

## **BCK-10604**

## Fourth Year B. Physiotherapy Examination January – 2016

## Physiotherapy and Rehabilitation Therapy

Time: 2 Hours] [Total Marks: 50

## **Instructions:**

- (1) Write neatly and specific answers to the question asked.
- (2) Draw diagram wherever necessary.
- 1 Long essays: (any two)

20

- (A) Write an essay about architectural barriers and their modifications for a wheelchair dependent patient at home environment.
- (B) Describe the rehabilitation of a 21 year old male with bilateral transfemoral amputation.
- (C) Describe the gait analysis and deviations following A.K.prostheses.
- 2 Short notes: (any two)

10

- (A) Discuss about the rehabilitation team members and their role in short.
- (B) Write in detail about knee ankle foot orthosis.
- (C) Describe the features of ideal amputation stump.
- 3 Write in short : (any five)

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- (A) Sunderlands classification of nerve injury
- (B) Phantom limb sensation
- (C) Define impairement and disability.
- (D) Various levels of amputation in the upper limb.
- (E) Features of CTEV Boot.
- (F) Static versus Dynamic orthoses.

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- (1) All of the following are recognized gait deviations resulting from disease, except
  - (A) tabetic

(B) festinating

(C) wadding

- (D) strutting
- (2) All of the following are examples of anthropometric measurements except
  - (A) Height

(B) Weight

(C) Pain

- (D) Waist circumference
- (3) A patient with a transfemoral amputation walks with the prosthetic leg abducted during the stance phase. The patient does not have hip abductor tightness and the residual limb fits into the socket correctly, the FIRST action the physical therapist should take is to:
  - (A) check the length of the prosthesis
  - (B) initiate strengthening the hip adductors
  - (C) instruct the patient to walk with shorter steps
  - (D) refer the patient to the prosthetics.
- (4) A home visit is performed for a patient who is four weeks status post total hip replacement, the patient is presently partial weight bearing on the affected side. The minimum recommendations for this patient to increase safety in the bathroom are?
  - (A) tub bench, hand held shower
  - (B) grab bars in the shower and next to the toilet
  - (C) hand rails for the toilet, tub bench, hand held shower
  - (D) the patient should not shower until their weightbearing status increases.
- (5) You are performing a weight assessment on a patient using a patellar tendon bearing prosthesis, and you observe excessive knee flexion in early stance of the involved side, the most likely reason for this is:
  - (A) the socket is aligned too far posteriorly
  - (B) the socket is likely too far forward or tilted anteriorly
  - (C) the foot component is outset too much
  - (D) the foot component is inset too much

(6)	You are performing gait assessment on patient using a below knee prosthesis who demonstrates an uneven heel rise on the prosthetic side; what is the most likely cause of this?
	(A) The hip extensors are week
	(B) Insufficient knee friction
	(C) The prosthesis is externally rotated.
	(D) The prosthesis is not providing sufficient support
(7)	You are evaluating a patient in the intensive care unit the patient demonstrates no eye opening, and verbal response and no motor response, using the Glaggow Coma Scale (GCS) how would you score the patient?  (A) 0 (B) 3
	(C) 5 (D) 7
(8)	Which of the following is the normal end-feel perceived by an examiner assessing elbow flexion?  (A) Tissue stretch  (B) Empty  (C) Soft tissue approximation  (D) Capsular
(9)	Which of the following is suitable for scoliosis?
	(A) Taylor brace (B) Milwaukee brace
	(C) ASH brace (D) None of the above
(10)	You have been consulted about a child in the elementary school system who has moderate extensor spasticity and limited head control. The most appropriate positioning device would be a :
	(A) supine stander
	(B) wheelchair with a back wedge and head supports
	(C) HKAFOs
	(D) prone stander