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 2

Care Plan and Care of Patients

T · P · R
BP · BMI
Fowler's

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

Part B · 5 of 40 theory marks | 26 questions with model answers | Ram Sir | Taught: Tue 24 Nov

INSIDE THIS BOOKLET

1	**Unit Notes** 9 note blocks, key terms, exam tips	2
A	**Objective Questions** 14 questions · 1 mark	7
B	**Short Answer Questions** 6 questions · 2 marks	8
C	**Long Answer Questions** 4 questions · 4 marks	8
D	**Case-Based Questions** 2 cases · 4 marks	8
E	**Answers** Key + model answers, marking-scheme style	10

STUDENT DETAILS

NAME _____

CLASS & SECTION _____

ROLL NO. _____

UNIT FINISHED ON _____

OBJECTIVE SELF-CHECK _____ / 14

1

READ THIS FIRST · SHORT NOTES

Unit Notes

What a care plan is and the GDA's part in it; hospital diets and feeding a patient; the four vital signs with normal values and how to measure them; types of hospital beds and bed making; patient positions and why Fowler's position matters.

THIS UNIT IN THE BOARD PAPER

5 / 40

Unit 2 carries **5 marks**. In the CBSE sample paper it gave **4 one-mark MCQs**, a **2-mark** question (preparing to take oral temperature) and a **4-mark** question (characteristics of a care plan). Normal values of vital signs and the patient positions are the favourite MCQs.

SYLLABUS 2026–27 · WHAT CBSE LISTS FOR THIS UNIT

- Role of the GDA in preparing and carrying out a care plan
- Feeding a patient; hospital diets; signs of a healthy person; nutrition
- Vital signs: temperature, pulse, respiration, BP, BMI – normal and abnormal
- Bed making: bed types, hospital bed features, steps
- Patient positioning; importance of Fowler's position
- Practicals: measuring vital signs, making a bed, positioning

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.

PRACTICAL WORK FOR THIS UNIT

Measure and record temperature, pulse, respiration and blood pressure of a classmate; work out BMI; make a closed and an open bed with mitred corners; place a dummy in supine, lateral, Sims' and Fowler's positions. Record each in the practical file.

1 Care plan

> **Care plan:** a written plan, made by the nurse with the doctor, that lists a patient's **needs or problems**, the **goals** of care, the **actions** to reach them, and how progress will be **checked**.

Steps: Assess → Identify the problem → Plan goals → Carry out care → Evaluate (and change the plan if needed).

Characteristics of a good care plan:

- **Written** and kept in the patient's file, so every shift follows it.
- **Individual:** made for one patient's needs.
- **Goal-oriented** with clear, realistic, time-bound goals.
- **Holistic:** covers physical, emotional and social needs.
- **Flexible:** updated as the patient's condition changes.
- **Team-based:** doctor, nurse, GDA, dietitian, patient and family.

2 The GDA's role in the care plan

- **Observes** the patient and **reports** to the nurse – this helps in making the plan.
- **Carries out** the tasks given: hygiene, feeding, positioning, walking the patient, bed making.
- **Measures and records** vital signs, intake and output when asked.
- **Reports changes** at once, so the plan can be changed.
- **Communicates** kindly and encourages the patient to follow the plan.
- Does **not** change the plan or do tasks outside the GDA's training.

3 Hospital diets

Diet	For whom / what
Normal (regular)	Patients with no diet limits
Soft	Easy to chew and digest: khichdi, dalia, mashed foods – after surgery, for old patients
Liquid	**Clear liquid**: water, coconut water, clear soup. **Full liquid**: milk, lassi, custard, soups
Diabetic	Controlled sugar and carbohydrates
Low-salt	High blood pressure, heart and kidney disease
High-protein	Burns, wounds, weakness after illness
NPO (nil by mouth)	Nothing to eat or drink, e.g. before surgery

Signs of a healthy person: normal weight for height, good appetite, sound sleep, energy, clear skin, bright eyes, regular bowel habits, good posture, cheerful mood.

Why nutrition matters: gives energy, builds and repairs tissues, fights infection, speeds healing and recovery.

4 Feeding a patient: steps

1. Check the **diet order** and the patient's identity; wash hands.
2. Help the patient sit up (**Fowler's position**) so food does not go into the windpipe.
3. Cover the chest with a napkin; check the food is not too hot.
4. Feed small spoonfuls; give time to chew and swallow; offer water; never hurry.
5. Give mouth care; keep the patient sitting up for about 30 minutes.
6. Record how much was eaten; report choking, vomiting or refusal to the nurse.

5 Vital signs: normal values (adult)

Vital sign	Normal	Abnormal words
Temperature	About **37 °C (98.6 °F)** by mouth	Fever (pyrexia) above normal; hypothermia below 35 °C
Pulse	**60–100** beats a minute	Tachycardia above 100; bradycardia below 60
Respiration	**12–20** breaths a minute	Tachypnoea (fast), bradypnoea (slow), apnoea (no breathing)
Blood pressure	About **120/80 mm Hg**	Hypertension 140/90 or more; hypotension below 90/60
Oxygen saturation (SpO_2)	**95–100%**	Below 95% needs attention

BMI = weight (kg) ÷ [height (m)]². Normal 18.5–24.9; 25–29.9 overweight; 30 or more obese. Example: 64 kg, 1.6 m → 64 ÷ 2.56 = **25**.

6 Measuring temperature

Sites: mouth (oral), armpit (axillary – about 0.5 °C lower), rectum (rectal – about 0.5 °C higher), ear (tympanic), forehead.

Preparing for an oral reading:

- Wait **15–30 minutes** after the patient has eaten, drunk anything hot or cold, smoked or exercised.
- Clean the thermometer and check it works; use a digital thermometer (mercury ones are being phased out).
- Explain the procedure; wash hands; make the patient sit or lie comfortably.
- Place the tip **under the tongue**, lips closed, until it beeps; read, record and clean it.

Do **not** take an oral reading of a child, an unconscious or confused patient, or one breathing through the mouth – use the armpit or ear.

7 Pulse, respiration and BP

- **Pulse sites:** radial (wrist – most used), carotid (neck), brachial (inside elbow), femoral (groin), apical (over the heart).
- Feel with the **index and middle fingers**, not the thumb (it has its own pulse). Count for **one full minute**; note rate, rhythm and strength.
- **Respiration:** one rise and one fall of the chest = one breath. Count for a minute **without telling** the patient, as breathing changes when watched.
- **Blood pressure:** measured with a sphygmomanometer and stethoscope, or a digital machine. Patient rests 5 minutes; arm at heart level; cuff about 2–3 cm above the elbow. Written as systolic / diastolic, e.g. 120/80 mm Hg.

8 Hospital beds and bed making

Bed	Use
Closed bed	Empty bed made after discharge, top sheet pulled up, waiting for a new admission
Open bed	Top linen folded back, ready for a patient who will get in soon or can get up
Occupied bed	Made with the patient lying in it (patient cannot get up)
Post-operative bed	Ready to receive a patient from the OT; top linen folded to one side; warm
Cardiac bed	Back rest raised so a heart patient can sit up and breathe
Fracture bed	Board under the mattress to keep it firm

Hospital bed features: adjustable height and back rest, **side rails**, wheels with **locks**, waterproof mattress cover.

Rules: wash hands; collect linen in order of use; lock the wheels; make sheets **tight and wrinkle-free** with **mitred corners** (wrinkles cause bedsores); never shake linen (spreads germs); keep soiled linen away from your uniform and off the floor; raise side rails after.

9 Patient positions

Position	How	Used for
Supine	Lying flat on the back	Rest, examination of chest and abdomen
Prone	Lying on the abdomen	Back examination, relieving pressure on the back
Lateral	Lying on one side	Rest, prevents bedsores, unconscious patients
Sims'	Half on left side, upper knee bent	Enema, rectal examination
Fowler's	Sitting up, head of bed raised about 45–60°	Breathing difficulty, feeding, heart patients
Trendelenburg	Head lower than the feet	Shock (helps blood reach the brain)
Lithotomy	On the back, legs raised and apart	Childbirth, gynaecological examination

Why Fowler's position matters: lungs expand more, so **breathing is easier**; safe **eating and drinking** without choking; comfort for talking and reading; helps drainage after abdominal surgery. Semi-Fowler's ≈ 30–45°; high Fowler's ≈ 60–90°.

Change a bedridden patient's position **every 2 hours**.

Key terms

16 terms

- **Care plan:** written plan of a patient's needs, goals and care
- **NPO:** nil by mouth – nothing to eat or drink
- **Vital signs:** temperature, pulse, respiration, blood pressure
- **Pyrexia:** fever
- **Tachycardia:** pulse above 100 a minute
- **Bradycardia:** pulse below 60 a minute
- **Apnoea:** no breathing
- **Hypertension:** high blood pressure
- **Sphygmomanometer:** instrument to measure BP
- **BMI:** weight (kg) ÷ height (m)^2
- **Radial pulse:** pulse at the wrist
- **Closed bed:** empty bed ready for a new admission
- **Mitred corner:** neat, tight, angled fold at a bed corner
- **Supine / prone:** lying on back / on abdomen
- **Fowler's position:** sitting up, head of bed raised
- **Trendelenburg:** head lower than feet, used in shock

Common mistakes and exam tips

AVOID THESE

- Never feed a patient lying flat – always sit the patient up first.
- Normal adult pulse is **60–100**, but respiration is **12–20**. Do not mix them up.
- Do not use the thumb to feel a pulse.
- Closed bed = no patient expected yet; open bed = patient coming or can get out of bed.
- Sims' position is for **enema / rectal examination**; lithotomy is for **childbirth**.

A

PART A · 1 MARK EACH

Objective Questions

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

A1. The normal pulse rate of an adult at rest is: [1]

(a) 40–60 per minute (b) 60–100 per minute
(c) 100–140 per minute (d) 12–20 per minute

A2. Which position is best for a patient who is breathless? [1]

(a) Prone (b) Trendelenburg (c) Fowler's (d) Lithotomy

A3. A patient going for surgery tomorrow morning is put on "NPO" after midnight. This means: [1]

(a) Normal diet (b) Nothing by mouth
(c) Soft diet only (d) Liquids only

A4. Arrange the steps of feeding a patient in the right order: [1]
(i) Sit the patient up (ii) Check the diet order (iii) Give mouth care (iv) Feed small spoonfuls

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

A5. The pulse most commonly felt at the wrist is the: [1]

(a) Carotid pulse (b) Radial pulse
(c) Femoral pulse (d) Apical pulse

A6. A bed made after a patient is discharged, with the top sheet pulled up to the head, is a(n): [1]

(a) Open bed (b) Occupied bed (c) Closed bed (d) Cardiac bed

A7. A person weighs 81 kg and is 1.8 m tall. The BMI is: [1]

(a) 20 (b) 25 (c) 45 (d) 30

A8. The position used for giving an enema is: [1]

(a) Sims' position (b) Fowler's position
(c) Supine position (d) Lithotomy position

A9. Match the term with its meaning: [1]
P. Bradycardia Q. Apnoea R. Pyrexia S. Hypotension
1. Fever 2. Slow pulse 3. Low blood pressure 4. No breathing

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

A10. Why should linen never be shaken while making a bed? [1]

(a) It tears the sheet (b) It spreads germs in the air
(c) It wastes time (d) It wrinkles the sheet

A11. FILL IN THE BLANK [1]
Blood pressure is measured with an instrument called a _____.

A12. FILL IN THE BLANK [1]
Before taking an oral temperature, wait at least _____ minutes after the patient has had a hot drink.

A13. TRUE OR FALSE [1]
Respirations should be counted without telling the patient.

A14. TRUE OR FALSE [1]
A GDA may change the care plan if the patient asks.

B — Short Answer Questions

PART B · 2 MARKS EACH

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

B1. What is a care plan? [2]

B2. List four preparations before taking a patient's oral temperature. MUST DO [2]

B3. Write the normal adult values of pulse and respiration. [2]

B4. Differentiate between a closed bed and an open bed. [2]

B5. Give two reasons why a patient is fed in Fowler's position. [2]

B6. Name any four types of hospital diet. [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 any four characteristics of a good care plan. MUST DO [4]

C2. Describe the role of a GDA in carrying out a care plan. [4]

C3. Describe four patient positions and the use of each. MUST DO [4]

C4. State four rules a GDA should follow while making a hospital bed. [4]

D — Case-Based Questions

PART D · CASE AND COMPETENCY BASED

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

D1. Case-Based · Vital signs in Ward 3 [4]

A GDA records these readings for Mr Sharma, aged 60: temperature 39 °C, pulse 112 per minute, respiration 26 per minute, blood pressure 150/96 mm Hg. He says he feels short of breath while lying flat.

(i) Which readings are above normal? [1]

(ii) Give the correct term for his pulse and his blood pressure. [1]

(iii) What two things should the GDA do now? [2]

D2. Competency-Based · Lunch for Mrs Kaur [4]

Mrs Kaur, 75, had a stroke and has weakness on one side. Her diet order says "soft diabetic diet". At lunch she is lying flat and coughs after the first spoonful.

(i) What does a soft diabetic diet mean? [1]

(ii) What mistake was made before feeding? [1]

(iii) Write two more precautions while feeding her. [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) 60–100 per minute**	12–20 is the normal breathing rate.
A2	**(c) Fowler's**	Sitting up lets the lungs expand.
A3	**(b) Nothing by mouth**	Nil per os = nothing by mouth.
A4	**(a) (ii), (i), (iv), (iii)**	Check order → position → feed → mouth care.
A5	**(b) Radial pulse**	Radial artery at the wrist.
A6	**(c) Closed bed**	It waits for a new admission.
A7	**(b) 25**	81 ÷ (1.8 × 1.8) = 81 ÷ 3.24 = 25.
A8	**(a) Sims' position**	Left side, upper knee bent.
A9	**(a) P-2, Q-4, R-1, S-3**	Brady = slow; apnoea = no breath; pyrexia = fever.
A10	**(b) It spreads germs in the air**	Dust and microbes spread.
A11	**sphygmomanometer**	With a stethoscope, or digital.
A12	**15 (15–30)**	Hot or cold drinks change the mouth temperature.
A13	**True**	People change their breathing when watched.
A14	**False**	Correct: only the nurse and doctor change the care plan; the GDA reports the request.

Short answers

Part B · 2 marks

B1. What is a care plan? [2]

1. **Meaning:** a written plan of a patient's needs, goals and the care actions to meet them. 1
2. **Who and why:** made by the nurse with the doctor so all staff give the same care. 1

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

B2. List four preparations before taking a patient's oral temperature. [2]

1. **Wait:** 15–30 minutes after food, drink, smoking or exercise. ½
2. **Thermometer:** clean and check it. ½
3. **Explain:** tell the patient and wash hands. ½
4. **Position:** patient sits or lies comfortably. ½

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

B3. Write the normal adult values of pulse and respiration. [2]

1. **Pulse:** 60–100 beats per minute. 1
2. **Respiration:** 12–20 breaths per minute. 1

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

B4. Differentiate between a closed bed and an open bed. [2]

1. **Closed bed:** empty bed with the top sheet pulled up, waiting for a new admission. 1
2. **Open bed:** top linen folded back, ready for a patient arriving soon or able to get up. 1

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

B5. Give two reasons why a patient is fed in Fowler's position. [2]

1. **No choking:** food goes down the food pipe and not into the windpipe. 1
2. **Easy breathing:** the lungs expand well while eating. 1

21 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | Any two, 1 mark each

B6. Name any four types of hospital diet. [2]

1. **Diets:** soft diet, liquid diet, 1
2. **Therapeutic:** diabetic diet, low-salt diet. 1

10 words · CBSE asks 20–30 words | Marking: 1 + 1 = 2 | ½ for each diet

Long answers

Part C · 4 marks

C1. Explain any four characteristics of a good care plan. [4]

1. **Written:** kept in the file so every shift follows it. 1
2. **Individual:** made for one patient's own needs. 1
3. **Goal-oriented:** clear, realistic goals with a time limit. 1
4. **Flexible:** changed as the patient's condition changes. 1

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

C2. Describe the role of a GDA in carrying out a care plan. [4]

1. **Observe and report:** watches the patient and tells the nurse. 1
2. **Carry out tasks:** hygiene, feeding, positioning and bed making. 1
3. **Record:** vital signs, intake and output when asked. 1
4. **Communicate:** encourages the patient; never changes the plan. 1

35 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | 1 mark each

C3. Describe four patient positions and the use of each. [4]

1. **Supine:** lying on the back – rest and examination. 1
2. **Fowler's:** sitting up – breathing difficulty and feeding. 1
3. **Sims':** left side, upper knee bent – enema. 1
4. **Trendelenburg:** head lower than feet – shock. 1

28 words · CBSE asks 50–80 words | Marking: 1 + 1 + 1 + 1 = 4 | ½ position + ½ use, × 4 | MUST DO

C4. State four rules a GDA should follow while making a hospital bed. [4]

1. **Lock wheels:** lock the wheels and raise the bed to working height. 1
2. **Tight sheets:** no wrinkles; mitred corners prevent bedsores. 1
3. **No shaking:** never shake linen, as it spreads germs. 1
4. **Soiled linen:** keep away from uniform and off the floor; into the laundry bag. 1

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

Case-based answers

Part D

D1. Case-Based · Vital signs in Ward 3 (passage printed in Part D) [4]

(i) Which readings are above normal? [1]

All four: temperature, pulse, respiration and blood pressure are above normal.

(ii) Give the correct term for his pulse and his blood pressure. [1]

Pulse: **tachycardia**; BP: **hypertension**.

(iii) What two things should the GDA do now? [2]

(1) **Report** the readings to the nurse at once and record them. (2) Raise the back rest to **Fowler's position** to ease his breathing, and stay with him.

Marking: 1 + 1 + 2 = 4 | 1 + (½ + ½) + (1 + 1)

D2. Competency-Based · Lunch for Mrs Kaur (passage printed in Part D) [4]

(i) What does a soft diabetic diet mean? [1]

Food that is **easy to chew and swallow** and has **controlled sugar**.

(ii) What mistake was made before feeding? [1]

She was **not sat up** in Fowler's position, so food can enter the windpipe.

(iii) Write two more precautions while feeding her. [2]

(1) Give **small spoonfuls** slowly and let her swallow fully. (2) **Stop and report** to the nurse if she keeps coughing or choking; record the amount eaten.

Marking: 1 + 1 + 2 = 4 | 1 + 1 + 2