

2015

PAPER : 4.2

NEUROPHYSIOTHERAPY

Full Marks: 100

Time: 3 Hours

The figures in the margin indicate full marks for the questions.

1. Answer any two of the following : 2×10=20
 - a) Describe in detail the medical and P.T. management of T4 spinal cord injury with bladder and bowel involvement.
 - b) Describe the developmental milestones for a normal baby in all possible fields in detail.
 - c) Describe perceptual disorders and its management.

2. Give short answer to any ten of the following : 10×5=50
 - (a) Sensory integration approach.
 - b) Types of spina bifida, and management of each type.
 - (c) Explain the rehabilitation protocol for motor involvement of a multiple sclerosis patient.
 - d) Explain possible complications and management for a patient with AVM (arterio venous malformation).
 - e) Kinetic and kinematic analysis of gait.
 - (f) NDT for a spastic deplegic CP patient aged 5 years.
 - g) Explain post polio residual paralysis (PPRP) and its rehabilitation protocol.
 - h) Axillary nerve palsy and its management.
 - (i) Constraint induced movement therapy.
 - j) Describe the physiotherapy treatment needed for improving gait and balance in Parkinson's disease patients.
 - k) Hydrotherapy pool exercises for L2 incomplete spinal cord injury patient.
 - l) Explain P.T. management for schizophrenic patients.

P.T.O.

3. Give very short answer to any time of the following:!
- a) Battle's sign - *max. DICL*
 - b) APGAR score - *2:5 10*
 - c) Deformity present in ulnar nerve palsy - *in ulna*
 - d) Define thoracic outlet syndrome - *immense disorder!*
 - e) Waddling gait - *weakness*
 - f) Write a note on risk babies.
 - g) Define Eaton Lambert syndrome

*a result of exhaustion
along the path of
posterior circulation*

4. Choose the correct answers from the clues given: 1x20=20

- a) Dopamine is synthesized by-
 - i) Globus Pallidus
 - ii) Substantia nigra
 - iii) Subthalamic nucleus
 - iv) Putamen
- b) Anterior cerebral artery lesion will result in-
 - i) Ipsilateral lower limb sensory loss.
 - ii) Ipsilateral upper limb sensory loss.
 - iii) Contralateral lower limb sensory loss.
 - iv) None
- c) Apraxia is a result of lesion in-
 - i) Frontal lobe.
 - ii) Parietal lobe.
 - iii) Occipital lobe.
 - iv) Internal capsule.
- d) Clonus is a sign of-
 - i) Lower motor neurone lesion
 - ii) Upper motor neurone lesion
 - iii) Peripheral nerve injury
 - iv) Na-K deficiency
- e) The differentiating feature of poly neuropathy from poliomyelitis is-
 - i) Muscle weakness
 - ii) Muscle atrophy
 - iii) No sensory involvement.
 - iv) Symmetrical muscle involvement.
- f) An uniform resistance at all points of range during relaxed passive movement is known as _____ spasticity.
 - i) Clasp knife
 - ii) Lead pipe
 - iii) Cog wheel
 - iv) All of the above.

(3)

- g) Transient ischemic attack usually defined if neurological deficit recovers within
 - i) 24 hours.
 - ii) 48 hours
 - iii) > 10 days
 - iv) > 1 month.
- The causes of primary brain damage is following except for-
 - i) Skull fracture
 - ii) Diffuse white matter lesion
 - iii) Contusion of grey matter
 - iv) Hemorrhage
- h) Uthoff's phenomenon is present in-
 - i) Parkinson's disease
 - ii) Multiple sclerosis
 - iii) ALS
 - iv) Polio
- j) Which of the following is not a brain stem reflex-
 - i) STNR
 - ii) ATNR
 - iii) Positive supporting reflex.
 - iv) Crossed extension
- k) Segmental demyelination is the predominant pathology-
 - i) Ischemic neuropathy.
 - ii) Nutritional neuropathy
 - iii) Lead poisoning
 - iv) GBS.
- l) Ape thumb deformity occurs due to involvement of-
 - i) Ulnar nerve
 - ii) Median nerve
 - iii) Radial nerve
 - iv) Axillary nerve.
- m) The features of autonomic dysreflexia are-
 - i) Tachycardia, hypertension, headache.
 - ii) Bradycardia, hypertension, headache.
 - iii) Pallor, tachycardia, headache.
 - iv) All of the above
- n) Fluctuation of muscle tone is found in-
 - i) Spastic CP
 - ii) Flaccid CP
 - iii) Athetoid CP
 - iv) All of above.

P.T.O.

(4)

- o) Blocked practice is ____
- i) Different tasks done one by one.
 - ii) Consistent practice of single task.
 - iii) Varying tasks one by one
 - iv) None
- p) Motor behaviour follows sensory stimuli is the assumption of ____ approach.
- i) Bobath
 - ii) Brunstorm
 - iii) Rood's
 - iv) PNF
- q) There are ____ stages of recovery according to Brunstorm approach-
- i) 4
 - ii) 5
 - iii) 6
 - iv) 7
- r) Key point of control described in ____ approach
- i) Brunstorm
 - ii) Bobath
 - iii) Rood's
 - iv) PNF
- s) For severe head injury the duration of coma is-
- i) > 3 hours
 - ii) > 6 hours
 - iii) > 12 hours
 - iv) > 24 hours
- t) Frenkel's exercise should be prescribed for-
- i) Cerebellar ataxia.
 - ii) Vestibular ataxia
 - iii) Sensory ataxia
 - iv) All of the above