

**KRISHNA INSTITUTE OF MEDICAL SCIENCES
"DEEMED TO BE UNIVERSITY", KARAD.
KRISHNA COLLEGE OF PHYSIOTHERAPY**

**POST GRADUATE - MASTER OF PHYSIOTHERAPY (02 YEARS)
M.P.Th IN COMMUNITY HEALTH SCIENCES
PROGRAMME CODE: 3205**

AIM:

The Master of Physiotherapy (specialty) Programme is directed towards rendering competency in knowledge and skills related to advance physiotherapeutic skills especially related to specialty Clinical fields to enhance professional Physiotherapy Practice, Education and Research, in line with global standards.

COURSE OUTLINE:

The Master's degree in Physiotherapy is a two year full time programme consisting of classroom teaching, self-academic activities and clinical postings, with self-directed evidence based practice. In the first year theoretical basis of physiotherapy is refreshed along with research methodology, biostatistics & teaching technology. The students are rotated in all areas of clinical expertise including their specialty during this period. They are required to choose their study for dissertation and submit a synopsis. During the second year the students will be posted in their area of specialty. They are required to complete and submit their dissertation. The learning program includes seminars, journal reviews, case presentations, case discussions and classroom teaching. Some of the clinical postings may be provided at other reputed centers in the country in order to offer a wider spectrum of experience. The students are encouraged to attend conferences, workshops to enhance their knowledge during the course of study. University examinations are held at the end of first year and at the end of second year.

COURSE OUTCOME:

This course promotes the development of skills, knowledge and attributes of a reflective, evidence-based practitioner with special attributes to enhance his / her career in a better way as per the society needs.

ELIGIBILITY FOR ADMISSION:

1. He/she has passed the Bachelor of Physiotherapy recognized by any Indian University with

pass marks (50%).

2. Admission to Master of Physiotherapy course shall be made as per the rules by the competent authority. Entrance test will be conducted by KIMSDU as per the rules by competent authority.

OBJECTIVES:

At the completion of this course, the student should be -

1. Be able to do a physical therapy diagnosis using a frame work of ICF that is to identify the impairment of body structure, body function, environmental and personal factors and to address the activity limitations and participations restrictions and able to execute all routine physiotherapeutic procedures with clinical reasoning & evidence based practice.
2. Able to be a prominent member of the multidisciplinary team and treat all the conditions which need physiotherapeutic procedures.
3. Able to provide adequate knowledge about the treatment procedures and its benefit.
4. Able to transfer knowledge and skills to students as well as young professionals.
5. Able to perform independent physiotherapy assessment and treatment for patients.
6. To plan and implement need based physiotherapy interventions for all clinical conditions related to respective specialty in acute, chronic cases, critical care, independent practice including health promotion and prevention.
7. Able to undertake independent research in the field of physiotherapy.
8. Learn multidisciplinary practice skills.
9. Able to practice and assess patient independently.
10. Able to practice in his / her specialty area with advanced knowledge and skills.
11. Able to take up physiotherapy teaching assignments independently for undergraduate teaching programme.
12. Able to prepare project proposal with selected research design and interpret the evaluated outcome measures (using sound data processing techniques and statistical methods).

SPECIALTIES OFFERED:

1. MPT in Musculoskeletal Sciences
2. MPT in Neurosciences
3. MPT in Cardio Pulmonary Sciences
4. MPT in Community Health
5. MPT in Pediatric Neurology

ASSESSMENT:

Two exams will be conducted in theory and practical at the end of first and final academic years. The Attendance and progress report scrutinized and certified by the Head of the Department and Head of the Institution to be submitted to the university with the exam form for both first & second year examination.

YEAR WISE SUBJECTS:

MPT - I YEAR

1. Basic Sciences.
2. Basic Therapeutics.
3. Advanced Therapeutics - As per specialty (5 Specialties.)
4. Research Methodology & Biostatistics.

MPT – II YEAR SPECIALTIES: (2 SUBJECTS IN EACH SPECIALITY)

1. General Physiotherapy - As per specialties (5 Specialties.)
 2. Advances in Physiotherapy - As per 5 Specialties.
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1. MPT in Musculoskeletal Sciences.
 2. MPT in Neurosciences.
 3. MPT in Cardio Pulmonary Sciences.
 4. MPT in Community Health.
 5. MPT in Pediatric Neurology.

3205 - M.P.Th IN COMMUNITY HEALTH SCIENCES

M.P.Th - I Year

1. **3205 - 11: BASIC SCIENCES**
2. **3205 - 12: BASIC THERAPEUTICS**
3. **3205 - 13: ADVANCED THERAPEUTICS IN COMMUNITY HEALTH SCIENCES**
4. **3205 - 14: BIOSTATISTICS AND RESEARCH METHODOLOGY**

M.P.Th - II Year

1. **3205 - 21: GENERAL PHYSIOTHERAPY IN COMMUNITY HEALTH SCIENCES**
2. **3205 - 22: ADVANCES IN COMMUNITY HEALTH SCIENCES**

**KRISHNA INSTITUTE OF MEDICAL SCIENCES
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FACULTY OF PHYSIOTHERAPY.

3205 - M.P.Th IN COMMUNITY HEALTH SCIENCES

3205-11: BASIC SCIENCES.

SYLLABUS:

Sr. No	Content	Teaching Hours		Must know	Desirable to know	Nice to know
		Didactic (98 Hrs)	Practical (82 Hrs)			
1.	PRINCIPLES AND ETHICS:	10 Hrs	-	MK		
	a. Theoretical background of physiotherapy profession.					
	b. Professional sources in the community.					
	c. Principles and practice of physiotherapy in India.					
	d. Ethical background of physiotherapy.					
	e. Ethics of IAP & WCPT. Professional ethics.					
	f. Modified Referral ethics in the practice of Physiotherapy					
	g. Governing body of Physiotherapy Profession state & central level.					
2.	EXERCISE PHYSIOLOGY AND NUTRITION:	15 Hrs	5 Hrs	MK		
	a. Nutrition and physical performance.					
	b. Energy transfer.					
	c. Systemic adaptation during exercise.					
	d. Physical performance.					
	e. Factors affecting physical					

	performance.					
	f. Fatigue and lactate.					
	g. Training.					
	h. Fitness and testing.					
	i. Obesity.					
	j. Diabetes.					
	k. Applied exercise physiology.					
3.	PATHOMECHANICS AND CLINICAL KINESIOLOGY: Review of mechanical principles and applied biomechanics of human body.	25 Hrs	10 Hrs	MK		
4.	Review of various types of exercises, principles and its applications for joint mobility, muscle re-education, strengthening and endurance training.			MK		
5.	Posture, analysis of normal and abnormal posture, posture training.	5 Hrs	5 Hrs		DK	
6.	Gait, analysis of normal and abnormal gait, gait training.	5 Hrs	15 Hrs			NK
7.	ADL, assessment and training of ADL.	3 Hrs	10 Hrs		DK	
8.	Measuring tools in therapeutics.	5 Hrs	15 Hrs		DK	
9.	ometer, pressure transducers, force plates, spondylometer, anthropometric and etc.	5 Hrs	10 Hrs	MK		
10.	ORTHOTICS, PROSTHETICS & BIOENGINEERING:	25 Hrs	12 Hrs	MK		
	a. Orthosis of spine.					
	b. Orthosis of upper limb.					
	c. Orthosis of lower limb.					
	d. AK and BK Prosthesis.					
	e. Prosthetic fitting and training.					
	f. Biomechanical principles governing them.					

3205 -12: BASIC THERAPEUTICS.

SYLLABUS:

Sr. No	Content	Teaching Hours		Must know	Desirable to know	Nice to know
		Didactic (80 Hrs)	Practical (80 Hrs)			
1.	Basic exercises	5 Hrs	10 Hrs			
2.	Basic Electrotherapeutics: Review the principles and applications of the following electrotherapy modalities and justify the effects and uses of it with evidence	25 Hrs	25 Hrs	MK		
	1. Short wave diathermy.					
	2. Microwave diathermy.					
	3. Ultrasonic therapy.					
	4. Ultraviolet radiation.					
	5. Infrared radiation.					
	6. Iontophoresis.					
	7. Faradic stimulation.					
	8. Dynamic currents.					
	9. Interferential therapy.					
	10. Cryotherapy.					
	11. TENS.					
	12. LASER Therapy.					
	13. Paraffin wax bath.					
	14. Hydrotherapy.					
	15. Hydro collator packs.					
	16. Contrast bath.					
	17. Traction.					
	18. Mechanical external compression therapy.					
	19. Fluidotherapy.					
	20. Phonophoresis.					
3.	Pain and pain modulation.	5 Hrs	5 Hrs		DK	
4.	Conventional electro diagnosis.	5 Hrs	5 Hrs	MK		
	1) FG Test.					
	2) SD Curve.					
5.	Electrocardiogram.	2 Hrs	3 Hrs		DK	

6.	Echocardiography.	2 Hrs	2 Hrs			NK
7.	Physical & functional diagnosis.	20 Hrs	20 Hrs	MK		
	1. Clinical examination in general and detection of movement dysfunction.					
	2. Principles of pathological investigations and imaging techniques related to neuromuscular, skeletal and cardiopulmonary disorders with interpretation					
	3. Development screening development diagnosis, neurodevelopment assessment and motor learning-voluntary control assessment					
	4. Anthropometric measurements					
	5. Physical fitness assessment by					
	i. Range of motion					
	ii. Muscle strength, endurance and skills					
	iii. Body consumption					
	iv. Cardiac efficiency tests and spirometry					
	v. Fitness test for sport					
	6. Electro-diagnosis, clinical and kinesiological electromyography and evoked potential studies. Biophysical measurements, physiotherapy modalities techniques and approaches, Electro diagnosis, conventional methods, electromyography sensory and motor nerve conduction velocity studies, spinal and somato-sensory evoked potentials					
	Radiological investigation.	16 Hrs	10 Hrs	MK		
	1) X – Ray.					
	2) CT / MRI Scan.					
	3) Blood investigation (routine)					

3205 - 13: ADVANCED THERAPEUTICS IN COMMUNITY HEALTH SCIENCES

SYLLABUS:

Sr. No	Content	Teaching Hours		Must know	Desirable to know	Nice to know
		Didactic (50 Hrs)	Practical (75 Hrs)			
1.	<p>Industrial health:</p> <p>Environmental stress in the industrial area - Accidents due to:</p> <p>1) Physical agents-e.g. Heat/cold, light, noise, Vibration, U.V. radiation, Ionizing radiation</p> <p>2) Chemical agents-Inhalation, local action, ingestion,</p> <p>3) Mechanical hazards-overuse/fatigue injuries due to ergonomic alteration & ergonomic evaluation of work place-mechanical stresses per hierarchy – Sedentary table work- Executive, Clerk Inappropriate seating arrangement – vehicle drivers, Constant standing – Watchman, Defense Force, Surgeons. Over-exertion in laborers: common accidents: Role of PT - Stress Management.</p> <p>4) Psychological hazards- e.g.-executives, monotonicity & dissatisfaction in job, anxiety of work completion with quality, Role of P.T. in Industrial setup & Stress management-relaxation modes.</p> <p>5) Ergonomics.</p> <p>6)Preparation of practical models</p>	15 Hrs	20 Hrs	MK		
2.	Geriatric health:					

	<p>1) Physiology of Aging. 2) Normal and abnormal aging. 3) Prevention of abnormal aging – role of exercises and physical fitness programme and its significance. 4) Methods of maintaining normal aging. 5) Common geriatric problems - musculoskeletal /neuro-motor /cardio respiratory/ Metabolic. 6) Role of Physiotherapy in an old aged home. 7) Preparation of practical models</p>	15 Hrs	20 Hrs	MK		
3.	<p>Women's health: 1) Anatomy of Pelvic floor 2) Clinical reasoning for Physical exercises during pregnancy. 3) Clinical reasoning for care to be taken during exercises during pregnancy. 4) Prenatal /antenatal programme. 5) Clinical reasoning for specific breathing exercises/ relaxation/ postural training/ Pelvic floor stretching & strengthening exercises. 6) Physiotherapy during labor Postnatal exercise programme after normal labor / labor with invasive procedures. I. Uro-genital dysfunction-P.T. management. II. Menopause-De-conditioning – P.T. management. III. Common Gynecological surgeries- role of P.T. management. IV. Clinical reasoning for application of Electro- therapeutic measures in Obstetrics / Gynecology.</p>	10 Hrs	20 Hrs	MK		
4.	<p>Pediatric health: 1) Common pediatric health disorder - enumerate the various causes and methods of prevention. 2) Physiotherapy management for the</p>	10 Hrs	15 Hrs		DK	

	<p>following pediatric orthopedic conditions such as CDH, CTEV, and other foot disorders, still's disease, muscular dystrophies.</p> <p>3) Pediatric neurological conditions such as Anterior poliomyelitis, Cerebral palsy, Hydrocephalus, Spina bifida, etc.</p> <p>4) Cardio respiratory conditions same as adult.</p>					
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3205-14: BIOSTATISTICS AND RESEARCH METHODOLOGY.

SYLLABUS:

Sr No.	Contents	TEACHING HOURS (100 Hrs)	Must Know	Desirable to Know	Nice to Know
1	Research methodology: I. How to read critique research. II. Introduction to research: frame work: levels of measurement: variables III. Basic research concepts: validity and reliability. IV. Design, instrumentation and analysis for qualitative research. V. Design, instrumentation and analysis for quantitative research VI. Design, instrumentation and analysis for quasi-experimental research VII. How to write research proposal VIII. Ethics in research IX. Importance of software in research X. Importance of SPSS, PowerPoint, etc in research.	60 Hrs	MK		
2	Biostatistics: I. Descriptive and inferential statistics II. Types of data qualitative and quantitative III. Frequency distributions IV. Describing data with graphs V. Describing data with averages mode median mean VI. Describing variability variance standard deviation etc	40 Hrs	MK		

	VII. Normal distributions				
	VIII. Interpretations of r				
	IX. Hypothesis testing				
	X. T tests				
	XI. ANOVA				
	XII. Probability				
	XIII. Type I and type II errors				
	XIV. Parametric and non-parametric tests				
	XV. Simple statistical analysis using available software.				

3205-21: GENERAL PHYSIOTHERAPY IN COMMUNITY HEALTH SCIENCES

SYLLABUS:

Sr.no	Content	Teaching Hrs.		Must know	Desirable to know	Nice to know
		Didactic (350Hrs)	Practical (350 Hrs)			
1.	Target population for various Community health disorders.	50 Hrs	25 Hrs	MK		
2.	Briefly review the health, dimensions of health, maintenance of normal health, illness, disorders, diseases, different levels of health care delivery systems in the community.	10 Hrs	5 Hrs	MK		
3.	Impairment, disability and handicapped	5 Hrs	10 Hrs	MK		
4.	Scope of community health.	5 Hrs	10 Hrs	MK		
5.	Basic concepts of community based rehabilitation and foundations of CBR <ul style="list-style-type: none"> a. History of disability b. Discrimination c. Rehabilitation acts d. Legislation – Indian, International (WHO) e. Hospital based care to community f. Agencies in rehabilitation g. Access and barrier free environment h. Psychosocial aspects of rehabilitation i. Ethical issues in rehabilitation j. Social security definition of disability k. Medicaid: benefits and 	10 Hrs	10 Hrs	MK		

	<p style="text-align: center;">limitations</p> <p style="text-align: center;">I. Insurance and rehabilitation</p> <p style="text-align: center;">.</p>					
6.	<p>CBR – Values and concept and its impact on professional practice; various definitions and their impact on disabled people, principles and values shaping professional practice, freedom from barriers, equality and full participation, integration, inclusion</p>	5 Hrs	5 Hrs	MK		
7.	<p>Major approaches in working with people with disabilities, independent living/ self help/ empowerment, CBR versus institution barrier – free environment and information technology, sheltered employment versus community workshop employment, legislation (anti-discrimination), and public education</p>	10 Hrs	20 Hrs	MK		
8.	<p>Intervention skills: Rehabilitation counseling, holistic approach in rehabilitation counseling, small group counseling and vocational counseling for people with disabilities, skills training in parent and sibling counseling in rehabilitation.</p>	15 Hrs	30 Hrs	MK		
9.	<p>Psychological function and patterns of behavior</p> <ul style="list-style-type: none"> a. Subjectivity of disability b. Adjustment of disability c. Adjustment: Role, societal values and self image d. Body image and sense of self e. Psychopathologic reactions: depression and anxiety disorders 	25 Hrs	20 Hrs	MK		
10.	<p>Evaluation of CBR PROGRAM</p> <ul style="list-style-type: none"> a. Types of CBR evaluation b. Role of government, public sectors and NGOs 	5 Hrs	10 Hrs	MK		

11.	Screening of various health disorders at different sectors.	50 Hrs	60 Hrs	MK		
12.	Basis for Therapeutic decision making related to Community health problems	25 Hrs	25 Hrs	MK		
13.	Disability evaluation in detail	25 Hrs	25 Hrs		DK	
14.	Physiotherapy management of miscellaneous conditions : a. Wound healing in diabetes mellitus, leprosy, pressure sores b. Obesity c. Burns d. HIV e. Skin conditions f. Diabetes mellitus g. Malignancy	50 Hrs	50 Hrs	MK		
15.	Concept of Preventative Physiotherapy for target population and team approach.	20 Hrs	25 Hrs	MK		
16.	Short project based learning: Field work	10 Hrs	5 Hrs	MK		
17.	Disaster Management	5 Hrs	5 Hrs		DK	
18.	Different models of Community physical health care: specific to Urban / Rural	5 Hrs	5 Hrs	MK		
19.	Community causes for various health disorders	5 Hrs	-	MK		
20.	National & International health programs for Musculoskeletal Physiotherapy interventions.	5 Hrs	-	MK		
21.	Professional marketing strategies – Entrepreneurship a) Specialty clinics b) Independent Practice c) Joining organizations d) Groups e) NGO f) Specialty references	5 Hrs	-			NK

22.	Management strategies of various orthopedic disorders.	5 Hrs	5 Hrs	MK		
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3205-22: ADVANCES IN COMMUNITY HEALTH SCIENCES

SYLLABUS:

Sr.no	Content	Teaching Hrs		Must know	Desirable to know	Nice to know
		Didactic (400 Hrs)	Practical (500 Hrs)			
1.	<p>Community based Rehabilitation of following disorders:</p> <ul style="list-style-type: none"> a. Spinal cord injury b. Traumatic brain injury c. Stroke d. Amputations e. Heart disease, pulmonary disease f. Parkinson's disease g. Multiple sclerosis h. Arthritis i. Vestibular rehabilitation j. Burns k. Chronic pain l. Developmental disorders m. Degenerative, progressive disorders <p>Challenges in quality of health care in community setup in the management of various therapeutic conditions like Malignancy, etc.,</p>	40 Hrs	40 Hrs	MK		
2.	Disabilities other than locomotors	5 Hrs	10 Hrs	MK		
3.	Evaluation and theories of aging	5 Hrs	10 Hrs			NK
4.	Epidemiology	5 Hrs	10 Hrs		DK	
5.	Common disorders					

	<ul style="list-style-type: none"> a. Heart disease b. Pulmonary disease c. Diabetes mellitus d. PVD e. Chronic illness f. Obesity / malnutrition g. Arthritis & other musculoskeletal disorders – low back pain syndrome h. Immuno- suppressed patients & Cancer i. CNS Disorders – dementia, Alzheimer’s 	20 Hrs	50 Hrs	MK		
6.	Evaluation in the elderly	10 Hrs	20 Hrs	MK		
7.	Pharmacological management – multi pharmacy (basic knowledge)	3 Hrs	2 Hrs			NK
8.	Role of nutrition.	2 Hrs	10 Hrs		DK	
9.	Exercise prescription in elderly (prevention, therapeutic, precaution and danger.	5 Hrs	20 Hrs	MK		
10.	Psycho-social issues	3 Hrs	5 Hrs		DK	
11.	Safety issues	2 Hrs	2 Hrs	MK		
12.	Geriatric rehabilitation services - care in the patient’s own home, day care outside the home, domiciliary services, sheltered housing, group homes and assisted living facilities, nursing home care, dementia / psychiatric units, hospitalization, ethical considerations (euthanasia, living wills, etc)	25 Hrs	20 Hrs	MK		
13.	Occupational health: <ul style="list-style-type: none"> a. Physiology and toxicology (lead, arsenic, manganese, aluminum, silica, coal, hay and acid burn) 	20 Hrs	30 Hrs	MK		

	<ul style="list-style-type: none"> b. Occupational hazards - factors, classification, implications & epidemiology. c. Industrial hygiene, prevention, management. d. Special industries – agricultural industry and pesticide use, air & water pollution, hazardous waste. e. Vulnerable worker’s groups: women, children, older persons, chronically ill and handicapped workers. f. Labor law: work modification, tool design. 					
14.	<p>Industrial therapy in contemporary work place</p> <ul style="list-style-type: none"> a. Industrial therapy – traditional medical model Vs worker care spectrum. b. Industrial therapy team approach c. Impact and outcome of industrial therapy 	15 Hrs	20 Hrs	MK		
15.	<p>Injury prevention & Ergonomics</p> <ul style="list-style-type: none"> a. Job analysis b. Job placement assessment and pre-employment screening c. Employee fitness program d. Prevention of injuries-back and upper extremities. 	20 Hrs	15 Hrs	MK		
16.	<p>Returning the worker to productivity</p> <ul style="list-style-type: none"> a. Acute care and functional management b. Functional capacity assessment c. Flexibility, mobility, strength and aerobic conditioning d. Work conditioning and 	15 Hrs	10 Hrs		DK	

	<ul style="list-style-type: none"> work hardening e. Job stimulating f. Educating the worker for maximum productivity g. Psychological perspectives h. Vocational rehabilitation i. Assessing physical impairment 					
17.	Management in industrial therapy - Regulations and regulatory agencies.	5 Hrs	10 Hrs			NK
18.	<p>Ergonomics</p> <ul style="list-style-type: none"> a. Introduction to ergonomics b. Anatomy, physiology and anthropometrics c. Ergonomic quality and cost-return benefits issues d. Human body interaction with the environment e. Work schedules, ergonomic models, methods and measurements (measurement tools and methods) f. Designing to fit the moving body g. Office ergonomics h. Handling loads i. Designing for special populations 	10 Hrs	10 Hrs	MK		
19.	<p>Occupational ergonomics:</p> <ul style="list-style-type: none"> a. application of ergonomics to the design and/or b. redesign of jobs, manufacturing workstations and other work environment to c. Achieve increased profitability & reductions in injury / illness. 	10 Hrs	10 Hrs	MK		
20.	Principles of ergonomics	5 Hrs	5 Hrs	MK		

21.	Ergonomic issues related to use of hand tools, posture, material handling / lifting, NIOSH lifting formula	5 Hrs	2 Hrs	MK		
22.	Frequent types of injuries related to workplace design, repetitive motion and Cumulative trauma disorders.	5 Hrs	10 Hrs	MK		
23.	Preventing ergonomically related injuries by redesigning the workplace, work Analysis and work hardening.	5 Hrs	10 Hrs	MK		
24.	Designing displays for workers, auditory displays	5 Hrs	5 Hrs		DK	
25.	Transfers and design of information	2 Hrs	10 Hrs		DK	
26.	Controls and control arrangements – keyboards and input devices for computers	3 Hrs	10 Hrs			NK
27.	Occupational stress.	5 Hrs	10 Hrs	MK		
28.	Environmental pollution due to noise, vibration and ergonomic plan.	5 Hrs	10 Hrs	MK		
29.	Women’s reproductive health and health care: physiology - menstruation and menopause, sexual health and controlling fertility, abortion, pregnancy and childbirth	20 Hrs	10 Hrs	MK		
30.	Exercise prescription in pre and postnatal stage: childbirth preparation, muscle strengthening exercises for pregnancy and postnatal safe stretching, safe lifting and osteoporosis,	10 Hrs	20 Hrs	MK		

	ergonomic advice.					
31.	Diagnosis and treatment of musculoskeletal pain and dysfunction in the childbearing year and post menopause: upper and lower back pain, pelvic joint pain, carpal tunnel syndrome and headaches.	15 Hrs	12 Hrs	MK		
32.	Promotion of continence and treatment of incontinence (bladder and bowel - men & women) and pelvic floor dysfunction	10 Hrs	5 Hrs	MK		
33.	Specific problems in women's health: women and cancer, health care and aging.	10 Hrs	10 Hrs		DK	
34.	Women's health and the future: Gender, health and the environment.	5 Hrs	5 Hrs			NK
35.	Gender related issues (socio-cultural)	3 Hrs	5 Hrs			NK
36.	Family planning and reproductive hygiene	3 Hrs	5 Hrs	MK		
37.	Environmental, biological risks and child health.	4 Hrs	5 Hrs	MK		
38.	Early detection and intervention, researches – an outcome and effectiveness.	10 Hrs	5 Hrs	MK		
39.	Development delay, disabilities, at risk populations.	10 Hrs	5 Hrs	MK		
40.	Assessment	15 Hrs	10 Hrs	MK		
41.	Delivery system – scheduled and transitions	5 Hrs	5 Hrs	MK		

42.	Focus of intervention : a. Developmentally - appropriate practices and activity b. Based interventions, social and cultural practice.	10 Hrs	10 Hrs	MK		
43.	Team models and inter-agency collaboration	2 Hrs	10 Hrs			NK
44.	Parent's involvement and family centered	1 Hrs	5 Hrs		DK	
45.	Community based natural environments	2 Hrs	5 Hrs		DK	
46.	Evidence based practice of physiotherapy in community health a) Medico legal issues b) Effective documental c) Effective communication	5 Hrs	10 Hrs			NK

BOOKS & JOURNALS OF COMMUNITY PHYSIOTHERAPY:

- 1) Geriatric Physical Therapy By Andrew A. Guccione, 2nd Edition (Mosby2000)
- 2) Developing Cultural Competence in Physical Therapy Practice by Jill Black Lattanzi, Larry D. Purnell(F.A.DavisCompany,Philadelphia2006)
- 3) RehabilitationOfTheAgingAndElderlyPatientByGeraldFelsenthal,SusanJ.Garrison,Franz U. Steinberg (Williams &Wilkins 1994)
- 4) Physical Therapy of the Geriatric Patient by Jackson Osa. Churchill Livingstone. New York.
- 5) GeriatricPhysicalTherapy:AClinicalApproachByCaroleB.LewisAndJenniferBottomley (1993)
- 6) Geriatric Rehabilitation Manual By Timothy L. Kauffman (1999)
- 7) Manual Of Geriatric Rehabilitation By DavidX.Cifu (2003)
- 8) Functional Fitness For Older Adults By Patricia A. Brill (2004)
- 9) Epidemiology Of Aging – An Ecological Approach By William A. Satariano (Jones And

- Bartlett Publishers, 2006).
- 10) Little Black Book Of Geriatrics, By Karen Gershman, Mccullough Dennis 4th Edition(Jones And Bartlett Publishers,2008).
 - 11) Burnside's Working With Older Adults, Group Process And Techniques By Barbara Haigh, Faith Gibson; 4th Edition (Jones And Bartlett Publishers, 2005).
 - 12) Developing Cultural Competence in Physical Therapy Practice, Jill Black Lattanzi, Larry D. Purnell (2006 F.A.Davis).
 - 13) Industrial Therapy, Key. G.L.(1987Mosby)
 - 14) Physiotherapy In The Community , Gibson, Ann. 1988, Wood head-Faulkner (Cambridge, Wolfeboro, N.H.,USA)
 - 15) Community Rehabilitation In Neurology,MichaelP.Barnes,HarrietRadermacher,Cambridge University Press2009
 - 16) CommunityCareForHealthProfessionals,AnnCromptonAndMaryAshwin,(Butterworth–Heinemann2000)
 - 17) Ruth Sapsford, Joanne Bullock Saxton, Sue Markwell,“Women's Health: A Textbook For Physiotherapists, 1998,Bailliere Tindall.
 - 18) PhysiotherapyInObstetricsAndGynecology,MargaretPoldenAndJillMantle,Butterworth-HeinemannPublishers,Stoneham,MA,1990
 - 19) Obstetrics and Gynecologic Physiotherapy, Elaine Wilder, Churchill Hill Livingstone.
 - 20) Rebecca G. Stephenson, Linda J. O' Connor, “Obstetric and Gynecologic CareIn Physical Therapy”, 2000, SlackIncorporated2Edition.
 - 21) Carolyn Kisner, Colby Allen Lynn, “Therapeutic Exercise Foundations and Techniques, 5th Edition.
 - 22) Bo,Kari;Berghmans,Bary,“Evidence-Based Physical Therapy For The Pelvic Floor: Bridging Science And Clinical Practice”,2007,Churchill Livingstone(London)
 - 23) Irion,JeanM.;Irion,Glenn,“Women'sHealthInPhysicalTherapy:PrincipleAndPractices ForRehabilitationProfessional”,2009,LippincottWilliamsAndWilkins(Philadelphia).
 - 24) David Wise, Rodney U. Anderson, J. Laycock, “Therapeutic Management Of Incontinence AndPelvicPain:PelvicOrganDisorders”,2007,Springer;2ndEd.Edition.
 - 25) Matthew Parsons, Linda Cardozo, “Female Urinary Incontinence In Practice”, 2004, Royal Society Of MedicinePress.
 - 26) JohnCoxAndJeniHolden,“PerinatalMentalHealth-AGuideToTheEdinburghPostnatal DepressionScale”,2003,GaskellPublisher.
 - 27) Carrie Hall and Lori Thein Brody, “Therapeutic Exercise: Moving Towards Function, 2005, Lippincott Williams & Wilkins.
 - 28) Padubidri V Shirish N Daftary, Shaw's Text book Of Gynecology, Elsevier India

PLtd2008.

- 29) Gary Cunningham EtAl, Williams Obstetrics, Mcgraw Hill Professional,2001
- 30) Kevin P Hanretty, EtAl, ObstetricsIllustrated, Churchill Livingstone;6Edition
- 31) David Makay Hart,EtAl GynaecologyIllustrated,ChurchillLivingstone2000.
- 32) 1. Rehabilitation. 2.Disabled Persons. 3. Community Health Services. 4. Health Policy. 5. Human Rights.6.SocialJustice.7.ConsumerParticipation.8.Guidelines. WHO Library Cataloguing-in-Publication Data
- 33) Prejudice & Dignity: An introduction to Community-Based Rehabilitation by Einar Helander United Nations Development Programme. Publication NO, E93-III-B.3, ISBN92-1-126032-9.
- 34) Finnie's Handling the Young Child with Cerebral Palsy at Home,4thEdition2008, Editor: Eva Bower

Journals:

- 1) Journal Of Rehabilitation–Research And Development
- 2) Archives Of Physical Medicine And Rehabilitation
- 3) Geriatric Physical Therapy
- 4) Journal Of Geriatrics
- 5) Journal Of Indian Academy Of Geriatrics
- 6) Journal Of Clinical Gerontology & Geriatrics