Dr. D. Y. PATIL VIDYAPEETH FACULTY OF ALLIED MEDICAL SCIENCES ACADEMIC REGULATIONS

BACHELOR OF PHYSIOTHERAPY (BPT)

PREAMBLE:

The Bachelor of Physiotherapy (BPT) undergraduate degree course is a 4-year and 6 months (8 semesters & 6 months internship) fulltime program. The program is generic in nature and has a component of additional learning of one area leading to another area with choice based study in the final year to focus the career development based on his/her interest. The program focuses on overall development of the student including language and soft skill, emergency care and professional ethics. Psychosomatic aspects of training are a component through all the areas.

NOMENCLATURE:

The course will be referred to as a Bachelor of Physiotherapy (BPT).

PROGRAMME OUTCOME:

At the end of the BPT programme, the graduate shall:

- Acquire the knowledge of foundation courses like Human Anatomy, Human Physiology, Exercise Therapy and Electrotherapy along with the basic medical subjects which will provide a strong foundation for their practice of Physiotherapy.
- Develop the required skills & techniques of physiotherapy to assess & treat various physical and functional disorders of the human body.
- Acquire the attitude to practice the profession with moral and ethical values.
- Have the interests for providing physiotherapy services to the needy in the community.
- Inculcate the various skills in patient care handling including communication skills, confidence, clinical reasoning, counseling and research.

ELIGIBILITY FOR ADMISSION:

Eligibility of a candidate for admission to Bachelor of Physiotherapy programme will be according to the regulations for admission decided by Dr.D.Y.Patil Vidyapeeth, Pune.

DURATION OF THE PROGRAM:

The duration of Bachelor of Physiotherapy (BPT) programme shall be of four academic years (8 semesters) and six months of Compulsory Rotatory Internship. It shall have 8 semesters each having a span of 20 weeks of working, of which the teaching and learning program shall not be less than 16 weeks of course duration (672 clock hours) excluding the time scheduled for examination and evaluation process of the university and college. It includes a 6 months (26 weeks) internship leading to degree that equips the student with analytical and hands-on skills. Each academic year shall comprise of two semester viz. Odd and Even semesters. Odd semesters shall be from July/August to December and Even Semesters shall be from January to May/June.

MEDIUM OF INSTRUCTION:

English shall be the medium of instruction for all the courses of study and for the examinations

FACULTY-STUDENT RATIO:

The teacher: student ratio should be such that the number of teachers to the number of students admitted per year is 1:15.

CLINICAL TRAINING OUTLINE OF THE COURSE:

Clinical training comprises all of the formal and practical "real-life" learning experiences provided for students to apply classroom knowledge and skills in the clinical environment. Experiences would include those of short and long duration (Supervised Clinical Training& Internships) and those that provide a variety of learning experiences (e.g. rotations on different units within the same practice setting, rotations between different practice settings within the health care system) to include comprehensive care of patients across the life span and related activities. Each student will be under the supervision of a faculty at the clinical education site who directly instructs and supervises students during their clinical learning experiences.

ATTENDANCE

A student must have a minimum of 80% attendance to be eligible to take up the examinations. Only those students who have pursued a regular prescribed course of study for the semester will be allowed to appear in the University Examinations that are held at the end of their respective semesters.

CONDONATION OF ATTENDANCE

There shall be no condonation of attendance in graduate studies. (However 5% compensation shall be permitted with the discrete permission of the authorities in case of Epidemic illness only.)

EXAMINATIONS AND ASSESSMENT

- 1. The examination for the BPT degree will consist of both formative and summative pattern: Written assignment as required or stipulated by the teacher, Clinical, oral, and practical examinations as the case maybe.
- 2. For the course subjects, two internal assessment examinations (one periodical & one preliminary examination) shall be conducted by the faculty at specified intervals, during the course of the semester, will be calculated and simplified for 20% of the final total of the University marks and submitted to the Head of the institution for including in the University examination. The periodical Theory tests shall be in MCQ pattern & Practical shall be as OCSE /OSPE/SPOTS/demonstration form as applicable. However the prelims exam shall be as per the university examination pattern.
- 3. For the Supervised Clinical/Practical Training of the respective semester, student should complete the assignments, records, journals, case submissions, case presentations, as applicable per subject. The SPT/SCT shall carry 5 marks and submitted to the Head of the institution for including in the University practical examination.
- 4. Student should pass in the Internal Assessment exams with 35 % to appear for the University examinations. Continuous clinical assessment will be carried out though out the semester.

CRITERIA FOR PASSING UNIVERSITY EXAMINATION

To pass the University Examination,

- 1. A candidate must pass in two heads of passing i.e. Theory and Practical separately at the same time.
- 2. In the Theory Examination the Candidate must obtain 50 % of the total Marks to pass theory examination irrespective of the parts.
- 3. To pass in practical exam, candidate must obtain 50% of total marks to pass practical exam.
- 4. A candidate must obtain an aggregate of 50 % to pass in the respective subject(s).

RULES FOR ATKT

The candidate shall be promoted to subsequent semester (from I semester to II semester to III semester to III semester to IV semester, from IV semester to V semester, V semester to VI semester, VI semester to VII semester, VII semester to VIII semester, even if he/she fails in one or two subjects in the current semester of study. However, he/she must pass in these subjects within six months. To appear for subsequent examinations he/she must pass in all subjects of the previous semester. (ie, a candidate shall be promoted from I semester to II semester even if he/she has failed in two subjects or less, the candidate shall be permitted to appear for both I & II semester during his/her term of second semester. However he/she shall not be permitted to appear for the III semester unless he/she completely clears the first semester, this continues for rest of the semesters). A candidate failing in more than two subjects will not be permitted to proceed to next class. It is mandatory for the candidate to pass in all subjects of the previous even semester to be eligible for the next even semester. The candidate shall be eligible for internship program only after successful completion of the VIII semester.

RULES FOR GRACE MARKS

The grace marks up to a maximum of five may be awarded to a student who has failed only in one subject but has passed in all other subjects. These five marks shall be distributed in different heads of passing of that subject. Provided that these grace marks shall be awarded only if the student passes after awarding these marks. (Refer clause 59, Bye-laws of Dr. D. Y. Patil Vidyapeeth, Pune.).

SCORING – THE CBCS SYSTEM

All Programmes mention shall run on Choice Based Credit System (CBCS). It is an instructional package developed to suit the needs of students to keep pace with the developments in higher education and the quality assurance expected of it in the light of liberalization and globalization in higher education.

COURSE

Each Course (subject) shall be designed under lectures / tutorials / laboratory or field work / seminar / practical training / Assignments / Term paper or Report writing etc., to meet effective teaching and learning needs.

BIOETHICS IN THE CURRICULUM.

It is the study of the typically controversial ethical issues emerging from new situations and possibilities brought about by advances in biology and medicine. It is also moral discernment as it relates to medical policy and practice. Bioethicists are concerned with the ethical questions that arise in the relationships among life-sciences, biotechnology, medicine, politics, law, and philosophy. It also includes the study of the more commonplace questions of values ("the ethics of the ordinary") which arise in primary care and other branches of medicine. The curriculum does not have complete course, but is a source of inspiration. The course content should not be treated as a comprehensive curriculum in bioethics. It is recognized that the content of the core curriculum does not necessarily cover all aspects of bioethics. Traditional issues that have not been included could be incorporated as examples that are pertinent to one or several of the Declaration's principles within the curriculum's framework.

RATIONALE FOR INTRODUCTION OF CBCS

The UGC while outlining the several unique features of the Choice-Based Credit System (CBCS) has, in fact, given in a nutshell, the rationale for its introduction. Among the features highlighted by the UGC are:

- Enhanced learning opportunities, ability to match learners' scholastic needs and aspirations, inter-institution transferability of learners(following the completion of a semester),
- Improvement in educational quality and excellence,
- Flexibility for working learners to complete the programme over an extended period of time,
- Standardization and comparability of educational programmes across the country, etc. Some of the specific advantages of using the Credit system as outlined in the available literature on the topic are as listed below:

ADVANTAGES OF THE CREDIT SYSTEM

- Represents a much-required shift in focus from teacher-centric to learner-centric education since the workload estimated is based on the investment of time in learning, not in teaching.
- Helps to record course work and to document learner workload realistically since all activities are taken into account not only the time learners spend in lectures or seminars but also the time they need for individual learning and the preparation of examinations etc.
- Segments learning experience into calibrated units, which can be accumulated in order to gain an academic award.
- Helps self-paced learning. Learners may undertake as many credits as they can cope with without having to repeat all the courses in a given semester if they fail in one or more courses.
- Alternatively, they can choose other courses and continue their studies. 'Learner Autonomy'.
- Makes education more broad-based. One can take credits by combining unique combinations.
- Credits earned at one institution can be transferred to another.
- Helps in working out twinning programmes.
- Is beneficial for achieving more transparency and compatibility between different educational structures.
- A credit system can facilitate recognition procedures as well as access to higher education for non-traditional learners

GRADING:

The total of the internal evaluation marks and final University examination marks in each course will be converted to a letter grade on a ten point scale as per the following scheme as recommended by UGC:

Letter Grades and Grade Points:

Letter Grades	Grade Points	% of marks
O (Outstanding)	10	80 and above
A+(Excellent)	9	75-79
A(Very Good)	8	70-74
B+(Good)	7	65-69
B(Above Average)	6	60-64
C(Average)	5	55-59
P(Pass)	4	50-54
F(Fail)	0	<50
Ab (Absent)	0	0

A student obtaining Grade F (or) Grade point '0'shall be considered failed and will be required to reappearin the examination.

COMPUTATION OF SGPA AND CGPA:

The UGC recommends the following procedure to compute the Semester Grade Point Average (SGPA) and Cumulative Grade Point Average (CGPA):

The SGPA is the ratio of sum of the product of the number of credits with the grade points scored by a student in all the courses taken by a student and the sum of the number of credits of all the courses undergone by a student, i.e SGPA (Si) = Σ(Ci x Gi) / ΣCi

where Ci is the number of credits of the ith course and Gi is the grade point scored by the student in the ith course.

• The CGPA is also calculated in the same manner taking into account all the courses undergone by a student over all the semesters of a programme, i.e. **CGPA** = Σ (Ci x Si) / Σ Ci

where Si is the SGPA of the ith semester and Ci is the total number of credits in that semester.

• The SGPA and CGPA shall be rounded off to 2 decimal points and reported in the transcripts.

Illustration of Computation of SGPA and CGPA and Format for Transcripts

i. Illustration for computation of SGPA for I semester

Course	Course Credit		Grade Point	Credit Point (Credit x Grade)	
Course 1	7	B+	7	7X7=49	
Course 2	6	Α	8	6X8=48	
Course 3	3	В	6	<i>3X6=18</i>	
Course 4	10	A+	9	10X9=90	
Total	26			205	

Thus, SGPA =205/26 =7.884

ii. Illustration for CGPA

Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 6
Credit:26	Credit:26	Credit:28	Credit:27	Credit:26	Credit:25
SGPA:7.05	SGPA:7.8	SGPA:5.6	SGPA:6.0	SGPA:6.3	SGPA:8.0
Semester 7	Semester 8	Internship			
Credit:23	Credit:23	Credit : 14			
SGPA:6	SGPA:6				

Thus, CGPA = 26 x7.05+26 x 7.8+ 28 x5.6+27 x 6.0+26 x 6.3+25 x 8.0+23x6+23x6

= **6.58**

INTERNSHIP:

There shall be six months (26 weeks) of Internship after successfully completing the VIII semester examination for candidates and had been declared to have passed the examination in all the subjects. Internship shall be done in any hospital recognized by the Vidyapeeth. No candidate shall be awarded degree certificate without successfully completing six months of Internship.

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The Internship should be rotatory and cover clinical branches concerned with Physiotherapy such as Orthopaedics, Cardiothoracic including ICU, Neurology, Paediatrics, General Medicine, General Surgery, Obstetrics and Gynaecology both at the inpatient and outpatient services. On completion of all postings, the duly completed logbooks will be submitted to the Principal/Head of program to be considered as having successfully completed the internship program. The student has to do the project in the internship as part of the curriculum of BPT course and submit it for the fulfillment of the degree.

AWARD OF DEGREE :

Every student of the programme who fulfils the following criteria will be eligible for the award of the degree provided

- He/She should have earned at least minimum required credits as prescribed in course structure,
- He/She should have cleared all internal and external evaluation components in every course,
- He/She should have successfully completed the internship with project work.
- He/She should have secured a minimum CGPA of 4.00 at the end of the programme BPT.
- The student who fails to satisfy minimum requirement of CGPA will be allowed to improve the grades so as to secure a minimum CGPA for award of degree. Only latest grade will be considered.

AWARD OF CLASS:

The class awarded to a student in the programme is decided by the final CGPA as per the following scheme:

Distinction: CGPA \geq 7.50 First class: CGPA of 6.50 to 7.49 Second Class: CGPA of 5.00 to 6.49

TRANSCRIPT:

The transcript issued to the student at the time of leaving the University will contain a consolidated record of all the courses taken, credits earned, grades obtained, SGPA,CGPA, class obtained, etc.

Sem.	Foundation course	Core course	Allied course	Enhancement course
1	 Human Anatomy -I Human Physiology -I Electro Therapy- I * 			• English & Communication Skills
2	 Human Anatomy -II Human Physiology-II Exercise Therapy -I* 		• Biochemistry	• Computer Science
3	 Exercise Therapy-II* Biomechanics 		• Pathology & Microbiology	PsychologyFirst Aid & Emergency care
4	• Electro Therapy-II*	• Gen. Medicine (including Gerontology & Dermatology)	 Pharmacology, Community Medicine, Sociology & Environmental. Sciences 	
5	• Physical & Functional Diagnostic skills*	 Orthopaedics & Traumatology Neurology (including Pediatrics & Psychiatry) 	• Obstetrics and Gynecology	
6	Physiotherapeutic Skills	• General Surgery (including Plastic Surgery)	• Research Methodology and Biostatistics	• Bioengineering & Professional Ethics*
7		 Physiotherapy in Musculoskeletal Sciences Physiotherapy in Community Based Rehabilitation.* 		 Choice Based Course (Physiotherapy in Paediatrics/ Manual Therapy)
8		 Physiotherapy in Neurological Condition* Physiotherapy in Cardio- Respiratory & General Conditions 		• Choice Based Course(Sports Physiotherapy /Hand Rehabilitation)

CLASSIFICATION OF COURSE IN UG DEGREE PROGRAM:

*the course curriculum of bioethics, has been segregated as per the applicability in the following subjects

SEMESTER – I

Course	Course Title	Hours						
Code	Course The	Th	Pr	SPT	Total			
PT-101	Human Anatomy- I	64	64	48	176			
PT-102	Human Physiology- I	64	32	48	144			
PT-103	English & Communication Skills	32	0	48	80			
PT-104	Electro Therapy- I	80	96	96	272			
	Total	240	192	240	672			

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	Course Title :- Human Anatomy-I Course Code:- PT 101																
	Course Credit for Human Anatomy –I																
Hours Hrs/Wk Credits						Ev	aluati	on Pat	tern								
												W	ritten	Total	Pr	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	ТА	Final	Final	ТА	Final	Final
						IA	exam	exam	IA	exam	exam						
64	64	48	176	4	4	3	11	4	2	1	7	10	40	50	10	40	50

Learning Objectives:

At the end of the course, the candidate should be able to -

1. Identify and describe anatomical aspects of muscle, bones & joints and analyze movements of upper extremity, Thorax, Head, Neck & Face.

- 2. Understand Histology & general Embryology.
- 3. Know the anatomical basis of various clinical conditions e.g. Trauma, deformities, pertaining to upper limb, spine & Head, Neck & Face.
- 4. Localize various surface landmarks.
- 5. Identify and describe various components and contents of the Thorax- with special emphasis to tracheo-bronchial tree & cardio- pulmonary system.
- 6. Demonstrate the movements of various joints of upper extremity and spine.
- 7. Distinguish major arteries, veins and Lymphatic with special emphasis to extremities and spine.
- 8. Identify and describe the source, course of major arterial, venous and lymphatic system, with special emphasis to upper extremities, thorax and spine.

Course Content							
Topic		Hours of					
Serial	Title of content	teaching	g/learning				
No.		Theory	Practical				
1	General Introduction	6	-				
	Must to know)						
	• Histology-Cell, tissues of the body, epithelium, connective tissue, cartilage, bone, lymph,muscle, nerve etc.	2	-				
	• Osteology-Formation, function, growth and repair of bones.	2	-				
	<i>Nice To Know</i> General Embryology-Ovum, spermatozoas, fertilization, differentiation, development of various systems and foetal circulation	2	-				
2	Systems of Human body (a brief Outline)	20	12				
	 Must to Know Cardio Vascular System –Arteries, capillaries, veins, heart, lymphatic system. 	4	2				

	• Respiratory System –Anatomy of upper and lower respiratory tract including nose larvny, trachea bronchi	4	2
	pleura and lungs		
	• Axial skeleton	3	2
	Sensory Organs	3	2
	Desirable To Know		
	• Urogenital System – Anatomy of Urinary system male and	4	2
	female reproductive system (emphasis on female system)		
	Nice To Know	2	2
	• Digestive System – Anatomy of gastro-intestinal tract.		2
3	UPPER EXTREMITY(Must to know)	15	25
	Osteology	5	15
	• Outline the anatomical features, attachments, ossification		
	and side determination of the bones of : Clavicle, Scapula,		
	Humerus, Radius, Ulna, Carpals, Metacarpals, Phalanges		
	Muscles, Nerves & Joints of upper limb	10	10
	• Fascia and Muscles of front and back of upper arm: origin, insertion, nerve supply and action.		
	• Muscles of front and back of forearm: origin, insertion,		
	nerve supply and action.		
	• Mention the small muscles of hand with their origin,		
	insertion, nerve supply and action.		
	• Identify the nerves of upper limb and mention their		
	position course, relations and distribution.		
	• Detail explanation of joints of upper limb: shoulder guide,		
	Shoulder joint, Elbow,		
	• Wrist and joints of hand.		
	• Indicate the blood vessels of upper limb and mention their		
	position course, relations, distribution and main branches.		
	Lymphatic damage of upper limb		
	• Applied anatomy of all structures of U/L		
	Surface Anatomy:		
	• Bony landmarks of upper extremity.		
	 Palpation of peripheral arteries & nerves 		
4	THORAX (<i>Must to know</i>)	8	5
	• Ribs: Parts and main features of typical rib and define true	3	2
	false and floating ribs.	-	-
	 Sternum: State the parts and anatomical features 		
	Intercostal muscles and diaphragm: origin, insertion, nerve		
	supply and action.		
	• List layers of anterior Abdominal wall and mention its		
	origin, insertion, nerve supply and action of these muscles.		
	Joints of Thorax:		
	Identify the various joints & explain in detail:		
	Manubriosternal joint	5	3
	Costo vertebral joint		
	Costo transverse joint		
	CostoChondral joint		
	Chondro sternal joints		
L			

	Inter vertebral joint		
	Movements of vertebral column-Respiratory movements		
	• Mention thecourse ,branches, nerves, blood vessels and		
	lymphatic drainage of thorax.		
	Intercostal space and its content		
	• Diaphragm-structures passing through it.		
	Applied Anatomy of structures of thorax		
5	HEAD, NECK AND FACE (special emphasis on myology	15	22
	and osteology)	15	<u> </u>
	Must Know		
	Muscles & Vessels of neck	08	15
	• Facial muscles & orbit.		
	• Temporo-Mandibular joint,		
	Cervical vertebrae & Skull.		
	Cranial nerves		
	Desirable to know		
	Triangles of neck	5	5
	• Larynx, Pharynx,	5	5
	Endocrine glands.		
	Nice To Know		
	Lateral wall of nose	2	2
	Salivary glands	-	-

Sr.No.	Title
1	Inderbir Singh Textbook of Anatomy with colour Atlas-Vol 1 2 3 Jaynee
L	nderon Singh, Textbook of Anatomy with colour Anas-vol. 1, 2, 5 Jaypee
	Brothers.
2	B.D. Chaurasia, Human Anatomy-Volume 1, 2, 3 CBS Publishers & Distributors.
3	Cunningham Manual of Practical Anatomy Vol. I, II, III, Churchill Livingstone.
4	Snell-Clinical Anatomy-Lippincott

Reference Books

Sr.No.	Title
1	Williams & Warwick, Gray's Anatomy-Churchill Livingstone.
2	Extremities by Quining Wasb
3	Anatomy & Physiology by Smout and McDowell
4	Mcminn's et al-A Colour Atlas of Human Anatomy, Mosby.

SCHEME OF EXAMINATION

Evaluation Pattern								
	Written	Total	P	ractical	Total			
IA	Final exam	Final exam	IA	Final exam	Final exam			
10	40	50	10	40	50			

Periodical Examination:

- Written Examination:-20 MCQfor 10 marks, 20 minutes
- Practical Examination:- 10 marks

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• Practical Examination (40 marks)

Sr.No.		Marks
1	Spots	10x2=20 marks
	i. 3 Spots based on Urogenital/Reproductive/special	
	senses/Cardiovascular system	3x2=06 marks
	ii. 2 Spots based on Soft part of Thorax/neck	2x2=4 marks
	iii. 5 Spots based on upper extremity	5x2=10 marks
2.	Viva (15 marks) +Journal (5 marks)	15+5=20 marks
	i. Soft Parts	
	ii. Osteology	
3	journal	5 Marks

• SUPERVISED PRACTICAL TRAINING:

 \blacktriangleright Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the Preliminary examination

Internal Assessment Marks: Theory / Practical:-

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be C	onverted to 10 marks (50/5=10)

	Course Title :- Human Physiology-I Course Code:- PT 102																	
	Course Credit for Human Physiology-I																	
	Hours Hrs/Wk Credits Evaluation Pattern																	
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64	32	18	144	4	2	3	0	4	1	1	6	10	exam	exa	m	10	exam	exam
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	• Immunity – definition, classification, concept of antigen &		
	antibody		
	 Haemostasis – steps, fole of platelets Plood groups – A P O AP and Ph system 		
	• blood groups – A, b, O, Ab and Kir system		
	• Anomias, ESK & FC V	3	
	 Plasma proteins 	5	-
	Anticoagulants		
	 Blood transfusion 		
	Nice to know	1	_
	Haemonhilia	1	
	Thrombocytopenia		
4	Cardiovascular system	20	-
•	Must know	16	
	 General organization and properties of cardiac muscle 	10	
	 Origin and conduction of cardiac impulse 		
	 Cardiac cycle and heart sounds 		
	 Normal heart rate, bradycardia, tachycardia 		
	Normal ECG		
	• Cardiac output- normal values, physiological variations,		
	factors affecting cardiac out- put and regulation		
	• Blood pressure – normal values, measurement,		
	determinants, short term and long term regulation		
	Regional circulation- Coronary, muscular, cerebral		
	Functions of Lymph		
	Pressure and volume changes during cardiac cycle		
	Desirable to know		
	Patho-physiology of circulatory shock and edema	3	
	Hypertension, hypotension		
	Nice to know	1	
	Hemodynamic		
5	Respiratory system	16	-
	Must know	12	
	General organization of respiratory system		
	• Mechanics of respiration – Inspiratory and expiratory		
	muscles, intrapleural pressure, lung & thoracic compliance,		
	surfactant, lung volumes & capacities.		
	• Diffusion of gases		
	Transport of respiratory gases		
	Regulation of respiration		
	• Outline of hypoxia (types & physiological changes)		
	• Acclimatization to high altitude.		
	Dead space, Ventilation/ perfusion ratio		
	• Maximum breathing capacity & breathing reserve		
	Pulmonary function tests.		

	Desirable to know		
	Artificial respiration	2	
	Nice to know	2	
	Asphyxia, cyanosis (types and physiological changes)		
6	Digestive System	8	-
	Must know	6	-
	General organization		
	Mastication and deglutition		
	• Saliva – composition, functions and regulation of salivary secretion		
	• Gastric secretion – composition, mechanism, phases of secretion, regulation and functions.		
	• Outline of gastric emptying and peristalsis		
	• Pancreatic secretion – composition, regulation and functions.		
	• Liver and gall bladder – composition and functions of bile		
	• Movements and functions of small and large intestine,		
	• Defecation reflex,		
	Nice to know	2	-
	• Jaundice		
	Peptic ulcer		
	• constipation, diarrhea		

HUMAN PHYSIOLOGY PRACTICAL

Topic	Course Content	Hours of
Serial		teaching/learning
No.		Practical
1.	Haematology	10
	Hb, RBC, WBC, Blood groups, BT & CT	
2.	Properties of muscles	10
	• Skeletal muscle. SMC, effect of temperature,	5
	velocity of nerve conduction, fatigue, tetanus, all or	
	none law & effect of load.	
	• Cardiac muscle. Normal cardiogram, effect of speed,	5
	temperature, Stannius ligature, all or none law &	
	incomplete tetanus, Nervous regulation of heart,	
	vagal escape.	
	Effect of drugs (adrenaline & acetylcholine)	
3.	Other L. Ds	12
	• Physical fitness- Cardiopulmonary efficiency tests	
	• Stethography, Spirometry	
	• Ergography, Perimetry	
	• ECG	
4	SPT	48

Text Books

Sr.No	Title
1	Text book on Medical Physiology-By Guyton
2	Text book of physiology for physiotherapy – Prof. A. K Jain.
3	Concise Medical Physiology – Sujit K. Chowdhuri
	Essential of Medical Physiology- K. Sembuilingam

Reference Books

Sr.No.	Title			
1	Samson & Wrights Applied physiology.			
2	Principles of Anatomy & Physiology – Tortora.			
3	Textbook of Medical Physiology – Indu Khurana			
SCHEME OF FXAMINATION				

SCHEWE OF EXAMINATION								
	Written	Total	I	Practical	Total			
IA	Final exam	Final exam	IA	Final exam	Final exam			
10	40	50	10	40	50			

Periodical Examination:

- Written Examination:-20 MCQ for 10 marks, 20 minutes.
- Practical Examination:- 10 marks

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	M	CQ	10x1=10 marks
Sec B	1.	Short Notes - Answer any 5 out of 6	5x2=10 marks
	2.	Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3.	Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• Practical Examination (40 marks)

Sr.No.	Spots	Marks
1.	• Haematology- 1	10x2=20
	• Graphs-2	
	Physical fitness-1	
	• BP/ ECG/HR-2	
	• Spirometry- 1	
	• Ergography/ Stethography-1	
	• Perimetry-1	
2.	Viva	15
	-Based on Theory portion	
3	Journal	5

• **<u>SUPERVISED PRACTICAL TRAINING</u>**:Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory / Practical

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Converted	1 to 10 marks (50/5=10)

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• The ability to use non-verbal skills.		
Clinical application		
• Role Play		
Critical Thinking and problem solving skills		_
(desirable to know)	3	
• The ability to identify and analyse problems in complex and		
vague situations as well as to make justified evaluations.		
• The ability to develop and improve thinking skills such as to		
explain, analyse and evaluate discussions.		
• The ability to find ideas and alternative solutions.		
• The ability to think out of the box.		
The ability to make decisions based on concrete evidence		
 Clinical application 		
Role Play		
Toom work		
• The ability to build to good relation interacts with others and		
• The ability to build to good relation interacts with others and work effectively with them to achieve the same objectives		
 The ability to understand and interchange roles between that of 		
• The ability to understand and interchange roles between that of a team leader and a team member		
The ability to contribute towards the planning and coordination		
• The ability to contribute towards the planning and coordination of the team's efforts is responsible for the group's decisions		
(Nice to know)		
• The ability to persevere as well as to fully concentrate on given		
task		
• The ability to understand and to fit in with the culture of the		
• The ability to understand and to fit in with the culture of the community and new work environment		
• The ability to recognize and respect the attitude behavior and	1	
beliefs of others	1	
Clinical application Role Play		
L if a long learning and information management		
(desirable to know)	1	
• The ability to search and manage relevant information from	1	
different sources		
• The ability to accept new ideas and the capability for		
• The ability to accept new ideas and the capability for		
The ability to develop a curious mind and thirst for knowledge		
 The ability to develop a curious mind and unitst for knowledge. Clinical application 		
Dele Diev		
Kole ridy Entropropourial skills (Nice to know)	1	
The ability to identify business apportunities	1	
The ability to outling business opportunities The ability to outling business from the outling		
• The ability to outline business frameworks,		
• The ability to work independently.		
• Clinical application		
• The ability to build explores, seizes business & work.		
Role Play		
Professional ethics and morals (Must to know)		
• Ability to recognize the effects on the economy, environmental		
and socio-culture in professional practice.		
• Ability to analyse and make decisions in solving problems		
related to ethics.		

			•
	• Ability to practice ethically apart from being responsible		
	towards the society, have the knowledge of basic leadership		
	theory.		
	Clinical application, Role Play		
	Leadership skills (Must to know)	1	
	• The ability to lead a project.		
	• The ability to understand and interchange roles between that		
	of a team leader and a team member.		
	• The ability to supervise team members.		
	Clinical application. Role Play		
4	INTRODUCTION TO ETHICS & BIOETHICS	1	
	(Must to know)		
	• Meaning, nature of ethics, ethical statements		
	Meaning of bioethics		
	• Health & disease as values and facts		
	Principles of bioethics		
	• Medical ethics- goals, committees,		
5	SPT- for students patient interaction & communication skills,		48
	role play and ethical issues		
			1

Reference Books

Itereren	
Sr.No.	Title
1	Sherfield, R., Montgomery, R.J. & Moody, P.G. (2011). Developing Soft Skills. 3rd
	Edi. Pearson Education, New Delhi.
2	Kumar, S.S. (2010). Communication Skills and Soft Skills. Pearson Education, New
	Delhi
3	JagdishChander, 'Creative English', OxfordUniversity Press, New Delhi.

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
10	40	50

Periodical Examination: Written Examination:-20 MCQ for 10 marks, 20 minutes. **Preliminary Examination / University (Final) Examination: Written Examination** (40 marks)

Sec A	MCQ (5 English+5 Communication skills)	10x1=10
Sec B	English	5x3=15
	1. Very Short answer questions Answer any 5 out of 6	
Sec C	Communication skills	5x3=15
	1. Very Short answer questions- Answer any 5 out of 6	

• <u>SUPERVISED PRACTICAL TRAINING:</u>

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Converted t	o 10 marks (50/5=10)

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	Nice to know	3	
	• Structure of atom, molecules, elements and compounds.		
	• Physical Principles of sound and its properties.		
	• Physical Principles of light and its properties.		
2	ELECTRIC SUPPLY (Desirable to know)	5	-
	Brief outline of main supply of electric current.	1	_
	 Dangers – short circuits, electric shocks. 	1	
	 Precautions – safety devices earthing fuses etc. 	1	
	 First aid & initial management of electric shock 	2	
3	THERMO & ACTINOTHERAPV	25	32
5	Must to know	12	<u> </u>
	 Physiological responses to heat gain or loss on various tissues of the body. 	12	0
	• Physical principles of Electro – magnetic radiation.		
	• Therapeutic effects of heat & cold		
	• Home remedies of heat and cold		
	Therapeutic cold :	4	8
	• Cryotherapy: Sources, biophysical effects, types, therapeutic effects, Indications, contraindications, precautions, application techniques and patient preparation.		
	Thermotherapy modalities:	5	8
	• Paraffin wax bath, contrast bath, whirl pool bath, moist heat therapy:Principles of application, mode of application, therapeutic uses, indication and contraindication.		
	Infra red rays:	2	8
	• Wavelength, frequency, types & sources of IRR generation	-	Ũ
	• Techniques of irradiation physiological & therapeutic effects		
	 Indications contraindications precautions 		
	Operational skills of equipment & patient preparation		
	Desirable to know		
	• Physics of sound including characteristics and propagation	2	
4	HIGH FREQUENCY CURRENTS AND WAVES	15	35
-	(Must to know)	13	55
	Short wave diathermy(SWD)	8	17
	Production biophysical effects types	0	1/
	Therapeutic effects, techniques of application		
	 Indications contraindications precautions 		
	 Operational skills and nation prevariation 		
	- Operational skins and patient preparation.	7	18
	Production biophysical effects types	/	10
	Therapeutic effects, techniques of application		
	 Indications contraindications precautions 		
	 Operational skills and nation preparation 		
5	TRACTION (Must to know)	5	13
	Principles of traction classification types	5	13
	 Physiological & therapeutic effects 		
	Invision great & unchapture effects Indications contraindications		
	Therefore and the second		
	recliniques of application Organizational skills & magazitic re-		
	• Operational skills & precautions		

	Nice to know	3	
	• Open equipment demonstration of various equipments		
	Calibration techniques of equipments		
6	SPT		96
Text B	ooks		

Sr.No.	Title
1	Clayton's Electro therapy-3 rd , 9 th & 10 th ed,
2	Electro therapy explained -by Low & Reed
3	Principles and Practice of Electro Therapy –by Joseph Kahn
Reference	ze Books

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Sr.No.	Title
1	Clinical Electro Therapy-by Nelson & Currier
2	Electrotherapy – Evidence Based Practice – Sheila Kitchen

SCHEME OF EXAMINATION

Written Total Practical					Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Spots/ Simulated presentation of technique & demonstration

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ	20x1=20 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x3=15 marks
	2. Short answer questions - Answer any 2 out of 3	3x5=15 marks
Sec	1. Long Answer Questions (compulsory)	1x15=15
Sec C	2. Long Answer Questions Answer any 1 out of 2	1x15=15

• Practical Examination (80 marks)

S.No.		Marks
1.	One Long Case:	35 marks
	Superficial thermal agents (IR, Cold packs, Hot pack, wax bath)	
2.	One Short Case:	20 marks
	SWD, US, Contrast Bath, Whirl pool Bath	
3	5 Spots (5 Minutes per Spot and four marks per spots)	20 marks
	spots based on identification of electronic equipments & panel	(5x4=20)
	diagram of equipments	
4	Journal	5 marks

<u>SUPERVISED PRACTICAL TRAINING:</u> Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory / Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Converted	to 20 marks (100/5=20)

Course	Course Title	Hours						
Code	Course The	Th	Pr	SPT	Total			
PT-201	Human Anatomy- II	48	64	48	160			
PT-202	Human Physiology- II	48	32	48	128			
PT-203	Biochemistry	48	0	-	48			
PT-204	Exercise Therapy- I	64	96	96	256			
PT-205	Computer Science	32	0	48	80			
	Total	240	192	240	672			

SEMESTER – II

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	Course Title :- Human Anatomy-II (112 Hours)																
	Course Code:- PT 201																
	Course Credit for Human Anatomy II																
Hours Hrs/Wk Cre				dits			Ev	aluatio	n Patt	ern							
												W	ritten	Total	Pra	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	TΔ	Final	Final	ΤA	Final	Final
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48	64	48	160	3	4	3	10	3	2	1	6	10	40	50	10	40	50
-		01.															

Learning Objectives:

At the end of the course, the candidate should be able to -

1. Identify and describe anatomical aspects of muscle, bones & joints & to understand and analyze movements of lower extremity & pelvis

- 2. Understand the anatomical basis of various clinical conditions e.g. trauma, deformities, pertaining to lower limbs & pelvis.
- 3. Localize various surface landmarks
- 4. Demonstrate the movements of various joints of lower limb & pelvis
- 5. Distinguish major arteries, veins and lymphatic with special emphases to extremities and pelvis.
- 6. Identify and describe the source, course of major arterial, venous and lymphatic system, with special emphasis to lower extremities and pelvis.
- 7. Identify and describe various parts of Central Nervous System (C.N.S) Fore-brain, Midbrain, Hind-brain, Brain stem, courses of cranial nerves; functional components course distribution- Anatomical bases of clinical lesions.
- 8. Describe the source and course of spinal tracts.
- 9. Describe blood circulation of C.N.S. & spine.
- 10. Identify the components of various Trans-sections.

	Course Content				
Topic Social No	Title of content	Hours of teaching/learnin			
Serial No.		Theory	Practical		
SECTION	Neuro- anatomy-	18	15		
- I	Must Know				
	Peripheral Nerves	15			
	Neuromuscular Junction				
	Sensory End Organs				
	 Spinal Cord Segments & Areas 				
	• Brainstem				
	• Cerebellum				
	Inferior colliculi & Superior Colliculi				

	Disease halon		
	• Diencephaion		
	• Hypothalamus , I halamus		
	• Corpus striatum		
	• Cerebral hemispheres		
	• Lateral ventricles		
	Meninges		
	• Bloody supply of the brain		
	Internal Capsule		
	Thalamocortical radiations		
	• Pyramidal systems		
	• Extra-pyramidal systems		
	• Sympathetic system		
	Para-sympathetic system		
	Cranial nerves		
	(desirable to know)		
	• Fnithalamus		
	Phinemeenhalon	3	
	Visual radiation	J	
	• Visual radiation		
CECTION	Auditory radiation		
SECTION	TRUNK & ABDOMEN	5	6
	Must to know	3	
	Osteology	5	
	• Vertebral columns: Identify the parts of typical vertebra		
	and state the main features, attachments and ossification.		
	• Intervertebral disc and mention its part.		
	Mvology		
	 Myology Fascia and muscles of back 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know 		
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood 	2	
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. 	2	
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. 	2	
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. 	2	
	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal 	2	
SECTIONI	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal 	2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal 	2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know)	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. 	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. Muscles of pelvic floor and mention their attachments, 	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. Muscles of pelvic floor and mention their attachments, action and nerve supply. 	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. Muscles of pelvic floor and mention their attachments, action and nerve supply. Lymphatic drainage 	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. Muscles of pelvic floor and mention their attachments, action and nerve supply. Lymphatic drainage Nerve supply 	2 4 2	12
SECTIONI II	 Myology Fascia and muscles of back Fascia and muscles connecting U/L with vertebral column: origin, insertion, nerve supply, action. Fascia and muscles of post Abdominal Wall: origin, insertion, nerve supply and action. Applied Anatomy of structures of trunk & abdomen. Desirable to know Mention the course and branches and nerves, blood vessels and lymphatic drainage of Trunk & abdomen. Lumbar Plexus: Position, formation and branches. Rectus sheath: formation and contents. Contents of vertebral canal PELVIS (must to know) Features of pubic symphysis and sacroiliac joints. Muscles of pelvic floor and mention their attachments, action and nerve supply. Lymphatic drainage Nerve supply Mention the blood vessels of the region with course, 	2 4 2	12

	(desirable to know)		
	• Sacral Plexus	2	
	• Applied anatomy of lumbar plexus		
	 Difference between male and female pelvis 		
	• Main features of subdivision boundaries walls and floor		
	of nelvis		
	 Urogenital diaphragm (outlines only) 		
SECTION	LOWER EXTRIMITY	15	19
IV	Osteology (<i>must to know</i>)	10	17
	• Hip bone, femur, Tibia, Fibula, Patella, and bones of the	14	
	foot		
	• MyologyOrigin Insertion Nerve Supply Action of the		
	following:		
	• Fascia and muscles in anterior, & posterior of thigh		
	• Fascia and muscles of medial side of thigh		
	• Fascia and muscles of gluteal region		
	• Fascia and muscles of lateral side of leg		
	• Fascia and muscles of back of leg and sole of foot		
	• Detailed explanation of joints of Lower Limb: Pelvic		
	Girdle, Hip, joint, Knee joint, Ankle joint, joints of foot.		
	• Identify the nerves of Lower Limb and mention their		
	position course, relations distribution		
	• Indicate the blood vessels of Lower Limb a mention their		
	position course, relation, distribution and main branches		
	• Explain femoral triangle and subsartorial canal		
	• Poptileal fossa	1	
	• Anatomy of structures of Lower Limb	T	
	Nice to know		
	• Lymphatic drainage of Lower Limb		
SECTION	REGIONAL ANATOMY	6	12
V	Surface Anatomy (must to know)		
	• Bony landmarks of HNF, , lower extremity, spine	3	
	• Demonstration of muscles – HNF, superior extremity,		
	inferior extremity		
	• Demonstration of movements of joints		
	Nice to know	3	
	• Palpation of peripheral arteries & nerves		
	• Radiographic appearance of Musculo-skeletal system of		
	Upper limb, Lower limb, Spine		
VI	SPT		48

Text Boo	oks
Sr.No.	Title
1	B.D. Chaurasia, Human Anatomy-Volume 1, 2, 3 CBS Publishers & Distributors.
2	Inderbir Singh, Textbook of Anatomy with colour Atlas-Vol. 1, 2, 3 Jaypee Brothers
3	Snell-Clinical Anatomy-Lippincott
4	Mcminn's Last's Anatomy-Regional and applied, Churchill Livingstone.
5	Mcminn's et al-A Colour Atlas of Human Anatomy, Mosby.
6	Cunningham Manual of Practical Anatomy Vol. I, II, III, Churchill Livingstone.
7	Inderbir Singh, A Textbook on Human NeuroAntomy, Jaypee Brothers.

Reference Books

Sr.No.	Title
1	Williams & Warwick, Gray's Anatomy-Churchill Livingstone.
2	Extremities by Quining Wasb
3	Anatomy & Physiology by Smout and McDowell

SCHEME OF EXAMINATION

Written		Total	Practical		Total	
IA	Final exam	Final exam	IA	Final exam	Final exam	
10	40	50	10	40	50	

Periodical Examination:

- Written Examination:-20 MCQ for 10 marks, 20 minutes.
- Practical Examination:- 10 marks

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1. Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• Practical Examination (40 marks)

S.No.			Marks
1	Spots		10x2=20
	1.	2 Spots based on Urogenital/Reproductive/special senses	
	2.	3 Spots based on Soft part of Trunk & abdominal	
	3.	5 Spots based on lower extremity	
2.	Viva		15
	1.	Soft Parts	
	2.	Osteology	
3	Journ	al	5

• <u>SUPERVISED PRACTICAL TRAINING:</u>

\blacktriangleright Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory / Practical

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Co	nverted to 10 marks (50/5=10)

	Course Title :- Human Physiology-II Course Code:- PT 202																	
	Course Credit for Human Physiology II							T										
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Lea	earning Objectives:						1	1	1	<u>I</u>								
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1.	Acq	uire t	he kr	nowle	edge	of tl	ne re	elativ	e co	ntribu	ution	of ea	ach org	gan sy	stem	in m	aint	tenance
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	fund	ction ((fema	ıle), E	Endo	crine	e, No	euro-	mote	or and	lalter	atio	ns in fu	inction	with	ı agir	ng.	
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3		Endo	ocrine	e syst	em-	JF									8	3		-
		Must know																
		Introduction - General organization of endocrine glands																
		• Releasing hormones from hypothalamus																
		• Anterior & Posterior pituitary hormones – physiological																
		actions, regulation & disorders																
		• physiological actions, regulation & disorders of :																
		Thyroid Hormones, Parathyroid Hormones, Adrenal cortex																
	& medulla, Pancreatic hormones																	
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4		Rep	rodu	ctive	syst	em									e	5		-
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		• F	Functi	ional	anat	omy	of r	repro	ducti	ve sy	stem							
		• F	uber	ty,cha	inge	s i	n	male	s a	nd	femal	es,	mena	rche,				
		n	nenop	pause														

	Physiological actions of testosterone		
	• Menstrual cycle and ovarian cycles – phases and hormonal		
	regulation, ovulation		
	Physiology of pregnancy		
	• lactation – initiation, maintenance and control,		
	• Functions of placenta	1	
	Desirable to know		
	Pregnancy tests	1	
	• Spermatogenesis - stages and regulation	1	
	Nice to know		
	Sex chromosomes		
	• Precocious and delayed puberty		
5	CNS	20	-
	Must know		
	General organization of nervous system	16	
	• Receptors – definition, classification and functions		
	• Synapse – definition, physiological anatomy, synaptic		
	transmission		
	• Reflexes – classification, properties and functions		
	• Spinal cord –tract and functions		
	\checkmark Ascending tracts – sensations carried, pathways and		
	functions		
	\checkmark Descending tract – Origin, course and termination and		
	functions		
	• Pain sensation – types of pain, pathways for conduction of		
	pain, referred pain, central analgesia system		
	Posture & equilibrium, Vestibular apparatus		
	• Functions of :Thalamus, Hypothalamus,		
	• Cerebellum – functions, effects of lesion		
	• Basal ganglia – functions, effects of lesion, Parkinsonism		
	• Cerebral cortex – Gross anatomy & division, functions of		
	each lobe		
	• Muscle tone		
	Autonomic nervous system – Organization & functions of		
	parasympathetic, sympathetic system and functions		
	• CSF – Composition, formation, circulation, functions &		
	Blood brain barrier- Applied aspects		
	• Differences between Upper Motor Neuron and Lower		
	Motor Neuron lesions	2	
	Desirable to know		
	• Synthesis of neurotransmitters	•	
	• Limbic system and its functions	2	
	Nice to know		
	• Effects of spinal transection		
	Decerebrate and decorticate rigidity		
	Thalamic syndrome		
	Ascending and descending reticular activating system		
	Speech, memory and learning,		

6	Special Senses-	6	-
	Vision		
	Must know	1	
	• Vision – Structure of eye ball, retina, refractory errors,		
	• Accommodation, visual pathway, Pupillary reflexes		
	Desirable to know	1	
	• Light and dark adaptation		
	Photochemistry of vision		
	Ear		
	Must know		
	• Functional anatomy of ear	1	
	• Functions of middle and inner ear		
	• Functional anatomy of cochlea		
	Desirable to know	1	
	• Audiometry		
	• Auditory pathway	1	
	Nice to know	1	
	• Physics of sound		
	• Theories of hearing	1	
	Taste & smell	1	
	Must know		
	• Functional anatomy, factor affecting.		
7	Lecture demonstrations & Practicals(L.Ds)-	-	32
	a) Clinical examination of arterial pulse.		3
	b) Determination of arterial blood pressure.		4
	c) Clinical examination of cardiovascular system.		3
	d) Clinical examination of respiratory system.		3
	e) Clinical examination of higher functions.		3
	f) Clinical examination of sensory system.		4
	g) Clinical examination of motor system –I.		4
	h) Clinical examination of motor system –II		4
	i) Clinical examination of all cranial nerves.		4
8	SPT		48

Sr.No.	Title
1	Text book on Medical Physiology-By Guyton
2	Text book of physiology for physiotherapy – Prof. A. K Jain
3	Concise Medical Physiology – Sujit K. Chowdhuri
4	Essential of Medical Physiology- K. Sembuilingam

Reference Books

Sr.No.	Title
1	Samson & Wrights Applied physiology.
2	Textbook of Medical Physiology – Indu Khurana

SCHEME OF EXAMINATION

Written		Total	Practical		Total	
IA	Final exam	Final exam	IA	Final exam	Final exam	
10	40	50	10	40	50	

Periodical Examination:

- Written Examination:-20 MCQ for 10 marks, 20 minutes.
- Practical Examination:- 10 marks

Preliminary Examination / University (Final) Examination

Written	1 Examination	(40	mar	ks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

PRACTICAL 40 Marks

S.No.		Marks
1	Clinical physiology	20 marks
	• Respiration – clinical examination of respiratory system	
	• CVS- pulse rate, B.P, clinical examination of CVS	
	Cranial nerves	
	• Reflexes	
	Motor and Sensory system	
2.	Viva	15+5=20
	Based on Theory portion	
3.	Journal	5

• <u>SUPERVISED PRACTICAL TRAINING:</u>

 \blacktriangleright Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks : Theory / Practical

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Converted	to 10 marks (50/5=10)

	Course Title :- Biochemistry (48 Hours)																	
	Course code :- PT 203 Biochemistry																	
						Co	ours	e Cre	dit f	or Bi	ochei	mist	ry					
	Η	ours		Hrs	/Wk			Cre	dits			Eva	aluatio	n Pa	ntte	rn		
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Writ	ten	Tota	al	Pract	ical	Total
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4.	Disc	cuss n	utritio	nal as	spect	s of	cart	ohvd	rates	, lipid	s, pro	oteins	s & vita	amin	s &	thei	r met	abolism
	with	speci	al refe	erence	e to c	besi	ty.	5		⁄ I	1							
5.	Defi	ne en	zymes	; disc	uss i	n bri	ief, f	actors	s affe	cting	enzyı	ne ao	ctivity.					
6.	Des	cribe i	n deta	ils bi	oche	mica	l as	pects	of m	uscle	contra	action	n.					
7.	Acq	uire k	nowle	dge ii	n bri	ef ab	out	the C	linica	al bioc	hemi	stry,	with sp	ecia	l ref	feren	ce to 2	Liver &
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LIPIDS-	6	
Must Know	4	
• Chemistry-definition-classification-[including fatty acids		
with examples]-function		
• Metabolism-Digestion and absorption of lipids— β		
oxidation of saturated fatty acids and its energetics		
• Regulation of fat metabolism in adipose tissue- Ketone		
bodies formation & utilization-cholesterol and its		
importance [no biosynthesis needed]		
• Classification, sources & function of lipoproteins-		
lipoproteinemia.		
• Clinical Biochemistry - Lipid profile-Tri -glyceride,		
cholesterol/HDL/LDL/VLDL etc,		
Nice to Know	2	
Phospholipid synthesis		
• Atherosclerosis.		
• Liver function test & Renal function test		
NUCLEIC ACIDS-	2	
Must Know	1	
• D.N.A. /R.N.Adefinition-structure and function-types-		
Genetic code		
Desirable to Know	1	
• catabolism of purine –gout		
ENZYMES-	3	
Must Know	2	
• Definition-Co-Enzymes, modern classification, factors		
affecting enzymes action		
• Clinical and therapeutic use of enzymes:		
• Clinical relevance: Enzymes-Amylase, CPK, LDH,		
1soenzymes		
Desirable to Know	1	
Infibition and types of finfibitors		
	-	
VIIAWIIND- Must Know	7 E	
Water and fet soluble definition releasification	5	
 water and fat soluble-definition & classification Individual vitaming sources, function 		
 BDA its deficiency and toyicity 		
Nice to Know		
 Vitamin - absorption and transport 	2	
 Co-enzyme forms 	2	
BIOLOGICAL OXIDATION-	2	
Desirable to Know	~	
• Oxidative phosphorylation & ETC in brief.		
MINERALS-	4	
Must to Know	3	
• Phosphate, calcium and iron [in detail]	-	
• sources, absorption, transport-excretion, functions and		
deficiency of : Magnesium, Flouride, Zinc, Copper,		
Selenium Molybdenum, Iodine		
	 LPDS- Must Know Chemistry-definition-classification-[including fatty acids with examples]-function Metabolism-Digestion and absorption of lipids—β oxidation of saturated fatty acids and its energetics Regulation of fat metabolism in adipose tissue- Ketone bodies formation & utilization—cholesterol and its importance [no biosynthesis needed] Classification, sources & function of lipoproteins-lipoproteinemia. Clinical Biochemistry - Lipid profile-Tri -glyceride, cholesterol/HDL/LDL/VLDL etc, Nice to Know Phospholipid synthesis Atherosclerosis. Liver function test & Renal function test NUCLEIC ACIDS- Must Know Desirable to Know catabolism of purine –gout ENZYMES- Must Know Definition-Co-Enzymes, modern classification, factors affecting enzymes action Clinical and therapeutic use of enzymes: Clinical and therapeutic use of enzymes: Clinical relevance: Enzymes-Amylase, CPK, LDH, isoenzymes Desirable to Know Inhibition and types of inhibitors Iso-enzymes WITAMINS- Must Know Water and fat soluble-definition &classification Individual vitamins-sources- function RDA, its deficiency and toxicity Nice to Know Vitamin - absorption and transport Co-enzyme forms BOLOGICAL OXIDATION-Desirable to Know Vitamin - absorption and transport Po-enzyme forms BIOLOGICAL OXIDATION-Desirable to Know Phosphate, calcium and iron [in detail] sources, absorption, transport-excretion, functions and deficiency of : Magnesium, Flouride, Zinc,Copper, Selenium Molybdenum, Iodine 	LIPDS- 6 Must Know 4 • Chemistry-definition-classification-[including fatty acids with examples]-function 4 • Metabolism-Digestion and absorption of lipids—β oxidation of saturated fatty acids and its energetics 6 • Regulation of fat metabolism in adipose tissue- Ketone bodies formation & utilization—cholesterol and its importance [no biosynthesis needed] 1 • Classification, sources & function of lipoproteins-lipoproteinemia. 2 • Clinical Biochemistry - Lipid profile-Tri -glyceride, cholesterol/HDL/LDL/VLDL etc, 2 • Nice to Know 2 • Phospholipid synthesis 2 • Atherosclerosis. 1 • Liver function test & Renal function test 2 Must Know 1 • Definition-Co-Enzymes, modern classification, factors affecting enzymes action 3 • Clinical and therapeutic use of enzymes: 2 • Clinical and therapeutic use of enzymes: 1 • Clinical and therapeutic use of enzymes: 5 • Must Know 1 • Inhibition and types o

	Desirable to Know	1	
	• Clinical Biochemistry-Relevance of blood levels of Ca,		
	phosphate & Iron		
10	ACID – BASE BALANCE, WATER & ELECTROLYTE-	4	
	Must Know		
	• Body water, pH-osmolarity Extra and Intra cellular fluid		
	• Buffers-pH, buffer system in blood.		
	• Role of kidneys & lungs in acid-base balance.		
	• Water- electrolyte balance - imbalance-dehydration.		
11	MUSCLE CONTRACTION-	2	
	Must Know		
	Contractile elements		
	Biochemical events during contraction		
	• Energy metabolism in skeletal & cardiac muscle		
12	CONNECTIVE TISSUE-	2	
	Must Know		
	• Biochemistry of connective tissue-collagen – Glyco-protein		
	– proteoglycans		
13	NUTRITION-	2	
	Must Know		
	Importance of nutrition		
	• Basal metabolic rate – definition – normal values-factors		
	affecting BMR		
	• energy requirement with - age/sex/ thermogenesis -		
	specific dynamic action of food,-energy expenditure for		
	various activities		
	• Composition of food, balanced Diet, dietary		
	recommendations, nutritional supplementation – nutritional		
	value of carbohydrates/proteins/fats & Fibers,	1	
	Desirable to Know	1	
	• Nitrogen balance & its significance, Protein energy		
	malnutrition – Kwashiorkor & Marasmus		

S.NO	Title
1	Biochemistry-by Dr. Deb Jyoti Das,
2	Biochemistry-by-Dr. Satyanarayan
3	Text book of Biochemistry for Medical students by-Dr Vasudevan/ Shrikumar

Reference Books

S.NO	Title
1	Review of Biochemistry [26 th edition] by Harper.

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
10	40	50

Periodical Examination: Written Examination:-20 MCQ for 10 marks, 20 minutes. **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

Internal Assessment Marks: Theory

Periodical exam= 10 marksPrelim exam= 40 marksTotal= 50 marksThe total shall be Converted to 10 marks (50/5=10)

	Course Title :- Exercise Therapy- I																
	Course Code:- PT 204																
	Course Credit for Exercise therapy- I																
	H	ours		Hrs	/Wk	2		Cre	dits		Evaluation Pattern						
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Written		Total	Prac	tical	Total
												IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
In	min	a Ohi	activ	<u>.</u>													

Learning Objectives:

At the end of the course, the candidate should be able to -

- 1. Define the various terms used in mechanics, Biomechanics and Kinesiology.
- 2. Recall the basic principles of Physics related to mechanics of movement /motion & understand the application of such principles to the simple equipment designs, and their efficacy in therapeutic gymnasium and various starting positions used in therapeutics.
- 3. Demonstrate various starting and derived positions.
- 4. Demonstrate passive movements in terms of various Anatomical planes.
- 5. Describe types of Goniometer, merits and demerits of goniometry and to demonstrate and acquire the skill of measuring ROM with goniometer.
- 6. Acquire a skill of assessment of sensations, superficial and deep reflexes, pulse rate/ Blood pressure, Chest expansion/respiratory rate, and limb length/girth measurement on Models.
- 7. Demonstrate and acquire the skill of relaxation
- 8. Acquire the skill of application of various massage manipulations and describe the Physiological effects, therapeutic use, merits /demerits of the same.
- 9. Describe and also acquire the skill of use of various tools of the Therapeutic gymnasium.
- 10. Describe the skill and usefulness of group and recreational activities-and demonstrate general fitness exercises used in Physical Training.
- 11. Describe walking aids and its measurement
- 12. Define Yoga and its types, its physiological and Psycho-somatic effects and demonstrate standard yoga postures used by the beginners.

	Course Content							
Topic		Hou	urs of					
Serial	Title of content	teaching	g/learning					
No.		Theory	Practical					
1	Basic Biomechanics-	14	-					
	Must to know	12						
	• Axis/planes, Newton's law of motion,							
	• mechanics of Forces, pendulum, equilibrium, Torque, levers, stability, base of support, COG, law of gravity							
	• Types of muscle work							
	• Angle of pull- Mechanical advantage							
	Nice to know	_						
	• Applied mechanics in the Therapeutic Gymnasium	2						
2	Starting and derived positions(must to know)	3	10					
3	Classification of movements	5	20					
	(active, passive, assisted, resisted)							
4	Goniometry- principles, types , uses and techniques of measurement	4	14					
	on each joint							
5	Desirable to know	4	4					
	• Limb length (only lower limb)- apparent, true, supratrochantric							
	Limb girth measurements							

6	Desirable to know	2	4
	Assessment of Sensations / Reflex testing.		
7	Desirable to know	2	4
	Assessment of Blood pressure / pulse rate /chest expansion		
	and Respiratory rate		
8	Relaxation	4	5
	Must to know	3	
	• Describe relaxation, its Effects, uses & clinical application.		
	Indication & contraindication.		
	• Techniques of relaxation (local and general)		
	Nice to know		
	• Muscle fatigue, muscle spasm and tension (mental & physical)		
	• Factors contributing to fatigue & tension.	1	
9	Massage manipulations:	5	10
	must to know		
	• Principles, effects, merits, demerits, skills on extremities / Back	4	
	/ abdomen / face/ scalp.		
	• Physiological effects of soft tissue manipulation on the		
	following systems of the body;		
	✓ Circulatory, Nervous, Musculoskeletal, Excretory,		
	Respiratory, Integumentary and Metabolism.		
	• Classify, define and describe of massage techniques: -		
	effleurage, stroking, kneading, petrissage,		
	• deep friction, percussions, vibration and shaking etc.		
	• Preparation of patient: Effects, uses, indications and		
	contraindications of the above manipulation.		
	Nice to know	1	
	• History, various types of soft tissue manipulation techniques.		
10	Therapeutic Gymnasium-	4	4
	must to know	2	
	• Various equipment in the gymnasium.		
	• Operational skills, effects & uses of each equipment (shoulder		
	wheel, finger ladder, therapeutic balls, parallel bars etc.)		
	desirable to know		
	• Setup of a gymnasium & its importance	1	
	• Group therapy & recreation activities		
11	Suspension therapy (Must to know)	4	5
	• Definition, type, effects, uses, parts & operational skills.		
	• use of accessories such as pullevs. springs		
12	Walking aids – Introduction, types, parts, measurement (Must to	2	2
	know)		
	Principles of Yoga & basic Yogic postures and their physiological		
	effects.(Must to know)		
	Yogic postures:-		
	Supine Position		
	> Shavasana		
	➢ Halasana		

	Sarvangasana		
	Setubandhasana		
	Pavanmuktasana		
	Prone Position		
	Dhanurasana		
	Salabhasana		
	Bhujangasana		
	Naukasana		
	Standing		
	Padahastasana		
	Trikonasana		
	Utkatasana		
	Sitting		
	Padmasana		
	Siddhasana		
	Paschimottanasan	4	10
	Yogamudrasana		
	Vajrasana		
	Gomukhasana		
	Twisting		
	Matsyndrasana		
	Ardha Matsyndrasana		
13	Hydrotherapy	6	4
	must to know	5	
	Physics-application-effects-merits /demerits		
	Basic principles of fluid mechanics related to hydrotherapy.		
	• Physiological & therapeutic effects of hydrotherapy, including		
	joint mobility muscle Strengthening & wound care		
	• Types of Hydrotherapy equipment, indications,		
	contraindications, operation skills & patient preparation		
	Nice to know		
	Room based hydrotherapy aquasiser etc	1	
14	Human dignity and human rights (must to know)	2	
	• Human dignity as an intrinsic value		
	• Respect, care and Equality in dignity of all human beings		
	• human dignity in different cultural and moral traditions		
	• ethical aspects of physiotherapists in patients relation in		
	regard to human dignity in handling children, women, elderly		
	mental & Physically challenged.		
15	SPT		96
15			20

Sr.No.	Title
1	Principles of Exercise Therapy – Dena Gardiner
2	Massage, manipulation & traction- Sydney Litch
3	Suspension Therapy in Rehabilitation-Margaret Hollis
4	Hydrotherapy - Duffield
5	Measurement of joint motion-goniometery - Cynthia Norkins
6	Therapeutic Exercise -Colby Kisner
7	Biomechanics- Cynthia Norkins
Reference Books

Sr.No.	Title
1	Clinical Kinesiology – Brunnstrom
2	Massage- Hollis

SUILIVIE OF LAAVIINATION										
	Written	Total	Total							
IA	Final exam	Final exam	IA	Final exam	Final exam					
20	80	100	20	80	100					

SCHEME OF EXAMINATION

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Spots/ Simulated presentation of technique & Demonstration

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ (20 minutes)	20x1=20 marks
Sec B	1. Very Short answer questions. Answer any 5 out of 6	5x3=15
	2.Short answer questions. Answer any 3 out of 4	3x5=15
Sec C	1.Long Answer Questions (compulsory)	1x15=15
	2.Long Answer Questions Answer any 1 out of 2	1x15=15

• Practical Examination (80 marks)

1.	Long Case:	35 marks
	Massage/ Goniometry / Suspension therapy	
2.	Short Case: any one of the following.	20 marks
	Passive movements / Starting and Derived position/	
	Relaxation/Limb Length-Girth measurement/Sensation/Reflex	
	testing/ Yoga /group exercise/ BP & Pulse/Chest Expansion and	
	Respiratory Rate/	
3	Spots	20 marks
	Five spots based on therapeutics gymnasium. 4 marks per spot, 5	(5x4=20)
	minutes per spot.	
4	Journal	5

• <u>SUPERVISED PRACTICAL TRAINING:</u>

 \blacktriangleright Journals marks = 5 marks

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory / Practical:-Periodical exam= 20 marksPrelim exam= 80 marksTotal= 100 marksThe total shall be Converted to 20 marks (100/5=20)

	Course Title :- Computer Science Course Code:- PT 205																
	Course Credit for Computer Science																
	Η	ours		Hrs	/Wk	2		Cre	dits			Eva	aluatio	n Pat	tern		
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Wri	tten	Total	Prac	ctical	Total
												IA	Final	Final	IA	Final	Final
32	-	48	80	2	-	3	5	2	-	1	3	10	exam 40	exam	-	exam	exam
Lea	arni	ng Ol	biecti	ves:		5	5	2		1	5	10	10	50		L	L
At	the o	end of	the c	ourse	. the	e can	didat	e sho	uld ł	be able	e to-						
1.	De	velop	good	skill	s for	bett	er co	mmui	nicat	ion.							
2.	Eff	ective	ly use	Mic	roso	ft Of	fice	to con	nmu	nicate	with	patie	ents wh	ile rei	nderir	ig care.	
3.	Uti	lize Po	owerI	Point	pres	entat	ions	and P	ictu	re mar	nagen	ient	for effe	ctive	teachi	ing and	
	lear	ming.									U					U	
4.	Lea	Irn the	use o	of cor	nput	ter fo	r bas	ic sta	tistic	es usin	g exc	el.					
5.	Lea	rn the	use o	of Inte	erne	t serv	vices	for R	esea	rch an	d Do	cum	entation	1.			
								Cou	ırse	Conte	nt						
Top	oic														Н	ours of	2
Ser	ial					,	Title	of co	nten	t				1	teaching/learning		
N	э.													T	heory	Prac	ctical
Mu	ıst H	Know															
1		Intro	duction	on o	f (Comp	outer	app	licat	ion f	or F	hysi	otherap	рy	5	-	
		pract	ice.														
2	2	Intro	duction	on o	f u	se c	of co	omput	ers	in te	eachir	ıg,	learnin	g,	6	-	
		resea	rch.														
3		Winc	lows,	MS o	offic	e, W	ord,	Excel	, Po	wer Po	oint.				6	-	
4	4 Internet, Literature search. 7 -																
De	sira	ble to	knov	V												-	
5	i	Introduction to Statistical Package 5 -															
nic	e to	know	7														
6)	Intro	duction	on to) H	ospit	al r	nanag	eme	nt in	forma	ation	syste	m	3		
		softw	vare.														
7	'	SPT														48	

Sr.No.	Title
1	Fundamental of Computer system

SCHEME OF EXAMINATION

Wr	itten	Total
IA	Final exam	Final exam
10	40	50

SCHEME OF EXAMINATION

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Theory-40 marks Internal Assessment 10 marks

Sec A	MCQ (10 Minutes)	10x1=10
Sec B	1. Short Notes-Answer any 5 out of 6	5x2=10
	2. Short answer questions-Answer any 2 out of 3	2x5=10
	3. Long Answer Questions-Answer any 1 out of 2	1x10=10

• <u>SUPERVISED PRACTICAL TRAINING:</u>

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file (s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Cor	enverted to 10 marks $(50/5=10)$

SEMESTER – III

Course	Course Title			Hours	
Code	Course mue	Th	Pr	SPT	Tot
PT-301	Pathology & Microbiology	80	0	0	80
PT-302	Exercise Therapy-II	64	128	96	288
PT-303	Psychology	48	0	0	48
PT-304	Biomechanics	64	32	48	144
PT-305	First Aid & Emergency care	32	32	48	112
	Total	288	192	192	672

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, SPT:Supervised Practical Training, IA: Internal Assessment

	Course Title :- Pathology & Microbiology																
	Course Code:- PT 301																
	Course Credit for Pathology & Microbiology																
	H	lours		Hrs	/WI	κ.		Credits				Evaluation Pattern					
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Wri	Written Total		Prace	tical	Total
												IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
80			80	5			5	5			5	20	80	100			

Learning Objectives

At the end of the course, the candidate should be able to -

- 1. Acquire the knowledge of concepts of cell injury & changes produced thereby in different tissues & organs capacity of the body in healing process.
- 2. Recall the Etio pathogenesis, the pathological effects & the clinico pathological correlation of common infections &non-infectious diseases.
- 3. Acquire the knowledge of concepts of Neoplasia with reference to the Etiology, gross & microscopic features, diagnosis & prognosis in different tissues & organs of the body.
- 4. Correlate normal & altered morphology of different organ systems in different diseases needed for understanding disease process & their clinical significance (with special emphasis to Neuro- Musculo-skeletal & cardio-respiratory systems).
- 5. Acquire knowledge of common Immunological disorders & their resultant effects on the human body.
- 6. Understand in brief, about the Hematological diseases & investigations necessary to diagnose them & determine their prognosis.
- 7. At the end of the Microbiology course, the candidate will have sound knowledge of the agents responsible for causing human infections, pertaining to C.N.S., C.V.S. Musculoskeletal & Respiratory system.

	Course Content- A/B if applicable		
Topic		Ηοι	urs of
Serial	A) Pathology	teaching	g/learning
No.		Theory	Practical
1	Cell injury	4	-
	• causes, mechanism & toxic injuries with special reference to		
	Physical, Chemical & ionizing radiation.		
	• Reversible injury (degeneration)-types-morphology, swelling,		
	hyaline, fatty changes.		
	• Intra-cellular accumulation-hyaline mucin& pigment		
	disorders.		
	• Irreversible cell injury-types of necrosis-apoptosis		
	• Extra-cellular accumulation- amyloidosis, calcification		
	metastasis, &dystrophic – Pathogenesis, morphology		

2	Inflammation & Repair	3	-
	• cellular events,		
	Morphologic variations,		
	• Inflammatory cells & mediators,		
	• Chronic inflammation:-causes, types, non- specific &		
	granulomatous – with		
	• Examples		
	• Healing- regeneration & repair, Wound healing by primary &		
	secondary union factors promoting & delaying healing process.		
	• Healing at various sites - including-bones, nerve & muscle		
3	Immuno – pathology – (basic concepts)	2	-
	• Immune system:-organization-cells- antibodies -regulation of		
	immune responses,		
	• Hyper-sensitivity,		
	• Secondary immuno-deficiency including HIV,		
	Organ transplantation		
4	Circulatory disturbances	3	-
	• Edema -pathogenesis -types -transudates /exudates,		
	Chronic venous congestion-lung, lever, spleen,		
	Thrombosis – Mechanism and Morphology		
	• Embolism – types-clinical effects,		
	• Infarction – types – common sites		
	• Gangrenes – types – etiopathogenesis		
	• Shock – Pathogenesis, types, morphologic changes		
5	Growth Disturbance	3	-
	• Atrophy-malformation, agenesis, dysplasia,		
	Neoplasia classification, histogenesis, biologic behavior,		
	difference between		
	• benign & malignant tumour		
	Malignant neoplasms -grades-stages-local & distal spread		
	Precancerous lesions &ca in situ		
	• Tumor & host interactions		
	• Systemic effects-metastatic or direct spread of Tumorsaffecting		
	bones, spinal cord, leading to paraplegia, etc.		
6	Cardiovascular system	3	-
	• Atherosclerosis -Ischemic heart diseases– myocardial		
	• infarction – Pathogenesis / Pathology		
	• Hypertension		
	CongestiveCardiacFailure, Pericarditis, Cardiomyopathy		
	Rheumatic Heart Disease, Infective endocarditis		
	Peripheral vascular diseases		
7	Respiratory system	3	-
	• COPD,		
	• Pneumonia (lobar, broncho, viral),		
	• T.B. Primary, secondary – morphologic types,		
	• Pleuritis, complications,		
	• Lung collapse – atelectasis		

8	Neuropathology	3	
	• Reaction of nervous tissue to injury – infection & ischemia		
	• Pvogenic meningitis, TBM, Viral		
	• Cerebrovascular disease, atherosclerosis, Thrombosis,		
	embolism, aneurysm, hypoxia, infarction & hemorrhage.		
	 Effects of Hypotension on CNS 		
	Coma		
	 Poliomvelitis Leprosy Demyelinating diseases Parkinsonism 		
	Cerebral palsy metachromatic leucodystrophy Dementia		
	Heminlegia naranlegia Wilson's disease		
	 Space Occupying Lesions (SOL) - (in brief) 		
	 Derinheral nerve injury 		
	Diseases of muscle	1	
9	Muscular dystrophy Dsaudohypertrophy Myotopia	1	
)	Musculai dyshopily, Pseudonyperitopily, Myotolila		
	• nypertropny, atropny, myositis ossificans,		
10	• necrosis, regeneration, , Muscle blopsy.	1	
10	Neuromuscular junction Muosthonia gravia Muosthonia ann duama Nama hianan	1	
11	Nyasulenia gravis, Nyastnenic syndrome, Nerve biopsy.	2	
11	Bone & Joints:	2	
	Fracture healing, Osteomyelitis, rickets, Osteomalacia, Bone		
	Tumors, Osteoporosis, Spondylosis, Prolapse Interverbral Disc,		
	Scoliosis, Haemarthrosis, Gout, T.B., Arthritis –degenerative,		
1.0	inflammatory, RA, Ankylosing spondylitis, Tenosynovitis.		
12	Desirable to know	2	
	Clinical pathology – (including Demonstrations)		
10	Lab investigation in liver & renal failure	2	
13	Haematology	3	
	• T.C./D.C./PBS, Eosinophilia, E.S.R., Anaemia	2	
	Bleeding and coagulation disorders		
	Desirable to Know: -		
	• Disorders of haemoglobin structure and synthesis	1	
	Lymphoid and myeloid neoplasmas		
	Must to know	2	
	Growth Disturbance - Carcinogenesis – environmental		
	• carcinogens		
	• Endocrine – Hyperthyroidism – Diabetes		
	Desirable to Know: -		
	• Hepatic diseases -Cirrhosis – emphasis to systemic effects of		
	portal Hypertension.	1	
	Desirable to Know: -		
	• Deficiency disorders – Vitamins A, B, C, D.	3	
	• Growth Disturbance - Chemical, Occupational, heredity, viral.		
	Nice to Know: -		
	• Medical Genetics – (In Brief)		
	• Urinary – commonly encountered in paralytic bladder. common		
	urinary tractinfections (brief)-urinary calculi.		
	• G.I. systemGastric/duodenal ulcer. enteric fever. TB. enteritis.		
	Gastritis(Related to consumption of NSAID)	2	
	• Skin - Melanin nigment disorders Vitiligo Teniaversicolor	4	
	Psoriasis Bacterial / fungal infections outaneous TR		
	Scleroderma SLF Lenrosy Alonecia Skin Bionsy		
	Seletodernia, SEL, Leptosy, Alopeera, Skill Diopsy.		
BPT Se	emester Pattern/2018-19/S-01/R-2		Page 42

Topic		Hou	urs of		
Serial	B) Microbiology	teaching/learning			
No.		Theory	Practical		
1	General Microbiology - Introduction & scope	2			
2	Classification of Micro - organisms & morphology of Bacteria,	2			
	a)Bacterial cell, its organelles Gram and Ziehl - Neelson and				
	itsImportance in lab diagnosis.				
3	Sterilization & disinfection [basic concepts]				
	Must know -	2			
	Definition of Sterilization, Disinfection, Enumeration of physical	2			
	applications commonly used Disinfectants				
	applications, commonly used Distinectants.				
	• Central starile department (CSSD) concept only				
	• Hospital Acquired Infection: Definition factor influencing	4			
	infection mode of transmission & prevention of	•			
	MALInfection control committee.				
	• Universal safety precautions-idefinition of waste				
	classification, segregation Transport & disposal.				
4	Immunology	5			
	Must know : -				
	• Definition. Types of Immunity active & passive, local	4			
	Immunity vaccines.				
	• Antigen antibody reaction – Definition of Antigen &				
	antibody, Types and property & application for diagnosis.				
	• Immune response –Type of cells involved Ag processing &				
	presentation Primary & secondary immune response. CMI –				
	Definition, role of T. cells and macrophages.				
	• Hypersensitivity & auto-immunity - Definition, Classification				
	Anaphylaxis – mechanism, manifestations & tests for				
	Anaphylaxis, definitions of autoimmunity, Classification&				
	Mechanism.	1			
5	Desirable to know – Principles & uses of monocional Abs.	2			
	Host narasite relationship & hactorial infactions. Different	2			
	sources and modes of transmission of infection microbial				
	factors leading to establishment of infection.				
	Nice to know				
	• Methods of identification of bacteria -Principle of	2			
	laboratory diagnosis of infectious diseases, General procedure				
	for collection.				
	• Diagnosis of infectious diseases-Transport and processing of				
	specimen for microbial diagnosis.				
6	Bacteriology :	4			
	Must know Infaction could be CM be CM Veccosi Marchelerer				
	mathogenicity & lab diagnosis of Stanhylococci Strentococci &				
	Neisseria.				
	Infection caused by $GM + ve$ bacillus –Morphology, pathogenicity				

1			
	& lab diagnosis of Coryne bacterium diphtheria, Clostridium		
	Perfringens&		
	clostridiumtetani.		
	Infection caused by Gram -ve bacilli –Morphology, pathogenicity		
	& lab diagnosis of E.coli, Klebsiella, Pseudomonas, Shigella,		
	Salmonella V Cholera		
	Infection caused by Mycobacteria-Morphology pathogenicity &		
	lab diagnosis of M tuberculosis M lenrae & atypical Mycobacteria		
	Nice to know		
		4	
	Spirochaetes – Morphology, pathogenicity & lab diagnosis of		
	Treponema Pallidum (VDRL test & TPHA), Role of Staphylococci		
	in hospital infection, LeptospiraBorrelia,Role of Pseudomonas in		
	HAI.		
7	Viruses	4	
	Must know		
	• Introduction & General properties of viruses – Size, shape,		
	symmetry, Structure of viruses, classification, cultivation of		
	Viruses& methods for diagnosis of viral infections		
	• HIV -Morphology transmission clinical syndromes,		
	Laboratorydiagnosis Prevention.		
	• Henatitis – List of viruses causing Henatitis nathogenicity		
	Laboratory diagnosis & Prevention		
	 Polio measles congenital Viral infection Rubella CMV 		
	Uorpos		
	Clinical sum drama & Laboratory diagnosis		
0	Clinical syndrome & Laboratory diagnosis.	•	
8	Mycology	2	
	Must know –		
	Morphological classification & general lab Diagnosis, Definition,		
	causative Agents & lab Diagnosis of mycetoma, Pathogenicity &		
	lab diagnosis of Aspergillosis& Candidiasis		
9	Parasites affecting CNS	2	
	Must know – List of parasites affecting CNS, on short about lab		
	diagnosis of malaria, Filarial, Toxoplasma, Cysticercosis,		
	echinococcus.		
10	Applied Microbiology	4	
	Must know		
	• Diseases affecting bones, joints & muscles - Osteomyelities -		
	etiology, lab diagnosis, Arthritis.		
	• Disease involving brain & nerves - Meningitis, brain abscess is		
	Infective neuritis, etiology & clinical manifestations & lab		
	diagnosis.		
	 Diseases involving cardionulmonary system skin & hurns - 		
	Infective Carditis PLIO LIRTI I RTI Skin & hurn Infections		
	etiology I aboratory diagnosis		
	chology Laboratory magnosis.		

Sr.No.	Title
1	Text book of Pathology -by Harsh Mohan
2	Pathologic basis of disease by Cotran, Kumar, Robbins
3	A Hand book of medical laboratory technology – V. H. Talib
4	General Pathology – by Bhende
5	Textbooks of Microbiology – by R. Ananthnarayan& C. K. JayramPanikar

Periodical Examination:

• Written Examination:-20 MCQ for 20 marks , 20 minutes.(10 pathology & 10 Microbiology)

Preliminary Examination / University (Final) Examination Written Examination (80 marks)

Sec A	MCQ (10 Pathology, 10 Microbiology)	20x1=20 marks
Sec B	1.Short Notes. Answer any 5 out of 6	5x3=15
Pathology	2.Short answer questions. Answer any 3 out of 4	3x5=15
Sec C	1.Short Notes. Answer any 5 out of 6	5x3=15
Microbiology	2.Short answer questions. Answer any 3 out of 4	3x5=15

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Con	verted to 20 marks (100/5=20)

					С	ours	se T	itle :-	Ex	ercise	e The	erap	y]	I							
Course Code:- PT 302																					
	United the Credit of Exercise Therapy II																				
Th	L Dr	Inversion Infs/ vyk Creatis Evaluation Pattern SPT Tot Lee Pr SPT Tot Dractic-1 Tot-1							Total												
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	-	modes	5.																		
	2.	Descr	ibe the	Bio	phy	sical	pr	opert	ies	of co	onnee	ctive	e t	issi	ue	, ef	fect	; (of n	nec	chanical
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	5.	Desci	ribe the	mo	ven	nents	of	the	The	orax	durir	ng b	ore	athi	ing	g &	br	or	nchia	1	hygiene
		techni	que																		
	6.	Acqui	re the s	skill	of a	isses	sme	nt &	trai	ning	of i	isola	teo	1 &	zgi	roup	m	us	cle s	stre	ength &
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	Muscle Strength1016					16															
		Mus	t to Kn	ow														8	8		
		• A	ssessme	nt of	mu	scle	strei	ngth,	[gro	up/in	divid	lual]									
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		• M	ethods of	of As	sess	smen	t of	the F	ostu	re - s	Sittin	g /st	tan	din	ıg						

		-	
	• Methods of assessment – Sagittal & frontal plane with		
	plumbline & postural frame, by spondylometer,		
	• Abnormal Posture – Assessment, Types, etiogenesis, &		
	Nice to know		
	• management including thereneutic everyises		
	• management, including merapeutic exercises.	1	
	Must to Know	I	
	• Mobility evaluation of joint / muscles & its implication on		
	posture.		
	• Static and Dynamic postural balance – Assessment &	_	
	Nice to know	2	
	• Management including the rapeutic exercises.	1	
	Gait	5	14
	Must to know	J	11
	• Overview of normal soit & its components	2	
	• Overview of normal gait & its components.	5	
	• Gait deviations - Assessment, Types, etiogenesis & (Nice to		
	know)management, including therapeutic exercises.		
	• Methods of assessment of Gait-measurements for walking		
_	aids		
3	• Types of walking aids: (axillary /elbow crutches, walking		
	sticks) indications effects & various training techniques		
	• Crutch gaita Crutch muscle Program antich training on had		
	• Crutch gails, Crutch muscle, Fie – crutch training – on bed,		
	parallel Bar, off Bed, crutch hold / balance.		
	Desirable to know	2	
	• Training for different conditions (Paraplegia, Hemiparesis,	2	
	Amputation, etc.)		
	Co-ordination & Balance	4	8
	• Principles, Neural control of coordination	3	
	• Methods of co-ordination exercises.		
	 Differentiate types of co-ordination loss & balance loss 		
6	• Differentiate types of co-ordination loss & balance loss.		
	• Physiology of inco-ordination, barance loss α training-		
	Frenkel's exercises	1	
	Nice to know	I	
	Training for different conditions (ataxia, parkinsonism, Stroke]		
7	Desirable to know- Principles of P.N.F	3	3
	Breathing exercises	5	10
	• Goals – Inspiratory, Expiratory, Segmental	4	
	• Forced Expiratory – coughing – huffing		
	Modified Inspiratory /Active cycle of breathing		
8	• Indiaction & its importance for notionts		
2	• indication & its importance for patients.		
	• Physiology of the above mentioned techniques.		
	Nice to know	1	
	Application for different conditions using different equipments)	1	
	Dronchiel Hygione	5	10
0	Droncinal myglene	3	12
9	Postural drainage position / Autogenic drainage.		
	Humidification		
10	Desirable to know- Principles of Home programme&	2	3
10	Ergonomic advice		

	Functional Re-education	10	14
	• Functional motor skills, -Motor skills to function independently in ADL	7	
	• Mobility, Bed /Wheel chair mobility, ambulation training		
11	• Application of mat exercises [to practice on self & on models]		
	Desirable to know		
	• Practical application on – Hemiplegia, Paraplegia, General	3	
	Weakness.		
	6 Minute walk test – on models (with interpretations)	1	4
	 Indications & contra indication, 		
12	 Procedure, data recording and Interpretation 		
	• Risk factors and precaution to be taken during the test.		
	Other tests		
	Benefit and harm of patient's right & dignity in Health care	2	
	settings by physiotherapy		
	• The WHO definition of health as a possible solution of		
13	health problems		
10	• What is the health benefit by physiotherapy		
	• Possible harm for a patient during physiotherapy		
	• Dimensions of comparing harms and benefits in individual		
	patients		
13	SUPERVISED PRACTICAL TRAINING		25

Sr.No.	Title
1	Progressive resisted exercises – by Margaret Hollis,
2	Therapeutic Exercise by Carolyn Kisner
3	PNF – Knott and Voss
4	Principles of Exercise therapy – Dena M. Gardiner
5	Muscle testing- Kendall
6	Muscle testing- Hislop

Reference Books

Sr.No.	Title
1	Therapeutic exercise by Basmijjan& Wolf.
2	Muscle testing by Daniel Kendall
3	Clinical evaluation – Lacote (for isolated assessment of abdominal muscles)
4	Muscle stretching & Auto stretching – Olaf Evjenth
5	Orthopaedic Evaluation – Magee (only for assessment of posture)

SCHEME OF EXAMINATION

	11	Total		
nal exam	IA	Final exam	Final exam	
00	20	80	100	
1	nal exam 0	nal examIA020	nal examIAFinal exam02080	

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical exam 20 MARKS(Simulated /OSPE/ Demonstration on Model)

Preliminary Examination / University (Final) Examination

Written Examination (80 marks)

• Practi	cals – (80 marks)	
\Sec A	Q-1 MCQ	20x1=20 marks
Sec B	1. Short answer questions - Answer any 5 out of 6	5x3=15 marks
	2. Short answer questions - Answer any 2 out of 3	3x5=15 marks
Sec C	L.A.Q. – 1. [Compulsory] Based on Muscle strength/ mobility	1x15=15 marks
	2. Therapeutic application for Posture / Gait15 marks	
	OR	
	Therapeutic application for Pulmonary function15	1x15=15 marks
	marks	
	*[LAQ should give Break up of 15 marks – e.g. [3+5+7]	

• Practical Examination (80 marks)

S.No.		Marks
1	A. Long case (any one)including Journal marks –	35
	• Muscle training (Testing & strengthening)	
	• Mobility (Passive, Active, Active Assisted, Mobilization of	
	Peripheral joints, stretching)	
	 Pulmonary function training 	
	Breathing exercises	
	Bronchial hygiene technique	
	• Co-ordination training	
	 Crutch training & assisted ambulatory training 	
2.	Two Short Case:-	20 x2=40
	• M.M.T. (Individual & group)	
	• Posture Assessment	
	• Posture re-training	
	• Normal Gait, Abnormal Gait Demonstration & reasoning.	
	• Functional re-education	
	Bed mobility	
	Wheel chair Mobility	
	Gait Re-training	
	Mat Activities	
	• 6 minute walk test.	
3	Journal	5

SUPERVISED PRACTICAL TRAINING:

Journals marks = 5 marks \geq

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory / Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Con	verted to 20 marks (100/5=20)

	Course Title :- Psychology Course Code:- PT 303																	
						(Cour	rse C	redi	t for	Psych	nolo	gv					
	Hours Hrs/Wk Credits Evaluation Pattern																	
												W	ritten	Total	Pı	actical		Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Fina	1	Final
48			48	3			3	3			03	10	40	50		exan	1	
Learning Objectives:																		
At t	the e	nd of	the c	course	e, the	e can	dida	te sh	ould	be al	ole to	-						
1.	. Define the term Psychology its importance in the Health delivery System & will gain																	
	kno	wledg	ge of	E Psy	chol	logic	al 1	natur	atio	n du	ring	hum	an De	velop	ment	& g	grov	wth &
	alte	ration	s dur	ing ag	ging	proc	ess.											
2.	Unc	lerstar	nd th	e im	port	ance	of	psycł	nolo	gical	status	s of	the pe	erson	in H	ealth	&d	isease,
	envi	ironm	ental	&em	otio	nal i	nflu	ence	on tl	he mi	nd &	pers	onality	•				
3.	Acq	uire t	he Ki	nowle	edge	as to	ho	w to o	deal	with	the pa	atien	ts.					
4.	Soc	10 eco	nom:	ic and		tural	diff	erenc	ces.	1.4	1.	· 1•.	•	1	1	• 1	1.	1.114
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1	-	Definition and nature of Psychology Fields & subfields of							of	5			_					
		nsychology							01									
		Schools of thoughts – Structuralism functionalism							sm.									
		Beha	viori	ism, C	Gest	alt, F	sycl	no-an	alyt	ic The	eory			- ,				
2	2	Developmental Psychology								6			-					
		Defi	nitio	n & it	s Th	eori	es											
		Phys	iolog	gical	and	psy	vcho	logic	al c	hang	es du	iring	Infan	cy,				
		Early	y & I	Late c	hild	hood	l, ad	olesc	ent s	stage,	Pube	erty,	adulthe	bod				
		& ol	d age)														
3	8	Emo	tions	-natu	re d	& re	elati	onshi	p_w	vith a	uton	omic	e nerv	ous	3			-
		syste	em-T	heori	es c	of er	noti	ons:	a)Ja	mes	Lang	e th	eory,	b.				
,		Scha	chter	r Sing	ger th	neory	/, C.	Cann	anB	ard th	leory							
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		abno	<u>rm</u> al	ity														

Topic	Psychology	Hours of		
Serial	Section _ II-Health Psychology	teaching	g/learning	
No.	<u>Section – II-ficatul I Sychology</u>	Theory	Practical	
1	Psychological Reactions of a Patient- during admission and	4	-	
	treatment			
	anxiety, shock, denial, suspicion, questioning, loneliness,			
	regression, shame, guilt, rejection, fear, withdrawal, depression,			
	egocentricity,			
	concern about small matters, narrowed interests, emotional			
	overreactions, perpetual changes, confusion, disorientation,			
	hallucinations, delusions, illusions, anger, hostility, loss of hope.			
2	Reactions to Loss: Reactions to loss, death and bereavement	4	-	
	shock and disbelief, development of awareness, restitution,			
	resolution. Stages of acceptance as proposed by Kubler – Ross.			
3	Stress: Physiological and Psychological relation to health and	4	-	
	sickness: psychosomatic, professional stress burnout.			
4	Behavior Modifications: Application of various conditioning	4	-	
	and learning principles to modify patient behaviours.			
5	Different personality styles of patients.	4	-	
Nice to	know			
6	Compliance: Nature, factors, contributing to non-compliance,	4		
	improving compliance.			
Textbo	oks			

Sr.No.	Title
1	Morgan C.T. & King R. A. Introduction to Psychology – 7 thedn [Tata McGraw-
	Hill publication]
2	Hurlock, E.B, (2005). Developmental Psychology – A life span Approach. (5 th Ed.)
	Tata McGraw Hill Publication, New Delhi
3	Feldman, R.S. (1997). Understanding Psychology, (4th Ed), Tata McGraw Hill
	Publication, New Delhi

SCHEME OF EXAMINATION

	Written	Total	P	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
10	40	50	-	-	-

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (10 minutes)	10x1=10 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

Internal Assessment MarksTheory

Periodical exam	= 10 marks

marks
n

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Total
                              = 50 \text{ marks}
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The total shall be Converted to 10 marks (50/5=10)

	Course Title :- Biomechanics																	
	Course Credit for Riomechanics																	
	F	Iours		1	Hrs/	UUU Wk	150		$\frac{11}{Cr}$	edits	mee	пап	Ex	valuat	ion l	Patter	m	
				-							Written Total		Written Total			actical	Tot	al
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64	32	48	144	4	2	3	9	4	1	1	6	20	exam 80	100 exam		exam	exa	m
Lea	rnin	g Obj	ectives:												<u> </u>			
At t	he ei	nd of t	he cours	e, the	can	didat	e sh	ould b	be ab	ole to								
	1.	Acqui	re the kn	lowled	dge o	of ax	is an	d pla	nes.									
	2.	Review	w the ana	atomy	v of e	each	joint		+ 00		a ot o	och ;	aint					
	5. 4	Learn Acouir	morougi re the kn	ny ao nowlea	loui loe a	each	mov rces	acting	n oc 7 af y	variou	g at e s ioin	ach j ts	omt.					
	5.	Acqui	re the kn	owled	dge (of mu	iscle	a and i	ioint	work	in ac	tiviti	es of da	ailv livi	ing.			
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		• Axes and planes with movements occurring at each joint in								int in		1						
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2		Secti	on – II	- Mu	scle	Str	uctu	ire ai	nd f	uncti	on				4	4	2	
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		• C	lassific	ation	of	Mus	cles											
		• F	unction	s of n	nusc	cles d	& fa	ctors	affe	ecting	it.							
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		Desir	able to	knov	W	••			_ 0		_		1.			1		
2		• E	ffect of	1mm	ob11	izati	on, 1	injury	/ &	aging	on n	nusc	le.			<i>c</i>	7	
3	-	Secti	on – III	L - JO	int s	struc	ctur	e								b 4	2	
		Musi	to kno	W		ст.:				1 . 1		• • • • •			4	4	3	
		• B	asic pri	nciple	es o	I J01	nt d	esign	and		man	joint	•	o				
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		• E	ffect of	imm	obil	izati	on, i	injury	&	aging	on J	oint						

1	Soction IVA notamy and Biomachanics of the joints		
4	Section – IV Anatomy and Diomechanics of the joints	10	~
	Must to know	12	5
	Upper limb: shoulder girdle, elbow, wrist and hand	15	
	Lower Limb: Hip complex, knee, ankle and foot	09	5
	➢ Vertebral Column: Cervical, Thoracic, thoracic cage,	2	
	Lumbar and Sacroiliac spine.		
	 Temporomandibular joint 		
5	Section V- Kinetics & Kinematics	7	9
	Must to know	3	
	• Kinematics chains and range of motion.		
	• Kinetics &Kinematics of various activities of daily living like supine to sitting, sitting to standing, walking and climbing up & down.	2	
	Desirable to know – lifting, overhead activities, squatting,	2	
	Nice to Know- Kinetics &Kinematics of running, jogging, pulling, pushing.		
	Desirable to know: Biomechanical alterations of all joint due to	2	
	muscle weakness, joint stiffness and its implications		
	Nice to Know: Pathomechanics of abnormal gait patterns	2	2
6	SPT		48

Textbook

Sr.No.	Title
1	Joint Structure and Function- Cynthia Norkins&Pamela Lavengie
2	Clinical Kinesiology – Brunnstroms.
3	Fundamentals of biomechanics- Margareta Nordin

SCHEME OF EXAMINATION

	Written	Total	P	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	-	-	-

Periodical Examination: Written Examination:-20 MCQ for 20 marks, 20 minutes. **Preliminary Examination / University (Final) Examination:**)

Sec A	MCQ (20 Minutes)	20x1=20 marks
Sec B	1.Short Notes. Answer any 5 out of 6	5x3=15
	2.Short answer questions. Answer any 3 out of 4	3x5=15
Sec C	1.Long Answer Questions (compulsory)	1x15=15
	2.Long Answer Questions Answer any 1 out of 2	1x15=15

• <u>SUPERVISED PRACTICAL TRAINING:</u>

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Co	nverted to 20 marks (100/5=20)

	Course Title :- FIRST AID AND EMERGENCY CARE Course Code:- PT 305																
	Course Credit for FIRST AID AND EMERGENCY CARE																
	Hours Hrs/Wk Credits Evaluation Pattern																
						<u> </u>						W	ritten	Total	Pr	Total	
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		Intro	oductio	n to l	First	Aid	_								1	0	12
		• Assessment, immediate actions and the priorities.															
		•]	Bandag	ges –	Тур	es, b	inde	ers, sj	plint	s & s	lings.						
		•]	Promot	ing s	afet	y cor	isci	ousne	ess.								
		•]	Instrun	nents	use	d in I	First	Aid	(Fir	st Aic	l kit).						
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3	3	SPT	•				5										48

Textbook

Sr.No.	Title
1	Handbook of first Aid- Neelam Makheja

SCHEME OF EXAMINATION

	Written	Total			
IA	Final exam	Final exam			
10	40	50			

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes. **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	MCQ	10x1=10 marks
Sec B	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• SUPERVISED PRACTICAL TRAINING:

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam	= 10 marks
Prelim exam	= 40 marks
Total	= 50 marks
The total shall be Conve	erted to 10 marks (50/5=10)

IV SEMESTER SYLLABUS

Course	Course Title	Hours						
Code	Course The	Th	Pr	SPT	Tot			
PT-401	Pharmacology	48	-	-	48			
PT-402	Electro Therapy- II	64	96	96	256			
PT-403	General Medicine(including Gerantology & Dermatology)	80	32	96	208			
PT-404	Community Medicine, Sociology & Environmental Sciences	80	32	48	160			
	Total	272	160	240	672			

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	Course Title :- Pharmacology																
	Course Code:- PT 401																
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	2.	Ident	ifv wh	lether	th:	ie r	harı	naco	logi	cal e	effect	of	the	drug i	inter	feres	with the
		Ther	apeutic	respo	onse	of F	Phys	iothe	rapy	/ & vi	ce-ve	ersa		0			
	3.	Indic	ate the	use o	of a	nalg	esics	s & e	nti-	inflar	nmate	ory a	agents	with r	nove	ment of	disorders,
		effici	iency &	safe	ty fo	or in	divio	dual i	need	ls.		-	-				
	4. Get the awareness of other essential & commonly used drugs, need for their use &																
	common as well as serious adverse reactions.																
	Pharmacology Hours of																
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		Anti-epileptic drugs															

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	General Anaesthetics		
	Opioid Analgesics		
	NSAIDS		
	Antipyretics		
	Anti-psychotics, Antidepressants		
	Drug Therapy in Parkinsonism		
3	Drugs acting on Peripheral Nervous System	2	-
	• Skeletal muscle relaxants.		
	Local Anaesthetics.		
4	Drugs acting on CVS and blood	6	-
	• Anti-hypertensives, B blockers, Ca channel ACEI		
	Treatment of Angina		
	Treatment of Congestive cardiac failure		
	Haematinics and erythropoietin		
	• Drugs affecting coagulation, bleeding, thrombosis.		
	• Treatment of Shock.		
5	Drugs acting on Respiratory system	2	-
	• For URTI, Sinusitis – cough, laryngitis, Pharyngitis.		
	• Drugs for treatment of bronchial asthma, COPD		
6	Drugs acting on Autonomic Nervous System	4	-
	• Introduction to ANS and Cholinergic agonists – I		
	• Cholinergic agonists – II		
	Cholinergic antagonists		
	 Adrenergic agonists – I 		
	Adrenergic agonists – II		
	Adrenergic antagonists		
7	Endocrinology	Δ	_
,	Introduction to Endocrinology		
	 There is a state of the state o		
	 Treatments of diabetes mellitus 		
	Corticosteroids		
	Oestrogen and Progesterone		
8	Drugs acting on Kidney _Diuretics	2	
9	Chemotherany	7	
	Desirable to know	,	
	General principles of chemotherapy	4	
	 Sulfonamides & Eluoroquinolones 		
	Beta Lactam antibiotics L(Penicillins)		
	 Beta – Lactam antibiotics – I (I cinchinis) Beta – Lactam antibiotics – II (Caphalosporins) 		
	 Deta – Lactani antibiotics – If (Cepitalosporins) Macrolides & aminoglycides 		
	 Tetracyclines & chloramphenical (Broad spectrum antibiotics) 		
	Must to know		
	Anti-Tuberculosis drugs	3	
	Anti Leprosy drugs		
10	 Ann -Lepiosy angs Drugs in poisoning (Desirable to know) 	2	
10	Drugs in poisoning (Desirable to Know)	3	

Nice t	Nice to know					
11	Drugs used in Gastrointestinal Disorders	2				
	Peptic Ulcer					
	• Anti-emetics					
	• Laxatives					
	• Anti-diarrhoeal drugs					
12	Miscellaneous Topics	2				
	Vaccines & Sera					
	• Dermatological – Scabies – Psoriasis – Local Antifungals					
	• Vitamins & Calcium Metabolism, Phosphorus, magnesium					

Sr.No.	Title
1	Essentials of Medical Pharmacology – K. D. Tripathi
2	Pharmacology and Pharmaco therapeutics – R.S. Satoskar
3	Pharmacology by Gaddum

Reference Books

Sr.No.	Title
1	Medical Pharmacology by Drill
2	Pharmacology principle of Medical practice – by Krantx& Carr
3	Pharmacological basis of Therapeutics – by Goodman, L.S. Gilman A.

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
10	40	50

Periodical Examination: Written Examination:-20 MCQ for 10 marks , 20 minutes. **Preliminary Examination / University (Final) Examination: Written Examination** (40 marks)

Sec A	MCQ	10x1=10 marks
	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
Sec B	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

Internal Assessment Marks : Theory

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Converted to 1	10 marks (50/5=10)

				(Cou	rse T	fitle	:- El	LEC	CTRO	TH	ERA	APY-1	II					
	Course Code:- PT 402																		
	Lourse Credit for ELECTRO THERAPY - II Hourse Hrs/W/z Credits Evaluation Dattorn																		
	1	IUUI	•	1113	, . .							W	ritten	Tc	otal	al Practical Total			
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Fi	nal	IA	Final	1	Final
64	96	96	256	4	6	6	16	4	3	2	9	20	80	10	00	20	80	1	100
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	Didynamic currents	3	3
	Nice to know		
	 Functional electrical stimulation 	2	1
	Long wave diathermy	3	
	➢ NEMS		
2	Medium frequency currents	6	10
	must know –	4	
	Interferential therapy: Define, Principles of production,		
	static Interferential system, dynamic interference system,		
	Physiological and therapeutic effects, indication and		
	Desirable to know		
	Russian currents		2
	Rebox type currents	2	<i>L</i>
3	Desirable to know	3	2
5	Biofeedback method	5	2
	Instrumentation, principles, therapeutic effects, indications,		
	contraindications, limitations, precautions, operational skills		
	and patient preparation		
4	Ultra – violet rays (UVR):	4	6
	• Wavelength, frequency, types & sources of UVR		
	generation, techniques of irradiation, physiological &		
	therapeutic effects, indications, contraindications,		
	precautions, operational skills of equipment & patient		
	preparation. Dosimetry of UVR.		
5	Light Amplification of stimulated Emission of Radiation	4	5
	(LASER)– Definition, historical background, physical		
	principles, biophysical effects, types, production, therapeutic		
	effects, techniques of application, indications, contraindi-		
6	Care of wound application of Therapoutic currents	2	2
0	Ultracound UVD & LASED	Z	3
7	Nice to know- Combination Thorany	2	2
/ 8	Desirable to Know	2	<u> </u>
0	Intermittent Therapy unit its operation and different		
	methods of application region wise.		
	Intermittent Pneumatic Therapy unit, its operation and		
	different methods of application – region wise.		
9	Respect for human vulnerability and personal integrity	1	
	• Different aspects of vulnerability - biological, social,		
	cultural		
	• Success and failures in physiotherapy treatments		
	• Problems with the basic assumption that vulnerability		
	should be eliminated		
	• Care ethics- New approaches in bioethics, Solidarity, The		
	duty to care		
	Relation between vulnerability and personal integrity		
	SPT		96

Sr.No.	Title
1	Clayton's Electro Therapy
2	Electro therapy Explained – by Low &Reed
3	Electro Therapy – by Kahn
4	Therapeutic Electricity – by Sydney Litch

Reference Books

Sr.No.	Title
1	Clinical Electro Therapy – by Nelson & Currier

SCHEME OF EXAMINATION

	Written	Total	P	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Simulated presentation of technique & demonstration)

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	1. MCQ	20x1=20 marks
Sec B	1. Short answer questions - Answer any 5 out of 6	5x3=15 marks
	2. Short answer questions - Answer any 3 out of 4	3x5=15 marks
Sec C	Long Answer Questions	
	1. Based on Low frequency modes	15 marks
	2. Based on Medium frequency currents	15 marks
	OR	
	2. Based on U.V.R./LASER	15 marks
	LAQ should give break up of 15 marks – e.g. [3 +5+7]	

Practical examination (80 marks)

1.	Long Case	35 marks
	On model Motor points /U. V. R. Test Dose. Faradism under Pressure	
2.	Short Cases-1	20 marks
	Based on TENS/LASER	
3.	Short Cases-2	20 marks
	Based on medium Frequency current/ low frequency current	
4	Journal	5 marks

• <u>SUPERVISED PRACTICAL TRAINING:</u>

Journal=5marks

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks : Theory/ Practical Periodical exam = 20 marks

Prelim exam = 20 marks Total = 80 marks The total shall be Converted to 20 marks (100/5=20)

	Course Title :- GENERAL MEDICINE (INCLUDING CARDIO- RESPIRATORY, GERANTOLOGY, DERMATOLOGY)									
Course Code:- PT 403										
Course Credit for GENERAL MEDICINE (INCLUDING CARDIC)-									
RESPIRATORY, GERANTOLOGY, DERMATOLOGY)										
Hours Hrs/Wk Credits Evaluation Patter	'n									
The Dr. SDT. Tet Lee Dr. SDT. Tet Lee Dr. SDT. Tet Finel Finel Finel	Total									
In Pr SP1 Tot Lee Pr SP1 Tot Lee Pr SP1 Tot Lee Pr SP1 Tot IA exam exam IA exam	Final exam									
80 32 96 208 5 2 6 13 5 1 2 8 20 80 100										
At the end of the course, the candidate should be able to										
1 Describe Etiology Pathonhysiology Signs & Symptoms & Management of the va	arious									
Endocrinal. Metabolic. Geriatric. dermatology & Nutrition Deficiency conditions										
2. Describe Etiology, Pathophysiology, Signs & Symptoms, Clinical Evaluation &	ž									
Management of the various Rheumatological, Cardiovascular and Respiratory Co	onditions.									
3. Interpret Chest X-ray, Blood gas analysis, P.F.T. findings, Blood investigations of	lone for									
various medical and Rheumatological conditions.										
Describe the principles of Management at the Medical Intensive Care Unit.										
Course Content – (section A/B/C if applicable)										
Topic A-CARDIO-VASCULAR & RESPIRATORY/	rs of									
Serial PULMONARY MEDICINE teaching	learning									
No. Theory	Practical									
I DISEASES OF THE CARDIO-VASULAR SYSTEM										
Must to Know 16										
• Examination of Cardiovascular System										
• ECG – Normal & Variations due to ischemia & infarction 3										
• Stress Test 2 Definition Etiology Clinical Fastures Complications										
Management of the following Cardio-vascular diseases: 12										
 LH.DMyocardial infarction 										
 Valvular Heart Disease – i) Congenital ii) Acquired 										
Rheumatic Fever & Rheumatic Heart Disease										
Infective Endocarditis										
Congenital Heart Disease, Unstable Angina										
2DISEASES OF THE RESPIRATORY SYSTEM23										
Must to Know 2										
Examination of Respiratory System										
Introduction of clinical examination–Breath sounds, X ray										
chest, ABG, PFT										
Patterns of Respiratory Diseases: Obstructive & Restrictive										
• Definition, Etiology, Clinical Features, Complications,										
Management of Diseases of the respiratory system :										
Common infectious diseases like Tuberculosis, Pneumonia, Lung Abscess, Bronchiectasis, 5										
Diseases of Pleura like Pleural Effusion Pneumothoray										
Hydroppelimothorax Empyema 5										
Obstructive Lung Diseases like Bronchitis Emphysema										
Bronchial Asthma, Cystic Fibrosis.										
Interstitial Lung Diseases										
Respiratory Failure: Definition, Types, Causes, Clinical										
RPT Semester Pattern /2018-19 /S-01 /R-2	Page 62									

	Features, Diagnosis and Management	2	
	Desirable To Know	_	
	• Arrhythmia – classification	5	
	• Occupational lung diseases like silicosis, Asbestosis,		
	Pneumoconiosis, Brucellosis, Farmer's Lung		
D	• Intensive Medical Unit – Infrastructure & Treatment		
В	GENERAL MEDICINE, RHEUMATOLOGY &		
1	GERUNIOLOGY	0	
1	General Medicine	8	
	Diabetes Mellitus : Etiology and pathogenesis, Clinical	3	
	manifestations, Management and Complications of diabetes. Diseases of Blood		
	Anemia: Signs and symptoms – types and management	2	
	Hemophilia : Cause – clinical features severity of disease –	-	
	management – Complications due to repeated haemorrhages –		
	complications due to therapy		
	Desirable To Know	3	
	Disorders of Endocrine system		
	• Thyroid,		
	Pituitary & Adrenal conditions		
	Calcium Metabolism		
2	Rheumatological Conditions	5	
	Must To Know		
	Introduction to Rheumatology and Classification		
	Rheumatoid Arthritis, Juvenile RA		
	Chicken Gunia, Psoriatic, Gouty Arthritis, S S A		
3	Geriatric Conditions	7	
	Must to Know		
	• Osteoporosis : Causes, Clinical features, Complications,	4	
	Management- medical and surgical		
	• Hypertension: Definition, causes, classification, types,		
	assessment, investigations and management.		
	Desirable To Know	2	
	• Aging Process	3	
	General Health Care, Wellness Clinic		
	Nutrition Deficiency Disease & Drug Abuse / Intoxication		
С	Dermatology		
1	At the end of the course, the student will		
	• Be able to describe the Pathophysiology, Signs &		
	Symptoms, Clinical Features, Examination & Management		
	of Common Skin Conditions	10	
2	Must To Know	12	
	• Structure, function and lesions of skin		
	• Acne		
	Pigmentary disorders: Localized &Gen Pigmentary		
	• Papule-squamous disorders: Psoriasis, PR, Lichen planus, PRP		
	• Topical therapy in Dermatology & Hair disorders -		
	Alopecia, Hirsutism		
BPT Se	mester Pattern/2018-19/S-01/R-2		Page 63

	• Leprosy		
	• Sexually Transmitted skin lesions- HIV, Syphilis	0	
	Nice to know	8	
	• Bacterial (impetigo, carbuncle. SSS)& Viral infections		
	(Warts, Molluscum, Herpes, Hz, HSV)		
	• Fungal infections a] Superficial – TC, TV b] Deep fungal		
	– Candidiasis,		
	• Scabies, Pediculosis, Eczema – Exogenous & Endogenous		
	• Sexually Transmitted skin lesions :ChaneroidLGV		
	• G. inguinale, Hair deformity		
3	CLINICAL		32
	Medicine		20
	Dermatology		12

Sr.No	Title
1	API - Text book of Medicine – 5 th edition
2	Golwalla – Medicine for students
3	Principles & Practice of Medicine – 16 th edn - by Davidson
4	Clinical Medicine :- P. J. Mehta
5	Medicine-P C Das

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
20	80	100

Periodical Examination:

• Written Examination:-20 MCQ for 20 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	•	MCQ (10 MCQ CVS & Gerontology & 10 MCQs	20x1=20
		Dermatology)	marks
Sec B	•	Very Short answer questions. Answer any 5 out of 6	5x3=15
	•	Short answer questions. Answer any 3 out of 4	3x5=15
Sec C	•	Long Answer Questions (compulsory)	1x15=15
	•	Long Answer Questions Answer any 1 out of 2	1x15=15

• <u>SUPERVISED PRACTICAL TRAINING:</u>

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Converte	ed to 20 marks (100/5=20)

C	Course Title: COMMUNITY MEDICINE, SOCIOLOGY AND ENVIRONMENTAL SCIENCES																	
	Course Code:- PT 404																	
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	somatic origin:																	
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4	Domography and Family Diaming		
4	Demography and Fanny Flamming	2	-
	• Family planning-objectives of national family planning	L	
	Formily planning methods: A general idea of advantage and		
	• Family planning methods: A general idea of advantage and		
5	Immunization programmes children & hospital staff	1	
5	minumzation programmes – emiliten & nospital stari.	1	-
6	Occupational Health:	4	2
	Occupational hazards,		
	Occupational diseases		
	Prevention of occupational diseases.		
	• Social security and other measures for the protection from		
	occupational hazard accidents and diseases,		
	Compensation acts.		
7	Hospital waste management	3	2
	• Sources of hospital waste, Health hazards, Waste		
	Management		
8	Disaster Management	3	2
	• Natural and man-made disasters		
	• Disaster impact and response		
	• Relief phase		
	• Epidemiologic surveillance and disease control, Nutrition,		
	Rehabilitation, Disaster preparedness		-
9	Health Education	3	2
	• Concepts, aims and objectives		
	• Approaches to health education		
	Models of health education		
	• Contents of health education		
	• Principles of health education		
	Practice of health education		
10	Addiction – Alcoholism, Neuromotor, Psychosomatic disorders	1	2
	and Smoking		
11	DESIRABLE TO KNOW	2	2
	• Environmental Hygiene including man & his surrounding,		
	Occupational & Industrial hygiene, Village & Town		
	Sanitation.		
	• Overview of Public Health Administration at Central & State		
	ievels – Strategies of Health Delivery System for		
	Programma Development goals National health		
12	Montol Health	1	
12	Characteristics of a montally healthy marson	1	-
	Characteristics of a mentality nearing person Types of mental illness		
	• Types of mental fillback		
	Causes of mental III health		
	Preventive aspects		
	Miental health services		
1	• Alcohol and drug dependence		

13	Nutrition and Health	1	1	
	• Nutritional problems in public health			
	Community nutrition programmes			
14	NICE TO KNOW			
	Health programmes in India	3	3	
	Vector borne disease control programme			
	National leprosy eradication programme			
	National tuberculosis programme,			
	National AIDS control programme,			
	National programme for control of blindness			
	• Iodine deficiency disorders (IDD) programme,			
	Universal Immunization programme			
	• Reproductive and child health programme			
	National cancer control programme			
	National mental health programme			
	National diabetes control programme			
	National family welfare programme			
	• National sanitation and water supply programme,			
	Minimum needs programme			
Tonic		Ηοι	urs of	
Serial	B.SOCIOLOGY	teaching	g/learning	
Seria		Theory	Practical	
1	MUST KNOW	1	-	
	Introduction – Definition & Relevance with Physiotherapy.			
2	Sociology & Health – Social factors affecting Health Status,	1	-	
	Social Consciousness & Perception of Illness, Decision Making			
2	in taking Treatment.	1		
3	Socialization – Definition, Influence, of Social Factors, on	1	-	
	Personality, Socialization in the Hospital & Renabilitation of the			
4	patients.	2		
4	of Health & Diseases	Z	-	
5	Community Role of Rural & Urban communities in Public	2		
5	Health Role of community in determining Beliefs Practices &	2	_	
	Home Remedies in Treatment.			
	Family-Influence on human personality. Individual Health.	2		
	Family & Nutrition, Effects of Sickness on Family	_		
	Psychosomatic Diseases & Family			
6	Social problems of the Disabled-Consequences of the following	1	-	
	social problems in relation to sickness disability, remedies to			
	prevent these problems			
	Dopulation Explosion			
	• Fopulation Explosion			
	Poverty & Unemployment			

r		1	
1	DESIRABLE TO KNOW	2	-
	Role of Primary & Secondary Groups in the Hospital &		
	Rehabilitation Setting.		
2	Culture-Components Impact on Human Behaviour Cultural	1	-
	Meaning of Sickness, Response to Sickness & Choice of Treatment.		
3	Caste systems-Features of Modern Cast Systems & its Trends	1	_
5	Social change factors Human Adaptation Stress Deviance	1	
	Health Programme Bole of Social Planning in the improvement		
	of Health & in Dehebilitation		
4		1	
4	Social Control – Definition, Role of norms, Folkways, Customs,	1	-
	Morals, Religion, Law & other means of social controls in the		
	regulation of Human Behavior, Social Deviance & Disease		
5	Prostitution, Alcoholism, Beggary, Problems of Women in	2	-
	Employment, Role of a Social Worker.		
1	NICE TO KNOW	1	-
	Role of Culture as Social consciousness in moulding the		
	Perception of Reality. Culture induced Symptoms & Diseases.		
	Sub-Culture of Medical Workers		
2	Social problems of the Disabled-Consequences of the following	1	_
-	social problems in relation to sickness disability remedies to	-	
	provent these problems. Invenile delinquency		
Tonio	prevent these problems – suvenne dennquency	Hou	ire of
Topic Seriel		HOU	
Serial	C. ENVIKNOMENTAL SCIENCES	teaching	g/learning
INO.		Theory	Practical
	Must to know.		
-	Wust to know.	1	-
1	Multidisciplinary nature of environmental studies	1	-
1	Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III	1	-
2	Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources	1	-
2	Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know:	1	-
2	Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: • Water resources : Use and over-utilization of surface	1	-
2	Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: • Water resources : Use and over-utilization of surface &ground water,	1	-
2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods drought conflicts over water dams-benefits 	1	-
2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods, drought, conflicts over water, dams-benefits &problems 	1	-
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2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods, drought, conflicts over water, dams-benefits &problems. Mineral resources: Use and exploitation, environmental effects of extracting and using mineral resources, case 	1	-
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2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods, drought, conflicts over water, dams-benefits &problems. Mineral resources: Use and exploitation, environmental effects of extracting and using mineral resources, case studies. Energy resources : Growing energy needs, renewable and non-renewable 	1	-
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2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods, drought, conflicts over water, dams-benefits &problems. Mineral resources: Use and exploitation, environmental effects of extracting and using mineral resources, case studies. Energy resources : Growing energy needs, renewable and non-renewable Energy sources, use of alternate energy sources. Case studies. Role of an individual in conservation of natural resources.Equitable use of resources for sustainable lifestyles Desirable to know Renewable and non-renewable resources Natural resources and associated problems. 	1	-
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2	 Multidisciplinary nature of environmental studies Definition, scope and importance, Need for public awareness.III Natural Resources Must to know: Water resources : Use and over-utilization of surface &ground water, Floods, drought, conflicts over water, dams-benefits &problems. Mineral resources: Use and exploitation, environmental effects of extracting and using mineral resources, case studies. Energy resources : Growing energy needs, renewable and non-renewable Energy sources, use of alternate energy sources. Case studies. Role of an individual in conservation of natural resources.Equitable use of resources for sustainable lifestyles Desirable to know Renewable and non-renewable resources Natural resources: Use and over-exploitation, deforestation, case studies. 	1	-
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	• Food resources : World food problems, changes caused by		
	agriculture and		
	• overgrazing, effects of modern agriculture, fertilizer-		
	• Logging solipity case studies		
	 Logging, samily, case studies. Lond recourses i Lond on a recourse lond degradation man 		
	• Land resources . Land as a resource, rand degradation, man		
	 Landslides soil erosion and desertification 		
3	Ecosystems		_
U	Must to know	1	
	• Introduction, types, characteristic features, structure and		
	function of the following ecosystem :-		
	➢ Forest ecosystem		
	Grassland ecosystem		
	Desert ecosystem		
	Aquatic ecosystems (ponds, streams, lakes, rivers, oceans,		
	estuaries)		
	Food chains, food webs and ecological pyramids.		
	Nice to know	1	
	 Concept of an ecosystem. Tv Structure and function of an ecosystem 	1	
	 Structure and function of an ecosystem. Broducers, consumers and decomposars 		
	 Producers, consumers and decomposers. Energy flow in the accounter 		
	 Energy now in the ecosystem. Ecological succession 		
1	Ecological succession. Biodiversity and its conservation	3	3
+	Must to know	$\frac{3}{2}$	5
	• Introduction – Definition: genetic species and ecosystem	-	
	diversity.		
	• Biodiversity at global, National and local levels.		
	• India as a mega-diversity nation V		
	• Hot-sports of biodiversity.		
	• Threats to biodiversity: habitat loss, poaching of wildlife,		
	man-wildlife conflicts.		
	• Endangered and endemic species of India		
	• Conservation of biodiversity: In-situ and Ex-situ		
	conservation of biodiversity.		
	Nice to know	1	
	Biogeographically classification of India	1	
	• Value of biodiversity : consumptive use, productive use,		
	social, ethical, aesthetic and option values	0.1	2
5	Environmental Pollution	31	3
	VIUSI 10 KNOW		
	• Solid waste Management: Causes, effects and control measures of urban and industrial wastes		
	 Role of an individual in prevention of pollution 		
	 Pollution case studies 		
	 Disaster management: floods earthquake cyclone and 		
	landslides.		
	 Definition, Cause, effects and control measures of :- 		
DDT 2			
BPT Se	mester Pattern/2018-19/S-01/R-2		Page 69

	> Air pollution		
	Water pollution		
	Soil pollution		
	Marine pollution		
	Noise pollution		
	Thermal pollution		
	Nuclear hazards		
6	Social Issues and the Environment		2
	Must to know	2	
	• Environmental ethics: Issues and possible solutions.		
	• Climate change, global warming, acid rain, ozone layer		
	depletion, nuclear accidents and holocaust. Case Studies.		
	Wasteland reclamation.		
	Consumerism and waste products.		
	Environment Protection Act.		
	• Air (Prevention and Control of Pollution) Act.		
	• Water (Prevention and control of Pollution) Act		
	 Public awareness 		
	Nice to know		
	• Water conservation rain water harvesting watershed		
	management		
	From Unsustainable to Sustainable development	1	
	Information to Sustainable development		
	• Orban problems related to energy		
	• Resettlemsent and renabilitation of people; its problems and		
	concerns. Case Studies		
	Wildlife Protection Act		
	Forest Conservation Act		
	• Issues involved in enforcement of environmental legislation.		
7	Human Population and the Environment	6	8
	Must to know		
	Population growth, variation among nations.		
	Population explosion – Family Welfare Programme. VII		
	• Environment and human health.		
	Human Rights.		
	Value Education.		
	• HIV/AIDS.		
	Women and Child Welfare.		
	Role of Information Technology in Environment and human		
	health.		
	Case Studies		
			1

Text books:

Sr.No.	Title
1	K. Park – Park 's Textbook of Preventive & Social Medicine
2	P. K. Mahajan & M. C. Gupta – Textbook of Preventive & Social Medicine
3	Environmental sciences – Mr. Anil Aggarwal

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
20	80	100

Periodical Examination: Written Examination: -20 MCQ for 20 marks, 20 minutes.

Preliminary Examination / University (Final) Examination: Written Examination (80 marks)

Sec A	MCQ(10 community+5 Sociology+ 5 Env. Sci)	20x1=20 marks
Sec B	1.Short answer questions.(Answer any 5out of 6	5x3=15
Community	2.Short answer any 3 out of 4 questions.	3x5=15
Medicine		
Sec C	1. Short answer questions. Answer any 5 out of 6	5x3=15
Sociology & Env.	2. Short answer questions. Answer any 3 out of 4	3x5=15
Sci.		

• <u>SUPERVISED PRACTICAL TRAINING:</u>

All the SPT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory :-

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Conver	rted to 20 marks $(100/5=20)$

SEMESTER – V

Course	Course Title	Hours						
Code	Course The	Th	Pr	SCT	Total			
PT-501	Orthopaedics and Traumatology	64	32	48	144			
PT-502	Neurology (Paediatrics, Psychiatry)	64	32	84	144			
PT-503	Physical and Functional Diagnostics skills	80	96	96	272			
PT-504	Obstetrics and Gynaecology	32	32	48	112			
	Total	240	192	240	672			

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

Course Title :- Orthopaedics and Traumatology																	
Course Code:- PT 501																	
	Course Credit for Orthopaedics and Traumatology																
	Hours Hrs/Wk Credits Evaluation Pattern																
												W	ritten	Total	Pr	actical	Total
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IΔ	Final	Final	IΔ	Final	Final
												іл	exam	exam	іл	exam	exam
64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
Lea	Learning Objectives:																
At the end of the course, the candidate should be able to -																	
1.	Disc	cuss	the	Path	o-pł	iysio	logy	, cl	linica	al m	anife	statio	ons &	cons	serva	ntive/Su	ırgical

management of various traumatic & cold cases of the Musculo-skeletal Conditions

- 2. Gain the skill of clinical examination & interpretation of the preoperative cold cases & all the post- operative cases
- 3. Read & interpret a] salient features of the X-ray of the spine & Extremities pathological/ biochemical studies pertaining to Orthopaedic Conditions

4. Correlate the radiological findings with the clinical findings

	Course Content						
Topic Serial	MUST TO KNOW	Hou teaching	rs of /learning				
No.	The of content	Theory	Practical				
1.	Introduction		-				
	• Introduction to orthopaedics.						
	• Clinical examination in an Orthopaedic patient.	3					
	Common investigative procedures.						
	• Radiological and Imaging techniques in Orthopeadics.						
2.	Traumatology	3	-				
	• Fracture: definition, types, signs and symptoms.						
	• Fracture healing.						
	Complications of fractures.						
	• Conservative and surgical approaches.						
	• Principles of management – reduction (open/closed,						
	immobilization etc).						
	• Subluxation/ dislocations – definition, signs and						
	symptoms, management (conservative and operative).						
3.	Fractures and Dislocations of Upper Limb		3				
	Fractures of Upper Limb - causes, clinical features,	4					
	mechanism of injury, complications,						
	conservative and surgical management of the following						
----	--	---	---				
	fractures:						
	• Fractures of clavicle and scapula.						
	• Fractures of greater tuberosity and neck of humerus.						
	• Fracture shaft of humerus.						
	• Supracondylar fracture of humerus.						
	• Fractures of capitulum, radial head, olecranon, coronoid,						
	and epicondyles.						
	• Both bone fractures of ulna and radius.						
	• Fracture of forearm – monteggia, galaezzi fracture –						
	dislocation.						
	• Chauffer's fracture.						
	• Colle's fracture.						
	• Smith's fracture.						
	Scaphoid fracture.						
	• Fracture of the metacarpals.						
	• Bennett's fracture.						
	• Fracture of the phalanges. (Proximal and middle.)						
	Dislocations of Upper Limb :						
	• Anterior dislocation of shoulder – mechanism of injury,						
	clinical feature, complications, conservative management,						
	surgical management.						
	• Recurrent dislocation of shoulder.						
	• Posterior dislocation of shoulder – mechanism of injury,						
	clinical features and management.						
	• Posterior dislocation of elbow– mechanism of injury,						
	clinical feature, complications & management.						
4.	Fracture of Spine		3				
	• Fracture of Cervical Spine - Mechanism of injury,	4					
	clinical feature, complications (quadriplegia);						
	• Management- immobilization (collar, cast, brace,						
	traction); Management for stabilization, management of						
	complication (bladder and bowel, quadriplegia).						
	• Hangman's fracture.						
	• Fracture odontoid.						
	• Fracture of atlas.						
	• Fracture of Thoracic and Lumbar Regions - Mechanism						
	of injury, clinical features, conservative and surgical						
	management of common fractures around thoracic and						
	lumbar regions.						
	• Fracture of coccyx.						
	• Fracture of Rib Cage - Mechanism of injury, clinical						
	features, management for Fracture Ribs, Fracture of						
	sternum.						
5.	Fractures and Dislocations of Lower Limb		3				
	Fracture of Pelvis and Lower Limb - causes, clinical features,						
	mechanism of injury, complications, conservative and	4					
	surgical management of the following fractures:						

	• Fracture neck of femur – classification, clinical features,		
	Emotive and surgical.		
	• Fractures of trochamers.		
	b) Subtrochantric		
	• Fracture shaft femur_clinical features mechanism of		
	injury complications management-conservative and		
	surgical.		
	Supracondylar fracture of femur.		
	• Fractures of the condyles of femur.		
	• Fracture patella.		
	• Fractures of tibial condyles.		
	• Both bones fracture of tibia and fibula.		
	• Dupuytren's fracture		
	Maisonneuve's fracture.		
	• Pott's fracture – mechanism of injury, management.		
	Bimalleolar fracture , Trimalleolar fracture		
	• Fracture calcaneum – mechanism of injury,		
	complications and management.		
	• Fracture of talus.		
	• Fracture of metatarsals—stress fractures Jone's fracture.		
	• Fracture of phalanges.		
	Dislocations of Lower Limb		
	Mechanism of injury, clinical features, complications,		
	management of the following dislocations of lower limb.		
	Anterior dislocation of hip.		
	Posterior dislocation of hip.		
	Central dislocation of hip.		
	• Dislocation of patella. Recurrent dislocation of patella.		
6.	Diseases of Bones and Joints		2
	Causes, Clinical features, Complications, Management-		
	medical and surgical of the following conditions :	4	
	• Infective: Osteomyelitis, TB Spine and other major joints		
	• Perthes, Slipped Capital Femoral Epiphysis, Avascular		
	Necrosis		
	• Metabolic: Osteoporosis, Osteopenia Osteomalacia,		
7	Rickets	2	1
/.	Peripheral nerve injuries	3	1
	Complications		
8	Deformities		2
0.	Clinical Features Complications Medical and Surgical		2
	Management of the Following Congenital and Acquired	2	
	Deformities.	2	
	Congenital Deformities		
	• CTEV		
	• CDH.		
	Torticollis.		
L			1]

	- Castingia		
	• Scoliosis.		
	• Flat foot.		
	• Vertical talus.		
	• Hand anomalies- syndactyly, polydactyly and		
	ectrodactly.		
	• Cervical rib.		
	Acquired Deformities		
	Acquired Torticollis.		
	• Scoliosis.		
	Kyphosis.		
	Lordosis.		
	• Genu varum, Genu valgum, Genu recurvatum		
	• Coxa vara.		
	Pes cavus, Pes Planus		
	 Hallux rigidus Hallux valgus Hammer toe 		
	Metatarsalgia		
9	Inflammatory and Degenerative Conditions		1
).	Causes clinical feature complications deformities		1
	radiological features management- conservative and surgical		
	for the following conditions :	3	
	• Osteoarthritis	5	
	Discoardinatis. Dhoumatoid arthritis		
	Kneumatolu arumnus.		
	• Ankylosing spondylitis		
	• Gouty arthritis.		
	• Psoriatic arthritis.		
	• Hemophilic arthritis.		
	• Still's disease (Juvenile Rheumatoid Arthritis).		
	Charcot's joints.		
10.	Soft Tissue Injuries		4
	• Define terms such as sprains, strains, contusion,	_	
	tendinitis, rupture, tenosynovitis, tendinosis, bursitis.	5	
	• Mechanism of injury, clinical features, managements-		
	conservative and surgical of the following soft tissue		
	injuries:		
	Meniscal injuries of knee.		
	Ligamentous injuries of knee.		
	Ankle Sprain		
	Wrist sprain		
	 Strains- quadriceps, hamstrings, calf, biceps, triceps 		
	etc.		
	Contusions- quadriceps, gluteal, calf, deltoid etc.		
	Tendon ruptures-Achilles, rotator cuff muscles,		
	biceps, pectorals etc.		
11.	Regional Conditions	4	3
	Definition, Clinical features and management of the		
	following regional conditions:		
	• Shoulder: Periarthritic shoulder (adhesive capsulitis).		
	Rotator cuff tendinitis. Subacromial Bursitis.		
	• Elbow: Tennis Elbow. Golfer's Elbow. Olecranon		

r			
	Bursitis (student's elbow). Triceps Tendinitis.		
	• Wrist and Hand: De Quervain's Tenosynovitis. Ganglion.		
	Trigger Finger/ Thumb. Mallet Finger, Carpal Tunnel		
	Syndrome, Dupuytren's Contracture.		
	• Pelvis and Hip : IT Band Syndrome. Piriformis		
	Syndrome. Trochanteric Bursitis.		
	• Knee: Osteochondritis Dissecans. Prepatellar and		
	Suprapatellar Bursitis Popliteal Tendinitis Patellar		
	Tendinitis Chondromalacia Patella Plica Syndrome Fat		
	Pad Syndrome (Hoffa's syndrome)		
	• Anklo and East: Anklo Sprains Plantar Eascitis /		
	Calcaneal Spur Tarsal Tunnel Syndrome Achilles		
	Tandinitis Matatarsalgia Morton's Neuroma		
12	A montations	3	2
12.		3	2
	• Definition		
	• Levels of amputation of both lower and upper limbs		
	• Indications		
	Complications		
	Management		
13.	Hand Injuries	2	1
	Mechanism of injury, clinical features, and management of		
	the following:		
	• Crush injuries.		
	• Elexor and extensor injuries		
	 Burn injuries of hand 		
14	Carvicel and Lumber Pathology	3	2
17,	Causes clinical feature natho-physiology investigations	5	2
	management Medical and surgical for the following :		
	Deployed interverbral disc (DID)		
	• Profapsed interverbrar disc (PID)		
	• Spinal Canal Stenosis.		
	• Spondylosis (cervical and lumbar)		
	• Spondylolysis.		
	• Spondylolisthesis.		
	Lumbago/ Lumbosacral strain.		
	Sacralisation. Lumbarisation.		
	Coccydynia.		
	Hemivertebra.		
15	Orthopedic Surgeries	2	2
_	Indications, Classification, Types, Principles of management	_	_
	of the following Surgeries :		
	Orthodesis		
	Arthroplasty (partial and total replacement)		
	Ostaotomy		
	• Osteololly		
	• External fixators		
	• Spinal stabilization surgeries (Harrington's, Luque rod,		
	Stetti plating) etc.		
16	DESIRABLE TO KNOW	1	2
1	• Bone tumors: classification, clinical features, management		

Re-constructive surgeries in Polio & cerebral palsy (bone & soft tissues)	3
Syndromes	
Causes, Clinical features, complications, management-	3
conservative and surgical of the following:	
Cervico brachial syndrome	
Thoracic outlet syndrome	
• Vertebro- basilar syndrome	
Scalenus syndrome	
Costo clavicular syndrome	
Levator scapulae syndrome	
Piriformis syndrome.	
Connective Tissue Disorders	2
Systemic Lupus Erythematosis	2
• Scleroderma	
• Dermatomyositis	
• Mixed connective tissue Disease (MCTD)	
17. NICE TO KNOW	6 1
• Arthrogryposis multiplex congenita	
(amyoplasia congenita).	
Arthrodesis	
Clay shoveller's fracture	
Limb deficiencies- Amelia and Phocomelia.	
• Klippel feil syndrome.	
Osteogenesis imperfecta(fragile ossium).	
CLINICAL -	
Independent Clinical Orthopaedic evaluation, presentation & recording of :	
• 1 acute soft tissue injury [including nerve injury],	
• 2 cases of infections of bones and joints	
• 2 cases of degenerative arthritis of extremity joints,	
• 2 degenerative arthritis of spine, 2 chronic backaches,	
• 1 case of acute P.I.D	
• 1 post operative cases of fractures of extremities	
• 1 traumatic paraplegia/quadriplegia	
OBSERVATION: At least 2 surgeries of fracture internal fixation, one knew	e/hip
replacement & Re-constructive surgery of the tendons	
18 SCT	48

Sr.No.	Title
1	Apley's textbook of Orthopaedics
2	Outline of Fractures - John Crawford Adams.
3	Outline of Orthopedics.— John Crawford Adams.
4	Text book of Orthopedics.—Maheswari.
5	Textbook of Orthopedics and Traumatology— M.N.Natarajan
6	Orthopadic for physiotherapist – John Ebnzer

SCHEME OF EXAMINATION

	Total	
IA	Final exam	Final exam
20	80	100

Periodical Examination:

• Written Examination:-20 MCQ for 20 marks , 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ	20x1=20
Sec B	1. Very Short answer questions Answer any 5 out of 6	5x3=15
	2. Short answer questions Answer any 3 out of 4	3x5=15
Sec C	1. Long Answer Questions (compulsory)	1x15=15
	2. Long Answer Questions Answer any 1 out of 2	1x15=15

• <u>SUPERVISED CLINICAL TRAINING:</u>

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Convert	ted to 20 marks (100/5=20)

Course Title :- Neurology (Including Paediatrics, Psychiatry)																				
Course Code:- PT 502																				
Course Credit for Neurology (Including Paediatrics, Psychiatry)																				
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Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	ritten Fin exa	al m	T F ex	otal inal xam	Pr IA	Fina Fina exa	l al m	Total Final exam
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2.	Acqui	re ski	ll of o	clinic	al ez	kami	nati	on of	² Nei	irolog	rical S	Svste	em.							
3.	Acqui	re kno	owled	lge ir	bri	ef ab	out	intra	-utei	ine de	evelo	pme	nt of	f th	le f	oetu	IS			
4.	Descr	ibe no	ormal	deve	lopr	nent	&gi	rowth	n of a	a chilo	l, im	orta	ance	of	Im	nmu	niza	tion	& ł	oreast-
	feedir	ng & p	sych	ologi	cal a	ispec	t of	deve	elopr	nent.	_									
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	•	Wi	lson's	s dise	ase															
3	P	olyne	urop	athy													1			-
	•	Cla	ssific	cation	ofl	Polyı	neur	opatl	nies											
	•	Cau	uses,	clini	cal	featu	res,	mar	nage	ment	of G	BS,	Dia	bet	tic					
		and	l Alco	oholio	c Ne	urop	athy	/	-											
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		bio	psy, r	nanag	geme	ent of	mu	scle o	disea	ises, g	enetic	cou	insel	ling	g.					
	•	Cla	ssific	cation	, eti	olog	y, s	igns	& 8	ympto	oms	of]	Mus	cul	lar					
		dys	troph	iy and	1 M	yotor	11C C	iystro	ophy											

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5	Motor neuron diseases Etiology, pathophysiology, classification, clinical signs & symptoms, investigations, differential diagnosis, medical management, and complications of following disorders:	2	-
	Amyotrophic lateral sclerosis		
	• Spinal muscular atrophy		
	• Hereditary bulbar palsy		
	• Neuromyotonia		
	Post-irradiation lumbosacral polyradiculopathy.		
6	Multiple Sclerosis	1	-
	Etiology, pathophysiology, classification, clinical signs &		
	symptoms, investigations, differential diagnosis, medical		
	management, and complications	2	
1	Infections of brain and spinal cord	2	-
	Ethology, pathophysiology, classification, clinical signs α		
	management surgical management and complications of		
	following disorders:		
	• Meningitis		
	• Encephalitis		
	• Neurosyphilis		
	• Herpes		
	HIV infection		
	Poliomyelitis and Post-polio syndrome		
	• Leprosy		
	• Tetanus		
8	Higher cortical, neuro psychological and neurobehavioral disorders	2	-
	• Physiological nature of Epilepsy, classification, clinical		
	features, investigations, medical& surgical management of		
	following disorders – Non-epileptic attacks of childhood,		
	Epilepsy in childhood, Seizers, and Epilepsy syndromes in		
	Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult.		
	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease 		
	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma criteria for diagnosis of coma criteria for diagnosis of coma criteria. 		
	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. 		
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders Trigeminal neuralgia 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders Trigeminal neuralgia Lesions in facial nerve: Facial palsy, Bell's palsy, Hemi facial spasm 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders Trigeminal neuralgia Lesions in facial nerve: Facial palsy, Bell's palsy, Hemi facial spasm Glossopharangial neuralgia 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders Trigeminal neuralgia Lesions in facial nerve: Facial palsy, Bell's palsy, Hemi facial spasm Glossopharangial neuralgia Lesionns of Vagus, Spinal accessory nerve, Hypoglossal nerve. 	1	-
9	 Epilepsy in childhood, Seizers, and Epilepsy syndromes in adult. Classification and clinical features of Dementia, Alzheimer's disease. Causes & investigations of Coma, criteria for diagnosis of Brain death. Cerebellar & Co-ordination disorders Congenital Ataxia Friedrich's Ataxia Tabes dorsalis Disorders of lower cranial nerves & Special Senses Etiology, clinical features, investigations, and management of following disorders Trigeminal neuralgia Lesions in facial nerve: Facial palsy, Bell's palsy, Hemi facial spasm Glossopharangial neuralgia Lesionns of Vagus, Spinal accessory nerve, Hypoglossal nerve. Disorders of special senses 	1	-

11.	Disorders of Myoneural Junction	1	-
	Etiology, classification, signs & symptoms, investigations,		
	management, of following Disorders:		
	• Myasthenia gravis		
	• Eaton-Lambert syndrome		
	• Botulism		
12	Spinal cord Disorders	2	-
	• Functions of tracts		
	Definition, etiology, risk factors, pathophysiology,		
	classification, clinical signs & symptoms, investigations,		
	differential diagnosis, medical management, surgical		
	management and complications of following disorders:		
	• Spinal Cord Iniury		
	 Epidural abscess 		
	 Transverse myelitis 		
	 Spina bifida 		
	 Conus medullaris syndrome 		
	Conus medunans syndrome Powel & Pledder Dysfunction		
12	Bower & Bladder Dystunction	1	
15.	Ficlogy classification clinical signs & symptoms	1	-
	investigations differential diagnosis medical management		
	surgical management and complications		
	Brain tumors and spinal tumors	1	
14	Classification clinical features investigations medical and	1	
14.	surgical management		
Desira	ble To Know		
15	Disorders of Anterior Horn Cell	1	_
15.	Dysfunction of Autonomous Nervous System	1	
10		2	
17	Neurological Investigations	Z	
	A-Ray, C1, MIRI, EVOKEU POLEILIIAIS, LP, CSF, EMO, NCV,		
Nico T			
Nice I	0 Kilow Circulation of the brain & spinel cord	1	
10	Carebrospinal Eluid	1	
19	i) Formation & Absorption	1	
	i) Formation & Ausorption ii) Status in Various Disorders		
History	CAL Vision presentation and recording of cases in	20	
	ntral nervous system – 3 cases	20	
Dor	inheral nervous system -3 cases		
20	SCT		23
Text B	poks		4 0
Sr.No	Title		
1	Davidson's Principles and Practice of Medicine		
2	Textbook of Neurology- Victor Adams		
3	Brains Clinical Neurology		
5			

	•••
4	Illustrated Neurology & Neurosurgery: Lindsay
5	Brains Diseases of Nervous System
6	Davidson's Principles and Practice of Medicine

	Course Content – (Section B) Paediatrics				
Topic		Ноц	rs of		
Serial	MUST TO KNOW	teaching	/learning		
No.	Title of content	Theory	Practical		
1.	Normal development & growth	1	-		
2.	Breast feeding and immunization	1	-		
3.	Prenatal, Perinatal and Postnatal problems and	1	-		
	management (Birth injuries): Neck, shoulder dystocia,				
	Brachial plexus injury, Fractures				
4.	Congenital abnormalities and management	1	-		
5.	Problems and management of LBW infants	1	-		
6.	Developmental Delay:	2	-		
	Etiology, pathophysiology, classification, clinical signs &				
	symptoms, investigations, differential diagnosis, medical				
	management, surgical management and complications				
7.	Respiratory conditions of childhood: Pneumonias in	1	-		
	children – Bacterial & Tubercular, Empyema, Asthma				
8.	Orthopedic and Neurological disorders in childhood,	2	-		
	Clinical features and management ;				
	Cerebral palsy				
	• Meningitis				
	• Encephalitis				
	• Hydrocephalus				
	• Ataxia				
	Arnold-chiari malformation				
	Basilar impression & Cerebral malformations				
	Dandy walker syndrome				
	• Down's syndrome				
	• Floppy infant				
	• GBS				
	Poliomyelitis				
	• Epilepsy				
	Neural tube defects in Paediatrics				
	• Muscular dystrophies & Neuropathy				
11.	Nutritional disorders of childhood	1	-		
	Rickets and scurvy, PEM (Kwashiorkar and Marasmus)				
12.	Infections – Congenital & Neonatal, Mental retardation	1	-		
13.	Coma in Paediatrics and Acute rheumatic fever	1	-		
14	DESIRABLE TO KNOW :	3			
	Sensory disorders				
	Problems resulting from loss of vision and hearing				
	Learning and behavioural problems				
	Attention Deficit Hyperactivity Disorder				
	• Autism,				
	Challenging behaviours,				
	Bronchiolitis, & Wheezy baby				

	NICE TO KNOW :	2	
15	• Educational delay,		
	The Clumsy Child		
	• Normal intra-uterine development of foetus		
Clini	cal		12
•	Normal & abnormal reflexes in neonate & child		
• Examination of the nervous system			
•	Examination of respiratory system		
•	Examination of cardiovascular system		
16	SCT		15

Sr.No.	Title				
1	Essentials of Paediatrics – by O. P. Ghai - Inter Print publicati	ons			
2	D. K. series in Paediatrics				
	Course Content – (Section C) Psychiatry				
Topic	MUST TO KNOW	Hou	urs of		
Serial	Title of content	teaching	/learning		
No.	The of content	Theory	Practical		
1.	Psychiatric History, classification and mental status examination	1	-		
2.	Organic mental disorders (delirium, dementia, organic amnestic syndrome and other organic mental disorders)	1	-		
3.	Mood disorders (manic episodes, depressive episodes, bipolar mood disorders)	1	-		
4.	Neurotic stress related and somatoform disorders (Anxiety disorder, phobic anxiety disorders, obsessive compulsive disorders, adjustment disorders, dissociative disorders, somatoform disorders post-traumatic stress Disorder	1	-		
5.	Schizophrenia, delusional disorders and schizoaffective disorders.	1	-		
6.	Substance use disorders, sexual disorders, sleep disorders and eating disorders.	1	-		
7.	Child psychiatry, (mental retardation, developmental disorders, attention deficit, hyperkinetic disorder, enuresis, conduct disorders)	2	-		
8.	Disorders of adult personality and behavior (specific personality disorders, habit and impulse disorders, gender identity disorders)	1	-		
9.	Stress, psychosomatic disorders, suicide, Psychopharmacological management	1	-		
10	 DESIRABLE TO KNOW: psychiatric emergencies and their management 	2			
11	NICE TO KNOW:	1	-		
	• Electroconvulsive therapy and other biological methods of treatment.	-			
12	SCT		10		

S.NO	Title
1	A short book of Psychiatry – 3 rd edn-by Ahuja – Jaypee bros – medical publishers
2	Shah L.P. Handbook of Psychiatry

	SCHEME OF EXAMINATION					
Written Total						
IA	Final exam	Final exam				
20	80	100				

Periodical Examination:

• Written Examination:-20 MCQ for 20 marks , 20 minutes. (10 neurology+5 Paediatrics+ 5Psychiatry)

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ (10 neurology+5 Paediatrics+ 5Psychiatry)	20x1=20
Sec B	1. Short answer questions-Answer any 5 out of 6	5x3=15
Neurology	2. Short answer questions-Answer any 3 out of 4	3x5=15
Sec C	1. Short answer questions-Answer any 5 out of 6	5x3=15
Paediatrics	2. Short answer questions-Answer any 5 out of 6	5x3=15
Psychiatry		

• SUPERVISED PRACTICAL TRAINING:

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Convert	ted to 10 marks (100/5=20)

	Course Title :- Physical and Functional Diagnostic Skills Course Code:- PT 503																		
	Course Credit for Physical and Functional Diagnostic Skills																		
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		SC.				5C				SC		W	/ritten	Tota	al	Pr	actical		Total
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Lea	rnin	g Obj	ectiv	es:			- /	-	-						<u> </u>			<u>L</u>	
At t	he e	end of	the c	ourse	, the	can	dida	te sho	ould	be at	le to-	-							
1.	Ac	quire	the	skill	of	det	ectio	on &	z oł	ojectiv	ve do	ocun	nentati	on c	of	the	Neu	irol	ogical,
	Мı	isculo	skele	etal, c	ardio	ovas	cular	: & pi	ulmo	onary	dysfu	incti	ons						-
2.	acc	uire :	skills	to as	ssess	s pai	n, al	ltered	l mu	scle j	power	r, m	obility,	, end	ura	nce	, obe	esit	y, limb
	len	gth, j	postu	re, ga	ait, 1	hand	l fur	nctior	1 &	A.I).L. i	in a	dult to	arri	ve	at	the 1	Fun	ctional
	dia	gnosi	s as p	ber Int	terna	tion	al C	lassif	icati	on of	Func	tion	ing.						
3.	Ac	quire	the s	skills	to u	ise t	he tl	nerap	eutic	c curi	ents,	Ele	ctro-dia	agnos	sis	of s	senso	ory,	motor
	dys	sfunct	ion &	z pain	1.				1.0	0									
4.	Int	erpret	com	mon	inve	stiga	tion	s used	1 for	funct	ional	diag	gnosis.	togr	DT (0	
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		• 5	Select	ive Ti	issue	Ten	sion	Testi	ng: I	Exami	natio	n of	ioint						
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		• A	Active	e mov	eme	nt													
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		E	End fe	eel															
		• F	Resist	ed iso	meti	ic co	ontra	ction											
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		• A	Assess	sment	of N	lusc	le St	rengt	h (G	roup a	and In	divi	dual)						
		• \$	Specia	al Tes	ts														
3		Asse	essme	ent of	artic	ular	&ex	tra- a	articu	ular s	oft tis	sue	status						
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		Outc	ome	Meas	ures														
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	1	Sens	ations	S c···															
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ASSES	SMENT OF NEUROMUSCULAR FUNCTION	15	-
	1. Higher functions		
	2. Cranial nerves		
	3. Sensations & sensory organization (Dermatome, Myotome		
	and Sclerotome)		
	4. Joint mobility		
	5. Body image		
	6. Tone		
	7. Reflexes-Superficial &Deep		
	8. Voluntary control		
	9. Muscle Strength		
	10. Co-ordination		
	11. Balance		
	12. Endurance		
	13. Trick movements		
	14. Limb Length		
	15. Posture		
	16. Gait		
	17. Scales-Berg 's Balance, Ashworth, Glasgow Coma,		
	DGI,MMSE		
	18. Functional Diagnosis using ICF		
• ASS	SESSMENT OF CARDIO VASCULAR & PULMONARY	15	-
DY	SFUNCTION		
1.	Demographic Data		
2.	Chief complaint		
3.	HOPI		
4.	History of Symptoms		
5.	Past Relevant Histories		
6.	Vital Parameters		
7.	Dyspnoea assessment		
8.	Examinatiom: Head and Neck, Chest and Extremities		
9.	Palpation: Head and Neck, Chest and Extremities		
	Measurements: Chest Expansion, symmetry of chest movement		
10.	Auscultation: Normal and Abnormal Breath Sounds		
11	Special tests : Breath Holding Test etc.		
	Outcome Measures & Investigations:		
	BORG and Modified BORG scale for Rating of		
	Perceived Exertion (RPE), Exercise Tolerance – six		
	minutes walk test, Theoretical bases of Bruce's		
	protocol.		
	ABG, PF1, ECG- (Normal & Variations in common		
	pathologic conditions)		
	\sim $ray Chest$		
	• Lests for Peripheral Arterial & Venous circulation		
4.00700	• Ankle Brachial Index	_	
ASSES	SMENT OF OBESITY	5	-
• Path	nophysiology		
• Ass	essment – BMI, Waist – Hip Ratio		
• Ass	essment of Fitness-Flexibility,Endurance and Agility		
Obe	sity – Skin fold measurement, Anthropometric measurements,		
Nev	ver Methods		

A	utonomy and individual responsibility, Consent	5	
•	Autonomy and individual responsibility (2 hrs)		
	• Different levels and notions of autonomy		
	• Responsibility: its different aspects and dual nature		
	• Autonomy and patient's right to self-determination in		
	treatment		
	• The patient's right to refuse a health care provider's		
	recommendation		
	• Special measures for protecting the rights and		
	interests of socially and mentally disabled patients		
	• patient responsibilities		
	• consent (2 hrs)		
	• Purpose of the principle of consent		
	 Prior . free & informed consent in patient 		
	treatment & handling		
	• What is express consent?		
	• Withdrawal of consent		
	• The patient's right to refuse		
	• Consent of subjects of scientific research.		
	• Compare the provisions for consent in scientific		
	research with those for medical interventions		
	• Consent by individual, group and community		
	• Exceptional circumstances for the application of the		
	principle of consent		
	• Persons without the capacity to consent (1 hr)		
	• Criteria for capacity to consent		
	• Categories of persons without the capacity to		
	consent		
	How to obtain consent in health care practice for		
	these special categories?		
D	ESIRABLE TO KNOW	12	
•	Assessment of swelling		
•	Observational Movement analysis and Analysis of		
	Muscle Work		
•	COPD questionnaire		
•	Dyspnoea assessment		
•	Scales: FIM, ASIA, BARTHEL INDEX, FUGEL		
	MEYER, RLA, STREAM, MMSC, BOT, GMFS.		
	> ASSESSMENT OF PAIN		
•	Intensity & quality		
	Body Diagram		
	Objective assessment & documentation $-VAS$ Mc Gill's		
	modified questionnaire. Numerical Rating Scale		
	Interpretation of Electro diagnostic findings		
∣	morprotation of Liceno diagnostic infunitgs,	1	

<u>г</u>		0	1
	NICE TO KNOW :	8	
	Quality of life questionnaire		
	Routine, bio-chemical investigation		
	Ankle Brachial Index		
	• Tinnels sign		
	• Shuttle walk /run test		
	COPD questionnaire,		
	Demographic Data Collection		
	• Peak Flow Meter		
CLINI	CALS AND PRACTICAL TRAINING		96
	• Identification of abnormal breath sounds, measurement of		
	chest expansion, pattern of breathing, Vital parameters,		
	Grades of Dyspnoea, Rate of Perceived exertion, Ankle		
	Brachial Index.		
	• Exercise tolerance testing – 6 minutes walk test & Bruce		
	's protocol on models only		
	• Interpretation of reports – EMG, NCV Studies, ABG,		
	PFT, X-ray of Chest Extremities, Spine & ECG.		
	Observation analysis		
	• Muscle work & pathological movements (Trick movement		
TERM	WORK IN CLINICAL		
1	Documentation & Interpretation of following investigations		
	• Cardio Vascular & Pulmonary – ABG, PFT, ECG, X-ray		
	Chest, Exercise Tolerance Test-1 each		
	• Neurological – Scales like Modified Ashworth, Berg 's		
	Balance, Dynamic Gait Index, Glasgow Coma, Barthel		
	Index, STREAM Format – Any 3		
	Case presentation with Functional diagnosis - Three cases		
	Each in		
	Musculoskeletal		
	Neurological		
	Cardiovascular & Pulmonary		
	To maintain the Record/Journal of the term work & to get		
	each assignment duly singed by the Incharge.		
	SCT		96

Sr.No.	Title
1	Maitlands book on Manual therapy,
2	Clinical Electro Therapy – Nelson – Currir Appleton & Lange publication
3	Physical Rehabilitation, Assessment and treatment by Susan B O's Sullivan
4	Physiotherapy for Respiratory & Cardiac Problems- Jennifer Pryor & Barbara
	Webber
5	Cash's Textbook of Physiotherapy for Heart, Lungs & Valvular Diseases- Patricia
	Downie

Reference Books

Title
Orthopaedic Physical examination – by Magee
Mobilization methods – Kaltonborn
Clinical Electromyography – Kimura
Orthopaedic Physical therapy – Donnatelli
Exercise & Heart – Wenger
Exercise Physiology – William D Mc 'Ardle
Facilitation techniques based on NDT principles by Lois Bly Allison Whiteside
Neurological Examination by John Patten
Movement therapy in Hemiplegia by Brunnstrom
Cash textbook of Physiotherapy in neurological conditions by Patricia Downie

SCHEME OF EXAMINATION

	Written	Total	P	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks , 20 minutes.
- Practical Examination:- 20 marks (Spots/ Demonstration on model)

Preliminary Examination / University (Final) Examination

Written Examination (80 marks)

Sec A	MCQ (20 Minutes)	20x1=20
Sec B	 Very Short answer questions Answer any 5 out of 6 Short answer questions Answer any 3 out of 4 	5x3=15 3x5=15
Sec C	 Long Answer Questiones (compulsory) Long Answer Questions Answer any 1 out of 2 	1x15=15 1x15=15

• Practical Examination (80 marks)

1	Long Case (Case Based Evaluation)	35
2	Short Case (Technique/Skill Based	20x1=20
	Evaluation/Simulated cases)	
3	Spots (X Ray, ABG, PFT, Outcome Measures)	5x4=20
4	Journal	5

• <u>SUPERVISED CLINICAL TRAINING</u>

➤ Journals = 5 marks (Orthopedic- 3; Neuro-3; Cardiorespiratory-2; CBR-2

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory / Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Convert	ted to 20 marks (100/5=20)

	Course Title :- Obstetrics and Gynecology																				
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Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Fin	al al	IA IA	Fina	al m	Final		
32	32	48	112	2	2	3	7	2	1	1	4	10	40	50)						
Lear	ning (Object	tives:																		
At the	At the end of the course, the candidate should be able to																				
	1.	Descri	be the	e norn	nal 8	zabno	orma	ıl phy	siol	ogical	event	s dui	ring the	e Pub	ert	y, Pre	egna	ncy	,		
	_	Labou	r, Peu	rperiu	ım, d	& Pre	e, Pe	ri & I	Post	Menoj	pause	•	_				-				
	2.	Discus	s con	nmon	com	plica	tion	s duri	ng P	regnai	ncy, I	Labou	ur, Pue	rperiu	um	& P1	re, P	eri d	&Post		
	2	Menop	ausal	stage	&v	ariou	s asj	pects	of U	rogen	fal D	ysfui	iction a	xthe	m	inage	emen	t in	brief.		
	3.	Acqui	re the	SK111S	SOI	the cl	111C	$\frac{1}{2}$	imin	ation c		VIC F	100r.								
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		• Č	vstoc	oele.	Rec	toco	ele,	Enter	000	ele											
		• U	rinar	v Inco	ontii	ience	e: Ty	pes.	Cau	ses, A	ssess	men	t and								
		Ν	lanag	gemen	ıt.		5	1 /		,											
		• P	elvic	Infla	nma	atory	Dis	eases													
		• P	olycy	stic C)var	ian E	Disea	ase (F	CO	D)											
5.		Surg	ical F	roce	dure	es inv	volv	ing c	hild	birth	l					3		-			
		• C	laesar	ian S	ectio	on															
		• E	pisio	tomy																	
6.		Defin	nition	, Ind	icat	ions	and	l Ma	nag	ement	t of 1	the f	followi	ng		4		-			
		surgi	cal p	roced	lure	S			-												
		• D	oilatat	ion a	nd C	Curett	age														
		• H	lyster	ecton	ıy –	Tota	l Al	odom	inal	and V	agina	al									
Salphigectomy and oopherectomy																					

7.	Desirable to know :		-
	• Neoplasm of Female reproductive organs – surgical	1	
	management		
	Menstrual cycle and its Disorders	2	
	• Methods of family planning	2	
8.	Nice to know :	2	-
	• Sterility – management		
	Multiple gestations	1	
9.	CLINICAL	-	32
	Evaluation & presentation of Two cases Each in		
	Uro-genital dysfunction		
	Antenatal care		
	Postnatal care		
	 Following normal labour 		
	 Following Caesarean section 		
	Pelvic Inflammatory Diseases		
	OBSERVATION – One Normal & One Caesarian		
	delivery, One case of Tubectomy & One Hysterectomy		
	/Repair of the Uro-genital Prolapse.		
10.	SCT		48

Sr.No.	Title					
1	Text book of Gynecology – by Dutta – New Central Book Agency					
2	Text book of Obstetrics - by Dutta – New Central Book Agency					
SCHEME OF EXAMINATION						

	Written	Total
IA	Final exam	Final exam
10	40	50

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
	1. Short Notes - Answer any 5 out of 6	5x2=10 marks
Sec B	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• <u>SUPERVISED CLINICAL TRAINING:</u>

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory

Periodical exam= 10 marksPrelim exam= 40 marksTotal= 50 marksThe total shall be Converted to 10 marks (50/5=10)

SEMESTER – VI

Course	Course Title	Hours							
Code	Course Thie	Th	Pr	SCT	Total				
PT-601	General Surgery(including Plastic Surgery)	64	32	96	192				
PT-602	Research Methodology and Biostatistics	48			48				
PT-603	Physiotherapeutic Skills	80	96	96	272				
PT-604	Bio-engineering & Professional Ethics	32	32	96	160				
	Total	224	160	288	672				

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	Course Title :- General Surgery (Including Plastic Surgery)																
	Course Code:- PT 601																
	Course Credit for General Surgery (Including Plastic Surgery)																
Hours					Hrs/Wk Credits					Evaluation Pattern							
												Written		Total	Pr	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	TΔ	Final	Final	TΔ	Final	Final
												іл	exam	exam	ТЛ	exam	exam
64	32	96	192	4	2	6	12	4	1	2	7	20	80	100	-	-	-

Learning Objectives:

At the end of the course the candidate will

1. Understand & describe pre operative evaluation various surgical indications in abdominal thoracic, Neuro Surgical & Peripheral vascular conditions.

- 2. Understand surgical steps & approaches in short & should be able to describe components of soft tissues cut to reach target tissue & complications.
- **3.** Assess post operative complications & its implications in ward treatment, prognosis, morbidity & mortality.
- 4. Describe effects of surgical trauma & Anaesthesia in post operative course.
- 5. Understand classify, clinically assess, evaluate & describe surgical management in brief in. a) Wounds and Ulcers b) Burns c) Head Injuries
- 6. Read & interpret finding of X-ray chest & Abdomen, CT Scan, USG.

Course Content

Topic	MUST TO KNOW	Hours of			
Serial	Title of content	teaching/learning			
No.	The of content	Theory	Practical		
1.	Infection and inflammation-acute / chronic-signs, symptoms,	3	-		
	complications & management.				
2.	Wounds and ulcers - classification, healing, management.	3	2		
3.	Abdominal Surgeries:	5	2		
	• Surgical anatomy of Anterior Abdominal wall				
	• Surgical approaches.				
	• Common abdominal surgeries like Cholecystectomy,				
	Colostomy, Ileostomy, Gastrectomy, Hernias,				
	Appendicectomy, Neprectomy, Prostectomy.				
4.	Thoracic surgeries	3	2		
	• Thoracotomy - Definition, Types of Incisions with				
	emphasis to the site of incision, muscles cut and				
	complications.				
	A) Lung surgeries:	4	3		
	• Pnumonectomy				

	• Lobectomy,		
	• Segmentectomy – Indications, Physiological changes and		
	Complications		
	Thoracoplasty		
	• Pleurectomy		
	• Pleurodesis and Decortication of the Lung.	Λ	2
	Intercostal Drainage System	4	3
	B) Cardiac surgeries		
	• An overview of the Cardio-Pulmonary Bypass Machine		
	• Extracardiac Operations: Closed Heart surgery, Open		
	Heart surgery.		
	• Transplant Surgery – Heart, Lung and Kidney –		
	Indications, Physiological changes and Complications		
	• Chest Injuries, evaluation, management.		
5.	Peripheral vascular diseases	4	
	Definition, Etiology, Clinical features, signs and symptoms,		
	complications, management and treatment of following		
	diseases:		
	• Atheroscierosis		
	• Arterioscierosis		
	• Buergers		
	• Raynauds		
	• Varicose veins & DVI	F	
6.	Burns and Plastic Surgery	5	-
	• Burns- causes, classification, ward management, post burn		
	Ship grafts/flags, padials/Type (Muscle flag Types)		
	• Skill grans/haps- pedicle/ Tube /Muscle hap Types,		
	ulcers post surgical head neck face defects and		
	reconstruction.		
	 Hypertropic scar & keloid – management cl-Principles of 		
	tendon transfers-with special emphasis to hand, foot &		
	facial paralysis		
7.	Emergency Surgical Procedures: Tracheostomy,	4	-
	Indications: steps, post operative care		
8.	Introduction, Indications and Complications of following	5	-
	Neuro surgeries		
	Burr-hole, Craniotomy		
	Cranioplasty		
	Deep brain stimulation		
	Shunting		
	Laminectomy		
	Hemilaminectomy		
	Microvascular decompression surgery		
	Embolization		
	Ablative surgery - Thalamotomy and Pallidotomy		
	Coiling of aneurysm and Clipping of aneurysm		
	Neural implantation		

11.	Surgical trauma:	4	-
	• Response of body		
	• Effect of Anesthesia,		
	• Shock & its types.		
	• Fluid & electrolyte balance.		
	Total Parenteral Nutrition.		
13.	Clinical Radiology-X-ray-chest-normal/abnormal	4	-
14.	DESIRABLE TO KNOW		
	• Auscultation & its interpretation, with special emphasis to Pulmonary Function, Reading & Interpretation of the X-	3	
	ray chest, P.F.T., Blood-Gas analysis		
	Surgical Oncology –	3	
	Cancer – definition, types, clinical manifestations of cancer, Staging of Cancer, surgical procedures involved in	2	
	the management of cancer.	2	
	Common ENT problems	2	
	ENT conditions & its management : Otitis MediaSurgical		
	treatments in VII (facial) & VIII nerve palsy	2	
	NICE TO KNOW AREA	Z	
	• Various eye problems – surgeries for III, IV nerve palsy, cataract IOL.	2	
	• Surgeries on arteries, veins (Vascular surgery)	2	
	Bariatric Surgeries	Z	
15.	CLINICAL:		32
	Evaluation, presentation & recording of one case each in -1]-		
	burns, 2]-wound & ulcer, 3] Head Injury, 4] Peripheral		
	vascular condition 5] Post Radical mastectomy 6] Post		
	thoracic surgery, 7]-post abdominal surgery, 8] Post oral		
	cancer excision, 9] Renal Surgery		

Sr.No.	Title					
1	Under-graduate Surgery by Nan					
2	2 Bailey & Love's short practice of Surgery-21st edn.					
3	Manipal's Text book of surgery. Rajagopal Shenoy.					
4	Clinical & Operative surgery by S. Das					
5	T .B. of surgery by S. Das					

SCHEME OF EXAMINATION

	Written	Total		
IA	Final exam	Final exam		
20	80	100		

Periodical Examination:

• Written Examination:-20 MCQ for 20 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ (10 MCQ'S - general surgery & 10 MCQ'S Plastic	20x1=20 marks
	surgery)	
Sec B	1. Very Short answer questions. Answer any 5 out of 6	5x3=15
	2. Short answer questions. Answer any 3 out of 4	3x5=15
Sec C	1.Long Answer Questions (compulsory)	1x15=15
	2.Long Answer Questions Answer any 1 out of 2	1x15=15

• SUPERVISED CLINICAL TRAINING:

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks: Theory

Periodical exam	= 20 marks
Prelim exam	= 80marks
Total	= 100 marks
The total shall be Conver	ted to 20 marks $(100/5=20)$

	Course Title :- RESEARCH METHODOLOGY AND BIOSTATISTICS																		
	Course Code:- PT 602																		
	Course Credit for KESEARCH METHODOLOGY AND BIOSTATISTICS Hours Hrs/Wk Credits Evaluation Pattern																		
	H	ours		_	Hrs/	VV K	r			alts		W	EV Tritten		al	n Pa	actic	n 1	Total
Th	Pr	SC T	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SC T	Tot	1.0	Final	Fina	al	11	Fi	nal	Final
40		1	40	2			2	2		1	2	10	exam	exa	m	IA	exa	am	exam
48 Lea	- rnin	g Ohie	48 ective	<u>ه</u> .	-	-	3	3	-	-	3	10	40	50	,	-		-	-
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r	oract	ice &	resear	rch.			r				~		F						
2. D)escr	ibe ar	n Over	r - vie	w- a] Eth	nog	raphy	& A	nthro	polog	y b]	Design	&					
Ν	leth	odolog	gy of a	an Ex	perii	nent	or S	urvey	/ c] [Demog	graphy	y & v	vital stat	tistic	s d] San	npli	ng	
&	inte	rpreta	tion o	of Dat	a.														
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1.		Intro	ducti	on to	Res		h m	ethod	olog	y						3			-
		• N	leanin	ng of i	esea	rch													
		Objectives of research																	
		Types of research & research approaches																	
		Criteria for good research																	
2		Problems encountered by researchers in India.																	
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		• F	eature	s for		l desi	ign												
		• D	iffere	nt res	earcl	n des	ions	1											
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5.		• C	riteria	for s	elect	ing s	amı	oling	oroce	dure						U			
		• S	teps in	n sam	pling	g desi	ign	6											
		• C	harac	teristi	cs of	goo	d sa	mple	desig	gn									
		• D	oiffere	nt typ	es of	f sam	ple	desig	n	-									
4		Meth	ods o	of data	a col	lecti	on	0								3			-
		• C	ollect	ion of	f prir	nary	data	ı											
		• co	ollecti	on da	ta th	roug	h qu	estion	nnair	es & s	schedu	ules							
		• D	iffere	nce b	etwe	en qu	lesti	onnai	ires &	k sche	edules								
5		Testi	ng of	hypo	thes	is										3			-
		• W	/hat is	s hypo	othes	is													
		• B	asic c	oncep	ots co	oncer	ming	g testi	ng of	hype	othesis	5							
		• P	roced	ure of	hyp	othes	sis te	esting											
		• N	leasur	ring th	ne po	wer	of h	ypoth	esis t	est,									
		• T	ests o	f hype	othes	sis													
		• L	imitat	ions o	of the	e test	s of	hypo	thesis	5									

BIOST	TATISTICS		
1.	Introduction	3	-
	Meaning, definition of statistics		
	• Importance of the study of statistics		
	Branches of statistics		
	• Statistics and health science including physiotherapy,		
2.	Tabulation of Data	4	-
	Basic principles of graphical representation		
	• Types of diagrams – histograms, frequency polygons, smooth		
	frequency polygon, cumulative frequency curve		
	Normal probability curve.		
3.	Measure of Central Tendency	2	-
	• Definition and calculation of mean, median, mode.		
	• Comparison of mean, median and mode		
4.	Probability and Standard Distributions	3	-
	• Meaning of probability of standard distribution		
	• The binominal distribution		
	• The normal distribution		
	• Divergence from normality – skewness, kurtosis.		
5.	Sampling techniques	3	-
	• Need for sampling - Criteria for good samples		
	• Procedures of sampling and sampling designs errors		
	• Sampling variation and tests of significance.		
6.	Statistical Significance	3	-
	• Parametric tests:- t test,		
	• Non parametric tests :- chi square test, Mannwhitney U test, Z		
	test, Wilcoxons matched pair test		
	• Correlations		
7.	Analysis of variance & covariance	3	-
	Basic principle of Analysis of Variance ANOVA and		
	Analysis of Co variance (ANCOVA)		
8.	DESIRABLE TO KNOW	2	-
	Demographic & vital statistics.		
	Measurement & scaling techniques		
	Measurement in research- Measurement scales	5	
	Sources of error in measurement		
	• Meaning of scaling, its classification.		
	Important scaling techniques.		
	Variables and their types		
9.	NICE TO KNOW	1	
	Computer technology		
	Introduction to Computers	1	
	• Computers & researcher.	1	
	Statistical packages	1	
	Technique of developing measurement tools	1	
	Motivation in research	1	

Sr.No.	Title						
1	B. K. Mahajan – Methods in Biostatistics						
2	Kulkarni, Bairde, Muzumdar – Manual of Biostatistics						
3	Elements of Health Statistics: Rao.N.S.N						
4	An introduction of Biostatistics: Sunder Rao.P.S.S.						
5	Methods in Bio-Statistics 6 th Edn. 1997: B.K. Mahajan						
6	Biostatistics : A manual of Statistics Methods: K. Visweswara Rao						
7	Elementary Statistics 1 st Edn, 1990. in Medical Workers: Inderbir Singh						
8	An Introduction to Gupta C.B. Statistical Methods, 1972: Ram Prasad & Sons						
9	Basic Statistics, 3 rd Edn.: Simpsory G. Kaftha. P						
10	Research; Principles and Methods:L Denise F. Poli & Hungler						
11	Fundamentals of Research, 4 th Edn.: David J. Fox						

SCHEME OF EXAMINATION

Written	Total			
IA	Final exam	Final exam		
10	40	50		

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (5 Research Methodology + 5 Biostatistics) 10 minutes	10x1=10
Sec B	1. Very Short answer questions-Answer any 5 out of 6	5x3=15
	2. Short answer questions-Answer any 3 out of 4	3x5=15

Internal Assessment Marks : Theory

Periodical exam	= 10 marks
Prelim exam	= 40 marks
Total	= 50 marks
The total shall be Conv	verted to 10 marks $(50/5=10)$

	Course Title :- PHYSIOTHERAPEUTIC SKILLS																			
	Course Code:- PT 603 Course Credit for PHYSIOTHERAPEUTIC SKILLS																			
	T	T	Co	ourse			tor	PHYS	<u>510</u>	THE	KAP	EUI			KI) • • • •	D. 44		
		lours	•		WK		Credits Evaluation Pattern Written Total Practical Total									Total				
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	III I e	Final Xam		Final exam	IA	Fin	al m	Final exam
80	96	96	272	5	6	6	17	5	3	2	10	20		80		100	20	80)	100
Lea	rnin	g Ob	jectives:	At th	ne ei	nd of	f the	cours	se th	le can	ididat	e wi	111							
At th	At the end of the course the candidate should be able to -																			
1.	Des	cribe	the num	an a	ever	opm	ent	x ma	tura	tion;	with	spec	21a		ipi	nasis	to s	senso	ry,	motor,
2	psyc Aco	noio	gical & i the skill	to a	i asp isses		anu 1 to	train	for	n uun Nem	ng ag rolog	ging ical	рі М	luse	88. ml	Ioske	leta	l dv	sfu	nctions
2.	sucł	n as F	Pain, alte	ered i	milse	ele r	n to	er mol	hilit	v. en	duran	ice.	lin	nh le	en	oth	nost	ure.	gai	t hand
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3.	Des	cribe	the phy	siolo	gy c	of ne	erve	condu	ictic	on &	moto	or un	its	, int	teı	rpreta	ation	n of l	Noi	mal &
	Abn	orma	l EMG,	Nerv	ve Co	ondu	ictio	n stuc	lies	& La	te res	pon	ses	5.		1				
4.	Acq	uire t	he skills	s of n	nobi	lizat	ion (of the	ext	remiti	ies	-								
5.	Aco	quire	the Neu	ro the	erap	eutic	es sk	ills												
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		Biol	ogical ii) Env	iror	mer	ntal i	ii) Inl	herit	ted.	- <u>-</u>				-		C			
		c] Pi	rinciples	of m	natur	atio	n	<i>,</i>									7			
		• in	general																	
		• In	anatom	ical c	lirec	tion	al pa	ttern	– C	ephel	o – c	auda	ıl,							
		Pr	oximo -	- dista	al, C	lente	ro- l	ateral	l, M	ass to	spec	ific	pa	tterr	n,					
		G	ross to fi	ine m	notor	dev	elop	ment	, Re	flex r	natur	atio	n t	ests						
		>	Deve	elopm	nent	, As	sessi	ment of	& tr	eatme	ent fo	r								
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		Potential Volume conduction									-									
		•	Phys	iolog	v of	mus	scle	contra	actic	on										
	 Motor unit & Recruitment pattern of motor unit - Size 																			
			princ	iple				F					-				1			
		Elec	troneur	omy	ogra	aphy	7													4
		•	Elect	tro – i	myo	grap	hy													
		>	 Princ 	ples	-		-										4			
		2	 Instru 	umen	tatio	on –	Basi	c con	npor	nents	like (CRO), I	Filte	r,					
			Amp	lifier	& F	rem	plifi	er, Ty	pes	of El	lectro	des.								

	Interpretation of EMG, NCV studies		
	Normal & Abnormal EMG pattern		
	a) At rest		
	b) On minimal contraction		
	c) On maximal contraction		
	Nerve Conduction Studies- Principles & Technique		
3.	BASICS IN MANUAL THERAPY & APPLICATIONS	25	34
	WITH CLINICAL REASONING		
]	Basic principles, Indications & Contra-Indications of schools		
	of thoughts of Manual Therapy	4	5
	Maitland	4	3
	Kaltenborn	4	6
	• Mulligan	4	5
	• Mckenzie	2	4
	• Neuro Dynamics (including Butler, Schaklock)	3	4
	 Muscle Energy Technique 	4	4
	 Muscle Energy Teeninque Muscle atratabing 		3
'	 Myorascial successing Curries - Dain Original and Deformed 		
4	• Cyriax : Pain-Original and Referred	10	20
4.	BASICS IN NEURO THERAPEUTICS SKILLS &	13	20
	APPLICATIONS WITH CLINICAL REASONING.	2	2
	• Principles and Indications of application of Neuro	2	3
	Developmental Technique	2	3
	• Principles and Indications of application of Rood's	2	2
	Technique	2	3
	 Principles and Indications of application of PNF 	2	3
	Technique	_	
	Principles and Indications of application of Brunnstrom	5	8
	Technique		
5.	DESIRABLE TO KNOW	12	3
	• F wave		
	• H reflex		
	 Technique and application of Neuro Developmental Technique on models 		
	• Technique and application of Rood's Technique on models		
	• Technique and application of PNF on models		
	• Technique and application of Brunnstrom on		8
	• Models		8
	• Neurodevelopment of hand function		
6.	NICE TO KNOW	1	_
	Demonstration of EMG & NCV Technique		
]	Introduction to Vojta, SI, MRP,CIMT, and TOA	5	
]	Physiology of muscle contraction	1	
	Physiology of resting membrane potential & action potential	- 1	
	Propagation of Action Potential, Volume conduction	-	
7.	CLINICALS	_	
	1] Practice of Manual Therapy in Kaltenborn, Maitland, Mulligan		5
	&Cvriax on extremities only & only on models		5
	2] Practice to Neuro Therapeutic Skills of NDT. PNF. Rood's		5
,	Technique & Brunnstrom on models only.		9
	3] Therapeutics skills of SI, ORO motor training, MRF, CIMT		

TOAT DO	
S.NO	Title
1	Peripheral manipulation- G.D Maitland
2	Physical Rehabilitation- Susan O' Sullivan
3	Cerebral palsy – Sophie levitt
4	Normal child - Illingworth
5	Palpation of Spine & Extremities- Hoppenfield
6	Cash's Textbook of Neurological Diseases
7	Manipulation of spine- GD Maitland
8	Neurodynamics shack lock

SCHEME OF EXAMINATION

	Written	Total	P	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Simulated cases, OSCE, OSPE, Mini CEX)

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

SCHEME OF EXAMINATION

Sec A	MCQ	20x1=20
Sec B	1. Very Short answer questions-Answer any 5 out of 6	5x3=15
	2. Short answer questions-Answer any 3 out of 4	3x5=15
Sec C	1. Long Answer Questions (compulsory)	1x15=15
	2. Long Answer Questions-Answer any 1 out of 2	1x15=15

PRACTICAL

Long Case (Manual Therapy ,/Neuro Techniques)	40
Short Case (Simulated Cases)	20x1=20
5 Spots (EMG-NCV, Manual and Neuro Techniques	5x3=15
Journal	5

• <u>SUPERVISED CLINICAL TRAINING:</u> (Journal=Case Records/Case Presentations) 05 MARKS (Ortho-5, Neuro-2, Paediatric-3)

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory /Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Convert	ted to 20 marks (100/5=20)

		(Cours	e Titl	e :- 1	BIO-	ENG	INE	ERIN	NG & 1	PRO	FESS	IONA	L ETI	HICS					
	Course Code:- PT 604 Course Credit for BIO ENCINEEDING & DEOEESSIONAL ETHICS																			
		Co	urse	Credi	it for	BIC)-EN	GIN	EER	<u>ING &</u>	z PR()FES	SION	$\frac{ALE'}{L}$	<u>THIC</u>	<u>S</u>				
	He	ours			Hrs/	/WK			Cr	edits		W.	Eva	aluati	Total Practical T					
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam			
32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	-	-	-			
Lea	Learning Objectives: At the end of the course the student should be ship to																			
At t 1.	At the end of the course the student should be able to - 1. Acquire knowledge about biomechanical principles, of application of variety of aids & appliances used for ambulation protection & prevention																			
2.	 Acquire knowledge about various material used for splints / Orthosis & prosthesisselection criteria 																			
3.	Acqu	ire th	e skill	of fal	brica	tion o	of sin	iple s	plints	made	out of	low c	cost ma	terial						
4.	Unde	erstan	d ethi	cal in	nport	ance	of p	rincip	les a	nd prof	fessio	nal pl	anning	5.						
					Co	ourse	Con	tent –	sect	ion A I	Bioen	ginee	ring				-			
	pic						T '.1	c							He	ours of	f.			
Sei	rial						Title	of co	ntent	Ī					eachi	ng/lear	ming			
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		follo	wing	:					-		-				1					
		Aids	s & a	ppliar	nces,	Spli	nts, (Ortho	sis f	or spin	ie, up	per 8	z lowe	r						
		limb	o, Pros	sthesis	s for	Low	er lin	nbs &	Upp	er lim	<u>)</u>): ::::::::::::::::::::::::::::::::::				1					
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	3	Proi	iect-		8-0-	<u>pro.</u>		• 11001	8						-					
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		• (Oppor	nence	splir	nt.														
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		• 1	Foot d	lrop sj	olint.															
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		Nice	to ki	10W –				man			-				1					
		Psyc	cholog	gical a	spec	t of c	ortho	tic an	d pro	sthetic	appli	catio	1							
		(pra	ctical	analy	vsis v	vith p	patier	nt dise	cussi	on)	**									

()	SECTION - B Professional Practice Including Ethics, Evidence Based Practice, Administration, Ma Marketing)	anagement	&								
1.	Concepts of morality, Ethics & Legality-rules of professional conduct & their Medico-legal &moral implications-The need of Council Act for Physiotherapy.	2	-								
2.	Constitution & Functions of the Indian association of Physical 1 - therapy										
3.	Functioning of the World Confederation of Physical therapy [W.C.P.T.] & its various branches-Special Interest groups [brief]	1	-								
4.	Role of W.H.O.& WCPT	1	-								
5.	Introduction to Evidence Based Practice: Definitions, Evidence Based Physiotherapy Practice	1	-								
6.	Time management - career development in Physiotherapy.	1	-								
7.	Administration - principles-based on the Goal & functions - at large hospital set up/domiciliary services/private clinic /academic.	1	2								
8.	Methods of maintaining records	1	2								
	 Privacy and confidentiality (2 hrs) Definitions of 'privacy' and 'confidentiality' with reason in physiotherapy Justified breaches of confidentiality- Sharing information for patient care Using interpreters Teaching medical students Mandatory reporting Serious danger to others Patient or guardian consent Equality, justice and equity (2 hrs) Definitions of 'equality', 'justice' and 'equity' The right to health care & Physiotherapy Disparities in health status Local disparities Global disparities Roles of Physiotherapists in establishing health care priorities and allocating scarce health care resources as direct health care providers Non-discrimination and non-stigmatization, (1 hr) What is discrimination and stigmatization? Respect for cultural diversity and pluralism (1 hr) Definition of culture and cultural diversity Definition and value of pluralism Limits to the consideration for cultural specificities Human dignity, human rights and fundamental 										

10.	DESIRABLE TO KNOW: Performance analysisphysical structure /reporting system [man power / status/functions /quantity &quality of services/turn over-	1	2
	Management studies related to-local health care organization management & structure- planning delivery with quality assurance & funding of service delivery information technology	1	
11.	NICE TO KNOW:	1	1
	-Budget-planning.	1	1

Sr.No.	Title
1	Amputation & prosthetic - Bella may.
2	Atlas of orthosis & Assistive Device - Bertram Goldberg & John Hsu
3	Orthotic in Rehabilitation – McKee / Morgan
4	Physical rehabilitation- Susan. B.O` Sullivan
5	Professional ethics for physiotherapist- Kavita Raja

SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
10	40	50

Periodical Examination:

• Written Examination:-120 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	MCQ (5 Bioengineering & 5 Professional Ethics)	10x1=10 marks
Sec B	1. Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

• <u>SUPERVISED CLINICAL TRAINING:</u>

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

Internal Assessment Marks : Theory

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Conver	ted to 10 marks $(50/5=10)$

SEMESTER - V	II
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Course	Course Title			Hours	
Code		Th	Pr	SCT	Tot
PT-701	Physiotherapy in Musculoskeletal sciences	64	96	96	256
PT-702	Physiotherapy in Community Based Rehabilitation	64	96	96	256
PT-703	Choice based (Physiotherapy in Paediatrics/Manual Therapy)	32	32	96	160
	Total	160	224	288	672

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	ICourse Title :- Physiotherapy in Musculoskeletal Sciences																
							C	ourse	Co	le:- P	T 70 1	1					
			Cou	rse C	red	it fo	r Ph	ysiotl	nera	py in	Muse	culos	skeleta	l Scien	ces		
	Hours Hrs/Wk Credits Evaluation Pattern																
Th	Pr	SCT	Tot	Lec	Pr	SC	Tot	Lec	Pr	SCT	Tot	Writ	tten	Total	Prac	tical	Total
						Т						IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
Lea	arnir	ıg Oh	iectiv	ves:													

This course is formulated on the "Problem based" method. At the end of the course, the candidate should be able to-

- 1. 1 Identify, discuss & analyze, the Musculoskeletal Dysfunction in terms of Biomechanical, Kinesiology & Biophysical basis & correlate the same with the provisional diagnosis, routine radiological & Electrophysiological investigations & arrive at appropriate Functional diagnosis with clinical reasoning.
- 2. 2 Plan & Prescribe as well as acquire the skill of executing short & long term Physiotherapy treatment by selecting appropriate modes of Mobilization / Manipulations, Electro-Therapy, Therapeutic exercise & appropriate Ergonomic advise for the relief of pain, restoration / Maintenance of function & rehabilitation for maximum functional independence in A.D.L. at home & work place.

Topic	Title of content	Ho	urs of				
Serial		teaching	g/learning				
No.		Theory	Practical				
	Must Know						
1	Fractures and dislocation of the spine, extremities –	08 hrs	15 hrs				
	classification, management & complications.						
	• PT assessment and management of upper limb fractures and						
	dislocations.						
	• PT assessment and management of lower limb fractures and						
	dislocations including pelvis.						
	• PT assessment and management of spinal fractures						
	• PT management in complications - early and late - shock,						
	compartment syndrome, VIC, fat embolism, delayed and mal-						
	union, RSD, myositis ossificans, AVN, pressure sores etc.						
	• Principles of PT management in fractures - Guidelines for						
	fracture treatment during period of immobilization and						
	guidelines for treatment after immobilization period.						

2.	Physiotherapy Management of Deformities	3 hrs	10 hrs
	• Congenital: CTEV, CDH, Torticollis, pes planus, pes cavus and		
	other common deformities.		
	• Acquired: scoliosis, kyphosis, coxa vara, genu varum, valgum		
	and recurvatum.		
3.	Infectious diseases of the bone & joints	3 hrs	-
	• Osteomyelitis – acute and chronic		
	• Septic arthritis and Pyogenic arthritis		
	• TB spine and major joints - knee and hip		
4.	Degenerative and Inflammatory conditions	3 hrs	-
	• Osteoarthritis - emphasis mainly on knee, hip and hand		
	Rheumatoid Arthritis		
	• Ankylosing spondylitis		
	• Gout		
	Perthes disease		
5.	Management of Peripheral Nerve Injury	2 hrs	5 hrs
6.	Amputation	2 hrs	5 hrs
	• Definition, levels, indications, types, PT assessment, aims,		
	management pre		
	• And post operatively.		
	• PT management with emphasis on stump care and bandaging.		
	 Prosthesis Prescription and Training 		
7	Traction	2 hr	2 hrs
/.	• Effect Types Modes Indications Contraindications Dosage	$\frac{2}{2}$ hrs	2 1115
8	Sninal conditions	2 hr	11 hrs
0.	PT assessment aims and conservative & surgical management	2	111115
	and home program of the following conditions -		
	• Cervical spondylosis		
	• Lumbar spondylosis		
	Intervertebral disc prolanse		
	Spinal canal stenosis		
	Spondylolisthesis		
	Spondylolysis		
	Coccydynia		
9	Shoulder joint	4 hrs	10 hrs
7.	• TOS	11115	10 1115
	• RSD		
	Shoulder instabilities		
	Periarthritis Shoulder		
	Rotator cuff Tears : Conservative and Post-Surgical PT		
	Management		
	Impingement syndrome (Supraspinatus and Ricipital		
	tendonitis) - conservative and Post operative (sub-acromial		
	decompression) PT management		
	AC joint injuries- rehabilitation		
10	Flbow and forearm	1 hr	5 hrs
10.	Tennis and Golfer's elbow	1 111	5 1115
1		1	1

11.	Wrist and Hand	3 hrs	5 hrs
	• Wrist sprains.		
	• Dequervain's Tenosynovitis.		
	• Trigger and Mallet finger		
	• Repair of ruptured Flexor and Extensor tendons: Post		
	operative PT management		
	• Carpal tunnel syndrome.		
	• Hand injury- types and their management		
12.	Нір	2 hrs	5 hrs
	• Joint surgeries - hemi and total hip replacement- Post		
	operative PT management		
13.	Knee	4 hrs	10 hrs
	• ACL, PCL and MCL reconstruction surgeries - Post operative		
	rehabilitation.		
	Meniscectomy and meniscal repair - Post operative		
	management.		
	• Pre patellar and Subacromial bursitis.		
	• Anterior Knee pain : PFPS, Plica syndrome, patellar		
	dysfunction and Hoffa's syndrome etc conservative		
	management.		
	• TKR- rehabilitation protocol.	1 h.,	
	• Patellar tendon ruptures and Patellectomy- rehabilitation.	1 nr	
14.	Ankle and foot	3hrs	5 hrs
	• Ankle instability: Lateral ligament sprain of ankle		
	• Ligamentous tears- Post operative management.		
	• TA rupture.		
	• Plantar fasciitis, metatarsalgia, hammer toe, turf toe, OA ankle		
15.	PT Management for	2 hr	
	Sacro-iliac joint dysfunction		
	• Sacralisation		
	Lumbarisation,		
16.	Orthopedic surgeries	1 hr	1 hr
	Pre and post operative PT assessment, goals, precautions and PT		
	management of following surgeries such as:		
	• Arthrodesis		
	• Osteotomy		
17.	Desirable to Know		
	• Total shoulder replacement and Hemi replacement: Post	2hr	
	operative PT management	1 1	
	• Excision of radial head - Post operative PT management	I hr	
	• Biomechanics of Internal fixators & implants.	I nr	
	Physiotherapy Management for Tumours of the bone.	1 nr	
	• SLAP lesion, GIRD, Reverse replacement, (desirable to know)	2hr	
	Physiotherapy following re-constructive surgeries in Cerebral	2hr	5hr
	Palsy, Poliomyelitis and Leprosy.		

18	Nice to know	2 hr	
	• Radiological positions, angle calculations for Orthopaedic		
	problems by X ray		
	• Arthoscoipic repairs of knee & Management	1hr	
	• Metabolic & hormonal disorders of the bone tissue -	2hr	
	Osteoporosis.		
	Hamstring strains & Quadriceps contusion	1hr	1hr
19	SCT		96

• <u>Supervised Clinical Training :Journal (05 marks)</u>

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination.

- Evaluation & treatment planning: its presentation & documentation of Minimum ten cases in the following heads –
- 1. Upper Limb Fractures (Including hand injury),
- 2. Lower limb Fractures.
- 3. Soft tissue lesion (any),
- 4. Spine Fractures with/without Neurological condition
- 5. Degenerative arthritis of skeletal joint
- 6. Musculo skeletal condition of Hand & foot.

TEXT BOOKS

Sr.No.	Title
1	Clinical Orthopedic Rehabilitation – Brotzman
2	Cash 's Textbook of Orthopedics & Rheumatology for Physio Therapists- Jaypee
3	Therapeutic exercise – by Kolby & Kisner
4	Fracture Rehabilitation- Stanley Hoppenfield
5	Orthopaedics for physiotherapist – Ebenezer
6	Essentials of Applied Physiotherapy – by Joshi / Kotwal
7	Essential Orthopaedics – By J. Maheshwari

Reference Books

Sr.No.	Title							
1	Orthopedic Physical therapy – by Donatelli.							
2	Manual mobilization of extremity joints – by Freddy Kaltenborn, Maitland.							
3	Neural tissue mobilization – Butler							
4	Textbook of Orthopaedic Medicine – By James Cyriax.							
5	Outline of orthopedics – Adams Hamblen							
6	Taping Techniques – by Rose Mac Donald.							
7	Physical Rehabilitation Assessment and Treament – O'Sullivan Schmitz							
Written		Total Practical			Total			
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IA	Final exam	Final exam	IA Final exam		Final exam			
20	80	100	20	80	100			

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	MCQ (20 Minutes)	20x1=20 marks
Sec B	1. Very Short answer questions - Answer any 5 out of 6	5x3=15 marks
	2. Short answer questions - Answer any 3 out of 4	2x5=15 marks
Sec C	3. Long Answer Question(Compulsory)	1x15=15 marks
	4. Long Answer Question(Answer any 1 out of 2)	1x15=15 marks

• Practical Examination (80 marks)

		Marks
1.	Long Case: based on the History 10 marks, Evaluation 10 marks,	40 Marks
	Treatment Plan on Patient 20 marks	
2.	Short Case: Simulated	
3.	Five spots: spots based on, X – ray (limb, spine), Orthosis,	20 Marks
	Prosthesis, Metal implants etc 3 minutes each spot and 3marks per	
	spot (3x5))	15 Marks
4.	Journal	5 Marks

Internal Assessment Marks: Theory /Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks
The total shall be Con	verted to 20 marks for final Internal Assessment Marks (100/5=20)

	Course Title :- Physiotherapy in Community Based Rehabilitation Course Code:- PT 702																
	Course Credit for Physiotherapy in Community based Rehabilitation																
	Н	ours		Hrs	/Wk			Cree	dits			Eva	aluatio	n Patter	rn		
Th	Pr	SC	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SC	Tot	Writ	ten	Total	Prac	tical	Total
		Т								Т		IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
64	96	96	256	4	6	6	1	4	3	2	9	20	80	100	20	80	100
							6										

Learning Objectives:

At the end of the course the candidate should be able to -

- 1. The general concepts about health, disease and physical fitness.
- 2. Physiology of aging process and its influence on physical fitness.
- 3. National policies for the rehabilitation of disabled role of PT.
- 4. The strategies to access prevalence and incidence of various conditions responsible for increasing morbidity in the specific community role of PT in improving morbidity, expected clinical and functional recovery, reasons for non-compliance in specific community environment solution for the same.
- 5. The evaluation of disability and planning for prevention and rehabilitation.
- 6. Community Based Rehabilitation in urban and rural set up.
- 7. Identify with clinical reasoning the prevailing contextual (e.g. environmental and psychosocial cultural}factors, causing high risk responsible for various dysfunctions and morbidity related to sedentary life style and specific community like women, children, aged as well as industrial workers and describe planning strategies of interventional policies to combat such problems.

Course Content						
Topic		Ho	urs of			
Serial	Title of content	teaching	g/learning			
No.		Theory	Practical			
1.	Women's Health	11	25 hrs			
	Must Know					
	• Introduction to Woman's Health and Anatomy of pelvic floor.	1				
	Anatomical and physiological variations associated with					
	pregnancy and menopause.	1				
	• Antenatal, perinatal and postnatal physiotherapy and PT advice					
	on labor positions, pain relief and PT Management of	3				
	various problems faced in this period	_				
	• Uro-genital dysfunctions: Infections, Prolapse, Polycystic	3				
	Ovarian Disease, incontinence and their therapeutic interventions.					
	• Common Gynecological surgeries and role of physiotherapy	1				
	• Physical fitness in women during pregnancy & menopause.	1				
	• Radical mastectomy and therapeutic intervention.	1				
2.	Geriatrics	12	25 hrs			
	Must Know					
	• Theories of Aging.	1				
	• Anatomical and Physiological changes of aging in -					
	Musculoskeletal system.					
	> CNS					

r		1	1
	\succ CVS.	1	
	\triangleright RS.	1	
	Metabolic, Endocrine, Immune System	1	
	• Assessment in geriatrics	1	
	• Role of physiotherapy in geriatrics fitness (Institutionalized &	1	
	Community dwelling elders), Role of PT in: Half-way homes,		
	Residential Homes, Meals on wheels, Home for the aged, etc.	1	
	Falls and its prevention in Geriatrics.	2	
	• Rehabilitation for Parkinson's disease, Alzheimer's, Dementia,	1	
	Incontinence, stroke etc.	2	
3.	Industrial Health	07	25 hrs
	Must Know		
	I – Ability Assessment	1	
	• Job description		
	• Job demand analysis		
	• Task analysis		
	• Fronomic evaluation		
	Injury prevention		
	Employee fitness programme		
	Employee fitness programme	2	
	II – Disability management –		
	• Acute case		
	Concept of functional capacity assessment		
	Work conditioning		
	Work hardening		
	III – Environmental stress in the industrial area		
	a. Occupational Hazards:	2	
	• Physical agents- Heat, cold, light, noise, Vibration, U.V.	2	
	radiation, Ionizing radiation,		
	• Chemical agents-Inhalation, local action & ingestion,	2	
	• Mechanical hazards- overuse, fatigue.	2	
	 Psychological hazards – monotonic dissatisfaction in job 		
	any jety of work completion with quality mechanical stress		
	in various occupations for eq		
	Sedentary table work _eq in executives clerk		
	 Inannropriate seating arrangement, eg. vehicle drivers 		
	 Constant standing, eg watchman Defense forces surgeons 		
	 Over- eg evertion in laborers 		
4	Fitness & Health Promotion	6	21 hrs
- - .	Must Know		21 1115
	Physiological effects of aerobic and anaerobic avarcise	1	
	• A geographical effects of actobic and anactobic exercise.	1	
	Assessment of Functs Eithers training and clinical responsing for the section of the se	1	
	• Fitness training and clinical reasoning for advocating aerobic		
	exercise as preventive measures in special population:		
	 Elderly, Women, Children Olarita Di lata Malita Di la Fili di Lata Malita 	1	
	 Obesity, Diabetes Mellitus, Renal Failure, Hypertension 		
		1	
	• De-conditioning effects of prolonged bed rest.	1	
	Exercise Testing & Prescription		
		1	

5.	Community Health	6	
	Must Know		
	• WHO definition of health & disease, Health care delivery	1	
	system – 3 tier Syste		
	*Rehabilitation: definition, types and Team	1	
	* Community: Definition, Community based approach,		
	* Community entry strategies, Community initiated v/s		
	Community oriented programme		
	• Introduction to CBR: Definition, Historical review, Concept,	1	
	Need, Objectives, Scope, Members, Models		
	CBR strategies in Health Promotion		
	Urban area – UHC – Community centre, clubs, mahila	1	
	mandals, social centers. Schools, Industries, Sport centers.		
	Rural area by using PHC, rural hospital, district hospital.	1	
	• Principles of CBR, Difference between Community v/s		
	Institutional Based Rehabilitation, Extension services and		
	mobile units: Introduction, Need, Camp approach		
	• Planning and management of CBR programme	1	
	• Disaster management and role of PT	1	
	• Disability : Evaluation, types & prevention & role of		
	physiotherapy		
	• National policies for rehabilitation of disabled, architectural		
	barrier for disabled and their modification.		
6	Solidarity and cooperation (2hrs)	2	
	• Solidarity in health care & Physiotherapy		
	• Ethical perspective		
	• Solidarity as instrumental value		
	• Solidarity as moral value		
	• Threats to solidarity in present-day societies		
7.	Social responsibility and health, Sharing of benefits	4	
	• Highest attainable standard of health as a fundamental human		
	right		
	 Universal Declaration of Human Rights 		
	 WHO Constitution 		
	• Duty, obligation and responsibility physiotherapists for		
	Highest attainable standard of health as a fundamental		
	human right		
	• Responsibilities for governments and various sectors of		
	society		
	• Health and contemporary challenges to global justice		
	• Access to essential health services		
	 The protection of vulnerable populations Draviding health core corridge constraints 		
	 Providing health care services across national hour device. 		
	boundaries		
	• Sharing of benefits		
	• Models of benefit-sharing agreements		
	 Fair and equitable options for research subjects Dispissory and fair sharing of here fits of security 		
	Biopiracy and fair sharing of benefits of genetic		
	resources		

	1		-
	 Patents and intellectual property 		
	 Valid options for promoting fair and equitable access 		
	to new diagnostic and therapeutic modalities or to		
	products stemming from them		
	• Integration of capacity-building components to externally		
0	funded research and other initiative	10	
8	Desirable to know	10	
	Role of NGO in Community Based Rehabilitation	1	
	Yogasanas in specific health conditions – Diabetes, Preganacy,	2	
	Hypertension	2	
	Vocational Training and Kenabintation	2	
	Etnics, Legal Rights and benefits for genatric Renabilitation	1	
	Social issues having impact on Physical function	1	
	Role of P.1. in industrial set up & Stress management with	2	
	Pielogiaal Hazarda	1	
0	Biological Hazards	1	
9	Nice to Know	0	
	Nutrition and Dist for fitness	1	
	Industrial Laws: Lagal Bight and hanafita	1	
	Communication with Elderly	1	
	L agal rights & honofits for woman	1	
		1	
T (D	Common Problems in adolescents and management Infertility	1	
I ext B	OOKS		
5.NU	Thue Develothereney in Obstatrics and Company 1st addition by M. Dald	lan and L	11 Mantla
1	Physiotherapy in Obstetrics and Gynaecology 1 ⁻ edition by M. Pold	ion and J1	II Manue
2	Text book of Work Physiology - Astrand P A Rodahe K		
3	Therapeutic Exercise – By Kisner & Colby.		
4	Text book of community medicine &Community Health – by Bhaska	ar Rao.	
5	Geriatrics Physiotherapy – By Andrew Guccione.		
6	Industrial Therapy – by Glenda Key		
7	Preventive & Social Medicine –by Park		
8	Physiotherapy in Obstetrics and Gynaecology 2 nd Edition by Jill Me	ental (Els	sevier)
0	Textbook of Rehabilitation - Sundar		,
7			
9 Referei	nce Books		
9 Referen	nce Books		
9 Referen S.NO 1	nce Books Title Mural K F – Ergonomics: Man in his working environment		
9 Referen S.NO 1 2	Textbook of Rendermation Standar nce Books Title Mural K F –Ergonomics: Man in his working environment Exercise Physiology-by Mc 'Ardle.		
9 Referen S.NO 1 2 3	Textbook of Rendomation Sundar nce Books Title Mural K F –Ergonomics: Man in his working environment Exercise Physiology-by Mc 'Ardle. Musculoskeletal Disorders in work place: Principle &Practice-by Nord	in Anders	ons pope.
9 Referen S.NO 1 2 3 4	Tenteson of Tentesination Sundar Ince Books Title Mural K F –Ergonomics: Man in his working environment Exercise Physiology-by Mc 'Ardle. Musculoskeletal Disorders in work place: Principle &Practice-by Nord Indian Social Problem Vol 2 – by G R Madan	in Anders	ons pope.
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9 Referen 5.NO 1 2 3 4 5 6 7 8 0	Technology of Rendering Standar Ince Books Title Mural K F –Ergonomics: Man in his working environment Exercise Physiology-by Mc 'Ardle. Musculoskeletal Disorders in work place: Principle &Practice-by Nord Indian Social Problem Vol 2 – by G R Madan. Disability 2000 - RCI. Legal Rights of disabled in India-by Gautam Bannerjee. ICF –WHO Health Organisation 2001 publication. Handbook of Physical Medicine & Rehabilitation:- by Braddom Women & the Law, Vol. L & II from Chorine C. & M Desai, C Con	in Anders	ons pope.
9 Referen 5.NO 1 2 3 4 5 6 7 8 9	Technology of Technology of Technology of Technology of Technology of Technology Ince Books Title Mural K F –Ergonomics: Man in his working environment Exercise Physiology-by Mc 'Ardle. Musculoskeletal Disorders in work place: Principle &Practice-by Nord Indian Social Problem Vol 2 – by G R Madan. Disability 2000 - RCI. Legal Rights of disabled in India-by Gautam Bannerjee. ICF –WHO Health Organisation 2001 publication. Handbook of Physical Medicine & Rehabilitation:- by Braddom Women & the Law, Vol. I & II from Chorine C &M Desai, C Gon legal Information Centre Mumbai	in Anders salves, 19	ons pope. 999, Socio –

• <u>SUPERVISED CLINICAL TRAINING:</u>

- All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination
- Case Presentation & Documentation: = 5 marks (For Journal)

Evaluation and treatment planning, presentation and documentation of minimum **TEN** cases in

- Obstetrics :- 2 cases
- Gynaecology :- 2 cases
- Geriatrics :- 2 cases
- Industrial health :- 2 cases
- Fittness :- 1 case
- Disability evaluation :- 1 Case

SCHEME OF EXAMINATION

Written		Total	Practical		Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Spots, OSCE, OSPE, Mini CEX, Simulated cases. **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

Sec A	MCQ (20 Minutes)	20x1=20 marks
Sec B	1. Very Short answer questions - Answer any 5 out of 6	5x3=15 marks
	2. Short answer questions - Answer any 3 out of 4	2x5=15 marks
Sec C	1. Long Answer Question(Compulsory)	1x15=15 marks
	2. 4. Long Answer Question(Answer any 1 out of 2)	1x15=15 marks

• Practical Examination (80 marks)

S.No.		Marks
1	1.Long Case: Women's health/Geriatric/Industrial health/health	40 Marks
	promotion	
	2.Short Case: Simulated	20 Marks
	3. Spots (5 SPOTS for 3 marks each, based on scales, National	15 Marks
	health programmes, fitness protocols) +	
	4. Journal	5 Marks

Internal Assessment Marks: Theory/ Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks

Total = 100 marks

The total shall be Converted to 20 marks for final Internal Assessment Marks (100/5=20)

	Title :- CHOICE BASED COURSE-Physiotherapy in Paediatric Conditions Course Code:- PT 703 A																
	Course Credit for Physiotherany in Paediatric Conditions																
Hours Hrs/Wk Credits Evaluation Pattern																	
Th	Pr	SC Tot Lec Pr SCT Tot Le Pr SC Tot Written Total Practical									tical	Total					
		T	100	Lee		501	101	c		T	100	IA	Final	Final	IA	Final	Final
22	22	0.6	1.00	2	2	6	10	2	1	2	~	10	exam	exam	10	exam	exam
Lea	<u>32</u> <u>32</u> <u>96</u> <u>160</u> <u>2</u> <u>2</u> <u>6</u> <u>10</u> <u>2</u> <u>1</u> <u>2</u> <u>5</u> <u>10</u> <u>40</u> <u>50</u> Learning Objectives:											50	10	40	50		
At t	At the end of the course candidate should be able to -																
1.A	cqui	re the	know	ledge	of n	orma	l neu	ırode	velo	pmen	t, witł	ı spe	cific ref	erence	to Lo	ocomo	tion
2.	2. Acquire the knowledge of assessment and management of Developmental deformities &																
con	congenital anomalies, Deformities of vertebral column, deformities of chest wall																
	<u> </u>						Cou	irse (Conte	ent							
Top	Topic Title of content Hours of																
Seri	ial														tea	aching	/learning
No.															The	eorv	Practical
		Must	t Kno	w											32		32
1.		Cerel	oral p	alsv -	asses	sme	nt &	man	agen	nent v	vith a	ppro	aches. I	Roods.	2 h	rs	9 hrs
		Voita	. Sens	sorv ii	ntegr	atior	. N.I	D.T				rr		,		~~	
2.		Cong	enital	dislo	catic	n of	hip	.CTI	EV. v	vertic	al talu	ıs. B	lount d	isease.	2 h	rs	2 hrs
		Perth	e's d	isease	. sl	ipped	l car	oital	fem	oral	epiph	vsis.	limb	length		~	
		discre	epanci	ies an	d Os	teoge	enesi	s Imi	berfe	cta.	-p-p-1	<i>J212</i> ,					
3.		Trau	natic	iniur	ies	in c	hild	– fi	ractu	res. (lisloc	ation	s. epip	hvseal	2 h	rs	2 hrs
		iniuri	les							,			, •p-p				- 1110
5.		Atten	tion d	leficit	Hvn	eract	ive c	lisor	der. A	Autisr	n				1 hr		1 hr
6		Enilensy								1 h	rs	1 hrs					
7.		Gene	tic dis	order	- D	own'	s svr	dron	ne. N	larfar	n's svi	ndroi	ne		1 h	r	1 1110
8.		Asses	ssmen	t and	M	anago	emen	t of	Mc	veme	ent di	sord	er – C	horea.	1 h	r	2 hrs
0.		Athe	tosis.	Dysto	nia,	Chor	eoath	netos	is. A	taxia							- 1110
9		Disor	der o	f mus	scle	- M	uscul	ar d	vstro	phy (Duc	henn	e's, Be	cker's,	2 h	rs	2 hrs
		Limb	girdl	e, Fac	io-sc	apul	ohun	neral	, Spi	nal m	uscula	ar atr	ophy)	,			
10.		Deve	lopme	ental	anor	nalie	s –	Spin	a bi	fida,	hydro	ocepl	halus, c	ranio-	2 h	rs	3 hrs
		verte	bral ju	inctio	n and	omal	ies	1			5	1	,				
11.		Trau	natic	head i	njur	y									1 h	rs	1 hr
12.		Cong	enital	dislo	catic	n of	hip,	CTI	EV, v	vertic	al talu	is, B	lount d	isease,	3 h	rs	2 hrs
		Perth	e's d	isease	, sl	ippeo	l ca	oital	fem	oral	epiph	ysis,	limb	length			
		discre	epanci	ies an	d Os	teoge	enesi	s Imp	perfe	cta.				e			
13.		Trau	natic	injur	ies	in c	hild	– fi	ractu	res, d	lisloca	ation	s, epip	hyseal	1 h	rs	1 hrs
		injuri	ies	-										-			
14.		Neon	atal I	CU, P	aedia	atric	ICU,	Con	nplic	ations	of lo	w b	irth Wei	ight	2 h	rs	2 hrs
15.		Fetal	circu	lation	".Co	ngen	ital ł	neart	dise	ase –	patho	odyna	amics, c	clinical	2 h	rs	1 hr
		prese	ntatio	n, i	nvest	igati	on,	me	dico-	surgic	al	&	physiot	herapy			
		mana	gemer	nt of o	cyano	otic a	& ac	yanot	tic he	eart d	isease	, Rl	neumatio	e heart			
L		diseas	se														
16.		Respi	iratory	dise	order	in	chi	ldhoo	od -	- IR	DS,	Bron	chopulr	nonary	2 h	rs	1 hr
		dyspl	asia, p	oneum	onia	lung	g abs	cess,	asth	ma, cy	ystic	tibro	sis, bror	nchitis,			
		bronc	hiecta	isis, bi	conch	noliti	s, pe	rtusi	s, CF	OUP	, epigl	otitis	s, chroni	c lung			
		diseas	se, p	orimar	y c	illary	/	dys	kines	1a, 1	atigue	e, s	ieep a	pnoea,			
		nyper	ventil	ation													
L		synd	rome														

17.	Desirable to Know		
	Role of Orthotics in Paediatric conditions.	2 hr	
	Anatomical & physiological differences of cardio-vascular &	2hr	
	respiratory system in neonates, childhood & adults		
18.	Nice to Know		
	Paediatric Sports Injuries and Rehabilitation	2 hr.	
	Assessment of Reflex & Reactions	1hr	2hr
19.	SCT		96

Text Books

S.NO	Title
1	Paediatric physical Therapy- Stephen Tecklin
2	Physical therapy for children –Campbell
3	Nelson Textbook of Paediatrics
4	Handbook of Paediatric physical therapy-Toby M Long
5	Baby Treatment Based on NDT Principles- Lois Bly. M.A,. PT
6	Cardiopulmonary Physical therapy- Scot Irwin

SCHEME OF EX	XAMINATION
— 1	

Written		Total	Practical		Total
IA	Final exam	Final exam	IA	Final exam	Final exam
10	40	50	10	40	50

Periodical Examination:

- Written Examination:-20 MCQ for 10marks, 20 minutes.
- Practical Examination:- 10 marks (Simulated Case/ OSCE/ OSPE/ Mini CEX)

Preliminary Examination / University (Final) Examination

(10 marks internals & 40 marks University exam)

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1.Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	2.Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Question(Answer any 1 out of 2)	1x10=10 marks

• Practical Examination (40 marks)

S.No.			Marks
1	1.	Long Case: based on the History 5 marks, Evaluation 5	25 Marks
		marks, Treatment Plan on Patient 15 marks	10 Marks
	2.	Short Case: Simulated	
	3.	Journal	5 Marks

> **<u>SUPERVISED CLINICAL TRAINING</u>**: Journal=5 marks

All the SCT works should be properly documented with 10 Cases, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory/Practical

Periodical exam	= 10 marks
Prelim exam	=40 marks
Total	= 50 marks
The total shall be Conver	ted to 10 marks (50/5=10)

		(Cours	e Titl	le :- (CHO	ICI	E BAS	SED	COU	RSE	- MA	NUAL	THE	CRA	PY		
	Course Code:- PT 703 B																	
Course Credit for Manual Therapy																		
	H	ours	-	Hrs/	Wk	a am	L	Cre	dits		-	Eva	aluation	n Patt	ern			
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Writ IA	ten Final	Total Final	1	Practic	cal Final	Total Final
												17.1	exam	exam			exam	exam
32	32	96	160	2	2	6	10	2	1	2	5	10	40	50]	10	40	50
Lea	Learning Objectives:																	
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1.	Acqu	uire th	e knov	wledg	ge an	d skil	l of	vario	us ap	proa	ches of	f Mai	nual the	rapy t	for j	oints	s of	
	the l	imbs/s	spine.															
2.	Integ	grate t	he ma	nual t	heraj	pies t	o re	habili	tate t	he M	echan	ical N	Neuro-N	luscu	lar			
	prob	lems.										-						
3.	Impa	art kno	wledg	ge and	l trai	n the	unc	lergra	duate	$\frac{10 \text{ N}}{2}$	lanual	The	apy.					
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5		Princi	inles	India	atio	<u>18 &</u>	C	ontra	Indi	ration	s of	Kalt	enhorn ⁹	°s 3	hrs		3 h	rs
5.		Techr	nique	man	unor	15 0		ontra	man	cation	01	Itun	Choom	5 5	ms		5 11	15
6.		Princi	iples.	Indi	catio	ns å	& (Contr	a-Ind	icatio	ons o	f M	ulligan	's 3	hrs		3 h	rs
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7.		Princi	iples,	Indi	catio	ns &	k (Contra	ı-Ind	icatio	ns of	f Mo	ckenzie [;]	's 4	hrs		4 h	rs
		Mech	anica	Diagr	nosis	and '	Trea	atmen	t (Ml	(TC								
8.		Princi	iples,	Indic	ation	is &	Co	ntra-I	ndica	tions	of B	utler	's neura	al 11	nrs		3 h	rs
		mobil	izatio	n														
9.		Princi	iples,	Indic	atior	ıs &	Co	ntra-l	Indica	ations	of N	Veuro	dynami	c 2	hrs		3 h	rs
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10.		Princi	iples,	Indic	ation	s &	Coi	ntra-I	ndica	tions	of M	[uscle	e Energ	y 3	hrs		3 h	rs
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14.		SCI															90	

Text Books

Sr.No.	Title
1	Maitlands book on Manual therapy
2	Orthopaedic Physical examination – by Magee
3	Mobilization methods – Kaltonborn
4	Cyriax Mobilisation

Written	l	Total	Practi	cal	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
10	40	50	10	40	50

Periodical Examination:

- Written Examination:-20 MCQ for 10marks, 20 minutes.
- Practical Examination:- 10 marks (Simulated Case/ OSCE/ OSPE/ Mini CEX)

Preliminary Examination / University (Final) Examination

(10 marks internals & 40 marks University exam)

• Written Examination (40 marks)

Sec A	MCQ (10 Minutes)	10x1=10 marks
Sec B	1.Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	2.Short answer questions - Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Question(Answer any 1 out of 2)	1x10=10 marks

• Practical Examination (40 marks)

S.No.			Marks
1	4.	Long Case: based on the History 5 marks, Evaluation 5	25 Marks
		marks, Treatment Plan on Patient 15 marks	10 Marks
	5.	Short Case: Simulated	
	6.	Journal	5 Marks

> **<u>SUPERVISED CLINICAL TRAINING</u>**: Journal=5 marks

All the SCT works should be properly documented with 10 Cases, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory/Practical

Periodical exam	= 10 marks
Prelim exam	= 40 marks
Total	= 50 marks
The total shall be Conver	ted to 10 marks (50/5=10)

SEMESTER – VIII

Course	Course Title	Hours						
Code		Th	Pr	SCT	Total			
PT-801	Physiotherapy in Neurosciences	64	96	96	256			
PT-802	Physiotherapy in Cardiorespiratory and General Conditions	64	96	96	256			
PT-803	Choice based course(Sports Physiotherapy/Hand Rehabilitation)	32	32	96	160			
	Total	160	224	288	672			

Th: Theory, Pr: Practical, Tot: Total, Lec: Lecture Demonstration/Tutorial/Discussion, IA: Internal Assessment

	Course Title :- Physiotherapy in Neurosciences																
	Course Code:- PT 801																
	Course Credit for Physiotherapy in Neurosciences Harrison Harrison																
Th	Pr	SC	Tot	Lec	Pr	SCT	Tot	Le	Le Pr SC Tot Written Total				Total	l Practical Total			
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64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
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3		Neur	ologic	al As	sessi	nent				8				5		3	
•		• A	ssessr	nent o	of Hi	gher	men	tal fr	inctio	ons. C	ranial	Ner	ves	-			
		• Se	ensory	/ svste	em I	Moto	r svs	tem	Refl	exes	Co-or	dina	tion			3	
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	tunning																

6	Application of skills of Co-ordination & Balancing exercises by using techniques based on Neuro-physiological principles	1	3
7	Application of transfer & functional re-education exercises-	1	4
	Postural exercises, & Neurological Gait Assessment and		
	management/ training		
8	Principles of Application of Neuro therapeutic skills like PNF,	2	5
	NDT, Brunnstrom & Rood 's approaches.		
9	Principles and methods of using tools of Therapeutic gymnasium	1	3
	such as Vestibular ball, tilt board, bolsters, etc. in neurological		
	conditions		
10	Evaluation & physiotherapy assessment with appropriate		
	reasoning for planning & implementation of treatment technique		
	for following neurological conditions:		
	i. Cerebrovascular Accidents:		
	• Hemiplegia,	2	5
	Disorders of cerebral circulation		
	• Space occupying lesions		
	ii. Disorders of spinal cord		
	• Spinal Cord Injury	2	5
	• Svringomvelia		-
	Transverse myelitis		
	 Sub-acute combined degeneration of spinal cord 		
	iii Traumatic Head Injury	2	2
	in Tradinate field injury	2	2
	IV. Infections of Nervous System	2	3
	• Meningitis		
	• Encephalitis		
	• Neurosyphilis		
	• Tabes dorsalis		
	 Poliomyelitis and Post Polio Residual Paralysis 		
	• Leprosy		
	v. Demyelinating diseases of the nervous system Multiple		
	sclerosis	1	2
	vi. Lesions of Extra-pyramidal system & Basal ganglia		
	Parkinson's Disease		
	Spasmodic torticolis	2	4
	• Athetosis,		
	Chorea & Dystonia		
	vii. Degenerative disorders	2	2
	Motor Neuron Diseases		
	• Hereditary Ataxia		
	• Peroneal muscle atrophy. S.M.A		
	viji. Disorders of Peripheral nerves		
	Traumatic Nerve Injury Tumors	2	3
	 Infective & Metabolic lesions of nerves 	-	-
	ix Disorders of muscles and neuromuscular junction		
	Muscular Distrophies	2	2
	 Musculai Dyshopilles Muschania Cravia & muschania ann drama 	<i>–</i>	<i>2</i>
	• wyasulema Gravis & myasulema syndrome		
		1	

r			1
	x. Polyneuropathy		
	Classification of Polyneuropathies	2	4
	• GBS, Diabetic and Alcoholic Neuropathy	2	4
	xi.Cerebellar & Co-ordination disorders , Congenital Ataxia,	3	4
	Friedrich Ataxia		
	Paediatric Neurology		
	a) Developmental milestones and Developmental reflexes,	3	4
	b) Neuro developmental screening tests	2	6
	c) Evaluation & Management :	2	4
	Observation, Palpation, Milestone Examination,		
	developmental reflex Examination,		
	• Higher mental function, Cranial nerve examination, Motor &		
	Sensory examination, Reflex testing,		
	• Differential Diagnosis, Balance & Coordination examination,		
	Gait analysis, Functional analysis,		
	List of Problems & Complications, Short & Long Term goals		
	d) Use of various Neurophysiological approaches & Modalities in		
	High Risk babies		
	Minimum brain damage		12
	Developmental disorders	8	
	Cerebral palsy		
	• Autism		
	Down's Syndrome		
	• Hydrocephalus		
	• Spina bifida and spinal dysraphism		
	Protecting future generations, Protection of the environment	2	
	• Why care about the future? Contexts of concern		
	• The scope and limits of future related responsibilities		
	Intergenerational; distant generations, all unborn generations?		
	• Obligations over health care providers to the possible people		
	of the future?		
	• Health care and future generations		
	• The relation of bioethics and environmental issues		
	• Basic principles of environmental ethics		
	i. environmental justice		
	ii. intergenerational justice respect for nature		
	DESIRABLE TO KNOW		
1	Parent / care takers education about handling of a paralytic patient	1	2
2	Lifting techniques, Wheel chair modifications & adaptive devices	1	4
3	Disorders of autonomic nervous system	2	
	NICE TO KNOW		
1	Embryology of nervous system	2	
2	Psycho-somatic Pain & Paralysis.	1	
3	Fabrication of temporary splints during urgent requirement with	2	
	clinical reasoning		
4	Developing a philosophy for caring.	1	
	SCT		96

> **<u>SUPERVISED CLINICAL TRAINING</u>**: Journal=5 marks

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Evaluation & treatment planning; its presentation & documentation of minimum ten cases in following:

- U.M.N. lesion
- L.M.N. lesion,
- Paediatric Neuro case

Text Books

Sr.No.	Title
1	Cash's Text book for Physio Therapists in Neurological disordersJaypee brothers
	Publication
2	Practical Physical therapy by Margaret Hollis
3	Therapeutic Exercise by Carolyn Kisner & Colby
4	Physical Rehabilitation by Susan. B.O` Sullivan
5	Tidy's Physiotherapy by Stuart Porter
6	Neurological Rehabilitation by Darcy Umphred
7	"Right in the middle of stroke" by Patricia Davis

Reference Books

Sr.No.	Title
1	Therapeutic exercise by Basmajiian-5th edn.
2	Physical Rehabilitation by Krusen
3	Brain's disorders of Nervous system

SCHEME OF EXAMINATION

Written		Total	Practical		Total			
IA	Final exam	Final exam	IA	Final exam	Final exam			
20	80	100	20	80	100			

Periodical Examination:

- Written Examination:-20 MCQ for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Simulated Case/ OSCE/ OSPE/ Mini CEX)

Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

SecA	1.MCQ (20 Minutes)	20x1=20 marks
Sec B	2.Very Short answer questions - Answer any 5 out of 6	5x3=15 marks
	3.Short answer questions - Answer any 3 out of 4	3x5=15 marks
Sec C	4. Long Answer Questions (compulsory)	1X15=15marks
	5. Long Answer Questions – any 1 out of 2	1X15=15marks

• Practical Examination (80 marks)

S.No.		Marks
1.	Long case	
	History	5 marks
	Evaluation	15 marks
	Treatment Plan on patient	20 marks
2.	Short case	20 marks
3.	Five spots: - Spots based on	3x5=15
	EMG/NCV Studies	
	Orthosis/Prosthesis	
	Neuro-assessment scale (3 minute & 3Marks each spot)	5 marks
	Journal	= 20 marks

Internal Assessment Marks: Theory/Practical

Periodical exam	= 20 marks
Prelim exam	= 80 marks
Total	= 100 marks

The total shall be Converted to 20 marks for final Internal Assessment Marks (100/5=20)

	Course Title :- Physiotherapy in Cardio-respiratory and General Conditions																
	Course Code:- PT 802																
	Course Credit for Physiotherapy in Cardio-respiratory and General Conditions																
	Н	ours		Hrs/	/Wk			Credits				Evaluation Pattern					
Th	Pr	SC	Tot	Lec	Pr	SCT	Tot	Le	Pr	SC	Tot	Writ	ten	Total	Prac	tical	Total
		Т						с		Т		IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
Lea	Learning Objectives:																

At the end of the course, the candidate should be able to-

1. Identify, discuss & analyze cardio-vascular & pulmonary dysfunction, based on Pathophysiological principles, & arrive at the appropriate functional diagnosis,

- 2. Acquire knowledge of rationale of basic investigative approaches in the medical system, & surgical intervention regimes related to cardio-vascular & pulmonary impairment.
- 3. Acquire the skill of evaluation & interpretation of functional capacity, using simple exercise tolerance tests, such as 6 minutes walk test, symptom limited test.
- 4. Select strategies for cure, care & prevention; adopt restorative & rehabilitative measures for maximum possible functional independence of a patient at home, work place & in community.
- 5. Execute the effective Physio Therapeutic measures [with appropriate clinical reasoning] with special emphasis to Breathing retraining, nebulization, humidification, bronchial hygiene, General mobilization, & Exercise conditioning.
- 6. Acquire knowledge of the overview of patients care at the Intensive care area, artificial ventilation suctioning, positioning for bronchial hygiene, & continuous monitoring of the patient at the Intensive care area.
- 7. Acquire the skill of basic Cardio pulmonary resuscitation.
- 8. Execute the effective Physio therapeutic measures with appropriate clinical reasoning to improve general surgical & medical condition.

Course Content									
Topic	Title of content	Hours of							
Serial		teaching/learning							
No.		Theory	Practical						
	Must Know								
1	Assessment of Cardio-Vascular and Respiratory system.	2	3						
2	Anatomical and Physiological differences between the Adult and	1							
	Paediatric lungs								
3	Interpretation of radiological & Biochemical Investigations &	2	3						
	correlate the same with clinical findings.								
4	Functional diagnosis of cardio respiratory dysfunction (ECG, PFT,	3	3						
	serum enzymes, ABG, ABI)								
5	Physiotherapy techniques to increase lung volume	3	3						
	 Positioning and Mobilization 								
	Breathing exercises								
	Neurophysiological Facilitation of Respiration								
	• Mechanical aids – Incentive Spirometry, CPAP, IPPB								
6	Physiotherapy techniques to decrease work of breathing	2	3						
	Energy Conservation								
	Positioning								
	• Breathing re-education – Breathing control techniques								
	Mechanical aids – IPPB, CPAP, BiPAP								

7	Physiotherapy techniques to clear secretions	5	8
	Hydration. Humidification & Nebulisation.		
	 Mobilization and Breathing exercises 		
	Postural Drainage		
	 Manual techniques — Dercussion Vibration and Shaking Pib. 		
	• Manual techniques – refeasion, violation and Shaking, Kio		
	Springing,		
	• ACB1, Autogenic Drainage		
	• Mechanical Aids – PEP, Flutter, Acapella, RC Cornet, IPPB		
	• Facilitation of Cough and Huff		
	• Suctioning		
8	Drug Therapy	1	-
9	Patterns of Lung Disorders & their PT Management	5	5
10	Physiotherapy following Lung Surgeries	2	5
11	Pulmonary Rehabilitation	2	3
12	Intensive care unit	5	15
	a. Assessment of the critically ill patients		
	b. Monitoring in the ICU		
	c. Physiotherapy in the ICU – Common conditions in the ICU –		
	Head Injury, Pulmonary Oedema, Multiple Organ Failure,		
	Neuromuscular Disease, Poisoning, Aspiration, ARDS, Shock etc		
	d. Dealing with Emergency situations in ICU		
	e. NICU / PICU treatment & rehabilitation.		
13	O ₂ therapy and Mechanical Ventilation	3	3
14	Physiotherapy management for cardiac disorders	3	5
15	Physiotherapy for Cardiac Surgeries (including Critical Cardiac	3	5
	Care)		
16	Cardiac Rehabilitation	1	3
17	Cardio-pulmonary resuscitation.	2	2
18	Physiotherapy intervention in the management of Medical and	3	3
	Surgical Oncology Cases		
19	PT Management of Abdominal Surgeries	2	4
20	Prescription of home program & ergonomic advice & parent's	1	2
	education in case of paediatric cases with reference to energy cost.		
21	AssessmentPT Management following Peripheral vascular diseases.	2	4
22	Management of wounds and ulcers, Diabetes and its complications	2	4
	Care, electrotherapeutic measures		
	• Care of surgical scars-U.V.R and other electro therapeutics for		
	healing of wounds, prevention of Hypergranulated Scars.		
	Keloids,		
	• Electrotherapeutics measures for relief of pain during		
	mobilization of scars tissues		
23	Burns management	2	2
	Role of physiotherapy in the management of burns.	-	-
	Post grafted cases		
	Mobilization and Musculoskeletal restorative exercises following		
	burns		
24	Treatment of Lymphoedema	1	
	Treament of Dyniphoedenia	1	

25	Physiotherapy in dermatology	2	4
20	• UVR therapy in various skin conditions: Vitiligo: Hair loss:	2	
	Pigmentation: Infected wounds ulcers		
	 Faradic foot bath for Hyperbydrosis 		
	 Care of anesthetic hand and foot 		
	DESIDABLE TO KNOW		
1	Cardioraspiratory changes associated with againg & fitness	1	2
1	programme	1	2
			4
2	Familiarization with concept of Quality of life	1	1
3	Precautions with HIV	1	
	NICE TO KNOW		
	Outcome Measures in Cardio-vascular & Pulmonary Conditions	1	1
	CLINICAL		
1	Skill to palpate all pulses, rhythm, rate, volume & Heart rate/pulse		
	rate discrepancy		
2	Skill to assess B.P. at various sites, & its Physiological variation, &		
	to assess Ankle- Brachial Index		
3	Skill of exercise testing- a]-6/12 min walk, b]-symptom limited		
4	Interpretation of		
	a tread mill & Ergo-cycle test findings		
	b. ECG,I.H.D. & Blocks,		
	c. Biochemical analysis-serum enzymes, C.P.K levels, L.D.H.,		
	S.G.O.T., S.G.P.T., Troponin T, Lipid profile, electrolyte balance		
	d. Chest X-ray-,		
	e. P.F.Tobstructive/ restrictive/reversibility,		
	f. A.B.G		
	g. R.P.EBorge`s scale		
	h. Quality of life questionnaires		
5	SCT		96

Text Books

Sr.No.	Title
1	Cash's Text book for Physiotherapists in Chest, Heart & Vascular diseases- Jaypee bros.
	Publication
2	Cash's text book in General Medical & Surgical conditions for Physio therapists
3	Chest Physical therapy & Pulmonary rehabilitation-by Donna Frownfilter
4	Brompton's hospital guide
5	Physical Rehabilitation - O'sullivan

Reference Books

Sr.No.	Title
1	Physio Therapy in Cardio- Vascular rehabilitation-Webber
2	Exercise & the Heart –Wenger
3	ECG by P.J. Mehta,
4	J. Hampton (Hand book of ECG made easy)
5	Cardiopulmonary Physical therapy by Irwin Scott.
6	Physiotherapy in respiratory care – Alexandra Hough

SCHEWE OF EXAMINATION											
Written	l	Total	Total								
IA	Final exam	Final	IA	Final	Final exam						
		exam		exam							
20	80	100	20	80	100						

Periodical Examination:

- Written Examination:-20 MCQ for 20marks, 20 minutes.
- Practical Examination:- 20 marks (Simulated Case/ OSCE/ OSPE/ Mini CEX)

Preliminary Examination / University (Final) Examination

• Wr	Written Examination (80 marks)											
Sec A	MCQ (20 Minutes)	20x1=20 marks										
Sec B	1.Very Short answer questions - Answer any 5 out of 6	5x3=15 marks										
	2.Short answer questions - Answer any 3 out of 4	3x5=15 marks										
Sec C	1. Long Answer Questions (compulsory)	1X15=15marks										
	2. Long Answer Questions –any 1 out of 2	1X15=15marks										

• Practical Examination (80 marks)

S.No.		Marks
1.	Long case	40
	History(5), Evaluation(15), Treatment Plan on patient(20)	
2.	Short case (Simulated)	20
3.	Five spots + journal	15+5=20
	5 Spots based on ABG/X -ray/ECG/PFT/RPE/Bruce protocol etc.	
	3 minute each spot $3x5=15$	

> **<u>SUPERVISED CLINICAL TRAINING</u>**: Journal=5 marks

All the SCT works should be properly documented, signed by the respective teacher incharge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Evaluation & treatment planning, presentation & documentation of **TEN** cases in the following conditions:-

- Medical Respiratory condition
- Paediatric respiratory condition
- Thoracic Surgical condition,
- Cardiac Medical condition
- Cardiac Surgical condition
- Peripheral vascular disorders
- Abdominal surgical condition
- Mastectomy / Amputation

Internal Assessment Marks: Theory/Practical

= 20 marks
= 80 marks
= 100 marks

The total shall be Converted to 20 marks for final Internal Assessment Marks (100/5=20)

	Course Title :- CHOICE BASED COURSE- SPORTS PHYSIOTHERAPY																
	Course Code:- PT 803A																
	С	ourse	Cred	lit for	·CH	OIC	ΕB	ASEI	D CC	OURS	E- SF	POR '	LS DH	YSIOT	HER	APY	
	H	ours		Hrs	/Wk			Credits Eval				aluation	n Patte	ern			
Th	Pr	SC	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SC	Tot	Writ	ten	Total	Prac	tical	Total
		Т								Т		IA	Final exam	Final	IA	Final exam	Final exam
32	32	96	160	2	2	6	1	2	1	2	5	10	40	50	10	40	50
Las				~			0										
	At the end of the course, the candidate should be able to -																
	Iden:	tify c		wise,	nolva	anur o th		SHOU		alotal	dvefu	netic	n in to	rms of	Bion	hochan	ical
1.	Kine	sioloc	nscuss rical a	nd R	ionhy	vsical	hav	$\sin \&$	co-r	elate 1	he sa	me v	with the	nrovi	sional	diagno	icai,
	routi	ne rac	liologi	cal &	Elec	tro-n	hvsi	ologi	cal in	vestig	ations	s and	arrive a	t appro	priate	functio	onal
	diag	nosis	with cl	linical	reas	oning	g for	fitne	ss tra	ining	& reh	abilit	ation.	a appro	prime		
2.	Unde	erstan	d the	osych	osoci	al fa	ctors	s, env	ironn	nental	factor	rs &	individu	ual fact	ors af	fecting	the
	perfo	orman	ce.														
3.	Use	the an	atomi	cal rat	ional	e for	the	clinic	al tes	sts use	d in d	iffere	ntial dia	agnosis	•		
4.	Iden	tify, d	iscuss	& an	alyse	, the	vari	ous ca	ardio	-respir	atory	func	tion & c	co-relat	e the	same w	ith the
_	prov	isiona	l diagi	nosis,	for f	itness	s trai	ining	& reł	nabilit	ation.						
5.	Lay	down	rehab	ilitati	on pi	otoc	of fo	or spo	rts sp	pecific	injur	ies fo	ocusing	an ear	ly reh	abılıtat	ion to
6	injur Idam	ies.	0.00110	00 0 0	no f			Pr mma	uant	thom							
0. 7	Guid	la par	e caus	es pro		л Ш onfic	ury (Iont	x pre		inem.	e rah	abilit	nation to	attair	mov	mol	
7.	achie	veme	nt nt	115 10	lat	onne	iciti	sport	s act	Ivity o	x icii	aonn	anon u) attain	тал	innai	
8	Unde	erstan	d the r	ole of	Sno	rts nł	vsio	othera	nist i	n the t	eam						
0.	Cilde	<u>or sturr</u>			. spo	10 p1	iy sic	Co	urse	Conte	nt						
Tor	oic	Title	of cor	ntent						001100					F	Iours o	of
Ser	ial		01 001												teach	ing/lea	rning
No.														r	Theor	v Pra	actical
1		Train	ing th	e aero	bic :	and a	nae	robic	ener	gy sys	tem				2	-	
2		Physi	iologi	cal r	espo	nses.	cł	nange	s &	ada	ptatio	ns	to vari	ious 2	2	-	
		exerc	ises -	aeroł	oic e	xerci	ses	& ana	aerob	oic exe	ercises	s in l	Pulmon	ary,			
		Cardi	iovasc	ular,	Neur	omu	scul	ar sys	stem,	Horn	nones						
3		Detra	ining	effec	ts of	card	iova	ascula	ır, m	usculo	oskele	tal a	nd nerv	ous 2	2	-	
		syste	m														
4		Sport	ts spec	cific t	rainii	ng an	d cr	oss tr	ainir	ıg.				1	2	-	
5		Muse	culosk	keleta	l inj	uries											
		•]	Pre-pa	articip	oation	n exa	min	ation							2	-	
		• (Cause	s & N	lecha	anisn	ı of	Sport	s Inj	uries,	preve	ntior	n of spo	rts 2	2	-	
		i	njurie	s to v	ariou	ıs str	uctu	ires.	5				-				
		Common acute, chronic and overuse injuries in various sports at: 6															
		➢ Shoulder girdle, Shoulder, Arm, Elbow, Forearm, Wrist & hand															
			Pelvis	s, hip	, thig	h, kr	lee,	leg, a	nkle	& foo	t						
			Spine	¢													
			Head			~											
			Thora	ncic c	age a	nd a	bdoi	nen									
			Perip	heral	nerv	e injı	iries	, inju	ries t	o mus	scles,	ligar	nent,				
			tendo	n, bo	ne, s	ynov	ial j	oint s	truct	ure(wi	th ph	ysiol	ogical				
			respo	nse to) inju	ry)											

6	Cardiopulmonary section	6	-
	• Sporting emergencies & first aid		
	• Cardio pulmonary Resuscitation; Shock management, Internal		
	and External bleeding, Splinting, Stretcher use–Handling and		
	transfer, Management of Cardiac arrest, Acute asthma,		
	epilepsy, drowning, burn, Medical management of mass		
	participation. Heat stroke and Heat illness.		
	Desirable to know		
9	Electrotherapy in sports injuries	2	-
	Body composition	3	
	Different Body composition		
	Various methods to estimate body composition : water		
	displacement method, under water weighing method, skinfold		
	method, surface anthropometry, bioelectrical impedence analysis,		
	ultrasound assessment of fat, arm X-ray assessment of fat, CT		
	assessment of fat		
	Nice to know		
	Various Body measurements:	3	
	Gross size and mass, length and height measurement,		
	circumference of body parts, Skinfold thickness measurements		
	PRACTICALS		
1	Taping		2
2	On field Assessment		2
3	Evaluation of Physical Fitness:Assesement of strength, power,		8
	endurance (muscular & cardiac), VO _{2max} , flexibility, reaction time		
	and pulmonary function.		
4	Assessment of lower limb complex: Pelvis, hip, thigh, knee, leg,		10
	ankle and foot		
5	Assessment of upper limb complex: Shoulder girdle, shoulder,		10
	arm, elbow, forearm, wrist and hand		
6	SCT		96

Reference Books

Sr.No.	Title					
1	Sport and physical therapy – Bernhardt Donna, Churchill Livingstone, London 1995.					
2	Bird, S. R., Black, N. Sports Injuries: Causes, Diagnosis, Treatment and Prevention.					
	Cheltenham: Stanley Thomes, 1997 ISBN: 0748731814					
3	Brownstein, B. Functional movement in Orthopaedic and Sports Physical Therapy:					
	Evaluation, Treatment and Outcomes.New York; London: Churchill Livingstone, 1997					
	ISBN: 0443075301					
4	Cash, M. Sport and Remedial Massage Therapy.London: Edbury, 1996 ISBN:					
	0091809568					
5	Johnson, R. J. and Lombardo, J (eds.) Current Review of Sports Medicine Philadelphia:					
	Butterworth-Heinemann, 1998 (2nd edition) ISBN: 0750699655					
6	Hollis, M. Massage for Therapists. Oxford: Blackwell Science, 1998 (2nd edition)					
	ISBN: 0632047887					
7	Hutson, M.A. Sports Injuries, Recognition and Management. Oxford: Oxford					
	University Press, 2001 (3nd edition) ISBN: 0192632728					

Written		Total	Practical		Total
IA	Final exam	Final	IA	Final	Final exam
		exam		exam	
10	40	50	10	40	50

Periodical Examination:

• Written Examination:-20 MCQ for 10 marks, 20 minutes.

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

S.No.		Marks
Sec A	MCQ (10 minutes)	1x10=10 marks
Sec B	1. Very Short answer questions-Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions-Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions-Answer any 1 out of 2	1x10=10 marks

Practical Examination (40 marks)

S.No.		Marks
1.	Long Case: based on the History 10 marks, Evaluation 10	25 marks
	marks, Treatment Plan on Patient	
2.	Short Case: Simulated + Journal	10 + 5 = 15 marks

> **<u>SUPERVISED CLINICAL TRAINING</u>**: Journal=5 marks

All the SCT works should be properly documented with 10 cases, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks : Theory/Practical

Periodical exam	= 10 marks
Prelim exam	= 40 marks
Total	= 50 marks

The total shall be Converted to 10 marks (50/5=10)

Course Title :- CHOICE BASED COURSE- HAND REHABILITATION Course Code:- PT 803B

Course Credit for CHOICE BASED COURSE- HAND REHABILITATION

$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		Hours Hrs/W	k Cr	Hrs/Wk	Credits			Eva	luatior	Patter	'n		
T T IA Final exam IA Final exam IA Final exam IA Final exam 32 32 96 160 2 2 6 1 2 1 2 5 10 40 50 10 40	Th	Pr SC Tot Lec Pr	r SCT Tot Lec	Lec Pr	Lec Pr	SC	Tot	Writ	ten	Total	Pract	tical	Total
32 32 96 160 2 2 6 1 2 1 2 5 10 40 50 10 40		Т				Т	Γ	IA	Final	Final	IA	Final	Final
32 32 96 160 2 2 6 1 2 1 2 5 10 40 50 10 40									exam	exam		exam	exam
	32	32 96 160 2 2	6 1 2 0	2 2	2 1	2	5	10	40	50	10	40	50

Learning Objectives:

At the end of the course, the candidate should be able to -

- 1. Identify, discuss & analyse, the Hand dysfunction in terms of Biomechanical, Kinesiological and Biophysical basis & co-relate the same with the provisional diagnosis, routine radiological & Electro-physiological investigations and arrive at appropriate functional diagnosis with clinical reasoning.
- 2. Use the anatomical rationale for the clinical tests used in differential diagnosis.
- 3. Learn the ability to perform an appropriate subjective and physical examination, with development of suitable analytical skills to evaluate data obtained.
- 4. Further develop clinical reasoning that incorporates theoretical concept with evidence-based practice in the field of Hand rehabilitation.
- 5. Recognize the implication of dysfunction on the Neuro- Musculoskeletal system on hand function and the student's clinical decision making for rehabilitation.
- 6. Asses and diagnose all possible findings on the patient to plan a Rehabilitation programme.
- 7. Lay down rehabilitation protocol for sports specific hand injuries focusing an early rehabilitation to injuries.
- 8. Identify the causes prone for injury & prevent them.
- 9. Document patients with scale, out come measures and asses the progression.
- 10. Use recent Technique/ approaches to treat & train patients with hand dysfunction in children, adults & geriatrics.

	Course Content					
S.	Title of content	Hours of				
No.		teaching	/learning			
		Theory	Practical			
	Must Know					
1	General upper extremity examination	1	1			
4	Functional Evaluation of hand	2	1			
6	PT Management of Flexor tendon injuries	2	2			
7	PT Management of Extensor tendon injuries	2	2			
8	PT Management of Burnt hand + deformities	2	2			
9	PT Management of Arthritic hand + deformities	2	2			
10	PT Management of Crush injuries	2	2			
11	PT Management of Peripheral Nerve Injuries- median, radial,	2	2			
	ulnar, musculocutaneous, axillary					
12	PT Management of Entrapment neuropathies- cubital tunnel, carpal	2	2			
	tunnel, supinator tunnel, pronator teres syndrome					
13	PT Management of Brachial Plexus Palsies	2	2			
14	PT Management of Fractures of phalanges	1	2			
15	PT Management of Complex Regional Pain Syndrome	1	2			
16	PT Management of Upper limb Orthosis and training	2	2			

17	Taping for wrist and hand conditions	1	2		
18	Desirable to know				
	Prosthesis of upper extremity	1	1		
	Sensory examination of hand	2	1		
	Motor Examination of hand	2	1		
19	Nice to know				
	Preparation of splints using POP, Orthoplast, thermoplastic	1	1		
	Outcome measures of hand	2	2		
20	SCT		96		
Reference Books					

nererer	He Books
Sr.No	Title
1	Rehabilitation of Hand; J.M. Hunter [C.V.Mobsy]
2	The Hand; Fundamental of therapy (2 nd edn); Judith Boscheinen Morrin & Victoria
	Davey [Butter worth Heinemann]
3	Examination of hand & wrist; Tubiana [Mobsy publications]
4	Fundamentals of hand rehabilitation; Salter [Mobsy publications]
5	Concepts of hand rehabilitation [Mobsy publications]

Written			Total	Practical		Total		
	IA	Final exam	Final exam	IA	Final exam	Final exam		
	10	40	50	10	40	50		

Periodical Examination:

- Written Examination:-20 MCQ for 10 marks, 20 minutes.
- Practical Examination:- 10 marks(Simulated Case/ OSCE/ OSPE/ Mini CEX)

Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sr.No.		Marks
1	MCQ (10 Minutes)	1x10=10 marks
2	1. Very Short answer questions-Answer any 5 out of 6	5x2=10 marks
	2. Short answer questions-Answer any 2 out of 3	2x5=10 marks
	3. Long Answer Questions-Answer any 1 out of 2	1x10=10 marks

• Practical Examination (40 marks)

Sr.No.		Marks
1.	Long Case: based on the History 5 marks, Evaluation 5	20+5=25 marks
	marks, Treatment Plan on Patient 15 marks	
2.	Short Case: Simulated	10marks
	Journal	5 Marks)

SUPERVISED CLINICAL TRAINING: Journal=5 marks

All the SCT works should be properly documented with 10 cases, signed by the respective teacher in-charge of the subject, indexed in a separate file and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the file(s) to the teacher before the examination

Internal Assessment Marks: Theory/Practical

Periodical exam	=10 marks
Prelim exam	=40 marks
Total	= 50 marks

The total shall be Converted to 10 marks (50/5=10)

Course	Course Title	Hours					
Code		Th	Pr	Clinical	Total		
PT-901	Compulsory Rotatory Internship	-	-	858	858		
PT-902	Internship Project	-	-	234	234		
	Total	-	-	1092	1092		

COMPULSORY ROTATORY INTERNSHIP (1092HRS ACROSS 26 WEEKS)

	Course Title :- Compulsory Rotatory Internship Course Code:- PT 901 Course Credit for Compulsory Rotatory Internship																
Hours Hrs/Wk					Credits				Evaluation Pattern								
Th	Pr	Clinic	Tot	Lec	Pr	Clinics	Tot	Lec	Pr	Clinics	Tot	Writ	ten	Total	Prac	tical	Total
												IA	Final	Final	IA	Final	Final
													exam	exam		exam	College
		0.50	0.50			22	22			1.1	1.1				50		exam
-	-	828	828	-	-	55	55	-	-	11	11	-	-	-	50	-	50

	Course Title :- Internship Project Course Code:- PT 902 Course Credit for Internship Project																
Hours Hrs/Wk Credits								Ev	aluatio	n Pa	attern						
Th	Pr	Clinic	Tot	Lec	Pr	Clinics	Tot	Lec	Pr	Clinics	Tot	Writt	en	Total	Pract	ical	Total
												IA	Final exam	Final exam	IA	Final College exam	Final College exam
-	-	234	234	-	-	9	9	-	-	3	3	-	-	-	20	30	50

Distribution of internal marks for Compulsory Rotatory Internship (PT-901)

Sr.no	Particulars	Internal marks
1	Case Presentation (5x4=20 cases)	20
	i. Musculoskeletal PT	
	ii. Neurophysiotherapy	
	iii. PT in Cardiorespi	
	iv. CBR	
2	Two Journal clubs (2x5=10)	10
3	Summative evaluation (5x4=20)	20
5	i. Attitude towards patients and Colleagues/ Character	
	ii. Urge for learning/Initiative	
	iii. Accountability/ Responsibility/ Punctuality	
	iv. Administrative Ability (Records/ Maintenance of equipments)	
	Total	50

Distribution of internal marks for Internship Project (PT-902)

Sr.no	Particulars	Internal marks
1	Timely submission of project work	10
2	Submission of 10 review of literature	10
	Total	20

It is mandatory to get 50% marks separately in the course PT -901 & PT -902, for the successful completion of Compulsory Rotatory Internship.