CA RDIOVASCHLAR RESPIRATORY PHYSIOTHERAPY
(rciudinc Critical Care)

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 answerbook for all Sections.

SECTION - A
(SAQ) (50 Marks)

1. Short answer question (any five out of six): (5x3=15)
   a) Ankle brachial index.
   b) Enlist risk factors for coronary artery disease.
   c) Write any 6 complications of suctioning.
   d) Humidification and its uses.
   e) Goals of management of Restrictive lung diseases.
   0 Effects of smoking on pulmonary function.

2. Short answer question (any five out of six): (5x7=35)
   a) Discuss common deformities of upper limb and lower limb seen in burns and the anti-deformity positioning strategies for the same.
   b) Physiotherapy management in Burger's disease.
   c) Describe modes of ventilator and discuss the role of physiotherapy management in ICU.
   d) Physiotherapy management following Below knee amputation.
   e) Discuss complications of Pulmonary Surgeries.
   0 Rationale of giving Active cycle of breathing technique in Bronchial Asthmatic patients.
SECTION — B
(LAO) (30 Marks)

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

   a) A 50 year old male, labourer by occupation, known case of COPD is admitted with acute exacerbation. He is a chronic smoker, stays with his wife and two children and is the only earning member of his family. His PFT shows moderate obstruction with good reversibility. Discuss ICF and Physiotherapy management in acute and chronic stages. (5+5+5=15)

   b) A 55 year old widow, works as a cook and stays on second floor with no lift facility. She is a known diabetic. She complains of dull aching pain in bilateral lower limb which increases with sustained standing and swelling which increases by the end of the day. She also presents with dilated veins in both her lower limbs. Discuss ICF, Physiotherapy management and preventive foot care for her condition. (5+7+3=15)

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

   a) A 60 year old male, working as a manager in a bank, has undergone CABG for triple vessel disease 3 days back. He is a chronic smoker, known hypertensive and his BMI is 30 kg/m². Discuss ICF, Phase 1 and Phase 2 Cardiac rehabilitation and suggest life style modifications for him. (5+7+3=15)

   b) A 45 year female patient, teacher by occupation, married with 2 kids underwent radical mastectomy 15 days back, has complains of mild oedema on the operated arm with shoulder joint restriction. Discuss the ICF and long term Physiotherapy management and prosthesis for her. (5+7+3=15)

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