NATIONAL INSTITUTE OF AYURVEDA

(Deemed to be University)

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SAMPLE QUESTIONS FOR UNDERSTANDING THE QUESTION & MARKING PATTERN and SUGGESTED RESOURCES FOR WRITTEN TEST FOR SELECTION TO THE POSTS OF PROFESSOR AND ASSOCIATE PROFESSOR, NIA PANCHKULA CAMPUS

Important Note

The following sample questions are provided only to familiarise candidates with the nature, structure and expected mode of response of the different question types that may be used in the Written Test. These questions are illustrative and do not represent the actual questions, difficulty level, topic-wise weightage or content of the examination.

Question Types

Question Type	Expected Response	Marks per Question
SBA: Single-Best-Answer Question	Select the single best answer from the four options.	1
MRQ: Multiple-Response Question	One or more options may be correct. Select all options considered correct.	4
SJQ: Situational Judgment Question	Select the most appropriate response to the given professional/administrative situation. Options carry predetermined weighted scores.	4
VSA: Very Short Answer	Direct and concise response in approximately 30 to 50 words.	2
SA: Short Answer	Focused descriptive response in approximately 100 to 150 words.	5
LA: Long Answer	Analytical, scenario-based response in approximately 250 to 300 words.	10

The actual number and distribution of different question types in the examination shall be in accordance with the approved examination scheme and feasibility within the 120-minute examination duration.

SAMPLE QUESTIONS

SECTION A: SUBJECT COMPETENCY

Illustrative Speciality: Kayachikitsa

The concerned speciality is used only for illustrating the question format. Questions in the actual examination shall relate to the concerned subject of specialisation.

A1. Single-Best-Answer Question (SBA)

Question: A 52-year-old patient presents with sudden onset of weakness of the right upper and lower limbs and difficulty in speaking for the past 45 minutes. What is the most appropriate immediate course of action?

A. Begin routine outpatient Ayurvedic treatment
B. Advise rest at home and review after 24 hours
C. Arrange immediate referral to an emergency stroke-care facility
D. Begin dietary correction and observe the response

A2. Multiple-Response Question (MRQ)

Question: Which of the following are important warning features requiring urgent evaluation in a patient presenting with acute abdominal pain?

A. Board-like abdominal rigidity
B. Persistent hypotension
C. Mild transient bloating after meals
D. Repeated vomiting with inability to retain fluids

Correct Options: A, B and D

Scoring**:** Each correctly selected option carries an equal proportion of the marks. No mark is awarded for an unselected correct option. **If any incorrect option is selected, the response receives zero marks.**

A3. Situational Judgment Question (SJQ)

Question: A patient with a known chronic illness attending your OPD reports a new symptom suggestive of a potentially serious complication. The diagnosis is uncertain. What is the most appropriate response?

A. Recognise the possible risk, perform an appropriate initial assessment and arrange timely referral/investigation while continuing only safe supportive care.
B. Continue the existing treatment and advise investigation if symptoms persist.
C. Modify the Ayurvedic prescription and review the patient after one week.

D. Reassure the patient because the new symptom may be related to the pre-existing illness.

Illustrative Weighted Scoring

Option	**Score**
A	4
B	3
C	2
D	1

SJQs assess the relative appropriateness of professional judgment. ***Candidates shall select only one option.***

A4. Very Short Answer (VSA)

Question: Explain the clinical importance of assessing **Agni** during case evaluation.

Expected response (should include 30-50 words in the given space in the answer sheet/ book)**:**

Assessment of Agni helps in understanding digestive and metabolic functioning, formation of Ama, disease pathogenesis and individualised therapeutic planning. It also contributes to decisions regarding diet and appropriate therapeutic measures.

Indicative marking point	Marks
Role of Agni in digestion/metabolism, Ama formation or understanding disease process	1
Relevance to individualised diet and therapeutic planning	1
Total	2

A5. Short Answer (SA)

Question: Describe how Nidana Panchaka contributes to clinical reasoning in an Ayurvedic patient.

Suggestive Answer Tip: In your answer you may include following points:

- Nidana
- Purvarupa
- Rupa
- Upashaya/Anupashaya
- Samprapti
- Integrated application in diagnosis and therapeutic planning

Indicative marking point	Marks
Nidana and Purvarupa	1
Rupa	0.5
Upashaya/Anupashaya	1

Samprapti	1
Integrated application in diagnosis and therapeutic planning	1.5
Total	5

A6. Long Answer (LA)

Question: A 48-year-old patient with a chronic musculoskeletal disorder has been receiving treatment for several months but shows little improvement. Describe how you would systematically reassess the case before modifying treatment.

Suggestive Answer Tip: In your answer you may include following points:

- Verification of diagnosis
- Nidana Panchaka
- Dosha-Dushya involvement
- Agni and Ama
- Rogabala and Rogibala
- Treatment adherence
- Pathya-Apathya
- Response to previous treatment
- Relevant investigations
- Red flags
- Need for referral or multidisciplinary care
- Rational modification of management

Indicative marking point	Marks
Verification/reconsideration of diagnosis	1
Nidana Panchaka and Samprapti reassessment	1.5
Dosha-Dushya involvement, Agni and Ama	1.5
Rogabala and Rogibala	1
Treatment adherence and Pathya-Apathya	1
Review of response to previous treatment	0.5
Relevant examination/investigations	1
Identification of red flags and need for referral/multidisciplinary care	1.5
Rational modification of management	1
Total	10

The Section A examples in the source use Kayachikitsa only as the illustrative speciality and demonstrate all six response formats.

SECTION B: ACADEMIC AND RESEARCH COMPETENCY

B1. Single-Best-Answer Question (SBA)

Question: Investigators wish to compare a new intervention with standard care while minimising selection bias between the treatment groups. Which study design is most appropriate?

A. Cross-sectional study
B. Randomised controlled trial

C. Case series
D. Ecological study

B2. Multiple-Response Question (MRQ)

Question: Which of the following are essential elements of valid informed consent for participation in research?

A. Adequate information about the study
B. Voluntary decision-making
C. Capacity of the participant to provide consent
D. Guarantee that the intervention will benefit the participant

Correct Options: A, B and C

B3. Situational Judgment Question (SJQ)

Question: A postgraduate student has completed data collection and finds that the results do not support the original hypothesis. The student asks whether observations that weaken the findings may be excluded from analysis. As the research supervisor, what is the most appropriate response?

A. Require analysis according to the approved protocol, examine any legitimate reasons for exclusions and transparently report all justified exclusions.
B. Allow exclusion only if doing so produces statistically significant results.
C. Advise removal of observations that appear inconsistent with the expected findings.
D. Ask the student to revise the hypothesis to match the results before analysis.

Illustrative Weighted Scoring

Option	Score
A	4
B	1
C	2
D	3

Best Response: A

B4. Very Short Answer (VSA)

Question: Differentiate between a research aim and a research objective.

Expected response:
A research aim states the broad purpose of the study, whereas research objectives translate that purpose into specific and measurable steps or outcomes that guide study design, data collection and analysis.

Indicative marking point	Marks
Correct explanation of research aim	1
Correct explanation of research objective and distinction from aim	1
Total	2

B5. Short Answer (SA)

Question: Explain the purpose of randomisation and allocation concealment in a clinical trial.

Answer Tips: Key points may include:

- Balancing known and unknown prognostic factors
- Reduction of selection bias
- Prevention of foreknowledge of upcoming allocation
- Difference between randomisation and allocation concealment

Indicative marking point	Marks
Purpose of randomisation	1
Balancing known and unknown prognostic factors	1
Reduction of selection bias	1
Purpose of allocation concealment/prevention of foreknowledge	1
Clear distinction between randomisation and allocation concealment	1
Total	5

B6. Long Answer (LA)

Question: You are reviewing a postgraduate research proposal evaluating an Ayurvedic intervention for a chronic clinical condition. The proposal has a clear research question but inadequately describes sample-size determination, allocation, outcome measures and data-analysis methods.

Identify the major methodological issues that should be corrected before approval and explain their importance.

Answer Tips: Key areas may include-

- Research hypothesis and objectives
- Appropriate study design
- Eligibility criteria
- Sample-size justification
- Sampling and recruitment
- Randomisation, where applicable
- Allocation concealment
- Blinding, where feasible
- Primary and secondary outcomes
- Validated outcome measures
- Follow-up schedule
- Statistical analysis plan
- Management of missing data
- Ethics and informed consent
- Safety monitoring

Indicative marking point	Marks
Research hypothesis/objectives and appropriateness of study design	1
Eligibility criteria, sampling and recruitment	1
Sample-size justification	1
Randomisation and allocation concealment, where applicable	1
Blinding, where feasible	0.5

Clearly defined primary/secondary outcomes and validated outcome measures	1.5
Follow-up schedule	0.5
Appropriate statistical analysis plan	1
Management of missing data	0.5
Ethics, informed consent and research governance	1
Safety monitoring	1
Total	10

These examples correspond to research design, research ethics, methodology and analytical reasoning represented in the Academic and Research Competency section.

SECTION C: ADMINISTRATIVE, MANAGEMENT AND LEADERSHIP COMPETENCY

C1. Single-Best-Answer Question (SBA)

Question: The primary purpose of an Institutional Quality Assurance Cell (IQAC) is to:

A. Conduct all university examinations and declare results
B. Develop and facilitate systematic processes for continuous institutional quality improvement
C. Approve individual patient-treatment decisions in teaching hospitals
D. Sanction all departmental expenditure and procurement independently

C2. Multiple-Response Question (MRQ)

Question: Which of the following are appropriate responsibilities of a Head of Department?

A. Monitoring departmental academic activities
B. Facilitating equitable utilisation of departmental resources
C. Providing academic guidance and mentorship
D. Unilaterally modifying institutional financial rules for the department

Correct Options: A, B and C

C3. Situational Judgment Question (SJQ)

Question: Two senior faculty members are involved in an escalating dispute over the allocation of postgraduate students. The disagreement has begun affecting students and departmental functioning. As Head of Department, what should you do first?

A. Meet the concerned faculty members, establish the facts, review applicable criteria and facilitate a transparent and documented resolution.
B. Allocate all students to one faculty member to end the disagreement immediately.
C. Allow the faculty members to resolve the issue themselves even though students are being affected.
D. Immediately initiate disciplinary proceedings against both faculty members without first establishing the facts.

Illustrative Weighted Scoring

Option	Score
A	4
B	2
C	1
D	3

Best Response: A

C4. Very Short Answer (VSA)

Question: State the purpose of the minutes of an official meeting.

Expected response:
Minutes provide an accurate and authorised record of matters considered, key deliberations, decisions taken, responsibilities assigned and follow-up actions agreed during a meeting, thereby supporting accountability and institutional continuity.

Indicative marking point	Marks
Accurate record of deliberations and decisions taken	1
Recording responsibility, follow-up and institutional accountability/continuity	1
Total	2

C5. Short Answer (SA)

Question: Describe the key steps a Head of Department should take when a significant departmental grievance is formally reported.

Answer Tips-Key points may include:

- Acknowledgement of the grievance
- Establishing relevant facts
- Maintaining confidentiality
- Following applicable institutional rules
- Ensuring procedural fairness
- Hearing relevant parties
- Documentation
- Proportionate action/recommendation
- Communication of the outcome
- Appropriate escalation or appeal mechanism

Indicative marking point	Marks
Acknowledgement and proper documentation of grievance	0.5
Establishing facts and maintaining confidentiality	1
Ensuring procedural fairness and hearing relevant parties	1
Following applicable institutional rules	0.5
Appropriate/proportionate action or referral	1
Communication of outcome, escalation/appeal and follow-up	1
Total	5

C6. Long Answer (LA)

Question: A major equipment failure suddenly disrupts an essential clinical service of your department. Repair is expected to take several days, postgraduate training is being affected and patients are accumulating.

As Head of Department, describe how you would manage the situation while ensuring patient safety, continuity of services and institutional accountability.

Answer Tips: Key areas may include:

- Immediate risk assessment
- Patient-safety prioritisation
- Temporary alternative arrangements
- Referral or redistribution of services
- Communication with institutional authorities
- Engineering/procurement coordination
- Documentation
- Academic arrangements for trainees
- Allocation of staff responsibilities
- Patient communication
- Backlog management
- Service-restoration plan
- Post-event review and preventive action

Indicative marking point	Marks
Immediate risk assessment and patient-safety prioritisation	1.5
Temporary alternative arrangements/referral/redistribution of services	1
Timely communication with institutional authorities	0.5
Engineering/procurement coordination	1
Appropriate documentation	0.5
Academic arrangements for postgraduate trainees	1
Allocation of staff responsibilities and patient communication	1
Backlog management and continuity/restoration of services	1
Post-event review and preventive/corrective measures	1.5
Overall prioritisation and coherent management approach	1
Total	10

The Section C examples demonstrate administrative decision-making, HOD responsibilities, conflict resolution and crisis management.

General Instruction for Descriptive Questions

For VSA, SA and LA questions, candidates should answer within the prescribed word limit and the space provided in the answer booklet. The indicative points shown with the sample questions are provided only to demonstrate the expected scope and depth of a response and will not accompany questions in the actual examination. The above marking distribution is indicative. Equivalent relevant and valid points will be awarded proportionate marks. The evaluator will award the marks as per expected scope of the response.

SUGGESTIVE RESOURCES

- **Cochrane Handbook for Systematic Reviews of Interventions, version 6.5 (2024).** Chapter 8, Assessing risk of bias in a randomized trial, especially sections on the

randomization process, deviations from intended interventions and measurement of outcomes. https://www.cochrane.org/authors/handbooks-and-manuals/handbook/current/chapter-08

- **CDC. Principles of Epidemiology in Public Health Practice, 3rd ed..** https://stacks.cdc.gov/view/cdc/6914/cdc_6914_DS1.pdf
- **International Committee of Medical Journal Editors. Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals.** Sections on authors and contributors; manuscript preparation; clinical-trial registration; and use of artificial intelligence in publishing. https://www.icmje.org/recommendations/
- **Gagnier JJ, et al. Reporting randomized, controlled trials of herbal interventions: an elaborated CONSORT statement.** Ann Intern Med. 2006;144:364-367, checklist items describing the herbal medicinal product and intervention sufficiently for replication. https://www.equator-network.org/reporting-guidelines/consort-statement-for-herbal-interventions/
- **National Institutes of Health. Advice on Application Sections.** Research Strategy: Significance, Innovation and Approach. https://grants.nih.gov/grants-process/write-application/advice-on-application-sections
- **National Medical Commission. Competency Based Assessment Module for Undergraduate Medical Education, 2019.** https://www.nmc.org.in/wp-content/uploads/2020/08/Module_Competence_based_02.09.2019.pdf
- **Indian Council of Medical Research. National Ethical Guidelines for Biomedical and Health Research Involving Human Participants, 2017.** Section 2, General Ethical Issues; Section 4, Ethics Committees; Section 5, Informed Consent Process; Section 6, Vulnerability. https://www.icmr.gov.in/icmrobject/custom_data/pdf/resource-guidelines/ICMR_Ethical_Guidelines_2017.pdf
- **Indian Council of Medical Research. Policy on Research Integrity and Publication Ethics, 2019.** Sections defining fabrication, falsification and plagiarism, and provisions on responsible authorship and handling research misconduct. https://www.icmr.gov.in/guidelines
- **Indian Council of Medical Research. Ethical Guidelines for Application of Artificial Intelligence in Biomedical Research and Healthcare, 2023.** Ethical principles and stakeholder responsibilities concerning safety, validation, bias, transparency, accountability, privacy and human oversight. https://www.icmr.gov.in/ethical-guidelines-for-application-of-artificial-intelligence-in-biomedical-research-and-healthcare
- **National Health Authority. Ayushman Bharat Digital Mission and Health Data Management Policy.** Principles concerning consent, privacy, data security, interoperability and responsible sharing of health data. https://abdm.gov.in/
- **Board of Governors in supersession of the Medical Council of India. Telemedicine Practice Guidelines, 2020.** Sections on identification, patient consent, documentation, privacy and confidentiality in teleconsultation. https://www.mohfw.gov.in/pdf/Telemedicine.pdf
- **The National Commission for Indian System of Medicine Act, 2020.** Sections 18, 26, 28, 29 and 30 concerning autonomous boards, Board of Ayurveda, Medical Assessment and Rating Board, and permission for new institutions/courses/seats. https://www.indiacode.nic.in/handle/123456789/15622?locale=en

- **NCISM. Minimum Standards of Undergraduate Ayurveda Education Regulations, 2022.** Regulation 6(j)(i), minimum attendance in theory and practical/clinical components. https://ncismindia.org/NCISM%20Gazette%20notification.pdf
- **National Assessment and Accreditation Council. Unified Manual for Health Sciences Colleges.** Criterion VI: Governance, Leadership and Management, especially Key Indicators 6.1, 6.2 and 6.5. https://www.naac.gov.in/images/docs/Manuals/manuals_new/Health-Science-College-Manual-16_11_2021.pdf
- **Department of Expenditure, Ministry of Finance. General Financial Rules, 2017, updated up to 31 January 2026.** Rule 21, Standards of financial propriety; Rule 149, Government e-Marketplace. https://doe.gov.in/files/acts_rules_documents/GFRupdatedupto31012026.pdf
- **The Right to Information Act, 2005.** Section 7(1), time limit for information concerning the life or liberty of a person. https://rti.gov.in/rti-act.pdf
- **NITI Aayog. Strategic Roadmap for Making Ayurveda Global, 2026.** Executive Summary and sections 2.3-2.4: three-pillar framework of Availability, Acceptability and Propagation. https://niti.gov.in/sites/default/files/2026-07/Strategic-Roadmap-for-Globalization-of-Ayurveda.pdf
- **The Patents Act, 1970, as amended; and Traditional Knowledge Digital Library official resources.** Patents Act, section 3(p); TKDL, About TKDL and FAQ on defensive protection and prior-art access for patent examiners. https://www.tkdl.res.in/
- **Department of Expenditure, Ministry of Finance. Manual for Procurement of Goods, 2nd ed., 2024.** https://doe.gov.in/manuals/manual-procurement-goods-2024
- **CCS (Conduct Rules, 1964, updated)** https://dopt.gov.in/sites/default/files/CCS_Conduct_Rules_1964_Updated_27Feb15_0.pdf
- **CCS (Leave Rules, 1972, Updated)** https://documents.doptcirculars.nic.in/D2/D02est/latest%20consolidated%20ruleMsnzh.pdf
- **CCS (Classification, Control and Appeal) Rules, 1965**

  https://dopt.gov.in/ccs-cca-rules-1965-0