



D. PHARMA EXIT EXAM

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SOCIAL PHARMACY MCQS

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01. WHO defined health as a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity in?

- (a) **1948**
- (b) 1996
- (c) 1947
- (d) 1950

02. National Health Program was declared by the Indian Government in:

- (a) 1948
- (b) **1983**
- (c) 1947
- (d) 1995

03. ____ is defined as a state of balance between the individual and the surrounding world, including the environment.

- (a) Social health
- (b) Mental health
- (c) **Physical health**
- (d) Spiritual health

04. Social health as defined is a _____ of an individual's inter-personalities and the extent of involvement with the community.

- (a) Amount and significance
- (b) Size and value
- (c) **Extent and excellence**
- (d) Quantity and quality

05. The National Health Programme was introduced to provide proper treatment measures in areas.

- (a) **Tribal and rural areas**
- (b) Urban areas
- (c) Coastal areas
- (d) Mountainous regions

06. The WHO identified ____ determinants of health.

- (a) 6
- (b) **10**
- (c) 12
- (d) 4

07. _____ is a connecting link between physiology and psychology.

- (a) Physical health
- (b) Social health
- (c) **Mental health**
- (d) Spiritual health

08. _____ often result due to low education levels.

- (a) Lower self-confidence

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- (b) More stress
- (c) Poor health
- (d) **All of these**

09. _____ is the number of deaths per 1000 population per year in a given community.

- (a) Mortality rate
- (b) Total death rate
- (c) **Crude death rate**
- (d) Specific death rate

10. _____ and water quality are the physical factors in the natural environment which put their impact on health.

- (a) Light
- (b) **Air**
- (c) Humidity
- (d) Temperature

11. Child mortality rate is the number of deaths of _____ old children in a given year per 1000 children of the same age group at the midpoint of the same year.

- (a) **0-1 year**
- (b) 1-4 years
- (c) 2-6 years
- (d) 4-10 years

12. _____ indicators are not directly used for measuring the health status, but interpret the indicators of healthcare.

- (a) **Socio-economic**
- (b) Nutritional status
- (c) Health policy
- (d) Environment

13. _____ are used for improving the mortality data so that the health status of a population can be properly described.

- (a) Mortality indicators
- (b) Healthcare delivery
- (c) Morbidity indicators
- (d) **Life expectancy**

14. _____ is the simplest indicator used for estimating the burden of disease in a community.

- (a) Life expectancy
- (b) Maternal mortality rate
- (c) Proportional mortality rate
- (d) **Disease-specific mortality**

15. The main reason for using _____ is to define the monetary value of saving a human life.

- (a) **Cost benefit Analysis (CBA)**

- (b) CEA
- (c) CUA
- (d) CMA

16. Demography is the scientific study of human population, including:

- (a) Change in the population size
- (b) Population distribution in spaces
- (c) Population composition
- (d) **All of these**

17. Demographic processes that regularly work within a population to determine its size, composition, and distribution are:

- (a) Social mobility
- (b) **Mortality**
- (c) **Fertility**
- (d) **All of these**

18. _____ stage of demographic cycle is also known as high stationary stage.

- (a) Third
- (b) Second
- (c) **First**
- (d) Fourth

19. Fifth stage of demographic cycle is also known as: _____

- (a) Late expanding stage
- (b) High stationary state
- (c) Low stationary state
- (d) **Declining stage**

20. In the _____ stage, declining death and constant birth rates are the characteristic features of this stage.

- (a) Early expanding
- (b) **Late expanding**
- (c) Low stationary
- (d) High stationary

21. Low birth and low death rates are the characteristic features of _____ stage.

- (a) Fifth
- (b) **Fourth**
- (c) Third
- (d) Second

22. In the late expanding stage, further declining death and _____ are the characteristic features.

- (a) Declining death
- (b) Constant birth rates
- (c) **Falling birth rates**
- (d) High death rates

23. An expert committee of the WHO defined family planning in:

- (a) 1970
- (b) 1976
- (c) **1971**
- (d) 1980

24. _____ is the oldest method of voluntary fertility control, in which the male **withdraws before ejaculation.**

- (a) Abstinence
- (b) **Coitus interruptus**
- (c) Cervical mucus method
- (d) Vasectomy

25. Which of the following methods does not come under behavioral methods of **contraception?**

- (a) Abstinence
- (b) Coitus interruptus
- (c) **Calendar method**
- (d) Basal body temperature method

26. In _____ method, the physiological symptoms develop when the basal temperature **rises.**

- (a) Symptothermic
- (b) Cervical mucus
- (c) **Basal body temperature**
- (d) Safe period

27. _____ the commonly used spermicides.

- (a) Vaginal contraceptive films
- (b) Contraceptive jellies
- (c) Contraceptive suppositories
- (d) **Surface active agents**

28. _____ type of immunity is present in an individual since birth, and is affected by **the genetic and molecular structure of the genes.**

- (a) Specific
- (b) **Innate**
- (c) Acquired
- (d) Adaptive

29. _____ an immunity is also known as acquired immunity.

- (a) **Adaptive**
- (b) Neutral
- (c) Passive
- (d) Active

30. _____ immunity is the resistance that an individual acquires during life.

- (a) Non-specific

- (b) Active
- (c) Passive
- (d) **Specific**

31. _____ type of immunity is the resistance acquired or developed by an individual after effective contact with an antigen.

- (a) **Specific**
- (b) Non-specific
- (c) Active
- (d) Passive

32. _____ is the physical and chemical barrier for specific immunity.

- (a) Lymphocytes
- (b) **Skin**
- (c) Mucosal epithelia
- (d) Antimicrobial chemicals

33. _____ type of immunity is the result of vaccination.

- (a) Specific
- (b) Non-specific
- (c) Passive
- (d) **Artificial active**

34. _____ is an example of toxoids which is used as an immunizing agent.

- (a) **Tetanus**
- (b) Tetanus antitoxin
- (c) Antitoxin
- (d) Antivenins

35. Type of immunity is seen in fetus in which the antibodies are transferred from the mother either via placenta or milk.

- (a) Artificial passive
- (b) **Natural passive**
- (c) Artificial active
- (d) Natural active

36. _____ is an example of animal immune sera that is used as an immunizing agent.

- (a) **Antitoxin**
- (b) Tetanus
- (c) Mixed toxoid DT
- (d) Mixed toxoid DTP

37. _____ vaccines are prepared by using a non-virulent microorganism.

- (a) Monkey
- (b) Guinea pig
- (c) **Cow**
- (d) Rabbit

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38. The term vaccine has been derived from the Latin word vacca which means that it retains its antigenicity.

- (a) Inactivated-killed
- (b) **Live attenuated**
- (c) Bacterial
- (d) Viral

39. Which of the following is the main agent for air pollution?

- (a) CO₂
- (b) SO₂
- (c) H₂S
- (d) **Carbon monoxide**

40. Sound intensity is measured in terms of:

- (a) Hertz
- (b) **Decibels**
- (c) Dyne
- (d) Microbar

41. _____ should be quickly removed and disposed of as it undergoes rapid fermentation on storage.

- (a) Waste
- (b) Rubbish
- (c) Ash
- (d) **Garbage**

42. _____ is the best method of disposing of highly infectious hospital and nursing home refuse.

- (a) **Incineration**
- (b) Dumping
- (c) Composting
- (d) Burning

43. _____ one of the most practical and effective methods of disposing refuse in rural areas.

- (a) Manure pits
- (b) **Composting**
- (c) Burning
- (d) Dumping

44. Which of the following is found in serum and on lymphocytes?

- (a) IgM
- (b) **IgA**
- (c) IgI
- (d) IgE

45. All the workers exposed to continuous noise louder than _____ require hearing protection.

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- (a) 100 Hz
- (b) 150 Hz
- (c) 250 Hz
- (d) **50 Hz**

46. _____ is not a fat-soluble vitamin.

- (a) Vitamin K
- (b) Vitamin E
- (c) Vitamin A
- (d) **Vitamin C**

47. Which of the following is a water-soluble vitamin?

- (a) Vitamin E
- (b) **Vitamin B**
- (c) Vitamin D
- (d) Vitamin K

48. Milk, yogurt, cheese, small fish with bones, and beans are the natural sources of

- (a) **Calcium**
- (b) Sodium
- (c) Magnesium
- (d) Iodine

49. _____ is needed for vitamin B activation, muscle relaxation, and blood clotting.

- (a) Sodium
- (b) Magnesium
- (c) **Calcium**
- (d) Potassium

50. _____ is the most commonly occurring extracellular cation.

- (a) Magnesium
- (b) Calcium
- (c) **Sodium**
- (d) Potassium

51. _____ maintains a healthy muscular system and acts as an antioxidant.

- (a) Vitamin A
- (b) Vitamin B3
- (c) **Vitamin E**
- (d) Vitamin C

52. _____ is responsible for the formation of RBCs.

- (a) Vitamin B3
- (b) Vitamin K
- (c) Vitamin C
- (d) **Vitamin B12**

53. The recommended daily intake of iron for men is _____ mg/day.

- (a) 15
- (b) 10
- (c) 20
- (d) 25

54. Excessive intake of _____ can cause the most prominent signs of toxicity.

- (a) Magnesium
- (b) Calcium
- (c) **Iron**
- (d) Potassium

55. Health services to achieve the target goal of the WHO include:

- (a) Primary healthcare
- (b) Secondary healthcare
- (c) **Both a and b**
- (d) Tertiary healthcare

56. _____ is not a basic component of primary health care.

- (a) Immunization
- (b) Maternal and child health care
- (c) **Advanced medical technology**
- (d) Health education

57. _____ is a technique to assess the health status of a population.

- (a) Social service
- (b) **Epidemiological data**
- (c) Health survey
- (d) Community service

58. Public health policy development includes:

- (a) Identification of health problems
- (b) Setting of priorities
- (c) Formulation of strategies
- (d) **All of these**

59. The _____ provides a framework for primary health care.

- (a) Universal Declaration of Human Rights
- (b) **Alma Ata Declaration**
- (c) WHO Charter
- (d) Ottawa Charter

60. Health promotion strategies focus on:

- (a) Disease prevention
- (b) Treatment services
- (c) **Behavioral changes**
- (d) Emergency care

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61. Which method is used for early detection of disease in the general population?

- (a) Clinical diagnosis
- (b) **Screening**
- (c) Laboratory tests
- (d) Case management

62. _____ is a key factor in determining the success of health interventions.

- (a) **Community participation**
- (b) Health infrastructure
- (c) Medical technology
- (d) Financial resources

63. A health system that provides care based on patients' needs and preferences is known as:

- (a) **Patient-centered care**
- (b) Disease-oriented care
- (c) Specialist-based care
- (d) Institutional care

64. _____ is an essential component of health care services that ensures continuous and coordinated care.

- (a) Hospital care
- (b) Primary care
- (c) **Continuity of care**
- (d) Specialty care

65. Health care delivery systems aim to:

- (a) Increase access to services
- (b) Improve quality of care
- (c) Reduce health disparities
- (d) **All of these**

66. The _____ emphasizes the importance of a multidisciplinary approach to health care.

- (a) Alma Ata Declaration
- (b) Ottawa Charter
- (c) **WHO Framework for Health Systems**
- (d) Global Health Initiative

67. _____ are policies and practices aimed at reducing the burden of disease.

- (a) Health interventions
- (b) Health education
- (c) Health promotion
- (d) **Public health programs**

68. Health policies should be:

- (a) Flexible
- (b) Evidence-based

- (c) **Comprehensive**
- (d) All of these

69. Effective health communication involves:

- (a) Clear messaging
- (b) **Audience engagement**
- (c) Accurate information
- (d) All of these

70. _____ involves using data and research to inform health policy decisions.

- (a) Health advocacy
- (b) **Health informatics**
- (c) Health promotion
- (d) Health education

71. _____ is a method of gathering information through direct observation and analysis of individuals and communities.

- (a) Surveys
- (b) **Field studies**
- (c) Interviews
- (d) Focus groups

72. The primary objective of a health needs assessment is to:

- (a) **Identify gaps in health services**
- (b) Evaluate health policies
- (c) Develop new medical technologies
- (d) Increase funding for health programs

73. _____ is a measure of the extent to which a person can perform daily activities despite health problems.

- (a) Health status
- (b) Health behavior
- (c) **Functional ability**
- (d) Quality of life

74. _____ refers to the likelihood that a person will experience a particular health outcome based on their behavior and environment.

- (a) Health risk
- (b) Health status
- (c) Health condition
- (d) **Health hazard**

75. In evaluating health programs, _____ measures how well the program meets its goals and objectives.

- (a) **Outcome evaluation**
- (b) Process evaluation
- (c) Impact assessment
- (d) Formative evaluation

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76. _____ involves assessing the financial, social, and health impacts of a new health intervention before it is implemented.

- (a) Pilot testing
- (b) **Cost-effectiveness analysis**
- (c) Feasibility study
- (d) Health impact assessment

77. The concept of _____ emphasizes addressing the underlying determinants of health and providing services that are equitable and accessible.

- (a) Secondary health care
- (b) **Primary health care**
- (c) Tertiary health care
- (d) Emergency health care

78. _____ is a strategy that focuses on reducing health inequities by addressing the social determinants of health.

- (a) **Health equity promotion**
- (b) Disease prevention
- (c) Health education
- (d) Medical treatment

79. _____ is the process of translating research findings into practical health policies and practices.

- (a) Health communication
- (b) **Knowledge translation**
- (c) Policy development
- (d) Evidence-based practice

80. Health literacy is the ability to:

- (a) Understand and apply health information
- (b) Access healthcare services
- (c) **Make informed health decisions**
- (d) Communicate with healthcare providers

81. _____ is the term used for a system that integrates various health services to provide comprehensive care to patients.

- (a) Fragmented care
- (b) **Integrated care**
- (c) Specialized care
- (d) Patient-centered care

82. The purpose of _____ is to ensure that health services are delivered efficiently and effectively to the population.

- (a) Health promotion
- (b) **Health systems strengthening**
- (c) Disease management
- (d) Health education

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83. _____ involves coordinating care across different levels of the health system to ensure continuity of care for patients.

- (a) **Care coordination**
- (b) Case management
- (c) Health integration
- (d) Health planning

84. The _____ approach focuses on the involvement of communities in the planning, implementation, and evaluation of health programs.

- (a) **Participatory**
- (b) Top-down
- (c) Bottom-up
- (d) Centralized

85. _____ is a measure of the degree to which health care services are distributed fairly among different population groups.

- (a) Health access
- (b) Health equity
- (c) Health outcomes
- (d) **Health distribution**

86. _____ is the process of identifying and addressing the health needs of a specific population through targeted interventions.

- (a) **Targeted health intervention**
- (b) Population health management
- (c) Health needs assessment
- (d) Community health planning

87. The main goal of _____ is to prevent the onset of diseases and conditions by promoting healthy behaviors and environments.

- (a) Secondary prevention
- (b) **Primary prevention**
- (c) Tertiary prevention
- (d) Health promotion

88. _____ is a health care model that emphasizes collaboration among health professionals to provide comprehensive patient care.

- (a) Solo practice
- (b) **Interdisciplinary care**
- (c) Specialty care
- (d) Traditional care

89. The concept of _____ refers to the quality and safety of health care services provided to patients.

- (a) Health efficiency
- (b) **Health care quality**
- (c) Patient satisfaction
- (d) Service delivery

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90. _____ is the process of evaluating the effectiveness and impact of health policies and programs.

- (a) Policy analysis
- (b) **Program evaluation**
- (c) Impact assessment
- (d) Outcome measurement

91. The _____ model emphasizes the importance of addressing the broader social, economic, and environmental factors that influence health.

- (a) **Social determinants of health**
- (b) Biomedical model
- (c) Clinical model
- (d) Risk factor model

92. _____ is an essential component of public health that involves educating individuals and communities about health and wellness.

- (a) Disease prevention
- (b) **Health education**
- (c) Clinical care
- (d) Health research

93. The _____ is an international organization dedicated to improving global health and well-being through research, advocacy, and health programs.

- (a) Centers for Disease Control and Prevention (CDC)
- (b) World Health Organization (WHO)
- (c) **International Red Cross**
- (d) National Institutes of Health (NIH)

94. _____ involves the use of health data to identify patterns and trends in disease occurrence and to guide public health interventions.

- (a) Health assessment
- (b) **Epidemiology**
- (c) Health planning
- (d) Health surveillance

95. The _____ approach to health care focuses on the prevention of illness and the promotion of health through a variety of strategies and interventions.

- (a) Disease-centered
- (b) **Preventive**
- (c) Diagnostic
- (d) Treatment-based

96. _____ is a key factor in ensuring that health interventions are successful and sustainable in the long term.

- (a) Funding
- (b) **Community involvement**
- (c) Technology
- (d) Policy support

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97. _____ is the process of assessing the health needs and resources of a community to plan and implement appropriate health interventions.

- (a) **Community health assessment**
- (b) Health evaluation
- (c) Program development
- (d) Service planning

98. The _____ model focuses on individual behavior change and emphasizes the role of personal responsibility in health outcomes.

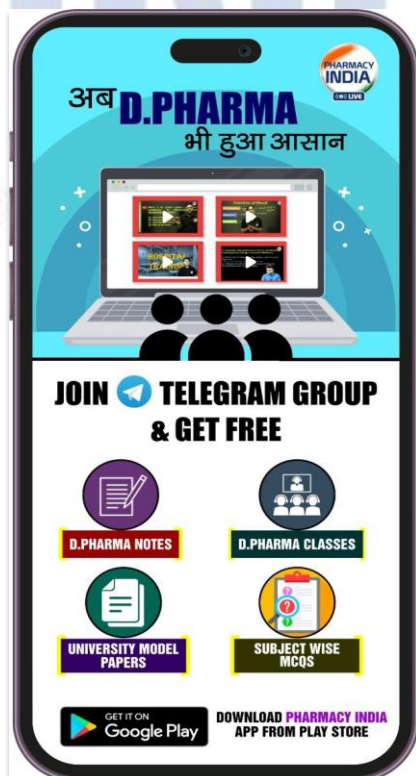
- (a) Social model
- (b) **Behavioral model**
- (c) Epidemiological model
- (d) Biopsychosocial model

99. _____ is a measure of the number of years a person can expect to live in good health.

- (a) Life expectancy
- (b) Quality-adjusted life years (QALY)
- (c) **Healthy life expectancy**
- (d) Disability-adjusted life years (DALY)

100. _____ is a comprehensive approach to improving health outcomes by addressing the needs of individuals, families, and communities.

- (a) **Holistic care**
- (b) Specialized care
- (c) Emergency care
- (d) Acute care



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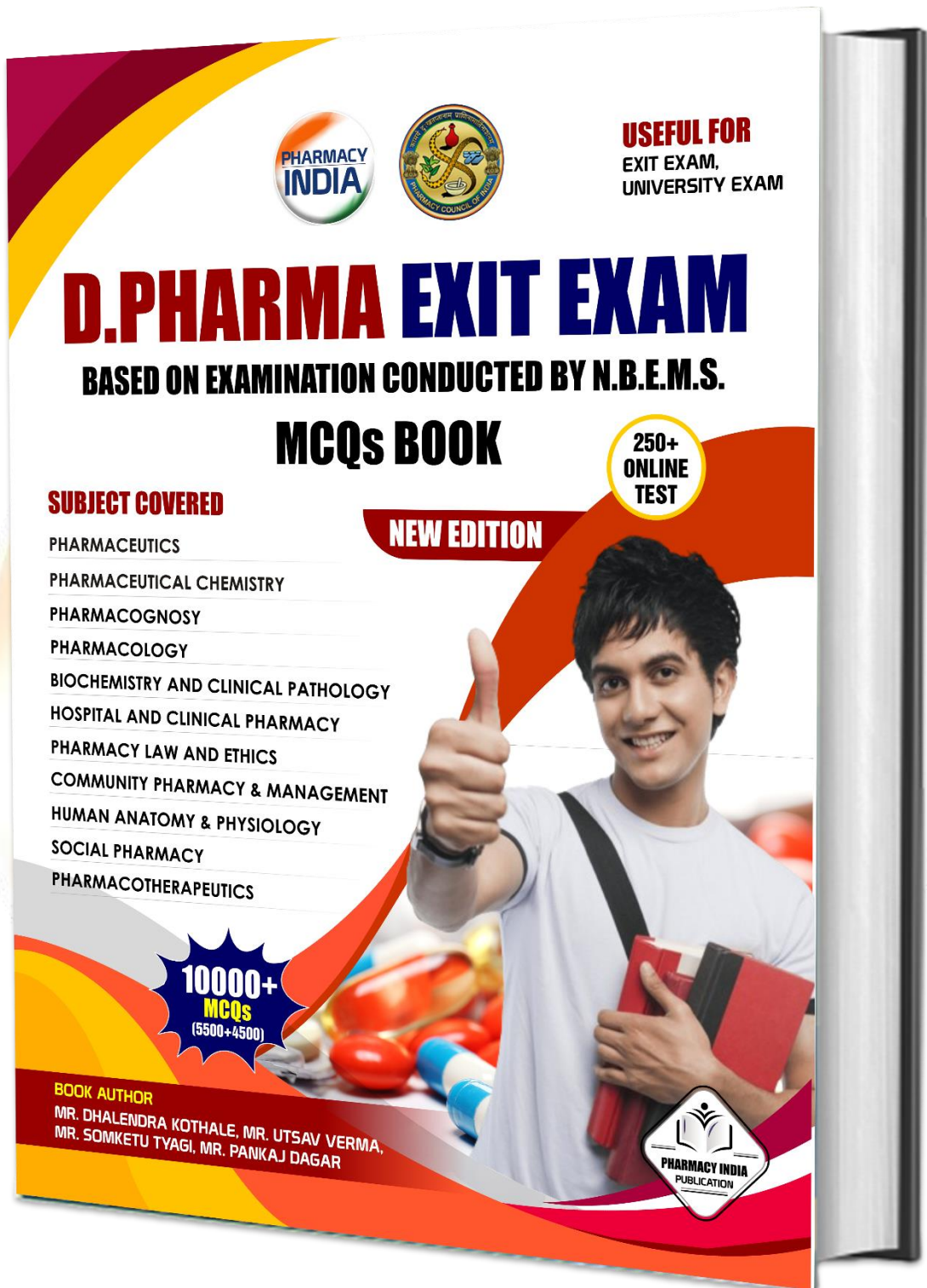


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