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Fourth B.P.Th. (2012) Examination, Summer 2016 NEURO PHYSIOTHERAPY

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 SAO (50 Marks)

- 1. Short answer question (any five out of six) :
 - a) Define neuroplasticity.
 - b) Write any three technique of Rood's approach to manage spasticity.
 - c) What is sacral sparing ?
 - d) Write comparison between upper and lower motor neuron lesion.
 - e) Gower's sign.
 - f) Clinical assessment of facial nerve.

2. Short answer question (any five out of six) :

- a) Write Sunderland's classification of nerve injury and physiotherapy management for foot drop. (4+3)
- b) Describe techniques to train static and dynamic standing balance.
- c) Describe common gait abnormalities observed in Parkinson's Disease and write it's Physiotherapy management. (2+5)
- d) Describe Physiotherapy management of Hemiplegic shoulder.
- e) Describe Physiotherapy management of Cerebellar ataxia.
- f) Describe Physiotherapy management for Duchenne muscular dystrophy.

P.T.O.

(5x3=15)

(5x7=35)

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(1x15=15)

SECTION - B LAO (30 Marks)

- 3. Long answer question (any one out of two):
 - a) A 21 year old male suffered from traumatic cervical spinal cord injury. He had underwent surgery to stabilize fracture site. At present his bilateral muscle power -biceps are 5/5, wrist extensor are 5/5, triceps 4/5 and no active contraction below C7. Intact pinprick and light touch C2-T4, absent below T4. Intact anal sensation. Proprioception intact in bilateral upper extremity and absent below. His bowel and bladder are involved. Functionally he requires moderate assistance to roll. Write his neurological level of injury. What is the patients ASIA impairment classification ? Plan short term goals and long term goals. Write Physiotherapy management for him. (2+1+5+7)
 - b) A 7 year old male gives history of frequent falls and difficulty in getting up from floor, he has gained weight during the last 6 months and has hypertrophy of calf.
 Plan investigations. Plan short term goals and long term goals. Write Physiotherapy management for him. (3+5+7)
- 4. Long answer question (any one out of two):
 - a) A 36 year old male who is a dentist is recently diagnosed with Amyotrophic lateral sclerosis experiences difficulty in opening fist, weakness and wasting of small muscles of hand. Painless twitching of the muscles in his forearm and upper arm. He has hyperreflexia in both upper extremities, hyporeflexia in both lower extremities and positive Babinski reflex bilaterally. Write structural and functional impairment. Plan short term goals and long term goals. Write Physiotherapy management for him. (3+5+7)
 - b) A 50 year old female is a known case of diabetes since last 8 years. She complains of numbness in bilateral lower extremities and while walking she feels as if she is walking on cotton. She also complains of inability to have hold of her footwear (slippers) while walking. Symptoms are gradually progressing. Plan investigations. Plan short term goals and long term goals. Write Physiotherapy management for her. (3+5+7)

(1x15=15)