

RE-10602

Seat No. _____

Fourth Year Bachelor in Physiotherapy Examination February - 2019

Physiotherapy in Cardio-Pulmonary

Time: 3 Hours] [Total Marks: 100

Instructions: (1) The answers should be specific to the questions asked.

- (2) Draw neat labeled diagrams wherever necessary.
- (3) Answer all the questions.

SECTION - A

1 Long Essay: (Any Two)

 $10 \times 2 = 20$

- (A) Discuss the Role of Physiotherapist in Intensive Care Unit.
- (B) Write in detail Physiotherapy management of COPD
- (C) Write in detail about Cardiac Rehabilitation.
- 2 Short Essay : (Any Two)

 $2 \times 5 = 10$

- (A) Flutter device
- (B) Autogenic drainage
- (C) Contraindications of postural drainage
- 3 Write In Short: (Any Five)

 $5 \times 2 = 10$

- (A) Cyanosis
- (B) NYHA Scale
- (C) Mode of ventilator
- (D) Breath sounds.
- (E) Thoracic incision
- (F) ECG change in MI
- 4 Write all Questions:

 $10 \times 1 = 10$

- (1) Which one of the following is the "silent killer" because it usually has no symptoms?
 - (A) Hemophilia
- (B) Stroke

(C) High BP

(D) High cholesterol

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(2)	•	is atherosclerosis is da	anger	cous when found in
		nary arteries		
	` ′	It can cause heart atta		•
		It can lead to coronary		•
	(C)	It can restrict blood flo	w to	heart muscle
	` /	All of the above		
(3)		nal cardiac cycle ranges	are	
	(A)	0.08 sec	(B)	0.008 sec
	(C)	0.80 sec	(D)	$08.00 \sec$
(4)	Fing	er Clubbing is a typical	find	ling in
	(A)	Chronic bronchitis	(B)	VSD
	(C)	Bronchiectasis	(D)	All of above
(5)	In F	Restrictive lung disease		
	(A)	Increase TLC	(B)	Increase TV
	(C)	Decrease FEV 1/FVC	(D)	Increase FEV 1/FVC
(6)	The	chest wall with depresse	ed ste	ernum is referred to
	(A)	Pectus excavatum	(B)	Pectus carinatum
	(C)	Harrison sulcus	(D)	None of above
(7)	Hyp	erinflation of lungs in C	OPD	is characterized by
	(A)	Narrowing of rib cage		
	(B)	Flattening of diaphragm	1	
	(C)	Blunting of Costophreni	c an	gles
	(D)	Shifting of trachea to o	ne s	ide
(8)	The	potential outcome of pu	\mathbf{rsed}	lip breathing is
	(A)	An increase in arterial	CO2	
	(B)	An increase in arterial	O2	
	(C)	An increase in RR		
	(D)	An increase in minute	venti	ilation
(9)	The	Primary muscle of resp	iratio	on is the
	(A)	Intercostals	(B)	Latissimusdorsi
	(C)	Diaphragm	(D)	Abdominal Muscle
(10)	Inte	rmittent claudication in 1	lower	extremities suggest
	(A)	Still's	(B)	Raynauds disease
	(C)	Buerger's disease	(D)	Pott's disease
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SECTION - B

5	Lon	g Essay : (Any Two)	$10\times2=20$					
	(1)	Vrite the post operative assessment and management f Cardiac surgery.						
	(2)							
	(3)	Discuss post operative assessr Lobectomy.	nent	t and management of				
6	Sho	rt Essay : (Any Two)	t Essay : (Any Two)					
	(A)	Sternotomy						
	(B)	Diaphragmatic breathing						
	(C)	Muscles of respiration						
7	Write In Short : (Any Five) 5×2=							
	(A)	Force expiratory technique						
	(B)	Incentive Spirometer						
	(C)	Crackles sound						
	(D)	Contraindication for PD						
	(E)	Pulse oximetry						
	(F)	ABGAR score						
8	Write All Questions:							
	(1)	The lung compliance increase						
		` '	(B)	Emphysema				
	(9)		` ′	All of above				
	(2)	(2) Identify the position in which the arterial O2 increases in bilateral lung disease						
			(B)	Lateral				
		` '	` ′	Semi Reclined				
	(3)	Mediastinal shift to the contra	` ′					
		with						
		(A) Atelectasis						
		(B) Pleural effusion						
		(C) Lobectomy						
(D) Neoplastic Lung disease								
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(4)	The maximum volume of gas that can be expelled from						
	lungs after a maximal inspiration is termed as						
	(A) TLC						
	(B) VC						
	(C) Expiratory residual capacity						
	(D) Tidal volume						
(5)	In ECG Atrial depolarization is indicated by						
	(A) P wave (B) QRS complex						
	(C) Q wave (D) ST segment						
(6)	In mechanical ventilation, the following is known as the weaning mode						
	(A) Assist control						
	(B) SIMV						
	(C) CPAP						
	(D) Controlled mandatory ventilation						
(7)	The Third heart sound coincides with the period of						
	(A) Rapid ventricular filling						
	Isovolumatric contraction						
	Mid ventricular systole						
	(D) Minimal Rejection						
(8)	diac index is						
	(A) Cardiac -output/body surface area						
	Body surface area/cardiac output						
	Cardiac output × body surface area						
	(D) None of the above						
(9)	upational asthma due to the fumes of						
	(A) Cadmium (B) Chlorine						
	(C) Ammonia (D) All the above						
(10)	The purpose of inspiratory hold in incentive spirometer						
	is to						
	(A) Prevent early closure of alveoli						
	(B) Increase intrathoracic pressure						
	(C) Increase FRC						
	(D) Increase collateral ventilation						