

JEMAS(PG)-2022

QB No: 2102300001

Subject: Master of Occupational Therapy (MOT)

Duration: 90 minutes

No of MCQ: 100

Full Marks: 100

Instructions

1. All questions are of objective type having four answer options for each, carry 1 mark each and only one option is correct. In case of incorrect answer or any combination of more than one answer, $\frac{1}{4}$ mark will be deducted.
2. Questions must be answered on OMR sheet by darkening the appropriate bubble marked A, B, C, or D. Question booklet series code (A, B, C, or D) must be properly marked on the OMR.
3. Use only **Black/Blue ball point pen** to mark the answer by complete filling up of the respective bubbles.
4. Write question booklet number and your roll number carefully in the specified locations of the **OMR**. Also fill appropriate bubbles.
5. Write your name (in block letter), name of the examination center and put your full signature in appropriate boxes in the OMR.
6. The OMR is liable to become invalid if there is any mistake in filling the correct bubbles for question booklet number/roll number or if there is any discrepancy in the name/signature of the candidate, name of the examination center. The OMR may also become invalid due to folding or putting stray marks on it or any damage to it. The consequence of such invalidation due to incorrect marking or careless handling by the candidate will be sole responsibility of candidate.
7. Candidates are not allowed to carry any written or printed material, calculator, pen, log-table, wristwatch, any communication device like mobile phones etc. inside the examination hall. Any candidate found with such items will be **reported against** and his/her candidature will be summarily cancelled.
8. Rough work must be done on the question paper itself. Additional blank pages are given in the question paper for rough work.
9. Hand over the OMR to the invigilator before leaving the Examination Hall.

Group - A

1. Plasma membrane is:
(A) Freely permeable.
(B) Selectively permeable.
(C) Impermeable.
(D) All of these.
2. Protein factories of cell is:
(A) Mitochondria.
(B) Golgi body.
(C) Lysosome.
(D) Ribosome.
3. A 70 kg human contain water about:
(A) 40Lts.
(B) 30Lts.
(C) 50Lts.
(D) 25Lts.
4. Normal pH of blood is about:
(A) 7.2.
(B) 7.3.
(C) 7.4.
(D) All of these.
5. Neutrophil and monocyte can engulf the:
(A) Bacteria.
(B) Virus.
(C) Allergen.
(D) All of these.
6. Angle of pull is most efficient at _____ angle.
(A) Less than 90^0 .
(B) More than 90^0 .
(C) At 90^0 .
(D) All of the above.
7. Pelvis cannot tilt _____.
(A) Anteriorly.
(B) Posteriorly.
(C) Laterally.
(D) Medially.
8. Buoyancy is a type of:
(A) Resistance.
(B) Assistance.
(C) Assistance and Resistance.
(D) None of the above.

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9. Isometric contractions are also known as:
(A) Isotonic contractions.
(B) Isokinetic contractions.
(C) Static contractions.
(D) All of the above.
10. Knee is an example _____ joint.
(A) Saddle.
(B) Ball and socket.
(C) Hinge.
(D) None of the above.
11. Resistance is _____ in springs when parallel than springs when is series.
(A) More.
(B) Less.
(C) Equal.
(D) All of the above.
12. Type of muscular atrophy are the following except:
(A) Duchenne.
(B) Becker.
(C) Emery dreifuss muscular.
(D) Mc Jones.
13. The partial absence of a limb is known as:
(A) Meromeria.
(B) Amelia.
(C) Phocomelia.
(D) Syringomyelia.
14. Stitching opposite group of muscle with each other the distal end of the stump is known as _____ technique of Amputation.
(A) Myodesis.
(B) Myoplasty.
(C) Closed.
(D) Open.
15. _____ joint can withstand the most compressive for.
(A) Facet Joint.
(B) Hip Joint.
(C) Ankle Joint.
(D) Knee Joint.
16. Which class is lever of power?
(A) 1st.
(B) 2nd.
(C) 3rd.
(D) 2nd & 3rd.

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17. EMG can be quantified by measuring the amplitude of:
(A) Rectified EMG.
(B) Integrated EMG.
(C) Filtered EMG.
(D) None of the above.
18. Thomas heel is given in a case of _____.
(A) Equines foot.
(B) Cavus foot.
(C) Flat foot.
(D) CTEV.
19. Flexion injury leading to anterior wedge fracture of vertebral body is common in _____ region.
(A) Cervical.
(B) Thoracic.
(C) Lumbar.
(D) Thoraco-Lumbar.
20. Creep is the characteristic property of viscoelastic structures, which is defined as _____.
(A) Elongation over time with the load remaining constant.
(B) Load reduces over time with the length remaining constant.
(C) Elongation is slower than recoil.
(D) Relaxation is slower than lengthening.
21. Venous stasis ulcers can be best treated by:
(A) Neuropathic walker.
(B) Total-contact AFO.
(C) Unna boot.
(D) Prosthesis.
22. Non-operative treatment of accessory navicular bone is:
(A) Medial arch support.
(B) Thomas heel.
(C) Heel seat cup.
(D) Heel elevation.
23. Mildest form of spina bifida is:
(A) Spina bifida occulta.
(B) Spina bifida cystic.
(C) Myelomeningocele.
(D) None of the above.
24. Which of the following is not a component of club foot?
(A) Adduction of forefoot.
(B) Abduction of forefoot.
(C) Inversion.
(D) Plantar flexion.

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25. Orthotic causes of lateral trunk bending includes all except:
- (A) Adduction of the hip joint of the HKAFO.
 - (B) Abduction of the hip joint of the HKAFO.
 - (C) Transverse plane malalignment.
 - (D) Insufficient heel lift.
26. Functional foot orthosis should be aligned in:
- (A) Subtalar joint in neutral position.
 - (B) Subtalar joint in inversion.
 - (C) Subtalar joint in eversion.
 - (D) Subtalar joint in neutral with midtarsal joint in plantarflexion.
27. Indication of craig-scott orthosis is:
- (A) Poliomyelitis.
 - (B) Cerebral palsy.
 - (C) Paraplegia.
 - (D) Myopathy.
28. The orthosis can be prescribed in which of the following condition:
- (A) Peripheral vascular disease with ischemic ulcer.
 - (B) Combination of peripheral vascular disease and peripheral neuropathy.
 - (C) Peripheral neuropathy with pressure ulcer.
 - (D) All the above.
29. Which statement is true about Hop-skip running gait pattern?
- (A) Its unilateral transtibial gait pattern.
 - (B) Its bilateral transtibial gait pattern.
 - (C) Its unilateral transfemoral gait pattern.
 - (D) Its bilateral transfemoral gait pattern.
30. Which of the following prosthesis design factors belongs to environmental factors under ICF (International Classification of functioning), disability and health?
- (A) Level of amputation.
 - (B) Joint ROM of the ankle and subtalar joint.
 - (C) Activity level of the patient.
 - (D) Prosthesis availability.
31. In normal human hand which of the rays serves as fixed post for pinch and power functions:
- (A) The first and second.
 - (B) The second and third.
 - (C) The third and fourth.
 - (D) The fourth and fifth.
32. Which statement is false about immobilization splint?
- (A) Maintain tissue length.
 - (B) Improve and preserve the joint alignment.
 - (C) Prevent possible contracture development.
 - (D) Assist in functional use of the hand.

33. Inversion is the:
- (A) Ankle joint motion.
 - (B) Transverse tarsal joint motion.
 - (C) Tarso-Metatarsal joint motion.
 - (D) Sub-talar joint motion.
34. Windlass effect shown in the foot helps in:
- (A) Propulsion of the body forward.
 - (B) Medio-lateral stability of the ankle.
 - (C) Antero-posterior stability of the ankle.
 - (D) Pronation twist.
35. Fore-quarter amputation includes:
- (A) Humeral neck.
 - (B) Gleno-humeral.
 - (C) Interscapulo-thoracic.
 - (D) None of the above.
36. Definitive prosthesis is provided in which of the following stages of rehabilitation:
- (A) Acute post operative phase.
 - (B) Early post operative phase.
 - (C) Rehabilitation phase.
 - (D) All are true.
37. Which of the following is not a factor helping in determining degree of user's level of voluntary control?
- (A) Residual limb length.
 - (B) Active ROM and muscle strength.
 - (C) Overall balance.
 - (D) Body image.
38. Which of the following deformity couldn't be corrected / maintained in a plastic molded AFO design used in the CTEV?
- (A) Equinus.
 - (B) Mid-Foot cavus.
 - (C) Fore-Foot adduction.
 - (D) Tibial torsion.
39. Most popular and widely accepted technique for early intervention to correct CTEV is:
- (A) Ponseti method of manipulation & plastering.
 - (B) Kites' method of manipulation & plastering.
 - (C) French method of manipulation & strapping.
 - (D) Surgical correction.

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40. Which of the following is a contextual factor as per ICF (International Classification of function), disability and health?
- (A) Body structure and function.
 - (B) Environmental factor.
 - (C) Participation potential.
 - (D) Activity potential.
41. Joint end feel is categorized as “hard” which means:
- (A) Bone contacting bone.
 - (B) Bone contacting muscle.
 - (C) Soft tissue contacting muscle.
 - (D) Spring.
42. Range of motion should not be conducted on a joint with:
- (A) Contracture.
 - (B) Range of Motion Lag.
 - (C) Swelling.
 - (D) Dislocation.
43. A client is a 5 year old child who sustained a C6 spinal cord injury secondary to a motor vehicle accident. The injury occurred to the right side of his spinal cord. The OT begins the evaluation knowing that the sensation most likely to be impaired on the leg of the body, below the level of lesion is:
- (A) Two point discrimination.
 - (B) Touch localization.
 - (C) Temperature.
 - (D) Joint motion or kinesthesia.
44. Normal visual acuity is defined as:
- (A) 20/40.
 - (B) 20/30.
 - (C) 20/10.
 - (D) 20/50.
45. Trigeminal nerve:
- (A) Controls superior oblique muscle.
 - (B) Supplies sensory fibers to the upper eyelid and eyeball.
 - (C) Controls closing the eyelid.
 - (D) Controls eye muscle.
46. Agnosia is caused by lesion to:
- (A) Parietal lobe.
 - (B) Frontal lobe.
 - (C) Right Occipital lobe.
 - (D) Temporal lobe.

47. A major focus of Task oriented training is an:
- (A) Limb training.
 - (B) Arm training using functional tasks.
 - (C) Training by giving tasks.
 - (D) Unassisted training.
48. The symptoms of memory impairment, disturbed executive functioning, confabulation are seen in:
- (A) Dementia.
 - (B) Mania.
 - (C) Anxiety.
 - (D) Alcoholism.
49. All the following are single joint muscle except:
- (A) Biceps Brachi.
 - (B) Soleus.
 - (C) Brachioradialis.
 - (D) Brachialis.
50. The first sign seen in Parkinson's disease is:
- (A) Bradykinesia.
 - (B) Tremor.
 - (C) Rigidity.
 - (D) Tightness.

Group - B

51. An OT working in early intervention advise the concerned parents of an infant who cries a lot and has difficulty being soothed to:
- (A) Tightly wrap the infant in a blanket.
 - (B) Loosely wrap the infant in a blanket.
 - (C) Provide frequent and rapid changes in movement.
 - (D) Do nothing, as the infants behavior is typical.
52. Normal ROM for DIP joint:
- (A) 45 degree flexion.
 - (B) 80-90 degree flexion.
 - (C) 110 degree flexion.
 - (D) 0 degree flexion.
53. Money folding techniques used in:
- (A) Limited vision.
 - (B) Cataracts.
 - (C) Hemiplegic.
 - (D) In co-ordination.
54. In what age- range are symptoms of multiple sclerosis most likely to emerge?
- (A) 11-19.
 - (B) 20-40.
 - (C) 50-75.
 - (A) Above 75.
55. Which of the following are you least likely to observe following a CVA occuring in the middle cerebral artery?
- (A) Ataxia.
 - (B) Language deficits.
 - (C) Sensory deficits.
 - (D) Contralateral hemiplegia.
56. Which one is best therapy for a substance related disorder?
- (A) Milieu therapy.
 - (B) Supportive therapy.
 - (C) Music therapy.
 - (D) Movement therapy.
57. Total areas that an Otist assessed in a FIM scale:
- (A) 15.
 - (B) 16.
 - (C) 17.
 - (D) 18.

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58. LOTCA stands for:
- (A) Loewenstein occupational therapy cognitive assessment.
 - (B) Loewenstein occupational therapy caregiver assessment.
 - (C) Loewenstein occupational therapy cognitive perceptual assessment.
 - (D) Loewenstein occupational therapy cognitive approach.
59. When evaluating a patient with low ulnar nerve palsy, which is not a symptom that would be present?
- (A) Limited extension at IP joints.
 - (B) Fromonts sign.
 - (C) Inability to assume intrinsic minus position.
 - (D) Inability to oppose thumb and 5th digit.
60. If active range of motion (AROM) is less than Passive Range of Motion (PROM), then there is a problem of:
- (A) Ligament tightness.
 - (B) Capsular tightness.
 - (C) Muscle tightness.
 - (D) Muscle weakness.
61. Which one of the following is matched?
- (A) Nynhydrin test-Dellon.
 - (B) Static 2PD-functional test for tactile gnosis.
 - (C) Semmes –Weinstein monofilament-threshold test.
 - (D) Moberg pick-up test—Weber.
62. Wernicke's Aphasia is otherwise known as:
- (A) Motor aphasia.
 - (B) Sensory aphasia.
 - (C) Global aphasia.
 - (D) Anomia.
63. Kleinert 's flexor tendon injury management protocol includes:
- (A) Passive flexion and active extension.
 - (B) Passive flexion and extension.
 - (C) Active flexion and extension.
 - (D) All of the above.
64. The prone position provides the infant with the opportunity to work against gravity to develop:
- (A) Retraction of the shoulders in weight bearing.
 - (B) Stability of head and neck.
 - (C) Development of trunk flexion.
 - (D) Mobility in the upper extremities.

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65. Early intervention describes services for children from:
- (A) 1 year to 3 years.
 - (B) Birth to 2 years.
 - (C) Birth to 3 years.
 - (D) Birth to 5 years.
66. Binge eating is a common characteristic of:
- (A) Anorexia nervosa.
 - (B) Bulimia nervosa.
 - (C) Anorexia nervosa purging type.
 - (D) Bulimia nervosa non-purging type.
67. The exercise heart rate of a 50 year old patient is:
- (A) 85-149 beats per minute (bpm).
 - (B) 65-137bpm.
 - (C) 85-129 bpm.
 - (D) 65-149 bpm.
68. Inability to insert a key in door due to tremor is an example of:
- (A) Intention tremor.
 - (B) Postural tremor.
 - (C) Humeral deficiency.
 - (D) None of the above.
69. Which one of the following is a strongest muscle contraction?
- (A) Combing hair.
 - (B) Holding a glass of water at the mid range.
 - (C) Bringing down a cup of coffee to keep on the table.
 - (D) Cycling on a bicycle.
70. The adapted utensil that aids self feeding in an individual with poor supination:
- (A) Rocker knife.
 - (B) Spork.
 - (C) Spoon with a built up handle.
 - (D) Swivel spoon.
71. A person with quadriplegia complains of slumping to the side while sitting in a chair. What will be the recommended solution to enable the person to maintain optimal wheelchair positioning?
- (A) A reclining wheelchair.
 - (B) An arm trough.
 - (C) Lateral trunk support
 - (D) Lateral pelvic support.

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72. An individual with leprosy exhibits sensory changes only over the dorsum thumb and proximal phalanx of the index, long and half of the ring finger .The therapist will MOST likely suspect involvement of the:
- (A) Ulnar nerve.
 - (B) Median nerve.
 - (C) Radial nerve.
 - (D) Brachial plexus.
73. Disturbance of mood and psychomotor symptoms that affect thought processes, attention, activity level, sleep problems and appetite are characteristics of:
- (A) Mood Disorder.
 - (B) Paranoia.
 - (C) Schizophrenia.
 - (D) Depression.
74. The first two years of life is significant in the development of people with borderline personalities. This is explained by:
- (A) Biologic Theories.
 - (B) Psychodynamic Theories.
 - (C) Aging Theories.
 - (D) Continuity Theories.
75. Inability of thought, mood, behavior, unstable interpersonal relationship, problem with self image are characteristics of:
- (A) Schizophrenia.
 - (B) Anorexia Nervosa.
 - (C) Bulimia Nervosa.
 - (D) Borderline personality Disorder.
76. Binging is characterized by lack of control over ----- that lasts for a discrete period of time.
- (A) Drinking.
 - (B) Eating.
 - (C) Sleeping.
 - (D) Singing.
77. Insulin treatment is given in modified form to patients suffering from:
- (A) Depression.
 - (B) Schizophrenia.
 - (C) Anxiety.
 - (D) Dementia.
78. A possible after effect of insulin treatment is:
- (A) Pain.
 - (B) Headache.
 - (C) Stiff.
 - (D) Hypoglycemia.

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79. Senile Dementia is a psychotic condition resulting in part from:
- (A) Brainstem deterioration.
 - (B) Cerebral Deterioration.
 - (C) Cortex Deterioration.
 - (D) None of the above.
80. Long periods of sitting or standing in the same position is contradicted in:
- (A) Mania.
 - (B) Dementia.
 - (C) Anxiety.
 - (D) Schizophrenia.
81. Dipsomania is:
- (A) Recurrent drinking attacks in between.
 - (B) Recurrent drinking attacks in between in which the patient finds alcohol distasteful.
 - (C) Recurrent drinking attacks in between in which the patient loses his memory.
 - (D) Recurrent drinking attacks in between in which the patient becomes aggressive.
82. To work on a part of the body or part of a task is:
- (A) General Job Simulation.
 - (B) Specific Job simulation.
 - (C) Job simulation.
 - (D) Job Analysis
83. In progressing Job Simulation activities, if the program is predicted to last four weeks the program should equal approximately:
- (A) $1/4^{\text{th}}$ of the goal each week.
 - (B) $1/2$ of the goal each week.
 - (C) $1/3^{\text{rd}}$ of the goal each week.
 - (D) $1/6^{\text{th}}$ of the goal each week.
84. Cooking in the evening for a guest is an example of:
- (A) Occupation.
 - (B) Task.
 - (C) Activity.
 - (D) Skills.
85. Positive Gowers sign is due to weakness in:
- (A) Hip Muscle.
 - (B) Knee Muscle.
 - (C) Pelvic muscle.
 - (D) None of the above.
86. Kyphosis can be defined as a curvature of the spine measuring _____ degrees or greater on an X –ray.
- (A) 30.
 - (B) 40.
 - (C) 50.
 - (D) 60.

87. Inability to perform rapid alternative movements is known as:
- (A) Dysmetria.
 - (B) Dissynergia.
 - (C) Dysdiadochokinesia.
 - (D) Dyscalculia.
88. PNF approach uses:
- (A) Diagonal motor movement patterns and tactile stimulation.
 - (B) Diagonal motor movement patterns and auditory stimulation.
 - (C) Diagonal motor movement patterns and tactile and auditory stimulation.
 - (D) Diagonal motor movement patterns and tactile, auditory and visual stimulation.
89. Disturbance of mood and psychomotor symptoms that affect the thought processes, attention, activity level, sleep patterns and appetite are characteristics of:
- (A) Mood Disorder.
 - (B) Paranoia.
 - (C) Schizophrenia.
 - (D) Depression.
90. Hypotonia can manifest as deficits in:
- (A) Sensory Processing.
 - (B) Praxis or motor planning.
 - (C) Balance.
 - (D) All of the above.
91. The wrist driven wrist hand orthosis is commonly used by a patient with SCI of level:
- (A) C4 and C5 tetraplegia.
 - (B) C6 and C7 tetraplegia.
 - (C) C8 tetraplegia.
 - (D) All of the above.
92. Measurement by using Manual Muscle Testing is a:
- (A) Standardized Test.
 - (B) Non standardized Test.
 - (C) Ratio level of measurement.
 - (D) Interval level of measurement.
93. Forearm pain preceding weakness of Flexor pollicis longus, Flexor digitorum profundus I & II and pronator quadratus indicates presence of:
- (A) Cubital tunnel syndrome.
 - (B) Carpal tunnel syndrome.
 - (C) Pronator syndrome.
 - (D) Thoracic outlet syndrome.
94. A boutonniere deformity results when:
- (A) Zone –I Extensor tendon injury occurs.
 - (B) Zone –II Extensor tendon injury occurs.
 - (C) Zone –III Extensor tendon injury occurs.
 - (D) Zone –V Extensor tendon injury occurs.

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95. Which of the following activities do not figure as an OT activity?
- (A) Management of childhood obesity.
 - (B) Management of Alzheimer's disease.
 - (C) Management of low vision.
 - (D) Management of normal labour.
96. Fugl-Meyer Assessment (FMA) is the most frequently used assessment of:
- (A) Cognitive deficits.
 - (B) Perceptual deficits.
 - (C) Motor deficits.
 - (D) Sensory deficits.
97. MP joint flexion is 85 degrees with full extension, PIP is 100 degree and lacks 15 degrees extension, DIP 65 degrees with full extension, the Total Active Motion(TAM) will be:
- (A) 215 degrees.
 - (B) 235 degrees.
 - (C) 245 degrees.
 - (D) 255 degrees.
98. Bringing a hot cup of coffee to the mouth to take a drink and carefully lowering it back down to the table is an example of:
- (A) Closed chain movement with eccentric and concentric contraction.
 - (B) Open chain movement with eccentric and concentric contraction.
 - (C) Closed chain movement with concentric contraction.
 - (D) Open chain movement with eccentric contraction.
99. DeLorme method of resistive exercise program is a:
- (A) Progressive resistive exercise program.
 - (B) Regressive resistive exercise program.
 - (C) Endurance training program.
 - (D) All of the above.
100. While performing functional activity, the HR(Heart Rate) should be limited to an increase:
- (A) No more than 10-20 bpm above the resting rate.
 - (B) No more than 20 -30 bpm above the resting rate.
 - (C) No more than 30-40 bpm above the resting rate.
 - (D) No more than 40 bpm above the resting rate.