PHYSIOTHERAPY MCQs 2016

1. Which of the following electrotherapy modalities has both mechanical and physiological effects?
   a) Infra Red Radiation
   b) Short Wave Diathermy
   c) Ultrasound
   d) Russian stimulation

2. The following modalities can be carried out for people with acute edema **except**…….
   a) Cryotherapy
   b) Thermotherapy
   c) Electrotherapy
   d) Exercise therapy

3. Intention tremor is a typical sign/symptom of which of the following conditions?
   a) Multiple sclerosis
   b) Ataxia
   c) Parkinson's disease
   d) Alzheimer's disease.

4. People receiving therapy in prone position should be supported …….. to avoid strain on their spine/back
   a) Posteriorly
   b) Anteriorly
   c) Inferiorly
   d) Laterally

5. Which of the following special test is carried to confirm eodema?
   a) Lachman test
   b) Empty can test
   c) Brush test
   d) Mcmurray test

6. Palpation is carried during assessment. At what point in assessment should this be done?
   a) Before angular movements are performed
   b) Before anamnesis
   c) Before all objective assessment
   d) Before treatment plan/treatment
7. Which of the following is ideal for gait training in rehabilitation of a client with CVA?

a) Zimmer frame
b) Elbow crutch
c) Axillary crutch
d) Tetrapod/tripod

8. Which of the following is correct for setting parameters using interferential/TENS for acute conditions?
    a) High intensity and low frequency
    b) High frequency and low intensity
    c) High frequency and high intensity
    d) Low intensity and low frequency

9. Which of the following is the afferent/sensory function of cranial nerve VIII?
    a) Touch and taste
    b) Smell
    c) Sight
    d) Hearing and balance

10. The following ligaments are found in /around the foot **EXCEPT**…….
    a) Bifurcated ligament
    b) Long plantar ligament
    c) Calcaneofibular ligament
    d) Posterior cruciate ligament

11. Triceps brachii muscle is inserted at ……
    a) Distal 2/3 of medial and posterior humerus
    b) Lateral side of olecranon process of radius and antebrachial fascia
    c) **Posterior surface of olecranon process of ulna and antebrachial fascia**
    d) Lateral side of olecranon process and upper ¼ of posterior surface of ulna

12. What is the main action of supraspinatus muscle?
    a) Adducts the shoulder joint
    b) Laterally rotates the shoulder joint
    c) Extends the shoulder joint
    d) Abducts the shoulder joint

13. What is the closed packed position of cervical spine?
    a) Slight extension
    b) Full flexion
    c) Rotations
    d) Full extension

14. In history taking of clients with post trauma conditions, it is important to ask about the mechanism of injury. For example, how did you fall? Was trauma stretching or overuse was involved? The questions helps to determine…..
    a) The severity scale
    b) The type of injury
    c) The nature of pain
    d) Whether condition is chronic or acute

15. How is an apparent leg length measured?
    a) From the umbilicus to the late1
    b) From the umbilicus to the medial malleolus
    c) From the anterior superior iliac spine(ASIS) to the medial malleolus
    d) From the anterior superior iliac spine to the lateral malleolus

16. True leg length is measured as….
    a) From the umbilicus to the lateral malleolus
    b) From the umbilicus to the medial malleolus
    c) From the anterior superior iliac spine(ASIS) to the medial malleolus
    d) From the anterior superior iliac spine to the lateral malleolus

17. In what plane does rotation of the spine occur?
    a) Coronal plane
    b) Saggital plane
    c) Transverse plane
    d) Frontal plane

18. The normal curves of spine are described as….
    a) Slightly anterior cervical, slightly anterior thoracic and slightly posterior lumbar
    b) Slightly posterior cervical, slightly anterior thoracic and slightly anterior lumbar
    c) Slightly anterior cervical, slightly anterior thoracic and slightly anterior lumbar
    d) Slightly anterior cervical, slightly posterior thoracic and slightly anterior lumbar

19. Which of the following muscles is a back muscle?
    a) Pectoralis major
    b) Rectus abdominis
    c) Iliacus
    d) Rhomboid major

20. Which of the following muscles is not an adductor of the hip?
    a) Gracilis

b) Pectineus
c) Adductor magnus
d) Tensor fasciae latae

21. Which of the following intervention is contraindicated for clients with deep vein thrombosis (DVT)?
    a) Gait training
    b) Deep calf massage
    c) Bed exercise Closed chain exercise
    d) Bridging

22. The purpose of Gower's sign is to assess which of the following muscle groups?
a) Distal upper extremity muscles
b) Proximal lower extremity muscles
c) Distal upper extremity muscles
d) Proximal upper extremity muscles

23. Lack of dopamine is concerned with

a) Alzheimer's
b) Multiple sclerosis
c) Parkinson's
d) Poliomyelitis

24. A 17-year-old football player sustained a noncontact knee injury while planting his leg to make a cut. He heard a pop and felt his knee buckle. What is the most sensitive clinical test to establish the diagnosis?
a) Anterior drawer
b) Faber
c) **Lachman**
d) McMurray

25. Which of the following is not an infant reflex?

a) Rooting
b) Palmer grasp

c) Galant
d) Patella

26. A 71-year-old man on the rehabilitation unit recovering from hip replacement surgery has sudden onset of aphasia and right hemiparesis. What is the first diagnostic test to obtain?
a) Arterial blood gases
b) **Computed tomography scan**
c) Electroencephalogram
d) Ultrasound scan

27. Muscle power grading is divided into how many points

a) 4
b) 5
c) 6
d) 7

28. Which is not true about bowstring test?

a) Flexion of knee relieves pain
b) It is used to test for low back pain with sciatica
c) Patient lies supine during the test
d) Pressure is applied at the lateral aspect of knee

29. Which test is used in the lateral deviation of the spine?

a) Schober's test
b) Adam's test
c) Thomas test
d) Thompson's test

30. The patella apprehension test is used to test for
a) Patella dislocation
b) Patella flexibility
c) Patella fracture
d) Patella ridging

31. The speed's test is useful in
a) Biceps tendonitis
b) Pectoralis spasticity
c) Rotator cuff tendinitis
d) Subscapularis laxity

32. Pain due to a stimulus that does not normally provoke pain is known as;
    a) Algogen
    b) Allodynia
    c) Anaesthesia
    d) Analgesia

33. In a boutonniére deformity, the proximal interphalangeal (PIP) joint is in
    a) extension and the distal interphalangeal joint is in hyperextension
    b) extension and the distal interphalangeal joint is in hyperflexion
    c) flexion and the distal interphalangeal joint is in hyperextension
    d) flexion and the distal interphalangeal joint is in hyperflexion

34. Which of the following is not an autoimmune disease?
    a) Multiple sclerosis
    b) **Type II diabetes**
    c) Systemic lupus erythematosus
    d) Glomerulonephritis

35. A 76 year old man with low back pain has been referred to your clinic. The pain has been well controlled for several months with immediate release of morphine. He says the morphine is no longer working so well. The most likely reason for this is:
    a) A change of preparation
    b) Addiction
    c) Inappropriate use of a short duration of action opioid
    d) Tolerance

36. Muscle/s taking origin from the clavicle is/are:
    a) Subclavius
    b) Trapezius
    c) Pectoralis major
    d) Sternocleidomastoid

37. The brachial plexus has:
    a) 4 cords
    b) 5 trunks
    c) **6 divisions**
    d) 8 rami (roots)

38. A 57-year-old man sustained a stroke one year ago. He now has good voluntary control of the affected arm, with elbow and shoulder strength at 4/5, wrist extension at 2+/5, finger extension at 2-/5, and fair grip. Tone is minimally increased throughout the arm and sensation is intact. What is the most effective means of improving his hand function?

a) Alternating hot and cold stimulation to the affected hand
b) Electromyographic biofeedback for the wrist extensors
c) Intensive training of the unaffected hand in one-handed techniques
d) **Restraining the unaffected hand during activities of daily living**

39. Paralysis of the serratus anterior muscle causes:

a) Ape hand
b) Claw hand
c) Weakness in the upper limb
d) Winging of the scapula.

40. Muscles that rotate the scapula downward are attached to:

a) Ventral lip of the medial border of the scapula.
b) **Dorsal lip of the medial border of the scapula.**
c) Upper lip of the crest of the spine.
d) Lower lip of the crest of the spine.

41. The following muscles are innervated by the median nerve EXCEPT:

a) **Adductor pollicis**
b) Flexor pollicis longus
c) Opponens pollicis
d) Pronator quadratus

42. What muscle causes dorsiflexion and inversion of the ankle?

a) extensor hallucis longus
b) gastrocnemius
c) peroneus tertius
d) tibialis anterior

43. Which is true of the circle of Willis?

a) anterior cerebral is the largest branch of the internal carotid
b) anterior communicating unites middle and anterior cerebral
c) internal carotid gives off ophthalmic artery
d) middle cerebral supplies motor but not sensory cortex

44. The axilla contains all of the following EXCEPT:
    a) Axillary artery.
    b) Axillary vein.
    c) Fat.
    d) **Trunks of the brachial plexus.**

45. Carpal tunnel syndrome causes:
    a) Claw hand.0
    b) Wrist drop.
    c) Paralysis of all muscles of the hand.
    d) Ape-like hand

46. Which treatment is most appropriate for acute traumatic trochanteric bursitis?
    a) Corticosteroid injection
    b) Hot packs
    c) **Ice packs**
    d) Infra-red

47. The Functional Independence Measure (FIM) assesses
    a) **Activity limitations**
    b) Functional range of motion
    c) Impairment
    d) Participation restrictions
    Prognosis

48. An example of closed kinetic chain exercise for the quadriceps is
    a) **A partial squat**
    b) An isometric quadriceps set
    c) Knee extension on a stacked-weight machine
    d) Knee extension on an isokinetic machine
    Knee mobilization

49. A 14-year-old boy presents with a three-month history of knee pain. The pain is most marked in the area of the tibial tubercles bilaterally and it increases with activity. Physical examination is unremarkable. What is the likely diagnosis?
    a) Osgood-Schlatter disease
    b) Patellar tendinitis
    c) Patellofemoral arthritis
    d) Rheumatoid arthritis

50. What is the mechanism of heating with hot packs?
    a) **Conduction**
    b) Convection
    c) Conversion
    d) Direct heat

51. Which exercise has the greatest effect on bone formation?
    a) Cycling
    b) Swimming
    c) Tai Chi stretching
    d) **Weight lifting**

52. What is a contraindication for superficial heat?
    a) Hematoma
    b) Joint 0replacement
    c) **Sensory deficit**
    d) Superficial thrombophlebitis

53. Which provocative test evaluates both the hip and sacroiliac joints?
    a) **Patrick (or Faber)**
    b) Straight leg raise (or Lasègue)
    c) Thomas, with resistance applied
    d) Trendelenburg

54. A 45-year-old woman presents with a three-month history of nonradicular low back pain but no history of trauma. X-rays show degenerative changes and grade 2 spondylolisthesis at L4-5. What is the best recommendation?
    a) A polypropylene body jacket
    b) **Abdominal muscle strengthening**
    c) Bed rest for two weeks
    d) Isokinetic back extension strengthening

55. A patient was referred to you with an 8 months history of spinal cord injury at T10/ T11. He has both bladder and bowel incontinence. Upon your examination, you observed that the patient also has poor sensation in the lower limbs with together with muscle atrophy. Muscle power assessed was 1/5 for the same lower limbs. Which of the following would be a first line of intervention?

    a) Muscle stimulation
    b) Standing re-education
    c) Strengthen upper limbs
    d) Teach transfers

56. Tensor fascia lata muscle is innervated by….

a) Inferior gluteal nerve
b) Anterior gluteal nerve
c) Superior gluteal nerve
d) Posterior gluteal nerve

57. Which of the following thermotherapy modalities is not radiation therapy?

a) Microwave therapy
b) SWD
c) Infra red therapy
d) Hot pack therapy

58. Which of the following is **true** about managing the communication need of a stroke patient?

a) Caregivers should give strict orders to patients to obey
b) Language/instructions to patients should be technical
c) The instructions to patients should be general
d) Instructions should be clear and in simple language

59. Memory pertains to… **b**

a) Difficulty in solving problems, reasoning and judgment.
b) **Difficulty of retaining and reviving facts, events, impressions**
c) Mood swings, neglect and depression
d) Difficulty apprehending by means of the mind and understanding

60. Cognitive associated with…

a) Difficulty in solving problems, reasoning and judgment.
b) Difficulty of retaining and reviving facts, events, impressions
c) Mood swings, neglect and depression
d) Difficulty apprehending by means of the mind and understanding

61. Perception is…

a) Difficulty in solving problems, reasoning and judgment.
b) Difficulty of retaining and reviving facts, events, impressions
c) Mood swings, neglect and depression
d) Difficulty apprehending by means of the mind and understanding

62. Behaviour is associated with..

a) Difficulty in solving problems, reasoning and judgment.
b) Difficulty of retaining and reviving facts, events, impressions, etc
c) Mood swings, neglect and depression
d) Difficulty apprehending by means of the mind and understanding

63. Which of the following is **not** a goal for managing stroke?

a) To promote safety
b) To prevent spasms
c) To promote quality movement and maximum independence
d) To promote subluxation

64. Which of the following statement s is **not true** for Duchenne muscular dystrophy?

a) It is a genetic condition
b) Affects mostly girls before the age of 4 years
c) Affects mostly boys before the age of 4 years
d) Affected muscles degenerate

65. Which of the following statements is true for multiple sclerosis?

a) A disorder of neuromuscular function caused by impaired ability of neurotransmitter
b) A degenerative disease of substantia nigra
c) A chronic progressive disease characterized by demyelinating lesions throughout the central nervous system
d) A group of inherited degenerative disorders of the anterior horn cell causing muscle atrophy

66. The following are considered during social and family history taking **except…..**

a) Leisure activities
b) Home and work situation
c) Dependants
d) Previous episodes of complaints

67. Which of the following can be assessed on observation?

a) Muscle strength
b) Muscle control and stability
c) Muscle length
d) Muscle bulk and posture

68. The straight leg raise test consists of …….

a) Passive hip flexion with knee flexed
b) Passive hip flexion with knee extended
c) Passive hip extension with knee flexed
d) Passive hip flexion with knee flexed

69. A spontaneous forward displacement of one vertebral body upon the segment below it is known as …

a) Spondylosis
b) Spondylolysis
c) Spondylolisthesis
d) Osteoarthritis of the spine

70. Talar tilt is a special test that is carried out in which of the following joints?

a) Knee joint
b) Hip joint
c) Wrist/ finger
d) Ankle/foot

71. During the ambulatory rehabilitation of a left CVA patient, the physiotherapist concluded on using the two-point gait training procedure. Which of the following is the MOST appropriate gait sequence?

a) Place the cane in the patient's right upper extremity, cane forward, then left lower extremity, followed by the right lower extremity
b) Place the cane in the patient's right upper extremity, cane forward, then right lower extremity followed by the left lower extremity
c) Place the cane in the patient's right upper extremity, take cane and left leg at the same time forward, followed by the right leg
d) Place the cane in the patient's right upper extremity, take cane and right leg at the same time forward, followed by the left leg

72. ALL the following factors are considered very essential in enhancing the process of motor learning after a neurological disorder in physiotherapy is **EXCEPT**…

a) Regular visits to the facility

b) Continuous biofeedback
c) Excessive repetition
d) Lack of motivation on the part of the patient

73. A physiotherapist was called in by a neighbour to assess a 67- year old man whom the children suspects to have had *an episode of 'weakness' and difficulty lifting the left arm on waking early morning*. Which of the following observations would be indicative of a CVA?

a) Speech impairment, visual impairment, spasticity of muscles on the left arm and legs
b) Reduced muscle strength, reduced muscle tone on all the left body part and an associated visual impairment
c) Speech impairment, reduced muscle strength, flaccidity of muscles and possible challenge with co-ordination all on the left arm and leg
d) Speech impairment, visual impairment, increased tendon reflexes on both the left arm and leg

74. An old CVA patient walked into a physiotherapy centre to make enquiry about the need to undertake exercises to help improve his gait. On assessment the physiotherapist noticed the patient walks with a high stepping gait with marked hip abduction and a missed heel strike at the stance phase of walking. Which of the following series of interventions would be MOST appropriate to consider?

a) Open chain quadriceps strengthening on quads bench, heel raise exercises against the wall bars and the closed chain isokinetic leg press
b) Hamstring toning, heel raise exercises against the wall bars and closed chain isokinetic leg press
c) Open chain quadriceps strengthening on quads bench, functional electrical stimulation (FES) for the calf muscles and massage for the calf muscles
d) Applying electrical stimulation to the major extensors of the lower limb, open chain quadriceps strengthening and thermotherapy

75. The principle of neurodevelopmental theory proposes that the mastery of one stage of functional activity lays the foundation for the next stage during rehabilitation. Applying this principle to a CVA patient, what do you consider as the MOST appropriate sequence for the attainment of functional recovery?

a) Undertake activities in sitting balance, Maintain sitting balance, maintain standing balance, maintain functional activities in standing balance, do weight transfer on both paretic and strong leg and start walking with assistance

b) Maintain standing balance, maintain functional activities in standing balance, do weight transfer on both paretic and strong leg and start walking with assistance
c) Do weight transfer on both paretic and strong leg and start walking with assistance
d) Maintain sitting balance, undertake activities in sitting balance, maintain standing balance, maintain functional activities in standing balance, do weight transfer on both paretic and strong leg and start walking with assistance

76. The family of an aphasic CVA patient called in to a physiotherapy department seeking for assistance for their 69- year old father with a ten month old stroke. Currently he maintains a sitting balance when positioned in an arm chair but cannot maintain an independent standing balance. What do you consider as the MOST appropriate protocol to follow in this situation?

a) Do squatting on the wall bar, get the patient into the parallel bar and later get him a walker
b) Reinforce his sitting posture; start with a basic weight transfer protocol before proceeding to a walking training
c) Do regular massage for his back muscles and his paretic arms and legs and regular squatting
d) Stand with him in a parallel bar, help him lift his leg by supporting it with a little push forward and get him a cane later on

77. A 72 year old acute CVA patient constantly keeps complaining to his physiotherapist during rehabilitation that he feels his paretic leg is shorter than the stronger leg when standing even though he had no incidence of trauma. Which of the following could be the reason for such a feeling?

a) **Inadequate weight transfer to the paretic leg**
b) Contracture in the paretic hip abductors
c) Inadequate trunk extension on standing
d) Its only psychological, it would be fine

78. A 54 year old civil servant was referred to a physiotherapy facility in a local community clinic with a left hemiparesis following a CVA. On intense assessment, the physiotherapist apparently noticed no clear distinction between the muscle power grades of both limbs but rather observed that the patient could not maintain a steady standing and walking balance for more than 3 minutes without a sway. Which of the following could be the possible case?

a) A case of transient ischemic attack
b) A case of fatigue
c) Weak back muscles
d) A case of cerebellar lesion

Use the preamble below to answer questions 79 and 80

A four year old boy was referred to a physiotherapist with difficulty walking, difficulty climbing stairs and clumsiness. According to the mother, she had a normal pregnancy but was delivered through caesarian section, the baby had a normal early developmental milestone and walk independently at the age of 14 months. According to the mother, a 20 year old uncle of the son had a similar severe muscle disease at age 3.

79. What probably could be a possible differential diagnosis for this boy's weakness?

a) Cerebral palsy
b) Progressive muscle atrophy
c) Duchene Muscular Dystrophy
d) Early stage poliomyelitis

80. On physical examination, which of the following could possibly NOT be observed as a MAJOR clinical sign?

a) Marked reduction of both calf muscles
b) Decreased muscle tone
c) Normal coordination
d) Positive Gower's sign

81. During the rehabilitation of a 25- year old CVA patient at the outpatient physiotherapy department, the physiotherapist noted that the patient could not maintain a stable knee balance on the paretic leg during stance phase of walking. Which of the following interventions could be considered the BEST approach to help restore this challenge?

a) Prescribe a knee brace or support
b) Engage client in more closed kinetic chain exercises for the knee
c) Focus on open kinetic chain quadriceps exercises for the knee
d) Focus on electrical stimulation for the quadriceps muscles

83. An acute obese middle aged CVA patient was refereed for physiotherapy on the ward after doctors declared him stable. On reading the clinical history, among other findings the physiotherapist noted that the GCS was 5/15. What exactly should the goals of physiotherapy be in this instance?

a) Train proprioception
b) Teach bed mobility and transfer
c) Engage in passive immobilization and positioning
d) Postpone physiotherapy until further notice

84. A 65 year old woman suddenly experienced difficulty in walking without any history of trauma. On examination she presented with marked weakness in both legs (muscle power grade 2+/5), high knee jerk reflexes with sensory disturbance. Which of the following could be a possible differential diagnosis?

a) Lower motor neurone lesion
b) Upper motor neurone lesion
c) Peripheral nerve lesion
d) Muscle fatigue

85. CVA popularly called stroke has been on the rise in the counrty recently. And the causes of these have been surrounded by myths and belief systems. Which of these is not considered a myth?

a) Stroke is caused by demons
b) Stroke is a spiritual disease
c**) The older one gets, the higher the risk**
d) Stroke is a punishment from the gods

86. A 13 year old footballer in a local football academy has repeatedly been complaining of pain at the tibia tuberosity without history of trauma. And this worsens anytime he overworks himself during training session. As the sports physiotherapist in attendance, what could be your prime suspicion?

a) Muscular dystrophy
b) Muscle strain
c) Perthes disease
d) Osgood schlatter disease

87. During one of your usual presence at a sporting tournament, a player in your team suddenly falls to the ground after an overhead challenge with an opponent and landed on a twisted ankle.

Immediately the ankle swells up, gets warm to touch, feels totally unstable to the point that the player had to be stretchered off. In your first differential diagnoses, what type of strain do you suspect the player might have sustained?

a) Type I sprain only
b) Type 1 or type 2 sprains
c) Type 1 or type 3 Sprain
d) **Type 3 only**

88. In a preconditioning training of athletes led by a team's sports physiotherapist, one of the SURESST ways to ensure that injuries to these athletes 'ankle are reduced could be……..

a) Making them do more cycling and quadriceps drill
b) Engaging them in proprioceptive ankle stability training
c) Embarking on regular ankle strengthening exercises
d) Massaging the ankle vigorously

89. As sports physiotherapist for your team, you were offered a referral to commence physiotherapy for one of your players who sustained an ACL TEAR, and subsequently underwent a surgery. During your post-operative rehabilitation, one of the CORE FOCUS within the first few weeks of rehabilitation is to ……

a) Enhance endurance
b) Improve the knee flexion more
c) Improve the knee extension more
d) Improve hip extension more

90. A 25 year old mason suddenly tripped on a slippery floor and fell on the lateral side of the L knee. There apparently was no immediate swelling but marked pain which made him rush to your physiotherapy centre. On your first appeal, what could be your differential diagnosis?

A) Intraarticular injury
b) Periarticulaar injury
c) Extra articular injury
d) Oedema

91. A 20 year old footballer crushed head-on into another player during an aerial ball challenge. On landing he immediately felt a severe headache with slight dizziness. The medical team in charge got him stretched off the pitch for medical attention. Soon after he got stabilized, the team

doctor cleared him off any cortical lesion. But he constantly complains of his inability to clearly appreciate the smell of his food or perfume he uses. What possibly could have gone wrong?

a) He might have battered his nose
b) A possible cranial nerve injury
c) A possible spiritual attack
d) Neck contusion

92. An employee of a popular bakery shop in town sustained a L elbow fracture during the operation of one their revolving mixers. After a POP was applied for 6 weeks a referral was given to the physiotherapist in which the physician alerted of a possible mild radial nerve involvement. Which of the following could be a possible sign of the physician's suspicion?

a) Burning sensation in the palm
b) A wrist drop
c) Stiffness of the wrist joint
d) Atrophy of the biceps

93. Which of the following groups may have been affected in the above case

a) Upper arm pronators
b) Upper arm supinators
c) **Upper arm extensors**
d) Upper arm flexors

94. What major protocol could the physiotherapist undertake to ensure the restoration of functional activity in such a situation?

a) Only splint and Russian current electrical stimulation
b) TENS and Russian stimulation
c) **Strengthening exercises and electrotherapy**
d) Thermotherapy and massage

95. A physiotherapist was attending to an old case involving a diabetic CVA patient with an AKA (L). Knowing the patient had not had rehabilitation for such a long period, which of the following would not be considered a major clinical finding?

a) Atrophy of gluteal muscles
b) Reduction in ROM of the hip joint
c) Contracture of the hip flexors
d**) Trophic changes on the stump**

96. In The early crutch ambulatory training of a patient with a BELOW KNEE AMPUTATION. Which walking gait would be considered the **MOST** appropriate?

a) Three point gait training
b) Swing through
c) Both a and b
d) **Swing to**

97. ALL the following neurological conditions are considered an UMN lesion **EXCEPT**

a) Poliomyelitis
b) Stroke
c) Bell's palsy
d) Gullian Barre syndrome

Carefully read the preamble below and answer the questions that follow

A 76 year old otherwise healthy elderly man tripped and fell with his left knee trapped underneath his bottoms during a walk with his caregiver. Incidentally the physiotherapist was in attendance for a home visit. He was immediately assisted to safety and the needed examination carried out to ascertain the veracity of the problem.

98. What do consider as the **FIRS**T protocol to undertake?

a) Assess his consciousness
b) Check his skin for damages
c) Observe his contralateral knee for comparison
d) Call the doctor immediately

100. In a suspected case of a medial collateral ligament tear, which of the following signs would **NOT** associated with it?

a) Immediate effusion

b) Pain
c) Negative varus compression test
d) Negative valgus compression test

101. If the patient sustained a third degree sprain, suggests the **BEST** possible remedy for the client

a) Calm the patient down, use PRICE and massage
b) Calm the patient down, use PRICE, and refer to see a doctor
c) Calm the patient down and take the patient immediately to the hospital
d) Calm the patient down, use PRICE and apply electrotherapy

102. Which one of these is often NOT associated with extrinsic factors that cause a fall among the elderly?

a) Slippery floors
b) Cluttered rooms
c) Steep steps with no rails
d) Lack of motivation to walk

READ THE PREAMBLE BELOW CAREFULLY AND ANSWER THE QUESTIONS 103 and 104.

Neurodevelopmental theories as an evidence-based protocol have been used for the rehabilitation of several incidence of neurological deficits. Within this theory is the process of motor learning and motor development.

103. How do these two processes relate to each other during its practical application?

a) Motor learning proceeds motor development
b) Motor development proceeds motor learning
c) They both develop at the same time
d) They are not connected at all

104. How practical and relevant do these processes help physiotherapists when rehabilitating adults with CVA?

a) It helps to optimize the functional capacity of clients
b) It makes PTs have more time to relax during rehab

c) It creates an opportunity for patients to decide what is relevant to them during rehabilitation
d) It reduces the frequency of physiotherapy training sessions

105. A patient was referred to a physiotherapist after an ORIF to correct a mid-shaft fracture of the femoral bone. ALL the following are likely major signs to be seen on physical examination of the client **EXCEPT**

a) Atrophy of the quadriceps
b) Sensory disruption on the thigh
c) Leg length discrepancy
d) Crepitus

106. During the ambulatory training of a patient with an ORIF of a fixation of the upper 1/3 of the femur, a physiotherapist noted a functional LLD. How could that be different from a structural LLD.

a) Functional LLD has no structural deformity , structural LLD has a structural associated deformities
b) Functional LLD has a structural deformity, functional LLD has no structural associated deformities
c) They both have associated structural deformities
d) They are all not associated with structural deformities

107. The shoulder joint is known to be one of the most mobile agile joints in the human body resulting in complex movements and turns. And yet it is highly unstable to external sheer forces. Which of the following defines the close packed position of the shoulder joint?

a) Full abduction , internal rotation
b) Full abduction , external rotation
c) Full extension , external rotation
d) Full extension, internal rotation

108. An 18 year old lady presents to a physiotherapist, a complaint of anterior knee pain without a prior history of trauma. All physical examination shows the pain is more intense under the patella but investigations also prove that she is not an athlete and thus often has no strenuous effect on the knee. What could be your possible differential diagnosis?

a) Osgood schlatter disease
b) Perthes disease
c) Myaestenia gravis
e) Chrondromalacia patellae

109. What is the Neer test used for?

a) **Indicates shoulder impingement involving the supraspinatus**
b) Indicates capsular block in the shoulder joint
c) To assess the atrophy of the subscapularis
d) Indicates shoulder arthritis

110. A 13year old female diagnosed with cerebral palsy is referred to physiotherapist. The patient exhibits slow, involuntary, continuous writhing movements of the upper & lower extremities. This type of motor disturbance is MOST representative of:

a) Spastic
b) Flaccid
c) Athetoid
d) Both spastic and flaccid

111. In the assessment of a grip, the pt can make a fist, but is unable to flex the distal phalanx of the ring finger. This clinical finding can BEST be explained by:

a) A ruptured flexor digitorum profundus tendon
b) Rupture of the extensor pollicis longus \
c) Atrophy of the thenar muscles
d) Atrophy of the hypothenar muscles

112 After a total hip arthroplasty, a 78 year old woman was advised to undertake a PWB on the L lower extremity. Her UE strength is 3+/5. Which assistive device would be the MOST appropriate for the patient?

a) Walking stick
b) A quad cane
c) A zimmer frame
d) A mobile cart

113. A physiotherapist on the ward intended to engage a CVA patient referred to him with mild standing postural exercises. The patient had apparently been on prolonged bed rest since the onset. Upon assuming the standing balance for a while the patient began to complain of lightheadedness & blurred vision. The MOST appropriate explanation is:

a) a possible second attack

b) A drop in BP
c) A rise in BP
d) **Possible co-ordination impairment**

114. A 37 year old driver was diagnosed with ankylosing spondylitis and later referred to a physiotherapist for instruction in a home exercise program. Which objective would be the MOST beneficial for the patient?

a) Strengthening the abdominals
b) Strengthening of the back extensors
c) Strengthening the gluteal
d) Strengthening the scapular

115. During the manual muscle test of the hip flexors of a patient whose power is assumed to be of poor grade, the MOST appropriate testing position is:

a) sitting
b) standing
c) prone
d) side lying

116. Which of the following is the best exercise to correct a Trendelenburg gait pattern?

a) Bridging
b) **Bridging with Resisted Abduction**
c) Bridging with Straight Leg Raise
d) Squats

117. Which of the following food items is a great source of folic acids?

a) Green vegetables and liver
b) Yellow vegetables and red meat
c) Carrots
d) Milk

118. A physical therapist is evaluating a patient with a suspected case of ulnar nerve injury. Which of the following muscles would most likely show signs of weakness?

a) Soleus
b) Triceps
c) Brachioradialis
d) Adductor Pollicus

119. The commonest cause of most amputations is widely known to be...

a) Diabetes
b) Road traffic accidents
c) Peripheral vascular disease
d) Chronic osteopaenia

120. A physiotherapist completes a manual muscle test where resistance is applied toward plantar flexion & eversion. This description BEST describes a manual muscle test of the:

a) Tibialis anterior
b) Soleus
c) Gastrocnemius
d) Quadriceps

121. A sub acromial bursa with a calcium deposit and a rotator cuff tendinitis usually would cause a painful abduction of the shoulder joint between which specific range of motion?

a) 5-20
b) 20-40
c) 40o-59
d) 60-120
d) 60-80

122. During the physical examination of the ankle ROM of a patient, a physiotherapist noted a limitation in passive ankle dorsiflexion when the knee is extended, but is not limited when the knee is flexed. The MOST logical explanation is:

a) The soleus is responsible
b) **The gastrocnemius is responsible for the limitation**
c) The rectus femoris is too short
d) The hamstring might be too short

123. A patient was referred to undergo rehabilitation 5 days after a major knee surgery. On examination he exhibits a significant weakness in the involved extremity. During the most recent therapy session the patient was able to complete an independent straight leg raise. What muscle is emphasized in the exercise?

a) Vastus medialis
b) Vastus lateralis
c) Rectus femoris
d) Soleus

124. A patient diagnosed as having a peripheral vascular disease (PVD) was referred to the physiotherapist for mild physical activity. On reviewing the medical records of the patient the physiotherapist noticed a particular sign that could be a hindrance to his participation in the physical activity. Which objective finding could that have been?

a) Signs of resting claudication
b) Severe exhaustion on little activity
c) Low BP
d) Unsteady HR

125. A female physiotherapist on duty noticed that a particular patient she has been attending to in the cubicle at the department had developed an unrestrained sexual overtures towards her. Knowing that the client is a bit elderly and of a high social status she decided to tolerate him. What ethical option do you suggest she should adopt?

a) Stop handling the client out rightly
b) Continue to tolerate him
c) Hand over the client to another physiotherapist with no explanation
d) Try to counsel the patient against the indecent act and later report to the supervisor.

126. In a particular situation at a department, the head of department often adopts the management style of criticizing junior colleagues and interns instantly before clients and sometimes he stops some form of on-going treatment protocol just because he feels it is not appropriate. What could possibly be the resultant effect of this style of correction in the long run on the clients and indeed on the practice?

a) It emboldens clients' confidence in the department
b) It ensures discipline and orderly behavior of staff towards clients
c) It puts staff on the alert and reduces the incidence of negligence
d) It derails clients' confidence in their therapy and negatively affects professionalism

127. Which is the strongest ligament?

a) Ilio-femoral ligament
b) Ischio-femoral ligament
c) Pubo-femoral ligament
d) Transverse acetabular ligament

128. What is the earliest indication of Volkmann's ischaemia:

a) Pain
b) Pallor and poor capillary filling
c) Paraesthesia in median nerve area
d) Contracture of fingers

129. Which of the following fracture is slowest to heal and often develops non-union:

a) Intracapsular femoral neck fracture
b) Scaphoid
c) Lower third of tibia
d) Proximal humerus

130. Which of the following muscle does not form part of the rotator cuff of shoulder?

a) Subscapularis
b) Infraspinatus
c) Teres minor
d) Teres major.

131. Which of the following bursa produces symptoms in shoulder impingement syndrome?

a) Subacromial bursa
b) Subdeltoid bursa
c) Bursa in relation of subscapularis tendon
d) Bursa in relation to latissimus dorsi

132. Which of the following is commonest complication of Colle's fracture:

a) Stiffness of fingers
b) Stiffness of wrist
c) Stiffness of shoulder

d) Subluxation of inferior radio ulnar joint with pain

133. In ankle sprain, the commonest ligament torn is:

a) Tibio-talar ligament
b) Deltoid ligament
c) Posterior talo-fibular ligament
d) Anterior talo-fibular ligament.

134. Stability of knee joint depends mainly on:

a. Bony configuration
b. Muscles
c. Ligaments
d. Menisci

135. Which muscular structure surrounds the actual muscle fibre and is responsible for depolarization of the surface of the fibre and protection and insulation of the fibre from others around it?

a) Satellite cells
b) Sarcoplasm

c) **Sarcolemma**
d) sarcoplasm

136. Which of the following best describes diplegia?

a) Weakness of contralateral side
b) Weakness of ipsilateral side
c) Spasticity of lower limbs
d) Spasticity of upper limbs

137. Which of the following describes Erb's palsy?

a) Adduction of shoulder, elbow extension, shoulder internal rotation, wrist flexion and forearm pronation.
b) Shoulder internal rotation, Adduction of shoulder, elbow extension, forearm pronation and wrist flexion.

c) Adduction of shoulder, shoulder internal rotation, elbow extension, forearm pronation and wrist flexion.
d) Adduction of shoulder, elbow extension, shoulder internal rotation, forearm pronation and wrist flexion.

138. Which part of quadriceps muscle is most frequently fibrosed in post injection quadriceps contracture?

a) Rectus femoris
b) Vastus medialis
c) Vastus intermedius
d) Vastus lateralis

139. Which of the following may be present in a child with cerebral palsy?

a) Positive Babinski
b) Positive Tinel's sign
c) Positive Sulcus sign
d) Positive OK sign

140. The following describes the pathology of clubfoot except.

a) Fixed plantar flexion (equinus) of the ankle.
b) Tight Achilles-tendon
c) Adduction, or turning in of the heel or hindfoot
d) Abduction of the heel or hindfoot

141. You should always stand at the ….. When treating a patient with CVA to manege hemi-neglect

a) Affected side
b) Unaffected side
c) Right side
d) Left side

Adwoa Mansa woke up one morning and realised that she has weakness on the left side of her face; she couldn't also close her left eye. When she put water in her mouth, it dripped from the corner of her mouth.

Answer questions 142 and 143 using the above preamble;

142. Which of the following nerves are likely to be affected?

a) CN VIII
b) CV VI
c) CN IX
d) CN VII

143. The diagnosis for Adwoa Mansa's condition is;

a) Left facial palsy
b) Right Bell's palsy
c) Right facial palsy
d) Left Bell's palsy

144. In rehabilitation of a stroke patient you should encourage:

a) Lying on affected side all the time
b) Lying on unaffected side all the time
c) Lying on the back all the time
d) Lying on both sides at different times

145. A patient who has undergone laminectomy surgery at C3-C5 region can do cervical traction after;

a) 1year
b) 3 months
c) Never
d) 6 weeks

146. Biceps brachii acts as a;

a) Flexor of knee
b) Extensor of elbow
c) Flexor of elbow
d) Extensor of knee

147. Which of the following should be considered when performing neurological assessment?

a) McMurray test
b) Sulcus test
c) Proprioception
d) Empty can test

148. Ultrasound can be used to treat;

a) Osteomyelitis
b) Soft tissue injury
c) Open fractures
d) Neglected club foot

149. Which of the following tests is to be done when assessing a cerebral palsied child?

a) Apley's test
b) Scratch test
c) Babinski test
d) Lachman's test

150. Colle's fracture occurs at;

a) Distal 1/3 of radius
b) Proximal 1/3 of radius
c) Olecranon process of ulnar
d) Distal 1/3 of ulnar

151. Continuous passive motion apparatus is used to;

a) Increase range of motion
b) Maintain range of motion
c) Strengthen knee muscles
d) Reduce joint stiffness

152. Which of the following test is done to determine the ante-version of a femur?

a) Craig's test
b) McMurray's test
c) Thomas test
d) Slum test
e) None of the above

153. Interferential therapy is not used for;

a) Muscle stimulation
b) Pain relief
c) Muscle re-education
d) Wound healing

154. Measurement of axillary crutches?

a) 7cm below anterior axillar and 10cm laterally with patient in standing position
b) 5cm below posterior axillar and 15cm laterally with patient in supine lying
c) 4cm below anterior axillar and 10cm medially with patient in supine lying
d) 5cm below posit axillar and 12cm laterally with patient standing

155. Shoulder dislocation is caused by;

a) Flexion with internal rotation
b) Flexion and extension
c) Abduction with external rotation
d) Abduction with internal rotation

156. Degenerative bone disease is called;

a) Osteoarthritis
b) Rheumatoid arthritis
c) Synovitis
d) Gouty arthritis

157. In first aid cardiopulmonary resuscitation is given in the ratio of;

a) 3 mouth breaths to 15 chest compressions
b) 2 mouth breaths to 15 chest compressions
c) 2 mouth breaths to 30 chest compressions

d) 1 mouth breaths to 30 chest compressions

158. CVA can occur in the following centres Except**;**

a) Cerebral cortex
b) Cerebellum
c) A**dductus magnu**s
d) Left cerebral cortex

159. Choose the most appropriate part in handling a stroke patient.

a) Axillary region
b) Trunk
c) Elbows
d) Shoulders

160. Physiotherapy rehab for hip replacement can start;

a) Immediately after surgery
b) 4 days after surgery
c) 1 week after surgery
d) Wait until discharge from hospital

161. Which of the following signs would not be associated with a spinal cord injury?

a) Hands up positioning
b) Right-sided facial paralysis
c) Positive Babinski response
d) Priapism

162. Which of the following statements accurately describes central cord syndrome?

a) All of the above are true.
b) Central cord syndrome typically results in weakness to the upper extremities.
c) Central cord syndrome has a high prognosis for recovery.

d) Central cord syndrome is often associated with pre-existing degenerative disease.

163. Which statement concerning spinal cord injury is *not* true?

a) **Brown-Sequard's syndrome could be caused by a bullet that completely transects the cord**
b) Anterior cord syndrome is caused by compression of the arteries supplying the anterior spinal cord.
c) Central cord syndrome could be caused by hyperextension of the cervical spine.
d) All of the above are true.

164. A patient who has suffered a complete transection of the spinal cord at T-4 would exhibit which of the following signs?

a) The patient would have no sensation below the nipple line
b) The patient would not be able to move the upper extremities.
c) The patient would have no sensation from the shoulders down.
d) The patient would have no sensation around and below the umbilicus.

165. After sitting at a computer station for 2-3 hours, an individual reports experiencing a sharp, localized pain in the left arm. When asked to show the location of the pain, the individual points to the area of insertion of the deltoid. The pain disappears when the individual stands up and walks around briefly. Which of the following interventions is MOST likely to correct the problem?

a) Isometric strengthening of the deltoid.
b) Lumbar extension exercises in prone.
c) Instruction in shoulder active range of motion exercises.
d) Instruction in correct postural alignment in sitting.

166. During a physical therapy evaluation, a patient with a sprain of the deltoid ligament of the ankle reported pain with palpation of the affected area and with ankle motion that stresses the ligament. To determine any change in the patient's pain level during subsequent treatments, a physical therapist assistant should perform which of the following actions?

a) Palpate anterior to the lateral malleolus, and passively plantar flex the ankle.
b) Palpate over the smus tarsi, and passively invert the ankle.
c) **Palpate inferior to the medial malleolus and passively evert the ankle.**
d) Palpate superior to the medial malleolus, and passively evert the ankle

167. Heimlich manoeuvre can be used to treat..

a) Knee conditions
b) Airway obstructions /choking by foreign objects
c) Obstructions in the stomach
d) Wrist Conditions

168. The hydromechanic force exerted on a person submerged in water that normally oppresses the direction of the body's motion.

a) Upthrust
b) Total Drag Force
c) Buoyancy
d) Archimedes principle

169. Which of the following best describes this statement: the upward force on the body when immersed in water is equal to amount of water displaced by the body.

a) Buoyancy
b) Gravitational force
c) Specific gravity
d) Newton's law

170. Hydrotherapy tank used for full body immersion is

a) Highboy Tank
b) Hubbard Tank
c) Herbeden tank
d) Lowboy Tank

171. Which of the following are ccontraindications for Hydrotherapy?

a) Peripheral vascular disease
b) Knee pain
c) Shoulder pain
d) Back pain

172. In hydrotherapy, water exerts pressure that is perpendicular to the body and increases in proportion with the depth of immersion known as;

a) **Hydrostatic pressure**
b) Pascal's pressure

c) Archimedes principle
d) Pascal's principle

173. Therapeutic effects of hydrotherapy do not include;

a) Increase blood flow
b) relaxation,
c) Decrease blood flow
d) wound debridement

174. Whirlpool treatment time is

a) 10-30minutes
b) 5-10minutes
c) 8-35minutes
d) 15-35minutes

175. In managing chronic obstructive pulmonary disease (COPD), airway clearance techniques are techniques that aim to clea

a) Sputum from the chest
b) Sputum from the throat
c) Sputum from the lungs
d) Sputum from the heart

176. Mr Odo visit you with severe low back pain which started two weeks ago. According to him, this is the first episode. Which of the following phases is Mr Obo's condition according to the duration?

a) Chronic phase
b) Acute on chronic phase
c) Sub-acute phase
d) Acute phase

177. Which of the following movements are seen in the scapular among others?

a) Flexion and extension
b) Nutation and counter nutation
c) Protraction and retraction
d) Planter flexion and dorsiflexion

178. Which of the following movements are found in the ankle joint only?

a) RadiaL deviation
b) Ulnar deviation
c) Eversion
d) Extension

179. Anterior cruciate ligament s found in which of the following joints?

a) Radio- ulnar joint
b) Interphalangeal joints
c) Atlanto-occipital joint
d) Knee joint

180. Which of the following bones are found in the upper limb.

a) Lunate
b) Calcaneuos
c) Navicular
d) Talus

181. Which of the following interventions is most appropriate for a client who sustained burns 6months ago with tight scars with decreased range of motion?

a) Strengthening
b) Traction
c) Stretching
d) Facilitation/Inhibition

182. Which of the following forms of cerebral palsy is often seen in children post kernicterus neonatorum (neonatal jaundice)?

a) Severe spasticity
b) Moderate spasticity
c) Athetoid
d) Hemiplegia

183. Which of the following is the best approach for babies with early Erb's palsy?

a) Stretching and other exercises from day –one
b) Tactile stimulations from day-one
c) Correct positioning/corrective splinting against the abnormal pattern from-one

d) Muscle/nerve stimulation from day-one

184. Which of the following palsies are seen as a result of brachial nerve injury in children?

a) Klumpke's and cerebral palsy
b) Erb's and cerebral palsy
c) Erb's and Klumpke's palsy
d) Klumpke's and Bell's palsy

185. Which of the following is typical with Waiter's tip pattern?

a) Klumpke's palsy
b) Erb's palsy
c) Bell's palsy
d) Radial nerve palsy

186. During orthopaedic and neurological assessment of clients, after the subjective and objective assessment and impression……

a) Treatment is carried out
b) X'rays, CT scan., MRI are checked
c) Palpation is done
d) Treatment is planned

187. Lateral epicondylitis is also known as….

a) Tennis elbow
b) Golfer's Elbow
c) Footballer' knee
d) House maid's knee

189. Which of the following is an important point to consider when assessing/ management patients with back pain?

a) Range of motion
b) Passive angular Movements
c) Posture and ergonomics
d) Special tests

e) Differential diagnosis

190. Which of the following statement is **not true** about cerebral palsy.

a) Can be as a result lack/inadequate oxygen supply to the brain
b) Can be as a result neonatal jaundice
c) Physiotherapy management is long term
d) It is hereditary

191. According to the Nagi model and ICIDH …….. is defined as a pathologic state manifested by the presence of signs and symptoms that disrupt an individual's homeostasis or internal balance

a) Impairment
b) Disease
c) Handicap
d) Disability

192. Firing of nerve impulses in neuro physiology is known to follows the ..... principle

a) All but one
b) All in one
c) All and none
d) All or none

193. What is the ROM in a Gleno-humeral ABDUCTION?

a) 0-170
b) 120-140
c) 90-120
d) 40-80

USE THE PREAMBLE BELOW TO ANSWER THE QUESTIONS THAT FOLLOW

An 8 year old boy (see picture below) with a congenital deformation of the L scapula was brought in to see the physiotherapist at a community rehabilitation centre. According to the mother the boy can hardly use the L arm effectively in performing his ADL.

194. What could be the diagnosis for this condition?

a) Winged shoulder syndrome
b) Scoliotic deformity
c) Kyphoscoliotic deformity
d) Sprengel's deformity
e) Shoulder dystrophy syndrome

195. As the physiotherapist on duty which of the following would you NOT consider as being part of the clinical signs of this condition?

a) Pain
b) Regional muscle atrophy
c) Disfigurement
d) Malposition of the scapula
e) Limitation of shoulder movement

196. Quite apart from the major findings, which ONE of these anomalies is OFTEN associated with this congenital deformity above?

a) Heart anomalies
b) Absent or fused ribs
c) Barrel chest
d) Breathing disorders
e) Excessive fatigue

197. Which of the following BEST describes the classical physical signs to be noted in the 8 year old boy?

a) Small and higher than normal scapular position, inferior angle is rotated medially
b) Small and higher than normal scapular position, inferior angle is rotated laterally
c) Small and higher than normal scapular position, inferior angle is displaced medially

d) Small and higher than normal scapular position, superior angle is displaced laterally
e) Small and higher than normal scapular position, superior angle is rotated medially

198. State ONE major functional movement that would be SEVERELY restricted in this 8 year old boy

a) adduction
b) abduction
c) internal rotation
d) lateral rotation

199. Which of these functional activities would the boy need assistance most?

a) Brushing his teeth
b) Wearing his shirt
c) Writing in school
d) Eating

200. A 76 year old pensioner presented at first hand to the physiotherapist a complaint of shoulder pain ruling out Rheumatoid arthritis and osteoarthritis. He was later diagnosed as having a shoulder impingement syndrome after the physiotherapist conducted his physical examination. Apart from the pain which of these movements could be severely affected?

a) Medial rotation
b) Lateral rotation
c) Scapular retraction
d) Abduction
e) Adduction

201. ALL the following are considered goals of chest physiotherapy EXCEPT……

a) Prevent an accumulation of secretions
b) Improve mobilization of secretions
c) Improve cardiopulmonary exercise intolerance
d) Promote more efficient breathing patterns
e) Improve the distribution of ventilation

202. ALL the procedures below are often used in chest physiotherapy EXCEPT

a) Postural drainage
b) Percussion
c) Coughing techniques
d) Stimulation
e) Breathing retraining

203. Even though chest physiotherapy is often administered as a treatment protocol, sometimes it could ALSO be used for PROPHYLACTIC PURPOSES. Which of these conditions or state is chest prophylactic chest physiotherapy indicated?

a) High risk surgery patients
b) Post-op & Neurological patients unable to cough effectively
c) Ventilator patients that tend to retain secretions
d) Patients with a chronic hypertension with long standing pedal oedema

204. In which of the following cases is chest physiotherapy contraindicated?

a) Significant pleural effusion
b) Atelectasis
c) Congestive heart failure
d) Patients with an ineffective cough
e) Pneumonia

205. ONE guideline that all physiotherapists ought to bear in mind during the administering of a chest physiotherapy is that…….

a) It must be administered prior to eating OR one hour after eating
b) It must ONLY be administered prior to eating
c) It must ONLY be administered one hour after eating
d) It must be administered during eating

206. Vibration is OFTEN used during …….

a) Forced inhalation

b) Inhalation
c) Exhalation
d) Inspiration

207**.** When teaching the family how to provide Chest Physiotherapy and postural drainage (PD) for their loved one at home, what instructions should be known by caregivers? THUS, the best times for treatments are usually

a) Any convenient time once the patient is not exhausted
b) In the morning after breakfast and 1 hour before bedtime.
c) In the morning before breakfast and at bedtime.
d) in the morning before breakfast and 1 hour before bedtime
e) In the morning before breakfast and 1 hour before bedtime.

208**.** A very frail and thin looking elderly woman with osteoporosis was referred for chest physiotherapy soon after having undergone abdominal surgery. This was primarily due to her higher risk of developing respiratory complications. What is the best technique for controlling respiratory secretions in this patient?

a) Forceful coughing
b) Percussion
c) Vibration
d) Percussion and vibration

209. To move secretions from small distal airways into larger central airways, a physiotherapist often would utilize _____ and _____.

a) Persussion , vibration
b) Percussion , postural drainage
c) Vibration , postural drainage
d) Vibration , shaking

210. A 72-year-old patient hospitalized with pneumonia is disoriented and confused 2 days after admission. After been referred for physiotherapy, the physiotherapist noticed the client exhibited clinical signs which made him suspect the client was demented and not delirious. What clearly distinguishes the two?

a) They both cause confusion, hence there is no clear cut difference
b) Both Delirium and dementia are associated with all older people
c) Both delirium and dementia cannot be reversed

d) Both delirium and dementia can be reversed
e) Dementia is forgetfulness of events and activities whiles delirium is confusion sometimes associated with change in behavior and perception

211. A 71-year-old patient is diagnosed with moderate dementia as a result of multiple strokes. During assessment of the patient, the physiotherapist is likely to expect to find……..

a) Excessive nighttime sleepiness.
b) Variable ability to perform simple tasks.
c) Difficulty eating and swallowing.
d) Loss of recent and long-term memory.
e) Aggression towards strangers

212. A physiotherapist was called in to see an 87 year old visually impaired elderly woman with an apparent difficulty in walking. On arrival at the house the physiotherapist was alerted by the family that the patient is suffering from Alzheimer's disease with dementia and sometimes can be very aggressive towards strangers. The therapist was noted to have always maintained a firm tactile contact with the client throughout the session. What could possibly explain this approach adopted by the physiotherapist …….

a) It ensures the patient does not fall
b) It reassures the patient , promotes compliance and establishment a cordial relationship
c) So as not to bother the patient using a walking device and to be ready to restrain her from aggression
d) It increases the patient's anxiety
e) It is a random act with no particular meaning

213, Choose the odd of the under listed

a) Cell body
b) Axons
c) Dendrites
d) Astrocytes
e) Myelin sheath

214 Which of the following is the odd one

a) CVA

b) Bell's palsy
c) Cerebral palsy
d) Poliomyelitis
e) Parkinson's disease

215. Select the odd one

a) Shoulder joint
b) Knee joint
c) Hip joint
d) Ankle joint
e) Sacro iliac joint

216. The quality of resistance at the completion of the range of motion of a joint during assessment is….

a) Meniscus
b) Anterior cruciate ligament
c) End feel
d) Collateral ligament

217. Provides immense stability to a synovial knee joint…

a) Bursae
b) Anterior cruciate ligament
c) End feel
d) Collateral ligament

218. Provides marked resistance to the anterior drift of the bones in a synovial knee joint……

a) Meniscus
b) Anterior cruciate ligament
c) End feel
d) Collateral ligament

219. Often prevents 'irritation' of a soft tissue over a bone during Movement…

a) Meniscus
b) Bursae
c) Synovial fluid

d) Collateral ligament

220. It permits some form of 'shock' at synovial knee joints…

a) Meniscus
b) Anterior cruciate ligament
c) Synovial fluid
d) Collateral ligament

221. Which of the following glia cells play a major role in the constitution of the blood-brain barrier?

a) Microglia
b) Astrocytes
c) Ependymal
d) Oligodendrocytes

222. ..... is the neurotransmitter that is often released by all neurons that synapse with muscle

a) Adrenaline
b) Dopamine
c) Acetycholine
d) Serotonin

223. Three different subtypes of neurons in neuroscience are noted and these have been identified based on their….

a) Function
b) Structure
c) Location
d) Length

BELOW IS A POST SURGIVAL RADIOGRAPH OF THE RIGHT HIP OF A 70 YEAR OLD WOMAN WHO FELL AND BROKE HER HIP. Study it critically and answer the questions that follow

224. The procedure could be generally referred to as an …….

a) Arthrodesis
b) Osteotomy
c) Synovectomy
d) Arthroplasty
e) Tenotomy

225. Current evidence based physiotherapy protocol suggests that patients with total hip replacement should start ……..during rehabilitation.

a) FWB, early
b) PWB, early
c) PWB, after two weeks
d) PWB, months
e) FWB, two weeks

226. Leg length discrepancy(LLD) is known to be one of the challenges that is associated with total hip replacement procedure, which of the following challenges COULD ALSO be observed during physical examination of clients with such procedure.

a) Rejection of the prosthesis
b) Irritation of the prosthesis
c) Gait anomaly
d) High quadriceps tone

227. Which of these conservative modes of managing a fracture has a HIGHEST risk of causing vascular and nerve damages

a) Casts
b) Splints
c) ORIF
d) Bandaging

228. In analyzing the effect of a penetrating trauma on a tissue, it is known that the extent of damage is dependent on the …… of the agent on impact.

a) Size
b) Pressure
c) Height
d) Velocity

229. Choose the odd one out

a) Scalds
b) Gun shot
c) Knife stab
d) Penetrating glass injury

230. A joint that permits various degree of movement in all planes is termed…….

a) Synarthrosis
b) Amphiarthrosis
c) Diarthrosis
d) Arthrodesis

231. Which of these joints is more likely to permit the HIGHEST degree of freedom of movement during physical examination?

a) Sacro-illiac(SI) joint
b) Shoulder joint
c) PIP
d) DIP

232. A classic example of a diarthrosis is a ……joint

a) Knee
b) Pubic symphisis
c) MCP
d) Sutures of the skull

233. The **structural classification** of a joint includes fibrous, cartilaginous and ……..

a) Amphiarthrosis
b) Synovial
c) Syndesmosis
d) diarthrosis

234. In the manipulation of a joint, which of these tissues is known to be more flexible to permit more degrees of extensibility?

a) Tendon
b) Ligament
c) Muscles
d) Cartilage

THE RADIOLOGY BELOW WAS PRESENTED BY A PATIENT WHO VISITED YOU FOR THERAPY. Use this to answer questions 235-238 below.

235. What type of joint is this?

a) Ball and socked joint
b) Hinge joint
c) Saddle joint
d) Gliding joint

236. Which of the underlisted movents are possible in the above jointg?

a) Supination and pronation
b) Abduction and adduction
c) Dorsiflexion and planterflexion
d) Internal and external rotations

237. Which of the following structures can be found in above?

a) Meniscus

b) Ligamentum flava
c) Annulus fibrosis
d) Malleoli

238. Which of the following conditions is commonly seen at the physiotherapy centres in the above joint?

a) Osteomyelitis
b) Osteoarthritis
c) Spondylosis
d) Bursitis

239. You read in a patient's folder that he has Parkinson's disease? Which of the following is peculiar with the condition

a) Posterior cerebral artery.

b) Anterior cerebral artery.

c) Substantia nigra.

d) Middle cerebral artery.

240. Which of the following signs /symptom suggest a neurological condition?

a) Pain
b) Sensory impairment
c) Decreased ROM
d) Co-ordination impairment

241. Which of the following exercises improves walking/gait?

a) Slight Leg Raising exercises
b) Bridging
c) Passive exercises
d) Isometric exercises

242. Which of the following is NOT muscle test? Muscle..

a) Strength
b) Stability
c) Length

d) Dermatomes

243. The following are carried out in orthopaedic physical assessment **EXCEPT**

a) Active ROM
b) Passive ROM
c) **Visual assessment**
d) Cutaneous assessment

244. Volume of air inhaled or exhaled during a single normal breath is…….

a) Residual Volume
b) Tidal Volume
c) Lung Volume
d) Minimal Volume

245. Maximum amount of air that can be inspired and expired in a single breath is….

a) Total lung capacity
b) Inspiratory capacity
c) Vital capacity
d) Functional residual capacity

246. Which of the following massage technique is carried out on tendons/ligaments?

a) Effleurage
b) Stroking
c) Deep friction
d) Lymphatic

247. Torticollis is a condition where there is tightness or contracted muscle. Which of the following muscles are involved in torticollis?

a) Trapezius
b) Levator scapulae
c) Pectineus
d) Sternocleidomastoid

248. Which of the following exercises is recommended for post-partum woman to help evolution of the uterus?

a) Stretching of abdominal muscles
b) Stretching of pelvic floor muscles
c) Strengthening of pelvic floor muscles
d) Isometric exercises of the cervical spine

249. Which of the following nerves are commonly compressed during labour?

a) Uterine nerve
b) Pudendal nerve
c) Obturator nerve
d) Peroneal nerve

250. Erb's palsy is a condition which results mostly during labour. Which of the following is responsible during labour?

a) Restitution
b) Shoulder dystocia
c) Neck dystocia
d) Brachial nerve dystocia