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| Name: | |  | |
| Enrolment No: | | | |
| <div>UPES</div> <div>End Semester Examination, May 2025</div> <div><div>Course: Principle of Dietetics</div><div>Program: B.Sc (Microbiology)</div><div>Course Code: HSND2013P</div></div> <div><div>Semester : IV</div><div>Duration : 3 Hours</div><div>Max. Marks: 100</div></div> | | | |
| Instructions: Read the questions carefully and answer | | | |
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| S. No. | Section A | Marks | COs |
| | Short answer questions/ MCQ/T&F (20Qx1.5M= 30 Marks) | | |
| Q 1 | Define Behavioural Change. | 1.5 | CO1 |
| Q 2 | What does FFQ stand for? | 1.5 | CO1 |
| Q 3 | State True or False Parenteral Nutrition is delivered via the GI tract. | 1.5 | CO1 |
| Q 4 | What is the full form of TPN? | 1.5 | CO1 |
| Q 5 | State one limitation/disadvantage of 24-hour dietary recall. | 1.5 | CO1 |
| Q 6 | Explain one benefit of behavioural counselling in nutrition. | 1.5 | CO1 |
| Q 7 | What does SMART stand for in goal setting? | 1.5 | CO1 |
| Q 8 | Why is MNA useful in elderly patients? | 1.5 | CO1 |
| Q 9 | What mode of nutrition is suitable for a patient who is unable to chew? | 1.5 | CO1 |
| Q 10 | What screening tool would you use for community elderly? | 1.5 | CO1 |
| Q 11 | List two advantages of using parenteral nutrition. | 1.5 | CO1 |
| Q 12 | Identify a refeeding risk in chronic alcoholics. | 1.5 | CO1 |
| Q 13 | List any two types of behavioural change models. | 1.5 | CO1 |
| Q 14 | What distinguishes PN from EN in terms of administration? | 1.5 | CO1 |
| Q 15 | Name two tools used for nutritional screening. | 1.5 | CO1 |
| Q 16 | In Motivational Interviewing, which of the following is NOT a core component? A. Collaboration B. Evocation C. Judgment D. Autonomy | 1.5 | CO1 |
| Q 17 | The protein in standard enteral formulas is usually derived from: | 1.5 | CO1 |

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| | A. Eggs and milk B. Soy or casein C. Corn and wheat D. Gelatin | | |
| Q 18 | What is COM-B Model? | 1.5 | CO1 |
| Q 19 | Name two iron rich foods. | 1.5 | CO1 |
| Q 20 | List any two challenges of nutrition support in long-term care. | 1.5 | CO1 |
| <p style="text-align: center;">Section B (4Qx5M=20 Marks)</p> | | | |
| Q 1 | Describe the key features and prevention of refeeding syndrome. | 5 | CO2 |
| Q 2 | Write a short note on the COM-B model of behaviour change. | 5 | CO2 |
| Q 3 | Describe the difference between nutrition screening and nutrition diagnosis. | 5 | CO2 |
| Q 4 | What is therapeutic diet? State the objectives of therapeutic diet. | 5 | CO2 |
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| <p style="text-align: center;">Section C (2Qx15M=30 Marks)</p> | | | |
| Q 1 | <p>Case Study: Rahul is a 40-year-old man recently diagnosed with type 2 diabetes. He eats a lot of sweets and fried snacks, skips breakfast often, and does not exercise regularly. His blood sugar levels are high.</p> <p>Q: As a student of dietetics, how would you explain to Rahul: a) What changes he should make in his eating habits? b) Why is it important to control blood sugar levels in diabetes?</p> | 8+7=15 | CO4 |
| Q 2 | <p>Case Study: Ms. Neha Sinha, a 26-year-old software engineer, presents for a weight management consultation. Her height is 158 cm, and her weight is 84 kg. She often skips breakfast, eats out frequently, and prefers high-calorie snacks while working. She reports low energy levels and no routine physical activity. She has a family history of type 2 diabetes and polycystic ovarian syndrome (PCOS). Blood tests reveal elevated fasting insulin levels.</p> <p>Tasks:</p> <p>1. Calculate her BMI and classify her obesity.</p> | 3X5=15 | CO4 |

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| | 2. Identify at least three lifestyle factors contributing to her obesity. 3. Discuss the risks associated with central obesity in young adults. 4. Mention four foods that she must avoid. 5. Suggest two behaviour change strategies to support adherence to her weight management plan. | | |
| Section D (2Qx10M=20 Marks) | | | |
| Q 1 | Compare enteral and parenteral nutrition in terms of routes, indications, and complications. | 3+3+4=10 | CO3 |
| Q 2 | Describe the different methods of dietary assessment and state their advantages and limitations. | 10 | CO3 |