

प्रदेश लोक सेवा आयोग
सुदुपश्चिम लोकसेवा
नेपाल स्वास्थ्य सेवा, हेल्थ इन्स्पेक्सन समूह,
सातौं तहको प्रतियोगितात्मक लिखित परीक्षा

मिति: २०८२/७/२९

पत्र: प्रथम
विषय: हेल्थ इन्स्पेक्सन सम्बन्धी

पूर्णाङ्क: १००
समय: ३ घण्टा

उत्तरसंग्रहमा प्रश्नको Key अनिवार्य रूपमा उल्लेख गरिएको छ। उक्तबाहेक अन्यत्र उत्तर लिख्न पाइने छैन।
साथै परीक्षामा Calculator, Mobile जस्ता विद्युतीय उपकरण प्रयोग गर्न पाइने छैन।

1. In PHC, what does the term "Essential Health Care" refer to:

- (A) Specialized medical Treatment
- (B) Exclusive focus on curative care
- (C) Services that can be provided in Hospital only
- (D) Basic, universally accessible health services

2. Which target of SDG addressed the achieve universal health coverage:

- (A) 3.6
- (B) 3.7
- (C) 3.8
- (D) 3.9

3. How many goals, targets and indicators are directly health related in Millennium Development Goal

- (A) 1 goal, 4 targets and 9 indicators
- (B) 2 goals, 6 targets and 12 indicators
- (C) 3 goals, 8 targets and 18 indicators
- (D) 8 goals, 18 targets and 48 indicators

4. Health services must be shared equally by all people irrespective of their ability to pay, and all must have equal opportunities to enjoy them is the principle of PHC ?

- (A) Equitable distribution
- (B) Community participation
- (C) Inter sectoral coordination
- (D) Appropriate technology

5. Which of the following is a bilateral agency working in Nepal ?

- (A) WHO
- (B) UNICEF

- (C) USAID
- (D) UNDP

6. In Sudurpaschim Province, external development partners prioritize which of the following ?

- (A) Urban Health Infrastructure
- (B) Ayurveda Health Services
- (C) Non communicable diseases (NCD)
- (D) Maternal and child health

7. The United Nations agency that supports children's health and education worldwide is:

- (A) UNICEF
- (B) UNDP
- (C) UNFPA
- (D) WHO

8. Which bilateral agency is funded by the UK government ?

- (A) JICA
- (B) USAID
- (C) FCDO
- (D) NORAD

9. What is the Sector-Wide Approach (SW Ap) in health ?

- (A) Coordinated funding under one national health strategy
- (B) NGOs implement all health programs
- (C) Privatization of hospital services
- (D) Donor-led, uncoordinated projects

10. Toxins gather in organisms over time. This phenomenon is known as:

- (A) Bioaccumulation
- (B) Biomagnification
- (C) Bioremediation
- (D) Biotransformation

11. The disinfecting action of chlorine in water is due to:

- (A) Hypochlorite ions
- (B) Chloride
- (C) Hypochlorous acid
- (D) Residual chlorine

12. 'One Health' talks about the interconnection between people, animals, plants and their shared environment. What term best describes this?

- (A) A principle
- (B) A program
- (C) A theory
- (D) An approach

13. The National Malaria Strategic Plan aims to attain:

- (A) Malaria elimination in Nepal by 2025
- (B) Malaria eradication in Nepal by 2025
- (C) Malaria control in Nepal by 2025
- (D) Interruption of malaria transmission by 2025

14. Evolutionary model is more comprehensive because it:

- (A) Considers risk behaviour of host
- (B) Considers time dimension
- (C) Deals with socio-economic condition of host
- (D) Gives importance to host, agent, environment

15. Occupational disease in livestock farm workers:

- (A) COPD
- (B) Rheumatic heart disease
- (C) Nephrotic Syndrome
- (D) Brucellosis

16. Most common local condition in chemical exposure in factories:

- (A) Cough & shortness of breath
- (B) Allergic Rhinitis
- (C) Eczema
- (D) Nail injury

17. Vibration injury occurs mostly in:

- (A) Drills and hammers
- (B) Tools used in cycle repairing
- (C) Nails and hammers
- (D) Truck driver

18. Most common occupational injury among farmers in Nepal:

- (A) Neck injury
- (B) Spine injury
- (C) Leg injury
- (D) Eye injury

19. When do you call an event a disaster?

- (A) Physical disruption affecting human
- (B) Disease outbreak
- (C) Any physical event without effect
- (D) Any physical event

20. Which test determines association between two categorical variables?

- (A) T-test
- (B) Chi-square test
- (C) Correlation coefficient
- (D) ANOVA

21. Unmet need of FP in Nepal as per 2022 NDHS is:

- (A) 21
- (B) 22
- (C) 23
- (D) 24

22. Wide-base and narrow-top population pyramid indicates:

- (A) Low birth & low death rate
- (B) High birth & high death rate
- (C) High birth & declining death rate
- (D) Aging population

23. Life expectancy at birth represents:

- (A) Average age people die
- (B) Maximum age person can attain
- (C) Expected number of years newborn will live
- (D) Age population dies

24. NRR = 1 indicates:

- (A) Population doubles in 30 yrs
- (B) Each woman replaced by one daughter
- (C) No population growth occurs
- (D) Fertility declining

25. Not a direct determinant of fertility:

- (A) Literacy
- (B) Contraceptive
- (C) Age at marriage
- (D) Postpartum infecundability

26. Denominator of maternal mortality ratio:

- (A) Total births
- (B) Total reproductive age women

- (C) Total live births
- (D) Total married reproductive age women

27. Most sensitive and commonly used indicator of health:

- (A) Infant mortality
- (B) Disability Adjusted Life Year
- (C) Maternal mortality
- (D) Crude death rate

28. Most important determinant of health globally:

- (A) Location
- (B) Nationality
- (C) Urban population
- (D) Poverty

29. Which of the following is a measurement of health status?

- (A) Incidence
- (B) Case fatality rate
- (C) Prevalence
- (D) All of the above

30. Cleanliness, exercise, rest & sleep are a part of—

- (A) Hygiene
- (B) Social hygiene
- (C) Personal hygiene
- (D) None

31. Capital budgeting focuses on:

- (A) Medicines
- (B) Policies
- (C) Infrastructure & equipment
- (D) Insurance premiums

32. Output indicators measure:

- (A) Resources
- (B) Policies
- (C) Services
- (D) Population impact

33. Neglected dimension of health program management:

- (A) Supervision
- (B) Evaluation
- (C) Budget
- (D) Audit

34. Audit indicates:

- (A) Finding fault
- (B) Finding misuses
- (C) Ignore value
- (D) Examine compliance

35. Governance is:

- (A) Decision-making
- (B) Implementation
- (C) Leadership
- (D) Management

36. Supportive supervision includes:

- (A) Planned visit
- (B) Surprise visit
- (C) Focus area
- (D) Feedback

37. Major role of Local Government in Federal Nepal:

- (A) Planning
- (B) Monitoring
- (C) Supervision
- (D) Implementation

38. Key role of federal level health governance:

- (A) Providing basic services
- (B) Monitoring & evaluation
- (C) Ensuring all medicines
- (D) Immunization campaigns

39. Managing funds responsibly & strategically in health sector is objective of:

- (A) Health economics
- (B) Health financing
- (C) Financial management
- (D) Economic evaluation

40. SWAP stands for:

- (A) Sector Wide Approach
- (B) Simple work & planning
- (C) Standard warrant process
- (D) Strategic weekly planning

41. Seven steps of planning are implemented at:

- (A) Local
- (B) Provincial
- (C) Federal
- (D) None

42. Health care financing method that pools risks:

- (A) Out of pocket
- (B) Health insurance
- (C) Free services
- (D) Donations

43. Common challenge in federalized health system:

- (A) Excess control by federal
- (B) Coordination difficulties
- (C) Excessive funding
- (D) No access to services

44. Building block dealing with medical product & tech:

- (A) Governance
- (B) Health financing
- (C) HMIS
- (D) Access to medicine

45. Key aspect of procurement preventing fraud is:

- (A) Transparency
- (B) Accountability
- (C) Competition
- (D) Legal compliance

46. Log frame is used in:

- (A) Budget estimation
- (B) Procurement
- (C) Project planning
- (D) HR training

47. Human resource planning does not include:

- (A) Deployment
- (B) Capacity
- (C) Recruitment
- (D) Supervision

48. Stock level at HP/PHCC is maintained for:

- (A) 1 month
- (B) 3 months
- (C) 5 months
- (D) 10 months

49. Not a WHO building block:

- (A) Health Management Committee
- (B) Health workforce
- (C) Service delivery
- (D) HMIS

50. Type of economic evaluation used commonly:

- (A) Cost-effective analysis
- (B) Cost-utility
- (C) Cost-benefit
- (D) Budget impact

51. Not use of epidemiology:

- (A) Study disease trends
- (B) Community development
- (C) Planning, evaluation
- (D) Searching cause & risk

52. Epidemiological triad:

- (A) Agent, host, environment
- (B) Virus, bacteria, fungi
- (C) Prevention & rehab
- (D) Diagnosis & treatment

53. Ability of screening test to identify diseased:

- (A) Sensitivity
- (B) Specificity
- (C) Predictive accuracy
- (D) Reliability

54. Man is dead end for:

- (A) Tetanus & measles
- (B) Measles & chickenpox
- (C) Rabies & tetanus
- (D) Rabies & measles

55. Epidemic is:

- (A) Rare disease
- (B) Constant disease
- (C) Cases above expected
- (D) Disease spreads globally

56. Point source outbreak curve:

- (A) Gradual rise
- (B) Continuous rise
- (C) Single sharp peak
- (D) No pattern

57. Herd immunity achieved when:

- (A) All treated
- (B) No transmission
- (C) One vaccinated
- (D) Large portion immune

58. Most common use of R_0 :

- (A) Estimation
- (B) Prevalence
- (C) Target for vaccination
- (D) Incidence calculation

59. Cancer stages 0,1,II,III—what scale?

- (A) Alphanumeric
- (B) Numerical
- (C) Ordinal
- (D) Nominal

60. Central tendency except:

- (A) Mean
- (B) Mode
- (C) Median
- (D) Chi-square

61. Best way to plot incidence over time:

- (A) Histogram
- (B) Line chart
- (C) Scatter
- (D) Ogive

62. Measurement of blood pressure is:

- (A) Nominal
- (B) Ordinal
- (C) Ranked
- (D) Continuous

63. Data within ± 1 SD:

- (A) 50%
- (B) 68%
- (C) 75%
- (D) 95%

64. Ultimate aim of epidemiology:

- (A) Describe distribution
- (B) Identify etiology
- (C) Reduce health problems
- (D) Provide data for planning

65. Non-modifiable risk factor:

- (A) Physical activity
- (B) Smoking
- (C) Genetic factors
- (D) Salt

66. When did CHD epidemic begin in USA?

- (A) Early 1920 AD
- (B) 1930 AD
- (C) 1940 AD
- (D) 1980 AD

67. Major modifiable risk factor for CVD:

- (A) Age
- (B) Family history
- (C) Gender
- (D) Hypertension

68. Disease caused by Rubella:

- (A) Measles
- (B) Mumps
- (C) German measles
- (D) Whooping cough

69. HPV vaccine prevents:

- (A) Hepatitis B
- (B) Haemophilus

- (C) Cervical cancer
- (D) Anaemia

70. First evidence of Hepatitis B infection:

- (A) Anti-HBs
- (B) Anti-HBe
- (C) HBeAg
- (D) HBsAg

71. Best test for prevalence of TB infection:

- (A) Mini radiography
- (B) Sputum exam
- (C) Tuberculin test
- (D) Clinical exam

72. Communicability period of influenza:

- (A) 1-2 days before to 1-2 days after symptoms

73. Catarrhal stage of whooping cough:

- (A) 5 days
- (B) 10 days
- (C) 15 days
- (D) 20 days

74. Portal of entry of diphtheria:

- (A) Respiratory tract
- (B) Oral route
- (C) Eye
- (D) Skin

75. Most frequent age for mumps:

- (A) 0-6 months
- (B) 6 months-4 years
- (C) 5-9 yrs
- (D) 10-12 yrs

76. Congenital risk by maternal rubella:

- (A) 8-10 weeks pregnancy
- (B) 20-24
- (C) 24-28
- (D) 32-36

77. Reservoir for measles:

- (A) Man
- (B) Soil
- (C) Fomites
- (D) Monkey

78. Best measure to prevent cholera epidemic:

- (A) Mass chemoprophylaxis
- (B) Vaccination
- (C) Health edu
- (D) Safe sanitation

79. Isolation in Salmonellosis until:

- (A) Fever subsides
- (B) Till widal negative
- (C) Three bacteriology stool/urine
- (D) 48 hrs after treatment

80. Not a feature of food poisoning:

- (A) Shared meal
- (B) 1-24 hrs incubation
- (C) Vomiting
- (D) Copious watery stool

81. Chandler's index used for:

- (A) Ankylostoma
- (B) Ascaris
- (C) Strongyloides
- (D) Trichuris

82. Infective period of Aedes in dengue:

- (A) 10-20 days
- (B) 20-30 days
- (C) 30-40 days
- (D) Life long

83. Most sensitive indicator for malaria transmission:

- (A) Spleen rate
- (B) Infant parasite rate
- (C) Annual parasite incidence
- (D) Slide positivity

84. Amplifier for Japanese encephalitis:

- (A) Horse
- (B) Pigs
- (C) Dogs
- (D) Monkey

85. % of children anemia in Sudurpaschim (DOHS 2022):

- (A) 43%
- (B) 45%
- (C) 49%
- (D) 51%

86. Pasteurization kills all except:

- (A) Anthrax
- (B) Streptococcus
- (C) M. tuberculosis
- (D) Brucella

87. Disease caused by food intoxicants except:

- (A) Pellagra
- (B) Epidemic dropsy
- (C) Endemic ascites
- (D) Lathyrism

88. Head & chest circumference equal at:

- (A) 2-4 months
- (B) 4-6
- (C) 6-9 months
- (D) 9-12

89. Essential amino acid except:

- (A) Leucine
- (B) Lysine
- (C) Methionine
- (D) Arginine

90. Barrier to communication:

- (A) Use of local language
- (B) Clear message
- (C) Noise & distraction
- (D) Appropriate channel

91. Not a component of school health:

- (A) Teaching
- (B) Nutrition
- (C) Checkups
- (D) Outreach clinic

92. Key reason for school programs:

- (A) Promote early employment
- (B) Reduce dropout
- (C) Sports
- (D) Delay interventions

93. Community participation important because:

- (A) Decision making
- (B) Empowering
- (C) Workers
- (D) Prevents support

94. Non-projected media:

- (A) Film
- (B) Video
- (C) PowerPoint
- (D) Flashcard

95. Communication defined as:

- (A) One-way message
- (B) Transmission
- (C) Printed materials
- (D) Disease diagnosis process

96. BCC focuses on:

- (A) Giving medicines
- (B) Changing habits
- (C) Punishing habits
- (D) Promoting beliefs

97. Best for large population with limited access:

- (A) Role play
- (B) Lecture
- (C) Poster
- (D) Mass media

98. Individual method of health education:

- (A) Seminar
- (B) Poster
- (C) Counseling
- (D) Film show

99. Key principle of health education:

- (A) Imposing rules
- (B) Cultural relevance
- (C) Legal action
- (D) Avoiding community participation

100. Target of Maternal Mortality Ratio:

- (A) 50 per 100,000
- (B) 60 per 100,000
- (C) 70 per 100,000
- (D) 80 per 100,000

« The End »

Answer key

Question	Answer	Question	Answer
1	(D) Basic, universally accessible health services	51	(B) Community development
2	(C) 3.8	52	(A) Agent, host, environment
3	(C) 3 goals, 8 targets and 18 indicators	53	(A) Sensitivity
4	(A) Equitable distribution	54	(C) Rabies & tetanus
5	(C) USAID	55	(C) Cases above expected
6	(D) Maternal and child health	56	(C) Single sharp peak
7	(A) UNICEF	57	(D) Large portion immune
8	(C) FCDO	58	(C) Target for vaccination
9	(A) Coordinated funding under one national health strategy	59	(C) Ordinal
10	(A) Bioaccumulation	60	(D) Chi-square
11	(C) Hypochlorous acid	61	(B) Line chart
12	(D) An approach	62	(D) Continuous
13	(A) Malaria elimination in Nepal by 2025	63	(B) 68%
14	(B) Considers time dimension	64	(C) Reduce health problems
15	(D) Brucellosis	65	(C) Genetic factors
16	(C) Eczema	66	(A) Early 1920 AD
17	(A) Drills and hammers	67	(D) Hypertension
18	(B) Spine injury	68	(C) German measles
19	(A) Physical disruption affecting human	69	(C) Cervical cancer

Mero Healthline

20	(B) Chi-square test	70	(D) HBsAg
21	(A) 21	71	(C) Tuberculin test
22	(C) High birth & declining death rate	72	(A) 1–2 days before to 1–2 days after symptoms
23	(C) Expected number of years newborn will live	73	(B) 10 days
24	(B) Each woman replaced by one daughter	74	(A) Respiratory tract
25	(A) Literacy	75	(C) 5–9 yrs
26	(C) Total live births	76	(A) 8–10 weeks pregnancy
27	(A) Infant mortality	77	(A) Man
28	(D) Poverty	78	(D) Safe sanitation
29	(D) All of the above	79	(C) Three bacteriology stool/urine
30	(C) Personal hygiene	80	(D) Copious watery stool
31	(C) Infrastructure & equipment	81	(A) Ankylostoma
32	(C) Services	82	(D) Life long
33	(B) Evaluation	83	(B) Infant parasite rate
34	(D) Examine compliance	84	(B) Pigs
35	(A) Decision-making	85	(D) 51%
36	(D) Feedback	86	(A) Anthrax (spores)
37	(D) Implementation	87	(A) Pellagra
38	(B) Monitoring & evaluation	88	(D) 9–12
39	(C) Financial management	89	(D) Arginine
40	(A) Sector Wide Approach	90	(C) Noise & distraction
41	(A) Local	91	(D) Outreach clinic
42	(B) Health insurance	92	(B) Reduce dropout
43	(B) Coordination difficulties	93	(B) Empowering
44	(D) Access to medicine	94	(D) Flashcard
45	(A) Transparency	95	(B) Transmission
46	(C) Project planning	96	(B) Changing habits
47	(D) Supervision	97	(D) Mass media
48	(B) 3 months	98	(C) Counseling
49	(A) Health Management Committee	99	(B) Cultural relevance
50	(A) Cost-effective analysis	100	(C) 70 per 100,000