

Neuro



BAU#1

Doctors of this course

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Neurosurgery:

1) WFNS grad 2 is?

- GCS 13-14 with deficit
- GCS 7-12 with deficit
- **GCS 13-14 without deficit***
- GCS 15 without deficit

2) Most sensitive test for SAH?

- Ct w/o contrast
- CT Angio
- MRI
- **LP***

3) Most primary brain tumor in adult?

- **GBM*** (Glioblastoma Multiforme)
- Worst prognosis in Ca.?
- GBM*
- Oligodendroglioma
- Ependymoma

4) Case about Pt with first time seizure with classification on CT. Went through surgery and removed the mass and it showed Fried egg appearance under microscope. Most likely Dx?

- **Oligodendroma**

5) Not help to do Sergey over coiling?

- **Hunt & hus 4**

6) Astrocytoma type 3?!

- **Anaplastic Astrocytoma**

7) Which of the following About AVM not correct :

- From arterial phase to venous phase
- Congenital abnormalities
- See brain tissue as nidus in Angiogram
- **Surgery for grade 1 and 2***

8) What is the type of Edema in CNS tumors :

- **Vasogenic***
- Cytotoxic
- Interstitial

9) Management for concussion is :

- **Conservative***
- Surgery

10) late sign for increase ICP:

- **Papilledema***
- Bradycardia

11) Normal ICP?

- **0-15 mmHg**

12) Not true about aneurysm:

- Peak age is 55-65
- **Males more affected than females***
- Rupture 95-97%

13) Not for spinal nerve compression:

- **FABER***
- Straight Leg Raise
- Valsalva Maneuver
- Kernig Test

14) Wrong statement?

- **Ependymoma M. C. intradural extramedullary**

15) Least likely cause of SAH pt. deterioration after 3rd day?

- Hydrocephalus
- Rebleeding
- Vasospasm
- Hyponatremia

I'm not sure about the correct answer, but since it's after the 3rd day I chose Rebleeding

16) Patient with SAH was treated, after 6 days his status was worsen and he developed aphasia and hemiplegia, what is the most likely complication?

- Rebleeding in MCA
- Vasospasm in MCA *
- Rebleeding in anterior communicating artery
- Vasospasm in anterior communicating artery

17) Wrong about Epidural:

- Doesn't cross midline
- Doesn't cross sutures
- Associated with basal skull fracture*
- Source of bleeding is arterial

18) A pt. fell down from third floor developed paraplegia, fecal and urinary incontinence, priapism and loss of sensation below the umbilicus. What is the most likely cause :

- T7 fracture*
- C7 fracture
- Severe head trauma that affected the motor area
- Cauda equina

19) Not true about CSF?

- Produced by choroid plexus and interstitium
- Absorbed by arachnoid villi in the sagittal sinuses
- Produced in a rate of 1cc/ 3 minutes
- In communicating hydrocephalus the obstruction should be before Foramens of luschka and magendie*

20) What is GCS for pt. that Responds to verbal command, Says words, localizes pain on one side

- 11*
- 12
- 10

21) Patient had head trauma, he lost his consciousness and then woke up in ER he had left pupil dilatation, your Dx?!

- Left subdural
- Left epidural*
- Right subdural
- Right epidural

Neurology:

22) Not True about Alzheimer?

- 60% familial *
- - m.c cause of dementia

23) Wrong about Sydnhams chore?

- Age 50-60*
- Rheumatic fever
- Associated with psychiatric symptoms
- Group A beta hemolytic streptococcus

24) Not in absence seizure?

- Postictal*
- Multiple per day
- Cessation of activity, staring, clonic twitches
- EEG: 3 Hz spike

25) Not with normal peruser hydrocephalus?

- Dementia
- Gait disturbance
- Urinary incontinence
- Hemiplegia*

26) Not with cortical lesion?

- Dementia.
- Aphasia.
- Seizures.
- Hemiplegia*

27) Not true about TIA?

- Resolve in 24h*
- May be due to micro-emboli that temporarily block blood flow
- A warning sign of progressive cerebrovascular disease
- No signs of acute infarction on brain imaging

28) Child with abnormal head shape that's elongated with Low width in skull.

What suture is most likely to be?!

- Metopic suture
- Sagittal suture*
- Lamboid suture
- Coronal suture

29) Not true about nerve:

- Adaptability and variability of functions.
- **Has limited connection***
- Has several projection.
- The axon transmits the impulses which are generated in the neuron.

30) False about essential tremor?

- **Improve with age***
- **50% autosomal recessive***
- Mild parkinsonian features
- Improves with alcohol intake

31) Not seen in frontal syndrome:

- Behavioral disturbances
- Antisocial behavior
- **Receptive aphasia***
- Focal motor seizure

32) Wrong about MS:

- **Peripheral nerve affected**

33) Wrong about secondary RRMS:

- **Many don't have Cognitive function involved**

34) Not from DDx for epilepsy:

- **Postural vertigo* (the DDx. Is Paroxysmal Vertigo not postural)**
- drug related "blackouts"
- Psychiatric (nonepileptic seizures)
- Transient global amnesia

35) Not from risk factors for epilepsy:

- Family history
- **The age***
- Birth history and complications, cognitive and motor development
- Past history of CNS infections

36) Not from criteria to choose drugs in epilepsy:

- **Not important to know epilepsy type**

37) Not red flag of headache??

- **No Fever or deficit**

38) Wrong about CVA??

- **Hemorrhage stroke 85%**

39) Not associated with NPH (Normal Pressure Hydrocephalus)

- paraplegia*
- Incontinence
- Dementia
- Normal pressure with hydrocephalus

40) Wrong about Tourette's syndrome?

- Psychiatric manifestations
- Motor before vocal tics
- Adulthood *
- Depression and mood disorders

41) Not a Cognitive dysfunction in Parkinson?

- Psychosis
- Sleep disturbances.
- Fatigue
- No Autonomic dysfunction*

“A Strong, Positive, Self-Image is the best possible preparation for success
in life ”

Collected by: Ahmad Al-Masri

Good Luck