

KANIKA'S NURSING ACADEMY

NORCET-11 PRELIMS 2026

Exam Date – 12th September 2026

1. is applied, makes incomprehensible sounds, and shows abnormal flexion to painful stimulus. What is the patient's Glasgow Coma Scale (GCS) score?

- A. E2V2M3 =7/15
- B. E2 V1 M4 =8/15
- C. E3 V2 M4=9/15
- D. E3 V3 M4=10/15

Answer: A

Rationale: GCS: E2 (opens to pain) + V2 (incomprehensible sounds) + M3 (abnormal flexion) = 7/15.

2. glucose (eAG) in mg/dL:

- A. 158 mg/dL
- B. 154 mg/dL
- C. 150 mg/dL
- D. 145 mg/dL

Answer: B

Rationale: For HbA1c 7%, $eAG \approx 28.7 \times 7 - 46.7 \approx 154$ mg/dL.

3. mmHg. What is the calculated Mean Arterial Pressure (MAP)?

- A. 100 mmHg
- B. 110 mmHg
- C. 120 mmHg
- D. 130 mmHg

Answer: B

Rationale: $MAP \approx (SBP + 2 \times DBP) / 3 = (150 + 2 \times 90) / 3 = 110$ mmHg.

4. antenatal visit with suspected rupture of membranes. A Nitrazine paper test is conducted to differentiate amniotic fluid from normal vaginal secretions. Which statement correctly describes the physiological basis of this test?

- A. Amniotic fluid contains more nutrients and electrolytes than vaginal fluid
- B. Amniotic fluid has a higher pH, whereas vaginal secretions have a lower pH
- C. Amniotic fluid is always thick and yellow in appearance
- D. Amniotic fluid has fewer electrolytes than vaginal secretions

Answer: B

Rationale: Nitrazine distinguishes amniotic fluid by its higher pH (more alkaline) compared with normal acidic vaginal secretions.

5. protozoan parasite?

- A. Dengue
- B. Chikungunya
- C. Kala-azar
- D. Leptospirosis

Answer: C

Rationale: Kala-azar (visceral leishmaniasis) is caused by Leishmania, a protozoan.

6. of the following diseases, EXCEPT:

- A. Measles
- B. Mumps
- C. Rubella
- D. Rickettsia

Answer: D

Rationale: MMR protects against measles, mumps and rubella; it does not protect against Rickettsia.

7. Addison's crisis . Which cluster of characteristics will be found hyponatremia, hyperkalemia which option are found more suggest this condition ?

- A. Hypernatremia
- B. hypoglycemia
- C. Hyperglycemia
- D. hypokalemia

Answer: B

Rationale: Adrenal insufficiency can cause hypoglycemia, hyponatremia and hyperkalemia; among the options, hypoglycemia is correct.

8. and observes the Vaccine Vial Monitor (VVM) shown in the image. What is the appropriate nursing action?

- A. Administer the vaccine immediately
- B. Discard the vaccine vial and do not administer it
- C. Shake the vial to test for the shake test after thawing
- D. Thaw the vial at room temperature for 30 minutes before use

Image from the supplied paper



Answer: B

Rationale: The VVM shown has reached the discard endpoint; the vaccine vial should not be administered.

9. patient in a life-or-death emergency refuses a critical intervention. The family members insist that the healthcare team perform the procedure immediately. What is the most appropriate action by the nurse?

- A. Administer forceful treatment to save the patient's life
- B. Agree with the family and proceed with the emergency intervention
- C. Respect the patient's decision to refuse treatment
- D. Delay the treatment

Answer: C

Rationale: A competent adult with decision-making capacity may refuse treatment. The nurse should respect the informed refusal and document/escalate appropriately.

10. four or more distinct mood episodes (major depression, hypomania, or mania) within a 12-month period. Which clinical pattern best describes this condition?

- A. Rapid cycling episode
- B. Mixed features episode
- C. Dysthymic disorder
- D. Bipolar Disorder

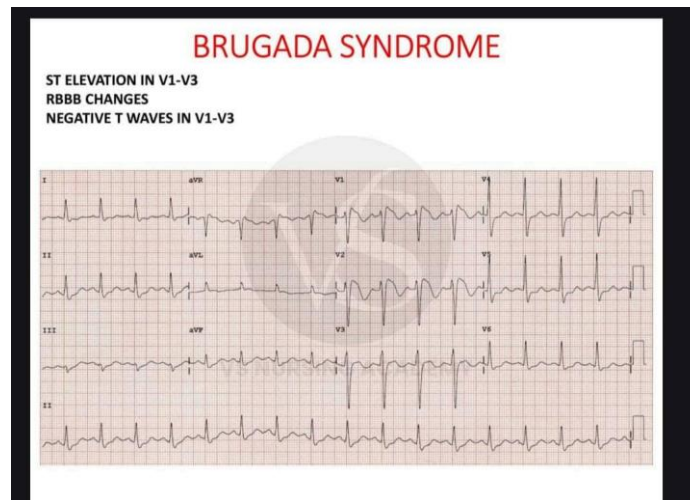
Answer: A

Rationale: Rapid cycling bipolar disorder means at least four distinct mood episodes in a 12-month period.

11.

- A. Brugada Type 1
- B. Brugada Type 2
- C. Brugada Type 3
- D. Wellens Type A

Image from the supplied paper



Answer: A

Rationale: The supplied ECG is a Brugada ECG; among the listed choices, the displayed coved right-precordial ST-elevation pattern is intended as Brugada Type 1.

12. administered under which Ministry/Department of the Government of India?

- A. Ministry of Health and Family Welfare
- B. Ministry of Labour and Employment
- C. Ministry of Social Justice and Empowerment
- D. Ministry of Finance

Answer: B

Rationale: ESI is administered through the Employees' State Insurance Corporation under the Ministry of Labour and Employment.

13. presents 48 hours after their last drink with coarse tremors, visual hallucinations, marked autonomic hyperactivity (blood pressure 170/90 mmHg, tachycardia), and a low-grade fever of 101.2°F (38.4°C). Which condition is the patient experiencing?

- A. Uncomplicated alcohol withdrawal
- B. Delirium tremens
- C. Wernicke's encephalopathy
- D. Korsakoff's psychosis

Answer: B

Rationale: Delirium tremens typically develops about 48–72 hours after cessation/reduction of heavy alcohol use and causes tremor, hallucinations and marked autonomic hyperactivity.

14. likely to develop which combination of electrolyte imbalances and acid-base disorder?

- A. Metabolic acidosis ,Hyperkalemia, hyperphosphatemia, and hypermagnesemia
- B. Metabolic acidosis,Hypokalemia, hypophosphatemia, and hypercalcemia
- C. Metabolic acidosis, Hypernatremia, hypermagnesemia, and hypokalemia
- D. Metabolic acidosis,Hyponatremia, hypokalemia, and hypophosphatemia

Answer: A

Rationale: Advanced CKD commonly produces metabolic acidosis, hyperkalemia and phosphate retention. Option A is the best available combination, although hypermagnesemia is less universal than the other findings.

15. intervention, what does the letter "M" stand for?

- A. Modification
- B. Menu
- C. Motivation
- D. Meal

Answer: B

Rationale: In FRAMES, M = Menu of options.

16. fever of 38.4°C (101.1°F). The latest complete blood count reveals an Absolute Neutrophil Count (ANC) of 400 cells/ μ L. What is the priority nursing intervention?

- A. Administer an antipyretic/analgesic and encourage rest
- B. Encourage oral fluid intake and reassess the temperature in four hours
- C. Place the patient on neutropenic precautions and await the next scheduled assessment
- D. Notify the treating physician immediately

Answer: D

Rationale: Fever with ANC 400/ μ L is febrile neutropenia and requires immediate escalation for urgent assessment and empiric antimicrobial management.

17. imbalance must the nurse monitor most closely to prevent toxicity?

- A. Hypokalemia
- B. Hyponatremia
- C. Hypercalcemia
- D. Hypernatremia

Answer: A

Rationale: Hypokalemia increases myocardial sensitivity to digoxin and increases the risk of toxicity.

18. abdominal pain and slight vaginal bleeding. Serum beta- hCG is slightly elevated, and transvaginal ultrasound reveals an empty intrauterine cavity. Which condition does this presentation most strongly suggest?

- A. Ectopic pregnancy
- B. Threatened abortion
- C. Complete abortion
- D. Hydatidiform mole

Answer: A

Rationale: At 7 weeks, pain/bleeding with an empty uterus and abnormal β -hCG strongly raises concern for ectopic pregnancy.

19. structure of the breast?

- A. Pectoral ligament
- B. Clavipectoral fascia

C. Suspensory ligament (Ligaments of Cooper)

D. Costoclavicular ligament

Answer: C

Rationale: The suspensory ligaments (Cooper's ligaments) are major supporting structures of the breast.

20. named "Amruth" / "Amritha",is associated with which National Health Programme in India?

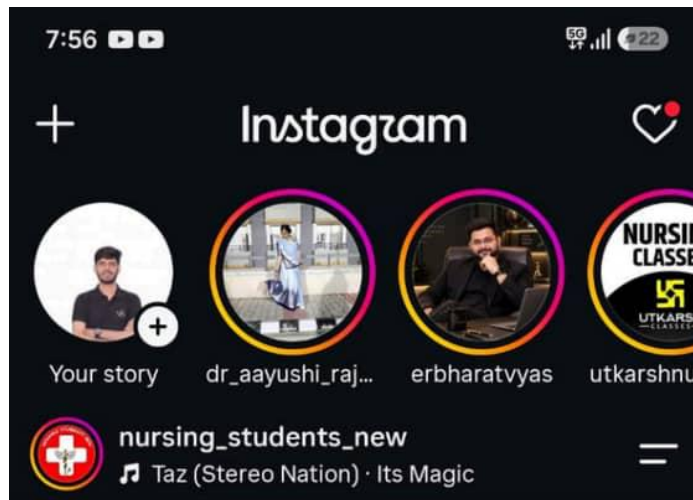
A. Pulse Polio Immunization Programme

B. Jal Jeevan Mission

C. Integrated Child Development Services (ICDS)

D. National Vector Borne Disease Control Programme

Image from the supplied paper



NORCET 11 IBQ



AMITHA → Pulse Polio Programme 🧑👦💧



Answer: A

Rationale: The supplied image shows the polio-free India mascot associated with the Pulse Polio Immunization Programme.

21. 30% sulphuric acid is required. The available solutions are 50% and 30%. What exact composition is needed to prepare 12 litres of 30% sulphuric acid?

A. 4 litres of 50% and 8 litres of 30%

- B. 12 litres of 30% and 0 litres of 50%
- C. 6 litres of 50% and 6 litres of 30%
- D. 3 litres of 50% and 9 litres of 30%

Answer: No valid option

Rationale: The item is mathematically flawed. If 30% solution is already available and the target is exactly 30%, the only exact 12-L mixture is 12 L of 30% solution + 0 L of 50%. None of the four options gives that result.

22. therapy is prescribed an intramuscular iron injection. Which technique should the nurse employ to prevent medication leakage into the subcutaneous tissue and avoid skin

- A. Insert the needle at a 45-degree angle to prevent leakage
- B. Administer in the dorsogluteal site without displacement
- C. Pull the skin laterally, give the injection, withdraw the needle, then release the skin
- D. Massage the site vigorously immediately after injection

Answer: C

Rationale: The Z-track method pulls the skin laterally during injection and releases it after needle withdrawal, helping prevent leakage and skin staining from iron.

23. for age presents with severe muscle wasting, bilateral pedal edema, and lethargy. According to standard clinical classifications of protein-energy malnutrition (PEM) based on weight-for-age and edema (the Wellcome classification), which category does this child fall under?

- A. Marasmic kwashiorkor
- B. Severe underweight
- C. Kwashiorkor
- D. Marasmic child (Marasmus)

Answer: A

Rationale: Weight below 60% of expected plus edema is classified as marasmic kwashiorkor in the Wellcome classification.

24. amniotomy in a patient with polyhydramnios, which of the following practices should be strictly avoided?

- A. Uncontrolled, rapid drainage of liquor
- B. Controlled, gradual drainage of liquor
- C. Continuous assess for cord prolapse
- D. Assessment of fetal heart rate (FHR) & Maternal BP

Answer: A

Rationale: With polyhydramnios, rapid uncontrolled drainage should be avoided because sudden decompression increases risks such as cord prolapse and placental abruption.

25. department following a road traffic accident (RTA). On assessment, the nurse notes unequal pupils (anisocoria), Which of the following is the immediate and most appropriate nursing action to reduce intracranial pressure?

- A. Elevate the head of the bed to 15-30 degrees with the head in a neutral midline position
- B. Maintain the patient in a strictly lateral position

C. Administer rapid intravenous fluid boluses

D. Limit activities that increase intracranial pressure while keeping the bed completely flat

Answer: A

Rationale: Head elevation about 15–30° with the head and neck neutral promotes venous drainage and helps reduce ICP.

26. Programme (NLEP), what is the threshold target for the Annual New Case Detection Rate (ANCDR)?

A. Less than 1 in 10,000

B. Less than 10 in 1 lakh (100,000)

C. Less than 15 in 10,000

D. Less than 20 in 10,000

Answer: B

Rationale: The NLEP target has historically used ANCDR <10 per 100,000 population at subnational/district level. Current NLEP reporting continues to track ANCDR per 100,000.

27. department with altered sensorium and lethargy. The parents claim the child sustained the injury after an accidental "fall from a low bed." strongly suggests Battered Baby Syndrome / than a simple accidental fall?

A. Intraocular Hemorrhage

B. Intracranial hematoma & Contusion on the forehead

C. Shaft fracture of the radius

D. Intraorbital hemorrhage

Answer: A

Rationale: Retinal/intraocular hemorrhage is a classic finding that can raise concern for abusive head trauma when the reported mechanism is inadequate.

28. medication requires routine CBC monitoring?

A. Clozapine

B. Lithium

C. Haloperidol

D. CPZ

Answer: A

Rationale: Clozapine requires regular CBC/ANC monitoring because of the risk of severe neutropenia/agranulocytosis.

29. sudden drop in platelets from 200,000 to 90,000/microL and a drop in hematocrit from 37% to 29% within one week. Which of the following laboratory findings is most likely to also be present in this patient?

A. Increased RBC

B. Decreased AST

C. Increased AST

D. Increased Hb

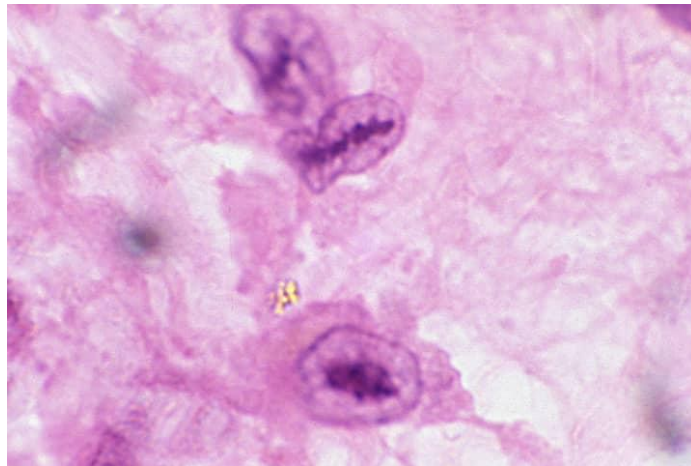
Answer: C

Rationale: Thrombocytopenia with hemolysis/low hematocrit and hepatic involvement in late pregnancy suggests HELLP; AST is expected to be elevated.

30. pathognomonic cell with caterpillar cell. In which condition is this characteristic finding seen?

- A. Rheumatic heart disease / Rheumatic carditis
- B. Acute myocardial infarction
- C. Old / healed myocardial infarction
- D. Pharyngitis 2 weeks ago with GBS infection

Image from the supplied paper



Answer: A

Rationale: Anitschkow ('caterpillar') cells are characteristic of rheumatic carditis, particularly within Aschoff bodies.

31. (Pitocin) infusion for labor augmentation. The nurse recognizes that the oxytocin infusion rate should not be increased further when uterine contractions reach which of the following patterns?

- A. 5 contractions in 10 minutes
- B. 3 contractions in 10 minutes
- C. Contractions occurring every 5 minutes
- D. Contractions lasting 30–40 seconds with resting interval 3 minutes

Answer: A

Rationale: Five or more contractions in 10 minutes represents uterine tachysystole; oxytocin should not be increased further.

32. commonly appears on the posterior neck and flexural folds in patients with diabetes mellitus and insulin resistance?

- A. Acanthosis nigricans
- B. Ectopic Dermatitis
- C. Psoriasis

D. Eczema

Image from the supplied paper



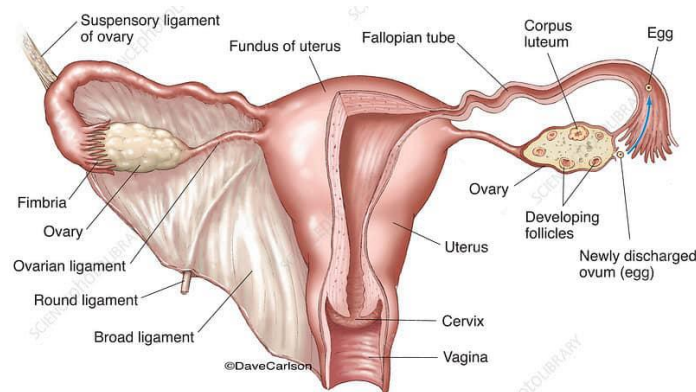
Answer: A

Rationale: Acanthosis nigricans is classically associated with insulin resistance and affects the posterior neck and flexural areas.

33. In the provided anatomical diagram of the female internal reproductive tract, which structure is the suspensory ligament of the ovary?

- A.
- B.
- C.
- D.

Image from the supplied paper



Answer: Suspensory ligament of ovary

Rationale: In the supplied anatomical diagram, the structure is the suspensory ligament of the ovary (infundibulopelvic ligament).

34. Anemia Mukht Bharat (AMB) Abhiyaan, what does the 4th "T" in the T4 approach stand for?

- A. Target
- B. Track
- C. Train

D. Talk

Answer: B

Rationale: The revised 2026 T4 approach is Test, Treat, Talk and Track; the fourth T is Track.

35. level is placed ABOVE the phlebostatic axis, what type of reading is expected?

- A. Falsely high cvp reading in transducer
- B. Falsely low cvp reading in transducer
- C. No change cvp in transducer
- D. Complete loss of the cvp waveform

Answer: B

Rationale: If the zero reference is above the phlebostatic axis, the measured pressure is falsely low.

36. her Last Menstrual Period (LMP) was August 27. According to Naegele's rule, what is her Estimated Date of Delivery (EDD)?

- A. 3 May
- B. 4 May
- C. 3 April
- D. 3 June

Answer: D

Rationale: Naegele's rule: August 27 + 7 days = September 3; subtract 3 months = June 3. Thus the correct option is 3 June.

37. given image:

- A. Xiphopagus
- B. Craniopagus
- C. Pygopagus
- D. Ischiopagus



Answer: A

Rationale: The supplied image is intended to depict xiphopagus/upper ventral fusion; among the listed choices, Xiphopagus is the intended answer.

38. volume, the deepest vertical pockets measured in the quadrants are 1.5 cm, 0.8 cm, 1.2 cm, and 1.0 cm . This finding suggests which of the following?

- A. Oligohydramnios
- B. Polyhydramnios
- C. Borderline oligohydramnios
- D. Normal amniotic fluid volume

Answer: A

Rationale: $AFI = 1.5 + 0.8 + 1.2 + 1.0 = 4.5$ cm. $AFI < 5$ cm indicates oligohydramnios.

39. centre. Which question will help her to find the pattern of alcohol abuse in the patient?

- A. How long you are drinking and how often you drink
- B. Have you ever tried de-addiction before and how was it went

C. Do you think you can quit drinking on your own

D. If you will leave alcohol will your family support this

Answer: A

Rationale: Duration and frequency of drinking directly assess the pattern of alcohol use.

40.

A. Ebstein Anomaly

B. Tetralogy of Fallot

C. TAPVR

D. Tricuspid Atresia

Image from the supplied paper



Answer: C

Rationale: The X-ray shows the classic snowman/figure-of-eight sign of supracardiac total anomalous pulmonary venous return (TAPVR).

41. To prevent brachial plexus and axillary vessel compression during axillary crutch walking, what distance should be maintained between the axilla and the top of the crutch pad?

- A. 1–1.5 inches
- B. 2–3 inches
- C. 3.5–4 inches
- D. 4–5 inches

Answer: B

Rationale: Standard fitting is about 2–3 inches (roughly 2–3 fingerbreadths) below the axilla. The original options split this range, so the item is ambiguous; B is the closest conventional exam answer. For a corrected MCQ, the option should read '2–3 inches.'

42. sputum due to a cardiogenic cause (acute pulmonary edema). What is the primary underlying pathophysiology?

- A. Rupture of bronchial arteries
- B. Transudate fluid leaking due to increased hydrostatic pressure
- C. Continuous alveolar irritation causing mucosal hypersecretion
- D. Exudative fluid accumulation due to increased vascular permeability

Answer: B

Rationale: Cardiogenic pulmonary edema is caused by increased pulmonary capillary hydrostatic pressure, producing transudation of fluid into the alveoli.

43. become trapped behind the glans penis and cannot be returned to its normal position. This condition is known as:

- A. Phimosis
- B. Paraphimosis
- C. Balanoposthitis
- D. Peyronie's disease

Answer: B

Rationale: Paraphimosis is a retracted foreskin trapped behind the glans that cannot be returned to its normal position.

44. area and a known history of hernia. Which type of hernia does this presentation most strongly suggest?

- A. Inguinal hernia
- B. Diaphragmatic hernia
- C. Hiatal hernia
- D. Incisional hernia

Answer: A

Rationale: An inguinal hernia presents in the groin and is the relevant hernia among the choices.

45. in" phase of maternal adaptation. Which action is most characteristic of or appropriate for this phase?

- A. Provide contraceptive counseling
- B. Assist with breastfeeding and rest
- C. Encourage independent newborn care
- D. Teach long-term parenting skills

Answer: B

Rationale: During the taking-in phase, the mother is relatively dependent and focused on recovery and the birth experience; assistance with breastfeeding and rest is appropriate.

46. daily doses rather than as a single large dose?

- A. To allow normal cells time to repair sublethal damage
- B. This will cause secondary relapse
- C. A single dose has no biological effect on tumors
- D. To prevent immediate systemic leukopenia

Answer: A

Rationale: Fractionation allows normal tissues time to repair sublethal injury between doses while maintaining cumulative tumor cell damage.

47. speaking incoherently, and exhibiting fluctuating behavior. Although conscious, she displays erratic and disorganized thoughts while remaining affectionate toward her newborn. Which condition is the patient most likely

- A. Postpartum blues
- B. Postpartum psychosis
- C. Postpartum depression
- D. Post-traumatic stress disorder

Answer: B

Rationale: Postpartum psychosis can occur within days after delivery and may cause incoherent speech, disorganized thinking and fluctuating behavior; it is a psychiatric emergency.

48. crying loudly, and calling out for his parents has now stopped crying, refuses food, avoids eye contact, and shows no interest in toys or play. Which transition in separation anxiety is the child experiencing?

- A. Protest to Despair
- B. Despair to Detachment (Denial)
- C. Detachment to Protest
- D. Denial to Acceptance

Answer: A

Rationale: The child has moved from the protest stage (crying/calling) to despair (withdrawal, reduced appetite and loss of interest).

49. therapy of heroin dependence, which drug is used as to prevent withdrawal and drug craving without producing sharp peaks of euphoria?

- A. Methadone
- B. Diazepam
- C. chlorpromazine
- D. Naloxone

Answer: A

Rationale: Methadone is a long-acting opioid agonist used in substitution treatment to suppress withdrawal and reduce craving.

50. steady decline in neurological function from disease onset, punctuated by acute, clearly defined flare-ups (relapses) followed by incomplete recovery. Which clinical pattern of Multiple Sclerosis is depicted in this graph?

- A. Relapsing-Remitting
- B. Secondary-Progressive
- C. Primary-Progressive
- D. Progressive-Relapsing

Answer: D

Rationale: The older clinical term for steady progression from onset with superimposed relapses is progressive-relapsing MS. Modern classifications usually describe this under progressive MS with activity.

51. exacerbation of COPD has an ABG showing: pH 7.34, pCO₂ = 64mmHg, and PaO₂ = 68 mmHg. The expiratory flow waveform fails to return to baseline before the next breath begins, indicating significant air trapping. Which ventilator modification should be made on priority?

- A. Increase PEEP to 12 Cm H₂O
- B. Increase FiO₂ to 100%
- C. Decrease respiratory rate (allow longer expiratory ti
- D. Increase tidal volume to 600 ml

Answer: C

Rationale: Failure of expiratory flow to return to baseline indicates dynamic hyperinflation/auto-PEEP; lowering the respiratory rate allows more expiratory time.

52. infusion of Noradrenaline at 0.1 mcg/kg/min. The pharmacy prepares a solution containing 4mg of Noradrenaline diluted in 250 ml of normal saline 0.9% NaCl. At what rate in mL/hr should the nurse set the infusion pump?

- A. 35 mL/hr
- B. 16.5 ml/hr
- C. 26.25 mL/hr
- D. 6.5ml/hr

Answer: C

Rationale: Required dose = $0.1 \times 70 = 7$ mcg/min. Concentration = $4000 \text{ mcg} / 250 \text{ mL} = 16 \text{ mcg/mL}$. Rate = $7 / 16 \times 60 = 26.25 \text{ mL/hr}$.

53. of 45 mg intramuscularly. The medication is available in a vial labeled 80 mg/ 2 mL. How many milliliters (mL) should the nurse draw into the syringe?

- A. 1.6 mL
- B. 1.5 mL
- C. 1.13 mL or 1.125 mL
- D. 1.0 mL

Answer: C

Rationale: $80 \text{ mg}/2 \text{ mL} = 40 \text{ mg/mL}$. Volume = $45/40 = 1.125 \text{ mL}$, approximately 1.13 mL.

54. prevalence of hypertension in a defined community and conducts a single survey to assess exposure and disease status simultaneously. What type of study design is this?

- A. Cross-sectional study
- B. Case-control study
- C. cohort study
- D. Retrospective study

Answer: A

Rationale: A one-time survey measuring exposure and disease status at the same time is a cross-sectional study.

55. for mediating a Type I (immediate) hypersensitivity reaction?

- A. T lymphocytes activate and secrete inflammatory cytokines
- B. IgE antibodies cross-link on mast cells, triggering the release of chemical mediators
- C. IgG and IgM antibodies activate the complement cascade against cell-surface antigens
- D. Deposition of circulating antigen-antibody immune complexes in microvasculature

Answer: B

Rationale: Type I hypersensitivity is IgE-mediated; allergen cross-linking of IgE on mast cells causes release of mediators.

56. hypotension and bradycardia was administered intravenous epinephrine in an incorrect concentration of 1:1,000. Despite this, the patient's blood pressure and heart rate continue to drop. What is the immediate priority action for the nurse?

- A. Administer a repeat dose of Epinephrine 1:1,000 immediately
- B. Administer Epinephrine 1:10,000 without waiting
- C. Immediately notify the physician/resuscitation team while initiating CPR and standard life support protocols
- D. Increase the maintenance intravenous fluid rate and recheck vitals in 15 minutes

Answer: C

Rationale: IV 1:1000 epinephrine is an unsafe concentration for routine IV use and dosing errors can be life-threatening. The immediate priority is to activate the resuscitation team, provide appropriate life support and correct the medication error rather than automatically repeating the wrong dose.

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Rationale: This is a duplicate of Q56 in the supplied paper; the same priority applies.

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Answer: C

Rationale: This is a duplicate of Q56 in the supplied paper; the same priority applies.

59. develops systemic candidiasis. The nurse should know that which systems/sites are most commonly involved?

- A. Gastrointestinal and bloodstream
- B. CNS and sinus
- C. Integumentary and joint
- D. Genitourinary and respiratory

Answer: A

Rationale: In neutropenic leukemia patients, Candida can originate from the GI tract and produce bloodstream infection; among the supplied choices, A is the closest. The question is somewhat imprecise because disseminated candidiasis commonly involves liver/spleen as well.

60. the examiner to point to their knees, but instead points to their elbows, and repeatedly confuses body parts, particularly between upper and lower limbs. What is the clinical term for this inability to correctly locate, identify, or differentiate one's own body parts?

- A. Autotopagnosia
- B. Anosognosia
- C. Astereognosis
- D. Apraxia

Answer: A

Rationale: Autotopagnosia is impaired identification/localization of one's own body parts, classically associated with dominant parietal dysfunction.

61. CSF findings: WBC: Predominantly neutrophils Glucose: 25 mg/dL Protein: 180 mg/dL. Which type of meningitis is most likely?

- A. Viral meningitis
- B. Bacterial meningitis
- C. Tubercular meningitis

D. Fungal meningitis

Answer: B

Rationale: Neutrophilic CSF, very low glucose and high protein strongly indicate bacterial meningitis.

62. orderly pattern, has limited social interaction and poor eye contact, and frequently exhibits severe temper tantrums whenever this routine or arrangement is disturbed. Which condition is most likely?

- A. Attention-deficit/hyperactivity disorder (ADHD)
- B. Autism spectrum disorder (ASD)
- C. Conduct disorder (CD)
- D. Oppositional defiant disorder (ODD)

Answer: B

Rationale: Restricted/repetitive behavior, insistence on sameness and impaired social communication are characteristic of autism spectrum disorder.

63. measured using a Broselow Pediatric Emergency Tape to determine appropriate equipment sizing and resuscitation medication dosages. How should the tape be positioned and measured?

- A. Align the red portion at the top of the head and measure down to the heels
- B. Align the red portion at the tips of the toes and measure up to the heels
- C. Lay the tape beside the child's body measuring from toe to head
- D. Position the child in semi-Fowler's position and measure arm span from fingertip to fingertip

Answer: A

Rationale: Place the child supine, align the tape's marked/red end at the top of the head and measure to the heel; the color zone at the heel gives the estimated weight/equipment category.

64. patient is observed maintaining an awkward, rigid posture with one hand raised and one leg stretched out for an extended period. When asked why he is maintaining this posture, he replies, "I don't know. I am not aware of my position." This psychomotor abnormality is known as:

- A. Delusion
- B. Hallucination
- C. Catalepsy
- D. Echolalia

Answer: C

Rationale: Catalepsy is prolonged maintenance of a posture despite no apparent purpose.

65. hematologic malignancy presents with nausea, abdominal cramping, and oliguria. Laboratory workup reveals hyperuricemia, hyperkalemia, elevated serum creatinine, and decreased urine concentrating ability. Which oncologic emergency is the patient most likely experiencing?

- A. Tumor Lysis Syndrome (TLS)
- B. Syndrome of Inappropriate Antidiuretic Hormone (SIADH)
- C. Diabetes Insipidus (Deficient ADH)

D. Dehydration

Answer: A

Rationale: Hyperuricemia, hyperkalemia, renal dysfunction and oliguria after chemotherapy are classic tumor lysis syndrome.

66. cystic fibrosis. Before initiating therapy with this medication, which baseline laboratory assessment is most essential for the nurse to verify?

- A. Serum lipase and amylase levels
- B. Liver function tests (LFTs)
- C. Complete blood count (CBC)
- D. Serum creatinine and blood urea nitrogen (BUN)

Answer: B

Rationale: Ivacaftor-containing therapy requires baseline and follow-up liver function testing because of potential hepatotoxicity.

67. immunosuppression with cyclosporine presents with an elevated serum creatinine and decreased urine output, mimicking allograft failure. On physical examination, there is fever and graft tenderness or swelling. How should the nurse interpret these findings?

- A. Cyclosporine toxicity
- B. Acute allograft rejection
- C. Chronic allograft arteriopathy
- D. Cytomegalovirus (CMV) infection

Answer: B

Rationale: Fever, graft tenderness/swelling and falling graft function are classic warning signs of acute allograft rejection.

68. used under the National Programme for Prevention and Control of Non-Communicable Diseases (NP-NCD), a person is considered to have a high risk of non-communicable diseases (NCDs) and requires prioritization for screening/referral when the CBAC score is:

- A. More than or equal to 4 (or > 4)
- B. More than or equal to 5
- C. More than or equal to 6
- D. More than or equal to 7

Answer: A

Rationale: Under current NP-NCD guidance, a CBAC score of 4 or more indicates high risk and prioritization for NCD screening/referral.

69. signs of acutely increased intracranial pressure (ICP), including bradycardia, systolic hypertension, and irregular respirations (Cushing's triad). Which nursing action should be avoided in the care of this patient?

- A. Keeping the head in a neutral, midline position
- B. Elevating the head of the bed 15 to 30 degree
- C. hanging the position side-to-side frequently (frequent turning/repositioning)

D. Providing uninterrupted periods of rest (clustering care carefully)

Answer: C

Rationale: Frequent unnecessary turning/repositioning can transiently raise ICP; care should be clustered and repositioning done gently/appropriately.

70. activity (PEA). CPR is initiated and epinephrine (adrenaline) is administered. After resuscitation efforts, the patient develops jugular venous distension, hypotension, and tracheal deviation. Which condition should the nurse suspect as the underlying reversible cause?

- A. Massive pulmonary embolism
- B. Tension pneumothorax
- C. Cardiac tamponade
- D. Acute myocardial infarction

Answer: B

Rationale: PEA with hypotension, JVD and tracheal deviation strongly suggests tension pneumothorax, a reversible obstructive cause of cardiac arrest.

71. pressure measurements: Brachial systolic BP = 130 mmHg Right ankle systolic BP = 65 mmHg Left ankle systolic BP = 104 mmHg. Which statement is most appropriate?

- A. Right ABI is 0.80 and left ABI is 0.50
- B. Right ABI is 0.50 and left ABI is 0.80
- C. Both legs have normal ABI
- D. Left leg has more severe arterial insufficiency than the right leg

Answer: B

Rationale: Right ABI = $65/130 = 0.50$; left ABI = $104/130 = 0.80$.

72. A shopkeeper purchased dresses and pairs of shoes for a total cost of ₹48,000. A dress costs ₹400 and a pair of shoes costs ₹1,000. Which of the following combinations satisfies the purchase-cost equation?

- A. 60 dresses and 10 pairs of shoes
- B. 70 dresses and 20 pairs of shoes
- C. 80 dresses and 30 pairs of shoes
- D. 50 dresses and 25 pairs of shoes

Answer: No unique valid answer

Rationale: The purchase-cost equation is $400x + 1000y = 48,000$, which has multiple integer solutions. Option B (70 dresses, 20 pairs) satisfies the cost equation, but the stated ₹18,000 profit cannot be used because selling prices are missing. The question is therefore incomplete as written.

73. intramuscular (IM) adrenaline. After 5 minutes, reassessment reveals persistent stridor, bronchospasm, and respiratory distress. What is the immediate next step in?

- A. Treat bronchospasm then further
- B. Repeat IM adrenaline
- C. Start IV adrenaline immediately
- D. Give nebulization salbutamol

Answer: B

Rationale: For persistent severe anaphylaxis after 5 minutes, repeat IM adrenaline is the immediate next step while airway and other supportive measures continue. IV adrenaline is reserved for appropriately monitored specialist settings.

74.

- A. Dinar
- B. Dirham
- C. Rial
- D. Qiran

Answer: C

Rationale: Iran's official currency is the Iranian rial.

75. आपस में घटाने पर 21 आना चाहिए।

- A. 50, 66
- B. 68, 47
- C. 74, 43
- D. 56, 59

Answer: B

Rationale: $x+y=115$ and $x-y=21$; adding gives $2x=136$, so $x=68$ and $y=47$.

76. कुल मुनाफा कितना आ?

- A. ₹600
- B. ₹550
- C. ₹700
- D. ₹850

Answer: B

Rationale: $50 \text{ dozen} \times ₹25 = ₹1,250$ revenue; $₹1,250 - ₹700 = ₹550$ profit.

77.

- A. Imphal
- B. Itanagar
- C. Kohima
- D. Gangtok

Answer: B

Rationale: Itanagar is the capital of Arunachal Pradesh.

78.

- A. McMahon Line
- B. Radcliffe Line
- C. Durand Line
- D. Line of Control

Answer: B

Rationale: The Radcliffe Line was the boundary demarcation associated with the 1947 partition of British India.

79.

- A. Gross Domestic Product
- B. General Domestic Product
- C. Gross Development Product
- D. General Development Product

Answer: A

Rationale: GDP = Gross Domestic Product.

80. Some people bought ___ for the bride and groom.

- A. Tariff
- B. Presents
- C. Privilege
- D. Prescription

Answer: B

Rationale: Corrected sentence: 'Some people bought presents for the bride and groom.' The option should be written as 'Presents' (plural).

81.

- A. Embaras
- B. Embarrass
- C. Embarasa
- D. Embras

Answer: B

Rationale: Embarrass is the correctly spelled word.

82.

- A. Priviledge
- B. Privilege
- C. Privelege
- D. Privillage

Answer: B

Rationale: Privilege is the correctly spelled word.

83.

- A. Mahanadi
- B. Godavari
- C. Tapti
- D. Kaveri

Answer: C

Rationale: The Tapti (Tapi) River drains into the Arabian Sea. Mahanadi, Godavari and Kaveri drain into the Bay of Bengal.

84.

- A. Worry
- B. Shout
- C. Cry
- D. Laugh

Answer: C

Rationale: The standard proverb is 'Don't cry over spilt milk.'

85. Which river valley civilization covered the largest geographical area among the major ancient river-valley civilizations?

- A. Nile
- B. Mesopotamian/Tigris-Euphrates
- C. Indus
- D. Huang He

Answer: C

Rationale: The Indus (Harappan) civilization covered a very large geographical area and is commonly described as the largest of the major ancient river-valley civilizations in geographic extent.

86. flooded people ?

- A. rays
- B. raise
- C. ray
- D. raze

Answer: A

Rationale: Corrected sentence: 'The sun's rays bring pleasure to the flooded people.' The correct word is 'rays'.

