

ETAPA 1 – Prova de conhecimentos em saúde coletiva e conhecimentos específicos

PROGRAMA DE RESIDÊNCIA MULITPROFISSIONAL EM SAÚDE

ENFERMAGEM

GABARITO

1	A	B	C	D	<input checked="" type="checkbox"/>
2	A	<input checked="" type="checkbox"/>	C	D	E
3	A	B	<input checked="" type="checkbox"/>	D	E
4	<input checked="" type="checkbox"/>	B	C	D	E
5	A	B	C	D	<input checked="" type="checkbox"/>
6	A	B	C	<input checked="" type="checkbox"/>	E
7	<input checked="" type="checkbox"/>	B	C	D	E
8	A	<input checked="" type="checkbox"/>	C	D	E
9	A	<input checked="" type="checkbox"/>	C	D	E
10	<input checked="" type="checkbox"/>	B	C	D	E
11	A	B	C	D	<input checked="" type="checkbox"/>
12	A	B	C	<input checked="" type="checkbox"/>	E
13	A	B	C	D	<input checked="" type="checkbox"/>
14	<input checked="" type="checkbox"/>	B	C	D	E
15	A	<input checked="" type="checkbox"/>	C	D	E
16	<input checked="" type="checkbox"/>	B	C	D	E
17	A	B	<input checked="" type="checkbox"/>	D	E
18	<input checked="" type="checkbox"/>	B	C	D	E
19	<input checked="" type="checkbox"/>	B	C	D	E
20	<input checked="" type="checkbox"/>	B	C	D	E
21	A	<input checked="" type="checkbox"/>	C	D	E
22	<input checked="" type="checkbox"/>	B	C	D	E
23	A	<input checked="" type="checkbox"/>	C	D	E
24	A	B	<input checked="" type="checkbox"/>	D	E
25	A	B	C	D	<input checked="" type="checkbox"/>

26	<input checked="" type="checkbox"/>	B	C	D	E
27	A	B	C	<input checked="" type="checkbox"/>	E
28	A	<input checked="" type="checkbox"/>	C	D	E
29	A	B	<input checked="" type="checkbox"/>	D	E
30	A	B	<input checked="" type="checkbox"/>	D	E
31	A	B	<input checked="" type="checkbox"/>	D	E
32	A	B	<input checked="" type="checkbox"/>	D	E
33	A	B	<input checked="" type="checkbox"/>	D	E
34	A	B	C	<input checked="" type="checkbox"/>	E
35	<input checked="" type="checkbox"/>	B	C	D	E
36	A	B	<input checked="" type="checkbox"/>	D	E
37	A	B	<input checked="" type="checkbox"/>	D	E
38	A	B	C	D	<input checked="" type="checkbox"/>
39	A	B	C	<input checked="" type="checkbox"/>	E
40	A	B	<input checked="" type="checkbox"/>	D	E
41	A	<input checked="" type="checkbox"/>	C	D	E
42	<input checked="" type="checkbox"/>	B	C	D	E
43	<input checked="" type="checkbox"/>	B	C	D	E
44	A	<input checked="" type="checkbox"/>	C	D	E
45	A	B	<input checked="" type="checkbox"/>	D	E
46	ANULADA				
47	<input checked="" type="checkbox"/>	B	C	D	E
48	A	<input checked="" type="checkbox"/>	C	D	E
49	<input checked="" type="checkbox"/>	B	C	D	E
50	A	B	C	D	<input checked="" type="checkbox"/>

01 DE DEZEMBRO DE 2017