Part 1

SITUATION: To contribute to the attainment of "Philippine 2000", Department of Health has been implementing various programs. The following question refers to this:

- In the implementation of the Family Planning Program, the target age group is:
 - A. 15-49 years old
 - B. 15-44 years oldC. 14-49 years old

 - D. 14-44 years old
- 2. A method of contraceptive where the semen is ejaculated outside the vagina is called
 - A. Copulation
 - B. Abstinence
 - C. Withdrawal
 - D. Safe sex
- 3. A contraceptive method which prevent the meeting of the sperm and egg through abstinence is:
 - A. Natural method
 - B. Hormonal method
 - C. Surgical method
 - D. Barrier method
- 4. When is the proper time to insert IUD during postpartum?

 - B. Immediately after delivery up to 6 weeks
 - C. After 2 months
 - D. After 3 months
- The following vaccines are given in 3 doses:
 - A. DPT and polio
 - B. Measles and polio
 - C. Measles and hepatitis
 - BCG and DPT
- The minimum interval between doses is:
 - A. Three weeks
 - B. One week
 - C. None, since DPT is given as a single dose
 - D. Four weeks
- 8. Which of the following is a live, attenuated bacterial vaccine?
 - A. Tetanus
 - B. pertussis
 - C. Diphtheria
 - D. BCG

- 9. Which of the following is not included in the seven EPI diseases?
 - A. Rabies
 - B. TB and diphtheria

- C. pertussis and tetanus
- D. Measles
- 10. The system of ensuring the potency of vaccine from the time of manufacture to the time it is administered to the child or pregnant woman is called the:
 - A. Potency chain
 - B. Cold chain
 - C. Speed chain
 - D. Freeze chain
- 11. The Presidential Decree signed by former President Marcos on September 16, 1976 that provides for "Compulsory Basic Immunization for infants and children below eight years of age is:
 - A. PD 1081
 - B. PD 1016
 - C. PD 996
 - D. PD 4

- 12. Which of the following vaccine need to be reconstituted with special diluents before use?
 - A. BCG, measles
 - B. Tetanus toxoid
 - C. OPV and tetanus toxoid
 - D. OPV and DPT
- 13. In active immunity:
 - A. The antibodies are manufactured by the tissues of the body itself
 - B. The antibodies are given by the natural process, as in breastfeeding
 - C. Resistance present in a distinct person that may not be found in others
 - D. The antibodies are already formed and introduced in the body
- 14. The acronym of EPI stands for:
 - A. Expanded Program on Immunization
 - B. Experimental Program on Immunization
 - C. Extensive Program on Immunization
 - D. Expanded Public Immunization
- 15. Mrs. Cruz the first booster of tetanus toxoid on February 14, 1998. She will be asked to come back:
 - A. On March 14, 1998
 - B. Six months after
 - C. On August 14, 1998
 - D. On the 5th or 6th month of her next pregnancy
- 16. A three-year-old child with cough was brought by her mother to the health center because she thinks the child has fast breathing. On examination, it was noted that the child has a respiratory rate of 22 per minute, with slight fever and no chest indrawing. In the ARI classification, the child has:
 - A. Pneumonia
 - B. severe pneumonia
 - C. no pneumonia
 - D URTI

A. Plan A B. Plan B C. Plan C D. Plan D 18. Using your answer to the above question, this child will be given Oresol using the following schedule: A. 50-100 ml. after each bowel movement B. 600-800 ml. for the first four hours C. 800-1200 ml. for the first four hours D. 100-200 ml. after each bowel movement 19. Which of the following signs and symptoms indicate severe dehydration? A. Bulging of the fontanel B. An active, playful child C. Skin pinch goes back very slowly D. Presence of tears when crying 20. Maria, a four-year-old child, came to the health center with chest indrawing. Further history taking and examination shows no convulsion, no inability to drink, nor any of the danger sign. She is classified in ARI Program to have: A. Pneumonia (not severe) B. Severe pneumonia C. No pneumonia D. Very severe disease PROPERTY OF www.aaroncyuntalan.com 21. In the ARI Program, chest indrawing would mean: A. Noisy inspiration B. Noisy expiration C. Respiratory rate of 40 and above D. Sub costal retraction 22. Under the same program, management for Maria would be: A. Home care B. Referral to the hospital C. Close observation D. Oxygen administration 23. Which of the following is considered as a danger sign for Maria? A. Fast breathing C. Convulsion B. Chest indrawing D. Wheezing 24. A child was found to have an acute ear infection. Under the ARI program, the following should be done by the health worker EXCEPT: A. dry the ear discharge by a cotton wick

17. A two-year-old child came to the health center because of diarrhea. He is alert; there is neither thirst nor

child can be managed with:

vomiting. Using CDD Assessment Chart, this

B. refer immediately to a hospitalC. give an oral antibioticD. treat fever if present

A. Co-trimoxazole

25. This is the drug of choice in the treatment of early pneumonia:

- B. Salbutamol
- C. Penicillin
- D. Erythromycin
- 26. A month old infant with diarrhea was brought to the health center. There was mild dehydration on examination.
 - As the health worker on duty, you would advise the mother:
 - A. continue breastfeeding and use oresol exclusively
 - B. advise the mother to immediately proceed to the hospital
 - C. To continue breastfeeding, supplemented by oresol
 - D. Treat the diarrhea with ¼ tablet of an anti-diarrhea drug (eg. Diatabs) if the baby can tolerate it.
- 27. Which of the following is NOT a disadvantage of the condom as a method of contraception?
 - A. It has low effectiveness
 - B. There could be a possibility of defects such as holes or tearing
 - C. There is need to change with act of coitus
 - D. it does not interrupt coitus
- 28. In the ARI Program, a child who has ONLY ONE of the danger signs in classified as having:
 - A. Severe pneumonia
 - B. No pneumonia
 - C. Very severe disease
 - D. Pneumonia
- 29. Subsequent doses of DPT vaccination are not administered anymore of a child experiences:
 - A. Abscess
 - B. convulsions
 - C. fever

- D. Localized pain at the injection site.
- 30. Which of the following is NOT a component of ORAL Rehydration Salt (ORS) formula as recommended by the WHO/UNICEF:
 - A. calcium chloride 1.5g
 - B. Sodium Chloride 3.5g
 - C. glucose 20.0g
 - D. Sodium bicarbonate 2.5g
- 31. The term vaccine is derived from the Latin word "VACCUS" which means:
 - A. Tomorrow
 - B. Protection
 - C. Immunity
 - D. Cow
- 32. Which of the following about the IUD is/are true:
 - A. a woman is wearing an IUD cannot do heavy work
 - B. Once in place and no problems are experienced, the IUD can remain in place up to nine years.
 - C. The IUD significantly causes ectopic pregnancy
 - D. None of these
- 33. Mang Jose is a confirmed TB case. He is registered under the National Tuberculosis Program (NTP) of the DOH. The following are the major components of the NTP EXCEPT:
 - A. case finding
 - B. hospitalization

- C. ambulatory chemotherapy
- D. BCG immunization
- 34. The condition of Mang Jose is classified as a:
 - A. Health threat
 - B. Health deficit
 - C. Foreseeable crisis
 - D. Stress point
- 35. Under the NTP, mang Jose is qualified for this treatment:
 - A. Multiple Drug Therapy (MDT)
 - B. Short Course Chemotherapy (SCC)
 - C. Streptomycin Sulfate injection only
 - D. Any of the above
- 36. The above treatment should be given to Mang Jose for a period of:
 - A. Six months
 - B. Eight months
 - C. Twelve months
 - D. Twenty-four months
- 37. Cancer Awareness month is celebrated every:
 - A. January
 - B. February
 - C. June
 - D. December

SITUATION: the Following questions refer to concepts of public health and Public Health Midwifery.

- 38. Essential elements of Primary Health Care include all the following EXCEPT:
 - A. Provision of essential drugs
 - B. Immunization
 - C. Provision of totally free hospitalization of any Filipino regardless of illness
 - D. Maternal child care and family planning
- 39. Primary health care is focused on:
 - A. The promotion of the community participation in problem identification and provision of solutions to such problems
 - B. The promotion of the collaboration between the government and private sectors
 - C. The role of the national government in nation building
 - D. The role of the government in health care delivery
- 40. The frontline health worker is the :
 - A. Nurse
 - B. Midwife
 - C. Doctor
 - D. Sanitary inspector
- 41. The basic unit of service in Public Health practice is the :
 - A. individual

| C. community D. any of the above |
|---|
| 42. The Rural Health Unit (RHU) belong to the : |
| A. fourth level of health care |
| B. primary level of health care |
| C. Secondary level of health care |
| D. tertiary level of health care |
| 43. In correcting misconceptions and myths about certain diseases and their management, the health worker should first: |
| A. Identify the myths and misconceptions prevailing in the community |
| B. Explain how and why these myths came about |
| C. select the appropriate IEC strategies to correct them |
| D. identify the source of these myths and misconceptions |
| 44. If a midwife intend to assess the health problems in a community, which of the following should be done? A. get the data from the barangay records |
| B. conduct a community assembly |
| C. conduct a house to house campaign |
| D. conduct community health survey |
| 45. Institution of measures to solve the problem in the community is a task termed as : |
| A. Evaluation |
| B. Planning |
| C. Intervention D. assessment |
| D. dosessinent |
| 46. the number of midwives needed in a community with a population of 35000 is : |
| A. 5 |
| B. 3 |
| C. 7 |
| D. 6 |
| 47. the primary level on the referral system of the community is comprised of the following EXCEPT: |
| A. the barangay |
| B. the family |
| C. district hospitals |
| D. the RHU |
| SITUATION: Malnutrition is one of the leading health problems of the country; hence, the implementation of the Philippine Nutrition Program. |
| 48. As a health problem, malnutrition is classified as a : |
| A. Health threat |
| B. Health Deficit |
| C. Foreseeable crises |
| D. stress point |
| 49. The Micronutrient Program of the DOH focuses on: |
| A. Vitamin A, iron and Iodine |

B. Protein, iron and iodine
C. Calcium, protein and carbohydrates

B. family

| | D. Vitamin A, Calcium and iodine |
|------------------|---|
| 50. High | risk conditions for Vitamin A deficiency include all of the following EXCEPT: |
| | A. chronic Diarrhea |
| | B. recent measles |
| | C. hyperthyroidism |
| | D. riboflavin and vitamin D |
| 51. The vitamins | water soluble vitamins are mainly excreted through the urine. Which of the following pairs are water soluble? |
| | A. Vitamin K and A |
| | B. pyridoxine and Vit E |
| | C. pyridoxine and riboflavin |
| | D. riboflavine and vitamin D |
| 52. Cere | eals like rice, bread and rootcrops are rich in : |
| | A. proteins |
| | B. minerals |
| | C. carbohydrates |
| | D. vitamins |
| 53. Your | ng children who eat no yellow or dark green fruits and vegetables may eventually: |
| | A. suffer from diarrhea |
| | B. become blind |
| | C. suffer from amnesia |
| | D. have rickets |
| 54. Goite | er is usually prevalent in : |
| | A. islands or peninsulas |
| | B. mountainous areas |
| | C. lowlands |
| | D. coastal areas |
| 55. the 6 | earliest sign or indicator of malnutrition is : |
| | A. loss of appetite |
| | B. growth failure |
| | C. fever at night |
| | D. frequent infection |
| 56. Over | cooking of vegetables can cause the lack of vitamin C in the diet. This can lead to: |
| | A. pellagra |
| | B. xerophthalmia |
| | C. goiter |
| | D. scurvy |
| SITUAT | ION: Herbal Medicine is one of the essential features of Primary Health Care |
| 57. Thes | se herbal plant is used to lower body temperature: |
| | A. lagundi |
| | B. camias |
| | C. balimbing |
| | D. All of the above |

58. Niyug-niyugan is effective in the relief of :

- A. boils
- B. parasitism
- C. mumps
- D. constipation
- 59. Gumamela (hibiscus) is used for:
 - A. ascaris
 - B. boils and mumps
 - C. Scabies
 - D. All of the above

SITUATION: in the care of her clients in the community, the Public Health Midwife utilizes the NURSING PROCESS

- 60. The steps of the nursing process in their proper sequence are:
 - A. evaluation, assessment, intervention
 - B. planning, intervention, evaluation
 - C. intervention, planning, evaluation
 - D. assessment, evaluation, intervention
- 61. Home visit is one of the ways by which PHM renders care to the families. Which of the following cases should be visited LAST by the PHM?
 - A. a pregnant mother on her third trimester
 - B. the post-partum case
 - C. a patient with typhoid fever
 - D. a new born baby with the cord still intact
- 62. this refers to the tools by which the PHM performs procedures during home visit:
 - A. bag technique
 - B. public health bag
 - C. public health midwifery
 - D. interviews
- 63. In your home visit to a pregnant mother, you found out that she has not received any tetanus toxoid immunization yet. This constitutes a :
 - A. health threat
 - B. health deficit
 - C. stress point
 - D. foreseeable crisis
- 64. This phase of the Nursing Process Determines whether objectives have been attained or not. This is called:
 - A. Assessment
 - B. Planning
 - C. implementation
 - D. evaluation
- SITUATION: A PHM is responsible also for the case of sick clientele in the community
- 65. The study of frequency and distribution of diseases is called:
 - A. Ecology
 - B. Epidemiology

| 1 | C. Etiology E. Microbiology |
|------------|--|
| ,] | of Malaria are always present in Palawan. This Diseases occurrence is termed as : A. Epidemic B. Endemic C. Sporadic D. Pandemic |
| , [| ntion Is better than cure. Immunization falls under what level of prevention? A. Primary B. Secondary C. Tertiary D. Specialized |
| , [| alls under the secondary level of prevention : A. preparing balance diet for the family B. giving oresol to a child with diarrhea C. proper disposal of garbage D. cottage industry for physically disabled |
| ,] | nortality measures refers to the number of children who die before reaching the age of one year: A. Neonatal Mortality Rate B. Infant Mortality Rate C. Maternal Mortality Rate D. Fetal Death Rate |
| , [| naternal Mortality Rate is computed by determining the number of maternal deaths as compared with : A. the total population B. the registered live births C. the population exposed D. none of the above. |
| , [| nine the Crude birth Rate (CBR) of a barangay with population of 10000 and a registered live births of 100. A. 100/1000 population B. 10/1000 population C. 10/10000 pop D. 1/1000 pop |
| Total Popu | demic of typhoid fever broke out in Barangay X. out of the 2000 pop exposed, 75 cases have been identified. ulation of the barangay is 5000. What Is the incidence rate of typhoid fever? A. 5 B. 3.75 C. 4 D. 50 |
| | Ith statistics, mortality include : A. individual records of live births and fetal deaths B. individual records of the deaths indicating the dates and causes with or without medical attendance. C. records of communicable diseases F. individual records of illnesses |

. In the course of the community survey being done, the PHM finds an unconscious patient in the street. The first action she must do to revive him is:

- A. give mouth to mouth resuscitation B. do cardiac massage C. make sure the airway is clear
- D. bring him at once to the hospital
- 75. Considered as the key strategy in arresting the rapid increase in the number of deaths from health problems:
 - A. specialized hospitals
 - B. advancement in medical technology
 - C. public awareness and health education
 - D. All of the above
- 76. If a patient tried to commit suicide by taking an overdose of sleeping pills, the first aid measure that the midwife can do is:
 - A. Don't induce vomiting
 - B. Give stimulant like coffee if still awake
 - C. Do a gastric lavage
 - D. Inject a stimulant
- 77. Cardio-pulmonary resuscitation is done as an emergency measure when:
 - A. There is a respiratory arrest
 - B. There is heart beat but no breathing
 - C. There is cardiac arrest
 - D. A and C only
- 78. Which of the following cases will be counted under maternal deaths?
 - A. a woman suspected of ectopic pregnancy killed in a car accident
 - B. a post-partum mother who died of uterine bleeding
 - C. a woman with a uterine myoma
 - D. none of the above
- SITUATION: during one of the morbid clinic days, Rita admitted a 4 month old child who was having diarrhea.
- 79. Acute diarrhea is defined as:
 - A. 2 liquid stools per day for 10 days
 - B. 3 or more liquid stools per day for less than 2 weeks
 - C. 3 or more liquid stools per day for more than 2 weeks
 - D. 3 LBM per day for 2 weeks or more in duration

- 80. in her assessment of the child, Rita found out the following: the child is restless, thirsty and on pinching his skin, it went back slowly. The child is having diarrhea with:
 - A. no sign of dehydration
 - B. some dehydration
 - C. Severe dehydration
 - D. moderate dehydration
- 81. with the above status of the child, Rita can manage him by using:
 - A. Plan A
 - B. Plan B
 - C. Plan C
 - D. Plan D

82. Should the child be allowed to go home, management continues. Home treatment of diarrhea include the following A. give more fluids than usuals B. Feed the child C. oresol at the prescribed amount D. all of the above SITUATION: Mang Pedro is one of Rita's clients. He is suffering from tuberculosis at present. His sputum exam is positive (+) 83. Sputum exam falls under what level of prevention? A. Primary B. Secondary C. Tertiary D. Specialized 84. The standard Regimen (SR) for TB is given for a period of : A. One vear B. Six months C. Eight months D. Two months 85. Medication under the Standard Regimen included the following: A. Streptomycin, INH B. Rifampicin, INH, Lamprene C. INH, PZA, Rifampicin D. Rifampicin, dapsone 86. Mang Pedro is jobless at present. Hence, the family is having in making both ends meet. Unemployment is classified as: A. A health threat B. Health deficit C. stress point D. Forseeable crisis SITUATION: Miss Eliza Baltazar is a PHM assigned in a barangay. In the care of families in the barangay, Miss Baltazar utilizes the home visit as her method of family – nurse contact: 87. the following best describes a home EXCEPT: A. a professional contact made by the midwife to families B. extension of the services of the health center C. may or may not be recorded D. should have an objective 88. The following are priority groups for a home visit: A. pregnant mother and under 6 children B. Morbid and the old C. post-partum and morbid D. infants and post-partum 89. When miss Baltazar prepares for home visit, she should consider the following principles: A. planning should revolve around the needs of the family B. planning should make use of available information about the family C. planning should be flexible D. all of the above 90. Susan, who is now 2 months pregnant, should be home visited:

A. once in a month

| | A. because she is high risk B. to find out if home delivery is possible after assessing their living condition C. to motivate her to deliver in the hospital D. to teach her what to prepare |
|-----------|--|
| 92. Beca | ause mang Jose is a morbid case, home visit should be done: A. Daily B. weekly C. when necessary D. monthly |
| 93. Whe | en Miss Baltazar visits the families, she first explains her purpose and tries to establish rapport with the family. |
| | A. planning |
| | B. introduction and approach to the family |
| | C. activities during the visit D. summary and evaluation |
| 04 Duri | ng her home visit, Ms Baltazar always brings her phn bag. The main purpose of the bag is to : |
| 54. Duili | A. have a container for equipment |
| | B. prevent spread of infection |
| | C. carry the BP apparatus |
| | D. live up to the picture of being a PHM |
| 95. the f | iollowing are the principles of the bag technique EXCEPT: A. it should minimize infection B. it should not overshadow concern for the patient C. It should follow strictly the steps as planned D. none of the above |
| | |

91. Susan plans to deliver at home. As such, she should be home visited:

B. 2 in a monthC. once a weekD. when necessary

- 97. Ms Baltazar performed the Benedict's Test on one of her home visits. In this procedure, she puts:
 - A. 5 cc urine then add 10 drops Benedict's solution

96. Susan is 2 months pregnant but she does not have any pre-natal check up.

A. health threatB. health deficitC. stress pointD. Foreseeable crisis

- B. 5 cc Benedict's solution then add 10 drops urine
- C. 5 cc urine then add 5 cc water
- D. 5 cc benedict's solution then add 5cc water
- 98. A blue color in Benedict's test means:

This constitutes a:

- A. no sugar in the urine
- B. trade of sugar in the urine
- C. ++ sugar in the urine
- D. +++ sugar in the urine

C. Frog test D. Clinitest 100. Presence of albumin in the urine of a pregnant mother is indicative of : A. Diabetes B. Moniliasis C. STI D. UTI PROPERTY OF www.aaroncyuntalan.com Part 2 These are inanimate objects other than food, water or milk 1. A. flies C. feces B. fingers D. fomites 2. Causative agent of Typhoid fever A. salmonella typhi C. entamoeba hystolitica B.vibrio el tor D. clostridium botulism 3. Pathognomonic sign of Typhoid fever A. widals C. somatic O B. rose spot D. typhoid psychosis 4. The nursing consideration for typhoid fever would be A. drug of choice is chloramphenicol B. avoid antispasmodic and laxative C. educate public about control of flies D. all of the above 5. A specific test requested on the 2nd week of illness of a client with typhoid fever A. blood culture C. schick test B. urine culture D. widal's test 6. The pathognomonic symptom of cholera is A. bloody mucoid stool C. rice watery stool

D. diarrhea with tenesmus

99. Another Laboratory procedure is done for pregnant mothers to detect presence of albumin in the urine. This is

called:

A. benedict's test

B. heat and acetic acid test

B. washerwoman's hand

| 7. | 7. The following are manifestations of dehydration except | |
|-----|--|-------------------------------|
| | A. flushed skin C. sunken eyeballs | |
| | B. excessive thirst D. poor skin turgor | |
| 8. | 8. In order to prevent dehydration caused by diarrhea, we should | |
| | A. give oresol at once C. place the patient on NI | |
| | B. infuse IV right away D. give anti-diarrheal drug | g as ordered |
| 9. | , , | |
| | A. it can cause mental retardation | |
| | B. it may lead to growth retardation | |
| | C. it can cause staining of the teeth | |
| | D. it may delay menarche | |
| 10. | 10. The nurse explain the following about typhoid fever except | |
| | A. it is caused by salmonella typhosa | |
| | B. the client will have a ladder liked fever and rose spot | |
| | C. the drug of choice is chloramphenicol | |
| 11 | D. it can cause falling hair, mood swings since the vector is a tick | |
| 11. | Fatal form of food poisoning caused by endotoxin A. botulism C. red tide | |
| | B. bacillary D. shigellosis | |
| 12 | 12. Hookworm infestation is best manifested by | |
| 12. | A. anemia C. hepatomegaly | |
| | B. enlargement of the abdomen D. hypoprotenemia | |
| 13 | Amoebiasis is also rampant now a days, the nurse should give the following | n instructions |
| | 1. boil drinking water 3. stools must be fresh to get accur | |
| | 2. rinse vegetables properly 4. proper handwashing by food han | |
| | , and a supplied to the suppli | |
| | A. 1, 2, 3 C. 1, 2, 4 | |
| | B. 2, 3, 4 D. 1, 2, 3, 4 | |
| 14. | 14. All are true about Cholera except | |
| | A. causative agent is vibrio el tor | |
| | B. ingestion of fecally contaminated food is the mode of transmission | |
| | C. diarrhea characterized by watery, bloody, mucopus with tenesmus | |
| 45 | D. drug of choice is chloramphenicol | |
| 15. | 15. All are true about bacillary except | |
| | A. causative agent is shiga bacillus | |
| | B. diarrhea characterized by profuse rice watery stool | |
| | C. give IV fluids for severe dehydration D. dehydration is prevented by giving oresol or hydrite | |
| | b. denydration is prevented by giving dresor or hydrite | |
| 16. | 16. Mang Donald, a farmer was admitted at San Lazaro Hospital because of er | nlarged abdomen and a passage |
| | of black tarry stool. Since Mang Donald is a farmer and always barefooted. | |
| | A. fluke C. pinworm | |
| | B. taenia saginata D. ancylostoma duodenale | |
| 17. | 17. COPT was done to Mang Donald which yields a positive result indicative of | |
| | A. Filariasis C. Dengue | |
| | B. Schistosomiasis D. Amoebiasis | |
| 18. | 18. The intermediary host of the above condition is | |
| | A. fly C. mosquito | |
| | B. snail D. tick | |
| 19. | 19. The drug of choice is | |
| | A. Mebendazole C. Praziquantel | |
| 00 | B. Tetracycline D. Flagyl | |
| 20. | 20. The following are oncomelania quadrasi control measures except | ation avators |
| | A. use of molluscicides C. construction of an irrig | ation system |
| | B. creation of fishponds D. making of footbridges | |
| | | |

21. Pokwang, 5 years old was admitted with the complaint of rashes all over her body. After careful assessment, the nurse describes the typical sign of measles which is A. erythematosus C. maculopapular rash D. maculopustular-crust B. vesicular-crust 22. To differentiate measles from german measles, the following are true of german measles 1. low grade fever, mild catarrhal symptoms 2. it can cause congenital defect in the 3rd tri of pregnancy 3. with forscheimer's spot, known also as rubeola 4. prevention can be achieved through immunization A. 1, 4 only C. 2, 3 only B. 2, 4 only D. all of the above 23. To alleviate itchiness cause by the above condition, the nurse should apply A. alcohol and cool bath C.calamine lotion and cool bath B. baby powder and antihistamine D. warm compress and calamine lotion 24. Measles vaccine is commonly given A. 6 months C. at birth C. 12 months D. 9 months 25. The pathognomonic symptom of measles A. rose spot C. koplik spot B. stimson's sign D. maculopapular rash 26. The mother of Pokwang is on her 3rd tri of pregnancy and she is worried that she might acquire the disease and suffer the complications that may affect her baby, the nurse should A. Discuss the importance of receiving gammaglobulin as prophylactic treatment B. Explain to her the importance of pre-natal check-up C. Explain that it is german measles that can cause deformities if you are in the 1st tri of pregnancy and not measles. D. Tell the client that we can not do anything, its up to God. 27. In managing Chicken pox, the nurse must have the knowledge about 1. avoiding rupture of lesions, using calamine and antihistamine for urticaria 2. observing signs of complication as decreasing LOC warrants erysipelas and furunculosis 3. an attack gives lifetime immunity, second attack rare 4. attention to nasopharyngeal secretion is a must to prevent spread of disease A. 1, 2, 3 only C all except 3 B. 2, 3, 4 only D. 1, 3, 4 only 28. To differentiate small pox from chicken pox, small pox is 1. rashes are centripetal in distribution, known also as variola 2. lesions are uniformly in one area same with chicken pox 3. positive Paul's test in chicken pox 4. small pox is eradicated now A. all except 1 & 2 C. all except 3 & 4 B. all except 2 & 3 D. all except 1 & 4 29. All are true about Dengue Fever 1. rumpel leads test is done to assess early sign of bleeding 2. the vectors are aedes aegypti, aedes albopictus, aedes poecilius 3. grade 3 is more severe than grade 4 4. indication for admission: severe dehydration, decreasing LOC manifested by disorientation to time/place/person, increasing bleeding time A. 1 & 2 only C. 2 & 3 only B. 3 & 4 only D. 1 & 4 only 30. The following are nursing measures to prevent and control bleeding in dengue except A. avoid forceful blowing of the nose

B. use bristle toothbrush

C. give aspirin for fever as ordered D. avoid the use of sharp pointed objects 31. The following are measures to prevent H-fever 1. change the water of the flower vase everyday 2. cleaning of esteros or canals 3. use of mosquito net at bedtime 4. when storing water on a large container cover it properly A. 1, 2, 3 C. 1, 2, 4 B. 2, 3, 4 D. all 32. Nursing considerations for Malaria would be 1. it is characterized by fever, chills and sweating 2. chemoprophylaxis chloroquine may be taken before entering endemic area 3. vector bites at night, breeds in stagnant water and man made containers 4. assisted ventilation, dialysis and BT are one of the measures instituted in managing complications. A. all except 1 C. all except 3 B. all except 2 D. all except 4 33. The best time to get the specimen for malaria smear A. at the height of chills C. anytime of the day B. peak of the fever D. during mealtime 34. In managing Leptospirosis case, the nurse would consider that 1. rats are the main host, microbes are present in their urine 2. incidence is high in areas with poor sanitation and underdeveloped countries 3. mode of transmission is through break in the skin and once the microbes enter to human it may affect the function of CNS, liver, and kidneys 4. it can be prevented and controlled by using rubber boots in flooded areas, good hygienic conditions and vaccination of animals A. 1, 2 & 3 are correct C. 1, 3 & 4 are correct B. 2. 3 & 4 are correct D. 1, 2, 3, & 4 are all correct 35. All but one are true about Filariasis A. causative agent is nematode parasite a form of filarial worms B. vector is aedes poecilius that bites at day C. NBE at 8PM, ICT at daytime are the diagnostic tools D. Hetrazan is the drug of choice, lymphatics are greatly affected by the parasites 36. Causative agent of diphtheria A. staphylococcus aureus C. hemolytic streptococcus B. klebsloefflers bacillus D. bordetella 37. Characteristic sign of diphtheria A. bullneck appearance C. pseudomembrane B. inflamed tonsils D. corvza 38. Nursing considerations in managing patient with diphtheria would be 1. observe CNS, cardiac and kidney complications 2. active immunization of all infants, give attention to nasopharyngeal secretions 3. isolation until 2 negative culture at 24 hour interval 4. pseudomembranous may lead to respiratory obstruction

39. Under throat examination, the nurse confirms the presence of pathognomonic sign of diphtheria which is A. bull neck C. hoarseness B. pseudomembrane D. koplik's

C. all except 2

D. 2 & 4 only

40. In order to neutralize the toxin released by the causative agent of diphtheria we should give

A. diphtheria toxoid C. penicillin B. diphtheria antitoxin D. protein in diet

A. all of the above

B. all except 1

| 41. | Hypersensitivity test to diphtheria toxo | oid . | |
|-----|--|--|--|
| | A. Moloney | C. Widal | |
| | B. Schick | D. MDT | |
| 42. | | ibilities of the nurse for a client with diphtheria except | |
| | A. The client should be on CBR | | |
| | B. Encourage to increase fluid intake | | |
| | C. Oral hygiene with emphasis on the | removal of the pseudomembrane | |
| | D. Teach the client about proper dispo | | |
| 12 | | lisease with other members of the family we should | |
| 43. | | | |
| | 1. Emphasize the importance of immu | | |
| | 2. Proper disposal of nasopharyngeal | | |
| | 3. Show affection by kissing the patier | it once in a write | |
| | 4. Avoid overcrowding | | |
| | A. 1, 2, 3 | | |
| | B. 1, 2, 4 | | |
| | C. 2, 3, 4 | | |
| | D. all of the above | | |
| 44 | Mantoux test is interpreted after | | |
| | A. 24 hours | C. 48-72 hours | |
| | B. 48 hours | D. 72 hours | |
| 15 | INH is always combined with Pyridoxii | | |
| 45. | | | |
| | A. for its synergistic effect B. for better absorption of the drug | | |
| | C. to prevent development of resistant | oo to INIH | |
| | D. to prevent development of resistant | CE (O IINI I | |
| 16 | | | |
| 40. | Side effect of Rifampicin | C. hyportyrioomia | |
| | A. orange urine | C. hyperuricemia | |
| 47 | B. peripheral neuritis | D. 8th cranial nerve damage | |
| 47. | Under category 2 in PTB treatment, the instruction would be | | |
| | A. RIPE 2 months, RI 4 months | | |
| | B. RIPES 1st 2 months, REPS another 1 month, RIE 5 months | | |
| | C. RIP 2 months, RI 2 months | | |
| 40 | D. RIPES 2 months, REP 1 month, RI | | |
| 48. | The following are nursing actions for the client with PTB except | | |
| | A. Rest may be encouraged | | |
| | B. Regular intake of the drug is emphasized | | |
| | C. When there is hemoptysis, chest physiotherapy must be done | | |
| | D. Instruct the client about proper disp | | |
| 49. | Most common direct transmission of F | | |
| | A. coughing | C. sneezing | |
| | B. kissing | D. droplet | |
| 50. | Confirmatory test of positive PTB | | |
| | A. PPD | C. chest x-ray | |
| | B. sputum culture | D. acid fast staining | |
| 51. | In one of your visits, you found out that PTB client has discontinued taking his medicines because his cough | | |
| | subsided and feels better. Your intervention would be to | | |
| | A. Refer him to the Municipal Health Officer | | |
| | B. Explain how he can increase body resistance to avoid recurrence of disease | | |
| | C. Shift treatment to the short course therapy | | |
| | D. Motivates and explain advantages of completing the treatment | | |
| 52. | Pertussis is also known as | , , | |
| | A. Whooping cough | C. Flu | |
| | B. Koch's disease | D. Bordetella | |
| | | | |

| 53. | Pertussis is highly communicable during A. Paroxysmal stage B. Convalescent stage | C. Catarrhal stage D. Prodromal stage | | |
|------|--|--|--|--|
| 54. | Abdominal binder is applied to a patient with pert A. because of the stomach pain caused by cough B. for support to prevent hernia C. to prevent distention of the abdomen | ning | | |
| 55 | D. for support so that patient can stand on his ow Rationale of giving ferrous iodide to patient with w | | | |
| 55. | A. to correct anemia | C. to kill microbes | | |
| | B. to liquefy tenacious mucus membrane | D. to lessen paroxysms of cough | | |
| 56. | Causative agent of SARS | | | |
| | A. corona virus | C. fluke | | |
| | B. retrovirus | D. helminthes | | |
| 57. | Single most important nursing consideration to a | | | |
| | A. obtain history | C. check for fever | | |
| | B. quarantine | D. report to DOH immediately | | |
| 58. | The reservoir of the tetanus bacillus is/are A. intestinal canals of animals | | | |
| | B. contaminated soil | | | |
| | C. man | | | |
| | D. all of these | | | |
| 59. | Which of the following should be given emphasis | if you were to conduct a seminar on the prevention and | | |
| | control of tetanus neonatorum | | | |
| | A. methods, equipment and techniques of asepsi | | | |
| | B. education of birth attendants an the practice of | | | |
| | C. education of mothers on the practice of aseps D. all these measures | is in care of umbilical stump | | |
| 60 | The following are nursing responsibilities when h | andling a rahid client except | | |
| 00. | A. CBR | C. offer fluids to prevent dehydration | | |
| | B. provide a quiet environment | D. proper disposal of saliva | | |
| 61. | Following are true of Rabies | | | |
| | | from a rapid animal is the common transmission | | |
| | 2. after the bite: wash with soap and water, give a | antibiotics and antitetanus | | |
| | 3. best controlled through prevention | | | |
| | 4. salivation, hydrophobia and delirium are comm | non manifestations during active phase | | |
| | | 3,, & 4 are all correct | | |
| | Il except 2 D. all exc | | | |
| 62. | Which of the following immunization is usually no | | | |
| | A. DPT | C. BCG | | |
| ca | B. polio | D. hepatitis | | |
| 03. | Nursing considerations for infantile paralysis wou A. CBR during acute phase | id be all of the following except | | |
| | B. assess for complication of permanent paralysis, resp. arrest and kidney problems | | | |
| | C. prevention through OPV | | | |
| | D. avoid ingestion of contaminated food especial | | | |
| 64. | It is a chronic communicable disease of the skin | | | |
| | A. leptospirosis | C. leprosy | | |
| G.F. | B. filariasis | D. poliomyelitis | | |
| იე. | All true about the answer in # 60 except | n or whitish | | |
| | A. early sign is change in skin color either reddist B. late sign is loss of eyebrow and lagophthalmost | | | |
| | D. Iato sign is loss of cyculow and lagophthallion | J | | |

- C. all client who have complied with MDT is considered cured
- D. BCG immunization is 100% protection against this disease
- 66. The best approach to prevent red tide poisoning
 - A. assess for the manifestations like numbness of the face especially around the mouth
 - B. avoid tahong, talaba, kabiya and other similar shellfish during red tide season
 - C. avoid using vinegar in cooking shellfish affected by red tide poison
 - D. toxin of red tide is not totally destroyed in cooking so explain these during health teachings.
- 67. With which clients should you use universal precautions?
 - A. those infected with HIV
 - B. those with risk factors for HIV
 - C. clients you do not know well
 - D. all clients
- 68. Your client has recently been diagnosed with HIV. He asks you, "At what point will my HIV be considered AIDS? Your best response would be:
 - 1. "when your CD4 count falls below 300"
 - 2. "when you are diagnosed with two or more opportunistic infections"
 - 3. "when your CD4 count falls below 800"
 - 4. "as soon as you get pneumocystis carinii"

A. 1 & 2 C. 3 & 4

B. 2 & 3 D. all of the above

- 69. You are the school nurse at a local elementary school. A mother comes to you because she has heard that a boy in her child's class has AIDS. She wants to pull to pull her child out of school. Your best response would be:
 - A. "You should pull your child out of school if that's what would put your mind at ease."
 - B. "Tell me what you know about AIDS."
 - C. "There is no way your son could get infected in the classromm."
 - D. "Who told you that a boy in your child's class has AIDS?"
- 70. Which of the following body fluids most easily transmits human immunodeficiency virus (HIV)?

A. feces and saliva C. breast milk and tears

B. blood and semen D. vaginal secretions and urine

- 71. Immediately after giving an injection, a nurse is accidentally stuck with the needle when a client becomes agitated. When is the best time for the employer to test the nurse for human immunodeficiency virus (HIV) antibodies to determine if she became infected as a result of the needle stick?
 - A. immediately and then again in 3 months
 - B. immediately and then again in 2 weeks
 - C. in 2 weeks and then again in 6 months
 - D. in 2 weeks and then again in year
- 72. Which of the following blood tests is used first to identify a response to human immunodeficiency virus (HIV) infection?

A. western blot test C. CD4+ T-cell count

B. erythrocyte sedimentation rate D. ELISA

73. Which of the following factors makes it difficult to develop a vaccine for HIV?

A. HIV is a virus C. HIV matures early

B. HIV mutates easily D. HIV spreads through body secretions

74. Which of the following methods of transmission has the most risk for exposure to HIV?

A. routine teeth cleaning C. intercourse with your spouse

B. noninsertive relationship D. intercourse with a new partner without a

condom

75. To which of the following classifications does HIV?

A. hantavirus C. retrovirus B. rhinovirus D. rotavirus

76. A pregnant woman has just been diagnosed with HIV. Which of the following methods or actions does not put the baby at risk for infection by the virus?

| | A. vaginal birth C. verti | cal (in utero) |
|-----|---|---|
| | | nging diapers after birth |
| 77. | | ked to higher morbidity and mortality in HIV infected clients? |
| | A. homosexual men C. lowe | r socioeconomic levels |
| | B. unsafe sexual practices D. poly | gamous relationship |
| 78. | What is the average length of time from HIV inf | |
| | A. less than 5 years | C. 5-7 years |
| | B. 10 years | D. 8 years |
| 79. | | ZT) therapy. Which of the following statements best describes |
| | the action of this drug? | , 1, |
| | A. it destroys the outer wall of the virus and kil | s it |
| | B. it interferes with viral replication | |
| | C. it stimulates the immune system | |
| | D. it promotes excretion of viral antibodies | |
| 80. | | standard precautions and take which of the following actions |
| | to protect herself when performing mouth care | |
| | A. use reverse isolation | |
| | B. place the client in a private room | |
| | C. put on mask, gloves and a gown | |
| | D. wear gloves | |
| 81. | | rogram on how to prevent the transmission of viral hepatitis. |
| | | idered to be primarily a sexually transmitted disease? |
| | A. hepatitis A | C. hepatitis C |
| | B. hepatitis B | D. hepatitis D |
| 82. | | ich of the following symptoms during the icteric phase of viral |
| | hepatitis? | |
| | A. tarry stools | C. yellowed sclera |
| | B. shortness of breath | D. light, frothy urine |
| 83. | The nurse plans care for the client with hepatiti | s A with the understanding that the causative virus will be |
| | excreted from the client's body primarily throug | h the |
| | A. skin | C. feces |
| | B. urine | D. blood |
| 84. | | ram for health care staff on how to care for clients with |
| | | would the nurse indicate as essential when caring for clients |
| | with hepatitis A? | |
| | A. gowning when entering a client's room | |
| | B. wearing a mask when providing care | |
| | C. assigning the client in a private room | |
| | D. wearing gloves when giving direct care | |
| 85. | | inues to complain of fatigue and malaise. The client asks the |
| | | f the following responses by the nurse is most appropriate? |
| | A. "Your fatigue should be gone by now, we wil | |
| | | rapy. It will disappear when your treatment regimen is |
| | complete." | () - 1 That 2011 do not be a second of the second |
| | | ty level. That will help your decrease your fatigue." |
| 00 | D. "It is normal for you to feel fatigued. Your str | |
| 86. | | ith viral hepatitis, the nurse should incorporate nursing orders |
| | | I be on ensuring that the client receives which of the |
| | following? | C. manager of fluid intelle |
| | A. adequate bedrest | C. generous fluid intake |
| 07 | B. regular antibiotic therapy | D. daily intravenous therapy |
| 01. | | rse use to assess liver function for a client with viral hepatitis? |
| | A. glucose tolerance B. serum transaminase | C. creatinine clearence |
| | D. Seruin transaminase | D. serum electrolytes |
| | | |

- 88. In a client with viral hepatitis, the nurse would closely assess for indications of which of the following abnormal values?
 - A. prolonged prothrombin time

 C. decreased blood glucose level

 D. decreased serum calcium
- 89. Which of the following diets would most likely be prescribed for a client with viral hepatitis?
 - A. high fat, low protein C. high CHO, high calorie
 - B. high protein, low CHO D. low sodium, low fat

- 90. The nurse develops a teaching plan for the client about how to prevent the transmission of hepatits A. Which of the following discharge instruction is appropriate for the client?
 - A. spray the house with insecticides to eliminate vectors
 - B. tell the family to stay away from the client
 - C. tell family members to to wash their hands frequently
 - D. disinfect all clothing and eating utensils
- 91. School nursing as a subspecialty of community health nursing should engage in activities which are focused on:
 - a. health education and health services in school
 - b. only health services in schools
 - c. only on health education on schools
 - d. health education and health services in schools and in the community
- 92. The redesigned Approach in School health Nursing (RASHN) has the concepts of PHC, the features are the following except:
 - a. school clinics are improved and made functional
 - b. referrals are strengthened
 - c. problems and constraints on logistics and supports
 - d. teachers assume their role as school health guardian
- 93. The main goal of an occupational health curse is:
 - a. prevent illness and maintain homeostasis
 - b. prevent job related accidents
 - c. promote and maintain highest degree of well-being of workers
 - d. established policies to promote health of workers
- 94. The scope and practice of an occupational health nurse is influence by factors within the work setting, overriding influence of which is the:
 - a. nurse's comfort with the occupational role
 - b. number of employees
 - c. policy established by administration within the occupational setting
 - d. cost of occupational health programs
- 95. The focus of environmental health services is:
 - a. food sanitation
 - b. preservation and improvement of environment
 - c. investigation of food borne disease outbreaks
 - d. insect and rodent control

| SITUATION: the following questions refer to concepts of communicable diseases: |
|--|
| 96. which of the following is typical in diphtheria? |
| A. koplick's spots |

- C. ghon
- D. risus sardonicus

B. Pseudomembrane

- 97. This sexually transmitted disease is characterized by cheesy curd-like vaginal discharges
 - A. trichomoniasis
 - B. Gonorrhea
 - C. moniliasis
 - D. syphilis
- 98. this is considered as the most dangerous pertussis:
 - A. catarrhal stage
 - B. Paroxysmal stage
 - C. Convalescent stage
 - D. prodromal stage
- 99. Type of parasitism caused by eating infected pork and beef:
 - A. Ascariasis
 - B. taeniasis
 - C. filariasis
 - D. trichuriasis
- 100. The following diseases can be transmitted through skin penetration EXCEPT
 - A. Tetanus
 - B. Hookworm infection
 - C. Hepatitis B
 - D. ascariasis