REV-01
BPT/65/32/37

2025/11

SET A

BACHELOR OF PHYSIOTHERAPY
SEVENTH SEMESTER
PHYSIOTHERAPY IN NEUROLOGICAL CONDITIONS
BPT - 701

[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 is the term for a severe nerve injury characterized by complete disruption of nerve including its connective tissue coverings?
   a. Axonotmesis b. Neuropraxia
   c. Neurotmesis d. Neuroma
2. Which of the following is not a core symptom domain of ADHD?
   a. Inattention b. Hyperactivity
   c. Impulsivity d. Anxiety
3. The most common cause of ischemic stroke is:
   a. Cerebral hemorrhage b. Embolism
   c. Thrombosis d. Aneurysm
4. What is encephalitis?
   a. Inflammation of Heart b. Inflammation of Lungs
   c. Inflammation of Brain d. Inflammation of Liver
5. Which of the following is a common cause of congenital hydrocephalus?
   a. Traumatic brain injury b. Meningitis
   c. Spina bifida d. Stroke
6. The middle cerebral artery supplies which of the following areas?
   a. Lateral surface of the cerebral hemisphere b. Brainstem
   c. Medial surface of the cerebral hemisphere d. Occipital lobe
7. Which of the following is not a part of objective examination?
   a. Observation b. History
   c. Palpation d. Examination
8. The most common clinical manifestation of hydrocephalus in infants is:
   a. Diplopia b. Increased head circumference
   c. Ataxia d. Papilledema
9. Myasthenia gravis is primarily a disorder of the:
   a. Peripheral nerve b. Neuromuscular junction
   c. Muscle fibers d. Motor cortex

10. Which of the following is a modifiable risk factor for stroke?
    a. Age
    b. Gender
    c. Hypertension
    d. Family History

11. Which type of spina bifida is often asymptomatic?
    a. Spina bifida occulta
    b. Meningocele
    c. Myelomeningocele
    d. All forms are symptomatic

12. The hallmark symptom of myasthenia gravis is:
    a. Muscle hypertrophy
    b. Progressive muscle stiffness
    c. Muscle weakness that worsens with activity
    d. Muscle atrophy without fatigue

13. The classical deformity seen in median nerve injury is:
    a. Claw hand deformity
    b. Wrist drop
    c. Ape thumb deformity
    d. Foot drop

14. An injury to cerebral cortex or motor pathways leads to which type of cerebral Palsy?
    a. Athetoid CP
    b. Spastic CP
    c. Ataxic CP
    d. Mixed CP

15. Which splint is most commonly used in the Radial nerve Injury?
    a. Cock-up splint
    b. Knuckle bender splint
    c. C- Bar splint
    d. Areoplant splint

16. Ptosis and diplopia are early signs of:
    a. Multiple sclerosis
    b. Myasthenia gravis
    c. Parkinson's disease
    d. ALS

17. Which of the following movements are incorrect regarding upper limb synergy pattern in stroke?
    a. Scapula-Retraction
    b. Elbow- Flexion
    c. Forearm-Pronation
    d. All are Correct

18. The claw hand deformity in ulnar nerve injury is due to:
    a. Paralysis of the flexor digitorum profundus
    b. Paralysis of interossei and lumbricals to the ring and little fingers.
    c. Paralysis of the thenar muscles
    d. Overactivity of the flexor carpi radialis

19. The muscle weakness in Eaton- Lambart Syndrome typically :
    a. Worsens with repeated activity
    b. Improves with repeated activity
    c. Remains unchanged with activity
    d. Is unrelated to activity

20. ALS primarily affects:
    a. Sensory Neurons
    b. Motor Neurons
    c. Interneurons
    d. Autonomic Neurons

-- --- --

Descriptive

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

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

1. A newborn baby is examined shortly after delivery. The mother had minimal antenatal checkups, and no folic acid supplementation was taken during pregnancy. On physical examination, a swelling is noted over the lumbosacral region, covered by a thin membrane. The swelling is soft, transilluminant, and associated with weakness of both lower limbs. The infant has no voluntary control over bladder and bowel functions. Write the physiotherapy assessment and management for above mentioned condition. **10**

2. Explain Neurological Assessment for Physiotherapy in detail. **10**

3. A 19-year-old male college football player fell and hit his head on the ground during a match. He was briefly disoriented and complained of dizziness, headache, and blurred vision. There was no loss of consciousness. A few hours later, he reported difficulty concentrating, fatigue, and mild nausea. On examination, his vital signs are stable, pupils are equal and reactive, and there are no focal neurological deficits. MRI brain is normal. Write the diagnosis and PT management. **10**

4. Stages of Brunnstorm Recovery. Clinical Applications OF Brunnstorm Approach. **5+5=10**

5. A 6-month-old male infant is brought to the pediatric clinic with progressive enlargement of the head over the last 2 months. The parents noticed irritability, poor feeding, and delayed attainment of milestones. On examination, the child has a disproportionately large head with a head circumference above the 97th percentile for age. The anterior fontanelle is wide and bulging, scalp veins are prominent, and the sutures are separated. The "sunset sign" of the eyes is observed, and mild spasticity of the lower limbs is present. Write in detail about physiotherapy assessment and management of the above mentioned condition. **10**

6. Write in detail about Amyotrophic Lateral Sclerosis. Mention its assessment and PT manaegemnt. **10**

7. Explain motor relearning programme in detail along with clinical applications. **10**

8. A 35-year-old male presents to the physiotherapy outpatient department with complaints of difficulty in gripping objects and numbness over the lateral aspect of his palm. He reports that two weeks ago he sustained a deep laceration at the anterior aspect of his forearm near the wrist while working with glass. On examination, there is wasting of the thenar muscles, and the patient is unable to oppose his thumb. Sensory loss is noted over the palmar aspect of the thumb, index, middle, and lateral half of the ring finger.Write in detail about physiotherapy assessment and management of the above mentioned condition. **10**

= = *** = =