***Anatomy***

1. A physical therapist is reviewing the doctor’s initial evaluation and a pediatric patient’s history. She notes that the patient sustained traction injury to the lower brachial plexus (klumpkes paralysis) as an infant during childbirth. What nerve levels does this involve?

A C3 and C4

B C5 and C6

**C C8 and T1**

D C7 and C8

2. A physical therapist is working with an elderly patient who gives a description from the family doctor stating diagnosis of Osgood-schlatters disease. Where would this patient complain of pain?

A ischial tuberocity

**B tibial tuberocity**

C lateral malleolus

D greater trochanter

3. Hairs, nails intergumentary glands and the epidermis layer of the skin are derived from embryonic

**A ectoderm**

B mesoderm

C endoderm

D mesenchyme

4. Muscles are named according to specific features and characteristics. Which one of the following is not used as a means of naming muscles?

A action

B shape

C location

**D strength of contraction**

**5.** During recovery from a gunshot wound of the right pelvis, the patient notices a lurch in his gait. When he lifts his left foot off the ground, his pelvis dips down on the left side. The nerve that appears to have been injured is the.

A nerve to obturator internus

B sciatic nerve

C inferior gluteal nerve

**D superior gluteal nerve**

6. The team doctor tells a footballer player that he has “pulled hamstring” muscle. This results from a tearing of the origin of a hamstring muscle from the

A sacrum

B posterior gluteal line

**C ischial tuberocity**

D iliac tubercle

7. In order to avoid injury to the sciatic nerve, intramuscular injections should be given in which quadrant of the buttock?

A upper medial

**B upper lateral**

C lower medial

D lower lateral

8. A patient complains of localized pain in a swollen lower calf and cannot strongly planter flex his foot. What tendon may have ruptured?

**A calcaneal**

B fibularis tertius

C flexor digitorum

D flexor hallucis longus

9 .During a motor cycle accident, an 18 year old male landed on the right lateral side of his rib cage with his right upper limb abducted. In the hospital he was found to have “winging” scapula .which nerve was likely damaged in the accident?

A accessory

B lateral pectorial

C long thoracic nerve

D vagus nerve

10. While going up rebound, a basketball player jams her middle finger against the ball. She experiences severe pain and trainer notes that she can no longer extend the distal phalanx of the finger. The injury has avulsed. Which structure from her distal phalanx to produce this condition?

**A dorsal extensor expansion**

B extensor Carpi radialis brevis tendon

C extensor Carpi radialis longus tendon

D extensor digiti minimi tendon

11. In order to make an intramuscular injection, the needle must pass through several layers of tissue to reach the muscle. Choose the correct order of tissues the needle would pass through from superficial to deep.

An epidermis, dermis, investing fascia, subcutaneous tissue, muscle

B **epidermis, dermis, subcutaneous tissue investing fascia, muscle**

C epidermis, investing fascia, dermis, subcutaneous tissue, muscle

D epidermis, subcutaneous tissue, dermis, investing fascia, muscle

12. The human foot is maintained by the foot arches, which are resilient and flexible thus enabling the foot, adapt better to various ground surfaces. Which of the following structures do not form the transverse arch of the foot?

A base of the metatarsals

B second cuneiform

**C calcaneus**

D third cuneiform

13. The anatomical snuff box is formed by the tensed tendons of certain muscles on their way to insertion. Which of the following tendons does not constitute the formation of the snuff box?

**A abductor pollicis longus**

B extensor pollicis brevis

C extensor pollicis longus

D all of the above

14. Jeba has been referred to physiotherapy opd by the clinician. On examination, he has weakness of the muscles of the right hand especially the thenar eminence. The physiotherapist has planned to stimulate the thenar muscles. Which of the following groups constitute the thenar muscles of the hand?

A Palmaris brevis, abductor digiti minimi, flexor digiti minimi brevis, opponens digiti minimi

**B abductor pollicis brevis, flexor pollicis brevis opponens pollicis**

C abductor pollicis brevis, abductor digiti minimi, opponens pollicis, flexor digiti minimi brevis

D palmar interossei, lumbricals, dorsal interossei

15. Amana was involved in RTA eight weeks ago, sustaining fracture upper third tibia /fibula. She was immobilized in a long pop. After removal, he is complaining of numbness on the lateral aspect of the leg, inability to planter flex and everts foot. Which group of muscles and nerve are most likely affected?

**A fibularis longus, fibularis brevis……………….superficial peroneal**

B fibularis brevis, fiburalis longus………………..deep peroneal

C tibialis anterior, extensor hallucis…………….deep peroneal

D plantaris, fiburalis brevis…………………………..tibial nerve

16. Webo sustained fracture neck femur 8/12 ago. He was managed on a balanced Russel traction and upon removal of the traction; he is unable to externally rotate the thigh at the hip due to muscle weakness. Which of the following group of muscles does not do external rotation of the thigh?

A piriformis, quadrates femoris, gemelli, obturators

**B gracillis, pectineus, adductor magnus, adductor brevis**

C gluteus maximus, gluteas medius, gluteas minimus, piriformis

D quadrates femoris, gamelli, obturators, gluteus maximus

17. The orthopedic surgeon said to the physiotherapist “ambulate the patient using axillary crutches” which muscle would you recommend the physiotherapist to strengthen for the purpose of crutch walking?

A serratus anterior

**B latismuss dorsi**

C trapezius

D lavatory scapulae

***Short answer questions***

**1.** List down at least six anatomical structures/ factors that limit movement in a joint

-**fleshy contact**

**-bony contact**

**-muscle tension**

**-the ligaments**

**-the shape of the articulating surfaces**

**-adhesions and scars**

2. The fetal development in embryology involves two principle processes. Describe briefly each of the two processes and their significance.

**A. growth**

**-this refers to increase in size of the fetal due to increase in the number of cells by mitosis process**

**B. differentiation**

**This is where group of certain cells develop specific characteristics which allows them to perform specific functions**

**3.** Alex and Omar are physiotherapy students. One afternoon they were discussing the human skin as the largest organ of the body. However they could not remember the functions of the skin and how it performs each of the functions. Picking from their discussion list down the five functions of the skin and how it performs each of those functions.

**A. excretion of waste products- this is performed by sweat glands and sebaceous glands by release of sebum which lubricate the skin and prevent brittleness.**

**B. regulation of body temperatures-when it becomes hot the blood capillaries dilate and come near the surface hence loosing heat**

**C. protection of the body-this is done by outer horny layer which contains keratin which is water proof, protects entry of germs and friction**

**D. formation of vitamin d- by action of utilization of the ultra violent rays**

**E. prevents the body from the harmful sun radiation by the germinative layer also contain melanin which gives the skin colour**

4. A solid bone would be too heavy for our muscles to move around. What features make a long bone light enough to move?

**A. it contains hollow cavity medullary cavity**

**B. contains minute canals in the diaphysis**

**C. the extremities of the bones are made of spongy bone which is less calcified**

**D. it has grooves that reduce its weight**

5. What are the 3 major arteries that branch from the arch of aorta

**-brachiocephalic trunk**

**-left subclavian artery**

**-left common carotid artery**

6. Explain the origin, insertion, action and nerve supply of the following muscle

A deltoid

**I) origin**

**-lateral 1/3 of clavicle**

**-superior acromion process of scapula**

**-medial lip of the crest of the spine of scapula**

**Ii) Insertion**

**-deltoid tuberocity**

**Iii) action**

**-rotates the upper arm medially**

**-abduction of the upper arm**

**-flexes the shoulder joint**

**-extends the shoulder joint**

7. Briefly discuss the formation of the vertebral column curves (curvatures) and state their significance

**-by the time child is born has only one curve which is c like called the primary curventure.as time goes the child uplifts head where secondary curve develops at the cervical spine. As the child stands also another secondary curve develops at the lumbar vertebrae**

**Significance**

**-they are for compensatory mechanism for thoracic and pelvic region**

**-they provide resistance to injury as they break down forces**

**-they assist to hold the head upright**

8. Compare and contrast the female and male pelvis

**-the female pelvis is wider and short compared to male**

**-female has blunt ischial spine compared to male which is sharp**

**-the outlet angle of pelvic is larger in female compared to male**

**-male is heart shape as female is oval shaped**

***Practice of physiotherapy***

**1**. A 60 year old patient who has type 2 diabetes would benefit from a regular exercise program but needs some direction on what to do. Which of the following recommendations is most appropriate for setting up a home program?

A exercise should be done before bedtime

B exercise should be done just before lunch time

**C exercise should be done mid morning**

D exercise should be done in the late afternoon.

2. A physiotherapist is evaluating72 year old patient in the hospital 36 hours after a right total hip replacement. The physician’s orders are for gait training. On evaluation of the patient in bed, the physiotherapist notices redness and edema present in the right calf. The patient complains of pain and tightness there also. What plan of action should the therapist take?

a) Assist the patient to sit at the edge of the bed and reassess the pain

b) Postpone the gait training for the time being and check on the patient later that day

c) Assist the patient to sit at the edge of the bed and perform gait training with a walking frame

**d) Notify the patient’s physician of the findings and postpone activity**

3. A 66 year old male is referred to physical therapy for evaluation and treatment of shoulder impingement. He is generally reconditioned and overweight. When asked about any other recent changes in his health he admits that his vision has been blurred and that he also gets occasional numbness in his feet. What differential diagnosis could explain this presentation with your clinical reasoning?

A) Full thickness rotator cuff tears

b) Urinary tract infection

c) Type ii diabetes mellitus

d) Type I diabetes mellitus

4. Physiotheraphy role in preventing falls includes which of the following interventions?

I) home assessment and environmental modification for those with known risks factors or a history of falling

Ii) Prescription of appropriate assistive devices to address physical and sensory impairments

Iii) Muscle strengthening and balance training

IV) community-based group programs which may incorporate fall prevention education and dynamic balance and strength training

1. I and ii
2. I and iii
3. Ii and iv
4. **All of the above**

5. A physiotherapist uses functional training in the treatment of a 90 year old neurological impairements.what is the best example of functional training?

**A) Demonstration, instruction and performance of sit to stand and bed to chair transfers**

b) Performance of ten repetitions of knee extensions while sitting with ankle weight

c) Sitting on a stability ball for ten minutes with minimum assistance

d) Active assisted D1 upper extremity pattern

6. A patient living in a nursing home has Alzheimer’s disease. The patient’s ability to understand and perform spoken commands is severely impaired. He is unable to follow directions for range of motions measurements. The physical therapist receives a referral for the shoulder pain. Since the patient is unable to follow spoken directions, what alternative does the therapist have to performing standardized joint range of motion measurements?

A) Performing passive ROM and assuming that active ROM is of the same quality

b**) Observing the patient as he performs activities of daily living to see if any functional ROM restrictions are present**

c) Using ROM measurements from previous physical therapy evaluation one year ago

d) Skipping ROM measurements or observation

**7.** A physical therapist is evaluating a young aged patient recovering from a hip fracture after a fall. The patient has dementia but is motivated and agreeable to participating with physiotherapy. Which of the following would be the most appropriate goal for this patient at home?

a) The patient will progress to ambulation with supervision within the home using a wheeled walker

**b) The patient will be independent with home exercises for hip strengthening**

c) The patient will be independent in understanding fall precautions in the home

d) The patient will obey weight bearing restrictions with all mobility in the home

8. A physiotherapist making a home visit to a patient with gait dysfunction. When the therapist arrives, the patient states that he is just starting to feel better from a three day bout with the flu. On this day he has increased muscle wekness, tingling in his legs and complaints of leg cramps. What secondary pathology may be contributing to these new symptoms based on your clinical reasoning?

**A) Electrolyte imbalance**

b) Diabetes mellitus

c) Cardiac sympathy

d) Stomach ulcers

9. An 80 year old patient is hospitalized with severe back pain from acute compression fracture at T7 48 hours ago. The physician indicates that the fracture is stable and the patient may begin exercise. The most appropriate activity for the patient to begin with is which of the following?

A) Supine sit ups

b) Prone push ups

**c) Seated abdominal isometrics**

D) Standing flexion and extension

10. A patient who resides in a nursing home has a VO2 max of 4 METS and is severely deconditioned.the patient is hospitalized due to medical problems and ordered to bed rest for two weeks. Upon return to the nursing home and discharge of the bed rest order the O2 max has decreased to 3 METS. What treatment intervention will the physical therapist most likely employ?

A) Aggressive stretching and strength training

b) Supine passive ROM only, sitting and standing are not indicated

c) No physical therapy will be helpful

**d) Progress the patients position with tilt table checking vital signs with the positional changes to allow for acclimation, and progress to standing once vitals are stable**

***Pharmacology***

1. Drug metabolism is one of the pharmacokinetic processes with its own various processes. The statement below best describes which phase 1 metabolism process “addition of water without substrate breakage”

A hydrolysis

**B hydration**

C reduction

D oxidation

2. Which of the following mycobacterium agents is not a second line drug in management of the mycobacterium tuberculosis?

**A pyrazinamide**

B Ethionamide

C Rifabutin

D Capreomycin

3. A client is being maintained on heparin therapy for deep vein thrombosis. The attached nurse must closely monitor which of the following laboratory values?

A) Bleeding time

B platelet count

**C activated prothrombin time test**

D clotting time

4. Although nonsteroidal anti-inflammatory drugs such as ibuprofen (Motrin) are beneficial in managing arthritis pain, the physiotherapists should caution clients about which of the following common side effects?

A urinary incontinence

B constipation

C nystagmus

**D occult bleeding**

5. Following ward interaction with your colleques, they mentioned it is important for health profession to monitor blood pressure in clients who are receiving antipsychotic drugs. Why do you think is important?

**A orthostatic hypotension is a common side effect**

B most antipsychotic drugs cause elevated blood pressure

C this provides information on the amount of sodium allowed in the diet

D it will indicate the need to institute antiparkinsonian drugs

4. A client is receiving intravenous heparin therapy. What medication should the nurse has available in the event of overdose of heparin?

**A protamine**

B amicar

C imferon

D diltiazem

5. A client is recovering from a hip replacement and is taking Tylenol every 3 hours for pain. In checking the client, which findings suggest a side effect of the analgesic?

A bruising at the operative side

B elevated heart rate

C decreased platelet count

**D no bowel movement for 3 days**

6. An antibiotic intra muscular injection for a 2 year old child is ordered by the family doctor. The total volume of the injection equals 2.0 ml.the correct action is to

**A administer the medication in 2 separate injections**

B give medication in the dorsal gluteal site

C call to get a smaller volume ordered

D check the pharmacy for liquid form of the medication

7. Which of the following is the primary site of activity for the drug warfarin?

A kidney

**B liver**

C blood

D heart

10. Omeprazole is a common drug used in the management of peptic ulcers. Which of the following statements below best describes it?

A it is a proton pump blocker

B it is an enzyme blocker

**C it is a proton pump inhibitor**

D it is an enzyme antagonist

***Movement science***

1. Being the lead coach you prescribed group of exercises to your team players to perform for fitness prior to a friendly match. Which of the following exercises best adhere to the principles of closed chain activity of the lower extremity?

A double straight leg raise

**B sustained 20 seconds squat**

C knees to chest passive stretch

D heel shin slide

2. Following stance postural examination you noticed a client who visited your clinic had exaggerated anterior pelvic tilt. Which of the below following postural faults would most likely be noted in the above described patient?

A exaggerated flat back

B exaggerated sway back

**C exaggerated lumbar lordosis**

D sacro iliac dysfunction

3. Normal human body utilizes different strategies to compensate for threatened balance following perturbations. Which of the following below strategies do you expect an individual standing in tandem stance to utilize following external perturbation?

A ankle strategy

**B hip strategy**

C stepping strategy

D proprioception strategy

4. In gait examination of one client in your new orthopedic clinic what phase of gait cycle do you expect him to have maximum stability?

A acceleration phase

**B double stance**

C swing phase

D stance phase

5. In a normal adult the center of gravity is located at the?

**A slightly anterior of S2**

B slightly behind the hip joint

C just behind the external ear

D at the shoulder joint

6. Cadence is a terminology strongly associated with gait cycle, what statement best describes it?

A it is decreased with sympathy of the lower limb

**B no of steps in sixty seconds**

C the normal range for an adult is between 20 to 30 steps in a minute

D it is less associated with impaired sequencing of lower limb muscles

7. In client examination for reaching object protocol you came up with a hypothesis of impaired grip due to weakness of the intrinsic muscles of the hand. The individual above will have challenge in which phase of distal proximal component?

**A grasp phase**

B reaching phase

C triphasic phase

D deceleration phase

8. According to the convex-concave rule during movement of a concave surface on a stable convex surface the

A concave surface will move in the same direction that the body is moving

B concave surface will move in the opposite direction that the body is moving

C convex surface will move in the same direction that the body is moving

**D convex surface will move in the opposite direction that the body is moving**

**9.** Which of the following best describes the work form of biceps brachii in elbow flexion motion?

**A positive work**

B negative work

C neutral work

D none of the above

***Short answer questions***

1differentiate between scoliosis and kyphosis

**-scoliosis is abnormal lateral curvatures of the spine while kyphosis is the secondary curve of the spine mostly found in the thoracic and sacral region of the spine.**

2. Enumerate any six causes of abnormal posture

**-repetitive injuries**

**-poor posture**

**-trauma**

**-anatomical defects**

**-pregnancy**

**-idiopathic**

**-inflammatory conditions**

3. Shape of bones is closely related to function. Briefly describe the importance of;

A. protuberances and spiny processes

**-this provides large surface area for attachment of muscles, ligaments, tendons and joint capsule hence efficiency in activity**

B. grooves in the bones

**-this provides safe sites for attachment of muscles and tendons where they are held in position by transverse sheaths making sure no displacement during contraction and relaxation**

4. All downward movements such as stepping down, sitting down etc are produced by gravity. State the role of muscle in such activities

**-muscle contract in relation to this to provide force to control such forces which may cause injury at long last**

**-muscle mass such as heel helps in absorbing landing forces which may cause injury**

5. There is increased likelihood of injury when the speed of movement increases. Briefly describe the mechanisms employed by the body to attenuate the ground reaction forces to avoid damage/injury

**-the postural land-where muscles cause contraction and assume postures such as knee flexion which helps to alter the transfer of forces that they don’t transfer in a straight line which is likely to cause more injury**

**-the postural land increases moment arm hence less stress to the anatomical structures**

**-employing of postural strategies e.g. hip, ankle strategies**

6. Most familiar moments can be undertaken in a smooth and efficient manner. This ability can be lost through

**-injury or disease which affect the structures causing incorrect alignment, weakness, incoordination of different systems of the body that participate in movement**

7. List five functions of the skeletal system that relate to movement

**-provide shape and frame that facilitate movement**

**-facilitate movement through network of joints**

**-participate in absorbing and dispersing external forces**

**-protection of vital organs and delicate structures hence psychological stability to allow wide range of movement**

**-provide attachment sites for muscles which contract to provide movement**

8. Name the two joints in the pelvis which allow substantial forces to pass safely through the bones during weight bearing

**-the sacro-iliac joint**

**-the pubic symphysis joint**

9. Name five factors that affect force generation in a skeletal muscle

**-motor unit recruitment**

**-frequency of stimulation**

**-the length of the muscle**

**-type of contraction**

**-type of muscle fiber arrangement**

10. Differentiate the terms active tension and passive tension in a muscle tissue

**-Active tension occurs when muscle contract and cross bridge come together/close providing more intrinsic forces**

**-passive tension is force generated by adjacent structures such as tendons, epimysium as they are elastic and this helps them from tearing**

11. Differentiate between the following types of muscle contraction

An isometric muscle activity

**-this occurs when muscle contract and no movement is seen as the produced force is equal or less compared to external force**

B concentric muscle activity

**-This happens when muscle contract by shortening bringing the attachment close as a good number of cross-bridge are close hence causing movement of the attached bone.**

C eccentric muscle activity

**This happens when muscle contract by lengthening hence controlling a movement**

***Long answer question***

1. All long bones in the body are curved. Give your opinion as to why this is important in relation to movement

**-they are curved to break compression forces**

**-to increase moment arm for anatomical structures e.g. muscles**

**-allow springing mechanism in case of direct forces**

**-provide large surface area for muscle attachment**

**-for increasing inclinations which alter centre of gravity line**

**-for congruency promotion leading to perfect match in the articulating joints**

***Community based rehabilitation***

1. According to Kenya national survey for persons with disabilities [KNSPWDs] carried out in 2007 found out that leading type of disability in the country is:

**A. Physical disability**

B.Hearing impairment

C.Visual impairment

D.Mental impairment

2. To be able to work with communities and persons with disabilities effectively. A community entry process is usually initiated and follows certain key steps. Which one of the following sequence of the steps is correct to follow in order to make the right entry?

a) Community mobilization---community sensitization---community diagnosis---community participation.

b) Community sensitization---community diagnosis---community participation---community mobilization.

c) Community sensitization---community diagnosis---community mobilization---community participation.

**d) Community diagnosis---community sensitization---community mobilization---community participation.**

3. Kenya disabilities Act of 2010 gives rights and privileges to PWDs. Which one of the following rights/privileges below is not spelt out in the Act?

a) Right to mobility and accessibility

b) Right to employment

c) Right to education

**d) Right to life.**

**4.** Which one of the following is an element of primary health care as defined in Almata Ata conference—1978?

a) Mental health

b) Dental health

**c) Health education**

d) STI/HIV/AIDS

5. The following statements describe the concepts of CBR program except**:**

a) Use of the locally available resources

b) Early identification of PWDs

c) Provision of equal opportunities

**d) The disabled persons can only be represented by able-bodied persons at all levels of CBR levels**

**6.** CBR program sustainability will depend on of the following factors except**:**

a) Full and active participation of PWDs community members

 b) Availability of referral centers in the community

 **c) Lack of functional income generating activities [IGAs]**

 d) Constant supervision and monitoring by the CBR officers

7. What do you understand by the term advocacy in CBR?

a) Involving all stakeholders in the overall planning, decision making and implementation

b) Holding demonstration campaigns against gorvement initiatives

**c) Fighting for the rights of PWDs at the levels of the society**

d) Dismantling the healthy facilities that traditionally deal with the disabled persons and dealing with them at community

8. Which of the following statements best describes the role of DPOs as an organization in support of the PWDs?

a) Representing them at all levels

b) Educating PWDs about their rights

c) Identifying their needs at different levels

**d) All of the above**

**9.** Which of the following is a pillar of primary healthcare?

a) Appropriate technology

b) Equality and social justice

c) Self reliance

 **d) All of the above**

**10.** which of the following statements below does not describe the benefits of inter/intra sectorial collaboration?

a) It promotes better relationship and co-operation between different sectors

b) It ensures maximum utilization of the available resources

c) It promotes sustainability, ownership and confidence in organizations

**d) None of the above**

**11.** Referral is one key role in CBR, which of the following is not a referral service?

a) Surgical correction of deformities

b) Training brail and sign language

c) Fitting orthotics and braces

**d) Reconstruction of immediate home environment**

**12.** For implementation of a program in CBR it requires effort of key participants, whose effort is crucial for successfulness of it?

**a) Families of people with disabilities**

b) People with disabilities

c) Appropriate health, education and social services

d) All of the

13. Bale lost his vision a year ago; he can’t continue his studies because of the impairment, as a CBR officer you will recommend Bale to?

**a) Refer to education assessment and resource centre**

b) Refer to special integration school

c) Refer to vocational institution

d) None of the above

14. CBR can be viewed in different rehabilitative models, which model views surrounding environment as the disabling factor to disability?

a) Medical model

**b) Social model**

c) Outreach model

 d) Both A and B

15. Disability management is done in different levels in CBR which level long term care is considered a factor?

a) Primary level

 b) Secondary level

**c) Tertiary level**

d) Both B and C

16. ICF is a tool used in various sectors; which among is true about:

a) Insurance companies

b) Labor sector

c) Education areas

**d) All of the above**

**17.** Following an outreach program rehabilitation team is working with a social worker to make a long term care for cerebral palsy patient .What will be the best assessment tool to assist with this task?

 a) Guide to rehabilitation team practice

 b) International classification of disabilities

 **c) Functional independence measures**

 d) Guide to physical therapists practice

18. Which statement best describes the correct interventions done at secondary level of the disability management?

 a) Intervention that decreases disability and impairment caused by illness or injury

 **b) Intervention that limit disability and are done primarily through early identification and prompt treatment**

 c) Intervention that promote optimal health and provide special protection to prevent illness, disabilities or injury

 d) None of the above

19. Which of the following statement best describes the concept of participation restriction in a community?

 a) It represents the execution of a task or action by an individual

 **b) It represents dysfunction of an individual body structure or function**

 c) It represents the ability of an individual to fulfill their overall functional roles in society

 d) It represents overall pathology or disease of the body

20. What does combination of educational, social and environmental support for behavior conducive to health refer to?

 a) Community built practice

 **b) Community health promotion**

 c) Community based rehabilitation

 d) Community based service

21. The focus on changing individuals with disabilities must give way to a systems perspective on changing all elements that perspective disability in society which include?

 a) Environmental factors

 b) Attitudinal factors

 c) Sociopolitical factors

 **d) All of the above**

**22.** The skills and attributes that are recommended for an officer contemplating practice in the community settings include the following except?

 a) Tolerance for ambiguity

 b) Excellent interpersonal communication skills

 **c) A reductionist perspective**

 d) High- level problem solving ability

23. Community development is an activity which promotes participation of individuals in a community, within the framework of the community development who among the following initiates a CBR activity?

a) The community itself

b) Donors

**c) Person from the ministry responsible for disability prevention and rehabilitation**

d) All of the above

24. During your clinical placement in APDK you meet assessment, evaluation and documentation form for PWDs.What are the three common ways of assessing self-care and independence in the community outreach?

**a) Self-report, Observational screening and direct examination by a PT**

b) Observational screening, doctor’s physical examination and direct exam by PT

c) Medical history, occupational functional screen and self report

d) Self report, health workers exam and direct exam by doctor

25. Following an outreach program rehabilitation team is working with a social worker to make a long term care for cerebral palsy patient .What will be the best assessment tool to assist with this task?

a) Guide to rehabilitation team practice

b) International classification of disabilities

**c) Functional independence measures**

d) Guide to physical therapists practice

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