

Final Exam RHS 332

1-How would you test the coordination? (Three tests at least).

- finger to nose.
- finger to finger.
- pronation-supination test.
- patting test.
- dexterity test.
- heel-knee test.
- Figure of eight test.
- Romberg's test.

2-What part is responsible for coordination?(3 at least)

Cerebellum, Basal ganglia, Dorsal column –medial lemniscal pathway, and cortex.

3-Your patient is having an impaired coordination of the right limbs, what part of the CNS is affected and what side of that part?

right lobe of the cerebellum.

4-You have seen the patient for three sessions and no improvement were achieved, what would you do?

- seek for information: book, article.
- consult an expert therapist.
- refer to an expert therapist.

5-You have seen the patient for the first time and your evaluation indicated the followings:

- Right side paralysis.
- Impaired sensation of the right side.
- Patient not able to move on bed.
- Impaired sitting balance.
- Impaired coordination.
- Patient is oriented X 2 (place and person).

What is the most important information that you should take care of it immediately? And how would you take care of it?

- Bed mobility.
- teach the patient or his sitter.
- make sure that the team are aware of the situation.

6- How would you test the orientation? And explain in detail how would you write it in your SOAP?

- ask the patient about time, place, and person.
- oriented x 3 (with details).

7- Your patient is a bed ridden patient for three weeks; you want to put the patient on standing position. Explain the sequences that you should follow to achieve this goal.

- supine, side lying, long sitting, sitting with support, sitting without support, standing with support, standing without support.
- you must check the vital signs with each step.

8- How would you test the proprioception?

while the patient is not aware of your action:

- move the patient's joint and ask him to determine its position.
- move the patient's joint of one side and ask the patient to resemble the same position of the same joint of the other side.

9- How would you test the muscle tone, and what are its degrees?

- by passive movement.
- hypotonia, normal, and hypertonia.

10- What are the types of rigidity?

cogwheel rigidity (jerky resistance), leadpipe rigidity (continuous rigidity), and spastic rigidity (rigidity is rate dependent and only elicited upon a high speed movement).

11- Mention the degrees of Modified Ashworth Scale.

0	No increase in tone
1	Slight increase in muscle tone, manifested by a catch and release or minimal resistance at the end of the ROM when the affected part(s) is moved in flexion or extension
1+	Slight increase in muscle tone, manifested by a catch, followed by minimal resistance throughout the remainder (less than half) of the ROM
2	More marked increase in muscle tone through most of the ROM, but affected part(s) easily moved
3	Considerable increase in muscle tone, passive movement difficult
4	Affected part(s) rigid in flexion or extension

12- How would you test the DTR? And what are its degrees?

- by the reflex hammer
- hyper-reflexia, normal, hyporeflexia, areflexia.

13- You are testing the sitting balance of the patient. What are the types of sitting balance you are going to test? And how would you make your test gradual to be sure that the patient is ready to move to standing balance?

- static and dynamic balance.
- by instructing the patient to close his eyes.

14- explain the Babinski's reflex, and its indications.

- Babinski's reflex occurs when the great toe extend and the other toes fan out after the sole of the foot has been firmly stroked.
- if positive, it indicates UMN.

15- Explain Romberg's test. And what is its indication?

- instruct the patient to stand and observe the patient for swaying, then instruct him to close his eyes.
- if patient sway while his eyes are open and the swaying is exaggerated when the eyes are closed, this indicate a cerebellar dysfunction.
- if patient sway only when his eyes are closed, this indicate a posterior column disorder.