- 1. In the presence of a metallic implant, which modality is likely to cause a tissue injury?
 - .A. Short wave diathermy
 - B. Ultrasound therapy
 - C. Neuromuscular stimulation
 - D. Interferential therapy
- 2. Which of the physiologic effect can be expected in ultrasound treatment?
 - A. Occurrence of pain is due to vacuolation in deep tissues
 - B. Can cause cracks in osteoporotic bones
 - .C. Promotes healing by acceleration of blood flow
 - D. Energy absorption is efficient in connective tissue, collagen and scar tissue
- 3. In a patient with long duration muscle pains diagnosed as fibromyalgia, which is the best treatment option?
 - A. Soft LASER to painful areas
 - •B. Aerobic exercises
 - C. ADL activities
 - D. IFT over painful areas
- 4. How does Tilt tabling help in treatment in physiotherapy?
 - A. Helps in mobilizing a patient in coma
 - B. Helps in better respiratory control
 - C. Helps in better postural control
 - D. Helps to improve disorientation
- 5. The best use of FES (functional electrical stimulation) is in:
 - A. Wrist dorsiflexion in spastic upper limb
 - B. Foot dorsiflexion in cauda equina syndrome
 - C. Shoulder subluxation in GBS
 - D. Recovering wrist drop
- 6. Which treatment gives best result in carpal tunnel syndrome?
 - A. Ultrasound therapy to wrist
 - B. Stroking massage to ventral aspect of wrist
 - .C. Use of Wrist splint
 - D. LASER therapy
- 7. Which of the following is true of Bell's palsy?
- ∠ A. Regular faradic stimulation gives improvement in most cases
 - B. NMES gives good results in patients who do not show early improvement
 - C. FES for mouth and cheek function is very effective
 - D. Re-education and exercises are effective
 - 8. What is unique about Interferential therapy?
 - A. High frequency stimulation with medium frequency effects
 - . B. Medium frequency stimulation with low frequency effect
 - C. Low frequency stimulation with low frequency effect
 - D. High frequency stimulation with low frequency effect
 - 9. If a person using axillary crutches reports with weakness, the most important muscle to be tested is:
 - A. Triceps
 - B. Deltoid
 - C. Pectoralis
 - D. Rotators
- 10. Gait difficulty in a patient in ICU for 48 hours could be due to:
 - · A. Lateral popliteal nerve palsy
 - B. Tibial nerve palsy
 - C. Stiffness of ankle or tendo Achilles
 - D. Postural hypotension

- 11. Which of the following denotes Cardiac output?
 - A. Blood pumped by each ventricle in one minute
 - B. Blood pumped by both ventricles in a beat
 - C. Blood pumped by each ventricle per beat
 - D. Blood pumped by each atrium and ventricle per minute
- 12. The characteristic of broncho-pulmonary segments is:
 - A. Conical in shape and is directed to the apex of lung
 - B. Has its own bronchus but shares artery and vein with other segments
 - •C. Is pyramidal and has its own bronchus and artery
 - D. Has its own shape but shares vascular, lymphatic and respiratory connection with others
- 13. A 60-year old woman undergoing chest physiotherapy and postural drainage gets an acute pain in the infra-axillary area, increasing with inspiration. What is the likely problem?
 - A. Acute strain in intercostals muscles
 - B. Pneumothorax
 - ·C. Fracture rib
 - D. Pleuritis
- 14. The level of diaphragm is:
 - A. The 10th rib anteriorly and 10th rib posteriorly
 - B. The 8th rib anterioly and 10 th rib posteriorly
 - C. The 8th rib anteriorly and 8th rib posteriorly
 - D. The 6th rib anteriorly and 10th rib posteriorly
- 15. Which of the following can act during exhalation/expiration?
 - A. Rectus abdominis
 - B. Rectus abdominis and oblique abdominal muscles
 - C. Transversus abdominis muscle
 - D. Transversus and external oblique muscles
- 16. What is the clinical significance of partial pressures?
 - A. It is the product of pressure in the blood vessel and the number of gases present
 - , B. Roughly, it denotes how much a particular gas is present in blood
 - C. It denotes the force with which a gas can act in blood
 - D. It is an approximate measure of metabolic availability of a gas in blood
- 17. What increases the respiratory rate?
 - A. Increased oxygen and decreased carbon dioxide levels
 - B. Increased oxygen levels
 - »C. Increased carbon dioxide levels
 - D. Unrelated to oxygen and carbon dioxide levels
- 18. In a typical ECG, one of the following is true:
 - A. The QRS represents atrial repolarization
 - B. The QRS represents atrial depolarization
 - C. The QRS represents ventricular repolarization
 - •D. The QRS occurs due to ventricular depolariation
- 19. Which of the following is true of coronary artery disease?
- * A. A plaque is made up of LDL, platelets and fibrin
 - B. A plaque results in compensatory collateral circulation
 - . C. If coronary artery is blocked, the SA node activity slows down
 - D. A plaque is made up of fat, cholesterol, calcium and other substances in blood
- 20. The uses of elbow crutch would include which of the following?
 - A. Helps in controlling gait dysfunction in Parkinson's disease
 - B. Helps in compensating weakness of abductors of contralateral side
 - C. Helps in compensating weakness of both hip abductors
 - D. Helps in controlling quadriceps weakness and/or recurvatum

- 21. Which of the following is true with Borg rating of perceived exertion scale in cardiac rehab?
 - A. Since it is a self reported level of exertion, it cannot be physiologically useful
 - B. The level reported by the patient generally indicates the heart rate
 - C. The patient reported level has no clinical value, because patients are on medications
 - D. The patient reported level closely follow cardiac output
- 22. Endurance type exercise training in cardiac rehab affects:
 - .A. Favourably influences VO₂
 - B. Negatively on autonomic function
 - C. No effect on peripheral vascular function
 - D. No effect on long term outcome
 - 23. The impact of exercise based cardiac rehabilitation is:
 - A. Has short term benefits, but on the long term, increases mortality
 - B. Lowers mortality rates on the long term
 - C. Repeat hospitalization is higher in patients on exercise
 - D. No significant role is seen in two year studies
 - 24. Strength training in cardiac rehabilitation:
 - A. Is risky, as VO₂ increases even to minor resistance exercises
 - B. Can cause sudden collapse in patients in recovery stage
 - C. Improves physical function and reduces disability
 - D. Patients report more exertion and fatigue
 - 25. Which of the following is true of Cardiac rehab?
 - A. Improves depression in patients
 - B. Decreases need for medications
 - C. Risky in patients on cardiac devices
 - D. Risky in patients with cardiac failure
 - 26. Which of the following is true in exercise prescription in cardiac rehab?
 - A. Borg perceived exertion level to be maintained around 16 17
 - B. Exercise quantity is around 3 6 MET -h/week initially
 - C. Start only with 75 80% of maximal heart rates
 - D. Initially patients should be continuously monitored for a week
 - 27. Patient selection for cardiac rehab includes:
 - A. Include patients in functional class II, III and IV
 - B. Include patients with one week of clinical stability after a hospitalization
 - C. Include patients with one month of clinical stability after a hospitalization
 - D. Include any patient at least two weeks after discharge, irrespective of class
- _ 28. The best goal of cardiac rehab includes:
 - A. Improve physical activity while patient follows his/her own lifestyles
 - B. Focus on lifestyle, rather than physical activity
 - · C. Reduce chances of mortality
 - D. Improve strength and lower risks of more issues
 - 29. In posterior interosseous nerve palsy, the following feature is seen:
 - A. Grip becomes weaker
 - B. Wrist palmar flexion and dorsiflexion are weak
 - C. Wrist dorsiflexion and finger extension are absent
 - D. Active wrist dorsiflexion is possible
 - 30. What is true in sexual function after myocardial infarction?
 - · A. Patients should be advised of risks in sexual activity for six months
 - B. Sudden deaths have occurred soon after sexual activity
 - C. Death is practically unrelated to sexual activity
 - D. Safety of sex after myocardial infarction is not established

- 31. During rehabilitation in Multiple Sclerosis, which of the following is true?
 - A. Exercises progressively reduce fatigue
 - . B. When intolerance to heat occurs, it can affect rehab
 - C. All patients need a modality for pain control
 - D. ES can reduce muscle cramps
- 32. Gait difficulty in Parkinson's disease includes ALL of the following EXCEPT
 - •A. Freezing does not occur while walking in familiar surroundings
 - B. Walking quality decreases when attention is drawn away from walking
 - C. Gait speed is affected, and freezing occurs while walking
 - D. Even minor architectural obstacles worsen gait
 - 33. Physiotherapy in Parkinson's disease is effective because:
 - . A. Exercise and movement strategies improve mobility
 - B. Exercises enhance effects of medication
 - C. Exercises improve muscle strength
 - D. Physiotherapy slows down disease progression
 - 34. In CIDP, the physiotherapy plan will include all of these EXCEPT:
 - A. Strengthening exercises will improve muscle force in weaker muscles
 - , B. Simple aerobic exercises have no value in recovery
 - C. Before scaling up resistance exercises, a muscle should have reached grade 3
 - D. Orthotic support should be given early
- 35. What is true regarding Vibration in chest physiotherapy?
 - A. Vibration is applied during inspiration phase
 - B. Pressure is applied in the opposite direction as chest movement
 - .C. Vibration is applied during expiration phase
 - D. Manual vibration is more effective than mechanical vibration
- 36. Present level of evidence for Virtual Reality training in stroke is:
 - A. Present evidence suggests that conventional physiotherapy works better
 - B. Since patients perform activities themselves, motor deficits soon discourage them
 - C. In immersive VR system, patients are unable to concentrate for sufficient time
 - D. Evidence that VR is useful in stroke is emerging
 - 37. In a dynamic wrist hand orthosis for radial nerve palsy, which of the following is true?
 - A. Active finger extension; assisted flexion
 - B. Active finger flexion; assisted extension
 - C. Both flexion and extension of fingers assisted
 - D. Both flexion and extension of fingers active .
- 38. An adolescent with 30° scoliosis is likely to benefit from:
 - · A. Spinal orthosis
 - B. Posture correction exercises
 - C. Exercises and electrical stimulation
 - D. Scoliosis surgery
 - 39. What is true of osteoporosis?
 - A. Weight bearing exercises reverse osteoporosis
 - B. Generalised muscle pain is a common feature
 - C. Neuropathies can occur frequently
 - . D. Can get fractures easily. even with minor strains
 - 40. Which of the following is true of Constraint Induced movement Therapy in stroke?
 - A. Patients with non-functional hand shows moderate improvement in 6 weeks
 - B. Can be tried in most of the stroke survivors
 - C. Can benefit only those who have some residual wrist and hand function
 - D. Needs to be tried within a year of stroke incidence

- 41. Within physiotherapy practice, what does confidentiality mean?
 - A. Discussion with the patient and care-giver about therapy is not essential
 - B. Discuss with the care-giver only those details available in the patient file
 - C. Discuss patient's details with the immediate care-giver
 - . D. Discuss only therapy aspects with the patient or the immediate care-giver
- 42. The nerve most likely to be involved in supra condylar fracture is:
 - .A. Median nerve

- B. Ulnar nerve
- C. Musculocutaneous nerve
- D. Both median and ulnar nerves
- 43. The muscles forming the rotator cuff of shoulder include:
 - A. Supraspinatus, infraspinatus and teres major
 - B. Supraspinatus, long head of biceps, and infraspinatus
 - ·C. Infraspinatus, teres minor and subscapularis
 - D. Teres major, subscapularis and long head of biceps
- 44. Physiotherapy for spondylolisthesis should ideally include:
 - A. Strengthening of paraspinal muscles, pelvic and hip exercises
 - B. Core muscle strengthening and abdominal exercises
 - C. Spinal exercises and hamstring stretching
 - . D. Spinal flexion exercises, isometrics and gluteal sets
- 45. Which of the following is part of Activities of Daily Living (ADL)?
 - A. Food preparation and Eating
 - B. Housekeeping and Transfers
 - . C. Bathing and Continence
 - D. Handling money and Shopping
- 46. One of the objectives of Proprioceptive Neuromuscular Facilitation is:
 - A. Stimulating the brain to learn new techniques of motion after injury
 - B. Using synergistic and anti synergistic patters to overcome paralysis
 - C. Discovering energy saving motions to compensate for weak or painful patterns
 - D. Employing diagonal contract-relax stretching patterns to improve movement
- 47. A child with spastic cerebral palsy who walks with flexion at hip, knee and ankle would need:
 - A. AFO
 - B. KAFO
 - .C. HKAFO
 - D. HKAFO with pelvic band
- , 48. The NDT (Neuro Developmental Therapy) approach relates to:
 - A. Inhibiting abnormal movement patterns and superimposing normal patterns on abnormal movement patterns
 - B. Inhibiting abnormal patterns by casting and facilitating tonic reflex patterns
 - •C. Facilitating asymmetric tonic neck reflexes in quadruped standing and motion
 - D. Facilitating mass movements and reflex patterns and limiting proximal motion
- 49. When deciding on a wheelchair which of the following statements is true?
 - A. The centre of the shoulder joint should be two inches ahead of the hub of the rear wheel and the finger should reach midway between the tyre and hub
 - B. The centre of the shoulder joint should be above the hub of the rear wheel and the finger should reach the hub
 - C. The centre of the shoulder joint must be well behind the hub of the rear wheel and fingers should reach beyond the tyre
 - D. The centre of the shoulder must be two inches in front or back of the hub and fingers must reach beyond the rear wheel
- \$50. What are the features of Broca's aphasia after stroke?
 - A. Inability to understand speech, inability to produce meaningful speech
 - . B. Ability to understand speech and ability to repeat what is spoken to
 - C. Ability to produce meaningless words, inability to understand or recall
 - D. Inability to produce meaningful speech, ability to understand speech

MFCP OF PHYSIOTHERAPIST A TO B (13/03/2018)

ANSWER KEY

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1	A	21	В	.	41	D
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2	D	22	A	4	12	A .
3	В	23	В		13	C
4	C	24	C	4	14	В
5		25				
3	A	25	A	4	15	<u>C</u>
6	С	26	В	4	16	D
7	D	27	C	4	17	В
8	D	28	D	4	18	A
9	A	29	D	4	19	В
10	A	30	C		50	D
10	- · ·					
11	A	31	В			
12	С	32	A			
13	C	33	A			
14	D	34	В			
15	В	35	C			
16	В	36	D .			
17	C	37	В			
18	D	38	A			
19	D	39	D		-	
20	В	40	C			