

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SYLLABUS FOR

III

BACHELOR OF PHYSIOTHERAPY (B.P.Th.)

DEGREE COURSE

This syllabus is applicable from the academic year 2012-2013

PHYSIOTHERAPY

DEFINITION:

Physiotherapy' is a branch of modern medical science which includes examination, assessment, interpretation, physical diagnosis, planning and execution of treatment and advice to any person for the purpose of preventing, correcting, alleviating and limiting dysfunction, acute and chronic bodily malfunction including life saving measures via chest physiotherapy in the intensive care unit, curing physical disorders or disability, promoting physical fitness, facilitating healing and pain relief and treatment of physical and psychological disorders through modulating psychological and physical response using physical agents, activities and devices including exercise, mobilization, manipulations, therapeutic ultrasound, electrical and thermal agents and electrotherapy for diagnosis, treatment and prevention.

(Definition as per the Maharashtra State Council for Occupational therapy & Physiotherapy, 2004)

'Physiotherapist' is a qualified professional who has acquired all the above mentioned knowledge and skills for entry into practice after being awarded a bachelor degree in the subject of "Physiotherapy" from a recognised institute affiliated to the University conducting a fulltime course not less than four years and six months of internship.

PREAMBLE

Physiotherapy or Physical Therapy (P.T.) is a **Movement Science** with an established theoretical and scientific base and widespread clinical applications in the **Prevention**, **Restoration & Rehabilitation**, **Maintenance and Promotion of optimal physical function**. Physiotherapists **diagnose and manage movement dysfunction** and enhance physical and functional abilities. This physical dysfunction may be the sequelae of involvement of any of the systems like Musculoskeletal, Neurological, Cardiovascular, Respiratory or other body systems.

These practitioners contribute to society and the profession through practice, teaching, administration, and the discovery and application of new knowledge about physiotherapy experiences of sufficient excellence and breadth by research to allow the acquisition and application of essential knowledge, skills, and behaviors as applied to the practice of physiotherapy.

Learning experiences are provided under the guidance and supervision of competent faculty, in both, classroom as well as in clinic. The designed curriculum will prepare the entry-to-practice physiotherapist (PT), to be an autonomous, effective, safe and compassionate professional, who practices collaboratively in a variety of healthcare set ups such as neonatal to geriatric, from critical care to community fitness to sports training and is responsive to the current and future needs of the health care system.

<u>VISION</u>: To create a best possible environment to prepare physiotherapist who shall lead to serve & heal in a variety of healthcare and social settings to provide best quality of life to an individual.

MISSION: To graduate knowledgeable, service-oriented, self-assured, adaptable, reflective practitioners who, by virtue of critical and integrative thinking along with clinical reasoning, lifelong learning, and ethical values, render independent judgments concerning patient /person needs those are supported by evidence; promote the health of the patient or person; and enhance the professional, contextual, and collaborative foundations for physiotherapy practice.

ESSENTIAL REQUIREMENTS

The following "essential requirements" specify those attributes that the faculty consider necessary for completing the professional education enabling each graduate to subsequently enter clinical practice. The purpose of this curriculum is to delineate the cognitive, affective and psychomotor skills deemed essential for completion of this program and to perform as a competent physiotherapist who will be able to evaluate, plan & execute physiotherapy treatment independently.

COGNITIVE LEARNING SKILLS: The student must demonstrate the ability to receive, interpret, remember, reproduce and use information in the cognitive, psychomotor, and affective domains of learning to solve problems, evaluate work, and generate new ways of processing or categorizing similar information listed in course objectives.

PSYCHOMOTOR SKILLS: The student must demonstrate the following skills.

1. Locomotion ability:

Get to lecture, laboratory and clinical locations, and move within rooms as needed for changing groups, partners and work stations. Move quickly in an emergency situation to protect the patient (e.g. from falling).

2. Manual tasks:

- a. Maneuver another person's body parts to effectively perform evaluation techniques. Manipulate common tools used for screening tests of the cranial nerves, sensation, range of motion, blood pressure, e.g., cotton balls, safety pins, goniometers, Q-tips, sphygmomanometer. Safely and effectively guide, facilitate, inhibit, and resist movement and motor patterns through physical facilitation and inhibition techniques (including ability to give timely urgent verbal feedback).
- b. Manipulate another person's body in transfers, gait, positioning, exercise, and mobilization techniques. Manipulate evaluation and treatment equipment safely and accurately apply to patients. Manipulate bolsters, pillows, plinths, mats, gait assistive

devices, and other supports or chairs to aid in positioning, moving, or treating a patient effectively.

c. Competently perform and supervise cardiopulmonary resuscitation

3. Fine motor/hand skills:

- a. Legibly record thoughts for written assignments (including diagrams) and tests. Document evaluations, patient care notes, referrals, etc. in standard medical charts in hospital/clinical settings in a timely manner and consistent with the acceptable norms of clinical settings.
- b. Safely apply and adjust the dials or controls of therapeutic modalities.
- c. Safely and effectively position hands and apply mobilization and therapeutic techniques.

4. Visual acuity to:

- a. Read written and illustrated material in the English language, in the form of lecture handouts, textbooks, literature and patient's chart.
- b. Observe active demonstrations in the classroom.
- c. Visualize training videos, projected slides/overheads, X-ray pictures, and notes written on a blackboard/whiteboard.
- d. Receive visual information from patients, e.g., movement, posture, body mechanics, and gait necessary for comparison to normal standards for purposes of evaluation of movement dysfunctions.
- e. Receive visual information from treatment environment, e.g., dials on modalities and monitors, assistive devices, furniture, flooring, structures, etc.
- f. Receive visual clues as to the patient's tolerance of the intervention procedures. These may include facial grimaces, muscle twitching, withdrawal etc.

5. Auditory acuity to:

- a. Hear lectures and discussion in an academic and clinical setting.
- b. Distinguish between normal and abnormal breathing, lung and heart sounds using a stethoscope.

6. Communication:

- a. Effectively communicate information and safety concerns with other students, teachers, patients, peers, staff and personnel by asking questions, giving information, explaining conditions and procedures, or teaching home programs. These all need to be done in a timely manner and within the acceptable norms of academic and clinical settings.
- b. Receive and interpret written communication in both academic and clinical settings in a timely manner.
- c. Receive and send verbal communication in life threatening situations in a timely manner within the acceptable norms of clinical settings.
- d. Physiotherapy education presents exceptional challenges in the volume and breadth of required reading and the necessity to impart information to others. Students must be able to communicate quickly, effectively and efficiently in oral and written English with all members of the health care team.

7. Self care:

Maintain general good health and self care in order not to jeopardize the health and safety of self and individuals with whom one interacts in the academic and clinical settings.

AFFECTIVE LEARNING SKILLS: The student must be able to:

- 1. Demonstrate respect to all people, including students, teachers, patients and medical personnel, without showing bias or preference on the grounds of age, race, gender, sexual preference, disease, mental status, lifestyle, opinions or personal values.
- 2. Demonstrate appropriate affective behaviors and mental attitudes in order not to jeopardize the emotional, physical, mental, and behavioral safety of patients and other individuals with whom one interacts in the academic and clinical settings and to be in compliance with the ethical standards of the profession.
- 3. Acknowledge and respect individual values and opinions in order to foster harmonious working relationships with colleagues, peers, and patients.

PROFESSIONAL DRESS CODE STANDARDS:

It is important to portray a professional image. A clinician with inappropriate dress, grooming or conduct can damage the patient's confidence in the quality of their care, sometimes even resulting in a delay in the restoration of health.

Haircuts, hairstyling, and personal grooming need to be neat, conservative and inconspicuous. Grooming and style should be practical and allow one's duties to be performed without embarrassment or inconvenience

DRESS:

Modest casual wear is appropriate on campus and in class.

Clinical /Lab Dress: Aprons for all clinical assignments, any class that is held in a clinical facility and in any class where patients are present.

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- a. Students will revise, recall and integrate the knowledge of previous years to evaluate, functionally diagnose, plan and execute short and long term management of various musculoskeletal, neurological & cardiovascular- respiratory dysfunctions in hospital and community settings.
- b. Students also acquire knowledge pertaining to health promotion & disease prevention throughout lifespan in the community. They will also be able to analyse, prevent and treat problems associated with various industries in community physiotherapy.
- c. Students will also acquire knowledge about biomechanical principles & application of variety of aids & appliances used for ambulation, protection & prevention by studying Bioengineering.
- d. Professional Practice and ethics as a subject will be studied in continuum from first year, so students will acquire the knowledge of ethical code of professional practice, as well as its moral& legal aspects. The principles of Hospital Administration, Management & Marketing will be studied separately.
- e. Students will also acquire knowledge of Research Methodology and Biostatistics and apply the knowledge in project work in community physiotherapy.

INTERNSHIP

- a. A period of 6 months (26 weeks) of continuous clinical practice to enhance the clinical reasoning, judgment, programme planning, intervention, evaluation of intervention, follow up and referral skills of all the dysfunctions and impairments learnt throughout the curriculum of four years.
- b. Those candidates declared to have passed the final year examination in all subjects shall be eligible for internship.
- c. Internship shall be done in a teaching hospital recognized by the University. A degree certificate shall be awarded ONLY on successful completion of six months of internship.
- d. The Internship will be rotatory and shall cover clinical branches concerned with Physiotherapy such as Orthopaedics, Cardiovascular & Respiratory including ICU, Neurology & Neurosurgery Paediatrics, General Medicine, Surgery, Obstetrics and Gynecology both inpatient and outpatient services.
- e. Successful Completion: The student must maintain a logbook. On completion of each posting, the same will have to be certified by the faculty in charge of the posting for both attendance as well as work done. On completion of all the postings, the duly completed logbook will be submitted to the Principal/Head of program to be considered as having successfully completed the internship program.

SUBJECTS SCHEDULE

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TRANSCRIPT HOURS- 1400

Sr. No.	SUBJECTS	Teaching Hrs
	PROFESSIONAL PRACTICE	
1	Professional practice & Ethics	015
	MEDICAL SCIENCES	
2	Surgery-I	055
3	Surgery-II	060
4	Medicine-I	055
5	Medicine-II	065
6	Community Medicine & Sociology	060
7	Obstetrics & Gynaecology	030
8	Dermatology	010
	PHYSIOTHERAPY	
9	Functional Diagnosis & Physiotherapeutic Skills	460
10	Seminar (including I.C.F.)	090
11	Supervised clinical practice	500
	TOTAL	1400

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Transcript Hours- 1400

Sr. No.	SUBJECTS	Theory Hours	Laboratory / Clinical Hours	Total Hours
	PROFESSIONAL PRACTICE			
1	Professional Practice & Ethics (College Examination in final year)	10	005	015
	MEDICAL SCIENCES			
2	Surgery-I (Cardiovascular & Thoracic Surgery, General Surgery & Plastic/Reconstructive Surgery)	030	025	055
3	Surgery-II (Orthopaedics)	040	020	060
4	Medicine-I (Cardiovascular Respiratory Medicine, General Medicine, Rheumatology & Gerontology)	045	010	055
5	Medicine-II (Neurology & Paediatrics)	045	020	065
6	Community Medicine & Sociology	050	010	060
7	Obstetrics & Gynaecology (College Examination)	020	010	030
8	Dermatology (College Examination)	010	-	010
	PHYSIOTHERAPY			
9	Functional Diagnosis & Physiotherapeutic Skills	135	325	460
10	Seminar (including ICF)	-	090	090
11	Supervised clinical practice	-	500	500
	TOTAL	385	1015	1400

PROFESSIONAL PRACTICE AND ETHICS

(COLLEGE EXAMINATION IN FINAL YEAR)

COURSE DESCRIPTION:

TOT AL -15 HRS

This subject would be taught in continuum from first year to final

year. An exam in theory would be conducted only in final year. Professional and ethical practice curriculum content addresses the Knowledge, Skills and Behaviors required of the physiotherapist in a range of practice relationships and roles. The course will discuss the role, responsibility, ethics administration issues and accountability of the physical therapists. The course will also cover the history and change in the profession, responsibilities of the professional to the profession, the public and to the health care team. This includes the application of professional and ethical reasoning and decision-making strategies, professional communication.

OBJECTIVES:

At the end of the course the student will be compliant in following domains:

Cognitive:

- a) Be able to understand the moral values and meaning of ethics.
- b) Will acquire bedside manners and communication skills in relation with patients, peers, seniors and other professionals.

Psychomotor:

- a) Be able to develop psychomotor skills for physiotherapist-patient relationship.
- b) Skill to evaluate and make decision for plan of management based on sociocultutural values and referral practice.

Affective:

- a) Be able to develop behavioral skills and humanitarian approach while communicating with patients, relatives, society at large and co-professionals
- b) Be able to develop bed side behavior, respect & maintain patients' confidentiality

Sr.	Topics	Didactic	Visits/	Total
No.		Hours	Supervisio	Hour
			n Hours	s
1.	Collecting data on psychosocial factors in	04		
	Medicine / Surgery / Reproductive Health /			
	Paediatrics		05	15
2.	Inter professional communication.	03		
3.	Ethics in clinical practice	03		

TOTAL	10	05	15

SURGERY-I

(General Surgery, Cardiovascular & Thoracic Surgery & Plastic/ Reconstructive Surgery)

(Didactic-35hrs + Clinical -20 hrs) **TOTAL =55HRS**

COURSE DESCRIPTION:

This course intends to familiarize students with principles of General surgery including various specialties like cardiovascular, thoracic, neurology and plastic surgery. It also familiarizes the students with terminology and abbreviations for efficient and effective chart reviewing and documentation. It explores various conditions needing attention, focusing on epidemiology, pathology, as well as primary and secondary clinical characteristics and their surgical and medical management. The purpose of this course is to make physiotherapy students aware of various surgical conditions general surgery and specialty surgeries so these can be physically managed effectively both pre as well as postoperatively.

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
1.	GENERAL SURGERY	20	10	30
2.	CARDIO VASCULAR AND THORACIC	10	5	15
	SURGERY			
3.	PLASTIC SURGERY /	5	5	10
	RECONSTRUCTIVE SURGERY			
	TOTAL	35	20	55

OBJECTIVES:

At the end of the course, the candidate will be able to:

- 1. Describe the effects of surgical trauma & Anaesthesia in general
- 2. Clinically evaluate & describe the surgical management in brief of
 - a) General Surgery
 - b) Neuro Surgery
 - c) Cardiovascular and Thoracic Surgery
 - d) ENT & Ophthalmic Surgery
 - e) Plastic & Reconstructive Surgery
- 3. Describe pre-operative evaluation, surgical indications in various surgical approaches,

- management and post operative care in above mentioned areas with possible complications.
- 4. Be able to read & interpret findings of the relevant investigations

Sr. No.	Topics	Didactic Hours	Clinical Hours	Total Hours
1	CENTED AT CHIP CEDAY	+		
1	GENERAL SURGERY	20	10	30
	a. GENERAL:	12	10	
	 i. Anaesthesia types, Effect, indications and contraindications and common postoperative complications ii. Haemorrhage and Shock, classification, description and treatment 			
	iii. Water & Electrolyte imbalance			
	iv. Inflammation – acute & chronic-signs, symptoms, complications & management			
	v. Wounds & Ulcers, Cellulitis – classification, healing process, management, bandaging, Dressing solutions and its uses and debridement Procedure, hand washing and universal precautions.			
	vi. Enumerate Common abdominal surgical incisions – classification, indications, opening – closure, advantages and disadvantages, complications (including burst abdomen and feacal fistula), minimally invasive surgery.			
	vii. Mastectomy and oncosurgery— approach, complications & management			
	viii. Amputation – types, sites, complications & management			
	ix. Burns – causes, complications, classification & management			
	x. Varicose veins and PVD			
	xi. Hernias-surgery, precautions and complications			
	xii. Transplantation approach, risk problems related to donor and receipient,			

	precautions.		
b.	NEUROSURGERY	4	
i.	Head Injury – management		
I	Intra cranial & Spinal tumors Intracranial Aneurysm and AV malformation		
iv.	Post operative Neurosurgical care		

Sr. No.	Topics	Didactic	Clinical	Total
		Hours	Hours	Hours
	c. E.N.T. Surgery	3		
	i. Tracheostomy – indications,			
	surgical approach & management			
	ii. Surgical procedures in VII th cranial			
	nerve palsy			
	iii. Vertigo			
	d. Ophthalmic Surgery	1		
	Surgeries for III rd , IV th , VI th Cranial Nerve palsy			
2	CARDIO VASCULAR AND THORACIC	10	5	15
	SURGERY			
	a. Introduction, Cardiorespiratory			
	resuscitation, cardiopulmonary bypass,			
	Special investigation procedures in			
	cardiac surgery, Basic techniques in			
	cardiac surgery approach, incisions,			
	Types of operation, Complications of			
	cardiac surgery, Lines, drains and tubes.			
	b. Brief description of indications,			
	surgery, complications for following			
	surgery:			
	i. Surgeries of thorax			
	Surgeries of the lung Surgeries of pleura and pericardium			
	ii. Surgeries of pleura and pericardiumiii. Surgery for coronary artery disease			
	iv. Valvular surgeries			
	v. Surgery for Congenital Heart Disease			
	vi. Peripheral arterial disorder,			
	Burger's disease, Raeynaud's			
	disease and Aneurysm			
	vii. Gangrene, Amputation, DVT			
3	PLASTIC SURGERY / RECONSTRUCTIVE	5	5	10
	SURGERY		•	

a.	Skin grafts & flaps – Types, indications		
	with special emphasis to burns,		
	wounds		
b.	Ulcers, complications and		
	postoperative care		
c.	Tendon transfers, with special emphasis		
	to hand, foot & facial paralysis, & repair		
	of Flexor & Extensor Tendon Injuries		
d.	Keloid & Hypertrophied scar management		
e.	Reconstructive surgery of		
	peripheral nerves		
f.	Micro vascular surgery-		
	reimplantation and revascularization		

CLINICAL (10 hrs)

Evaluation / presentation and recording of one case each in:

- a) Burns
- b) Wound & ulcer
- c) Head injury
- d) Peripheral vascular condition
- e) Post radical mastectomy
- f) Post thoracic surgery
- g) Post abdominal surgery
- h) Plastic surgery
- 2. Auscultation & its interpretation with special emphasis to Reading & interpretation of the X-ray chest.

RECOMMENDED TEXT BOOKS

- 1. Short practice of surgery-- Bailey and Love
- 2. Textbook of Surgery Das

SCHEME OF UNIVERSITY EXAMINATION

THEORY		Marks
40 MARKS + I.A. – 10 MARKS * The question paper will give appropriate weightage to all the topics in the syllabus.		
Section A -M.C.Qs.	Q-1 MCQs – based on MUST KNOW area [1 x 10]	10
Section B- S.A.Q.	Q-2 - Answer any FIVE out of SIX [5 x 3 = 15] * Based on topics – GENERAL SURGERY & PLASTIC SURGERY	15
	Q-3 - Answer any FIVE out of SIX [5 x 3 = 15] * Based on topics – CARDIOVASCULAR & THORACIC SURGERY	15
	Total Marks	40

Clinical Case Presentation (COLLEGE EXAMINATION)	Marks
Conducted at the end of Preliminary examination - Based on Case presentation, Examination and Viva	20

INTERNAL ASSESSMENT:

- 1. One examination of Total 40 marks (Theory only)
- 2. Internal Assessment to be calculated out of 10 marks
- 3. Internal assessment as per University pattern.

SURGERY-II (ORTHOPAEDICS)

(Didactic-40hrs + Clinical -20hrs) TOTAL =60 HRS

COURSE DESCRIPTION:

This course intends to familiarize students with principles of orthopaedic surgery along with familiarization with terminology and abbreviations for efficient and effective chart reviewing and documentation. It also explores various orthopaedic conditions needing attention, focusing on epidemiology, pathology, as well as primary and secondary clinical characteristics and their surgical and medical management. The purpose of this course is to make physiotherapy students aware of various orthopaedic surgical conditions so these can be physically managed effectively both pre as well as postoperatively.

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
1	FRACTURES	6	3	9
2	DISLOCATIONS & SUBLUXATIONS	4	2	6
3	SOFT TISSUE AND TRAUMATIC	4	2	6
	INJURIES			
4	DEFORMITIES AND ANOMALIES	11	3	14
5	DEGENERATIVE AND	6	3	9
	INFLAMMATORY CONDITIONS			
6	MANAGEMENT OF METABOLIC	2	2	4
	DISORDERS			
7	GENERAL ORTHOPAEDIC	5	3	8
	DISORDERS			
8	TUMORS	2	2	4
	TOTAL	40	20	60

OBJECTIVES:

At the end of the course, the candidate will –

- a) Be able to discuss the, aetiology, Pathophysiology, clinical manifestations & conservative / surgical management of various traumatic & cold cases of the Musculoskeletal Conditions.
- b) Gain the skill of clinical examination; apply special tests & interpretation of the preoperative old cases & all the post-operative cases.
- c) Be able to read & interpret salient features of the X-ray of the Spine & Extremities and correlate the radiological findings with the clinical findings.
- d) Be able to interpret Pathological / Biochemical studies pertaining to Orthopaedic conditions.

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
1	FRACTURES	6	3	9
	a. Definition, Classification, Causes,			
	Clinical features, healing of			
	fractures & Complications.			
	b. Principles of general management of			
	i. Fracture of the Upper Extremity			
	ii. Fracture of the Lower Extremity			
	iii. Fracture of the vertebral			
	column, thorax and pelvis			
	iv. Emergency care and first aid.			
2	DISLOCATIONS & SUBLUXATIONS	4	2	6
	a. Definition, General description,			
	Principles of general description and			
	management of traumatic dislocation			
	and subluxation of common joints.			
	i. Shoulder joint			
	ii. Acromioclavicular joint			
	iii. Elbow joint			
	iv. Hip joint			
	v. Knee joint			
3	SOFT TISSUE AND TRAUMATIC	4	2	6
	INJURIES			
	a. Introduction ,Anatomy & physiology			
	general description, grade of injury			
	and management of injuries of			
	i. Ligaments, Bursae, Fascia			
	ii. Muscles & Tendons			
	iii. Muscles and tendons injuries of upper			
	and lower limb			
	b. Cervicolumbar injuries ,Whiplash of			
	the cervical spine			
	c. Crush injuries of hand & foot			
4	DEFORMITIES AND ANOMALIES	11	3	14
	a. Definition ,Causes , Classification ,	11	<u>J</u>	1 1 1
	Congenital and acquired deformities			
	Physical and clinical and radiological			
	features, Complications			
	, 1			
	b. Principles of medical and			
	surgical management of the			
	deformities			
		Didactic	Clinical	Total

Sr.	Topics	Hours	Hours	Hours
No.				
	 c. General description of following deformities: i. Deformities of the spine: a) Scoliosis b) Kyphosis c) Lordosis d) Flat back e) Torticollis 			
	 ii. Deformities of the lower limb: a) C.D.H., coxa vara, coxa valga, anteversion, Retroversion b) Genu valgum, Genu varum, Genu recurvatum, C.D.K. c) Talipes calcaneous equinus, varus & valgus d) Pes cavus, Pes planus e) Hallux valgus & varus, Hallux rigidus and hammer toe 			
	 iii. Deformities of Shoulder & Upper limb a) Sprengel's shoulder, Cubitus varus, Cubitus valgus b) Dupuytren's contracture 			
5	DEGENERATIVE AND INFLAMMATORY CONDITIONS	6	3	9
	 a. Osteo-orthosis/Arthritis b. Spondylosis c. Spondylolysis and listhesis d. Pyogenic arthritis e. Rheumatoid arthritis f. Juvenile arthritis g. Tuberculous arthritis h. Gouty arthritis i. Haemophilic arthritis j. Neuropathic arthritis k. Ankylosing spondylitis l. Psoriatic arthritis 			

Sr. No.	Topics	Didactic Hours	Clinical Hours	Total Hours
6	MANAGEMENT OF METABOLIC		2	4
	DISORDERS			
	a. Osteoporosis			
	b. Osteomalacia & Rickets			
7	GENERAL ORTHOPAEDIC DISORDERS	5	3	8
	a. Carpel tunnel syndrome /Entrapment nerve injuries			
	b. Compartment syndrome, Ischemic contracture			
	 Avascular necrosis of bone in adult and children 			
	i. Gangrene			
	ii. Backache /P.I.D.			
8	TUMORS	2	2	4
	i. Classification, Principles of general managementii. General description of benign and			
	malignant tumours of musculoskeletal system			

CLINICAL (20 HRS)

- 3. Independent clinical orthopaedic evaluation presentation & recording of:
 - a) One acute soft tissue lesion (including nerve injury)
 - b) Two cases of degenerative arthritis of extremity joint (One each in Upper Extremity and One Lower Extremity)
 - c) Two cases of spine (one P.I.D., one traumatic)
 - d) One post operative case of fractures of extremities with fixation/ replacement knee / hip
 - e) One paraplegia / quadriplegia

RECOMMENDED TEXT BOOKS

- 1. Outline of Fractures –Adams
- 2. Outline of Orthopedics.--Adams
- 3. Apley's systems of orthopedics and fractures by Louis Solomon, 9th edition

SCHEME OF UNIVERSITY EXAMINATION

THEORY		Marks
40 MARKS + I.A. –	10 MARKS	
* The question paper will give appropriate weightage to all the topics in the syllabus.		
Section A .MCQs	Q-1 - MCQs – based on MUST KNOW area [1 x 10]	10
Section B- S.A.Q	Q-2 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15
	Q-3 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15
	Total Marks	40

Clinical Case Presentation (COLLEGE EXAMINATION)	Marks
Conducted at the end of Preliminary examination - Based on Case presentation, Examination and Viva	20

INTERNAL ASSESSMENT:

- 1. One examination of Total 40 marks (Theory only)
- 2. Internal Assessment to be calculated out of 10 marks
- 3. Internal assessment as per University pattern.

MEDICINE-I

(Cardiovascular Respiratory Medicine, General Medicine & Gerontology)

(Didactic-45 hrs + Clinical-10 hrs) **TOTAL-55 HRS**

COURSE DESCRIPTION:

This course intends to familiarize students with medical terminology & abbreviations for efficient & effective chart reviewing & documentation. It also explores selected systemic diseases, focusing on epidemiology, pathology, histology, etiology as well as primary & secondary clinical characteristics & their management. Discusses & integrates subsequent medical management of General, Rheumatology, Gerontology, Cardio-vascular & Respiratory systems, to formulate appropriate intervention, indications, precautions & contraindications.

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
1	CARDIO-VASCULAR &	30	05	35
	RESPIRATORY MEDICINE			
2	GENERAL MEDICINE,	15	05	20
	RHEUMATOLOGY &			
	GERONTOLOGY			
	TOTAL	45	10	55

OBJECTIVES:

At the end of the course, the candidate will:

- 1. Be able to describe Etiology, Pathophysiology, Signs & Symptoms & Management of the various Endocrinal, Metabolic, Geriatric & Nutrition Deficiency conditions.
- 2. Be able to describe Etiology, Pathophysiology, Signs & Symptoms, Clinical Evaluation & Management of the various Rheumatologic Cardiovascular & Respiratory Conditions.
- 3. Acquire skill of history taking and clinical examination of Musculoskeletal, Respiratory, Cardio-vascular & Neurological System as a part of clinical teaching.
- 4. Be able to interpret auscultation findings with special emphasis to pulmonary system.
- 5. Study Chest X-ray, Blood gas analysis, P.F.T. findings & Haematological studies, for Cardiovascular, Respiratory, Neurological & Rheumatological conditions.
- 6. Be able to describe the principles of Management at the Intensive Care Unit.
- 7. Be able to acquire the skills of Basic Life Support.
- 8. Acquire knowledge of various drugs used for each medical condition to understand its effects and its use during therapy.

Sr. No.	Topics	Didactic Hours	Clinical Hours	Total Hours
1	CARDIO-VASCULAR & RESPIRATORY MEDICINE:	30	5	35
	a. Cardio-Vascular Diseases	11	2	
	i. Hypertension – systemic	1		
	 ii. Cardiac Conditions- a) I.H.D. (Angina, Myocardial infarction) b) R.H.D. c) Infective Endocarditis d) Cardio myopathy e) Heart Failure 	4		
	iii. Valvular Heart Disease a) Congenital b) Acquired	2		
	iv. Congenital Heart Disease	1		
	v. Investigations a) Basics of E.C.G. [Normal & Abnormal (Ischaemia, Infarction & Arrhythmias)] b) Observation of conduction of stress test on patient c) 2D Echo (Ejection Fraction & Wall motion Abnormality)	3		
	b. Diseases of the Respiratory System:	17	3	
	i. Common Infectious diseases like Tuberculosis, Pneumonia, Lung Abscess, and Bronchiectasis.	3		
	ii. Diseases of Pleura like Pleural Effusion, Pneumothorax, Hydropneumothorax, and Empyema.	2		
	iii. ILD & Occupational lung diseases like Silicosis, Asbestosis, Pneumoconiosis, Brucellosis, Farmer's Lung.	2		
	iv. Obstructive Airway Diseases (C.O.P.D. with Cor Pulmonale, Pulmonary Hypertension, Bronchial Asthma & Cystic Fibrosis)	3		

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
	v. Intensive Care Unit a) Infrastructure b) Instrumentation. c) Mechanical Ventilation (settings & monitoring) d) Assessment, monitoring & management of patient in I.C.U.	3		

Sr. No.	Topics	Didactic Hours	Clinical Hours	Total Hours
	vi. Basic Life Support :Introduction & Demonstration	2		
	vii. Investigation: Normal & Abnormal 1. Chest X-ray 2. Blood Gas Analysis 3. PFT(Observation of conduction on patient)	2		
2	GENERAL MEDICINE, RHEUMATOLOGY & GERENTOLOGY:	15	05	20
	 a. General Medicine i. Disorders of Endocrine system (Diabetes) Introduction, pathophysiology, types, role of physical activity, complications of diabetes (autonomic neuropathy, myopathy, weakness) & medications. ii. Thyroid, Pituitary & Adrenal conditions Cushing's syndrome iii. Obesity iv. Nutrition Deficiency Disease (Rickets, Vit. E, Vit. D, Vit. B, micro nutrients,(Zn, Se) v. Intoxication (Drug abuse; Alcohol, smoking, cocaine dependence) 	7	2	
	b. Rheumatological Conditions i. Rheumatoid Arthritis ii. S L E iii. S S A iv. Gout v. Polymyositis vi. Fibro myalgia vii. Ankylosing spondylitis	5	2	
	c. Geriatric Conditions	3	1	1
	 i. Aging Process (physiological changes due to aging) ii. CVS & RS complications iii. Osteoporosis 			

RECOMMENDED TEXT BOOKS

- 1. API- Text book of Medicine, 5th edition
- 2. Medicine-- P.J. Mehta

RECOMMENDED REFERENCE BOOK

1. Principles & Practice of Medicine -- Davidson

CLINICAL - 10 HRS

- 1. History taking, Evaluation –General Examination & Systemic examination (Inspection, Palpation, Percussion & Auscultation)
 - 1. Presentation and recording of Two cases Each in:
 - a. Muscular disorders
 - b. Respiratory Conditions
 - c. Cardio Vascular Conditions
 - d. Degenerative / Rheumatological Condition
 - e. Obesity
 - f. Nutritional disorders
 - g. Diabetes Mellitus & Metabolic bone disorders.

SCHEME OF UNIVERSITY EXAMINATION

THEORY		Marks	
40 MARKS + I.A 10	40 MARKS + I.A. – 10 MARKS		
* The question paper wi syllabus.	ill give appropriate weightage to all the topics in the	50	
Section A .MCQs	Q-1 -MCQs – based on MUST KNOW area [1 x 10]	10	
Section B- S.A.Q	Q-2 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15	
* Based on topics – GENERAL MEDICINE, RHEUMATOLOGY & GERONTOLOGY			
Section B- S.A.Q	Q-3 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15	
* Based on topics – CARDIOVASCULAR & RESPIRATORY MEDICINE			
	Total Marks	40	

Clinical Examination (COLLEGE EXAMINATION)	Marks
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Conducted at the end of Preliminary examination	
1. General Medicine, Rheumatology -10	20
Marks & Gerontology	
2. Cardio-Vascular & Respiratory Medicine -10 Marks	

INTERNAL ASSESSMENT:

- 1. One examination of Total 40 marks (Theory only)
- 2. Internal Assessment to be calculated out of 10 marks
- 3. Internal assessment as per University pattern.

MEDICINE-II

(Neurology & Paediatrics)

(Didactic – 45 hrs + Clinical – 20 hrs) **TOTAL – 65 HRS**

COURSE DESCRIPTION:

This course intends to familiarize students with medical terminology & abbreviations for efficient & effective chart reviewing & documentation, It also explores select systemic diseases, focusing on epidemiology, etiology, pathology, histology as well as primary & secondary clinical characteristics & their management. It discusses & integrates subsequent medical management of Neurological & Paediatric conditions to formulate appropriate intervention, indications, precautions & contraindications.

Sr.	Topics	Didactic	Clinical	Total
No.		Hours	Hours	Hours
1	NEUROLOGY	25	10	35
2	PAEDIATRICS	20	10	30
	TOTAL	45	20	65

OBJECTIVES:

At the end of the course, the candidate will:

- 1. Be able to describe Aetiology, Pathophysiology, signs & Symptoms & Management of the various Neurological &Paediatric conditions.
- 2. Acquire skill of history taking and clinical examination of Neurological &Paediatric conditions as a part of clinical teaching.
- 3. Acquire knowledge of various drugs used for each medical condition to understand its effects and its use during therapy.

- 4. Acquire knowledge in brief about intra-uterine development of the foetus.
- 5. Be able to describe normal development & growth of a child, importance of Immunization, breast-feeding & psychological aspect of development.
- 6. Be able to describe neuromuscular, musculoskeletal, cardio-vascular & respiratory conditions related to immunological conditions, nutritional deficiencies, infectious diseases, & genetically transmitted conditions.
- 7. Acquire skill of clinical examination of a neonate / child with respect to neurological, musculoskeletal & respiratory function.

1 NEUROLOGY a. Introduction to Nervous System i. Applied anatomy ii. Applied physiology b. Cerebro Vascular Accidents i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism	Hours 10	Hours 35
a. Introduction to Nervous System i. Applied anatomy ii. Applied physiology b. Cerebro Vascular Accidents i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism	-	35
i. Applied anatomy ii. Applied physiology b. Cerebro Vascular Accidents i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism	1	
ii. Applied physiology b. Cerebro Vascular Accidents i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism	1	
b. Cerebro Vascular Accidents i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism	1	
i. Thrombosis, Embolism, Haemorrhage ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia 2 i. Parkinsonism	1	
ii. Level of Lesion & symptoms iii. Management c. Extra Pyramidal lesions – Basal Ganglia 2 i. Parkinsonism		
iii. Management c. Extra Pyramidal lesions – Basal Ganglia i. Parkinsonism		
c. Extra Pyramidal lesions – Basal Ganglia 2 i. Parkinsonism		
Ganglia 2 i. Parkinsonism		
i. Parkinsonism	1	
	1	
Lii Athatagia Chargo Divistania		
ii. Athetosis, Chorea, Dystonia d. Differential diagnosis of muscle 5	2	
d. Differential diagnosis of muscle wasting 5	2	
i. Approach to neuropathies		
ii. Myopathies and		
neuromuscular junction		
disorders.		
e. Disorders of Anterior Horn cell with 2	2	
differential diagnosis of Motor Neuron		
Disease, S.M.A., Syringomyelia,		
Peroneal Muscular Atrophy, and		
Poliomyelitis.		
f. Multiple Sclerosis 1		
g. Infections of the nervous system:		
Encephalitis, Neurosyphilis, H.I.V.		
infection, Herpes, Meningitis, Tabes		
Dorsalis		
h. Tetanus 1		
i. Epilepsy 1		

j. Alzheimer's Disease, Dementia	1		
k. Disorders of cerebellar function	1	2	
Disorders of cranial nerves & Special Senses	2		
m. Disorders of Spinal cord i. Syndromes ii. Bladder dysfunction iii. Autonomic dysfunction	3	2	

Sr.		Didactic	Clinical	Total
No.	Topics	Hours	Hours	Hours
2	PAEDIATRICS	20	10	30
	a. Normal intra-uterine development of foetus with special reference to Central Nervous System, Neuromuscular System, Cardiovascular Respiratory System	1	10	30
	b. Normal development & growth	2		
	c. Immunization and breast-feeding	1	1	
	d. Sepsis, Prematurity, Asphyxia Hyperbilirubinemia and birth injuries	1		
	e. Cerebral Palsy- Medical Management including early intervention		2	
	f. Developmental disorders associated with spinal cord: Spinal Dysraphism, Spina Bifida, Meningocele, Myelomeningocele, hydrocephalus	1	2	
	 g. Common infections a) C.N.S.& Peripheral Nervous System b) Typhoid, Rubella, Mumps, Measles, Diphtheria, Chicken gunia, Malaria 	2	1	
	h. Epilepsy	1		
	 i. Mental Retardation and Down's Syndrome 	1	1	
	j. Genetically transmitted neuro- muscular conditions	2		
	k. Malnutrition and Vitamin deficiency conditions	1		
	Juvenile R. A. & other Rheumatologic conditions of Musculoskeletal system	1	1	

m. Common diseases of the Respiratory system: Asthma, Bronchitis, Bronchiectasis, T.B., Pneumonia, Lung collapse, Pleural effusion.	2	2	
n. Respiratory distress in neonate	1		
o. Rheumatic & Congenital Heart disease	1		

CLINICAL (10 HRS)

- 1. History taking and general examination in neonate and child
- 2. Examination of neonate and neonatal reflexes.
- 3. Examination of the nervous system
- 4. Examination of respiratory system
- 5. Examination of cardiovascular system
- 6. Examination of musculoskeletal system
- 7. Ventilatory care in neonate and child.

RECOMMONDED TEXT BOOKS:

- 1. Essentials of Paediatrics O.P. Ghai-Inter Print publications
- 2. Clinical Paediatrics Meherban Singh

SCHEME OF UNIVERSITY EXAMINATION

THEORY		Marks
40 MARKS + I.A. – 10 MARKS		
** The question paper will give appropriate weightage to all the topics in the syllabus.		
Section A .MCQs	Q-1 -MCQs – based on MUST KNOW area [1 x 10]	10
Section B- S.A.Q	Q-2 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15
	* Based on topics – PAEDIATRICS	
Section B- S.A.Q	Q-3 - Answer any FIVE out of SIX $[5 \times 3 = 15]$	15
	* Based on topics – NEUROLOGY	
	Total Marks	40

Clinical Examination (COLLEGE EXAMINATION) Marks
Conducted at the end of Preliminary examination	
1. Neurology -10 Mark	as 20
2. Paediatrics -10 Mark	KS .

INTERNAL ASSESSMENT:

- 1. One examination of Total 40 marks (Theory only)
- 2. Internal Assessment to be calculated out of 10 marks
- 3. Internal assessment as per University pattern.

COMMUNITY HEALTH & SOCIOLOGY

TOTAL 60 HRS A-C COMMUNITY HEALTH

(Didactic- 30 Hours + Visits -10 Hours) **Total 40hrs**

COURSE DESCRIPTION:

The course is organized to introduce the concept of health care

and management issues in Health Services. It will help them in assuming a leadership role in their profession and assume the responsibility of guidance. It will help them assume wider responsibilities at all levels of health services. It will help them in improving their performance through better understanding of the health services at all the levels of community.

OBJECTIVES:

At the end of the course, the candidate shall be able to understand the contents given in the syllabus.

Sr. No.	Topics	Didactic Hours
1	GENERAL CONCEPTS & DETERMINANTS OF HEALTH &	04
	DISEASES:	
	a. National & International Definition of Health, Role of	1
	Socio-Economic & Cultural Environment in Health & Disease.	
	b. Epidemiology – Definition & scope, uses with relevance	1
	to physiotherapy	2
	c. Environmental Hygiene including man & his surrounding, Occupational & Industrial hygiene, Village & Town Sanitation,	2
	Bacteriology of Water, Milk, & Food Hygiene.	
2	NATIONAL PUBLIC HEALTH ADMINISTRATION	1
3	HEALTHCARE DELIVERY SYSTEM:	2
	a. Healthcare Delivery System of India	
	b. National Health Programmes	
	c. Role of W.H.O.	
	d. Millennium Development Goals for All	
4	PRIMARY HEALTHCARE:	1
	a. Definition	
	b. Principles,	
_	c. Elements & its application	_
5	EPIDEMIOLOGY OF SOCIO-ECONOMICAL & CULTURAL	6
	ISSUES - related to morbidity in relation to the following vulnerable	
	groups.	
Sr. No.	Topics	Didactic Hours

	a. Women: i. Pregnant and lactating women, maternal health (ANC,PNC,INC) ii. Perimenopausal women's' health: physical & psychological	1
	b. Infants: (Low Birth Weight, Breast feeding, Complimentary feeding, IYCN,IMNCI Vaccine preventable diseases, Immunization programmes, Infant and childhood mortality)	2
	c. Children: Child health, Growth monitoring under five clinic, ICDS, PEM	2
	d. School aged population health: Early detection and prevention of disabilities, behavioral problems	1
6	DEMOGRAPHY AND OBJECTIVES OF NATIONAL FAMILY WELFARE PROGRAMMES AND NATIONAL POPULATION POLICY	2
7	COMMUNICABLE DISEASES	3
	An over-view [including prevention & control] T.B., H.I.V., Leprosy, Vector borne diseases- Malaria / Filariasis / Dengue/ Chikungunya/ Japanese encephalitis.	
8	NON COMMUNICABLE DISEASES:	2
	Diabetes Mellitus, Hypertension, Coronary Heart Disease / Obesity /	
	Blindness/ Accidents /Stroke/ Cancer.	
9	NUTRITIONAL DISEASES:	4
	Malnutrition, Nutrional disorders and National nutrition programmes, Osteomalacia, Rickets, Neuropathies due to Vitamin - deficiency, Skeletal Deformities.	
10	MENTAL HEALTH:	2
	a. Socio-economical & cultural aspects	
	b. Substance abuse and addiction –tobacco, alcohol and others	
11	OCCUPATIONAL HEALTH:	1
	Occupational diseases & hazards - definition, scope, prevention &	
	legislations, Occupational lung diseases & Physical injuries/pains.	
12	GERIATRIC HEALTH:	1
	a. Physical, social, economical aspects	
	b. Osteoporosis, Malnutrition, Alzheimer's disease, Parkinson's disease	
13	HOSPITAL WASTE MANAGEMENT:	1
	Universal Safety Precautions, Immunization of health care providers	
	including their vaccination.	

COMMUNITY VISITS:

Community health centers: Urban & Rural – 10 Hours

RECOMMONDED TEXT BOOKS

- 1. Park's Textbook of Preventive & Social Medicine K. Park
- 2. Textbook of Preventive & Social Medicine P.K. Mahajan & M.C. Gupta
- 3. Essential of Community Medicine Baride and Kulkarni

B-SOCIOLOGY

COURSE DESCRIPTION:

This course covers the basic knowledge and concepts of sociology to with the aim to help them understand the impact of group, culture and environment on the behavior and health of the patients. Make them realize the importance of the relationship of the physical therapist and the patient and the environment around them.

OBJECTIVES:

At the end of the course, the candidate shall be able to understand the contents given in the syllabus.

Sr. No.	Topics	Didactic Hours
1	INTRODUCTION:	1
	Definition & Relevance with Physiotherapy and social factors affecting Health status, Decision Making in taking treatment.	
2	SOCIALIZATION:	1
	Definition, Influence, of Social Factors, on Personality, Socialization in the Hospital & Rehabilitation of the patients.	
3	SOCIAL GROUPS:	1
	Concepts, Influence of formal & informal groups of Health & Diseases, Role of Primary & Secondary Groups in the Hospital & Rehabilitation Setting.	
4	FAMILY:	1
	Influence on human personality, Role of family in health and disease	
5	COMMUNITY ROLE:	1
	Rural & Urban communities in Public Health, Role of community in determining Beliefs, Practices & Home Remedies in Treatment.	
6	CULTURE:	1
	Component's impact on human behavior, Role of community in determining beliefs, practices and health seeking behavior and home remedies	
7	SOCIAL CHANGE FACTORS:	1
	Human Adaptation, Stress, Deviance, Health Programme Role of Social Planning in the improvement of Health & in Rehabilitation.	

8	SOCIAL CONTROL:	1		
	Definition, Role of norms, Folkways, Customs, Morals, Religion,			
	Law & other means of social controls in the regulation of Human			
	Behavior, Social Deviance & Disease			
9	POPULATION GROUPS:	5		
	a. Children: Street children, Child labour, Juvenile delinquency			
	b. Women's: Victims of domestic violence and addiction,			
	C.S.W., physically and /or mentally challenged			
	c. Role of NGOs, Social support systems			
`10	Social Security & Social Legislation in relation to the Disabled	1		
11	Role of a Medical Social Worker	1		
12	Sociology of Brain Death and/ or Organ donation:	1		
13	SOCIAL PROBLEMS:	4		
	Population explosion, Poverty, Dowry, Illiteracy- Causes, prevention			
	& Control measures.			

RECOMMENDED TEXT BOOKS

- 1. An Introduction to Sociology Sachdeva & Bhushan
- 2. Indian Social Problems Madan, Vol-I-Madras

SCHEME OF UNIVERSITY EXAMINATION (THEORY ONLY)

THEORY			Marks
80 MARKS + I.A. – 20 MARKS			1.00
* The question paper will give appropriate weightage to all the topics in the syllabus.			100
	MCQs – based on MUST KNOW area		
Section A- Q-1 &Q-2	Q-1 based on COMMUNITY MEDICIN	E [1x20]	30
	Q-2 based on SOCIOLOGY [3]	1 x10]	
	Questions based on COMMUNITY MEDICINI	E	
Section B- Q-3 & Q- 4	SAQ Q-3 -to answer any FIVE out of SIX	[5x3=15]	30
	SAQ Q-4-to answer any THREE out of FOUR [3	x5=15]	
	Questions based on SOCIOLOGY		20
Section C- Q-5	SAQ – to answer any FOUR out of FIVE [4 x 5	5=20]	
	Total Marks		80

INTERNAL ASSESSMENT:

1. Two exams – Terminal and preliminary examination of 80 marks each TOTAL - 160 marks

- 2. Internal Assessment to be calculated out of 20 marks.
- 3. Internal assessment as per University pattern.

GYNAECOLOGY & OBSTETRICS

(COLLEGE EXAMINATION)

(Didactic - 20 hrs + Clinical – 10 hrs) **TOTAL 30 HRS**

COURSE DESCRIPTION:

This course intends to provide introduction to women's health which includes problems related to pregnancy, osteoporosis, and other disorders specific to women. Topics will focus on medical terminology, clinical examination, evaluation, comparing contemporary, traditional interventions and the impact of evolving technology in this area. It also emphasises on evaluation & medical treatment of pelvic floor dysfunctions.

Sr.	Topics	Didactic	Practical/Lab	Total
No.		Hours	Hours	Hours
1	PHYSIOLOGY OF PUBERTY &	2		2
	MENSTRUATION			
2	PHYSIOLOGY OF PREGNANCY	3		3
3	PHYSIOLOGY OF LABOUR	4		4
4	POST NATAL PERIOD	2	5	7
5	INFERTILITY	1		1
6	URO-GENITAL DYSFUNCTION	3	1	4
7	GYNAECOLOGICAL SURGERIES	2	1	3
8	PRE, PERI & POST MENOPAUSE	2	1	3
9	PELVIC INFLAMMATORY DISEASES	1	2	3
	TOTAL	20	10	30

OBJECTIVES:

At the end of the course, student will be able to describe:

- a) Normal & abnormal physiological events, complications and management during Puberty.
- b) Normal and abnormal physiological events, complications and management of pregnancy (Pregnancy, Labour, Puerperium)
- c) Normal and abnormal physiological events, complications and management of menopause.
- d) Normal and abnormal physiological events, complications and management of uro-

- genital dysfunction.(Antenatal, Postnatal, during menopause)
- e) The student will be able to acquire the cognitive skill of clinical examination of the pelvic floor.

SYLLABUS

Sr.	Topics	Didactic	Practical/Lab	Total
No.	•	Hours	Hours	Hours
1	PHYSIOLOGY OF PUBERTY &	2		2
	MENSTRUATION: Abnormalities &			
	common problems of Menstruation			
2	PHYSIOLOGY OF PREGNANCY:	3		3
_	a. Development of the foetus,			
	Normal/ Abnormal / multiple			
	gestations,			
	b. Common Complications			
	during pregnancy:			
	i. Anaemia,			
	ii. PIH			
	iii. Eclampsia			
	iv. Diabetes,			
	v. Hepatitis,			
	vi. TORCH infection or HIV			
3	PHYSIOLOGY OF LABOUR	4		4
	a. Normal – Events of Ist, IInd & IIIrd			
	Stages of labour			
	b. Complications during labour &			
	management			
	c. Caesarean section- elective/ emergency			
4	& post operative care POST NATAL PERIOD	2	5	7
4		<u> </u>	3	/
	a. Puerperium & Lactation			
	b. Complications of repeated child			
	bearing with small gaps			
5	c. Methods of contraception INFERTILITY	1		1
3	· ·	1		1
	a. Management with emphasis on PCOS/PCOD			
		2	1	4
6	URO-GENITAL DYSFUNCTION	3	1	4
	a. Uterine prolapse – Classification &			
	Management (Conservative /			
	Surgical)			
	b. ii) Cystocoele, Rectocoele, Enterocoele, Urethrocoele			
	OTEUHOCOCIE			

7	GYNAECOLOGICAL SURGERIES (Pre and post surgical management)	2	2	4
8	PRE, PERI & POST MENOPAUSE	2	1	3
	a. Physiology			
	b. Complications &			
	c. Management			
9	PELVIC INFLAMMATORY DISEASES	1	1	2
	with special emphasis to backache due to			
	Gynaecological / Obstetrical conditions			

CLINICAL (10 hrs)

Evaluation & presentation of One case Each in:

- a) Uro-genital dysfunction
- b) Antenatal care
- c) Postnatal care
- d) Following normal labour
- e) Following Caesarean section
- f) Pelvic Inflammatory Diseases
- 2. **Observation** One Normal & One Caesarean delivery & One Hysterectomy / Repair of the Uro-genital Prolapse

RECOMMENDED TEXT BOOKS

- 1. Text book of Gynaecology Datta New Central Book Agency
- 2. Text book of Obstetrics -- Datta New Central Book Agency

SCHEME OF COLLEGE EXAMINATION (THEORY ONLY)

THEORY ONLY	Marks	
*Emphasis to be given conditions / age related	50	
Section -A-Q-1	20	
Section-B-Q-2	SAQ-to answer any FIVE out of SIX [5x3]	15
Section-C-Q-3	15	
	50	

Passing in the exam is Mandatory

Grades: A+=75% & above, A=66 to 74.5%, B=50 to 54.5%, C= less than 50%.

DERMATOLOGY

TOTAL - 10 HRS

(COLLEGE EXAMINATION)

OBJECTIVES:

At the end of the course, the student will be able to describe the Pathophysiology, Signs & Symptoms, Clinical Features, Examination & Management of Common Skin Conditions like Leprosy, Psoriasis, Bacterial & Fungal Infections of the skin, connective tissue disorder, hand eczema, drug reaction, cutaneous manifestation of HIV, & Sexually Transmitted Diseases

SYLLABUS

Sr.	Topics	Didactic
No.		Hours
1	Introduction to Dermatology, basic skin lesions & History taking	1
2	 a. Skin infections (Part I) – Scabies / Pediculosis / Bacterial infections b. Skin infection (Part II) Viral / Fungal / Cutaneous T.B. 	2
3	Connective tissue disorder-Scleroderma, S.L.E., Dermatomyositis, Morphia	1
4	 a. Hand eczema, Psoriasis, Psoriatic arthritis, Reiter's Syndrome b. Cutaneous hyperplasia-Keloid, Hypertrophic scar, Corn, Callosity 	1
5	Leprosy & Deformity	2
6	a. Cutaneous Manifestation of HIV b. Hyperhydrosis	1
7	 a. Drug reaction b. Urticaria Genodermatosis -Epidermolysis bullosa c. Sexually Transmitted skin lesions PUVA Treatment 	2
	TOTAL	10

RECOMMENDED TEXT BOOK

1. Textbook of dermatology – Dr. Khopkar

SCHEME OF COLLEGE EXAMINATION (THEORY ONLY)

THEORY		Marks
	be no LAQ in this paper] will give appropriate weightage to all the topics in	25
Section A- Q-1	MCQs – based on MUST KNOW area [10X1]	10
Section-B- Q-2	SAQ - Answer any FIVE out of SIX [5x3]	15
	Total Marks	25

Passing in the exam is Mandatory

Grades: A+ = 75% & above, A = 66 to 74.5%, B + = 55 to 65 %, B = 50 to 54.5%, C = less than 50%.

FUNCTIONAL DIAGNOSIS & PHYSIOTHERAPEUTIC SKILLS

(Didactic - 135 hrs + Clinical – 325 hrs) TOTAL 460 HRS

COURSE DESCRIPTION:

- 1. Functional Diagnosis & Physiotherapeutic Skills is a stepping stone to introduce students to actual concepts of PT assessment and later to the treatment concepts
- 2. Functional Diagnosis focuses on the assessment of all the body systems i.e. Musculoskeletal, Neurological and Cardiovascular-Respiratory in order to study the various impairments and their impact on activity and participation of the individual taking into consideration the contextual factors as well. It also emphasizes on the clinical reasoning of the underlying components of a universal evaluation tool (ICF) for a better understanding of the patient in a holistic manner. The student is also subjected to learn basics of manipulative, cardiovascular-respiratory and neuro-therapeutic skills on models so that he/she will be able to apply these principles eventually on patients.
- 3. The student will also gain a sound knowledge of electro-diagnosis, which is an integral part of Functional Diagnosis.

Sr. No.	Торіс	Didactic Hours	Practical / Laboratory Skills Hours	Total Hours
1.	SECTION-I INTERNATIONAL CLASSIFICATION OF FUNCTION, DISABILITY & HEALTH (ICF)	05	-	005
2.	SECTION-II MUSCULOSKELETAL EVALUATION & MANIPULATIVE SKILLS	40	140	180
3.	SECTION -III CARDIO VASCULAR RESPIRATORY EVALUATION & RELATED SKILLS	40	055	095
4.	SECTION – IV NEUROTHERAPEUTIC EVALUATION & ELECTRO DIAGNOSIS	50	130	180
	TOTAL	135	325	460

OBJECTIVES:

Cognitive:

At the end of the course, student will be able to:

- 1. Understand the use of ICF.
- 2. Acquire the knowledge of human growth and development from new life to birth and adulthood
- 3. Understand structure and function of nerve and muscle as a base for understanding the electro-diagnostic assessment.
- 4. Understand the use of appropriate tools or instruments of assessment in Musculoskeletal, Neurological and Cardio-vascular conditions.
- 5. Understand the theoretical basis and principles of manipulative skills, neurotherapeutic skills and skills of cardiopulmonary care and resuscitation
- 6. Document results of assessment to evaluate the patient from time to time.

Psychomotor:

Student will be able to:

- 1. Perform assessment of measures of body structures and functions related to tissue mechanics.
- 2. Perform assessment of measures of body structures and functions related to motor control affecting activity and participation, quality of life and independence.
- 3. Perform the skill of electro-diagnosis (SD Curve) and observe skills of EMG and NCV studies, to understand the documentation of finding of these studies.
- 4. Interpretation and analysis of assessment and findings.
- 5. Demonstrate skills of manual therapy musculoskeletal, neurotherapeutics and cardiovascular and respiratory skills on models (Laboratory work).

Affective:

Student will be able to:

- 1. Select appropriate assessment techniques to facilitate safety, sensitive practices in patient comfort and effectiveness.
- 2. Demonstrate safe, respectful and effective performance of physical therapy handling techniques taking into account patient's clinical condition, need for privacy, resources available and the environment.
- 3. Follow the principles of appropriate handling technique that is draping, hand placement, body part positioning, manual techniques, lifting and transfer techniques.
- 4. Communicate with patients and their families/caregivers regarding the need and uses of various assessment techniques.

SYLLABUS

Sr. No.		Торіс	Didactic Hours	Practical/ Clinical Hours	Total Hours
1		TION I:	5	-	5
		ctional Diagnosis using International			
		sification of Function, Disability & th (I.C.F.) (Applicable for all the			
		ions mentioned below)			
2		TION II:			•
	MUS	CULOSKELETAL EVALUATION AND M			
		,		cal 140= 180	
	a. As	ssessment of Musculoskeletal System:	03	02	05
	i.	Soft tissue flexibility			
	ii.	Joint mobility			
	iii.	Muscle strength & Endurance			
	iv.	Trick movements			
	V.	Sensations			
	vi.	$\boldsymbol{\mathcal{E}}$			
	vii. viii.	•			
	V111.	Gait deviations due to			
	1. 4.	musculoskeletal dysfunction	10	00	10
	D. AS	ssessment of Joints with special tests:	10	08	18
	i.	Cervical Spine: Foraminal compression,			
		Distraction, Shoulder depression, vertebral			
		artery, Dizziness tests.			
	ii.	Shoulder: Yergason's, Speed's, Drop-			
		Arm, Supraspinatus, Impingement,			
		Anterior & Posterior Apprehension,			
		Allen,			
		Adson.			
	iii.	Elbow: Cozen's, Miller's, Tinel's sign			
	iv.	Forearm, Wrist & Hand: Phalen's,	1		
		Bunnel-Littler, Froment's sign	1		
	V.	Lumbar Spine: Schober's, SLR, Prone			
		Knee Bending, Slump.]		
Sr.	vi.	Sacro Iliac joint: Faber- Patrick's,	D. I. d.	D	no ca
No.		Gaenslen, Gillet, March	Didactic	Practical/	Total

Торіс	Hours	Clinical	Hours
		Hours	
vii. Hip: Nelaton's line, Bryant's triangle, Thomas, Ober's, Tripod sign, Trendlenburg sign,			
viii. Knee: Tests for collateral & cruciate ligaments (valgus, varus, Lachman, Sag, Drawer's, McMurray's, Fluctuation, Patellar tap, Q- angle, Clarke)			
ix. Ankle & Foot : Anterior Drawer, Talar Tilt, Homan's & Moses (for D.V.T.)			
c. Response of soft tissues to trauma:	02		02
i. Trigger pointsii. Spasmiii. Ligament Sprainsiv. Muscle Strains			
d. Basics in Manual Therapy and Applications with Clinical Reasoning:	05	05	10
 i. Assessment of Articular and extra-articular soft tissue status a) Contractile tissues b) Non contractile tissues 			
ii. Examination of joint integrity a) Accessory movement b) End feel			
e. Examination of musculoskeletal Dysfunction:	06	10	16
 i. Subjective examination ii. Objective examination iii. Special tests iv. Functional Diagnosis using ICF 			

Sr. No.	Торіс	Didactic Hours	Practical/ Clinical Hours	Total Hours
	f. Assessment of Pain:	04	05	09
	 i. Types of pain: Somatic, Somatic referred, Neurogenic, Visceral ii. Subjective Assessment: a) Location, duration, progression, distribution, quality, diurnal variations, modifying factors. b) Severity, nature of pain, tissue irritability iii. Objective Measurement & Documentation- a) Visual Analogue Scale (V.A.S). b) Numerical Rating Scale(N.R.S.) c) McGill's modified questionnaire(including Body charts) 	Assessme V.A.S. &	•	
	g. Basic principles, indications, contra	10	110	120
	indications of mobilization skills for joints			
	and Soft tissues:			
	i. Maitland	Practice o	f Manual	
	ii. Mulligan	Therapy in		
	iii. Kaltenborn	Kaltenbor		
	iv. Mckenzie		s, M.E.T. &	
	v. Cyriax	1	obilisation	
	vi. Myofascial Release Technique	on extrem		
	vii. Muscle Energy Technique	Models or	nıy	
	viii. Neural Tissue			
	Mobilization (Neuro			
3	Dynamic Testing) SECTION III:			
3	SECTION III: CARDIO VASCULAR RESPIRATORY EVALUATION & RELATE SKILLS (Didactic-40 + Practical 55= 95)			
	a. Assessment of Cardio Vascular &	25	25	50
	Pulmonary System:			

		Identification of
i.	Vital parameters	abnormal breath
ii.	Chest expansion	sounds, measurement
iii.	Symmetry of chest movement	of chest expansion,
iv.	Breath Holding Test	pattern of breathing,
V.	Breath Sounds	Vital parameters,
vi.	Rate of Perceived Exertion (R.P.E.)	Grades of
vii.	Energy Systems & Exercise Physiology –	Dyspnoea, Rate of
		Perceived Exertion,

Sr. No.	Торіс	Didactic Hours	Practical /Clinical Hours	Total Hours
	 a) Physiological response to immobility and activity. b) Aerobic & Anaerobic metabolisms c) Evaluation of Functional Capacity using sub maximal tests (Exercise Tolerance – Six Minutes Walk test) d) Theoretical bases of different protocols for maximal exercise testing (e.g.: Bruce Protocol, Modified Bruce Protocol, Balke) viii. Interpretation of reports – A.B.G., P.F.T., P.E.F.R., E.C.G (Normal & Variations due to Ischemia & Infarction), X-ray Chest, Biochemical Reports ix. Ankle Brachial Index x. Tests for Peripheral Arterial & 	Index, Exercise T Testing – 6	chial olerance	
	Venous circulation. b. Examination of Cardiovascular Respiratory Dysfunction	05	05	10
	 i. Subjective examination ii. Objective examination iii. Special tests: Exercise Tolerance Testing 6 Minutes Walk Test, Breath Holding Test, P.E.F.R. iv. Functional Diagnosis using I.C.F. 	1 1		
	c. Assessment of Fitness & Health	10	25	35

i.	Screening for risk factors		
ii.	Body composition-B.M.I., use of skin		
	fold calipers, Girth measurement		
iii.	Physical fitness: Flexibility, Strength,		
	Endurance, Agility		
iv.	Physical Activity Readiness Questionnaire		
V.	Screening for health and fitness in		
	childhood, adulthood and geriatric group		
vi.	Quality of life		
vii.	Principles & components of		
	exercise prescription for healthy		

Sr. No.	Торіс	Didactic Hours	Practical/ Clinical Hours	Total Hours			
4	SECTION IV: NEUROTHERAPEUTIC EVALUATION &	FLFCTR	O DIAGNO	SIS			
	(Didactic-50 + Practical 130= 180 Hours)						
	a. General principles of Human development & maturation	07	05	12			
	 i. Aspects a) Physical b) motor c) Sensory d) Cognitive & Perceptive e) Emotional f) Social ii. Factors influencing human development & growth: a) Biological b) Environmental inherited . iii. Principles of maturation in general & anatomical directional pattern – a) Cephelo – caudal b) Proximo – distal c) Centero – lateral d) Mass to specific pattern e) Gross to fine motor development f) Reflex maturation tests iv. Development in specific fields - Oromotor development, sensory development, neurodevelopment of hand function. 						

b. Basics in Neuro Therapeutics Skills &	20	55	75
Applications with Clinical reasoning.			
i. Principles, Technique & Indications for	Therapeur	tic Skills of	
Application of	N.D.T., P.	N.D.T., P.N.F.,	
a) Bobath	Bobath, Rood's		
b) Neuro Developmental Technique	Technique &		
c) Rood's Technique	Brunnstrom, M.R.P.		
d) P.N.F.	on models	sonly	
e) Brunnstrom,			
f) Techniques of Motor			
Relearning Program (M.R.P.)			

Sr. No.	Торіс	Didactic Hours	Pract/Cli nic Hours	Total Hours
	c. Assessment of Movement Dysfunction	10	25	35
	 i. Higher functions ii. Cranial nerves iii. Sensations, sensory organization & body image iv. Joint mobility v. Tone vi. Reflexes-Superficial & Deep vii. Voluntary control viii. Muscle Strength ix. Co-ordination x. Balance xi. Endurance xii. Trick movements 			
	 xii. Trick movements xiii. Limb Length xiv. Posture deviations xv. Gait deviations due to neurological dysfunction xvi. Functional Diagnosis using I.C.F. xvii. Interpretation of Electro diagnostic findings, routine Biochemical investigations 			
	d. Electro diagnosis	10	30	40

i.	Physiology of resting membrane		
	potential, action potential, Propagation		
	of Action Potential		
l ii.	Physiology of muscle contraction		
iii.	Motor unit & Recruitment pattern		
	of motor unit – Size principle		
iv.	Therapeutic current —as a tool for		
	electro diagnosis.		
	a) Electrophysiology of muscle & nerve	Test for S.D.C. &	
	b) Faradic Galvanic Test, Strength	Faradic/	
	Duration Curve-tests should be	Galvanic Test	
	carried out on relevant patients,		
	c) Test for Sensory & Pain		
	Threshold/ Pain Tolerance –		
	technique only		
V.	Electro-Myography		
	a) Definition		
	Instrumentation – Basic components		
	like C.R.O., Filter, Amplifier &		
	Preamplifier, and Types of Electrodes		

Sr. No.	Торіс	Didactic Hours	Practical/ Clinical Hours	Total Hours
	b) Normal & Abnormal E.M.G. pattern			
	 i. at rest ii. on minimal contraction iii. on maximal contraction c) Nerve Conduction Studies i. Principles & Technique ii. F wave iii. H reflex 			
	e. SCALES: Berg Balance, Modified Ashworth, F.I.M., Barthel Index, G.C.S., D.G.I., M.M.S., S.T.R.E.A.M. & A.S.I.A.	3	15	18

DOCUMENTATION	١.
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A	Documentation & Interpretation of following investigations:
	i. Electro diagnosis : 2 each
	a) S.D.C.
	b) Faradic Galvanic Test
	c) E.M.G. & N.C. Studies
	ii. Cardio Vascular & Pulmonary: (1 each) – A.B.G., P.F.T., E.C.G.,
	X-ray Chest, Exercise Tolerance Test.
	iii. Neurological Scales (1 each)– Modified Ashworth, Berg's Balance,
	D.G.I., Glasgow
	iv. Coma, Barthel Index, F.I.M.
В	Case presentation with Functional diagnosis:
	i. Total 12 cases
	ii. Three cases each in –
	a) Musculoskeletal
	b) Neurological
	c) Cardiovascular & Respiratory (Including General Medical &
	Surgical Cases)
	d) General & Community Health (Including Fitness & Health,
	Women & Child Health, Occupation Health)

To maintain the Record/ Journal of the term work & to get each assignment duly singed by respective Head of the Dept.

RECOMMENDED TEXT BOOKS

- 1. Orthopaedic Physical Examination Magee
- 2. Clinical Electro Therapy Nelson Currier --- Appleton & Lange publication
- 3. Clinical Electromyography Mishra
- 4. Therapeutic Exercises Colby & Kisner
- 5. Physical Rehabilitation, Assessment and treatment Susan B O's Sullivan
- 6. Neurological Examination John Patten

RECOMMENDED REFERENCE BOOKS

- 1. Maitland's book on Manual therapy,
- 2. Mobilisation of Extremities Kaltenborn
- 3. Clinical Electromyography Kimura
- 4. Orthopaedic Physical therapy Donnatelli
- 5. NAGS, SNAGS and MWMS Brian Mulligan
- 6. Exercise & Heart Wenger
- 7. Exercise Physiology William D Mc'Ardle
- 8. Facilitation techniques based on NDT principles Lois Bly Allison Whiteside
- 9. Movement therapy in Hemiplegia Brunnstrom

- 10. Cash textbook of Physiotherapy in neurological conditions Patricia Downie
- 11. Physical Dysfunction Trombly Scoot
- 12. Infant Motor Development- Jan Piek
- 13. Neurology & Neurosurgery Illustrated (3rd edition)-Bone & Callander
- 14. Neuro-developmental Therapy –Janett Howle

SCHEME OF UNIVERSITY EXAMINATION

THEORY		Marks				
80 MARKS + I.A. – 20 MARKS * The question paper will give appropriate weightage to all the topics in the syllabus.						
Section A- M.C.Qs.	Q-1 -MCQs – based on MUST KNOW area [20 x 1]					
Section B-	Q-2 - Answer any FIVE out of SIX $[5 \times 3 = 15]$					
S.A.Q.	Q-3- Answer any THREE out of FOUR $[3 \times 5 = 15]$					
Section C- L.A.Q.	* Based on topics- Simulated case on all of the sections on ICF pattern (Section II,III & IV) Q-4] L.A.Q - 15 marks Q-5] - 15 marks OR Q-5] - 15 marks LAQ should give break up of 15 marks – e.g. [3 +5+7]	30				
	Total Marks	80				

PRACTICAL		Marks		
80 MARKS + I.A	A. – 20 MARKS	100		
LONG CASE	[Time maximum 30 minutes for students for evaluation] 1. Psychomotor & affective: • Skill of History taking [05 marks] • Skill of clinical examination [15 marks] • Skill of objective diagnostic procedure [10 marks] 2. Cognitive: • Ability to justify bases for functional diagnosis by I.C.F. [15 marks] [To be evaluated in cognitive, psychomotor and affective]			
SHORT CASE	Two Short cases on 1. Mobilization Technique: Kaltenborn, Maitland, M.E.T. or Neural Mobilisation (On Models) [10marks] 2. Neuro Therapeutic Skills: N.D.T. / P.N.F. / Rood's / Brunnstrom (On Models) [10 marks] OR Electro Diagnosis: S.D. Curve / Faradic Galvanic Test (On Patient) [10 marks] OR Exercise Tolerance Test: Six Minutes Walk Test (On Model) [10 marks] [10	20		
SPOTS	marks] 5 spots - (5 x2 Marks= 10 Marks) 3minutes for each spot a) X ray (on section 2/3/4) b) Pulmonary Function Test c) Blood gas analysis d) E.C.G. e) E.M.G. / N.C. studies	10		
JOURNAL	Documentations- Assessment, Evaluation, Diagnosis with I.C.F.	5		
	Total Marks	80		

INTERNAL ASSESSMENT:

- 1. Two exams Terminal and preliminary examination (Theory & Practical) of 80 marks each TOTAL 160 marks
- 2. Internal Assessment to be calculated out of 20 marks
- 3. In Practicals of Terminal & Preliminary examinations Spots will be of 15 marks instead of 10 marks (3 marks X 5), No marks will be allotted for the journal in Terminal & Preliminary examinations
- 4. Internal assessment as per University pattern

<u>SCHEME OF EXAMINATIONS AT A GLANCE – III B.P.Th.</u>

	<u>U</u>	NIVER	RSITY E	XAMINATIONS			COLLEGE	
SUBJECTS	Th	eory		Clinical / Practical		l	<u>LEVEL</u> EXAMS	
	University	I.A.	Total	University	I.A.	Total	(Theory	
Surgery-I (General Surgery							only)	
+ Cardio vascular & Thoracic	40	10	50					
Surgery + Plastic /	40	10	30					
Reconstructive Surgery)								
Surgery-II	40	10	50					
(Orthopaedics)	40	10	30					
Medicine-I								
(Cardiovascular	40	10	50					
Respiratory Medicine +	40	10	50					
General								
Medicine + Gerontology)								
Medicine-II	40	10	50					
(Neurology & Paediatrics)								
Community Health &	80	20	100					
Sociology	00	20	100					
Functional Diagnosis and								
Physiotherapeutic Skills	80	20	100	80	20	100		
Gynaecology & Obstetrics							50	
Dermatology							25	
Total	320	80	400	80	20	100	75	