Regn. No._____ **Subject Code: MBBS304**

M.B.B.S. THIRD PROFESSIONAL PART – I EXAMINATION, MARCH-2025
COMMUNITY MEDICINE
PAPER - FIRST

[Time allotted: Three hours] **SET - A** **[Max Marks: 100]**

Q. 1. Multiple choice questions **(Darken the single best response in OMR sheet. Time allotted 20 minutes)** **(1 x 20 = 20)**

1. All of the following represents specific protection mode of disease prevention except:
   - **a.** Chemoprophylaxis for meningococcal meningitis
   - **b.** Personal hygiene and Environmental sanitation
   - **c.** Usage of condom
   - **d.** Iodisation of salt
2. Which of the following is not an aspect of the Ottawa Charter for Health Promotion?
   - **a.** Strengthen Community action
   - **b.** Develop personal skill
   - **c.** Re orient health Education
   - **d.** Build public health policy
3. Most universally accepted indicator of health status of whole population and their socio-economic conditions among the following is:
   - **a.** MMR
   - **b.** IMR
   - **c.** Life Expectancy
   - **d.** Disease notification rate
4. Following can be used a s a yardstick for the assessment of standards of therapy:
   - **a.** Specific death rate
   - **b.** Case fatality rate
   - **c.** Proportional mortality rate
   - **d.** Survival rate
5. A radiotherapist prescribes a new drug combination of chemotherapy and immunotherapy for metastatic melanoma. It prolongs the survival but does not cure cancer. Which of the following is true in this situation?
   - **a.** Incidence reduces and prevalence increases
   - **b.** Incidence remains the same and prevalence increases
   - **c.** Incidence reduces and prevalence remains the same
   - **d.** Incidence increases and prevalence reduces
6. Ratio of incidence of a disease among the exposed to the incidence among non-exposed is:
   - **a.** Risk ratio
   - **b.** Odds ratio
   - **c.** Attributable risk
   - **d.** Absolute risk
7. A study was done in 3 states to see the mean blood pressure in each community. Health workers were assigned and they visited each house in the three communities. Mean blood pressure in each community was found and compared. What type of study design is represented here?
   - **a.** Cohort study
   - **b.** Case control study
   - **c.** Cross – sectional study
   - **d.** Field trial
8. The services of Suraksha clinic are related to:
   - **a.** Acute diarrhoeal disease
   - **b.** Acute respiratory disease
   - **c.** Family Planning
   - **d.** STI/RTI.
9. Which sequence of serotype infection can be dangerous in Dengue?
   - **a.** Serotype 2 followed by serotype 1
   - **b.** Serotype 1 followed by serotype 2
   - **c.** Serotype 4 followed by serotype 3
   - **d.** Serotype 3 followed by serotype 4
10. Epidemic caused by type A Arbovirus in India is:
    - **a.** Chikungunya
    - **b.** Dengue
    - **c.** KFD
    - **d.** Yellow fever
11. Which of the following are not included in Sentinel Surveillance of HIV in India?
    - **a.** Antenatal women
    - **b.** STD clinic attendees
    - **c.** Single male migrants
    - **d.** Long distance truck drivers
12. Primary prevention in myocardial infarctions are all except:
    - **a.** Maintenance of normal body weight
    - **b.** Change in lifestyle
    - **c.** Change in nutritional habits
    - **d.** Screening of hypertension
13. Which of the following indices of obesity is height – independent.
    - **a.** Quetelet's index
    - **b.** Ponderal index
    - **c.** Broca's index
    - **d.** Corpulence index
14. Global action plan for the prevention and control of NCDs 2013-2020; Target 4 aims to:
    - **a.** Reduce sugar intake
    - **b.** Reduce salt intake
    - **c.** Reduce cholesterol intake
    - **d.** Reduce blood pressure level
15. In ESI Act, if an employee is getting wages of upto Rs 100/- per day, then
    - **a.** Only employer has to pay his/her share of 4.5%
    - **b.** Only the employee has to pay his/her share of 1.75%
    - **c.** Both employee and employer have to pay their respective shares
    - **d.** Neither the employer nor employee has to pay the share.
16. Snowstorm appearance of lung fields on X ray is characteristic of:
    - **a.** Silicosis
    - **b.** Asbestosis
    - **c.** Anthracosis
    - **d.** Byssinosis
17. Alert code that indicates a medical emergency such as cardiac/respiratory arrest is:
    - **a.** Code Red
    - **b.** Code Blue
    - **c.** Code Yellow
    - **d.** Code Black
18. Nodal centre for disaster management is:
    - **a.** PHC
    - **b.** CHC
    - **c.** Police control room
    - **d.** District
19. The pattern of conventional behaviour in a society is called
    - **a.** Custom
    - **b.** Folkways
    - **c.** Tradition
    - **d.** Culture
20. The wealth index developed by national family health survey in India has divided the households into how many groups:
    - **a.** Two (upper and lower)
    - **b.** Three (tertiles)
    - **c.** Four (Quartiles)
    - **d.** Five (Quintiles)

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Note: Attempt all questions in sequence.
Draw suitable diagrams (wherever necessary)

Q. 2. Give reasons: **(5 x 2 = 10)**

a. DALY is very important indicator for estimating global burden of disease.
b. Lung cancer can be controlled by primary preventive measures.
c. Sentinel surveillance of disease is better than periodic mass screening.
d. Health workers in the facility should know how to monitor cold chain.
e. The incidence of clinically significant hepatitis A increases with the transition from high to intermediate endemicity.

Q. 3. Problem based question:

Raju, a 12 year old boy was bitten by a stray dog and brought to PHC on the day of the bite. On examination, there were 2 lacerated wounds on right leg and small abrasion on left leg.

a. Which category does the exposure belong to? **(1)**
b. Enumerate the post exposure prophylaxis of the case. **(3)**
c. What advice will you give to the patient and the family member? **(3)**
d. What challenges exist for equitable access to PEP? **(3)**

Q. 4. Write briefly on: **(4 x 6 = 24)**

a. Non probability sampling methods
b. "BEINGS" model of causation of disease
c. Measures of variability
d. Emerging and re-emerging infectious disease

Q. 5. Structured question:

(i) Discuss the concepts of disease prevention on basis of four levels. Describe the modes of intervention at each level of prevention with suitable examples. **(5 + 5 = 10)**

(ii) Enumerate the "epidemiological methods". Give an outline of steps in conducting a descriptive study. **(4 + 6 = 10)**

Q. 6. Answer as indicated: **(4 x 4 = 16)**

a. Dosage and schedule of drug sensitive TB.
b. Primary, secondary and tertiary chemoprophylaxis in RF and RHD.
c. Salient provisions of ESI act.
d. Role of cultural factors in health and disease.

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