MD PHYSICAL MEDICINE & REHABILITATION

1. Anatomy

- a. Musculo-skeletal system Osteology and Myology, Functional Anatomy, Kinesiology and Anthropology
- b. Neuroanatomy Brain, Spinal Cord, Peripheral Nerves, Autonomic Nervous System.
- c. Cardiovascular system
- d. Respiratory system
- e. Histology of bones, cartilage, muscles, nerves and skin

2. Physiology

- a. Muscle Ultra structure and chemical composition, contraction, fatigue, changes in denervated muscle
- b. Nerve properties of peripheral nerve, membrane potential and depolarization, nerve impulse, nerve conduction, neuromuscular transmission, motor unit, muscle spindle, electro- diagnosis
- c. Central nervous system sensations and volition, co-ordination of movement and regulation of posture, special senses, language and speech
- d. Autonomic nervous system
- e. Cardiovascular system
- f. Respiratory system including assessment of pulmonary function
- g. Endocrine system -
- h. Renal functions, control of micturition
- i. Temperature regulation
- j. Physiology of exercise

3. Biochemistry

- a. General metabolism and nutrition
- b. Acid base balance
- c. Calcium and Phosphorus metabolism

4. Biophysics as applied to Physical Medicine

- a. Biomechanics of human movement
- b. Properties of physical agents used in Physical Medicine heat, cold, light, electromagnetic spectrum, electricity and ultrasound

5. Pathology

- a. Degenerations, circulatory disturbances, inflammation and repair
- b. Infections of bones and joints, Rheumatoid arthritis and allied disorders (in detail)
- c. Neuropathology- trauma to central nervous system, degenerations of CNS, infections, cerebrovascular accidents

- d. Cardiovascular diseases with emphasis on congenital heart diseases, valvular heart diseases, hypertension and peripheral vascular disorders
- e. Respiratory diseases with emphasis on infections, restrictive and obstructive disorders
- f. Diseases of the kidney and urinary tract
- g. Major endocrine disorders like Hypothyroidism, and Obesity
- h. Nutritional deficiencies
- i. Diseases of muscles
- j. Genetic disorders
- k. Pathology of aging

6. Pharmacology

- a. Drugs acting on the adrenergic system
- b. Drugs acting on the peripheral nervous system (somatic) including skeletal muscle relaxants
- c. Local anaesthetics
- d. Autocoids and related drugs
- e. Drugs for COPD and Asthma
- f. Oxygen Therapy
- g. Hormones
- h. Drugs affecting calcium balance
- i. Sedatives, hypnotics
- i. Anticonvulsants
- k. Antispasticity agents
- 1. Anxiolytics
- m. Nonopiod Analgesics and Nonsteroidal Antiinflammatory Drugs
- n. Opioids
- o. Hypolipidaemic agents and Plasma Expanders
- p. Steroids
- q. Antihypertensive agents
- r. Drugs acting on the neurogenic bladder
- s. Drugs acting on the bowel
- t. Anti rheumatic agents
- u. Antibiotics
- v. Antidepressants
- w. Immunosuppressants
- x. Anti-cancer agents
- y. Drugs in diabetes
- 1. History and scope of the specialty, definitions and terminology
- 2. Diagnostic application of physical agents
- 3. Treatment modalities used in Physical Medicine- general properties and detailed clinical use of each
 - a. Heat general physiological properties and mode of action as a treatment agent, indications and contraindications, forms of heat therapy superficial and deep heating including treatment techniques. Emphasis will be given to Infrared, Hydro collator, Paraffin Wax bath, convection heating devices, shortwave diathermy, microwave diathermy and ultrasonic therapy

- b. Cold as a therapeutic agent
- Ultraviolet radiation physiological properties of U.V.R., mode of application in clinical use with indications, contraindications and side effects
- d. Therapeutic electricity Low voltage currents, low and high frequency currents
- e. Hydrotherapy
- f. Prescription of physical modalities and their applications in medical, surgical and gynaecological disorders
- 4. Clinical use of massage, manipulation, stretching and traction
- General principles of therapeutic exercises (for muscle strength, endurance, power, motor re-education, co-ordination and joint mobility), maintenance of physical fitness through optimum exercise
- 6. Prescription of exercise therapy and other supportive measures
- Analysis of gait kinetics and kinematics, normal and pathological gaits, gait analysis and gait lab
- Energy costs of functional activities in health and disease, experimental and clinical use of ergometry in Physical Medicine
- Principles of occupational therapy, training in activities of daily living for rehabilitation, self-help devices, instrumental activities of daily living, environmental control units, setting up an occupational therapy section
- 10. Rehabilitation aids including walking aids, wheelchairs, tricycles, modified vehicles
- Electro diagnosis electromyography and application of electrophysiological testing of muscles and nerves for diagnostic and prognostic purposes including SSEP and Repetitive stimulation
- 12. Outcome assessment tools, use of questionnaires, disability evaluation, certification
- 13. Sports Medicinea.
- a. Physical fitness training for sports personnel
- b. Rehabilitation of the injured athlete
- c. Sports for the disabled
- d. Nutrition in sports
- e. Use and abuse of drugs in sports
- f. Rational and safe use of medications in sports
- g. Fluid and electrolyte changes in exercise
- h. Safety, management and prevention of sporting trauma, principles of safety equipment
- i. Knowledge of contact and non-contact sports
- j. Sudden death in sports
- k. Chronic and overuse injuries
- 1. Medical and psychological problems of athletes
- m. The growing athlete
- n. The female athlete
- o. Performance below par
- p. Ethics of sports medicine and rehabilitation
- q. Managing medical issues at stadiums
- r. Non-competitive and competitive sports

- 14. Rehabilitation management of cases with various systemic disorders
- a. Neuromuscular disability with particular emphasis on strokes, post-polio paralysis, cerebral palsy, spinal cord injuries, muscular dystrophies, spinal muscular atrophy, disorders of the neuromuscular junction
- b. Orthopaedic disability- arthritis and joint deformities, postural problems and amputations
- c. Cardiovascular disability
- d. Pulmonary disability
- e. Urological problems
- f. Cancer
- g. Problems of the vestibular system
- h. Obesity
- i. Diabetes and Dyslipidaemia

15. Prosthetics and Orthotics

- a. General definitions evolution of the field with emphasis on the Indian scene
- b. Indications for amputations classical amputations- influence of prosthetic technology on amputation techniques ideal stump stump complications and their management
- Recent advances in amputation surgery and prosthetic science myoelectric control for prostheses, computer aided design and manufacture
- d. Clinical examination of the amputees, and prescription of prosthesis
- e. Types of lower extremity prostheses biomechanical considerations knee and foot mechanics, alignment and fit, check-out
- f. Immediate post-operative fitting of prostheses
- g. Type of upper extremity prostheses functional considerations, cosmetic considerations
- h. Bracing Indications and preliminary considerations on pre-orthotic preparation and post-orthotic training
- i. Types of common braces and corrective shoes prescription criteria and checkout procedures in fitting lower extremity, upper extremity and spinal orthoses
- j. Common materials used in prosthetics and orthotic manufacture
- k. Equipment necessary for prosthetic and orthotic fabrication, organization of prosthetic & orthotic workshop
- i. Minimum requirements for setting up of an Artificial Limb fitting Centre
- 16. Psychosocial and psychiatric problems in rehabilitation and their management
- 17. Epidemiology of disability
- 18. Principles of rehabilitation nursing
- 19. Principles of management of communication impairments
- 20. Special principles in the rehabilitation management of children's problems
- 21. Management of the geriatric patient and rehabilitation
- 22. Rehabilitation management of the injured "industry" worker
- 23. Orientation on the socio-economic and vocational aspects of rehabilitation
 - a. Principles of vocational guidance, training and placement
 - b. Social integration of the disabled
 - c. Elimination of architectural barriers for the handicapped in relation to housing, transportation and employment
 - d. Mobilizing community resources for rehabilitation
 - e. Role of voluntary agencies
- 24. Principles of the "Team approach" towards rehabilitation, members of the team and the role of each.

- 25. Organization and administration of Rehabilitation facilities in
 - a. Teaching hospitals
 - b. Large general hospitals
 - c. Specialized treatment centers
 - d. Rural rehabilitation services
- 26. Issues of sexuality in Rehabilitation, rehabilitation of sexual problems
- 27. Community Based Rehabilitation
- 28. Interventional Pain Management
- a. Anatomy and Physiology of Pain pathways
- b. Pharmacotherapy of pain
- c. Intra-articular injection techniques
- d. Complex Regional Pain Syndromes
- e. Phantom pain
- f. Facial Pain
- g. Fibromyalgia and myofascial pain syndromes
- h. Interventions for musculoskeletal pain
 - 1) Stellate ganglion block
 - 2) Trigger point injections
 - 3) Gasserian ganglion block and block of branches of the trigeminal nerve
 - 4) Sphenopalatine ganglion block
 - 5) Cervical epidural block
 - 6) Cervical transforaminal epidural block
 - 7) Cervical discogram and Ozone discectomy/ ozone nucleolysis
 - 8) Cervical facet joint block
 - 9) Occipital nerve block
- i. Management of cancer pain- overview
- j. Pharmacotherapy of cancer pain
- k. Interventions for cancer pain
 - 1) Coeliac plexus block
 - 2) Lumbar sympathetic block
 - 3) Superior hypogastric block
 - 4) Splanchnic nerve block
 - 5) Peripheral nerve block
- 1. Rehabilitation of the patient with cancer related disability
- m. Management of colostomy, tracheostomy, laryngectomy and mastectomy
- n. Evaluation and interventional management of spinal pain
- o. Pain after spinal cord injury- evaluation and management
- p. Caudal epidural block and epidurogra
- 29. Epidemiology of Disability
- 30. Medical emergencies in rehabilitation
- 31. Computers in rehabilitation
- 32. Research methodology in rehabilitation medicine
- 33. Multiple disabilities
- 34. Sociology and health, social epidemiology, health seeking behaviour, social planning and development, socialization, environment and health, social groups, family, community, social psychology, QOL, groups and leadership, social problems in contemporary society, medical and social work as relevant to Rehabilitation Medicine

II. Allied Disciplines:

A. Medicine including Neurology and Rheumatology

- a. General metabolic and endocrine disorders including diabetes and dyslipidaemia
- b. Common infectious diseases prevalent in India
- c. Disorders of nutrition
- d. Degenerative diseases and special problems in the elderly
- e. Common cardiovascular diseases
- f. Common respiratory diseases
- g. Rheumatoid and allied diseases including classification, etiology, pathogenesis, clinical manifestations, diagnosis, differential diagnosis and management
- h. Genetics
- i. Neurological disorders
- 1. Congenital disorders of the nervous system
- 2. Hereditary familial, degenerative, demyelinating, neoplastic disorders
- 3. Progressive disorders
- 4. Language disorders
- 5. Epilepsy
- 6. Stroke
- 7. Spinal Cord Injury- Paraplegia and tetraplegia
- 8. Autonomic disturbances
- 9. Disorders of peripheral nerves
- 10. Assessment of intelligence Mental retardation
- 11. Traumatic Brain Injury
- 12. Extrapyramidal disorders
- 13. Multiple sclerosis
- 14. Infectious and toxic encephalitis
- j. Disorders of frontal lobe function, dementias- primary and secondary
- k. Apraxia, Agnosia and Aphasia
- 1. Human Immunodeficiency Virus and AIDS

B. Surgery including Orthopaedic Surgery

- a. Shock and its management
- b. Management of burns
- c. Wound infections and their management
- d. Pressure sores aetiology, management and prevention
- e. Principles of emergency resuscitation
- f. Common orthopaedic injuries and principles of management, plaster techniques, complications of fractures, post-surgical patient, joint replacements, spinal stabilization
- g. Orthopaedic problems in children and their management
- h. Diseases of bones and joints (congenital, infective, inflammatory, metabolic, degenerative and neoplastic)
- i. Orthopaedic problems resulting from neuromuscular diseases pathogenesis, clinical picture, diagnosis and principles of management including surgical techniques

- j. Scoliosis and other spinal deformities
- k. Amputation surgery
- 1. Hand rehabilitation
- m. Hip and knee contractures, foot disorders

C. Community Medicine

- a. Identification of community needs for health services, including rehabilitation services, utilization of the epidemiological approach and statistical methodology
- b. Principles of comprehensive health care, integrating rehabilitation practices with general health services (candidates are expected to acquire clinical practice through rural and urban health units)
- c. Preventive rehabilitation approach in medical care at the grass root and intermediate community levels
- d. Immunization practices
- e. Health education practices

D. Pediatrics

- a. Normal growth and development.
- i. Prenatal
- ii. Neonatal to adolescence (gross motor, fine motor, reflex maturation, cognitive, social and personality)
- b. Developmental delay and mental subnormality
- c. Behavioural disorders and their relationship to organic diseases
- d. Planning education programs for disabled children
- e. Common congenital and hereditary disorders of children
- f. Common childhood diseases (including poliomyelitis, cerebral palsy, meningitis, rheumatic fever and neoplasms)
- g. Childhood disability
- h. Autism and Attention Deficit Hyperactivity Disorder

E. Psychiatry and Clinical Psychology

- a. Mental status, intelligence and personality assessment
- b. Behavioural disturbances due to organic brain damage
- c. Overt psychopathologic reactions neurotic, psychotic or sociopathic states (Latter including addiction, alcoholism and sexual disturbances)
- d. Emotional disturbances anxiety, depression, aggressiveness, apathy
- e. Psychological responses to illness and disability
- f. Introduction to counseling, counseling in individuals and organizations, assessing various types of counseling provisions, conflicts between values of organization and counseling, the roles and responsibilities of counselors, common methods of counseling and their applications in relation to Rehabilitation Medicine

F. Cardiology

- a. Common disorders of the cardiovascular system with particular emphasis on the congenital, rheumatic, hypertensive and ischemic diseases
- b. Assessment and classification of functional status of the heart and work capacity
- -Application of data for rehabilitation recent advances
- c. Rehabilitation of patients with cardiac illnesses post-myocardial infarction,

CABG, cardiac transplantation, cardiomyopathy and valvular heart disease, protocols in exercise testing (Bruce, Naughton and others)

G. Chest Diseases

- a. Allergic, infective, neoplastic, obstructive and restrictive disorders of the respiratory system
- b. Respiratory assistance therapy, oxygen therapy, chest physiotherapy

H. Radiology and Cancer

- a. Interpretation of radiological findings on common diseases
- b. Common diagnostic radiological procedures
- c. Contrast studies and their significance
- d. Principles of nuclear medicine
- e. Principles of radiotherapy
- f. Principles of anti-cancer chemotherapy
- g. Palliative care

I. Neurosurgery

- a. Management of trauma to the central nervous system
- b. Congenital, infective, degenerative and neoplastic diseases of the brain or spinal cord including aetiology, pathogenesis, diagnosis and management
- c. Peripheral nerve injuries

J. Plastic Surgery

- a. Methods and techniques of skin grafting
- b. Principles of reconstructive surgery for correction of deformities
- c. Surgical treatment of decubitus ulcers
- d. Principles of hand surgery, tendon transfers in upper and lower limbs

K. Urology

- a. Evaluation and management of the neurogenic bladder
- b. Upper and lower urinary tract infections aetiology, diagnosis and treatment

L. ENT

Common E.N.T disorders, including speech and hearing impairments and their management

M. Obstetrics and Gynecology

- a. Pelvic infections
- b. Urogenital prolapse
- c. Role of exercise therapy in Obstetrics and Gynaecology practice
- d. Women's issues in rehabilitation

N. Ophthalmology

Common ophthalmological disorders, causes of blindness, prevention and management, and disability evaluation