Third BPTH (Revised), Winter 2015
Physical Diagnosis and Manipulative Skills

Total Duration: Section A + B = 3 Hours
Total Marks: 80

Section - A & Section - B

Instructions:

1) Use blue/black ball point pen only.
2) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.
3) All questions are compulsory.
4) The number to the right indicates full marks.
5) Draw diagrams wherever necessary.
6) Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper’s syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As it is only for the placement sake, the distribution has been done.
7) Use a common answer book for all sections.

Section "A" SAQ (50 Marks)

1. Short answer question (any five out of six) :
   a) F- wave.
   b) Quadriceps lag.
   c) Three ECG changes in left ventricular wall myocardial infarction.
   d) Babinski reflex.
   e) Modified Ashworth Scale.
   f) Breath holding test.
   (5x3=15)

2. Short answer question (any five out of six) :
   a) Trigger points.
   b) Importance of pain tolerance and pain threshold testing in physiotherapy assessment.
   c) Neurophysiological and mechanical effects of joint mobilisation.
   d) Principles of Rood’s approach with a note on any one technique.
   e) Assessment of pain.
   f) Write a note on diabetic foot.
   (5x7=35)
Section "B" LAQ (30 Marks)

3. Long answer question (any one out of two):

a) A 60 year old housewife came with the chief complaint of excruciating pain, stiffness 
and deformity around the right wrist joint and hand after fall on the outstretched hand 
1 month back. Her wrist joint was immobilized in plaster cast for 1 month. She 
complained of pain in right forearm during the period of immobilization. Presently the 
hand is swollen, reddened with stiffness of fingers as well as shoulder. i) Write down 
differential diagnosis. ii) Write detailed assessment. iii) Write down functional 
diagnosis along with ICF.

b) A 19 year old male cricketer came with chief complaint of morning stiffness, and 
severe pain around low back. He gives history of similar previous episodes 4 month 
back but of less intense variety. The symptoms are associated with generalized 
fatigue. This episode was treated by family physician and there was temporary 
symptomatic relief after the treatment. He is now referred to physiotherapy 
department for further management. i) Write down detailed assessment using ICF. 
ii) Give differential diagnosis. iii) Functional diagnosis with clinical reasoning.

4. Long answer question (any one out of two):

a) A 65 year old retired clerk discharged from the hospital after 20 days of treatment for 
acute exacerbation of dyspnoea associated with thick productive sputum and 
occasional episodes of sleep apnoea. He is also suffering from general malaise and 
fatigue. Patient is socially active and likes to travel. Socioeconomic status is good. His 
BMI is 30. i) Write down detailed assessment with ICF. ii) Give differential diagnosis. 
iii) Functional diagnosis with clinical reasoning.

b) A 25 year old male football player suffered from brachial plexus injury 15 days back. 
He is complaining of partial weakness of muscles supplied by upper trunk of brachial 
plexus. i) Write down detailed assessment with ICF. ii) Functional diagnosis with 
clinical reasoning.