Affiliated to CBSE, New Delhi (Affiliation No. 1030642)

GNPS

GOMTI NANDAN PUBLIC SCHOOL

Gandhi Ward, Bina (M.P.) 470113. | 9165 609 333. | info@mygnps.com | www.mygnps.com

CLASS X · HEALTH CARE (413) · SKILL SUBJECT · CBSE BOARD EXAMINATION 2027

PART B · UNIT 1

Hospital Structure and Functions

OPD · IPD ICU · OT CSSD

Unit Booklet · Short Notes · Board-Pattern Questions · Model Answers

Part B · 10 of 40 theory marks | 29 questions with model answers | Ram Sir | Taught: Mon 23 Nov

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STUDENT DETAILS

NAME _____

CLASS & SECTION _____

ROLL NO. _____

UNIT FINISHED ON _____

OBJECTIVE SELF-CHECK _____ / 16

1

READ THIS FIRST · SHORT NOTES

Unit Notes

Everything you need for Unit 1: what a hospital does, how health care is organised in India, the departments and chain of command, how hospitals are classified, and the duties and qualities of a General Duty Assistant (GDA).

THIS UNIT IN THE BOARD PAPER

10 / 40

Unit 1 is one of the two biggest units of Part B (with First Aid). In the CBSE sample paper it gave **4 one-mark MCQs**, **one 2-mark** question (functions of departments) and **one 4-mark** question (preventive vs promotive functions). Expect about **10 marks**.

SYLLABUS 2026–27 · WHAT CBSE LISTS FOR THIS UNIT

- Healthcare delivery system; roles and functions of a hospital
- Role of supporting departments; chain of command
- Classifying hospitals; levels of medical care
- Role and functions of a GDA / Patient Care Assistant
- Qualities of a good GDA / Patient Care Assistant
- Activity: chart of departments, professionals and support staff

HOW THE CBSE SKILL-SUBJECT PAPER IS SET (THEORY 50 MARKS · 2 HOURS)

1 mark
Objective: MCQ, assertion–reason, fill in the blank, true/false, match. Q1 is Part A; Q2–Q5 (answer 5 of 6 in each) are Part B.

2 marks
Short answer in **20–30 words**: two clear points. Part B: answer any 4 of 6 (Q11–Q16).

4 marks
Long answer in **50–80 words**: four points, or 2 + 2. Answer any 3 of 5 (Q17–Q21); often case-based.

Part B = 40
Objective 20 + short 8 + long 12. Part A (Employability Skills) = 10. Practical = 50.

Write in points, start each point with the key word, and stay inside the word limit. Objective answers: write the option letter **and** the answer.

1 What is a hospital?

> **Hospital:** an institution where sick or injured people are examined, diagnosed, treated and cared for by trained staff. It is also a centre for **training** health workers and for **research**.

A modern hospital looks after the **whole community**, not only the patients in its beds: it runs out-patient clinics, health camps, vaccination drives and outreach to homes.

- **OPD** (Out-Patient Department): patient is seen and goes home the same day.
- **IPD** (In-Patient Department): patient is **admitted** and stays in a ward or room.
- **Emergency / Casualty:** open 24 × 7 for accidents and sudden serious illness.

2 Four main functions of a hospital

Function	Meaning	Examples
Curative	Treating disease or injury	Diagnosis, medicines, surgery, emergency care, ICU
Preventive	Stopping disease **before** it starts or spreads	Vaccination, antenatal check-ups, screening camps, isolation of infectious patients
Promotive	Improving and keeping good health	Health education, diet and exercise advice, anti-tobacco talks, hygiene campaigns
Rehabilitative	Helping a patient return to normal life after illness or injury	Physiotherapy, artificial limbs, speech therapy, counselling

Other functions: **education and training** of doctors, nurses and GDAs, and **medical research**.

REMEMBER THE DIFFERENCE

Preventive = *protect* a healthy person from a disease (a polio drop). Promotive = make a person *healthier* (a talk on balanced diet). Curative = *cure* the sick. Rehabilitative = *restore* after illness.

3 Healthcare delivery system in India

Health care is given at three levels, so that simple problems are handled near home and only serious cases go to big hospitals.

Level	Where	What it does
Primary	Sub-Health Centre / Ayushman Arogya Mandir, Primary Health Centre (PHC)	First contact with the health system: common illness, vaccination, mother and child care, health education
Secondary	Community Health Centre (CHC), sub-district and district hospitals	Specialist care (physician, surgeon, gynaecologist, paediatrician) for cases referred from the primary level
Tertiary	Medical college hospitals, AIIMS, super-speciality hospitals	Highly specialised care: heart and brain surgery, cancer treatment, transplants, advanced tests

Referral system: a patient moves up from primary to secondary to tertiary care when needed, and comes back down for follow-up.

- Sub-centre: about **5,000** people (3,000 in hilly / tribal areas).
- PHC: about **30,000** people (20,000 in hilly / tribal areas).
- CHC: about **1,20,000** people (80,000 in hilly / tribal areas); about 30 beds.

4 Departments of a hospital

Clinical departments treat patients directly: General Medicine, Surgery, Obstetrics & Gynaecology, Paediatrics, Orthopaedics, ENT, Eye, Dental, Psychiatry, plus OPD, wards, Emergency, ICU and the Operation Theatre (OT).

Supporting departments help the clinical departments work. Without them no doctor can treat a patient properly.

Supporting department	Main role
Laboratory (Pathology)	Tests blood, urine and other samples; gives reports for diagnosis
Radiology	X-ray, ultrasound, CT and MRI images of the inside of the body
Pharmacy	Stores and issues medicines as per the doctor's prescription
Blood bank	Collects, tests, stores and issues safe blood
CSSD	Central Sterile Supply Department: cleans, packs and sterilises instruments and linen
Medical Records (MRD)	Keeps patients' files and registers safely and confidentially
Dietary / Kitchen	Prepares the diets ordered for patients
Laundry & Linen	Washes and supplies clean bed sheets, gowns and OT linen
Housekeeping	Cleaning, disinfection and biomedical waste collection
Maintenance / Biomedical engg.	Keeps the building, power, water and machines working
Front office, Billing, Stores, Security, Ambulance	Registration, accounts, supplies, safety and transport

5 Chain of command

> **Chain of command:** the line of authority in a hospital. Orders pass **down** the line and reports pass **up** the line, so every worker knows whom to obey and whom to report to.

1. **Governing body / Management**
2. **Medical Superintendent** (or Director): head of the hospital
3. **Heads of departments** and the **Nursing Superintendent**
4. **Ward sister / Nurse in-charge → Staff nurse**
5. **GDA / Patient Care Assistant**, ward attendants, housekeeping staff

A GDA reports to the nurse in-charge of the ward. Any change in a patient's condition is told to the nurse at once, never kept back.

Why it matters: clear responsibility, no confusion in emergencies, quick decisions, discipline, and patient safety.

6 Classifying hospitals

Basis	Types
Ownership / control	**Government** (central, state, municipal, railways, ESI, armed forces) · **Private** (for profit, e.g. corporate hospitals) · **Voluntary / charitable** (trusts, missions, NGOs – not for profit)
Type of service	**General** hospital: treats all kinds of illness · **Speciality** hospital: one disease, organ or group, e.g. eye, cancer, heart, maternity, children, mental health
Level of care	Primary · Secondary · Tertiary (see block 3)
Size (bed strength)	Small, medium and large hospitals, by number of beds; big teaching hospitals have the most beds
Length of stay	**Short-stay** (acute illness, a few days) · **Long-stay** (chronic illness, e.g. TB, mental illness, leprosy)
System of medicine	Allopathic (modern medicine) · AYUSH: Ayurveda, Yoga & Naturopathy, Unani, Siddha, Sowa-Rigpa, Homoeopathy
Teaching role	**Teaching** hospital (attached to a medical or nursing college) · Non-teaching hospital

7 General Duty Assistant (GDA)

GDA / Patient Care Assistant: a trained health worker who gives **basic care and comfort** to patients and helps nurses and doctors, always working under the **supervision of a nurse**.

- **Personal hygiene:** bathing, mouth care, hair and nail care, changing clothes.
- **Feeding:** serving the diet ordered, helping weak patients eat and drink.
- **Elimination:** giving bedpan or urinal, keeping the patient clean and dry.
- **Comfort and safety:** bed making, turning a bedridden patient every 2 hours to prevent bedsores, using side rails.
- **Moving patients:** by wheelchair or stretcher to X-ray, OT or another ward.
- **Vital signs:** measuring and recording temperature, pulse, breathing and BP when asked, and reporting changes.
- **Admission, transfer and discharge:** helping with the patient and belongings.
- **Infection control:** hand washing, gloves and mask, putting waste in the right colour bin.
- **Errands:** taking samples to the lab and bringing reports.

8 What a GDA must not do

- Give medicines or injections, or change a drip.
- Tell a patient or relative the diagnosis or test results – this is the doctor's job.
- Do any procedure without training and the nurse's instruction.
- Share a patient's information with outsiders (breaks **confidentiality**).

SCOPE OF WORK

A patient asks the GDA, "Is my report normal?" The GDA politely says that the doctor or nurse will explain the report, and informs the nurse.

9 Qualities of a good GDA

Quality	What it looks like
Compassion and empathy	Understands the patient's pain and fear; treats every patient kindly
Patience	Stays calm with slow, old, anxious or angry patients
Good communication	Listens carefully, speaks politely and clearly; reports correctly to the nurse
Honesty and integrity	Admits mistakes; never takes patients' belongings
Confidentiality and respect	Keeps patient information private; protects privacy (screens, covering) and dignity
Punctuality and responsibility	On time, completes duties, follows hospital rules
Hygiene and neat appearance	Clean uniform, short nails, tied hair, frequent hand washing
Physical fitness	Can lift and move patients safely using correct body posture
Observation skills	Notices changes such as breathlessness, pain or bleeding and reports at once
Teamwork	Works well with nurses, doctors and other staff
No discrimination	Same care for every patient, whatever the caste, religion, gender or wealth

Key terms

16 terms

OPD: out-patient department; patient goes home the same day

IPD: in-patient department; patient is admitted

Curative care: treatment of disease or injury

Preventive care: steps that stop a disease before it occurs

Promotive care: activities that improve health, such as health education

Rehabilitation: helping a patient return to normal life after illness

Referral: sending a patient to a higher level of care

PHC / CHC: Primary Health Centre / Community Health Centre

Tertiary care: highly specialised care in big hospitals

CSSD: department that sterilises instruments and supplies

MRD: medical records department

Chain of command: line of authority from top management to support staff

Speciality hospital: hospital for one disease, organ or group

AYUSH: Ayurveda, Yoga & Naturopathy, Unani, Siddha, Sowa-Rigpa, Homoeopathy

GDA: General Duty Assistant: gives basic patient care under a nurse

Confidentiality: keeping patient information private

Common mistakes and exam tips

AVOID THESE

- Mixing up **preventive** and **promotive**: vaccination is preventive; health education on diet is promotive.
- Writing that a GDA "gives medicines" – a GDA **never** gives medicines or injections.
- Calling a CHC a primary-level centre: the CHC is **secondary** level (first referral unit).
- In a "classify hospitals" answer, always name the **basis** first (ownership, service, level of care …) and then the types.
- For a 4-mark question, write four separate points; one idea written twice earns one mark only.

A

PART A · 1 MARK EACH

Objective Questions

16 questions: MCQs, assertion–reason, fill in the blanks and true/false, like Q2–Q5 of the board paper. Answers in Part E.

A1. Giving a polio vaccine to a healthy child in a hospital is an example of which function of the hospital? [1]

(a) Curative (b) Preventive (c) Rehabilitative (d) Promotive

A2. A hospital runs a talk on balanced diet and daily exercise for school children. This is its _____ function. [1]

(a) curative (b) rehabilitative (c) promotive (d) diagnostic

A3. Raju lost a leg in an accident. After treatment the hospital fits an artificial limb and trains him to walk. This is: [1]

(a) Preventive care (b) Promotive care
(c) Rehabilitative care (d) Primary care

A4. Arrange the levels of care in the order a referred patient would usually move through them: (i) District hospital (ii) Sub-health centre (iii) Medical college hospital (iv) Primary Health Centre [1]

(a) (ii), (iv), (i), (iii) (b) (iv), (ii), (i), (iii)
(c) (ii), (i), (iv), (iii) (d) (i), (ii), (iv), (iii)

A5. Which department cleans, packs and sterilises surgical instruments for the whole hospital? [1]

(a) Radiology (b) CSSD (c) Medical Records (d) Pharmacy

A6. Match the department with its work and choose the correct option. [1]
P. Radiology Q. Pathology R. MRD S. Dietary
1. Blood and urine tests 2. Patients' files 3. X-ray and ultrasound 4. Patients' meals

(a) P-3, Q-1, R-2, S-4 (b) P-1, Q-3, R-2, S-4
(c) P-3, Q-2, R-1, S-4 (d) P-4, Q-1, R-2, S-3

A7. A GDA notices that a patient has suddenly become breathless. To whom should the GDA report first? [1]

(a) The patient's relative (b) The nurse in-charge of the ward
(c) The Medical Superintendent (d) The billing counter

A8. A hospital that treats only cancer patients is called a: [1]

(a) General hospital (b) Speciality hospital
(c) Primary Health Centre (d) Long-stay rehabilitation centre

A9. Which of these is NOT a duty of a General Duty Assistant? [1]

(a) Giving a bedpan (b) Turning a bedridden patient
(c) Giving an injection (d) Taking a sample to the lab

A10. Hospitals run by trusts, missions or NGOs on a not-for-profit basis are called: [1]

(a) Corporate hospitals (b) Voluntary hospitals
(c) Government hospitals (d) Teaching hospitals

A11. A Community Health Centre (CHC) is a part of which level of health care? [1]

(a) Primary (b) Secondary (c) Tertiary (d) Quaternary

A12. A GDA keeps a patient's HIV report private and does not discuss it with visitors. Which quality is shown? [1]

(a) Punctuality (b) Confidentiality (c) Physical fitness (d) Teamwork

A13. FILL IN THE BLANK [1]

A patient who is examined and goes home on the same day is treated in the _____.

A14. FILL IN THE BLANK [1]

Turning a bedridden patient every _____ hours helps to prevent bedsores.

A15. TRUE OR FALSE [1]

A tertiary care hospital gives highly specialised treatment such as heart surgery and organ transplants.

A16. TRUE OR FALSE [1]

A GDA may tell a worried relative the diagnosis of the patient.

B — Short Answer Questions

PART B · 2 MARKS EACH

Answer in 20–30 words: two clear points. Model answers in Part E.

B1. Differentiate between OPD and IPD. [2]

B2. Write the functions of any two supporting departments of a hospital. MUST DO [2]

B3. What is meant by chain of command in a hospital? Why is it important? [2]

B4. Name any two levels of health care in India and give one example of each. [2]

B5. List any four things a GDA must NOT do. [2]

B6. How does a speciality hospital differ from a general hospital? [2]

C — Long Answer Questions

PART C · 4 MARKS EACH

Answer in 50–80 words: four points, or two points with an example each. Model answers in Part E.

C1. Explain the curative, preventive, promotive and rehabilitative functions of a hospital with one example each. MUST DO [4]

C2. Describe any four roles and functions of a General Duty Assistant. MUST DO [4]

C3. Explain any four qualities of a good GDA. [4]

C4. On what bases are hospitals classified? Explain any four with examples. [4]

C5. Explain the three-tier healthcare delivery system of India. [4]

D

PART D · CASE AND COMPETENCY BASED

Case-Based Questions

Read the situation, then answer from it and from the unit. These are the 4-mark board questions that test application.

D1. Case-Based · A day at the district hospital [4]

Meena, a GDA at a district hospital, starts her shift at 8 a.m. She helps an elderly patient with his bath and breakfast, takes a blood sample to the laboratory, and wheels a patient to the X-ray room. A visitor asks her what illness the patient in bed 4 has. Later, she sees that the patient in bed 7 is sweating and very restless.

(i) Name the two supporting departments Meena visited. [1]

(ii) How should Meena reply to the visitor? Which quality does this show? [1]

(iii) What should Meena do about the patient in bed 7, and why? [2]

D2. Case-Based · Choosing the right hospital [4]

Ramesh, a farmer from a village near Bina, has had fever and cough for a week. He first goes to the Ayushman Arogya Mandir in his village. After some tests he is sent to the Community Health Centre, where a specialist suspects tuberculosis. Later he needs a test that is available only at a medical college hospital in Bhopal.

(i) Which levels of care did Ramesh use, in order? [1]

(ii) What is this movement of a patient from one level to the next called? [1]

(iii) Give two advantages of this system. [2]

E

PART E · ANSWERS IN CBSE MARKING-SCHEME STYLE

Answers

Objective key with a reason, then model answers: numbered value points, key word first, the mark for each point in orange, and the word count under each answer. Any other correct, relevant point also earns the mark.

Objective questions – answer key

Part A

Write the option letter **and** the answer, as the marking scheme does.

Q	Answer	Why (one line)
A1	**(b) Preventive**	Vaccination stops the disease before it occurs.
A2	**(c) promotive**	Health education improves health – promotive.
A3	**(c) Rehabilitative care**	Restoring normal life after illness or injury.
A4	**(a) (ii), (iv), (i), (iii)**	Sub-centre → PHC (primary) → district hospital (secondary) → medical college (tertiary).
A5	**(b) CSSD**	Central Sterile Supply Department.
A6	**(a) P-3, Q-1, R-2, S-4**	Radiology = images; pathology = lab tests; MRD = records; dietary = food.
A7	**(b) The nurse in-charge of the ward**	In the chain of command the GDA reports to the ward nurse.
A8	**(b) Speciality hospital**	It deals with one disease group.
A9	**(c) Giving an injection**	Injections are given only by nurses or doctors.
A10	**(b) Voluntary hospitals**	Classified by ownership: voluntary / charitable.
A11	**(b) Secondary**	The CHC is the first referral unit, with specialists.
A12	**(b) Confidentiality**	Patient information is kept private.
A13	**OPD (Out-Patient Department)**	Admitted patients are in the IPD.
A14	**2 (two)**	Pressure on one area for long causes bedsores.
A15	**True**	Tertiary = super-speciality care.
A16	**False**	Correct: only the doctor explains the diagnosis. The GDA politely refers the relative to the doctor or nurse.

Short answers

Part B · 2 marks

B1. Differentiate between OPD and IPD. **[2]**

1. **OPD:** the patient is examined and treated and goes home the same day. 1
2. **IPD:** the patient is admitted and stays in a ward or room for treatment and care. 1

29 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | 1 mark each

B2. Write the functions of any two supporting departments of a hospital. [2]

1. **Laboratory:** tests blood, urine and other samples and gives reports that help the doctor diagnose. 1
2. **Pharmacy:** stores medicines and issues them as per the doctor's prescription. 1

26 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | Any two departments, 1 mark each | MUST DO

B3. What is meant by chain of command in a hospital? Why is it important? [2]

1. **Meaning:** the line of authority through which orders pass down and reports pass up. 1
2. **Importance:** everyone knows whom to report to, so there is no confusion and patients are safe. 1

30 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | 1 + 1

B4. Name any two levels of health care in India and give one example of each. [2]

1. **Primary:** first-contact care, e.g. a Primary Health Centre or sub-centre. 1
2. **Tertiary:** highly specialised care, e.g. a medical college hospital or AIIMS. 1

21 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | Any two levels; ½ level + ½ example

B5. List any four things a GDA must NOT do. [2]

1. **Medicines:** must not give medicines or injections. ½
2. **Drip:** must not start or change an IV drip. ½
3. **Diagnosis:** must not tell the diagnosis or reports. ½
4. **Privacy:** must not share patient information with outsiders. ½

32 words · CBSE asks 20–30 words | Marking: ½ + ½ + ½ + ½ = 2 | 4 × ½ = 2

B6. How does a speciality hospital differ from a general hospital? [2]

1. **General hospital:** treats patients with all kinds of illnesses and injuries. 1
2. **Speciality hospital:** treats one disease, organ or group only, e.g. an eye or cancer hospital. 1

26 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | 1 + 1

Long answers

Part C · 4 marks

C1. Explain the curative, preventive, promotive and rehabilitative functions of a hospital with one example each. [4]

1. **Curative:** treats disease or injury, e.g. surgery for appendicitis. 1
2. **Preventive:** stops disease before it occurs, e.g. vaccination of children. 1
3. **Promotive:** improves health, e.g. health talks on diet and exercise. 1
4. **Rehabilitative:** helps the patient return to normal life, e.g. physiotherapy after a fracture. 1

42 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | ½ for meaning + ½ for example, × 4 | MUST DO

C2. Describe any four roles and functions of a General Duty Assistant. [4]

1. **Hygiene:** bathes the patient and gives mouth, hair and nail care. 1
2. **Feeding and elimination:** helps the patient eat and drink; gives bedpan or urinal. 1
3. **Comfort and safety:** makes the bed, turns bedridden patients every 2 hours, moves patients safely. 1
4. **Observation:** measures vital signs when asked and reports any change to the nurse. 1

52 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | Any four, 1 mark each | MUST DO

C3. Explain any four qualities of a good GDA. [4]

1. **Compassion:** treats every patient with kindness and understands their pain. 1
2. **Communication:** listens carefully, speaks politely and reports correctly to the nurse. 1
3. **Confidentiality:** keeps the patient's information and privacy safe. 1
4. **Hygiene:** keeps a clean uniform and washes hands often to prevent infection. 1

41 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | Any four, 1 mark each

C4. On what bases are hospitals classified? Explain any four with examples. [4]

1. **Ownership:** government, private or voluntary, e.g. district hospital, corporate hospital, mission hospital. 1
2. **Type of service:** general or speciality, e.g. an eye hospital. 1
3. **Level of care:** primary, secondary or tertiary, e.g. PHC, CHC, AIIMS. 1
4. **Length of stay:** short-stay for acute illness; long-stay for chronic illness such as TB. 1

47 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | ½ basis + ½ example, × 4

C5. Explain the three-tier healthcare delivery system of India. [4]

Health care in India is given at three levels linked by referral.

1. **Primary:** sub-centres and PHCs give first-contact care, vaccination and mother-child care. 1
2. **Secondary:** CHCs and district hospitals give specialist care to referred patients. 1
3. **Tertiary:** medical colleges and super-speciality hospitals give advanced care such as surgery and transplants. 1
4. **Referral:** patients move up when needed and return for follow-up. 1

58 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | 1 mark per level + 1 for referral link

Case-based answers

Part D

D1. Case-Based · A day at the district hospital (passage printed in Part D) [4]

(i) Name the two supporting departments Meena visited. [1]

The **laboratory (pathology)** and **radiology (X-ray)** departments.

(ii) How should Meena reply to the visitor? Which quality does this show? [1]

She should politely say she cannot share the information and refer the visitor to the nurse or doctor. Quality: **confidentiality**.

(iii) What should Meena do about the patient in bed 7, and why? [2]

(1) Report the change **at once to the nurse in-charge**, following the chain of command. (2) Stay with the patient and keep him safe until help comes, because sweating and restlessness may be signs of a serious problem.

Marking: 1 + 1 + 2 = 4 — ½ + ½ for (i); ½ + ½ for (ii); 1 + 1 for (iii)

D2. Case-Based · Choosing the right hospital (passage printed in Part D) [4]

(i) Which levels of care did Ramesh use, in order? [1]

Primary (Arogya Mandir) → **secondary** (CHC) → **tertiary** (medical college).

(ii) What is this movement of a patient from one level to the next called? [1]

The **referral system**.

(iii) Give two advantages of this system. [2]

(1) Simple illness is treated near home, saving the patient's time and money. (2) Big hospitals are not overcrowded, so serious cases get specialist care quickly.

Marking: 1 + 1 + 2 = 4 — 1 + 1 + (1 + 1)