PGIMER M.SC NURSING SAMPLE PAPER 01

Time Allowed: 1 Hour 30 Minutes
Maximum Marks: 100
Total Questions: 100

Instructions:

- All questions are multiple choice questions.
- Each question carries 1 mark.
- 0.25 marks will be deducted for each wrong answer.
- Attempt all questions carefully.
- The question paper is in English language only.

SECTION 1 - MEDICAL SURGICAL NURSING

Q1. A patient with acute respiratory distress syndrome (ARDS) is placed on mechanical ventilation. To reduce the risk of ventilator-induced lung injury (VILI), the nurse expects which of the following ventilator setting strategies to be ordered?

(a) High tidal volume and low positive end-expiratory pressure (PEEP)

(b) Low tidal volume and high positive end-expiratory pressure (PEEP)

(c) High tidal volume and high positive end-expiratory pressure (PEEP)

(d) Low tidal volume and low positive end-expiratory pressure (PEEP)

Q2. During the first 24 hours following a major burn injury, a patient undergoes fluid resuscitation using the Parkland formula. Which clinical indicator is the most reliable guide for evaluating the adequacy of fluid replacement?

(a) Hourly urine output measurement

(b) Mean arterial pressure (MAP) above 90 mmHg

(c) Peripheral edema resolution

(d) Core body temperature stability

Q3. A nurse is caring for a patient admitted with an acute exacerbation of Myasthenia Gravis. Which medication should the nurse ensure is readily available at the bedside to treat a potential cholinergic crisis?

(a) Pyridostigmine

(b) Edrophonium chloride

(c) Atropine sulfate

(d) Neostigmine methylsulfate

Q4. A patient with a history of liver cirrhosis develops esophageal varices. The nurse understands that which of the following underlying hemodynamic changes is primarily responsible for this complication?

(a) Systemic arterial hypertension

(b) Portal hypertension

(c) Decreased oncotic pressure due to hypoalbuminemia

(d) Decreased central venous pressure (CVP)

Q5. Which of the following clinical signs should a nurse monitor for as the earliest indicator of increased intracranial pressure (ICP) in a patient following a traumatic brain injury?

(a) Cushing's triad (bradycardia, bradypnea, widened pulse pressure)

(b) Ipsilateral pupillary dilation

(c) Altered level of consciousness (LOC)

(d) Decerebrate posturing

Q6. A patient is diagnosed with Chronic Kidney Disease (CKD) and presents with profound anemia. The nurse recognizes that this anemia is primarily caused by a deficiency in which hormone?

(a) Renin
(b) Erythropoietin
(c) Calcitriol
(d) Aldosterone

Q7. The nurse is evaluating an electrocardiogram (ECG) for a patient suspected of having an acute myocardial infarction. Which of the following features is considered indicative of acute transmural myocardial injury?

(a) ST-segment elevation
(b) Prolonged PR interval
(c) Prominent U waves
(d) Shortened QT interval

Q8. A patient with type 1 diabetes mellitus is admitted in Diabetic Ketoacidosis (DKA). The nurse initiates an intravenous infusion of regular insulin. What electrolyte imbalance must the nurse monitor most closely for during insulin therapy?

(a) Hypernatremia
(b) Hypokalemia
(c) Hypercalcemia
(d) Hypophosphatemia

Q9. While caring for a patient immediately following a subtotal thyroidectomy, the nurse observes muscle twitching, a positive Chvostek's sign, and hyperreflexia. The nurse should anticipate administering which medication?

(a) Potassium chloride
(b) Calcium gluconate
(c) Sodium bicarbonate
(d) Levothyroxine sodium

Q10. A nurse is preparing to care for a patient with a chest tube connected to a three-chamber water-seal drainage system. Which observation in the water-seal chamber confirms normal, expected function?

(a) Continuous, vigorous bubbling in the water-seal chamber
(b) Intermittent tidaling (fluid level fluctuations) with respiration
(c) Complete absence of any fluid movement or bubbling
(d) Constant fluid drainage filling the chamber from the suction source

Q11. A patient with deep vein thrombosis (DVT) suddenly develops sharp chest pain, tachypnea, and acute dyspnea. Which life-threatening complication should the nurse suspect first?

(a) Acute myocardial infarction
(b) Pulmonary embolism
(c) Spontaneous pneumothorax
(d) Cardiac tamponade

Q12. The nurse is developing a care plan for an elderly patient who underwent a total hip arthroplasty 12 hours ago. Which intervention is most effective for preventing postoperative venous thromboembolism (VTE)?

(a) Maintaining strict bed rest for the first 48 hours
(b) Placing a pillow directly under the knee of the affected leg
(c) Early mobilization and administration of prescribed low-molecular-weight heparin
(d) Restricting oral fluid intake to decrease blood volume

Q13. A patient with gout is prescribed medications to manage the disease. The nurse understands that which of the following choices represents the therapeutic rationale for administering Allopurinol?

(a) It decreases the production of uric acid by inhibiting xanthine oxidase.
(b) It increases the renal excretion of accumulated uric acid crystals.
(c) It acts as a potent anti-inflammatory agent to relieve acute joint pain.
(d) It neutralizes blood pH to prevent crystal deposition within synovial fluid.

Q14. A nurse is caring for a patient who has been diagnosed with a pheochromocytoma. Which clinical manifestation should the nurse prioritize for immediate assessment and management?

(a) Severe hypertension with explosive headaches
(b) Profound bradycardia and hypotension
(c) Severe generalized muscle weakness and hyporeflexia
(d) Significant weight gain and fluid retention

Q15. Which of the following nursing interventions is a priority when caring for a patient experiencing an acute hemolytic blood transfusion reaction?

(a) Slow down the transfusion rate and notify the health care provider immediately.
(b) Stop the transfusion, disconnect the tubing, and infuse normal saline through a new line.
(c) Administer an intramuscular dose of an antihistamine and resume the infusion.
(d) Place the patient in a prone position to optimize lung expansion.

SECTION 2 - COMMUNITY HEALTH NURSING

Q16. A community health nurse is calculating the infant mortality rate (IMR) for a specific district. Which of the following formulas represents the correct method for calculating this rate?

(a) (Number of deaths under 1 year of age during the year / Total population in that year) $\times$ 1000

(b) (Number of deaths under 1 year of age during the year / Number of live births in that year) $\times$ 1000

(c) (Number of deaths under 28 days of age during the year / Number of live births in that year) $\times$ 1000

(d) (Number of stillbirths and deaths under 1 week of age / Total births) $\times$ 1000

Q17. Under the current National Immunization Schedule (NIS) in India, what is the recommended route and dosage for the administration of the Rotavirus Vaccine (RVV)?

(a) 0.5 mL, Intramuscular (IM)

(b) 5 drops (or 2.5 mL depending on formulation), Oral

(c) 0.1 mL, Intradermal (ID)

(d) 0.5 mL, Subcutaneous (SC)

Q18. An outbreak of infectious hepatitis is suspected in a rural village. The community health nurse recognizes that which epidemiological tool is best suited for demonstrating the time distribution and progression of an epidemic?

(a) Spot map

(b) Epidemic curve

(c) Pie chart

(d) Correlation coefficient

Q19. When conducting a home visit, the nurse monitors a patient receiving Directly Observed Treatment, Short-course (DOTS) under the National Tuberculosis Elimination Program (NTEP). What is the primary operational objective of the DOTS strategy?

(a) To isolate the patient in a community center until sputum conversion occurs.

(b) To ensure strict adherence to anti-tubercular therapy and prevent drug resistance.

(c) To provide free supplementary nutritional therapy to the entire family unit.

(d) To perform routine monthly bronchoscopies on high-risk contacts.

Q20. A community nurse is assessing the water quality of a village well. Which chemical process is considered the most critical step in large-scale water purification to ensure residual germicidal action against pathogens?

(a) Sedimentation

(b) Filtration via rapid sand filters

(c) Chlorination

(d) Coagulation with alum

Q21. The nurse is preparing a health education session on family planning. According to demographic principles, which contraceptive method is classified as a permanent or terminal method?

(a) Intrauterine Contraceptive Device (IUCD)

(b) Oral Contraceptive Pills (OCPs)

(c) Surgical Sterilization (Vasectomy/Tubectomy)

(d) Barrier methods (Condoms)

Q22. While participating in the Pulse Polio Immunization (PPI) campaign, the nurse notes that the primary goal of this nationwide initiative is to achieve which level of disease control?

(a) Disease control

(b) Disease elimination

(c) Disease eradication

(d) Primordial prevention

Q23. According to the current Biomedical Waste Management rules in India, in which color-coded container should the nurse discard a blood-contaminated cotton swab or dressing?

(a) Red bag

(b) Yellow bag

(c) Blue container

(d) White translucent container

Q24. The community health nurse is conducting a mass screening camp for hypertension in an industrial colony. This activity is a practical application of which level of prevention?

(a) Primordial prevention

(b) Primary prevention

(c) Secondary prevention

(d) Tertiary prevention

Q25. A public health nurse is reviewing the 'Epidemiological Triad'. Which three components constitute this foundational model of disease causation?

(a) Doctor, Patient, Hospital

(b) Agent, Host, Environment

(c) Source, Mode of transmission, Susceptible contact

(d) Pre-pathogenesis, Pathogenesis, Resolution

Q26. An ASHA (Accredited Social Health Activist) worker reports a sudden clustering of dog-bite cases in a locality. The community nurse knows that according to national rabies guidelines, the primary wound management rule is to immediately wash the wound for how long?

(a) At least 15 minutes with soap and running water
(b) Exactly 2 minutes with concentrated alcohol solution
(c) 30 minutes with an oil-based antiseptic ointment
(d) Washing is skipped; apply an immediate occlusive sterile dressing

Q27. During a community assessment, the nurse calculates the dependency ratio of a village. What does a high dependency ratio indicate about the population's demographic structure?

(a) There is a large proportion of young adults contributing to the economic workforce.
(b) There is an increased proportion of the population aged under 15 and over 65 relative to the working-age group.
(c) The birth rate has dropped significantly below the standard replacement level.
(d) The maternal mortality rate is exceptionally low compared to the neighboring districts.

Q28. Under the Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCH+A) strategy, which critical mineral supplement is systematically distributed to adolescent girls in schools to combat nutritional anemia?

(a) Iron and Folic Acid (IFA)
(b) Calcium and Vitamin D3
(c) Zinc and Magnesium
(d) Vitamin A and Iodine drops

Q29. A nurse is reviewing census data and studies the Crude Birth Rate (CBR). Why is this metric described as 'Crude'?

(a) It is calculated using rough approximations instead of precise registration counts.
(b) It includes the entire mid-year population in the denominator, regardless of age or gender suitability for childbearing.
(c) It only measures birth dynamics occurring across marginalized socioeconomic classes.
(d) It excludes any births that happen within rural or tribal communities.

Q30. While tracking a vector-borne disease outbreak of Dengue in an urban slum, the community health nurse should focus source-reduction education on eliminating breeding grounds for which specific mosquito vector?

(a) Anopheles stephensi
(b) Culex quinquefasciatus
(c) Aedes aegypti
(d) Mansonia uniformis

SECTION 3 - OBSTETRIC AND GYNAECOLOGICAL NURSING

Q31. A pregnant woman at 32 weeks of gestation presents to the emergency department with sudden, painless, bright red vaginal bleeding. Her uterus is soft, relaxed, and non-tender on palpation. Which obstetric condition should the nurse suspect first?

(a) Abruptio placentae
(b) Placenta previa
(c) Uterine rupture
(d) Vasa previa

Q32. A nurse is monitoring a patient in active labor who has an intravenous oxytocin infusion running. The fetal heart rate (FHR) monitor reveals a pattern of late decelerations. Which immediate sequential nursing intervention is the absolute priority?

(a) Turn the patient to a lateral position, turn off the oxytocin infusion, and administer oxygen via face mask.
(b) Increase the oxytocin infusion rate to accelerate delivery and perform a vaginal exam.
(c) Prepare the patient for an immediate amniotomy and document the findings.
(d) Place the patient in a prone position and check maternal blood pressure.

Q33. According to the World Health Organization (WHO) and National Health Guidelines, Postpartum Hemorrhage (PPH) following a vaginal delivery is defined as a blood loss equal to or exceeding how many milliliters?

(a) More than 200 mL
(b) More than 300 mL
(c) More than 500 mL
(d) More than 1000 mL

Q34. A primigravida at 38 weeks of gestation is admitted to the labor room. Her vaginal examination reveals the fetal presenting part is located 1 cm below the maternal ischial spines. How should the nurse document the fetal station?

(a) Station -1
(b) Station 0
(c) Station +1
(d) Station +2

Q35. A nurse is caring for a patient admitted with severe preeclampsia who is receiving an intravenous infusion of Magnesium Sulfate ($MgSO_4$). During an assessment, the nurse notes a loss of deep tendon reflexes (DTRs), respiratory rate of 10 breaths/minute, and urine output of 15 mL over the past hour. Which medication should the nurse prepare to administer immediately?

(a) Protamine sulfate

(b) Calcium gluconate

(c) Naloxone hydrochloride

(d) Hydralazine

Q36. During a routine antenatal clinic checkup, a pregnant woman asks about 'quickening.' The nurse explains that quickening refers to the first perception of fetal movement by the mother, which typically occurs in a primigravida around which gestational week?

(a) 10 to 12 weeks

(b) 14 to 16 weeks

(c) 18 to 20 weeks

(d) 22 to 24 weeks

Q37. The nurse is examining a neonate immediately after a breech delivery. Which assessment should be prioritized to screen for a common skeletal complication associated specifically with breech presentations?

(a) Barlow and Ortolani maneuvers for Developmental Dysplasia of the Hip (DDH)

(b) Palpation of the fontanels for premature craniosynostosis

(c) Checking for a Moro reflex to rule out a fractured clavicle

(d) Assessing the spine for indicators of Spina Bifida Occulta

Q38. A patient in the third stage of labor experiences sudden elongation of the umbilical cord, a gush of dark blood from the vagina, and a change in the uterine shape from discoid to globular. The nurse recognizes these clinical changes as signs of what event?

(a) Retained placenta pieces

(b) Impending uterine inversion

(c) Inevitable placental separation

(d) Internal cervical laceration

Q39. A pregnant patient at 36 weeks of gestation is diagnosed with a severe intra-uterine fetal death (IUFD) that occurred over 4 weeks ago. The nurse understands that this patient is at an exceptionally high risk for developing which systemic hematological complication?

(a) Polycythemia vera

(b) Disseminated Intravascular Coagulation (DIC)

(c) Idiopathic Thrombocytopenic Purpura (ITP)

(d) Hemolytic Disease of the Newborn

Q40. The nurse is performing an assessment on a multiparous patient 2 hours after delivery. On palpating the abdomen, the fundus is noted to be boggy, soft, and displaced upwards and to the right side of the umbilicus. What is the most appropriate initial nursing action?

(a) Administer an immediate intramuscular dose of Methergine.

(b) Assist the patient to the bathroom to void or catheterize her bladder.

(c) Start a rapid bimanual uterine compression technique.

(d) Place the patient in a Trendelenburg position.

Q41. An antenatal mother with Rh-negative blood type is scheduled to receive Rh Immune Globulin (Anti-D). The nurse understands that if the mother remains un-sensitized, the standard prophylactic dose of Anti-D should be administered at which point during pregnancy?

(a) At 12 weeks of gestation

(b) At 28 weeks of gestation

(c) Immediately after the first trimester screening

(d) Only within 72 hours post-delivery

Q42. A patient at 39 weeks of gestation is undergoing a trial of labor after a previous Cesarean section (TOLAC). Suddenly, she complains of sharp abdominal tearing pain, contractions stop completely, and fetal heart tones drop abruptly. On abdominal palpation, fetal parts are easily felt directly under the skin. What emergency is occurring?

(a) Placental abruption

(b) Complete uterine rupture

(c) Inversion of the uterus

(d) Amniotic fluid embolism

Q43. The nurse is calculating the expected date of delivery (EDD) using Naegele's rule for a pregnant woman whose Last Menstrual Period (LMP) began on August 20, 2025. What is the calculated EDD?

(a) May 27, 2026

(b) May 20, 2026

(c) April 27, 2026

(d) June 20, 2026

Q44. A nurse is reviewing a patient's antenatal record and notes the documentation: G5, T2, P1, A1, L3. How should the nurse interpret this obstetric history?

(a) 5 pregnancies, 2 term births, 1 preterm birth, 1 abortion, 3 living children

(b) 5 pregnancies, 2 preterm births, 1 term birth, 1 abortion, 3 living children

(c) 5 living children, 2 term births, 1 twin pregnancy, 1 abortion

(d) 5 twin births, 2 term deliveries, 1 abortion, 3 living children

Q45. During a vaginal delivery, the fetal head is born, but it tightly retracts against the maternal perineum (the 'turtle sign'). The fetal shoulders fail to emerge with standard downward traction. Which initial nursing maneuver is indicated?

(a) Apply heavy fundal pressure to push the shoulders through.

(b) Execute the McRoberts maneuver by hyperflexing the mother's thighs against her abdomen.

(c) Assist the provider with an immediate internal podic version.

(d) Place the patient in a high lithotomy position immediately.

SECTION 4 - CHILD HEALTH NURSING

Q46. A 10-month-old infant is brought to the pediatric clinic for a routine wellness checkup. According to standard developmental milestones, which of the following gross motor skills should the nurse expect the infant to exhibit?

(a) Walking independently without support
(b) Sitting up steadily without any support
(c) Climbing up low stairs on hands and knees
(d) Riding a small tricycle independently

Q47. A newborn is suspected of having Hirschsprung's disease. Which of the following assessment findings noted by the nurse during the first 48 hours of life serves as the hallmark clinical indicator for this condition?

(a) Failure to pass meconium within the first 24 to 48 hours
(b) Frequent, projectile vomiting of non-bilious fluid
(c) Presence of a palpable sausage-shaped mass in the right upper quadrant
(d) Severe, continuous coughing and choking during early feedings

Q48. The nurse is caring for a 4-year-old child diagnosed with Tetralogy of Fallot (TOF) who suddenly experiences a severe hypoxic episode ('tet spell') during crying. Which immediate positioning action should the nurse take?

(a) Place the child in a high Trendelenburg position.
(b) Place the child in a knee-chest or squatting position.
(c) Position the child flat on their back in a prone alignment.
(d) Immediately assist the child into a left lateral recumbent position.

Q49. A pediatric nurse is preparing to administer an intramuscular (IM) injection to a 6-month-old infant. Which anatomical site is considered the safest and preferred location for IM injections in this age group?

(a) Dorsogluteal muscle
(b) Deltoid muscle
(c) Vastus lateralis muscle
(d) Ventrogluteal muscle

Q50. The nurse evaluates a 3-week-old infant admitted with a history of forceful, non-bilious projectile vomiting immediately after every feeding. On palpation of the abdomen, an olive-shaped mass is felt in the epigastrium. What condition do these signs indicate?

(a) Intussusception
(b) Hypertrophic Pyloric Stenosis (HPS)
(c) Acute Tracheoesophageal Fistula

(d) Celiac disease

Q51. A child is admitted with severe acute malnutrition and is diagnosed with Kwashiorkor. Which clinical manifestation distinguishes Kwashiorkor from Marasmus?

(a) Severe generalized muscle wasting and a 'skin and bones' appearance

(b) Presence of generalized pitting edema, especially in the lower extremities and face

(c) Prominent, alert eyes with an old-man or 'monkey' facies

(d) Severe, unquenchable hunger and excessive dietary intake

Q52. The nurse is performing a neurological assessment on a 2-month-old infant. When the nurse suddenly lowers the infant's head slightly or makes a loud noise, the infant abducts and extends the arms, spreads the fingers, and then draws the arms back in a tense embrace. How should the nurse document this finding?

(a) Positive Babinski reflex

(b) Normal Moro reflex

(c) Expected Tonic Neck reflex

(d) Normal Palmar Grasp reflex

Q53. A 5-year-old child is hospitalized with acute post-streptococcal glomerulonephritis (APSGN). Which clinical assessment finding should the nurse prioritize for immediate reporting and continuous monitoring?

(a) Mild periorbital edema noted in the morning

(b) Production of dark, smoky, or 'cola-colored' urine

(c) Elevated blood pressure and complaints of a severe headache

(d) Mild, generalized pruritus across the trunk

Q54. When reviewing the cerebrospinal fluid (CSF) analysis report of a child suspected of having acute bacterial meningitis, which of the following laboratory profiles should the nurse expect?

(a) Elevated protein, decreased glucose, and markedly elevated polymorphonuclear (neutrophil) count

(b) Decreased protein, elevated glucose, and elevated lymphocyte count

(c) Normal protein, normal glucose, and elevated monocyte count

(d) Elevated protein, elevated glucose, and clear appearance with zero white blood cells

Q55. A toddler is admitted with a tentative diagnosis of Intussusception. Which classic stool characteristics should the nurse expect the parents to report during history-taking?

(a) Large, bulky, foul-smelling greasy stools that float

(b) Dark, tarry, melanotic stools indicating chronic upper GI bleeding

(c) Stools mixed with blood and mucus, resembling 'currant jelly'

(d) Thin, ribbon-like, pencil-shaped hard stools

Q56. An 18-month-old child is brought to the emergency department with a harsh, barking cough, inspiratory stridor, and hoarseness. The nurse recognizes that these symptoms are characteristic of which respiratory condition?

(a) Acute Bronchiolitis due to RSV
(b) Laryngotracheobronchitis (Croup)
(c) Bronchial Asthma exacerbation
(d) Acute Epiglottitis caused by Hib

Q57. The nurse is caring for an 8-year-old child with Hemophilia A who experienced a knee injury during play. Which initial therapeutic measure should be implemented to control acute joint bleeding (hemarthrosis)?

(a) Administering oral aspirin for pain relief and applying warm compresses to the knee.
(b) Encouraging immediate active range-of-motion exercises to prevent joint stiffness.
(c) Immobilizing the joint, elevating the limb, applying ice packs, and administering factor VIII concentrate.
(d) Performing an emergency surgical joint aspiration to drain accumulated blood.

Q58. According to the current guidelines of the Universal Immunization Program (UIP) in India, at what age should the first dose of the Measles-Rubella (MR) vaccine be routinely administered to an infant?

(a) At birth along with BCG
(b) At 6 weeks of age with Pentavalent-1
(c) At 9 completed months to 12 months of age
(d) Exactly at 15 to 18 months of age

Q59. A newborn is diagnosed with developmental dysplasia of the hip (DDH). The nurse expects the healthcare provider to prescribe which splinting device as the primary, non-invasive treatment during the first few months of life?

(a) Pavlik harness
(b) Hip spica cast
(c) Bryant's traction setup
(d) Milwaukee brace

Q60. A 2-year-old child is admitted to the pediatric unit with severe dehydration due to acute gastroenteritis. Which clinical assessment parameter serves as the most sensitive indicator of short-term fluid volume loss or gain in a hospitalized child?

(a) Measurement of abdominal girth
(b) Changes in daily body weight using the same scale
(c) Specific gravity of a random urine sample
(d) Assessment of skin turgor over the abdomen

SECTION 5 - MENTAL HEALTH NURSING

Q61. A patient diagnosed with severe schizophrenia insists that the local television news anchor is broadcasting secret, personalized warnings directed explicitly at him. The nurse identifies this symptom as which of the following psychopathological signs?

(a) Delusion of grandeur
(b) Delusion of reference
(c) Nihilistic delusion
(d) Somatic delusion

Q62. A patient with a history of chronic alcohol dependence is admitted to the psychiatric ward. Approximately 48 hours after his last drink, he becomes profoundly disoriented, develops severe generalized tremors, tachycardia, and reports seeing "swarms of large insects crawling all over the walls." Which acute condition is this patient experiencing?

(a) Wernicke's encephalopathy
(b) Delirium Tremens (DTs)
(c) Korsakoff's psychosis
(d) Alcohol-induced depressive disorder

Q63. A nurse is caring for a bipolar patient who has been taking Lithium Carbonate for maintenance therapy. The patient presents with severe diarrhea, vomiting, coarse hand tremors, ataxia, and blurred vision. The nurse suspects Lithium toxicity. Which lab value confirms acute toxicity?

(a) Serum Lithium level of 0.4 mEq/L
(b) Serum Lithium level of 0.8 mEq/L
(c) Serum Lithium level of 1.1 mEq/L
(d) Serum Lithium level of 1.8 mEq/L

Q64. A patient experiencing a severe manic episode is admitted to the behavioral unit. She is pacing continuously, speaking rapidly with a flight of ideas, and disrupting other patients. Which nursing intervention is the most appropriate initial action?

(a) Involve her in a highly competitive, fast-paced group board game.
(b) Provide a calm, low-stimulus environment and offer high-calorie finger foods.
(c) Strictly confine her to her bedroom using mechanical restraints to prevent pacing.
(d) Request that she sit quietly in the dayroom and complete a 500-piece jigsaw puzzle.

Q65. Shortly after starting Haloperidol, a patient develops a high fever, muscle rigidity ("lead-pipe" rigidity), altered mental status, and autonomic instability including tachycardia and diaphoresis. What life-threatening complication should the nurse suspect?

(a) Serotonin syndrome

(b) Neuroleptic Malignant Syndrome (NMS)

(c) Acute dystonic reaction

(d) Tardive dyskinesia

Q66. An obsessive-compulsive disorder (OCD) patient is admitted to the unit. The patient spends 45 minutes washing her hands before every single meal, causing skin breakdown. Which nursing action is most therapeutic during the early phase of treatment?

(a) Lock the bathroom doors before meals to completely prevent the handwashing ritual.

(b) Allow the ritual but gradually work with the patient to set realistic time limits on the behavior.

(c) Tell the patient that she will lose her meal privileges if she does not stop washing her hands.

(d) Ignore the behavior completely and assume it will extinguish on its own over time.

Q67. A patient scheduled for Electroconvulsive Therapy (ECT) is being prepared by the nurse. Which pre-procedural medication is routinely administered to minimize vagal stimulation and reduce salivary and bronchial secretions?

(a) Succinylcholine

(b) Atropine sulfate

(c) Propofol

(d) Diazepam

Q68. A patient with borderline personality disorder cuts her wrists after being told she cannot visit the gift shop. Later, she tells the night nurse, "The morning nurse is an absolute angel, but you are a horrible, cruel person." The nurse recognizes this as which defense mechanism?

(a) Projection

(b) Splitting

(c) Rationalization

(d) Sublimation

Q69. A nurse is conducting an admission interview with a patient exhibiting severe depression. Which question is the most critical and prioritized line of inquiry that the nurse must include?

(a) "How long have you been experiencing a decreased appetite?"

(b) "Are you currently having any thoughts of harming or killing yourself?"

(c) "Do you have a family history of major mood disorders?"

(d) "What coping mechanisms have worked well for you in the past?"

Q70. A patient who has been taking Phenelzine, a Monoamine Oxidase Inhibitor (MAOI), attends a party and consumes aged cheese and red wine. She arrives at the emergency room complaining of an explosive occipital headache and chest pain. The nurse understands these symptoms indicate:

(a) An acute hemolytic reaction
(b) A hypertensive crisis due to tyramine interaction
(c) Anticholinergic toxicity syndrome
(d) Normal therapeutic adjustment side effects

Q71. A patient with alcohol dependence is prescribed Disulfiram therapy as part of his relapse prevention plan. What essential education must the nurse provide regarding this medication?

(a) He must completely avoid all forms of alcohol, including hidden sources like cough syrups and mouthwashes.
(b) The drug will completely eliminate all physiological cravings for alcohol within 48 hours.
(c) He should take the medication only on days when he feels an intense urge to drink.
(d) He must maintain a high-protein, low-carbohydrate diet to avoid severe drug toxicity.

Q72. The nurse notes that a patient diagnosed with schizophrenia frequently repeats exactly what the nurse says. For example, when the nurse asks, "How are you today?", the patient responds, "How are you today?". The nurse documents this finding as:

(a) Echopraxia
(b) Echolalia
(c) Neologism
(d) Word salad

Q73. A patient is admitted to the emergency department after a severe panic attack. She is hyperventilating, crying out, and reporting dizziness and tingling sensations in her fingers. Which nursing response is the most therapeutic?

(a) Leave her alone in the room so she has privacy to calm down without an audience.
(b) Stay with her, speak in short, simple sentences, and guide her to take slow, controlled breaths.
(c) Initiate a detailed discussion about the deeper psychological triggers of her anxiety.
(d) Firmly tell her that she needs to stop overreacting because her physical vitals are safe.

Q74. A patient with a somatic symptom disorder is continually requesting diagnostic tests for pancreatic cancer despite multiple negative exams. The nurse recognizes that the primary unconscious psychological drive in this disorder is:

(a) Deliberate simulation of symptoms to achieve tangible legal or financial gain.

(b) The reduction of internal anxiety by converting emotional distress into physical focus.

(c) A manipulative effort to gain control over the hospital's scheduling protocols.

(d) A severe cognitive decline resulting from underlying neurodegenerative changes.

Q75. The nurse is evaluating an adolescent patient with Anorexia Nervosa. Which physiological assessment finding should be prioritized as an indicator of a severe, life-threatening physical complication?

(a) Presence of dry, brittle hair and downy lanugo on the back

(b) Sinus bradycardia (HR 38 bpm) and a prolonged QTc interval on ECG

(c) Amenorrhea lasting for more than six consecutive months

(d) Complaints of localized, mild abdominal bloating following meals

SECTION 6 - NURSING FOUNDATIONS

Q76. A nurse administers an incorrect dose of medication to a patient but immediately reports the error to the charge nurse and fills out an incident report. Which ethical principle is the nurse demonstrating?

(a) Autonomy
(b) Accountability
(c) Beneficence
(d) Non-maleficence

Q77. During a physical assessment, the nurse notes that an adult patient's respiratory rate is 26 breaths per minute, shallow, and regular. How should the nurse document this specific breathing pattern?

(a) Bradypnea
(b) Eupnea
(c) Tachypnea
(d) Apnea

Q78. A nurse is performing a sterile wound dressing change. While opening the sterile kit, the nurse accidentally touches the outer 1-inch border of the sterile drape with un-gloved hands. Which action should the nurse take next?

(a) Discard the entire kit and establish a brand new sterile field.
(b) Continue with the dressing change normally as long as the center remains untouched.
(c) Spray the border with an antiseptic solution to re-sterilize it.
(d) Put on sterile gloves immediately to wipe down that specific edge.

Q79. The nurse is formulating a nursing diagnosis for a patient with limited mobility. Which of the following is written as a correctly formatted, three-part NANDA nursing diagnosis statement?

(a) Impaired physical mobility related to pain as evidenced by reluctance to initiate movement.
(b) Risk for impaired skin integrity related to prolonged bed rest and immobility.
(c) Chronic pain related to osteoarthritis and joint inflammation.
(d) Activity intolerance as evidenced by dyspnea upon ambulation.

Q80. A patient is admitted with suspected pulmonary tuberculosis. Which type of transmission-based precautions must the nurse implement immediately?

(a) Contact precautions
(b) Droplet precautions

(c) Airborne precautions

(d) Standard precautions alone

Q81. A nurse is preparing to administer an intramuscular injection to an obese adult patient. Which injection angle should the nurse use to ensure the medication reaches the muscle tissue layer?

(a) 15 degrees

(b) 45 degrees

(c) 60 degrees

(d) 90 degrees

Q82. While assessing a patient's peripheral pulse, the nurse notes that the pulse is easily obliterated with mild pressure and feels weak or thready. How should the nurse score this pulse volume on a standard 0 to 4+ scale?

(a) 0

(b) 1+

(c) 2+

(d) 3+

Q83. A nurse is caring for an immobile patient and implements a turning schedule every 2 hours. This intervention primarily targets the reduction of which mechanical force responsible for pressure injury development?

(a) Friction

(b) Shearing

(c) Unrelieved pressure

(d) Maceration

Q84. The nurse is taking a manual blood pressure reading. Which phase of the Korotkoff sounds corresponds to the definitive adult diastolic blood pressure reading?

(a) Phase I

(b) Phase II

(c) Phase IV

(d) Phase V

Q85. A patient states, "I am very anxious about my upcoming surgery." The nurse responds by saying, "You are feeling anxious about your surgery?" Which therapeutic communication technique is the nurse utilizing?

(a) Clarification

(b) Reflecting

(c) Summarizing

(d) Focusing

SECTION 7 - NURSING RESEARCH AND STATISTICS

Q86. A researcher is conducting a study to examine the effect of a structured positioning protocol on the development of pressure ulcers in ventilated patients. In this research study, the "structured positioning protocol" serves as which type of variable?

(a) Dependent variable
(b) Independent variable
(c) Extraneous variable
(d) Confounding variable

Q87. A nursing research scholar wishes to evaluate the lived experiences of mothers who have lost an infant to Sudden Infant Death Syndrome (SIDS). Which qualitative research approach is most appropriate for investigating this phenomenon?

(a) Grounded theory
(b) Ethnography
(c) Phenomenology
(d) Historical research

Q88. To evaluate the clinical efficacy of a new post-operative pain-management technique, a researcher selects a sample by picking every 10th patient from an ordered admission roster of 500 individuals, starting at a randomly picked baseline number. What sampling design does this describe?

(a) Simple random sampling
(b) Stratified random sampling
(c) Systematic random sampling
(d) Cluster sampling

Q89. While analyzing data collected from a pediatric oncology unit, a nurse researcher measures the patients' pain levels utilizing a standard Visual Analog Scale (VAS) scored from 0 (No Pain) to 10 (Worst Pain). This variable represents which measurement scale level?

(a) Nominal scale
(b) Ordinal scale
(c) Interval scale
(d) Ratio scale

Q90. A researcher evaluates a newly developed nursing assessment tool by administering it to the same group of critical care nurses on two separate occasions under identical conditions, finding a high correlation between the scores. This procedure evaluates which property of the tool?

(a) Content validity

(b) Criterion validity

(c) Test-retest reliability

(d) Internal consistency

Q91. A nurse researcher is performing a quantitative study and sets the alpha level (α) at 0.05. After statistical computations, the data yields a p-value of 0.012. How should the researcher interpret this statistical result?

(a) Retain the null hypothesis because the p-value is less than the alpha level.

(b) Reject the null hypothesis and conclude that the findings are statistically significant.

(c) Conclude that a Type I error has definitely been committed during data analysis.

(d) Discard the study findings because the sample size was insufficient to reach a p-value of 0.05.

Q92. A research team wants to study the long-term incidence of burnout syndrome among neonatal intensive care unit (NICU) nurses. The team tracks the same cohort of 100 newly hired nurses across a five-year period. Which research design is being utilized?

(a) Cross-sectional design

(b) Retrospective case-control design

(c) Longitudinal cohort design

(d) Methodological design

Q93. Before launching a large-scale, resource-intensive experimental study on an innovative diabetic foot-care protocol, the primary investigator conducts a miniature, small-scale trial with 10 participants to test feasibility and refine data collection steps. This small-scale study is called a:

(a) Quasi-experimental study

(b) Pilot study

(c) Secondary data analysis

(d) Meta-analysis

Q94. When reviewing a research paper's statistical results, the nurse notes that the distribution of blood pressure values from the sample exhibits a perfectly symmetrical, bell-shaped distribution where the mean, median, and mode are all equal. What does this describe?

(a) Positively skewed distribution

(b) Negatively skewed distribution

(c) Bimodal distribution

(d) Normal distribution

Q95. A nurse researcher accidentally publishes identifiable personal information regarding study participants in an open-access nursing journal. Which fundamental ethical principle outlined in the Belmont Report has been directly violated?

(a) Beneficence

(b) Justice

(c) Respect for Persons (Autonomy)

(d) Maleficence

SECTION 8 - GENERAL KNOWLEDGE AND CURRENT AFFAIRS

Q96. Which country officially became the 32nd member state of the North Atlantic Treaty Organization (NATO) following its historic accession process?

(a) Finland
(b) Sweden
(c) Ukraine
(d) Switzerland

Q97. The "R21/Matrix-M" vaccine, which was recommended by the World Health Organization (WHO) and manufactured by the Serum Institute of India, is a high-efficacy vaccine developed to prevent which infectious disease?

(a) Dengue Fever
(b) Tuberculosis
(c) Malaria
(d) Chikungunya

Q98. Who holds the position of the Union Minister of Health and Family Welfare in the Government of India?

(a) Jagat Prakash Nadda
(b) Mansukh Mandaviya
(c) Dr. Harsh Vardhan
(d) Rajnath Singh

Q99. The "Ayushman Bharat Pradhan Mantri Jan Arogya Yojana" (AB-PMJAY), the world's largest government-funded health assurance scheme, provides a health cover of up to how much per family per year for secondary and tertiary care hospitalization?

(a) 2 Lakhs
(b) 3 Lakhs
(c) 5 Lakhs
(d) 10 Lakhs

Q100. Which city is home to the headquarters of the World Health Organization (WHO)?

(a) New York, USA
(b) Geneva, Switzerland
(c) Paris, France
(d) Vienna, Austria

SOLUTIONS

Q1. Correct Answer: (B)

Low tidal volume ventilation with adequate PEEP reduces alveolar overdistension and collapse. This strategy minimizes ventilator-induced lung injury in ARDS patients.

Q2. Correct Answer: (A)

Urine output is the most reliable indicator of adequate tissue perfusion during burn resuscitation. An output of at least 0.5 mL/kg/hr is generally targeted in adults.

Q3. Correct Answer: (C)

Atropine sulfate is the antidote used during cholinergic crisis caused by excess anticholinesterase activity. It helps reverse severe muscarinic symptoms.

Q4. Correct Answer: (B)

Portal hypertension causes increased venous pressure in the esophageal veins. This leads to formation of esophageal varices in liver cirrhosis.

Q5. Correct Answer: (C)

Altered level of consciousness is usually the earliest sign of increased intracranial pressure. Changes in mental status occur before late neurological signs develop.

Q6. Correct Answer: (B)

Damaged kidneys produce insufficient erythropoietin in chronic kidney disease. This results in decreased red blood cell production and anemia.

Q7. Correct Answer: (A)

ST-segment elevation indicates acute transmural myocardial injury. It is a hallmark feature of acute myocardial infarction.

Q8. Correct Answer: (B)

Insulin drives potassium into the cells and can rapidly lower serum potassium levels. Therefore, hypokalemia must be monitored carefully during DKA treatment.

Q9. Correct Answer: (B)

Muscle twitching and positive Chvostek's sign indicate hypocalcemia after thyroid surgery. Calcium gluconate is administered to correct the deficiency.

Q10. Correct Answer: (B)

Tidaling in the water-seal chamber reflects normal intrathoracic pressure changes during respiration. It confirms proper functioning of the chest drainage system.

Q11. Correct Answer: (B)

Sudden chest pain and dyspnea in a patient with DVT strongly suggest pulmonary embolism. It is a medical emergency requiring immediate intervention.

Q12. Correct Answer: (C)

Early ambulation and anticoagulant therapy reduce venous stasis after surgery. These measures effectively prevent venous thromboembolism.

Q13. Correct Answer: (A)

Allopurinol inhibits xanthine oxidase, reducing uric acid formation. It is commonly used for long-term gout management.

Q14. Correct Answer: (A)

Pheochromocytoma causes excessive catecholamine release leading to severe hypertension. Headache, sweating, and tachycardia are common symptoms.

Q15. Correct Answer: (B)

The first priority during a hemolytic transfusion reaction is to stop the transfusion immediately. Normal saline should then be infused through a new IV line.

Q16. Correct Answer: (B)

The infant mortality rate is calculated using deaths under one year per 1000 live births. It reflects the health status and healthcare quality of a community.

Q17. Correct Answer: (B)

Rotavirus vaccine is administered orally under the National Immunization Schedule. It protects infants from severe rotavirus diarrhea.

Q18. Correct Answer: (B)

An epidemic curve visually represents disease occurrence over time. It helps identify the pattern and progression of an outbreak.

Q19. Correct Answer: (B)

DOTS ensures adherence to anti-tubercular therapy and prevents multidrug resistance. Direct observation improves treatment completion rates.

Q20. Correct Answer: (C)

Chlorination destroys pathogenic microorganisms and provides residual protection. It is the most important step in large-scale water disinfection.

Q21. Correct Answer: (C)

Surgical sterilization methods such as vasectomy and tubectomy are permanent contraceptive methods. They provide long-term prevention of pregnancy.

Q22. Correct Answer: (C)

Pulse Polio Immunization aims at complete eradication of poliomyelitis. Eradication means total elimination of disease worldwide.

Q23. Correct Answer: (B)

Blood-contaminated dressings are disposed of in yellow biomedical waste bags. Yellow bags are used for infectious and pathological waste.

Q24. Correct Answer: (C)

Screening programs aim to detect disease early before symptoms become severe. This is an example of secondary prevention.

Q25. Correct Answer: (B)

The epidemiological triad consists of agent, host, and environment. These three factors interact in disease causation.

Q26. Correct Answer: (A)

Rabies wound management requires immediate washing with soap and running water for at least 15 minutes. This significantly reduces viral load at the wound site.

Q27. Correct Answer: (B)

A high dependency ratio means more dependent individuals compared to the working population. This includes children and elderly people.

Q28. Correct Answer: (A)

Iron and Folic Acid supplementation prevents anemia among adolescents. It is an important part of RMNCH+A strategy.

Q29. Correct Answer: (B)

Crude Birth Rate uses the total mid-year population regardless of reproductive status. Hence it is termed a “crude” measure.

Q30. Correct Answer: (C)

Aedes aegypti mosquito transmits dengue fever. It breeds mainly in clean stagnant water.

Q31. Correct Answer: (B)

Placenta previa presents with painless, bright red vaginal bleeding in late pregnancy. The uterus usually remains soft and non-tender.

Q32. Correct Answer: (A)

Late decelerations indicate fetal hypoxia due to uteroplacental insufficiency. Stopping oxytocin and improving maternal oxygenation are immediate priorities.

Q33. Correct Answer: (C)

Postpartum hemorrhage after vaginal delivery is defined as blood loss exceeding 500 mL. It is a major cause of maternal mortality.

Q34. Correct Answer: (C)

A station of +1 means the presenting fetal part is 1 cm below the ischial spines. Positive stations indicate descent into the birth canal.

Q35. Correct Answer: (B)

Loss of reflexes and respiratory depression indicate magnesium sulfate toxicity. Calcium gluconate acts as the antidote.

Q36. Correct Answer: (C)

Quickening is usually first felt by primigravida mothers around 18 to 20 weeks. It refers to the perception of fetal movement.

Q37. Correct Answer: (A)

Breech delivery increases the risk of developmental dysplasia of the hip. Barlow and Ortolani tests help detect hip instability.

Q38. Correct Answer: (C)

Cord lengthening and gush of blood are classic signs of placental separation. These findings occur during the third stage of labor.

Q39. Correct Answer: (B)

Retained dead fetus syndrome can trigger disseminated intravascular coagulation. Tissue thromboplastin release causes clotting abnormalities.

Q40. Correct Answer: (B)

A boggy displaced uterus commonly indicates bladder distension causing uterine atony. Helping the patient void promotes uterine contraction.

Q41. Correct Answer: (B)

Routine Anti-D prophylaxis is administered at 28 weeks in unsensitized Rh-negative mothers. It prevents Rh isoimmunization.

Q42. Correct Answer: (B)

Sudden abdominal pain with loss of contractions suggests uterine rupture. It is an obstetric emergency requiring immediate intervention.

Q43. Correct Answer: (A)

Naegele's rule calculates EDD by adding 7 days and subtracting 3 months from the LMP. For August 20, 2025, the EDD is May 27, 2026.

Q44. Correct Answer: (A)

GTPAL documentation summarizes pregnancy outcomes. It indicates 5 pregnancies, 2 term births, 1 preterm birth, 1 abortion, and 3 living children.

Q45. Correct Answer: (B)

The McRoberts maneuver widens the pelvic outlet during shoulder dystocia. It is the first-line maneuver for relieving impacted shoulders.

Q46. Correct Answer: (B)

At 10 months, infants are usually able to sit steadily without support. Independent walking generally develops later around 12 months.

Q47. Correct Answer: (A)

Failure to pass meconium within 24–48 hours is a classic sign of Hirschsprung's disease. It occurs due to absence of ganglion cells in the colon.

Q48. Correct Answer: (B)

The knee-chest position increases systemic vascular resistance and reduces right-to-left shunting. It helps relieve hypoxic spells in Tetralogy of Fallot.

Q49. Correct Answer: (C)

The vastus lateralis muscle is the safest IM injection site for infants. It is well developed and avoids major nerves and blood vessels.

Q50. Correct Answer: (B)

Projectile non-bilious vomiting with an olive-shaped abdominal mass indicates pyloric stenosis. It is caused by hypertrophy of the pyloric muscle.

Q51. Correct Answer: (B)

Kwashiorkor is characterized by protein deficiency leading to edema. Fluid accumulation commonly occurs in the face and lower limbs.

Q52. Correct Answer: (B)

The Moro reflex is a normal primitive neonatal reflex. It disappears gradually by around 4 to 6 months of age.

Q53. Correct Answer: (C)

Hypertension with headache may indicate severe complications of glomerulonephritis. It requires immediate monitoring and intervention.

Q54. Correct Answer: (A)

Bacterial meningitis typically shows high protein, low glucose, and neutrophilic predominance in CSF. These findings reflect severe bacterial infection.

Q55. Correct Answer: (C)

Currant jelly stools are characteristic of intussusception. They contain mucus mixed with blood.

Q56. Correct Answer: (B)

A barking cough and inspiratory stridor are classic features of croup. It commonly affects young children due to viral infection.

Q57. Correct Answer: (C)

Management of hemarthrosis includes rest, ice, immobilization, and factor VIII replacement. These measures control bleeding and protect the joint.

Q58. Correct Answer: (C)

The first dose of Measles-Rubella vaccine is given at 9 completed months under UIP. It provides protection against measles and rubella infections.

Q59. Correct Answer: (A)

The Pavlik harness maintains proper hip alignment in developmental dysplasia of the hip. It is most effective during early infancy.

Q60. Correct Answer: (B)

Daily body weight is the most sensitive indicator of fluid balance in children. Even small changes reflect fluid loss or gain accurately.

Q61. Correct Answer: (B)

A delusion of reference occurs when a person believes unrelated events have special personal meaning. The patient falsely interprets television broadcasts as directed specifically toward him.

Q62. Correct Answer: (B)

Delirium Tremens is the most severe form of alcohol withdrawal syndrome. It presents with tremors, hallucinations, confusion, and autonomic instability.

Q63. Correct Answer: (D)

Lithium toxicity usually occurs when serum levels exceed 1.5 mEq/L. Neurological symptoms like ataxia and coarse tremors are warning signs.

Q64. Correct Answer: (B)

A calm, low-stimulus environment helps reduce manic agitation and hyperactivity. Finger foods help maintain nutrition in restless patients.

Q65. Correct Answer: (B)

Neuroleptic Malignant Syndrome is a life-threatening reaction to antipsychotic medications. It causes fever, muscle rigidity, and autonomic dysfunction.

Q66. Correct Answer: (B)

Gradually limiting compulsive rituals reduces anxiety without overwhelming the patient. Abrupt prevention may increase distress and resistance.

Q67. Correct Answer: (B)

Atropine sulfate is administered before ECT to reduce secretions and vagal stimulation. It helps prevent aspiration and bradycardia.

Q68. Correct Answer: (B)

Splitting is a defense mechanism where people are viewed as completely good or completely bad. It is commonly observed in borderline personality disorder.

Q69. Correct Answer: (B)

Assessment of suicidal thoughts is the highest priority in severe depression. Direct questioning helps identify immediate risk of self-harm.

Q70. Correct Answer: (B)

MAOIs interact with tyramine-rich foods causing hypertensive crisis. Symptoms include severe headache, chest pain, and hypertension.

Q71. Correct Answer: (A)

Disulfiram reacts with alcohol and causes severe unpleasant symptoms. Patients must avoid all alcohol-containing products.

Q72. Correct Answer: (B)

Echolalia refers to repetition of another person's spoken words. It is commonly seen in schizophrenia and autism spectrum disorders.

Q73. Correct Answer: (B)

During panic attacks, the nurse should remain with the patient and provide reassurance. Slow breathing techniques help control hyperventilation.

Q74. Correct Answer: (B)

Somatic symptom disorder converts emotional distress into physical complaints unconsciously. This reduces psychological anxiety temporarily.

Q75. Correct Answer: (B)

Severe bradycardia and prolonged QT interval are dangerous complications of anorexia nervosa. They may lead to fatal cardiac arrhythmias.

Q76. Correct Answer: (B)

Accountability means accepting responsibility for one's professional actions and errors. Reporting medication errors promptly promotes patient safety.

Q77. Correct Answer: (C)

A respiratory rate above the normal adult range indicates tachypnea. Shallow and rapid breathing is commonly seen in respiratory distress.

Q78. Correct Answer: (B)

The outer 1-inch border of a sterile field is considered contaminated. Touching only the border does not contaminate the sterile center.

Q79. Correct Answer: (A)

A three-part nursing diagnosis includes problem, etiology, and symptoms. This format follows standard NANDA guidelines.

Q80. Correct Answer: (C)

Pulmonary tuberculosis spreads through airborne droplet nuclei. Airborne precautions require an N95 mask and negative-pressure room.

Q81. Correct Answer: (D)

Intramuscular injections are administered at a 90-degree angle. This ensures the medication reaches deep muscle tissue.

Q82. Correct Answer: (B)

A weak and thready pulse is graded as 1+ on the pulse scale. It indicates reduced pulse strength.

Q83. Correct Answer: (C)

Frequent repositioning relieves prolonged pressure over bony prominences. This helps prevent pressure ulcer formation.

Q84. Correct Answer: (D)

Phase V Korotkoff sound represents disappearance of sounds and indicates diastolic pressure. It is used in adult blood pressure measurement.

Q85. Correct Answer: (B)

Reflecting repeats or directs the patient's feelings back for clarification. It encourages expression of emotions and concerns.

Q86. Correct Answer: (B)

The independent variable is the factor manipulated by the researcher. Here, the structured positioning protocol is the intervention being tested.

Q87. Correct Answer: (C)

Phenomenology explores the lived experiences of individuals. It is commonly used in qualitative nursing research.

Q88. Correct Answer: (C)

Systematic random sampling selects subjects at fixed intervals from a list. The starting point is chosen randomly.

Q89. Correct Answer: (B)

Pain scales rank intensity in an ordered manner without equal intervals. Therefore, the Visual Analog Scale is considered ordinal.

Q90. Correct Answer: (C)

Test-retest reliability measures consistency of results over time. High correlation indicates stability of the research tool.

Q91. Correct Answer: (B)

A p-value less than the alpha level indicates statistical significance. Hence, the null hypothesis is rejected.

Q92. Correct Answer: (C)

A longitudinal cohort study follows the same group over an extended period. It helps identify long-term outcomes and trends.

Q93. Correct Answer: (B)

A pilot study is a small preliminary trial conducted before the main research. It helps assess feasibility and refine methodology.

Q94. Correct Answer: (D)

A normal distribution is symmetrical with equal mean, median, and mode. It forms the classic bell-shaped curve.

Q95. Correct Answer: (C)

Respect for persons includes maintaining participant privacy and confidentiality. Publishing identifiable information violates this ethical principle.

Q96. Correct Answer: (B)

Sweden officially became the 32nd member of NATO in March 2024. It ended more than two centuries of military non-alignment.

Q97. Correct Answer: (C)

R21/Matrix-M is a malaria vaccine recommended by WHO. It is manufactured by the Serum Institute of India.

Q98. Correct Answer: (A)

Jagat Prakash Nadda serves as the Union Minister of Health and Family Welfare. He assumed office after the 2024 Lok Sabha elections.

Q99. Correct Answer: (C)

Ayushman Bharat PM-JAY provides health insurance coverage up to 5 Lakhs per family annually. It is one of the world's largest government-funded healthcare schemes.

Q100. Correct Answer: (B)

The headquarters of the World Health Organization is located in Geneva, Switzerland. WHO coordinates international public health activities globally.