

Test Booklet Series



Test Booklet
(Clinical Psychologist)

Test Booklet No.

Name of Applicant :

Answer Sheet No. :

Applicant ID/Roll No. :

Signature of Applicant :

Date of Examination :

Signature of the Invigilator(s)

Time of Examination :

1.

2.

Duration : 60 Minutes]

[Maximum Marks : 50

IMPORTANT INSTRUCTIONS

- (i) The question paper is in the form of Test-Booklet containing **50 (Fifty)** questions. All questions are compulsory. Each question carries four answers marked (A), (B), (C) and (D), out of which only one is correct. Choose the correct option or the most appropriate option.
- (ii) On receipt of the Test-Booklet (Question Paper), the candidate should immediately check it and ensure that it contains all the pages, i.e., **50** questions. Discrepancy, if any, should be reported by the candidate to the invigilator immediately after receiving the Test-Booklet.
- (iii) A separate Answer-Sheet is provided with the Test-Booklet/Question Paper. On this sheet there are **50** rows containing four circles each. One row pertains to one question.
- (iv) The candidate should write his/her Application ID/Roll number at the places provided on the cover page of the Test-Booklet/Question Paper and on the Answer-Sheet and **NOWHERE ELSE**.
- (v) No second Test-Booklet/Question Paper and Answer-Sheet will be given to a candidate. The candidates are advised to be careful in handling it and writing the answer on the Answer-Sheet.
- (vi) For every correct answer of the question **One (1) mark will be awarded**. There will be **negative marking of 0.25 mark** for every incorrect answer.
- (vii) Marking shall be done only on the basis of answers responded on the Answer-Sheet.
- (viii) To mark the answer on the Answer-Sheet, candidate should darken the appropriate circle in the row of each question with Blue or Black pen.
- (ix) For each question only **one** circle should be **darkened** as a mark of the answer adopted by the candidate. If more than one circle for the question are found darkened or with one black circle any other circle carries any mark, the answer will be treated as incorrect.
- (x) The candidates should not remove any paper from the Test-Booklet/Question Paper. Attempting to remove any paper shall be liable to be punished for use of unfair means.
- (xi) Rough work may be done on the blank space provided in the Test-Booklet/Question Paper only.
- (xii) *Mobile phones (even in Switch-off mode) and such other communication/programmable devices are not allowed inside the examination hall.*
- (xiii) No candidate shall be permitted to leave the examination hall before the expiry of the time.

DO NOT OPEN THIS QUESTION BOOKLET UNTIL ASKED TO DO SO.

Clinical Psychologist

[P.T.O.
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1. A 28-year-old man describes recurrent intrusive thoughts about contamination, leading to 90 minutes of hand-washing daily. He recognizes these thoughts as his own and excessive. The most appropriate DSM-5-TR diagnosis is:
 - (A) Obsessive-Compulsive Disorder
 - (B) Illness Anxiety Disorder
 - (C) Body Dysmorphic Disorder
 - (D) Generalized Anxiety Disorder
2. A 24-year-old man with no prior psychiatric history is brought to the OPD with 5 days of persecutory delusions, auditory hallucinations, and disorganized speech. There is no medical cause or substance use. DSM-5-TR requires what minimum duration of symptoms for a diagnosis of Schizophrenia?
 - (A) 1 week
 - (B) 1 month (with at least 1 week of active-phase symptoms)
 - (C) 6 months continuously
 - (D) 2 years
3. A 26-year-old woman has a 6-year history of intense fear of abandonment, alternating idealization and devaluation in relationships, recurrent self-harm by wrist-cutting, and chronic feelings of emptiness. The most appropriate personality disorder diagnosis (ICD-11 / DSM-5-TR) is:
 - (A) Schizoid personality disorder
 - (B) Borderline (Emotionally Unstable) personality disorder
 - (C) Avoidant personality disorder
 - (D) Dependent personality disorder
4. A 35-year-old man reports recurrent episodes of palpitations, sweating, choking sensation, and fear of dying, each lasting ~10 minutes, peaking within minutes, occurring unpredictably for the last 3 months. The most likely diagnosis is:
 - (A) Generalized Anxiety Disorder
 - (B) Panic Disorder
 - (C) Social Anxiety Disorder
 - (D) Specific Phobia
5. A 40-year-old man presents 1 month after a road traffic accident with intrusive flashbacks, nightmares, avoidance of driving, hypervigilance, and disturbed sleep. Symptoms impair his daily functioning. The most appropriate diagnosis (ICD-11 / DSM-5-TR) is:
 - (A) Acute Stress Reaction
 - (B) Post-Traumatic Stress Disorder (PTSD)
 - (C) Adjustment Disorder with anxiety
 - (D) Generalized Anxiety Disorder
6. During the Mental Status Examination (MSE), a patient with schizophrenia says 'The sky is falling because birds sing backwards and my mother is a teapot.' This description best fits which thought abnormality?
 - (A) Thought block
 - (B) Tangentiality
 - (C) Loosening of associations / derailment
 - (D) Perseveration

7. A clinician assessing a 30-year-old patient with unexplained medical symptoms uses the 4 Ps case formulation framework. The 4 Ps stand for:
- (A) Predisposing, Precipitating, Perpetuating, Protective factors
 - (B) Past, Present, Prognosis, Plan
 - (C) Phenomenology, Pathology, Personality, Prognosis
 - (D) Problem, Plan, Process, Outcome
8. A clinical interview in which the clinician begins with broad open-ended questions and progressively narrows down to specific symptoms and diagnostic criteria is best described as a:
- (A) Structured interview
 - (B) Unstructured interview
 - (C) Semi-structured interview
 - (D) Self-report inventory
9. In the MSE, the term 'euthymic' specifically describes:
- (A) Elevated mood
 - (B) Depressed mood
 - (C) Mood within normal range
 - (D) Labile mood alternating between extremes
10. A patient being evaluated for depression repeatedly returns to the topic of her mother's illness, despite the clinician's attempts to redirect. She says 'I just can't stop thinking about it.' This MSE finding is best described as:
- (A) Perseveration
 - (B) Tangentiality
 - (C) Preoccupation / rumination
 - (D) Thought broadcasting
11. The Rorschach Inkblot Test consists of how many inkblot cards?
- (A) 5 cards (all black)
 - (B) 10 cards (5 black/gray, 2 black/red, 3 pastel)
 - (C) 16 cards (mostly colored)
 - (D) 20 cards (all chromatic)
12. A new rating scale for depression is administered to a group of patients twice, two weeks apart, in stable clinical condition. The correlation between the two sets of scores is 0.91. This demonstrates which psychometric property?
- (A) Inter-rater reliability
 - (B) Test-retest reliability
 - (C) Internal consistency (Cronbach's alpha)
 - (D) Content validity
13. A 60-year-old man with melancholic depression is rated on the Hamilton Depression Rating Scale (HAM-D, 17-item version). A total score of 24 indicates:
- (A) Normal / no depression
 - (B) Mild depression
 - (C) Moderate depression
 - (D) Severe depression

14. The Yale-Brown Obsessive Compulsive Scale (Y-BOCS) is a 10-item clinician-rated scale used to assess the severity of:
(A) Generalized anxiety disorder
(B) Panic disorder
(C) Obsessive-Compulsive Disorder
(D) Post-traumatic stress disorder
15. An investigator developing a new test of working memory correlates scores with an established test like WAIS-IV Digit Span. The correlation coefficient reflects which type of validity?
(A) Content validity
(B) Face validity
(C) Construct validity (convergent)
(D) Predictive validity
16. In Beck's cognitive model of depression, the 'cognitive triad' refers to the patient's negative views about:
(A) Self, world, and future
(B) Past, present, and future
(C) Family, work, and friends
(D) Body, mind, and spirit
17. A patient with specific phobia of dogs is taught progressive muscle relaxation, then asked to imagine a hierarchy of feared stimuli (e.g., picture of a dog → seeing a dog from afar → touching a dog) while remaining relaxed. This technique is called:
(A) Flooding
(B) Systematic desensitization
(C) Aversion therapy
(D) Token economy
18. Dialectical Behaviour Therapy (DBT), developed by Marsha Linehan for borderline personality disorder, organizes treatment around four skill modules. These are:
(A) Mindfulness, distress tolerance, emotion regulation, interpersonal effectiveness
(B) Relaxation, cognitive restructuring, exposure, behavioral activation
(C) Insight, transference, interpretation, working through
(D) Validation, support, education, advice
19. In Motivational Interviewing (MI), the acronym 'OARS' refers to four core communication skills:
(A) Observe, Assess, Reflect, Summarize
(B) Open-ended questions, Affirmations, Reflections, Summaries
(C) Orient, Ask, Respond, Solve
(D) Outline, Advise, Recommend, Support
20. A 14-year-old boy with ADHD is given a 'token' (e.g., a sticker) for every completed homework assignment, which he can later exchange for a preferred privilege (e.g., 30 min extra gaming). This behavioral technique is:
(A) Negative reinforcement
(B) Token economy (a form of operant conditioning with positive reinforcement)
(C) Classical conditioning
(D) Response cost

- 21.** A 45-year-old man is referred 6 weeks after a myocardial infarction with low mood, avoidance of physical activity due to fear of another heart attack, and reduced adherence to medication. The most appropriate C-L psychology formulation should include:
- (A) Diagnosis of major depressive disorder alone
 - (B) Assessment of illness representations, fear-avoidance beliefs, cardiac invalidism, and adherence barriers with collaborative care plan
 - (C) Recommendation of long-term benzodiazepine only
 - (D) Discharge — reassurance that this is normal
- 22.** A 58-year-old man with advanced pancreatic cancer is referred to the clinical psychologist. He reports persistent wish to die, hopelessness, and feeling like a burden. The most appropriate intervention framework is:
- (A) Dignity therapy and meaning-centered therapy (palliative care psychology)
 - (B) Insight-oriented psychoanalysis
 - (C) Forced cognitive remediation
 - (D) Avoid discussion of death
- 23.** A 38-year-old woman with BMI 42 and Type 2 diabetes is undergoing pre-bariatric-surgery psychological evaluation. The PRIMARY purpose of this evaluation is to:
- (A) Determine IQ
 - (B) Assess for untreated psychiatric disorders, eating pathology, expectations, social support, and post-op adherence capacity
 - (C) Screen for schizophrenia only
 - (D) Confirm surgical technique
- 24.** A 60-year-old man on antihypertensive medications misses ~40% of doses per week. The clinical psychologist's intervention to improve adherence should PRIMARILY focus on:
- (A) Discontinuing all medications
 - (B) Identifying and addressing barriers, psychoeducation, and behavioural reminders
 - (C) Hospitalizing the patient
 - (D) Switching to alternative medicine only
- 25.** An ICU patient develops new-onset agitation, hallucinations, and disorientation 36 hours after admission. The clinical psychologist is consulted to differentiate this from primary psychiatric disorder. The most likely diagnosis is:
- (A) Schizophrenia
 - (B) Brief psychotic disorder
 - (C) ICU delirium — an acute confusional state due to medical etiology
 - (D) Factitious disorder

- 26.** A 7-year-old boy's teacher reports he frequently leaves his seat, fidgets, talks excessively, and has difficulty waiting his turn. Symptoms are present in both school and home settings for over 6 months, impairing academic functioning. The most likely diagnosis (DSM-5-TR) is:
- (A) ADHD, combined presentation
 - (B) Oppositional Defiant Disorder
 - (C) Autism Spectrum Disorder
 - (D) Specific Learning Disorder
- 27.** A 3-year-old child shows no joint attention, no spoken words, repeats scripted phrases from cartoons, and lines up toy cars. The recommended first-line screening tool for autism spectrum disorder at the primary-care level in toddlers is:
- (A) M-CHAT-R
 - (B) Conners' Rating Scale
 - (C) Y-BOCS
 - (D) Beck Youth Inventories
- 28.** A 10-year-old boy with IQ 50, significant deficits in adaptive functioning (communication, self-care, academic), and onset during the developmental period meets criteria (DSM-5-TR / ICD-11) for:
- (A) Borderline intellectual functioning
 - (B) Mild intellectual disability
 - (C) Specific learning disorder
 - (D) Autism spectrum disorder without intellectual disability
- 29.** The Vineland Social Maturity Scale (VSMS), an Indian adaptation by Dr. A.J. Malin, is primarily used to assess:
- (A) Intelligence quotient (IQ)
 - (B) Adaptive behavior / social maturity
 - (C) Personality traits
 - (D) Severity of autism
- 30.** Parent Management Training (PMT), an evidence-based intervention for children with disruptive behaviour disorders, is grounded primarily in which theoretical approach?
- (A) Operant conditioning principles (reinforcement, extinction, token economies)
 - (B) Psychoanalysis
 - (C) Gestalt therapy
 - (D) Existential therapy
- 31.** The Stanley-Brown Safety Plan, a widely used brief intervention in suicide prevention, includes which of the following key components?
- (A) Warning signs, internal coping strategies, social contacts/settings for distraction, family/friends for help, professionals/agencies to contact, making the environment safe
 - (B) Identifying childhood trauma
 - (C) Forced hospitalization order
 - (D) Narcotics anonymous referral

- 32.** According to Roberts' Seven-Stage Crisis Intervention Model, the FIRST stage of crisis intervention is:
- (A) Identifying the major problems / issues (Stage 3)
 - (B) Plan and conduct a thorough assessment including lethality, danger, and safety (Stage 1)
 - (C) Developing and formulating an action plan (Stage 6)
 - (D) Building rapport and psychological contact (Stage 2)
- 33.** Psychological First Aid (PFA), as recommended by WHO and used after disasters, is BEST described as:
- (A) A clinical debriefing that requires detailed trauma narration
 - (B) A humane, supportive response to a fellow human being who is suffering and may need support – emphasising safety, calm, connectedness, and self-efficacy
 - (C) Crisis medication administration
 - (D) Mandatory psychiatric hospitalization
- 34.** The Kübler-Ross model describes five stages of grief. The CORRECT sequence is:
- (A) Denial → Anger → Bargaining → Depression → Acceptance
 - (B) Shock → Anger → Acceptance
 - (C) Denial → Depression → Bargaining → Anger → Hope
 - (D) Guilt → Anger → Acceptance → Closure
- 35.** A trauma-informed care approach in clinical settings is built on which core principles?
- (A) Safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment and choice, and attention to cultural/historical/gender issues
 - (B) Strict behavioral control, seclusion, and restraint
 - (C) Avoiding any discussion of trauma
 - (D) Mandatory reporting to police in all cases
- 36.** The AUDIT (Alcohol Use Disorders Identification Test), developed by WHO, consists of how many items, with a cutoff score of ≥ 8 generally indicating hazardous or harmful alcohol use?
- (A) 10 items, cutoff ≥ 8
 - (B) 4 items (CAGE), cutoff ≥ 2
 - (C) 20 items, cutoff ≥ 16
 - (D) 28 items, cutoff ≥ 12
- 37.** The CAGE questionnaire for alcohol use disorder consists of four items. The 'G' in CAGE stands for:
- (A) Got into fights when drinking
 - (B) Felt Guilty about drinking
 - (C) Got angry when criticized about drinking
 - (D) Gave up activities due to drinking

- 38.** Motivational Enhancement Therapy (MET) is grounded in the Stages of Change model (Prochaska & DiClemente). The five stages, in order, are:
- (A) Pre-contemplation → Contemplation → Preparation → Action → Maintenance
 - (B) Denial → Anger → Bargaining → Depression → Acceptance
 - (C) Engagement → Assessment → Planning → Action → Termination
 - (D) Identification → Processing → Insight → Action → Relapse
- 39.** In Marlatt and Gordon's Relapse Prevention model, a 'high-risk situation' for relapse is BEST defined as:
- (A) Any circumstance that increases the likelihood of substance use
 - (B) Any contact with a healthcare provider
 - (C) Attendance at AA meetings
 - (D) Permanent unemployment
- 40.** The ASSIST (Alcohol, Smoking and Substance Involvement Screening Test), developed by WHO, screens for involvement with:
- (A) Alcohol only
 - (B) Tobacco, alcohol, and illicit drugs
 - (C) Caffeine only
 - (D) Prescription antibiotics only
- 41.** A 35-year-old smoker wants to quit. The '5 As' model for brief tobacco intervention in primary care stands for:
- (A) Ask, Advise, Assess, Assist, Arrange
 - (B) Acknowledge, Analyze, Act, Avoid, Achieve
 - (C) Assess, Anticipate, Apply, Adjust, Audit
 - (D) Aware, Advise, Assist, Anticipate, Achieve
- 42.** The Mini-Mental State Examination (MMSE) has a maximum score of 30. The conventional cutoff suggestive of cognitive impairment is:
- (A) < 30
 - (B) < 24 (often 23/24)
 - (C) < 18
 - (D) < 12
- 43.** The Montreal Cognitive Assessment (MoCA), maximum score 30, was specifically designed to detect:
- (A) Schizophrenia
 - (B) Mild Cognitive Impairment
 - (C) Major depressive disorder
 - (D) Bipolar I disorder

- 44.** A 70-year-old presents with progressive memory decline for 2 years, difficulty with name-finding, and impaired activities of daily living. CT shows cortical atrophy and hippocampal volume loss. The most likely diagnosis is:
- (A) Vascular dementia
 - (B) Alzheimer's disease
 - (C) Frontotemporal dementia
 - (D) Lewy body dementia
- 45.** The Glasgow Coma Scale (GCS) is used to assess level of consciousness after head injury. The maximum score (fully awake and responsive) is:
- (A) 10
 - (B) 12
 - (C) 15
 - (D) 20
- 46.** A 55-year-old with stroke and executive function deficits is taught to use external aids (e.g., alarms, calendars, checklists) and to break tasks into smaller steps to compensate for memory/planning deficits. This approach is called:
- (A) Restorative cognitive retraining only
 - (B) Compensatory strategy training
 - (C) Pharmacological treatment alone
 - (D) Psychoanalysis
- 47.** The Rehabilitation Council of India (RCI) Act establishes RCI as the statutory body responsible for:
- (A) Regulating clinical psychologists, rehabilitation professionals, and special educators
 - (B) Issuing medical licenses to MBBS doctors
 - (C) Approving new pharmaceutical drugs
 - (D) Conducting Civil Services examinations
- 48.** A 14-year-old girl discloses to a clinical psychologist that she has been sexually abused by a relative. Under Section 19 of the POCSO Act 2012 (Protection of Children from Sexual Offences), the psychologist is:
- (A) Permitted to maintain confidentiality at the family's request
 - (B) Mandatorily required to report the matter to the police / Special Juvenile Police Unit
 - (C) Required to wait for the abuse to recur before reporting
 - (D) Required to obtain written consent of the abuser before reporting

49. In the Tarasoff doctrine (from the landmark California case), a mental health professional who reasonably believes a client poses a serious risk of harm to an identifiable victim has a duty to:
- (A) Maintain absolute confidentiality
 - (B) Protect / warn the intended victim — confidentiality is breached in this specific circumstance
 - (C) Discharge the client without action
 - (D) Refer the client only to a religious healer
50. Under the Rights of Persons with Disabilities (RPwD) Act 2016 (India), the minimum percentage of disability certification required to avail benefits and reservations for persons with disabilities is:
- (A) 20%
 - (B) 40%
 - (C) 60%
 - (D) 80%

ROUGH WORK