REV-01
BPT/95/47/52

2025/12

SET A

BACHELOR OF PHYSIOTHERAPY
FIFTH SEMESTER
CLINICAL CARDIORESPIRATORY CONDITIONS
BPT – 504

[USE OMR SHEET FOR OBJECTIVE PART]

Duration: 3 hrs. **Full Marks: 70**

(Objective)

Time: 30 min. **Marks: 20**

Choose the correct answer from the following: ***1×20=20***

1. Which of the following is a common cause of acute pericarditis?
   a. Viral infection
   b. Bacterial pneumonia
   c. Hypertension
   d. Atherosclerosis

2. Abdomino-thoracic breathing can be seen in:
   a. Children
   b. Male
   c. Female
   d. All of the above

3. Pericardial effusion is best detected by:
   a. ECG
   b. Chest X-ray
   c. Echocardiography
   d. Cardiac MRI

4. TLC in restrictive lung diseases will be
   a. Reduce from the normal value
   b. Increased from the normal value
   c. Not counted
   d. None of the above

5. A common symptom of myocarditis is:
   a. Sharp pleuritic chest pain
   b. Sudden loss of consciousness
   c. Fatigue, chest discomfort, and palpitations
   d. Abdominal pain and vomiting

6. Which of the following is NOT a component of ABG analysis?
   a. pH
   b. PaO_2
   c. Hemoglobin
   d. $PaCO_2$

7. Myocarditis can lead to which of the following complications?
   a. Cardiac tamponade
   b. Heart failure and arrhythmias
   c. Pulmonary fibrosis
   d. Coronary artery spasm

8. Which one is not a point of heart sound auscultation
   a. Aortic
   b. Erb's
   c. Tricuspid
   d. Vesicular

9. Which heart valve is most commonly affected in infective endocarditis?
   a. Aortic valve
   b. Mitral valve
   c. Pulmonary valve
   d. Tricuspid valve

10. The most useful investigation for confirming pleural effusion is:
    a. ECG
    b. Chest X-ray
    c. Pulmonary function test
    d. CT brain

11. Which of the following complications can result from infective endocarditis?
    a. Pulmonary embolism
    b. Heart failure
    c. Pericardial effusion
    d. Myocardial rupture

12. Lung abscess is best defined as:
    a. A solid mass in the lung
    b. A cavity in the lung containing pus and necrotic tissue
    c. Fluid in pleural cavity
    d. Air in pleural cavity

13. A typical ECG finding in acute MI is:
    a. PR-segment depression
    b. ST-segment elevation
    c. QRS prolongation
    d. T-wave inversion only

14. Which one is not a point of lung sound auscultation:
    a. Pulmonic
    b. Tracheal
    c. Bronchial
    d. Broncho vesicular

15. Cardiac arrest is defined as:
    a. Decrease in cardiac output
    b. Temporary arrhythmia
    c. Complete heart block
    d. Cessation of effective cardiac activity

16. Genetic deficiency associated with emphysema:
    a. A1-antitrypsin deficiency
    b. B-thalassemia
    c. G6PD deficiency
    d. Cystic fibrosis gene defect

17. Hypertension is diagnosed when blood pressure is consistently:
    a. >120/80 mmHg
    b. >130/85 mmHg
    c. ≥140/90 mmHg
    d. ≥160/100 mmHg

18. Emphysema is best defined as:
    a. Fibrosis of lung tissue
    b. Permanent dilatation of alveoli with destruction of their walls
    c. Accumulation of pus in the pleural cavity
    d. Collection of fluid in the alveoli

19. The most common symptom of Coronary Artery Disease is:
    a. Angina pectoris
    b. Palpitations
    c. Sharp pleuritic chest pain
    d. Syncope

20. Symptom of breast cancer:
    a. Breast pain
    b. Palpable painless lump
    c. Discharge of pus
    d. All of the above

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Descriptive

Time : 2 hrs. 30 min. **Marks : 50**

[Answer question no.1 & any four (4) from the rest]

1. A 68-year-old man, who was a worker of a rice mill with a long history of dust exposure reports long-term cough and breathlessness. His has clubbing of finger, chest X-ray shows hyperinflation, and spirometry reveals FEV_1/FVC ratio of 65%. Identify the condition. Write about the condition in detail and explain the management. **10**

2. Write in detail about the three carditis. **10**

3. Write in detail about ECG. Draw a normal ECG diagram and explain it. Explain how to find out HR from a regular rhythm and irregular rhythm ECG report. **2+4+4 =10**

4. Explain about myocardial infarction with its ECG graph. **10**

5. A 54 years old woman with a history of neuromuscular disease presents with shallow breathing, drowsiness and weakness. ABG shows low oxygen and high carbon dioxide levels. Identify the exact condition. Explain the ventilation perfusion mismatch. Write down the clinical features and management of the diagnosed condition. **10**

6. Write the differences between heart failure and cardiac arrest, along with their complication. **10**

7. Explain ABG in detail. Write ABG interpretation in detail. Write down two differences between metabolic alkalosis and metabolic acidosis. **3+5+2 =10**

8. Write about five congenital heart conditions and explain their clinical aspects. **10**

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