





Dr. D. Y. PATIL VIDYAPEETH

(Deemed to be University)

Faculty of Allied Medical Sciences

SYLLABUS FOR BACHELOR OF PHYSIOTHERAPY (BPT)
2019-2020

# Dr.D.Y. PATIL COLLEGE OF PHYSIOTHERAPY

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# Dr. D. Y. PATIL VIDYAPEETH

# FACULTY OF ALLIED MEDICAL SCIENCES ACADEMIC REGULATIONS

# **BACHELOR OF PHYSIOTHERAPY (BPT)**

#### PREAMBLE:

The Bachelor of Physiotherapy (BPT) undergraduate degree is a 4 years 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 student's interest. The program focuses on overall development of the student including language and soft skills, emergency care and professional ethics. Psychosomatic aspects of training are a component through all the areas.

#### **NOMENCLATURE:**

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

## GRADUATE ATTRIBUTES:

No.	Attribute
1	Physiotherapy Expert
2	Communicator
3	Researcher
4	Lifelong Learner
5	Collaborator and team member
6	Leader and Promoter of the Profession
7	Manager and Entrepreneur
8	Professionalism, Employability and Accountability
9	ICT competence
10	Social Responsibility

#### PROGRAM OUTCOME:

Program Outcome (PO) Number	Program Outcomes for BPT Graduate
PO 1	Knowledge and Skills
PO 2	Planning and Problem-Solving Abilities
PO 3	Communication
PO 4	Research Aptitude
PO 5	Professionalism and Ethics
PO 6	Leadership
PO 7	Societal Responsibilities
PO 8	Environment and Sustainability
PO 9	Lifelong Learner

#### ELIGIBILITY FOR ADMISSION:

Eligibility of a candidate for admission to Bachelor of Physiotherapy program 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) program 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 (subjects) duration (672 clock hours) excluding the time scheduled for examination and evaluation process of the university and college. It includes a 6 months (24 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 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 1:5.

#### **CLINICAL TRAINING OUTLINE OF THE PROGRAM:**

Clinical training comprises of 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 training 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 each course, 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 course. 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 exam, the candidate must obtain 50 % of the total marks to pass theory exam irrespective of the parts.
- 3. In practical exam, the 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 course [subject].

#### **RULES FOR ATKT:**

The candidate shall be promoted to subsequent semester (from I semester to II semester, II semester to III semester, 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 course in the current semester of study. However, he/she must pass in these courses within six months. To appear for subsequent examinations, he/she must pass in all courses of the previous semester (i.e. a candidate shall be promoted from semester I to semester II even if he/she has failed in two course or less, the candidate shall be permitted to appear for both semester I & II 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 course will not be permitted to proceed to next class. It is mandatory for the candidate to pass in all course of the previous odd semester to be eligible for the next odd semester, and to pass in all course 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 course. 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.PatilVidyapeeth, Pune.)

#### **SCORING - THE CBCS SYSTEM:**

All courses 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:**

Bioethics is the study of controversial ethical issues emerging from new situations and possibilities brought about by advances in biology and medicine. It is also a 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 common place questions of values ("the ethics of the ordinary") which arise in primary care and other branches of medicine. The curriculum does not have a 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 Bioethics 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 program over an extended period of time
- Standardization and comparability of educational programs across the country

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 & 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 or without having to repeat all the courses in a given semester if they fail in one or more course.
- 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 programs.
- 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 to confirm as per the following scheme as recommended by UGC:

#### **Letter Grades and Grade Points:**

<b>Letter Grades</b>	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 reappear in 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) = $\Sigma$ (Ci x Gi) / $\Sigma$ Ci

where Ci is the number of credits of the it course and Gi is the grade point scored by the student in the it 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 program, i.e.

#### $CGPA = \Sigma(Ci \times Si) / \Sigma Ci$

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

Thus, SGPA =205/26 =7.88

#### ii. Illustration for CGPA

Semester 1	Sem 2	Sem 3	Sem 4	Sem 5	Sem 6	Sem 7	Sem 8
Credit:26	Credit:26	Credit:28	Credit:27	Credit:26	Credit:25	Credit:23	Credit:23
SGPA:7.05	SGPA:7.8	SGPA:5.6	SGPA:6	SGPA:6.3	SGPA:8	SGPA:6	SGPA:6
Intern	iship	Credi	t : 14				

Thus,  $CGPA = (26 \times 7.05) + (26 \times 7.8) + (28 \times 5.6) + (27 \times 6.0) + (26 \times 6.3) + (25 \times 8.0) + (23 \times 6.0) + (2$ 

= **6.58** 

#### **INTERNSHIP:**

There shall be six months (26 weeks) of Internship after successfully completing the VIII semester examination for candidates and have been declared to have passed the examination in all course. 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.

The Internship will 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 through Head of the program to be considered as having successfully completed the internship program. The student has to do the project in the internship as a part of the curriculum of BPT program and submit it for the fulfilment of the degree.

# **AWARD OF DEGREE:**

Every student of the program 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 & 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 BPT program.

## **AWARD OF CLASS:**

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

Distinction: CGPA ≥ 7.50 First class: CGPA of 6.50–7.49 Second Class: CGPA of 5.00 to 6.49 Pass Class: CGPA of 4.00 to 4.99

# **TRANSCRIPT:**

The transcript issued to the student at the time of leaving the University will contain a consolidated record of all the courses taken and credits earned.

## CLASSIFICATION OF COURSE IN UG DEGREE PROGRAM:

Sem.	Foundation courses	Core courses	Allied courses	Enhancement courses
I	<ul><li>Human Anatomy - I</li><li>Human Physiology - I</li><li>Electro Therapy- I</li></ul>			• English & Communication Skills*
II	<ul><li>Human Anatomy - II</li><li>Human Physiology-II</li><li>Exercise Therapy - I*</li></ul>		Biochemistry	• Computer Science
III	<ul><li>Exercise Therapy- II*</li><li>Biomechanics</li></ul>		Pathology &     Microbiology	<ul><li>Psychology</li><li>First Aid &amp; Emergency care</li></ul>
IV	• Electro Therapy- II*	Gen. Medicine     (including Gerontology     & Dermatology)	<ul> <li>Pharmacology,</li> <li>Community Medicine, Sociology &amp; Environmental. Sciences</li> </ul>	
V	Physical & Functional Diagnostic skills*	<ul> <li>Orthopaedics &amp;         Traumatology</li> <li>Neurology (including         Paediatrics &amp;         Psychiatry)</li> <li>Obstetrics and         Gynaecology</li> </ul>		
VI	Physiotherapeutic Skills	General Surgery     (including Plastic     Surgery)	Research     Methodology and     Biostatistics	• Bioengineering & Professional Ethics*
VII		<ul> <li>Physiotherapy in Musculoskeletal Sciences</li> <li>Physiotherapy in Community Based Rehabilitation.*</li> </ul>		Choice Based     Course     (Physiotherapy in     Paediatric     conditions/     Manual Therapy)
VIII		<ul> <li>Physiotherapy in Neurosciences*</li> <li>Physiotherapy in Cardio- Respiratory &amp; General Conditions</li> </ul>		• Choice Based Course (Sports Physiotherapy /Hand Rehabilitation)

<sup>\*</sup>The course curriculum of bioethics has been segregated as per the applicability.

# COURSE STRUCTURE FOR BACHELOR OF PHYSIOTHERAPY

# Calculation of course credit:-

16 Hours of Theory = 1 credit, 32 Hours of Practicals =1 credit, 48 Hours of Supervised Practical Training / Supervised Clinical Training = 1 Credit earned by the student during his/her course of study.

# **SEMESTER-I**

			Но	urs			Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ittern	l
Course	Course (Subject)													W	ritten	Total	Pra	ctical	Total
Code		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 101	Human Anatomy-I	64	64	48	176	4	4	3	11	4	2	1	7	10	40	50	10	40	50
PT- 102	Human Physiology-I	64	32	48	144	4	2	3	9	4	1	1	6	10	40	50	10	40	50
PT- 103	English and Communication Skills	32	0	48	80	2	0	3	5	2	0	1	3	10	40	50		-	-
PT- 104	Electrotherapy- I	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
	Total	240	192	240	672	15	12	15	42	15	6	5	26	50	200	250	40	160	200

# **SEMESTER-II**

			Но	urs		]	Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ittern	
Course Code	Course (Subject)														ritten	Total	Pra	ctical	Total
Couc		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	I A	Final exam	
PT- 201	Human Anatomy- II	48	64	48	160	3	4	3	10	3	2	1	6	10	40	50	10	40	50
PT- 202	Human Physiology-II	48	32	48	128	3	2	3	8	3	1	1	5	10	40	50	10	40	50
PT- 203	Biochemistry	48	-	-	48	3	-	-	3	3	-	-	3	10	40	50	-	-	-
PT- 204	Exercise Therapy- I	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 205	Computer Science	32	-	48	80	2	-	3	5	2	-	1	3	10	40	50	-	-	-
	Total	240	192	240	672	15	12	15	42	15	6	5	26	60	240	300	40	160	200

# **SEMESTER-III**

			Ho	urs			Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ttern	
Course Code	Course (Subject)													Wri	tten	Total	Pra	ctical	Total
Coue		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 301	Pathology & Microbiology	80			80	5			5	5			5	20	80	100			
PT- 302	Exercise Therapy-II	64	128	96	288	4	8	6	18	4	4	2	10	20	80	100	20	80	100
PT- 303	Psychology	48			48	3			3	3			3	10	40	50			
PT- 304	Biomechanics	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
PT- 305	First Aid & Emergency care	32	32	48	112	2	2	3	7	2	1	1	4	10	40	50			
	Total	288	192	192	672	18	12	12	42	18	6	4	28	80	320	400	20	80	100

# **SEMESTER-IV**

			Ho	urs			Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ittern	
Course	Course (Subject)														ritten	Total	Pra	ctical	Total
Code	Course (Subject)	Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 401	Pharmacology	48	1	-	48	3	-	-	3	3	-	1	3	10	40	50	-	-	-
PT- 402	Electrotherapy- II	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 403	Gen.Medicine (Including Gerontology & Dermatology)	80	32	96	208	5	2	6	13	5	1	2	8	20	80	100			
PT- 404	Community Medicine, Sociology & Environmental Sciences	80	32	48	160	5	2	3	10	5	1	1	7	20	80	100			
	Total	272	160	240	672	17	10	15	42	17	5	5	27	70	280	350	20	80	100

# **SEMESTER-V**

			Ho	urs		]	Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ttern	
Course	Course (Subject)														ritten	Total	Pra	ctical	Total
Code	Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	
PT- 501	Orthopaedic & Traumatology	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
502	Neurology (Including Paediatrics, Psychiatry)	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
503	Physical and Functional Diagnostics Skills	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
	Obstetrics and Gynaecology	32	32	48	112	2	2	3	7	2	1	1	4	10	40	50			
	Total	240	192	240	672	15	12	15	42	15	6	5	26	70	280	350	20	80	100

# **SEMESTER-VI**

			Ho	urs			Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ittern	
Course	Course (Subject)														ritten	Total			Total
Code	Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 601	General Surgery (Including Plastic Surgery)	64	32	96	192	4	2	6	12	4	1	2	7	20	80	100	-	-	-
PT- 602	Research Methodology and Biostatistics	48	-	-	48	3	-	ı	3	3	-	-	3	10	40	50	-	-	-
PT- 603	Physiotherapeutic Skills	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
PT- 604	Bio-engineering & Professional Ethics	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	-	-	-
	Total	224	160	288	672	14	10	18	42	14	5	6	25	60	240	300	20	80	100

# SEMESTER-VII (Course 701, 702 is compulsory. Students can choose any one course - 703A or 703B as a Choice Based Course)

	Hours				Hrs	/Wk			Cre	dits			Eva	luation Pattern					
Course	Course (Subject)														ritten	Total	Pra	ctical	Total
Code	Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA		Final exam
701	Physiotherapy in Musculoskeletal Sciences	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 702	Physiotherapy in Community Based Rehabilitation	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 703A	Choice Based - Physiotherapy in Paediatric Conditions	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	10	40	50
	or	32	32	90	100			0	10		1		,	10	40	30	10	40	30
PT- 703B	Choice Based – Physiotherapy in Manual Therapy																		
		160	224	288	672	10	14	18	42	10	7	6	23	50	200	250	50	200	250

# SEMESTER-VIII (Course 801, 802 is compulsory. Students can choose any one course - 803A or 803B as a Choice Based Course)

				Hours			Hrs	/Wk			Cre	dits		Evaluation Pattern					
Course	Course (Subject)														ritten	Total		ctical	
Code		Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
	Physiotherapy in Neurosciences	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 802	Physiotherapy in Cardiorespiratory and General Conditions	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
803A	Choice Based - Physiotherapy in Sports	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	10	40	50
	or					_	-	Ĭ		_	1	_	_						
803B	Choice Based - Physiotherapy in Hand Conditions																		
	Total	160	224	288	672	10	14	18	42	10	7	6	23	50	200	250	50	200	250

# **COMPULSORY ROTATORY INTERNSHIP (1092 Hrs across 26 WEEKS)**

					Hours			/Wk			Cı	edits			E	valuat	ion	Pattern	
Course	Course													W	ritten	Total	Pr	actical	Total
Code	(Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA		Final exam	IA	Final College exam	Final College exam
PT- 901	Compulsory Rotatory Internship	1	1	858	858	1	1	33	33	1	- 1	11	11	-	1	1	50	1	50
PT- 902	Internship Project	1	ı	234	234	1	-	9	9	1	1	3	3	-	-	1	20	30	50
	Total	0	0	1092	1092	0	0	42	42	0	0	14	14	0	0	0	70	30	100

# **COURSE CONTENT**

# SEMESTER - I

			Но	urs			Hrs	/Wk			Cre	dits			Eval	luatio	n Pa	attern	
Course	Course (Subject)															Total			Total
Code		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT		IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 101	Human Anatomy-I	64	64	48	176	4	4	3	11	4	2	1	7	10	40	50	10	40	50
PT- 102	Human Physiology-I	64	32	48	144	4	2	3	9	4	1	1	6	10	40	50	10	40	50
PT- 103	English and Communication Skills	32	0	48	80	2	0	3	5	2	0	1	3	10	40	50		-	-
PT- 104	Electrotherapy- I	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
	Total	240	192	240	672	15	12	15	42	15	6	5	26	50	200	250	40	160	200

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

Course Title :- Human Anatomy-I Course Code:- PT 101																	
	Course Credit for Human Anatomy –I																
Hours Hrs/Wk Credits Evaluation Pattern												n					
												W	ritten	Total	Pra	actica	l Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	Fin		
<i>C</i> 4	<i>-</i> 1	40	1776	4	exam exam exam exam												
64	64	48	176	4	4	3	11	Com-	2	1	7	10	40	50	10	40	50
Course outcomes												Mannad					
CO At the end of the course, the learner should be able to:												Mapped Program					
No. At the end of the course, the learner should be able to:													Outcomes				
Describe the basic terminologies of esteelegy, histology, general ambryology and													PO1				
101.		other b					_			5y, ms	tolog	y, 50	norui ci	nor y ore	gy ai	ıı	101
					_				_	muscl	e. boi	nes &	joints	and ana	lvze		PO1
101.	,	moven	•					•							.1) 20		101
101													g. Traun	na, defo	rmiti	es	PO1
101.	•											_	, vertebra				
101.		Localiz															PO1
101	_	Identif	y and	descri	be v	arious	s con	npone	nts a	nd cor	ntents	of th	e Thora	ıx- with	l		PO1
101.													ary syst				
101.	.6	Demor	strate	the m	ove	nents	of v	arious	join	ts.							PO1
Identify and describe the source, course of major arterial, venous and lymphatic													PO1				
101.7 system, with special emphasis to upper extremities, thorax Head, Neck, Face & its												its					
		vertebr															
101	<b>X</b>	_	-						-			pecia	l empha	ases to			PO1
extremities and Head, Neck, Face & its vertebrae.																	

opic Course Content Hours o	f
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Sr.No.			/learning
			Practical
1	General Introduction	6	-
	Must Know	2	-
	• Histology-Cell, tissues of the body, epithelium, connective tissue,		
	cartilage, bone, lymph, muscle, nerve etc.		
	Osteology-Formation, function, growth and repair of bones	2	-
	Nice to Know	2	-
	• General Embryology-Ovum, spermatozoa, fertilization, differentiation,		
	development of various systems and foetal circulation		
2	Systems of Human body (a brief Outline)	20	12
	Must Know		
	• Cardiovascular System - Arteries, capillaries, veins, heart, lymphatic	4	2
	system		
	• Respiratory System - Anatomy of upper and lower respiratory tract	4	2
	including nose, larynx, trachea, bronchi, pleura and lungs		
	• Axial skeleton	3	2
	Sensory Organs	3	2
	Desirable to Know		
	• Urogenital System -Anatomy of Urinary system, male and female	4	2
	reproductive system (special emphasis to female system)		
	Nice to Know		
	Digestive System –Anatomy of the gastro-intestinal tract	2	2
3	UPPER EXTREMITY- Must Know	15	25
	Osteology	5	15
	Outline the anatomical features, attachments, ossification and side		-
	determination of the bones of U/L: 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		
	Muscles of hand: origin, insertion, nerve supply and action		
	• Joints of upper limb: shoulder girdle, Shoulder joint, Elbow, Wrist and		
	joints of hand		
	• Nerves of upper Extremity and their position course, relations &		
	distribution		
	• Blood vessels of upper Extremity and their position course, relations,		
	distribution and main branches. Lymphatic drainage of upper		
	Extremity		
	Surface & Bony landmarks of upper extremity		
	• Demonstration of muscles and movements of Upper extremity joints.		
	Palpation of peripheral arteries & nerves of upper extremity		
	Applied anatomy of all structures of Upper Extremity		
	Radiographic appearance of Musculoskeletal system of Upper		
	Extremity		
4	THORAX- Must Know	8	5
	• Ribs: Parts & main features of typical rib & define true, false and	3	2
	floating ribs	_	=
	• Sternum: parts and anatomical features		
	Thoracic vertebrae: parts and anatomical features		
	- Thoracle vertebrae, parts and anatonnear reatures		

<ul> <li>Intercostal muscles &amp; Diaphragm: Origin, insertion, nerve supply &amp; action.</li> <li>Layers of anterior Abdominal wall and mention its origin, insertion, nerve supply and action of these muscles.</li> <li>Joints of Thorax- Identify &amp; explain in detail various joints:         <ul> <li>Manubrio-sternal joint, Costo-Chondral joints, Chondro-sternal joints</li> <li>Costo-vertebral joints, Costo-transverse joints</li> <li>Intervertebral joints</li> </ul> </li> <li>Movements of vertebral column &amp; Rib cage.</li> <li>Intercostal space and its content</li> </ul>	5	3
<ul> <li>Diaphragm-structures passing through it.</li> <li>Mention the course and branches of nerves, blood vessels and lymphatic drainage of thorax.</li> <li>Surface and applied Anatomy, radiographical appearance of structures of thorax</li> </ul>		
5 HEAD, NECK AND FACE (HNF)	15	22
(special emphasis on myology and osteology)  Must Know	8	15
Muscles & Vessels of neck	0	13
• Facial muscles & orbit		
• Temporo-Mandibular (TM) joint, Cervical vertebrae & Skull.		
Movement of TM joint & Cervical spine		
• Cranial nerves		
• Surface and applied Anatomy, radiographical appearance Head, Neck		
and Face  Desirable to know	5	5
• Triangles of neck	3	3
• Larynx, Pharynx		
• Endocrine glands		
Nice to Know	2	2
Salivary glands		
• Lateral wall of nose		

Sr.No.	Title
1	B.D. Chaurasia's, 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 by regions -Lippincott.
4	Mcminn's Last's Anatomy-Regional and applied, Churchill Livingstone.
5	Cunningham Manual of Practical Anatomy Vol. I, II, III, Churchill Livingstone.

# **Reference Books**

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

#### SCHEME OF EXAMINATION

Evaluation Pattern										
7	Written	Total	Pr	actical	Total					
IA	Final exam	Final exam	IA	Final exam	Final exam					
10	40	50	10	40	50					

#### **Periodical Examination:**

- Written Examination: -20 MCQs for 10 marks, 20 minutes
- Practical Examination: 10 marks

## Preliminary Examination / University (Final) Examination

#### • Written Examination (40 marks)

Sec A	Q. 1:- MCQs (10 Minutes)	10x1=10 marks
Sec B	Q.2:- Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	Q.3:-Short answer questions - Answer any 2 out of 3	2x5=10 marks
	Q.4:- Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

#### • Practical Examination (40 marks)

Sr.No.		Marks
1	Spots (2 Marks each)	10x2=20 marks
	• 3 Spots based on Special senses/Cardiovascular /Respiratory system	
	• 2 Spots based on Soft part of Thorax/neck	
	• 5 Spots based on upper extremity	
2.	Viva	15 marks
	Soft Parts & Osteology	
3	Journal	5 Marks

# SUPERVISED PRACTICAL TRAINING:

## 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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal 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 Converted to	o 10 marks (50/5=10)

Course Title :- Human Physiology-I Course Code:- PT 102																	
Course Credit for Human Physiology-I																	
	H	ours			Hrs	/Wk			Cre	edits			Ev	<u>aluatio</u>	n Pat	ttern	
												W	ritten	Total	Total Pract		Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	ΙA	Final	Final	IA	Final	Final
		10											exam	exam		exam	exam
64	32	48	144	4	2	3	9	4	1	<u> </u>	6	10	40	50	10	40	50
								Cou	rse O	utcom	es						
C N		At the end of the course, the learner should be able to:								Pro	Mapped Program Outcome						
102	2.1	Desci	ribe ce	ell stru	ıctur	e and	func	ction.								P	O1
102	2.2	Expla	in the	struc	ture	and f	uncti	ion of	musc	les						P	O1
102	2.3	•			•	_				ributio stasis]		each	organ sy	stem ir	1	P	O1
102	2.4												ascular process		atory	P	O1
102	2.5		onstrat atolog		skill	s of r	ecog	nizing	norn	nal car	diogra	am, E	CG, sp	irometr	y,	P	O1

Topic	Course Content		urs of
Sr.No			g/learning
			<b>Practical</b>
1	General Physiology	4	-
	Must know		
	Cells & its organelles – structure & functions		
	Homeostasis, biofeedback mechanisms		
	Transport across cell membrane		
	Outline of membrane potential & action potential		
2	Nerve muscle	7	-
	Must know	5	-
	Muscle- classification, structure, sarcomere & its properties		
	Myoneural junction & transmission		
	Molecular basis of muscle contraction		
	Motor unit, EMG		
	Structure, Properties & Classification of nerves		
	Propagation of nerve impulse.		
	Degeneration and regeneration of nerve		
	Desirable to know	2	
	Applied aspects – Myasthenia gravis, Rigor mortis		
	Reaction of degeneration		
	Muscle disorders		
3	Haematology	9	-
	Must know	5	-
	Composition and functions of blood		
	• Red blood cell – morphology, formation, normal count, functions,		
	physiological and pathological variation.		
	• White blood cell- morphology, classification, properties, functions,		
	physiological & pathological variation		
	Haemoglobin – basic chemistry, fate and functions.		
	Immunity- definition, classification, concept of antigen & antibody		

	TT		
	Haemostasis – steps, role of platelets  Plantage of the step		
	Blood groups – A, B,O,AB and Rh system		
	Anaemia, ESR & PCV		
	Desirable to know	3	-
	Plasma proteins		
	Anticoagulants		
	Blood transfusion		
	Nice to know	1	-
	Haemophilia		
	Thrombocytopenia		
4	Cardiovascular system	20	-
	Must know	16	
	General organization and properties of cardiac muscle		
	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 output and regulation		
	Blood pressure- normal values, measurement, determinants, short		
	term and long term regulation		
	Pressure and volume changes during cardiac cycle     Pressure Messales Cardiac Conduct		
	Regional circulation- Coronary, Muscular, Cerebral		
	• Functions of Lymph	2	
	Desirable to know	3	
	Patho-physiology of circulatory shock and oedema		
	Hypertension, hypotension		
	Nice to know	1	
	Hemodynamics		
5	Respiratory system	16	-
	Must know	12	-
	General organization of respiratory system		
	• Mechanics of respiration- inspiratory & expiratory muscles,		
	intrapleural pressure, lung & thoracic compliance, surfactant, lung		
	volumes & capacities		
	Diffusion of gases		
	Transport of respiratory gases		
	Regulation of respiration		
	• Regulation of respiration		
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> </ul>		
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> </ul>		
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> </ul>		
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> </ul>		
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> </ul>	2	
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> </ul> Desirable to know	2	
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> </ul>	2 2	
	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> </ul>		
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> </ul>	2	
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> <li>Digestive System</li> </ul>	2 8	-
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> <li>Digestive System</li> <li>Must know</li> </ul>	2	- -
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> <li>Digestive System</li> <li>Must know</li> <li>General organization</li> </ul>	2 8	- -
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> <li>Digestive System</li> <li>Must know</li> <li>General organization</li> <li>Mastication and deglutition</li> </ul>	2 8	-
6	<ul> <li>Outline of hypoxia- types &amp; physiological changes</li> <li>Acclimatization to high altitude.</li> <li>Dead space, Ventilation/ perfusion ratio</li> <li>Maximum breathing capacity &amp; breathing reserve</li> <li>Pulmonary function tests.</li> <li>Desirable to know</li> <li>Artificial respiration</li> <li>Nice to know</li> <li>Asphyxia, cyanosis (types and physiological changes)</li> <li>Digestive System</li> <li>Must know</li> <li>General organization</li> </ul>	2 8	1

	regulation and functions.		
	<ul> <li>Outline of gastric emptying and peristalsis</li> </ul>		
	<ul> <li>Pancreatic secretion - composition, regulation &amp; functions</li> </ul>		
	• Liver and Gall bladder – composition and functions of bile		
	<ul> <li>Movements and functions of small and large intestine</li> </ul>		
	• Defecation reflex		
	Nice to know	2	-
	• Jaundice		
	Peptic ulcer		
	Constipation, diarrhoea		
7	HUMAN PHYSIOLOGY PRACTICAL		32
	Haematology - Hb, RBC, WBC ,Blood groups, BT & CT	-	10
	Properties of muscles	-	
	• Skeletal muscle. Skeletal Muscle Contraction, effect of	-	5
	temperature, velocity of nerve conduction, fatigue, tetanus, All or		
	none law & effect of load.		
	• Cardiac muscle. Normal cardiogram, effect of speed, temperature,	-	5
	Stannius ligature, All or none law & incomplete tetanus, Nervous		
	regulation of heart, vagal escape. Effect of drugs (adrenaline &		
	acetylcholine)		
	Other L. Ds	-	12
	<ul> <li>Physical fitness- Cardiopulmonary efficiency tests</li> </ul>		
	Stethography, Spirometry		
	• Ergography, Perimetry, ECG		
8	SPT		48

	70125
Sr.No.	Title
1	Text book of Medical Physiology-By Guyton
2	Text book of physiology– Prof. A. K Jain.
3	Concise Medical Physiology – Sujit K. Choudhari

# Reference Books

Sr.No.	Title									
1	Samson & Wright's Applied physiology.									
2	Principles of Anatomy & Physiology – Tortora.									
3	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 MCQs for 10 marks, 20 minutes.
- Practical Examination: 10 marks

# **Preliminary Examination / University (Final) Examination**

# • Written Examination (40 marks)

Sec A	Q.1:- MCQs (10 minutes)	10x1=10 marks
Sec B	Q.2:- Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3:- Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4:- Long Answer Questions (Answer any 1 out of 2)	1x10=10 marks

## • Practical Examination (40 marks)

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

# SUPERVISED PRACTICAL TRAINING:

## **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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal 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 :- English and Communication Skills Course Code:- PT 103																
	Course Credit for English and Communication Skills																
	H	ours			Hrs	Wk			Cı	redits		Evaluation Pattern					
												W	ritten	Total	Pra	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Final	Final
													exam	exam	17.1	exam	exam
32	0	48	80	2	0	3	5	2	0	1	3	10	40	50		-	-
								Cou	rse (	Outcom	ies						
C	O															Mar	ped
		At the end of the course, the learner should be able to:												Program			
IN	0.															Outc	omes
103	3.1	Deve	lop go	ood vo	ocabi	ılary	and	writin	g ski	lls.						PO3, PO6	
100		T.CC	. 1			,	*.1	, 1		,		1	1.1'			PO3, 1	PO5,
103	5.2	Effec	tively	comi	nunı	cate	with	teache	ers, p	atients,	peers	and	public.			PO6,	PO7
102	, ,	A ala:		. 4		1	المسما	سمامما	. a la i .a	~1~:11~						PO3, 1	PO5,
103	0.3	Acmi	eve ei	trepre	meu	smp	ana	ieader	smp	SKIIIS						PO6, 1	PO9
102	) 1	Desc	ribe tl	ne imp	orta	nce o	f crit	ical th	ninki	ng and	teamv	vork,	Entrepi	reneursl	hip,	PO5, 1	PO6,
103	0.4			al Eth								ĺ	•		• 1	PO7, 1	

Topic	Course Content		ars of
Sr.No.		teaching	<mark>/learning</mark>
		Theory	<b>Practical</b>
ENGLI	SH	20	
1	Grammar and Vocabulary	12	-
	Must Know		
	Reading Comprehension	7	
	• Verb Forms, Tenses		
	• Right Words (Synonyms, Antonyms, Homonyms and One-Word		
	Substitutes)		
	• Detection of Errors		
	Reported Speech		
	<ul> <li>Precise writing, Essay</li> </ul>		
	Nice to know		
	<ul> <li>Phrases and Idioms</li> </ul>	5	
	• Transformation	3	
	• Punctuation		
2	Composition	8	-
	Must Know		
	• Resume Writing		
	• Letter writing and e-Correspondence		
	• Note-Making		
	• Report Writing		
	• Expansion of Proverbs and Ideas		
	<ul> <li>Description of Pictures.</li> </ul>		
COMM	UNICATION SKILLS	12	
3	Must Know	2	-
	• Ability to present ideas clearly, effectively and confidently, in both		
	oral and written form.		
	• Ability to practice active listening skills & provide feedback.		
	Ability to present clearly with confidence and appropriate to the		
	level of the listener.		
	Ability to use technology in presentation		

	A190.		
	Ability to negotiate and reach an agreement		
	Ability to communicate with others from different cultures		
	Ability to develop interpersonal communication skills		
	Ability to use non-verbal skills.      Ability to use non-verbal skills.		
4	Clinical application, Role Play	4	
4	Critical Thinking and problem solving skills	3	-
	Desirable to know	3	
	Ability to identify and analyse problems in complex and vague     dituations as well as to make instiffed evaluations.		
	situations as well as to make justified evaluations.  • Ability to develop and improve thinking skills such as to explain,		
	analyse and evaluate discussions.		
	<ul> <li>Ability to find ideas and alternative solutions.</li> </ul>		
	<ul> <li>Ability to find facus and alternative solutions.</li> <li>Ability to think out of the box.</li> </ul>		
	<ul> <li>Ability to make decisions based on concrete evidence.</li> </ul>		
	<ul> <li>Clinical application, Role Play</li> </ul>		
	Team work		
	• Ability to build to good relation interacts with others and work		
	effectively with them to achieve the same objectives.		
	Ability to understand and interchange roles between that of a team		
	leader and a team member.		
	Ability to contribute towards the planning and coordination of the		
	team's efforts is responsible for the group's decisions.		
	Nice to know	1	
	Ability to persevere as well as to fully concentrate on given task.	1	
	• Ability to understand and to fit in with the culture of the		
	community and new work environment.		
	• Ability to recognize and respect the attitude, behaviour and beliefs		
	of others.		
_	Clinical application, Role Play		
5	Lifelong learning and information management	1	
	Desirable to Know		
	Ability to search and manage relevant information from different		
	Sources.		
	Ability to accept new ideas & capability for autonomous learning.      Ability to develop a coming wind & thirst for Imperiod as		
	Ability to develop a curious mind & thirst for knowledge.      Clinical application, Pola Play.		
	Clinical application. Role Play	1	
6	Entrepreneurial skills Nice to know	1	
	<ul> <li>The ability to identify business opportunities</li> </ul>		
	<ul> <li>The ability to identify business opportunities</li> <li>The ability to outline business frameworks,</li> </ul>		
	<ul> <li>The ability to build explores and seizes business and work.</li> </ul>		
	<ul> <li>The ability to build explores and seizes business and work.</li> <li>The ability to work independently.</li> </ul>		
	<ul> <li>Clinical application, Role Play</li> </ul>		
7	Professional ethics and morals	1	
•	Must Know	-	
	<ul> <li>Ability to recognize the effects on the economy, environmental and</li> </ul>		
	socio-culture in professional practice.		
	Ability to analyse & 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		

8	Leadership skills	1	
	Must Know		
	Ability to lead a project.		
	Ability to understand and interchange roles between that of a team		
	leader and a team member.		
	Clinical application. Role Play		
	Ability to supervise team members.		
9	Introduction to ethics & bioethics	2	
	Must Know		
	Meaning, nature of ethics, ethical statements		
	Meaning of bioethics		
	Health & disease as values and facts		
	Principles of bioethics		
	Medical ethics- goals, committees		
10	SPT		48

#### **Textbooks**

Sr.No.	Title
1	Sherfield, R., Montgomery, R.J.& Moody, P.G. (2011). Developing Soft Skills.
	3 <sup>rd</sup> Edi. Pearson Education, New Delhi.
2	Kumar, S.S. (2010). Communication Skills and Soft Skills. Pearson Education, New Delhi
3	Jagdish Chander, 'Creative English', Oxford University Press, New Delhi.

## **SCHEME OF EXAMINATION**

Written		Total
IA	Final exam	Final exam
10	40	50

# **Periodical Examination:**

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

## Preliminary Examination / University (Final) Examination

# • Written Examination (40 marks)

Sec A	Q.1:- MCQs (5 English+5 Communication skills) (10 Minutes)	10x1=10
Sec B	English	5x3=15
	Q.2. Very Short answer questions (Answer any 5 out of 6)	
Sec C	Communication skills	5x3=15
	Q.3 Very Short answer questions (Answer any 5 out of 6)	

# **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: -**

 $\begin{array}{ll} \text{Periodical exam} & = 10 \text{ marks} \\ \text{Prelim exam} & = 40 \text{ marks} \\ \text{Total} & = 50 \text{ marks} \end{array}$ 

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

#### **Course Title :- ELECTROTHERAPY- I Course Code:- PT 104 Course Credit for ELECTROTHERAPY-I** Hrs/Wk Credits **Evaluation Pattern** Hours Written Total Practical Total Th Pr SPT Tot Pr SPT Tot SPT Lec Lec Pr Tot Final Final Final Final ΙA exam exam exam exam 80 96 96 272 5 20 20 6 6 17 5 3 2 10 80 100 80 100 Course Outcomes

Course Outcomes		
CO No.	At the end of the course, the learner should be able to:	Mapped Program Outcomes
104.1	Understand basic principles of physics, Laws of Electricity, Electro-magnetic spectrum and ultra –sound	PO1
104.2	Describe effects electro- magnetic fields at cellular level & risk factors on prolonged exposure	PO1
104.3	Describe working of common electrical components such as transistors, valves, capacitors, transformers and instruments used to test /calibrate these components	PO1
104.4	Describe various superficial thermal agents, their physiological and therapeutic effects, merits / demerits; and acquire the skill of application.	PO1

Acquire knowledge of high frequency modalities, their basic physics, working,

physiological and therapeutic effects

Topic Sr.No.	Course Content	Hours of teaching/learning	
		Theory	Practical
1	BIOELECTRONICS	29	16
	Must Know		
	Electron theory, static and current electricity	5	4
	Conductors, Insulators, Potential difference, Resistance & Intensity		
	Ohm's Law – Its application to AC & DC currents		
	Rectifying Devices – Thermionic Valves, Semiconductors, Transistors	5	4
	Amplifiers, Transducers, Oscillator circuits		
	Capacitance, condensers in DC and AC Circuits		
	Display devices & indicators – analogue & digital		
	Effects of Current Electricity	6	4
	Chemical effects - ions and electrolytes, ionization, Production of a		
	E.M.F. by chemical actions		
	Magnetic effects, Molecular theory of Magnetism, Magnetic fields,		
	Electromagnetic Induction, Eddy currents,		
	Milli-ammeter and Voltmeter, Transformers & Choke Coil		
	Thermal Effects – Joule's Law and Heat production	5	4
	Electromagnetic spectrum – biophysical application		
	• Laws of Transmission-Reflection, Refraction, Absorption, Attenuation		
	Desirable to know	5	
	• Structure and properties of matter – solids, liquids and gases		
	Adhesion, surface tension, viscosity, density and elasticity		-
	Physics of sound including characteristics and propagation		
	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		

104.5

PO1

2	ELECTRIC SUPPLY	5	
	Desirable to know		-
	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 & ACTINO THERAPY	23	32
	Must Know		
	• Physiological responses to heat gain/ loss on various tissues of body	3	8
	Physical principles of Electro-magnetic radiations	3	
	Therapeutic effects of heat and cold	3	
	Home remedies of heat and cold	3	
	Therapeutic cold (Cryotherapy):	4	8
	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,		
	indications and contraindications	_	
	Infrared rays:	2	8
	• Wavelength, frequency, types & sources of IRR generation, techniques		
	of irradiation, physiological & therapeutic effects, indications,		
	contraindications, precautions.		
4	Operational skills of equipment & patient preparation	4.5	25
4	HIGH FREQUENCY CURRENTS AND WAVES	15	35
	High frequency currents (S.W.D.)	8	17
	Production, biophysical effects, types		
	• Therapeutic effects, techniques of application		
	• Indications, contraindications, precautions		
	Operational skills and patient preparation		
	High frequency sound waves (Ultrasound)	7	18
	Physics of sound including characteristics and propogation		
	Production, biophysical effects, types		
	• Therapeutic effects, techniques of application		
	• Indications, contraindications, precautions		
	Operational skills and patient preparation		
5	TRACTION	5	13
	Principles of traction, classification, types		
	Physiological & therapeutic effects		
	• Indications, contraindications		
	Techniques of application		
	Operational skills & precautions		
6	Nice to know	3	
	Open equipment demonstration of various equipments		
	Calibration techniques of equipments		
7	SPT		96

Sr.No.	Title	
1	Clayton's Electro therapy Theory and Practive- 9 <sup>th</sup> & 10 <sup>th</sup> ed	

2	Electro therapy explained Principles and practice -by Low & Reed
3	Principles and Practice of Electro Therapy –by Joseph Kahn

#### Reference Books

	110101 01100 20012	
Sr.No.	Title	
1	Clinical Electro Therapy-by Nelson & Currier	
2	Electrotherapy – Evidence Based Practice – Sheila Kitchen	

#### SCHEME OF EXAMINATION

I	Written	Total	Pr	actical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

#### **Periodical Examination:**

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

## Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

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

#### • Practical Examination (80 marks)

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

# **SUPERVISED PRACTICAL TRAINING:**

#### 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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal 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)

# SEMESTER - II

		Hours			Hrs/Wk			Credits				Evaluation Pattern							
Course Code	Course (Subject)			G 75 FF		_		C D T								Total			Total
		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 201	Human Anatomy- II	48	64	48	160	3	4	3	10	3	2	1	6	10	40	50	10	40	50
PT- 202	Human Physiology-II	48	32	48	128	3	2	3	8	3	1	1	5	10	40	50	10	40	50
PT- 203	Biochemistry	48	1	-	48	3	-	1	3	3	-	-	3	10	40	50	-	-	-
PT- 204	Exercise Therapy- I	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 205	Computer Science	32	-	48	80	2	-	3	5	2	-	1	3	10	40	50	-	-	-
	Total	240	192	240	672	15	12	15	42	15	6	5	26	60	240	300	40	160	200

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

						C	ourse	e Title	e :- H		ı Ana	tom	v-II					
	Course Title :- Human Anatomy-II Course Code:- PT 201																	
						Cou	ırse (	Credi	t for	Hum	an A	nato	my II					
	H	ours			Hrs	Wk			Cre	edits			F	<mark>Evaluat</mark> i	on P	<mark>atte</mark> i	rn	
												W	ritten	Total	Pra	actical		otal
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Fina		nal
48	64	48	160	3	4	3	10	3	2	1	6	10	exam 40	exam 50	10	exar 40		am 50
48	04	48	100	3	4	3	10			Outco	Ü	10	40	30	10	40	3	·U
								Col	urse	Outco	omes						N. //	- 1
CO	)																Mapp	
No				At the	e end	d of t	he co	ourse	, the	learn	er sh	ould	be able	e to:			Progr	am
110	<b>'</b>																Outcor	mes
201	1	Descr	ibe ar	atom	ical a	aspec	ts of	Musc	eles, l	Bones,	, Join	ts, m	ajor art	eries, V	eins		PO	1
201	. 1	and L	ymph	atics (	espec	cially	of L	ower	extre	mities	and	Pelv	is					
201	.2	Analy	ze mo	oveme	ents a	and s	urfac	e lanc	lmarl	ks of I	Lower	exti	emity.				PO1, F	202
201	.3	Under	stand	comi	non	clinio	cal co	onditio	ons a	nd cor	relate	e thei	n on an	atomica	ıl bas	sis.	PO1, F	202
201	4	Identi	fy and	d desc	ribe	vario	ous pa	arts of	f Cen	tral N	ervou	ıs Sy	stem an	d Corre	late		PO1, F	202
201.4 Identify and describe various parts of Central Nervous System and Correlate clinical lesions on anatomical basis.						,												
201	Describe origin and course of different Spinal Tracts, and identify the								PO1, F	O2								
201	components of various Trans- sections.																	
201	.6	Descr															PO	1

Topic Sr.No.	Course Content	Hours of teaching/learning			
		Theory	<b>Practical</b>		
1	SECTION I- NEUROANATOMY	18	15		
	Must Know	15			
	Peripheral Nerves				
	Neuromuscular Junction				
	Sensory End Organs				
	<ul> <li>Spinal Cord Segments &amp; Areas</li> </ul>				
	• Brainstem				
	• Cerebellum				

	Y 0 1 111 11 0 0 1 111 11		
	Inferior colliculi & Superior colliculi		
	Diencephalon		
	Hypothalamus ,Thalamus		
	Corpus striatum		
	Cerebral hemispheres		
	Internal Capsule		
	Thalamo-cortical radiations		
	<ul> <li>Pyramidal systems &amp; Extra-pyramidal systems</li> </ul>		
	Sympathetic & Para-sympathetic system		
	Ventricles system		
	Meninges		
	Blood supply of the brain		
	Cranial nerves		
	Desirable to know	3	
	Epithalamus		
	Rhinencephalon		
	Visual radiation		
	Auditory radiation		
2	SECTION II - TRUNK & ABDOMEN	5	6
_	Must Know	3	
	Osteology	C	
	• Vertebral columns: Identify parts of typical vertebra and state the		
	main features, attachments and ossification.		
	Intervertebral disc and mention its part.		
	Myology		
	Fascia and muscles of back		
	• Fascia and muscles of post Abdominal Wall: origin, insertion, nerve		
	supply and action.		
	• Fascia and muscles connecting U/L with vertebral column: origin,		
	insertion, nerve supply, action.		
	<ul> <li>Applied Anatomy of structures of trunk &amp; abdomen.</li> </ul>		
	Desirable to know	2	
	<ul> <li>Mention the course and branches of nerves, blood vessels and also</li> </ul>	_	
	lymphatic drainage of trunk & abdomen.		
	<ul> <li>Lumbar Plexus: Position, formation and branches.</li> </ul>		
	<ul> <li>Rectus sheath: formation and contents.</li> </ul>		
	Contents of vertebral canal and abdomen		
3	SECTION III - PELVIS	6	12
	Must Know	2	
	<ul> <li>Features of pubic symphysis and sacroiliac joints.</li> </ul>	-	
	<ul> <li>Muscles of pelvic floor, their attachments, action &amp; nerve supply</li> </ul>		
	<ul> <li>Nerve supply ,Lymphatic drainage and Blood vessels of the region</li> </ul>	2	
	with course, variations, distribution and main branches		
	Anatomy of uroginital and reproductive organs		
	Desirable to know	2	
	Sacral Plexus	_	
	<ul> <li>Main features of subdivision, boundaries, walls &amp; floor of pelvis.</li> </ul>		
	<ul> <li>Main reatures of studivision, boundaries, wans &amp; noof of pervis.</li> <li>Difference between male and female pelvis.</li> </ul>		
	<ul> <li>Urogenital diaphragm (outlines only)</li> </ul>		
	Applied anatomy of lumbar plexus		

4	SECTION IV- LOWER EXTREMITY	15	19
	Must Know	14	
	Osteology		
	<ul> <li>Hip bone, femur, Tibia, Fibula, Patella, and bones of the foot</li> </ul>		
	• Myology- Origin, Insertion, Nerve Supply, Action of the following:		
	➤ Fascia and muscles in anterior of thigh		
	➤ Fascia and muscles of medial side of thigh		
	➤ Fascia and muscles of posterior 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 extremity: Hip, joint, Knee joint, Ankle joint, joints of foot.		
	• Identify the nerves of Lower extremity and mention their position		
	course, relations and distribution		
	• Indicate the blood vessels of Lower extremity and mention their		
	position, course, relation, distribution and main branches		
	Explain femoral triangle and subsartorial canal		
	Poptileal fossa		
	<ul> <li>Applied Anatomy of structures of Lower extremity</li> </ul>		
	Nice to know	1	
	Lymphatic drainage of Lower extremity		
5	SECTION V- REGIONAL ANATOMY	4	12
	Must Know	2	
	• Surface Anatomy &Bony landmarks of lower extremity, and its		
	regional vertebrae		
	<ul> <li>Demonstration of muscles –Lower extremity, trunk</li> </ul>		
	• Demonstration of movements of joints of lower extremity and pelvis	2	
	Nice to know		
	<ul> <li>Palpation of peripheral arteries &amp; nerves</li> </ul>		
	• Radiographic appearance of Musculo-skeletal system of Lower		
	extremity, and its regional vertebrae		
6	SPT		48

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

# **Reference Books**

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

#### SCHEME OF EXAMINATION-

Written		Total	Pi	ractical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
10	40	50	10	40	50

#### **Periodical Examination:**

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

• Practical Examination: - 10 marks

## Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	Q.1:- MCQs (10 Minutes)	10x1=10 marks
Sec B	Q.2:- Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	Q.3:- Short answer questions - Answer any 2 out of 3	2x5=10 marks
	Q.4:- Long Answer Questions - Answer any 1 out of 2	1x10=10 marks

#### • Practical Examination (40 marks)

Sr.No.			Marks
1	Spots		10x2=20
	1.	2 Spots based on Urogenital/Reproductive/special senses	
	2.	3 Spots based on Soft part of Brain, Trunk & Abdominal	
	3.	5 Spots based on lower extremity	
2.	Viva		15
	1.	Soft Parts	
	2.	Osteology	
3	Journa	al	5

## **SUPERVISED PRACTICAL TRAINING:**

#### **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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal to the teacher before the examination.

## **Internal Assessment Marks: Theory / Practical:**

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

	Course Title :- Human Physiology-II Course Code:- PT 202																	
													**					
	Course Credit for Human Physiology II Hours Hrs/Wk Credits Evaluation Pattern																	
	H	ours			Hrs	/Wk			Cr	<u>edits</u>							1	
and a		GDT.	<b></b>	,		apm.	<b></b>		_	apæ	<b>m</b> .	W	ritten	Total	Pra	actical	Total	
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam	
48	32	48	128	3	2	3	8	3	1	1	5	10	40	50	10	40	50	
								Cour	se O	utcom	ies							
																Ma	pped	
C	_			At the	e end	d of t	he co	urse.	the l	earne	r shou	ıld b	e able t	:o:			gram	
N	0.							,									comes	
200	2 1	Diffe	rentia	te bet	weer	n Nor	mal r	hysio	logy	of a h	ealthy	indi	vidual a	ınd		P	O1	
202	2.1						•				•		lageing					
202	2.2	Desc	ribe R	tenal I	Phys	iology	y wit	h emp	hasis	on fu	nction	s of l	kidney,	micutai	ration	P	PO1	
202	2.2	reflex	x and	differe	ent ty	ypes o	of bla	ıdder.					•					
202	<b>)</b> 2	Desc	ribe e	ndocri	ine s	ystem	with	n respo	ect to	horm	ones 1	eleas	ing fro	m		P	O1	
202	2.3	hypo	thalan	nus an	d co	nditic	ons re	elated	to ho	ormone	e secre	etions	S.					
		Desc	ribe re	eprodu	ıctiv	e syst	em v	vith er	npha	sis on	functi	ional	anatom	y of		P	O1	
202	2.4	Describe reproductive system with emphasis on functional anatomy of reproductive system, puberty, spermatogenesis, menstrual cycle, pregnancy																
		and p	regna	ncy te	ests.			_					_					
200	2.5	Give	a deta	ailed c	lassi	ficati	on of	f spina	l tra	cts and	give	funct	ions of	ascendi	ing	PO1	, PO2	
202	and descending tracts and associated lesions of the tracts.																	
202	2.6												the spe	cial sen	ises.	PO1	, PO2	
200	2.7	Dem	onstra	te skil	ll of	basic	clini	cal ex	amin	ation,	with s	specia	al emph	asis to		P	O1,	
202	2.1											•	y syster			PO2	2, PO3	

Topic Sr.No.	Course Content	Hours of teaching/learning			
		Theory	Practical		
1	RENAL PHYSIOLOGY	4	-		
	Must know	3			
	General introduction, structure and functions of kidney				
	Formation of urine- filtration, re-absorption and secretion				
	Physiology of micturition				
	Neurogenic bladder				
	Desirable to know	1			
	Renal circulation				
	Plasma clearance test				
2	BODY TEMPERATURE REGULATION	4	-		
	Must know	3			
	Normal body temperature & its regulation				
	Skin-structure and functions				
	Desirable to know	1			
	Hypothermia, hyperthermia				
3	ENDOCRINE SYSTEM	8	-		
	Must know				
	Introduction - General organization of endocrine glands				
	Mechanism of hormone action				
	Releasing hormones from hypothalamus				
	Physiological actions, regulation & disorders of:				
	➤ Anterior & Posterior pituitary hormones				
	➤ Thyroid & Parathyroid Hormones				

	➤ Adrenal cortex & medulla		
	> Pancreatic hormones		
4	REPRODUCTIVE SYSTEM	6	_
	Must know	4	
	Functional anatomy of reproductive system		
	Puberty, changes in males and females, menarche, menopause		
	Spermatogenesis - stages and regulation, Physiological actions of		
	testosterone		
	Menstrual cycle & Ovarian cycles – phases & hormonal regulation,		
	ovulation		
	Physiology of pregnancy		
	• Lactation – initiation, maintenance and control,		
	Functions of placenta		
	Desirable to know	1	
	Pregnancy tests	•	
	Nice to know	1	
	• Sex chromosomes	1	
	Precocious and delayed puberty		
5	CENTRAL NERVOUS SYSTEM	20	_
3	Must know	16	
	General organization of nervous system	10	
	Receptors – definition, classification and functions		
	Synapse-definition, physiological anatomy & synaptic transmission		
	• Reflexes – classification, properties and functions		
	• Spinal cord- ascending & descending tract and functions		
	• Ascending tracts-sensations carried, pathways & functions		
	Descending tract - Origin, course & termination & functions		
	• Pain sensation – types of pain, pathways for pain, referred pain,		
	central analgesia system		
	Posture & equilibrium, Vestibular apparatus     The leaves & Hyprotheleaves its functions		
	• Thalamus & Hypothalamus – its functions		
	• Cerebellum – functions, effects of lesion		
	Basal ganglia – functions, effects of lesion, Parkinsonism		
	• Muscle tone		
	• Cerebral cortex – Gross anatomy, division & functions of each lobe		
	• 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	2	
	• Synthesis of neurotransmitters		
	• Limbic system and its functions	2	
	Nice to know	2	
	• 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		
	Light and dark adaptation	1	
	Photochemistry of vision		
	Ear		
	Must Know	1	
	• Functional anatomy of Ear, Cochlea		
	• Functions of middle & inner ear		
	Desirable to know	1	
	Auditory pathway		
	Audiometry		
	Nice to know	1	
	Physics of sound		
	• Theories of hearing		
	Taste & smell	1	
	Must Know		
	Functional anatomy		
	Factors affecting taste and smell		
7	Practical & Lecture demonstrations (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 mental 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– Prof. A. K Jain
3	Concise Medical Physiology – Sujit K. Choudhari
4	Essential of Medical Physiology- K. Sembuilingam

# **Reference Books**

Sr.No.	Title
1	Samson & Wright's Applied Physiology.
2	Textbook of Medical Physiology – Indu Khurana

# SCHEME OF EXAMINATION

	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 MCQs for 10 marks, 20 minutes.

• Practical Examination: - 10 marks

#### **Preliminary Examination / University (Final) Examination**

## Written Examination (40 marks)

Sec A	Q.1:- MCQs (10 Minutes)	10x1=10 marks
Sec B	Q.2:- Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3:- Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4:- Long Answer Questions (Answer any 1 out of 2)	1x10=10 marks

#### • Practical Examination (40 Marks)

Sr.No.	, ,	Marks
1	Clinical physiology	20
	<ul> <li>Clinical examination of respiratory system</li> </ul>	
	<ul> <li>Clinical examination of CVS</li> </ul>	
	<ul> <li>Cranial Nerve Examination</li> </ul>	
	Reflex Testing	
	<ul> <li>Motor and Sensory system Examination</li> </ul>	
2.	Viva- Based on Theory portion	15
3	Journal	5

## **SUPERVISED PRACTICAL TRAINING:**

#### Journal 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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal 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 Course code :- PT 203 Biochemistry																
	Course Credit for Biochemistry Hours Hrs/Wk Credits Evaluation Pattern																
	F	lours			Hrs/	VVK			Cr	earts	1	77.			1		Tr.4.1
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	W	ritten Final	Total Final	Pra	ctical Final	Total Final
111	Pľ	SFI	101	Lec	PI'	SFI	101	Lec	PT	SFI	101	IA	exam	exam	IA	exam	exam
48	_	_	48	3	_	_	3	3	_	_	3	10	40	50	_	- CAMIII	- CAAIII
70			-10		<u> </u>				reo (	Outcon		10	-10	30			
C( No			ı	At the	e end	of tl	ie co	urse,	the l	earnei	r shou	ıld b	e able t	o <b>:</b>		Pro	pped gram comes
203	.1	Descri	be str	ucture	es &	funct	ions	of cel	1.							F	PO1
203	.2								t con	nponen	ts of 1	food,	enzyme	es, and		F	PO1
factors affecting enzymatic action.  Define Basal Metabolic Rate & factors affecting the same, and deviation from normal especially in obesity.						F	PO1										
Explain sources and nutritional aspects of metabolism of carbohydrates, lipids, proteins & vitamins.							F	PO1									
203	5	Descri	be in	detail	bioc	hemi	cal a	spects	of n	nuscle	contra	action	1.			F	PO1

Describe the Normal and abnormal findings related to Clinical biochemistry,

with special reference to Liver & renal function tests, Lipid profile, fat metabolism, Carbohydrates, proteins, bone minerals, and electrolyte balance.

Topic	Course Content		irs of
Sr.No.			/learning
		Theory	<b>Practical</b>
1	CELL BIOLOGY	1	-
	Must Know		
	Membrane, structure & function		
	• Junction of intracellular organelle in brief (no structural details)		
2	CARBOHYDRATES	6	-
	Must Know		
	Metabolism-Digestion and absorption of carbohydrates,		
	Glycolysis- aerobic, anaerobic & its regulation		
	Kreb`s cycle &its regulation		
	Glycogenesis, Glycogenolysis& their regulation, role of liver in		
	muscle glycogen		
	Gluconeogenesis, significance of H.M.P. shunt		
	Hormonal regulation of blood sugar levels, important metabolic		
	disorders of glycogen, lactose intolerance, Diabetes mellitus.		
	Clinical biochemistry: Relevance of blood levels of glucose,		
	Glycosuria		
3	PROTEINS	6	-
	Must Know		
	Chemistry, definition, function, classification of Amino acids,		
	protein structure, effect of temperature on proteins- denaturation,		
	coagulation, isoelectric pH & its importance		
	Metabolism, digestion and absorption, Decarboxylation, De-aminatio		
	Transmethylation, transamination & their importance, Detoxification		
	ammonia including urea cycle.		
	• Clinical biochemistry: Relevance of blood levels of urea & uric acid,		
	Protein in urine		

203.6

PO1, PO2

4	LIPIDS	6	-
	Must Know	4	
	• Chemistry, definition, classification(including fatty acids with		
	e.g.), function		
	<ul> <li>Metabolism, digestion and absorption of lipids, β oxidation of</li> </ul>		
	saturated fatty acids &its energetics and 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: Triglyceride, cholesterol /		
	HDL/LDL/VLDL etc.		
	Nice to Know	2	
	<ul> <li>Phospholipid synthesis</li> </ul>		
	• Atherosclerosis		
	Liver function test & Renal function test		
5	NUCLEIC ACIDS	2	-
	Must Know		
	• D.N.A. /R.N.Adefinition, structure and function, types, Genetic	1	
	code		
	Desirable to Know		
	Catabolism of Purine –gout	1	
6	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		
	Desirable to Know	1	
	<ul> <li>Inhibition and types of inhibitors</li> </ul>		
	• Iso-enzymes		
7	VITAMINS	7	-
	Must Know	5	
	Water and fat soluble-definition, classification		
	Individual Vitamins-sources- function		
	RDA, deficiency and toxicity		
	Nice to Know	2	<u> </u>
	Vitamin - absorption and transport		
	Co-enzyme forms		
8	BIOLOGICAL OXIDATION	2	-
	Desirable to Know		
	Oxidative phosphorylation & ETC in brief		
9	MINERALS	4	-
	Must Know	3	
	• Phosphate, calcium and iron [in detail]		
	• Sources, absorption, transport, excretion, functions and deficiency		
	of Magnesium, Fluoride, Zinc, Copper, Selenium, Molybdenum,		
	Iodine		
	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	3	-
	Must Know	2	
	Importance of nutrition		
	Basal metabolic rate- definition, normal values, factors affecting		
	• 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		
	Desirable to Know		
	• Nitrogen balance & its significance, Protein energy malnutrition –	1	
	Kwashiorkor & Marasmus		

	Sr.no	Title
	1	Biochemistry-by-Dr. Satyanarayan
ĺ	2	Text book of Biochemistry for Medical students by-Dr Vasudevan/ Shrikumar

#### **Reference Books**

Sr.no	Title	
1	Review of Biochemistry [26 <sup>th</sup> edn] by Harper.	

#### **SCHEME OF EXAMINATION**

201121122 01 2111111111111111111			
Written		Total	
IA	Final exam	Final exam	
10	40	50	

## **Periodical Examination:**

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

# **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	Q.1:- MCQs (10 Minutes)	10x1=10 marks
Sec B	Q.2: - Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3: - Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4:- 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 10 marks (50/5=10)

#### **Course Title:- Exercise Therapy- I Course Code:- PT 204** Course Credit for Exercise therapy- I Hrs/Wk Credits **Evaluation Pattern** Hours Written Total Practical Total SPT Tot SPT Pr SPT Lec Pr Th Tot Lec Pr Tot Final Final Final Final exam exam exam exam 64 96 96 256 4 6 6 16 3 2 Q 20 20 80 100 80 100 **Course Outcomes** Mapped CO At the end of the course, the learner should be able to: Program No. Outcomes Define and describe various terms used in mechanics, Biomechanics and PO<sub>1</sub> 204.1 Recall the basic principles of Physics related to mechanics of movement /motion PO1, PO2 & understand the application of such principles to the simple equipment 204.2 designs, and their efficacy in therapeutic gymnasium and various starting positions used in therapeutics.

Demonstrate all active and passive movements for all joints according to

Describe types of Goniometer, merits and demerits of goniometry and

the Physiological effects, therapeutic use, merits /demerits of the same

joint positions, muscle work and use of each position.

demonstrate skills of measuring ROM with goniometer.

Demonstrate relaxation techniques on models.

fitness exercises used in Physical Training.

Demonstrate skills of using various tools of therapeutic gym.

Demonstrate starting positions and identify various derived positions, Describe

Demonstrate skill of various techniques of massage manipulations and describe

Demonstrate group and recreational activities, group and individual general

Demonstrate various yogasanas in different positions and describe their

204.3

204.4

204.5

204.6

204.7

204.8

204.9

anatomical planes.

204.10	Demonstrate various yogasanas in different positions and describe their physiological and psychosomatic effects.		PO1	
Topic Sr.No.	opic Course Content		Hours of teaching/learning	
			Practical	
1	Basic Biomechanics-	12	-	
	Must Know	10		
	• Axis/planes, Newton's law of motion, mechanics of Forces, levers,			
	pendulum, equilibrium, torque, 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	Must Know-Starting and derived positions	3	10	
3	Classification of Movements	5	20	
	Must Know-Active, Passive, Assisted, Resisted			
4	Goniometry	5	14	
	Must Know principles, techniques, uses, types			
5	Relaxation	4	5	
	Must Know	3		
	• Describe relaxation, its effects, uses & clinical application			
	• Indication & contraindication			

PO1

PO1, PO2

PO<sub>1</sub>

PO1.

PO3, PO5

PO<sub>1</sub> PO1, PO3,

PO5, PO6 PO1, PO3,

PO5, PO6

PO1

	Techniques of relaxation (local and general)		
	Nice to know	1	
	Muscle fatigue, muscle spasm and tension (mental & physical)		
	• Factors contributing to fatigue & tension		
6	Massage manipulations	5	10
	Must Know	4	
	• Principles, effects, merits & demerits, skills on extremities, scalp,		
	spine, abdomen, face		
	Physiological effects of soft tissue manipulation on the following		
	systems of the body: - Circulatory, Nervous, Musculoskeletal,		
	Excretory, Respiratory, Integumentary system and Metabolism		
	<ul> <li>Classify, define and describe: - effleurage, stroking, kneading,</li> </ul>		
	petrissage, deep friction, percussions, vibration and shaking etc.		
	• Effects, uses, indications and contraindications of the above		
	manipulation		
	Preparation of patient		
	Nice to know	1	
	History, various types of soft tissue manipulation techniques.		
7	Therapeutic Gymnasium-	4	5
	Must Know	2	3
	Various equipment in the gymnasium		
	• Operational skills, effects & uses of each equipment (shoulder wheel,		
	finger ladder, therapeutic balls, parallel bars etc.)		
	Desirable to know	2	2
	Setup of a gymnasium & its importance		
	Group therapy & recreational activities		
8	Suspension therapy-	4	4
	Must Know		
	• Definition, Type, Effects Uses, Parts and Operational skills		
	• Use of accessories such as pulleys, springs, Slings, Ropes		
9	Walking aids	2	2
	Must Know- Introduction, types, parts, measurement		
10	Must Know	4	10
	Yoga:		
	Principles & basic yogic postures & their physiological effects.		
	Yogic postures in: -		
	Supine Position:		
	• Shavasana, Halasana		
	Sarvangasana, Setubandhasana		
	Pavanmuktasana		
	Prone Position:		
	Dhanurasana, Salabhasana		
	Bhujangasana, Naukasana		
	Standing Position:		
	Padahastasana, Utkatasana		
	Sitting Position:		
	Padmasana, Siddhasana		
	Vajrasana, Gomukhasana		
	Paschimottanasan, Yogamudrasana		
	• ,Matsyndrasana, Ardha Matsyndrasana		

11	Hydrotherapy	6	4
	Must Know	5	
	• Physics, application, effects, merits and demerits, Basic principles of		
	fluid mechanics, as they relate to hydrotherapy		
	Physiological & therapeutic effects of hydrotherapy, including joint		
	mobility muscle Strengthening & wound care etc.		
	• Types of Hydrotherapy equipment, indications, contraindications,		
	operation skills & patient preparation		
	Nice to know	1	
	Room based hydrotherapy-Aquasiser etc.		
12	Desirable to know	8	12
	• Limb length (only lower limb - apparent, true, supratrochantric) and	4	4
	girth measurements		
	Assessment of Sensations, Reflex testing	2	4
	Assessment of Blood pressure, Pulse rate, Chest expansion and		
	Respiratory rate	2	4
13	Human dignity and human rights	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.		
14	SPT		96

	V-10						
Sr.No.	Title						
1	The Principles of Exercise Therapy – Dena Gardiner						
2	Therapeutic Exercise-Foundation and techniques Colby and Kisner						
3	Massage for Therapists- M. Hollis						
4	Suspension Therapy in Rehabilitation-Margaret Hollis						
5	Joint Structure and Funstion- Cynthia Norkins						
6	Hydrotherapy - Duffield						
7	Measurement of joint motion - Cynthia Norkins						

# Reference Books

Sr.No.	Title
1	Massage, manipulation & traction- Sydney Litch

# **SCHEME OF EXAMINATION**

Written		Total	Practi	cal	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

# **Periodical Examination:**

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

• Practical Examination: -20 marks (Spots/OSPE)

# Preliminary Examination / University (Final) Examination

# • Written Examination (80 marks)

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

# • Practical Examination (80 Marks)

Sr.No.		Marks
1.	Long Case: Massage/ Goniometry / Suspension therapy	35
2.	Short Case (any one of the following)	20
	Passive movements / Starting and Derived position/ Relaxation/Limb	
	Length-Girth measurement/Sensation/Reflex testing/ Yoga/group	
	exercise/Blood pressure/Pulse rate/ Respiratory Rate/ Chest Expansion	
3	<b>Spots:</b> Five spots based on therapeutics gymnasium.	5x4=20
	4 marks per spot, 5 minutes per spot.	
4	Journal	5

# SUPERVISED PRACTICAL TRAINING:

# 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 journal and should be submitted before the preliminary examination of the semester. It is the responsibility of the student to submit the journal to the teacher before the examination

# **Internal Assessment Marks: -Theory / Practical: -**

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

	Course Title :- Computer Science																
	Course Code:- PT 205																
	Course Credit for Computer Science																
	Hours Hrs/Wk Credits Evaluation Pattern																
												W	ritten	Total	Pr	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Final	Final
												IA	exam	exam	IA	exam	exam
32	-	48	80	2	-	3	5	2	-	1	3	10	40	50	-	-	-
	Course Outcomes																
	CO No. At the end of the course, the learner should be able to:  Mapped Program Outcomes																

CO No.	At the end of the course, the learner should be able to:	Mapped Program Outcomes
205.1	Effectively use Microsoft Word, Excel and Power point.	PO1, PO2
205.2	Compute basic statistics using excel.	PO1, PO2
205.3	Use Internet services for Research and Documentation.	PO1, PO4, PO9

Topic Sr.No.	Course Content	2200	Hours of teaching/learning		
2111101		Theory			
Must K	now		•		
1	Introduction of Computer application for Physiotherapy practice.	5	-		
2	Introduction of use of computers in teaching, learning, research.	6	-		
3	Windows, MS office, Word, Excel, Power Point.	6	-		
4	Internet, Literature search.	7	-		
Desirab	ole to know				
5	Introduction to Statistical Package	5	-		
Nice to	know				
6	Introduction to Hospital management information system software.	3	-		
7.	SPT	-	48		

Sr.No.	Title
1	Fundamental of Computer system

# **SCHEME OF EXAMINATION**

W <sub>1</sub>	Total	
IA	Final exam	
10	40	50

### **Periodical Examination:**

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

# **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	Q.1:- MCQs	10x1=10 marks
Sec B	Q.2:- Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
	Q.3:- Short answer questions - Answer any 2 out of 3	2x5=10 marks
	Q.4:- 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

# SEMESTER – III

			Hours		Hrs/Wk			Credits				Evaluation Pattern							
Course Code	Course (Subject)													Written		Total Practical		Total	
Couc		Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA		Final exam
PT- 301	Pathology & Microbiology	80	-		80	5			5	5			5	20	80	100			
PT- 302	Exercise Therapy-II	64	128	96	288	4	8	6	18	4	4	2	10	20	80	100	20	80	100
PT- 303	Psychology	48			48	3			3	3			3	10	40	50			
PT- 304	Biomechanics	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
PT- 305	First Aid & Emergency care	32	32	48	112	2	2	3	7	2	1	1	4	10	40	50			
	Total	288	192	192	672	18	12	12	42	18	6	4	28	80	320	400	20	80	100

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

	iiteiiia	i Assessn	IICIII															
	Course Title :- Pathology & Microbiology																	
	Course Code:- PT 301																	
	Course Credit for Pathology & Microbiology																	
	H	ours			Hrs/	Wk			Cr	edits				<b>Evaluation</b>				
Th	Pr	SP	Tot	Lec	D.,	SPT	Tot	Lec	Pr	SPT	Tot	W	ritten Final	Total	Pr	actical	Tot	
111	PI	Т	101	Lec	PI	3F I	101	Lec	PI	SPI	101	IA	exam	Final exam	IA	Fina exan		
80			80	5			5	5			5	20	80	100				
								Co	urse	Outc	omes							
																	Mappe	
CO	No.			At t	he e	nd of	the	cour	se, t	he lea	rner	shou	ld be a	ble to:			<b>Progra</b>	
		-				C	11 '			,				•			<b>Outcon</b>	<u>ies</u>
30	1.1			ne pro	cess	of c	ell ir	ıjury a	and o	change	es 1t 11	iduc	es in va	rious orga	ns and	1	PO1	
		tissue		00010	cio v	vith r	ofor	on oo t	0.00	tiolog	u olir	vice1	footuro	s, diagnosi	ic and		PO1	
30	1.2	progr		соріа	51a v	viui i	CICI	ciice i	o ac	noiog.	y, ciii	iicai	reature	s, diagnos	is allu		roi	
30	1.3			tionat	hoge	enesi	s of	comm	on i	nfecti	ons &	non	-infecti	ious diseas	es.		PO1	
	1.4													and its pr		is.	PO1	
							_							ems in dif			PO1, PO	)2
30	1.5													ificance (v				
		specia	al em	phasis	s to l	Neur	o- M					dio-	respirat	ory systen	ns).			
										e Con	tent							
Top							A	) Pat	thol	ogy							rs of	
Sr.N	No.																/learni	)
1	4	Tall ini													11	<mark>leory</mark> 4	<b>Praction</b>	car
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									28 W	ıııı sp	eciai	16161	ence u	o Physical	,			
	Chemical & ionizing radiation  • Reversible injury (degeneration), types, morphology, hydropic swelling,																	
	hyaline, fatty changes																	
Intra-cellular accumulation, hyaline mucin & pigment disorders																		
		Irreve									. 6							
						•		•	•		calcifi	catio	on, me	tastasis &	۲			
		dystro	phic -	- Path	oge	nesis	, mo	rphol	ogy									

2	Inflammation & Repair	3	_
	• Acute inflammation – features, causes, vascular & cellular events,	3	-
	transudates and exudates Morphologic variations, Inflammatory cells &		
	mediators		
	Chronic inflammation – causes, types, non- specific & granulomatous –		
	with examples		
	Healing Regeneration and Repair Wound healing by primary &		
	secondary intension factors influencing process, pathological aspects		
	<ul> <li>Healing at various sites including bones, nerve &amp; muscle</li> </ul>		
3	Immunopathology (basic concepts)	2	-
	• Immune system - organization, cells, antibodies, regulation of immune		
	responses		
	Hypersensitivity reactions		
	Secondary immunodeficiency conditions including HIV		
	Auto immune diseases ,Organ transplantation		
4	Circulatory disturbances	3	-
	Oedema – Patho-physiologic categories and morphology		
	Hyperemia and congestion—lung, liver, spleen		
	Thrombosis – Pathology		
	Embolism – types, clinical effects		
	• Infarction – types, common sites		
	Gangrenes – Classification, etio-pathogenesis and morphology		
	Shock – Pathogenesis, types, morphologic changes		
5	Growth Disturbance	3	-
	Atrophy, malformation, agenesis, dysplasia		
	• Neoplasia- classification, histogenesis, biologic behaviour, difference		
	between benign & malignant tumor		
	<ul> <li>Malignant neoplasms  – grades, stages, local &amp; distal spread</li> </ul>		
	Precancerous lesions & carcinoma in situ		
	• Tumor & host interactions-systemic effects, metastatic or direct spread of		
	tumors affecting bones, spinal cord, leading to paraplegia, etc.		
6	Cardiovascular system	3	-
	Atherosclerosis, Peripheral vascular diseases		
	• Ischemic heart diseases, myocardial infarction - Pathogenesis and		
	morphology		
	Hypertensive heart disease     Generative Heart Failure Perioantitie Conditions and the		
	Congestive Heart Failure, Pericarditis, Cardiomyopathy     Phonometric forces and Heart Disease. Infantises and condition and other		
	• Rheumatic fever and Heart Disease, Infective endocarditis and other types of endocarditis		
	Peripheral vascular diseases		
7	Respiratory system	3	_
'	COPD	3	-
	Pneumonia (lobar, broncho), viral		
	<ul> <li>Theumonia (lobal, blotheno), viral</li> <li>T.B Primary and secondary, morphologic types</li> </ul>		
	<ul> <li>Pleuritis - complications</li> </ul>		
	<ul> <li>Lung collapse – Atelectasis</li> </ul>		
8	Neuropathology	3	
	Reaction of nervous tissue to injury – infection & ischemia	-	
	Pyogenic meningitis, TBM, Viral		
	<ul> <li>Cerebrovascular disease, atherosclerosis, Thrombosis, embolism,</li> </ul>		
	aneurysm, hypoxia, infarction & hemorrhage.		
	Effects of Hypotension on CNS, Coma		
L	Zirita di Tijpotension di Ci ia, Colim		

2	organelles, Gram and Ziehl – Neelsen stain and its importance in lab diagnosis		
2			
	Classification of Micro-organisms & morphology of Bacteria, Bacterial cell, its	2	
1	General Microbiology - Introduction & scope	2	ractical
110.		Theory	learning Practical
No.	B) Microbiology		
Topic	Skin Biopsy.      Nierobiology	IIo	rs of
	Leprosy, Alopecia		
	Bacterial & fungal infections, cutaneous TB, Scleroderma, SLE,		
	• Skin - Melanin pigment disorders, Vitiligo, Tinea versicolor, Psoriasis,		
	Gastritis (Related to consumption of NSAID)		
	G.I. system - Gastric/duodenal ulcer, enteric fever, TB, enteritis,		
	infections (brief), urinary calculi		
	<ul> <li>Medical Genetics – (in Brief)</li> <li>Urinary dysfunction –in paralytic bladder, common urinary tract</li> </ul>		
15	Nice to Know: -  • Medical Genetics – (In Brief)	2	
15	Growth Disturbance - Chemical, Occupational, heredity, viral  Nice to Know:	2	
	Deficiency disorders – Vitamins A, B, C, D.     Crowth Disturbance, Chamical Computational bandity viral		
	Hypertension)		
	Hepatic diseases -Cirrhosis (emphasis to systemic effects of portal		
	Desirable to Know: -	4	
	Endocrine – Hyperthyroidism & Diabetes		
	Growth Disturbance - Carcinogenesis, Environmental carcinogens		
14	Must Know	2	
	Lymphoid and myeloid neoplasmas		
	Disorders of Haemoglobin- structure and synthesis	1	
	Desirable to Know: -		
	Bleeding and coagulation disorders		
	T.C./D.C./PBS, Eosinophilia, E.S.R., Anaemia	2	
13	Haematology	3	
	Lab investigation in liver & renal failure		
12	Clinical pathology – (including Demonstrations)	2	
	Tenosynovitis)		
	<ul> <li>Arthritis - degenerative, inflammatory (RA, Ankylosing spondylitis,</li> </ul>		
	<ul> <li>Haemarthrosis, Osteomyelitis, T.B.</li> </ul>		
	<ul> <li>Spondylosis, Prolapse Intervertebral Disc, Scoliosis</li> </ul>		
	Rickets, Osteomalacia, Osteoporosis, Gout		
11	• Fracture healing		
11	Nerve biopsy  Bone & Joints	2	
	Myasthenia gravis, Myasthenic syndrome     Norva biopsy		
10	Neuromuscular junction	1	
10	Muscle biopsy	1	
	Myositis ossificans, Necrosis, regeneration, Myotonia		
	Muscular dystrophy, hypertrophy, Pseudo hypertrophy, Atrophy,     Muscikia assisticana, Nagaratian, Muscular dystrophy,		
9	Diseases of muscle	1	
	Peripheral nerve injury		
	Space Occupying Lesions (SOL) in brief		
	Paraplegia, Wilson's disease		
	palsy, Metachromatic leucodystrophy, Dementia, Hemiplegia,		
	paley Metachromatic leucodystrophy Damantia Haminlagia		

	Must Imov	2	
	Must know -	2	
	Definition of Sterilization, Disinfection, Enumeration of physical methods		
	of sterilization including principles and their applications, commonly used Disinfectants.		
		4	
	Desirable to know - Central sterile department (CSD) concept only.	4	
	Hospital Acquired Infection- Definition, factor influencing infection, mode		
	of transmission & prevention of MAI, Infection control committee  Universal safety precautions- Definition, classification, segregation,		
4	transport & disposal of Waste	5	
4	Immunology Must Know	<u>5</u>	
		+	
	• Immunity - definition, Types, local Immunity vaccines		
	• Antigen antibody-definition, reaction, types, property & application for		
	diagnosis.		
	• Immune response – Type of cells involved in Antigen processing,		
	presentation, Primary & secondary immune response.		
	• CMI – Definition, role of T. cells and macrophages.		
	Hypersensitivity & auto-immunity		
	• Anaphylaxis - definition, classification, mechanism, manifestations & tests		
	Autoimmunity – definitions, classification & mechanism.		
	<b>Desirable to know</b> – Principles & uses of monoclonal Abs.	1	-
5	Laboratory diagnosis of Infection	4	
	Must Know	2	
	Host parasite relationship & bacterial infections-Different sources, modes		
	of transmission of infection and microbial factors leading to establishment		
	of infection.		
	Nice to know	2	
	• Methods of identification of bacteria- Principle of laboratory diagnosis of		
	infectious diseases & General procedure for collection.		
	Diagnosis of infectious diseases - Transport & processing of specimen for		
	microbial diagnosis.		
6	Bacteriology	8	
	Must Know	4	
	Morphology, pathogenicity & lab diagnosis of :		
	• Infection caused by GM + ve & GM - Vecocci- Staphylococci,		
	Streptococci & Neisseria.		
	• Infection caused by GM + ve bacillus - Coryne bacterium		
	diphtheria, Clostridium Perfringens & Clostridium tetani.		
	• Infection caused by Gram –ve bacilli- E.coli, Klebsiella, Pseudomonas,		
	Shigella, Salmonella, V. Cholera.		
	Mycobacteria- M.tuberculosis, M leprae & atypical Mycobacteria.		
	Nice to know –	4	
	• Spirochaetes – Morphology, pathogenicity & lab diagnosis of Treponema Pallidum (VDRL test & TPHA),		
	Role of Staphylococci & Pseudomonas in hospital acquired infection,		
	Leptospira Borrelia		
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, Lab diagnosis &		
	Prevention		
	220.0000		1

	<ul> <li>Hepatitis –List of viruses causing Hepatitis, pathogenicity, Laboratory diagnosis &amp; Prevention</li> <li>Clinical syndrome &amp; Laboratory diagnosis of Polio, measles, congenital, Viral infection, Rubella, CMV, Herpes</li> </ul>		
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 and lab diagnosis of Malaria, Filarial,		
	Toxoplasma, Cysticercosis, Echinococcus		
10	Applied Microbiology	4	
	Must Know		
	• Diseases affecting bones, joints & muscles: Osteomyelitis – etiology, lab diagnosis, Arthritis		
	• Disease involving brain & nerves: Meningitis, brain abscess, Infective neuritis - etiology & clinical manifestations & lab diagnosis		
	• Diseases involving cardiopulmonary system, skin & burns: Infective		
	Carditis, PUO, URTI, LRTI, Skin & burn Infections- etiology &		
	laboratory diagnosis.		

Sr.No.	Title
1	Text book of Pathology -by Harsh Mohan
2	Robbins and Cotran Pathologic basis of disease by, Vinay Kumar, Abdul Abbas
3	A Hand book of medical laboratory technology – V. H. Talib
4	Y.M. Bhende General Pathology and pathology of systems – by S.G Devdhare
5	Textbooks of Microbiology – by R. Ananthnarayan& C. K. JayramPanikar

# **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
20	80	100

### **Periodical Examination:**

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

# Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	Q.1. MCQs (10 Pathology & 10 Microbiology)	20x1=20 marks
Sec B	Q.2. Very Short answer question (Answer any 5 out of 6)	5x3=15 marks
Pathology	Q.3. Short answers question(Answer any 3 out of 4)	3x5=15 marks
Sec C	Q.4. Very Short answer question (Answer any 5 out of 6)	5x3=15 marks
Microbiology	Q.5. Short answer question (Answer any 3 out of 4)	3x5=15 marks

# **Internal Assessment Marks: Theory-**

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

#### **Course Title :- Exercise Therapy II** Course Code:- PT 302 **Course Credit for Exercise Therapy II** Hours Hrs/Wk Credits **Evaluation Pattern** Written Total Practical Total Th Pr SPT Tot Pr SPT Tot Pr SPT Tot Lec Lec Final Final Final Final exam exam exam exam 64 128 96 288 4 20 20 8 18 4 4 10 80 100 80 100

	Course Outcomes	
CO No.	At the end of the course, the learner should be able to:	Mapped Program Outcomes
302.1	Describe the physiological & therapeutic uses, merits/ demerits of various exercise modes.	PO1
302.2	Describe the properties of connective tissue, effect of mechanical loading, factors influencing the muscle strength, mobility of articular and periarticular soft tissues.	PO1, PO2
302.3	Demonstrate various therapeutic exercises on self and on models.	PO1, PO3, PO5
302.4	Analyze human posture (static & dynamic) & various normal Musculo skeletal movements during Gait & activities of daily living both in normal & abnormal conditions.	PO1, PO2, PO3, PO5, PO6
302.5	Implement techniques of airway clearance & breathing exercises to improve respiratory function.	PO1, PO6
302.6	Subjectively and objectively assess isolated & group muscle strength & range of motion of the joints.	PO1, PO2, PO3

Topic Sr.No	Course Content		ırs of g/learnin
			Practica
1	Principle, Classification, Techniques, Physiological & Therapeutic effects, Indications & Contraindications of therapeutic exercises	2	-
2	Muscle Strength	10	20
	Must Know	8	
	• Assessment of muscle strength, [group/individual] subjective & objective methods 1/10 RM – dynamometry		
	• Factors that influence the strength, hypertrophy, recruitment of motor units, change after training		
	• Type of contraction – Isometric, Isotonic, Isokinetic, Eccentric.		
	• General principles of strength training:- overload /intensity /motivation /learning / duration / frequency/ reversibility/ specificity		
	Methods of Resistance training		
	Nice to Know	2	
	Physiological adaptations to training		
3	Joint & connective tissues (Must Know)	8	13
	Open Kinetic Chain and Closed Kinetic Chain exercises		
	• Stretching of muscles		
	• Joint Mobilization – Methods, Traction [cervical & lumbar] rhythmic movements/oscillations		
4	Posture	7	8
	Must Know	5	6
	• Normal Posture – Overview of mechanism of normal posture.		
	Methods of Assessment of the Posture – Sitting /standing		
	• Methods of assessment – Sagittal & frontal plane with plumbline &		

	postural frame, Spondylometer.		
	Abnormal Posture – Assessment, Types, etiogenesis		
	7.		
	<ul> <li>Mobility evaluation of joint / muscles &amp; its implication on posture.</li> <li>Static and Dynamic postural balance – Assessment</li> </ul>		
	Nice to know	2	2
		2	2
	<ul> <li>Management of abnormal posture &amp;postural balance including therapeutic exercises.</li> </ul>		
5	Gait	5	15
3	Must Know	5 3	15 12
		3	12
	Overview of normal gait & its components.  Mathematical and a second secon		
	Methods of assessment of normal gait		
	• Gait deviations - Assessment, Types & etiogenesis		
	Methods of assessment of Gait-measurements for walking aids		
	• Types of walking aids: (axillary /elbow crutches, walking sticks)		
	indications, effects & various training techniques		
	• Crutch gaits, Crutch muscle, Pre – crutch training – on bed, parallel Bar,		
	off Bed, crutch hold / balance.		
	Desirable to know	1	2
	Training for different conditions (Paraplegia, Hemiparesis, Amputation etc)	-	
	Nice to know	1	1
	Management of gait deviations including therapeutic exercises		
6	Co-ordination & Balance	4	10
	Must Know	3	8
	Principles, Technique, Neural control		
	Methods of co-ordination exercises - Frenkel's exercises		
	Differentiate types of co-ordination loss & balance loss.		
	Physiology of in-coordination, Balance loss		
	Nice to know	1	2
	Training for different conditions (Ataxia, Parkinsonism, Stroke]		
7	Desirable to know - Principles of P.N.F	3	8
	Theory, Principles ,Patterns & Techniques of P.N.F.		
8	Breathing exercises	5	12
	Must Know	4	10
	• Goals, Types of breathing exercises- Inspiratory, Expiratory, Segmental,		
	Forced Expiratory- coughing & huffing, Modified Inspiratory, Active		
	cycle of breathing.		
	Physiology of the above mentioned technique		
	Indication, contraindication & its importance for patient		
	Nice to know	1	2
	Application for different conditions using different equipments	_	
9	Bronchial Hygiene	5	15
	Must Know		
	Postural drainage- Positions, Autogenic drainage		
	Humidification		
10	Desirable to know-	2	3
	Principles of Home program& Ergonomic advice		
11	Functional Re-education	10	18
	Must Know	7	15
	Functional motor skills		
	Mobility- Bed mobility, Wheel chair mobility, ambulation training		
	Application of mat exercises [to practice on self & on models]		
	Desirable to know	3	3
	Practical application on – Hemiplegia, Paraplegia, General Weakness.		

12	Must Know	1	6
	6 Minute walk test – on models (with interpretations)		
	Procedure, Data recording & Interpretation, Indications & Contraindication		
	Practical execution, Risk factors & care taken during the test		
	• Other tests (3min walk test, 12 min walk test)		
13	Benefit and harm of patient's right & dignity in Health care settings by	2	-
	physiotherapy		
	WHO definition of health as a possible solution of health problems		
	What is the health benefit by physiotherapy		
	Possible harm for a patient during physiotherapy		
	Dimensions of comparing harms and benefits in individual patients		
14	SPT		96

I CAL DO	VAID.
Sr.No.	Title
1	Practical Exercise Therapy
	<ul> <li>by Margaret Hollis and <u>Phyllis Fletcher Cook</u></li> </ul>
2	Therapeutic Exercise: Foundations and Techniques by Carolyn Kisner, Lyn Allen
	Colby
3	Muscle: Testing and Function, with Posture and Pain by Florence Peterson Kendall,
	Elizabeth Kendall McCreary, Patricia Geise Provance, Mary Rodgers, William
	Romani
4	The Principles of Exercise therapy –Gardiner, M. Dena
5	Joint structure and function: A Comprehensive Analysis by Cynthia C. Norkins &
	Pamela K. Lavengie

# **Reference Books**

Sr.No.	Title
1	Therapeutic exercise by John V. Basmijjan& Steven L.Wolf
2	Proprioceptive Neuromuscular Facilitation -Dorothy E. Voss, Marjorie K. Ionta,
	Beverly J. Myers
3	Clinical evaluation of Muscle Function (for isolated assessment of abdominal
	muscles) – M. Lacote
4	Auto stretching: The Complete Manual of Specific Stretching
	– Olaf Evjenth
5	Orthopaedic Physical Assessment (only for assessment of posture) – David J. Magee
6	Physical rehabilitation by Susan O'Sullivan, <u>Thomas J. Schmitz</u> , <u>George D. Fulk</u>

# SCHEME OF EXAMINATION

I	Written	Total	Pr	actical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

# **Periodical Examination:**

- Written Examination: -20 MCQs for 20 marks, 20 minutes.
- Practical exam 20 Marks (Spots/OSPE)

# Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	Q.1 MCQs	20x1=20 marks
Sec B	Q.2. Short Notes - Answer any 5 out of 6	5x3=15 marks
	Q.3. Short answer questions - Answer any 3 out of 4	3x5=15 marks
Sec C	Q.4. Long answer Question -[Compulsory ]	1x15=15 marks
	Based on Muscle strength/ mobility	
	Q.5. Long answer Question.(Answer Any 1 out of 2)	1x15=15 marks
	Therapeutic application for Posture / Gait	
	OR	
	Therapeutic application for Pulmonary function	
	•	

# • Practical Examination (80 marks): demonstration on models

S.No.		Marks
1	Long case (any one)	35
	<ul> <li>Muscle training (Testing &amp; strengthening)</li> </ul>	
	• Mobility (Passive, Active, Active Assisted, Mobilization of	
	Peripheral joints, stretching)	
	• Pulmonary function training : Breathing exercises & Bronchial	
	hygiene technique	
2.	Two Short Cases: -	20 x2=40
	• M.M.T. (Individual & group)	
	<ul> <li>Posture Assessment &amp; Re-training</li> </ul>	
	<ul> <li>Normal Gait, Abnormal Gait, Gait Re-training</li> </ul>	
	Functional re-education	
	• 6-minute walk test.	
	Co-ordination training	
	Crutch training & assisted ambulatory training	
3.	Journal	5

# SUPERVISED PRACTICAL TRAINING:

# $\overline{\text{Journals marks}} = 5 \text{ marks}$

All the SPT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate journal& should be submitted before preliminary examination of the semester. It is the responsibility of the student to submit journal 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 :- Psychology Course Code:- PT 303																	
							C	ourse	e Cr	e <mark>dit f</mark> o	r Psy	<mark>cho</mark> l	logy					
	H	ours		]	Hrs/	Wk			Cr	edits				Evalu	ıatio	<mark>n Pattern</mark>	1	
												W	ritten	Total		Practical		Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exa	m	Final exam
48 48 3 3 3 03 10 40 50								-										
	Course Outcomes																	
CO No. At the end of the course, the learner should be able to:						P	Mapped Program utcomes											
303	3.1	Expla	in the	e diffe	erent	scho	ools	of the	ough	ts of p	sycho	ology						PO1
Describe the importance of psychological status of the person in Health & disease, as well as environmental & emotional influence on the mind & personality.							PO1											
303.3 Describe changes in human psychology during different stages of life.								PO1										
303	3.4	Descr	ibe h	ow st	ress,	soci	oeco	nomi	c an	d cultı	ıral is	sues	affect	patient	treat	tment.	P	O1, PO2

Topic		Hor	urs of
Sr.No.	<u> Section – I - General Psychology</u>	teaching	g/learning
		Theory	Practical
Must K			
1	Introduction to Psychology	3	-
	• Definition and nature of Psychology, Fields & subfieldsof psychology		
	• Schools of thoughts- Structuralism, functionalism, Behaviorism,		
	Gestalt, Psycho-analytic Theory		
2	Developmental Psychology	6	-
	• Definition & its Theories		
	• Physiological & Psychological changes during Infancy, Early & Late		
	childhood, adolescent stage, Puberty, Adulthood & old age		
3	• Emotions- nature & relationship with autonomic nervous system	3	-
	• Theories of emotions - James Lange theory, Schachter Singer theory,		
	Cannan Bard theory		
4	• Motivation- Maslow's hierarchy of motives, Theories of motivation	2	-
	• Conflict & Frustration – Types of conflicts, Common Defense		
	mechanism, stress		
5	• Learning - Definition and theories, conditioning, Role of learning in	3	
	human life		
Desirab	ple to know		
6	Attention & perception, Nature of attention & perception, Principle of	2	-
	grouping		
7	Memory- Definition and nature, types of memory and forgetting cause	3	-
	Learning		
8	Abnormal Psychology - Difference between normal & Abnormal,	2	-
	Causes of abnormality		
Topic	Section – II-Health Psychology		ırs of
Sr.No.			/learning
3.5 . 33		Theory	<b>Practical</b>
Must K			
1	Psychological Reactions of a Patient:	4	-
	during admission and 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	<b>Reactions to Loss</b> : death and bereavement shock and disbelief,	4	-
	development of awareness, restitution, resolution, stages of acceptance		
	as proposed by Kubler – Ross		
3	<b>Stress</b> : Physiological and Psychological relation to health and sickness,	4	-
	Psychosomatic, Professional stress burnout		
4	Behavior Modifications: Application of various conditioning and	4	-
	learning principles to modify patient behaviours.		
5	Personality Styles: Different Personality styles of patients.	4	-
Nice to	know		
6	Compliance: Nature, factors contributing to non-compliance,	4	
	improving compliance		

# **Textbooks**

Sr.No	Title
1	Introduction to Psychology by Morgan C.T. & King R. A.
2	Developmental Psychology- A life span Approach by Hurlock, E.B
3	Understanding Psychology by Feldman, R.S.

# **SCHEME OF EXAMINATION**

1	Written	Total	Pr	actical	Total		
IA	Final exam	Final exam	IA	Final exam	Final exam		
10	40	50	-	-	-		

# **Periodical Examination:**

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

# **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	Q.1. MCQs	10x1=10 marks
Sec B	Q.2. Very short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. 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

#### **Course Title :- Biomechanics Course Code:- PT 304 Course Credit for Biomechanics** Hrs/Wk Credits Hours **Evaluation Pattern** Written Total Practical Total SPT SPT Tot Pr SPT Th Pr Tot Lec Pr Lec Tot Final Final Final Final ΙA exam exam exam exam 32 64 48 144 4 2 3 9 6 20 80 100 **Course Outcomes Mapped** CO At the end of the course, the learner should be able to: **Program** No. Outcomes 304.1 Explain the concept of kinetics and kinematics. PO1 Describe, analyze and demonstrate biomechanics of various joints of thebody. PO1, PO2

304.3 Identify biomechanical abnormalities occurring at joints.

304.3	Course Contents						
Topic	Biomechanics	Hot	ırs of				
Sr.No		teaching/learning					
		Theory	<b>Practical</b>				
1	Section – I - Mechanics	5	1				
	Must Know	2					
	• Review to mechanics including motion, forces, force systems,						
	composition of forces, muscle forces & action line						
	Introduction to Biomechanics and terminology						
	Desirable to know	1					
	Axis & planes with movements occurring at each joint						
	Nice to know						
	Newton's law of motion	2					
	Centre of Gravity, Line of gravity, Stability and Equilibrium						
2	Section – II - Muscle Structure and function	4	2				
	Must Know	3					
	Composition, unit, structure, architecture of muscle						
	Classification of Muscles						
	Functions of muscles & factors affecting it						
	Group action of muscle						
	<b>Desirable to know-</b> Effect of immobilization, injury & aging on muscle.	1					
3	Section – III - Joint structure	6	7				
	Must Know	4	3				
	Basic principles of Joint design and a human joint						
	• Tissues present in human joint including fibrous tissue, bone cartilage						
	and connective tissue						
	Bio-physical properties of connective tissue [contractile & non-						
	contractile], Elasticity /Plasticity- response to sudden/slow/ sustained						
	loading- Stress strain Curve, Creep, Hysteresis						
	Classification of joints	2					
	Desirable to Know	2	4				
	Effect of immobilization, injury & aging on joint	20	4.0				
4	Section – IV Anatomy and Biomechanics of the joints	38	10				
	Must Know	12					
	Upper limb: Shoulder girdle, elbow, wrist and hand	15					
	Lower Limb: Hip complex, knee, ankle and foot	9 2					
	Vertebral Column: Cervical, Thoracic, thoracic cage, Lumbar and						

PO1, PO2

	Sacroiliac spine.		
	Temporomandibular joint		
5	Section V- Kinematics & Kinetics in ADLs	7	10
	Must Know	3	
	• Kinetics & Kinematics of various activities of daily living like supine to sitting, sitting to standing, walking and climbing up & down		
	Desirable to know-	2	
	Kinetics & Kinematics of lifting, overhead activities, squatting		
	Nice to Know-	2	
	Kinetics &Kinematics of running, jogging, pulling, pushing		
6	<b>Desirable to know:</b> Biomechanical alterations of all joint due to muscle	2	
	weakness, joint stiffness and its implications		
	Nice to Know: Pathomechanics of abnormal gait patterns	2	2
7	SPT		48

#### **Textbooks**

Sr.No.	Title								
1	Joint structure and function: A Comprehensive Analysis by Cynthia C. Norkins & Pamela K. Lavengie								
2	Fundamentals of Biomechanics: <b>Equilibrium, Motion, and Deformation by</b> Nihat Özkaya, Margareta Nordin								

# Reference books

Sr.No.	Title								
1	Biomechanics basis of human movement by Joseph Hamill, Kathleen Knutzen,								
1	Timothy Derrick								
2	Fundamentals of Biomechanics by Knudson, Duane								
3	Clinical Kinesiology by Signe Brunnstrom								

### **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
20	80	100

#### **Periodical Examination:**

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

# **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

Sec A	Q.1. MCQs	20x1=20 marks
Sec B	Q.2.Short Notes (Answer any 5 out of 6)	5x3=15 marks
эсс Б	Q.3.Short answer questions(Answer any 3 out of 4)	3x5=15 marks
Sec C	Q.4.Long answer question (compulsory)	1x15=15 marks
Sec C	Q.4.Long answer question (compulsory) Q.5.Long answer questions (Answer any 1 out of 2)	1x15=15 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 journal & should be submitted before preliminary examination of the semester. It is the responsibility of the student to submit journal to the teacher before the examination.

# **Internal Assessment Marks: Theory: -**

 $\begin{array}{ll} \text{Periodical exam} & = 20 \text{ marks} \\ \text{Prelim exam} & = 80 \text{ marks} \\ \text{Total} & = 100 \text{ marks} \end{array}$ 

	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									'n							
												W	ritten	Total	Pr	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Fina	
32	32	48	112	2	2	3	7	2	1	1	4	10	exam 40	exam 50		exan	n exam
								C	ours	e Out	come	S					1
																	Mapped
CO		At th	ne end	d of t	he co	ourse	, the	e lear	ner	shoul	l be a	ble t	o:				Program
No.																	Outcomes
30:	5.1	Desc	ribe v	vhat i	s Fir	st aic	1 & i	nstru	ment	s usec	l in fii	st ai	d kit.				PO1
30:	5.2	Desc	ribe f	irst a	id to	be gi	iven	for co	omm	on em	ergen	cies.					PO1, PO2
																	PO1, PO2,
30:	5.3	Dem	onstr	ate ba	ndag	ging t	echi	niques	s on :	model	s.						PO3, PO5,
								•									PO6, PO7
30:	5.4	Do p	roper	first	aid a	ssess	men	t for	victi	ms.							PO1, PO2
305.5 Demonstrate cardiopulmonary resuscitation on models.								PO1									
								-									PO1, PO2,
30:	5.6	Deliv	ver fii	st aid	trea	tmen	t in	comn	non e	emerge	ency c	ondi	tions.				PO3, PO5,
		Deliver first aid treatment in common emergency conditions.						PO6, PO7									

Topic	Course content	Hou	Hours of			
Sr. No		teaching/	teaching/learning			
		Theory	Practical			
1	SECTION I-					
	Must Know					
	Introduction to First Aid –	10	12			
	• Assessment, immediate actions and the priorities.					
	• Bandages – Types, binders, splints & slings.					
	Promoting safety consciousness.					
	• Instruments used in First Aid (First Aid kit).					
	First Aid in-					
	RTA including fractures and spinal cord injuries	10	8			
	Cardiac arrest, Respiratory failure, Burns					
	Shock- Electric, Hypovolemic and control of Bleeding					
	• Poisoning					
	Desirable to know	5	5			
	Examination of Vital Signs.					
	Nice to know	3	2			
	Snake Bite, Drowning,					
	Hypothermia and Hyperthermia					
2	SECTION II	4	5			
	Must Know					
	Medical Triage- concept of Emergency:					
	Definition, Importance and rules					
	Code tags and triage terminology					
	Transportation of the injured					
3	SPT		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 MCQs for 10 marks, 20 minutes.

# Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	Q.1. MCQs	10x1=10 marks
	Q.2. Very Short answer questions - Answer any 5 out of 6	5x2=10 marks
Sec B	Q.3. Short answer questions - Answer any 2 out of 3	2x5=10 marks
	Q.4. 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 journal & should be submitted before preliminary examination of the semester. It is the responsibility of the student to submit journal to the teacher before the examination.

# **Internal Assessment Marks: Theory: -**

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

# IV SEMESTER

		Hours					Hrs/Wk				Credits				Evaluation Pattern				
Course	Course (Subject)													Written		Total Pract		ctical	Total
Code	Course (Subject)	Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 401	Pharmacology	48	ı	1	48	3	-	-	3	3	-	1	3	10	40	50	-	-	-
PT- 402	Electrotherapy- II	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 403	Gen.Medicine (Including Gerontology & Dermatology)	80	32	96	208	5	2	6	13	5	1	2	8	20	80	100			
PT- 404	Community Medicine, Sociology & Environmental Sciences	80	32	48	160	5	2	3	10	5	1	1	7	20	80	100		1	
	Total	272	160	240	672	17	10	15	42	17	5	5	27	70	280	350	20	80	100

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

Course Title :- Pharmacology Course Code:- PT 401																	
	Course Credit for Pharmacology																
	Н	ours		]	Hrs/		cou	isc C.		edits	1141 11	lacol	<u> </u>	Evalua	tion F	atter	n
												W	ritten	Total	Pr	actical	Total
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Fina	l Final
													exam	exam	17.1	exan	n exam
48	-	-	48	3	-	-	3	3	-	-	3	10	40	50	-	-	-
								C	ours	e Out	come	S					
	CO No.  At the end of the course, the learner should be able to:							Mapped Program Outcomes									
401	.1		eir ad	verse	reac	tions					•		_	arious s mulatio	•	ns,	PO1, PO2
401	.2		•					_		fect of & vice		_	interfer	es with	the		PO1, PO2
401	.3	Indica				_					-	agent	s with 1	noveme	ent		PO1, PO2
401	.4		ne awa	arenes	ss of	othe	r ess	ential	&c0	ommo	nly us	ed di	rugs, ne	ed for t	heir u	ise	PO1

Topic Sr.No.	Title of content		urs of g/learning
		Theory	Practical
1	General Pharmacology	7	-
	Must Know		
	Introduction to pharmacology, drug development.		
	Routes of administration.		
	Pharmaco-kinetics - Absorption and distribution of drugs.		
	Pharmaco-kinetics - Drug Biotransformation & drug Excretion.		
	Pharmaco-dynamics – Dose response relationship.		
	Adverse drug reactions.		
	Factors modifying drug action.		

2	Drugs acting on Central Nervous System	7	
2	Must Know	/	-
	General Anaesthetics		
	Alcohol		
	Antipyretics		
	Opioid Analgesics & NSAIDS		
	<ul> <li>Sedatives and Hypnotics</li> </ul>		
	<ul> <li>Anti-Epileptic drugs</li> </ul>		
	1 1		
	Anti-Psychotics, Antidepressants     Drug Thorony in Porking on ion		
3	Drug Therapy in Parkinsonism  Drug acting an Parishard Narrang System	2	
3	Drugs acting on Peripheral Nervous System Must Know	<u> </u>	-
	Skeletal muscle relaxants.		
	<ul> <li>Skeletal muscle relaxants.</li> <li>Local Anaesthetics.</li> </ul>		
4		(	
4	Drugs acting on CVS and blood Must Know	6	-
	<ul> <li>Anti-hypertensives, B blockers, Ca channel ACEI</li> </ul>		
	Treatment of Angina		
	Treatment of Congestive cardiac failure     Hapmatinics and envithropointing		
	<ul> <li>Haematinics and erythropoietin</li> <li>Drugs affecting coagulation, bleeding, thrombosis.</li> </ul>		
	<ul> <li>Treatment of Shock.</li> </ul>		
5	Drugs acting on Respiratory system	2	
3	Must Know	<u> </u>	-
	• For upper respiratory tract infections, Sinusitis, cough, laryngitis,		
	Pharyngitis.		
	<ul> <li>Drugs for treatment of bronchial asthma, COPD</li> </ul>		
6	Drugs acting on Autonomic Nervous System	4	
O	Must Know	•	
	• Introduction to ANS		
	Cholinergic agonists – I & II		
	Cholinergic antagonists		
	Adrenergic agonists – I & II		
	Adrenergic antagonists		
7	Endocrinology	4	
,	Must Know		
	Introduction to Endocrinology,		
	Thyroid hormones and Anti-thyroid drugs.		
	<ul> <li>Treatments of diabetes mellitus.</li> </ul>		
	Corticosteroids		
	Oestrogen and Progesterone		
8	Must Know	2	-
-	<b>Drugs acting on Kidney</b> –Diuretics		
9	Chemotherapy	7	-
	Desirable to know	4	
	General principles of chemotherapy.		
	Sulfonamides &Fluoroquinolones.		
	Beta – Lactam antibiotics – I (Penicillins)		
	Beta – Lactam antibiotics – II (Cephalosporins)		
	Macrolides & aminoglycides		
	Tetracyclines& chloramphenicol (Broad spectrum antibiotics)		
	The state of the s	ı	

	Must Know	3	
	Anti-Tuberculosis drugs		
	Anti –Leprosy drugs		
10	Desirable to know	3	
	Drugs in poisoning		
11	Drugs used in Gastrointestinal Disorders		
	Nice to Know	2	
	Peptic Ulcer		
	Anti-emetics		
	• Laxatives		
	Anti-diarrhoeal drugs		
12	Miscellaneous Topics	2	
	Nice to Know		
	Vaccines & Sera		
	<ul> <li>Dermatological – Scabies – Psoriasis – Local Antifungals</li> </ul>		
	Vitamins & Calcium Metabolism, Phosphorus, magnesium		

Sr.No.	Title
1	Essentials of Medical Pharmacology – K. D. Tripathi
2	Pharmacology and Pharmacotherapeutics – R.S. Satoskar
3	Gaddum's Pharmacology - W.R. Wilson

### **Reference Books**

Sr.No.	Title
1	Drill Pharmacology in Medicine – by L.F. Prescott
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 MCQs for 10 marks, 20 minutes.

# **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	Q.1. MCQs	10x1=10 marks
Sec B	Q.2. Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. Long Answer Questions (Answer any 1 out of 2)	1x10=10 marks

# **Internal Assessment Marks: Theory: -**

 $\begin{array}{lll} \mbox{Periodical exam} & = 10 \mbox{ marks} \\ \mbox{Prelim exam} & = 40 \mbox{ marks} \\ \mbox{Total} & = 50 \mbox{ marks} \\ \mbox{The total shall be Converted to } 10 \mbox{ marks } (50/5=10) \end{array}$ 

						lover.	o Ti	tla • 1	rt tr	CTD (	TIII	TD A T	DX/ II					
	Course Title :- ELECTROTHERAPY- II Course Code:- PT 402																	
	Course Credit for ELECTROTHERAPY- II																	
	H	lours			Hrs/	Wk			Cr	edits			E	<mark>valuati</mark>	on P	attern		
												W	ritten	Total	Pra	actical	Total	
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Final	Final	
64	96	96	256	4	6	6	16	4	3	2	9	20	exam 80	exam 100	20	exam 80	exam 100	
04	70	70	230		0		10			Outco		20	00	100	20	- 00	100	
~										-						M	apped	
_	At the end of the course, the learner should be able to:								ogram									
No	0.							ĺ									Outcomes	
		Descr	ibe the	e Proc	luction	on &	Phys	iologi	cal e	ffects,	Ther	apeu	tic uses	, merits	,	PC	PO1, PO2	
402	2.1	demer	rits inc	dicatio	on &	cont	raind	licatio	ns of	f vario	us lov	v/me	dium F	requenc	y			
		Curre	nts mo	odes.														
		Descr	ibe the	e Phys	siolo	gical	effe	cts &t	hera	peutic	uses	of va	rious th	erapeut	ic	PC	1, PO2	
402	2.2	ions &	k Topi	ical Pl	narm	aco-t	hera	peutic	age	nts to	be use	ed for	the ap	plication	n of			
		Iontop	phores	is & s	onoj	hore	esis /	phone	opho	resis.								
		Acqui	ire the	skill	of A	pplic	ation	of th	e Ele	ectro th	nerapy	moo	des like	UVR a	nd	PO	1, PO2,	
402	2.3	LASE	ER on	mode	ls, fo	r the	purp	ose o	f Ass	sessme	ent & T	<b>Freat</b>	ment.				PO3, PO5,	
																	PO6	
402	, ,									•	ne tiss	sue sp	ecific &	& area		PC	01, PO2	
402	۷.٦	specif	ic app	licatio	on fo	r var	ious	moda	lities	•								

Topic	Course Content	Hours of			
Sr.No.		teachin	g/learning		
		Theory	Practical		
1	Low frequency currents –	40	64		
	Must know				
	• Physiological effects, therapeutic uses, indications and	8	15		
	contraindications and dangers of faradic type current, intermittent				
	galvanic current and galvanic current				
	• Cathodal & Anodal Galvanism, Iontophoresis with various ions &	3	4		
	Pharmaco therapeutic drugs.				
	Faradic current under pressure /elevation, Faradic Foot Bath	2	4		
	• Electrical stimulation for re-education—short /long pulse motor points	8	10		
	Electrical Reactions and Electrodiagnostic tests:	10	22		
	• Electrical Stimuli & normal behavior of Nerve & muscle				
	<ul> <li>Types of lesion &amp; development of reaction of degeneration.</li> </ul>				
	• Faradic – Intermittent direct current test.				
	<ul> <li>S.D. Curve and its application and characteristics</li> </ul>				
	• Chronaxie, Rheobase & Pulse ratio				
	High voltage pulsed galvanic current				
	TENS:Define, Principles of production, types, dosage, electrode placement,	4	5		
	Physiological and therapeutic effects, indication & contraindications.				
	Desirable to know	2	3		
	Micro –currents				
	Didynamic currents				
	Nice to know	3	1		
	• Functional electrical stimulation				
	• Long wave diathermy				
	NEMS, Matrix Rhythm Therapy				

2	Medium frequency currents	6	10
	Must Know	4	
	• Interferential therapy: Define, Principles of production, static		
	Interferential system, dynamic interference system, dosage, electrode		
	placement, Physiological and therapeutic effects, indication and		
	contraindications.		
	Desirable to know -	2	
	Russian currents		
	Rebox type currents		
3	Desirable to know	3	2
	Biofeedback method:		
	• Instrumentation, principles, therapeutic effects,		
	• Indications, contraindications, limitations, precautions,		
	Operational skills and patient preparation		
4	Must Know	4	6
	Ultraviolet rays (UVR):		
	• 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	Must Know	4	5
	Light Amplification of stimulated Emission of Radiation (LASER)		
	• Definition, historical background, physical principles, biophysical		
	effects, types, production, therapeutic effects		
	Techniques of application, indications, contraindications, precautions		
	Operational skills and patient preparation.		
6	Must Know	2	3
	Care of wound –application of Therapeutic currents, Ultrasound,		
7	U.V.R. & LASER		
7	Nice to know- Combination Therapy	2	2
8	Desirable to Know  Intermittant Thereny unit its apprecian and different methods of	2	4
	Intermittent Therapy unit, its operation and different methods of		
	application region wise.  Interferential Programs Thereny unit its operation and different		
	<b>Interferential Pneumatic Therapy</b> 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	1	
	Success and failures in physiotherapy treatments		
	• Problems with the basic assumption that vulnerability should be		
	eliminated		
	Care ethics- New approaches in bioethics, Solidarity, duty to care		
	Relation between vulnerability and personal integrity		
10	SPT		96

1 ext Do	1 ext Doors							
Sr.No.	Title							
1	Clayton's Electrotherapy – by Forster & Palastanga							
2	Electrotherapy Explained – by Low &Reed							
3	Clinical Electrotherapy – by Nelson & Currier							
4	Basic of Electrotherapy – Subhash Khatri							

#### **Reference Books**

Sr.N	Vo.	Title
1		Principle &Practice of Electrotherapy – by Joseph Kahn
2		Therapeutic Electricity & UVR – by Sydney Licht

### **SCHEME OF EXAMINATION**

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

#### **Periodical Examination:**

- Written Examination: -20 MCQs for 20 marks, 20 minutes.
- Practical Examination: 20 marks (Spots/OSPE/ Demonstration)

# **Preliminary Examination / University (Final) Examination**

# • Written Examination (80 marks)

Sec A	Q.1. MCQs	20x1=20 marks		
Sec B	Q.2. Short Notes (Answer any 5 out of 6)	5x3=15 marks		
	Q.3. Short answer questions (Answer any 3 out of 4)	3x5=15 marks		
Sec C	Q.4.Long Answer Questions (compulsory)	15 marks		
	Based on Low frequency modes			
	Q.5. Long Answer Questions			
	1. Based on Medium frequency currents 15 marks			
	OR			
	2. Based on U.V.R./LASER			

### • Practical Examination (80 marks) -demonstration on models

Sr.no		Marks
1.	Long Case: Based on Motor points /U.V.R. Test Dose/Faradism under	35
	Pressure	
2.	Short Case-1: Based on TENS/LASER	20
3.	Short Case-2: Based on medium Frequency current/ low frequency current	20
4	Journal	5

# **SUPERVISED PRACTICAL TRAINING:**

### Journal- 5marks

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

### **Internal Assessment Marks: Theory/ Practical: -**

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

# Course Title:- GENERAL MEDICINE (INCLUDING CARDIO-RESPIRATORY, GERONTOLOGY, DERMATOLOGY)

Course Code:- PT 403

# Course Credit for GENERAL MEDICINE (INCLUDING CARDIO-RESPIRATORY, GERONTOLOGY, DERMATOLOGY)

		,																
Hours				Hrs/Wk			Credits					E	<mark>valuati</mark>	on P	attern			
Ī													W	ritten	Total	Pra	actical	Total
	Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	TΛ	Final	Final	IA	Final	Final
													IA	exam	exam	IA	exam	exam
ſ	80	32	96	208	5	2	6	13	5	1	2	8	20	80	100			

### **Course Outcomes**

CO No.	At the end of the course, the learner should be able to:	Mapped Program Outcomes
403.1	Describe Etiology, Pathophysiology, Signs &Symptoms &Management of the	PO1
103.1	various Endocrinal, Metabolic, Geriatric& Nutrition Deficiency conditions.	
	Describe Etiology, Pathophysiology, Signs & Symptoms, Clinical, Evaluation&	PO1
403.2	Management of the various Rheumatological, Cardiovascular and Respiratory	
	Conditions.	
403.3	Interpret Chest X-ray, Blood gas analysis, P.F.T. findings, Blood investigations	PO1, PO2
403.3	done for various medical and Rheumatological conditions.	
403.4	Describe the principles of Management at the Medical Intensive Care Unit.	PO1, PO2,
403.4		PO6
403.5	Describe the Pathophysiology, Signs & Symptoms, Clinical Features,	PO1, PO2
403.3	Examination & Management of Common Skin Conditions	

Topic Sr.No	A) CARDIO-VASCULAR & RESPIRATORY MEDICINE		ırs of g/learning
511110		Theory	Practical Practical
1	DISEASES OF THE CARDIO-VASULAR SYSTEM	16	
	Must Know		
	Examination of Cardiovascular System	3	
	• ECG – Normal & Variations due to ischemia &infarction	2	
	Stress Test	1	
	Definition, Etiology, Clinical Features, Complications,		
	Management of the following Cardio-vascular diseases:		
	<ul><li>Ischemic Heart Disease, Myocardial infarction</li></ul>	2	
	<ul> <li>Valvular Heart Disease – Congenital &amp; Acquired</li> </ul>	2	
	Rheumatic Fever & Rheumatic Heart Disease	2	
	Infective Endocarditis	1	
	Congenital Heart Diseases	2	
	Unstable Angina	1	
2	DISEASES OF THE RESPIRATORY SYSTEM	23	
	Must Know		
	Clinical Examination of Respiratory System	2	
	Patterns of Respiratory Diseases: Obstructive & Restrictive	1	
	Definition, Etiology, Clinical Features, Complications,		
	Management of Diseases of the respiratory system:		
	<ul><li>Common Infectious diseases like Tuberculosis, Pneumonia,</li></ul>	5	
	Lung Abscess, Bronchiectasis.		
	<ul><li>Diseases of Pleura like Pleural Effusion, Pneumothorax,</li></ul>	5	
	Hydropneumothorax, Empyema.		
	<ul> <li>Obstructive Lung Diseases like Bronchitis, Emphysema,</li> </ul>	2	
	Bronchial Asthma, Cystic Fibrosis		
	Interstitial Lung Diseases	1	

	Designation Fellow Deficition Town Communication	1	
	Respiratory Failure: Definition, Types, Causes, Clinical	1	
	Features, Diagnosis and Management	2	
	Investigation in respiratory system- Chest X ray, ABG, PFT	1	
	Desirable to Know	3	
	Arrhythmia – classification		
	Occupational lung diseases like Silicosis Asbestosis,		
	Pneumoconiosis, Brucellosis, Farmer's Lung		
	Intensive Medical Unit – Infrastructure & Treatment		
B) <b>GEN</b>	NERAL MEDICINE, RHEUMATOLOGY & GERONTOLOGY	21	
3	GENERAL MEDICINE	8	
	Must Know		
	Diabetes Mellitus	3	
	Etiology and pathogenesis, Clinical manifestations, Management		
	and Complications of diabetes.		
	Diseases of Blood	2	
	Anemia- Signs and symptoms, Types and management		
	<b>Hemophilia</b> - Cause, Clinical features, Severity of disease,		
	Management, Complications due to repeated hemorrhages,		
	complications due to therapy		
	Desirable to Know		
	Disorders of Endocrine system	3	
	• Thyroid		
	Pituitary & Adrenal conditions		
	Calcium Metabolism		
4	RHEUMATOLOGICAL CONDITIONS	5	
4	Must Know	3	
	Introduction to Rheumatology and Classification     Physical Archeric Leaves 1 P.A.		
	Rheumatoid Arthritis, Juvenile RA  Chicken Control of the Con		
	Chicken Gunia, Psoriatic, Gouty Arthritis		
_	Seronegative Spondyloarthropathy (SSA)		
5	GERIATRIC CONDITIONS	7	
	Must Know	4	
	Osteoporosis: Causes, Clinical features, Complications,		
	Management- medical and surgical		
	Hypertension: Definition, causes, classification, types,		
	assessment, investigations and management.		
	Desirable to Know	3	
	Aging Process		
	General Health Care, Wellness Clinic		
	Nutrition Deficiency Disease & Drug Abuse / Intoxication		
C) DER	MATOLOGY	20	
6	Must Know	12	
	Structure, function and lesions of skin		
	Pigmentary disorders: Localized& Gen. Pigmentary		
	Papula-Squamous disorders- Psoriasis, PR, Lichen planus, PRP		
	• Acne		
	Topical therapy in Dermatology& Hair disorders - Alopecia ,		
	Hirsutism		
	Leprosy     Soverelly Transmitted skin lesions LHV Symbillis Change id		
	Sexually Transmitted skin lesions - HIV , Syphillis , Chaneroid     CV C in principals		
	LGV, G. inguinale		

	Nice to know  Bacterial (impetigo, carbuncle, Staphylococcal Scalded Skin Syndrome)	8	
	<ul> <li>Viral infections (Warts, Molluscum, Herpes, HZ, HSV)</li> <li>Fungal infections:</li> <li>a) Superficial- TC, TV b) Deep fungal - Candidiasis</li> <li>Scabies, Pediculosis</li> <li>Eczema – Exogenous &amp; Endogenous</li> </ul>		
7	Hair deformity  CLINICAL		32
,	Medicine Dermatology		20 12
8	SPT		96

Sr.No	Title					
1	API - Text book of Medicine – S.A. Kamath					
2	Golwalla's Medicine for Students- A.F. Golwalla & S.A. Golwalla					
3	Principles & Practice of Medicine by Davidson					
4	Clinical Medicine – P. J. Mehta					

### SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
20	80	100

### **Periodical Examination:**

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

# Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	Q.1) MCQs (15 MCQs - Gen. Medicine, RS, CVS,	20x1=20 marks
	Q.1) MCQs ( <b>15 MCQs -</b> Gen. Medicine, RS, CVS, Rheumatology, Gerontology & <b>5 MCQs</b> -Dermatology)	
	Q.2 & Q.3 from Gen. Medicine, Rheumatology, RS & CVS	
Sec B	Q.2) Short Notes (answer any 5 out of 6)	5x3=15
	Q.3) Short answer questions. (Answer any 3 out of 4)	3x5=15
	Q.4) Short Notes. (Answer any 5 out of 6) (Gerontology)	5x3=15
Sec C	Q.5) Short answer questions. (Answer any 3 out of 4)	3x5=15
	(Dermatology)	

# **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 journal & should be submitted before preliminary examination of the semester. It is the responsibility of the student to submit journal to the teacher before the examination.

# **Internal Assessment Marks: Theory: -**

 $\begin{array}{ll} \text{Periodical exam} & = 20 \text{ marks} \\ \text{Prelim exam} & = 80 \text{ marks} \\ \text{Total} & = 100 \text{ marks} \end{array}$ 

# Course Title: COMMUNITY MEDICINE, SOCIOLOGY AND ENVIRONMENTAL SCIENCES

Course Code:- PT 404

# Course Credit for COMMUNITY MEDICINE, SOCIOLOGY AND ENVIRONMENT SCIENCE

Hours				Hrs/Wk				Credits				Evaluation Pattern								
													Written		Written		Total	Pr	actical	Total
7	Th P	r	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final	Final	IA	Final	Final		
													IA	exam	exam	IA	exam	exam		
8	30	2	48	160	5	2	3	10	5	1	1	7	20	80	100		-			
									C		a O4		~							

80 32	48 160 5 2 3 10 5 1 1 7 20 80 100									
	Course Outcomes									
CO No.	At the end of the course, the learner should be able to:	Mapped Program								
		Outcomes								
404.1	Understand the concept of Health and disease, epidemiological effects, socio economic& cultural issues.	PO1								
404.2	Understand the importance of family planning and immunization.	PO1								
	Describe the importance of accounting homenda health education discrete.									
404.3	Describe the importance of occupation hazards, health education, disaster management and hospital waste management.									
	management and nospital waste management.									
	Understand the concept of society, socialization & social problems in different									
404.4										
	communities.									
		PO1, PO5,								
404.5	Know about natural resources, ecosystems, biodiversity and its conservation.	PO6, PO7,								
		PO8								
	Explain various anvironment protection acts. Know and understand the	PO1, PO5,								
404.6	Explain various environment protection acts. Know and understand the environment & the effect on it due to social issue, population & pollution.									

	Course Content							
Topic Sr.No	A. COMMUNITY MEDICINE	Hours of teaching/learning						
		Theory	<b>Practical</b>					
Must	Must Know							
1	Health & Disease	6	-					
	• Definitions: National & International, Concepts, Dimensions and							
	Indicators of Health, Concept of well-being, Spectrum & Determinants							
	of Health							
	• Concept and natural history of Disease, Concepts of disease control and							
	prevention, Modes of Intervention							
	Population Medicine							
	• Role of socio-economic and cultural environment in health & disease							
2	Epidemiology	3	-					
	• Definition, scope & principles of Epidemiology							
	• Epidemiological methods & its uses							
3	Socio-Economical &Cultural Issues related to Morbidity	7	-					
	owing to the Physical Disability & Handicaps of Structural /Neuro-motor							
	& Psycho-somatic origin:							
	• Health problem in vulnerable groups							
	• Pregnant & lactating women, Pelvic floor Dysfunction, Urinary							
	incontinence							
	• Pre-term babies with high risk, Infants & Pre-School Children-Brain							
	Damage, during birth injury							

	Domography and Family Dlaming	2	
4	Demography and Family Planning	2	-
	• Family planning-objectives of national family planning program		
	• Family planning methods: A general idea of advantage and		
	disadvantages of the methods.	1	
5	Immunization programs – children & hospital staff.	4	2
0	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.	2	
7	Hospital waste management	2	2
0	Sources of hospital waste, Health hazards, Waste management	3	2
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	2	
9	Health Education	3	2
	• Concepts, aims and objectives		
	Approaches to health education		
	Models & Contents of health education		
	Principles & Practice of health education		
10	Addiction – Alcholism, Neuromotor, Psychosomatic disorders & Smoking	1	2
	able to Know		
11	• Environmental Hygiene including man & his surrounding, Occupational	2	2
	& Industrial hygiene, Village & Town Sanitation.		
	Overview of Public Health Administration at Central & State levels –		
	Strategies of Health Delivery System for "Millennium Development		
- 10	goals" National health Program. Brief role of WHO.		
12	Mental Health	2	-
	Characteristics of a mentally healthy person		
	• Types & Causes of mental illness		
	Preventive aspects		
	Mental health services		
	Alcohol and drug dependence		
13	Nutrition and Health	1	1
	Nutritional problems in public health		
	Community nutrition programs		
14	Nice to Know	3	3
	Health programs in India		
	Vector borne disease control program		
	National leprosy eradication program		
	National tuberculosis program,		
	National AIDS control program,		
	National program for control of blindness		
	• Iodine deficiency disorders (IDD) program,		
	Universal Immunization Program		
	Reproductive and child health program		
	National cancer control program		
	National mental health program		
	1 -6 "		

Г		ı	1
	National diabetes control program		
	National family welfare program		
	National sanitation and water supply program		
	Minimum needs program		
Topic	B. SOCIOLOGY		ırs of
Sr.No			<mark>/learning</mark>
		Theory	<b>Practical</b>
Must l			
1	Introduction – Definition & Relevance with Physiotherapy.	1	-
2	Sociology & Health –Social factors affecting Health Status, Social Consciousness & Perception of Illness, Decision Making in taking Treatment	1	-
3	Socialization – Definition, Influence, of Social Factors, on Personality,	1	
3	Socialization – Definition, influence, of Social Factors, on Fersonanty, Socialization in the Hospital & Rehabilitation of the patients.	1	-
4	Social groups-Concepts, Influence of formal & informal groups of Health	2	-
	& Diseases.		
5	Community Role- in Rural & Urban communities in Public Health, in determining Beliefs, Practices & Home Remedies in Treatment.	2	-
6	Social problems of the Disabled-Consequences of the following social	1	_
	problems in relation to sickness disability, remedies to prevent these	1	
	problems in relation to steamess distantly, remedies to prevent these problems		
	Population Explosion		
	• Poverty & Unemployment		
7	Social Security & Social Legislation in relation to the Disabled	1	_
•	ble to Know		
8	Role of Primary & Secondary Groups in the Hospital & Rehabilitation	2	_
	Setting.	_	
9	Family-Influence on human personality, Individual Health, Family &	1	-
	Nutrition, Effects of Sickness on Family Psychosomatic Diseases & Family		
10	Culture-Components Impact on Human Behaviour Cultural Meaning of	2	-
	Sickness, Response to Sickness & Choice of Treatment		
11	Caste Systems-Features of Modern Cast Systems & its Trends, Social change	1	-
	factors-Human Adaptation, Stress, Deviance, Health Program, Role of Soci		
	Planning in the improvement of Health & in Rehabilitation		
12	Social Control – Definition, Role of norms, Folkways, Customs, Morals,	1	-
	Religion, Law & other means of social controls in the regulation of		
	Human Behavior, Social Deviance & Disease		
13	Prostitution, Alcoholism, Beggary, Problems of Women in Employment,	2	-
	Role of a Social Worker.		
	Know		
14	Role of Culture as Social consciousness in moulding the Perception of	1	-
	Reality, Culture induced Symptoms & Diseases, Sub-Culture of Medical		
1.5	Workers  Social mobile as of the Disabled Consequences of the following social	1	
15	Social problems of the Disabled-Consequences of the following social	1	-
	problems in relation to sickness disability, remedies to prevent these		
Topic	problems – Juvenile delinquency  C. ENVIRNOMENTAL SCIENCES	Цо	ırs of
Sr.No.	C. ENVINNOIMENTAL SCIENCES		//learning
51.110.		$\overline{}$	Practical
1	Must Know:	1	- actical
1	Multidisciplinary nature of environmental studies	1	=
	Definition, scope and importance, Need for public awareness. III		
2	Natural Resources		
-	Must Know:	1	_
	ATAMUS ARESUTT 9		

5	<ul> <li>Biogeographically classification of India</li> <li>Value of biodiversity: consumptive use, productive use, social, ethical, aesthetic and option values</li> <li>Environmental Pollution</li> <li>Must Know</li> <li>Definition, Cause, effects and control measures of: -</li> <li>Air pollution, Water pollution</li> </ul>	3	3
5	<ul> <li>Value of biodiversity: consumptive use, productive use, social, ethical, aesthetic and option values</li> <li>Environmental Pollution</li> </ul>	3	3
5	<ul> <li>Value of biodiversity: consumptive use, productive use, social, ethical, aesthetic and option values</li> </ul>	3	3
	• Value of biodiversity: consumptive use, productive use, social, ethical,		
	D: 1: 11 1 :0: .: CX 1:		
	Nice to know	1	1
	biodiversity.		
	• Conservation of biodiversity: In-situ and Ex-situ conservation of		
	• Endangered and endemic species of India		
	conflicts.		
	<ul> <li>Threats to biodiversity: habitat loss, poaching of wildlife, man-wildlife</li> </ul>		
	Hot-sports of biodiversity.		
	<ul> <li>India as a mega-diversity nation V</li> </ul>		
	<ul> <li>Biodiversity at global, National and local levels.</li> </ul>		
	• Introduction – Definition: genetic, species and ecosystem diversity.		<u> </u>
4	Biodiversity and its conservation  Must Know	2	2
4	Ecological succession.  Piodiversity and its conservation.		
	• Energy flow in the ecosystem.		
	Producers, consumers and decomposers.  The state of		
	• Structure and function of an ecosystem.		
	• Concept of an ecosystem. IV		
	Nice to know	1	-
	Food chains, food webs and ecological pyramids.		
	Aquatic ecosystems (ponds, streams, lakes, rivers, oceans, estuaries)		
	Forest ecosystem, Grassland ecosystem, Desert ecosystem		
	following ecosystem :-		
	• Introduction, types, characteristic features, structure and function of the		
	Must Know	1	-
3	Eandsides, son erosion and desertification.  Ecosystems		
	• Land resources: Land as a resource, land degradation, man induced Landslides, soil erosion and desertification.		
	problems, water Logging, salinity, case studies.		
	and overgrazing, effects of modern agriculture, fertilizer-pesticide		
	• Food resources: World food problems, changes caused by agriculture		
	tribal people		
	studies. Timber extraction, mining, dams & their effects on forest &		
	• Forest resources: Use and over-exploitation, deforestation, case		
	• Natural resources and associated problems.		
	• Renewable and non-renewable resources		
	Desirable to know	1	-
	• Equitable use of resources for sustainable lifestyles.		
	• Role of an individual in conservation of natural resources.		
	• Energy sources, use of alternate energy sources. Case studies.		
	• Energy resources: Growing energy needs, renewable &non-renewable		
	extracting and using mineral resources, case studies.		
	<ul> <li>Mineral resources: Use and exploitation, environmental effects of</li> </ul>		
	• Water resources: Use & over-utilization of surface & ground water, Floods, drought, conflicts over water, dams-benefits and problems.		

	NT-111111111		
	Noise pollution, Thermal pollution, Nuclear hazards		
	• 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.		
6	Social Issues and the Environment		
	Must 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	1	2
	• Water conservation, rain water harvesting, watershed management		
	From Unsustainable to Sustainable development		
	Urban problems related to energy		
	• Resettlement and rehabilitation 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 Know		
	Population growth, variation among nations.		
	Population explosion – Family Welfare Program. VII		
	• Environment and human health.		
	Human Rights, Value Education.		
	HIV/AIDS.		
	Women and Child Welfare.		
	<ul> <li>Role of Information Technology in Environment and human health.</li> </ul>		
	Case Studies.		
8			48
ð	SPT	-	48

### Text books:

I CAL DO	/1L/)
Sr.No.	Title
1	Park 's Textbook of Preventive & Social Medicine – K Park
2	Textbook of Preventive & Social Medicine – P. K. Mahajan & M. C. Gupta
3	Textbook for environment studies for UGC – Erach Bharucha

# SCHEME OF EXAMINATION

	Written	Total
IA	Final exam	Final exam
20	80	100

#### **Periodical Examination:**

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

# **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

Sec A	Q.1. MCQs(10 community+5 Sociology+ 5 Env.Sci)	20x1=20 marks
Sec B	Q.2. Short answer questions (any 5 out of 6)	5x3=15 marks
Community Medicine	Q.3.Short answer questions (any 3 out of 4)	3x5=15 marks
Sec C	Q.4.Short answer questions (any 5 out of 6) (Sociology)	5x3=15 marks
Sociology & Env.Sci.	Q.5.Short answer questions (any 3 out of 4) (Env.Sci.)	3x5=15 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 & should be submitted before the preliminary examination of the semester. It is the responsibility of 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

# $\boldsymbol{SEMESTER-V}$

			Hours			Hrs/Wk				Credits				Evaluation Pattern					
Course	Course (Subject)													Written		Total	Pra	ctical	Total
Code		Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam
PT- 501	Orthopaedic & Traumatology	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			
502	Neurology (Including Paediatrics, Psychiatry)	64	32	48	144	4	2	3	9	4	1	1	6	20	80	100			1
503	Physical and Functional Diagnostics Skills	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
	Obstetrics and Gynaecology	32	32	48	112	2	2	3	7	2	1	1	4	10	40	50			1
	Total	240	192	240	672	15	12	15	42	15	6	5	26	<b>70</b>	280	350	20	80	100

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

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	Course Title :- Orthopaedics and Traumatology																	
Course Code:- PT 501 Course Credit for Orthopaedics and Traumatology																		
Hours Hrs/Wk Credits Evaluation Page											Patter	n						
										Cuius		Written				ractical	Total	
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	ΙA	Fina	l Final	
64	32	48	144	4	2	3	9	4	1	1	6	20	exam 80	exam 100		exar	n exam	
04	32	1 40	144	4		J	)					20	80	100				
~~	Course Outcomes									l I	Mapped							
CO		At the end of the course, the learner should be able to:													Program			
No.															Outcomes			
501.1		Discuss the Patho-physiology, clinical manifestations & conservative/Surgical												P	PO1, PO2			
				f vari	ous t	rauma	itic &	& colo	d cas	ses of t	he M	uscu	lo-skel	etal				
		Conditions.																
501.2	, ,	Discuss the clinical manifestations, complications & management of congenital													l   P	PO1, PO2		
	an	and acquired deformities.													D	01 000		
	Do	Desforms a divided exemination & intermed findings of many settings of														PO1, PO2, PO3, PO5,		
501.3		Perform a clinical examination & interpret findings of preoperative cold cases & post- operative cases.															PO5, PO5, PO7,	
		& post-operative cases.												1	PO9			
	Re	ad & i	nterpi	et sal	ient	featur	es of	f X-ra	y of	the sp	ine &	exti	emities	and		P	PO1, PO2,	
501.4															ies		PO3, PO5,	
	pe	Correlate with the clinical findings and also pathological/ biochemical studies pertaining to Orthopaedic Conditions.														P	PO6, PO9	
Top	ic	Course Content													Hours of			
Sr.N	lo													<mark>aching/learning</mark>				
								<b>Theor</b>	neory <mark>Practical</mark>									
	st Kn																1	
1.		<ul><li>Introduction</li><li>Introduction to orthopaedics.</li></ul>											3	-				
								hones	dia		_							
		<ul> <li>Clinical examination in an Orthopaedic patient.</li> <li>Common investigative procedures.</li> </ul>																
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	• 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 & symptoms, management		
	(conservative and operative).		
3.	Fractures and Dislocations of Upper Limb	4	-
	Fractures of Upper Limb - causes, clinical features, mechanism of injury,		
	complications, conservative & surgical management of the following:		
	Fractures of clavicle and scapula.		
	• Fractures of greater tuberosity and neck of humerus, shaft of humerus.		
	Supracondylar fracture of humerus.		
	• Fractures of capitulum, radial head, olecranon, coronoid & 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, Bennett's fracture		
	Fracture of the metacarpals& phalanges (Proximal &middle)		
	Dislocations of Upper Limb :		
	Mechanism of injury, clinical feature, complications, conservative		
	management, surgical management of following dislocation:		
	➤ Anterior dislocation of shoulder		
	➤ Recurrent dislocation of shoulder		
	➤ Posterior dislocation of shoulder		
	➤ Posterior dislocation of elbow		
4.	Fracture of Spine	_	
	• Fracture of Cervical Spine –	4	
	Mechanism of injury, clinical feature, complications (quadriplegia)		
	Management- immobilization (collar, cast, brace, traction),		
	Management for stabilization, management of complication (bladder		
	and bowel, quadriplegia)		
	Clay shoveller's fracture, Hangman's fracture		
	Fracture odontoid & atlas		
	• Fracture of Thoracic and Lumbar Regions- Mechanism of injury, clinical		
	features, conservative and surgical management of common fractures		
	<ul><li>around thoracic and lumbar regions.</li><li>Fracture of coccyx.</li></ul>		
	Fracture of Coccyx.     Fracture of Rib Cage-Mechanism of injury, clinical features,		
	management Cage-Wechanishi of injury, chinical features,		
5.	Fractures and Dislocations of Lower Limb	4	
<i>J</i> .	Causes, clinical features, mechanism of injury, complications, conservative	_	
	and surgical management of the following fractures:		
	Fracture of pelvis.		
	Fracture of femur- neck, trochanters, shaft, Supracondylar fracture and		
	fractures condyles of femur.		
	Fracture of patella.		
	Fractures of tibial condyles		
	Both bones fracture of tibia and fibula.		
	Maisonneuve's fracture.		
	Bimalleolar fracture, Trimalleolar fracture, Pott's fracture (Dupuytren's)		
	fracture)		
	Fracture calcaneum, Fracture of talus.		
	<ul> <li>Fracture carcaneum, Fracture of talus.</li> <li>Fracture of metatarsals- stress fractures, Jones fracture.</li> </ul>		
	Tracture of inclatarsals- stress fractures, jones fracture.		

	• Fracture of phalanges.		
	Dislocations of Lower Limb		
	Mechanism of injury, clinical features, complications, management of the		
	following dislocations of lower limb.		
	Dislocation of hip – Anterior, Posterior and Central     Dislocation of metalls		
	Dislocation of patella.		
	Recurrent dislocation of patella.		
6.	Diseases of Bones and Joints		
	Causes, Clinical features, Complications, Management- medical and	4	
	surgical of the following conditions:	4	
	Infective: Osteomyelitis, TB Spine and other major joints     Detter Silver of Conicol Englishment Assessed a Normalian Silver of Conicol Englishment (Spine Silver of Conicol Englishment)		
	Perthes, Slipped Capital Femoral Epiphysis , Avascular Necrosis		
	Metabolic: Osteoporosis, Osteopenia Osteomalacia, Rickets		
7.	Peripheral nerve injuries Mechanism, Clinical Features, Management and Complications	3	
0	T A		
8.	Deformities Clinical Factures Complications Medical and Surgical Management of the		
	Clinical Features, Complications, Medical and Surgical Management of the	2	
	Following Congenital and Acquired Deformities.		
	Congenital Deformities  CTEV		
	• CTEV		
	• CDH.		
	• Torticollis, 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		
9.	Inflammatory and Degenerative Conditions		
	Causes, clinical feature, complications, deformities, radiological features,		
	management- conservative and surgical for the following conditions:	2	
	Osteoarthritis	3	
	Rheumatoid arthritis		
	Ankylosing spondylitis		
	Gouty arthritis		
	Psoriatic arthritis		
	Hemophilic arthritis		
	Juvenile Rheumatoid Arthritis (Still's disease)		
	Charcot's joints		
10.	Soft Tissue Injuries		
	• 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.		
	<ul> <li>Contusions- quadriceps, guttear, carr, denoid etc.</li> <li>Tendon ruptures-Achilles, rotator cuff muscles, biceps, pectorals etc</li> </ul>		
11.	Regional Conditions	4	
11.	Definition, Clinical features and Management of the following regional	4	
	conditions:		
	• Shoulder: Periarthritic shoulder (adhesive capsulitis), Rotator cuff		
	tendinitis, Subacromial Bursitis		
	• Elbow: Tennis Elbow, Golfer's Elbow, Olecranon 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), Osgood Schlatter's		
	disease		
	Ankle and Foot: Ankle Sprains, Plantar Fascitis, Calcaneal Spur, Tarsal		
	Tunnel Syndrome, Achilles Tendinitis, Morton's Neuroma, Metatarsalgia		
12.	Amputations	3	
	• Definition		
	Levels of amputation of both lower and upper limbs		
	Indications, Complications, Management		
13.	Hand Injuries	2	
	Mechanism of injury, clinical features, and management of the following:		
	Crush injuries.		
	Flexor and extensor injuries.		
	Burn injuries of hand.		
14.	Cervical and Lumbar Pathology	3	
	Causes, clinical feature, patho-physiology, investigations, management-		
	Medical and surgical for the following:		
	Prolapsed interverbral disc (PIVD)		
	Spinal Canal Stenosis		
	Spondylosis (cervical and lumbar), Spondylolysis		
	Spondylolisthesis		
	Lumbago/ Lumbosacral strain		
	Sacralisation, Lumbarisation, Hemivertebra		
	Coccydynia		
15	Orthopedic Surgeries	2	
	Indications, Classification, Types, Principles of Management of the		
	following Surgeries:		
	• Arthrodesis		
	Arthroplasty (partial and total replacement)		
	• Osteotomy		
	• External fixators		
	• Spinal stabilization surgeries (H-rod, Luque rod, Steffi plating) etc.		
16	Desirable to Know		
	Bone tumors: classification, clinical features, management	1	
	• Re-constructive surgeries in Polio & cerebral palsy (bone & soft tissues)	3	
	• Syndromes-Causes, Clinical features, complications, management-	2	
	conservative and surgical of the following:	3	
	Cervico brachial syndrome, Costo clavicular syndrome		

	Ι		
	Thoracic outlet syndrome		
	Vertebro- basilar syndrome		
	Scalenus syndrome		
	Levator scapulae syndrome		
	Piriformis syndrome.	_	
	Connective Tissue Disorders	2	
	Systemic Lupus Erythematosis		
	Scleroderma, Dermatomyositis		
	Mixed connective tissue Disease (MCTD)		
17.	Nice to Know	6	
	Arthrogryposis multiplex congenita (amyoplasia congenita).		
	Limb deficiencies- Amelia and Phocomelia.		
	Osteogenesis imperfecta (fragile ossium)		
	Klippel feil syndrome.		
	Clay shoveller's fracture		
	• Arthrodesis		
18	CLINICAL		32
	Independent Clinical Orthopaedic evaluation, presentation & recording of:		
	• 1 case of acute soft tissue injury [including nerve injury],		
	• 2 cases of infections of bones and joints		
	• 2 cases of degenerative arthritis of extremity joints,		
	• 2 cases of degenerative arthritis of spine, chronic backaches		
	• 1 case of acute P.I.D		
	• 1 post operative cases of fractures of extremities		
	• 1 case of traumatic paraplegia/quadriplegia		
	<b>Observation</b> : At least 2 surgeries of fracture internal fixation,		
	one knee/hip replacement & Re-constructive surgery of the tendons		
19	SCT		48

Sr.No.	Title
1	Apley's System of Orthopaedics by Louis Soloman
2	Outline of Fractures - John Crawford Adams.
3	Outline of Orthopaedics - John Crawford Adams.
4	Essentials of Orthopaedics- Maheshwari.
5	Textbook of Orthopaedics and Traumatology— M.N.Natarajan
6	Essentials of Orthopedic for physiotherapist – John Ebnezar

## **SCHEME OF EXAMINATION**

Written		Total
IA Final exam		Final exam
20 80		100

# **Periodical Examination:**

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

## Preliminary Examination / University (Final) Examination

Written Examination (80 marks)

Sec A	Q.1.MCQs	20x1=20
Sec B	Q.2. Short notes (answer any 5 out of 6)	5x3=15
Sec B	Q.3. Short answer questions (answer any 3 out of 4)	3x5=15
Sec C	Q.4. Long Answer Questions(compulsory)	1x15=15
Sec C	Q.5. 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 in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of student to submit the file(s) to the teacher before the examination.

## **Internal Assessment Marks: Theory: -**

Periodical exam = 20 marks Prelim exam = 80 marks

The total shall be Converted to 20 marks (100/5=20)

#### **Course Title :- Neurology(Including Paediatrics and Psychiatry) Course Code:- PT 502** Course Credit for Neurology(Including Paediatrics and Psychiatry) Hrs/Wk Credits Hours Evaluation Pattern Written Total Practical Total SC SCT SCT Th Tot Pr Tot Pr Tot Pr Lec Lec Final Final Final Final Т ΙA exam exam exam exam 64 32 48 144 4 2 3 9 4 20 80 100 **Course Outcomes Mapped** CO At the end of the course, the learner should be able to: **Program** No. Outcomes Neurology Describe etiology and pathophysioplogy, clinical features, signs and symptoms PO1, PO2 of different adult neurological conditions, such as Cerebro-Vascular Accidents, 502.1 Movement disorder, polyneuropathy, Motor Neuron Disease, muscle diseases, Multiple sclerosis, Infections of brain and spinal cord, spinal cord disorder etc. PO1, PO2, PO3, PO5, Demonstrate skills of taking history, evaluation, presentation, and 502.2 documentation. PO6, PO7, PO9 PO1, PO2, 502.3 Interpret X ray, MRI, Evoked Potentials, LP, CSF, EMG, NCV etc PO3, PO6, PO7, PO9 Understand adult conditions with conservative and surgical treatment PO1, PO2 502.4 approaches. **Paediatrics** Describe intra-uterine development of the foetus. PO<sub>1</sub> 502.5 Describe normal development & growth of a child, importance of Immunization PO1 502.6 & breast-feeding & psychological aspect of development. Identify the etiology, pathophysiology, clinical features, signs and symptoms, of PO1. PO2 502.7 various neurological, orthopedic, cardio respiratory conditions. PO1, PO2, 502.8 Manage pediatric population with proper care and precautions. PO3, PO5 Acquire skill of clinical examination of a neonate /child with respect to PO1, PO2, 502.9 neurological, Musculoskeletal, Respiratory & Cardiovascular, Nutritional PO3, PO5, conditions. **PO6** Describe different approaches of conservative and surgical management of PO1. PO2 502.10 various Musculoskeletal, Neurological, cardio respiratory pediatric conditions. **Psychiatry** 502.11 Describe various mental disorders PO<sub>1</sub>

	Course Content			
Topic	A. Neurology	Hours of		
Sr.No.		teaching	teaching/learning	
		Theory	<b>Practical</b>	
1	Cerebro -vascular accidents	2	-	
	Define: Stroke, TIA, RIA and Stroke in evolution, Lacunar infarct. Risk			
	Factors, Causes, Investigations, Differential Diagnosis, Management-			
	Medical & Surgical, Complications			
2	Movement Disorders	2	-	
	Definition, etiology, risk factors, pathophysiology, classification,			
	clinical signs & symptoms, investigations, differential diagnosis,			
	medical management, surgical management and complications of			

502.12 Describe Psychopharmacological treatment

PO<sub>1</sub>

	C. Harrison diagrams		
	following disorders:		
	Parkinson's disease		
	Dystonia, Chorea		
	Ballismus, Athetosis		
	• Tics, Myoclonus		
	Wilson's disease		
3	Polyneuropathy	2	-
	Classification of Polyneuropathies		
	• Causes, clinical features, management of GBS, Diabetic and		
	Alcoholic Neuropathy		
4	Disorders & Diseases of muscle	2	-
	Classification, etiology, signs & symptoms, investigations, imaging		
	methods, Muscle biopsy, genetic counselling &management of muscle		
	diseases emphasis on :		
	Muscular dystrophy and Myotonic dystrophy		
5	Motor neuron diseases	2	-
	Etiology, pathophysiology, classification, clinical signs & symptoms,		
	investigations, differential diagnosis, medical management, and		
	complications of following disorders:		
	Amyotrophic lateral sclerosis     Spire I was a plan stranker.		
	Spinal muscular atrophy  Here diagraphs the management of the second secon		
	Hereditary bulbar palsy		
	Neuromyotonia		
	Post-irradiation lumbosacral polyradiculopathy		
6	Multiple Sclerosis	1	-
	Etiology, pathophysiology, classification, clinical signs & symptoms,		
	investigations, differential diagnosis, medical management, and		
7	complications Infections of brain and spinal cord	3	
/	Etiology, pathophysiology, classification, clinical signs & symptoms,	3	-
	investigations, differential diagnosis, medical management, surgical		
	management and complications of following disorders:		
	Meningitis, Encephalitis		
	Neurosyphilis, HIV infection		
	Herpes, Leprosy, Tetanus		
	Poliomyelitis and Post-polio syndrome		
8	Higher cortical, neuro psychological and neurobehavioral disorders	2	+
J	• Epilepsy, Physiology, classification, clinical features, investigations,	_	
	medical& surgical management of following disorders – Non-		
	epileptic attacks of childhood, Epilepsy in childhood, Seizures and		
	Epilepsy syndromes in adult.		
	• Classification & clinical features of Dementia, Alzheimer's disease.		
	• Causes & investigations of Coma, criteria for diagnosis of Brain death.		
9	Cerebellar & Co-ordination disorders	1	-
	• Congenital Ataxia	•	
	• Friedrich's Ataxia		
	• Tabes dorsalis		
10	Disorders of lower cranial nerves &Special Senses	2	<del> </del> -
10	Etiology, clinical features, investigations, and management of following	2	
	disorders		
	Trigeminal neuralgia		
	• Lesions in facial nerve: Facial palsy, Bell's palsy, Hemi facial spasm		
	Glossopharyngeal neuralgia		
	- Grossopharyngear neurarga		

П	Y ' CY O ' 1 YY ' '		
	• Lesions of Vagus, Spinal accessory, Hypoglossal nerve		
	Disorders of special senses		
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 of Spinal cord disorders, etiology, risk		
	factors, pathophysiology, classification, clinical signs & symptoms,		
	investigations, differential diagnosis, medical management, surgical		
	management and complications of following disorders:		
	Spinal Cord Injury		
	• Epidural abscess		
	• Transverse myelitis		
	• Spina bifida		
	• Conus medullaris syndrome		
	Bowel & Bladder Dysfunction		
13	Head injury	2	
13	Etiology, classification, clinical signs & symptoms, investigations,	2	_
	differential diagnosis, medical management, surgical management and		
1.4	complications.	1	
14	Brain tumors and spinal tumors  Classification alinical factures investigations medical and surgical	1	-
	Classification, clinical features, investigations, medical and surgical		
D : 1	management.		
	Disorders of Autorion House Call	1	
15	Disorders of Anterior Horn Cell	1	-
16	Dysfunction of Autonomous Nervous System	1	-
17	Neurological Investigations- X-Ray, CT, MRI, Evoked	2	
	Potentials, LP,		
	CSF, EMG, NCV, EEG		
18	Cerebrospinal Fluid, its Formation, Absorption &Status in Various	2	
	Disorders		
19	Nice to Know	1	
	Circulation of the brain & spinal cord		
20	CLINICAL		20
	History, Evaluation, presentation and recording of cases in		
	Central nervous system – 3 cases		
	Peripheral nervous system- 2 cases		
21	SCT		23
Topic	B. Paediatrics	Hon	rs of
Sr.No.	272 47344773		/learning
22,101		Theory	Practical Practical
Must I	Znow	111001	ructicui
1	Normal development & growth	1	T _
2	Breast feeding and immunization	1	-
3		2	-
3	Perinatal, Postnatal problems and management (Birth injuries)	2	_
1	Neck, shoulder dystocia, Brachial plexus injury, Fractures	1	
4	Congenital abnormalities and its 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		
7	management and complications	1	
7	Respiratory conditions of childhood:	1	-
0	Pneumonia – Bacterial & Tubercular, Empyema, Asthma,		
8	Orthopedic and Neurological disorders in childhood, Clinical	2	-
	features and management;		
	Cerebral palsy		
	Meningitis, Encephalitis		
	Hydrocephalus		
	Ataxia		
	Arnold-Chiari malformation, Dandy walker syndrome		
	Basilar impression & Cerebral malformations		
	Down's syndrome		
	Floppy infant		
	• GBS		
	Poliomyelitis		
	• Epilepsy		
	Neural tube defects		
	Muscular dystrophies		
	• Neuropathy	1	
9	Nutritional disorders of childhood	1	-
	Rickets and scurvy, PEM (Kwashiorkar and Marasmus)		
10	Infections – Congenital & Neonatal, Mental retardation	1	-
11	Coma in Paediatrics and Acute rheumatic fever	1	-
12	Desirable to know:	4	
	Normal intra-uterine development of foetus		
	• Sensory disorders – problems due to loss of vision and hearing		
	Learning and behavioural problems - Attention Deficit		
	Hyperactivity Disorder & Autism		
	Bronchiolitis & Wheezy baby		
13	Nice to know:	2	-
	Educational delay		
	Clumsy Child		
	1		
1.4	Challenging behaviour of child		10
14	Clinical		12
	Normal & abnormal reflexes in neonate & child		
	Examination of the nervous system		
	Examination of respiratory system		
	Examination of cardiovascular system		
15	SCT		15
Topic	C. Psychiatry	Hou	ırs of
Sr.No.	C. I sychiati y	teaching	/learning
		Theory	Practical
Must F	Know		
1.	Psychiatric History, classification and mental status examination	1	-
2.	Organic mental disorders (delirium, dementia, organic amnestic	1	_
	syndrome and other organic mental disorders)		
3.	Mood disorders (manic, depressive episodes, bipolar mood disorders)	1	_
4.	Neurotic stress related and somatoform disorders (Anxiety disorder,	1	_
<b>+</b> .	phobic anxiety disorders, obsessive compulsive disorders, adjustment	1	_
	disorders, dissociative disorders, somatoform disorders post-traumatic stress Disorder		
	SHESS DISOLACI		

5.	Schizophrenia, delusional disorders and schizoaffective disorders	1	-
6.	Substance use disorders, sexual disorders, sleep & eating disorders	1	-
7.	Child psychiatry (mental retardation, developmental disorders,	1	-
	attention deficit, hyperkinetic disorder, enuresis, conduct disorders)		
8.	Disorders of adult personality and behavior (specific personality	1	-
	disorders, habit and impulse disorders, gender identity disorders)		
9.	Stress, psychosomatic disorders, suicide,	1	-
	DESIRABLE TO KNOW:		
	psychiatric emergencies and their management		
10.	Psychopharmacological management, Psychiatric History,	1	-
	classification and mental status examination		
	NICE TO KNOW:		
	Electroconvulsive therapy and other biological methods of treatment.		
13.	SCT		10

**Text Books for Neurology** 

Sr.No.	Title	
1	Davidson's Principles and Practice of Medicine	
2	API Textbook of Medicine	
3	Neurology & Neurosurgery Illustrated: Lindsay	
4	Practical medicine – P J Mehta	

**Reference Books for Neurology** 

Sr.No.	Title
1	Brain and Bannister's Clinical Neurology
2	Adams and victors –Principles of neurology
3	Brains Diseases of Nervous System

## **Text Books for Paediatrics**

Sr.No.	Title
1	Essentials of Paediatrics – by O. P. Ghai - Inter Print publications

**Text Books for Psychiatry** 

Sr.No.	Title
1	A short book of Psychiatry – 3 <sup>rd</sup> edtn by Ahuja – Jaypee brother medical publishers
2	. Handbook of Psychiatry Shah L.P

## **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
20	80	100

## **Periodical Examination:**

• Written Examination: -20 MCQs (10 Neurology+5 Paediatric+ 5Psychiatry) for 20 marks, 20mins.

## **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

Sec A	Q.1. MCQs (10 Neurology+5 Paediatric+ 5Psychiatry)	20x1=20
Sec B	Q.2. Short Notes (Answer any 5 out of 6)	5x3=15
Neurology	Q.3. Short answer questions (Answer any 3 out of 4)	3x5=15
Sec C	Q.4. Short Notes (any 5 out of 6) – on <b>Paediatric</b>	5x3=15
	Q.5. Short Notes (any 5 out of 6) – on <b>Psychiatry</b>	5x3=15

## **SUPERVISED CLINICAL TRAINING:**

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of 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 Converted to 10 marks (100/5=20)

	Course Title + Physical and Functional Diagnostic Skills																
	Course Title :- Physical and Functional Diagnostic Skills Course Code:- PT 503																
Course Code:- PT 503  Course Credit for Physical and Functional Diagnostic Skills																	
Hours Hrs/Wk Credits Evaluation Pattern																	
I	Hou			-	1115/	VVK	1		CI	cuits		W	ritten	Total		actical	Total
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	IA	Final	Final
													exam	exam		exam	exam
80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
CO							C	ourse	Out	comes	8				3.4	1.0	
CO		At	the er	nd of	the	cour	se, t	he lea	rne	r shou	ld be	able	e to:				ogram
No.	Dag	م ماند م		1 1		1		P-				1	ania1			Outcon	
503.1		cribe r					•					-		~~~	J	PO1, PO	<i>J</i> 2
303.1	_			•		•	•	ologic	iai, s	ociai a	aspec	ts an	d chang	ges			
	happening due to aging process.  Identify and document common Neurological, Musculoskeletal, PO1, PO2																
503.2	cardiovascular, and Pulmonary dysfunctions.																
	Assess pain, altered muscle power mobility, measure limb length and PO1, PO2, PO3,									PO3							
503.3	hand functions.									PO5, PO7							
502.4	Analyse and demonstrate various postures and gaits in adult and										PO1, PO2, PO3,						
503.4	paediatric conditions.									PO5, PO6							
503.5	Assess patients according to their ADLs.									PO1, PO2, PO3							
503.6	Demonstrate exercise tolerance tests.							PO1, PO2, PO3,									
								PO5, PO6, PO7									
503.7	Do functional diagnosis as per International Classification of Function.								PO1, PO								
503.8	Demonstrate skills of using Electro diagnostic currents for sensory and						and	PO	1, PO2,	PO3							
	motor dysfunction. Interpret Normal and Abnormal EMG, Nerve Conduction studies, Late PO1, PO2						~										
503.9	Interpret Normal and Abnormal EMG, Nerve Conduction studies, Late responses.								Late	J	PO1, PO	<b>J</b> 2					
503.10	Demonstrate mobilization of joints on human models.									DO	1 DO2	DO2					
303.10	J								1, PO2, 1, PO2,								
				trate Neuro-therapeutics skills like sensory, motor, ation, balance on human models.									PO	1, PO2,	, PO3		
										VΔR	G F	CG e	etc. use	d	1	PO1, PO	72
503.12		function		_		C 21-	ıuy,		, 110	v, 11D	, O, L		ic. usc	٠	,	. 01,11	<i>92</i>

Topic	Course Content	Hou	rs of			
Sr.No		teaching/learning				
		Theory	<b>Practical</b>			
1	ASSESSMENT OF MUSCULOSKELETAL FUNCTION	15	34			
	SOAP Format of Assessment					
	Chief Complaint					
	History Taking					
	Assessment of Pain: Intensity & quality of pain					
	Assessment of Posture					
	Assessment of Gait					
	Limb Length and Girth measurement					
	Tightness Testing					
	• Selective Tissue Tension Testing (Contractile & Non contractile					
	tissues) & Examination of joint integrity:					
	➤ Active movement					
	➤ Passive movement:					
	➤ Assessment of accessory movement & End feel					
	Resisted isometric contraction					
	➤ Assessment of Muscle Strength (Group and Individual)					
	Special Tests					

Myofascial assessment Acute & Chronic muscle strain Outcome Measures Punctional Diagnosis using ICF Interpretation of X-ray of Extremities & Spine  ASSESSMENT OF HAND Sensations Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DVSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. Exercise Toler		I VIVOI ASCIAL ASSESSITICITE		
Outcome Measures Functional Diagnosis using ICF Interpretation of X-ray of Extremities & Spine  ASSESSMENT OF HAND Sensations Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Ahnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance- six minutes' walk test, Bruce's protocol.  X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF DESITY Pathophysiology				
Functional Diagnosis using ICF Interpretation of X-ray of Extremities & Spine  Sensations Sensations Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance- six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF OBESITY Pathophysiology				
Interpretation of X-ray of Extremities & Spine  ASSESSMENT OF HAND  Sensations Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance- six minutes' walk test, Bruce's protocol. Examination & Pripheral Arterial & Venous circulation ASSESSMENT OF OBESITY Pathophysiology				
2 ASSESSMENT OF HAND 5 5 5  • Sensations • Mobility of joints • Strength • Special Tests for hand • Hand Function – Precision and Power grips  3 ASSESSMENT OF NEUROMUSCULAR FUNCTION • Higher functions • Cranial nerves • Sensations & sensory organization (Dermatome, Myotome & Sclerotome) • Joint mobility • Tone • Voluntary control, Muscle Strength • Trick movements • Reflexes-Superficial & Deep • Co-ordination, Balance • Endurance • Posture • Gait • Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index • Functional Diagnosis using ICF  4 ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION • Demographic Data • Chief complaint • HOPI, History of Symptoms • Past Relevant History • Vital Parameters, Grades of Dyspnoca • Examination & Palpation: Head, Neck, Chest and Extremities • Measurements: Chest Expansion, symmetry of chest movement • Auscultation: Normal and Abnormal Breath Sounds • Special tests: Breath Holding Test etc. • Outcome Measures & Investigations:  > BORG scale for Rating of Perceived Exertion (RPE)  > Exercise Tolerance-six minutes' walk test, Bruce's protocol.  > X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)  > Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY • Pathophysiology				
Sensations Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION If thigher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. Extra Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF OBESITY Senatory Pathophysiology	2		~	_
Mobility of joints Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Selerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  SASSESSMENT OF OBESITY Pathophysiology	2		3	3
Strength Special Tests for hand Hand Function – Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Fests for Peripheral Arterial & Venous circulation  SASSESSMENT OF OBESITY Pathophysiology				
Special Tests for hand Hand Function — Precision and Power grips  ASSESSMENT OF NEUROMUSCULAR FUNCTION Higher functions Cranial nerves Sensations & sensory organization (Dermatome, Myotome & Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoca Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. Exercise Tolerance-six minutes' walk				
Hand Function - Precision and Power grips   3   ASSESSMENT OF NEUROMUSCULAR FUNCTION   15   30     Higher functions   Cranial nerves   Sensations & sensory organization (Dermatome, Myotome & Sclerotome)   Joint mobility     Tone   Voluntary control, Muscle Strength   Trick movements   Reflexes-Superficial & Deep   Co-ordination, Balance     Endurance   Posture   Gait   Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index     Functional Diagnosis using ICF   ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION     Demographic Data   Chief complaint   HoPl, History of Symptoms   Past Relevant History     Vital Parameters, Grades of Dyspnoea   Examination & Palpation: Head, Neck, Chest and Extremities   Measurements: Chest Expansion, symmetry of chest movement   Auscultation: Normal and Abnormal Breath Sounds   Special tests: Breath Holding Test etc.     Outcome Measures & Investigations:   BORG scale for Rating of Perceived Exertion (RPE)   Exercise Tolerance-six minutes' walk test, Bruce's protocol.   X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)   Tests for Peripheral Arterial & Venous circulation   ASSESSMENT OF OBESITY   5   5				
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Sclerotome) Joint mobility Tone Voluntary control, Muscle Strength Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF OBESITY Standard Assessment of Obesity Pathophysiology				
Joint mobility     Tone     Voluntary control, Muscle Strength     Trick movements     Reflexes-Superficial & Deep     Co-ordination, Balance     Endurance     Posture     Gait     Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index     Functional Diagnosis using ICF     ASSESSMENT OF CARDIO VASCULAR & PULMONARY     DYSFUNCTION     Demographic Data     Chief complaint     HOPI, History of Symptoms     Past Relevant History     Vital Parameters, Grades of Dyspnoea     Examination & Palpation: Head, Neck, Chest and Extremities     Measurements: Chest Expansion, symmetry of chest movement     Auscultation: Normal and Abnormal Breath Sounds     Special tests: Breath Holding Test etc.     Outcome Measures & Investigations:     BORG scale for Rating of Perceived Exertion (RPE)     Exercise Tolerance- six minutes' walk test, Bruce's protocol.     X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)     Tests for Peripheral Arterial & Venous circulation     ASSESSMENT OF OBESITY     Pathophysiology				
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Trick movements Reflexes-Superficial & Deep Co-ordination, Balance Endurance Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance-six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY 5 5		• Tone		
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• Endurance     • Posture     • Gait     • Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index     • Functional Diagnosis using ICF  4 ASSESSMENT OF CARDIO VASCULAR & PULMONARY     • Demographic Data     • Chief complaint     • HOPI, History of Symptoms     • Past Relevant History     • Vital Parameters, Grades of Dyspnoea     • Examination & Palpation: Head, Neck, Chest and Extremities     • Measurements: Chest Expansion, symmetry of chest movement     • Auscultation: Normal and Abnormal Breath Sounds     • Special tests: Breath Holding Test etc.     • Outcome Measures & Investigations:		• Reflexes-Superficial & Deep		
Posture Gait Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance- six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF OBESITY Pathophysiology		• Co-ordination, Balance		
• Gait • Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index • Functional Diagnosis using ICF  4 ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION • Demographic Data • Chief complaint • HOPI, History of Symptoms • Past Relevant History • Vital Parameters, Grades of Dyspnoea • Examination & Palpation: Head, Neck, Chest and Extremities • Measurements: Chest Expansion, symmetry of chest movement • Auscultation: Normal and Abnormal Breath Sounds • Special tests: Breath Holding Test etc. • Outcome Measures & Investigations:  > BORG scale for Rating of Perceived Exertion (RPE) > Exercise Tolerance- six minutes' walk test, Bruce's protocol. > X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) > Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY  • Pathophysiology		• Endurance		
Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel index Functional Diagnosis using ICF  ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION  Demographic Data Chief complaint HOPI, History of Symptoms Past Relevant History Vital Parameters, Grades of Dyspnoea Examination & Palpation: Head, Neck, Chest and Extremities Measurements: Chest Expansion, symmetry of chest movement Auscultation: Normal and Abnormal Breath Sounds Special tests: Breath Holding Test etc. Outcome Measures & Investigations: BORG scale for Rating of Perceived Exertion (RPE) Exercise Tolerance- six minutes' walk test, Bruce's protocol. X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions) Tests for Peripheral Arterial & Venous circulation  ASSESSMENT OF OBESITY Pathophysiology		• Posture		
index • Functional Diagnosis using ICF  4 ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION • Demographic Data • Chief complaint • HOPI, History of Symptoms • Past Relevant History • Vital Parameters, Grades of Dyspnoea • Examination & Palpation: Head, Neck, Chest and Extremities • Measurements: Chest Expansion, symmetry of chest movement • Auscultation: Normal and Abnormal Breath Sounds • Special tests: Breath Holding Test etc. • Outcome Measures & Investigations:  > BORG scale for Rating of Perceived Exertion (RPE)  > Exercise Tolerance- six minutes' walk test, Bruce's protocol.  > X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)  > Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY  • Pathophysiology		• Gait		
index • Functional Diagnosis using ICF  4 ASSESSMENT OF CARDIO VASCULAR & PULMONARY DYSFUNCTION • Demographic Data • Chief complaint • HOPI, History of Symptoms • Past Relevant History • Vital Parameters, Grades of Dyspnoea • Examination & Palpation: Head, Neck, Chest and Extremities • Measurements: Chest Expansion, symmetry of chest movement • Auscultation: Normal and Abnormal Breath Sounds • Special tests: Breath Holding Test etc. • Outcome Measures & Investigations:  > BORG scale for Rating of Perceived Exertion (RPE)  > Exercise Tolerance- six minutes' walk test, Bruce's protocol.  > X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)  > Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY  • Pathophysiology		• Scales-Berg 's Balance, Ashworth, Glasgow Coma, MMSE, Barthel		
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<ul> <li>Demographic Data</li> <li>Chief complaint</li> <li>HOPI, History of Symptoms</li> <li>Past Relevant History</li> <li>Vital Parameters, Grades of Dyspnoea</li> <li>Examination &amp; Palpation: Head, Neck, Chest and Extremities</li> <li>Measurements: Chest Expansion, symmetry of chest movement</li> <li>Auscultation: Normal and Abnormal Breath Sounds</li> <li>Special tests: Breath Holding Test etc.</li> <li>Outcome Measures &amp; Investigations:         <ul> <li>BORG scale for Rating of Perceived Exertion (RPE)</li> <li>Exercise Tolerance- six minutes' walk test, Bruce's protocol.</li> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> </ul> </li> <li>5 ASSESSMENT OF OBESITY</li> <li>Pathophysiology</li> </ul>	4		15	20
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<ul> <li>HOPI, History of Symptoms</li> <li>Past Relevant History</li> <li>Vital Parameters, Grades of Dyspnoea</li> <li>Examination &amp; Palpation: Head, Neck, Chest and Extremities</li> <li>Measurements: Chest Expansion, symmetry of chest movement</li> <li>Auscultation: Normal and Abnormal Breath Sounds</li> <li>Special tests: Breath Holding Test etc.</li> <li>Outcome Measures &amp; Investigations: <ul> <li>BORG scale for Rating of Perceived Exertion (RPE)</li> <li>Exercise Tolerance- six minutes' walk test, Bruce's protocol.</li> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> </ul> </li> <li>ASSESSMENT OF OBESITY</li> <li>Pathophysiology</li> </ul>		Demographic Data		
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<ul> <li>Past Relevant History</li> <li>Vital Parameters, Grades of Dyspnoea</li> <li>Examination &amp; Palpation: Head, Neck, Chest and Extremities</li> <li>Measurements: Chest Expansion, symmetry of chest movement</li> <li>Auscultation: Normal and Abnormal Breath Sounds</li> <li>Special tests: Breath Holding Test etc.</li> <li>Outcome Measures &amp; Investigations: <ul> <li>BORG scale for Rating of Perceived Exertion (RPE)</li> <li>Exercise Tolerance- six minutes' walk test, Bruce's protocol.</li> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> </ul> </li> <li>ASSESSMENT OF OBESITY <ul> <li>Pathophysiology</li> </ul> </li> </ul>		-		
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<ul> <li>Special tests: Breath Holding Test etc.</li> <li>Outcome Measures &amp; Investigations:         <ul> <li>BORG scale for Rating of Perceived Exertion (RPE)</li> <li>Exercise Tolerance- six minutes' walk test, Bruce's protocol.</li> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> </ul> </li> <li>ASSESSMENT OF OBESITY         <ul> <li>Pathophysiology</li> </ul> </li> </ul>				
Outcome Measures & Investigations:     BORG scale for Rating of Perceived Exertion (RPE)     Exercise Tolerance- six minutes' walk test, Bruce's protocol.     X-ray Chest, ABG, PFT, ECG (Normal & variations in common pathologic conditions)     Tests for Peripheral Arterial & Venous circulation  5 ASSESSMENT OF OBESITY     S S  Pathophysiology				
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<ul> <li>Exercise Tolerance- six minutes' walk test, Bruce's protocol.</li> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> <li>ASSESSMENT OF OBESITY</li> <li>Pathophysiology</li> </ul>				
<ul> <li>X-ray Chest, ABG, PFT, ECG (Normal &amp; variations in common pathologic conditions)</li> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> <li>ASSESSMENT OF OBESITY</li> <li>Pathophysiology</li> </ul>				
pathologic conditions)  ➤ Tests for Peripheral Arterial & Venous circulation  5		-		
<ul> <li>Tests for Peripheral Arterial &amp; Venous circulation</li> <li>ASSESSMENT OF OBESITY</li> <li>Pathophysiology</li> </ul>		•		
5 ASSESSMENT OF OBESITY 5 5 • Pathophysiology				
	5		5	5
		• Pathophysiology		
Assessment of odesity – BIVII, Waist Hip Katio, Skin fold		• Assessment of obesity – BMI, Waist Hip Ratio, Skin fold		
measurement, Anthropometric measurements, Newer Methods		·		
Assessment of Fitness-Flexibility, Endurance and Agility				
6 Autonomy and individual responsibility, Consent 5	6		5	
		Autonomy and individual responsibility	2	

	neurological. cardiovascular and pulmonary system dysfunctions)		
8	SCT (includes documentation, interpretation, collection of materials for the below listed topics of all the patients including musculoskeletal,		96
0	Quality of life questionnaire  SCT (includes decomposite interpretation collection of materials)		07
	Peak Flow Meter     Continue of the conti		
	COPD questionnaire		
	• Shuttle walk /run test		
	• Tinnels sign		
	Ankle Brachial Index		
	Routine biochemical investigation		
	Demographic Data Collection		
	Nice to Know	8	
	Introduction of Electro diagnostic findings		
	Electrotherapeutic current for Pain assessment		
	GMFC,DGI		
	• Scales: FIM, ASIA, Fugel Meyer, RLA, STREAM, BOT,		
	Dyspnoea assessment		
	questionnaire, NPRS, Body Diagram		
	• Objective assessment & documentation of pain – VAS, Mc Gill's		
	patients		
	Observational Movement analysis & Analysis of Muscle Work on		
	• Assessment of swelling		
	Desirable to Know	12	
	Format – Any 3		
	2Dynamic Gait Index, Glasgow Coma, Barthel Index, STREAM		
	Neurological – Scales like Modified Ashworth, Berg 's Balance,		
	Exercise Tolerance Test-1 each		
,	• Cardio Vascular & Pulmonary – ABG, PFT, ECG, X-ray Chest,		
7	Documentation of following investigations		2
	<ul> <li>Categories of persons without the capacity to consent</li> <li>Obtaining consent for special categories in health care practice</li> </ul>		
	<ul> <li>Criteria for capacity to consent</li> <li>Categories of persons without the capacity to consent</li> </ul>		
	<ul> <li>Criteria for capacity to consent</li> </ul>	1	
	Persons without the capacity to consent	1	
	consent		
	Exceptional circumstances for the application of the principle of		
	Consent by individual, group and community		
	• Compare the provisions for consent in scientific research with those for medical interventions		
	Consent of subjects of scientific research.      Compare the provisions for consent in scientific research with those		
	Patient's right to refuse  Consent of subjects of scientific research		
	• Withdrawal of consent		
	• What is express consent?		
	• Prior, free & informed consent in patient treatment & handling		
	Purpose of the principle of consent		
	Consent	2	
	• patient responsibilities		
	mentally disabled patients		
	• Special measures for protecting the rights and interests of socially and		
	• The patient's right to refuse a health care provider's recommendation		
	• Autonomy and patient's right to self-determination in treatment		
	• Responsibility: its different aspects and dual nature		

- 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 minute walk test and bruce protocol
- Interpretation of reports- ABG,PFT,chest X-Rays, Spine and limb X-rays
- Neurological scales including Modified Asthworth Scale, Bergs Balance, Dynamic Gait index ,GCS, Barthel index, Stream Format, Pain Assessment, Tone Assessment.

(Students should maintain the record/ journal including the above listed assessment procedures in their case presentation. Case presentation with functional diagnosis of 3 cases each specialities as mentioned above should be completed and duly signed by concerned incharge)

#### **Text Books**

Sr.No.	Title
1	Orthopaedic physical assessment- David Maggie
2	Physical Rehabilitation by Susan B O 's Sullivan
3	Practical Medicine - P J Mehta
4	Wilkin's Clinical assessment in respiratory care
5	Tidy's Physiotherapy by Porter
6	Electrotherapy-explained: Principles and Practice – Low and Reed

#### Reference Books

Sr.No.	Title
1	Clinical Neurophysiology – Kalita & Misra
2	Orthopaedic Physical therapy – Donnatelli
3	Exercise Physiology – William D Mc 'Ardle
4	Physiotherapy for Respiratory & Cardiac Problems- Jennifer Pryor & Barbara Webber
5	Cash's Textbook for Heart, Lungs & Valvular Diseases-Patricia Downie

#### SCHEME OF EXAMINATION

1	Written	Total	Pı	ractical	Total
IA	Final exam	Final exam	IA Final exam		Final exam
20	80	100	20	80	100

#### **Periodical Examination:**

- Written Examination: -20 MCQs for 20 marks, 20 minutes.
- Practical Examination: 20 marks (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

## Preliminary Examination / University (Final) Examination

## • Written Examination (80 marks)

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

## • Practical Examination (80 marks)

1	Long Case (Case Based Evaluation)	35 Marks
2	One Short Case (Technique/Skill Based Evaluation/Simulated cases)	20 Marks
3	<b>5 Spots</b> - X Ray of extremities/spine, chest x ray, ABG, PFT,Outcome measures	5x4=20
	4 mark, 4 minutes each, 20 mins.	Marks
4	Journal	5 Marks

#### SUPERVISED CLINICAL TRAINING

## Journals = 5 marks

(Total 10 cases, 3- Orthopaedics, 3- Neurosciences, 3-Cardiorespiratory, 1- CBR)

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

## **Internal Assessment Marks: Theory / Practical**

 $\begin{array}{ll} \text{Periodical exam} & = 20 \text{ marks} \\ \text{Prelim exam} & = 80 \text{ marks} \\ \text{Total} & = 100 \text{ marks} \end{array}$ 

The total shall be Converted to 20 marks (100/5=20)

								Cour	se C	ode:- l	PT 50	<u>)4</u>	ecology					
	Course Credit for Obstetrics and Gynaecology Hours Hrs/Wk Credits Evaluation Pattern																	
		ours								Cares		W	ritten	Total		ectical	Total	
Th	Pr	SCT	Tot	Lec	Pr	SC T	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam	
32	32	48	112	2	2	3	7	2	1	1	4	10	40	50				
								Co	urse	Outco	mes							
	O [0.			At the	e end	d of t	he c	ourse	, the	learn	er sh	ould	be able	to:		Pro	pped gram comes	
50	Describe normal anatomy of female genital system and pelvic floor, menstrual cycle and its disorder.									P	O1							
50	4.2									norma nction		siolo	gical ev	ents suc	ch as	P	PO1	

Describe various surgical approaches for procedures like hysterectomy,

Acquire the skills of the clinical examination of obstetrics & gynaecological

salphigectomy, oopherectomy, removal of neoplasms etc.

504.3

504.4

condition.

Topic	Course Content		ours of
Sr.No.		teachir	<mark>ig/learning</mark>
		Theory	<b>Practical</b>
1.	Anatomy of female genital system and pelvic floor	2	-
2.	Pregnancy	7	-
	Normal Gestations		
	<ul> <li>Maternal Physiology in Pregnancy</li> </ul>		
	<ul> <li>Musculoskeletal disorders in Pregnancy</li> </ul>		
	Antenatal Care		
	Prenatal and Perinatal Complications		
	• Labour- Stages, Normal & Complications		
	Pain relief in Labour		
	• Post Natal – Puerperium, Lactation		
3.	Menopause	4	-
	<ul> <li>Physiology and physiological effects on Various systems</li> </ul>		
	Complications, Management		
4.	Uro-genital dysfunction	4	-
	• Uterine prolapse – classification & management (Conservative		
	/Surgical)		
	Cystocoele, Rectocoele, Enterocoele		
	• Urinary Incontinence: Types, Causes, Assessment & Management		
	<ul> <li>Pelvic Inflammatory Diseases</li> </ul>		
	• Polycystic Ovarian Disease (PCOD)		
5.	Surgical Procedures involving child birth	3	-
	Caesarian Section		
	• Episiotomy		
6.	Definition, Indications and Management of the following surgical	4	-
	procedures		
	• Dilatation and Curettage		
	• Hysterectomy-Total Abdominal, Vaginal Salphigectomy & oophorectomy		

PO1

PO1, PO2,

PO3, PO5,

PO6

7.	Desirable to know :	5	
	• Neoplasm of Female reproductive organs – surgical management	1	
	Menstrual cycle and its Disorders	2	
	Methods of family planning	2	
8.	Nice to know		
	Sterility – management	2	
	Multiple gestations	1	
9.	CLINICAL		32
	Evaluation & presentation of <b>TWO</b> cases each in the following:		
	Uro-genital dysfunction		
	Antenatal care		
	<ul> <li>Postnatal care following normal Labour &amp;Caesarean section</li> </ul>		
	Pelvic Inflammatory Diseases		
	Observation of the following:-		
	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 Gynaecology – 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 MCQs for 10 marks, 20 minutes.

## Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

	,	
Sec A	Q.1.MCQs	10x1=10 marks
Sec B	Q.2. Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. Long Answer Questions (Answer any 1 out of 2)	1x10=10 marks

## **SUPERVISED CLINICAL TRAINING:**

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of 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

		Hours					Hrs	/Wk			Cre	dits			Eva	luatio	n Pa	ittern	
Course	Course (Subject)													W	ritten	Total	Pra	ctical	Total
Code	Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	
PT- 601	General Surgery (Including Plastic Surgery)	64	32	96	192	4	2	6	12	4	1	2	7	20	80	100	-	-	-
PT- 602	Research Methodology and Biostatistics	48	ı	-	48	3	1	ı	3	3	-	1	3	10	40	50	-	1	-
PT- 603	Physiotherapeutic Skills	80	96	96	272	5	6	6	17	5	3	2	10	20	80	100	20	80	100
PT- 604	Bio-engineering & Professional Ethics	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	-	-	-
	Total	224	160	288	672	14	10	18	42	14	5	6	25	60	240	300	20	80	100

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

IA: I	ntern	al Asses	sment															
			(	Cours	e Tit	tle :-			_	•		_	astic Su	rgery)				
										de:- P								
			Co				r Ge	neral			nclud	ing I	Plastic S					
	H	ours			Hrs/	Wk			Cro	edits			Ev	<mark>zaluatio</mark>	n Pa	ttern		
	_		_		_							W	ritten	Total	Pra	actical	Total	
Th	Pr	SPT	Tot	Lec	Pr	SPT	Tot	Lec	Pr	SPT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam	
64	32	96	192	4	2	6	12	4	1	2	7	20	80	100	-	-	-	
								Cou	rse (	<b>Outco</b> 1	nes							
C												Ma	pped					
	CO No.  At the end of the course, the learner should be able to:						Pro	Program										
INC	<b>).</b>															Out	Outcomes	
601	1	Desci	ribe pı	re-ope	rativ	e eva	luati	on of	vario	ous sui	gical	indic	ations i	n abdon	ninal,	PO1	PO1, PO2	
601	1	thoracic, neurosurgical & peripheral vascular conditions.																
<b>CO1</b>		Desci	ribe th	e surg	gical	steps	& a	pproa	ches	in sho	rt & d	escri	be comp	onents	of	P	PO1	
601	1.2	soft t	issues	cut to	reac	ch tar	get t	issue,	along	g with	its co	mpli	cations.					
		Asses	ss pos	t-oper	ative	com	plica	tions	& its	impli	cation	s in v	ward tre	atment,		PO1	, PO2,	
601	1.3		osis,	-			•			•						PO3	, PO5,	
					·			•								P	O6	
601	1.4	Desci	ribe ef	fects	of su	rgica	1 trai	ıma &	z ana	esthes	ia in p	ost-c	perative	e course		P	O1	
		Unde	rstanc	l, clas	sify,	clinic	cally	asses	s, eva	luate	& des	cribe	surgica	1		PO1	PO1, PO2,	
601	1.5				•		•						njuries,			P	O3	
			non E							,	,		<b>J</b>		,			
601	1.6						f X-ı	ay ch	est &	Abdo	men.	CT S	Scan, US	SG.		PO1	, PO2	
						<u> </u>		<i>y</i> .					,				,	

Topic Sr.No	Course Content		urs of g/learning							
		Theory	<b>Practical</b>							
Must K	Must Know									
1	Infection and inflammation	3	-							
	Acute & chronic signs, symptoms, complications & management									
2	Wounds and ulcers – classification, healing, management	3	-							
3	Abdominal Surgeries:	5	-							
	Surgical anatomy of Anterior Abdominal wall									

	Surgical approaches		
	<ul> <li>Surgical approaches</li> <li>Common abdominal surgeries like Cholecystectomy, Colostomy,</li> </ul>		
	Ileostomy, Gastrectomy, Hernias, Appendectomy, Nephrectomy,		
	Prostatectomy  Prostatectomy  Prostatectomy		
4	Thoracic surgeries	4	
·	• Thoracotomy - Definition, Types of Incisions with emphasis to the site	7	
	of incision, muscles cut and complications		
	A) Lung surgeries:	4	
	Indications, Physiological changes and Complications:	·	_
	Pneumonectomy, Lobectomy		
	Segmentectomy, Pleurectomy		
	Thoracoplasty		
	Pleurodesis and Decortication		
	Intercostal Drainage System		
	B) Cardiac surgeries:	4	
	An overview of the Cardio-Pulmonary Bypass Machine		
	• Extra-cardiac Operations: Closed & Open Heart surgery		
	• Transplant Surgery of Heart, Lung & Kidney- Indications,		
	Physiological changes and Complications		
	• Chest Injuries - evaluation, management		
5	Peripheral Vascular Diseases	4	-
	Definition, Etiology, Clinical features, Signs and Symptoms,		
	Complications and Management of following diseases:		
	• Atherosclerosis		
	Arteriosclerosis		
	Buerger's & Raynaud's diseases		
	Varicose veins & DVT		
6.	Burns and Plastic Surgery	6	-
	• Burns- causes, classification, management, post burn contractures,		
	various reconstructive & plastic surgeries		
	• Skin & Muscle grafts- flaps, pedicle/ Tube /Muscle flap types,		
	indications with special emphasis to burns, wounds, ulcers, post-		
	surgical head, neck, face defects and reconstruction		
	Hypertrophic scar & keloid – management		
	• Principles of tendon transfers-with special emphasis to hand, foot &		
	facial paralysis		
7.	Emergency Surgical Procedures	4	-
0	Tracheostomy- Indications, steps, post-operative care		
8.	Introduction, Indications & Complications of following Neurosurgeries	5	-
	Burr-hole, Craniotomy, Cranioplasty      December 1 and		
	Deep brain stimulation, Neural implantation  Lawing starts, Hamiltonian starts, 1997		
	Laminectomy, Hemi laminectomy		
	Microvascular decompression surgery     Showing Figh climation		
	Shunting, Embolization     Ablative average. The lamestages and Ballidate gray.		
	Ablative surgery - Thalamotomy and Pallidotomy     Goiling of angustum and Climping of angustum		
0	Coiling of aneurysm and Clipping of aneurysm  Surgical transport	1	
9.	Surgical trauma:	4	-
	Response of body     Effect of Argosthesis		
	• Effect of Anaesthesia		
	• Shock & its types		
	Fluid & electrolyte balance     Total Personal Nutrition		
	Total Parenteral Nutrition		

10.	Clinical Radiology	4	-
	X-ray- Chest, abdominal (normal/abnormal), USG, CT scan		
11	Desirable to Know		-
	• <b>Oncology</b> – definition, types, clinical manifestations, stages of cancer, surgical procedures in the management of cancer.	4	
	• Common ENT problems- ENT conditions & its management: Otitis Media, Surgical treatments in VII (facial) & VIII nerve palsy	4	
12	Nice to Know		-
	• Various Eye problems- surgeries for III, IV nerve palsy, cataract Intra- ocular lens	2	
	• Surgeries on arteries, veins (Vascular surgery)	2	
	Bariatric Surgeries	2	
13.	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] Post Renal		
	Surgery		
	Desirable to Know		
	• Auscultation & its interpretation with special emphasis to Pulmonary		
	Function, Reading & Interpretation of the X-ray chest, P.F.T., Blood-		
	Gas analysis		
14	SCT		96

Sr.No.	Title
1	Under-graduate Surgery by Nan
2	Textbook of Surgery by S. Das
3	Bailey & Love's short practice of Surgery-21st edn.
4	Manipal's Manual of surgery. Rajagopal Shenoy.
5	Clinical & Operative surgery by chary's

#### **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
20	80	100

## **Periodical Examination:**

• Written Examination: -20 MCQ sfor 20 marks, 20 minutes

## Preliminary Examination / University (Final) Examination

• Written Examination (80 marks)

Sec A	Q.1. MCQs (15 Marks General Surgery & 5 Marks Plastic Surgery)	20x1=20 marks
Sec B	Q.2. Short Notes (Answer any 5 out of 6)	5x3=15 marks
	Q.3. Short answer questions (Answer any 3 out of 4) (Plastic Surgery)	3x5=15 marks
Sec C	Q.4. Long Answer Questions (compulsory)	1x15=15 marks
	Q.5. Long Answer Questions (Answer any 1 out of 2)	1x15=15 marks

## **SUPERVISED CLINICAL TRAINING:**

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

## **Internal Assessment Marks: Theory: -**

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

	Course Title :- RESEARCH METHODOLOGY AND BIOSTATISTICS Course Code:- PT 602																
	Course Credit for RESEARCH METHODOLOGY AND BIOSTATISTICS																
Hours Hrs/Wk Credits Evaluation Patte									tern								
												W	ritten	Total	Pra	ctical	Total
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
48	48 48 3 3 3 3 10 40 50 -				-	-											
									Cou	ırse	Outcome	es					
	CO No.  At the end of the course, the learner should be able to:						Pro	pped gram comes									
602	Describe the basic concepts of Research Methodology and Biostatistics & its importance.							, PO4, O9									
602	Describe different study designs, testing of hypothesis, sampling, methods of data collection, use of computer technology in research.							, PO4, O9									
602	Describe tabulation of data with graphical representation, measures of central tendency, Probability and standard distributions, sampling techniques, statistical significance and other basic terminologies like ANOVA and ANCOVA.								, PO4, O9								

Topic	Course Content		ırs of
Sr.No			/learning
		Theory	<b>Practical</b>
Must I		1 -	I
1.	Introduction to Research Methodology	3	-
	Meaning of research		
	Objectives of research		
	• Types of research & research approaches		
	Criteria for good research		
	• Problems encountered by researchers in India.		
	Ethics in research		
2.	Research Design	3	-
	Meaning of research design		
	<ul> <li>Need for research design</li> </ul>		
	• Features for good design		
	Different research designs		
3.	Sampling Design	3	-
	Criteria for selecting sampling procedure		
	• Steps in sampling design		
	Characteristics of good sample design		
	Different types of sample design		
4	Methods of data collection	3	-
	Collection of primary data		
	• collection data through questionnaires & schedules		
	• Difference between questionnaires & schedules.		
5	Testing of hypothesis	3	-
	• What is hypothesis		
	<ul> <li>Basic concepts concerning testing of hypothesis</li> </ul>		
	<ul> <li>Procedure of hypothesis testing</li> </ul>		
	<ul> <li>Measuring the power of hypothesis test,</li> </ul>		
	• Tests of hypothesis		
	• Limitations of the tests of hypothesis		

BIOS	<b>FATISTICS</b>		
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, Mann-whitney 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	7	-
	Demographic & vital statistics		
	Measurement in research- Measurement scales		
	Sources of error in measurement		
	Meaning of scaling, its classification		
	Important scaling techniques		
	Variables and their types		
9.	NICE TO KNOW	5	
	Introduction to Computers		
	Computers & researcher		
	Statistical packages		
	Technique of developing measurement tools		
	Motivation in research		

Sr.No	Title
1	Methods in Biostatistics - B. K. Mahajan
2	An Introduction to Biostatistics and research methods: Sunder Rao, P.S.S.
3	Biostatistics : A manual of Statistics Methods: K. Visweshwar Rao

## **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
10	40	50

## **Periodical Examination:**

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

## **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

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

## **Internal Assessment Marks: Theory: -**

 $\begin{array}{ll} \text{Periodical exam} & = 10 \text{ marks} \\ \text{Prelim exam} & = 40 \text{ marks} \\ \text{Total} & = 50 \text{ marks} \end{array}$ 

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

#### Course Title :- PHYSIOTHERAPEUTIC SKILLS **Course Code:- PT 603** Course Credit for PHYSIOTHERAPEUTIC SKILLS Hrs/Wk Credits Hours **Evaluation Pattern** Written Total Practical Total SCT Pr SCT Tot Th Pr Tot Lec Pr SCT Tot Lec Final Final Final Final IΑ exam exam exam exam 80 96 96 272 5 6 6 17 3 2 10 20 20 80 100 80 100 **Course Outcomes** Mapped CO At the end of the course, the learner should be able to: **Program** No. Outcomes Describe human development & maturation; with special emphasis to sensory, PO1, PO2 603.1 motor, psychological & social aspects and alteration during aging process. Describe and demonstrate use of Electro diagnostic currents for sensory and PO1, PO3, 603.2 motor dysfunction. PO5, PO6 Interpret Normal & Abnormal EMG, Nerve Conduction studies & Late 603.3 PO1, PO2 responses. Describe and differentiate between different schools of thought in Manual PO1, PO2 603.4 Therapy. PO1, PO2, 603.5 Demonstrate joint mobilizations on models as per different schools of thought. PO3, PO5 Demonstrate Neuro therapeutics skills for sensory and motor coordination, PO1, PO2, 603.6 PO3, PO5 balance on models.

Interpret investigation like X-ray, EMG, NCV, ABG, ECG etc. used for

Topic Sr.No	Course Content		urs of g/learning
		Theory	Practical
Must K			
1.	GENERAL PRINCIPLES OF HUMAN DEVELOPMENT & MATURATION	15	-
	Aspects- i) Physical ii) Motor iii) Sensory iv) Cognitive     v) Emotional vi) Cultural vii) Social	5	
	• Factors influencing human development &growth- i) Biological ii) Environmental iii) Inherited.	3	
	<ul> <li>Principles of maturation</li> <li>➤ in general</li> </ul>	7	
	➤ In anatomical directional pattern -Cephelocaudal, Proximo – distal, Centero- lateral, Mass to specific pattern, Gross to fine motor development		
	➤ Reflex maturation tests		
	Development & Assessment of Oromotor & Sensory systems		
2.	ELECTRO DIAGNOSIS	7	4
	<ul> <li>Motor unit &amp;Recruitment pattern of motor unit – Size principle</li> <li>Electromyography</li> </ul>	2	
	<ul> <li>Principles &amp; Instrumentation – Basic components like CRO,</li> <li>Filter, Amplifier &amp; Preamplifier and Types of Electrodes.</li> <li>Normal &amp; Abnormal EMG pattern</li> </ul>	3	2
	<ul> <li>a) At rest b) on minimal contraction c) on maximal contraction</li> <li>Nerve Conduction Studies- Principles &amp; Technique</li> </ul>	2	2

603.7

functional diagnosis.

PO1, PO2

3.	MANUAL THERAPY & APPLICATIONS WITH CLINICAL REASONING	25	34
	Basic principles, Indications & Contra-Indications of schools of		
	thoughts of Manual Therapy:		
	Maitland	4	5
	Kaltenborn	2	3
	Mulligan	4	6
	Mckenzie	3	5
	Neuro Dynamics (including Butler, Shacklock)	3	4
	Muscle Energy Technique	2	4
	Myofascial stretching	3	4
	Cyriax : Pain-Original and Referred	4	3
4.	BASICS IN NEURO THERAPEUTICS SKILLS &	13	20
	APPLICATIONS WITH CLINICAL REASONING.	10	
	Principles and Indications of application of Neuro Developmental	2	3
	Technique	2	3
	Principles and Indications of application of Rood's Technique	2	3
	Principles and Indications of application of PNF Technique	3	3
	Principles and Indications of application of Brunnstrom Technique	4	8
	Desirable to Know	12	16
	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 Models		
	Neurodevelopment of hand function		
	Nice to Know	8	3
	Demonstration of EMG & NCV Technique		
	• Introduction to Vojta, SI, MRP,CIMT, and TOA		
	Physiology of muscle contraction		
	Physiology of resting membrane potential & action potential,		
	Propagation of Action Potential, Volume conduction		
5.	CLINICALS	-	
	1] Practice of Manual Therapy in Kaltenborn, Maitland, Mulligan &		5
	Cyriax on extremities only & only on models		
	2] Practice to Neuro Therapeutic Skills of NDT, PNF, Rood's		5
	Technique & Brunnstrom on models only.		
	3] Exercise tolerance testing – 6 minutes walk test & Bruce 's protocol		9
	on models only		0.4
6	SCT		96

S.No	Title
1	Orthopaedic Physiotherapy Assessment- David J Magee
2	Physical Rehabilitation- Susan O' Sullivan
3	Clinical Assessment in Respiratory Care- Wilkins
4	Physiotherapy for Respiratory and Cardiac Problems - J. Pryor & Prasad
5	Cash's Textbook of Chest ,Heart, Lungs & Vascular Disease for Physiotherapists- Patricia Downnie
6	Physical examination of Spine & Extremities- Hoppenfield
7	Cash's Textbook of Neurology for Physiotherapists - Patricia Downie

#### SCHEME OF EXAMINATION

Z	Vritten	Total	Pr	actical	Total			
IA	Final exam	Final exam	IA	Final exam	Final exam			
20	80	100	20	80	100			

## **Periodical Examination:**

- Written Examination:-20 MCQs for 20 marks, 20 minutes.
- Practical Examination: 20 marks (Spots, OSCE, OSPE, Mini CEX, Simulated cases/clinical cases)

•

## **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

Q.1. MCQs	20x1=20 Marks
Q.2. Short Notes-Answer any 5 out of 6	5x3=15 Marks
Q.3. Short answer questions-Answer any 3 out of 4	3x5=15 Marks
Q.4. Long Answer Questions (compulsory)	1x15=15 Marks
Q.5. Long Answer Questions-Answer any 1 out of 2	1x15=15 Marks
(	Q.2. Short Notes-Answer any 5 out of 6 Q.3. Short answer questions-Answer any 3 out of 4

#### • Practical Examination (80 marks)

1	One Long Case (Manual Therapy, Neuro Techniques) on models	40 Marks
2	One Short Case – simulated case	20 Marks
3	5 Spots (EMG,NCV, Manual and Neuro Techniques) 3 minutes each	5x3=15 Marks
4	Journal-	5 Marks

#### **SUPERVISED CLINICAL TRAINING:**

Journal= 05 MARKS (Case Records/ Case Presentations)

(Ortho 4, Neuro 3, Paediatrics 3)

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of 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:- BIO-ENGINEERING & PROFESSIONAL ETHICS																		
			Coul	rse 11	tie:-	BIO							<b>2210</b> L	NAL E	HICS	)			
	Course Code:- PT 604 Course Credit for BIO-ENGINEERING & PROFESSIONAL ETHICS																		
	Н	ours	ourse			/Wk	10-1	1101		edits	<u> </u>	KOI		Evaluat			'n		
	11	ours				VVIX				cuits		W	ritten	Total		ectica			
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	IA	Fi	inal	Final	
- 22		0.5	4.50				10						exam	exam		ex	kam	exam	
32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	-		-	-	
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Rio	ongi	ineerii	n or														Out	comes	
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604.		appliai											iricty o	i aius o	C		PO1		
604.								_					prosthe	sis			PO1, PO3		
604.				<u> </u>					_					r prosth	esis.		PO1, PO2		
	,												rthopae				PO1, PO3,		
604.		neurol					1		. 1			0	1				PO8, PO9		
								l 1000 1r	a a di	in atma	nt in	outh o		anoath a	icand		PO1	, PO2,	
604.	<b>`</b>	Demonstrate skills to repair and make adjustment in orthosis or prosthesis and plan proper rehab according to need of patient.														PO5	, PO8,		
		pian pi	орсі	Tenao	acc	orum	g to	iiccu (	or pa	iticiit.							P	O9	
		onal E																	
604.		Descri																O1	
604.		Descri																O1	
604.					ciple	s of e	evide	nce b	ased	l pract	ice, so	cope	and opp	portunit	ies in			, PO3,	
001.		physio	thera	py.														O9	
					_									_				, PO2,	
604.	9						nistr	ation,	doc	ument	ation	, buc	iget pla	nning a	ınd			, PO6,	
		perfori	mance	e anal	ysis.													, PO8,	
																	PO9		

Topic Sr.No.	A. BIO-ENGINEERING	teachin	ours of g/learning
		Theory	<b>Practical</b>
Must K			
1.	Classification of Aids & appliances.	1	-
2.	Biomechanical principles in designing of appliances	1	-
3.	Knowledge of various component of prosthesis & orthosis.	3	-
	Assessment procedures for static & dynamic alignment of the following:		
	<ul> <li>Aids &amp; appliances</li> </ul>		
	• Splints, Orthosis for spine, upper & lower limb		
	<ul> <li>Prosthesis for Lower limbs &amp; Upper limbs</li> </ul>		
4.	Prescription and designing of footwear and modifications	1	-
5.	Assessment of Gait, Post Prosthetic /Orthotic (Lower Limb) fitting.	2	_
6.	Designing and Construction of adaptive devices	2	
	Desirable to know		
	• Care of prosthesis & orthosis.		
	<ul> <li>Methods of donning &amp; doffing</li> </ul>	2	
	Decision making for prosthetic fitting		
	Nice to Know		
	Psychological aspect of orthotic and prosthetic application		
	(practical analysis with patient discussion)	1	

7	Production of the control of the con		24
7	<b>Project:</b> - To fabricate one Temporary splint in each by using P.O.P, aluminium strips, sheets, wires, rubber bands, resin, orfit etc.	-	24
	<ul> <li>Cock up [dorsal / volar], Outrigger.</li> </ul>		
	<ul> <li>Cock up [dorsal? voial], Outrigger.</li> <li>Opponence splint, C bar for 1st web space of hand</li> </ul>		
	<ul> <li>Mallet Finger Splint, Foot drop splint, Facial splint.</li> </ul>		
	<ul> <li>Manet Finger Spinit, Foot drop spinit, Factar spinit.</li> <li>Anterior and posterior guard splints for gait training</li> </ul>		
	B. PROFESSIONAL PRACTICE		
Л	ncluding Ethics, Evidence Based Practice, Administration, Management &	Marke	ting)
	Know	V IVIUI IXC	<del>(111</del> 8 <i>)</i>
1.	Concepts of morality, Ethics & Legality-rules of professional conduct &	2	-
	their Medico-legal & moral implications- need of Council Act for		
	Physiotherapy		
2.	Constitution & Functions of the Indian Association of Physiotherapists	1	-
3.	Functioning of the World Confederation of Physical therapy [W.C.P.T.] &	1	-
	its various branches-Special Interest groups [brief]		
4.	Role of W.H.O.& WCPT	1	-
5.	Evidence Based Practice: Introduction, Definitions, Evidence Based	1	-
	Physiotherapy Practice		
6.	Time management, Career development in Physiotherapy.	1	-
7.	Administration - principles-based on the Goal & functions - at large	1	2
	hospital set up/domiciliary services/private clinic /academic.		
8.	Methods of maintaining records	1	2
9.	Privacy and confidentiality, Equality & Non discrimination.	6	
	Privacy and confidentiality	2	
	Definitions of privacy & confidentiality with reason in physiotherapy      The state of the		
	Justified breaches of confidentiality-		
	Sharing information for patient care		
	<ul><li>Using interpreters</li><li>Teaching medical students</li></ul>		
	<ul> <li>Mandatory reporting Serious danger to others</li> </ul>		
	<ul> <li>Patient or guardian consent</li> </ul>		
	Equality, justice and equity	2	
	• Definitions of equality, justice and equity	-	
	The right to health care & Physiotherapy		
	<ul> <li>Disparities in health status</li> </ul>		
	<ul> <li>Local disparities</li> </ul>		
	National disparities		
	➤ Global disparities		
	Roles of Physiotherapists in establishing health care priorities and		
	allocating scarce health care resources as direct health care providers		<u> </u>
	Non-discrimination and non-stigmatization	1	
	What is discrimination and stigmatization?		
	Respect for cultural diversity and pluralism	1	
	Definition of culture and cultural diversity		
	Definition and value of pluralism		
	• Limits to the consideration for cultural specificities human dignity,		
	human rights and fundamental freedoms		
10.	Desirable to Know:	1	2
	Performance analysisphysical structure /reporting system [man power]		
	/ status/functions /quantity & quality of services/turn over, cost benefit-		
	revenue contribution		
	Management studies related to—local health care organization		
	management & structure- planning delivery with quality assurance &		

	funding of service delivery information technology		
11.	Nice to Know:	1	2
	Budget-planning.		
12.	SCT		96

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	Textbook of Rehabilitation – S Sunder , Jaypee Publication
5	Physical rehabilitation- Susan. B.O` Sullivan
6	Ethical Issues perspective for Physical Therapists- Kavitha Raja

#### **SCHEME OF EXAMINATION**

	Written	Total
IA	Final exam	Final exam
10	40	50

#### **Periodical Examination:**

• Written Examination: -20 MCQs for 10 marks, 20 minutes. (10 Bioengineering, 10 professional practice)

## Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

Sec A	Q.1. MCQs (10 Minutes) (5 Bioengineering, 5 professional practice)	10x1=10 marks
Sec B	Q.2. Very short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. Long answer questions (Answer any 1 out of 2)	1x10=10 marks

## **SUPERVISED CLINICAL TRAINING:**

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of 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 to 10 marks (50/5=10)

## SEMESTER - VII

		Hours					Hrs/Wk				Credits				Evaluation Pattern					
Course	Course (Subject)													Written		Total Practic				
Code	Course (Subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	LA.	Final exam	Final exam	
701	Physiotherapy in Musculoskeletal Sciences	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100	
PT- 702	Physiotherapy in Community Based Rehabilitation	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100	
	Choice Based - Physiotherapy in Paediatric Conditions	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	10	40	50	
	or	32	32	90	100			0	10		1	2	ر	10	40	50	10	40	50	
PT- 703B	Choice Based – Physiotherapy in Manual Therapy																			
		160	224	288	672	10	14	18	42	10	7	6	23	50	200	250	50	200	250	

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

	Course Title :- Physiotherapy in Musculoskeletal Sciences Course Code:- PT 701																		
	Course Credit for Physiotherapy in Musculoskeletal Sciences																		
	Hours Hrs/Wk Credits Evaluation Patter											ttern							
												W	ritten	Total	1	actical	Total		
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	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		
								Cou	rse C	utcon	1es					7.5			
CO	)															Map	_		
No	_		A	t the	end	of the	e cou	rse, t	he le	arner	shoul	d be	able to	) <b>:</b>		Prog	,		
				1.0			- 11									Outc			
701	.1												loskelet			PO1, PO2			
														l basis.					
701	.2	Interp	ret rou	itine 1	radio	logic	al and	d elec	troph	ıysiolo	gical	inves	tigatio	ns.			PO1, PO2		
									PO1, PO2,										
701	3	Plan and prescribe a treatment protocol by selecting appropriate modes of								PO3, PO4,	,								
701		electro	otherap	py, ex	ercis	e ther	apy,	and n	nanua	al thera	apy te	chnic	ques.			PO5, PO6,			
											<u> </u>								
		Demo	netrate	s chill	e of i	ahveid	other	any in	terve	entions	in fra	acture	es, orth	nedic					
701	.4							1 0	itel ve	211110113	111 116	ictur	.s, or th	opeuic		PO5, PO6, PO7, PO9 PO1, PO2, PO3, PO4, PO5	PO4,		
		surgeries, amputation, sports injuries.									PC	)5							
		<b>A</b> 00000	Assess and physiotherapeutically treat paediatric, orthopaedic congenital and					A	PO1,	PO2,									
701	.5	acquir				apeun	cany	псаі	pacc	nauic,	ortho	pacu	ic cong	Cilital al	IU	PO3,	PO3, PO4,		
		acquii	eu uei	OHIII	ies.											PC	)5		
																PO1,	PO2,		
		A dario	o obor	ıt oracı	mor	sion h	ome	ovoro	ico n	roaren	ac fur	otic	aal inda	penden	20	PO3,	PO4,		
701	.6			_		-				_				penden	je	PO5,	PO6,		
		in acti	villes	oi dai	1y 11'	ving, i	o iii	prove	qual	nty of	me or	a pa	uem.			PO7,	PO9		

Topic	Course Content	Hou	
Sr.No.			learning
37 47	7	Theory	<b>Practical</b>
Must k		8	10
1.	Fractures and dislocation of the Spine & Extremities – classification, complications, PT assessment &management of	δ	10
	following:		
	• Upper limb fractures & dislocations.		
	Lower limb fractures & dislocations.      Lower limb fractures and dislocations including pelvis.		
	Spinal fractures		
	• Principles of PT management in fractures - Guidelines for fracture		
	treatment during period of immobilization and guidelines for		
	treatment after immobilization period.		
	PT management in complications - early & late - shock, compartment		
	syndrome, VIC, fat embolism, delayed and mal-union, RSD, myositis		
	ossificans, AVN, pressure sores etc.		
2.	Physiotherapy assessment & management of Deformities:-	3	8
	• Congenital: CTEV, CDH, Torticollis, pes planus, pes cavus and other		
	common deformities.		
	• Acquired: scoliosis, kyphosis, coxa vara, genu varum, valgum and		
	recurvatum.		
3.	Physiotherapy assessment & management of Infectious diseases of	3	3
	the bone & joints:-		
	Osteomyelitis – acute and chronic		
	Septic arthritis and Pyogenic arthritis		
	TB spine and major joints - knee and hip		
4.	Physiotherapy assessment & management of Degenerative &	3	3
	Inflammatory conditions :-		
	Osteoarthritis - emphasis on knee, hip and hand		
	Rheumatoid Arthritis, Ankylosing spondylitis		
	Gout, Perthes disease		
5.	Physiotherapy assessment & management of Peripheral Nerve	2	5
	Injury		
6.	Physiotherapy assessment & management of Amputation:-	2	5
	• Definition, levels, indications, types, PT assessment, aims,		
	management pre and post operatively.		
	• PT management with emphasis on stump care and bandaging.		
7.	Prosthesis Prescription and Training  The Air Figure 1. The Air Figure 2. The A	2	2
7.	<b>Traction-</b> Effect, Types, Modes, Indications, Contraindications,	<u> </u>	2
0	Dosage	4	44
8.	Physiotherapy assessment, conservative, surgical &	4	11
	management of Spinal conditions:-		
	Cervical & Lumbar spondylosis		
	• Intervertebral disc prolapses		
	• Spinal canal stenosis		
	• Spondylolysis, Spondylolisthesis		
0	• Coccydynia  Dhygiddaynau ggaggarant & managarant of Shaulday isint	4	10
9.	Physiotherapy assessment & management of Shoulder joint	4	10
	conditions:-		
	• TOS, RSD • Shoulder instabilities AC joint injuries		
	Shoulder instabilities, AC joint injuries     Periortheities Shoulder Potential Tears		
	Periarthritis Shoulder, Rotator cuff Tears		

	• Impingement syndrome (Supraspinatus and Bicipital tendonitis) (sub-		
10	acromial decompression)	1	_
10.	Physiotherapy assessment & management of Elbow and forearm:- Tennis and Golfer's elbow	1	5
11.	Physiotherapy assessment & management of Wrist and Hand	3	5
	conditions:		
	• Wrist sprains		
	Dequervain's Tenosynovitis, Trigger and Mallet finger		
	Repair of ruptured Flexor and Extensor tendons		
	Carpal tunnel syndrome.		
	Hand injury- types and their management		
12.	Physiotherapy assessment & management of Hip Joint surgeries -	2	5
	Hemi and total hip replacement		
13.	Physiotherapy assessment & management of Knee conditions:-	6	10
	• 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		
	Patellar tendon ruptures and Patellectomy- rehabilitation		
14.	Physiotherapy assessment & management of Ankle and foot	3	4
	conditions:-		
	Ankle instability: Lateral ligament sprain of ankle		
	Ligamentous tears- Post operative management		
	• TA rupture		
1.7	Plantar fasciitis, Metatarsalgia, hammer toe, turf toe, OA ankle		4
15.	Physiotherapy assessment & management of:-	2	1
	Sacro-iliac joint dysfunction		
16.	• Sacralisation, Lumbarisation	1	1
10.	<b>Orthopedic surgeries</b> - Pre and post-operative PT assessment, goals, precautions, PT management of following surgeries: Arthrodesis &	1	1
	Osteotomy		
Desiral	ble to Know		
17.	• Total shoulder replacement and Hemi replacement: Post operative PT	7	2
	management		
	• SLAP lesion, GIRD, Reverse replacement		
	• Excision of radial head - Post operative PT management		
	Biomechanics of Internal fixators & implants.  Black of Tourish Advanced in Touri		
	Physiotherapy Management for Tumours of the bone.      The state of the bone.      The state of the bone.  The state of the bone.		-
	Physiotherapy following re-constructive surgeries in: -	2	5
Nice to	Cerebral Palsy, Poliomyelitis and Leprosy.		
18	Radiological positions, angle calculations for Orthopaedic problems	3	
10	by X ray	3	
	Arthroscopic repairs of knee & Management		
	Physiotherapy assessment & management of Metabolic & hormonal	2	_
	disorders of the bone tissue:-Osteoporosis, Rickets	4	_
	Hamstring strains & Quadriceps contusion	1	1
		_	_

Sr.No.	Title								
1	Clinical Orthopaedic Rehabilitation – Brotzman								
2	Cash 's Textbook of Orthopaedics& Rheumatology for Physiotherapists- Patricia Downie								
3	Therapeutic exercise – Colby & Kisner								
4	Tidy's Physiotherapy – Stuart Porter								
5	Essentials of Orthopaedics and Applied Physiotherapy – Joshi and Kotwal								
6	Essentials of Orthopedics for Physiotherapists – Ebenezer								
7	Essential Orthopaedics – J. Maheshwari								

#### **Reference Books**

Sr.No.	Title							
1	Orthopedic Physical therapy – Donatelli.							
2	Manual Mobilization of the Joints: Joint Examination and Basic Treatment: The							
	Extremities, Volume 1 – Freddy Kaltenborn							
3	Manual Mobilization of the Extremity Joints: Advanced treatment techniques, Volume 2 –							
	Freddy Kaltenborn							
4	Mobilisation of the Nervous System - David Butler							
5	Clinical Neurodynamics: A New System of Neuromusculoskeletal Treatment – Michael							
	Shacklock							
6	Textbook of Orthopaedic Medicine – James Cyriax.							
7	Outline of orthopedics – Adams Hamblen							
8	Taping Techniques: Principles and Practice – Rose Mac Donald.							
9	Physical Rehabilitation : Assessment and Treatment – O'Sullivan Schmitz							
10	Treatment and Rehabilitation of Fractures – Stanley Hoppenfield							

## **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 MCQs for 20 marks, 20 minutes.
- Practical Examination:- 20 marks (Spots, OSCE, OSPE, Mini CEX, Simulated cases/clinical cases)

# **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

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

## • Practical Examination (80 marks)

1	One Long Case: based on	40 Marks		
	History-10marks, Evaluation-10 marks, Treatment Plan on Patient-20marks	40 Marks		
2	One Short Case: Simulated	20 Marks		
3	Five spots: based on	3x5=15 Marks		
	X-ray of limb & spine, Orthosis, Prosthesis, Metal implants			
	3 minutes each spot for 3marks each spot			
4	Journal	5 Marks		

#### **Supervised Clinical Training:**

## Journal - 5 marks

All the SCT works should be properly documented, signed by the respective teacher in-charge of the subject, indexed in a separate file & should be submitted before the preliminary examination of the semester. It is the responsibility of 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.

## **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 Community Based Rehabilitation Course Code:- PT 702																			
			Cours	e Cre	dit	for P							Based	Rehabil	itati	on				
	Н	ours				/Wk				edits				Evaluati			n			
												W			ractica					
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA		inal kam	Final exam		
64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	_	80	100		
Course Outcomes																				
	CO No. At the end of the course, the learner should be able to:							]	Map Prog Outco	ram										
702	.1	nation	al hea	lth po	licie	s to a	chie	ve the	e goa	ıl of 'H	lealth	for A				F	O1, l PO9,	PO7		
702	Understand, identify, evaluate disability in patients with partial or total disability (temporary or permanent) and formulate appropriate goals (long & short term) in treatment & rehabilitation.								P F	O1, 1 O3, 1 PO6,	PO5, PO7									
702	.3	Describe the anatomical and physiological changes occurring in various conditions in Women's Health relevant to Physiotherapy, and plan physiotherapy management for fitness.									F	O1, 1 PO3,	PO5							
702	Identify environmental stress factors in industries, plan injury prevention program, physiological restoration, and rehabilitation for effective return to work management.								P P	PO1, PO2, PO3, PO5, PO6, PO7, PO9										
702	.5	Descri evalua								ics wit	h mu	ltisys	stem re	view to			PO1, PO2, PO3, PO6, PO7			
702	.6	Condu approp			•				•	nning	and i	mple	mentat	ion of		P	PO1, PO4, PO9			
702	.7	Advise physic			cal re	ason	ing a	ıt urba	an, r	ural an	ıd cor	nmui	nity lev	el for ac	chiev	e P	PO1, PO2, PO3, PO4, PO5, PO6, PO7, PO9			
Тол	a <b>i</b> o															Hou	Hours of			
Top Sr.N	•						Co	urse	Con	tent							hing/learning			
															Tl	<mark>1eory</mark>		actical		
1.	•		en's ]		<u>h: -</u>											15		25		
		Must			<b>. W</b> .	mon;	'a Ua	oolth .	Q, A.	natomy	, of n	مايينم	floor			1				
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			nopau		pily	310108	51041	varia	ttiOin	3 45500	ratea	WILL	progra	uncy &		1				
Antenatal, Perinatal & postnatal physiotherapy, PT advice on					labour															
	positions, pain relief & PT Management of various problems during this period																			
	• Uro-genital dysfunctions: Infections, Prolapse, Polycystic Ovarian Disease, incontinence and their therapeutic interventions.																			
									_				herapy			1				
										nancy			ause.			2				
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			able t					D1	•	-1.6						1				
			cial is: <b>to kn</b> o		ıavır	ıg ımp	pact	on Ph	1ys1c	al func	ction.									
		14166		JW -1-4 0-	1	- C'.	c									1				

• Legal rights & benefits for women.

• Common Problems in adolescents and management Infertility

1 1

2.	Geriatrics: -	12	25
	Must Know		
	• Theories of Aging.	2	
	<ul> <li>Anatomical and Physiological changes of aging in-</li> </ul>		
	Musculoskeletal system, CNS, CVS, RS.	2	
	Metabolic, Endocrine, Immune System		
	• Assessment in geriatrics.	2	
	• Role of physiotherapy: in geriatrics fitness (Institutionalized &		
	Community dwelling elders), Half-way homes, Residential Homes,	1	
	Meals on wheels, Home for the aged, etc.		
	• Falls and its prevention in Geriatrics.	1	
	• Rehabilitation for Parkinson's disease, Alzheimer, Incontinence,	2	
	stroke etc.		
	Desirable to Know		
	• Ethics, Legal Rights and benefits for geriatric Rehabilitation	1	
	Nice to Know	1	
	Communication with Elderly		
3.	Industrial Health	11	25
	Must Know :-	1	
	I – Ability Assessment		
	Job description		
	<ul> <li>Job demand analysis</li> </ul>		
	• Task analysis		
	• Ergonomic evaluation		
	Injury prevention		
	Employee fitness program  H. Disability management	2	
	II – <u>Disability management</u>	2	
	• Acute case		
	Concept of functional capacity assessment		
	Work conditioning & Work hardening	4	
	III – Environmental stress in the industrial area	4	
	A) Occupational Hazards:		
	• Physical agents- Heat, cold, light, noise, Vibration, U.V. radiation,		
	Ionizing radiation,		
	Chemical agents-Inhalation, local action & ingestion,		
	Mechanical hazards- overuse, fatigue.		
	• Psychological hazards – monotonic, dissatisfaction in job, anxiety of		
	work completion with quality, mechanical stress in various		
	occupations for eg.		
	Sedentary table work- eg. in executives, clerk,		
	Inappropriate seating arrangement- eg. vehicle drivers		
	Constant standing- eg. watchman, Defense forces, surgeons		
	> Overwork- eg. Exertion in labourers.		
	Desirable to Know:-	,	
	Biological Hazards	1	
	• Role of P.T. in industrial set up & Stress management with relaxation	2	
	Vocational Training and Rehabilitation	2	
	Nice to Know	1	
	Industrial Laws: Legal Right and benefits		

4.	Fitness & Health Promotion	8	21
	Must Know:-		
	Physiological effects of aerobic and anaerobic exercise	1	
	• Assessment of Fitness	1	
	• Fitness training and clinical reasoning for advocating aerobic exercise	2	
	as preventive measures in special population:		
	Elderly, Women, Children		
	<ul> <li>Obesity, Diabetes Mellitus, Renal Failure, Hypertension</li> </ul>	1	
	• De-conditioning effects of prolonged bed rest.	1	
	Exercise Testing & Prescription	1	
	Desirable to Know:	1	
	Yogasanas in specific health conditions – Diabetes, Pregnancy,		
	Hypertension		
	Nice to Know	1	
	Nutrition and Diet for fitness		
5.	Community Health	12	
	Must Know	1	
	• WHO definition of health & disease, Health care delivery system – 3		
	tier System		
	• Rehabilitation: definition, types and Team		
	• Community: Definition, Community approach & entry strategies,		
	Community initiated v/s Community oriented program	1	
	• Introduction to CBR: Definition, Historical review, Concept, Need,		
	Objectives, Scope, Members, Models	1	
	• CBR strategies in Health Promotion in different areas:-		
	➤ Urban Health centre – Community centre, clubs, mahila mandals,	1	
	social centre, Schools, Industries, Sport centres.		
	Rural area by using PHC, rural hospital, district hospital.		
	• Principles of CBR, Difference between Community v/s Institutional	1	
	Based Rehabilitation, Extension services and mobile units:	1	
	• Introduction, Need, Camp approach, planning and management of	1	
	CBR program	1	
	Disaster management and role of PT	1	
	• Disability: Evaluation, types & prevention & role of physiotherapy	1 1	
	National policies for rehabilitation of disabled	1	
	Desirable to Know:-		
	Role of NGO in Community Based Rehabilitation	1	
	• Role of Physiotherapy in CBR: Rehabilitation program for various	1	
	neuro-musculoskeletal and cardiothoracic disabilities		
	Nice to Know	1	
	Architectural barriers for disabled and their modification		
6	Solidarity and cooperation	2	
	Solidarity in health care & Physiotherapy		
	• Ethical perspective		
	<ul> <li>Solidarity as instrumental value</li> </ul>		
	<ul><li>Solidarity as moral value</li></ul>		
	• Threats to solidarity in present-day societies		
7	Social responsibility and health, Sharing of benefits	2	
	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		
		<u> </u>	

8	SCT	96
	research and other initiative	
	> Integration of capacity-building components to externally funded	
	them	
	diagnostic & therapeutic modalities or to products stemming from	
	➤ Valid options for promoting fair & equitable access to new	
	Patents and intellectual property	
	➤ Biopiracy and fair sharing of benefits of genetic resources	
	Fair and equitable options for research subjects	
	Models of benefit-sharing agreements	
	Sharing of benefits	
	Providing health care services across national boundaries	
	Protection of vulnerable populations	
	Access to essential health services	
	Health and contemporary challenges to global justice	
	Responsibilities for governments and various sectors of society	

	· <del>v ==v</del>
Sr.No	Title
1	Physiotherapy in Obstetrics and Gynaecology - Poldon and Mantle
2	Textbook of Work Physiology: Physiological Bases of Exercise
	- Per-Olof Åstrand, Kaare Rodahl, Hans A. Dahl, Sigmund B. Strømme
3	Therapeutic exercise – Colby & Kisner
4	Text book of community medicine – Bhaskar Rao
5	Geriatric Physical Therapy – Andrew Guccione
6	Industrial Therapy – Glenda Key
7	Park's Textbook of Preventive and Social Medicine – Park
8	Textbook of Rehabilitation – Sundar

# **Reference Books**

Sr.No	Title
1	Ergonomics: Man in His Working Environment – K. Murrell
2	Exercise Physiology – McArdle
3	Musculoskeletal Disorders in Workplace: Principle and Practice - Nordin, Pope and
	Andersson
4	Indian Social Problems (Vol-2): Social Disorganization and Reconstruction – G R Madan.
5	Status of Disability in India-2000 – Rehabilitation Council of India
6	International Classification of Functioning, Disability and Health: ICF - World Health
	Organization
7	Handbook of Physical Medicine and Rehabilitation – Braddom
8	Geriatric Rehabilitation Manual – Timothy L. Kauffman

## **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 MCQs for 20 marks, 20 minutes.
- Practical Examination:- 20 marks, (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

### **Preliminary Examination / University (Final) Examination**

• Written Examination (80 marks)

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

### • Practical Examination (80 marks)

1.	One long Case: based on-	40 marks
	Women's health/Geriatric/Industrial health/health promotion	
	History-10marks, Evaluation-10 marks, Treatment Plan on Patient-	
	20marks	
2.	One Short Case: Simulated	20 marks
3.	<b>5 Spots</b> based on scales, National health programmes, fitness protocols	15 marks
	3 marks, 3 minutes for each spots	
4.	Journal	5 marks

## **SUPERVISED CLINICAL TRAINING:**

### Journal – 5marks

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

Case Presentation & Documentation: Evaluation and treatment planning, case presentation & documentation of minimum **TEN CASES** in:

- ➤ 2 Obstetrics & 2 Gynaecology cases- 4 cases
- ➤ Geriatrics :- 2 cases
- ➤ Industrial health :- 2 cases
- Fitness: 1 case
- ➤ Disability evaluation:- 1 Case

### **Internal Assessment Marks: Theory/ Practical:-**

 $\begin{array}{ll} \text{Periodical exam} & = 20 \text{ marks} \\ \text{Prelim exam} & = 80 \text{ marks} \\ \text{Total} & = 100 \text{ marks} \end{array}$ 

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

	Course Title :- Choice Based - Physiotherapy in Paediatric Conditions																		
	Course Code:- PT 703 A  Course Credit for "Choice Based - Physiotherapy in Paediatric Conditions"																		
	Hours Hrs/Wk Credits Evaluation Pattern																		
	11	Ours	1		111 2/	VVK			CI	euris		W	ritten	Total		actica		Total	
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	IA	Fir		Final	
22	22	0.6	1.00	2	2		10	2	1	2			exam	exam		exa		exam	
32	32	96	160	2	2	6	10	Cor	1	2 Outco	5 <b>m</b> oc	10	40	50	10	4	0	50	
		Т						Cot	ii se v	Outco	ines					<del>- T</del>	M	apped	
	No. At the end of the course, the learner should be able to:								Pro	ogram tcomes									
703.	703A.1 Describe normal development in Paediatrics										]	PO1							
703.	A.2									_				primiti pairmen			РО	1, PO2	
													-				PO	1, PO2,	
703.	A.3			•			yze n	eurol	ogic,	ortho	paedi	c and	l cardio	-respira	tory			3, PO5,	
		disor	ders i	n chil	ano	oa.												6, PO7	
						•								hasis to				1, PO2,	
703.	A.4	N.D.	T, ser	nsory	integ	gratio	n, pla	ay the	erapy	and ii	nterve	ention	n in inte	ensive ca	are			3, PO5,	
		area.																6, PO7	
703.	۸ 5	Perfo	orm te	chnic	ues	of bre	eathi	ng ret	raini	ng, ne	buliza	ition,	positio	ning fo	r			1, PO2,	
103.	A.J	brone	chial l	hygie	ne te	chnic	que in	n paec	liatri	c card	io-pu	lmon	ary disc	orders.			PO3, PO5, PO6, PO7		
																	PO2, PO3,		
703.	A.6	Advi	ce an	d cou	nsel	neuro	o-pae	diatri	c car	e.							PO5, PO7		
		E1	- ! 41-		4		. 1				_4	.41 41	- · · · · · ·	- 1: - 4 - : -			PO1, PO2,		
703.	A.7		am un itions		orta	ice a	na pr	escri	ре ар	propri	ate of	шоп	es in pa	ediatric			PO3, PO5,		
		Cond	1110113	•													PO6, PO7		
Top							Co	urse (	Cont	ent							Hours of		
Sr.N	lo.														_		earning		
Must	I/m	0.777													l	neor	'y I	<mark>Practical</mark>	
1.			al nal	CV -90	CACC	ment	& m	anage	men	t with	annr	nache	es, Rood	de		3		10	
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2.		Attenti							r, Au	tism						1		1	
3.		Epileps	sy													1		1	
4.		Geneti							_							1		1	
5.									emei	nt diso	rder -	- Cho	orea, At	hetosis,		1		2	
		Dyston							1	(D :		, .	. 1 2	T · 1	+				
6.		Disord girdle,											ecker's	, Limb		2		2	
7.		Develo	pmen	ıtal ar	oma								ranio-v	ertebra		2		3	
		junction anomalies																	
8.		Traum				- C 1		TEX		1	l	1.	. 1:		+	2		2	
9.		Conge Perthe					•						t diseas	e,		4		2	
		discrep					•				115, III	по ве	ngui						
10.											ons. e	piphy	/seal inj	iuries	+	2		2	
11.													Weigh		$\dagger$	2		2	
12.													s, clinic			2		1	
		present	tation	, inve	stiga	tion,	med	ico-sı	ırgic	al & p	hysio	thera	py man	agemen	ıt				
		of cyanotic & acyanotic heart disease, Rheumatic heart disease																	

13.	Respiratory disorder in childhood – IRDS, Bronchopulmonary dysplasia,	2	1
	pneumonia, lung abscess, asthma, cystic fibrosis, bronchitis,		
	bronchiectasis, bronchiolitis, pertusis, CROUP, epiglotitis, chronic lung		
	disease, primary ciliary dyskinesia, fatigue, sleep apnoea,		
	hyperventilation syndrome		
	Desirable to Know		
14	Role of Orthotics in Paediatric conditions.	2	-
15.	Anatomical & physiological differences of cardio-vascular & respiratory	2	
	system in neonates, childhood & adults		
	Nice to Know		
16.	Paediatric Sports Injuries and Rehabilitation	2	
17.	Assessment of Reflex & Reactions	1	2
18.	SCT		96

	* <del>*</del>
Sr.No	Title
1	Pediatric physical Therapy – Stephen Tecklin
2	Campbell's Physical Therapy for Children – Campbell
3	Nelson Textbook of Paediatrics – Kliegman and St.Geme
4	Handbook of Pediatric Physical Therapy – Long and Toscano
5	Baby Treatment Based on NDT Principles – Lois Bly.
6	Cardiopulmonary Physical Therapy – Scot Irwin

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

# **Preliminary Examination / University (Final) Examination**

### • Written Examination (40 marks)

Sec A	Q.1. MCQs (10 Minutes)	10x1=10 marks
Sec B	Q.2. Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4.Long Answer Question(Answer any 1 out of 2)	1x10=10 marks

### • Practical Examination (40 marks)

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

### **SUPERVISED CLINICAL TRAINING:**

### Journal=5 marks

All the SCT works should be properly documented with **5 CASES** signed by the respective teacher in-charge of course/ subject, indexed in a separate file &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)

			Cou	rse T	itle	:- Ch				•	_		Manu	al Thei	rapy			
	Course Code:- PT 703 B																	
	Course Credit for "Choice Based - Physiotherapy in Manual Therapy"																	
	Ho	ours Hrs/Wk Credits Evaluation Pat								ľ								
(TD)	ъ	COTT	T		ъ	C CTT	m .				m .	W	ritten	Total	Pra	ctical	Total	
Th	Pr	SCT	lot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	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	10	40	50	
								Cou	rse (	Outco	mes							
CO	)																Mapped	
	No. At the end of the course, the learner should be able to:									Program								
110	•																Outcomes	
703E	3.1										_		ual ther				PO1, PO2	
		focusi	ng o	n mus	culo	skele	tal, n	nuscu	lotas	cial ai	nd neu	romu	iscular	patholo	gies.	_		
<b>-</b> 00-		Identif	fv the	e indi	catio	ns ar	nd co	ntra in	dica	tions f	or spe	ecific	manua	l therap	ΟV	l l	PO1, PO2,	
703E	3.2	approa	-								or sp		1110011070		- )	PC	93, PO5,	
		шррг ос					ов, <b>о</b> р										PO7	
		Perfor	m a	compl	ete (	linic	al ac	sessm.	ent c	of a na	tient h	ased	on mai	nual the	rany		01, PO2,	
703E	3.3	approa			icic (		ar as	3033111	ciii c	л а ра	ticiit t	asca	OII IIIa	iluai tiic	лару	PC	93, PO5,	
		арргоа	acrics	٠.												PC	06, PO7	
		•	•	•		•	•		•	•	•	•	•			PC	01, PO2,	
703E	, ,	Delive	er eff	ective	ma	nual	thera	py trea	atme	nt pla	n for I	Limbs	s/Spine	pathol	ogies	PC	03, PO4,	
/03E	0.4	that ar	e wit	thin th	ne sc	ope o	of Ph	ysioth	erap	y prac	tice.					PC	05, PO6,	
																	PO7	

Topic Sr.No	Course Content	Hour teaching/	
		Theory	<b>Practical</b>
Must Kr	ow		
1.	Introduction to Manual Therapy, different school of thoughts	1	-
2.	History of Manual Therapy	1	-
3.	Techniques/concepts/mobilization	27	32
	Assessment and management with clinical reasoning of various neuro- musculoskeletal conditions using following techniques/concepts/ mobilization:		
	<ul><li>Maitland's Technique</li></ul>	2	3
	Kaltenborn's Technique	2 3	3
	Mulligan's concept		4
	<ul><li>Mckenzie's Mechanical Diagnosis &amp;Treatment (MDT)</li></ul>	3	4
	Butler's neural mobilization	3	3 3
	Neurodynamic	2	3
	Muscle Energy Technique	2	3
	Myofascial Release Technique	3	3 3
	Cyriax's mobilization	2	3
	Desirable to Know		
	Introduction to Osteopathy	1	
	Subjective and Objective Assessment of Pain	4	3
4	Nice to know		
	Introduction to Chiropractics	1	-
	Introduction to Clinical Decision Making	1	-
	Principle, Indication & Contra indication of Cranio-sacral Therapy	1	-
5.	SCT		96

Sr.No.	Title
1	Maitland's Vertebral Manipulation – Hengeveld, Banks and English
2	Maitland's Peripheral Manipulation – Hengeveld and Banks
3	Orthopaedic Physical Assessment – Magee
4	Manual Mobilization of the Joints: Joint Examination and Basic Treatment: The
	Extremities, Volume 1 – Kaltenborn, Evjenth, Kaltenborn, Morgan and Vollowitz
5	Manual Mobilization of the Joints: The Spine, Volume 2 – Kaltenborn
6	Deep Massage and Manipulation Illustrated – Cyriax
7	Mobilisation of the Nervous System – David Butler
8	The Human Extremities -Mechanical diagnosis and Therapy - Robin Mc'kenzie
9	The Lumbar Spine Mechanical Diagnosis & Therapy, Volume 2 – Mc'kenzie and May

#### **SCHEME OF EXAMINATION**

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

### **Periodical Examination:**

- Written Examination: -20 MCQs for 10marks, 20 minutes.
  - Practical Examination: 10 marks (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

# **Preliminary Examination / University (Final) Examination**

• Written Examination (40 marks)

Sec A	Q.1 MCQs (10 Minutes)	1x10=10 marks
Sec B	Q.2 Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3 Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4 Long Answer Question(Answer any 1 out of 2)	1x10=10 marks

### • Practical Examination (40 marks)

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

### SUPERVISED CLINICAL TRAINING:

### Journal=5 marks

All the SCT works should be properly documented with **5 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)

# SEMESTER – VIII

			Hours					/Wk			Cre	dits		Evaluation Pattern					
Course	Course (Subject)														ritten	Total	Pra		Total
Code	course (subject)	Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam
PT- 801	Physiotherapy in Neurosciences	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
	Physiotherapy in Cardiorespiratory and General Conditions	64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100
PT- 803A	Choice Based - Physiotherapy in Sports	32	32	96	160	2	2	6	10	2	1	2	5	10	40	50	10	40	50
	or	32	32	90	100			0	10		1		ر	10	40	50	10	40	50
803B	Choice Based - Physiotherapy in Hand Conditions																		
	Total	160	224	288	672	10	14	18	42	10	7	6	23	50	200	250	50	200	250

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

	Course Title :- Physiotherapy in Neurosciences Course Code:- PT 801																	
	Course Credit for Physiotherapy in Neurosciences																	
	Hours Hrs/Wk Credits Evaluation							n Pa	ttern									
												W	ritten	Total	Pra	actical	Total	
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	IA	Final	Final	
64	96	96	256	4	6	6	16	4	3	2.	9	20	exam 80	exam 100	20	exam 80	exam 100	
	Course Outcomes																	
CO	No.	At t	he en	d of t	he co	ourse	e, the	learı	ner s	hould	be ab	le to	:		Maj	Mapped Program Outcomes		
80	1.1	Des	cribe	norma	al nei	ırode	evelo	pmen	t mil	estone	S					PO1		
80	1.2	Des	cribe	differ	ent n	euro-	thera	peuti	с ар	proach	ies				PO	01, PO2	, PO3	
90	1.3	Agg	200 10	lantify	, Pr o	nolv	zo Nic	1150 5	notor	· Pr nor	za <b>h</b> og	omot	ic dysfu	nation	PC	01, PO2,	PO3,	
80	11.5	ASS	ess, ic	ientiiy	$/ \propto a$	maryz	ze me	u10-1	потог	a psy	CHOS	Jiliai	ic dysiu	nction		PO5, P	O9	
															PO1, PO2, PO3,			
80	801.4 Plan ,execute and document appropriate treatment								PC	04, PO5,	PO6,							
																PO7, P	O9	

Topic Sr.No	Course Content	Hours of teaching/learning				
		Theory	Practical			
	NEOROLOGY					
1	Structure and function of Nervous System	2	-			
2	Theories of motor control & motor learning	1	-			
3	Neurological Assessment	5	9			
	Higher mental functions, Cranial Nerves,					
	<ul> <li>Sensory system, Motor system, Reflexes, Co-ordination,</li> </ul>					
	• Balance, functional abilities, neuropathic pain and investigation.					
4	Understanding sensory system & Organization of sensory strategies	1	1			

	for efficient motor output		
5	for efficient motor output.  Skills of sensory motor learning & Neuro-muscular skeletal training	1	3
6	· ·	1	3
O	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-Postural	1	4
/	**	1	4
8	exercises, & Neurological Gait Assessment and management/ training	2	5
0	Principles of Application of Neuro therapeutic skills like PNF, NDT,	2	3
9	SI, Brunnstrom, Bobath, Temple Fay, Vojta & Rood's approaches.	1	3
9	Principles and methods of using tools of Therapeutic gymnasium such	1	3
10	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. <b>Lesion in Brain</b>	4	7
		4	/
	Disorders of cerebral circulation     Space accurating legions		
	Space occupying lesions  The state of t		
	Traumatic Head Injury		
	ii. Disorders of spinal cord	2	5
	Spinal Cord Injury		
	Syringomyelia		
	Transverse myelitis		
	Sub-acute combined degeneration of spinal cord		
	iii. Infections of Nervous System	2	3
	Meningitis, Encephalitis		
	Neurosyphilis, Tabes dorsalis		
	Poliomyelitis and Post Polio Residual Paralysis		
	Leprosy		
	iv. <b>Demyelinating diseases</b> of the nervous system	2	2
	Multiple sclerosis		
	v. Lesions of Extra-pyramidal system & Basal ganglia	2	4
	Spasmodic torticollis		
	Parkinson's Disease		
	Athetosis, Chorea & Dystonia		
	vi. Degenerative disorders	2	2
	Motor Neuron Diseases	_	_
	Hereditary Ataxia		
	Peroneal muscle atrophy, Spinal Muscular Atrophy		
	vii. Disorders of Peripheral nerves	2	3
		<i>_</i>	3
	<ul> <li>Traumatic Nerve Injury, Tumors,</li> <li>Infective &amp; Metabolic lesions of nerves</li> </ul>		
		2	2
	viii. Disorders of muscles and neuromuscular junction	2	2
	Muscular Dystrophies     Muscular Dystrophies		
	Myasthenia Gravis & myasthenia syndrome      D. Israel and the syndrome	2	4
	ix. Polyneuropathy	2	4
	Classification of Polyneuropathies		
	GBS, Diabetic and Alcoholic Neuropathy	_	
	x. Cerebellar & Co-ordination disorders	2	4
	Congenital Ataxia, Friedrich Ataxia		
11	PAEDIATRIC NEUROLOGY	_	
	Developmental milestones and Developmental reflexes	3	4
	Neuro developmental screening tests	2	6

	Assessment & Evaluation:	2	4
	Observation, Palpation,		
	Higher mental function, Cranial nerve examination		
	Motor & Sensory examination, Reflex testing		
	Balance & Coordination examination		
	Gait analysis, Functional analysis		
	Differential Diagnosis		
	List of Problems & Complications, Short & Long Term goals		
	Management & use of various Neurophysiological approaches in:	8	12
	High Risk babies		
	Minimum brain damage		
	Developmental disorders, Cerebral palsy, Autism		
	Down's Syndrome		
	Hydrocephalus		
	Spina bifida and spinal dysraphism		
12	Protecting future generations & Protection of Environment	2	
	Why care about the future? Contexts of concern		
	• 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		
	Relation of bioethics and environmental issues		
	Basic principles of environmental ethics		
	i. environmental justice		
10	ii. intergenerational justice respect for nature	_	
13	Desirable to Know	5	4
	Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling of a paralytic patient      Parent / care takers education about handling education about handling education about handling education about handl		
	Lifting techniques, Wheel chair modifications & adaptive devices		
1.4	Disorders of autonomic nervous system	_	2
14	Nice to Know	5	2
	Embryology of nervous system		
	Psycho-somatic Pain & Paralysis.  File of the control of the		
	• Fabrication of temporary splints during urgent requirement with		
	clinical reasoning		
1.5	Developing a philosophy for caring.  CCT.		0.0
15	SCT		96

Sr.No.	Title
1	Cash's Textbook of Neurology for Physiotherapists - Patricia Downie
2	Physical Rehabilitation - Susan. B.O`Sullivan
3	Tidy's Physiotherapy - Stuart Porter
4	Neurological Rehabilitation - Darcy Umphred
5	Practical Exercise Therapy - Margaret Hollis
6	Therapeutic exercise – Colby & Kisner
7	Treatment of Cerebral Palsy and Motor Delay – Levitt and Addison
8	Pedretti's Occupational Therapy: Practice Skills for Physical Dysfunction – McHugh,
	Pendleton and Winifred Schultz-Krohn

#### Reference Books

Sr.No.	Title
1	Therapeutic Exercise - Basmajian
2	Right in the Middle: Selective Trunk Activity in the Treatment of Adult Hemiplegia -
	Patricia M. Davies
3	Krusen's Handbook of Physical Medicine and Rehabilitation – Kottke and Lehmann
4	Brain's Disorders of Nervous System - Michael Donaghy

#### SCHEME OF EXAMINATION

7	Written	Total	Pr	actical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
20	80	100	20	80	100

#### **Periodical Examination:**

- Written Examination:-20 MCQs for 20 marks, 20 minutes.
- Practical Examination:- 20 marks(Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

# Preliminary Examination / University ( Final) Examination

### • Written Examination (80 marks)

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

### • Practical Examination (80 marks)

S.No.		Marks
1.	Long case:	40
	History-10marks, Evaluation-10 marks, Treatment Plan on	
	Patient-20marks	
2.	Short case (simulated)	20
3.	Five Spots: - Spots based on EMG, NCV Studies, Orthosis,	3x5=15
	Prosthesis, Neuro-assessment scale	
	3 minute & 3 Marks each spot	
4.	Journal	5
L		

### **SUPERVISED CLINICAL TRAINING:**

### Journal=5 marks

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** on following:

- U.M.N. lesion -4
- L.M.N. lesion- 4
- Paediatric Neurological condition-2

## 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 Cardiorespiratory and General Conditions																	
	Course Code:- PT 802 Course Credit for Physiotherapy in Cardiorespiratory and General Conditions																	
			se Cr	edit fo		•	hera	py in			pirate	ory a						
	H	ours	1		Hrs	/Wk	1		Cr	edits				<mark>zaluatio</mark>			r	
TC1	ъ	COT	m .		ъ	C CTT	m .			a com	m .	W	ritten	Total	Pra	ctical	Total	
Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA	Final exam	Final exam	IA	Final exam	Final exam	
64	96	96	256	4	6	6	16	4	3	2	9	20	80	100	20	80	100	
								Cour	se O	utcom	es							
CO No.  At the end of the course, the learner should be able to:										Prog	pped gram comes							
		Ident	ify di	ecuse	& ar	alvze	card	liovasi	cular	& nul	mona	rv dv	efunction	on, base	d on		, PO2	
802	2.1													al diagn		101	, 1 02	
		1 delle	prijs	101081	- Cur	7111101	7105 0	~ 4111	···	тие ир	ргоргі		411011011	ar urugii	0010.	PO1.	PO2,	
802	2.2	Asses	ss Car	diovas	scula	r and	Resp	oirator	v svs	stem							PO3, PO5,	
							1		<i>J</i> - <i>J</i> -							1	PO7	
802	2.3	Interp	oret ra	diolog	gical	and b	ioch	emica	l inv	estigati	ions					P	O2	
		•														PO1,	PO2,	
802	2.4	Perfo	rm ex	ercise	tole	rance	tests	like 6	6MW	D, and	dothe	r syn	nptom li	mited to	ests.	PO3,	PO5,	
																	Э7	
802	2.5												sing wo	ork of			PO2,	
002		breat	hing, a	and cl	earin	g sec	retion	ns, ma	intai	n bron	chial l	hygie	ene,			1	O3	
									_								PO2,	
802	2.6	Demo	onstra	te the	skill	of ba	sic C	ardio	pulm	onary	resusc	citatio	on.				PO5,	
																	DO2	
		Demo	onstra	te app	ropr	iate pa	atient	care	in th	e Inten	sive c	are a	rea, des	cribe a	nd	1	PO2, PO4,	
802	2.7	main	tain ap	propi	iate	artific	ial v	entilat	tion,	suction	ning, p	ositi	oning f	or brone	chial	1	PO4, PO6,	
	hygiene, & continuous monitoring of the patient at the Intensive care area.								, PO9									
		Demo	onstra	te phy	sioth	nerane	eutic	measi	ires v	with an	propr	iate o	clinical	reasoni	ng to		PO2,	
802	2.8	Demonstrate physiotherapeutic measures with appropriate clinical reasoning to improve general surgical & medical condition including physiotherapy for burns.									-	, PO7						
	Select strategies for cure, care & prevention; adopt restorative & rehabilitative								PO2,									
802	2 9			_				•			•					1 '	PO4,	
002	۷.)	.9 measures for maximum possible functiona work place & in community.				an independence of a patient at nome					,,,,,	1 '	PO6,					
		work place & in community.						PO7	PO7, PO9									

Topic Sr.No.	Course Content	Hours of teaching/learning		
		Theory	<b>Practical</b>	
Must K	now			
1	Assessment of Cardiovascular and Respiratory system.	2	3	
2	Anatomical and Physiological differences between the Adult and	1	-	
	Paediatric lungs			
3	Interpretation of radiological & biochemical investigations & correlate	2	3	
	the same with clinical findings.			
4	Diagnosis of cardio respiratory dysfunction (ECG, PFT, serum	3	3	
	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
O	Energy Conservation	2	3
	Positioning		
	Breathing re-education – Breathing control techniques     Machanizate HPPP GPAP BIDAR		
7	Mechanical aids – IPPB, CPAP, BiPAP  Planical aids – IPPB, CPAP, BiPAP		0
/	Physiotherapy techniques to clear secretions	5	8
	Hydration, Humidification & Nebulisation		
	Mobilization and Breathing exercises		
	Postural Drainage		
	Manual techniques – Percussion, Vibration and Shaking, Rib		
	Springing, ACBT, Autogenic Drainage		
	Mechanical Aids – PEP, Flutter, Acapella, RC Cornet, IPPB  The street of Grand LIVE Control of		
	Facilitation of Cough and Huff		
-	• Suctioning		
8	Drug Therapy	1	-
9	Obstructive, Restrictive & Mixed Patterns of Lung Disorders & their	5	5
10	PT Management		
10	Physiotherapy following Lung Surgeries	2	5
11	Pulmonary Rehabilitation	2	3
12	Intensive care unit	5	15
	Assessment of the critically ill patients		
	Monitoring in the ICU		
	• Physiotherapy in the ICU – Common conditions in the ICU – Head		
	Injury, Pulmonary Edema, Multiple Organ Failure, Neuromuscular		
	Disease, Poisoning, Aspiration, ARDS, Shock etc.		
	Dealing with Emergency situations in ICU		
	NICU / PICU treatment & rehabilitation		
13	O <sub>2</sub> therapy and Mechanical Ventilation	3	3
14	Physiotherapy management for cardiac disorders	3	5
15	Physiotherapy for Cardiac Surgeries	3	5
	(including Critical Cardiac Care)		
16	Cardiac Rehabilitation	1	3
17	Cardio-pulmonary resuscitation.	2	2
18	Physiotherapy intervention in the management of Medical and Surgical	3	3
	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	Assessment &PT Management following Peripheral vascular diseases.	2	4
22	Management of wounds and ulcers, Diabetes and its complications	2	4
	Care of wounds, ulcers & scars -U.V.R and other electro		
	therapeutics measures for healing of wounds, prevention of Hyper		
	granulated Scars, Keloids		
	• Electrotherapeutics measures for relief of pain during mobilization		
	of scars tissues		
23	Burns:	2	2
	PT management of burns, Post grafted management,		
	Mobilization & Musculoskeletal restorative exercises following burns		
24	Treatment of Lymphoedema	1	<u>-</u>
25	Physiotherapy in dermatology	2	4
	• U.V.R therapy in various skin conditions; Vitiligo; Hair loss;		
	Pigmentation; Infected wounds ulcers.		

	For die Continue II continue de la cie		
	Faradic foot bath for Hyperhydrosis		
	Care of anaesthetic hand and foot		
26	Desirable to Know	3	3
	Cardiorespiratory changes associated with ageing & fitness		
	program.		
	Familiarization with concept of Quality of life		
	• Precautions with HIV		
27	Nice to Know	1	1
	Outcome Measures in Cardiovascular & Pulmonary Conditions		
28	SCT / CLINICAL		96
	Skill to palpate all pulses- rate, rhythm, volume & its discrepancy		
	Skill to assess B.P. at various sites & its Physiological variation, & to		
	assess Ankle- Brachial Index		
	Skill of exercise testing- 6,12 min walk &symptom limited		
	Interpretation of:		
	> treadmill & Ergo-cycle test findings		
	ECG- I.H.D. & Blocks		
	➤ 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, A.B.G		
	Chest X-ray		
	<ul> <li>P.F.Tobstructive/ restrictive/reversibility</li> </ul>		
	> R.P.EBorg's scale		
	<ul><li>Quality of life questionnaires</li></ul>		
	y Quanty of me questionnanes		

Sr.No.	Title
1	Cash's Textbook of Chest, Heart, and Vascular Disorders for Physiotherapists – Downie and
	Cash
2	Cash's text book in General Medical & Surgical conditions for Physiotherapists - Cash
3	Principles and Practice of Cardiopulmonary Physical Therapy - Donna Frownfelter
4	The Brompton Hospital guide to chest physiotherapy - Gaskell, Webber and Brompton
	Hospital
5	Physical Rehabilitation – Susan B O'Sullivan

# **Reference Books**

Sr.No.	Title
1	Physiotherapy for Respiratory and Cardiac Problems – Pryor and Webber
2	Exercise & the Heart – Wenger
3	Understanding ECG – P.J. Mehta
4	The ECG Made Easy - J. Hampton
5	Cardiopulmonary Physical Therapy – Scot Irwin
6	Physiotherapy in Respiratory Care – Alexandra Hough

## **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 MCQs for 20marks, 20 minutes.
- Practical Examination: 20 marks (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

# Preliminary Examination / University (Final) Examination

### • Written Examination (80 marks)

Sec A	Q.1.MCQs	20x1=20 marks
Sec B	Q.2.Short Notes (Answer any 5 out of 6)	5x3=15 marks
	Q.3.Short answer questions (Answer any 3 out of 4)	3x5=15 marks
Sec C	Q.4. Long Answer Questions (compulsory)	1X15=15marks
	Q.5. Long Answer Questions (any 1 out of 2)	1X15=15marks

### • Practical Examination (80 marks)

Sr.No.		Marks
1.	Long case:	40
	History-10marks, Evaluation-10 marks, Treatment Plan on Patient-20marks	
2.	Short case (Simulated)	20
3.	Five spots:	3x5=15
	5 Spots based on X –ray, ABG, ECG, PFT, RPE/Bruce protocol	
	3 minutes, 3 marks for each spot	
4.	Journal	5

### SUPERVISED CLINICAL TRAINING:

### Journal=5 marks

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, 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:-**

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)

				(	Cour	se Ti	tle :-	· Cho	ice B	ased -	Phys	ioth	erapy i	<mark>n Sport</mark>	S			
	Course Code:- PT 803A																	
	Course Credit for "Choice Based - Physiotherapy in Sports"																	
	H	ours										ttern						
		~ ~	_	_		SC					_	W	ritten	Total	Pra	actical	Total	
Th	Pr	SCT	Tot	Lec	Pr	T	Tot	Lec	Pr	SCT	Tot	IA	Final	Final	IA	Final	Final	
32	32	96	160	2	2	6	10	2	1	2	5	10	exam 40	exam 50	10	exam 40	exam 50	
32	32	70	100			0	10			Outcor		10	40	1 30	10	40	30	
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803.	A 1												ody's v		10	1		
003				hen ex						······································		011 (	ody s	various				
803.	A.2	•								ss trai	ning.					P	O1	
						-								•			, PO2,	
803.	A.3									issessn		PO3, PO5,						
		mana	igeme	ent of	vario	ous m	iuscu	loske	letal	sports	ınjurı	es.					PO6	
				PO1, P					, PO2,									
803.	A.4	Describe common sports emergencies, their assessment and management.													PO4	PO4, PO5,		
																PO6	, PO9	
803.	۸ 5	. A D I									PO1	, PO2,						
803	A.3	Assess Body composition using various tools.											O3					
803.	Δ 6	6 Demonstrate skill in applying therapeutic taping.									, PO2,							
003	1.0	Dem	Onstr	ite ski	11 111	appi.	ymg	tiicia <sub>k</sub>	Cutic	- tapin	<u>ح</u>						O3	
																	, PO2,	
803.	A.7	Conc	luct o	n-fiel	d ass	essm	ent a	nd fit	ness	testing	on A	thlet	es.				, PO5,	
																	, PO9	
																PO1, PO2,		
803.	A.8	Appr	opria	telv re	efer t	he su	biect	ts for	furth	er trea	tment						, PO4,	
00371.0		Appropriately refer the subjects for further treatment.												, PO6,				
																PO7	, PO9	

Topic	Course Content	Hou	ırs of			
Sr.No.		teaching/learning				
		Theory	Practical			
Must K	now					
1	Training the aerobic and anaerobic energy system	2	-			
2	Physiological responses, changes & adaptations to various exercises -	2	-			
	aerobic exercises & anaerobic exercises in Pulmonary,					
	Cardiovascular, Neuromuscular system, Hormones					
3	Detraining effects of cardiovascular, musculoskeletal and nervous	2	-			
	system					
4	Sports specific training and cross training.	2	-			
5	Musculoskeletal injuries	10				
	Pre–participation examination	2	-			
	<ul> <li>Causes &amp; Mechanism of Sports Injuries, prevention of sports injuries to various structures.</li> </ul>	2	-			
	<ul> <li>Common acute, chronic and overuse injuries in various sports at:</li> <li>Shoulder girdle, Shoulder, Arm, Elbow, Forearm, Wrist &amp; hand</li> </ul>	4	-			
	➤ Pelvis, hip, thigh, knee, leg, ankle & foot					
	➤ Spine, Head					
	➤ Thoracic cage and abdomen					

	Peripheral nerve injuries, injuries to muscles, ligament, tendon,	2	
	bone, synovial joint structure(with physiological response to injury)	2	
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		
	<ul> <li>Medical management of mass participation. Heat stroke and Heat</li> </ul>		
	illness.		
7	Desirable to know	5	-
ĺ	Body composition		
	Different Body composition	3	
	<ul> <li>Various methods to estimate body composition: water</li> </ul>		
	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		
	Electrotherapy in sports injuries	2	
8	Nice to know	3	-
	Various Body measurements- Gross size and mass, length and		
	height measurement, circumference of body parts, Skinfold thickness		
	measurements		
9	PRACTICALS		32
	a. On field Assessment		2
	b. Evaluation of Physical Fitness: Assessment of strength, power,		8
	endurance (muscular & cardiac), VO2max, flexibility, reaction time		
	and pulmonary function.		
	c. Assessment of lower limb complex: Pelvis, hip, thigh, knee, leg,		10
	ankle and foot		
	d. Assessment of upper limb complex: Shoulder girdle, shoulder, arm,		10
	elbow, forearm, wrist and hand		
	e. Taping		2
10	SCT		96

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Sr.No.	Title
1	Clinical Sports Medicine – Brukner and Khan
2	Pocketbook of Taping Techniques – Rose mc Donald
3	Textbook of Applied Measurement, Evaluation & Sports Selection – Devander K Kansal
4	Essentials of Exercise Physiology – Mc Ardle, Katch and Katch

# **Reference Books**

Sr.No.	Title
1	Sport Physical Therapy – Bernhardt Donna
2	Sports Injuries: Causes, Diagnosis, Treatment and Prevention – Bird, Black and Newton
3	Functional Movement in Orthopaedic and Sports Physical Therapy: Evaluation, Treatment
	and Outcomes – Brownstein and Bronner
4	Rehabilitation Techniques in Sports Medicine – William Prentice

#### SCHEME OF EXAMINATION

V	Vritten	Total	Pr	actical	Total
IA	Final exam	Final exam	IA	Final exam	Final exam
10	40	50	10	40	50

#### **Periodical Examination:**

- Written Examination: -20 MCQs for 10 marks, 20 minutes.
- Practical Examination: 10 marks (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

### Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

1	Q.1. MCQs (10 Minutes)	1x10=10 marks
2	Q.2. Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. 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 marks, Treatment Plan on Patient-15 marks	25
2.	Short Case: Simulated	10
3	Journal	5

### **SUPERVISED CLINICAL TRAINING:**

### Journal=5 marks

All the SCT works should be properly documented with **5 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 marksPrelim exam = 40 marksTotal = 50 marksThe total shall be Converted to 10 marks (50/5=10)

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Sr.No	Title
1	The Hand: Fundamental of Therapy – Judith Boscheinen Morrin & W. Bruce Conolly
2	Hand Pain and Impairment – Rene Cailliet.

#### Reference Books

Sr.No	Title
1	Rehabilitation of the Hand - James Hunter
2	Hand and Upper Extremity Rehabilitation : A Practical guide – Burke, Higgins, Saunders, McClinton and Valdata
3	Concepts of hand rehabilitation – Stanley and Tribuzi

### **SCHEME OF EXAMINATION**

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 MCQs for 10 marks, 20 minutes.
  - Practical Examination: 10 marks (Spots/OSCE/ OSPE//Mini CEX/ simulated cases/clinical cases)

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### Preliminary Examination / University (Final) Examination

• Written Examination (40 marks)

1	Q.1. MCQs (10 Minutes)	1x10=10 marks
2	Q.2. Very Short answer questions (Answer any 5 out of 6)	5x2=10 marks
	Q.3. Short answer questions (Answer any 2 out of 3)	2x5=10 marks
	Q.4. 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 marks, Treatment Plan on Patient-15	25
	marks	
2.	Short Case: Simulated	10
3	Journal	5

## **SUPERVISED CLINICAL TRAINING:**

#### Journal=5 marks

All the SCT works should be properly documented with **5 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 marksPrelim exam = 40 marksTotal = 50 marksThe total shall be Converted to 10 marks (50/5=10)

# **COMPULSORY ROTATORY INTERNSHIP (1092 Hrs across 26 WEEKS)**

			Hours				Hrs/Wk				Credits				Evaluation Pattern					
Cour	se Course													Written		Total	l Practical		Total	
Cod		Th	Pr	SCT	Tot	Lec	Pr	SCT	Tot	Lec	Pr	SCT	Tot	IA		Final exam	IA	Final College exam	Final College exam	
PT- 901	Compulsory Rotatory Internship	1	-	858	858	-	1	33	33	1	1	11	11	1	-	1	50	1	50	
PT- 902	Internship Project	-	-	234	234	-	-	9	9	-	-	3	3	-	-	-	20	30	50	
	Total	0	0	1092	1092	0	0	42	42	0	0	14	14	0	0	0	70	30	100	

	Course Title :- Compulsory Rotatory Internship  Course Code:- PT 901																
	Course Credit for Compulsory Rotatory Internship																
	]	Hours			Hr	s/Wk		Credits				Evaluation Pattern					
												W	ritten	Total	Pra	nctical	Total
Th	Pr	Clinic	Tot	Lec	Pr	Clinics	Tot	Lec	Pr	Clinics	Tot	IA	Final exam	Final exam	IA	Final exam	Final College exam
-	-	858	858	-	-	33	33	-	-	11	11	-	-	-	50	-	50

	Course Title :- Internship Project Course Code:- PT 902 Course Credit for Internship Project																
	Hours Hrs/Wk Credits										Evaluation Pattern						
												W	ritten	Total	Pı	ractical	Total
Th	Pr	Clinic	Tot	Lec	Pr	Clinics	Tot	Lec	Pr	Clinics	Tot	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 (5 cases each)	5X4=20
	i. Musculoskeletal sciences	
	ii. Neurosciences	
	iii. Cardiorespiratory& general conditions	
	iv. Community Based Rehabilitation	
2	Journal clubs (2)	5X2=10
3	Summative evaluation	5x4=20
3	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
1	Timely submission of project work	marks 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.