anemia
3. Mother develops infection

4. Mother develops antibodies

Answer: 4

Explanation: Mother develops anti-D antibodies.

37. Anti-D injection is given at:

1. 12 weeks
2. 28 weeks + within 72 hrs of delivery
3. Only after delivery
4. Only before pregnancy

Answer: 2

Explanation: Standard anti-D prophylaxis.

38. Lochia rubra lasts for:

1. 1–2 days
2. 3–4 days
3. 5–7 days
4. 10 days

Answer: 3

Explanation: Red discharge up to 7 days.

39. Lochia serosa is:

1. Red
2. Pinkish/brown
3. Whitish

4. Green

Answer: 2

Explanation: Occurs from day 8 to day 14.

40. Lochia alba lasts up to:

1. 7 days
2. 14 days
3. 3–6 weeks
4. 1 year

Answer: 3

Explanation: Whitish discharge up to 6 weeks.

41. Maternal mortality ratio denominator:

1. 1000 live births
2. 10,000 women
3. 100,000 live births
4. Total population

Answer: 3

Explanation: Standard unit.

42. Main cause of maternal death in India:

1. Sepsis
2. Hemorrhage
3. Eclampsia

4. Obstructed labour

Answer: 2

Explanation: PPH is the most common cause.

43. APGAR score is assessed at:

1. 30 sec
2. 1 and 5 minutes
3. 30 minutes
4. Birth only

Answer: 2

Explanation: Standard APGAR timing.

44. APGAR stands for:

1. Appearance, Pulse, Grimace, Activity, Respiration
2. Appearance, Pulse, Growth, Activity, Reflex
3. Activity, Pulse, Growth, Respiration, Reflex
4. None

Answer: 1

Explanation: 5 components scored 0–2.

45. Exclusive breastfeeding should be continued for:

1. 2 months
2. 4 months
3. 6 months

4. 12 months

Answer: 3

Explanation: Standard recommendation is 6 months.

46. WHO defines normal postpartum period as:

1. 2 weeks

2. 4 weeks

3. 6 weeks

4. 12 weeks

Answer: 3

Explanation: Puerperium lasts 6 weeks.

47. Normal fetal presentation:

1. Breech

2. Shoulder

3. Cephalic

4. Footling

Answer: 3

Explanation: Cephalic/head-down is most common.

48. The most reliable sign of pregnancy:

1. Amenorrhea

2. Quickening

3. Fetal heart sounds

4. Breast changes

Answer: 3

Explanation: FHR is a positive sign of pregnancy.

49. Signs of placental separation:

1. Cord length shortens
2. Uterus becomes globular & rises
3. Fresh bleeding
4. None

Answer: 2

Explanation: Signs include uterus hardening, rising, cord lengthening.

50. First step in management of shoulder dystocia:

1. Push head in
2. McRoberts maneuver
3. Give oxytocin
4. Push abdomen

Answer: 2

Explanation: McRoberts = first-line for shoulder dystocia.

NURSING ALL ROUNDER.IN



Child Health – 50 MCQs

(IMNCI, Newborn Care, Growth, Development, Immunization, Illnesses)

1. IMNCI stands for:

1. Integrated Management of Childhood Infections
2. Integrated Management of Newborn and Childhood Illness
3. Integrated Mother and Child Immunization
4. Integrated Medical Care for Infants

Answer: 2

Explanation: IMNCI covers newborn + childhood illness.

2. IMNCI includes age group:

1. 0–1 month only
2. 2 months to 5 years only
3. 0–5 years
4. 1–10 years

Answer: 3

Explanation: IMNCI covers 0–59 months.

3. First essential step after birth is:

1. Cord cutting
2. Vitamin K
3. Drying and warming
4. Weighing

Answer: 3

Explanation: Drying prevents hypothermia.

4. Normal birth weight:

1. 1000 g
2. 1500 g
3. 2000 g
4. 2500 g or more

Answer: 4

Explanation: LBW < 2500 g.

5. Vitamin K dose for newborn:

1. 0.1 mg
2. 0.5 mg
3. 1 mg IM
4. 5 mg

Answer: 3

Explanation: To prevent bleeding in newborns.

6. Apgar score is taken at:

1. Birth
2. 1 and 5 minutes
3. 10 minutes
4. 30 minutes

Answer: 2

Explanation: Standard timing.

7. Early initiation of breastfeeding should be within:

1. 30 minutes
2. 1 hour
3. 4 hours
4. 12 hours

Answer: 2

Explanation: Initiate within 1 hour.

8. Exclusive breastfeeding means:

1. Breast milk + water
2. Breast milk only
3. Milk + honey
4. Milk + water + ORS

Answer: 2

Explanation: Only breastmilk for first 6 months.

9. Complementary feeding starts at:

1. 3 months
2. 4 months
3. 6 months
4. 9 months

Answer: 3

Explanation: Introduced at 6 months.

10. Immunization at birth includes all EXCEPT:

1. BCG
2. OPV-0
3. Hepatitis B-0
4. DPT

Answer: 4

Explanation: DPT starts at 6 weeks.

11. BCG vaccine is given:

1. IM
2. Subcutaneous
3. Intradermal
4. Oral

Answer: 3

Explanation: 0.05 ml (infants), intradermal.

12. BCG scar appears in:

1. 2 days
2. 1 week
3. 3–6 weeks
4. 3 months

Answer: 3

Explanation: Small scar forms after few weeks.

13. OPV is:

1. Killed vaccine
2. Live attenuated oral vaccine
3. IM vaccine
4. DNA vaccine

Answer: 2

Explanation: Live attenuated oral drops.

14. Measles / MR first dose given at:

1. 6 weeks
2. 9 months
3. 1 year
4. 5 years

Answer: 2

Explanation: First MR dose at 9 months.

15. Pentavalent vaccine protects against:

1. DPT + HepB + Hib
2. DPT + Polio
3. HepB + Measles
4. DPT + HepA

Answer: 1

Explanation: Five antigens in one vaccine.

16. Pentavalent vaccine dose schedule:

1. 0, 4, 8 weeks
2. 6, 10, 14 weeks
3. 9, 12, 15 months
4. 2, 4, 6 months

Answer: 2

Explanation: Standard UIP schedule.

17. Vitamin A prophylaxis first dose at:

1. Birth
2. 6 months
3. 9 months
4. 1 year

Answer: 3

Explanation: Given with MR vaccine.

18. Severe acute malnutrition (SAM) MUAC:

1. 12.5 cm
2. 11.5–12.5 cm
3. <11.5 cm

4. 14 cm

Answer: 3

Explanation: MUAC <11.5 cm = SAM.

19. Normal respiratory rate in infant (<1 year):

1. <20
2. <30
3. <50
4. <70

Answer: 3

Explanation: >50 bpm = fast breathing.

20. Fast breathing in 2–12 months age:

1. $\geq 30/\text{min}$
2. $\geq 40/\text{min}$
3. $\geq 50/\text{min}$
4. $\geq 60/\text{min}$

Answer: 3

Explanation: IMNCI cutoff is ≥ 50 .

21. Fast breathing in 1–5 years:

1. ≥ 20
2. ≥ 30

3. ≥ 40

4. ≥ 50

Answer: 3

Explanation: IMNCI cutoff ≥ 40 .

22. Diarrhea is defined as:

1. Loose stools once
2. 3 or more loose stools in 24 hours
3. 1 hard stool
4. Constipation

Answer: 2

Explanation: IMNCI definition.

23. Treatment of some dehydration:

1. IV fluids
2. Zinc only
3. ORS
4. Antibiotics

Answer: 3

Explanation: Plan B = ORS.

24. Zinc dose for diarrhea:

1. 5 mg/day
2. 10 mg/day

3. 20 mg/day

4. 50 mg/day

Answer: 3

Explanation: 20 mg/day (10 mg for <6 months).

25. Severe dehydration treatment:

1. Home fluids

2. ORS only

3. IV fluids (Ringer Lactate)

4. Antibiotics

Answer: 3

Explanation: Plan C = IV fluids.

26. Common cause of pneumonia in children:

1. E. coli

2. S. pneumoniae

3. Candida

4. Rabies virus

Answer: 2

Explanation: Leading bacterial cause.

27. Most common cause of under-five mortality:

1. Malaria

2. Diarrhea

3. Pneumonia

4. HIV

Answer: 3

Explanation: Pneumonia is major cause globally.

28. Growth is measured by:

1. Height & weight

2. Immunization

3. IQ

4. Personality

Answer: 1

Explanation: Growth = physical parameters.

29. Development is measured by:

1. Weight

2. Milestones

3. Height

4. MUAC

Answer: 2

Explanation: Motor, language, social milestones.

30. Birth weight doubles at:

1. 3 months

2. 5 months

3. 6 months
4. 12 months

Answer: 3

Explanation: Doubles by 5–6 months.

31. Birth weight triples at:

1. 6 months
2. 9 months
3. 12 months
4. 2 years

Answer: 3

Explanation: Triples by 1 year.

32. Birth weight quadruples at:

1. 1 year
2. 18 months
3. 2 years
4. 3 years

Answer: 3

Explanation: Four times birth weight by 2 years.

33. Social smile seen at:

1. 2 weeks
2. 4 weeks

3. 6 weeks

4. 3 months

Answer: 3

Explanation: Important early milestone.

34. Neck holding at:

1. 1 month

2. 2 months

3. 3 months

4. 6 months

Answer: 3

Explanation: At 3 months baby has head control.

35. Sitting without support at:

1. 4 months

2. 6 months

3. 9 months

4. 1 year

Answer: 3

Explanation: Sits alone by 8–9 months.

36. Walking independently at:

1. 6 months

2. 9 months

3. 12–15 months
4. 18 months

Answer: 3

Explanation: Walks around 1 year.

37. First tooth appears at:

1. 3 months
2. 6 months
3. 1 year
4. 2 years

Answer: 2

Explanation: Central incisors erupt around 6 months.

38. First immunization at birth:

1. DPT
2. BCG
3. IPV
4. JE vaccine

Answer: 2

Explanation: BCG is birth dose.

39. Delayed milestones may indicate:

1. Normal variation
2. Developmental delay

3. Overfeeding
4. Parental stress

Answer: 2

Explanation: Needs evaluation.

40. Danger sign in a sick child:

1. Cough
2. Fever
3. Lethargy/unconsciousness
4. Cold hands

Answer: 3

Explanation: Lethargy = severe illness.

41. Severe pneumonia sign:

1. Cough
2. Fast breathing
3. Chest indrawing
4. Running nose

Answer: 3

Explanation: Chest indrawing = severe.

42. Vaccine given at 9 months:

1. DPT
2. IPV

3. MR

4. HPV

Answer: 3

Explanation: MR 1st dose.

43. Khuski (measles) caused by:

1. Paramyxovirus

2. H. influenzae

3. Rotavirus

4. Pneumococcus

Answer: 1

Explanation: Measles virus is a paramyxovirus.

44. Rotavirus vaccine protects against:

1. Measles

2. Pneumonia

3. Severe diarrhea

4. Meningitis

Answer: 3

Explanation: Prevents rotavirus diarrhea.

45. JE vaccine protects against:

1. Japanese encephalitis

2. Jaundice

3. Joint pain

4. Measles

Answer: 1

Explanation: JE = mosquito-borne viral disease.

46. Polio eradication tool:

1. ORS

2. OPV campaigns

3. Zinc

4. Vitamin A

Answer: 2

Explanation: Pulse polio programme used OPV.

47. Newborn danger sign:

1. Sneezing

2. Breastfeeding difficulty

3. Soft stool

4. Crying

Answer: 2

Explanation: Poor feeding suggests serious illness.

48. Hypothermia in newborn:

1. $<36.5^{\circ}\text{C}$

2. $<37^{\circ}\text{C}$

3. $<35.5^{\circ}\text{C}$

4. $<34^{\circ}\text{C}$

Answer: 1

Explanation: WHO: $<36.5^{\circ}\text{C}$ = cold stress.

49. Skin-to-skin contact immediately after birth is called:

1. Exclusive breastfeeding

2. KMC

3. NRP

4. IMNCI

Answer: 2

Explanation: Kangaroo Mother Care.

50. RBSK screens children for:

1. Only anemia

2. Only eye disease

3. 4Ds: Defects, Diseases, Deficiencies, Developmental delays

4. Only disabilities

Answer: 3

Explanation: Comprehensive child health screening.

NURSING ALL ROUNDER.IN

1. The first step of the nursing process is:

1. Planning
2. Assessment
3. Diagnosis
4. Evaluation

Answer: 2

Explanation: Nursing process begins with assessment/data collection.

2. Nursing diagnosis is given by:

1. WHO
2. NANDA
3. UNICEF
4. MCI

Answer: 2

Explanation: NANDA provides standard nursing diagnoses.

3. Sterilization destroys:

1. Only bacteria
2. Only viruses
3. All microorganisms including spores
4. Only fungi

Answer: 3

Explanation: Sterilization kills all forms of life including spores.

4. Disinfection destroys:

1. All microbes and spores
2. Only spores
3. Only pathogens, not spores
4. Only viruses

Answer: 3

Explanation: Disinfection kills pathogens but not spores.

5. Autoclaving sterilizes using:

1. Hot air
2. Steam under pressure
3. Chemicals
4. UV light

Answer: 2

Explanation: Standard autoclave: 121°C, 15 psi, 15–20 min.

6. Temperature of autoclave:

1. 100°C
2. 110°C
3. 121°C
4. 200°C

Answer: 3

Explanation: Autoclave uses steam at 121°C.

7. Hot air oven works at:

1. 60°C for 1 hr
2. 100°C for 1 hr
3. 160°C for 2 hrs
4. 200°C for 1 hr

Answer: 3

Explanation: Sterilizes using dry heat.

8. Indicator of autoclave efficiency:

1. TST strips
2. Browne's tubes
3. Biological spore test
4. All of the above

Answer: 4

Explanation: All are autoclave indicators.

9. Chemical used for high-level disinfection:

1. Alcohol
2. Hypochlorite
3. 2% glutaraldehyde
4. Lysol

Answer: 3

Explanation: Glutaraldehyde disinfects endoscopes, instruments.

10. Alcohol concentration best for disinfection:

1. 30%
2. 50%
3. 70%
4. 90%

Answer: 3

Explanation: 70% alcohol is most effective.

11. Biomedical waste color for human anatomical waste:

1. Red
2. Yellow
3. Blue
4. Black

Answer: 2

Explanation: Yellow = human & animal anatomical waste.

12. Syringes (plastic) are disposed in:

1. Yellow
2. Red
3. White
4. Black

Answer: 2

Explanation: Red = contaminated plastic waste.

13. Sharps waste disposed in:

1. Yellow
2. Red
3. White (translucent)
4. Black

Answer: 3

Explanation: White puncture-proof container for sharps.

14. Glassware waste is disposed in:

1. Black
2. Blue
3. Red
4. Yellow

Answer: 2

Explanation: Blue = glass and metallic waste.

15. Black color bin is for:

1. Infected waste
2. Chemical waste
3. General municipal waste
4. Cytotoxic waste

Answer: 3

Explanation: Black = general non-infectious waste.

16. Ideal handwashing time recommended by WHO:

1. 10 seconds
2. 20 seconds
3. 40–60 seconds
4. 2 minutes

Answer: 3

Explanation: WHO: 40–60 seconds for proper handwashing.

17. “Five Moments of Hand Hygiene” introduced by:

1. UNICEF
2. WHO
3. CDC
4. MCI

Answer: 2

Explanation: WHO developed “5 moments”.

18. Best method to prevent hospital infections:

1. PPE
2. Sterilization
3. Hand hygiene
4. Antibiotics

Answer: 3

Explanation: Hand hygiene is the most effective.

19. Medical asepsis includes:

1. Complete sterility
2. Reduction of microorganisms
3. Removing all spores
4. Using sterile gloves only

Answer: 2

Explanation: Medical asepsis = clean technique.

20. Surgical asepsis includes:

1. Clean gloves
2. Handwashing
3. Complete removal of all microbes & spores
4. Only disinfection

Answer: 3

Explanation: Surgical asepsis = sterile technique.

21. First action in case of needle stick injury:

1. Apply ointment
2. Wash with soap & water
3. Cover wound immediately
4. Ignore

Answer: 2

Explanation: Wash area immediately.

22. HIV PEP should be started within:

1. 72 hours
2. 7 days
3. 24 hours
4. 1 month

Answer: 1

Explanation: Best within 2 hours; acceptable up to 72 hours.

23. Duration of HIV PEP:

1. 1 week
2. 2 weeks
3. 28 days
4. 100 days

Answer: 3

Explanation: Full course = 28 days.

24. Universal precautions protect against:

1. HIV
2. HBV
3. HCV
4. All of the above

Answer: 4

Explanation: Protect from all bloodborne pathogens.

25. Biomedical Waste Management Rules latest update:

1. 1998
2. 2011
3. 2016
4. 2020

Answer: 3

Explanation: BMW Rules updated in 2016.

26. Sodium hypochlorite solution strength used for disinfection:

1. 0.1%
2. 0.5%
3. 1%
4. 5%

Answer: 3

Explanation: 1% hypochlorite used for contaminated blood spills.

27. Needle & syringe separation recommended?

1. Yes, always
2. No, dispose without recapping
3. Recap first, then separate
4. Throw in general waste

Answer: 2

Explanation: Do NOT recap needles; dispose directly.

28. Recommended PPE during delivery:

1. Gloves only
2. Gloves + mask
3. Gloves + gown + mask + eye protection
4. No PPE

Answer: 3

Explanation: Delivery requires full PPE.

29. Aseptic technique aims to:

1. Kill all microbes
2. Prevent introduction of pathogens
3. Clean environment only
4. Remove dust

Answer: 2

Explanation: Prevents contamination during procedures.

30. Best place to take pulse in emergency:

1. Radial
2. Brachial
3. Carotid
4. Femoral

Answer: 3

Explanation: Carotid is most reliable in shock.

31. Normal respiration rate in adults:

1. 8–12
2. 12–20
3. 20–30
4. 30–40

Answer: 2

Explanation: Normal adult RR = 12–20/min.

32. Normal body temperature in adults:

1. 35°C
2. 36–37°C
3. 38–39°C
4. 40°C

Answer: 2

Explanation: Normal range 36–37°C.

33. Fowler's position means:

1. Lying flat
2. Head raised 45–60°
3. Head down
4. On stomach

Answer: 2

Explanation: Used for breathing difficulty.

34. Trendelenburg position:

1. Head up, feet down
2. Feet up, head down
3. Side-lying
4. Sitting

Answer: 2

Explanation: Improves venous return.

35. Hospital-acquired infection occurs after:

1. 12 hours of admission
2. 24 hours
3. 48 hours
4. 7 days

Answer: 3

Explanation: Nosocomial infection develops after 48 hrs.

36. Catheter-associated UTI prevented by:

1. Routine antibiotics
2. Daily catheter change
3. Handwashing + closed drainage system
4. Bed rest

Answer: 3

Explanation: Closed drainage prevents infection.

37. Most common hospital-acquired infection:

1. UTI
2. Pneumonia
3. Diarrhea
4. TB

Answer: 1

Explanation: CAUTI is most common.

38. Best method to dispose infected linen:

1. Burn
2. 1% hypochlorite soak
3. Washing with water only
4. Sunlight exposure

Answer: 2

Explanation: Disinfect before washing.

39. Airborne infection isolation prevents:

1. Measles
2. TB
3. Chickenpox
4. All

Answer: 4

Explanation: All diseases spread by airborne droplets.

40. N95 mask used for:

1. TB
2. HIV
3. Hepatitis B
4. Malaria

Answer: 1

Explanation: N95 protects from airborne TB.

41. Best way to prevent surgical site infection:

1. Antibiotics only
2. Proper handwashing & sterile technique
3. Bandage properly
4. Daily dressing

Answer: 2

Explanation: Aseptic technique is key.

42. Normal adult blood pressure:

1. 100/60
2. 120/80
3. 140/90
4. 160/100

Answer: 2

Explanation: Standard normal BP.

43. Ryle's tube insertion position:

1. Supine
2. Sitting with neck flexed
3. Fowler's
4. Trendelenburg

Answer: 2

Explanation: Flexed neck facilitates passage.

44. Best site for IM injection in adults:

1. Deltoid
2. Vastus lateralis
3. Dorsogluteal
4. Ventrogluteal

Answer: 4

Explanation: Ventrogluteal is safest.

45. Maximum volume for IM injection in deltoid:

1. 1 ml
2. 2 ml
3. 5 ml
4. 10 ml

Answer: 2

Explanation: Deltoid can safely take up to 2 ml.

46. Intradermal injection angle:

1. 10–15°
2. 45°
3. 60°
4. 90°

Answer: 1

Explanation: ID injections given at very shallow angle.

47. Subcutaneous injection angle:

1. 10°
2. 45°
3. 60°
4. 90°

Answer: 2

Explanation: Standard angle = 45°.

48. IM injection angle:

1. 10°
2. 20°
3. 45°
4. 90°

Answer: 4

Explanation: IM injections given at 90°.

49. Best practice for medication administration:

1. Right time
2. Right dose
3. Right patient
4. All of the above

Answer: 4

Explanation: 10 rights of medication administration.

50. Last step of the nursing process:

1. Diagnosis
2. Assessment
3. Evaluation
4. Planning

Answer: 3

Explanation: Evaluation checks the effectiveness of interventions.

NURSING ALL ROUNDER.IN



Pharmacology for Nurses – 50 MCQs

(Dosage, Common Drugs, ORS, IFA, Antibiotics, Safety)

1. The study of drugs and their actions is called:

1. Pharmacy
2. Pharmacology
3. Pharmacokinetics
4. Pharmacodynamics

Answer: 2

Explanation: Pharmacology studies drugs, uses, and effects.

2. Pharmacokinetics deals with:

1. What drug does to the body
2. What body does to the drug
3. Drug–drug interactions
4. Pain control

Answer: 2

Explanation: ADME = Absorption, Distribution, Metabolism, Excretion.

3. Pharmacodynamics deals with:

1. Effect of drug on body
2. Drug absorption
3. Excretion of drug
4. Half-life

Answer: 1

Explanation: Mechanism of drug action.

4. First-pass metabolism occurs in:

1. Kidney
2. Liver
3. Lungs
4. Stomach

Answer: 2

Explanation: Oral drugs undergo metabolism by liver before reaching circulation.

5. Route with 100% bioavailability:

1. Oral
2. IM
3. IV
4. Subcutaneous

Answer: 3

Explanation: IV bypasses first-pass metabolism.

6. Drug of choice for fever in children:

1. Aspirin
2. Paracetamol
3. Diclofenac
4. Ibuprofen

Answer: 2

Explanation: Paracetamol is safest for all ages; aspirin avoided in children.

7. Maximum daily dose of paracetamol in adults:

1. 1 g
2. 2 g
3. 3 g
4. 4 g

Answer: 4

Explanation: Above 4 g/day causes hepatotoxicity.

8. ORS stands for:

1. Oral Replacement Salt
2. Oral Rehydration Solution
3. Oral Regeneration Salts
4. Osmotic Rehydration Solution

Answer: 2

Explanation: ORS replaces fluid and electrolytes.

9. A standard ORS packet should be mixed with:

1. 500 ml water
2. 750 ml water
3. 1 liter water
4. 2 liters water

Answer: 3

Explanation: 1 packet + 1 litre clean water.

10. Zinc dose in diarrhea for <6 months:

1. 5 mg/day
2. 10 mg/day
3. 15 mg/day
4. 20 mg/day

Answer: 2

Explanation: <6 months = 10 mg, >6 months = 20 mg.

11. IFA tablet for pregnant women contains:

1. 30 mg iron + 250 mcg folic acid
2. 60 mg iron + 500 mcg folic acid
3. 80 mg iron + 1 mg folic acid
4. 100 mg iron + 1 mg folic acid

Answer: 2

Explanation: National guideline dose.

12. Vitamin A 1st dose at 9 months is:

1. 25,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 2 lakh IU

Answer: 3

Explanation: 1 lakh IU with MR at 9 months.

13. Antibiotic safe in pregnancy:

1. Tetracycline
2. Doxycycline
3. Penicillin
4. Ciprofloxacin

Answer: 3

Explanation: Penicillin and cephalosporins are safe.

14. Tetracycline is avoided in children because:

1. Causes vomiting
2. Causes tooth discoloration
3. Causes diarrhea
4. Causes fever

Answer: 2

Explanation: Causes permanent teeth discoloration.

15. Drug of choice for anaphylaxis:

1. Hydrocortisone
2. Diphenhydramine
3. Adrenaline
4. Atropine

Answer: 3

Explanation: IM adrenaline is first-line.

16. Adrenaline is given:

1. IV
2. IM
3. Oral
4. ID

Answer: 2

Explanation: IM (mid-thigh) preferred in anaphylaxis.

17. Drug of choice for asthma attack:

1. Salbutamol
2. Amoxicillin
3. Paracetamol
4. Atenolol

Answer: 1

Explanation: Salbutamol is a bronchodilator.

18. Oral rehydration solution works by:

1. Reducing diarrhea
2. Increasing sodium absorption
3. Killing bacteria
4. Rehydrating skin only

Answer: 2

Explanation: ORS uses sodium–glucose co-transport.

19. Half-life of a drug means:

1. 50% of drug eliminated
2. 50% digested
3. 50% absorbed
4. 50% metabolized

Answer: 1

Explanation: Time for plasma concentration to reduce by 50%.

20. Side effect of iron tablets:

1. Diarrhea
2. Constipation + black stools
3. Sweating
4. Hair fall

Answer: 2

Explanation: Common side effects.

21. Drug of choice for malaria (*P. falciparum* uncomplicated):

1. Chloroquine
2. ACT (Artemisinin Combination Therapy)
3. Penicillin
4. Fluconazole

Answer: 2

Explanation: ACT is standard regimen.

22. Drug used in TB (first-line):

1. Isoniazid
2. Ciprofloxacin
3. Fluconazole
4. Metronidazole

Answer: 1

Explanation: HRZE = first-line regimen.

23. HRZE stands for:

1. Hydrogen, Ranitidine, Zinc, Erythromycin
2. Isoniazid, Rifampicin, Pyrazinamide, Ethambutol
3. Hydrocortisone, Rifaximin, Zinc, Erythromycin
4. None

Answer: 2

Explanation: First-line TB drugs.

24. Antidote for paracetamol overdose:

1. Atropine
2. Vitamin K
3. N-acetylcysteine
4. Adrenaline

Answer: 3

Explanation: NAC protects liver.

25. ORS solution should be used within:

1. 2 hours
2. 6 hours
3. 12 hours
4. 24 hours

Answer: 4

Explanation: Discard after 24 hours.

26. Drug used in severe dehydration:

1. ORS
2. IV Normal saline
3. IV Ringer lactate
4. Distilled water

Answer: 3

Explanation: RL is preferred first-line.

27. Which drug causes hypoglycemia?

1. Metformin
2. Glibenclamide (sulfonylurea)
3. Insulin
4. Both 2 & 3

Answer: 4

Explanation: Sulfonylureas & insulin cause low sugar.

28. Insulin is given via:

1. Oral
2. IM
3. Subcutaneous
4. Intradermal

Answer: 3

Explanation: SC route is standard.

29. Preferred site for insulin injection:

1. Thigh
2. Abdomen
3. Deltoid
4. Buttocks

Answer: 2

Explanation: Abdomen provides best absorption.

30. Common side effect of aminoglycosides:

1. Nephrotoxicity
2. Hair loss
3. Constipation
4. Skin rash

Answer: 1

Explanation: Also causes ototoxicity.

31. Drug used to treat hypertension in pregnancy:

1. ACE inhibitors
2. Methyldopa
3. Enalapril
4. Propranolol

Answer: 2

Explanation: Methyldopa is safe in pregnancy.

32. Oral contraceptive pills contain:

1. Estrogen + progesterone
2. Testosterone
3. Estrogen only
4. Progesterone only

Answer: 1

Explanation: Combined pills contain both.

33. Emergency contraception must be taken within:

1. 24 hours
2. 48 hours
3. 72 hours
4. 7 days

Answer: 3

Explanation: Within 72 hours for best effect.

34. Dose of folic acid for preconception:

1. 100 mcg
2. 200 mcg
3. 400 mcg
4. 1 mg

Answer: 3

Explanation: Prevents neural tube defects.

35. Drug for worm infestation (deworming):

1. Ciprofloxacin
2. Albendazole
3. Paracetamol
4. Ibuprofen

Answer: 2

Explanation: Albendazole 400 mg.

36. Drug of choice for bacterial diarrhea (cholera):

1. Ceftriaxone
2. Doxycycline
3. Paracetamol
4. Vitamin A

Answer: 2

Explanation: Doxycycline used for cholera (adults).

37. Treatment of UTI:

1. Amoxicillin
2. Ciprofloxacin
3. Nitrofurantoin
4. Fluconazole

Answer: 3

Explanation: Nitrofurantoin is first-line.

38. Metronidazole is used in:

1. Amoebiasis
2. Pneumonia
3. TB
4. HIV

Answer: 1

Explanation: Drug of choice for amoebiasis.

39. Side effect of steroids:

1. Hypotension
2. Immunosuppression
3. Weight loss
4. Hypoglycemia

Answer: 2

Explanation: Steroids reduce immunity.

40. Drug for severe pain:

1. Paracetamol
2. Diclofenac
3. Morphine
4. Ibuprofen

Answer: 3

Explanation: Morphine = opioid analgesic.

41. Safe painkiller in pregnancy:

1. Ibuprofen
2. Diclofenac
3. Paracetamol
4. Aspirin

Answer: 3

Explanation: Paracetamol is safest.

42. Antidote for benzodiazepine overdose:

1. Naloxone
2. Flumazenil
3. Atropine
4. Protamine

Answer: 2

Explanation: Flumazenil reverses benzodiazepine effects.

43. Naloxone is an antidote for:

1. Paracetamol
2. Morphine/opioid overdose
3. Insulin overdose
4. Iron toxicity

Answer: 2

Explanation: Naloxone reverses opioid effects.

44. Iron toxicity treated with:

1. NAC
2. Deferoxamine
3. Atropine
4. Naloxone

Answer: 2

Explanation: Deferoxamine chelates iron.

45. Drug contraindicated in asthma:

1. Salbutamol
2. Ipratropium
3. NSAIDs like aspirin
4. Steroids

Answer: 3

Explanation: Aspirin can trigger asthma.

46. Drug of choice for epilepsy:

1. Paracetamol
2. Phenytoin
3. Caffeine
4. Aspirin

Answer: 2

Explanation: Phenytoin is widely used anticonvulsant.

47. Common drug for hypertension:

1. Metformin
2. Atenolol
3. Vitamin C
4. Zinc

Answer: 2

Explanation: Atenolol = beta blocker.

48. Oral drug for type-2 diabetes:

1. Insulin
2. Metformin
3. Hydrocortisone
4. Diazepam

Answer: 2

Explanation: Metformin = first-line drug for T2DM.

49. Before giving digoxin, nurse must check:

1. Temperature
2. Pulse
3. Weight
4. Respiratory rate

Answer: 2

Explanation: Do NOT give if pulse <60 bpm.

50. Rights of medication administration include all EXCEPT:

1. Right drug
2. Right time
3. Right doctor
4. Right patient

Answer: 3

Explanation: There is no “right doctor”; others are correct.

NURSING ALL ROUNDER.IN



Epidemiology & Surveillance – 50 MCQs

(Incidence, Prevalence, Outbreak, Surveillance, Triad, Transmission)

1. Epidemiology is the study of:

1. Hospitals
2. Distribution & determinants of health events
3. Medicines
4. Nursing care

Answer: 2

Explanation: Epidemiology = study of disease patterns in population.

2. Epidemiological triad includes:

1. Host, agent, environment
2. Doctor, nurse, patient
3. Air, water, food
4. Virus, bacteria, fungi

Answer: 1

Explanation: All diseases arise from interactions of triad.

3. Incidence measures:

1. New cases
2. All cases
3. Only old cases
4. Deaths

Answer: 1

Explanation: Incidence counts new cases in a time period.

4. Prevalence measures:

1. Only new cases
2. Old + new cases
3. Only deaths
4. Only chronic cases

Answer: 2

Explanation: Prevalence = burden of disease.

5. If incidence increases but duration decreases, prevalence:

1. Increases
2. Decreases
3. Constant
4. Doubles

Answer: 2

Explanation: Short duration → fewer cases remain → low prevalence.

6. Epidemic means:

1. Disease present at constant level
2. Cases more than expected
3. Worldwide spread
4. Single case

Answer: 2

Explanation: Epidemic = sudden rise of cases.

7. Endemic means:

1. Continuous presence in area
2. Sudden rise
3. Worldwide

4. Zero cases

Answer: 1

Explanation: Endemic = usual constant level.

8. Pandemic means:

1. Local outbreak
2. Multi-country spread
3. Village outbreak

4. No cases

Answer: 2

Explanation: Pandemic = worldwide epidemic.

9. Sporadic means:

1. Zero cases
2. Occurs occasionally
3. Constant presence
4. Only in children

Answer: 2

Explanation: Sporadic = irregular cases.

10. Attack rate is used in:

1. Chronic diseases
2. Epidemic investigation
3. Long-term prevalence studies
4. Infant mortality

Answer: 2

Explanation: Attack rate measures rapid spread.

11. Secondary attack rate indicates:

1. Transmission within a household
2. Total cases
3. Sporadic cases
4. Mortality

Answer: 1

Explanation: Measures spread among contacts.

12. Basic reproductive number (R_0) indicates:

1. Number of babies born
2. Number of secondary cases from one case
3. Deaths in epidemic
4. Incubation period

Answer: 2

Explanation: $R_0 > 1 \rightarrow$ spread continues.

13. Herd immunity depends on:

1. Vaccination coverage
2. Literacy
3. Population size
4. Blood group

Answer: 1

Explanation: Higher coverage = stronger herd immunity.

14. Most sensitive indicator of community health:

1. CDR
2. IMR
3. TFR
4. MMR

Answer: 2

Explanation: IMR reflects overall health conditions.

15. Iceberg phenomenon indicates:

1. High prevalence
2. Many hidden cases
3. All cases visible
4. No subclinical cases

Answer: 2

Explanation: Majority cases are subclinical/undetected.

16. Iceberg phenomenon best seen in:

1. Measles
2. Hypertension
3. Diarrhea
4. Rabies

Answer: 2

Explanation: Many cases are undiagnosed.

17. Incubation period means:

1. Infection → first symptom
2. Symptom → death
3. Treatment → cure
4. Recovery → relapse

Answer: 1

Explanation: Latent time before symptoms.

18. Latent period means:

1. Symptom phase
2. Infection → period of infectiousness
3. First symptom → recovery
4. Cure → immunity

Answer: 2

Explanation: Latent period = interval before infectivity.

19. Generation time is:

1. Incubation period
2. Infection → peak infectivity
3. Recovery period
4. Incubation + latent period

Answer: 2

Explanation: Relates to disease transmission.

20. Best indicator for effectiveness of TB programme:

1. Incidence
2. Prevalence
3. Cure rate
4. Death rate

Answer: 3

Explanation: Cure rate = key measure under NTEP.

21. Case fatality rate indicates:

1. Morbidity
2. Lethality/virulence
3. Recovery
4. Transmission

Answer: 2

Explanation: High CFR → high virulence.

22. Sentinel surveillance monitors:

1. All cases
2. Special selected sites
3. Entire population
4. Rare diseases only

Answer: 2

Explanation: Only selected institutions.

23. Active surveillance means:

1. Routine reporting
2. Health staff actively search cases
3. No reporting
4. Community report only

Answer: 2

Explanation: More accurate than passive.

24. Passive surveillance means:

1. Health workers search
2. Routine reporting by facilities
3. Zero reporting
4. Door-to-door search

Answer: 2

Explanation: Most common method.

25. Zero reporting means:

1. Report only positive cases
2. Report even when cases are zero
3. Do not report
4. Report weekly

Answer: 2

Explanation: Ensures no missed cases.

26. Integrated Disease Surveillance Programme (IDSP) started in:

1. 1998
2. 2002
3. 2004
4. 2008

Answer: 3

Explanation: IDSP launched in 2004.

27. IDSP reports weekly using:

1. P forms
2. Y forms
3. S, P, L forms
4. C forms

Answer: 3

Explanation: S = syndromic, P = presumptive, L = lab.

28. First step in outbreak investigation:

1. Collect samples
2. Confirm outbreak
3. Prepare line list
4. Notify authorities

Answer: 2

Explanation: First confirm whether outbreak exists.

29. Epidemic curve helps in:

1. Diagnosing individual cases
2. Determining type of epidemic
3. Finding blood group
4. Finding socioeconomic status

Answer: 2

Explanation: Helps identify common source/progressive epidemics.

30. Common source outbreak means:

1. Person-to-person spread
2. Continuous source exposure
3. Multiple sources
4. Foodborne/waterborne

Answer: 4

Explanation: Caused by contaminated food/water.

31. Propagated epidemic means:

1. Person-to-person spread
2. Foodborne
3. Waterborne
4. Airborne only

Answer: 1

Explanation: Multiple peaks in epidemic curve.

32. Line listing is used for:

1. Population census
2. Outbreak investigation
3. Hospital inventory
4. Nursing notes

Answer: 2

Explanation: Basic table for cases.

33. Primary case is:

1. First human infected
2. Secondary infection
3. Carrier
4. Index case

Answer: 1

Explanation: Primary = first case in population.

34. Index case means:

1. First case identified
2. First case infected
3. Last case
4. Carrier

Answer: 1

Explanation: Index = first detected case (not necessarily first infected).

35. Contact means:

1. Anyone in country
2. Person exposed to case
3. Healthcare worker only
4. None

Answer: 2

Explanation: Anyone who was exposed.

36. Isolation is used for:

1. Healthy people
2. Sick infectious cases
3. All pregnant women
4. All children

Answer: 2

Explanation: For infected individuals.

37. Quarantine means:

1. Separate sick person
2. Separate exposed but healthy persons
3. Hospitalize all
4. Immunize contacts

Answer: 2

Explanation: Quarantine = restrict exposed individuals.

38. Disinfection destroys:

1. All microorganisms & spores
2. Only spores
3. Pathogens except spores
4. Only viruses

Answer: 3

Explanation: Does not kill spores.

39. Sterilization destroys:

1. Bacteria only
2. All microbes including spores
3. Only viruses
4. Only parasites

Answer: 2

Explanation: Complete destruction.

40. Surveillance in polio is based on:

1. AFP surveillance
2. HIV testing
3. Sputum microscopy
4. X-ray

Answer: 1

Explanation: Acute flaccid paralysis surveillance.

41. R_0 less than 1 indicates:

1. Disease will spread
2. Disease will die out
3. Epidemic
4. Pandemic

Answer: 2

Explanation: $R_0 < 1$ means infection will eventually disappear.

42. Best method to control cholera:

1. Antibiotics only
2. Safe water supply
3. Vaccination only
4. ORS

Answer: 2

Explanation: Clean water breaks transmission.

43. Carrier state is important in:

1. TB
2. Measles
3. Typhoid
4. Rabies

Answer: 3

Explanation: Chronic carriers spread typhoid.

44. Example of zoonotic disease:

1. TB
2. Diabetes
3. Rabies
4. Hypertension

Answer: 3

Explanation: Spread from animals → humans.

45. Best control measure for dengue:

1. Antibiotics
2. Vector control
3. Vaccination
4. Mosquito nets only

Answer: 2

Explanation: Aedes control is key.

46. Reservoir of infection means:

1. Temporary host
2. Habitat where organism survives
3. Hospital room
4. Nursing home only

Answer: 2

Explanation: Living or non-living reservoir.

47. Most common reservoir for TB:

1. Dogs
2. Cattle
3. Humans
4. Water

Answer: 3

Explanation: TB spreads human → human.

48. Host factor EXCEPT:

1. Age
2. Immunity
3. Nutrition
4. Pathogen

Answer: 4

Explanation: Pathogen = agent, not host.

49. Control measure for airborne disease:

1. Handwashing
2. Sunlight
3. Ventilation + masks
4. Food safety

Answer: 3

Explanation: TB, measles spread via air.

50. Ultimate aim of epidemiology:

1. Diagnose disease
2. Treat disease
3. Prevent & control disease
4. Only research

Answer: 3

Explanation: Prevention is the main goal.

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Environmental Health & Sanitation – 50 MCQs

(Water, Waste, Vectors, Pollution, Housing Standards)

1. Safe water is defined as water free from:

1. Chemicals only
2. Pathogens only
3. Pathogens + harmful chemicals
4. Salts only

Answer: 3

Explanation: Safe water must be free from biological + chemical hazards.

2. Most reliable indicator of water contamination:

1. pH
2. Turbidity
3. E. coli
4. Hardness

Answer: 3

Explanation: E. coli indicates fecal contamination.

3. WHO recommended safe level of fluoride in water:

1. 0.1 ppm
2. 0.5 ppm
3. 1 ppm
4. 10 ppm

Answer: 3

Explanation: Optimal fluoride = 1 ppm.

4. Fluorosis is caused by:

1. Iron
2. Calcium
3. Excess fluoride
4. Lack of fluoride

Answer: 3

Explanation: Excess fluoride → mottled teeth.

5. Ideal chlorine concentration in water for disinfection:

1. 0.2–0.5 mg/L
2. 1 mg/L
3. 5 mg/L
4. 10 mg/L

Answer: 1

Explanation: Residual chlorine should be 0.2–0.5 mg/L.

6. Bleaching powder contains:

1. Sodium hypochlorite
2. Calcium hypochlorite
3. Sodium fluoride
4. Iodine

Answer: 2

Explanation: Bleaching powder = $\text{Ca}(\text{OCl})_2$.

7. Method of household water purification:

1. Boiling
2. Chlorination
3. Filtration
4. All of the above

Answer: 4

Explanation: All are household methods.

8. Boiling kills:

1. Only bacteria
2. Only viruses
3. All pathogens except spores
4. Spores

Answer: 3

Explanation: Boiling does not kill spores.

9. Best method for large-scale water purification:

1. Chlorination
2. Boiling
3. Filtration
4. UV treatment

Answer: 1

Explanation: Chlorination most cost-effective.

10. Turbidity of drinking water should be less than:

1. 1 NTU
2. 5 NTU
3. 10 NTU
4. 50 NTU

Answer: 2

Explanation: Ideally <5 NTU for safe water.

11. Deep well water is usually:

1. Highly polluted
2. Bacteriologically safe
3. Turbid
4. Muddy

Answer: 2

Explanation: Deep wells are safer than shallow wells.

12. Hardness of water is due to:

1. Iron
2. Calcium & Magnesium
3. Copper
4. Nitrogen

Answer: 2

Explanation: Ca & Mg cause permanent and temporary hardness.

13. Best method to remove temporary hardness:

1. Boiling
2. Chlorination
3. Storage
4. Freezing

Answer: 1

Explanation: Boiling removes bicarbonates.

14. Biological Oxygen Demand (BOD) measures:

1. Chemicals
2. Organic matter
3. Microorganisms
4. Oxygen content only

Answer: 2

Explanation: BOD indicates organic pollution.

15. High BOD =

1. Pure water
2. High pollution
3. Soft water
4. High chlorine

Answer: 2

Explanation: More BOD means more organic pollution.

16. Excreta disposal in rural areas commonly uses:

1. Septic tank
2. Open defecation
3. Pit latrine
4. Sewerage

Answer: 3

Explanation: Pit latrine is economical, suitable in rural areas.

17. Sanitary landfill is used for:

1. Sewage
2. Solid waste disposal
3. Rainwater storage
4. Industrial waste only

Answer: 2

Explanation: Modern method for municipal waste.

18. Composting means:

1. Burning waste
2. Converting organic waste into manure
3. Chemical disposal
4. Drying waste

Answer: 2

Explanation: Composting reduces solid waste volume.

19. Biomedical waste comes under which colour system?

1. Yellow, red, white, blue
2. Black, green, yellow
3. Brown, red, green
4. Blue only

Answer: 1

Explanation: BMW Rules 2016.

20. Most common vector for malaria:

1. Aedes
2. Anopheles
3. Culex
4. Sandfly

Answer: 2

Explanation: Female Anopheles mosquito.

21. Vector for filariasis:

1. Aedes
2. Culex
3. Anopheles
4. Tsetse fly

Answer: 2

Explanation: Culex spreads filariasis.

22. Dengue is spread by:

1. Anopheles
2. Aedes aegypti
3. Culex pipiens
4. Sandfly

Answer: 2

Explanation: Aedes mosquito.

23. Kala-azar spread by:

1. Housefly
2. Sandfly
3. Blackfly
4. Aedes

Answer: 2

Explanation: Phlebotomus sandfly.

24. Plague spread by:

1. Mosquito
2. Rat flea
3. Louse
4. Housefly

Answer: 2

Explanation: Xenopsylla cheopis (rat flea).

25. Most effective method for vector control:

1. Fogging
2. Environmental sanitation
3. Vaccination
4. Noise control

Answer: 2

Explanation: Remove breeding sites.

26. Rat control uses:

1. Paris green
2. Traps
3. Warfarin
4. All

Answer: 4

Explanation: All used for rodent control.

27. Noise pollution acceptable limit (daytime in residential area):

1. 35 dB
2. 45 dB
3. 55 dB
4. 75 dB

Answer: 3

Explanation: Residential area limit = 55 dB.

28. Most common cause of air pollution:

1. Vehicles
2. Agriculture
3. Rivers
4. Trees

Answer: 1

Explanation: Vehicular emissions major contributor.

29. Particulate matter PM_{2.5} is dangerous because:

1. Easily visible
2. Penetrates deep lungs
3. Removes germs
4. Heavy particles

Answer: 2

Explanation: Small particles cross alveoli → bloodstream.

30. Main pollutant responsible for global warming:

1. SO₂
2. NO₂
3. CO₂
4. Ozone

Answer: 3

Explanation: CO₂ is major greenhouse gas.

31. Safe housing includes all EXCEPT:

1. Good ventilation
2. Damp walls
3. Sunlight
4. Adequate space

Answer: 2

Explanation: Dampness causes mold growth.

32. Ideal room ventilation standard:

1. 2 air changes/hour
2. 5 air changes/hour
3. 10 air changes/hour
4. None

Answer: 2

Explanation: 5–6 air changes per hour recommended.

33. Most common indoor air pollutant:

1. CO₂
2. CO (carbon monoxide)
3. Nitrogen
4. Helium

Answer: 2

Explanation: CO from incomplete combustion.

34. Best way to prevent ARI in children:

1. ORS
2. Proper ventilation
3. Deworming
4. Vitamin D

Answer: 2

Explanation: Poor ventilation increases ARI.

35. Solar disinfection method for water is called:

1. Solar boil
2. AQUA method
3. SODIS
4. SOCO

Answer: 3

Explanation: SODIS uses sunlight.

36. Most reliable way to prevent cholera:

1. Antibiotics
2. Safe drinking water
3. ORS
4. Zinc

Answer: 2

Explanation: Cholera → water contamination.

37. Jaundice outbreak commonly associated with:

1. Mosquito bite
2. Contaminated water (hepatitis A/E)
3. Dirty air
4. Noise

Answer: 2

Explanation: Hepatitis A/E spread through fecal–oral route.

38. Best way to prevent mosquito breeding:

1. Mosquito coil
2. Repellents
3. Environmental sanitation
4. Fogging

Answer: 3

Explanation: Remove stagnant water.

39. Method to measure air quality:

1. BOD
2. PM2.5 index
3. Turbidity
4. pH

Answer: 2

Explanation: PM2.5 and AQI used for air quality.

40. Hard water affects:

1. Digestion
2. Teeth
3. Soap efficiency
4. Immunity

Answer: 3

Explanation: Hard water reduces soap lather.

41. Septic tank needs cleaning every:

1. 6 months
2. 1 year
3. 2–3 years
4. 10 years

Answer: 3

Explanation: Sludge removal required periodically.

42. Most common cause of food poisoning:

1. Salmonella
2. HBV
3. TB
4. Measles

Answer: 1

Explanation: Salmonella is common pathogen.

43. Food adulteration is tested under:

1. PFA Act
2. IPC
3. BMW Act
4. None

Answer: 1

Explanation: Prevention of Food Adulteration Act.

44. Ideal disposal for dead animals:

1. Burning
2. Deep burial
3. Composting
4. Sewer

Answer: 2

Explanation: Deep burial prevents contamination.

45. Fecal–oral transmission occurs in:

1. Malaria
2. Cholera
3. Rabies
4. Dengue

Answer: 2

Explanation: Cholera spreads via contaminated water.

46. Ozone layer protects against:

1. Infrared rays
2. UV radiation
3. Radio waves
4. Sound waves

Answer: 2

Explanation: Ozone absorbs UV-B rays.

47. Greenhouse effect caused by:

1. CO₂
2. CFC
3. Methane
4. All

Answer: 4

Explanation: All greenhouse gases trap heat.

48. Incineration used for:

1. General waste
2. Plastic waste
3. Biomedical waste (yellow category)
4. Food waste

Answer: 3

Explanation: Incineration used for anatomical & infectious waste.

49. Most common insecticide for mosquito control:

1. DDT
2. Lime
3. Sulfur
4. Baking soda

Answer: 1

Explanation: DDT used for indoor residual spray.

50. Ultimate aim of environmental health:

1. Reduce pollution
2. Promote healthy environment
3. Control vectors
4. Improve sanitation only

Answer: 2

Explanation: Aim is overall environmental well-being.

NURSING ALL ROUNDER.IN

 Behavioural Science & Health Education – 50 MCQs

(Communication, counselling, psychology, behaviour change, motivation)

1. Behavioural science mainly deals with:

1. Human behaviour
2. Microorganisms

3. Nutrition
4. Pharmacology

Answer: 1

Explanation: It studies human behaviour and factors influencing it.

2. The process of passing information from one person to another is:

1. Counselling
2. Communication
3. Motivation
4. Leadership

Answer: 2

Explanation: Communication = exchange of information.

3. In two-way communication:

1. Only sender speaks
2. Only receiver speaks
3. Both sender and receiver interact
4. None

Answer: 3

Explanation: Two-way communication = interaction.

4. Most effective method of health education:

1. Lecture
2. Group discussion

3. Mass media

4. Posters

Answer: 2

Explanation: Interactive methods are most effective.

5. Barrier to communication:

1. Noise

2. Clarity

3. Proper tone

4. Feedback

Answer: 1

Explanation: Noise prevents message reception.

6. Non-verbal communication includes:

1. Words

2. Body language

3. Letters

4. Emails

Answer: 2

Explanation: Includes gestures, facial expressions.

7. Expecting illness before it occurs is:

1. Prevention

2. Anticipatory guidance

3. Counselling

4. Motivation

Answer: 2

Explanation: Anticipatory guidance = predicting future needs.

8. Best method for teaching illiterate people:

1. Books

2. Radio

3. Demonstration

4. Posters with text

Answer: 3

Explanation: Demonstration helps learners without literacy.

9. IEC stands for:

1. Information, Education, Communication

2. Integrated Environmental Care

3. International Education Committee

4. Indian Educational Council

Answer: 1

Explanation: IEC improves awareness.

10. BCC stands for:

1. Behaviour Change Communication

2. Basic Community Care

3. Best Counselling Concept
4. Behaviour Counselling Centre

Answer: 1

Explanation: BCC focuses on behaviour change.

11. Health belief model is used to understand:

1. Community nutrition
2. Personal health behaviour
3. Hospital finance
4. Drug dosages

Answer: 2

Explanation: Explains why people take health actions.

12. Motivation is:

1. Force that drives behaviour
2. Health education
3. Communication tool
4. Mass media

Answer: 1

Explanation: Motivation = internal driving force.

13. Maslow's hierarchy identifies:

1. Communication methods
2. Human needs

3. Disease causation

4. Learning styles

Answer: 2

Explanation: Pyramid of human needs.

14. Basic need according to Maslow:

1. Safety

2. Love

3. Physiological

4. Esteem

Answer: 3

Explanation: Food, water, air = base needs.

15. Reinforcement strengthens:

1. Fear

2. Motivation

3. Behaviour

4. Memory only

Answer: 3

Explanation: Reinforcement increases likelihood of behaviour.

16. Cognitive domain deals with:

1. Skills

2. Attitude

3. Knowledge

4. Emotions

Answer: 3

Explanation: Cognitive = understanding & knowledge.

17. Psychomotor domain deals with:

1. Skills

2. Values

3. Emotions

4. Attitude

Answer: 1

Explanation: Psychomotor = motor skills.

18. Affective domain deals with:

1. Knowledge

2. Skills

3. Attitude & feelings

4. Body posture

Answer: 3

Explanation: Affective = emotion-based learning.

19. Best method to change behaviour:

1. Mass media

2. Counselling (one-to-one)

3. Posters

4. Lectures

Answer: 2

Explanation: Counselling provides personalised guidance.

20. Active listening means:

1. Interrupting

2. Judging

3. Listening fully with feedback

4. Speaking

Answer: 3

Explanation: Active listening involves attention + responses.

21. Rapport building is essential in:

1. Counselling

2. Record keeping

3. Lab test

4. Vaccination

Answer: 1

Explanation: Builds trust with client.

22. Fear appeals in health messages may cause:

1. High compliance always

2. Denial & resistance

3. Strong behaviour change
4. Always positive result

Answer: 2

Explanation: Too much fear reduces acceptance.

23. Feedback in communication helps to:

1. Close communication
2. Understand message received correctly
3. Increase noise
4. Control sender

Answer: 2

Explanation: Feedback confirms clarity.

24. Interpersonal communication occurs between:

1. TV & viewer
2. Two or more people
3. Poster & audience
4. Radio & listener

Answer: 2

Explanation: IPC improves trust.

25. Mass communication includes:

1. Family talk
2. Lecture

3. TV, radio, newspapers

4. Counselling

Answer: 3

Explanation: Reaches large population.

26. Key element of communication:

1. Sender

2. Message

3. Channel

4. All

Answer: 4

Explanation: All elements required.

27. One-way communication disadvantage:

1. Fast

2. No feedback

3. Saves time

4. Attractive

Answer: 2

Explanation: One-way lacks feedback.

28. Example of formal communication:

1. Gossip

2. Notice board

3. Informal chat

4. Rumours

Answer: 2

Explanation: Written official communication.

29. Example of informal communication:

1. Notice

2. Rumours

3. Reports

4. Meeting agenda

Answer: 2

Explanation: Informal = grapevine.

30. Empathy means:

1. Feeling sad for someone

2. Understanding others' feelings

3. Ignoring feelings

4. Judging someone

Answer: 2

Explanation: Empathy = emotional understanding.

31. Key principle of counselling:

1. Judgement

2. Confidentiality

3. Criticism

4. Authority

Answer: 2

Explanation: Confidentiality builds trust.

32. Health education aims at:

1. Awareness

2. Attitude change

3. Behaviour change

4. All

Answer: 4

Explanation: Health education focuses on knowledge + behaviour change.

33. Reinforcement of health messages increases:

1. Fear

2. Forgetfulness

3. Adoption of behaviour

4. Confusion

Answer: 3

Explanation: Repetition improves recall.

34. Communication noise includes:

1. Horns

2. Illness

3. Poor understanding

4. All

Answer: 4

Explanation: Noise includes physical, emotional & semantic.

35. Group discussion advantage:

1. Less participation

2. No interaction

3. Participants share ideas

4. Only leader talks

Answer: 3

Explanation: Best for adult learning.

36. Demonstration method helps in:

1. Attitude

2. Skill learning

3. Knowledge only

4. Behaviour only

Answer: 2

Explanation: Demonstration teaches practical skills.

37. Example of audiovisual aid:

1. Chalk

2. Book

3. Video

4. Chair

Answer: 3

Explanation: Combines audio + visual.

38. Peer education effectively used for:

1. Older adults

2. Adolescents

3. Infants

4. Elderly

Answer: 2

Explanation: Adolescents respond well to peers.

39. Health education in schools focuses on:

1. Hygiene

2. Nutrition

3. Safety

4. All

Answer: 4

Explanation: Schools cover all health areas.

40. KAP stands for:

1. Knowledge, Attitude, Practice

2. Knowledge, Action, Performance

3. Kids, Adults, Parents

4. Key Action Plan

Answer: 1

Explanation: KAP surveys measure behaviour.

41. Best method for teaching about ORS preparation:

1. Lecture

2. Demonstration

3. Poster

4. Radio

Answer: 2

Explanation: Demonstration improves skill retention.

42. PHC field workers mainly use:

1. Mass media

2. Interpersonal communication

3. Research

4. Laws

Answer: 2

Explanation: IPC is most effective.

43. One-to-one counselling used for:

1. HIV testing

2. Diabetes education

3. Family planning

4. All

Answer: 4

Explanation: Required for sensitive issues.

44. Pictorial posters are useful for:

1. Educated population

2. Illiterate population

3. Rich population

4. Doctors only

Answer: 2

Explanation: Images communicate without text.

45. Fear approach used cautiously because:

1. Always effective

2. May lead to denial

3. Makes people laugh

4. Not allowed legally

Answer: 2

Explanation: Fear can cause resistance.

46. "Rumor" spreads through:

1. Formal channels

2. Informal communication

3. Radio

4. Book

Answer: 2

Explanation: Grape-vine communication.

47. Health education messages should be:

1. Long & complex

2. Short, simple, clear

3. Only technical

4. Emotional

Answer: 2

Explanation: Easy-to-understand messages are best.

48. Effective communication requires:

1. Listening

2. Clarity

3. Feedback

4. All

Answer: 4

Explanation: All are essential.

49. Psychology is the study of:

1. Plants

2. Human mind & behaviour

3. Blood

4. Bones

Answer: 2

Explanation: Psychology explains behaviour.

50. Final goal of health education:

1. Knowledge only

2. Good attitude only

3. Behaviour change

4. Entertainment

Answer: 3

Explanation: Aim = sustained healthy behaviour.

NURSING ALL ROUND.IN



National Health Programmes – 50 MCQs

(NHM, RMNCH+A, Immunization, TB, HIV, NCD, Nutrition, Vector Control)

1. NHM stands for:

1. National Health Mission

2. National Hygiene Mission

3. National Hospital Mission

4. National Help Mission

Answer: 1

Explanation: NHM = umbrella programme covering RMNCH+A & NUHM.

2. NHM launched in:

1. 2002
2. 2005
3. 2010
4. 2020

Answer: 2

Explanation: Launched in 2005.

3. ASHA workers are selected under:

1. NRHM
2. NACP
3. NPCB
4. NPCDCS

Answer: 1

Explanation: Part of NRHM (rural component of NHM).

4. Services under JSSK are:

1. Free delivery
2. Free drugs
3. Free diagnostics & transport

4. All

Answer: 4

Explanation: JSSK ensures free maternal & newborn care.

5. JSY provides:

1. Free food
2. Cash incentives for institutional delivery
3. Free ambulance
4. Free home visits

Answer: 2

Explanation: JSY promotes safe institutional deliveries.

6. RMNCH+A includes 'A' meaning:

1. ASHA
2. Adolescents
3. Acute care
4. Advanced care

Answer: 2

Explanation: "A" = adolescents.

7. Vaccine-preventable diseases controlled by:

1. JSSK
2. UIP
3. NPCB

4. NACP

Answer: 2

Explanation: UIP = vaccination programme.

8. Pulse Polio aims to eradicate:

1. TB
2. HIV
3. Polio
4. Malaria

Answer: 3

Explanation: Door-to-door OPV/IPV campaign.

9. AFP surveillance is used for:

1. HIV
2. Polio
3. Diarrhea
4. Measles

Answer: 2

Explanation: Acute Flaccid Paralysis surveillance.

10. In NTEP, TB diagnosis uses:

1. ELISA
2. Sputum microscopy
3. CT scan

4. MRI

Answer: 2

Explanation: Primary diagnostic tool.

11. HRZE means:

1. First-line TB drugs
2. Family planning methods
3. HIV treatment
4. Vaccine schedule

Answer: 1

Explanation: Isoniazid, Rifampicin, Pyrazinamide, Ethambutol.

12. Daily regimen TB treatment started in:

1. 2015
2. 2017
3. 2019
4. 2021

Answer: 2

Explanation: Daily regimen started in 2017.

13. NACP deals with:

1. TB
2. HIV/AIDS
3. Diabetes

4. Hypertension

Answer: 2

Explanation: National AIDS Control Programme.

14. HIV diagnostic test under NACP:

1. RPR
2. ELISA
3. Widal
4. Mantoux

Answer: 2

Explanation: ELISA/rapid tests used.

15. PPTCT means:

1. Prevention of Parent to Child Transport
2. Prevention of Parent to Child Transmission
3. Prevention of Patients to Contact Transmission
4. None

Answer: 2

Explanation: HIV prevention in pregnancy.

16. RBSK covers age group:

1. 0–5 years
2. 0–18 years
3. 5–10 years

4. 12–18 years

Answer: 2

Explanation: Rashtriya Bal Swasthya Karyakram.

17. RBSK screens for:

1. Diseases only
2. Disabilities only
3. 4D—Defects, Diseases, Deficiencies, Developmental delays
4. Death

Answer: 3

Explanation: Comprehensive screening.

18. NPCDCS deals with:

1. Acute diseases
2. Communicable diseases
3. Non-communicable diseases
4. Occupational diseases

Answer: 3

Explanation: Diabetes, hypertension, cancers.

19. NIDDCP deals with:

1. Iron deficiency
2. Iodine deficiency
3. Vitamin A deficiency

4. Protein deficiency

Answer: 2

Explanation: National Iodine Deficiency Disorders Control Programme.

20. Iodized salt must contain:

1. 5 ppm
2. 10 ppm
3. 15 ppm
4. 25 ppm

Answer: 3

Explanation: Minimum 15 ppm iodine.

21. NVBDCP deals with:

1. HIV
2. Vector-borne diseases
3. TB
4. Nutrition

Answer: 2

Explanation: Malaria, dengue, filariasis, JE, kala-azar.

22. Malaria control includes:

1. Early diagnosis
2. Complete treatment
3. Vector control

4. All

Answer: 4

Explanation: All are essential strategies.

23. ASHA incentive for immunization ensures:

1. Newborn care only
2. Dropout reduction
3. Maternal mortality
4. Leprosy cure

Answer: 2

Explanation: Helps improve immunization coverage.

24. NPCB deals with:

1. Blindness control
2. Cancer control
3. Birth control
4. Hearing loss

Answer: 1

Explanation: Cataract, refractive errors.

25. Main cause of blindness in India:

1. Refractive error
2. Cataract
3. Glaucoma

4. Vitamin A deficiency

Answer: 2

Explanation: Cataract leading cause.

26. MSSK stands for:

1. Mothers Safety Scheme
2. Muskan Scheme
3. Mother-child health and nutrition
4. None

Answer: 2

Explanation: Muskan focuses on immunization.

27. JSY incentive varies by:

1. Education
2. Literacy
3. Rural/urban area
4. Mother's height

Answer: 3

Explanation: Higher incentive in rural areas.

28. Poshan Abhiyaan aims to reduce:

1. Maternal mortality
2. Child malnutrition
3. TB incidence

4. Dengue

Answer: 2

Explanation: Addresses stunting, wasting, anemia.

29. National Deworming Day held on:

1. January 15
2. February 10
3. March 5
4. April 1

Answer: 2

Explanation: Deworming for 1–19 years.

30. Albendazole dose for children (≥ 2 years):

1. 100 mg
2. 200 mg
3. 400 mg
4. 500 mg

Answer: 3

Explanation: 400 mg under NDD.

31. Weekly Iron Folic Acid Supplementation (WIFS) is for:

1. Infants
2. Adolescents
3. Pregnant women

4. Elderly

Answer: 2

Explanation: 10–19 years age group.

32. IFA blue tablet for:

1. Pregnant women
2. Lactating mothers
3. Adolescents (boys & girls)
4. Elderly

Answer: 3

Explanation: WIFS uses blue tablet.

33. Under RKSK, the Adolescent Friendly Clinic is called:

1. Saheli
2. AFHC
3. ASHA clinic
4. Wellness center

Answer: 2

Explanation: Adolescent-Friendly Health Clinic.

34. ANM provides:

1. Immunization
2. Antenatal care
3. Family planning

4. All

Answer: 4

Explanation: Key frontline worker services.

35. IMNCI includes:

1. Neonatal care
2. Childhood illness care
3. Home-based care
4. All

Answer: 4

Explanation: Integrated newborn & child care.

36. SNCU stands for:

1. Special Newborn Care Unit
2. Super Nutrition Care Unit
3. Safe Nutrition Child Unit
4. Standard Neonatal Clinic Unit

Answer: 1

Explanation: For sick newborns.

37. NIPI stands for:

1. National Iron Plus Initiative
2. Nutrition In Pregnancy Initiative
3. National Immunisation Programme

4. None

Answer: 1

Explanation: NIPi covers IFA supplementation.

38. SBA training given to:

1. ASHA
2. ANM & Staff Nurse
3. Doctors only
4. AWW

Answer: 2

Explanation: Skilled Birth Attendant training.

39. NACP-IV goal:

1. End HIV
2. Reduce new HIV infections
3. Eradicate HIV
4. Free ART forever

Answer: 2

Explanation: Prevention-focused programme.

40. ART stands for:

1. Active Response Therapy
2. Antiretroviral Therapy
3. Anti-Radiation Treatment

4. Anti-Rabies Treatment

Answer: 2

Explanation: Treatment for HIV/AIDS.

41. DOTS is used in:

1. NACP
2. NTEP
3. NVBDCP
4. NIDDCP

Answer: 2

Explanation: Directly Observed Treatment Short-course.

42. NLEP deals with:

1. Leprosy elimination
2. Polio
3. Cancer
4. Diabetes

Answer: 1

Explanation: National Leprosy Eradication Programme.

43. Leprosy diagnosis based on:

1. Skin patches
2. Loss of sensation
3. Nerve thickening

4. All

Answer: 4

Explanation: All 3 cardinal signs.

44. Kala-azar elimination target:

1. Aedes control
2. Sandfly control
3. Rat control
4. Tick control

Answer: 2

Explanation: Kala-azar spread by sandfly.

45. IDSP surveillance categories:

1. X, Y, Z
2. S, P, L
3. H, M, L
4. A, B, C

Answer: 2

Explanation: S = syndromic, P = presumptive, L = lab.

46. VBD control uses IRS, which means:

1. Indoor residual spraying
2. International relief service
3. Indoor regular service

4. Internal review system

Answer: 1

Explanation: Chemical spraying inside houses.

47. IMR reduction programme under NHM is:

1. JSSK
2. IMNCI
3. PMSMA
4. RBSK

Answer: 2

Explanation: IMNCI directly reduces infant mortality.

48. PMSMA provides:

1. Free ANC on 9th of every month
2. Free PNC
3. Free immunization
4. Free delivery

Answer: 1

Explanation: Pradhan Mantri Surakshit Matritva Abhiyan.

49. Kayakalp awards are for:

1. Best nutrition centers
2. Best cleanliness in health facilities
3. Best vaccination centers

4. Best TB centers

Answer: 2

Explanation: Clean hospitals initiative.

50. Goal of NHM:

1. Reduce IMR & MMR
2. Strengthen health system
3. Universal access to care
4. All

Answer: 4

Explanation: NHM aims at overall improvement of the health system.

NURSING ALL ROUNDER.IN

First Aid & Emergency Nursing – 50 MCQs

(CPR, shock, bleeding, burns, poisoning, fractures)

1. First step in emergency assessment:

1. Airway
2. Breathing
3. Circulation

4. Disability

Answer: 1

Explanation: ABC (Airway first).

2. CPR stands for:

1. Cardio-Pulmonary Resuscitation

2. Chest Pressure Resuscitation

3. Cardiac Pulse Recovery

4. Cardiac Pressure Regulation

Answer: 1

Explanation: CPR restores heart + breathing.

3. Compression rate in adult CPR:

1. 60/min

2. 80/min

3. 100–120/min

4. 150/min

Answer: 3

Explanation: Standard AHA recommendation.

4. Compression depth in adults:

1. 1 cm
2. 3 cm
3. 5–6 cm
4. 10 cm

Answer: 3

Explanation: Enough to circulate blood.

5. Duty ratio for CPR (compression:breath):

1. 10:2
2. 20:2
3. 30:2
4. 50:4

Answer: 3

Explanation: Standard adult CPR = 30 compressions, 2 breaths.

6. First action for choking adult:

1. Start CPR
2. Heimlich maneuver
3. Give water
4. Slap face

Answer: 2

Explanation: Abdominal thrust is used.

7. Shock means:

1. Low BP
2. Failure of circulation
3. High fever
4. Fatigue

Answer: 2

Explanation: Shock = inadequate tissue perfusion.

8. First sign of shock:

1. Hypotension
2. Tachycardia
3. Cyanosis
4. Sweating

Answer: 2

Explanation: Pulse increases early.

9. Hypovolemic shock caused by:

1. Dehydration

2. Bleeding

3. Burns

4. All

Answer: 4

Explanation: All reduce circulating volume.

10. First aid for external bleeding:

1. Apply tourniquet

2. Apply direct pressure

3. Check BP

4. Give water

Answer: 2

Explanation: Direct pressure controls bleeding.

11. Tourniquet is used when:

1. Bleeding is mild

2. Direct pressure fails

3. For small cuts

4. Always

Answer: 2

Explanation: Last Resort method.

12. Golden hour refers to:

1. First 10 min
2. First 60 min
3. First 2 hours
4. First 24 hours

Answer: 2

Explanation: First hour → best survival chances.

13. Signs of fracture include:

1. Redness
2. Pain, swelling & abnormal movement
3. Rash
4. Fever

Answer: 2

Explanation: Classic fracture signs.

14. First aid for fracture:

1. Immobilize limb
2. Massage
3. Apply oil

4. Move limb

Answer: 1

Explanation: Immobilization prevents further injury.

15. Splint should cover:

1. Injury site only

2. Above & below joint

3. Only above

4. Only below

Answer: 2

Explanation: Splint covers joint above & below.

16. Burn classification depends on:

1. Cause

2. Depth & surface area

3. Smell

4. Body weight

Answer: 2

Explanation: 1st, 2nd, 3rd degree + TBSA.

17. Rule of nine used to assess:

1. Pulse
2. Burn surface area
3. BP

4. Shock

Answer: 2

Explanation: Used in adults.

18. First aid for burns:

1. Apply ice
2. Wash with cool water
3. Apply toothpaste
4. Break blisters

Answer: 2

Explanation: Cool water reduces damage.

19. Do not apply on burns:

1. Aloe vera
2. Water
3. Toothpaste/oil
4. Moist gauze

Answer: 3

Explanation: Toothpaste contaminates wound.

20. Chemical burn first aid:

1. Rub area
2. Flush with water for 10–20 minutes
3. Apply ointment
4. Cover immediately

Answer: 2

Explanation: Remove chemical thoroughly.

21. Electrical burn first step:

1. Touch victim
2. Switch off power supply
3. Apply ice
4. Give CPR

Answer: 2

Explanation: Remove source first.

22. Poisoning first step:

1. Induce vomiting

2. Identify poison

3. Give milk

4. Lay flat

Answer: 2

Explanation: Identify poison for proper treatment.

23. In snake bite, first aid includes:

1. Cutting wound

2. Sucking venom

3. Immobilizing limb

4. Applying ice

Answer: 3

Explanation: Keep limb still, send to hospital.

24. Anti-snake venom used for:

1. All snake bites

2. Only venomous bites

3. All animal bites

4. All human bites

Answer: 2

Explanation: ASV required only for venomous bites.

25. Dog bite first aid:

1. Wash with soap + water 15 minutes
2. Apply oil
3. Tie cloth
4. Ignore if small bite

Answer: 1

Explanation: Reduces viral load.

26. Rabies vaccine given on:

1. 0, 3, 7, 14 days
2. Once
3. Only day 0
4. Monthly

Answer: 1

Explanation: Standard post-exposure schedule.

27. The universal antidote:

1. Milk
2. Activated charcoal
3. Salt water

4. Lemon juice

Answer: 2

Explanation: Absorbs many poisons.

28. Emergency for bee sting:

1. Remove stinger

2. Rub area

3. Apply toothpaste

4. None

Answer: 1

Explanation: Remove stinger quickly.

29. Heat stroke first aid:

1. Drink hot fluids

2. Move to cool area + remove clothing

3. Wrap in blanket

4. Run in sun

Answer: 2

Explanation: Lower body temperature rapidly.

30. Hypothermia first aid:

1. Remove wet clothes
2. Apply warm blankets
3. Give warm drinks
4. All

Answer: 4

Explanation: Restore body temperature.

31. Epistaxis means:

1. Vomiting
2. Nose bleed
3. Ear pain
4. Eye redness

Answer: 2

Explanation: Manage by leaning forward + pressure.

32. Epistaxis first aid:

1. Tilt head back
2. Tilt head forward and pinch nose
3. Lie down
4. Apply hot pack

Answer: 2

Explanation: Forward position prevents aspiration.

33. Fainting first aid:

1. Make stand
2. Lay flat + elevate legs
3. Give water immediately
4. Sprinkle cold water only

Answer: 2

Explanation: Improves blood flow to brain.

34. Drowning first step:

1. Give food
2. Remove victim from water safely
3. Walk around
4. Give cold bath

Answer: 2

Explanation: First ensure safety.

35. In head injury:

1. Move head

2. Keep head stable
3. Give food
4. Apply pressure to bleeding

Answer: 2

Explanation: Avoid further brain/spine damage.

36. Sign of internal bleeding:

1. Blue lips
2. Bruising
3. Weak pulse
4. All

Answer: 4

Explanation: Internal bleeding shows subtle signs.

37. Triage means:

1. CPR
2. Prioritizing patients
3. Giving injections
4. Dressing wounds

Answer: 2

Explanation: Sorting based on severity.

38. Triage red tag means:

1. Minor injuries
2. Delayed care
3. Immediate care needed
4. Dead

Answer: 3

Explanation: Red = life-threatening.

39. Green triage tag means:

1. Walking wounded
2. Dead
3. Immediate
4. Expectant

Answer: 1

Explanation: Minor injuries.

40. Black triage tag:

1. Immediate
2. Minor
3. Deceased

4. None

Answer: 3

Explanation: Black tag = dead or moribund.

41. Sprain involves injury to:

1. Muscle

2. Tendon

3. Ligament

4. Bone

Answer: 3

Explanation: Sprain = ligament injury.

42. Strain involves injury to:

1. Muscle

2. Bone

3. Ligament

4. Joint

Answer: 1

Explanation: Strain = muscle/tendon injury.

43. Foreign body in eye first aid:

1. Rub eye
2. Wash with clean water
3. Use pencil
4. Press hard

Answer: 2

Explanation: Irrigate eye gently.

44. Chest pain emergency drug:

1. Paracetamol
2. Aspirin
3. Ibuprofen
4. Dextrose

Answer: 2

Explanation: Aspirin reduces clot formation.

45. In stroke warning signs, FAST means:

1. Food, arm, skin, time
2. Face droop, Arm weakness, Speech difficulty, Time
3. Fast breathing only
4. None

Answer: 2

Explanation: Stroke assessment tool.

46. AED stands for:

1. Automatic External Defibrillator
2. Advanced Emergency Device
3. Acute Emergency Defibrillator
4. Automatic Energy Device

Answer: 1

Explanation: Used in sudden cardiac arrest.

47. Poisoning by acid:

1. Induce vomiting
2. Neutralize quickly
3. Do not induce vomiting
4. Give soda

Answer: 3

Explanation: Vomiting damages the esophagus more.

48. Seizure first aid:

1. Hold tightly

2. Put object in mouth
3. Protect airway + remove hazards
4. Give water

Answer: 3

Explanation: Ensure safety, do not restrain.

49. Anaphylaxis first drug:

1. Hydrocortisone
2. Adrenaline
3. Paracetamol
4. Antibiotic

Answer: 2

Explanation: IM adrenaline is first-line.

50. Universal emergency number in India:

1. 101
2. 102
3. 108
4. 1098

Answer: 3

Explanation: 108 = Emergency ambulance.



Medical–Surgical Nursing – 50 MCQs

(Respiratory, Cardiac, GI, Renal, Endocrine, Fever, Infection)

1. Normal respiratory rate in adults is:

1. 8–12/min
2. 12–20/min
3. 20–30/min
4. 30–40/min

Answer: 2

Explanation: Normal adult RR is 12–20/min.

2. Most common cause of pneumonia:

1. E. coli
2. Streptococcus pneumoniae
3. Candida
4. Rabies virus

Answer: 2

Explanation: S. pneumoniae is leading bacterial cause.

3. First symptom of asthma attack:

1. Chest pain
2. Wheezing
3. Vomiting
4. Palpitations

Answer: 2

Explanation: Wheeze due to airway narrowing.

4. COPD is mainly caused by:

1. Viral infection
2. Smoking
3. Heart failure
4. Diabetes

Answer: 2

Explanation: Smoking is main risk factor.

5. Best position for breathing difficulty:

1. Supine
2. Prone
3. Fowler's position
4. Trendelenburg

Answer: 3

Explanation: Elevates chest to ease breathing.

6. Tuberculosis primarily affects the:

1. Heart
2. Lungs
3. Liver
4. Kidney

Answer: 2

Explanation: Pulmonary TB is most common.

7. Hemoptysis means:

1. Cough with sputum
2. Cough with blood
3. Dry cough
4. Difficulty swallowing

Answer: 2

Explanation: Hemoptysis = blood in sputum.

8. Hypertension means BP above:

1. 120/80
2. 130/80
3. 140/90
4. 100/60

Answer: 3

Explanation: 140/90 = hypertension.

9. Chest pain radiating to left arm indicates:

1. Gastritis
2. MI (heart attack)
3. Stroke
4. Pneumonia

Answer: 2

Explanation: Classic MI symptom.

10. ECG used to diagnose:

1. Liver disease
2. Heart rhythm abnormalities
3. Kidney stones
4. TB

Answer: 2

Explanation: ECG detects heart electrical activity.

11. First drug in heart attack:

1. Paracetamol
2. Aspirin
3. Vitamin C
4. ORS

Answer: 2

Explanation: Aspirin prevents clot extension.

12. Most common site of peptic ulcer:

1. Stomach
2. Duodenum
3. Rectum
4. Esophagus

Answer: 2

Explanation: Duodenal ulcers more common.

13. Cause of peptic ulcer:

1. H. pylori infection
2. Vitamin C
3. Low protein intake
4. High fat

Answer: 1

Explanation: H. pylori + NSAIDs.

14. Best test for dehydration:

1. Weight
2. Skin turgor
3. Urine output
4. All

Answer: 4

Explanation: All indicators of dehydration.

15. Severe dehydration treatment:

1. ORS
2. IV fluids (Ringer lactate)
3. Only water
4. Antibiotics

Answer: 2

Explanation: RL is best for severe dehydration.

16. Diarrhea is defined as:

1. 1 loose stool
2. 3 or more loose stools/day
3. Constipation
4. Hard stools

Answer: 2

Explanation: Standard definition.

17. Most common cause of acute diarrhea in children:

1. Cholera
2. Rotavirus
3. HIV
4. Cancer

Answer: 2

Explanation: Rotavirus major cause.

18. Jaundice occurs due to increased:

1. Hemoglobin

2. RBC

3. Bilirubin

4. Calcium

Answer: 3

Explanation: Bilirubin increases in liver disease.

19. Hepatitis A spreads by:

1. Blood

2. Sexual contact

3. Feco–oral route

4. Air

Answer: 3

Explanation: Contaminated food/water.

20. Kidney failure leads to:

1. High urine output

2. Low urine output (oliguria)

3. Normal urine output

4. Anaemia only

Answer: 2

Explanation: Damaged kidneys reduce urine production.

21. Most common sign of UTI:

1. Fever
2. Burning urination
3. Vomiting
4. Headache

Answer: 2

Explanation: Dysuria = classic UTI symptom.

22. Nephrotic syndrome hallmark:

1. Low protein
2. High cholesterol
3. Edema
4. High potassium

Answer: 3

Explanation: Protein loss leads to edema.

23. Most common thyroid disorder:

1. Hypothyroidism
2. Hyperthyroidism
3. Thyroid cancer
4. Goiter

Answer: 1

Explanation: Hypothyroidism is common.

24. Symptom of hyperthyroidism:

1. Weight gain
2. Cold intolerance
3. Weight loss
4. Bradycardia

Answer: 3

Explanation: Increased metabolism.

25. Diabetes mellitus characterized by:

1. High insulin
2. Low blood sugar
3. High blood sugar
4. Low sodium

Answer: 3

Explanation: Impaired glucose metabolism.

26. Classic symptoms of diabetes:

1. Polyuria
2. Polydipsia
3. Polyphagia
4. All

Answer: 4

Explanation: Three P's.

27. Hypoglycemia means:

1. High BP
2. Low blood sugar
3. Low pulse
4. High pulse

Answer: 2

Explanation: Blood sugar <70 mg/dL.

28. First treatment for hypoglycemia:

1. Water
2. Sugar/glucose orally
3. Insulin
4. ORS

Answer: 2

Explanation: Quick glucose source.

29. Hyperglycemia treatment:

1. Glucose tablets
2. Insulin
3. ORS
4. Water only

Answer: 2

Explanation: Insulin lowers high sugar.

30. Edema occurs due to:

1. Low salt
2. High blood volume
3. Fluid retention
4. Low urine output

Answer: 3

Explanation: Excess fluid accumulates in tissues.

31. Hyponatremia means sodium level:

1. <135 mEq/L
2. 145 mEq/L
3. <100 mEq/L
4. 200 mEq/L

Answer: 1

Explanation: Below 135 = hyponatremia.

32. Hyperkalemia means potassium:

1. <3.5
2. 3.5–5
3. 5.5 mEq/L
4. 8

Answer: 3

Explanation: High K⁺ = dangerous for heart.

33. Main symptom of anemia:

1. Red eyes
2. Fatigue
3. High fever
4. Diarrhea

Answer: 2

Explanation: Due to low oxygen-carrying capacity.

34. Iron deficiency anemia type:

1. Macrocytic
2. Microcytic
3. Normocytic
4. None

Answer: 2

Explanation: Iron deficiency causes small RBCs.

35. Fever management includes:

1. Paracetamol
2. Tepid sponging
3. Fluids
4. All

Answer: 4

Explanation: Combined management reduces fever.

36. Most common cause of fever:

1. Infection
2. Cancer
3. Heart disease
4. Dehydration

Answer: 1

Explanation: Viral infections common.

37. Dengue warning sign:

1. Fever
2. Rash
3. Abdominal pain + persistent vomiting
4. Cough

Answer: 3

Explanation: Danger signs require hospital care.

38. Typhoid spreads by:

1. Mosquito
2. Contaminated food/water
3. Air
4. Blood

Answer: 2

Explanation: Caused by Salmonella typhi.

39. Malaria diagnosed best by:

1. Urine test
2. Peripheral blood smear
3. X-ray
4. MRI

Answer: 2

Explanation: PBF is gold standard.

40. Rabies symptom:

1. Fear of water
2. Cough
3. Fever only
4. Rash

Answer: 1

Explanation: Hydrophobia is classic.

41. HIV attacks:

1. RBC
2. CD4 T cells
3. Platelets
4. Nerves

Answer: 2

Explanation: CD4 depletion → immunodeficiency.

42. Sepsis means:

1. Local infection
2. Dangerously high infection spread
3. Low BP only
4. Fever only

Answer: 2

Explanation: Sepsis = life-threatening systemic infection.

43. Pain scale used commonly:

1. 1–5
2. 0–10 numeric scale
3. A–Z
4. 0–3

Answer: 2

Explanation: Numeric rating scale.

44. Normal urine output per day:

1. 200 ml
2. 500 ml
3. 800–2000 ml
4. 4000 ml

Answer: 3

Explanation: Normal adults: 1–2 L/day.

45. Oliguria means urine output less than:

1. 500 ml/day
2. 200 ml/day
3. 1000 ml/day
4. 1500 ml/day

Answer: 1

Explanation: <400–500 ml/day = oliguria.

46. Normal potassium level:

1. 1–2 mEq/L
2. 3.5–5 mEq/L
3. 6–8 mEq/L
4. 10 mEq/L

Answer: 2

Explanation: Normal physiological range.

47. Normal hemoglobin in adult female:

1. 8–10 g/dL
2. 10–11 g/dL
3. 12–16 g/dL
4. 16–20 g/dL

Answer: 3

Explanation: Normal female Hb 12–16 g/dL.

48. Most common cause of chronic kidney disease:

1. Infection
2. Hypertension & diabetes
3. Snake bite
4. Alcohol

Answer: 2

Explanation: HTN + diabetes major causes.

49. Edema in renal failure caused by:

1. Protein retention
2. Water & salt retention
3. Fat loss
4. Vitamin deficiency

Answer: 2

Explanation: Kidneys unable to excrete excess fluids.

50. Best investigation for kidney function:

1. Urine color
2. Serum creatinine
3. Blood pressure
4. Weight

Answer: 2

Explanation: Creatinine indicates renal function.

✓ **Maternal Health – 50 MCQs**

(Antenatal care, danger signs, labour, obstetric emergencies, PNC, FP)

1. Number of recommended ANC visits:

1. 2
2. 3
3. 4
4. 5

Answer: 3

Explanation: Minimum 4 ANC visits as per WHO (and India earlier; now 8 contacts WHO, but CHO exam uses 4 visits).

2. First ANC visit should be before:

1. 6 weeks
2. 12 weeks
3. 20 weeks
4. 30 weeks

Answer: 2

Explanation: First visit ideally before 12 weeks.

3. Two essential tetanus doses during pregnancy:

1. TT1 & TT2
2. TT3 & TT4
3. TT only once
4. TT 5 times

Answer: 1

Explanation: TT1 at first contact, TT2 after 4 weeks.

4. Normal weight gain during pregnancy:

1. 2 kg
2. 5 kg
3. 10–12 kg
4. 20 kg

Answer: 3

Explanation: Recommended weight gain = approx. 11 kg.

5. Physiological anemia of pregnancy due to:

1. RBC increase
2. Plasma volume increase
3. Nutrition deficiency
4. Bleeding

Answer: 2

Explanation: Plasma increases more than RBC → dilution.

6. Danger signs in pregnancy include all EXCEPT:

1. Vaginal bleeding
2. Severe headache
3. Swelling of feet
4. Increased appetite

Answer: 4

Explanation: Increased appetite is normal.

7. Pre-eclampsia defined by:

1. BP >120/80
2. BP >140/90 + proteinuria
3. BP >100/60
4. High fever

Answer: 2

Explanation: Hypertension with protein in urine.

8. Eclampsia means:

1. Hypertension only
2. Hypertension + convulsions
3. High fever
4. Shock

Answer: 2

Explanation: Seizures due to severe pre-eclampsia.

9. Drug of choice in eclampsia:

1. Diazepam
2. Paracetamol
3. Magnesium sulfate
4. Calcium gluconate

Answer: 3

Explanation: MgSO₄ controls convulsions.

10. Antidote for magnesium sulfate toxicity:

1. Vitamin K
2. Atropine
3. Calcium gluconate
4. Iron

Answer: 3

Explanation: Ca gluconate reverses toxicity.

11. Normal fetal heart rate:

1. 80–100/min
2. 100–140/min

3. 110–160/min
4. 160–200/min

Answer: 3

Explanation: FHR = 110–160/min.

12. Quickening means:

1. Fetal movement felt by mother
2. Fetal death
3. Fetal growth slowing
4. Uterus contraction

Answer: 1

Explanation: First fetal movement.

13. Chadwick sign indicates:

1. Bluish cervix in early pregnancy
2. High BP
3. Fetal death
4. Anaemia

Answer: 1

Explanation: Early sign of pregnancy.

14. Most common malpresentation:

1. Breech
2. Transverse
3. Shoulder
4. Face

Answer: 1

Explanation: Breech is most common abnormal presentation.

15. True labour pain feature:

1. Irregular
2. False pains stop with rest
3. Cause cervical dilation
4. Found only in primigravida

Answer: 3

Explanation: True labour causes cervical dilation.

16. First stage of labour ends with:

1. Delivery of baby
2. Full dilation of cervix (10 cm)
3. Delivery of placenta
4. Rupture of membranes

Answer: 2

Explanation: First stage = onset of contractions → full dilation.

17. Second stage of labour:

1. Dilatation
2. Delivery of baby
3. Placenta delivery
4. Recovery

Answer: 2

Explanation: Baby is delivered in second stage.

18. Third stage of labour involves:

1. Labour pain
2. Delivery of placenta
3. Breastfeeding
4. Recovery

Answer: 2

Explanation: Placenta expelled.

19. Average blood loss during normal delivery:

1. 100 ml
2. 200 ml
3. 500 ml
4. 1000 ml

Answer: 3

Explanation: >500 ml is PPH.

20. Uterotonic drug to prevent PPH:

1. Paracetamol
2. Misoprostol
3. ORS
4. Azithromycin

Answer: 2

Explanation: Misoprostol / oxytocin used.

21. Most common cause of PPH:

1. Trauma
2. Tone (uterine atony)
3. Tissue
4. Thrombin

Answer: 2

Explanation: Tone = uterine atony = 70–80% cases.

22. Signs of retained placenta:

1. Heavy bleeding
2. No placenta expelled
3. Uterine atony
4. All

Answer: 4

Explanation: All occur in retained placenta.

23. Best position for cord care:

1. Closed
2. Dry and open
3. Covered with cotton
4. Bandaged

Answer: 2

Explanation: Dry cord care prevents infection.

24. APGAR score assesses:

1. Growth
2. Newborn adjustment to extra-uterine life
3. Breastfeeding
4. Meconium

Answer: 2

Explanation: Score at 1 & 5 minutes.

25. APGAR components include all EXCEPT:

1. Appearance
2. Pulse

3. Grimace
4. Temperature

Answer: 4

Explanation: Temperature not included.

26. Best sign of fetal well-being in labour:

1. Maternal BP
2. Fetal heart rate
3. Labour pain
4. Maternal appetite

Answer: 2

Explanation: FHR indicates fetal oxygenation.

27. Meconium-stained liquor indicates:

1. Fetal distress
2. Good health
3. Prematurity
4. Dehydration

Answer: 1

Explanation: Indicates fetal distress.

28. Antenatal iron requirement:

1. 30 mg
2. 60 mg
3. 100 mg
4. 200 mg

Answer: 2

Explanation: 60 mg elemental iron daily.

29. IFA supplementation starts from:

1. 1st trimester
2. 2nd trimester
3. 3rd trimester
4. At delivery

Answer: 1

Explanation: Start early in pregnancy.

30. Folic acid prevents:

1. Heart defects
2. Spina bifida & neural tube defects
3. Cleft palate
4. Down syndrome

Answer: 2

Explanation: Folic acid prevents NTD.

31. Normal pregnancy BP should be:

1. $\leq 140/90$
2. 160/110
3. $< 100/60$
4. 200/100

Answer: 1

Explanation: Hypertension defined $> 140/90$.

32. Signs of obstructed labour:

1. Good progress
2. Severe abdominal pain
3. Bandl's ring
4. Foul smell

Answer: 3

Explanation: Bandl's ring = obstruction.

33. Most common female sterilization method:

1. Mini-lap
2. Laparoscopy
3. Hysterectomy
4. Condom

Answer: 2

Explanation: Laparoscopic tubal ligation widely used.

34. Male sterilization method:

1. IUCD
2. Vasectomy
3. Condom
4. OCP

Answer: 2

Explanation: Vasectomy cuts vas deferens.

35. Best spacing method for breastfeeding mother:

1. OCP
2. IUCD
3. LAM
4. Condom

Answer: 3

Explanation: LAM effective first 6 months.

36. IUCD complications include:

1. Bleeding
2. Pain

3. Expulsion

4. All

Answer: 4

Explanation: IUCD may cause all.

37. Copper-T effective for:

1. 1 year

2. 3 years

3. 10 years

4. Lifetime

Answer: 3

Explanation: Cu-T 380A lasts 10 years.

38. Emergency contraceptive pill effective within:

1. 24 hours

2. 72 hours

3. 7 days

4. 1 month

Answer: 2

Explanation: Best within 72 hours.

39. Medical abortion drugs:

1. Oxytocin
2. Mifepristone + Misoprostol
3. Paracetamol
4. Antibiotics

Answer: 2

Explanation: Used up to 9 weeks.

40. Postnatal visit recommended at:

1. 1 hour, 6 hours
2. 48 hours, 14 days, 6 weeks
3. 1 month only
4. 1 year

Answer: 2

Explanation: Standard PNC schedule.

41. Lochia rubra persists for:

1. 1 day
2. 3–4 days
3. 10 days
4. 40 days

Answer: 2

Explanation: Fresh red discharge initially.

42. Lochia alba appears at:

1. Day 1
2. Day 3
3. Day 10–14
4. After 1 month

Answer: 3

Explanation: Whitish discharge later.

43. Breastfeeding should start within:

1. 2 hours
2. 6 hours
3. 30 minutes of birth
4. Next day

Answer: 3

Explanation: Early initiation prevents hypothermia & promotes bonding.

44. Colostrum rich in:

1. Fat
2. Antibodies
3. Water
4. Iron

Answer: 2

Explanation: Contains IgA.

45. Exclusive breastfeeding duration:

1. 3 months
2. 4 months
3. 6 months
4. 12 months

Answer: 3

Explanation: WHO recommendation.

46. Most common cause of maternal mortality in India:

1. Sepsis
2. Hemorrhage
3. Anemia
4. Heart disease

Answer: 2

Explanation: PPH is major cause.

47. ECV done for:

1. Breech presentation
2. Placenta previa
3. IUFD
4. Twins

Answer: 1

Explanation: External cephalic version.

48. True conjugate cannot be measured clinically; instead we measure:

1. Diagonal conjugate
2. Intertrochanteric diameter
3. Pelvic outlet
4. Fetal head

Answer: 1

Explanation: Diagonal conjugate measured → estimate true conjugate.

49. Best indicator of labour progress:

1. Pain
2. Fetal movement
3. Cervical dilatation
4. Maternal BP

Answer: 3

Explanation: Dilatation shows labour progress.

50. Preterm labour defined as delivery before:

1. 20 weeks
2. 28 weeks

3. 37 weeks

4. 40 weeks

Answer: 3

Explanation: <37 weeks = preterm.

NURSING ALL ROUNDER.IN



CHILD HEALTH – 50 MCQs

(IMNCI, growth, immunization, newborn care, feeding, common illnesses)

1. Normal birth weight of a newborn:

1. 1.5–2 kg

2. 2–2.5 kg

3. 2.5–3.5 kg

4. 4 kg

Answer: 3

Explanation: Normal birth weight = 2.5–3.5 kg.

2. Low birth weight defined as:

1. <1000 g

2. <1500 g

3. <2000 g

4. <2500 g

Answer: 4

Explanation: LBW = less than 2.5 kg.

3. Very low birth weight:

1. <2500 g

2. <2000 g

3. <1500 g

4. <1000 g

Answer: 3

Explanation: VLBW <1500 g.

4. APGAR score is taken at:

1. 1 and 3 minutes

2. 1 and 5 minutes

3. 5 and 10 minutes

4. Only at birth

Answer: 2

Explanation: Standard APGAR at 1 & 5 minutes.

5. APGAR score of 7–10 means:

1. Severe distress
2. Moderate distress
3. Good condition
4. Needs resuscitation

Answer: 3

Explanation: APGAR 7–10 = normal newborn.

6. Kangaroo Mother Care (KMC) mainly for:

1. Preterm/LBW babies
2. Term babies
3. Sick adults
4. Only twins

Answer: 1

Explanation: KMC improves heat & breastfeeding in LBW.

7. First milk secreted by mother:

1. Transitional milk
2. Mature milk
3. Colostrum
4. Powder milk

Answer: 3

Explanation: Colostrum rich in IgA.

8. Complementary feeding starts at:

1. 3 months
2. 4 months
3. 6 months
4. 1 year

Answer: 3

Explanation: Start at 6 months.

9. Full immunization by 1 year includes:

1. BCG, OPV3, DPT3, HepB3, Measles
2. Only OPV
3. Only BCG
4. BCG + OPV only

Answer: 1

Explanation: Full primary schedule.

10. BCG given:

1. Intramuscular
2. Intradermal
3. Oral
4. Subcutaneous

Answer: 2

Explanation: ID injection left upper arm.

11. BCG prevents:

1. All TB
2. Severe childhood forms of TB
3. Only cough
4. Pneumonia

Answer: 2

Explanation: Prevents meningeal/miliary TB.

12. OPV contraindicated in:

1. Mild fever
2. Diarrhea
3. Immunocompromised child
4. Mild cold

Answer: 3

Explanation: IPV preferred for immunocompromised.

13. Measles vaccine given at:

1. 6 months
2. 9 months
3. 1 year
4. 5 years

Answer: 2

Explanation: First dose at 9 months.

14. Pentavalent vaccine protects against all EXCEPT:

1. Diphtheria
2. Pertussis
3. Tetanus
4. Measles

Answer: 4

Explanation: Measles separate vaccine.

15. Growth monitoring tool:

1. MUAC
2. WHO growth chart
3. X-ray
4. ECG

Answer: 2

Explanation: Growth chart tracks development.

16. Weight of baby doubles by:

1. 2 months
2. 3 months

3. 5 months

4. 1 year

Answer: 3

Explanation: Weight doubles by 5 months.

17. Weight triples by:

1. 6 months

2. 9 months

3. 1 year

4. 2 years

Answer: 3

Explanation: Triples by 1 year.

18. Length of baby at 1 year:

1. 50 cm

2. 65 cm

3. 75 cm

4. 100 cm

Answer: 3

Explanation: Average 75 cm at 1 yr.

19. Newborn reflex present at birth:

1. Moro reflex
2. Writing reflex
3. Drawing reflex
4. None

Answer: 1

Explanation: Moro present at birth, disappears by 5–6 months.

20. Signs of severe pneumonia per IMNCI:

1. Fast breathing only
2. Chest in-drawing
3. Runny nose
4. Cough only

Answer: 2

Explanation: Chest indrawing = severe pneumonia.

21. Fast breathing in infants (<2 months) defined as:

1. 40/min
2. 50/min
3. 60/min
4. 70/min

Answer: 3

Explanation: IMNCI cut-off = >60/min.

22. Best feeding for diarrhea:

1. Stop feeding
2. Breastfeeding + ORS
3. Water only
4. Sugar water

Answer: 2

Explanation: Continue feeding + give ORS.

23. ORS osmolarity (WHO):

1. 111
2. 245
3. 300
4. 350

Answer: 2

Explanation: WHO ORS = 245 mOsm/L.

24. Zinc dose in diarrhea:

1. 5 mg/day
2. 10 mg (infants), 20 mg (older children)

3. 50 mg/day
4. 100 mg/day

Answer: 2

Explanation: Zinc reduces severity/duration.

25. Vitamin A dose at 9 months:

1. 20,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 2 lakh IU

Answer: 3

Explanation: First mega dose = 1 lakh IU.

26. Severe dehydration sign:

1. Sunken eyes
2. Normal thirst
3. Normal tears
4. Good skin turgor

Answer: 1

Explanation: Sunken eyes, lethargy, poor turgor.

27. Treatment for severe dehydration:

1. ORS
2. IV Ringer lactate
3. Water only
4. Antibiotics

Answer: 2

Explanation: IV fluid required.

28. Pneumonia common organism:

1. TB
2. Streptococcus pneumoniae
3. Candida
4. Dengue virus

Answer: 2

Explanation: Most common.

29. Croup sign:

1. Barking cough
2. Whoop sound
3. Blood cough
4. Silent chest

Answer: 1

Explanation: Bark-like cough.

30. Whooping cough caused by:

1. Streptococcus
2. Bordetella pertussis
3. H. influenzae
4. TB

Answer: 2

Explanation: Pertussis bacteria.

31. Best sign of dehydration in infants:

1. BP
2. Skin turgor
3. Fontanelle sunken
4. Eye color

Answer: 3

Explanation: Sunken fontanelle important sign.

32. Ear infection (AOM) common symptom:

1. Ear pain
2. Back pain
3. Knee pain
4. Chest pain

Answer: 1

Explanation: Otalgia = main symptom.

33. IMNCI color coding for immediate referral:

1. Green
2. Yellow
3. Red
4. Blue

Answer: 3

Explanation: Red category = danger signs.

34. Neonatal sepsis sign:

1. Crying loudly
2. Poor feeding
3. Good activity
4. Active movement

Answer: 2

Explanation: Poor feeding, lethargy = major sign.

35. Newborn temperature danger sign:

1. 35.5°C
2. 36.5°C
3. 37°C
4. 37.5°C

Answer: 1

Explanation: Hypothermia $<36.5^{\circ}\text{C}$; $<35.5^{\circ}\text{C}$ severe.

36. Neonatal hypothermia prevention:

1. KMC
2. Radiant warmer
3. Warm room

4. All

Answer: 4

Explanation: Multiple measures needed.

37. Best method for newborn resuscitation:

1. Mouth-to-mouth
2. Bag and mask ventilation
3. CPR only
4. Oxygen alone

Answer: 2

Explanation: Bag-mask effective for newborns.

38. Breastfeeding frequency:

1. 1–2 times/day
2. 3–5 times/day

3. On demand (8–12 times/day)

4. Once daily

Answer: 3

Explanation: Frequent feeds recommended.

39. Severe acute malnutrition MUAC:

1. <11.5 cm

2. <12 cm

3. <13.5 cm

4. <14 cm

Answer: 1

Explanation: MUAC <11.5 cm = SAM.

40. Best method to assess fever in infants:

1. Rectal temperature

2. Oral temperature

3. Axillary temperature

4. Skin feel

Answer: 1

Explanation: Most accurate in infants.

41. Newborn eye care includes:

1. Antibiotic eye ointment
2. Kajal
3. Soap
4. Powder

Answer: 1

Explanation: Prevents ophthalmia neonatorum.

42. Newborn screening checks for:

1. Hypothyroidism
2. Hearing
3. Metabolic disorders
4. All

Answer: 4

Explanation: Newborn screening panel includes all.

43. Common cause of infant mortality:

1. Accidents
2. Diarrhea & pneumonia
3. Cancer
4. Fracture

Answer: 2

Explanation: Major killers under 5 years.

44. Rickets caused by:

1. Vitamin C deficiency
2. Vitamin D deficiency
3. Vitamin A deficiency
4. Iron deficiency

Answer: 2

Explanation: Causes bone deformities.

45. Iron supplementation starts at:

1. 6 months
2. 1 year
3. 5 years
4. 2 months

Answer: 1

Explanation: Iron from 6 months to prevent anemia.

46. Formula feeding risk:

1. Infection
2. Diarrhea
3. Malnutrition
4. All

Answer: 4

Explanation: Formula feeding → infection risk.

47. Cold chain maintained at:

1. -20°C
2. $2-8^{\circ}\text{C}$
3. $0-2^{\circ}\text{C}$
4. 20°C

Answer: 2

Explanation: All vaccines stored in ILR @ $2-8^{\circ}\text{C}$.

48. Pentavalent vaccine schedule:

1. 0, 6, 9 weeks
2. 6, 10, 14 weeks
3. 9, 12, 15 months
4. 1 year only

Answer: 2

Explanation: 3 doses at 6, 10, 14 weeks.

49. Measles rash starts from:

1. Legs
2. Chest
3. Behind ears & face
4. Arms

Answer: 3

Explanation: Starts behind ears → spreads downward.

50. IMNCI approach emphasizes:

1. Single disease treatment
2. Integrated management of multiple symptoms
3. Adult care
4. Only nutrition

Answer: 2

Explanation: IMNCI integrates preventive + curative care.

NURSING ALL ROUNDER.IN



**COMMUNICABLE & NON-COMMUNICABLE
DISEASES – 50 MCQs**

1. Mode of transmission of measles:

1. Airborne
2. Vector-borne
3. Water-borne

4. Sexual

Answer: 1

Explanation: Measles spreads through airborne droplets.

2. Chickenpox incubation period:

1. 1–3 days

2. 4–7 days

3. 10–21 days

4. 30 days

Answer: 3

Explanation: Usually around 14 days.

3. Dengue spreads through:

1. Anopheles

2. Aedes aegypti

3. Culex

4. Sandfly

Answer: 2

Explanation: Aedes mosquito bites during day.

4. Malaria caused by:

1. Virus

2. Plasmodium parasite

3. Bacteria

4. Fungus

Answer: 2

Explanation: Plasmodium vivax/falciparum.

5. Most severe malaria species:

1. P. vivax

2. P. malariae

3. P. falciparum

4. P. ovale

Answer: 3

Explanation: Falciparum causes cerebral malaria.

6. TB mainly spreads by:

1. Water

2. Food

3. Airborne droplets

4. Vector

Answer: 3

Explanation: Mycobacterium tuberculosis airborne.

7. Leprosy caused by:

1. Virus
2. Mycobacterium leprae
3. Fungus
4. Parasite

Answer: 2

Explanation: Bacterial chronic disease.

8. HIV mainly spreads by:

1. Mosquito
2. Air
3. Sexual contact, blood, mother-to-child
4. Water

Answer: 3

Explanation: HIV spreads via body fluids.

9. AIDS stands for:

1. Acute Immune Disease Syndrome
2. Acquired Immunodeficiency Syndrome
3. Artificial Immunity Development Syndrome
4. None

Answer: 2

Explanation: Final stage of HIV infection.

10. Hepatitis A spreads by:

1. Blood
2. Air
3. Feco-oral
4. Sexual

Answer: 3

Explanation: Contaminated food/water.

11. Hepatitis B spreads by:

1. Water
2. Air
3. Blood & sexual contact
4. Soil

Answer: 3

Explanation: HBV transmitted by blood/body fluids.

12. Rabies caused by:

1. Virus
2. Bacteria
3. Parasite
4. Fungus

Answer: 1

Explanation: Rabies virus affects CNS.

13. Cholera spreads by:

1. Mosquito
2. Food & water contamination
3. Air
4. Skin contact

Answer: 2

Explanation: Vibrio cholerae → watery diarrhea.

14. Typhoid caused by:

1. Salmonella typhi
2. E. coli
3. Streptococcus
4. Hepatitis A

Answer: 1

Explanation: Water-borne bacterial infection.

15. Influenza main mode of spread:

1. Airborne droplets
2. Water
3. Soil
4. Mosquito

Answer: 1

Explanation: Highly contagious via air.

16. Vector of kala-azar:

1. Anopheles
2. Aedes
3. Culex
4. Sandfly

Answer: 4

Explanation: Spread by phlebotomus sandfly.

17. Most common symptom of dengue:

1. High fever
2. Chest pain
3. Diarrhea
4. Cough

Answer: 1

Explanation: Sudden high fever + body ache.

18. Dengue warning signs:

1. Abdominal pain
2. Vomiting

3. Bleeding

4. All

Answer: 4

Explanation: Requires immediate care.

19. Filariasis spreads through:

1. Culex mosquito

2. Aedes

3. Sandfly

4. Tick

Answer: 1

Explanation: Wuchereria bancrofti.

20. Non-communicable diseases include:

1. TB

2. Malaria

3. Diabetes

4. Measles

Answer: 3

Explanation: NCD = chronic lifestyle diseases.

21. Most common NCD in India:

1. HIV
2. Diabetes
3. TB

4. Cholera

Answer: 2

Explanation: India = "diabetes capital."

22. Hypertension called:

1. Silent killer
2. Loud disease
3. Genetic flu
4. None

Answer: 1

Explanation: Often asymptomatic.

23. Normal BP:

1. <120/80
2. <140/90
3. <150/100
4. <160/110

Answer: 1

Explanation: Ideal BP = <120/80.

24. Diabetes diagnosed when fasting glucose:

1. <100 mg/dL
2. 100–125 mg/dL
3. ≥ 126 mg/dL
4. ≥ 200 mg/dL

Answer: 3

Explanation: FBS ≥ 126 mg/dL = diabetes.

25. HbA1c diagnostic for diabetes:

1. 3%
2. 4%
3. 6.5%
4. 10%

Answer: 3

Explanation: $\geq 6.5\%$ = diabetes.

26. Major risk factor for heart disease:

1. Smoking
2. Long sleep
3. Walking
4. Low salt

Answer: 1

Explanation: Smoking damages blood vessels.

27. Stroke occurs due to:

1. Liver infection
2. Brain ischemia or hemorrhage
3. Kidney failure
4. Cancer

Answer: 2

Explanation: Stroke = brain damage.

28. COPD caused mainly by:

1. Smoking
2. Alcohol
3. High fat diet
4. Cold water

Answer: 1

Explanation: Chronic smokers at risk.

29. Symptoms of COPD:

1. Chronic cough
2. Sputum

3. Breathlessness

4. All

Answer: 4

Explanation: Classic triad of COPD.

30. Common cause of cancer:

1. Smoking

2. Radiation

3. Chemicals

4. All

Answer: 4

Explanation: Multi-factorial.

31. Most common cancer in women in India:

1. Lung

2. Breast

3. Cervical

4. Liver

Answer: 2

Explanation: Breast cancer most common.

32. Common cancer in Indian women (second):

1. Cervical cancer

2. Oral cancer

3. Liver cancer

4. Stomach cancer

Answer: 1

Explanation: Cervical cancer is #2.

33. PAP smear screens for:

1. Breast cancer

2. Cervical cancer

3. Lung cancer

4. Liver cancer

Answer: 2

Explanation: Simple early detection tool.

34. Obesity defined by BMI:

1. 18.5

2. 23

3. 25

4. 30

Answer: 4

Explanation: BMI ≥ 30 = obesity.

35. Anemia most commonly caused by deficiency of:

1. Vitamin A
2. Iron
3. Calcium
4. Zinc

Answer: 2

Explanation: Iron deficiency anemia most common.

36. Goiter caused by deficiency of:

1. Iron
2. Iodine
3. Vitamin C
4. Magnesium

Answer: 2

Explanation: Iodine is essential for thyroid hormone.

37. Rickets caused by deficiency of:

1. Vitamin B12
2. Vitamin D

3. Vitamin A

4. Iron

Answer: 2

Explanation: Soft bones in children.

38. Scurvy caused by deficiency of:

1. Vitamin C

2. Vitamin B6

3. Vitamin A

4. Vitamin D

Answer: 1

Explanation: Causes bleeding gums.

39. Beriberi caused by:

1. Vitamin B12 deficiency

2. Thiamine (B1) deficiency

3. Vitamin D deficiency

4. Vitamin C deficiency

Answer: 2

Explanation: Beriberi = thiamine deficiency.

40. Pellagra caused by deficiency of:

1. Vitamin A
2. Niacin (B3)
3. Vitamin K
4. Iron

Answer: 2

Explanation: 4 D's – dermatitis, diarrhea, dementia, death.

41. Night blindness caused by:

1. Vitamin C deficiency
2. Vitamin A deficiency
3. Vitamin D deficiency
4. Iron deficiency

Answer: 2

Explanation: First sign of Vit A deficiency.

42. Anaphylaxis is a:

1. Mild allergy
2. Severe allergic reaction
3. Viral infection
4. Skin disease

Answer: 2

Explanation: Life-threatening emergency.

43. First drug for anaphylaxis:

1. Hydrocortisone
2. Paracetamol
3. Adrenaline
4. ORS

Answer: 3

Explanation: IM adrenaline is lifesaving.

44. Obesity leads to:

1. Diabetes
2. Hypertension
3. Heart disease
4. All

Answer: 4

Explanation: Obesity increases NCD risk.

45. Smoking increases risk of:

1. Cancer
2. COPD
3. Heart disease
4. All

Answer: 4

Explanation: Smoking affects all major systems.

46. Alcohol chronic use damages:

1. Liver
2. Heart
3. Nervous system
4. All

Answer: 4

Explanation: Alcohol impacts multiple organs.

47. Best way to prevent communicable diseases:

1. Antibiotics
2. Vaccination
3. Fruits
4. Exercise

Answer: 2

Explanation: Vaccines prevent major diseases.

48. Handwashing prevents:

1. Diarrhea
2. Pneumonia
3. COVID-like diseases
4. All

Answer: 4

Explanation: Hand hygiene major prevention tool.

49. Control of NCDs depends on:

1. Lifestyle modification
2. Healthy diet
3. Exercise
4. All

Answer: 4

Explanation: Prevention-focused.

50. Leading cause of death in India:

1. Communicable diseases
2. NCDs
3. Accidents
4. Cancer only

Answer: 2

Explanation: NCDs (heart disease, diabetes, stroke) are the major cause.



PHARMACOLOGY – 50 MCQs

(Routes, drug action, safety, common community-level drugs)

1. Study of drugs is called:

1. Pathology
2. Pharmacology
3. Microbiology
4. Anatomy

Answer: 2

Explanation: Pharmacology = study of drugs & their effects.

2. ORS stands for:

1. Oral Rehydration Solution
2. Oral Remedy Solution
3. Only Rehydration Salt
4. Osmotic Recovery Solution

Answer: 1

Explanation: ORS used to treat dehydration.

3. Osmolarity of WHO ORS:

1. 90 mOsm/L
2. 200 mOsm/L
3. 245 mOsm/L

4. 400 mOsm/L

Answer: 3

Explanation: Reduced osmolarity ORS = 245 mOsm/L.

4. Zinc supplementation in diarrhea:

1. Only for adults
2. 10 mg (<6 months), 20 mg (>6 months)
3. 50 mg daily
4. Not recommended

Answer: 2

Explanation: Zinc reduces duration & severity.

5. IFA tablet for pregnant women contains:

1. 20 mg iron
2. 30 mg iron
3. 60 mg iron + 500 mcg folic acid
4. 100 mg iron

Answer: 3

Explanation: Standard dose under NIPI.

6. Paracetamol used for:

1. Fever & pain

2. Hypertension
3. Diabetes
4. Diarrhea

Answer: 1

Explanation: Common antipyretic + analgesic.

7. Maximum daily dose of paracetamol (adult):

1. 1 g
2. 2 g
3. 4 g
4. 8 g

Answer: 3

Explanation: >4 g/day causes liver toxicity.

8. Drug used in anaphylaxis:

1. Paracetamol
2. Aspirin
3. Adrenaline
4. Zinc

Answer: 3

Explanation: IM adrenaline is life-saving.

9. Route of adrenaline administration in anaphylaxis:

1. Oral
2. IV
3. IM (intramuscular)
4. Subcutaneous

Answer: 3

Explanation: IM thigh is preferred.

10. Oral drugs absorbed mainly in:

1. Mouth
2. Stomach
3. Small intestine
4. Large intestine

Answer: 3

Explanation: Major absorption in small intestine.

11. Drug contraindicated in children with viral infections:

1. Paracetamol
2. Ibuprofen
3. Aspirin
4. ORS

Answer: 3

Explanation: Aspirin may cause Reye's syndrome.

12. First-line antibiotic for pneumonia in children (IMNCI):

1. Ceftriaxone
2. Cotrimoxazole
3. Penicillin
4. Metronidazole

Answer: 2

Explanation: Cotrimoxazole used at community level.

13. First-line drug for TB:

1. Rifampicin
2. Aspirin
3. Zinc
4. ORS

Answer: 1

Explanation: Rifampicin major TB drug.

14. HRZE is used for:

1. Diabetes
2. TB first-line therapy
3. Hypertension
4. Kidney failure

Answer: 2

Explanation: HRZE = 4-drug intensive phase.

15. Metformin used for:

1. Hypertension
2. Diabetes mellitus
3. Sore throat
4. Asthma

Answer: 2

Explanation: First-line oral drug for diabetes.

16. ORS should be used within:

1. 6 hours
2. 12 hours
3. 24 hours
4. 48 hours

Answer: 3

Explanation: ORS solution valid for 24 hours.

17. Iron absorption increased by:

1. Tea
2. Coffee
3. Vitamin C
4. Milk

Answer: 3

Explanation: Vitamin C helps absorption.

18. Tetracycline should NOT be given with:

1. Water
2. Iron or milk
3. Bread
4. Fruits

Answer: 2

Explanation: Milk reduces absorption.

19. Drug of choice for severe malaria:

1. Paracetamol
2. Artemisinin combination therapy (ACT)
3. Zinc
4. Aspirin

Answer: 2

Explanation: ACT recommended by NVBDCP.

20. Albendazole used for:

1. Fever
2. De-worming

3. Diabetes
4. Hypertension

Answer: 2

Explanation: Used in National Deworming Day.

21. Dose of albendazole for children (>2 years):

1. 100 mg
2. 200 mg
3. 400 mg
4. 50 mg

Answer: 3

Explanation: Standard dose 400 mg.

22. ORS preparation instruction:

1. Add packet to 500 ml water
2. Add packet to 1 litre clean water
3. Add packet to 2 litres
4. Add packet to any amount of water

Answer: 2

Explanation: 1 packet = 1 litre.

23. Common side effect of iron tablets:

1. White stools
2. Green stools
3. Black stools
4. Red stools

Answer: 3

Explanation: Dark stools are normal.

24. Drug used for hypertension:

1. ORS
2. Amlodipine
3. Iron
4. Zinc

Answer: 2

Explanation: Amlodipine is calcium channel blocker.

25. Oral contraceptive pills contain:

1. Estrogen + progesterone
2. Testosterone
3. Calcitonin
4. Vitamin D

Answer: 1

Explanation: Combined OCPs.

26. Emergency contraceptive pill contains:

1. Mifepristone
2. Levonorgestrel
3. Zinc
4. Iron

Answer: 2

Explanation: Levonorgestrel within 72 hours.

27. Drug given for eclampsia:

1. Calcium
2. Magnesium sulfate
3. ORS
4. Aspirin

Answer: 2

Explanation: MgSO_4 prevents seizures.

28. Antidote for MgSO_4 toxicity:

1. Iron
2. Calcium gluconate
3. ORS
4. Antacid

Answer: 2

Explanation: Calcium gluconate reverses Mg toxicity.

29. Vitamin A mega dose at 9 months:

1. 20,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 3 lakh IU

Answer: 3

Explanation: National Vit A Programme.

30. PPI drug used for acidity:

1. Omeprazole
2. Metformin
3. Paracetamol
4. ORS

Answer: 1

Explanation: Omeprazole reduces acid.

31. IV fluids for severe dehydration:

1. NS or Ringer lactate
2. Milk
3. Tea
4. Coffee

Answer: 1

Explanation: RL/NS restore volume.

32. Drug of choice for anaphylaxis:

1. Hydrocortisone
2. Adrenaline IM
3. IV fluids only
4. Zinc

Answer: 2

Explanation: Adrenaline is first-line.

33. Vaccine containing live attenuated virus:

1. IPV
2. OPV
3. TT
4. Hepatitis B

Answer: 2

Explanation: OPV is live attenuated.

34. Correct route for BCG:

1. IM
2. IV

3. ID
4. Oral

Answer: 3

Explanation: BCG given intradermally.

35. Drug causing constipation commonly:

1. Iron supplements
2. Vitamin C
3. Paracetamol
4. ORS

Answer: 1

Explanation: Iron often causes constipation.

36. ORS should be discarded after:

1. 6 hours
2. 12 hours
3. 24 hours
4. 48 hours

Answer: 3

Explanation: After 24 hours, risk of bacterial growth.

37. Antibiotic for UTI commonly:

1. Metronidazole
2. Ciprofloxacin
3. Albendazole
4. Zinc

Answer: 2

Explanation: Ciprofloxacin is common.

38. Insulin administered by:

1. Oral route
2. IM
3. Subcutaneous route
4. Rectal

Answer: 3

Explanation: SC injection required.

39. Hypoglycemia treated by:

1. ORS
2. Sugar/glucose
3. Insulin
4. Antibiotics

Answer: 2

Explanation: Low sugar corrected by glucose.

40. Drug for asthma attack:

1. Paracetamol
2. Salbutamol
3. Metformin
4. Iron

Answer: 2

Explanation: Bronchodilator relieves spasm.

41. Vitamin C rich food:

1. Lemon
2. Rice
3. Milk
4. Meat

Answer: 1

Explanation: Citrus fruits rich in vitamin C.

42. Folic acid prevents:

1. Neural tube defects
2. Asthma
3. Anemia only
4. Hemorrhage

Answer: 1

Explanation: Essential in early pregnancy.

43. Correct storage of vaccines:

1. 0–2°C
2. 2–8°C
3. 10–20°C
4. 20–40°C

Answer: 2

Explanation: Maintain cold chain.

44. Antibiotic misuse leads to:

1. Resistance
2. Cure
3. Weight loss
4. Vitamin increase

Answer: 1

Explanation: Overuse → resistant bacteria.

45. Drug used for hypertension in pregnancy:

1. Amlodipine
2. Labetalol
3. Enalapril
4. Ramipril

Answer: 2

Explanation: Labetalol safe in pregnancy.

46. ORS contains all EXCEPT:

1. Sodium
2. Potassium
3. Zinc
4. Glucose

Answer: 3

Explanation: Zinc is separate supplement.

47. Drug for fever in children:

1. Aspirin
2. Paracetamol
3. Ibuprofen only
4. Steroids

Answer: 2

Explanation: Paracetamol safest.

48. Antibiotic for diarrhea caused by bacteria:

1. ORS
2. Zinc

3. Ciprofloxacin / azithromycin

4. Paracetamol

Answer: 3

Explanation: Used for dysentery.

49. Drug causing hypoglycemia:

1. Metformin

2. Insulin

3. ORS

4. Zinc

Answer: 2

Explanation: Too much insulin lowers sugar.

50. Albendazole acts against:

1. Worm infestation

2. Viral infection

3. Bacterial infection

4. Fungal infection

Answer: 1

Explanation: Broad-spectrum anthelmintic.



ANATOMY & PHYSIOLOGY – 50 MCQs

1. Smallest unit of the body:

1. Tissue
2. Cell
3. Organ
4. System

Answer: 2

Explanation: Cell is the basic structural & functional unit.

2. Largest organ in the human body:

1. Heart
2. Brain
3. Skin
4. Liver

Answer: 3

Explanation: Skin is the largest organ.

3. Basic function of RBCs:

1. Immunity
2. Carry oxygen

3. Fat digestion
4. Hormone production

Answer: 2

Explanation: Hemoglobin carries oxygen.

4. Normal lifespan of an RBC:

1. 20 days
2. 60 days
3. 120 days
4. 200 days

Answer: 3

Explanation: RBC lives for 120 days.

5. WBCs function:

1. Digestion
2. Immunity
3. Oxygen transport
4. Vision

Answer: 2

Explanation: WBCs fight infection.

6. Largest artery:

1. Pulmonary artery
2. Aorta
3. Carotid artery
4. Radial artery

Answer: 2

Explanation: Aorta carries blood from left ventricle.

7. Heart located in:

1. Cranial cavity
2. Thoracic cavity
3. Pelvic cavity
4. Spinal cavity

Answer: 2

Explanation: Between the lungs.

8. Pacemaker of the heart:

1. AV node
2. SA node
3. Purkinje fibers
4. Bundle of His

Answer: 2

Explanation: SA node initiates heartbeat.

9. Normal heart rate:

1. 20–40/min
2. 40–60/min
3. 60–100/min
4. 150/min

Answer: 3

Explanation: Adult HR = 60–100 bpm.

10. Which organ detoxifies chemicals?

1. Kidney
2. Liver
3. Lung
4. Heart

Answer: 2

Explanation: Liver detoxifies & metabolizes drugs.

11. Largest gland in the body:

1. Thyroid
2. Pancreas
3. Liver
4. Pituitary

Answer: 3

Explanation: Liver is the largest gland.

12. Functional unit of kidney:

1. Neuron
2. Nephron
3. Alveoli
4. RBC

Answer: 2

Explanation: Nephron filters blood.

13. Normal urine output per day:

1. 200 ml
2. 500 ml
3. 800–2000 ml
4. 5000 ml

Answer: 3

Explanation: Kidneys produce 1–2 liters/day.

14. Part of brain that controls balance:

1. Cerebrum
2. Cerebellum
3. Medulla
4. Hypothalamus

Answer: 2

Explanation: Cerebellum controls posture & coordination.

15. Respiratory center located in:

1. Cerebrum
2. Medulla oblongata
3. Cerebellum
4. Thalamus

Answer: 2

Explanation: Medulla controls respiration.

16. Normal respiratory rate in adults:

1. 8–10/min
2. 12–20/min
3. 20–30/min
4. 30–40/min

Answer: 2

Explanation: Normal RR 12–20.

17. Gas exchange occurs in:

1. Bronchi
2. Alveoli

3. Trachea

4. Larynx

Answer: 2

Explanation: Alveoli = functional unit of lungs.

18. Enzyme that digests starch:

1. Lipase

2. Pepsin

3. Amylase

4. Trypsin

Answer: 3

Explanation: Amylase digests carbohydrates.

19. Protein digestion begins in:

1. Mouth

2. Stomach

3. Small intestine

4. Large intestine

Answer: 2

Explanation: Pepsin acts in stomach.

20. Absorption of nutrients occurs mainly in:

1. Stomach
2. Small intestine
3. Large intestine
4. Esophagus

Answer: 2

Explanation: Villi absorb nutrients.

21. Hormone insulin produced by:

1. Thyroid
2. Pancreas (beta cells)
3. Adrenal gland
4. Pituitary

Answer: 2

Explanation: Beta cells of islets.

22. Thyroid gland produces:

1. Insulin
2. Thyroxine
3. Cortisol
4. Testosterone

Answer: 2

Explanation: Controls metabolism.

23. Adrenal gland located:

1. Brain
2. On top of kidneys
3. Neck
4. Heart

Answer: 2

Explanation: Produces adrenaline & cortisol.

24. Bone-forming cells:

1. Osteoclasts
2. Osteoblasts
3. Osteocytes
4. Neurons

Answer: 2

Explanation: Osteoblasts build bone.

25. Smallest bone in human body:

1. Femur
2. Stapes
3. Radius
4. Ulna

Answer: 2

Explanation: Stapes in the ear.

26. Largest bone:

1. Tibia
2. Humerus
3. Femur
4. Pelvis

Answer: 3

Explanation: Femur = longest & strongest.

27. Primary function of platelets:

1. Immunity
2. Blood clotting
3. Digestion
4. Respiration

Answer: 2

Explanation: Platelets help hemostasis.

28. Normal hemoglobin for women:

1. 6–8 g/dL
2. 10–11 g/dL
3. 12–16 g/dL
4. 18–20 g/dL

Answer: 3

Explanation: Normal female Hb = 12–16.

29. Normal blood pH:

1. 6.5–6.9
2. 7.0–7.2
3. 7.35–7.45
4. 8.0

Answer: 3

Explanation: Human blood slightly alkaline.

30. Largest part of the brain:

1. Cerebrum
2. Cerebellum
3. Pons
4. Medulla

Answer: 1

Explanation: Controls thinking & voluntary actions.

31. Organ responsible for filtering toxins:

1. Lungs
2. Kidney

3. Liver

4. Heart

Answer: 3

Explanation: Liver detoxifies.

32. Which vitamin is needed for clotting?

1. Vitamin A

2. Vitamin B

3. Vitamin C

4. Vitamin K

Answer: 4

Explanation: Vitamin K essential for clotting.

33. Which organ produces bile?

1. Pancreas

2. Liver

3. Gallbladder

4. Spleen

Answer: 2

Explanation: Bile produced by liver, stored in gallbladder.

34. Basic functional unit of nervous system:

1. RBC
2. Neuron
3. Bone
4. Gland

Answer: 2

Explanation: Neuron conducts nerve impulses.

35. Lymph carries:

1. Oxygen
2. Fat
3. Digested food
4. Hormones only

Answer: 2

Explanation: Lymph transports fat from intestine.

36. Voice is produced in:

1. Pharynx
2. Larynx
3. Esophagus
4. Trachea

Answer: 2

Explanation: Larynx = voice box.

37. Which part of eye regulates light?

1. Cornea
2. Iris
3. Lens
4. Retina

Answer: 2

Explanation: Iris controls pupil size.

38. Retina contains:

1. Rods & cones
2. Cartilage
3. Bone
4. Nerves only

Answer: 1

Explanation: Rods = night vision; cones = color.

39. Organ of hearing:

1. Cochlea
2. Iris
3. Retina
4. Larynx

Answer: 1

Explanation: Cochlea converts sound waves.

40. Which blood group is universal donor?

1. A
2. B
3. O negative
4. AB positive

Answer: 3

Explanation: O– is universal donor.

41. Universal recipient:

1. A+
2. B+
3. O+
4. AB+

Answer: 4

Explanation: AB+ can receive all types.

42. Normal blood volume in adults:

1. 1 liter
2. 2–3 liters
3. 4–6 liters
4. 10 liters

Answer: 3

Explanation: Average 5 liters.

43. Blood pressure measured in:

1. cm
2. mmHg
3. g/dL
4. mg/dL

Answer: 2

Explanation: Millimeters of mercury.

44. Spinal cord ends at:

1. L1–L2
2. L3–L4
3. S1–S2
4. T1–T2

Answer: 1

Explanation: Adults spinal cord ends at L1–L2.

45. Main digestive organ:

1. Stomach
2. Small intestine

3. Large intestine
4. Rectum

Answer: 2

Explanation: Most digestion + absorption in small intestine.

46. Kidney regulates:

1. Blood pressure
2. Acid-base balance
3. Fluid balance
4. All

Answer: 4

Explanation: Kidney essential for homeostasis.

47. Oxygen carried mainly by:

1. Plasma
2. Hemoglobin
3. Platelets
4. WBC

Answer: 2

Explanation: 97% oxygen carried by Hb.

48. Normal respiratory movement controlled by:

1. CO₂ level
2. O₂ level
3. Nitrogen
4. Protein

Answer: 1

Explanation: CO₂ is primary respiratory stimulus.

49. Hormone for uterine contraction:

1. Insulin
2. Oxytocin
3. Thyroxine
4. Cortisol

Answer: 2

Explanation: Oxytocin causes labor contractions.

50. Hormone regulating sleep:

1. Melatonin
2. Serotonin
3. Insulin
4. Cortisol

Answer: 1

Explanation: Melatonin secreted by pineal gland.



NUTRITION & DIETETICS – 50 MCQs

1. Main source of energy in diet:

1. Protein
2. Fat
3. Carbohydrates
4. Vitamins

Answer: 3

Explanation: Carbohydrates are the primary energy source.

2. 1 gram carbohydrate provides:

1. 2 kcal
2. 4 kcal
3. 7 kcal
4. 9 kcal

Answer: 2

Explanation: Standard value = 4 kcal/g.

3. 1 gram fat provides:

1. 4 kcal

2. 5 kcal
3. 7 kcal
4. 9 kcal

Answer: 4

Explanation: Fats → highest energy.

4. 1 gram protein provides:

1. 4 kcal
2. 7 kcal
3. 9 kcal
4. 2 kcal

Answer: 1

Explanation: Proteins = 4 kcal/g.

5. Richest source of protein:

1. Rice
2. Milk
3. Egg
4. Sugar

Answer: 3

Explanation: Egg = complete protein.

6. Top dietary source of Vitamin A:

1. Carrot
2. Rice
3. Wheat
4. Potato

Answer: 1

Explanation: Carrot is rich in beta-carotene.

7. Vitamin A deficiency causes:

1. Rickets
2. Night blindness
3. Goiter
4. Scurvy

Answer: 2

Explanation: Early sign = night blindness.

8. Vitamin D deficiency leads to:

1. Rickets
2. Scurvy
3. Beriberi
4. Pellagra

Answer: 1

Explanation: Soft/bowed bones in children.

9. Vitamin C deficiency leads to:

1. Rickets
2. Scurvy
3. Goiter
4. Night blindness

Answer: 2

Explanation: Causes bleeding gums.

10. Vitamin K needed for:

1. Eyesight
2. Immunity
3. Blood clotting
4. Digestion

Answer: 3

Explanation: Essential for coagulation.

11. Good source of Vitamin C:

1. Milk
2. Lemon
3. Oil
4. Sugar

Answer: 2

Explanation: Citrus fruits highest in Vitamin C.

12. Iron deficiency causes:

1. Night blindness
2. Anemia
3. Goiter
4. Rickets

Answer: 2

Explanation: Iron needed for RBC production.

13. Best food for iron:

1. Rice
2. Green leafy vegetables
3. Coconut
4. Sugar

Answer: 2

Explanation: Palak, methi etc. are iron-rich.

14. Enhances iron absorption:

1. Tea
2. Coffee
3. Vitamin C
4. Milk

Answer: 3

Explanation: Vitamin C increases absorption.

15. Iodine deficiency leads to:

1. Anemia
2. Goiter
3. Scurvy
4. Rickets

Answer: 2

Explanation: Enlarged thyroid due to low iodine.

16. Best source of iodine:

1. Fruits
2. Iodized salt
3. Water
4. Meat

Answer: 2

Explanation: Mandatory iodization program.

17. Marasmus is due to:

1. Only protein deficiency
2. Only calorie deficiency

3. Severe calorie deficiency
4. Vitamin deficiency

Answer: 3

Explanation: Marasmus = energy deficiency.

18. Kwashiorkor due to:

1. Protein deficiency
2. Vitamin D deficiency
3. Excess fat
4. Low iron

Answer: 1

Explanation: Protein malnutrition → edema.

19. Severe acute malnutrition MUAC cutoff:

1. <14 cm
2. <13 cm
3. <12 cm
4. <11.5 cm

Answer: 4

Explanation: MUAC <11.5 cm = SAM.

20. BMI formula:

1. Weight $\times$ height
2. Weight/height²
3. Height/weight
4. Weight – height

Answer: 2

Explanation: BMI = weight (kg)/height (m²).

21. Normal BMI range:

1. 10–15
2. 18.5–24.9
3. 25–35
4. 35

Answer: 2

Explanation: Healthy BMI range.

22. Obesity BMI:

1. 23
2. 25
3. 30
4. 40

Answer: 3

Explanation: BMI >30 = obese.

23. Breast milk contains:

1. Antibodies
2. Water
3. Fat
4. All

Answer: 4

Explanation: Complete nutrition + IgA.

24. Colostrum rich in:

1. Fat
2. Antibodies
3. Protein
4. All

Answer: 4

Explanation: Thick, yellow, highly nutritious.

25. Exclusive breastfeeding duration:

1. 3 months
2. 4 months

3. 6 months

4. 12 months

Answer: 3

Explanation: WHO recommends 6 months.

26. Complementary feeding starts at:

1. 2 months

2. 4 months

3. 6 months

4. 1 year

Answer: 3

Explanation: Start solids at 6 months.

27. Best first complementary food:

1. Honey

2. Cow's milk

3. Mashed home food (khichdi, dal)

4. Biscuits

Answer: 3

Explanation: No honey before 1 year.

28. ICDS stands for:

1. Indian Child Disease Scheme
2. Integrated Child Development Services
3. Infant Child Dependency Services
4. Integrated Clinic Delivery System

Answer: 2

Explanation: Covers children <6 years.

29. Anganwadi worker provides:

1. Vaccination
2. Supplementary nutrition
3. Medical surgery
4. Nursing care

Answer: 2

Explanation: Key role in ICDS.

30. Mid-day meal program targets:

1. Adults
2. Pregnant women
3. School children
4. Elderly

Answer: 3

Explanation: Improves child nutrition.

31. Protein-energy malnutrition commonly seen in:

1. Elderly
2. Infants & toddlers
3. Adults
4. Pregnant women only

Answer: 2

Explanation: Due to poor diet and infections.

32. Vitamin B12 found mainly in:

1. Meat
2. Fruits
3. Vegetables
4. Rice

Answer: 1

Explanation: B12 in animal foods.

33. RDA means:

1. Routine Diet Allowance
2. Recommended Dietary Allowance
3. Regular Daily Allowance
4. Registered Diet Advice

Answer: 2

Explanation: Standard recommended intake.

34. Pellagra caused by deficiency of:

1. Vitamin A
2. Niacin (B3)
3. Iron
4. Vitamin K

Answer: 2

Explanation: 4 D's: Dermatitis, diarrhea, dementia, death.

35. Thiamine deficiency causes:

1. Beriberi
2. Night blindness
3. Rickets
4. Scurvy

Answer: 1

Explanation: Deficiency of Vitamin B1.

36. Riboflavin deficiency causes:

1. Cheilosis
2. Goiter
3. Obesity
4. Diabetes

Answer: 1

Explanation: Cracks at corners of mouth.

37. Vitamin E important for:

1. Heart
2. Immunity
3. Reproduction & antioxidant
4. Bone

Answer: 3

Explanation: Fat-soluble antioxidant.

38. Calcium mainly found in:

1. Green leafy vegetables
2. Milk
3. Fish
4. All

Answer: 4

Explanation: All are good sources.

39. Vitamin D best natural source:

1. Sunlight
2. Mango

3. Egg only

4. Water

Answer: 1

Explanation: UV light activates Vitamin D.

40. Which nutrient builds body tissues?

1. Fat

2. Carbohydrates

3. Protein

4. Water

Answer: 3

Explanation: Protein = building & repair.

41. Water requirement per day (adult):

1. 500 ml

2. 1 litre

3. 2–3 litres

4. 5 litres

Answer: 3

Explanation: Standard daily need.

42. Balanced diet includes:

1. Only fruits
2. Only milk
3. All nutrients in right amount
4. Only protein

Answer: 3

Explanation: Must include all food groups.

43. Energy-giving nutrient:

1. Protein
2. Fat
3. Carbohydrates
4. Fat & carbs

Answer: 4

Explanation: Both fats & carbs give energy.

44. BMI <18.5 indicates:

1. Obesity
2. Overweight
3. Underweight
4. Normal

Answer: 3

Explanation: <18.5 = underweight.

45. Food rich in folic acid:

1. Milk
2. Green leafy vegetables
3. Sugar
4. Oil

Answer: 2

Explanation: Prevents neural tube defects.

46. Vitamin A stored in:

1. Kidney
2. Liver
3. Pancreas
4. Heart

Answer: 2

Explanation: Liver stores vitamin A.

47. Edema in Kwashiorkor due to:

1. Sodium excess
2. Low protein (low albumin)
3. High cholesterol
4. Low water

Answer: 2

Explanation: Lack of protein → low oncotic pressure.

48. Common nutritional anemia in India:

1. Vitamin C deficiency
2. Iron deficiency anemia
3. Vitamin D deficiency
4. Calcium deficiency

Answer: 2

Explanation: Most widespread anemia.

49. Best test for iron deficiency anemia:

1. Hemoglobin
2. Ferritin
3. Serum calcium
4. Albumin

Answer: 2

Explanation: Ferritin = iron stores.

50. Protein-rich pulse:

1. Rice
2. Wheat
3. Soya bean
4. Sugarcane

Answer: 3

Explanation: Soybean highest in protein among pulses.

NURSING ALL ROUNDER.IN

ENVIRONMENTAL HEALTH & SANITATION – 50 MCQs

1. Safe drinking water must contain chlorine residual of:

1. 0.2 mg/L
2. 2 mg/L
3. 5 mg/L
4. 10 mg/L

Answer: 1

Explanation: 0.2–0.5 mg/L free chlorine ensures safety.

2. Most common method of water purification at community level:

1. Boiling
2. Filtration + chlorination
3. UV light
4. Reverse osmosis

Answer: 2

Explanation: Rapid sand filtration + chlorination widely used.

3. Most reliable household water purification:

1. Cloth filtration
2. Sand filter
3. Boiling
4. Storing

Answer: 3

Explanation: Boiling kills all pathogens.

4. Ideal pH of drinking water:

1. 4–5
2. 6.5–8.5
3. 8.5–10
4. 10–12

Answer: 2

Explanation: Safe pH recommended by WHO.

5. Hardness of water mainly caused by:

1. Sodium
2. Calcium & magnesium salts

3. Iron

4. Iodine

Answer: 2

Explanation: Ca^{2+} & Mg^{2+} cause hardness.

6. Best method for removal of temporary hardness:

1. Boiling

2. Chlorination

3. Filter

4. Storing

Answer: 1

Explanation: Boiling precipitates bicarbonates.

7. Bleaching powder active ingredient:

1. Calcium sulfate

2. Calcium hypochlorite

3. Sodium chloride

4. Magnesium

Answer: 2

Explanation: Releases chlorine for disinfection.

8. Most sensitive indicator of water pollution:

1. E. coli
2. Salmonella
3. Vibrio
4. Hepatitis A virus

Answer: 1

Explanation: Indicates fecal contamination.

9. Biogas is produced by:

1. Aerobic digestion
2. Anaerobic digestion
3. Oxidation
4. Distillation

Answer: 2

Explanation: Anaerobic decomposition of waste.

10. Most hygienic latrine type:

1. Open defecation
2. Bucket latrine
3. Water-seal latrine
4. Open pit

Answer: 3

Explanation: Water seal prevents odor & flies.

11. Recommended per capita water supply in India (urban):

1. 20 L/day
2. 40 L/day
3. 70 L/day
4. 135 L/day

Answer: 4

Explanation: CPHEEO recommends 135 L/day.

12. Solid waste disposal best method for cities:

1. Dumps
2. Sanitary landfill
3. Open burning
4. Open dumping

Answer: 2

Explanation: Sanitary landfill prevents contamination.

13. Incineration mainly used for:

1. Kitchen waste
2. Hospital waste
3. Plastic only
4. Metal waste

Answer: 2

Explanation: Burns biomedical waste safely.

14. Color code for infectious biomedical waste:

1. Black
2. Blue
3. Yellow
4. Green

Answer: 3

Explanation: Yellow bag for infectious waste.

15. Vector of malaria:

1. Aedes
2. Culex
3. Anopheles
4. Housefly

Answer: 3

Explanation: Anopheles female mosquito.

16. Aedes mosquito bites:

1. At night
2. Only evening
3. Daytime
4. Only after rain

Answer: 3

Explanation: Day biter — dengue vector.

17. Filariasis spread by:

1. Aedes
2. Culex
3. Sandfly
4. Tick

Answer: 2

Explanation: Culex mosquito.

18. Best method for mosquito control:

1. Fogging only
2. Source reduction (removing breeding sites)
3. Burning waste
4. Using plastic

Answer: 2

Explanation: Eliminate stagnant water.

19. Housefly transmits diseases by:

1. Biting
2. Contaminating food

3. Laying eggs
4. Touching skin

Answer: 2

Explanation: Mechanical transmission.

20. Main symptom of fluoride excess (fluorosis):

1. Loose stools
2. Bone deformities & mottling of teeth
3. Skin rash
4. Fever

Answer: 2

Explanation: Fluoride affects bones/teeth.

21. Noise pollution measured in:

1. Lux
2. Candela
3. Decibel
4. Watt

Answer: 3

Explanation: dB measures noise.

22. Acceptable noise level in residential area (day):

1. 55 dB
2. 100 dB
3. 150 dB
4. 10 dB

Answer: 1

Explanation: CPCB limits ~55 dB daytime.

23. Air pollution indicator gas:

1. Ozone
2. SO₂
3. CO₂
4. Nitrogen

Answer: 2

Explanation: SO₂ indicates industrial pollution.

24. Primary source of indoor air pollution in rural India:

1. AC
2. Biomass fuel
3. Gas stove
4. Electricity

Answer: 2

Explanation: Wood, dung, chulhas.

25. Most common cause of food poisoning:

1. S. aureus
2. E. coli
3. Salmonella
4. Vibrio

Answer: 1

Explanation: Staph produces toxin.

26. Pasteurization of milk done at:

1. 35°C
2. 50°C
3. 63°C for 30 min
4. 100°C for 1 min

Answer: 3

Explanation: Holder method.

27. Cold chain temperature:

1. 0–2°C
2. 2–8°C
3. –20°C
4. Room temperature

Answer: 2

Explanation: Vaccines stored at 2–8°C.

28. Toilet per person recommended:

1. 1 per 1 person
2. 1 per 5
3. 1 per 10
4. 1 per 20

Answer: 3

Explanation: Standard sanitation guideline.

29. Best housing ventilation type:

1. Cross ventilation
2. Window-less
3. Air-tight
4. Closed

Answer: 1

Explanation: Promotes air circulation.

30. Ideal room illumination measured in:

1. Watt
2. Candela
3. Lux
4. Volt

Answer: 3

Explanation: Lux measures brightness.

31. Sanitary well minimum distance from contamination:

1. 5 m
2. 10 m
3. 15 m
4. 100 m

Answer: 3

Explanation: At least 15 meters from latrine.

32. How much soap solution needed to kill germs?

1. 1%
2. 2%
3. 5%
4. 10%

Answer: 1

Explanation: 1% bleaching powder solution commonly used.

33. The “Blue baby” disease due to:

1. High calcium
2. Nitrate contamination

3. Fluoride deficiency
4. Vitamin C deficiency

Answer: 2

Explanation: Methemoglobinemia in infants.

34. Hard water effect:

1. Good lather
2. Poor lather formation
3. Tastes sweet
4. Causes red color

Answer: 2

Explanation: Calcium prevents soap lather.

35. Most effective household mosquito control:

1. Fogging
2. Mosquito nets
3. Spraying DDT indoors
4. Wearing gloves

Answer: 2

Explanation: Nets protect all night.

36. Most common vector-borne disease in India:

1. Malaria
2. Dengue
3. Filariasis
4. Chikungunya

Answer: 1

Explanation: Malaria widely prevalent.

37. Sewage treatment primarily removes:

1. Solids
2. Chemicals
3. Pathogens
4. All

Answer: 4

Explanation: STP removes all.

38. Handwashing prevents:

1. Diarrhea
2. ARI
3. COVID-like diseases
4. All

Answer: 4

Explanation: Universal preventive action.

39. Indicator of fecal contamination in water:

1. Streptococcus
2. E. coli
3. Vibrio cholerae
4. Salmonella

Answer: 2

Explanation: E. coli used as standard indicator.

40. Ventilation rate per person:

1. 5 cu ft/min
2. 10 cu ft/min
3. 100 cu ft/min
4. 1000 cu ft/min

Answer: 2

Explanation: Standard fresh air supply.

41. Most common cause of air pollution in cities:

1. Vehicles
2. Plants
3. Lakes
4. Cows

Answer: 1

Explanation: Traffic main source.

42. Most common pollutant from vehicles:

1. Ozone
2. Carbon monoxide
3. CO₂
4. Sulfur

Answer: 2

Explanation: CO from incomplete combustion.

43. Diseases spread by housefly include:

1. Cholera
2. Typhoid
3. Dysentery
4. All

Answer: 4

Explanation: Housefly spreads multiple fecal–oral diseases.

44. Most common method of disinfection of rooms:

1. Boiling
2. Fumigation
3. Burning
4. Sunlight

Answer: 2

Explanation: Formalin fumigation used in hospitals.

45. Bedbug control is done by:

1. Sand
2. Heat + insecticide
3. Water
4. Cotton

Answer: 2

Explanation: Heat kills bedbugs.

46. Radiation hazard measured in:

1. Sievert
2. Lux
3. Decibel
4. Watt

Answer: 1

Explanation: Radiation dose unit.

47. Most biodegradable waste:

1. Plastic
2. Food waste

3. Metal

4. Glass

Answer: 2

Explanation: Organic waste decomposes easily.

48. Waterborne diseases include:

1. Cholera

2. Hepatitis A

3. Typhoid

4. All

Answer: 4

Explanation: All spread by contaminated water.

49. Flies breed in:

1. Clean water

2. Rotten garbage

3. Trees

4. Metal

Answer: 2

Explanation: Decomposing organic matter.

50. Best method to prevent dengue:

1. Kill adult mosquitoes
2. Destroy breeding sites
3. Fogging only
4. Eating fruits

Answer: 2

Explanation: Source reduction is key.

NATIONAL HEALTH PROGRAMMES OF INDIA – 50 MCQs

(NHM, RMNCH+A, NTEP, NACP, NPCDCS, NVBDCP, NIDDCP, IDSP, RBSK, RKSK, NDD, MAA, PMSMA, JSY, JSSK, etc.)

1. NHM stands for:

1. National Health Mission
2. National Hospital Mission
3. New Health Module
4. National Health Model

Answer: 1

Explanation: NHM covers NRHM + NUHM.

2. Goal of NHM:

1. Reduce malnutrition
2. Universal access to equitable healthcare

3. Medical college construction
4. Free surgeries

Answer: 2

Explanation: NHM focuses on equity, affordability & universal access.

3. RMNCH+A refers to:

1. Reproductive, Maternal, Newborn, Child & Adolescent health
2. Rural medical care
3. Rehabilitation services
4. None

Answer: 1

Explanation: Covers entire life cycle approach.

4. ASHA is posted at:

1. Sub-centre
2. Village level
3. CHC
4. District hospital

Answer: 2

Explanation: ASHA is community-level link worker.

5. Incentive for ASHA under JSY for institutional delivery:

1. ₹50
2. ₹100
3. ₹600
4. ₹1,400

Answer: 3

Explanation: ASHA receives ₹600; mother gets ₹1,400 (rural).

6. JSY aims to reduce:

1. Malaria
2. Maternal & infant mortality
3. Cancer
4. Diabetes

Answer: 2

Explanation: Promotes institutional delivery.

7. JSSK provides:

1. Free home delivery
2. Free drugs, diagnostics, transport for pregnant women & sick newborns
3. Free employment
4. Free milk

Answer: 2

Explanation: Cashless services for mother & newborn.

8. PMSMA conducted on:

1. 1st of every month
2. 9th of every month
3. 15th of every month
4. Last day

Answer: 2

Explanation: Pradhan Mantri Surakshit Matritva Abhiyan: 9th.

9. Under RKSK, focus age group is:

1. 0–6 years
2. 10–19 years
3. 20–40 years
4. 40–60 years

Answer: 2

Explanation: Rashtriya Kishor Swasthya Karyakram.

10. RBSK mainly screens:

1. Adults
2. Adolescents only
3. Children 0–18 years
4. Elderly

Answer: 3

Explanation: Detects 4Ds: defects, diseases, deficiencies, disabilities.

11. NTEP aims to eliminate TB by:

1. 2022
2. 2025
3. 2030
4. 2050

Answer: 2

Explanation: India aims TB elimination by 2025.

12. Drug regimen under NTEP intensive phase:

1. H + R only
2. HRZE
3. HRE
4. RH only

Answer: 2

Explanation: 4 drugs: Isoniazid, Rifampicin, Pyrazinamide, Ethambutol.

13. DOTS means:

1. Directly Observed Treatment Strategy
2. Disease Observation Technique
3. Drug Only Therapy
4. None

Answer: 1

Explanation: Patient monitored while taking drugs.

14. Nikshay portal used for:

1. HIV reporting
2. TB notification & monitoring
3. Immunization
4. Nutrition

Answer: 2

Explanation: Real-time TB tracking.

15. NACO works for:

1. TB
2. HIV/AIDS control
3. Iodine
4. Nutrition

Answer: 2

Explanation: National AIDS Control Organisation.

16. HIV testing includes:

1. One rapid test
2. Three rapid tests of different antigens

3. Only ELISA

4. CT scan

Answer: 2

Explanation: For confirmation, 3 tests.

17. Prevention of Mother-to-Child Transmission (PMTCT) uses:

1. Iron

2. Vitamin A

3. ART therapy

4. ORS

Answer: 3

Explanation: ART reduces vertical transmission.

18. NPCDCS deals with:

1. TB

2. Vector diseases

3. Diabetes, hypertension, cancer

4. Skin diseases

Answer: 3

Explanation: Major NCD program.

19. National Tobacco Control Programme focuses on:

1. Promoting smoking
2. Preventing tobacco use
3. Selling tobacco
4. Training smokers

Answer: 2

Explanation: Reduces tobacco addiction.

20. IDSP stands for:

1. Integrated Disease Surveillance Programme
2. Indian Disease Service Program
3. Infectious Disease Survey Project
4. None

Answer: 1

Explanation: Monitors outbreaks/epidemics.

21. Lines of reporting under IDSP:

1. Weekly
2. Monthly
3. Yearly
4. Decade

Answer: 1

Explanation: Weekly reporting crucial.

22. NVBDCP covers diseases EXCEPT:

1. Malaria
2. Dengue
3. Leprosy
4. Filariasis

Answer: 3

Explanation: Leprosy under NLEP.

23. Leprosy treatment under NLEP uses:

1. ACT
2. MDT (multidrug therapy)
3. ART
4. ORS

Answer: 2

Explanation: MDT: rifampicin + dapsone + clofazimine.

24. Kala-azar elimination target:

1. 2020
2. 2023
3. 2025
4. 2030

Answer: 3

Explanation: India aims for elimination by 2025.

25. ASHA dose of ORS packet contains:

1. 1 litre standard packet
2. 2 litres
3. 100 ml
4. 200 ml

Answer: 1

Explanation: Standard 1 L packet.

26. National Deworming Day celebrated on:

1. Jan 30
2. Feb 10
3. March 3
4. July 20

Answer: 2

Explanation: Feb 10 & Aug 10.

27. Albendazole dose for children (NDD):

1. 100 mg
2. 200 mg
3. 400 mg
4. 40 mg

Answer: 3

Explanation: Single dose 400 mg.

28. ICDS under which ministry?

1. Ministry of Health
2. Ministry of Women & Child Development
3. Rural Development
4. Labour

Answer: 2

Explanation: ICDS supervised by MWCD.

29. Anganwadi worker provides:

1. Medical surgery
2. Supplementary nutrition
3. TB treatment
4. ART therapy

Answer: 2

Explanation: Nutrition & preschool education.

30. Contraceptive choice under FP includes:

1. OCP
2. Condoms

3. IUCD

4. All

Answer: 4

Explanation: Many contraceptive options.

31. Mission Indradhanush aims for:

1. Nutrition
2. 90% full immunization coverage
3. Cancer treatment
4. HIV prevention

Answer: 2

Explanation: Strengthening immunization.

32. Intensified Mission Indradhanush target:

1. Hard-to-reach areas
2. Cities only
3. Only newborns
4. Only pregnant women

Answer: 1

Explanation: Targets left-out/ dropped-out children.

33. Anemia Mukht Bharat 6x6x6 strategy includes all EXCEPT:

1. IFA supplementation
2. Deworming
3. Vitamin K injections
4. Behavior change

Answer: 3

Explanation: Vitamin K not included.

34. Vitamin A biannual rounds given under:

1. JSY
2. RBSK
3. National Vitamin A Programme
4. NTEP

Answer: 3

Explanation: Twice yearly to children.

35. NIDDCP deals with:

1. Dengue
2. Iodine deficiency disorders
3. TB
4. Cancer

Answer: 2

Explanation: Focus on salt iodization.

36. Sickle cell program covers:

1. Western/tribal states
2. All states
3. Only cities
4. Delhi only

Answer: 1

Explanation: Tribal belts targeted.

37. MAA programme promotes:

1. Surgery
2. Breastfeeding
3. HIV testing
4. TB drugs

Answer: 2

Explanation: MAA = Mothers' Absolute Affection.

38. Kayakalp award given for:

1. Nutrition
2. Hospital cleanliness
3. School health
4. Tobacco control

Answer: 2

Explanation: Clean hospitals initiative.

39. The role of ASHA includes all EXCEPT:

1. Home-based newborn care
2. Ensuring institutional delivery
3. Performing surgery
4. Immunization mobilization

Answer: 3

Explanation: ASHA does not perform surgery.

40. PM-JAY under Ayushman Bharat covers:

1. ₹5 lakh per family per year
2. ₹50,000 per person
3. ₹10 lakh only for seniors
4. No benefit

Answer: 1

Explanation: Health insurance coverage.

41. HWCs under Ayushman Bharat aim to provide:

1. Telemedicine only
2. Comprehensive primary healthcare
3. Free surgeries
4. HIV treatment only

Answer: 2

Explanation: Strengthen primary health care.

42. NMEP originally targeted:

1. Malaria eradication
2. TB control
3. Cancer
4. HIV

Answer: 1

Explanation: National Malaria Eradication Programme.

43. PHC population coverage:

1. 5,000
2. 10,000–30,000
3. 1 lakh
4. 5 lakh

Answer: 2

Explanation: Rural PHC covers 20–30k.

44. SC (Sub-centre) covers:

1. 500 people
2. 1,000 people

3. 3,000–5,000 people

4. 1 lakh

Answer: 3

Explanation: Rural SC: 3,000 (hilly) to 5,000 (plains).

45. CHC population norm:

1. 1 lakh

2. 3 lakh

3. 30 lakh

4. 2,000

Answer: 1

Explanation: CHC covers ~1 lakh.

46. Accredited Social Health Activist (ASHA) is selected from:

1. Outside village

2. Same village

3. District office

4. State office

Answer: 2

Explanation: Locally selected woman volunteer.

47. ASHA drug kit includes all EXCEPT:

1. ORS
2. Paracetamol
3. Antibiotics for TB
4. Iron tablets

Answer: 3

Explanation: TB drugs not given to ASHA.

48. Adolescent WIFS includes:

1. Weekly IFA
2. Daily calcium
3. Steroids
4. Glucose

Answer: 1

Explanation: Weekly Iron Folic Acid Supplementation.

49. NPCBB works for:

1. Blindness
2. Malnutrition
3. Obesity
4. Cancer

Answer: 1

Explanation: National Programme for Control of Blindness.

50. School Health Programme provides:

1. Immunization only
2. Health check-ups + screening + education
3. Surgery
4. TB treatment

Answer: 2

Explanation: Comprehensive health for students.

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Concepts of Health & Disease – 50 MCQ

1. Health is defined by WHO as:

1. Absence of disease
2. Complete physical, mental & social well-being
3. Physical well-being only
4. Mental well-being only

Answer: 2

Explanation: WHO (1948) definition includes *physical, mental, and social* well-being, not just absence of disease.

2. A state of complete physical, mental, social well-being and not merely absence of disease describes:

1. Hygiene
2. Health
3. Wellness
4. Community health

Answer: 2

Explanation: This is the classic WHO definition of health.

3. “Health is a state of balance between man and his environment” was given by:

1. Ecological concept
2. Biomedical concept
3. Psychological concept
4. Holistic concept

Answer: 1

Explanation: The ecological concept emphasizes interaction between humans and environment.

4. Which concept views health as absence of disease?

1. Biomedical
2. Holistic
3. Ecological
4. Social

Answer: 1

Explanation: Biomedical concept = health means only "no disease".

5. Holistic concept of health includes:

1. Only physical
2. Only psychological
3. Body, mind and spirit
4. Only social

Answer: 3

Explanation: Holistic approach integrates physical, mental, social, and spiritual dimensions.

6. Determinants of health do NOT include:

1. Heredity
2. Lifestyle
3. Environment
4. Astrology

Answer: 4

Explanation: Astrology is not a scientific determinant of health.

7. According to Lalonde Report (1974), the major determinant of health is:

1. Lifestyle
2. Genetics
3. Environment
4. Health care services

Answer: 1

Explanation: Lalonde report—lifestyle contributes 50% to health.

8. Primordial prevention is aimed at:

1. Preventing risk factors from emerging
2. Early diagnosis
3. Rehabilitation
4. Preventing complications

Answer: 1

Explanation: Primordial = preventing development of risk factors.

9. Primary prevention includes all except:

1. Immunization
2. Health promotion
3. Early diagnosis
4. Safe water supply

Answer: 3

Explanation: Early diagnosis is secondary prevention.

10. Secondary prevention aims at:

1. Preventing risk factors
2. Early diagnosis and treatment
3. Limiting disability
4. Rehabilitation

Answer: 2

Explanation: Secondary prevention detects disease at early stage.

11. Tertiary prevention is concerned with:

1. Health promotion
2. Disability limitation & rehabilitation
3. Preventing disease occurrence
4. Risk factor prevention

Answer: 2

Explanation: Tertiary prevention includes rehab and disability limitation.

12. Example of primordial prevention:

1. Ban on junk food in schools
2. Immunization
3. Screening for diabetes
4. Physiotherapy

Answer: 1

Explanation: Prevents the development of risk factors in children.

13. Herd immunity is related to:

1. Nutrition
2. Immunization
3. Rehabilitation
4. Industrial health

Answer: 2

Explanation: Herd immunity develops when a large population is vaccinated or immune.

14. Incubation period is:

1. Time from exposure to onset of symptoms
2. Time from infection to death
3. Length of illness
4. Time from recovery to immunity

Answer: 1

Explanation: Incubation = exposure → symptoms.

15. A disease transmitted from animals to humans is called:

1. Zoonosis
2. Vector disease
3. Endemic
4. Pandemic

Answer: 1

Explanation: Zoonotic diseases come from animals.

16. Disease constantly present in an area is called:

1. Endemic
2. Epidemic
3. Pandemic
4. Sporadic

Answer: 1

Explanation: Endemic = habitual presence.

17. Sudden increase of cases in a community is:

1. Endemic
2. Epidemic
3. Pandemic
4. Sporadic

Answer: 2

Explanation: Epidemic = sudden rise above expected level.

18. Worldwide spread of disease is:

1. Endemic
2. Epidemic
3. Pandemic
4. Zoonotic

Answer: 3

Explanation: Example: COVID-19.

19. Sporadic disease means:

1. Occurs regularly
2. Occurs occasionally, irregularly
3. Occurs in epidemic form
4. Occurs globally

Answer: 2

Explanation: Sporadic = infrequent, irregular.

20. An agent that causes disease is called:

1. Host
2. Environment
3. Agent
4. Factor

Answer: 3

Explanation: Agent is the disease-causing organism.

21. The triangle of disease causation includes:

1. Host, agent, environment
2. Doctor, nurse, patient
3. Virus, bacteria, fungus
4. Air, water, food

Answer: 1

Explanation: Epidemiological triad.

22. "Iceberg phenomenon" is mostly seen in:

1. Non-communicable diseases
2. Communicable diseases
3. Water-borne diseases
4. Sexually transmitted diseases

Answer: 2

Explanation: Hidden cases are more than visible ones.

23. The visible part of the iceberg represents:

1. Hidden cases
2. Subclinical cases
3. Known clinical cases
4. Carrier states

Answer: 3

Explanation: Clinical cases appear above water.

24. A person who carries pathogen without symptoms is:

1. Susceptible
2. Carrier
3. Vector
4. Host

Answer: 2

Explanation: Carriers transmit disease silently.

25. Example of a chronic carrier:

1. Typhoid
2. Influenza
3. Cholera
4. Malaria

Answer: 1

Explanation: "Typhoid Mary" is a classic chronic carrier.

26. Incidence rate measures:

1. New cases
2. Old cases
3. Both new & old cases
4. Mortality

Answer: 1

Explanation: Incidence captures *new* occurrences.

27. Prevalence rate measures:

1. New cases
2. Existing cases
3. Only cured cases
4. Only dead cases

Answer: 2

Explanation: Prevalence = all existing cases.

28. High incidence and low prevalence indicates:

1. Long disease duration
2. Short disease duration / rapid recovery
3. Low cure rate
4. High mortality

Answer: 2

Explanation: If prevalence is low, recovery is fast.

29. Agent and host come into contact through:

1. Causal chain
2. Epidemiological triad
3. Modes of transmission
4. Natural history

Answer: 3

Explanation: Contact occurs via transmission routes.

30. Vector-borne disease example:

1. TB
2. Malaria
3. Measles
4. Cholera

Answer: 2

Explanation: Transmitted by Anopheles mosquito.

31. Airborne disease example:

1. Typhoid
2. Malaria
3. TB
4. Rabies

Answer: 3

Explanation: TB spreads by droplet nuclei.

32. Feco-oral transmission occurs in:

1. Measles
2. Cholera
3. TB
4. Influenza

Answer: 2

Explanation: Cholera spreads through contaminated food and water.

33. Natural history of disease begins with:

1. Symptoms
2. Exposure
3. Diagnosis
4. Treatment

Answer: 2

Explanation: First step: exposure to causative agent.

34. The pre-pathogenesis phase includes:

1. Disease present
2. Man + environment interaction before disease
3. Treatment
4. Rehabilitation

Answer: 2

Explanation: No disease yet, but risk factors exist.

35. Pathogenesis phase starts when:

1. Agent enters the body
2. Symptoms appear
3. Diagnosis made
4. Treatment starts

Answer: 1

Explanation: Disease starts after agent entry.

36. Disability limitation belongs to:

1. Primary
2. Secondary
3. Tertiary
4. Primordial

Answer: 3

Explanation: Part of tertiary prevention.

37. Health promotion activity example:

1. Immunization
2. Balanced diet
3. Early diagnosis
4. Surgery

Answer: 2

Explanation: Promotion improves overall well-being.

38. Disease elimination means:

1. Zero cases globally
2. Zero cases in a defined area
3. Zero deaths
4. Zero transmission worldwide

Answer: 2

Explanation: Elimination = regional.

39. Disease eradication means:

1. Zero transmission globally
2. Reduced cases
3. Limited spread
4. Elimination in one country

Answer: 1

Explanation: Eradication = worldwide elimination.

40. Example of eradicated disease:

1. TB
2. Smallpox
3. Polio
4. Measles

Answer: 2

Explanation: Smallpox eradicated in 1980.

41. Vector means:

1. Pathogen
2. Disease carrier (arthropod)
3. Person with disease
4. Environmental factor

Answer: 2

Explanation: Vectors transfer pathogens.

42. Incubation period of measles is:

1. 1–3 days
2. 7–14 days
3. 30 days
4. Few hours

Answer: 2

Explanation: Measles incubation = 10–14 days.

43. Latent period means:

1. Exposure → infectiousness
2. Exposure → symptoms
3. Recovery period
4. Contagious period

Answer: 1

Explanation: Latent = time before person becomes infectious.

44. Common indicator of health status:

1. Literacy rate
2. Infant mortality rate
3. Birth rate
4. GDP

Answer: 2

Explanation: IMR is a sensitive indicator of a country's health.

45. What is the basic requirement for health?

1. Money
2. Peace, shelter, clean water
3. Luxury
4. Technology

Answer: 2

Explanation: WHO says prerequisites include food, water, shelter, peace.

46. DALY stands for:

1. Daily-adjusted life year
2. Disability-adjusted life year
3. Disease-adjusted life year
4. Death-adjusted life year

Answer: 2

Explanation: DALY = years lost due to disability.

47. Quality of life is measured by:

1. IMR
2. HDI
3. Case fatality rate
4. Birth rate

Answer: 2

Explanation: HDI includes life expectancy, education, income.

48. Risk factor means:

1. A cause of death
2. Factor increasing probability of disease
3. Cure for disease
4. None

Answer: 2

Explanation: Risk factor increases chance of illness.

49. Communicable period means:

1. Person is contagious
2. Incubation
3. Recovery
4. Treatment

Answer: 1

Explanation: Communicable period = time when disease can spread.

50. Host susceptibility depends on:

1. Age
2. Immunity
3. Nutrition
4. All of the above

Answer: 4

Explanation: All factors influence how easily a host gets infected.

✓ Concepts of Health & Disease – MCQs 51 to 100 (with Answers & Explanations)

51. Man–Environment–Disease relationship is explained by:

1. Web of causation
2. Epidemiological triad
3. Iceberg phenomenon
4. Natural history

Answer: 2

Explanation: Epidemiological triad = agent + host + environment interaction.

52. Health indicator that best reflects overall health in a community:

1. Crude death rate
2. Infant mortality rate
3. Maternal mortality rate
4. Life expectancy

Answer: 2

Explanation: IMR is the most sensitive single indicator of community health.

53. Maternal mortality ratio measures:

1. Maternal deaths per 1000 women

2. Maternal deaths per 100,000 live births
3. Maternal deaths per 10,000 population
4. None

Answer: 2

Explanation: MMR = deaths / 100,000 live births.

54. Case fatality rate indicates:

1. Morbidity
2. Virulence of disease
3. Prevalence
4. Mortality

Answer: 2

Explanation: High CFR = high virulence.

55. Disability Adjusted Life Years (DALY) measures:

1. Illness only
2. Years lived with disability + years lost due to premature death
3. Only death
4. Adult morbidity

Answer: 2

Explanation: DALY = burden of disease.

56. Which is NOT a dimension of health?

1. Social

2. Emotional
3. Physical
4. Astrological

Answer: 4

Explanation: Astrological is not a health dimension.

57. Social determinant of health:

1. Age
2. Immunity
3. Education
4. Nutrition

Answer: 3

Explanation: Education affects lifestyle and health.

58. Example of behavioral determinant:

1. Smoking
2. Climate
3. Socioeconomic status
4. Genetics

Answer: 1

Explanation: Lifestyle behaviors affect health significantly.

59. "Web of causation" concept is used mainly for:

1. Communicable diseases

2. Simple diseases
3. Non-communicable diseases
4. All diseases

Answer: 3

Explanation: NCDs like diabetes have multifactorial causes.

60. Which indicator reflects the quality of maternity services?

1. IMR
2. MMR
3. CBR
4. CDR

Answer: 2

Explanation: MMR is a sensitive indicator for maternal care.

61. Biological determinant of health:

1. Literacy
2. Income
3. Age and sex
4. Housing

Answer: 3

Explanation: Biological determinants include heredity, age, sex.

62. Environment includes all EXCEPT:

1. Physical

2. Biological
3. Social
4. Spiritual

Answer: 4

Explanation: Spiritual is part of holistic health, not environment.

63. Best example of primary prevention:

1. Vaccination
2. Screening
3. Rehabilitation
4. Surgery

Answer: 1

Explanation: Primary prevention prevents disease occurrence.

64. Example of secondary prevention:

1. Growth monitoring
2. Mammography
3. Handwashing promotion
4. Sericulture

Answer: 2

Explanation: Screening tests = early diagnosis = secondary prevention.

65. Which is not included in tertiary prevention?

1. Rehabilitation

2. Physiotherapy
3. Prevention of complications
4. Immunization

Answer: 4

Explanation: Immunization is primary prevention.

66. A condition that cannot cause disease alone is called:

1. Sufficient cause
2. Necessary cause
3. Component cause
4. Indirect cause

Answer: 3

Explanation: Component cause forms part of causal pie.

67. "Agent" in epidemiology includes:

1. Only microorganisms
2. Nutrient deficiencies, chemicals, physical forces, microbes
3. Only chemical substances
4. Only physical agents

Answer: 2

Explanation: Agent can be biological, chemical, physical.

68. Herd immunity depends on:

1. Nutrition

2. Vaccination coverage
3. Physical fitness
4. Literacy

Answer: 2

Explanation: High coverage = strong herd immunity.

69. Iceberg phenomenon is best seen in:

1. Hypertension
2. Diabetes
3. Polio
4. Measles

Answer: 1

Explanation: Many undiagnosed cases → hidden iceberg portion.

70. A measure of speed of spread of disease:

1. Attack rate
2. CFR
3. MMR
4. IMR

Answer: 1

Explanation: Attack rate = rapid spread in outbreaks.

71. Basic reproductive number (R_0) refers to:

1. Number of secondary cases from one case

2. Birth rate
3. Death rate
4. Carrier rate

Answer: 1

Explanation: R0 measures transmission potential.

72. Communicable disease control is mainly achieved by:

1. Surgery
2. Vaccination
3. Rehabilitation
4. Physiotherapy

Answer: 2

Explanation: Vaccination breaks transmission chain.

73. Which disease has both high incidence and high prevalence?

1. TB
2. Measles
3. Malaria
4. Cholera

Answer: 1

Explanation: TB has long duration → high prevalence.

74. Host factor EXCEPT:

1. Age

2. Lifestyle
3. Immunity
4. Pathogen

Answer: 4

Explanation: Pathogen belongs to agent.

75. A person with infection but no symptoms and not contagious is:

1. Healthy
2. Carrier
3. Subclinical case
4. Infectious case

Answer: 3

Explanation: Disease present but no symptoms.

76. The period between infection and maximum infectivity:

1. Latent period
2. Incubation period
3. Generation time
4. Communicable period

Answer: 3

Explanation: Generation time = peak infectiousness.

77. "Spectrum of disease" includes:

1. Only clinical cases

2. Range from subclinical to fatal cases
3. Only fatal cases
4. Only mild cases

Answer: 2

Explanation: Shows full range of disease severity.

78. A disease that occurs more often than expected in a given area:

1. Sporadic
2. Endemic
3. Epidemic
4. Pandemic

Answer: 3

Explanation: Epidemic = unexpected increase.

79. Environmental sanitation includes:

1. Clean water supply
2. Sewage disposal
3. Waste management
4. All of the above

Answer: 4

Explanation: All are key components of sanitation.

80. Disability is measured by:

1. DALY

2. IMR
3. MMR
4. CBR

Answer: 1

Explanation: DALY = disability + premature death.

81. A vector which transmits disease mechanically:

1. Mosquito
2. Housefly
3. Louse
4. Tick

Answer: 2

Explanation: Houseflies carry pathogens mechanically.

82. Biological vector example:

1. Housefly
2. Louse
3. Flea
4. Both 2 & 3

Answer: 4

Explanation: Louse and flea allow pathogen multiplication.

83. A reservoir of infection is:

1. Only humans

2. Only animals
3. Soil, water, humans, animals
4. Only insects

Answer: 3

Explanation: Reservoir = where pathogen resides.

84. Example of anthroponosis:

1. Malaria
2. Rabies
3. Measles
4. TB

Answer: 2

Explanation: Rabies spreads animal → human.

85. The force that causes disease is:

1. Agent
2. Host
3. Environment
4. Adaptation

Answer: 1

Explanation: Agent initiates disease process.

86. A disease that spreads from humans to animals:

1. Zooanthroponosis

2. Anthropozoonosis
3. Zoonosis
4. Saprionosis

Answer: 1

Explanation: Human → animal transmission.

87. A chronic non-communicable disease:

1. Diabetes
2. Measles
3. Cholera
4. Influenza

Answer: 1

Explanation: NCDs have long duration and slow progression.

88. Indicator showing effectiveness of DOTS programme:

1. Cure rate
2. IMR
3. DALY
4. Fertility rate

Answer: 1

Explanation: Cure rate is key TB indicator.

89. Which is a social indicator?

1. Illiteracy

2. Blood pressure
3. Height
4. Weight

Answer: 1

Explanation: Illiteracy = social factor.

90. Health status of a community is best measured by:

1. Hospital beds
2. IMR
3. Number of doctors
4. Number of PHCs

Answer: 2

Explanation: IMR is the best single health measure.

91. Best method to reduce NCDs:

1. Screening
2. Lifestyle modification
3. Surgery
4. Chemotherapy

Answer: 2

Explanation: Diet, exercise, quitting tobacco/alcohol.

92. Physical quality of life index includes:

1. Literacy, IMR, Life expectancy

2. GDP, literacy, IMR
3. HDI
4. Age-specific death rate

Answer: 1

Explanation: PQLI = 3 components: IMR, life expectancy, literacy.

93. A disease with long incubation period:

1. Measles
2. Rabies
3. Influenza
4. Common cold

Answer: 2

Explanation: Rabies may take weeks to months.

94. Vector of dengue:

1. Anopheles
2. Culex
3. Aedes aegypti
4. Sandfly

Answer: 3

Explanation: Aedes causes dengue.

95. A disease with short incubation period:

1. Cholera

2. Hepatitis B
3. Chickenpox
4. TB

Answer: 1

Explanation: Cholera: 2 hours – 5 days.

96. First level of prevention:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 1

Explanation: Primordial prevents *risk factor* development.

97. Example of disease surveillance:

1. Iron tablets
2. Recording weekly dengue cases
3. Rehabilitation
4. Surgery

Answer: 2

Explanation: Surveillance = ongoing systematic data collection.

98. The most important factor for controlling diarrheal diseases:

1. Vaccination

2. Safe water supply
3. Surgery
4. Physiotherapy

Answer: 2

Explanation: Clean water prevents fecal–oral transmission.

99. What is epidemiology?

1. Study of hospitals
2. Study of distribution & determinants of diseases in populations
3. Study of drugs
4. Study of nursing

Answer: 2

Explanation: Epidemiology deals with disease patterns.

100. The ultimate goal of public health is:

1. Cure disease
2. Prevent disease and promote health
3. Build hospitals
4. Research only

Answer: 2

Explanation: Public health focuses on prevention & health promotion.



Levels of Prevention + Epidemiology + Indicators of Health — 100 MCQ

MCQs 1–100

1. Levels of prevention were first described by:

1. Leavell and Clark
2. Lalonde
3. Winslow
4. Snow

Answer: 1

Explanation: Leavell & Clark proposed 4 prevention levels: primordial, primary, secondary, tertiary.

2. Primordial prevention focuses on:

1. Preventing complications
2. Preventing risk factors
3. Early diagnosis
4. Rehabilitation

Answer: 2

Explanation: Primordial aims to stop emergence of risk factors.

3. Health education in schools is an example of:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 1

Explanation: Helps prevent development of unhealthy lifestyle.

4. Primary prevention aims to:

1. Prevent occurrence of disease
2. Diagnose early
3. Limit disability
4. Restore function

Answer: 1

Explanation: Primary includes health promotion and specific protection.

5. Immunization is a form of:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 2

Explanation: Prevents occurrence of disease.

6. Secondary prevention includes:

1. Rehabilitation
2. Screening and early detection
3. Lifestyle advice
4. Health promotion

Answer: 2

Explanation: Detects disease early for prompt treatment.

7. Mammography is an example of:

1. Primary prevention
2. Secondary prevention
3. Tertiary prevention
4. Primordial prevention

Answer: 2

Explanation: It is a screening method.

8. Tertiary prevention focuses on:

1. Preventing risk factors
2. Early diagnosis
3. Limiting disability and rehab
4. Promotion of health

Answer: 3

Explanation: Aims to reduce complications.

9. Examples of specific protection include:

1. Nutrition
2. Immunization
3. Exercise
4. Yoga

Answer: 2

Explanation: Specific protection targets a specific disease.

10. Rehabilitation includes all EXCEPT:

1. Physiotherapy
2. Vocational training
3. Immunization
4. Speech therapy

Answer: 3

Explanation: Immunization is primary prevention.

11. Epidemiology is the study of:

1. Diseases in an individual
2. Distribution & determinants of diseases in populations
3. Treatment of diseases
4. Hospital functioning

Answer: 2

Explanation: Classic definition of epidemiology.

12. Father of epidemiology:

1. John Snow
2. Charles Winslow
3. Robert Koch
4. Hippocrates

Answer: 4

Explanation: Hippocrates first linked environment and disease.

13. Modern father of epidemiology:

1. John Snow
2. Pasteur
3. Ross
4. Jenner

Answer: 1

Explanation: Known for cholera transmission studies.

14. Epidemiological triad includes:

1. Host, agent, environment
2. Time, place, person
3. Virus, bacteria, fungi
4. Prevention, diagnosis, treatment

Answer: 1

Explanation: Represents disease causation.

15. Natural history of disease begins with:

1. Clinical stage
2. Exposure to agent
3. Diagnosis
4. Treatment

Answer: 2

Explanation: Exposure is first step.

16. Pre-pathogenesis phase means:

1. Disease has started
2. Interaction of host and environment before agent enters
3. Rehabilitation stage
4. Terminal illness

Answer: 2

Explanation: Before disease begins.

17. Pathogenesis phase starts with:

1. Appearance of signs
2. Agent entry and multiplication
3. Laboratory diagnosis
4. Rehabilitation

Answer: 2

Explanation: Pathogenesis = disease phase.

18. Incidence rate measures:

1. New cases
2. Old cases
3. Both new and old
4. Deaths

Answer: 1

Explanation: Incidence = new cases.

19. Prevalence rate measures:

1. Only new cases
2. Existing cases
3. Deaths
4. Risk factors

Answer: 2

Explanation: Prevalence = total disease load.

20. A disease with high incidence but short duration will have:

1. High prevalence
2. Low prevalence
3. No prevalence
4. High mortality

Answer: 2

Explanation: Short duration results in fewer existing cases.

21. Attack rate measures:

1. Chronic diseases
2. Rapid spread in an outbreak
3. Death rate
4. Carrier rate

Answer: 2

Explanation: Used in epidemics.

22. Case fatality rate (CFR) indicates:

1. Infectivity
2. Virulence
3. Prevalence
4. Immunity

Answer: 2

Explanation: High CFR = severe disease.

23. Carrier state is important in:

1. Rabies
2. Measles
3. Typhoid
4. Tetanus

Answer: 3

Explanation: Typhoid Mary = chronic carrier.

24. Iceberg phenomenon is seen primarily in:

1. TB
2. Polio
3. Hypertension
4. All of the above

Answer: 4

Explanation: All have many hidden subclinical cases.

25. A disease always present in a community is:

1. Epidemic
2. Endemic
3. Pandemic
4. Sporadic

Answer: 2

Explanation: Endemic = constant presence.

26. Worldwide spread of disease is known as:

1. Sporadic
2. Endemic
3. Pandemic
4. Zoonotic

Answer: 3

Explanation: Example COVID-19.

27. Zoonotic disease example:

1. Measles
2. Rabies
3. Mumps
4. Polio

Answer: 2

Explanation: Rabies spreads animal → human.

28. Vector-borne disease example:

1. TB
2. Malaria
3. Cholera
4. Measles

Answer: 2

Explanation: Spread by mosquitoes.

29. Incubation period means:

1. Exposure → onset of symptoms
2. Symptoms → recovery
3. Infection → death
4. Treatment → cure

Answer: 1

Explanation: Incubation = symptom-free interval.

30. Herd immunity depends on:

1. Weather
2. Nutrition
3. Vaccination coverage
4. Health education

Answer: 3

Explanation: High coverage = strong herd immunity.

31. Indicator used to measure quality of life:

1. GDP
2. DALY
3. HDI
4. MMR

Answer: 3

Explanation: HDI includes literacy, life expectancy, income.

32. Most sensitive indicator of community health:

1. IMR
2. CDR
3. CBR
4. Fertility rate

Answer: 1

Explanation: IMR reflects overall health status.

33. Example of mortality indicator:

1. CBR
2. MMR
3. Literacy rate
4. Nutritional status

Answer: 2

Explanation: MMR is maternal deaths per 100,000 live births.

34. Best indicator of health status of mothers:

1. MMR
2. CDR
3. IMR
4. Stillbirth rate

Answer: 1

Explanation: MMR reflects maternal care quality.

35. Perinatal mortality includes:

1. Stillbirth + neonatal deaths (<7 days)
2. All infant deaths
3. All childhood deaths
4. Only stillbirth

Answer: 1

Explanation: Perinatal covers late fetal + early neonatal deaths.

36. Sensitive indicator of socio-economic development:

1. CBR
2. IMR
3. Gini index
4. Crude death rate

Answer: 2

Explanation: IMR is sensitive to socioeconomic conditions.

37. Disease elimination means:

1. Zero global cases
2. Zero regional cases
3. Zero mortality
4. Zero incidence worldwide

Answer: 2

Explanation: Elimination = regional.

38. Disease eradication means:

1. Zero cases worldwide
2. Zero cases regionally
3. Only control
4. Reduction in incidence

Answer: 1

Explanation: Example: smallpox.

39. Example of eradicated disease:

1. Polio
2. Smallpox
3. Measles
4. Malaria

Answer: 2

Explanation: Eradicated in 1980.

40. Example of controlled disease:

1. Smallpox
2. Polio
3. Influenza
4. HIV

Answer: 2

Explanation: Polio is eliminated in many regions.

41. Host factor includes:

1. Age
2. Sex
3. Immunity
4. All

Answer: 4

Explanation: Age, sex, immunity all affect susceptibility.

42. A vector transmits disease:

1. Mechanically
2. Biologically
3. Both
4. None

Answer: 3

Explanation: Vectors may transmit either way.

43. Housefly transmits diseases by:

1. Mechanical transmission
2. Biological transmission
3. Vertical transmission
4. Genetic transmission

Answer: 1

Explanation: Pathogens do not multiply inside flies.

44. Basic reproductive number R_0 indicates:

1. Death rate
2. Number of secondary cases per case
3. Birth rate
4. Carrier rate

Answer: 2

Explanation: $R_0 > 1$ = epidemic potential.

45. Indicator of burden of NCDs:

1. CFR
2. DALY
3. CBR
4. MMR

Answer: 2

Explanation: DALY shows disease burden including disability.

46. Disability limitation belongs to:

1. Primordial
2. Primary
3. Secondary
4. Tertiary

Answer: 4

Explanation: Tertiary = reduce disability.

47. Screening test is used in:

1. Primary prevention
2. Secondary prevention
3. Tertiary prevention
4. Primordial prevention

Answer: 2

Explanation: Early detection.

48. Prevalence increases when:

1. Cure rate improves
2. Death rate increases
3. Disease duration increases
4. Incidence decreases

Answer: 3

Explanation: Long-lasting diseases → high prevalence.

49. Example of direct transmission:

1. Droplet infection
2. Mosquito bite
3. Contaminated water
4. Houseflies

Answer: 1

Explanation: Sneezing, coughing.

50. Indirect transmission example:

1. Sexual contact
2. Droplet spread
3. Vector-borne
4. Touch

Answer: 3

Explanation: Mosquito → malaria.

Next 50 MCQs (51–100)

(Continuing the same topic)

51. Incubation period of hepatitis A:

1. 2–6 days
2. 15–50 days
3. 1–2 days
4. 1 year

Answer: 2

Explanation: Average 28 days.

52. Latent period means:

1. Exposure → infectiousness
2. Exposure → symptoms
3. Symptoms → recovery
4. Infectious → non-infectious

Answer: 1

Explanation: Latent = time before becoming infectious.

53. Communicable period refers to:

1. Time when disease is contagious
2. Time before symptoms
3. Recovery period
4. Treatment period

Answer: 1

Explanation: Disease can spread during this time.

54. Generation time refers to:

1. Infection → peak infectivity
2. Infection → symptoms
3. Symptoms → recovery
4. Vector lifespan

Answer: 1

Explanation: Time when infectivity is maximum.

55. Strongest predictor of infant mortality:

1. Immunization
2. Maternal education
3. Income
4. Sanitation

Answer: 2

Explanation: Mother's literacy strongly affects child survival.

56. Most sensitive indicator for malnutrition in a community:

1. Stunting
2. Wasting
3. Underweight
4. MUAC

Answer: 2

Explanation: Wasting indicates acute malnutrition.

57. Indicator of long-term malnutrition:

1. Wasting
2. Stunting
3. MUAC
4. CFR

Answer: 2

Explanation: Stunting = chronic malnutrition.

58. Example of anthropometric indicator:

1. IMR
2. Weight-for-age
3. CDR
4. Literacy

Answer: 2

Explanation: Anthropometry assesses nutrition.

59. IMR is calculated per:

1. 100 live births
2. 1000 live births
3. 10,000 population
4. 100,000 live births

Answer: 2

Explanation: Standard denominator is 1000 live births.

60. MMR is expressed per:

1. 1000 live births
2. 10,000 women
3. 1000 mothers
4. 100,000 live births

Answer: 4

Explanation: MMR units = maternal deaths per 100,000 LB.

61. Best measure of burden of chronic diseases:

1. CFR
2. DALY
3. IMR
4. Incidence

Answer: 2

Explanation: DALY includes disability + death.

62. Which is NOT a component of PQLI?

1. IMR
2. Life expectancy
3. Literacy rate
4. GDP

Answer: 4

Explanation: GDP not included.

63. Most sensitive index for measuring health services quality:

1. IMR
2. Birth rate
3. CDR
4. MMR

Answer: 1

Explanation: Reflects overall community healthcare.

64. High prevalence but low incidence indicates:

1. Rapid recovery
2. Chronic disease
3. Poor reporting
4. High mortality

Answer: 2

Explanation: Long duration → high prevalence.

65. Which is NOT a factor in the epidemiological triad?

1. Agent
2. Host
3. Environment
4. Pathogenesis

Answer: 4

Explanation: Pathogenesis is disease stage, not a factor.

66. Best indicator of fertility:

1. CBR
2. TFR
3. GFR
4. NRR

Answer: 2

Explanation: TFR = average children per woman.

67. Net reproduction rate (NRR) of 1 means:

1. Population declining
2. Population stable
3. Population increasing
4. No births

Answer: 2

Explanation: $NRR=1 \rightarrow$ replacement level.

68. Most accurate indicator of mortality:

1. CDR
2. Age-specific death rate
3. IMR
4. MMR

Answer: 2

Explanation: Age-specific rates are more precise.

69. Health care delivery indicator:

1. Number of beds
2. IMR
3. CDR
4. Literacy

Answer: 1

Explanation: Structural indicator of health services.

70. An epidemic curve helps determine:

1. Cause
2. Source and type of epidemic
3. Treatment
4. Antibiotic sensitivity

Answer: 2

Explanation: Point source, propagated, continuous.

71. Vertical transmission occurs in:

1. Measles
2. HIV
3. Rabies
4. Cholera

Answer: 2

Explanation: Mother-to-child transmission.

72. Best example of zoonosis:

1. Polio
2. HIV
3. TB
4. Rabies

Answer: 4

Explanation: Classically zoonotic.

73. Feco-oral route example:

1. Malaria
2. Cholera
3. TB
4. HIV

Answer: 2

Explanation: Spread through contaminated water.

74. Incubation period of measles:

1. 1–3 days
2. 7–14 days
3. 40–60 days
4. 90 days

Answer: 2

Explanation: Average 10–12 days.

75. Malaria is transmitted by:

1. Aedes
2. Culex
3. Anopheles
4. Sandfly

Answer: 3

Explanation: Female Anopheles mosquito.

76. Dengue vector:

1. Aedes
2. Culex
3. Anopheles
4. Tick

Answer: 1

Explanation: Aedes aegypti.

77. Best test for screening:

1. Highly sensitive
2. Highly specific
3. Highly expensive
4. Highly invasive

Answer: 1

Explanation: Sensitivity avoids false negatives.

78. Best test for confirmation:

1. Sensitive
2. Specific
3. Rapid
4. Cheap

Answer: 2

Explanation: Specific tests have fewer false positives.

79. High specificity means:

1. Few false positives
2. Few false negatives
3. Cannot detect disease
4. Poor test

Answer: 1

Explanation: Specificity = true negative rate.

80. High sensitivity means:

1. Few false negatives
2. Few false positives
3. High accuracy
4. Low cost

Answer: 1

Explanation: Sensitive tests detect almost all cases.

81. $R_0 < 1$ indicates:

1. Disease will spread
2. Epidemic will occur
3. Disease will decline
4. Pandemic likely

Answer: 3

Explanation: Each case infects less than one person.

82. Health promotion activities include all EXCEPT:

1. Yoga
2. Balanced diet
3. Exercise
4. Immunization

Answer: 4

Explanation: Immunization is specific protection.

83. Most important indicator for global health comparisons:

1. IMR
2. HDI
3. DALY
4. Life expectancy

Answer: 2

Explanation: HDI compares nations.

84. Epidemiological methods include:

1. Descriptive
2. Analytical
3. Experimental
4. All

Answer: 4

Explanation: All are types of study designs.

85. Cohort study is:

1. Prospective
2. Retrospective
3. Experimental
4. Case-control

Answer: 1

Explanation: Follows groups over time.

86. Case-control study is:

1. Prospective
2. Retrospective
3. Experimental
4. Cross-sectional

Answer: 2

Explanation: Begins with disease and looks backward.

87. Best study for rare diseases:

1. Cohort
2. Case-control
3. RCT
4. Cross-sectional

Answer: 2

Explanation: Efficient for rare outcomes.

88. Best study to test effectiveness of new drug:

1. Cohort
2. Case-control
3. RCT
4. Cross-sectional

Answer: 3

Explanation: RCT = gold standard.

89. A screening test must have high:

1. Sensitivity
2. Specificity
3. PPV
4. NPV

Answer: 1

Explanation: To catch most cases.

90. A confirmatory test must have high:

1. Sensitivity
2. Specificity
3. PPV
4. Incidence

Answer: 2

Explanation: Ensures accuracy.

91. Example of descriptive epidemiology:

1. Case-control study
2. Time-place-person analysis
3. RCT
4. Cohort

Answer: 2

Explanation: Describes distribution.

92. Denominator for attack rate:

1. Whole population
2. Exposed population
3. Sick population
4. Recovered population

Answer: 2

Explanation: Measures spread among exposed.

93. Disease transmitted through soil:

1. Tetanus
2. TB
3. Measles
4. Influenza

Answer: 1

Explanation: Clostridium tetani lives in soil.

94. Best indicator for planning health services:

1. Morbidity data
2. Mortality data
3. Incidence
4. CBR

Answer: 1

Explanation: Morbidity shows disease burden.

95. Crude death rate measures:

1. Deaths per total population
2. Deaths per live births
3. Deaths <1 year
4. All deaths due to maternal causes

Answer: 1

Explanation: CDR = deaths per 1000 population.

96. Median survival time is used in:

1. Cancer
2. Diarrhea
3. Influenza
4. Measles

Answer: 1

Explanation: Cancer prognosis.

97. Risk factor for NCDs:

1. Smoking
2. Alcohol
3. Obesity
4. All

Answer: 4

Explanation: All are major NCD risks.

98. Best indicator to compare nations:

1. GDP
2. IMR
3. HDI
4. Literacy

Answer: 3

Explanation: HDI = global comparison tool.

99. Motivating community for vaccination is:

1. Health education
2. Treatment
3. Rehabilitation
4. Screening

Answer: 1

Explanation: Health education creates awareness.

100. Ultimate goal of epidemiology:

1. Collect data
2. Prevent disease & promote health
3. Conduct research
4. Test drugs

Answer: 2

Explanation: Prevention and promotion are core aims.

NURSING ALL ROUNDER.IN



Community Health Nursing – 50 Important MCQs

(With Options, Correct Answer & Explanation)

1. The focus of Community Health Nursing is:

1. Individual only
2. Family only
3. Community as a whole
4. Hospital patients

Answer: 3

Explanation: CHN focuses on health promotion of the entire community.

2. Primary Health Care was first introduced in:

1. Alma-Ata, 1978
2. Geneva, 1980
3. USA, 1970
4. UK, 1960

Answer: 1

Explanation: Alma-Ata conference defined PHC concepts.

3. The main principle of Primary Health Care is:

1. Hospital care
2. Curative care
3. Community participation
4. Advanced care

Answer: 3

Explanation: Community involvement is key to PHC.

4. Elements of PHC include all EXCEPT:

1. Safe water
2. Immunization
3. Treatment of common diseases
4. Organ transplantation

Answer: 4

Explanation: Organ transplantation is specialized tertiary care.

5. Health worker responsible for household surveys is:

1. ASHA
2. ANM
3. LHV
4. MPW

Answer: 1

Explanation: ASHA conducts home visits & surveys.

6. ASHA worker is appointed under:

1. ICDS
2. NRHM/NHM
3. RCH
4. RMNCH+A

Answer: 2

Explanation: ASHA is part of NHM strategy.

7. Minimum population for 1 ASHA:

1. 1000
2. 500
3. 2000
4. 5000

Answer: 1

Explanation: 1 ASHA per 1000 population.

8. ANM stands for:

1. Auxiliary Nursing Midwife
2. Assistant Nursing Member
3. Accredited Nurse Midwife
4. Allied Nursing Manager

Answer: 1

Explanation: ANM provides maternal & child health services.

9. The sub-centre is the:

1. First contact point between community and health system
2. Secondary care unit
3. Tertiary care hospital
4. Emergency centre

Answer: 1

Explanation: SC is the primary level unit.

10. Population norm for one Sub-centre in rural area:

1. 1000
2. 3000–5000
3. 10,000
4. 25,000

Answer: 2

Explanation: Rural SC: 3000 (hilly) – 5000 (plain).

11. PHC covers population of:

1. 5000
2. 20,000–30,000
3. 1 lakh
4. 50,000

Answer: 2

Explanation: Rural PHC covers 30,000 (plain) / 20,000 (hilly).

12. CHC covers population of:

1. 10,000
2. 30,000
3. 80,000–120,000
4. 200,000

Answer: 3

Explanation: CHC = 80,000 (hilly) – 1.2 lakh (plain).

13. Number of beds in a CHC:

1. 10
2. 20
3. 30
4. 50

Answer: 3

Explanation: CHC is a 30-bed block-level hospital.

14. PHC doctor in-charge is known as:

1. MO
2. CEO
3. RMO
4. NIC

Answer: 1

Explanation: Medical Officer manages PHC services.

15. ANM role does NOT include:

1. Immunization
2. ANC check-ups
3. Conducting normal deliveries
4. Performing surgeries

Answer: 4

Explanation: ANM does not perform surgical procedures.

16. ASHA stands for:

1. Accredited Social Health Activist
2. Active Social Health Advisor
3. Accredited Service Health Aide
4. Auxiliary Social Health Agent

Answer: 1

Explanation: ASHA = community-level female volunteer.

17. Service not provided at Sub-centre:

1. Delivery services
2. Contraceptives
3. Immunization
4. Surgical operations

Answer: 4

Explanation: Operations are done at CHC/PHC.

18. Community diagnosis means:

1. Laboratory diagnosis
2. Identifying community health problems
3. Individual diagnosis
4. Medical diagnosis

Answer: 2

Explanation: It evaluates community health needs.

19. Bag technique is used by:

1. ASHA
2. ANM
3. Specialist
4. Surgeon

Answer: 2

Explanation: ANM uses bag technique for home visits.

20. Home visit frequency for newborn by ANM:

1. 1 visit
2. 2 visits
3. 6 visits
4. 10 visits

Answer: 3

Explanation: As per guidelines – 6 visits in 42 days.

21. One PHC supervises how many Sub-centres?

1. 1–2
2. 2–4
3. 4–6
4. 5–6

Answer: 4

Explanation: PHC supervises 5–6 SCs.

22. Community participation means:

1. Doctor controls everything
2. Community involvement in planning
3. No community involvement
4. Only government involvement

Answer: 2

Explanation: Core principle of PHC.

23. Example of community-based approach:

1. NICU care
2. ASHA home visit
3. Major surgery
4. MRI scan

Answer: 2

Explanation: Provided at home level.

24. Village Health Sanitation & Nutrition Committee (VHSNC) is headed by:

1. ASHA
2. Sarpanch
3. ANM
4. MPW

Answer: 2

Explanation: Sarpanch leads VHSNC.

25. Highest community-level health committee:

1. VHSNC
2. RKS
3. VHC
4. VHND

Answer: 1

Explanation: VHSNC is village-level body.

26. The role of ASHA includes all EXCEPT:

1. Identifying pregnant mothers
2. Providing counselling
3. Giving injections
4. Escorting to health facility

Answer: 3

Explanation: ASHA cannot give injections.

27. Skill ANM must have:

1. Minor OT assistance
2. Conducting normal deliveries
3. Radiology
4. Surgery

Answer: 2

Explanation: ANM is trained in midwifery.

28. MPHW male focuses mainly on:

1. Pregnancy check-ups
2. Immunization and vector control
3. Nursing care
4. Nutrition counseling

Answer: 2

Explanation: MPW male works in public health & vector control.

29. Cold chain maintenance at sub-centre is done by:

1. ASHA
2. ANM
3. MO
4. LHV

Answer: 2

Explanation: ANM manages vaccines at SC.

30. Health team is headed at PHC by:

1. ANM
2. ASHA
3. Medical Officer
4. LHV

Answer: 3

Explanation: MO leads PHC team.

31. Domiciliary midwifery means:

1. Deliveries in hospital
2. Deliveries at home
3. Deliveries in CHC
4. Deliveries in PHC

Answer: 2

Explanation: Domiciliary = home-based.

32. National health programmes implemented at SC by:

1. Surgeon
2. ANM
3. RMO
4. Consultant

Answer: 2

Explanation: ANM implements NHM programmes.

33. CHO is posted at:

1. CHC
2. Medical college
3. Health & Wellness Centre
4. Sub-centre only

Answer: 3

Explanation: CHO leads HWC (Sub-centre upgraded).

34. Health & Wellness Centres provide:

1. Only maternal care
2. Only child care
3. Comprehensive primary health care
4. ICU services

Answer: 3

Explanation: HWC covers 12 essential services.

35. Services at HWC include all EXCEPT:

1. NCD screening
2. Dental care
3. Mental health
4. Dialysis

Answer: 4

Explanation: Dialysis = tertiary care.

36. Village Health & Nutrition Day (VHND) occurs:

1. Daily
2. Weekly
3. Monthly
4. Yearly

Answer: 3

Explanation: Conducted every month.

37. VHND is primarily conducted by:

1. Teacher
2. ANM
3. Surgeon
4. MPW

Answer: 2

Explanation: ANM leads VHND activities.

38. ASHA incentive for institutional delivery is under:

1. JSY
2. RCH
3. ICDS
4. NPCB

Answer: 1

Explanation: JSY promotes institutional delivery.

39. Primary function of LHV:

1. Deliveries
2. Supervision of ANMs
3. Surgery
4. Dispensing drugs

Answer: 2

Explanation: Lady Health Visitor supervises SCs.

40. Primary role of MPW male:

1. Diabetes management
2. Vector control & surveillance
3. Delivery care
4. NICU care

Answer: 2

Explanation: MPW male works in communicable disease control.

41. Panchayati Raj in health involves:

1. Community planning
2. Specialist care
3. Hospital care
4. Urban care only

Answer: 1

Explanation: Panchayat system strengthens community involvement.

42. ANM maintains which register?

1. Immunization register
2. OPD register
3. ICU register
4. Operation theatre register

Answer: 1

Explanation: Maintains immunization, ANC, PNC records.

43. Referral PHC is also called:

1. Level I PHC
2. Level II PHC
3. CHC
4. Sub-centre

Answer: 2

Explanation: Level II PHC provides additional services.

44. Community bag technique prevents:

1. Medicine wastage
2. Cross infection
3. Communication gap
4. Overcrowding

Answer: 2

Explanation: Bag technique maintains asepsis.

45. Home visit principle includes:

1. Flexibility
2. Privacy
3. Planning
4. All of the above

Answer: 4

Explanation: All are core principles.

46. First contact person at community level:

1. ANM
2. ASHA
3. MO
4. LHV

Answer: 2

Explanation: ASHA is first point of contact.

47. Community needs assessment is done by:

1. MO
2. ASHA
3. ANM
4. All of the above

Answer: 4

Explanation: All contribute in different ways.

48. Health worker responsible for ORS distribution:

1. Surgeon
2. ASHA
3. RMO
4. Radiologist

Answer: 2

Explanation: ASHA provides ORS packets.

49. Main aim of community health nursing:

1. Cure disease
2. Promote and protect health
3. Do surgeries
4. Hospitalize all patients

Answer: 2

Explanation: CHN aims for prevention and promotion.

50. Essential skill for CHO:

1. Managing ICU
2. Community-based assessment
3. Performing surgeries
4. CT scan reading

Answer: 2

Explanation: CHO leads primary care at community level.

NURSING ALL ROUNDER.IN



National Health Programmes – 50 MCQs

(With Options, Correct Answer & Explanation)

1. NHM was launched in:

1. 2000
2. 2005
3. 2010
4. 1995

Answer: 2

Explanation: National Health Mission was launched in 2005.

2. NHM includes:

1. NRHM + NUHM
2. RNTCP + NACP
3. ICDS + NIDDCP
4. NPCB + UIP

Answer: 1

Explanation: NHM = Rural and Urban Health Missions.

3. RCH stands for:

1. Reproductive and Child Health
2. Reproductive and Comprehensive Health
3. Rural Child Health
4. Reproductive Care for Health

Answer: 1

Explanation: RCH covers maternal, child, and reproductive health services.

4. RCH Phase II started in:

1. 1997
2. 2000
3. 2005
4. 2010

Answer: 3

Explanation: RCH-II started under NRHM in 2005.

5. JSY (Janani Suraksha Yojana) was launched in:

1. 2000
2. 2003
3. 2005
4. 2010

Answer: 3

Explanation: JSY started with the launch of NRHM 2005.

6. JSY mainly aims to improve:

1. Nutrition
2. Institutional deliveries
3. HIV diagnosis
4. Eye care

Answer: 2

Explanation: JSY encourages hospital deliveries to reduce maternal mortality.

7. JSSK (Janani Shishu Suraksha Karyakram) provides:

1. Free HIV test
2. Free dialysis
3. Free delivery, C-section, drugs, diagnostics for mother & newborn
4. Free surgeries

Answer: 3

Explanation: 100% free maternal & newborn care.

8. RMNCH+A was launched in:

1. 2010
2. 2012
3. 2013
4. 2015

Answer: 3

Explanation: A = Adolescents added in 2013.

9. RMNCH+A includes adolescent programme named:

1. RBSK
2. WIFS
3. RKSK
4. RNTCP

Answer: 3

Explanation: RKSK = Rashtriya Kishor Swasthya Karyakram.

10. Rashtriya Bal Swasthya Karyakram (RBSK) screens children for:

1. Diarrhea only
2. Disabilities only
3. 4Ds: Defects, Diseases, Deficiencies, Developmental delays
4. All communicable diseases

Answer: 3

Explanation: Covers birth to 18 years.

11. NTEP (National TB Elimination Programme) aims to eliminate TB by:

1. 2022
2. 2025
3. 2030
4. 2035

Answer: 2

Explanation: India targets TB elimination by 2025.

12. The drug regimen for TB is based on:

1. RNTCP
2. DOTS strategy
3. UIP
4. NACP

Answer: 2

Explanation: DOTS = Directly Observed Treatment Short-course.

13. NACP focuses on prevention & control of:

1. Cholera
2. HIV/AIDS
3. Tuberculosis
4. Malaria

Answer: 2

Explanation: National AIDS Control Programme.

14. HIV testing during pregnancy is part of:

1. NTEP
2. NACP
3. NPCB
4. NIDDCP

Answer: 2

Explanation: NACP ensures PPTCT (Prevention of Parent to Child Transmission).

15. PPTCT refers to:

1. Prevention of parent to child transmission of HIV
2. Prevention of pneumonia in children
3. Polio prevention programme
4. Prevention of measles

Answer: 1

Explanation: Prevents mother-to-child HIV transmission.

16. NPCBVI deals with:

1. Vector-borne diseases
2. Blindness and visual impairment
3. Ear diseases
4. Nutrition

Answer: 2

Explanation: National Programme for Control of Blindness & Visual Impairment.

17. Vitamin A supplementation is part of:

1. ICDS
2. UIP
3. RCH
4. NPCB

Answer: 1

Explanation: ICDS provides Vit A through anganwadi.

18. UIP provides all EXCEPT:

1. BCG
2. OPV
3. DT
4. Rabies vaccine

Answer: 4

Explanation: Rabies vaccine is not part of routine UIP.

19. Mission Indradhanush aims to:

1. Reduce HIV
2. Increase immunization coverage
3. Reduce malaria
4. Improve nutrition

Answer: 2

Explanation: Covers fully immunized child targets.

20. Intensified Mission Indradhanush (IMI) aims for coverage of:

1. 50%
2. 60%
3. 80%
4. 90%

Answer: 4

Explanation: Goal = more than 90% full immunization.

21. National Iron Plus Initiative (NIPI) covers age group:

1. Pregnant women only
2. 6 months to 60 years
3. Only adolescents
4. Only newborns

Answer: 2

Explanation: Covers infants → elderly.

22. Weekly Iron Folic Acid Supplementation (WIFS) is for:

1. Pregnant women
2. Adolescents 10–19 years
3. Newborns
4. Elderly

Answer: 2

Explanation: WIFS gives weekly IFA for adolescents.

23. Albendazole in NDD (National Deworming Day) is given:

1. Once a day
2. Once a month
3. Twice a year
4. Once in 5 years

Answer: 3

Explanation: NDD is observed biannually.

24. Mid-Day Meal Scheme prevents:

1. Vitamin A deficiency
2. Protein-energy malnutrition
3. Blindness
4. Hypertension

Answer: 2

Explanation: Improves nutrition in school children.

25. ICDS beneficiaries include:

1. Children only
2. Children, pregnant women, lactating mothers
3. Only lactating mothers
4. Only adolescents

Answer: 2

Explanation: ICDS provides services to 3 groups.

26. Services given by Anganwadi include:

1. Immunization
2. Health check-up
3. Supplementary nutrition
4. All of the above

Answer: 4

Explanation: All services provided via AWCs.

27. Exclusive breastfeeding promotion comes under:

1. NPCB
2. NIDDCP
3. RCH
4. NACP

Answer: 3

Explanation: RCH includes maternal & child nutrition.

28. IFA supplementation to pregnant women includes:

1. 60 mg iron + 500 mcg folic acid
2. 100 mg iron + 1 mg folic acid
3. 30 mg iron + 300 mcg folic acid
4. 50 mg iron + 1 mg folic acid

Answer: 1

Explanation: Standard IFA tablet.

29. National Iodine Deficiency Disorders Control Programme (NIDDCP) ensures:

1. Salt iodization
2. Polio vaccination
3. HIV testing
4. Anaemia treatment

Answer: 1

Explanation: Iodized salt prevents goiter.

30. Iodized salt should contain:

1. 5 ppm
2. 10 ppm
3. 15 ppm
4. 50 ppm

Answer: 3

Explanation: Minimum 15 ppm at consumption level.

31. National Vector Borne Disease Control Programme includes all EXCEPT:

1. Malaria
2. Dengue
3. Chikungunya
4. HIV

Answer: 4

Explanation: HIV = NACP.

32. Malaria diagnosis gold standard:

1. RDT
2. Thick & Thin smear microscopy
3. ELISA
4. PCR

Answer: 2

Explanation: Microscopy remains gold standard.

33. National Leprosy Eradication Programme cured leprosy by:

1. DOTS
2. MDT (multi-drug therapy)
3. OPV
4. ART

Answer: 2

Explanation: MDT is highly effective for leprosy.

34. ELISA test is mainly used to diagnose:

1. TB
2. HIV
3. Malaria
4. Leprosy

Answer: 2

Explanation: ELISA is screening for HIV.

35. Polio eradication is achieved through:

1. IMNCI
2. Pulse Polio Programme
3. RNTCP
4. RCH-II

Answer: 2

Explanation: Pulse Polio rounds with OPV.

36. AFP surveillance is used for:

1. Malaria
2. HIV
3. Polio
4. TB

Answer: 3

Explanation: Acute flaccid paralysis = polio surveillance tool.

37. Cataract surgery is promoted under:

1. NPCBVI
2. NVBDCP
3. NTEP
4. NACP

Answer: 1

Explanation: NPCBVI reduces blindness.

38. National Mental Health Programme launched in:

1. 1982
2. 1992
3. 2002
4. 2010

Answer: 1

Explanation: One of oldest national health programmes.

39. National Programme for Prevention & Control of Cancer, Diabetes, CVD & Stroke is:

1. NPCDS
2. NCDCP
3. NPCDCS
4. NCM

Answer: 3

Explanation: NPCDCS covers major NCDs.

40. NACO stands for:

1. National AIDS Control Office
2. National Adult Care Office
3. National Accident Care Office
4. None

Answer: 1

Explanation: NACO implements NACP.

41. Under JSY, cash incentives are given to:

1. Only mothers
2. Mothers & ASHA
3. Only newborn
4. Only father

Answer: 2

Explanation: Both mother & ASHA get incentives.

42. RBSK teams consist of:

1. Doctor + ANM
2. 2 doctors + 1 ANM + 1 pharmacist
3. Doctor + nurse + pharmacist
4. ASHA + ANM

Answer: 2

Explanation: Mobile health team.

43. Anemia Mukht Bharat uses:

1. 6×6×6 strategy
2. 5×5 strategy
3. 10×10 strategy
4. None

Answer: 1

Explanation: Covers 6 target groups, 6 interventions, 6 institutions.

44. Intensified Diarrhea Control Fortnight (IDCF) focuses on:

1. ORS + Zinc
2. Antibiotics
3. IV fluids
4. Vaccination

Answer: 1

Explanation: ORS and Zinc for diarrhea control.

45. Kangaroo Mother Care is promoted under:

1. NTEP
2. NACP
3. RMNCH+A
4. NVBDCP

Answer: 3

Explanation: RMNCH+A improves newborn survival.

46. Under NIDDCP, goiter is prevented by:

1. Vaccination
2. Iodized salt
3. Iron tablets
4. Protein powder

Answer: 2

Explanation: Iodine deficiency → goiter.

47. Important indicator for HIV control:

1. Viral load suppression
2. RBC count
3. MUAC
4. BMI

Answer: 1

Explanation: Viral load indicates treatment success.

48. NTEP ensures TB diagnosis using:

1. X-ray only
2. Sputum microscopy + CBNAAT
3. Urine test
4. Blood test

Answer: 2

Explanation: CBNAAT = rapid TB detection method.

49. National Programme for Filariasis control uses:

1. OPV
2. MDA (Mass Drug Administration)
3. Zinc
4. IFA

Answer: 2

Explanation: DEC + Albendazole yearly.

50. National Health Policy latest version:

1. 1983
2. 2002
3. 2017
4. 2020

Answer: 3

Explanation: NHP 2017 — universal health coverage focus.

NURSING ALL ROUNDER.IN



Maternal Health – 50 MCQs

(ANC, PNC, Danger Signs, Labour, Complications, Partograph, JSY/JSSK)

1. Minimum number of ANC visits recommended by WHO (2016 model):

1. 3
2. 4
3. 5
4. 8

Answer: 4

Explanation: WHO recommends 8-contact ANC model.

2. Minimum ANC visits under Indian guidelines:

1. 2
2. 3
3. 4
4. 8

Answer: 3

Explanation: India still follows minimum 4 ANC visits.

3. First ANC visit should be done:

1. Within 3 months
2. At 4–5 months
3. At 8 months
4. After delivery

Answer: 1

Explanation: First visit during 1st trimester (up to 12 weeks).

4. Fundal height reaches umbilicus at:

1. 12 weeks
2. 20 weeks
3. 28 weeks
4. 36 weeks

Answer: 2

Explanation: At 20 weeks fundus is at the umbilicus.

5. Fetal heart rate can be heard by Doppler at:

1. 6 weeks
2. 10–12 weeks
3. 20 weeks
4. 24 weeks

Answer: 2

Explanation: Doppler detects FHR by 10–12 weeks.

6. Danger sign in pregnancy:

1. Nausea
2. Mild headache
3. Vaginal bleeding
4. Leg cramps

Answer: 3

Explanation: Bleeding is a major danger sign.

7. Preeclampsia is diagnosed with high BP and:

1. Anemia
2. Proteinuria
3. Hyperglycemia
4. Hypocalcemia

Answer: 2

Explanation: Key feature = BP + protein in urine.

8. Eclampsia means:

1. Convulsions in pregnancy
2. High fever
3. Severe anemia
4. Low BP

Answer: 1

Explanation: Eclampsia = preeclampsia + seizures.

9. Preferred drug for eclampsia:

1. Diazepam
2. Magnesium sulphate
3. Phenobarbital
4. Calcium gluconate

Answer: 2

Explanation: MgSO_4 is the drug of choice.

10. Antidote for magnesium sulphate toxicity:

1. Potassium chloride
2. Calcium gluconate
3. Atropine
4. Adrenaline

Answer: 2

Explanation: Calcium gluconate reverses Mg toxicity.

11. Normal duration of pregnancy is:

1. 32 weeks
2. 36 weeks
3. 37–42 weeks
4. 45 weeks

Answer: 3

Explanation: Term = 37–42 weeks.

12. Normal hemoglobin in pregnancy should be at least:

1. 7 g/dL
2. 9 g/dL
3. 11 g/dL
4. 14 g/dL

Answer: 3

Explanation: WHO defines anemia <11 g/dL in pregnancy.

13. Daily IFA dose for pregnant women in India:

1. 30 mg Fe + 250 mcg FA
2. 60 mg Fe + 500 mcg FA
3. 100 mg Fe + 1 mg FA
4. 20 mg Fe + 50 mcg FA

Answer: 2

Explanation: Standard IFA tablet.

14. Calcium supplementation in pregnancy:

1. 200 mg/day
2. 500 mg/day
3. 1200 mg/day
4. 100 mg/day

Answer: 3

Explanation: 1200 mg/day (500 mg tablets BID).

15. TT immunization in pregnancy protects against:

1. Child TB
2. Neonatal tetanus
3. Maternal anemia
4. Malaria

Answer: 2

Explanation: Prevents tetanus in newborn.

16. One TT injection gives protection for:

1. 6 months
2. 1 year
3. 3 years
4. 5 years

Answer: 3

Explanation: TT gives protection for 3 years.

17. Severe anemia in pregnancy is defined as Hb below:

1. 7 g/dL
2. 9 g/dL
3. 10 g/dL
4. 8 g/dL

Answer: 1

Explanation: <7 g/dL = severe.

18. First stage of labour ends with:

1. Delivery of baby
2. Delivery of placenta
3. Full cervical dilation
4. Onset of contractions

Answer: 3

Explanation: Ends at 10 cm dilation.

19. Second stage of labour is from:

1. Onset of labour → full dilation
2. Full dilation → birth of baby
3. Birth of baby → placenta expelled
4. Placenta → postpartum

Answer: 2

Explanation: Second stage = pushing stage.

20. Third stage of labour ends with:

1. Delivery of baby
2. Delivery of placenta
3. Cutting the cord
4. Postpartum exam

Answer: 2

Explanation: Stage ends after placenta expulsion.

21. Duration of first stage in a primigravida:

1. 2 hours
2. 6 hours
3. 10–12 hours
4. 24 hours

Answer: 3

Explanation: Primigravida = slower labour.

22. Normal blood loss during vaginal delivery:

1. 200 ml
2. 250 ml
3. 500 ml
4. 1000 ml

Answer: 3

Explanation: Up to 500 ml is normal.

23. PPH (Postpartum hemorrhage) is blood loss:

1. 300 ml
2. 400 ml
3. 500 ml
4. 700 ml

Answer: 3

Explanation: >500 mL after vaginal delivery.

24. Most common cause of PPH:

1. Trauma
2. Atony
3. Retained placenta
4. Coagulation disorder

Answer: 2

Explanation: Uterine atony = most common.

25. Drug of choice for PPH:

1. Misoprostol
2. Oxytocin
3. Ergometrine
4. Carboprost

Answer: 2

Explanation: Oxytocin is first-line.

26. Best position during labour:

1. Supine
2. Lithotomy
3. Left lateral
4. Prone

Answer: 3

Explanation: Improves blood flow and comfort.

27. Main purpose of the partograph:

1. Detect early complications
2. Determine sex of fetus
3. Diagnose anemia
4. Detect diabetes

Answer: 1

Explanation: Used to monitor labour & detect abnormal progress.

28. Alert line in partograph indicates:

1. Immediate action required
2. Abnormal labour
3. Normal labour progress
4. End of labour

Answer: 3

Explanation: Alert line = acceptable progress.

29. Action line means:

1. Shift to C-section
2. Labour is normal
3. Need intervention
4. No intervention required

Answer: 3

Explanation: Action line → active management needed.

30. Preterm labour occurs before:

1. 28 weeks
2. 32 weeks
3. 34 weeks
4. 37 weeks

Answer: 4

Explanation: Preterm = <37 weeks.

31. Proteinuria in preeclampsia is:

1. 300 mg/24 hrs
2. 100 mg/24 hrs
3. 500 mg/24 hrs
4. 1 g/24 hrs

Answer: 1

Explanation: >300 mg = diagnostic.

32. True labour pains:

1. Pain relieved by rest
2. Irregular
3. Causes cervical dilation
4. Felt in abdomen only

Answer: 3

Explanation: True labour causes actual cervical change.

33. False labour pains:

1. Regular
2. Progressively stronger
3. No cervical dilation

4. Very painful

Answer: 3

Explanation: False pains do not dilate cervix.

34. Fetal distress is indicated by FHR:

1. 110–160 bpm
2. <110 bpm or >160 bpm
3. 100–200 bpm
4. 70–100 bpm

Answer: 2

Explanation: FHR below 110 or above 160 is abnormal.

35. MTP Act allows medical abortion up to:

1. 8 weeks
2. 12 weeks
3. 20 weeks
4. 24 weeks

Answer: 4

Explanation: Current rule allows up to 24 weeks.

36. When Rh-negative mother carries Rh-positive baby:

1. No risk
2. Baby develops anemia
3. Mother develops infection

4. Mother develops antibodies

Answer: 4

Explanation: Mother develops anti-D antibodies.

37. Anti-D injection is given at:

1. 12 weeks
2. 28 weeks + within 72 hrs of delivery
3. Only after delivery
4. Only before pregnancy

Answer: 2

Explanation: Standard anti-D prophylaxis.

38. Lochia rubra lasts for:

1. 1–2 days
2. 3–4 days
3. 5–7 days
4. 10 days

Answer: 3

Explanation: Red discharge up to 7 days.

39. Lochia serosa is:

1. Red
2. Pinkish/brown
3. Whitish

4. Green

Answer: 2

Explanation: Occurs from day 8 to day 14.

40. Lochia alba lasts up to:

1. 7 days
2. 14 days
3. 3–6 weeks
4. 1 year

Answer: 3

Explanation: Whitish discharge up to 6 weeks.

41. Maternal mortality ratio denominator:

1. 1000 live births
2. 10,000 women
3. 100,000 live births
4. Total population

Answer: 3

Explanation: Standard unit.

42. Main cause of maternal death in India:

1. Sepsis
2. Hemorrhage
3. Eclampsia

4. Obstructed labour

Answer: 2

Explanation: PPH is the most common cause.

43. APGAR score is assessed at:

1. 30 sec
2. 1 and 5 minutes
3. 30 minutes
4. Birth only

Answer: 2

Explanation: Standard APGAR timing.

44. APGAR stands for:

1. Appearance, Pulse, Grimace, Activity, Respiration
2. Appearance, Pulse, Growth, Activity, Reflex
3. Activity, Pulse, Growth, Respiration, Reflex
4. None

Answer: 1

Explanation: 5 components scored 0–2.

45. Exclusive breastfeeding should be continued for:

1. 2 months
2. 4 months
3. 6 months

4. 12 months

Answer: 3

Explanation: Standard recommendation is 6 months.

46. WHO defines normal postpartum period as:

1. 2 weeks

2. 4 weeks

3. 6 weeks

4. 12 weeks

Answer: 3

Explanation: Puerperium lasts 6 weeks.

47. Normal fetal presentation:

1. Breech

2. Shoulder

3. Cephalic

4. Footling

Answer: 3

Explanation: Cephalic/head-down is most common.

48. The most reliable sign of pregnancy:

1. Amenorrhea

2. Quickening

3. Fetal heart sounds

4. Breast changes

Answer: 3

Explanation: FHR is a positive sign of pregnancy.

49. Signs of placental separation:

1. Cord length shortens
2. Uterus becomes globular & rises
3. Fresh bleeding
4. None

Answer: 2

Explanation: Signs include uterus hardening, rising, cord lengthening.

50. First step in management of shoulder dystocia:

1. Push head in
2. McRoberts maneuver
3. Give oxytocin
4. Push abdomen

Answer: 2

Explanation: McRoberts = first-line for shoulder dystocia.

NURSING ALL ROUNDER.IN



Child Health – 50 MCQs

(IMNCI, Newborn Care, Growth, Development, Immunization, Illnesses)

1. IMNCI stands for:

1. Integrated Management of Childhood Infections
2. Integrated Management of Newborn and Childhood Illness
3. Integrated Mother and Child Immunization
4. Integrated Medical Care for Infants

Answer: 2

Explanation: IMNCI covers newborn + childhood illness.

2. IMNCI includes age group:

1. 0–1 month only
2. 2 months to 5 years only
3. 0–5 years
4. 1–10 years

Answer: 3

Explanation: IMNCI covers 0–59 months.

3. First essential step after birth is:

1. Cord cutting
2. Vitamin K
3. Drying and warming
4. Weighing

Answer: 3

Explanation: Drying prevents hypothermia.

4. Normal birth weight:

1. 1000 g
2. 1500 g
3. 2000 g
4. 2500 g or more

Answer: 4

Explanation: LBW < 2500 g.

5. Vitamin K dose for newborn:

1. 0.1 mg
2. 0.5 mg
3. 1 mg IM
4. 5 mg

Answer: 3

Explanation: To prevent bleeding in newborns.

6. Apgar score is taken at:

1. Birth
2. 1 and 5 minutes
3. 10 minutes
4. 30 minutes

Answer: 2

Explanation: Standard timing.

7. Early initiation of breastfeeding should be within:

1. 30 minutes
2. 1 hour
3. 4 hours
4. 12 hours

Answer: 2

Explanation: Initiate within 1 hour.

8. Exclusive breastfeeding means:

1. Breast milk + water
2. Breast milk only
3. Milk + honey
4. Milk + water + ORS

Answer: 2

Explanation: Only breastmilk for first 6 months.

9. Complementary feeding starts at:

1. 3 months
2. 4 months
3. 6 months
4. 9 months

Answer: 3

Explanation: Introduced at 6 months.

10. Immunization at birth includes all EXCEPT:

1. BCG
2. OPV-0
3. Hepatitis B-0
4. DPT

Answer: 4

Explanation: DPT starts at 6 weeks.

11. BCG vaccine is given:

1. IM
2. Subcutaneous
3. Intradermal
4. Oral

Answer: 3

Explanation: 0.05 ml (infants), intradermal.

12. BCG scar appears in:

1. 2 days
2. 1 week
3. 3–6 weeks
4. 3 months

Answer: 3

Explanation: Small scar forms after few weeks.

13. OPV is:

1. Killed vaccine
2. Live attenuated oral vaccine
3. IM vaccine
4. DNA vaccine

Answer: 2

Explanation: Live attenuated oral drops.

14. Measles / MR first dose given at:

1. 6 weeks
2. 9 months
3. 1 year
4. 5 years

Answer: 2

Explanation: First MR dose at 9 months.

15. Pentavalent vaccine protects against:

1. DPT + HepB + Hib
2. DPT + Polio
3. HepB + Measles
4. DPT + HepA

Answer: 1

Explanation: Five antigens in one vaccine.

16. Pentavalent vaccine dose schedule:

1. 0, 4, 8 weeks
2. 6, 10, 14 weeks
3. 9, 12, 15 months
4. 2, 4, 6 months

Answer: 2

Explanation: Standard UIP schedule.

17. Vitamin A prophylaxis first dose at:

1. Birth
2. 6 months
3. 9 months
4. 1 year

Answer: 3

Explanation: Given with MR vaccine.

18. Severe acute malnutrition (SAM) MUAC:

1. 12.5 cm
2. 11.5–12.5 cm
3. <11.5 cm

4. 14 cm

Answer: 3

Explanation: MUAC <11.5 cm = SAM.

19. Normal respiratory rate in infant (<1 year):

1. <20
2. <30
3. <50
4. <70

Answer: 3

Explanation: >50 bpm = fast breathing.

20. Fast breathing in 2–12 months age:

1. $\geq 30/\text{min}$
2. $\geq 40/\text{min}$
3. $\geq 50/\text{min}$
4. $\geq 60/\text{min}$

Answer: 3

Explanation: IMNCI cutoff is ≥ 50 .

21. Fast breathing in 1–5 years:

1. ≥ 20
2. ≥ 30

3. ≥ 40

4. ≥ 50

Answer: 3

Explanation: IMNCI cutoff ≥ 40 .

22. Diarrhea is defined as:

1. Loose stools once
2. 3 or more loose stools in 24 hours
3. 1 hard stool
4. Constipation

Answer: 2

Explanation: IMNCI definition.

23. Treatment of some dehydration:

1. IV fluids
2. Zinc only
3. ORS
4. Antibiotics

Answer: 3

Explanation: Plan B = ORS.

24. Zinc dose for diarrhea:

1. 5 mg/day
2. 10 mg/day

3. 20 mg/day

4. 50 mg/day

Answer: 3

Explanation: 20 mg/day (10 mg for <6 months).

25. Severe dehydration treatment:

1. Home fluids

2. ORS only

3. IV fluids (Ringer Lactate)

4. Antibiotics

Answer: 3

Explanation: Plan C = IV fluids.

26. Common cause of pneumonia in children:

1. E. coli

2. S. pneumoniae

3. Candida

4. Rabies virus

Answer: 2

Explanation: Leading bacterial cause.

27. Most common cause of under-five mortality:

1. Malaria

2. Diarrhea

3. Pneumonia

4. HIV

Answer: 3

Explanation: Pneumonia is major cause globally.

28. Growth is measured by:

1. Height & weight

2. Immunization

3. IQ

4. Personality

Answer: 1

Explanation: Growth = physical parameters.

29. Development is measured by:

1. Weight

2. Milestones

3. Height

4. MUAC

Answer: 2

Explanation: Motor, language, social milestones.

30. Birth weight doubles at:

1. 3 months

2. 5 months

3. 6 months
4. 12 months

Answer: 3

Explanation: Doubles by 5–6 months.

31. Birth weight triples at:

1. 6 months
2. 9 months
3. 12 months
4. 2 years

Answer: 3

Explanation: Triples by 1 year.

32. Birth weight quadruples at:

1. 1 year
2. 18 months
3. 2 years
4. 3 years

Answer: 3

Explanation: Four times birth weight by 2 years.

33. Social smile seen at:

1. 2 weeks
2. 4 weeks

3. 6 weeks

4. 3 months

Answer: 3

Explanation: Important early milestone.

34. Neck holding at:

1. 1 month

2. 2 months

3. 3 months

4. 6 months

Answer: 3

Explanation: At 3 months baby has head control.

35. Sitting without support at:

1. 4 months

2. 6 months

3. 9 months

4. 1 year

Answer: 3

Explanation: Sits alone by 8–9 months.

36. Walking independently at:

1. 6 months

2. 9 months

3. 12–15 months
4. 18 months

Answer: 3

Explanation: Walks around 1 year.

37. First tooth appears at:

1. 3 months
2. 6 months
3. 1 year
4. 2 years

Answer: 2

Explanation: Central incisors erupt around 6 months.

38. First immunization at birth:

1. DPT
2. BCG
3. IPV
4. JE vaccine

Answer: 2

Explanation: BCG is birth dose.

39. Delayed milestones may indicate:

1. Normal variation
2. Developmental delay

3. Overfeeding
4. Parental stress

Answer: 2

Explanation: Needs evaluation.

40. Danger sign in a sick child:

1. Cough
2. Fever
3. Lethargy/unconsciousness
4. Cold hands

Answer: 3

Explanation: Lethargy = severe illness.

41. Severe pneumonia sign:

1. Cough
2. Fast breathing
3. Chest indrawing
4. Running nose

Answer: 3

Explanation: Chest indrawing = severe.

42. Vaccine given at 9 months:

1. DPT
2. IPV

3. MR

4. HPV

Answer: 3

Explanation: MR 1st dose.

43. Khuski (measles) caused by:

1. Paramyxovirus

2. H. influenzae

3. Rotavirus

4. Pneumococcus

Answer: 1

Explanation: Measles virus is a paramyxovirus.

44. Rotavirus vaccine protects against:

1. Measles

2. Pneumonia

3. Severe diarrhea

4. Meningitis

Answer: 3

Explanation: Prevents rotavirus diarrhea.

45. JE vaccine protects against:

1. Japanese encephalitis

2. Jaundice

3. Joint pain

4. Measles

Answer: 1

Explanation: JE = mosquito-borne viral disease.

46. Polio eradication tool:

1. ORS

2. OPV campaigns

3. Zinc

4. Vitamin A

Answer: 2

Explanation: Pulse polio programme used OPV.

47. Newborn danger sign:

1. Sneezing

2. Breastfeeding difficulty

3. Soft stool

4. Crying

Answer: 2

Explanation: Poor feeding suggests serious illness.

48. Hypothermia in newborn:

1. $<36.5^{\circ}\text{C}$

2. $<37^{\circ}\text{C}$

3. $<35.5^{\circ}\text{C}$

4. $<34^{\circ}\text{C}$

Answer: 1

Explanation: WHO: $<36.5^{\circ}\text{C}$ = cold stress.

49. Skin-to-skin contact immediately after birth is called:

1. Exclusive breastfeeding

2. KMC

3. NRP

4. IMNCI

Answer: 2

Explanation: Kangaroo Mother Care.

50. RBSK screens children for:

1. Only anemia

2. Only eye disease

3. 4Ds: Defects, Diseases, Deficiencies, Developmental delays

4. Only disabilities

Answer: 3

Explanation: Comprehensive child health screening.

NURSING ALL ROUNDER.IN

1. The first step of the nursing process is:

1. Planning
2. Assessment
3. Diagnosis
4. Evaluation

Answer: 2

Explanation: Nursing process begins with assessment/data collection.

2. Nursing diagnosis is given by:

1. WHO
2. NANDA
3. UNICEF
4. MCI

Answer: 2

Explanation: NANDA provides standard nursing diagnoses.

3. Sterilization destroys:

1. Only bacteria
2. Only viruses
3. All microorganisms including spores
4. Only fungi

Answer: 3

Explanation: Sterilization kills all forms of life including spores.

4. Disinfection destroys:

1. All microbes and spores
2. Only spores
3. Only pathogens, not spores
4. Only viruses

Answer: 3

Explanation: Disinfection kills pathogens but not spores.

5. Autoclaving sterilizes using:

1. Hot air
2. Steam under pressure
3. Chemicals
4. UV light

Answer: 2

Explanation: Standard autoclave: 121°C, 15 psi, 15–20 min.

6. Temperature of autoclave:

1. 100°C
2. 110°C
3. 121°C
4. 200°C

Answer: 3

Explanation: Autoclave uses steam at 121°C.

7. Hot air oven works at:

1. 60°C for 1 hr
2. 100°C for 1 hr
3. 160°C for 2 hrs
4. 200°C for 1 hr

Answer: 3

Explanation: Sterilizes using dry heat.

8. Indicator of autoclave efficiency:

1. TST strips
2. Browne's tubes
3. Biological spore test
4. All of the above

Answer: 4

Explanation: All are autoclave indicators.

9. Chemical used for high-level disinfection:

1. Alcohol
2. Hypochlorite
3. 2% glutaraldehyde
4. Lysol

Answer: 3

Explanation: Glutaraldehyde disinfects endoscopes, instruments.

10. Alcohol concentration best for disinfection:

1. 30%
2. 50%
3. 70%
4. 90%

Answer: 3

Explanation: 70% alcohol is most effective.

11. Biomedical waste color for human anatomical waste:

1. Red
2. Yellow
3. Blue
4. Black

Answer: 2

Explanation: Yellow = human & animal anatomical waste.

12. Syringes (plastic) are disposed in:

1. Yellow
2. Red
3. White
4. Black

Answer: 2

Explanation: Red = contaminated plastic waste.

13. Sharps waste disposed in:

1. Yellow
2. Red
3. White (translucent)
4. Black

Answer: 3

Explanation: White puncture-proof container for sharps.

14. Glassware waste is disposed in:

1. Black
2. Blue
3. Red
4. Yellow

Answer: 2

Explanation: Blue = glass and metallic waste.

15. Black color bin is for:

1. Infected waste
2. Chemical waste
3. General municipal waste
4. Cytotoxic waste

Answer: 3

Explanation: Black = general non-infectious waste.

16. Ideal handwashing time recommended by WHO:

1. 10 seconds
2. 20 seconds
3. 40–60 seconds
4. 2 minutes

Answer: 3

Explanation: WHO: 40–60 seconds for proper handwashing.

17. “Five Moments of Hand Hygiene” introduced by:

1. UNICEF
2. WHO
3. CDC
4. MCI

Answer: 2

Explanation: WHO developed “5 moments”.

18. Best method to prevent hospital infections:

1. PPE
2. Sterilization
3. Hand hygiene
4. Antibiotics

Answer: 3

Explanation: Hand hygiene is the most effective.

19. Medical asepsis includes:

1. Complete sterility
2. Reduction of microorganisms
3. Removing all spores
4. Using sterile gloves only

Answer: 2

Explanation: Medical asepsis = clean technique.

20. Surgical asepsis includes:

1. Clean gloves
2. Handwashing
3. Complete removal of all microbes & spores
4. Only disinfection

Answer: 3

Explanation: Surgical asepsis = sterile technique.

21. First action in case of needle stick injury:

1. Apply ointment
2. Wash with soap & water
3. Cover wound immediately
4. Ignore

Answer: 2

Explanation: Wash area immediately.

22. HIV PEP should be started within:

1. 72 hours
2. 7 days
3. 24 hours
4. 1 month

Answer: 1

Explanation: Best within 2 hours; acceptable up to 72 hours.

23. Duration of HIV PEP:

1. 1 week
2. 2 weeks
3. 28 days
4. 100 days

Answer: 3

Explanation: Full course = 28 days.

24. Universal precautions protect against:

1. HIV
2. HBV
3. HCV
4. All of the above

Answer: 4

Explanation: Protect from all bloodborne pathogens.

25. Biomedical Waste Management Rules latest update:

1. 1998
2. 2011
3. 2016
4. 2020

Answer: 3

Explanation: BMW Rules updated in 2016.

26. Sodium hypochlorite solution strength used for disinfection:

1. 0.1%
2. 0.5%
3. 1%
4. 5%

Answer: 3

Explanation: 1% hypochlorite used for contaminated blood spills.

27. Needle & syringe separation recommended?

1. Yes, always
2. No, dispose without recapping
3. Recap first, then separate
4. Throw in general waste

Answer: 2

Explanation: Do NOT recap needles; dispose directly.

28. Recommended PPE during delivery:

1. Gloves only
2. Gloves + mask
3. Gloves + gown + mask + eye protection
4. No PPE

Answer: 3

Explanation: Delivery requires full PPE.

29. Aseptic technique aims to:

1. Kill all microbes
2. Prevent introduction of pathogens
3. Clean environment only
4. Remove dust

Answer: 2

Explanation: Prevents contamination during procedures.

30. Best place to take pulse in emergency:

1. Radial
2. Brachial
3. Carotid
4. Femoral

Answer: 3

Explanation: Carotid is most reliable in shock.

31. Normal respiration rate in adults:

1. 8–12
2. 12–20
3. 20–30
4. 30–40

Answer: 2

Explanation: Normal adult RR = 12–20/min.

32. Normal body temperature in adults:

1. 35°C
2. 36–37°C
3. 38–39°C
4. 40°C

Answer: 2

Explanation: Normal range 36–37°C.

33. Fowler's position means:

1. Lying flat
2. Head raised 45–60°
3. Head down
4. On stomach

Answer: 2

Explanation: Used for breathing difficulty.

34. Trendelenburg position:

1. Head up, feet down
2. Feet up, head down
3. Side-lying
4. Sitting

Answer: 2

Explanation: Improves venous return.

35. Hospital-acquired infection occurs after:

1. 12 hours of admission
2. 24 hours
3. 48 hours
4. 7 days

Answer: 3

Explanation: Nosocomial infection develops after 48 hrs.

36. Catheter-associated UTI prevented by:

1. Routine antibiotics
2. Daily catheter change
3. Handwashing + closed drainage system
4. Bed rest

Answer: 3

Explanation: Closed drainage prevents infection.

37. Most common hospital-acquired infection:

1. UTI
2. Pneumonia
3. Diarrhea
4. TB

Answer: 1

Explanation: CAUTI is most common.

38. Best method to dispose infected linen:

1. Burn
2. 1% hypochlorite soak
3. Washing with water only
4. Sunlight exposure

Answer: 2

Explanation: Disinfect before washing.

39. Airborne infection isolation prevents:

1. Measles
2. TB
3. Chickenpox
4. All

Answer: 4

Explanation: All diseases spread by airborne droplets.

40. N95 mask used for:

1. TB
2. HIV
3. Hepatitis B
4. Malaria

Answer: 1

Explanation: N95 protects from airborne TB.

41. Best way to prevent surgical site infection:

1. Antibiotics only
2. Proper handwashing & sterile technique
3. Bandage properly
4. Daily dressing

Answer: 2

Explanation: Aseptic technique is key.

42. Normal adult blood pressure:

1. 100/60
2. 120/80
3. 140/90
4. 160/100

Answer: 2

Explanation: Standard normal BP.

43. Ryle's tube insertion position:

1. Supine
2. Sitting with neck flexed
3. Fowler's
4. Trendelenburg

Answer: 2

Explanation: Flexed neck facilitates passage.

44. Best site for IM injection in adults:

1. Deltoid
2. Vastus lateralis
3. Dorsogluteal
4. Ventrogluteal

Answer: 4

Explanation: Ventrogluteal is safest.

45. Maximum volume for IM injection in deltoid:

1. 1 ml
2. 2 ml
3. 5 ml
4. 10 ml

Answer: 2

Explanation: Deltoid can safely take up to 2 ml.

46. Intradermal injection angle:

1. 10–15°
2. 45°
3. 60°
4. 90°

Answer: 1

Explanation: ID injections given at very shallow angle.

47. Subcutaneous injection angle:

1. 10°
2. 45°
3. 60°
4. 90°

Answer: 2

Explanation: Standard angle = 45°.

48. IM injection angle:

1. 10°
2. 20°
3. 45°
4. 90°

Answer: 4

Explanation: IM injections given at 90°.

49. Best practice for medication administration:

1. Right time
2. Right dose
3. Right patient
4. All of the above

Answer: 4

Explanation: 10 rights of medication administration.

50. Last step of the nursing process:

1. Diagnosis
2. Assessment
3. Evaluation
4. Planning

Answer: 3

Explanation: Evaluation checks the effectiveness of interventions.

NURSING ALL ROUNDER.IN



Pharmacology for Nurses – 50 MCQs

(Dosage, Common Drugs, ORS, IFA, Antibiotics, Safety)

1. The study of drugs and their actions is called:

1. Pharmacy
2. Pharmacology
3. Pharmacokinetics
4. Pharmacodynamics

Answer: 2

Explanation: Pharmacology studies drugs, uses, and effects.

2. Pharmacokinetics deals with:

1. What drug does to the body
2. What body does to the drug
3. Drug–drug interactions
4. Pain control

Answer: 2

Explanation: ADME = Absorption, Distribution, Metabolism, Excretion.

3. Pharmacodynamics deals with:

1. Effect of drug on body
2. Drug absorption
3. Excretion of drug
4. Half-life

Answer: 1

Explanation: Mechanism of drug action.

4. First-pass metabolism occurs in:

1. Kidney
2. Liver
3. Lungs
4. Stomach

Answer: 2

Explanation: Oral drugs undergo metabolism by liver before reaching circulation.

5. Route with 100% bioavailability:

1. Oral
2. IM
3. IV
4. Subcutaneous

Answer: 3

Explanation: IV bypasses first-pass metabolism.

6. Drug of choice for fever in children:

1. Aspirin
2. Paracetamol
3. Diclofenac
4. Ibuprofen

Answer: 2

Explanation: Paracetamol is safest for all ages; aspirin avoided in children.

7. Maximum daily dose of paracetamol in adults:

1. 1 g
2. 2 g
3. 3 g
4. 4 g

Answer: 4

Explanation: Above 4 g/day causes hepatotoxicity.

8. ORS stands for:

1. Oral Replacement Salt
2. Oral Rehydration Solution
3. Oral Regeneration Salts
4. Osmotic Rehydration Solution

Answer: 2

Explanation: ORS replaces fluid and electrolytes.

9. A standard ORS packet should be mixed with:

1. 500 ml water
2. 750 ml water
3. 1 liter water
4. 2 liters water

Answer: 3

Explanation: 1 packet + 1 litre clean water.

10. Zinc dose in diarrhea for <6 months:

1. 5 mg/day
2. 10 mg/day
3. 15 mg/day
4. 20 mg/day

Answer: 2

Explanation: <6 months = 10 mg, >6 months = 20 mg.

11. IFA tablet for pregnant women contains:

1. 30 mg iron + 250 mcg folic acid
2. 60 mg iron + 500 mcg folic acid
3. 80 mg iron + 1 mg folic acid
4. 100 mg iron + 1 mg folic acid

Answer: 2

Explanation: National guideline dose.

12. Vitamin A 1st dose at 9 months is:

1. 25,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 2 lakh IU

Answer: 3

Explanation: 1 lakh IU with MR at 9 months.

13. Antibiotic safe in pregnancy:

1. Tetracycline
2. Doxycycline
3. Penicillin
4. Ciprofloxacin

Answer: 3

Explanation: Penicillin and cephalosporins are safe.

14. Tetracycline is avoided in children because:

1. Causes vomiting
2. Causes tooth discoloration
3. Causes diarrhea
4. Causes fever

Answer: 2

Explanation: Causes permanent teeth discoloration.

15. Drug of choice for anaphylaxis:

1. Hydrocortisone
2. Diphenhydramine
3. Adrenaline
4. Atropine

Answer: 3

Explanation: IM adrenaline is first-line.

16. Adrenaline is given:

1. IV
2. IM
3. Oral
4. ID

Answer: 2

Explanation: IM (mid-thigh) preferred in anaphylaxis.

17. Drug of choice for asthma attack:

1. Salbutamol
2. Amoxicillin
3. Paracetamol
4. Atenolol

Answer: 1

Explanation: Salbutamol is a bronchodilator.

18. Oral rehydration solution works by:

1. Reducing diarrhea
2. Increasing sodium absorption
3. Killing bacteria
4. Rehydrating skin only

Answer: 2

Explanation: ORS uses sodium–glucose co-transport.

19. Half-life of a drug means:

1. 50% of drug eliminated
2. 50% digested
3. 50% absorbed
4. 50% metabolized

Answer: 1

Explanation: Time for plasma concentration to reduce by 50%.

20. Side effect of iron tablets:

1. Diarrhea
2. Constipation + black stools
3. Sweating
4. Hair fall

Answer: 2

Explanation: Common side effects.

21. Drug of choice for malaria (*P. falciparum* uncomplicated):

1. Chloroquine
2. ACT (Artemisinin Combination Therapy)
3. Penicillin
4. Fluconazole

Answer: 2

Explanation: ACT is standard regimen.

22. Drug used in TB (first-line):

1. Isoniazid
2. Ciprofloxacin
3. Fluconazole
4. Metronidazole

Answer: 1

Explanation: HRZE = first-line regimen.

23. HRZE stands for:

1. Hydrogen, Ranitidine, Zinc, Erythromycin
2. Isoniazid, Rifampicin, Pyrazinamide, Ethambutol
3. Hydrocortisone, Rifaximin, Zinc, Erythromycin
4. None

Answer: 2

Explanation: First-line TB drugs.

24. Antidote for paracetamol overdose:

1. Atropine
2. Vitamin K
3. N-acetylcysteine
4. Adrenaline

Answer: 3

Explanation: NAC protects liver.

25. ORS solution should be used within:

1. 2 hours
2. 6 hours
3. 12 hours
4. 24 hours

Answer: 4

Explanation: Discard after 24 hours.

26. Drug used in severe dehydration:

1. ORS
2. IV Normal saline
3. IV Ringer lactate
4. Distilled water

Answer: 3

Explanation: RL is preferred first-line.

27. Which drug causes hypoglycemia?

1. Metformin
2. Glibenclamide (sulfonylurea)
3. Insulin
4. Both 2 & 3

Answer: 4

Explanation: Sulfonylureas & insulin cause low sugar.

28. Insulin is given via:

1. Oral
2. IM
3. Subcutaneous
4. Intradermal

Answer: 3

Explanation: SC route is standard.

29. Preferred site for insulin injection:

1. Thigh
2. Abdomen
3. Deltoid
4. Buttocks

Answer: 2

Explanation: Abdomen provides best absorption.

30. Common side effect of aminoglycosides:

1. Nephrotoxicity
2. Hair loss
3. Constipation
4. Skin rash

Answer: 1

Explanation: Also causes ototoxicity.

31. Drug used to treat hypertension in pregnancy:

1. ACE inhibitors
2. Methyldopa
3. Enalapril
4. Propranolol

Answer: 2

Explanation: Methyldopa is safe in pregnancy.

32. Oral contraceptive pills contain:

1. Estrogen + progesterone
2. Testosterone
3. Estrogen only
4. Progesterone only

Answer: 1

Explanation: Combined pills contain both.

33. Emergency contraception must be taken within:

1. 24 hours
2. 48 hours
3. 72 hours
4. 7 days

Answer: 3

Explanation: Within 72 hours for best effect.

34. Dose of folic acid for preconception:

1. 100 mcg
2. 200 mcg
3. 400 mcg
4. 1 mg

Answer: 3

Explanation: Prevents neural tube defects.

35. Drug for worm infestation (deworming):

1. Ciprofloxacin
2. Albendazole
3. Paracetamol
4. Ibuprofen

Answer: 2

Explanation: Albendazole 400 mg.

36. Drug of choice for bacterial diarrhea (cholera):

1. Ceftriaxone
2. Doxycycline
3. Paracetamol
4. Vitamin A

Answer: 2

Explanation: Doxycycline used for cholera (adults).

37. Treatment of UTI:

1. Amoxicillin
2. Ciprofloxacin
3. Nitrofurantoin
4. Fluconazole

Answer: 3

Explanation: Nitrofurantoin is first-line.

38. Metronidazole is used in:

1. Amoebiasis
2. Pneumonia
3. TB
4. HIV

Answer: 1

Explanation: Drug of choice for amoebiasis.

39. Side effect of steroids:

1. Hypotension
2. Immunosuppression
3. Weight loss
4. Hypoglycemia

Answer: 2

Explanation: Steroids reduce immunity.

40. Drug for severe pain:

1. Paracetamol
2. Diclofenac
3. Morphine
4. Ibuprofen

Answer: 3

Explanation: Morphine = opioid analgesic.

41. Safe painkiller in pregnancy:

1. Ibuprofen
2. Diclofenac
3. Paracetamol
4. Aspirin

Answer: 3

Explanation: Paracetamol is safest.

42. Antidote for benzodiazepine overdose:

1. Naloxone
2. Flumazenil
3. Atropine
4. Protamine

Answer: 2

Explanation: Flumazenil reverses benzodiazepine effects.

43. Naloxone is an antidote for:

1. Paracetamol
2. Morphine/opioid overdose
3. Insulin overdose
4. Iron toxicity

Answer: 2

Explanation: Naloxone reverses opioid effects.

44. Iron toxicity treated with:

1. NAC
2. Deferoxamine
3. Atropine
4. Naloxone

Answer: 2

Explanation: Deferoxamine chelates iron.

45. Drug contraindicated in asthma:

1. Salbutamol
2. Ipratropium
3. NSAIDs like aspirin
4. Steroids

Answer: 3

Explanation: Aspirin can trigger asthma.

46. Drug of choice for epilepsy:

1. Paracetamol
2. Phenytoin
3. Caffeine
4. Aspirin

Answer: 2

Explanation: Phenytoin is widely used anticonvulsant.

47. Common drug for hypertension:

1. Metformin
2. Atenolol
3. Vitamin C
4. Zinc

Answer: 2

Explanation: Atenolol = beta blocker.

48. Oral drug for type-2 diabetes:

1. Insulin
2. Metformin
3. Hydrocortisone
4. Diazepam

Answer: 2

Explanation: Metformin = first-line drug for T2DM.

49. Before giving digoxin, nurse must check:

1. Temperature
2. Pulse
3. Weight
4. Respiratory rate

Answer: 2

Explanation: Do NOT give if pulse <60 bpm.

50. Rights of medication administration include all EXCEPT:

1. Right drug
2. Right time
3. Right doctor
4. Right patient

Answer: 3

Explanation: There is no "right doctor"; others are correct.

NURSING ALL ROUNDER.IN



Epidemiology & Surveillance – 50 MCQs

(Incidence, Prevalence, Outbreak, Surveillance, Triad, Transmission)

1. Epidemiology is the study of:

1. Hospitals
2. Distribution & determinants of health events
3. Medicines
4. Nursing care

Answer: 2

Explanation: Epidemiology = study of disease patterns in population.

2. Epidemiological triad includes:

1. Host, agent, environment
2. Doctor, nurse, patient
3. Air, water, food
4. Virus, bacteria, fungi

Answer: 1

Explanation: All diseases arise from interactions of triad.

3. Incidence measures:

1. New cases
2. All cases
3. Only old cases
4. Deaths

Answer: 1

Explanation: Incidence counts new cases in a time period.

4. Prevalence measures:

1. Only new cases
2. Old + new cases
3. Only deaths
4. Only chronic cases

Answer: 2

Explanation: Prevalence = burden of disease.

5. If incidence increases but duration decreases, prevalence:

1. Increases
2. Decreases
3. Constant
4. Doubles

Answer: 2

Explanation: Short duration → fewer cases remain → low prevalence.

6. Epidemic means:

1. Disease present at constant level
2. Cases more than expected
3. Worldwide spread
4. Single case

Answer: 2

Explanation: Epidemic = sudden rise of cases.

7. Endemic means:

1. Continuous presence in area
2. Sudden rise
3. Worldwide

4. Zero cases

Answer: 1

Explanation: Endemic = usual constant level.

8. Pandemic means:

1. Local outbreak
2. Multi-country spread
3. Village outbreak

4. No cases

Answer: 2

Explanation: Pandemic = worldwide epidemic.

9. Sporadic means:

1. Zero cases
2. Occurs occasionally
3. Constant presence
4. Only in children

Answer: 2

Explanation: Sporadic = irregular cases.

10. Attack rate is used in:

1. Chronic diseases
2. Epidemic investigation
3. Long-term prevalence studies
4. Infant mortality

Answer: 2

Explanation: Attack rate measures rapid spread.

11. Secondary attack rate indicates:

1. Transmission within a household
2. Total cases
3. Sporadic cases
4. Mortality

Answer: 1

Explanation: Measures spread among contacts.

12. Basic reproductive number (R0) indicates:

1. Number of babies born
2. Number of secondary cases from one case
3. Deaths in epidemic
4. Incubation period

Answer: 2

Explanation: $R_0 > 1 \rightarrow$ spread continues.

13. Herd immunity depends on:

1. Vaccination coverage
2. Literacy
3. Population size
4. Blood group

Answer: 1

Explanation: Higher coverage = stronger herd immunity.

14. Most sensitive indicator of community health:

1. CDR
2. IMR
3. TFR
4. MMR

Answer: 2

Explanation: IMR reflects overall health conditions.

15. Iceberg phenomenon indicates:

1. High prevalence
2. Many hidden cases
3. All cases visible
4. No subclinical cases

Answer: 2

Explanation: Majority cases are subclinical/undetected.

16. Iceberg phenomenon best seen in:

1. Measles
2. Hypertension
3. Diarrhea
4. Rabies

Answer: 2

Explanation: Many cases are undiagnosed.

17. Incubation period means:

1. Infection → first symptom
2. Symptom → death
3. Treatment → cure
4. Recovery → relapse

Answer: 1

Explanation: Latent time before symptoms.

18. Latent period means:

1. Symptom phase
2. Infection → period of infectiousness
3. First symptom → recovery
4. Cure → immunity

Answer: 2

Explanation: Latent period = interval before infectivity.

19. Generation time is:

1. Incubation period
2. Infection → peak infectivity
3. Recovery period
4. Incubation + latent period

Answer: 2

Explanation: Relates to disease transmission.

20. Best indicator for effectiveness of TB programme:

1. Incidence
2. Prevalence
3. Cure rate
4. Death rate

Answer: 3

Explanation: Cure rate = key measure under NTEP.

21. Case fatality rate indicates:

1. Morbidity
2. Lethality/virulence
3. Recovery
4. Transmission

Answer: 2

Explanation: High CFR → high virulence.

22. Sentinel surveillance monitors:

1. All cases
2. Special selected sites
3. Entire population
4. Rare diseases only

Answer: 2

Explanation: Only selected institutions.

23. Active surveillance means:

1. Routine reporting
2. Health staff actively search cases
3. No reporting
4. Community report only

Answer: 2

Explanation: More accurate than passive.

24. Passive surveillance means:

1. Health workers search
2. Routine reporting by facilities
3. Zero reporting
4. Door-to-door search

Answer: 2

Explanation: Most common method.

25. Zero reporting means:

1. Report only positive cases
2. Report even when cases are zero
3. Do not report
4. Report weekly

Answer: 2

Explanation: Ensures no missed cases.

26. Integrated Disease Surveillance Programme (IDSP) started in:

1. 1998
2. 2002
3. 2004
4. 2008

Answer: 3

Explanation: IDSP launched in 2004.

27. IDSP reports weekly using:

1. P forms
2. Y forms
3. S, P, L forms
4. C forms

Answer: 3

Explanation: S = syndromic, P = presumptive, L = lab.

28. First step in outbreak investigation:

1. Collect samples
2. Confirm outbreak
3. Prepare line list
4. Notify authorities

Answer: 2

Explanation: First confirm whether outbreak exists.

29. Epidemic curve helps in:

1. Diagnosing individual cases
2. Determining type of epidemic
3. Finding blood group
4. Finding socioeconomic status

Answer: 2

Explanation: Helps identify common source/progressive epidemics.

30. Common source outbreak means:

1. Person-to-person spread
2. Continuous source exposure
3. Multiple sources
4. Foodborne/waterborne

Answer: 4

Explanation: Caused by contaminated food/water.

31. Propagated epidemic means:

1. Person-to-person spread
2. Foodborne
3. Waterborne
4. Airborne only

Answer: 1

Explanation: Multiple peaks in epidemic curve.

32. Line listing is used for:

1. Population census
2. Outbreak investigation
3. Hospital inventory
4. Nursing notes

Answer: 2

Explanation: Basic table for cases.

33. Primary case is:

1. First human infected
2. Secondary infection
3. Carrier
4. Index case

Answer: 1

Explanation: Primary = first case in population.

34. Index case means:

1. First case identified
2. First case infected
3. Last case
4. Carrier

Answer: 1

Explanation: Index = first detected case (not necessarily first infected).

35. Contact means:

1. Anyone in country
2. Person exposed to case
3. Healthcare worker only
4. None

Answer: 2

Explanation: Anyone who was exposed.

36. Isolation is used for:

1. Healthy people
2. Sick infectious cases
3. All pregnant women
4. All children

Answer: 2

Explanation: For infected individuals.

37. Quarantine means:

1. Separate sick person
2. Separate exposed but healthy persons
3. Hospitalize all
4. Immunize contacts

Answer: 2

Explanation: Quarantine = restrict exposed individuals.

38. Disinfection destroys:

1. All microorganisms & spores
2. Only spores
3. Pathogens except spores
4. Only viruses

Answer: 3

Explanation: Does not kill spores.

39. Sterilization destroys:

1. Bacteria only
2. All microbes including spores
3. Only viruses
4. Only parasites

Answer: 2

Explanation: Complete destruction.

40. Surveillance in polio is based on:

1. AFP surveillance
2. HIV testing
3. Sputum microscopy
4. X-ray

Answer: 1

Explanation: Acute flaccid paralysis surveillance.

41. R_0 less than 1 indicates:

1. Disease will spread
2. Disease will die out
3. Epidemic
4. Pandemic

Answer: 2

Explanation: $R_0 < 1$ means infection will eventually disappear.

42. Best method to control cholera:

1. Antibiotics only
2. Safe water supply
3. Vaccination only
4. ORS

Answer: 2

Explanation: Clean water breaks transmission.

43. Carrier state is important in:

1. TB
2. Measles
3. Typhoid
4. Rabies

Answer: 3

Explanation: Chronic carriers spread typhoid.

44. Example of zoonotic disease:

1. TB
2. Diabetes
3. Rabies
4. Hypertension

Answer: 3

Explanation: Spread from animals → humans.

45. Best control measure for dengue:

1. Antibiotics
2. Vector control
3. Vaccination
4. Mosquito nets only

Answer: 2

Explanation: Aedes control is key.

46. Reservoir of infection means:

1. Temporary host
2. Habitat where organism survives
3. Hospital room
4. Nursing home only

Answer: 2

Explanation: Living or non-living reservoir.

47. Most common reservoir for TB:

1. Dogs
2. Cattle
3. Humans
4. Water

Answer: 3

Explanation: TB spreads human → human.

48. Host factor EXCEPT:

1. Age
2. Immunity
3. Nutrition
4. Pathogen

Answer: 4

Explanation: Pathogen = agent, not host.

49. Control measure for airborne disease:

1. Handwashing
2. Sunlight
3. Ventilation + masks
4. Food safety

Answer: 3

Explanation: TB, measles spread via air.

50. Ultimate aim of epidemiology:

1. Diagnose disease
2. Treat disease
3. Prevent & control disease
4. Only research

Answer: 3

Explanation: Prevention is the main goal.

NURSING ALL ROUNDER.IN



Environmental Health & Sanitation – 50 MCQs

(Water, Waste, Vectors, Pollution, Housing Standards)

1. Safe water is defined as water free from:

1. Chemicals only
2. Pathogens only
3. Pathogens + harmful chemicals
4. Salts only

Answer: 3

Explanation: Safe water must be free from biological + chemical hazards.

2. Most reliable indicator of water contamination:

1. pH
2. Turbidity
3. E. coli
4. Hardness

Answer: 3

Explanation: E. coli indicates fecal contamination.

3. WHO recommended safe level of fluoride in water:

1. 0.1 ppm
2. 0.5 ppm
3. 1 ppm
4. 10 ppm

Answer: 3

Explanation: Optimal fluoride = 1 ppm.

4. Fluorosis is caused by:

1. Iron
2. Calcium
3. Excess fluoride
4. Lack of fluoride

Answer: 3

Explanation: Excess fluoride → mottled teeth.

5. Ideal chlorine concentration in water for disinfection:

1. 0.2–0.5 mg/L
2. 1 mg/L
3. 5 mg/L
4. 10 mg/L

Answer: 1

Explanation: Residual chlorine should be 0.2–0.5 mg/L.

6. Bleaching powder contains:

1. Sodium hypochlorite
2. Calcium hypochlorite
3. Sodium fluoride
4. Iodine

Answer: 2

Explanation: Bleaching powder = $\text{Ca}(\text{OCl})_2$.

7. Method of household water purification:

1. Boiling
2. Chlorination
3. Filtration
4. All of the above

Answer: 4

Explanation: All are household methods.

8. Boiling kills:

1. Only bacteria
2. Only viruses
3. All pathogens except spores
4. Spores

Answer: 3

Explanation: Boiling does not kill spores.

9. Best method for large-scale water purification:

1. Chlorination
2. Boiling
3. Filtration
4. UV treatment

Answer: 1

Explanation: Chlorination most cost-effective.

10. Turbidity of drinking water should be less than:

1. 1 NTU
2. 5 NTU
3. 10 NTU
4. 50 NTU

Answer: 2

Explanation: Ideally <5 NTU for safe water.

11. Deep well water is usually:

1. Highly polluted
2. Bacteriologically safe
3. Turbid
4. Muddy

Answer: 2

Explanation: Deep wells are safer than shallow wells.

12. Hardness of water is due to:

1. Iron
2. Calcium & Magnesium
3. Copper
4. Nitrogen

Answer: 2

Explanation: Ca & Mg cause permanent and temporary hardness.

13. Best method to remove temporary hardness:

1. Boiling
2. Chlorination
3. Storage
4. Freezing

Answer: 1

Explanation: Boiling removes bicarbonates.

14. Biological Oxygen Demand (BOD) measures:

1. Chemicals
2. Organic matter
3. Microorganisms
4. Oxygen content only

Answer: 2

Explanation: BOD indicates organic pollution.

15. High BOD =

1. Pure water
2. High pollution
3. Soft water
4. High chlorine

Answer: 2

Explanation: More BOD means more organic pollution.

16. Excreta disposal in rural areas commonly uses:

1. Septic tank
2. Open defecation
3. Pit latrine
4. Sewerage

Answer: 3

Explanation: Pit latrine is economical, suitable in rural areas.

17. Sanitary landfill is used for:

1. Sewage
2. Solid waste disposal
3. Rainwater storage
4. Industrial waste only

Answer: 2

Explanation: Modern method for municipal waste.

18. Composting means:

1. Burning waste
2. Converting organic waste into manure
3. Chemical disposal
4. Drying waste

Answer: 2

Explanation: Composting reduces solid waste volume.

19. Biomedical waste comes under which colour system?

1. Yellow, red, white, blue
2. Black, green, yellow
3. Brown, red, green
4. Blue only

Answer: 1

Explanation: BMW Rules 2016.

20. Most common vector for malaria:

1. Aedes
2. Anopheles
3. Culex
4. Sandfly

Answer: 2

Explanation: Female Anopheles mosquito.

21. Vector for filariasis:

1. Aedes
2. Culex
3. Anopheles
4. Tsetse fly

Answer: 2

Explanation: Culex spreads filariasis.

22. Dengue is spread by:

1. Anopheles
2. Aedes aegypti
3. Culex pipiens
4. Sandfly

Answer: 2

Explanation: Aedes mosquito.

23. Kala-azar spread by:

1. Housefly
2. Sandfly
3. Blackfly
4. Aedes

Answer: 2

Explanation: Phlebotomus sandfly.

24. Plague spread by:

1. Mosquito
2. Rat flea
3. Louse
4. Housefly

Answer: 2

Explanation: Xenopsylla cheopis (rat flea).

25. Most effective method for vector control:

1. Fogging
2. Environmental sanitation
3. Vaccination
4. Noise control

Answer: 2

Explanation: Remove breeding sites.

26. Rat control uses:

1. Paris green
2. Traps
3. Warfarin
4. All

Answer: 4

Explanation: All used for rodent control.

27. Noise pollution acceptable limit (daytime in residential area):

1. 35 dB
2. 45 dB
3. 55 dB
4. 75 dB

Answer: 3

Explanation: Residential area limit = 55 dB.

28. Most common cause of air pollution:

1. Vehicles
2. Agriculture
3. Rivers
4. Trees

Answer: 1

Explanation: Vehicular emissions major contributor.

29. Particulate matter PM_{2.5} is dangerous because:

1. Easily visible
2. Penetrates deep lungs
3. Removes germs
4. Heavy particles

Answer: 2

Explanation: Small particles cross alveoli → bloodstream.

30. Main pollutant responsible for global warming:

1. SO₂
2. NO₂
3. CO₂
4. Ozone

Answer: 3

Explanation: CO₂ is major greenhouse gas.

31. Safe housing includes all EXCEPT:

1. Good ventilation
2. Damp walls
3. Sunlight
4. Adequate space

Answer: 2

Explanation: Dampness causes mold growth.

32. Ideal room ventilation standard:

1. 2 air changes/hour
2. 5 air changes/hour
3. 10 air changes/hour
4. None

Answer: 2

Explanation: 5–6 air changes per hour recommended.

33. Most common indoor air pollutant:

1. CO₂
2. CO (carbon monoxide)
3. Nitrogen
4. Helium

Answer: 2

Explanation: CO from incomplete combustion.

34. Best way to prevent ARI in children:

1. ORS
2. Proper ventilation
3. Deworming
4. Vitamin D

Answer: 2

Explanation: Poor ventilation increases ARI.

35. Solar disinfection method for water is called:

1. Solar boil
2. AQUA method
3. SODIS
4. SOCO

Answer: 3

Explanation: SODIS uses sunlight.

36. Most reliable way to prevent cholera:

1. Antibiotics
2. Safe drinking water
3. ORS
4. Zinc

Answer: 2

Explanation: Cholera → water contamination.

37. Jaundice outbreak commonly associated with:

1. Mosquito bite
2. Contaminated water (hepatitis A/E)
3. Dirty air
4. Noise

Answer: 2

Explanation: Hepatitis A/E spread through fecal–oral route.

38. Best way to prevent mosquito breeding:

1. Mosquito coil
2. Repellents
3. Environmental sanitation
4. Fogging

Answer: 3

Explanation: Remove stagnant water.

39. Method to measure air quality:

1. BOD
2. PM2.5 index
3. Turbidity
4. pH

Answer: 2

Explanation: PM2.5 and AQI used for air quality.

40. Hard water affects:

1. Digestion
2. Teeth
3. Soap efficiency
4. Immunity

Answer: 3

Explanation: Hard water reduces soap lather.

41. Septic tank needs cleaning every:

1. 6 months
2. 1 year
3. 2–3 years
4. 10 years

Answer: 3

Explanation: Sludge removal required periodically.

42. Most common cause of food poisoning:

1. Salmonella
2. HBV
3. TB
4. Measles

Answer: 1

Explanation: Salmonella is common pathogen.

43. Food adulteration is tested under:

1. PFA Act
2. IPC
3. BMW Act
4. None

Answer: 1

Explanation: Prevention of Food Adulteration Act.

44. Ideal disposal for dead animals:

1. Burning
2. Deep burial
3. Composting
4. Sewer

Answer: 2

Explanation: Deep burial prevents contamination.

45. Fecal–oral transmission occurs in:

1. Malaria
2. Cholera
3. Rabies
4. Dengue

Answer: 2

Explanation: Cholera spreads via contaminated water.

46. Ozone layer protects against:

1. Infrared rays
2. UV radiation
3. Radio waves
4. Sound waves

Answer: 2

Explanation: Ozone absorbs UV-B rays.

47. Greenhouse effect caused by:

1. CO₂
2. CFC
3. Methane
4. All

Answer: 4

Explanation: All greenhouse gases trap heat.

48. Incineration used for:

1. General waste
2. Plastic waste
3. Biomedical waste (yellow category)
4. Food waste

Answer: 3

Explanation: Incineration used for anatomical & infectious waste.

49. Most common insecticide for mosquito control:

1. DDT
2. Lime
3. Sulfur
4. Baking soda

Answer: 1

Explanation: DDT used for indoor residual spray.

50. Ultimate aim of environmental health:

1. Reduce pollution
2. Promote healthy environment
3. Control vectors
4. Improve sanitation only

Answer: 2

Explanation: Aim is overall environmental well-being.

NURSING ALL ROUNDER.IN

Behavioural Science & Health Education – 50 MCQs

(Communication, counselling, psychology, behaviour change, motivation)

1. Behavioural science mainly deals with:

1. Human behaviour
2. Microorganisms

3. Nutrition
4. Pharmacology

Answer: 1

Explanation: It studies human behaviour and factors influencing it.

2. The process of passing information from one person to another is:

1. Counselling
2. Communication
3. Motivation
4. Leadership

Answer: 2

Explanation: Communication = exchange of information.

3. In two-way communication:

1. Only sender speaks
2. Only receiver speaks
3. Both sender and receiver interact
4. None

Answer: 3

Explanation: Two-way communication = interaction.

4. Most effective method of health education:

1. Lecture
2. Group discussion

3. Mass media

4. Posters

Answer: 2

Explanation: Interactive methods are most effective.

5. Barrier to communication:

1. Noise

2. Clarity

3. Proper tone

4. Feedback

Answer: 1

Explanation: Noise prevents message reception.

6. Non-verbal communication includes:

1. Words

2. Body language

3. Letters

4. Emails

Answer: 2

Explanation: Includes gestures, facial expressions.

7. Expecting illness before it occurs is:

1. Prevention

2. Anticipatory guidance

3. Counselling

4. Motivation

Answer: 2

Explanation: Anticipatory guidance = predicting future needs.

8. Best method for teaching illiterate people:

1. Books

2. Radio

3. Demonstration

4. Posters with text

Answer: 3

Explanation: Demonstration helps learners without literacy.

9. IEC stands for:

1. Information, Education, Communication

2. Integrated Environmental Care

3. International Education Committee

4. Indian Educational Council

Answer: 1

Explanation: IEC improves awareness.

10. BCC stands for:

1. Behaviour Change Communication

2. Basic Community Care

3. Best Counselling Concept
4. Behaviour Counselling Centre

Answer: 1

Explanation: BCC focuses on behaviour change.

11. Health belief model is used to understand:

1. Community nutrition
2. Personal health behaviour
3. Hospital finance
4. Drug dosages

Answer: 2

Explanation: Explains why people take health actions.

12. Motivation is:

1. Force that drives behaviour
2. Health education
3. Communication tool
4. Mass media

Answer: 1

Explanation: Motivation = internal driving force.

13. Maslow's hierarchy identifies:

1. Communication methods
2. Human needs

3. Disease causation

4. Learning styles

Answer: 2

Explanation: Pyramid of human needs.

14. Basic need according to Maslow:

1. Safety

2. Love

3. Physiological

4. Esteem

Answer: 3

Explanation: Food, water, air = base needs.

15. Reinforcement strengthens:

1. Fear

2. Motivation

3. Behaviour

4. Memory only

Answer: 3

Explanation: Reinforcement increases likelihood of behaviour.

16. Cognitive domain deals with:

1. Skills

2. Attitude

3. Knowledge

4. Emotions

Answer: 3

Explanation: Cognitive = understanding & knowledge.

17. Psychomotor domain deals with:

1. Skills

2. Values

3. Emotions

4. Attitude

Answer: 1

Explanation: Psychomotor = motor skills.

18. Affective domain deals with:

1. Knowledge

2. Skills

3. Attitude & feelings

4. Body posture

Answer: 3

Explanation: Affective = emotion-based learning.

19. Best method to change behaviour:

1. Mass media

2. Counselling (one-to-one)

3. Posters

4. Lectures

Answer: 2

Explanation: Counselling provides personalised guidance.

20. Active listening means:

1. Interrupting

2. Judging

3. Listening fully with feedback

4. Speaking

Answer: 3

Explanation: Active listening involves attention + responses.

21. Rapport building is essential in:

1. Counselling

2. Record keeping

3. Lab test

4. Vaccination

Answer: 1

Explanation: Builds trust with client.

22. Fear appeals in health messages may cause:

1. High compliance always

2. Denial & resistance

3. Strong behaviour change
4. Always positive result

Answer: 2

Explanation: Too much fear reduces acceptance.

23. Feedback in communication helps to:

1. Close communication
2. Understand message received correctly
3. Increase noise
4. Control sender

Answer: 2

Explanation: Feedback confirms clarity.

24. Interpersonal communication occurs between:

1. TV & viewer
2. Two or more people
3. Poster & audience
4. Radio & listener

Answer: 2

Explanation: IPC improves trust.

25. Mass communication includes:

1. Family talk
2. Lecture

3. TV, radio, newspapers

4. Counselling

Answer: 3

Explanation: Reaches large population.

26. Key element of communication:

1. Sender

2. Message

3. Channel

4. All

Answer: 4

Explanation: All elements required.

27. One-way communication disadvantage:

1. Fast

2. No feedback

3. Saves time

4. Attractive

Answer: 2

Explanation: One-way lacks feedback.

28. Example of formal communication:

1. Gossip

2. Notice board

3. Informal chat

4. Rumours

Answer: 2

Explanation: Written official communication.

29. Example of informal communication:

1. Notice

2. Rumours

3. Reports

4. Meeting agenda

Answer: 2

Explanation: Informal = grapevine.

30. Empathy means:

1. Feeling sad for someone

2. Understanding others' feelings

3. Ignoring feelings

4. Judging someone

Answer: 2

Explanation: Empathy = emotional understanding.

31. Key principle of counselling:

1. Judgement

2. Confidentiality

3. Criticism

4. Authority

Answer: 2

Explanation: Confidentiality builds trust.

32. Health education aims at:

1. Awareness

2. Attitude change

3. Behaviour change

4. All

Answer: 4

Explanation: Health education focuses on knowledge + behaviour change.

33. Reinforcement of health messages increases:

1. Fear

2. Forgetfulness

3. Adoption of behaviour

4. Confusion

Answer: 3

Explanation: Repetition improves recall.

34. Communication noise includes:

1. Horns

2. Illness

3. Poor understanding

4. All

Answer: 4

Explanation: Noise includes physical, emotional & semantic.

35. Group discussion advantage:

1. Less participation

2. No interaction

3. Participants share ideas

4. Only leader talks

Answer: 3

Explanation: Best for adult learning.

36. Demonstration method helps in:

1. Attitude

2. Skill learning

3. Knowledge only

4. Behaviour only

Answer: 2

Explanation: Demonstration teaches practical skills.

37. Example of audiovisual aid:

1. Chalk

2. Book

3. Video

4. Chair

Answer: 3

Explanation: Combines audio + visual.

38. Peer education effectively used for:

1. Older adults

2. Adolescents

3. Infants

4. Elderly

Answer: 2

Explanation: Adolescents respond well to peers.

39. Health education in schools focuses on:

1. Hygiene

2. Nutrition

3. Safety

4. All

Answer: 4

Explanation: Schools cover all health areas.

40. KAP stands for:

1. Knowledge, Attitude, Practice

2. Knowledge, Action, Performance

3. Kids, Adults, Parents

4. Key Action Plan

Answer: 1

Explanation: KAP surveys measure behaviour.

41. Best method for teaching about ORS preparation:

1. Lecture

2. Demonstration

3. Poster

4. Radio

Answer: 2

Explanation: Demonstration improves skill retention.

42. PHC field workers mainly use:

1. Mass media

2. Interpersonal communication

3. Research

4. Laws

Answer: 2

Explanation: IPC is most effective.

43. One-to-one counselling used for:

1. HIV testing

2. Diabetes education

3. Family planning

4. All

Answer: 4

Explanation: Required for sensitive issues.

44. Pictorial posters are useful for:

1. Educated population

2. Illiterate population

3. Rich population

4. Doctors only

Answer: 2

Explanation: Images communicate without text.

45. Fear approach used cautiously because:

1. Always effective

2. May lead to denial

3. Makes people laugh

4. Not allowed legally

Answer: 2

Explanation: Fear can cause resistance.

46. "Rumor" spreads through:

1. Formal channels

2. Informal communication

3. Radio

4. Book

Answer: 2

Explanation: Grape-vine communication.

47. Health education messages should be:

1. Long & complex

2. Short, simple, clear

3. Only technical

4. Emotional

Answer: 2

Explanation: Easy-to-understand messages are best.

48. Effective communication requires:

1. Listening

2. Clarity

3. Feedback

4. All

Answer: 4

Explanation: All are essential.

49. Psychology is the study of:

1. Plants

2. Human mind & behaviour

3. Blood

4. Bones

Answer: 2

Explanation: Psychology explains behaviour.

50. Final goal of health education:

1. Knowledge only

2. Good attitude only

3. Behaviour change

4. Entertainment

Answer: 3

Explanation: Aim = sustained healthy behaviour.

NURSING ALL ROUNDER.IN



National Health Programmes – 50 MCQs

(NHM, RMNCH+A, Immunization, TB, HIV, NCD, Nutrition, Vector Control)

1. NHM stands for:

1. National Health Mission

2. National Hygiene Mission

3. National Hospital Mission

4. National Help Mission

Answer: 1

Explanation: NHM = umbrella programme covering RMNCH+A & NUHM.

2. NHM launched in:

1. 2002
2. 2005
3. 2010
4. 2020

Answer: 2

Explanation: Launched in 2005.

3. ASHA workers are selected under:

1. NRHM
2. NACP
3. NPCB
4. NPCDCS

Answer: 1

Explanation: Part of NRHM (rural component of NHM).

4. Services under JSSK are:

1. Free delivery
2. Free drugs
3. Free diagnostics & transport

4. All

Answer: 4

Explanation: JSSK ensures free maternal & newborn care.

5. JSY provides:

1. Free food
2. Cash incentives for institutional delivery
3. Free ambulance
4. Free home visits

Answer: 2

Explanation: JSY promotes safe institutional deliveries.

6. RMNCH+A includes 'A' meaning:

1. ASHA
2. Adolescents
3. Acute care
4. Advanced care

Answer: 2

Explanation: "A" = adolescents.

7. Vaccine-preventable diseases controlled by:

1. JSSK
2. UIP
3. NPCB

4. NACP

Answer: 2

Explanation: UIP = vaccination programme.

8. Pulse Polio aims to eradicate:

1. TB
2. HIV
3. Polio
4. Malaria

Answer: 3

Explanation: Door-to-door OPV/IPV campaign.

9. AFP surveillance is used for:

1. HIV
2. Polio
3. Diarrhea
4. Measles

Answer: 2

Explanation: Acute Flaccid Paralysis surveillance.

10. In NTEP, TB diagnosis uses:

1. ELISA
2. Sputum microscopy
3. CT scan

4. MRI

Answer: 2

Explanation: Primary diagnostic tool.

11. HRZE means:

1. First-line TB drugs
2. Family planning methods
3. HIV treatment
4. Vaccine schedule

Answer: 1

Explanation: Isoniazid, Rifampicin, Pyrazinamide, Ethambutol.

12. Daily regimen TB treatment started in:

1. 2015
2. 2017
3. 2019
4. 2021

Answer: 2

Explanation: Daily regimen started in 2017.

13. NACP deals with:

1. TB
2. HIV/AIDS
3. Diabetes

4. Hypertension

Answer: 2

Explanation: National AIDS Control Programme.

14. HIV diagnostic test under NACP:

1. RPR
2. ELISA
3. Widal
4. Mantoux

Answer: 2

Explanation: ELISA/rapid tests used.

15. PPTCT means:

1. Prevention of Parent to Child Transport
2. Prevention of Parent to Child Transmission
3. Prevention of Patients to Contact Transmission
4. None

Answer: 2

Explanation: HIV prevention in pregnancy.

16. RBSK covers age group:

1. 0–5 years
2. 0–18 years
3. 5–10 years

4. 12–18 years

Answer: 2

Explanation: Rashtriya Bal Swasthya Karyakram.

17. RBSK screens for:

1. Diseases only
2. Disabilities only
3. 4D—Defects, Diseases, Deficiencies, Developmental delays
4. Death

Answer: 3

Explanation: Comprehensive screening.

18. NPCDCS deals with:

1. Acute diseases
2. Communicable diseases
3. Non-communicable diseases
4. Occupational diseases

Answer: 3

Explanation: Diabetes, hypertension, cancers.

19. NIDDCP deals with:

1. Iron deficiency
2. Iodine deficiency
3. Vitamin A deficiency

4. Protein deficiency

Answer: 2

Explanation: National Iodine Deficiency Disorders Control Programme.

20. Iodized salt must contain:

1. 5 ppm
2. 10 ppm
3. 15 ppm
4. 25 ppm

Answer: 3

Explanation: Minimum 15 ppm iodine.

21. NVBDCP deals with:

1. HIV
2. Vector-borne diseases
3. TB
4. Nutrition

Answer: 2

Explanation: Malaria, dengue, filariasis, JE, kala-azar.

22. Malaria control includes:

1. Early diagnosis
2. Complete treatment
3. Vector control

4. All

Answer: 4

Explanation: All are essential strategies.

23. ASHA incentive for immunization ensures:

1. Newborn care only
2. Dropout reduction
3. Maternal mortality
4. Leprosy cure

Answer: 2

Explanation: Helps improve immunization coverage.

24. NPCB deals with:

1. Blindness control
2. Cancer control
3. Birth control
4. Hearing loss

Answer: 1

Explanation: Cataract, refractive errors.

25. Main cause of blindness in India:

1. Refractive error
2. Cataract
3. Glaucoma

4. Vitamin A deficiency

Answer: 2

Explanation: Cataract leading cause.

26. MSSK stands for:

1. Mothers Safety Scheme
2. Muskan Scheme
3. Mother-child health and nutrition
4. None

Answer: 2

Explanation: Muskan focuses on immunization.

27. JSY incentive varies by:

1. Education
2. Literacy
3. Rural/urban area
4. Mother's height

Answer: 3

Explanation: Higher incentive in rural areas.

28. Poshan Abhiyaan aims to reduce:

1. Maternal mortality
2. Child malnutrition
3. TB incidence

4. Dengue

Answer: 2

Explanation: Addresses stunting, wasting, anemia.

29. National Deworming Day held on:

1. January 15
2. February 10
3. March 5
4. April 1

Answer: 2

Explanation: Deworming for 1–19 years.

30. Albendazole dose for children (≥ 2 years):

1. 100 mg
2. 200 mg
3. 400 mg
4. 500 mg

Answer: 3

Explanation: 400 mg under NDD.

31. Weekly Iron Folic Acid Supplementation (WIFS) is for:

1. Infants
2. Adolescents
3. Pregnant women

4. Elderly

Answer: 2

Explanation: 10–19 years age group.

32. IFA blue tablet for:

1. Pregnant women
2. Lactating mothers
3. Adolescents (boys & girls)
4. Elderly

Answer: 3

Explanation: WIFS uses blue tablet.

33. Under RKSK, the Adolescent Friendly Clinic is called:

1. Saheli
2. AFHC
3. ASHA clinic
4. Wellness center

Answer: 2

Explanation: Adolescent-Friendly Health Clinic.

34. ANM provides:

1. Immunization
2. Antenatal care
3. Family planning

4. All

Answer: 4

Explanation: Key frontline worker services.

35. IMNCI includes:

1. Neonatal care
2. Childhood illness care
3. Home-based care
4. All

Answer: 4

Explanation: Integrated newborn & child care.

36. SNCU stands for:

1. Special Newborn Care Unit
2. Super Nutrition Care Unit
3. Safe Nutrition Child Unit
4. Standard Neonatal Clinic Unit

Answer: 1

Explanation: For sick newborns.

37. NIPI stands for:

1. National Iron Plus Initiative
2. Nutrition In Pregnancy Initiative
3. National Immunisation Programme

4. None

Answer: 1

Explanation: NIPi covers IFA supplementation.

38. SBA training given to:

1. ASHA
2. ANM & Staff Nurse
3. Doctors only
4. AWW

Answer: 2

Explanation: Skilled Birth Attendant training.

39. NACP-IV goal:

1. End HIV
2. Reduce new HIV infections
3. Eradicate HIV
4. Free ART forever

Answer: 2

Explanation: Prevention-focused programme.

40. ART stands for:

1. Active Response Therapy
2. Antiretroviral Therapy
3. Anti-Radiation Treatment

4. Anti-Rabies Treatment

Answer: 2

Explanation: Treatment for HIV/AIDS.

41. DOTS is used in:

1. NACP
2. NTEP
3. NVBDCP
4. NIDDCP

Answer: 2

Explanation: Directly Observed Treatment Short-course.

42. NLEP deals with:

1. Leprosy elimination
2. Polio
3. Cancer
4. Diabetes

Answer: 1

Explanation: National Leprosy Eradication Programme.

43. Leprosy diagnosis based on:

1. Skin patches
2. Loss of sensation
3. Nerve thickening

4. All

Answer: 4

Explanation: All 3 cardinal signs.

44. Kala-azar elimination target:

1. Aedes control
2. Sandfly control
3. Rat control
4. Tick control

Answer: 2

Explanation: Kala-azar spread by sandfly.

45. IDSP surveillance categories:

1. X, Y, Z
2. S, P, L
3. H, M, L
4. A, B, C

Answer: 2

Explanation: S = syndromic, P = presumptive, L = lab.

46. VBD control uses IRS, which means:

1. Indoor residual spraying
2. International relief service
3. Indoor regular service

4. Internal review system

Answer: 1

Explanation: Chemical spraying inside houses.

47. IMR reduction programme under NHM is:

1. JSSK
2. IMNCI
3. PMSMA
4. RBSK

Answer: 2

Explanation: IMNCI directly reduces infant mortality.

48. PMSMA provides:

1. Free ANC on 9th of every month
2. Free PNC
3. Free immunization
4. Free delivery

Answer: 1

Explanation: Pradhan Mantri Surakshit Matritva Abhiyan.

49. Kayakalp awards are for:

1. Best nutrition centers
2. Best cleanliness in health facilities
3. Best vaccination centers

4. Best TB centers

Answer: 2

Explanation: Clean hospitals initiative.

50. Goal of NHM:

1. Reduce IMR & MMR
2. Strengthen health system
3. Universal access to care
4. All

Answer: 4

Explanation: NHM aims at overall improvement of the health system.

NURSING ALL ROUNDER.IN

First Aid & Emergency Nursing – 50 MCQs

(CPR, shock, bleeding, burns, poisoning, fractures)

1. First step in emergency assessment:

1. Airway
2. Breathing
3. Circulation

4. Disability

Answer: 1

Explanation: ABC (Airway first).

2. CPR stands for:

1. Cardio-Pulmonary Resuscitation

2. Chest Pressure Resuscitation

3. Cardiac Pulse Recovery

4. Cardiac Pressure Regulation

Answer: 1

Explanation: CPR restores heart + breathing.

3. Compression rate in adult CPR:

1. 60/min

2. 80/min

3. 100–120/min

4. 150/min

Answer: 3

Explanation: Standard AHA recommendation.

4. Compression depth in adults:

1. 1 cm
2. 3 cm
3. 5–6 cm
4. 10 cm

Answer: 3

Explanation: Enough to circulate blood.

5. Duty ratio for CPR (compression:breath):

1. 10:2
2. 20:2
3. 30:2
4. 50:4

Answer: 3

Explanation: Standard adult CPR = 30 compressions, 2 breaths.

6. First action for choking adult:

1. Start CPR
2. Heimlich maneuver
3. Give water
4. Slap face

Answer: 2

Explanation: Abdominal thrust is used.

7. Shock means:

1. Low BP
2. Failure of circulation
3. High fever
4. Fatigue

Answer: 2

Explanation: Shock = inadequate tissue perfusion.

8. First sign of shock:

1. Hypotension
2. Tachycardia
3. Cyanosis
4. Sweating

Answer: 2

Explanation: Pulse increases early.

9. Hypovolemic shock caused by:

1. Dehydration

2. Bleeding

3. Burns

4. All

Answer: 4

Explanation: All reduce circulating volume.

10. First aid for external bleeding:

1. Apply tourniquet

2. Apply direct pressure

3. Check BP

4. Give water

Answer: 2

Explanation: Direct pressure controls bleeding.

11. Tourniquet is used when:

1. Bleeding is mild

2. Direct pressure fails

3. For small cuts

4. Always

Answer: 2

Explanation: Last Resort method.

12. Golden hour refers to:

1. First 10 min
2. First 60 min
3. First 2 hours
4. First 24 hours

Answer: 2

Explanation: First hour → best survival chances.

13. Signs of fracture include:

1. Redness
2. Pain, swelling & abnormal movement
3. Rash
4. Fever

Answer: 2

Explanation: Classic fracture signs.

14. First aid for fracture:

1. Immobilize limb
2. Massage
3. Apply oil

4. Move limb

Answer: 1

Explanation: Immobilization prevents further injury.

15. Splint should cover:

1. Injury site only

2. Above & below joint

3. Only above

4. Only below

Answer: 2

Explanation: Splint covers joint above & below.

16. Burn classification depends on:

1. Cause

2. Depth & surface area

3. Smell

4. Body weight

Answer: 2

Explanation: 1st, 2nd, 3rd degree + TBSA.

17. Rule of nine used to assess:

1. Pulse
2. Burn surface area
3. BP

4. Shock

Answer: 2

Explanation: Used in adults.

18. First aid for burns:

1. Apply ice
2. Wash with cool water
3. Apply toothpaste
4. Break blisters

Answer: 2

Explanation: Cool water reduces damage.

19. Do not apply on burns:

1. Aloe vera
2. Water
3. Toothpaste/oil
4. Moist gauze

Answer: 3

Explanation: Toothpaste contaminates wound.

20. Chemical burn first aid:

1. Rub area
2. Flush with water for 10–20 minutes
3. Apply ointment
4. Cover immediately

Answer: 2

Explanation: Remove chemical thoroughly.

21. Electrical burn first step:

1. Touch victim
2. Switch off power supply
3. Apply ice
4. Give CPR

Answer: 2

Explanation: Remove source first.

22. Poisoning first step:

1. Induce vomiting

2. Identify poison

3. Give milk

4. Lay flat

Answer: 2

Explanation: Identify poison for proper treatment.

23. In snake bite, first aid includes:

1. Cutting wound

2. Sucking venom

3. Immobilizing limb

4. Applying ice

Answer: 3

Explanation: Keep limb still, send to hospital.

24. Anti-snake venom used for:

1. All snake bites

2. Only venomous bites

3. All animal bites

4. All human bites

Answer: 2

Explanation: ASV required only for venomous bites.

25. Dog bite first aid:

1. Wash with soap + water 15 minutes
2. Apply oil
3. Tie cloth
4. Ignore if small bite

Answer: 1

Explanation: Reduces viral load.

26. Rabies vaccine given on:

1. 0, 3, 7, 14 days
2. Once
3. Only day 0
4. Monthly

Answer: 1

Explanation: Standard post-exposure schedule.

27. The universal antidote:

1. Milk
2. Activated charcoal
3. Salt water

4. Lemon juice

Answer: 2

Explanation: Absorbs many poisons.

28. Emergency for bee sting:

1. Remove stinger

2. Rub area

3. Apply toothpaste

4. None

Answer: 1

Explanation: Remove stinger quickly.

29. Heat stroke first aid:

1. Drink hot fluids

2. Move to cool area + remove clothing

3. Wrap in blanket

4. Run in sun

Answer: 2

Explanation: Lower body temperature rapidly.

30. Hypothermia first aid:

1. Remove wet clothes
2. Apply warm blankets
3. Give warm drinks
4. All

Answer: 4

Explanation: Restore body temperature.

31. Epistaxis means:

1. Vomiting
2. Nose bleed
3. Ear pain
4. Eye redness

Answer: 2

Explanation: Manage by leaning forward + pressure.

32. Epistaxis first aid:

1. Tilt head back
2. Tilt head forward and pinch nose
3. Lie down
4. Apply hot pack

Answer: 2

Explanation: Forward position prevents aspiration.

33. Fainting first aid:

1. Make stand
2. Lay flat + elevate legs
3. Give water immediately
4. Sprinkle cold water only

Answer: 2

Explanation: Improves blood flow to brain.

34. Drowning first step:

1. Give food
2. Remove victim from water safely
3. Walk around
4. Give cold bath

Answer: 2

Explanation: First ensure safety.

35. In head injury:

1. Move head

2. Keep head stable
3. Give food
4. Apply pressure to bleeding

Answer: 2

Explanation: Avoid further brain/spine damage.

36. Sign of internal bleeding:

1. Blue lips
2. Bruising
3. Weak pulse
4. All

Answer: 4

Explanation: Internal bleeding shows subtle signs.

37. Triage means:

1. CPR
2. Prioritizing patients
3. Giving injections
4. Dressing wounds

Answer: 2

Explanation: Sorting based on severity.

38. Triage red tag means:

1. Minor injuries
2. Delayed care
3. Immediate care needed
4. Dead

Answer: 3

Explanation: Red = life-threatening.

39. Green triage tag means:

1. Walking wounded
2. Dead
3. Immediate
4. Expectant

Answer: 1

Explanation: Minor injuries.

40. Black triage tag:

1. Immediate
2. Minor
3. Deceased

4. None

Answer: 3

Explanation: Black tag = dead or moribund.

41. Sprain involves injury to:

1. Muscle

2. Tendon

3. Ligament

4. Bone

Answer: 3

Explanation: Sprain = ligament injury.

42. Strain involves injury to:

1. Muscle

2. Bone

3. Ligament

4. Joint

Answer: 1

Explanation: Strain = muscle/tendon injury.

43. Foreign body in eye first aid:

1. Rub eye
2. Wash with clean water
3. Use pencil
4. Press hard

Answer: 2

Explanation: Irrigate eye gently.

44. Chest pain emergency drug:

1. Paracetamol
2. Aspirin
3. Ibuprofen
4. Dextrose

Answer: 2

Explanation: Aspirin reduces clot formation.

45. In stroke warning signs, FAST means:

1. Food, arm, skin, time
2. Face droop, Arm weakness, Speech difficulty, Time
3. Fast breathing only
4. None

Answer: 2

Explanation: Stroke assessment tool.

46. AED stands for:

1. Automatic External Defibrillator
2. Advanced Emergency Device
3. Acute Emergency Defibrillator
4. Automatic Energy Device

Answer: 1

Explanation: Used in sudden cardiac arrest.

47. Poisoning by acid:

1. Induce vomiting
2. Neutralize quickly
3. Do not induce vomiting
4. Give soda

Answer: 3

Explanation: Vomiting damages the esophagus more.

48. Seizure first aid:

1. Hold tightly

2. Put object in mouth
3. Protect airway + remove hazards
4. Give water

Answer: 3

Explanation: Ensure safety, do not restrain.

49. Anaphylaxis first drug:

1. Hydrocortisone
2. Adrenaline
3. Paracetamol
4. Antibiotic

Answer: 2

Explanation: IM adrenaline is first-line.

50. Universal emergency number in India:

1. 101
2. 102
3. 108
4. 1098

Answer: 3

Explanation: 108 = Emergency ambulance.



Medical–Surgical Nursing – 50 MCQs

(Respiratory, Cardiac, GI, Renal, Endocrine, Fever, Infection)

1. Normal respiratory rate in adults is:

1. 8–12/min
2. 12–20/min
3. 20–30/min
4. 30–40/min

Answer: 2

Explanation: Normal adult RR is 12–20/min.

2. Most common cause of pneumonia:

1. E. coli
2. Streptococcus pneumoniae
3. Candida
4. Rabies virus

Answer: 2

Explanation: S. pneumoniae is leading bacterial cause.

3. First symptom of asthma attack:

1. Chest pain
2. Wheezing
3. Vomiting
4. Palpitations

Answer: 2

Explanation: Wheeze due to airway narrowing.

4. COPD is mainly caused by:

1. Viral infection
2. Smoking
3. Heart failure
4. Diabetes

Answer: 2

Explanation: Smoking is main risk factor.

5. Best position for breathing difficulty:

1. Supine
2. Prone
3. Fowler's position
4. Trendelenburg

Answer: 3

Explanation: Elevates chest to ease breathing.

6. Tuberculosis primarily affects the:

1. Heart
2. Lungs
3. Liver
4. Kidney

Answer: 2

Explanation: Pulmonary TB is most common.

7. Hemoptysis means:

1. Cough with sputum
2. Cough with blood
3. Dry cough
4. Difficulty swallowing

Answer: 2

Explanation: Hemoptysis = blood in sputum.

8. Hypertension means BP above:

1. 120/80
2. 130/80
3. 140/90
4. 100/60

Answer: 3

Explanation: 140/90 = hypertension.

9. Chest pain radiating to left arm indicates:

1. Gastritis
2. MI (heart attack)
3. Stroke
4. Pneumonia

Answer: 2

Explanation: Classic MI symptom.

10. ECG used to diagnose:

1. Liver disease
2. Heart rhythm abnormalities
3. Kidney stones
4. TB

Answer: 2

Explanation: ECG detects heart electrical activity.

11. First drug in heart attack:

1. Paracetamol
2. Aspirin
3. Vitamin C
4. ORS

Answer: 2

Explanation: Aspirin prevents clot extension.

12. Most common site of peptic ulcer:

1. Stomach
2. Duodenum
3. Rectum
4. Esophagus

Answer: 2

Explanation: Duodenal ulcers more common.

13. Cause of peptic ulcer:

1. H. pylori infection
2. Vitamin C
3. Low protein intake
4. High fat

Answer: 1

Explanation: H. pylori + NSAIDs.

14. Best test for dehydration:

1. Weight
2. Skin turgor
3. Urine output
4. All

Answer: 4

Explanation: All indicators of dehydration.

15. Severe dehydration treatment:

1. ORS
2. IV fluids (Ringer lactate)
3. Only water
4. Antibiotics

Answer: 2

Explanation: RL is best for severe dehydration.

16. Diarrhea is defined as:

1. 1 loose stool
2. 3 or more loose stools/day
3. Constipation
4. Hard stools

Answer: 2

Explanation: Standard definition.

17. Most common cause of acute diarrhea in children:

1. Cholera
2. Rotavirus
3. HIV
4. Cancer

Answer: 2

Explanation: Rotavirus major cause.

18. Jaundice occurs due to increased:

1. Hemoglobin

2. RBC

3. Bilirubin

4. Calcium

Answer: 3

Explanation: Bilirubin increases in liver disease.

19. Hepatitis A spreads by:

1. Blood

2. Sexual contact

3. Feco–oral route

4. Air

Answer: 3

Explanation: Contaminated food/water.

20. Kidney failure leads to:

1. High urine output

2. Low urine output (oliguria)

3. Normal urine output

4. Anaemia only

Answer: 2

Explanation: Damaged kidneys reduce urine production.

21. Most common sign of UTI:

1. Fever
2. Burning urination
3. Vomiting
4. Headache

Answer: 2

Explanation: Dysuria = classic UTI symptom.

22. Nephrotic syndrome hallmark:

1. Low protein
2. High cholesterol
3. Edema
4. High potassium

Answer: 3

Explanation: Protein loss leads to edema.

23. Most common thyroid disorder:

1. Hypothyroidism
2. Hyperthyroidism
3. Thyroid cancer
4. Goiter

Answer: 1

Explanation: Hypothyroidism is common.

24. Symptom of hyperthyroidism:

1. Weight gain
2. Cold intolerance
3. Weight loss
4. Bradycardia

Answer: 3

Explanation: Increased metabolism.

25. Diabetes mellitus characterized by:

1. High insulin
2. Low blood sugar
3. High blood sugar
4. Low sodium

Answer: 3

Explanation: Impaired glucose metabolism.

26. Classic symptoms of diabetes:

1. Polyuria
2. Polydipsia
3. Polyphagia
4. All

Answer: 4

Explanation: Three P's.

27. Hypoglycemia means:

1. High BP
2. Low blood sugar
3. Low pulse
4. High pulse

Answer: 2

Explanation: Blood sugar <70 mg/dL.

28. First treatment for hypoglycemia:

1. Water
2. Sugar/glucose orally
3. Insulin
4. ORS

Answer: 2

Explanation: Quick glucose source.

29. Hyperglycemia treatment:

1. Glucose tablets
2. Insulin
3. ORS
4. Water only

Answer: 2

Explanation: Insulin lowers high sugar.

30. Edema occurs due to:

1. Low salt
2. High blood volume
3. Fluid retention
4. Low urine output

Answer: 3

Explanation: Excess fluid accumulates in tissues.

31. Hyponatremia means sodium level:

1. <135 mEq/L
2. 145 mEq/L
3. <100 mEq/L
4. 200 mEq/L

Answer: 1

Explanation: Below 135 = hyponatremia.

32. Hyperkalemia means potassium:

1. <3.5
2. 3.5–5
3. 5.5 mEq/L
4. 8

Answer: 3

Explanation: High K⁺ = dangerous for heart.

33. Main symptom of anemia:

1. Red eyes
2. Fatigue
3. High fever
4. Diarrhea

Answer: 2

Explanation: Due to low oxygen-carrying capacity.

34. Iron deficiency anemia type:

1. Macrocytic
2. Microcytic
3. Normocytic
4. None

Answer: 2

Explanation: Iron deficiency causes small RBCs.

35. Fever management includes:

1. Paracetamol
2. Tepid sponging
3. Fluids
4. All

Answer: 4

Explanation: Combined management reduces fever.

36. Most common cause of fever:

1. Infection
2. Cancer
3. Heart disease
4. Dehydration

Answer: 1

Explanation: Viral infections common.

37. Dengue warning sign:

1. Fever
2. Rash
3. Abdominal pain + persistent vomiting
4. Cough

Answer: 3

Explanation: Danger signs require hospital care.

38. Typhoid spreads by:

1. Mosquito
2. Contaminated food/water
3. Air
4. Blood

Answer: 2

Explanation: Caused by Salmonella typhi.

39. Malaria diagnosed best by:

1. Urine test
2. Peripheral blood smear
3. X-ray
4. MRI

Answer: 2

Explanation: PBF is gold standard.

40. Rabies symptom:

1. Fear of water
2. Cough
3. Fever only
4. Rash

Answer: 1

Explanation: Hydrophobia is classic.

41. HIV attacks:

1. RBC
2. CD4 T cells
3. Platelets
4. Nerves

Answer: 2

Explanation: CD4 depletion → immunodeficiency.

42. Sepsis means:

1. Local infection
2. Dangerously high infection spread
3. Low BP only
4. Fever only

Answer: 2

Explanation: Sepsis = life-threatening systemic infection.

43. Pain scale used commonly:

1. 1–5
2. 0–10 numeric scale
3. A–Z
4. 0–3

Answer: 2

Explanation: Numeric rating scale.

44. Normal urine output per day:

1. 200 ml
2. 500 ml
3. 800–2000 ml
4. 4000 ml

Answer: 3

Explanation: Normal adults: 1–2 L/day.

45. Oliguria means urine output less than:

1. 500 ml/day
2. 200 ml/day
3. 1000 ml/day
4. 1500 ml/day

Answer: 1

Explanation: <400–500 ml/day = oliguria.

46. Normal potassium level:

1. 1–2 mEq/L
2. 3.5–5 mEq/L
3. 6–8 mEq/L
4. 10 mEq/L

Answer: 2

Explanation: Normal physiological range.

47. Normal hemoglobin in adult female:

1. 8–10 g/dL
2. 10–11 g/dL
3. 12–16 g/dL
4. 16–20 g/dL

Answer: 3

Explanation: Normal female Hb 12–16 g/dL.

48. Most common cause of chronic kidney disease:

1. Infection
2. Hypertension & diabetes
3. Snake bite
4. Alcohol

Answer: 2

Explanation: HTN + diabetes major causes.

49. Edema in renal failure caused by:

1. Protein retention
2. Water & salt retention
3. Fat loss
4. Vitamin deficiency

Answer: 2

Explanation: Kidneys unable to excrete excess fluids.

50. Best investigation for kidney function:

1. Urine color
2. Serum creatinine
3. Blood pressure
4. Weight

Answer: 2

Explanation: Creatinine indicates renal function.

✓ **Maternal Health – 50 MCQs**

(Antenatal care, danger signs, labour, obstetric emergencies, PNC, FP)

1. Number of recommended ANC visits:

1. 2
2. 3
3. 4
4. 5

Answer: 3

Explanation: Minimum 4 ANC visits as per WHO (and India earlier; now 8 contacts WHO, but CHO exam uses 4 visits).

2. First ANC visit should be before:

1. 6 weeks
2. 12 weeks
3. 20 weeks
4. 30 weeks

Answer: 2

Explanation: First visit ideally before 12 weeks.

3. Two essential tetanus doses during pregnancy:

1. TT1 & TT2
2. TT3 & TT4
3. TT only once
4. TT 5 times

Answer: 1

Explanation: TT1 at first contact, TT2 after 4 weeks.

4. Normal weight gain during pregnancy:

1. 2 kg
2. 5 kg
3. 10–12 kg
4. 20 kg

Answer: 3

Explanation: Recommended weight gain = approx. 11 kg.

5. Physiological anemia of pregnancy due to:

1. RBC increase
2. Plasma volume increase
3. Nutrition deficiency
4. Bleeding

Answer: 2

Explanation: Plasma increases more than RBC → dilution.

6. Danger signs in pregnancy include all EXCEPT:

1. Vaginal bleeding
2. Severe headache
3. Swelling of feet
4. Increased appetite

Answer: 4

Explanation: Increased appetite is normal.

7. Pre-eclampsia defined by:

1. BP >120/80
2. BP >140/90 + proteinuria
3. BP >100/60
4. High fever

Answer: 2

Explanation: Hypertension with protein in urine.

8. Eclampsia means:

1. Hypertension only
2. Hypertension + convulsions
3. High fever
4. Shock

Answer: 2

Explanation: Seizures due to severe pre-eclampsia.

9. Drug of choice in eclampsia:

1. Diazepam
2. Paracetamol
3. Magnesium sulfate
4. Calcium gluconate

Answer: 3

Explanation: MgSO₄ controls convulsions.

10. Antidote for magnesium sulfate toxicity:

1. Vitamin K
2. Atropine
3. Calcium gluconate
4. Iron

Answer: 3

Explanation: Ca gluconate reverses toxicity.

11. Normal fetal heart rate:

1. 80–100/min
2. 100–140/min

3. 110–160/min
4. 160–200/min

Answer: 3

Explanation: FHR = 110–160/min.

12. Quickening means:

1. Fetal movement felt by mother
2. Fetal death
3. Fetal growth slowing
4. Uterus contraction

Answer: 1

Explanation: First fetal movement.

13. Chadwick sign indicates:

1. Bluish cervix in early pregnancy
2. High BP
3. Fetal death
4. Anaemia

Answer: 1

Explanation: Early sign of pregnancy.

14. Most common malpresentation:

1. Breech
2. Transverse
3. Shoulder
4. Face

Answer: 1

Explanation: Breech is most common abnormal presentation.

15. True labour pain feature:

1. Irregular
2. False pains stop with rest
3. Cause cervical dilation
4. Found only in primigravida

Answer: 3

Explanation: True labour causes cervical dilation.

16. First stage of labour ends with:

1. Delivery of baby
2. Full dilation of cervix (10 cm)
3. Delivery of placenta
4. Rupture of membranes

Answer: 2

Explanation: First stage = onset of contractions → full dilation.

17. Second stage of labour:

1. Dilatation
2. Delivery of baby
3. Placenta delivery
4. Recovery

Answer: 2

Explanation: Baby is delivered in second stage.

18. Third stage of labour involves:

1. Labour pain
2. Delivery of placenta
3. Breastfeeding
4. Recovery

Answer: 2

Explanation: Placenta expelled.

19. Average blood loss during normal delivery:

1. 100 ml
2. 200 ml
3. 500 ml
4. 1000 ml

Answer: 3

Explanation: >500 ml is PPH.

20. Uterotonic drug to prevent PPH:

1. Paracetamol
2. Misoprostol
3. ORS
4. Azithromycin

Answer: 2

Explanation: Misoprostol / oxytocin used.

21. Most common cause of PPH:

1. Trauma
2. Tone (uterine atony)
3. Tissue
4. Thrombin

Answer: 2

Explanation: Tone = uterine atony = 70–80% cases.

22. Signs of retained placenta:

1. Heavy bleeding
2. No placenta expelled
3. Uterine atony
4. All

Answer: 4

Explanation: All occur in retained placenta.

23. Best position for cord care:

1. Closed
2. Dry and open
3. Covered with cotton
4. Bandaged

Answer: 2

Explanation: Dry cord care prevents infection.

24. APGAR score assesses:

1. Growth
2. Newborn adjustment to extra-uterine life
3. Breastfeeding
4. Meconium

Answer: 2

Explanation: Score at 1 & 5 minutes.

25. APGAR components include all EXCEPT:

1. Appearance
2. Pulse

3. Grimace
4. Temperature

Answer: 4

Explanation: Temperature not included.

26. Best sign of fetal well-being in labour:

1. Maternal BP
2. Fetal heart rate
3. Labour pain
4. Maternal appetite

Answer: 2

Explanation: FHR indicates fetal oxygenation.

27. Meconium-stained liquor indicates:

1. Fetal distress
2. Good health
3. Prematurity
4. Dehydration

Answer: 1

Explanation: Indicates fetal distress.

28. Antenatal iron requirement:

1. 30 mg
2. 60 mg
3. 100 mg
4. 200 mg

Answer: 2

Explanation: 60 mg elemental iron daily.

29. IFA supplementation starts from:

1. 1st trimester
2. 2nd trimester
3. 3rd trimester
4. At delivery

Answer: 1

Explanation: Start early in pregnancy.

30. Folic acid prevents:

1. Heart defects
2. Spina bifida & neural tube defects
3. Cleft palate
4. Down syndrome

Answer: 2

Explanation: Folic acid prevents NTD.

31. Normal pregnancy BP should be:

1. $\leq 140/90$
2. 160/110
3. $< 100/60$
4. 200/100

Answer: 1

Explanation: Hypertension defined $> 140/90$.

32. Signs of obstructed labour:

1. Good progress
2. Severe abdominal pain
3. Bandl's ring
4. Foul smell

Answer: 3

Explanation: Bandl's ring = obstruction.

33. Most common female sterilization method:

1. Mini-lap
2. Laparoscopy
3. Hysterectomy
4. Condom

Answer: 2

Explanation: Laparoscopic tubal ligation widely used.

34. Male sterilization method:

1. IUCD
2. Vasectomy
3. Condom
4. OCP

Answer: 2

Explanation: Vasectomy cuts vas deferens.

35. Best spacing method for breastfeeding mother:

1. OCP
2. IUCD
3. LAM
4. Condom

Answer: 3

Explanation: LAM effective first 6 months.

36. IUCD complications include:

1. Bleeding
2. Pain

3. Expulsion

4. All

Answer: 4

Explanation: IUCD may cause all.

37. Copper-T effective for:

1. 1 year

2. 3 years

3. 10 years

4. Lifetime

Answer: 3

Explanation: Cu-T 380A lasts 10 years.

38. Emergency contraceptive pill effective within:

1. 24 hours

2. 72 hours

3. 7 days

4. 1 month

Answer: 2

Explanation: Best within 72 hours.

39. Medical abortion drugs:

1. Oxytocin
2. Mifepristone + Misoprostol
3. Paracetamol
4. Antibiotics

Answer: 2

Explanation: Used up to 9 weeks.

40. Postnatal visit recommended at:

1. 1 hour, 6 hours
2. 48 hours, 14 days, 6 weeks
3. 1 month only
4. 1 year

Answer: 2

Explanation: Standard PNC schedule.

41. Lochia rubra persists for:

1. 1 day
2. 3–4 days
3. 10 days
4. 40 days

Answer: 2

Explanation: Fresh red discharge initially.

42. Lochia alba appears at:

1. Day 1
2. Day 3
3. Day 10–14
4. After 1 month

Answer: 3

Explanation: Whitish discharge later.

43. Breastfeeding should start within:

1. 2 hours
2. 6 hours
3. 30 minutes of birth
4. Next day

Answer: 3

Explanation: Early initiation prevents hypothermia & promotes bonding.

44. Colostrum rich in:

1. Fat
2. Antibodies
3. Water
4. Iron

Answer: 2

Explanation: Contains IgA.

45. Exclusive breastfeeding duration:

1. 3 months
2. 4 months
3. 6 months
4. 12 months

Answer: 3

Explanation: WHO recommendation.

46. Most common cause of maternal mortality in India:

1. Sepsis
2. Hemorrhage
3. Anemia
4. Heart disease

Answer: 2

Explanation: PPH is major cause.

47. ECV done for:

1. Breech presentation
2. Placenta previa
3. IUFD
4. Twins

Answer: 1

Explanation: External cephalic version.

48. True conjugate cannot be measured clinically; instead we measure:

1. Diagonal conjugate
2. Intertrochanteric diameter
3. Pelvic outlet
4. Fetal head

Answer: 1

Explanation: Diagonal conjugate measured → estimate true conjugate.

49. Best indicator of labour progress:

1. Pain
2. Fetal movement
3. Cervical dilatation
4. Maternal BP

Answer: 3

Explanation: Dilatation shows labour progress.

50. Preterm labour defined as delivery before:

1. 20 weeks
2. 28 weeks

3. 37 weeks

4. 40 weeks

Answer: 3

Explanation: <37 weeks = preterm.

NURSING ALL ROUNDER.IN



CHILD HEALTH – 50 MCQs

(IMNCI, growth, immunization, newborn care, feeding, common illnesses)

1. Normal birth weight of a newborn:

1. 1.5–2 kg

2. 2–2.5 kg

3. 2.5–3.5 kg

4. 4 kg

Answer: 3

Explanation: Normal birth weight = 2.5–3.5 kg.

2. Low birth weight defined as:

1. <1000 g

2. <1500 g

3. <2000 g

4. <2500 g

Answer: 4

Explanation: LBW = less than 2.5 kg.

3. Very low birth weight:

1. <2500 g

2. <2000 g

3. <1500 g

4. <1000 g

Answer: 3

Explanation: VLBW <1500 g.

4. APGAR score is taken at:

1. 1 and 3 minutes

2. 1 and 5 minutes

3. 5 and 10 minutes

4. Only at birth

Answer: 2

Explanation: Standard APGAR at 1 & 5 minutes.

5. APGAR score of 7–10 means:

1. Severe distress
2. Moderate distress
3. Good condition
4. Needs resuscitation

Answer: 3

Explanation: APGAR 7–10 = normal newborn.

6. Kangaroo Mother Care (KMC) mainly for:

1. Preterm/LBW babies
2. Term babies
3. Sick adults
4. Only twins

Answer: 1

Explanation: KMC improves heat & breastfeeding in LBW.

7. First milk secreted by mother:

1. Transitional milk
2. Mature milk
3. Colostrum
4. Powder milk

Answer: 3

Explanation: Colostrum rich in IgA.

8. Complementary feeding starts at:

1. 3 months
2. 4 months
3. 6 months
4. 1 year

Answer: 3

Explanation: Start at 6 months.

9. Full immunization by 1 year includes:

1. BCG, OPV3, DPT3, HepB3, Measles
2. Only OPV
3. Only BCG
4. BCG + OPV only

Answer: 1

Explanation: Full primary schedule.

10. BCG given:

1. Intramuscular
2. Intradermal
3. Oral
4. Subcutaneous

Answer: 2

Explanation: ID injection left upper arm.

11. BCG prevents:

1. All TB
2. Severe childhood forms of TB
3. Only cough
4. Pneumonia

Answer: 2

Explanation: Prevents meningeal/miliary TB.

12. OPV contraindicated in:

1. Mild fever
2. Diarrhea
3. Immunocompromised child
4. Mild cold

Answer: 3

Explanation: IPV preferred for immunocompromised.

13. Measles vaccine given at:

1. 6 months
2. 9 months
3. 1 year
4. 5 years

Answer: 2

Explanation: First dose at 9 months.

14. Pentavalent vaccine protects against all EXCEPT:

1. Diphtheria
2. Pertussis
3. Tetanus
4. Measles

Answer: 4

Explanation: Measles separate vaccine.

15. Growth monitoring tool:

1. MUAC
2. WHO growth chart
3. X-ray
4. ECG

Answer: 2

Explanation: Growth chart tracks development.

16. Weight of baby doubles by:

1. 2 months
2. 3 months

3. 5 months

4. 1 year

Answer: 3

Explanation: Weight doubles by 5 months.

17. Weight triples by:

1. 6 months

2. 9 months

3. 1 year

4. 2 years

Answer: 3

Explanation: Triples by 1 year.

18. Length of baby at 1 year:

1. 50 cm

2. 65 cm

3. 75 cm

4. 100 cm

Answer: 3

Explanation: Average 75 cm at 1 yr.

19. Newborn reflex present at birth:

1. Moro reflex
2. Writing reflex
3. Drawing reflex
4. None

Answer: 1

Explanation: Moro present at birth, disappears by 5–6 months.

20. Signs of severe pneumonia per IMNCI:

1. Fast breathing only
2. Chest in-drawing
3. Runny nose
4. Cough only

Answer: 2

Explanation: Chest indrawing = severe pneumonia.

21. Fast breathing in infants (<2 months) defined as:

1. 40/min
2. 50/min
3. 60/min
4. 70/min

Answer: 3

Explanation: IMNCI cut-off = >60/min.

22. Best feeding for diarrhea:

1. Stop feeding
2. Breastfeeding + ORS
3. Water only
4. Sugar water

Answer: 2

Explanation: Continue feeding + give ORS.

23. ORS osmolarity (WHO):

1. 111
2. 245
3. 300
4. 350

Answer: 2

Explanation: WHO ORS = 245 mOsm/L.

24. Zinc dose in diarrhea:

1. 5 mg/day
2. 10 mg (infants), 20 mg (older children)

3. 50 mg/day
4. 100 mg/day

Answer: 2

Explanation: Zinc reduces severity/duration.

25. Vitamin A dose at 9 months:

1. 20,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 2 lakh IU

Answer: 3

Explanation: First mega dose = 1 lakh IU.

26. Severe dehydration sign:

1. Sunken eyes
2. Normal thirst
3. Normal tears
4. Good skin turgor

Answer: 1

Explanation: Sunken eyes, lethargy, poor turgor.

27. Treatment for severe dehydration:

1. ORS
2. IV Ringer lactate
3. Water only
4. Antibiotics

Answer: 2

Explanation: IV fluid required.

28. Pneumonia common organism:

1. TB
2. Streptococcus pneumoniae
3. Candida
4. Dengue virus

Answer: 2

Explanation: Most common.

29. Croup sign:

1. Barking cough
2. Whoop sound
3. Blood cough
4. Silent chest

Answer: 1

Explanation: Bark-like cough.

30. Whooping cough caused by:

1. Streptococcus
2. Bordetella pertussis
3. H. influenzae
4. TB

Answer: 2

Explanation: Pertussis bacteria.

31. Best sign of dehydration in infants:

1. BP
2. Skin turgor
3. Fontanelle sunken
4. Eye color

Answer: 3

Explanation: Sunken fontanelle important sign.

32. Ear infection (AOM) common symptom:

1. Ear pain
2. Back pain
3. Knee pain
4. Chest pain

Answer: 1

Explanation: Otalgia = main symptom.

33. IMNCI color coding for immediate referral:

1. Green
2. Yellow
3. Red
4. Blue

Answer: 3

Explanation: Red category = danger signs.

34. Neonatal sepsis sign:

1. Crying loudly
2. Poor feeding
3. Good activity
4. Active movement

Answer: 2

Explanation: Poor feeding, lethargy = major sign.

35. Newborn temperature danger sign:

1. 35.5°C
2. 36.5°C
3. 37°C
4. 37.5°C

Answer: 1

Explanation: Hypothermia $<36.5^{\circ}\text{C}$; $<35.5^{\circ}\text{C}$ severe.

36. Neonatal hypothermia prevention:

1. KMC
2. Radiant warmer
3. Warm room

4. All

Answer: 4

Explanation: Multiple measures needed.

37. Best method for newborn resuscitation:

1. Mouth-to-mouth
2. Bag and mask ventilation
3. CPR only
4. Oxygen alone

Answer: 2

Explanation: Bag-mask effective for newborns.

38. Breastfeeding frequency:

1. 1–2 times/day
2. 3–5 times/day

3. On demand (8–12 times/day)

4. Once daily

Answer: 3

Explanation: Frequent feeds recommended.

39. Severe acute malnutrition MUAC:

1. <11.5 cm

2. <12 cm

3. <13.5 cm

4. <14 cm

Answer: 1

Explanation: MUAC <11.5 cm = SAM.

40. Best method to assess fever in infants:

1. Rectal temperature

2. Oral temperature

3. Axillary temperature

4. Skin feel

Answer: 1

Explanation: Most accurate in infants.

41. Newborn eye care includes:

1. Antibiotic eye ointment
2. Kajal
3. Soap
4. Powder

Answer: 1

Explanation: Prevents ophthalmia neonatorum.

42. Newborn screening checks for:

1. Hypothyroidism
2. Hearing
3. Metabolic disorders
4. All

Answer: 4

Explanation: Newborn screening panel includes all.

43. Common cause of infant mortality:

1. Accidents
2. Diarrhea & pneumonia
3. Cancer
4. Fracture

Answer: 2

Explanation: Major killers under 5 years.

44. Rickets caused by:

1. Vitamin C deficiency
2. Vitamin D deficiency
3. Vitamin A deficiency
4. Iron deficiency

Answer: 2

Explanation: Causes bone deformities.

45. Iron supplementation starts at:

1. 6 months
2. 1 year
3. 5 years
4. 2 months

Answer: 1

Explanation: Iron from 6 months to prevent anemia.

46. Formula feeding risk:

1. Infection
2. Diarrhea
3. Malnutrition
4. All

Answer: 4

Explanation: Formula feeding → infection risk.

47. Cold chain maintained at:

1. -20°C
2. $2-8^{\circ}\text{C}$
3. $0-2^{\circ}\text{C}$
4. 20°C

Answer: 2

Explanation: All vaccines stored in ILR @ $2-8^{\circ}\text{C}$.

48. Pentavalent vaccine schedule:

1. 0, 6, 9 weeks
2. 6, 10, 14 weeks
3. 9, 12, 15 months
4. 1 year only

Answer: 2

Explanation: 3 doses at 6, 10, 14 weeks.

49. Measles rash starts from:

1. Legs
2. Chest
3. Behind ears & face
4. Arms

Answer: 3

Explanation: Starts behind ears → spreads downward.

50. IMNCI approach emphasizes:

1. Single disease treatment
2. Integrated management of multiple symptoms
3. Adult care
4. Only nutrition

Answer: 2

Explanation: IMNCI integrates preventive + curative care.

NURSING ALL ROUNDER.IN



**COMMUNICABLE & NON-COMMUNICABLE
DISEASES – 50 MCQs**

1. Mode of transmission of measles:

1. Airborne
2. Vector-borne
3. Water-borne

4. Sexual

Answer: 1

Explanation: Measles spreads through airborne droplets.

2. Chickenpox incubation period:

1. 1–3 days

2. 4–7 days

3. 10–21 days

4. 30 days

Answer: 3

Explanation: Usually around 14 days.

3. Dengue spreads through:

1. Anopheles

2. Aedes aegypti

3. Culex

4. Sandfly

Answer: 2

Explanation: Aedes mosquito bites during day.

4. Malaria caused by:

1. Virus

2. Plasmodium parasite

3. Bacteria

4. Fungus

Answer: 2

Explanation: Plasmodium vivax/falciparum.

5. Most severe malaria species:

1. P. vivax

2. P. malariae

3. P. falciparum

4. P. ovale

Answer: 3

Explanation: Falciparum causes cerebral malaria.

6. TB mainly spreads by:

1. Water

2. Food

3. Airborne droplets

4. Vector

Answer: 3

Explanation: Mycobacterium tuberculosis airborne.

7. Leprosy caused by:

1. Virus
2. Mycobacterium leprae
3. Fungus
4. Parasite

Answer: 2

Explanation: Bacterial chronic disease.

8. HIV mainly spreads by:

1. Mosquito
2. Air
3. Sexual contact, blood, mother-to-child
4. Water

Answer: 3

Explanation: HIV spreads via body fluids.

9. AIDS stands for:

1. Acute Immune Disease Syndrome
2. Acquired Immunodeficiency Syndrome
3. Artificial Immunity Development Syndrome
4. None

Answer: 2

Explanation: Final stage of HIV infection.

10. Hepatitis A spreads by:

1. Blood
2. Air
3. Feco-oral
4. Sexual

Answer: 3

Explanation: Contaminated food/water.

11. Hepatitis B spreads by:

1. Water
2. Air
3. Blood & sexual contact
4. Soil

Answer: 3

Explanation: HBV transmitted by blood/body fluids.

12. Rabies caused by:

1. Virus
2. Bacteria
3. Parasite
4. Fungus

Answer: 1

Explanation: Rabies virus affects CNS.

13. Cholera spreads by:

1. Mosquito
2. Food & water contamination
3. Air
4. Skin contact

Answer: 2

Explanation: *Vibrio cholerae* → watery diarrhea.

14. Typhoid caused by:

1. *Salmonella typhi*
2. *E. coli*
3. *Streptococcus*
4. Hepatitis A

Answer: 1

Explanation: Water-borne bacterial infection.

15. Influenza main mode of spread:

1. Airborne droplets
2. Water
3. Soil
4. Mosquito

Answer: 1

Explanation: Highly contagious via air.

16. Vector of kala-azar:

1. Anopheles
2. Aedes
3. Culex
4. Sandfly

Answer: 4

Explanation: Spread by phlebotomus sandfly.

17. Most common symptom of dengue:

1. High fever
2. Chest pain
3. Diarrhea
4. Cough

Answer: 1

Explanation: Sudden high fever + body ache.

18. Dengue warning signs:

1. Abdominal pain
2. Vomiting

3. Bleeding

4. All

Answer: 4

Explanation: Requires immediate care.

19. Filariasis spreads through:

1. Culex mosquito

2. Aedes

3. Sandfly

4. Tick

Answer: 1

Explanation: Wuchereria bancrofti.

20. Non-communicable diseases include:

1. TB

2. Malaria

3. Diabetes

4. Measles

Answer: 3

Explanation: NCD = chronic lifestyle diseases.

21. Most common NCD in India:

1. HIV
2. Diabetes
3. TB

4. Cholera

Answer: 2

Explanation: India = “diabetes capital.”

22. Hypertension called:

1. Silent killer
2. Loud disease
3. Genetic flu
4. None

Answer: 1

Explanation: Often asymptomatic.

23. Normal BP:

1. <120/80
2. <140/90
3. <150/100
4. <160/110

Answer: 1

Explanation: Ideal BP = <120/80.

24. Diabetes diagnosed when fasting glucose:

1. <100 mg/dL
2. 100–125 mg/dL
3. ≥ 126 mg/dL
4. ≥ 200 mg/dL

Answer: 3

Explanation: FBS ≥ 126 mg/dL = diabetes.

25. HbA1c diagnostic for diabetes:

1. 3%
2. 4%
3. 6.5%
4. 10%

Answer: 3

Explanation: $\geq 6.5\%$ = diabetes.

26. Major risk factor for heart disease:

1. Smoking
2. Long sleep
3. Walking
4. Low salt

Answer: 1

Explanation: Smoking damages blood vessels.

27. Stroke occurs due to:

1. Liver infection
2. Brain ischemia or hemorrhage
3. Kidney failure
4. Cancer

Answer: 2

Explanation: Stroke = brain damage.

28. COPD caused mainly by:

1. Smoking
2. Alcohol
3. High fat diet
4. Cold water

Answer: 1

Explanation: Chronic smokers at risk.

29. Symptoms of COPD:

1. Chronic cough
2. Sputum

3. Breathlessness

4. All

Answer: 4

Explanation: Classic triad of COPD.

30. Common cause of cancer:

1. Smoking

2. Radiation

3. Chemicals

4. All

Answer: 4

Explanation: Multi-factorial.

31. Most common cancer in women in India:

1. Lung

2. Breast

3. Cervical

4. Liver

Answer: 2

Explanation: Breast cancer most common.

32. Common cancer in Indian women (second):

1. Cervical cancer

2. Oral cancer

3. Liver cancer

4. Stomach cancer

Answer: 1

Explanation: Cervical cancer is #2.

33. PAP smear screens for:

1. Breast cancer

2. Cervical cancer

3. Lung cancer

4. Liver cancer

Answer: 2

Explanation: Simple early detection tool.

34. Obesity defined by BMI:

1. 18.5

2. 23

3. 25

4. 30

Answer: 4

Explanation: BMI ≥ 30 = obesity.

35. Anemia most commonly caused by deficiency of:

1. Vitamin A
2. Iron
3. Calcium
4. Zinc

Answer: 2

Explanation: Iron deficiency anemia most common.

36. Goiter caused by deficiency of:

1. Iron
2. Iodine
3. Vitamin C
4. Magnesium

Answer: 2

Explanation: Iodine is essential for thyroid hormone.

37. Rickets caused by deficiency of:

1. Vitamin B12
2. Vitamin D

3. Vitamin A

4. Iron

Answer: 2

Explanation: Soft bones in children.

38. Scurvy caused by deficiency of:

1. Vitamin C

2. Vitamin B6

3. Vitamin A

4. Vitamin D

Answer: 1

Explanation: Causes bleeding gums.

39. Beriberi caused by:

1. Vitamin B12 deficiency

2. Thiamine (B1) deficiency

3. Vitamin D deficiency

4. Vitamin C deficiency

Answer: 2

Explanation: Beriberi = thiamine deficiency.

40. Pellagra caused by deficiency of:

1. Vitamin A
2. Niacin (B3)
3. Vitamin K
4. Iron

Answer: 2

Explanation: 4 D's – dermatitis, diarrhea, dementia, death.

41. Night blindness caused by:

1. Vitamin C deficiency
2. Vitamin A deficiency
3. Vitamin D deficiency
4. Iron deficiency

Answer: 2

Explanation: First sign of Vit A deficiency.

42. Anaphylaxis is a:

1. Mild allergy
2. Severe allergic reaction
3. Viral infection
4. Skin disease

Answer: 2

Explanation: Life-threatening emergency.

43. First drug for anaphylaxis:

1. Hydrocortisone
2. Paracetamol
3. Adrenaline
4. ORS

Answer: 3

Explanation: IM adrenaline is lifesaving.

44. Obesity leads to:

1. Diabetes
2. Hypertension
3. Heart disease
4. All

Answer: 4

Explanation: Obesity increases NCD risk.

45. Smoking increases risk of:

1. Cancer
2. COPD
3. Heart disease
4. All

Answer: 4

Explanation: Smoking affects all major systems.

46. Alcohol chronic use damages:

1. Liver
2. Heart
3. Nervous system
4. All

Answer: 4

Explanation: Alcohol impacts multiple organs.

47. Best way to prevent communicable diseases:

1. Antibiotics
2. Vaccination
3. Fruits
4. Exercise

Answer: 2

Explanation: Vaccines prevent major diseases.

48. Handwashing prevents:

1. Diarrhea
2. Pneumonia
3. COVID-like diseases
4. All

Answer: 4

Explanation: Hand hygiene major prevention tool.

49. Control of NCDs depends on:

1. Lifestyle modification
2. Healthy diet
3. Exercise
4. All

Answer: 4

Explanation: Prevention-focused.

50. Leading cause of death in India:

1. Communicable diseases
2. NCDs
3. Accidents
4. Cancer only

Answer: 2

Explanation: NCDs (heart disease, diabetes, stroke) are the major cause.



PHARMACOLOGY – 50 MCQs

(Routes, drug action, safety, common community-level drugs)

1. Study of drugs is called:

1. Pathology
2. Pharmacology
3. Microbiology
4. Anatomy

Answer: 2

Explanation: Pharmacology = study of drugs & their effects.

2. ORS stands for:

1. Oral Rehydration Solution
2. Oral Remedy Solution
3. Only Rehydration Salt
4. Osmotic Recovery Solution

Answer: 1

Explanation: ORS used to treat dehydration.

3. Osmolarity of WHO ORS:

1. 90 mOsm/L
2. 200 mOsm/L
3. 245 mOsm/L

4. 400 mOsm/L

Answer: 3

Explanation: Reduced osmolarity ORS = 245 mOsm/L.

4. Zinc supplementation in diarrhea:

1. Only for adults
2. 10 mg (<6 months), 20 mg (>6 months)
3. 50 mg daily
4. Not recommended

Answer: 2

Explanation: Zinc reduces duration & severity.

5. IFA tablet for pregnant women contains:

1. 20 mg iron
2. 30 mg iron
3. 60 mg iron + 500 mcg folic acid
4. 100 mg iron

Answer: 3

Explanation: Standard dose under NIPI.

6. Paracetamol used for:

1. Fever & pain

2. Hypertension
3. Diabetes
4. Diarrhea

Answer: 1

Explanation: Common antipyretic + analgesic.

7. Maximum daily dose of paracetamol (adult):

1. 1 g
2. 2 g
3. 4 g
4. 8 g

Answer: 3

Explanation: >4 g/day causes liver toxicity.

8. Drug used in anaphylaxis:

1. Paracetamol
2. Aspirin
3. Adrenaline
4. Zinc

Answer: 3

Explanation: IM adrenaline is life-saving.

9. Route of adrenaline administration in anaphylaxis:

1. Oral
2. IV
3. IM (intramuscular)
4. Subcutaneous

Answer: 3

Explanation: IM thigh is preferred.

10. Oral drugs absorbed mainly in:

1. Mouth
2. Stomach
3. Small intestine
4. Large intestine

Answer: 3

Explanation: Major absorption in small intestine.

11. Drug contraindicated in children with viral infections:

1. Paracetamol
2. Ibuprofen
3. Aspirin
4. ORS

Answer: 3

Explanation: Aspirin may cause Reye's syndrome.

12. First-line antibiotic for pneumonia in children (IMNCI):

1. Ceftriaxone
2. Cotrimoxazole
3. Penicillin
4. Metronidazole

Answer: 2

Explanation: Cotrimoxazole used at community level.

13. First-line drug for TB:

1. Rifampicin
2. Aspirin
3. Zinc
4. ORS

Answer: 1

Explanation: Rifampicin major TB drug.

14. HRZE is used for:

1. Diabetes
2. TB first-line therapy
3. Hypertension
4. Kidney failure

Answer: 2

Explanation: HRZE = 4-drug intensive phase.

15. Metformin used for:

1. Hypertension
2. Diabetes mellitus
3. Sore throat
4. Asthma

Answer: 2

Explanation: First-line oral drug for diabetes.

16. ORS should be used within:

1. 6 hours
2. 12 hours
3. 24 hours
4. 48 hours

Answer: 3

Explanation: ORS solution valid for 24 hours.

17. Iron absorption increased by:

1. Tea
2. Coffee
3. Vitamin C
4. Milk

Answer: 3

Explanation: Vitamin C helps absorption.

18. Tetracycline should NOT be given with:

1. Water
2. Iron or milk
3. Bread
4. Fruits

Answer: 2

Explanation: Milk reduces absorption.

19. Drug of choice for severe malaria:

1. Paracetamol
2. Artemisinin combination therapy (ACT)
3. Zinc
4. Aspirin

Answer: 2

Explanation: ACT recommended by NVBDCP.

20. Albendazole used for:

1. Fever
2. De-worming

3. Diabetes
4. Hypertension

Answer: 2

Explanation: Used in National Deworming Day.

21. Dose of albendazole for children (>2 years):

1. 100 mg
2. 200 mg
3. 400 mg
4. 50 mg

Answer: 3

Explanation: Standard dose 400 mg.

22. ORS preparation instruction:

1. Add packet to 500 ml water
2. Add packet to 1 litre clean water
3. Add packet to 2 litres
4. Add packet to any amount of water

Answer: 2

Explanation: 1 packet = 1 litre.

23. Common side effect of iron tablets:

1. White stools
2. Green stools
3. Black stools
4. Red stools

Answer: 3

Explanation: Dark stools are normal.

24. Drug used for hypertension:

1. ORS
2. Amlodipine
3. Iron
4. Zinc

Answer: 2

Explanation: Amlodipine is calcium channel blocker.

25. Oral contraceptive pills contain:

1. Estrogen + progesterone
2. Testosterone
3. Calcitonin
4. Vitamin D

Answer: 1

Explanation: Combined OCPs.

26. Emergency contraceptive pill contains:

1. Mifepristone
2. Levonorgestrel
3. Zinc
4. Iron

Answer: 2

Explanation: Levonorgestrel within 72 hours.

27. Drug given for eclampsia:

1. Calcium
2. Magnesium sulfate
3. ORS
4. Aspirin

Answer: 2

Explanation: MgSO_4 prevents seizures.

28. Antidote for MgSO_4 toxicity:

1. Iron
2. Calcium gluconate
3. ORS
4. Antacid

Answer: 2

Explanation: Calcium gluconate reverses Mg toxicity.

29. Vitamin A mega dose at 9 months:

1. 20,000 IU
2. 50,000 IU
3. 1 lakh IU
4. 3 lakh IU

Answer: 3

Explanation: National Vit A Programme.

30. PPI drug used for acidity:

1. Omeprazole
2. Metformin
3. Paracetamol
4. ORS

Answer: 1

Explanation: Omeprazole reduces acid.

31. IV fluids for severe dehydration:

1. NS or Ringer lactate
2. Milk
3. Tea
4. Coffee

Answer: 1

Explanation: RL/NS restore volume.

32. Drug of choice for anaphylaxis:

1. Hydrocortisone
2. Adrenaline IM
3. IV fluids only
4. Zinc

Answer: 2

Explanation: Adrenaline is first-line.

33. Vaccine containing live attenuated virus:

1. IPV
2. OPV
3. TT
4. Hepatitis B

Answer: 2

Explanation: OPV is live attenuated.

34. Correct route for BCG:

1. IM
2. IV

3. ID
4. Oral

Answer: 3

Explanation: BCG given intradermally.

35. Drug causing constipation commonly:

1. Iron supplements
2. Vitamin C
3. Paracetamol
4. ORS

Answer: 1

Explanation: Iron often causes constipation.

36. ORS should be discarded after:

1. 6 hours
2. 12 hours
3. 24 hours
4. 48 hours

Answer: 3

Explanation: After 24 hours, risk of bacterial growth.

37. Antibiotic for UTI commonly:

1. Metronidazole
2. Ciprofloxacin
3. Albendazole
4. Zinc

Answer: 2

Explanation: Ciprofloxacin is common.

38. Insulin administered by:

1. Oral route
2. IM
3. Subcutaneous route
4. Rectal

Answer: 3

Explanation: SC injection required.

39. Hypoglycemia treated by:

1. ORS
2. Sugar/glucose
3. Insulin
4. Antibiotics

Answer: 2

Explanation: Low sugar corrected by glucose.

40. Drug for asthma attack:

1. Paracetamol
2. Salbutamol
3. Metformin
4. Iron

Answer: 2

Explanation: Bronchodilator relieves spasm.

41. Vitamin C rich food:

1. Lemon
2. Rice
3. Milk
4. Meat

Answer: 1

Explanation: Citrus fruits rich in vitamin C.

42. Folic acid prevents:

1. Neural tube defects
2. Asthma
3. Anemia only
4. Hemorrhage

Answer: 1

Explanation: Essential in early pregnancy.

43. Correct storage of vaccines:

1. 0–2°C
2. 2–8°C
3. 10–20°C
4. 20–40°C

Answer: 2

Explanation: Maintain cold chain.

44. Antibiotic misuse leads to:

1. Resistance
2. Cure
3. Weight loss
4. Vitamin increase

Answer: 1

Explanation: Overuse → resistant bacteria.

45. Drug used for hypertension in pregnancy:

1. Amlodipine
2. Labetalol
3. Enalapril
4. Ramipril

Answer: 2

Explanation: Labetalol safe in pregnancy.

46. ORS contains all EXCEPT:

1. Sodium
2. Potassium
3. Zinc
4. Glucose

Answer: 3

Explanation: Zinc is separate supplement.

47. Drug for fever in children:

1. Aspirin
2. Paracetamol
3. Ibuprofen only
4. Steroids

Answer: 2

Explanation: Paracetamol safest.

48. Antibiotic for diarrhea caused by bacteria:

1. ORS
2. Zinc

3. Ciprofloxacin / azithromycin

4. Paracetamol

Answer: 3

Explanation: Used for dysentery.

49. Drug causing hypoglycemia:

1. Metformin

2. Insulin

3. ORS

4. Zinc

Answer: 2

Explanation: Too much insulin lowers sugar.

50. Albendazole acts against:

1. Worm infestation

2. Viral infection

3. Bacterial infection

4. Fungal infection

Answer: 1

Explanation: Broad-spectrum anthelmintic.



ANATOMY & PHYSIOLOGY – 50 MCQs

1. Smallest unit of the body:

1. Tissue
2. Cell
3. Organ
4. System

Answer: 2

Explanation: Cell is the basic structural & functional unit.

2. Largest organ in the human body:

1. Heart
2. Brain
3. Skin
4. Liver

Answer: 3

Explanation: Skin is the largest organ.

3. Basic function of RBCs:

1. Immunity
2. Carry oxygen

3. Fat digestion
4. Hormone production

Answer: 2

Explanation: Hemoglobin carries oxygen.

4. Normal lifespan of an RBC:

1. 20 days
2. 60 days
3. 120 days
4. 200 days

Answer: 3

Explanation: RBC lives for 120 days.

5. WBCs function:

1. Digestion
2. Immunity
3. Oxygen transport
4. Vision

Answer: 2

Explanation: WBCs fight infection.

6. Largest artery:

1. Pulmonary artery
2. Aorta
3. Carotid artery
4. Radial artery

Answer: 2

Explanation: Aorta carries blood from left ventricle.

7. Heart located in:

1. Cranial cavity
2. Thoracic cavity
3. Pelvic cavity
4. Spinal cavity

Answer: 2

Explanation: Between the lungs.

8. Pacemaker of the heart:

1. AV node
2. SA node
3. Purkinje fibers
4. Bundle of His

Answer: 2

Explanation: SA node initiates heartbeat.

9. Normal heart rate:

1. 20–40/min
2. 40–60/min
3. 60–100/min
4. 150/min

Answer: 3

Explanation: Adult HR = 60–100 bpm.

10. Which organ detoxifies chemicals?

1. Kidney
2. Liver
3. Lung
4. Heart

Answer: 2

Explanation: Liver detoxifies & metabolizes drugs.

11. Largest gland in the body:

1. Thyroid
2. Pancreas
3. Liver
4. Pituitary

Answer: 3

Explanation: Liver is the largest gland.

12. Functional unit of kidney:

1. Neuron
2. Nephron
3. Alveoli
4. RBC

Answer: 2

Explanation: Nephron filters blood.

13. Normal urine output per day:

1. 200 ml
2. 500 ml
3. 800–2000 ml
4. 5000 ml

Answer: 3

Explanation: Kidneys produce 1–2 liters/day.

14. Part of brain that controls balance:

1. Cerebrum
2. Cerebellum
3. Medulla
4. Hypothalamus

Answer: 2

Explanation: Cerebellum controls posture & coordination.

15. Respiratory center located in:

1. Cerebrum
2. Medulla oblongata
3. Cerebellum
4. Thalamus

Answer: 2

Explanation: Medulla controls respiration.

16. Normal respiratory rate in adults:

1. 8–10/min
2. 12–20/min
3. 20–30/min
4. 30–40/min

Answer: 2

Explanation: Normal RR 12–20.

17. Gas exchange occurs in:

1. Bronchi
2. Alveoli

3. Trachea

4. Larynx

Answer: 2

Explanation: Alveoli = functional unit of lungs.

18. Enzyme that digests starch:

1. Lipase

2. Pepsin

3. Amylase

4. Trypsin

Answer: 3

Explanation: Amylase digests carbohydrates.

19. Protein digestion begins in:

1. Mouth

2. Stomach

3. Small intestine

4. Large intestine

Answer: 2

Explanation: Pepsin acts in stomach.

20. Absorption of nutrients occurs mainly in:

1. Stomach
2. Small intestine
3. Large intestine
4. Esophagus

Answer: 2

Explanation: Villi absorb nutrients.

21. Hormone insulin produced by:

1. Thyroid
2. Pancreas (beta cells)
3. Adrenal gland
4. Pituitary

Answer: 2

Explanation: Beta cells of islets.

22. Thyroid gland produces:

1. Insulin
2. Thyroxine
3. Cortisol
4. Testosterone

Answer: 2

Explanation: Controls metabolism.

23. Adrenal gland located:

1. Brain
2. On top of kidneys
3. Neck
4. Heart

Answer: 2

Explanation: Produces adrenaline & cortisol.

24. Bone-forming cells:

1. Osteoclasts
2. Osteoblasts
3. Osteocytes
4. Neurons

Answer: 2

Explanation: Osteoblasts build bone.

25. Smallest bone in human body:

1. Femur
2. Stapes
3. Radius
4. Ulna

Answer: 2

Explanation: Stapes in the ear.

26. Largest bone:

1. Tibia
2. Humerus
3. Femur
4. Pelvis

Answer: 3

Explanation: Femur = longest & strongest.

27. Primary function of platelets:

1. Immunity
2. Blood clotting
3. Digestion
4. Respiration

Answer: 2

Explanation: Platelets help hemostasis.

28. Normal hemoglobin for women:

1. 6–8 g/dL
2. 10–11 g/dL
3. 12–16 g/dL
4. 18–20 g/dL

Answer: 3

Explanation: Normal female Hb = 12–16.

29. Normal blood pH:

1. 6.5–6.9
2. 7.0–7.2
3. 7.35–7.45
4. 8.0

Answer: 3

Explanation: Human blood slightly alkaline.

30. Largest part of the brain:

1. Cerebrum
2. Cerebellum
3. Pons
4. Medulla

Answer: 1

Explanation: Controls thinking & voluntary actions.

31. Organ responsible for filtering toxins:

1. Lungs
2. Kidney

3. Liver

4. Heart

Answer: 3

Explanation: Liver detoxifies.

32. Which vitamin is needed for clotting?

1. Vitamin A

2. Vitamin B

3. Vitamin C

4. Vitamin K

Answer: 4

Explanation: Vitamin K essential for clotting.

33. Which organ produces bile?

1. Pancreas

2. Liver

3. Gallbladder

4. Spleen

Answer: 2

Explanation: Bile produced by liver, stored in gallbladder.

34. Basic functional unit of nervous system:

1. RBC
2. Neuron
3. Bone
4. Gland

Answer: 2

Explanation: Neuron conducts nerve impulses.

35. Lymph carries:

1. Oxygen
2. Fat
3. Digested food
4. Hormones only

Answer: 2

Explanation: Lymph transports fat from intestine.

36. Voice is produced in:

1. Pharynx
2. Larynx
3. Esophagus
4. Trachea

Answer: 2

Explanation: Larynx = voice box.

37. Which part of eye regulates light?

1. Cornea
2. Iris
3. Lens
4. Retina

Answer: 2

Explanation: Iris controls pupil size.

38. Retina contains:

1. Rods & cones
2. Cartilage
3. Bone
4. Nerves only

Answer: 1

Explanation: Rods = night vision; cones = color.

39. Organ of hearing:

1. Cochlea
2. Iris
3. Retina
4. Larynx

Answer: 1

Explanation: Cochlea converts sound waves.

40. Which blood group is universal donor?

1. A
2. B
3. O negative
4. AB positive

Answer: 3

Explanation: O– is universal donor.

41. Universal recipient:

1. A+
2. B+
3. O+
4. AB+

Answer: 4

Explanation: AB+ can receive all types.

42. Normal blood volume in adults:

1. 1 liter
2. 2–3 liters
3. 4–6 liters
4. 10 liters

Answer: 3

Explanation: Average 5 liters.

43. Blood pressure measured in:

1. cm
2. mmHg
3. g/dL
4. mg/dL

Answer: 2

Explanation: Millimeters of mercury.

44. Spinal cord ends at:

1. L1–L2
2. L3–L4
3. S1–S2
4. T1–T2

Answer: 1

Explanation: Adults spinal cord ends at L1–L2.

45. Main digestive organ:

1. Stomach
2. Small intestine

3. Large intestine
4. Rectum

Answer: 2

Explanation: Most digestion + absorption in small intestine.

46. Kidney regulates:

1. Blood pressure
2. Acid-base balance
3. Fluid balance
4. All

Answer: 4

Explanation: Kidney essential for homeostasis.

47. Oxygen carried mainly by:

1. Plasma
2. Hemoglobin
3. Platelets
4. WBC

Answer: 2

Explanation: 97% oxygen carried by Hb.

48. Normal respiratory movement controlled by:

1. CO₂ level
2. O₂ level
3. Nitrogen
4. Protein

Answer: 1

Explanation: CO₂ is primary respiratory stimulus.

49. Hormone for uterine contraction:

1. Insulin
2. Oxytocin
3. Thyroxine
4. Cortisol

Answer: 2

Explanation: Oxytocin causes labor contractions.

50. Hormone regulating sleep:

1. Melatonin
2. Serotonin
3. Insulin
4. Cortisol

Answer: 1

Explanation: Melatonin secreted by pineal gland.



NUTRITION & DIETETICS – 50 MCQs

1. Main source of energy in diet:

1. Protein
2. Fat
3. Carbohydrates
4. Vitamins

Answer: 3

Explanation: Carbohydrates are the primary energy source.

2. 1 gram carbohydrate provides:

1. 2 kcal
2. 4 kcal
3. 7 kcal
4. 9 kcal

Answer: 2

Explanation: Standard value = 4 kcal/g.

3. 1 gram fat provides:

1. 4 kcal

2. 5 kcal
3. 7 kcal
4. 9 kcal

Answer: 4

Explanation: Fats → highest energy.

4. 1 gram protein provides:

1. 4 kcal
2. 7 kcal
3. 9 kcal
4. 2 kcal

Answer: 1

Explanation: Proteins = 4 kcal/g.

5. Richest source of protein:

1. Rice
2. Milk
3. Egg
4. Sugar

Answer: 3

Explanation: Egg = complete protein.

6. Top dietary source of Vitamin A:

1. Carrot
2. Rice
3. Wheat
4. Potato

Answer: 1

Explanation: Carrot is rich in beta-carotene.

7. Vitamin A deficiency causes:

1. Rickets
2. Night blindness
3. Goiter
4. Scurvy

Answer: 2

Explanation: Early sign = night blindness.

8. Vitamin D deficiency leads to:

1. Rickets
2. Scurvy
3. Beriberi
4. Pellagra

Answer: 1

Explanation: Soft/bowed bones in children.

9. Vitamin C deficiency leads to:

1. Rickets
2. Scurvy
3. Goiter
4. Night blindness

Answer: 2

Explanation: Causes bleeding gums.

10. Vitamin K needed for:

1. Eyesight
2. Immunity
3. Blood clotting
4. Digestion

Answer: 3

Explanation: Essential for coagulation.

11. Good source of Vitamin C:

1. Milk
2. Lemon
3. Oil
4. Sugar

Answer: 2

Explanation: Citrus fruits highest in Vitamin C.

12. Iron deficiency causes:

1. Night blindness
2. Anemia
3. Goiter
4. Rickets

Answer: 2

Explanation: Iron needed for RBC production.

13. Best food for iron:

1. Rice
2. Green leafy vegetables
3. Coconut
4. Sugar

Answer: 2

Explanation: Palak, methi etc. are iron-rich.

14. Enhances iron absorption:

1. Tea
2. Coffee
3. Vitamin C
4. Milk

Answer: 3

Explanation: Vitamin C increases absorption.

15. Iodine deficiency leads to:

1. Anemia
2. Goiter
3. Scurvy
4. Rickets

Answer: 2

Explanation: Enlarged thyroid due to low iodine.

16. Best source of iodine:

1. Fruits
2. Iodized salt
3. Water
4. Meat

Answer: 2

Explanation: Mandatory iodization program.

17. Marasmus is due to:

1. Only protein deficiency
2. Only calorie deficiency

3. Severe calorie deficiency
4. Vitamin deficiency

Answer: 3

Explanation: Marasmus = energy deficiency.

18. Kwashiorkor due to:

1. Protein deficiency
2. Vitamin D deficiency
3. Excess fat
4. Low iron

Answer: 1

Explanation: Protein malnutrition → edema.

19. Severe acute malnutrition MUAC cutoff:

1. <14 cm
2. <13 cm
3. <12 cm
4. <11.5 cm

Answer: 4

Explanation: MUAC <11.5 cm = SAM.

20. BMI formula:

1. Weight $\times$ height
2. Weight/height²
3. Height/weight
4. Weight – height

Answer: 2

Explanation: BMI = weight (kg)/height (m²).

21. Normal BMI range:

1. 10–15
2. 18.5–24.9
3. 25–35
4. 35

Answer: 2

Explanation: Healthy BMI range.

22. Obesity BMI:

1. 23
2. 25
3. 30
4. 40

Answer: 3

Explanation: BMI >30 = obese.

23. Breast milk contains:

1. Antibodies
2. Water
3. Fat
4. All

Answer: 4

Explanation: Complete nutrition + IgA.

24. Colostrum rich in:

1. Fat
2. Antibodies
3. Protein
4. All

Answer: 4

Explanation: Thick, yellow, highly nutritious.

25. Exclusive breastfeeding duration:

1. 3 months
2. 4 months

3. 6 months

4. 12 months

Answer: 3

Explanation: WHO recommends 6 months.

26. Complementary feeding starts at:

1. 2 months

2. 4 months

3. 6 months

4. 1 year

Answer: 3

Explanation: Start solids at 6 months.

27. Best first complementary food:

1. Honey

2. Cow's milk

3. Mashed home food (khichdi, dal)

4. Biscuits

Answer: 3

Explanation: No honey before 1 year.

28. ICDS stands for:

1. Indian Child Disease Scheme
2. Integrated Child Development Services
3. Infant Child Dependency Services
4. Integrated Clinic Delivery System

Answer: 2

Explanation: Covers children <6 years.

29. Anganwadi worker provides:

1. Vaccination
2. Supplementary nutrition
3. Medical surgery
4. Nursing care

Answer: 2

Explanation: Key role in ICDS.

30. Mid-day meal program targets:

1. Adults
2. Pregnant women
3. School children
4. Elderly

Answer: 3

Explanation: Improves child nutrition.

31. Protein-energy malnutrition commonly seen in:

1. Elderly
2. Infants & toddlers
3. Adults
4. Pregnant women only

Answer: 2

Explanation: Due to poor diet and infections.

32. Vitamin B12 found mainly in:

1. Meat
2. Fruits
3. Vegetables
4. Rice

Answer: 1

Explanation: B12 in animal foods.

33. RDA means:

1. Routine Diet Allowance
2. Recommended Dietary Allowance
3. Regular Daily Allowance
4. Registered Diet Advice

Answer: 2

Explanation: Standard recommended intake.

34. Pellagra caused by deficiency of:

1. Vitamin A
2. Niacin (B3)
3. Iron
4. Vitamin K

Answer: 2

Explanation: 4 D's: Dermatitis, diarrhea, dementia, death.

35. Thiamine deficiency causes:

1. Beriberi
2. Night blindness
3. Rickets
4. Scurvy

Answer: 1

Explanation: Deficiency of Vitamin B1.

36. Riboflavin deficiency causes:

1. Cheilosis
2. Goiter
3. Obesity
4. Diabetes

Answer: 1

Explanation: Cracks at corners of mouth.

37. Vitamin E important for:

1. Heart
2. Immunity
3. Reproduction & antioxidant
4. Bone

Answer: 3

Explanation: Fat-soluble antioxidant.

38. Calcium mainly found in:

1. Green leafy vegetables
2. Milk
3. Fish
4. All

Answer: 4

Explanation: All are good sources.

39. Vitamin D best natural source:

1. Sunlight
2. Mango

3. Egg only

4. Water

Answer: 1

Explanation: UV light activates Vitamin D.

40. Which nutrient builds body tissues?

1. Fat

2. Carbohydrates

3. Protein

4. Water

Answer: 3

Explanation: Protein = building & repair.

41. Water requirement per day (adult):

1. 500 ml

2. 1 litre

3. 2–3 litres

4. 5 litres

Answer: 3

Explanation: Standard daily need.

42. Balanced diet includes:

1. Only fruits
2. Only milk
3. All nutrients in right amount
4. Only protein

Answer: 3

Explanation: Must include all food groups.

43. Energy-giving nutrient:

1. Protein
2. Fat
3. Carbohydrates
4. Fat & carbs

Answer: 4

Explanation: Both fats & carbs give energy.

44. BMI <18.5 indicates:

1. Obesity
2. Overweight
3. Underweight
4. Normal

Answer: 3

Explanation: <18.5 = underweight.

45. Food rich in folic acid:

1. Milk
2. Green leafy vegetables
3. Sugar
4. Oil

Answer: 2

Explanation: Prevents neural tube defects.

46. Vitamin A stored in:

1. Kidney
2. Liver
3. Pancreas
4. Heart

Answer: 2

Explanation: Liver stores vitamin A.

47. Edema in Kwashiorkor due to:

1. Sodium excess
2. Low protein (low albumin)
3. High cholesterol
4. Low water

Answer: 2

Explanation: Lack of protein → low oncotic pressure.

48. Common nutritional anemia in India:

1. Vitamin C deficiency
2. Iron deficiency anemia
3. Vitamin D deficiency
4. Calcium deficiency

Answer: 2

Explanation: Most widespread anemia.

49. Best test for iron deficiency anemia:

1. Hemoglobin
2. Ferritin
3. Serum calcium
4. Albumin

Answer: 2

Explanation: Ferritin = iron stores.

50. Protein-rich pulse:

1. Rice
2. Wheat
3. Soya bean
4. Sugarcane

Answer: 3

Explanation: Soybean highest in protein among pulses.

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ENVIRONMENTAL HEALTH & SANITATION – 50 MCQs

1. Safe drinking water must contain chlorine residual of:

1. 0.2 mg/L
2. 2 mg/L
3. 5 mg/L
4. 10 mg/L

Answer: 1

Explanation: 0.2–0.5 mg/L free chlorine ensures safety.

2. Most common method of water purification at community level:

1. Boiling
2. Filtration + chlorination
3. UV light
4. Reverse osmosis

Answer: 2

Explanation: Rapid sand filtration + chlorination widely used.

3. Most reliable household water purification:

1. Cloth filtration
2. Sand filter
3. Boiling
4. Storing

Answer: 3

Explanation: Boiling kills all pathogens.

4. Ideal pH of drinking water:

1. 4–5
2. 6.5–8.5
3. 8.5–10
4. 10–12

Answer: 2

Explanation: Safe pH recommended by WHO.

5. Hardness of water mainly caused by:

1. Sodium
2. Calcium & magnesium salts

3. Iron

4. Iodine

Answer: 2

Explanation: Ca^{2+} & Mg^{2+} cause hardness.

6. Best method for removal of temporary hardness:

1. Boiling

2. Chlorination

3. Filter

4. Storing

Answer: 1

Explanation: Boiling precipitates bicarbonates.

7. Bleaching powder active ingredient:

1. Calcium sulfate

2. Calcium hypochlorite

3. Sodium chloride

4. Magnesium

Answer: 2

Explanation: Releases chlorine for disinfection.

8. Most sensitive indicator of water pollution:

1. E. coli
2. Salmonella
3. Vibrio
4. Hepatitis A virus

Answer: 1

Explanation: Indicates fecal contamination.

9. Biogas is produced by:

1. Aerobic digestion
2. Anaerobic digestion
3. Oxidation
4. Distillation

Answer: 2

Explanation: Anaerobic decomposition of waste.

10. Most hygienic latrine type:

1. Open defecation
2. Bucket latrine
3. Water-seal latrine
4. Open pit

Answer: 3

Explanation: Water seal prevents odor & flies.

11. Recommended per capita water supply in India (urban):

1. 20 L/day
2. 40 L/day
3. 70 L/day
4. 135 L/day

Answer: 4

Explanation: CPHEEO recommends 135 L/day.

12. Solid waste disposal best method for cities:

1. Dumps
2. Sanitary landfill
3. Open burning
4. Open dumping

Answer: 2

Explanation: Sanitary landfill prevents contamination.

13. Incineration mainly used for:

1. Kitchen waste
2. Hospital waste
3. Plastic only
4. Metal waste

Answer: 2

Explanation: Burns biomedical waste safely.

14. Color code for infectious biomedical waste:

1. Black
2. Blue
3. Yellow
4. Green

Answer: 3

Explanation: Yellow bag for infectious waste.

15. Vector of malaria:

1. Aedes
2. Culex
3. Anopheles
4. Housefly

Answer: 3

Explanation: Anopheles female mosquito.

16. Aedes mosquito bites:

1. At night
2. Only evening
3. Daytime
4. Only after rain

Answer: 3

Explanation: Day biter — dengue vector.

17. Filariasis spread by:

1. Aedes
2. Culex
3. Sandfly
4. Tick

Answer: 2

Explanation: Culex mosquito.

18. Best method for mosquito control:

1. Fogging only
2. Source reduction (removing breeding sites)
3. Burning waste
4. Using plastic

Answer: 2

Explanation: Eliminate stagnant water.

19. Housefly transmits diseases by:

1. Biting
2. Contaminating food

3. Laying eggs
4. Touching skin

Answer: 2

Explanation: Mechanical transmission.

20. Main symptom of fluoride excess (fluorosis):

1. Loose stools
2. Bone deformities & mottling of teeth
3. Skin rash
4. Fever

Answer: 2

Explanation: Fluoride affects bones/teeth.

21. Noise pollution measured in:

1. Lux
2. Candela
3. Decibel
4. Watt

Answer: 3

Explanation: dB measures noise.

22. Acceptable noise level in residential area (day):

1. 55 dB
2. 100 dB
3. 150 dB
4. 10 dB

Answer: 1

Explanation: CPCB limits ~55 dB daytime.

23. Air pollution indicator gas:

1. Ozone
2. SO₂
3. CO₂
4. Nitrogen

Answer: 2

Explanation: SO₂ indicates industrial pollution.

24. Primary source of indoor air pollution in rural India:

1. AC
2. Biomass fuel
3. Gas stove
4. Electricity

Answer: 2

Explanation: Wood, dung, chulhas.

25. Most common cause of food poisoning:

1. S. aureus
2. E. coli
3. Salmonella
4. Vibrio

Answer: 1

Explanation: Staph produces toxin.

26. Pasteurization of milk done at:

1. 35°C
2. 50°C
3. 63°C for 30 min
4. 100°C for 1 min

Answer: 3

Explanation: Holder method.

27. Cold chain temperature:

1. 0–2°C
2. 2–8°C
3. –20°C
4. Room temperature

Answer: 2

Explanation: Vaccines stored at 2–8°C.

28. Toilet per person recommended:

1. 1 per 1 person
2. 1 per 5
3. 1 per 10
4. 1 per 20

Answer: 3

Explanation: Standard sanitation guideline.

29. Best housing ventilation type:

1. Cross ventilation
2. Window-less
3. Air-tight
4. Closed

Answer: 1

Explanation: Promotes air circulation.

30. Ideal room illumination measured in:

1. Watt
2. Candela
3. Lux
4. Volt

Answer: 3

Explanation: Lux measures brightness.

31. Sanitary well minimum distance from contamination:

1. 5 m
2. 10 m
3. 15 m
4. 100 m

Answer: 3

Explanation: At least 15 meters from latrine.

32. How much soap solution needed to kill germs?

1. 1%
2. 2%
3. 5%
4. 10%

Answer: 1

Explanation: 1% bleaching powder solution commonly used.

33. The “Blue baby” disease due to:

1. High calcium
2. Nitrate contamination

3. Fluoride deficiency
4. Vitamin C deficiency

Answer: 2

Explanation: Methemoglobinemia in infants.

34. Hard water effect:

1. Good lather
2. Poor lather formation
3. Tastes sweet
4. Causes red color

Answer: 2

Explanation: Calcium prevents soap lather.

35. Most effective household mosquito control:

1. Fogging
2. Mosquito nets
3. Spraying DDT indoors
4. Wearing gloves

Answer: 2

Explanation: Nets protect all night.

36. Most common vector-borne disease in India:

1. Malaria
2. Dengue
3. Filariasis
4. Chikungunya

Answer: 1

Explanation: Malaria widely prevalent.

37. Sewage treatment primarily removes:

1. Solids
2. Chemicals
3. Pathogens
4. All

Answer: 4

Explanation: STP removes all.

38. Handwashing prevents:

1. Diarrhea
2. ARI
3. COVID-like diseases
4. All

Answer: 4

Explanation: Universal preventive action.

39. Indicator of fecal contamination in water:

1. Streptococcus
2. E. coli
3. Vibrio cholerae
4. Salmonella

Answer: 2

Explanation: E. coli used as standard indicator.

40. Ventilation rate per person:

1. 5 cu ft/min
2. 10 cu ft/min
3. 100 cu ft/min
4. 1000 cu ft/min

Answer: 2

Explanation: Standard fresh air supply.

41. Most common cause of air pollution in cities:

1. Vehicles
2. Plants
3. Lakes
4. Cows

Answer: 1

Explanation: Traffic main source.

42. Most common pollutant from vehicles:

1. Ozone
2. Carbon monoxide
3. CO₂
4. Sulfur

Answer: 2

Explanation: CO from incomplete combustion.

43. Diseases spread by housefly include:

1. Cholera
2. Typhoid
3. Dysentery
4. All

Answer: 4

Explanation: Housefly spreads multiple fecal–oral diseases.

44. Most common method of disinfection of rooms:

1. Boiling
2. Fumigation
3. Burning
4. Sunlight

Answer: 2

Explanation: Formalin fumigation used in hospitals.

45. Bedbug control is done by:

1. Sand
2. Heat + insecticide
3. Water
4. Cotton

Answer: 2

Explanation: Heat kills bedbugs.

46. Radiation hazard measured in:

1. Sievert
2. Lux
3. Decibel
4. Watt

Answer: 1

Explanation: Radiation dose unit.

47. Most biodegradable waste:

1. Plastic
2. Food waste

3. Metal

4. Glass

Answer: 2

Explanation: Organic waste decomposes easily.

48. Waterborne diseases include:

1. Cholera

2. Hepatitis A

3. Typhoid

4. All

Answer: 4

Explanation: All spread by contaminated water.

49. Flies breed in:

1. Clean water

2. Rotten garbage

3. Trees

4. Metal

Answer: 2

Explanation: Decomposing organic matter.

50. Best method to prevent dengue:

1. Kill adult mosquitoes
2. Destroy breeding sites
3. Fogging only
4. Eating fruits

Answer: 2

Explanation: Source reduction is key.

NATIONAL HEALTH PROGRAMMES OF INDIA – 50 MCQs

(NHM, RMNCH+A, NTEP, NACP, NPCDCS, NVBDCP, NIDDCP, IDSP, RBSK, RKSK, NDD, MAA, PMSMA, JSY, JSSK, etc.)

1. NHM stands for:

1. National Health Mission
2. National Hospital Mission
3. New Health Module
4. National Health Model

Answer: 1

Explanation: NHM covers NRHM + NUHM.

2. Goal of NHM:

1. Reduce malnutrition
2. Universal access to equitable healthcare

3. Medical college construction
4. Free surgeries

Answer: 2

Explanation: NHM focuses on equity, affordability & universal access.

3. RMNCH+A refers to:

1. Reproductive, Maternal, Newborn, Child & Adolescent health
2. Rural medical care
3. Rehabilitation services
4. None

Answer: 1

Explanation: Covers entire life cycle approach.

4. ASHA is posted at:

1. Sub-centre
2. Village level
3. CHC
4. District hospital

Answer: 2

Explanation: ASHA is community-level link worker.

5. Incentive for ASHA under JSY for institutional delivery:

1. ₹50
2. ₹100
3. ₹600
4. ₹1,400

Answer: 3

Explanation: ASHA receives ₹600; mother gets ₹1,400 (rural).

6. JSY aims to reduce:

1. Malaria
2. Maternal & infant mortality
3. Cancer
4. Diabetes

Answer: 2

Explanation: Promotes institutional delivery.

7. JSSK provides:

1. Free home delivery
2. Free drugs, diagnostics, transport for pregnant women & sick newborns
3. Free employment
4. Free milk

Answer: 2

Explanation: Cashless services for mother & newborn.

8. PMSMA conducted on:

1. 1st of every month
2. 9th of every month
3. 15th of every month
4. Last day

Answer: 2

Explanation: Pradhan Mantri Surakshit Matritva Abhiyan: 9th.

9. Under RKSK, focus age group is:

1. 0–6 years
2. 10–19 years
3. 20–40 years
4. 40–60 years

Answer: 2

Explanation: Rashtriya Kishor Swasthya Karyakram.

10. RBSK mainly screens:

1. Adults
2. Adolescents only
3. Children 0–18 years
4. Elderly

Answer: 3

Explanation: Detects 4Ds: defects, diseases, deficiencies, disabilities.

11. NTEP aims to eliminate TB by:

1. 2022
2. 2025
3. 2030
4. 2050

Answer: 2

Explanation: India aims TB elimination by 2025.

12. Drug regimen under NTEP intensive phase:

1. H + R only
2. HRZE
3. HRE
4. RH only

Answer: 2

Explanation: 4 drugs: Isoniazid, Rifampicin, Pyrazinamide, Ethambutol.

13. DOTS means:

1. Directly Observed Treatment Strategy
2. Disease Observation Technique
3. Drug Only Therapy
4. None

Answer: 1

Explanation: Patient monitored while taking drugs.

14. Nikshay portal used for:

1. HIV reporting
2. TB notification & monitoring
3. Immunization
4. Nutrition

Answer: 2

Explanation: Real-time TB tracking.

15. NACO works for:

1. TB
2. HIV/AIDS control
3. Iodine
4. Nutrition

Answer: 2

Explanation: National AIDS Control Organisation.

16. HIV testing includes:

1. One rapid test
2. Three rapid tests of different antigens

3. Only ELISA

4. CT scan

Answer: 2

Explanation: For confirmation, 3 tests.

17. Prevention of Mother-to-Child Transmission (PMTCT) uses:

1. Iron

2. Vitamin A

3. ART therapy

4. ORS

Answer: 3

Explanation: ART reduces vertical transmission.

18. NPCDCS deals with:

1. TB

2. Vector diseases

3. Diabetes, hypertension, cancer

4. Skin diseases

Answer: 3

Explanation: Major NCD program.

19. National Tobacco Control Programme focuses on:

1. Promoting smoking
2. Preventing tobacco use
3. Selling tobacco
4. Training smokers

Answer: 2

Explanation: Reduces tobacco addiction.

20. IDSP stands for:

1. Integrated Disease Surveillance Programme
2. Indian Disease Service Program
3. Infectious Disease Survey Project
4. None

Answer: 1

Explanation: Monitors outbreaks/epidemics.

21. Lines of reporting under IDSP:

1. Weekly
2. Monthly
3. Yearly
4. Decade

Answer: 1

Explanation: Weekly reporting crucial.

22. NVBDCP covers diseases EXCEPT:

1. Malaria
2. Dengue
3. Leprosy
4. Filariasis

Answer: 3

Explanation: Leprosy under NLEP.

23. Leprosy treatment under NLEP uses:

1. ACT
2. MDT (multidrug therapy)
3. ART
4. ORS

Answer: 2

Explanation: MDT: rifampicin + dapsone + clofazimine.

24. Kala-azar elimination target:

1. 2020
2. 2023
3. 2025
4. 2030

Answer: 3

Explanation: India aims for elimination by 2025.

25. ASHA dose of ORS packet contains:

1. 1 litre standard packet
2. 2 litres
3. 100 ml
4. 200 ml

Answer: 1

Explanation: Standard 1 L packet.

26. National Deworming Day celebrated on:

1. Jan 30
2. Feb 10
3. March 3
4. July 20

Answer: 2

Explanation: Feb 10 & Aug 10.

27. Albendazole dose for children (NDD):

1. 100 mg
2. 200 mg
3. 400 mg
4. 40 mg

Answer: 3

Explanation: Single dose 400 mg.

28. ICDS under which ministry?

1. Ministry of Health
2. Ministry of Women & Child Development
3. Rural Development
4. Labour

Answer: 2

Explanation: ICDS supervised by MWCD.

29. Anganwadi worker provides:

1. Medical surgery
2. Supplementary nutrition
3. TB treatment
4. ART therapy

Answer: 2

Explanation: Nutrition & preschool education.

30. Contraceptive choice under FP includes:

1. OCP
2. Condoms

3. IUCD

4. All

Answer: 4

Explanation: Many contraceptive options.

31. Mission Indradhanush aims for:

1. Nutrition
2. 90% full immunization coverage
3. Cancer treatment
4. HIV prevention

Answer: 2

Explanation: Strengthening immunization.

32. Intensified Mission Indradhanush target:

1. Hard-to-reach areas
2. Cities only
3. Only newborns
4. Only pregnant women

Answer: 1

Explanation: Targets left-out/ dropped-out children.

33. Anemia Mukht Bharat 6x6x6 strategy includes all EXCEPT:

1. IFA supplementation
2. Deworming
3. Vitamin K injections
4. Behavior change

Answer: 3

Explanation: Vitamin K not included.

34. Vitamin A biannual rounds given under:

1. JSY
2. RBSK
3. National Vitamin A Programme
4. NTEP

Answer: 3

Explanation: Twice yearly to children.

35. NIDDCP deals with:

1. Dengue
2. Iodine deficiency disorders
3. TB
4. Cancer

Answer: 2

Explanation: Focus on salt iodization.

36. Sickle cell program covers:

1. Western/tribal states
2. All states
3. Only cities
4. Delhi only

Answer: 1

Explanation: Tribal belts targeted.

37. MAA programme promotes:

1. Surgery
2. Breastfeeding
3. HIV testing
4. TB drugs

Answer: 2

Explanation: MAA = Mothers' Absolute Affection.

38. Kayakalp award given for:

1. Nutrition
2. Hospital cleanliness
3. School health
4. Tobacco control

Answer: 2

Explanation: Clean hospitals initiative.

39. The role of ASHA includes all EXCEPT:

1. Home-based newborn care
2. Ensuring institutional delivery
3. Performing surgery
4. Immunization mobilization

Answer: 3

Explanation: ASHA does not perform surgery.

40. PM-JAY under Ayushman Bharat covers:

1. ₹5 lakh per family per year
2. ₹50,000 per person
3. ₹10 lakh only for seniors
4. No benefit

Answer: 1

Explanation: Health insurance coverage.

41. HWCs under Ayushman Bharat aim to provide:

1. Telemedicine only
2. Comprehensive primary healthcare
3. Free surgeries
4. HIV treatment only

Answer: 2

Explanation: Strengthen primary health care.

42. NMEP originally targeted:

1. Malaria eradication
2. TB control
3. Cancer
4. HIV

Answer: 1

Explanation: National Malaria Eradication Programme.

43. PHC population coverage:

1. 5,000
2. 10,000–30,000
3. 1 lakh
4. 5 lakh

Answer: 2

Explanation: Rural PHC covers 20–30k.

44. SC (Sub-centre) covers:

1. 500 people
2. 1,000 people

3. 3,000–5,000 people

4. 1 lakh

Answer: 3

Explanation: Rural SC: 3,000 (hilly) to 5,000 (plains).

45. CHC population norm:

1. 1 lakh

2. 3 lakh

3. 30 lakh

4. 2,000

Answer: 1

Explanation: CHC covers ~1 lakh.

46. Accredited Social Health Activist (ASHA) is selected from:

1. Outside village

2. Same village

3. District office

4. State office

Answer: 2

Explanation: Locally selected woman volunteer.

47. ASHA drug kit includes all EXCEPT:

1. ORS
2. Paracetamol
3. Antibiotics for TB
4. Iron tablets

Answer: 3

Explanation: TB drugs not given to ASHA.

48. Adolescent WIFS includes:

1. Weekly IFA
2. Daily calcium
3. Steroids
4. Glucose

Answer: 1

Explanation: Weekly Iron Folic Acid Supplementation.

49. NPCBB works for:

1. Blindness
2. Malnutrition
3. Obesity
4. Cancer

Answer: 1

Explanation: National Programme for Control of Blindness.

50. School Health Programme provides:

1. Immunization only
2. Health check-ups + screening + education
3. Surgery
4. TB treatment

Answer: 2

Explanation: Comprehensive health for students.

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