

MM-10602

Seat No.

Fourth Year B. Physiotherapy Examination July - 2016

P.T. in Cardiopulmonary Conditions

(Old Course)

Time: 3 Hours [Total Marks: 100]

Instructions: (1) Answer should be specific to the questions.

- (2) Draw diagrams wherever it is necessary.
- (3) Compulsory to attend section I & II.

SECTION - I

1 Long Essay: (any two)

 $10 \times 2 = 20$

- a) Explain in detail about cardiopulmonary resuscitation techniques and its therapeutic mechanism.
- b) Describe in detail about invasive and non-invasive diagnostic procedures in cardiopulmonary diseases.
- c) Plan out cardiac fitness program for the patient who undergone median sternotomy.
- 2 Short Essay: (any two)

 $5 \times 2 = 10$

- a) Types of ventilators.
- b) Heart sounds and cardiac murmurs.
- c) Mechanism of conduction of impulses in the heart.
- 3 Short answer: (any five)

 $2 \times 5 = 10$

- a) Atrial fibrillation.
- b) Ambu-bag.
- c) Contraindications for exercise testing.
- d) Coaractation of aorta.
- e) Dextrocardia and situs inversus.
- f) The disease comes under Type 2 respiratory failure.
- 4 Multiple choice questions:

 $1 \times 10 = 10$

- 1. CPAP is defined as
 - a) Continuous pulse augmentation pressure
 - b) Continuous positive airway pressure
 - c) Continuous positive airway point
 - d) All of the above

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2.	Non invasive ventilatory method is define as		
	tracheostomy b) ventilation with an endotracheal tube c) ventilation with tracheostomy d) b) and c)		
3.	Peripheral oedema in the respiratory patient suggests right heart failure which may be due to a) Cardiac disease b) Cor pulmonale c) Pleural effusion d) Pleurisy		
4.	Tachycardia is defined as a heart rate greater than a) 120 beats/min at rest b) 100 beats/min at rest c) 80 beats per min at rest d) 60 beats per min at rest		
5.	Angle of Louis corresponds to a) T4-T5 spine b) T2-T3 spine c) T11-T12 spine d) T6-T7 spine		
6.	What is mean by myocardial infarction? a) Heart failure b) Cardiac arrest c) Heart attack d) All of the above		
7.	Dizziness, weakness, arm pain, pressure in the chest Heart palpitations, shortness of breath, weakness No symptoms at all all of the above		
8.	at is the following statement is true about thromboolism and atrial fibrillation? Stroke in atrial fibrillation are usually more serious than strokes from other causes. The prevalence of stroke and atrial fibrillation is not age dependent. The risk of thromboembolism in non-vascular and atrial fibrillation is different depending on the whether it is paroxysmal, persistent or permanent. All of the above		
9.	The outermost layer of the heart's serous pericardium is termed the a) visceral pericardium b) parietal pericardium c) epicardium d) myocardium		
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10. If the heart's natural pacemaker fails to fire, then no blood would enter the atria and ventricle. a) b) the person would die within minutes. the node on the floor of the right atrium would act c) as a secondary pacemaker. the node on the floor of the left ventricle would d) act as a secondary pacemaker. SECTION - II Write any two: $10 \times 2 = 20$ Discuss in detail a. bronchial hygiene in respiratory disease. b. Discuss on postoperative physiotherapy management in lobectomy. Causes, clinical features and physiotherapy management c. of pulmonary Tuberculosis. $5 \times 2 = 10$ Write short essay on any two: Anatomy and physiology of Bronchial tree. a. Types, mechanism and uses of nebulizers. b. c. Describe chest X-ray interpretations on five respiratory diseases. Write in short on any five: $5 \times 2 = 10$ Flutter device a. Chest drainage b. Glasophreangeal breathing c. d. Incentive spirometry MMT grade for diaphragm muscle e. f. Adult distress respiratory syndrome. Write all questions: $10 \times 1 = 10$ Respiratory acidosis is find in below given disease. a) Pneumonia Foreign body aspiration b) Any vascular anamolies c) All of the above **d**) Find out given which one is not the pleural disease. 2. pneumothorax b) pyothorax a) bronchial asthma heamothorax d) c)

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3.	Tidal volume is defined as				
	•	that can be exhaled after			
	a normal exhalation b) Amount of air inhal ventilation		e exhaled during resting		
	c) Maximum volume inhd) All of the above	naled	after a normal inspiration		
4.	The normal rate of FEV1 FVC X100) is	/FVC	% (FEV1 divided by the		
	a) 50-75%c) 75-100%	b) d)	75-85% 25-50%		
5.	'Hoover's sign' is find in a) Hyperinflated patient b) Hypoinflated patient c) During suctioning d) All of the above	its			
6.	6. What happens to FEV1/FEV ratio in a restrictive ludisease?				
	a) Decrease	b)			
	c) No change	d)			
7.	ly used test for exercise e Except -				
	a) 6 minutes walk test				
	c) a) and b)	d)	agility test		
8.	Sinus bradycardia is a sinus rhythm				
	a) Above 60 beats/minc) a) and b)	b) d)	Below 60 beats/min None		
9.					
	a) alanine aminotransferase				
	b) aspartate aminotransferase				
	c) Gamma glutamyl trd) creatine kinase	anste	rase		
10.	In restrictive lung disease[e.g. pulmonary fibrosis] In obstructive lung disease[e.g. Asthma or COPD],				
	a) RV is increased, TLC is decreased				
	b) RV is decreased, TIc) TLC is decreased, F				
	d) TLC is decreased, F				