Sardar Patel University

Ph.D Entrance Examination

Session 2014-15
PHYSIATH FRAPY.

SEC	TION I	PHYSI	OTH	IERAPY· (10 Marks)
1.		stations of cerebellar injury not includ		
	A)	Exaggerated tendon reflexes	B)	Dysarthria
	C)	Dysmetria	D)	Head tremor
2.	•	and balance maintained by which lobe	e of cer	ebellum:
	A)	Anterior	B)	Middle
	C)	Posterolateral	D)	All of the above
3.	Lemr	niscal sensory system transmits all exc	ept:	
	A)	Touch	B)	Temperature
	C)	Vibration	D)	Two point discrimination
4. •	Graci	lis and cuneate nuclei are located in		
	A)	Pons	B)	Midbrain
	C)	Medulla	D)	Spinal cord
5.	Giat a	and posture assessment is for:		
	A)	Identify structural deformity	B)	Identify gait deviation from normal
	C)	To find out the type of support	D)	All of the above
6.	The c	lominant hemisphere can be assessed t	oy:	
	A)	Handedness	B)	CT scan
	C)	Gait	D)	None of the above
7.	Ment	al functions are assessed by:		
	A)	Level of consciousness	B)	Orientation
	C)	Memory and IQ	D)	Emotional state
	E)	All of the above		
8.	Comr			
	A)	Receptive ability	B)	Expressive ability
	C)	Both	D)	None
9.	The c	hild should be carried:		
	A)	In hands	B)	In lap
	C)	In shoulders	D)	In back
10.	The 4	years boy who is having quadriceps p	ower C), hamstring 4, hip Ext. 4, flexor 3. He
is ind	licated fo	or:		
	A)	Osteotomy	B)	Tendon transfer from hamstring
	C)	Tendon lengthening	D)	Limb length procedure

SECTION II (40 Marks)

Q.1	Illiza	Illizarov is indicated to:					
	A) C)	Correct the flexion deformity Tendon transfer	B) D)	Lengthen the limb Arthrodesis			
Q.2		le arthrodesis is done in following exc	,	Antibodesis			
	A)	- Talocalcaneal	B)	Talonavicular			
	C)	Calcaneocuboid	D)	Tibiofibular			
Q.3	Tonic labyrinthine is elicited by positioning the baby:						
	A)	A) In supine more development of extensor pattern and in prone developing flexo pattern					
	B)	B) In supine the more development of flexor pattern and in prone the extensor pattern					
	C)	In supine less tone in flexors					
	D)	In side lying increases flexor tone					
Q.4	In the	e following which is not a normal pri	mitive re	flex:			
`	A)	Grasp reflex	B)	Moro reflex			
	C)	ATNR	D)	STNR			
	E)	Tonic labyrinthine	F)	D and E			
	G)	All of the above					
Q.5	The i	The restless child can be treated with:					
	A)	Baclofen	B)	Diazepam			
	C)	Antibiotics	D)	Yoga and meditation			
Q.6	Positive signs which are abnormal signs in cerebral palsy includes the following except						
	for:	-					
	A)	Persistance of primitive reflex	B)	Impaired postural tone			
	C)	Loss of intrinsic tone	D)	Writing reaction			
Q.7	The body weight is borne during standing by:						
	A)	Calcaneum	B)	Talus			
	C)	Forefoot	D)	Toes			
Q.8	The cause for elevated pelvis and anterior the standing is:						
	A)	Spinal extensor pattern	B)	-			
	C)	Excess work of hiking muscle	D)	All of the above			
Q.9	Hemiplegic patient will clear the ground by involved with:						
	A)	Push off	B)	Suspension of foot			
	C)	Assistance by normal side	D)	None			
	-	▼					

Q.10	Recovery of motor function will be within:						
	A)	3-6 months of onset	13)	I month of onset			
	C)	1 year of onset	1))				
Q.11	Cerebellar function is assessed by the following except for:						
	A)	Co-ordination	В)	Equilibrium			
	C)	Gait	D)	•			
Q.12	Gait should be assessed by:						
	A)	Step length	B)	Stride length			
	C)	Cadence	D)	-			
	E)	Time factor	F)	All of the above			
Q.13	-	After brain injury the following changes may occur except for:					
_	A)	Phylogenetic regression	B)	Abnormal tone and postural reflex			
	C)	Presence of primitive reflexes	D)	None			
Q.14	Motor evaluation includes:						
	A)	Muscle strength	B)	Muscle length			
	C)	Speed of movement	D)	Endurance of the muscle			
	E)	All of the above					
Q.15	In axonotmesis the recovery is:						
	A)	≈ 100%	B)	≈ 80%			
	C)	≈ 70%	D)	≈ 50%			
Q.16							
	A)	Open wounds	B)	Open fracture			
	C)	Fracture and dislocation	D)	All of the above			
Q.17	The o	common cause of neurotmesis is:					
	A)	Glass or knife cut	B)	Common fracture			
	C)	Crush injury	D)	All of the above			
Q.18	The diagnosis of peripheral nerve lesion is confirmed with:						
	A)	History	B)	Site of injury			
	C)	EMG	D)	Sensory changes			
	E)	Muscle power	F)	Attitude of segment			
	G)	None of the above	H)	All of the above			

Q.19	GBS will produce the following except:					
	A) Weakness of facial musclesB)C) , Weakness of ocular musclesD)		ness of mastigating muscles ness of upper backs and neck muscle:			
Q.20						
	A) Ataxic	B)	Stepping gait high			
	C) Athetoid dance	1))	Limping gait			
Q.21	Autonomic dysfunction is:					
	A) Very common	B)	Present in acute phase			
() DD	C) Permanent one	D)	Temporary one			
Q.22	In the GBS patients the progress is:					
	A) Poor	B)	Moderate			
	C) Good	D)	Slow but steady			
Q.23	The intelligence will be:					
	A) 70-85	B)	50			
	C) Normal	D)	30			
Q.24	The causes for constipation in myopathy is:					
	 A) Lack of ambulant 	B)	Bowel dysfunction			
	C) Lack water content					
Q.25	Bladder incontinence will be present in:					
	A) Early stage	B)	Ambulant stage			
	C) Wheelchair phase	D)	Bedridden phase			
	E) Ventilator dependent phase					
Q.26	Vomiting is common because of:					
	A) Peptic ulcer	В)	Compression of sup-mesenteric			
			vessels			
	C) Due to lumbar lordosis	Đ)	Immobility			
Q.27	Respiratory disorder like the following is common:					
	A) TB	B)	Ca			
	C) Pneumonia	D)	Bronchitis			
Q.28	The disability scale is named as:					
	A) VAS scale	B)	Berg scale			
	C) Yahr scale	D)	Glasgow Coma Scale			
Q.29	The following are used to relax except:					
	A) Yoga	B)	Slow rocking movement			
	C) Positioning	D)	Cryotherapy			

Q.30	Refai	xation is achieved by:				
	A)	Distal to proximal	B)	Proximal to distal		
	C)	Proximal relaxation	D)	Distal relaxation		
Q.31	Hypermetric movements may be more marked in:					
`	A)	Small fast aimed movement	B)	Postural adjustment		
	c)	Slow movement	Đ)	A and B		
Q.32	Tho	cause for kinetic tremor in parkinson	r'e ier			
Q.52	A)	•	B)	Delayed antagonist burst		
	C)	Disturbance in acceleration and do	,	• •		
	D)	All of the above	CCICION	relationship		
Q.33	,	cause for undershooting sign is:				
Q.55	THE	tause for undershooting sign is.				
	A)	Co-contraction of muscle B)		o control termination of movement		
,	C)	Muscle weakness D)	A and B			
Q.34	The c	lysmetria may present due to:				
	A)	Preceptuo-motor deficits	В)	Difficulty in judging velocity		
	C)	Predicting movement outcome	D)	All of the above		
Q.35	Multi	iple Sclerosis(MS) requires:	ŕ			
	A)	Short term management	B)	Long term management		
	C)	No physical therapy	D)	None		
O 36	,	itient must rest in side/prone lying to	,	7.0		
Q . 50	THE PO	ment must rest in state prome tyring to	, prevent			
	A)	Respiratory compliments	B)	Flexor contracture		
	C)	Orthopnoea	D)	None of the above		
Q.37 I	During	second stage of (MS)the patient wil	l be:			
	A)	In need of walking aid	B)	In need of walking chair		
	C)	Confined to bed	D)	Not have any change		
Q.38 T	_	atment of MS includes the following	,			
	• `		D)			
	A)	Management of spasticity	B)	Coordination exercise		
	C)	Respiratory therapy	D)	To maintain joint range		
	E)	Progressive resisted exercise				
Q.39 T		us medullary injury results in:				
	A)	Spastic paraplegia	B)	Paraparesis		
	C)	Flaccid paralysis	D)	No paralysis		
Q.40 T		lowing are immediate care to SCI:				
	A)	Maintenance of fluid	B)	Maintenance of vital signs		
	C)	Maintenance of electrolyte balance	. D)	All of the above		

SECTION III (5x5=25)

- 1. What is sub-maximal exercise testing. Explain with an example.
- 2. What is postural dysfunction. Explain the concept of Positional Release technique for treating neck pain.
- 3. P-CTSiB. Explain
- 4. Evidence based Physiotherapy. Explain with examples
- 5. Write in brief about malpractice and negligence.

SECTION IV (25 Marks)

Elaborate the importance of manual therapy in physiotherapy. Explain its application in the field of a) Musculoskeletal conditions b) Neurological conditions