



J-10604

Seat No. _____

Fourth Year B. Physiotherapy Examination

July - 2019

Physiotherapy & Rehabilitation Therapy

Time : 2 Hours]

[Total Marks : 50

Instructions :

- (1) The answer should be specific to the questions asked.
- (2) Draw neat labelled diagram wherever necessary.
- (3) Answer all the questions.

1 Long essay (answer any two) 2×10=20

- (1) Explain in details about role of physiotherapy in disaster management.
- (2) Describe the details about architectural barriers.
- (3) Explain in details about various orthosis used in cerebral palsy child.

2 Write in short (answer any two) 2×5=10

- (1) Vocational counsellor
- (2) Types of prosthesis
- (3) Taylor brace

3 Write in short (answer any five) 5×2=10

- (1) Aeroplane splint
- (2) SACH foot
- (3) Knuckle bender splint
- (4) Air splints
- (5) SOMI brace
- (6) Symes amputation.

4 Multiple choice questions

10×1=10

- (1) A physiotherapist develops a plan of care for a patient status post unilateral transtibial amputation that has been approved for inpatient rehabilitation. Assuming an uncomplicated recovery. What is the most appropriate amount of time for prosthetic training ?
 - (A) 1-2 days
 - (B) 1-2 weeks
 - (C) 4-6 weeks
 - (D) 6-8 weeks
- (2) A physiotherapist consults with an orthotist regarding the need for an ankle foot orthosis for a patient status post CVA. The patient has difficulty moving from sitting to standing when wearing a prefabricated plastic ankle foot orthosis(AFO). The therapist indicates the patient has poor strength at the ankle, intact sensation, and does not have any edema or tonal influence. The most appropriate type of AFO for the patient would incorporate
 - (A) An articulation at the ankle joint
 - (B) Tone reducing features
 - (C) Metal uprights
 - (D) Dorsiflexion assist
- (3) Which plastic is commonly used in prefabricated AFOs ?
 - (A) polypropylene
 - (B) polyethelene
 - (C) transpolyisoprene
 - (D) polycapriolactone
- (4) A patient with transtibial amputation is observed ambulating with excessive knee flexion from heel strike through midstance on the prosthetic side. A possible cause for this deviation
 - (A) The foot is set in neutral
 - (B) The socket is set posterior in relation to foot
 - (C) The prosthesis is too short .
 - (D) The socket is aligned in excessive flexion
- (5) You are seeing a patient with an uncompensated forefoot varus. Of the following, which would be appropriate?
 - (A) Soft; medial post
 - (B) Soft; lateral post
 - (C) Rigid; medial post
 - (D) Right; lateral post

- (6) A physical therapist educates a patient status post transfemoral amputation on the importance of frequent skin checks. The most appropriate resource for the patient to utilize when inspecting the posterior aspect of the residual limb is
- (A) Hand mirror
 - (B) Video camera
 - (C) Nurse
 - (D) Prosthetist
- (7) If your patient is a candidate for an orthosis and your goals are both motion control & shock absorption, which would you choose?
- (A) Rigid
 - (B) Semi rigid
 - (C) Soft
 - (D) None of the above
- (8) This term describes motion relative to the force that produced it
- (A) Kinetics
 - (B) Kinematics
 - (C) Viscosity
 - (D) Vector
- (9) Contraindication for splinting
- (A) Compartment syndrome
 - (B) Arthritis
 - (C) Deformity
 - (D) All of the above
- (10) Figure of eight brace useful for
- (A) Colle's fracture
 - (B) Clavicle fracture
 - (C) Fracture neck of femur
 - (D) None of the above