Total number of printed pages-8

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34(4) NUPT 4.2

2014

## NEUROPHYSIOTHERAPY

Full Marks: 100

Time: Three hours

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

Essay type: (10 marks each) (any two)  $2\times10=20$ 

- 1. Describe the assessment & PT Management of a 62 year old male of acute transverse myelitis at T<sub>8</sub> spinal segment in acute & chronic stage.
  - Elaborate on the following two neurophysiological techniques MRP (Motor
  - Relearning Program) & NDT (Neuro-Developmental therapy) ° 10
- Draw a neat labelled diagram of brachial plexus.

  Also give a detailed assessment and PT management for brachial plexus injury.

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Short Essay Type: (5 marks each) (any ten)

10×5

- 1. Discuss the components of an effective exerciprescription for a patient with multiple sclerosity
- 2. Hemiplegic hand and its management.
- 3. What are the different types of CP? Explain the management of athetoid CP.
- 4. Kinetic and kinematic analysis of gait.
- 5. List out different perceptual disorders. What is unilateral neglect & the area of lesion? Give an example and the treatment suggestion for the same.
- 6. Write down the classification of brain tumors alongwith its management.
- 7. Neurogenic Bladder and its management.
- 8. Explain the PT management of a patient with syringomyelia extending from C<sub>5</sub> C<sub>7</sub> area of spinal cord.
- 9. What components should be included in a PT examination in a patient with Parkinson's disease? What are the major goals and the PT intervention for the same?

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- 10. Discuss PT Management of head injury in acute stage.
- 11. Write down the available movements and the functional capabilities in a patient with spinal cord injury at T<sub>4</sub> level. Also highlight the equipment & assistance required for the same.
- 12. What is autonomic dysreflexia?

  Describe the initiating stimuli & symptoms of this syndrome. What action would you take if a patient experienced an onset of symptoms during a PT treatment?

Short Answer Type: (2 marks each)(any five)

 $5 \times 2 = 10$ .

- (1) Glasgow Coma Scale.
- (2) Define dysphagia & outline its management.
- (3) Brown-Sequard syndrome.
- (4) Signs of meningial irritation.
- (5) Post-polio syndrome.
- (6) . What is anal sparing?
- (7) Romberg's Test.

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Contd.

## Multiple Choice Questions: (1 mark each) 1×20=20

- (1) Which of these is not a feature of UMN lesion?
  - (a) Spasticity
  - (b) Hyperreflexia
  - (c) Fasciculation
  - (d) Dyssynergia
- (2) 3<sup>rd</sup> nerve palsy with contralateral hemiplegia is called
  - (a) Horner's syndrome
  - (b) Weber's syndrome.
  - (c) Locked in syndrome
  - (d) None of the above
- (3) Which of these is not a diagnostic criteria for Motor Neuron disease?
  - (a) Sensory signs
  - (b) UMW signs in atleast 1 region
  - (c) Progression of disease
  - (d) Both (b) & (c)
- (4) Deficiency of Vitamin B<sub>12</sub> leads to
  - (a) Multiple sclerosis
  - (b) Acute myelopathy
  - (c) Polyneuropathy
  - (d) Subacute combined degeneration of spinal cord

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	Lhermitte's sign is seen in which of the following conditions  (a) Stroke  (b) Multiple sclerosis  (c) Transverse myelitis  (d) Meningitis
(6)	Hemiballismus is due to lesion in the  (a) Red nucleus  (b) Putamen  (c) Subthalamic nucleus  (d) All of the above
	Aphasia is most likely to occur with what type of stroke?  (a) Bilateral occipital lobe  (b) Right cortical hemisphere  (c) Left cortical hemisphere  (d) Brainstem
(8)	Which of these is not a feature of Parkinson's disease?
	(a) Diplopia (b) Tremor (c) Bradykinesia
4(4) NUP	(d) Festinating gait

- (9) The ASIA impairment scale is used to
  - (a) Assess the extent of injury
  - (b) Assess the sensation
  - (c) Assess the motor power
  - (d) None of the above
- (10) The cause of DMD is
  - (a) Viral
  - (b) Bacterial
  - (c) Genetic
  - (d) Fungal
- (11) Wallerian degeneration will be present in
  - (a) Neuropraxia
  - (b) Neurotemesis
  - (c) Axonotemesis
  - (d) Both (b) & (c)
- (12) Spina bifida is one of the more common congenital anomalies. Clinical findings might include
  - (a) Incomplete closure of the neural tube
  - (b) Excretory dysfunction
  - (c) Severe paralysis
  - (d) Normal laminae & spinous processes of 1 or more vertebrae

(13) Presbycusis is a term for	
(a) Far sightedness	
(b) Occular changes occurring with age	
(c) Progressive loss of perception of sound	
(d) Damage to the organ of corti	
(14) Copper deposition is seen in which of the following conditions	ند
(a) Wilson's disease	. [
(b) Hungtington's disease	
(c) Metabolic encephalopathy	•
(d) Wernicke's syndrome	
(15) The causes of primary brain damage is following except for	
(a) Skull fracture	1
(b) Diffuse white matter lesion	1
(c) Contusion of grey matter	
(d) Hemorrhage	
(16) Which of the following are subtypes of MND?	4
(a) ALS	
(b) Progressive bulbar palsy	
(c) Progressive muscular atrophy	
(d) All of the above	
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(17) Common complications of SCI include each	1
of the following except	
(a) DVT	
(b) Heterotrophic Ossification	
(c) Diarrhoea	
(d) UTI	
(18) The following are recognized findings	in
cerebellum disorder except	1
(a) Dysarthria	
(b) Intentional tremor	
(c) Nystagmus	E.
(d) Dystonia	1,5
(19) Lewy bodies will be present in substan	ıtia
nigra in	· 李
(a) Multiple sclerosis	東東
(b) Alzheimer's disease	1
(c) Parkinsonism	44
(d) All of the above	£2.
· (20) All are signs of pyramidal lesion exce	pt
(a) Extensor plantar response	
(h) Muscle wasting.	
(c) Exaggerated tendon reflexes	2.00
fine movements.	1

Impaired fine movements.