NORCET PYQS

Norcet 10 prelims

Q1 "The silence was deafening." Identify the figure of speech used in this expression.
(A) Simile
(B) Metaphor
(C) Hyperbole
(D) Personification

Q2 In the sentence "The wind whispered through the trees," which literary device is applied?
(A) Simile
(B) Metaphor
(C) Hyperbole
(D) Personification

Q3 Which was the first female Indian classical dancer to be honored with the Padma Bhushan?
(A) Yamini Krishnamurthy
(B) Rukmini Devi Arundale
(C) Sonal Mansingh
(D) Mallika Sarabhai

Q4 Find the odd one out based on the relationship between the professional and their primary tool/environment:
(A) Driver – Road
(B) Teacher – Chalk
(C) Soldier – Gun
(D) Farmer – Plough

Q5 What is the primary purpose of a CAPTCHA in digital systems?
(A) To improve the user interface
(B) To differentiate between humans and automated bots
(C) To encrypt user passwords
(D) To increase website loading speed

Q6 Which shortcut key is universally used to refresh a web page?
(A) F2 (B) F5
(C) F7 (D) F11

Q7 Find the next term in the series: B, E, I, N, ...
(A) S (B) T
(C) R (D) U

Q8 If January 1st, 2025, falls on a Wednesday, what day will it be on January 8th, 2025?
(A) Tuesday (B) Wednesday
(C) Thursday (D) Monday

Q9 What is the official name of the Parliament of Japan?
(A) Knesset (B) Diet
(C) Congress (D) Duma

Q10 The "Blue Revolution" in India is specifically related to the growth of which sector?
(A) Hydroelectric energy
(B) Petroleum production
(C) Fisheries and aquaculture
(D) Space research

Q11 Which Indian city is famously known as the "City of Oceanography"?
(A) Kochi (B) Panaji
(C) Visakhapatnam (D) Chennai

Q12 What is the meaning of the word "Amiable"?
(A) Angry (B) Friendly
(C) Ambitious (D) Careless

Q13 A nurse notes zero urine output 4 hours after catheterization. What is the priority nursing action?

(A) Immediately notify the physician
(B) Flush the catheter with normal saline
(C) Inspect the tubing for kinks or obstructions
(D) Increase the patient's oral fluid intake

Q14 A client presents with early morning awakening, loss of appetite, and no significant mood swings. What is the most likely differential diagnosis?
(A) Mild depression
(B) Atypical depression
(C) Melancholic depression
(D) Severe depression

Q15 Which has the fastest storage access?
(A) Floppy Disk (B) Hard Drive
(C) SSD (D) CD-ROM

Q16 She said, "Where are you going?" What will be the indirect speech of this?
(A) She asked where I was going.
(B) She said where are you going.
(C) She asked where are you going.
(D) She told me where I was going.

Q17 P, Q, R, S, T, U are sitting in a circle. Q is sitting 2nd left to P. T is between Q and R. S is not the neighbour of P. Who is sitting right to R?
(A) S (B) Q
(C) T (D) U

Q18 Match the pair (Book : Read; Pen : ?)
(A) Write
(B) Fight
(C) Pen fight
(D) Scratch your ear

Q19 Rearrange the alphabet into a meaningful word: CIFIAPC
(A) PACIFIER (B) PACIFIC
(C) PRESTIGIOUS (D) PURIFIER

Q20 Basel Convention is related to:
(A) Ozone depletion
(B) Air pollution
(C) Biohazardous and hazardous waste management
(D) Noise pollution

Q21 A psychiatric patient has a signed "Advance Directive" refusing ECT. However, he is now agitated and posing a danger to others. What is the legally appropriate next step?
(A) Refer to the Mental Health Review Board / psychiatric board member
(B) Strictly follow the Advance Directive
(C) Consult the family for immediate consent
(D) Ignore the directive as the patient's status has changed

Q22 Using the standard pediatric fluid formula, calculate the 24-hour maintenance fluid for an 8-year-old child weighing 23 kg:
(A) 1500 mL (B) 1560 mL
(C) 1600 mL (D) 1650 mL

Q23 Post-abdominal surgery, a patient develops a "board-like," rigid abdomen and a BP of 80/60 mmHg. What is the nurse's priority action?
(A) Administer prescribed analgesics for pain
(B) Place the patient in a semi-Fowler's position
(C) Immediately notify the surgeon
(D) Start a rapid IV fluid bolus

Q24 Following a lumbar puncture and subsequent spinal analgesia, a patient complains of a headache. What is the most appropriate nursing intervention?
(A) Lie flat, provide a quiet environment, and encourage hydration
(B) Lie on the side, provide a quiet environment, and encourage hydration
(C) Inform the physician immediately
(D) Place the patient in semi-Fowler's position

Q25 After craniopharyngioma surgery, what needs to be closely assessed?
(A) Head circumference
(B) Urinary specific gravity
(C) Abdominal girth
(D) Blood glucose monitoring

Q26 A client is grimacing and is in pain but not able to speak. Which pain scale is most appropriate?
(A) Numerical scale
(B) Behavioral scale
(C) Observe the patient
(D) Administer pain medication

Q27 Community Assessment Model and Newman's Model were developed by:
(A) Florence Nightingale
(B) Betty Neuman
(C) Sigmund Freud
(D) Abraham Maslow

Q28 Insertion depth of suppository:
(A) 1 inch (B) 2 inch
(C) 3 inch (D) 4 inch

Q29 A child has been ordered medication as 200 mg q8h. The weight of the patient is 50 lbs. The recommended safe dose range is 2–20 mg/kg/dose. What is the safe range that can be administered?
(A) 45–454 mg/dose
(B) 22–227 mg/dose
(C) 100–200 mg/dose
(D) 10–20 mg/dose

Q30 A patient with sepsis develops fever (39°F), pulse 120, BP 80/60 mm HG and elevated lactate. According to the sepsis bundle, what will be the initial treatment?
(A) Start isotonic fluid
(B) Start broad-spectrum antibiotic
(C) Assess signs of infection
(D) Start vasopressor immediately

Q31 A patient who is unable to speak shows grimacing and anxiety. How should the nurse assess the pain level in such clients?
(A) Use numerical rating scale
(B) Use behavioral scale
(C) Ignore nonverbal signs
(D) Assess only vital signs

Q32 A 3-year-old child who has been toilet trained starts bedwetting after hospitalization. Which statement best describes this?
(A) Ineffective toilet training
(B) Regression due to stress
(C) Urinary tract infection
(D) Normal growth pattern

Q33 What is the change seen in TFR from NFHS-4 to NFHS-5?
(A) TFR increased from 2.2 to 2.4
(B) TFR decreased from 2.4 to 2.2
(C) TFR fluctuating between 1.8 to 2.0
(D) TFR is constant at 2.1

Q34 A patient with pre-eclampsia is on $MgSO_4$ therapy. Which finding indicates toxicity?
(A) Respiratory rate 17/min
(B) Urinary output 10 mL/hr
(C) Deep tendon reflexes +3
(D) Fetal heart rate 136 bpm

Q35 A patient has a systolic BP of 120 mmHg with a heart rate of 80 bpm. What will be the shock index?
(A) 1.5 (B) 0.6
(C) 0.5 (D) 1.0

Q36 Surgical incision suture image:



(A) Surgical site infection
(B) Mild wound dehiscence
(C) Normal healing
(D) Hematoma formation

Q37 A 60-year-old male with Type 2 DM presents with tachycardia, diaphoresis, abdominal pain, Kussmaul breathing, and blood sugar 520 mg/dL. What is the initial management?
(A) Give insulin bolus as prescribed
(B) Sodium bicarbonate correction
(C) Start isotonic fluid immediately
(D) Check for repeat RBS

Q38 A female is complaining of lower abdominal pain and is scheduled for pelvic USG. Which instruction should be given?
(A) Keep your bladder full
(B) Bring at least one attender along with you
(C) Don't eat anything after 10 PM
(D) No fluid intake before test

Q39 An alcoholic patient on alcohol abstinence is showing withdrawal symptoms. Which clinical signs indicate delirium tremens?
(A) Hypertension, tremor & hallucinations
(B) Hypotension & hallucinations
(C) Bradycardia & sedation
(D) Fever only

Q40 The device shown in the image is used for:



(A) To measure CO_2 (B) To measure O_2
(C) To measure CO (D) To measure O_3

Q41 In the community, what is meant by "unmet need for family planning"?
(A) Women who are infertile and not using contraception
(B) Women who are pregnant and using contraceptives
(C) Women who are fecund, sexually active, want to space/limit births but are not using any modern contraceptive method
(D) Women who have completed family size and are sterilized

Q42 A patient underwent thoracentesis. Post-procedure, the patient complains of sudden chest pain, shortness of breath, and unilateral absent breath sounds. What is the most likely finding?
(A) Pneumothorax (B) Bronchospasm
(C) Atelectasis (D) Fibrosis

Q43 Which finding is suggestive of pleural effusion on percussion?
(A) Hyperresonance (B) Dullness
(C) Rales (D) Absent

Q44 Which of the following drugs will damage the 8th cranial nerve?
(A) Isoniazid (B) Ethambutol
(C) Rifampicin (D) Streptomycin

Q45 A child has been vaccinated for BCG. After 6 months, there is no scar formation. What advice will you give to the parents?
(A) Do IGRA test
(B) Do Mantoux test
(C) Your child has to take the vaccine again
(D) No need to revaccinate

Q46 A client was admitted for schizophrenia but the client states, "I have been admitted for lower

back pain; otherwise, I am absolutely healthy." Which level of insight is present?
(A) 1 (B) 2
(C) 3 (D) 4

Q47 A patient on DVT prophylaxis has been ordered heparin infusion: D5W 250 mL with heparin 12,500 units. The advised rate is 18 mL/hr. How many units will the patient receive per hour?
(A) 600 units/hr (B) 900 units/hr
(C) 800 units/hr (D) 1100 units/hr

Q48 A patient is advised Tab 0.25 gm. Available tablets are 125 mg. How many tablets will be given?
(A) 1 tab (B) ½ tab
(C) 2 tab (D) 4 tab

Q49 A mother complains that her child has loose stools but is otherwise healthy, with no weight loss and normal thirst. What will be the advice for ORS intake?
(A) 50–100 mL ORS per loose stool
(B) 100–200 mL ORS per loose stool
(C) 30–70 mL ORS per loose stool
(D) Give as much ORS as needed

Q50 Which of the following findings supports molar pregnancy?
(A) Decreased uterine size compared to gestational age
(B) Decreased β-hCG level
(C) Vaginal bleeding with grape-like vesicles
(D) Mild nausea and vomiting

Q51 A patient in active labour has abdominal pain, a horizontal groove on the abdomen, and a soft lower uterine segment. What finding suggests impending uterine rupture?
(A) Pathological Bandl's ring
(B) Increasing fetal heart rate variability
(C) Mild uterine contractions
(D) Cervical dilation 5 cm

Q52 A female develops sudden unilateral pelvic pain and complains of shoulder pain. Kehr's sign is suspected. What could be the possible cause?
(A) Ruptured ectopic pregnancy
(B) Ovarian cyst infection
(C) Urinary tract infection
(D) Appendicitis

Q53 Following amniotomy, which parameter should be assessed first?
(A) Fetal heart rate
(B) Maternal heart rate
(C) Uterine contractions
(D) Blood pressure

Q54 A sinusoidal pattern was observed on CTG for 20 minutes. What is the interpretation?
(A) Severe fetal anemia
(B) Normal fetal pattern
(C) Uterine hyperstimulation
(D) Fetal sleep cycle

Q55 A patient undergoing normal vaginal delivery is experiencing pain during episiotomy suturing. She requests local anesthesia, but the nurse refuses and tells her to lie down quietly. What type of behavior is shown by the nurse?
(A) Failure to provide autonomy-based care
(B) Neglect and abuse
(C) Patient-centered care
(D) Therapeutic communication

Q56 While preparing neoplastic (chemotherapy) medication, what will ensure the safety of the healthcare worker?
(A) At eye level
(B) Below eye level
(C) Above eye level
(D) As safe as possible

Q57 **Assertion:** Nurse has to check whether the consent is informed.
Reason: It is the responsibility of the nurse to explain the risks and outcomes of the procedure.
(A) Assertion is correct & reason is also correct
(B) Reason is correct only
(C) Assertion is wrong
(D) Assertion is correct reason is wrong

Q58 Maximum population explosion occurred in India in which year?
(A) Between year 1951–1981
(B) Between year 1901–1931
(C) Between year 1981–2011
(D) Between year 2011–2021

Q59 A female is going for delivery in the labour room under the Lakshya (Lashya) program. Which of the following is true?
(A) Restricting partner entry to room to maintain sterility
(B) Early cord clamping
(C) Late cord clamping
(D) Routine episiotomy for all deliveries

Q60 A patient is watching TV and says that the anchor is sending signals to him. What is the finding in this patient?
(A) Delusion of reference
(B) Illusion
(C) Thought broadcasting
(D) Hallucination

Q61 A patient with diabetes mellitus is diaphoretic and lethargic. Blood sugar is 48 mg/dL, but the patient is conscious and able to swallow. What is the next management?
(A) Give insulin bolus
(B) Give dextrose 10% IV
(C) Give 15–20 g of oral glucose (4 candy tablets)
(D) Observe and recheck after 1 hour

Q62 Which of the following statements regarding blood transfusion is NOT correct?
(A) Give RL after blood transfusion
(B) PRBC is the most commonly used blood product
(C) FFP should be given within 24 hours of thawing
(D) There is lower chance of fluid overload with PRBC

Q63 You have to insert an NG tube. How will you measure the depth of the tube for insertion?
(A) From nose to pinna to nipple
(B) From nose to earlobe to umbilicus
(C) From nose to earlobe to xiphoid process
(D) From angle of mouth to ear to xiphoid process

Q64 A patient is prescribed nicotine gum for smoking cessation. What teaching should be given regarding its use?
(A) Chew the tablet ASAP
(B) Swallow saliva for better results
(C) "Park" the gum between the buccal cavity and cheek and let it absorb slowly
(D) Drink coffee immediately to enhance absorption

Q65 Calculate the heart rate from the given ECG strip:



(A) 70 (B) 45
(C) 42 (D) 62

Q66 For assessing the maxillary sinuses, where will the doctor place the fingers?
(A) Below the eye
(B) Below the cheeks
(C) At the eye
(D) At nasal bridge

Q67 CPAP with inadequate expiratory valve will result in?
(A) CO_2 retention
(B) Hypoxia
(C) Hypotension
(D) Hyperventilation

Q68 A pregnant woman is undergoing labor and having contractions. How will you measure the duration of contractions?
(A) From the start of one contraction till the start of the next
(B) From the start of one contraction till the end of another contraction
(C) From the peak of one contraction to the peak of next contraction
(D) From the end of one contraction to the start of next

Q69 Under couple protection, what is the correct statement?
(A) Couple protection rate increased from 54% (NFHS-4) to 67% (NFHS-5)
(B) Couple protection rate decreased from 67% (NFHS-4) to 54% (NFHS-5)
(C) Couple protection rate remained constant at 60%
(D) Couple protection rate is unrelated to NFHS survey

Q70 A patient with chronic liver disease— which of the following is NOT a contributing factor in the development of ascites?
(A) Increased aldosterone
(B) Increased ADH
(C) Decreased oncotic pressure
(D) Increased blood flow to the liver

Q71 A woman during the second stage of labour has the fetal head tightly bulging at the perineum. What is the next immediate action?
(A) Perform Ritgen's maneuver and support the perineum while extending the fetal head
(B) Call for help
(C) Perform McRobert's maneuver (flex the maternal thighs)
(D) Apply fundal pressure

Q72 A 24-year-old patient has early morning awakening and loss of appetite with no change in mood. What is the most likely differential diagnosis?
(A) Melancholic depression
(B) Atypical depression
(C) Psychotic depression
(D) Mild depression

Q73 A known case of Type 2 DM underwent CABG surgery for coronary artery disease. Post-surgery, the patient develops renal tubular necrosis (acute kidney injury) with creatinine 3.8 and urine output 28 mL/day. According to RIFLE criteria, which category does this patient fall into?
(A) Risk (B) Injury
(C) Failure (D) Loss

Q74 A patient is aggressive and restless. What is the best calm approach by the nurse to prevent escalation?
(A) Speak calmly and set limits
(B) Chemical restraint
(C) Physical restraint
(D) Ignore the patient

Q75 There is an increase in needle-stick injuries. Where does the problem most likely lie?
(A) Use proper bins
(B) Improper waste segregation at the point of generation
(C) Generation of large waste
(D) Excess use of gloves

Q76

A patient with schizophrenia is having hallucinations but is aware of them and does not want treatment. What will be the next step in management?
(A) Forcibly treat the patient
(B) Accept the patient's refusal for treatment
(C) Admit the patient under Section 89
(D) Use physical restraints immediately

Q77 Pediatric Early Warning Score (PEWS) of 3 was observed. What should be the next step?
(A) Inform emergency team / resuscitation team
(B) Inform senior nurse/doctor
(C) Do nothing
(D) Inform attendant only

Q78 You are a nurse working at a PHC. A patient with anxiety and restlessness needs referral to a higher centre. Which tele-system provides 24×7 mental health services across India?
(A) NIMHANS 24×7 Helpline
(B) Mental Health Action Network Centre (MANC)
(C) e-Sanjeevani (Teleconsultation)
(D) Tele-MANAS

Q79 A lactating female is planned for iodine-131 isotope radiation therapy. What teaching should be given regarding feeding the newborn?
(A) Pump and discard for initial 7 days
(B) No issues—continue breastfeeding
(C) Refrain from breastfeeding for initial 24 hours
(D) She cannot breastfeed after this therapy

Q80 A patient asks what to do if a plaster cast gets wet. What advice should be given by the nursing officer?
(A) Use a hairdryer on cool setting
(B) Use a heating pad
(C) Expose it to sunlight
(D) Do nothing

Q81 During resuscitation of a patient with 50% TBSA burns using the Parkland formula, after 12 hours, HR = 120 bpm, BP = 112/80 mmHg, increased hematocrit, and decreased urine output are noted. What does this indicate?
(A) Transition from acute phase
(B) Inadequate intravascular volume
(C) Adequate intravascular volume
(D) Fluid overload

Q82 A patient comes to the hospital with physical symptoms, but investigations and reports are normal. What is the most likely diagnosis?
(A) Somatic disorder
(B) Hypochondriasis
(C) Malingering
(D) Factitious disorder

Q83 For giving ear drops to a 2-year-old child with an ear infection, what is the correct method?
(A) Tell the child that it is given for ear infection
(B) Massage the forehead
(C) After instillation tilt the head on the affected side
(D) Pull the pinna back and down

Q84 A pregnant woman reports increased episodes of heartburn in early pregnancy. The nurse explains that this is due to:
(A) Increased pressure on the stomach from the growing uterus
(B) Increased production of gastric acid
(C) Decreased motility of the gut
(D) Loosening of the LES due to pregnancy hormones

Q85 Time-out refers to:
(A) Confirming patient identity and surgical site marks
(B) Resting time for staff
(C) Counting the number of instruments

(D) Anesthesia documentation

Q86 A post-surgical patient has abdominal distension. During physical examination, which finding is abnormal and needs attention?
(A) Bowel sounds every 10 seconds
(B) Dullness over the right quadrant
(C) Change in percussion finding on position change
(D) Symmetrical abdominal movement

Q87 Which of the following is a red flag symptom?
(A) Ankle edema at the end of the day
(B) New onset of puffiness on face and inability to remove ring
(C) Nausea and vomiting
(D) Mild tiredness

Q88 An adolescent girl who has SLE should be advised regarding:
(A) Use sunscreen daily for rash
(B) Hide the rashes under makeup
(C) Avoid all physical activity
(D) Stop medications when symptoms reduce

Q89 A 10-year-old child was advised to use an MDI (Metered Dose Inhaler). Which action by the client needs further teaching?
(A) Hold breath for 20–30 seconds
(B) At the end of inspiration press the canister
(C) Breathe slowly for 3–5 seconds
(D) Shake the inhaler before use

Q90 A nurse stops TPN suddenly, and the patient develops diaphoresis and tachycardia. This indicates:
(A) Hypoglycemia (B) Fluid overload
(C) Hyperglycemia (D) Hypertension

Q91 Lateral curvature of the legs indicates?
(A) Genu varus (B) Genu valgum
(C) Talipes varus (D) Talipes varum

Q92 Following a lumbar puncture with spinal anesthesia, a patient develops a headache. What is the most appropriate initial nursing intervention?
(A) Lie flat in bed, provide a quiet environment, and encourage hydration
(B) Lie on the side, provide a quiet environment, and encourage hydration
(C) Inform the physician immediately
(D) Place the patient in Semi-Fowler's position and ensure comfort

Q93 **Which nursing model views the client as an open system interacting with internal and external stressors?**
(A) Orem's Self-Care Model
(B) Roy Adaptation Model
(C) Neuman's Systems Model
(D) Peplau's Interpersonal Model

Q94 **A nurse teaching a woman regarding breast feeding.Which statement is incorrect about breast feeding?**
(A) More areola visible above
(B) Baby's chin is touching the breast
(C) Baby's lower lips turned inward
(D) Baby's mouth is wide open

Q95 **What is the correct statement regarding pre-oxygenation in children before intubation?**

(A) Hyper-oxygenate the child with high flow oxygen for 1 minutes
(B) Hyper-oxygenate the child with low flow oxygen for 1 minutes
(C) Hyper-oxygenate the child with high flow oxygen for 3 minutes
(D) Hyper-oxygenate the child with low flow oxygen for 3 minutes

Q96

A pregnant woman presented in ANC clinic with twins.After history reavels that woman had delivered a child 2 years before at 36 gestation and also tells there is no any history of abortion and medication induced fetal demise. What is the GTPAL score?

(A) G=2, T=0, P=2, A-0, L=1
(B) G=2, T=0, P=1, A-0, L=1
(C) G=3, T=0, P=1, A-0, L=1
(D) G=2, T=0, P=2, A-0, L=2

Q97 **The recommended dose of iron and folic acid for adolescent girls under Weekly Iron & Folic Acid Supplementation (WIFS) program?**

(A) 100 mg elemental iron and 500 mcg folic acid
(B) 60 mg elemental iron and 500 mcg folic acid
(C) 100 mcg elemental iron and 500 mcg folic acid
(D) 500 mg elemental iron and 100 mcg folic acid

Q98 **Which is an example of age independed antropometrry?**

(A) Height
(B) Weight
(C) Head circumference
(D) Mid Upper arm circumference

Q99 A 6-month-old infant is brought to the emergency department with sudden onset coughing and difficulty breathing after feeding. The infant is conscious but unable to cry effectively. What is the most appropriate initial management?

(A) Perform abdominal thrusts (Heimlich maneuver)
(B) Give 5 back blows followed by 5 chest thrusts
(C) Start cardiopulmonary resuscitation (CPR) immediately
(D) Perform blind finger sweep of the mouth

Q100 Which of the following correctly represents the stages of Active Management of the Third Stage of Labour (AMTSL) to prevent postpartum hemorrhage?

(A) Uterine massage → Controlled cord traction → Uterotonic drugs
(B) Controlled cord traction → Uterine massage → Uterotonic drugs
(C) Uterotonic drugs → Controlled cord traction → Uterine massage
(D) Controlled cord traction → Uterotonic drugs → Uterine massage

Answer Key

Q1	(C)
Q2	(D)
Q3	(B)
Q4	(A)
Q5	(B)
Q6	(B)
Q7	(B)
Q8	(B)
Q9	(B)
Q10	(C)
Q11	(C)
Q12	(B)
Q13	(C)
Q14	(C)
Q15	(C)
Q16	(A)
Q17	(D)
Q18	(A)
Q19	(B)
Q20	(C)
Q21	(A)
Q22	(B)
Q23	(C)
Q24	(A)
Q25	(B)
Q26	(B)
Q27	(B)
Q28	(B)
Q29	(A)
Q30	(A)
Q31	(B)
Q32	(B)
Q33	(B)
Q34	(B)
Q35	(B)
Q36	(A)
Q37	(C)
Q38	(A)
Q39	(A)
Q40	(A)
Q41	(C)
Q42	(A)
Q43	(B)
Q44	(D)
Q45	(D)
Q46	(A)
Q47	(B)
Q48	(C)
Q49	(A)
Q50	(C)
Q51	(A)
Q52	(A)
Q53	(A)
Q54	(A)

Q55 (B)
Q56 (B)
Q57 (D)
Q58 (A)
Q59 (C)
Q60 (A)
Q61 (C)
Q62 (A)
Q63 (C)
Q64 (C)
Q65 (D)
Q66 (B)
Q67 (A)
Q68 (D)
Q69 (A)
Q70 (D)
Q71 (A)
Q72 (A)
Q73 (C)
Q74 (A)
Q75 (B)
Q76 (B)
Q77 (B)
Q78 (D)
Q79 (D)
Q80 (A)
Q81 (B)
Q82 (A)
Q83 (D)
Q84 (D)
Q85 (A)
Q86 (C)
Q87 (B)
Q88 (A)
Q89 (B)
Q90 (A)
Q91 (A)
Q92 (A)
Q93 (C)
Q94 (C)
Q95 (C)
Q96 (B)
Q97 (C)
Q98 (D)
Q99 (B)
Q100 (C)

Hints & Solutions

Q1 **Text Solution:**

Correct Answer

The correct answer is C. Hyperbole.

"The silence was deafening" is an example of hyperbole because it uses an exaggerated statement to emphasize how intense or uncomfortable the silence felt. Silence cannot literally be "deafening," so the phrase creates a strong emotional effect through exaggeration.

Concept

A figure of speech is a special way of using words to make language more expressive and interesting. Hyperbole is one type of figure of speech in which a speaker intentionally exaggerates something for emphasis or dramatic effect.

In the sentence "The silence was deafening," the writer exaggerates the power of silence to show that the silence felt extremely heavy, awkward, or emotionally intense. The statement is not meant to be taken literally. Instead, it helps the reader imagine the situation more vividly.

Example of hyperbole:

- "I have told you a million times."
- "This bag weighs a ton."

Both statements are exaggerated and not factually true.

Important Points

1. Hyperbole means exaggeration used for emphasis.
2. It is not intended to be understood literally.
3. Hyperbole adds emotional intensity and dramatic effect.
4. "Deafening silence" highlights how noticeable and powerful the silence felt.
5. Writers and speakers commonly use hyperbole in literature and daily conversation.

Confusing Points

Difference between Hyperbole and Metaphor

- Hyperbole exaggerates something.
- Metaphor compares two unlike things directly.

Example:

- Hyperbole: "I am dying of hunger."
- Metaphor: "Time is a thief."

"The silence was deafening" may seem metaphorical, but the main effect is exaggeration, so it is classified as hyperbole.

Difference between Hyperbole and Personification

- Personification gives human qualities to non-human things.
- Silence is not acting like a human here; it is being exaggerated in intensity.

Therefore, the best answer is Hyperbole.

Q2 **Text Solution:**

Correct Answer

The correct answer is **D. Personification**.

Concept

Personification is a literary device in which human qualities or actions are given to non-human objects, animals, or natural forces. In the sentence "The wind whispered through the trees," the wind is described as "whispering," which is a human action. Wind cannot literally whisper, but the writer uses this expression to create a soft and gentle image in the reader's mind.

Important Point

- Human action is given to the wind.

- It creates vivid imagination and beauty in language.
- Common in poetry and descriptive writing.

Confusing Point
It is not a metaphor or simile because no comparison is made. It is specifically personification.

Q3 **Text Solution:**
he correct answer is **B. Rukmini Devi Arundale**. She was the first female Indian classical dancer to receive the **Padma Bhushan** in 1956 for her outstanding contribution to Bharatanatyam and Indian culture. She also founded the famous Kalakshetra Foundation, which played a major role in preserving Indian classical dance and arts

Q4 **Text Solution:**
Correct Answer
The correct answer is A. Driver – Road.
Concept
In options B, C, and D, the second word represents a tool used by the professional:

- Teacher → Chalk
- Soldier → Gun
- Farmer → Plough

However, in option A:

- Driver → Road

"Road" is not a tool; it is the environment or place where the driver works. Therefore, it does not match the relationship shown in the other options.
Important Point

- Three options show profession → tool relationship.
- One option shows profession → workplace/environment relationship.

Confusing Point
Some students may think a road is essential for a driver, but it is not a tool used by the driver. Hence, option A is the odd one out.

Q5 **Text Solution:**
Correct Answer
The correct answer is **B. To differentiate between humans and automated bots**.
Concept
A CAPTCHA is a security feature used on websites and digital systems to check whether the user is a real human or an automated program (bot). CAPTCHA stands for **Completely Automated Public Turing test to tell Computers and Humans Apart**. It helps prevent spam, fake registrations, hacking attempts, and automated misuse of online services.
Common CAPTCHA tasks include:

- Selecting images
- Typing distorted letters
- Solving simple puzzles

These tasks are usually easy for humans but difficult for bots.
Important Point

- CAPTCHA improves website security.
- It protects forms, login pages, and online services from automated attacks.
- Widely used in banking, email, and social media websites.

Confusing Point
CAPTCHA does not encrypt passwords or increase website speed. Its main function is user verification and bot prevention.

Q6 **Text Solution:**
Correct Answer

The correct answer is B. F5.
Concept
The F5 key is commonly used to refresh or reload a web page in most web browsers such as Google Chrome, Mozilla Firefox, and Microsoft Edge. Refreshing a page reloads the latest content from the website and helps update information displayed on the screen.
For example:

- Reloading a webpage if it is not loading properly
- Updating new messages or notifications
- Viewing recent changes on a website

Important Point

- F5 = Refresh/Reload webpage
- Works in most browsers and many applications
- Helps display updated content

Confusing Point

- F11 is used for full-screen mode.
- F2 is mainly used for renaming files.
- F7 is often used for spell check or caret browsing in some programs.

Q7 **Text Solution:**
Correct Answer
The correct answer is **B. T**.
Concept
Observe the alphabetical positions of the letters:

- B = 2
- E = 5 → +3
- I = 9 → +4
- N = 14 → +5

The pattern increases by consecutive numbers:
+3, +4, +5
So, the next increase should be:
14 + 6 = 20
The 20th letter of the alphabet is **T**.
Therefore, the next term is **T**.
Important Point

- Convert letters into alphabetical positions.
- Identify the increasing pattern carefully.
- Here the increments are consecutive numbers.

Confusing Point
Some may choose S because it comes after N alphabetically, but the series follows a mathematical pattern, not simple alphabetical order.

Q8 **Text Solution:**
Correct Answer
The correct answer is B. Wednesday.
Concept
A week has 7 days. After every 7 days, the same day repeats again.
Given:

- January 1st, 2025 = Wednesday

Now count 7 days ahead:

- January 8th, 2025 = Wednesday

Because 8 January is exactly one week after 1 January, the day remains the same.
Important Point

- 7 days = 1 complete week
- The day repeats after every 7 days
- Add or subtract multiples of 7 to find the same weekday

Confusing Point
Some students may start counting from Thursday and make mistakes. Remember that exactly 7 days later, the weekday does not change.

Q9 **Text Solution:**
Correct Answer
The correct answer is **B. Diet**.
Concept
The national parliament of Japan is officially called the **Diet**, also known as the National Diet.

It is the highest legislative body of Japan and is responsible for making laws, approving budgets, and selecting the Prime Minister.
The Diet has two houses:

1. House of Representatives
2. House of Councillors

It functions similarly to parliaments in other democratic countries.
Important Point

- Japan's parliament = Diet
- It is a bicameral legislature (two houses)
- Responsible for law-making and governance

Confusing Point

- **Knesset** is the parliament of Israel.
- **Congress** refers mainly to the legislature of the United States.
- **Duma** is associated with Russia.

Q10 **Text Solution:**
Correct Answer
The correct answer is **C. Fisheries and aquaculture**.
Concept
The **Blue Revolution** in India refers to the rapid development and growth of the fisheries and aquaculture sector. Its main aim was to increase fish production, improve the livelihood of fishermen, and promote modern fish farming techniques.
Aquaculture includes:

- Fish farming
- Prawn farming
- Breeding and harvesting aquatic organisms

The Blue Revolution helped increase seafood production and exports, contributing to food security and economic growth.
Important Point

- Blue Revolution = Fisheries development
- Focus on fish production and aquaculture
- Improved employment and income in coastal and rural areas

Confusing Point

- Green Revolution → Agriculture
- White Revolution → Milk production
- Blue Revolution → Fisheries and aquaculture

Students often confuse these revolutions, so remember the color association carefully.

Q11 **Text Solution:**
Correct Answer
The correct answer is **C. Visakhapatnam**.
Concept
Visakhapatnam is popularly known as the **"City of Oceanography"** because it is an important center for marine and oceanographic research in India. The city is associated with major institutions related to ocean science and naval studies, including the National Institute of Oceanography and naval research centers.
It is also an important port city located on the eastern coast of India along the Bay of Bengal.
Important Point

- Visakhapatnam is also called "Vizag."
- Known for oceanographic research and naval importance.
- Major seaport on India's east coast.

Confusing Point

- Kochi is known as the "Queen of the Arabian Sea."
- Panaji is the capital of Goa.
- Chennai is famous as a major cultural and industrial city, not the "City of Oceanography."

Q12 **Text Solution:**
Correct Answer

The correct answer is B. Friendly.
Concept
The word "amiable" means friendly, pleasant, and kind in behavior. An amiable person is easy to talk to and behaves warmly toward others.
Example:

- "The teacher was very amiable with the students."

In this sentence, amiable describes a polite and friendly nature.
Important Point

- Amiable = Friendly and pleasant
- Used to describe a person's nature or behavior
- It is a positive adjective

Confusing Point
Students may confuse "amiable" with "ambitious" because the words sound somewhat similar.
However:

- Amiable → Friendly
- Ambitious → Having a strong desire for success

Therefore, the correct answer is Friendly.

Q13 **Text Solution:**
Correct Answer
The correct answer is C. Inspect the tubing for kinks or obstructions.
Concept
When a patient has no urine output after catheterization, the nurse should first assess for simple and reversible causes before taking advanced actions. A blocked, kinked, compressed, or twisted catheter tube can prevent urine drainage even when urine is present in the bladder.
Therefore, the priority nursing action is to inspect:

- Catheter tubing for bends or kinks
- Obstructions or clots
- Whether the drainage bag is below bladder level
- Proper catheter placement

This follows the nursing principle of assessing the patient and equipment before reporting or performing invasive interventions.
Important Point

- Always assess first before notifying the physician.
- Mechanical obstruction is a common cause of absent urine drainage.
- Ensure free flow of urine through the catheter system.

Confusing Point

- Flushing the catheter should not be done immediately unless prescribed or according to protocol.
- Increasing oral fluids will not solve a blocked catheter.
- Immediate physician notification is needed only after assessment or if the problem persists.

Q14 **Text Solution:**
Correct Answer
The correct answer is **C. Melancholic depression**.
Concept
Melancholic depression is a subtype of major depressive disorder characterized by severe biological or physical symptoms of depression.
Common features include:

- Early morning awakening
- Loss of appetite
- Weight loss
- Lack of pleasure in activities (anhedonia)
- Symptoms worse in the morning
- Reduced emotional reactivity

In this question, the combination of early morning awakening and loss of appetite strongly suggests melancholic depression. The absence of significant mood swings also helps differentiate it from other mood disorders.
Important Point
Typical features of melancholic depression:

- Insomnia, especially early morning awakening
- Decreased appetite
- Psychomotor retardation or agitation
- Persistent sadness with little mood variation

Confusing Point

- Atypical depression usually presents with increased sleep and increased appetite.
- Mild depression has less severe biological symptoms.
- Severe depression is a level of intensity, not a specific subtype; melancholic features specifically match the symptoms given.

Q15 **Text Solution:**
Answer: C. SSD
Concept
Storage devices differ in speed based on how data is accessed. A Solid State Drive (SSD) uses flash memory with no moving parts, allowing **very fast read/write access** compared to mechanical storage devices.
Solid State Drive (SSD) provides the fastest data access among the given options.
Important Point
Speed hierarchy (fast → slow):
SSD > Hard Disk Drive (HDD) > CD-ROM > Floppy Disk

- SSD: microsecond-level access, no mechanical delay
- HDD: mechanical spinning disk
- CD-ROM & floppy: very slow optical/magnetic access

Confusing Point

- Many confuse HDD and SSD because both are "hard drives" in general usage
- Only SSD uses flash memory, making it significantly faster
  So the correct fastest storage device is **SSD**.

Q16 **Text Solution:**
Answer: A. She asked where I was going.
Concept
In indirect speech, a direct question is converted into a statement form, and the verb tense is usually shifted back.

- Direct: "Where are you going?"
- Reporting verb changes to asked
- Question structure becomes statement order (no inversion)
- Present continuous → past continuous

So it becomes: She asked where I was going.
Important Point
Rules applied:

- "are going" → "was going" (tense backshift)
- Question form removed (no "are you")
- "asked" is used because it is a question

Confusing Point

- Option C is wrong because it keeps question form
- Option B is wrong because tense and structure are not changed
- Option D is wrong because "told" is not used for WH-questions

So correct indirect speech is: She asked where I was going.

Q17 **Text Solution:**
Correct Answer
The correct answer is **D. U**.
Concept
We arrange the people step by step.

Step 1: Place P
Assume P is sitting anywhere in the circle.
Step 2: Q is 2nd left to P
Place Q two places to the left of P.
Step 3: T is between Q and R
This means the arrangement must be:
Q – T – R
or
R – T – Q
Step 4: S is not the neighbour of P
After arranging according to the conditions, the final seating becomes:
P → U → Q → T → R → S
Now check:

- Q is 2nd left to P
- T is between Q and R
- S is not neighbour of P

All conditions are satisfied.
The person sitting immediately right to R is **U**.
Important Point

- In circular seating, fix one person first to avoid confusion.
- Carefully interpret "left" and "right" directions.
- "Between" means immediate consecutive placement.

Confusing Point
Students often confuse clockwise and anticlockwise directions. Maintain one consistent direction throughout the arrangement.

Q18 **Text Solution:**
Correct Answer
The correct answer is **A. Write**.
Concept
This is an analogy question based on the relationship between an object and its primary function.

- A **book** is used to **read**.
- Similarly, a **pen** is used to **write**.

So the correct matching pair is:
Book : Read :: Pen : Write
Important Point

- Identify the functional relationship between the two words.
- The second word shows the main purpose or action related to the first word.

Confusing Point

- "Fight" and "Scratch your ear" may be possible uses of a pen, but they are not its primary or intended function.
- "Pen fight" is not an action word matching the analogy pattern.

Q19 **Text Solution:**
Correct Answer
The correct answer is B. PACIFIC.
Concept
The given letters are:
C I F I A P C
When rearranged properly, they form the meaningful word:
P A C I F I C = PACIFIC
"Pacific" can refer to:

- Peaceful in nature
- The Pacific Ocean, the largest ocean on Earth

Important Point

- Rearrangement questions test vocabulary and observation skills.
- Count the letters carefully while forming the word.

Confusing Point

- "PACIFIER" and "PURIFIER" contain extra letters not present in the given set.
- "PRESTIGIOUS" has completely different letters and is much longer.

Q20 Text Solution:

Correct Answer

The correct answer is **C. Biohazardous and hazardous waste management**.

Concept

The Basel Convention is an international treaty aimed at controlling the movement and disposal of hazardous wastes between countries, especially from developed to developing nations. It was adopted in 1989 in Basel.

The convention focuses on:

- Safe management of hazardous waste
- Reduction in generation of hazardous waste
- Preventing illegal transport and dumping
- Protection of human health and the environment

It includes management of toxic, chemical, industrial, and biohazardous wastes.

Important Point

- Basel Convention = Hazardous waste management
- Controls transboundary movement of dangerous waste
- Promotes environmentally safe disposal methods

Confusing Point

- Ozone depletion is related to the Montreal Protocol.
- Air pollution is linked with various climate agreements.
- Noise pollution is not the focus of the Basel Convention.

Q21 Text Solution:

Correct Answer

The correct answer is **A. Refer to the Mental Health Review Board / psychiatric board member**.

Concept

Under the Mental Healthcare Act, 2017 in India, a person with mental illness has the right to make an **Advance Directive**, which states treatment preferences, including refusal of certain treatments such as Electroconvulsive Therapy (ECT).

However, if the patient becomes dangerous to self or others, the healthcare team cannot simply ignore the directive or rely only on family consent. In such situations, the legally appropriate step is to approach the **Mental Health Review Board (MHRB)** or authorized psychiatric authority for review and guidance.

Important Point

- Advance Directives are legally protected documents.
- Healthcare professionals must respect patient autonomy.
- Any override requires legal and ethical review through the proper authority.

Confusing Point

- Family consent alone cannot override a valid Advance Directive.
- Ignoring the directive without legal process is unlawful.
- Safety concerns require legal review, not automatic cancellation of patient rights.

Q22 Text Solution:

Correct Answer

The correct answer is **B. 1560 mL**.

Concept

The standard pediatric maintenance fluid formula (Holliday–Segar formula) is:

- First 10 kg → 100 mL/kg
- Next 10 kg → 50 mL/kg
- Remaining weight → 20 mL/kg

For a child weighing **23 kg**:
Step 1: First 10 kg

$$10 \times 100 = 1000 \text{ mL}$$

10×100=1000 mL
Step 2: Next 10 kg

$$10 \times 50 = 500 \text{ mL}$$

10×50=500 mL
Step 3: Remaining 3 kg

$$3 \times 20 = 60 \text{ mL}$$

3×20=60 mL
Total Fluid Requirement

$$1000 + 500 + 60 = 1560 \text{ mL/day}$$

1000+500+60=1560 mL/day
Therefore, the 24-hour maintenance fluid requirement is:
$1000 + 500 + 60 = 1560 \text{ mL/day}$
1000+500+60=1560 mL/day
Important Point

- Use the **100–50–20 rule** for pediatric maintenance fluids.
- Formula is commonly used in pediatrics and nursing calculations.

Confusing Point
Students often forget to calculate the remaining weight separately after 20 kg. Here, only the extra 3 kg is multiplied by 20 mL/kg.

Q23 **Text Solution:**
Correct Answer
The correct answer is **C. Immediately notify the surgeon**.
Concept
A "board-like" rigid abdomen after abdominal surgery is a serious sign that may indicate:

- Peritonitis
- Internal bleeding
- Anastomotic leak
- Acute abdominal emergency

The blood pressure of **80/60 mmHg** indicates hypotension and possible shock. These findings suggest a potentially life-threatening postoperative complication requiring urgent medical and surgical evaluation.
The nurse's priority is to immediately inform the surgeon or rapid response team so that emergency assessment and treatment can begin quickly.
Important Point

- Board-like rigidity = sign of acute abdominal irritation/peritonitis.
- Hypotension after surgery is a dangerous sign.
- Early recognition and rapid reporting can save life.

Confusing Point

- Analgesics may mask worsening symptoms.
- Semi-Fowler's position does not treat the underlying emergency.
- IV fluids may be needed, but the priority nursing action is immediate medical/surgical notification because the patient may require urgent intervention.

Q24 **Text Solution:**
Correct Answer
The correct answer is A. Lie flat, provide a quiet environment, and encourage hydration.
Concept
After a lumbar puncture or spinal analgesia, some patients develop a post-dural puncture headache due to leakage of cerebrospinal fluid (CSF). This decreases CSF pressure and causes headache, especially when sitting or standing.
The appropriate nursing management includes:

- Keeping the patient flat in bed
- Providing a quiet and calm environment
- Encouraging oral or IV fluids to maintain hydration

These measures help reduce CSF leakage effects and relieve headache symptoms.
Important Point

- Post-lumbar puncture headache is a common complication.
- Headache usually worsens in upright positions.
- Hydration and bed rest are important supportive measures.

Confusing Point

- Semi-Fowler's position can worsen the headache because it increases discomfort in an upright posture.
- Immediate physician notification is needed only if symptoms become severe or neurological signs appear.
- Side-lying position alone is less effective than lying flat.

Q25 **Text Solution:**
Correct Answer
The correct answer is B. Urinary specific gravity.
Concept
A craniopharyngioma is a brain tumor located near the pituitary gland and hypothalamus. After surgery, patients are at risk of developing diabetes insipidus (DI) due to damage or disturbance of the pituitary gland.
In diabetes insipidus:

- Large amounts of dilute urine are produced
- Urinary specific gravity becomes very low
- Dehydration and electrolyte imbalance can occur

Therefore, close monitoring of urinary specific gravity is essential after craniopharyngioma surgery to detect DI early.
Important Point

- Low urinary specific gravity suggests dilute urine.
- Monitoring urine output and fluid balance is also important.
- Pituitary surgery commonly affects ADH secretion.

Confusing Point

- Blood glucose monitoring is important in some neurological patients but is not the priority here.
- Head circumference is mainly monitored in infants.
- Abdominal girth is unrelated to pituitary complications after craniopharyngioma surgery.

Q26 **Text Solution:**
Correct Answer
The correct answer is B. Behavioral scale.
Concept
When a patient is unable to speak or verbally describe pain, nurses use a behavioral pain scale to assess pain through observable signs and behaviors.
Common indicators include:

- Grimacing
- Restlessness
- Crying
- Guarding body parts
- Changes in facial expression or body movement

Behavioral pain scales are commonly used in:

- Unconscious patients
- Intubated patients
- Patients with speech difficulties
- Infants or cognitively impaired patients

Important Point

- Pain assessment should still be done even if the patient cannot speak.
- Behavioral scales provide objective assessment through observation.
- Facial grimacing is an important sign of pain.

Confusing Point

- Numerical scales require the patient to communicate verbally or point to a number.
- Simply observing the patient is incomplete without using a structured assessment tool.
- Pain medication should be administered after proper pain assessment.

Q27 **Text Solution:**

Correct Answer

The correct answer is **B. Betty Neuman**.

Concept

The **Community Assessment Model** and the **Neuman Systems Model** were developed by Betty Neuman, a well-known nursing theorist. Her model focuses on how individuals and communities respond to stressors and how nursing interventions help maintain system stability.

The Neuman Systems Model views a person or community as an open system interacting with internal and external environments. It emphasizes:

- Stress prevention
- Holistic care
- Community and patient stability
- Primary, secondary, and tertiary prevention

Important Point

- Betty Neuman developed the Neuman Systems Model.
- The model is widely used in community health nursing.
- Focuses on stressors and prevention-based care.

Confusing Point

- Florence Nightingale is known for environmental theory.
- Sigmund Freud developed psychoanalytic theory.
- Abraham Maslow is known for the hierarchy of needs theory.

Q28 **Text Solution:**

Correct Answer

The correct answer is B. 2 inch.

Concept

For an adult, a rectal suppository is generally inserted about 2 inches (5 cm) into the rectum beyond the internal anal sphincter. This helps prevent the suppository from slipping out and ensures proper absorption.

General guideline:

- Adults: about 2 inches
- Children: about 1 inch

The suppository should be inserted gently with lubrication while the patient is in the left lateral (Sims') position.

Important Point

- Proper depth ensures retention and effectiveness.
- Insert past the internal sphincter.
- Lubrication reduces discomfort during insertion.

Confusing Point

- 1 inch is usually recommended for children, not adults.
- Deeper insertion such as 3–4 inches is unnecessary and may cause discomfort or injury.

Q29 **Text Solution:**

Correct Answer
The correct answer is A. 45–454 mg/dose.
Concept
First convert the child's weight from pounds to kilograms.
Step 1: Convert pounds to kilograms

$$50 \div 2.2 = 22.7 \text{ kg (approximately)}$$

50÷2.2=22.7 kg (approximately)
Step 2: Calculate safe dose range
Recommended safe dose:

- Minimum = $2 \text{ mg} \times 22.7$2 mg×22.7
- Maximum = $20 \text{ mg} \times 22.720$ mg×22.7

$$2 \times 22.7 = 45.4 \text{ mg}$$

2×22.7=45.4 mg

$$20 \times 22.7 = 454 \text{ mg}$$

20×22.7=454 mg
Therefore, the safe dose range is:
$45.4 \text{ mg to } 454 \text{ mg/dose}$
45.4 mg to 454 mg/dose
So, the correct answer is 45–454 mg/dose.
Important Point

- Always convert pounds to kilograms before pediatric dose calculation.
- Formula:

$$\text{Weight in kg} = \frac{\text{Weight in pounds}}{2.2}$$

Weight in kg=2.2Weight in pounds
Confusing Point
Some students calculate the daily dose instead of the dose per administration. Here, the safe range is asked per dose, not per day.

Q30 **Text Solution:**
Correct Answer
The correct answer is **A. Start isotonic fluid**.
Concept
The patient shows signs of **septic shock**:

- Hypotension (BP 80/60 mmHg)
- Tachycardia (Pulse 120)
- Fever
- Elevated lactate level

According to the sepsis management bundle, the immediate priority is rapid fluid resuscitation with **isotonic crystalloids** such as normal saline or Ringer's lactate to improve tissue perfusion and blood pressure.
Initial management in sepsis includes:

1. Rapid IV isotonic fluids
2. Blood cultures
3. Broad-spectrum antibiotics
4. Lactate monitoring
5. Vasopressors if hypotension persists after fluids

Important Point

- Early fluid resuscitation is the first-line treatment in septic shock.
- Isotonic crystalloids are commonly used.
- Elevated lactate suggests poor tissue perfusion.

Confusing Point

- Broad-spectrum antibiotics are essential but should follow or occur alongside initial stabilization.
- Vasopressors are started if BP remains low even after adequate fluids.
- Assessing infection signs is important but not the priority in an unstable patient.

Q31 **Text Solution:**
Correct Answer
The correct answer is B. Use behavioral scale.
Concept
When a patient cannot speak or communicate verbally, pain should be assessed using a

behavioral pain scale. Nonverbal signs such as:

- Grimacing
- Restlessness
- Anxiety
- Guarding behavior
- Crying or facial tension

can indicate pain.
Behavioral pain assessment tools help nurses evaluate pain objectively in patients who are unconscious, intubated, cognitively impaired, or unable to speak.
Important Point

- Pain can be expressed through behavior and facial expressions.
- Behavioral scales are reliable for nonverbal patients.
- Proper pain assessment is essential before treatment.

Confusing Point

- Numerical rating scales require verbal communication.
- Vital signs alone cannot accurately measure pain.
- Nonverbal signs should never be ignored because they may strongly indicate discomfort or severe pain.

Q32 **Text Solution:**
Correct Answer
The correct answer is B. Regression due to stress.
Concept
Regression is a defense mechanism in which a child returns to an earlier developmental behavior during periods of stress, fear, illness, or hospitalization.
A previously toilet-trained 3-year-old child starting to wet the bed after hospitalization is a common example of regression. Hospitalization can create:

- Anxiety
- Fear of separation
- Unfamiliar surroundings
- Emotional stress

As a result, the child may temporarily lose previously achieved developmental skills.
Important Point

- Regression is common in hospitalized children.
- It is usually temporary and stress-related.
- Bedwetting after stress does not always indicate illness.

Confusing Point

- Ineffective toilet training would usually be present before hospitalization.
- Urinary tract infection may cause urinary symptoms, but the question mainly points to emotional stress after hospitalization.
- Bedwetting after stress is not considered a normal developmental milestone at this stage.

Q33 **Text Solution:**
Correct Answer
The correct answer is None of the given options exactly match the official NFHS data.
According to the National Family Health Survey:

- NFHS-4 TFR = 2.2
- NFHS-5 TFR = 2.0

So, the Total Fertility Rate (TFR) decreased from 2.2 to 2.0.
Concept
TFR (Total Fertility Rate) means the average number of children born to a woman during her reproductive years. The decline in TFR indicates better awareness of family planning, improved education, and increased use of contraceptive methods.
Important Point

- NFHS-4 (2015–16): 2.2
- NFHS-5 (2019–21): 2.0

- India reached below replacement-level fertility (2.1).

Confusing Point
Option B says "2.4 to 2.2," which is incorrect according to official NFHS data. The question options appear to contain an error.

Q34 **Text Solution:**
Correct Answer
The correct answer is **B. Urinary output 10 mL/hr**.
Concept
Magnesium sulfate ($MgSO_4$) is commonly used in pre-eclampsia to prevent seizures. Magnesium is excreted through the kidneys, so decreased urine output can lead to magnesium accumulation and toxicity.
Signs of magnesium sulfate toxicity include:

- Reduced urine output
- Respiratory depression
- Loss of deep tendon reflexes
- Decreased consciousness
- Cardiac arrest in severe cases

A urinary output of **10 mL/hr** is dangerously low and suggests impaired magnesium excretion, increasing the risk of toxicity.
Important Point
Monitor during $MgSO_4$ therapy:

- Respiratory rate (>12/min)
- Urine output (>30 mL/hr)
- Deep tendon reflexes
- Serum magnesium levels if needed

Confusing Point

- Respiratory rate of 17/min is normal.
- Deep tendon reflexes +3 indicate hyperreflexia, not magnesium toxicity.
- Fetal heart rate 136 bpm is within normal range.

Q35 **Text Solution:**
Correct Answer
The correct answer is **B. 0.6**.
Concept
Shock Index (SI) is used to assess hemodynamic stability and is calculated by:
$$\text{Shock Index} = \frac{\text{Heart Rate}}{\text{Systolic Blood Pressure}}$$
Shock Index=Systolic Blood PressureHeart Rate
Given:

- Heart Rate (HR) = 80 bpm
- Systolic BP = 120 mmHg

Calculation:
$\frac{80}{120} = 0.67 \approx 0.6$12080=0.67≈0.6
Therefore, the shock index is approximately **0.6**.
Important Point

- Normal Shock Index range: **0.5–0.7**
- Higher values may indicate shock or hemodynamic instability.
- It is a quick bedside assessment tool.

Confusing Point
Some students divide BP by heart rate incorrectly. Always remember:

$$\text{Shock Index} = \frac{\text{Heart Rate}}{\text{Systolic BP}}$$

Shock Index=Systolic BPHeart Rate
not the reverse.

Q36 **Text Solution:**
Correct Answer
The correct answer is **A. Surgical site infection**.
Concept
A surgical site infection (SSI) occurs when microorganisms infect the incision area after surgery. Common signs include:

- Redness around the wound

- Swelling
- Warmth
- Pain or tenderness
- Pus or discharge
- Fever in some cases

If the image shows inflamed sutures with redness or discharge, it is most consistent with a surgical site infection.
Important Point

- Proper wound care and aseptic technique help prevent SSI.
- Early identification prevents complications and delayed healing.

Confusing Point

- Mild wound dehiscence means partial opening of the wound edges.
- Hematoma formation appears as blood collection and bluish swelling.
- Normal healing shows clean, dry, well-approximated wound edges without redness or discharge.

Q37 **Text Solution:**
Correct Answer
The correct answer is C. Start isotonic fluid immediately.
Concept
The patient's symptoms suggest Diabetic Ketoacidosis (DKA):

- Blood sugar = 520 mg/dL
- Kussmaul breathing
- Tachycardia
- Diaphoresis
- Abdominal pain

In DKA, severe dehydration occurs due to osmotic diuresis. Therefore, the first and most important initial treatment is rapid IV fluid replacement with isotonic fluids such as normal saline.
Initial DKA management includes:

1. IV isotonic fluids
2. Insulin therapy
3. Electrolyte correction, especially potassium
4. Monitoring blood glucose and acid-base status

Important Point

- Fluid resuscitation is the first priority in DKA.
- It improves circulation, renal perfusion, and blood pressure.
- Insulin is started after initial fluid replacement and potassium assessment.

Confusing Point

- Insulin is essential but not the very first intervention.
- Sodium bicarbonate is rarely used unless severe acidosis is present.
- Rechecking blood sugar delays urgent treatment.

Q38 **Text Solution:**
Correct Answer
The correct answer is A. Keep your bladder full.
Concept
For a pelvic ultrasonography (USG), especially a transabdominal pelvic scan, the patient is usually instructed to keep the bladder full. A full bladder helps:

- Push the intestines away
- Improve visualization of pelvic organs
- Provide clearer images of the uterus, ovaries, and bladder

Patients are commonly advised to drink water before the procedure and avoid urinating until the scan is completed.
Important Point

- Full bladder improves image quality in pelvic USG.
- Commonly required for pelvic and early pregnancy scans.
- Water intake is encouraged before the test.

Confusing Point

- Fasting after 10 PM is usually required for some abdominal scans, not routine pelvic USG.
- Fluid restriction is incorrect because bladder filling is necessary.
- Bringing an attender is not the primary preparation instruction.

Q39 Text Solution:

Correct Answer

The correct answer is A. Hypertension, tremor & hallucinations.

Concept

Delirium tremens (DT) is a severe and life-threatening form of alcohol withdrawal that usually occurs 48–72 hours after stopping alcohol intake in chronic alcohol-dependent patients.

Common clinical features include:

- Hypertension
- Tachycardia
- Severe tremors
- Agitation
- Confusion
- Sweating
- Hallucinations (especially visual)
- Fever

The combination of tremors, hallucinations, and autonomic hyperactivity such as hypertension strongly suggests delirium tremens.

Important Point

- DT is a medical emergency.
- Early recognition and treatment are essential.
- Benzodiazepines are commonly used in management.

Confusing Point

- Hypotension is not a typical feature of DT.
- Bradycardia and sedation are opposite to the hyperactive state usually seen.
- Fever alone is insufficient to diagnose delirium tremens.

Q40 Text Solution:

Correct Answer

The correct answer is **A. To measure CO_2.**

Concept

The device shown is used to measure the concentration of **carbon dioxide (CO_2)**. Such devices are commonly used in:

- Hospitals
- Intensive care units
- Pulmonary function monitoring
- Environmental air quality testing

In clinical settings, CO_2 monitoring helps assess ventilation and respiratory status.

Important Point

- CO_2 measurement is important in respiratory monitoring.
- Capnography devices measure exhaled carbon dioxide levels.
- Helps detect hypoventilation and respiratory distress.

Confusing Point

- O_2 measuring devices are pulse oximeters.
- CO refers to carbon monoxide detection devices.
- O_3 refers to ozone measurement instruments.

Q41 Text Solution:

Correct Answer

The correct answer is **C. Women who are fecund, sexually active, want to space/limit births but are not using any modern contraceptive method**.

Concept

"Unmet need for family planning" refers to women who:

- Are fertile (fecund)
- Are sexually active
- Do not want pregnancy immediately or want no more children
- But are not using any contraceptive method

This concept is important in community health because it helps identify gaps in access to contraception, awareness, counseling, or healthcare services.

Unmet need is divided into:

1. Need for spacing births
2. Need for limiting births

Important Point

- Indicates demand for contraception that is not being fulfilled.
- Used in population and reproductive health programs.
- Helps improve maternal and child health services.

Confusing Point

- Infertile women are not included because they cannot conceive.
- Pregnant women using contraceptives do not fit the definition.
- Sterilized women already have their family planning need met.

Q42 Text Solution:

Correct Answer

The correct answer is A. Pneumothorax.

Concept

Thoracentesis is a procedure in which fluid is removed from the pleural space. One possible complication is accidental puncture of the lung, causing air to enter the pleural cavity, leading to pneumothorax.

Typical signs of pneumothorax after thoracentesis include:

- Sudden chest pain
- Shortness of breath
- Decreased or absent breath sounds on one side
- Respiratory distress
- Reduced oxygen saturation

The unilateral absent breath sounds strongly indicate collapsed lung due to pneumothorax.

Important Point

- Pneumothorax is a known complication of thoracentesis.
- Monitor respiratory status after the procedure.
- Chest X-ray may be required for confirmation.

Confusing Point

- Bronchospasm causes wheezing, not absent unilateral breath sounds.
- Atelectasis usually develops gradually and is less commonly an immediate complication here.
- Fibrosis is a chronic lung condition, not an acute post-procedure event.

Q43 Text Solution:

Correct Answer

The correct answer is **B. Dullness**.

Concept

Pleural effusion is the accumulation of fluid in the pleural space around the lungs. During physical examination, percussion over the fluid-filled area produces a **dull sound** because fluid does not resonate like air-filled lung tissue.

Common findings in pleural effusion:

- Dullness on percussion
- Decreased breath sounds
- Reduced chest expansion
- Possible dyspnea

Important Point

- Normal lung tissue gives a resonant sound.
- Fluid causes dull percussion notes.
- Percussion is an important respiratory assessment technique.

Confusing Point

- Hyperresonance is usually seen in pneumothorax or emphysema where excess air is present.
- Rales are heard during auscultation, not percussion.
- "Absent" is not a percussion note description.

Q44 **Text Solution:**

Correct Answer

The correct answer is D. Streptomycin.

Concept

Streptomycin is an aminoglycoside antibiotic known for its ototoxicity, meaning it can damage the 8th cranial nerve (vestibulocochlear nerve).

Damage to the 8th cranial nerve may cause:

- Hearing loss
- Tinnitus
- Vertigo
- Balance disturbances

The vestibulocochlear nerve is responsible for hearing and balance, so toxicity affects auditory and vestibular functions.

Important Point

- Streptomycin mainly causes ototoxicity and nephrotoxicity.
- Regular hearing assessment is important during therapy.
- Higher doses and prolonged use increase risk.

Confusing Point

- Isoniazid commonly causes peripheral neuropathy.
- Ethambutol is associated with optic neuritis affecting vision.
- Rifampicin commonly causes hepatotoxicity and orange discoloration of body fluids.

Q45 **Text Solution:**

Correct Answer

The correct answer is D. No need to revaccinate.

Concept

The BCG vaccine is given to protect against severe forms of tuberculosis in children. After vaccination, a scar may or may not develop.

Important point:

Absence of a BCG scar does NOT mean the vaccine has failed.

Many children develop adequate immunity even without visible scar formation.

Therefore:

- No scar ≠ no immunity
- Routine revaccination is not recommended

Important Point

- BCG scar is not a reliable indicator of immunity.
- Revaccination is not required if scar is absent.
- Protection is still considered adequate in most cases.

Confusing Point

- Mantoux test is used to detect TB infection, not vaccine effectiveness.
- IGRA test is also for TB infection diagnosis, not for checking vaccine success.
- Re-vaccination is not recommended in standard guidelines.

Q46 Text Solution:

orrect Answer

The correct answer is A. 1

Concept

Insight in psychiatric conditions refers to the patient's awareness and understanding of their illness.

A commonly used scale (levels 1–6) describes:

- Level 1: Complete denial of illness
- Level 2: Slight awareness but still denies mental illness
- Level 3: Acknowledges symptoms but attributes them to other causes
- Level 4: Aware of illness but blames external factors
- Level 5–6: Good insight and acceptance of illness

In this case, the patient with schizophrenia is saying:

"I have been admitted for lower back pain; otherwise, I am absolutely healthy."

This shows complete denial of psychiatric illness, which corresponds to Level 1 insight.

Important Point

- Level 1 = No awareness of mental illness
- Patient fully denies psychiatric condition
- Common in acute psychotic disorders like schizophrenia

Confusing Point

- The patient is not just misunderstanding symptoms (which would be Level 2 or 3).
- Here, there is total rejection of mental illness, making it the lowest level of insight.

Q47 Text Solution:

Correct Answer

The correct answer is B. 900 units/hr.

Concept

First, find the concentration of heparin in the infusion.

Step 1: Calculate concentration

- Total heparin = 12,500 units
- Total fluid = 250 mL

$\frac{12500 \text{ units}}{250 \text{ mL}} = 50 \text{ units/mL}$250 mL12500 units =50 units/mL

Step 2: Calculate hourly dose

- Infusion rate = 18 mL/hr

$50 \text{ units/mL} \times 18 \text{ mL/hr} = 900 \text{ units/hr}$

50 units/mL×18 mL/hr=900 units/hr

Important Point

- Always first find units per mL, then multiply by infusion rate.
- This is a standard IV drip calculation in nursing.

Confusing Point

- Students often directly divide incorrectly or confuse total volume with hourly rate.
- The key is breaking the problem into two steps: concentration → infusion dose.

Q48 Text Solution:

Correct Answer

The correct answer is **C. 2 tablets**.

Concept

First, convert the prescribed dose into the same unit as the available tablet strength.

- Prescribed dose = **0.25 g**
- Convert to mg:

$$0.25 \text{ g} = 250 \text{ mg}$$

0.25 g=250 mg

- Available strength = **125 mg per tablet**

Now calculate number of tablets:

$\frac{250}{125} = 2 \text{ tablets}$125250=2 tablets

Important Point

- Always convert grams to milligrams before calculation.
- Formula:

$$\text{Number of tablets} = \frac{\text{Ordered dose}}{\text{Available dose}}$$

Number of tablets=Available doseOrdered do se

Confusing Point

- 0.25 g may look small, but converting to mg shows it is 250 mg.
- 125 mg tablets mean each tablet is half the required dose, so 2 tablets are needed.

Q49 **Text Solution:**
Correct Answer: A — 50–100 mL ORS per loose stool
For a child with mild diarrhea, no dehydration (no weight loss, normal thirst), WHO-based advice is:

- Continue feeding
- Give ORS after each loose stool
- Usual recommended amount:
  - <2 years: 50–100 mL per stool
  - 2–10 years: 100–200 mL per stool

Since the question does not specify age, nursing exam standard default for a child is 50–100 mL per loose stool.
Why others are incorrect:

- B (100–200 mL): used for older children
- C (30–70 mL): too low
- D (as much as needed): incorrect—ORS has recommended dosing, not unlimited intake

✔ Final answer: A

Q50 **Text Solution:**
Correct Answer: C — Vaginal bleeding with grape-like vesicles

A **molar pregnancy (hydatidiform mole)** is characterized by:

- **Vaginal bleeding**
- Passage of **"grape-like vesicles" (hydropic villi)**
- Very **high β-hCG levels**
- Uterus often **larger than expected for gestational age**
- Severe nausea/vomiting may occur

Why others are incorrect:

- **A:** Uterus is usually *larger*, not smaller
- **B:** β-hCG is **elevated**, not decreased
- **D:** Nausea/vomiting can be severe, not mild as a key sign

✔ **Final Answer: C**

Q51 **Text Solution:**
Correct Answer
The correct answer is A. Pathological Bandl's ring.
Concept
A Pathological Bandl's ring is a classic sign of impending uterine rupture. It occurs when there is a retraction of the upper uterine segment and overstretching of the lower segment during obstructed labor.
Key features include:

- Visible or palpable horizontal groove on the abdomen
- Severe abdominal pain
- Rising retraction ring (Bandl's ring)
- Thin, overstretched lower uterine segment
- Risk of uterine rupture if not managed urgently

These findings indicate severe obstructed labor and maternal-fetal emergency.
Important Point

- Bandl's ring = warning sign of uterine rupture
- Requires immediate obstetric intervention

- Associated with obstructed or prolonged labor

Confusing Point

- Increased fetal heart rate variability is usually a reassuring sign, not danger.
- Mild contractions are normal labor findings.
- Cervical dilation of 5 cm indicates active labor, not rupture risk.

Q52 **Text Solution:**
Correct Answer
The correct answer is A. Ruptured ectopic pregnancy.
Concept
Ruptured ectopic pregnancy occurs when a fertilized egg implants outside the uterus (commonly in the fallopian tube) and ruptures, leading to internal bleeding.
A key clinical sign is Kehr's sign, which is:

- Referred pain to the left shoulder
- Caused by irritation of the diaphragm due to intra-abdominal bleeding

Typical features include:

- Sudden unilateral pelvic or lower abdominal pain
- Shoulder tip pain (Kehr's sign)
- Hypotension and signs of shock in severe cases
- Vaginal bleeding may or may not be present

Important Point

- Shoulder pain = referred pain from diaphragmatic irritation
- Always suspect internal bleeding in reproductive-age women with acute pelvic pain
- Medical emergency requiring immediate intervention

Confusing Point

- Ovarian cyst infection may cause pelvic pain but not shoulder pain.
- UTI causes dysuria, frequency, and burning micturition.
- Appendicitis causes right lower abdominal pain but does not cause Kehr's sign.

Q53 **Text Solution:**
Correct Answer: A — Fetal heart rate
After **amniotomy (artificial rupture of membranes)**, the **first priority is checking fetal well-being**, because there is a risk of:

- **Umbilical cord prolapse**
- **Fetal distress due to sudden pressure changes**

So the nurse should **immediately assess fetal heart rate (FHR)** first.
Why others are not first:

- **Maternal heart rate & BP:** important but not immediate priority
- **Uterine contractions:** monitored, but after confirming fetal status

✔ **Nursing exam rule:** After ROM/amniotomy → **first check FHR**.

Q54 **Text Solution:**
Correct Answer
The correct answer is A. Severe fetal anemia.
Concept
A sinusoidal pattern on a CTG (cardiotocography) is a rare but highly pathological fetal heart rate pattern. It is characterized by:

- Smooth, regular, wave-like undulations of the fetal heart rate baseline
- No normal variability
- Persistent pattern lasting ≥ 10–20 minutes

It is classically associated with severe fetal anemia, which may occur due to:

- Fetomaternal hemorrhage

- Severe Rh incompatibility
- Twin-to-twin transfusion syndrome (donor twin)

This pattern indicates significant fetal compromise and requires urgent intervention.
Important Point

- Sinusoidal CTG = ominous sign
- Strongly suggests severe fetal anemia
- Requires immediate obstetric evaluation and possible emergency delivery

Confusing Point

- Normal fetal sleep cycles may reduce variability but do not produce a true sinusoidal pattern.
- Uterine hyperstimulation shows recurrent decelerations, not smooth sine waves.
- Normal CTG always has variability, unlike sinusoidal patterns.

Q55 **Text Solution:**
Correct Answer: B — Neglect and abuse
The nurse is refusing appropriate pain relief and ignoring the patient's expressed need during a procedure. This reflects:

- Neglect of patient comfort
- Violation of basic rights to pain management
- Unethical and potentially abusive behavior in maternity care

Why others are incorrect:

- A (Autonomy-based care failure): partially true concept, but too limited for this scenario.
- C (Patient-centered care): incorrect because patient needs are being ignored.
- D (Therapeutic communication): incorrect because the response is dismissive, not supportive or communicative.

✔ In nursing ethics and exam context, this is best classified as neglect and abuse.

Q56 **Text Solution:**
Correct Answer
The correct answer is B. Below eye level.
Concept
When preparing chemotherapy (neoplastic) drugs, safety of the healthcare worker is very important because these drugs are cytotoxic and can be harmful through:

- Inhalation of aerosols
- Splash exposure to eyes and face
- Skin contact

Preparing the medication below eye level helps prevent accidental exposure to the face, especially the eyes and respiratory tract, reducing the risk of contamination.
This is part of standard cytotoxic drug handling precautions, which also include using:

- Biological safety cabinets (laminar airflow hood)
- Gloves, gowns, masks
- Closed system drug transfer devices

Important Point

- Always prepare chemotherapy drugs below eye level
- Prevents direct exposure to vapors or splashes
- Part of occupational safety guidelines

Confusing Point

- Eye-level or above eye-level preparation increases risk of exposure.
- "As safe as possible" is not a specific standard technique.
- Safety depends on correct positioning and use of protective equipment.

Q57 **Text Solution:**
Correct Answer: D — Assertion is correct, reason is wrong
Explanation:

- Assertion: “Nurse has to check whether the consent is informed.” → Correct
  A nurse must ensure that consent is informed, voluntary, and valid before any procedure.
- Reason: “It is the responsibility of the nurse to explain the risks and outcomes of the procedure.” → Incorrect
  The doctor/primary treating physician is responsible for explaining:
  - Procedure details
  - Risks and benefits
  - Alternatives

A nurse’s role is to verify understanding and completeness of consent, not to provide detailed explanation (except basic clarification or reinforcement).
✔ So, assertion is correct but reason is wrong.

Q58 **Text Solution:**
Correct Answer
The correct answer is A. Between year 1951–1981.
Concept
The period of maximum population explosion in India occurred after independence, especially from 1951 to 1981. During this time:

- Death rate declined sharply due to improved healthcare
- Birth rate remained high
- Life expectancy increased
- Control of infectious diseases improved

This led to a rapid increase in population, known as the population explosion phase.
Important Point

- 1951–1981 = highest population growth rate period
- Marked by high birth rate + low death rate
- Public health improvements contributed significantly

Confusing Point

- Before 1951, both birth and death rates were high, so growth was slow.
- After 1981, family planning programs reduced growth rate.
- 2011–2021 shows stabilization, not explosion.

Q59 **Text Solution:**
Correct Answer
The correct answer is C. Late cord clamping.
Concept
The LaQshya program is a Government of India initiative aimed at improving the quality of care in labour rooms and maternity operation theatres. It focuses on respectful maternity care and evidence-based practices.
One of the key recommended practices under LaQshya is delayed (late) cord clamping, usually done after 1–3 minutes of birth, unless immediate resuscitation is required. This helps:

- Improve neonatal iron stores
- Increase hemoglobin levels
- Enhance neonatal outcomes

Important Point

- LaQshya promotes evidence-based and respectful maternity care
- Encourages delayed cord clamping
- Discourages unnecessary interventions

Confusing Point

- Early cord clamping is no longer recommended routinely.
- Routine episiotomy is not done for all deliveries.
- Partner restriction is not part of LaQshya; rather, supportive companionship is encouraged.

Q60 **Text Solution:**
Correct Answer
The correct answer is A. Delusion of reference.
Concept

A delusion of reference is a false belief where a person thinks that neutral external events are directly related to them personally.
In this case:

- The patient believes the TV anchor is sending signals to him
- This is a fixed, false, and irrational belief
- The TV content is neutral but is misinterpreted as being directed personally

Important Point

- Delusion = fixed false belief not based in reality
- Delusion of reference = external events are believed to have personal meaning
- Common in schizophrenia and psychotic disorders

Confusing Point

- Illusion = misinterpretation of a real stimulus (not a fixed belief)
- Hallucination = perception without stimulus (hearing/seeing things not present)
- Thought broadcasting = belief that one's thoughts are being transmitted to others

So, the correct answer is Delusion of reference.

Q61 **Text Solution:**
Correct Answer
The correct answer is C. Give 15–20 g of oral glucose (4 candy tablets).
Concept
The patient has hypoglycemia (blood sugar = 48 mg/dL) but is:

- Conscious
- Able to swallow safely

So the first-line management is oral glucose, not IV therapy.
Standard treatment for conscious hypoglycemia:

- Give 15–20 g fast-acting carbohydrate (glucose tablets, sugar solution, candies, juice)
- Recheck blood glucose after 15 minutes
- Repeat if still low

Important Point

- Oral glucose is preferred if patient is conscious and can swallow
- IV dextrose is only for unconscious or unable-to-swallow patients
- "Rule of 15" is commonly used in hypoglycemia management

Confusing Point

- Insulin would worsen hypoglycemia and is dangerous here
- IV dextrose is not first choice when oral intake is possible
- Observation alone is unsafe at 48 mg/dL (risk of worsening hypoglycemia)

Q62 **Text Solution:**
Correct Answer
The correct answer is **A. Give RL after blood transfusion**.
Concept
During blood transfusion, **Ringer's Lactate (RL)** should NOT be used with or immediately after blood administration because it contains calcium, which can:

- Activate clotting in stored blood
- Cause clot formation in the IV line

Instead, **normal saline (0.9% NaCl)** is the only recommended IV fluid compatible with blood products.
Important Point

- Only **normal saline** is safe with blood transfusion
- RL is contraindicated during blood transfusion

- Blood products commonly used include PRBC, FFP, platelets

Confusing Point

- PRBC is correctly the most commonly used blood product
- FFP is usually used within 24 hours after thawing
- PRBC has less risk of fluid overload compared to whole blood due to smaller volume

So, option **A is incorrect and is the correct answer**.

Q63 **Text Solution:**
Correct Answer
The correct answer is **C. From nose to earlobe to xiphoid process**.
Concept
The correct method for estimating nasogastric (NG) tube insertion length is the **NEX method**:

- **N** = Nose
- **E** = Earlobe
- **X** = Xiphoid process

This ensures that the tube reaches the stomach safely for feeding, aspiration, or medication administration.
Important Point

- NEX method is the standard for NG tube placement measurement
- Helps prevent under-insertion or over-insertion
- Always confirm placement after insertion (e.g., pH test, X-ray)

Confusing Point

- Nose to nipple is incorrect and outdated
- Nose to umbilicus is not used for NG tube placement
- Angle of mouth is used for orogastric tubes, not nasogastric tubes

Q64 **Text Solution:**
Correct Answer
The correct answer is C. “Park” the gum between the buccal cavity and cheek and let it absorb slowly.
Concept
Nicotine gum is used in smoking cessation as part of nicotine replacement therapy (NRT). It works by slowly releasing nicotine through the oral mucosa to reduce withdrawal symptoms.
Proper technique is the “chew and park” method:

1. Chew the gum slowly until a peppery taste appears
2. “Park” it between the cheek and gum
3. Repeat chewing and parking for gradual absorption

This allows controlled nicotine release and reduces cravings effectively.
Important Point

- Do NOT chew continuously like normal gum
- Do NOT swallow the gum
- Absorption occurs through buccal mucosa, not the stomach

Confusing Point

- Swallowing saliva does not improve absorption
- Drinking coffee or acidic drinks can actually reduce nicotine absorption
- Immediate chewing reduces effectiveness and may cause side effects like nausea or hiccups

Q65 **Text Solution:**
Correct Answer
The correct answer is B. 45 bpm.
Concept
Heart rate from an ECG strip is commonly calculated using the 300 method when the

rhythm is regular:

$$\text{Heart Rate} = \frac{300}{\text{Number of large squares between R–R intervals}}$$

Heart Rate=Number of large squares between R–R intervals300

For this ECG strip, the R–R interval corresponds to approximately 6–7 large squares:

$\frac{300}{6.5} \approx 46 \text{ bpm} \approx 45 \text{ bpm}$6.5300 ≈46 bpm≈45 bpm

So, the heart rate is closest to 45 beats per minute, which indicates bradycardia.

Important Point

- Normal heart rate: 60–100 bpm
- 45 bpm = bradycardia
- The 300 method is used for regular rhythms

Confusing Point

- Students often miscount small squares instead of large squares
- Using the wrong method (1500 rule or counting incorrectly) can give wrong values
- Always match the method with rhythm regularity

✔ Final Answer: 45 bpm

Q66 **Text Solution:**

Correct Answer

The correct answer is B. Below the cheeks.

Concept

The maxillary sinuses are located in the cheek area, beneath the eyes and beside the nose. To assess for tenderness or inflammation (such as in sinusitis), the examiner places fingers over the maxillary sinuses, which are found:

- Just below the cheekbones
- Lateral to the nose
- Under the eyes

Gentle pressure is applied to check for pain or tenderness.

Important Point

- Maxillary sinuses are in the cheek region
- Tenderness suggests sinus infection (sinusitis)
- Common in upper respiratory infections

Confusing Point

- Below the eye refers more to orbital area, not exact sinus palpation site
- Nasal bridge is for frontal sinus assessment
- "At the eye" is not a correct anatomical landmark for sinus examination

Q67 **Text Solution:**

Correct Answer

The correct answer is A. CO_2 retention.

Concept

CPAP works by providing continuous positive airway pressure during inspiration and expiration to keep alveoli open and improve gas exchange. If the expiratory valve is inadequate or malfunctioning, exhaled air (which contains CO_2) is not properly released. This leads to:

- Rebreathing of expired air
- Accumulation of carbon dioxide
- Resulting in CO_2 retention (hypercapnia)

Important Point

- CPAP must allow proper expiration of CO_2
- Faulty expiratory valve → rebreathing of CO_2
- Leads to hypercapnia and respiratory acidosis

Confusing Point

- Hypoxia is not the primary immediate effect; oxygen may still be delivered
- Hypotension and hyperventilation are not direct consequences of valve failure
- The key problem is inadequate CO_2 elimination, not oxygen delivery failure

Q68 **Text Solution:**

Correct answer: D — From the end of one contraction to the start of next

Key concept:

Duration vs frequency of contractions

- Duration = time the uterus remains contracted (start → end of same contraction)
- Frequency (interval) = time between contractions
  👉 measured from end of one contraction to start of next

Why D is correct:

- It defines the interval between contractions, which is commonly used clinically as "contraction timing" in practice charts.

Why others are incorrect:

- A (start to start) → this is *frequency*, but not the standard nursing way of describing interval timing in exams
- B → incorrect overlap of two contractions
- C (peak to peak) → not used in obstetric monitoring

Final takeaway:

- Duration = within one contraction (start → end)
- Frequency/interval = end → start of next (Option D)

Q69 **Text Solution:**
Correct Answer
The correct answer is **A. Couple protection rate increased from 54% (NFHS-4) to 67% (NFHS-5)**.
Concept
Couple Protection Rate (CPR) refers to the percentage of eligible couples who are using any contraceptive method (modern or traditional) for family planning. It is an important indicator of the success of family planning programs in a population.
According to national survey data:

- CPR increased from **NFHS-4 (2015–16): ~54%**
- To **NFHS-5 (2019–21): ~67%**

This shows improved awareness, accessibility, and use of contraceptive methods in India.
Important Point

- CPR reflects contraceptive use among eligible couples
- Higher CPR indicates better family planning coverage
- Shows success of public health programs

Confusing Point

- Some may confuse CPR with fertility rate (TFR), but both are different indicators
- CPR is about **contraceptive usage**, not number of children
- NFHS data clearly shows an **increase**, not decrease or stability

Q70 **Text Solution:**
Correct Answer
The correct answer is D. Increased blood flow to the liver.
Concept
Ascites in chronic liver disease (especially cirrhosis) develops due to multiple mechanisms, including:

- Decreased oncotic pressure due to low albumin production
- Increased aldosterone leading to sodium and water retention
- Increased ADH (vasopressin) causing water retention
- Portal hypertension with altered splanchnic circulation

However, increased blood flow to the liver is NOT a contributing factor. In fact, in chronic liver disease there is usually:

- Increased portal venous pressure
- Reduced effective hepatic perfusion

Thus, increased liver blood flow is not part of ascites formation.
Important Point

- Ascites is mainly due to portal hypertension + fluid retention + low albumin
- Hormonal factors (aldosterone, ADH) worsen fluid accumulation
- Oncotic pressure loss is a key mechanism

Confusing Point

- Students may confuse "portal hypertension" with "increased liver blood flow," but they are not the same
- Liver disease actually causes impaired circulation, not increased hepatic blood flow
- ADH and aldosterone increase fluid retention, not reduce it

Q71 **Text Solution:**
Correct Answer
The correct answer is **A. Perform Ritgen's maneuver and support the perineum while extending the fetal head**.
Concept
In the **second stage of labour**, when the fetal head is **crowning (tightly bulging at the perineum)**, the immediate priority is to control delivery of the head to:

- Prevent perineal tears
- Avoid rapid uncontrolled expulsion
- Support gradual extension of the fetal head

This is done using **Ritgen's maneuver**, where:

- One hand supports the perineum
- The other controls the fetal head to allow slow, safe delivery

Important Point

- Crowning = head visible at introitus and not receding
- Immediate action = controlled delivery of head
- Prevents maternal and fetal trauma

Confusing Point

- McRoberts maneuver is used for shoulder dystocia, not crowning
- Fundal pressure is contraindicated due to risk of uterine rupture and fetal injury
- Calling for help is important but **not the immediate hands-on action required at crowning**

Q72 **Text Solution:**
Correct Answer
The correct answer is **A. Melancholic depression**.
Concept
Melancholic depression is a subtype of major depressive disorder characterized by strong biological (vegetative) symptoms rather than emotional mood fluctuations.
Typical features include:

- Early morning awakening
- Loss of appetite
- Weight loss
- Worse symptoms in the morning
- Lack of mood reactivity

In this case, the presence of **early morning awakening and loss of appetite with minimal mood change** strongly suggests a melancholic pattern.
Important Point

- Melancholic depression = biological symptoms dominate
- Mood may not fluctuate much
- Common in severe depressive episodes

Confusing Point

- Atypical depression usually has **increased sleep and increased appetite**, opposite of this

case
- Psychotic depression includes hallucinations or delusions (not mentioned here)
- Mild depression does not typically present with strong biological features like early morning awakening

Q73 **Text Solution:**
Correct Answer
The correct answer is **C. Failure**.
Concept
The **RIFLE criteria** classify acute kidney injury based on **serum creatinine increase and urine output**.
RIFLE stands for:

- **R**isk
- **I**njury
- **F**ailure
- **L**oss
- **E**nd-stage renal disease

Failure criteria include:

- Serum creatinine ≥ 3 times baseline **OR**
- Urine output < 0.3 mL/kg/hour or anuria

Application to the case

- Creatinine = **3.8 mg/dL** (significantly elevated, likely ≥ 3× baseline in post-op patient)
- Urine output = **28 mL/day** → extremely low (severe oliguria/anuria)

This clearly fits **Failure stage**.
Important Point

- Failure = severe acute kidney injury
- Requires urgent management (fluids, dialysis consideration)
- Indicates high mortality risk if untreated

Confusing Point

- Risk and Injury are earlier, milder stages
- Loss refers to persistent renal failure >4 weeks
- This case shows **severe oliguria + high creatinine → Failure**

Q74 **Text Solution:**
Correct Answer
The correct answer is **A. Speak calmly and set limits**.
Concept
In managing an aggressive and restless patient, the **first-line nursing intervention is verbal de-escalation**. This includes:

- Speaking in a calm, non-threatening tone
- Maintaining appropriate distance
- Setting clear, simple limits on unacceptable behavior
- Using reassurance and active listening

This approach helps reduce anxiety and prevents escalation of aggression.
Important Point

- Verbal de-escalation is always the first step
- Helps maintain patient dignity and safety
- Reduces need for restraints or medication

Confusing Point

- Chemical or physical restraints are **last-resort measures**, used only when there is immediate danger to self or others
- Ignoring the patient can worsen agitation and is not therapeutic
- Calm communication is the safest and most effective initial strategy

Q75 **Text Solution:**
Correct Answer
The correct answer is **B. Improper waste segregation at the point of generation**.
Concept
Needle-stick injuries commonly occur due to unsafe handling of sharps, especially when **waste**

is not correctly segregated immediately at the point of use.
Proper infection control practice requires:

- Immediate disposal of needles into puncture-proof sharps containers
- No recapping of needles
- Segregation of biomedical waste at the point of generation

When segregation is improper, needles may remain exposed or be mixed with general waste, increasing risk of injury.
Important Point

- Point-of-generation disposal is critical for safety
- Sharps containers must be used immediately after use
- Most needle-stick injuries are preventable

Confusing Point

- "Use proper bins" is too general; the issue is **not using them correctly at the point of use**
- Large waste generation does not directly cause needle-stick injuries
- Excess glove use is unrelated to sharps safety

✔ Final Answer: **B**

Q76 **Text Solution:**
Correct answer: **B — Accept the patient's refusal for treatment**
Reasoning:
A key principle in psychiatry is **capacity and consent**.
In this case:

- The patient has schizophrenia
- Has hallucinations but is **aware of them**
- **Refuses treatment**
- No information suggests danger to self or others or lack of decision-making capacity

So the correct nursing/medical approach is:
Respect autonomy and accept refusal if the patient is mentally competent.
Why others are incorrect:

- **A Forcibly treat** → only if patient lacks capacity or is at high risk
- **C Section 89 admission** → used for **involuntary admission in specific legal/mental incapacity or risk situations**, not just refusal
- **D Physical restraints** → only for **immediate risk of harm**, never as first step

Final takeaway:
No immediate danger + patient has decision-making ability = respect refusal (Option B)

Q77 **Text Solution:**
Answer: B. Inform senior nurse/doctor
Concept
Pediatric Early Warning Score (PEWS) is used to detect early clinical deterioration in children. A score of 3 usually indicates mild to moderate risk, requiring timely clinical review but not immediate resuscitation activation.
Important Point
Most PEWS charts follow escalation: 0–2 = routine care, 3–4 = inform senior nurse/doctor for assessment, ≥5 = activate emergency/resuscitation team. So PEWS of 3 needs escalation within the ward team first.
Confusing Point
Students often confuse PEWS 3 with emergency activation. However, emergency response is reserved for higher scores (≥5 or rapid deterioration signs), not for low-moderate scores like 3.

Q78 **Text Solution:**
Answer: D. Tele-MANAS
Concept

Tele-MANAS is the Government of India's 24×7 nationwide tele-mental health service under the National Tele Mental Health Programme. It provides counselling, psychological support, crisis management, and referral services across India.

Important Point

It is designed specifically for mental health emergencies like anxiety, depression, stress, and suicidal thoughts, and operates through a toll-free helpline with state-linked mental health professionals.

Confusing Point

NIMHANS helpline is well known, but it is not the nationwide 24×7 integrated system.

eSanjeevani is for general teleconsultation, not specifically mental health-focused. Tele-MANAS is the correct dedicated system.

Q79 **Text Solution:**

Answer: D. She cannot breastfeed after this therapy

Concept

Iodine-131 is a radioactive isotope used in thyroid disorders (e.g., hyperthyroidism, thyroid cancer). It is actively concentrated in breast tissue and secreted in breast milk, posing serious radiation exposure risk to the infant.

Important Point

After administration of Iodine-131, breastfeeding must be permanently stopped for that child, because radioactive iodine remains a risk even after clearance from the body for that lactation cycle.

Confusing Point

Many students think "pump and discard for a few days" is enough, but that is incorrect. Unlike some drugs, iodine-131 causes long-lasting radioactive contamination of breast tissue, so breastfeeding cannot be safely resumed for that infant after therapy.

Q80 **Text Solution:**

Correct answer: **A — Use a hairdryer on cool setting**

If a plaster cast gets wet, it should be dried gently to prevent skin maceration, odor, and cast damage. The safe nursing advice is to use a **hairdryer on a cool or low-air setting** to help dry the cast.

Why others are incorrect:

- **B Heating pad** → can cause burns and uneven drying
- **C Sunlight** → unreliable and may not dry inner layers properly
- **D Do nothing** → increases risk of skin breakdown and infection

So, the correct nursing instruction is to **dry it safely using cool air (hairdryer setting)**.

Q81 **Text Solution:**

Correct answer: B — Inadequate intravascular volume

These findings indicate ongoing hypovolemia despite fluid resuscitation:

- HR 120 bpm → compensatory tachycardia due to hypovolemia
- Increased hematocrit → hemoconcentration (plasma loss > RBC loss)
- Decreased urine output → poor renal perfusion
- BP 112/80 mmHg → still maintained but early compensation

In burn patients using the Parkland formula, the goal is urine output (~0.5 mL/kg/hr in adults). Reduced urine output plus hemoconcentration clearly indicates insufficient circulating volume, so fluids need adjustment.

Q82 **Text Solution:**

Correct answer: **A — Somatic disorder**

When a patient presents with **physical symptoms but all investigations are normal**, and the symptoms are **not intentionally produced**, the most likely diagnosis is a **somatic symptom disorder**.
Why A is correct:

- Symptoms are **real to the patient**
- No medical cause is found despite investigations
- Psychological distress is expressed as physical complaints

Why others are incorrect:

- **B Hypochondriasis** → now called illness anxiety disorder; main feature is *fear of disease*, not prominent physical symptoms
- **C Malingering** → symptoms are **intentionally faked for external gain** (money, leave, drugs)
- **D Factitious disorder** → symptoms are **intentionally produced**, but without external gain (to assume sick role)

Final takeaway:
Unexplained physical symptoms + no conscious intent → **Somatic symptom disorder (Option A)**

Q83 **Text Solution:**
Correct answer: D — Pull the pinna back and down
In a 2-year-old child (under 3 years), the ear canal is more horizontal, so the correct technique is:

- Pull the pinna back and down to straighten the external auditory canal
- Then instill the drops

Why others are incorrect:

- A → Explanation is not part of technique; does not affect administration
- B → Forehead massage is irrelevant
- C → After instillation, the child should keep the affected ear up for a short time, not tilted down

Key nursing point:

- <3 years: pinna back and down
- >3 years: pinna back and up

So, the correct option is D.

Q84 **Text Solution:**
Answer: D. Loosening of the LES due to pregnancy hormones
Concept
Heartburn in pregnancy (acid reflux) is mainly caused by hormonal changes, especially increased progesterone, which relaxes smooth muscles including the lower esophageal sphincter (LES). This allows gastric acid to reflux into the esophagus, causing burning sensation.
Important Point
Progesterone effect in pregnancy leads to reduced LES tone, making reflux common even in early pregnancy, before uterine size becomes significant.
Confusing Point
Many assume heartburn is due to uterine pressure, but that occurs mainly in late pregnancy. In early pregnancy, the key mechanism is hormonal relaxation of LES, not mechanical pressure or increased acid production.

Q85 **Text Solution:**
Answer: A. Confirming patient identity and surgical site marks
Concept
Time-out (surgical safety procedure) is a mandatory safety step performed just before incision in surgery. It ensures correct patient, correct procedure, and correct surgical site.
Important Point

During time-out, the surgical team pauses to verify:

- Patient identity
- Correct surgery/procedure
- Correct site/side marking
- Consent confirmation
- Team agreement before incision

It is part of the WHO surgical safety checklist.
Confusing Point
Students often confuse:

- Instrument counting → done during *before and after surgery*, not time-out
- Anesthesia documentation → separate anesthesia record
- Staff rest → unrelated
  Time-out is specifically a final verification step before starting surgery, not a procedural documentation or counting activity.

Q86 **Text Solution:**
Answer: C. Change in percussion finding on position change
Concept
After surgery, abdominal distension may be due to gas, ileus, or fluid accumulation. A key abnormal finding is **shifting dullness**, which indicates free fluid in the abdomen (ascites or intra-abdominal collection).
Important Point
Shifting dullness test becomes positive when percussion note changes with patient position, showing fluid movement. This is **always abnormal** and needs further evaluation.
Confusing Point

- **Dullness over RUQ** → normal due to liver
- **Symmetrical abdominal movement** → normal finding
- **Bowel sounds every 10 seconds** → within normal range

  Only **changing percussion with position (shifting dullness)** indicates pathology like fluid collection, so it is the most significant abnormal finding.

Q87 **Text Solution:**
Answer: B. New onset of puffiness on face and inability to remove ring
Concept
A red flag symptom indicates a possible serious underlying condition that needs prompt assessment. In pregnancy or clinical assessment, sudden facial swelling and hand edema can suggest fluid retention associated with hypertensive disorders like preeclampsia. Preeclampsia often presents with sudden facial puffiness, hand swelling, headache, or visual changes.
Important Point

- Facial + hand swelling (ring tightness) = abnormal, sudden, concerning
- Suggests possible fluid retention + hypertension-related disorder
- Needs urgent BP and urine protein evaluation

Confusing Point

- Ankle edema at end of day → common in normal pregnancy
- Mild tiredness → normal physiological change
- Nausea/vomiting → common in early pregnancy (unless severe/hyperemesis)
  Only sudden facial swelling with difficulty removing rings is a true red flag

Q88 **Text Solution:**
Answer: A. Use sunscreen daily for rash
Concept
Systemic Lupus Erythematosus is strongly associated with photosensitivity, meaning sunlight can trigger or worsen skin rashes and disease flares. Therefore, sun protection is a key part of patient education.

Important Point

- Daily broad-spectrum sunscreen (SPF 30 or higher) is essential
- Avoid direct sunlight during peak hours
- Protective clothing also helps reduce flares
- Medication adherence must be continuous, not symptom-based

Confusing Point

- Makeup may cover rash but does not prevent disease flare
- Physical activity should not be completely avoided (only adjusted if fatigue/joint pain)
- Medications in SLE should never be stopped when symptoms improve, as it can cause relapse

So, sun protection is the most important and correct advice.

Q89 **Text Solution:**
Answer: B. At the end of inspiration press the canister
Concept
Proper use of a Metered Dose Inhaler (MDI) requires correct coordination between actuation (pressing) and inhalation to ensure medication reaches the lower airways.
Important Point
Correct MDI technique:

- Shake inhaler before use
- Start slow deep inhalation
- Press canister at the beginning of inspiration (not at the end)
- Continue slow inhalation for 3–5 seconds
- Hold breath for 10–30 seconds (as tolerated)

Confusing Point

- Pressing at the end of inspiration is incorrect because the drug will not reach deep lungs effectively
- Many students confuse timing, but optimal delivery requires pressing at the start of inhalation, not after completing it
- Holding breath and shaking inhaler are correct steps

So, option B shows incorrect technique and needs further teaching.

Q90 **Text Solution:**
Answer: A. Hypoglycemia
Concept
Total Parenteral Nutrition (TPN) delivers a continuous high glucose load. The body adapts by increasing insulin secretion. If TPN is suddenly stopped, insulin remains high for some time, causing a rapid drop in blood glucose.
Important Point
Signs like diaphoresis, tachycardia, tremors, and anxiety are classic symptoms of hypoglycemia. That's why TPN should never be stopped abruptly; it should be tapered.
Confusing Point

- Hyperglycemia occurs while TPN is running, not after stopping
- Fluid overload causes edema and respiratory distress, not sweating + tachycardia pattern
- Hypertension is not typical of abrupt TPN discontinuation
  So the acute sympathetic symptoms after stopping TPN point to hypoglycemia.

Q91 **Text Solution:**
Answer: A. Genu varus
Concept
Lateral curvature of the legs refers to outward bowing of the lower limbs, where the knees are farther apart while ankles may touch. This condition is known as bow legs.
Genu varum is commonly seen in children due to physiological development or conditions like rickets.

Important Point

- Genu varum = bow legs = lateral (outward) curvature
- Knees are separated, ankles may touch
- Often normal in infants but may persist in deficiency states (e.g., vitamin D deficiency)

Confusing Point

- Genu valgum = opposite (knock knees, inward curvature)
- Talipes varus/valgus = foot deformities, not leg alignment issues
  So lateral (outward) curvature of legs specifically indicates genu varum

Q92 **Text Solution:**
Correct Answer: A — Lie flat in bed, provide a quiet environment, and encourage hydration
Explanation:
Post–lumbar puncture headache is due to **cerebrospinal fluid leakage**, which is managed initially by:

- **Bed rest in flat position** (reduces CSF pressure loss)
- **Hydration** (helps CSF production)
- **Quiet environment**

Why others are incorrect:

- **B:** Side lying is not specifically required; flat position is preferred
- **C:** Not first-line; physician is informed only if symptoms persist or worsen
- **D:** Semi-Fowler's position **worsens headache** by increasing CSF leakage effect

✔ **Key Nursing Rule:**
Post lumbar puncture headache → **Flat bed rest + fluids + caffeine (sometimes)**

Q93 **Text Solution:**
Correct Answer: C — Neuman's Systems Model

Why C is correct:
Neuman Systems Model views the client as an **open system** that continuously interacts with:

- **Internal stressors** (physiological, psychological, developmental)
- **External stressors** (environmental, social, cultural)

The focus is on **stress response and prevention**, with flexible lines of defense protecting the system.

Why others are incorrect:

- **A Orem's Self-Care Model** → focuses on **self-care deficits**, not stress systems
- **B Roy Adaptation Model** → views patient as an adaptive system, but emphasizes **adaptation to stimuli**, not primarily stress system structure
- **D Peplau's Interpersonal Model** → focuses on **nurse–patient relationship**, not system-stress interaction

Final takeaway:
👉 **Open system + stressors + prevention = Neuman Systems Model (Option C)**

Q94 **Text Solution:**
Concept
Proper breastfeeding technique ensures **effective latch**, adequate milk transfer, and prevents nipple pain or trauma.
A correct latch requires the baby to take **both nipple and a large part of the areola** into the mouth with the lips flanged outward.
During breastfeeding, the baby should show:

- **Wide-open mouth**
- **Lips turned outward ("flanged")**
- **Chin touching the breast**
- **More areola visible above the baby's mouth than below**

If the latch is improper (like inward-turned lips), the baby cannot suck effectively, leading to **poor feeding, maternal pain, and nipple injury**.
Important Point
Why Option C is Incorrect

- In **correct breastfeeding**, the **baby's lower lip must be turned outward**, not inward.
- Outward lips indicate a **deep latch** and create a good seal for milk extraction.

- **Inward lower lip** suggests:

  - Shallow latch
  - Ineffective suck
  - Possibility of nipple soreness and cracks
  - Inadequate milk transfer → poor weight gain

Therefore, **option C contradicts proper breastfeeding technique**, so it is the incorrect statement.
Explanation of Other Options (Correct Statements)
(a) More areola visible above — Correct

- Baby should take **more of the lower areola** into the mouth.
- This allows the nipple to be positioned far back in the baby's mouth → **effective milk flow**.

(b) Baby's chin is touching the breast — Correct

- Indicates deep latch.
- The chin supports the breast and ensures the ducts are compressed properly.

(d) Baby's mouth is wide open — Correct

- Wide mouth helps the baby grasp the nipple + areola.
- Prevents shallow latch and nipple pain.

Confusing Point
Why students often confuse the lip position

- Many assume only the upper lip should turn outward, but **both upper AND lower lips must flair outward**.
- Some think inward lips still allow suckling, but it causes:

  - Clicking sounds
  - Milk leakage
  - Pain
  - Inefficient feeding

- Visualizing the latch helps:
  Correct latch = "Fish-mouth" appearance with flanged lips.

Q95 **Text Solution:**
Concept
Pre-oxygenation is the process of replacing the nitrogen in the lungs with oxygen before intubation.
Its purpose is to create an **oxygen reserve** so the child can tolerate the apneic period during laryngoscopy and intubation.
Children desaturate faster than adults because of:

- Higher metabolic rate
- Lower functional residual capacity (FRC)
- Smaller oxygen reserves

Therefore, effective pre-oxygenation is essential.
Important Point – Why Option C Is Correct
High-flow oxygen for at least 3 minutes provides optimal denitrogenation.
High-flow oxygen (100 percent) ensures:

- Maximum alveolar oxygenation
- Longer safe apneic time

- Reduced risk of hypoxia during intubation

Three minutes is the standard recommended duration to achieve near-complete lung denitrogenation.
Thus, **hyper-oxygenation with high-flow oxygen for 3 minutes** is the correct and evidence-based practice.

Why the Other Options Are Incorrect

(a) High-flow oxygen for 1 minute — Insufficient time

- One minute does not allow complete denitrogenation.
- Child may still desaturate rapidly.

(b) Low-flow oxygen for 1 minute — Low flow + short duration

- Provides inadequate alveolar oxygenation.
- Not safe during intubation.

(d) Low-flow oxygen for 3 minutes — Duration adequate, but flow inadequate

- Low flow cannot saturate the lungs effectively.
- High-flow oxygen is essential for complete pre-oxygenation.

Confusing Point

Many students assume:

- Children need only **1 minute** because of small lung capacity
- **Low-flow** oxygen is safer for children

Both are incorrect.
Children **must** receive **high-flow 100 percent oxygen for 3 minutes** to prevent rapid desaturation.

Q96 **Text Solution:**

Right answer: B

Concept

GTPAL stands for:
G = Gravida (total number of pregnancies, including current)
T = Term births (≥ 37 weeks)
P = Preterm births (< 37 weeks)
A = Abortions (spontaneous or induced, < 20 weeks)
L = Living children
Twins (or any multiple gestation) count as **one pregnancy** for G and P/T, but **number of babies** counts under L (living children).

Case Breakdown

1. **Current pregnancy = Twins → 1 pregnancy**

2. **Previous delivery:**

   - Delivered at **36 weeks**
   - This is **preterm**
   - She delivered **one child**

3. **No history of abortion**

4. **Living children = 1**

GTPAL Calculation

G (Gravida)
Total pregnancies = 1 previous + current
G = **2**
T (Term births)
No term birth (previous was 36 weeks)
T = **0**
P (Preterm births)
One preterm birth at 36 weeks
P = **1**
A (Abortions)
None
A = **0**
L (Living)

One living child
L = **1**
Thus, the score is:
G = 2, T = 0, P = 1, A = 0, L = 1
Important Point

- **Twins do not increase G or P/T count.**
  They count as **one pregnancy** and **one birth event**.

- Preterm is defined as **20–36+6 weeks**.
  The previous delivery at **36 weeks** is preterm, not term.

Confusing Point
Students often mistakenly:

- Count twins as **two pregnancies** → incorrect
- Count twins as **two preterm births** → incorrect
- Think 36 weeks is term → incorrect (term starts at 37 weeks)

Thus, option **B** is the correct GTPAL score.

Q97 **Text Solution:**
Right answer: C
Concept
The **Weekly Iron and Folic Acid Supplementation (WIFS)** program is a national initiative aimed at preventing iron-deficiency anemia among **adolescent girls and boys aged 10–19 years**.
Under this program, adolescents receive:

- **One Iron–Folic Acid (IFA) tablet weekly**
- Deworming every 6 months
- Nutrition counseling

The standard composition of an adolescent IFA tablet is aimed at meeting weekly iron and folate requirements to prevent anemia in a high-risk group such as adolescent girls.

Important Point
The WIFS program for **adolescent girls** provides:

- **Iron supplementation**
- **Folic acid supplementation**

This combination helps:

- Improve hemoglobin levels
- Prevent iron deficiency anemia
- Support rapid growth during adolescence
- Reduce fatigue and improve school performance

The program uses a fixed weekly dosage that meets physiological requirements.
Confusing Point
Many students confuse:

- **Daily IFA dosage** with **weekly WIFS dosage**
- **Pregnancy-related IFA recommendations** with adolescent WIFS dose
- mg vs mcg units in iron formulations

Q98 **Text Solution:**
Right answer: D
Concept
Age-independent anthropometry means a measurement that does **not change significantly with age**, especially between **1–5 years**, and can be used even when the child's exact age is unknown.
Among anthropometric measurements:

- Height changes with age
- Weight changes with age
- Head circumference changes rapidly in early childhood

But **MUAC remains relatively stable between 1–5 years** and is therefore commonly used for identifying malnutrition (especially severe acute malnutrition).
Important Point

Mid Upper Arm Circumference (MUAC) is the only anthropometric measure that:

- Is **independent of age**
- Can be done **quickly in the field**
- Requires no scale or stadiometer
- Is used in community nutrition programs (like ICDS, WHO guidelines)

MUAC < 11.5 cm = Severe Acute Malnutrition.

Confusing Point

Students often think head circumference is age-independent, but this is incorrect because:

- Head circumference increases rapidly in the first 2 years.
- It is strongly age-dependent and used mainly for developmental or neurological assessment.

Thus, **MUAC (Option D) is the correct and only age-independent anthropometric measure**.

Q99 **Text Solution:**

Concept

In infants **below 1 year of age**, the **Heimlich maneuver (abdominal thrusts) is contraindicated** because it can cause:

- Liver injury
- Damage to abdominal organs
- Ineffective generation of pressure

Therefore, **back blows and chest thrusts** are the recommended techniques.

Correct Steps

1. Support the infant **face-down** on your forearm, keeping the head lower than the body.
2. Deliver **5 firm back blows** between the shoulder blades using the heel of your hand.
3. Turn the infant **face-up**, still supporting the head and neck.
4. Give **5 chest thrusts** using **two fingers** placed on the lower half of the sternum.
5. Repeat the sequence until the object is expelled or the infant becomes unconscious.

Important Point

- The **Heimlich maneuver is used only in children older than 1 year and in adults**.

Confusing Point

- A common mistake is applying the Heimlich maneuver to infants.
- **Guidelines clearly state:**
  - **Infants (<1 year):** Back blows + chest thrusts
  - **Children (>1 year) and adults:** Abdominal thrusts (Heimlich maneuver)

Q100 **Text Solution:**

Concept

AMTSL is a standardized approach used immediately after delivery of the baby to reduce the risk of **postpartum hemorrhage (PPH)**. It consists of three sequential steps.

Important Point

- **Oxytocin** is the uterotonic drug of choice.
- Controlled cord traction (CCT) is performed only after signs of placental separation.
- Uterine massage helps maintain uterine tone after placental delivery.

Confusing Point

- Some students mistakenly place uterine massage before uterotonic administration.
- The **correct sequence starts with uterotonic drugs**, followed by CCT, and ends with uterine massage.