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 answerbook for all sections.

SECTION – “A” SAQ

(50 Marks)

1. Short answer question (any five out of six):
   a) Describe one test for instability at ankle.
   b) Describe Eighth Cranial nerve assessment.
   c) Define joint play along with an example.
   d) Enumerate the enzyme level changes following Myocardial Infarction.
   e) Describe any one test to assess coordination.
   f) What is Ankle Brachial Index ? State its importance.

(5x3=15)

2. Short answer question (any five out of six):
   a) With diagram, describe the grades of mobilisation as per Maitland technique and explain its contraindications.
   b) Describe Motor Unit Action Potential.

(5x7=35)

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c) What is dyspnoea? Enumerate its causes and its grades.

d) Describe open pack and close pack position of a joint. Describe capsular pattern of shoulder and wrist joints.

e) What are different electrodiagnostic tests? Describe any one in detail.

f) Short note on Cyriax soft tissue mobilisation.

SECTION – “B” LAQ (30 Marks)

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

a) A 70 year old widow, underwent partial hip replacement following fracture neck femur 2 days back. She is known hypertensive and stays with her son’s family in a flat on first floor in a chawl. Discuss the impairments, activity limitations, participation restrictions and contextual factors with proper clinical reasoning.

b) A 34 yr. old labourer comes with complaints of purulent expectoration since 8 days. He is known case of bronchiectasis since last 4 yrs and recurrent hospitalisation. He gives history of koch’s disease 6 yrs back. He is the sole earner with a family of 4 people. Discuss the impairments, activity limitations, participation restrictions and contextual factors with proper clinical reasoning.

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

a) A 67 yr old housewife, diagnosed as left sided Anterior cerebral artery infarct a month back has been referred for physiotherapy. She stays with her husband who is retired, on 2nd floor in a tower building and is known case of hypertension. Discuss the impairments, activity limitations, participation restrictions and contextual factors with proper clinical reasoning.

b) A 57 year old housewife, Seema comes with chief complaints of pain and restricted ranges, in right shoulder since a month. She is known diabetic patient since 10 yrs residing with her son’s family in a chawl. Presently her ADL and household duty is getting affected due to shoulder pain. Discuss the impairments, activity limitations, participation restrictions and contextual factors with proper clinical reasoning.