NEUROSURGERY UNIT-1(B3)

- Epidural hematoma
- Subdual hematoma
- Cerebellar tests
- UMN and LMN difference
- Hydrocephalus
- Spinal injuries
- shock
- One station one different regions (brocas, wernikes, orbital lesions)
- One on examination of cranial nerves

5 BcQs.

- Mostly meningeocele
- myelomeningocele
- One GCS related

Ward test Neurosurgery Unit-II

01- A 60 years old male presented with sudden Headache, vomiting, vertigo & ataxia. He is known Case of Hypertension. CT Scan Brain reveal Intracranial bleed.

- The most Likely Location of bleed is
- A) Basal ganglion
- B) Frontal Lobe
- C) Brain Stem.
- D) Cerebellum
- E) Temporal Lobe
- 2- A 30 years old male presented in E/R with H/O RTA. He has H/o of Loss of Consciousness Followed by regain Conscious Level. NOW his GCS is 15/15. After 3 hours patient.

 Decorates, his GCS becomes 12/15 & his Left pupils was dilated. He is most

- Likely Suffering from.
- A) Concussion
- B) Contusion
- C) Extradural hematoma
- D) Intra Cerebral bleedE) Subdural hematoma
- 3- A 5 years old Child presented with H/O Headache, vomiting, Ataxia MRI
- Brain reveal Post fossa tumor the most likely diagnosis is
- A) Astrocytoma
- C) Hemangioma

B) Medulloblastoma

- D) Meningioma
- E) Glioblastoma.
- 4- A13 years old boy presented to E/R with H/o Fall from. 12ft height. You are asked to assess his GCS. On painful Stimuli.

i) He opens Eyes, ii) withdrawal response, iii) Grunting Sounds His GCS will be A).5 B).6 C) 7 D).8 E) 9 5- A 25 years old Lady presented to E/ R with H/O RTA. His GCS or arrival is 6/15. CT Scan Brain reveal Crescentic Shaped Hematoma. The most Likely diagnosis is A) Extradural hematoma... B) Subdural hematoma C) Diffuse axonal injury. D) Contusion E) Laceration 6- A baby delivered by C/Sec with H/O Leaking myelomeningocele The goal of early Surgery is to A) Improved Neurology

B) Prevent to develop Later **Hydrocephalus** C) Prevent infections D) Improved Sphincter function. E) prevent Foot deformity. 7- The hot sign of raised intracrand Pressure is A) Headache **B) Visual Loss** C) Allered Conscious Level D) Hypertension E) Papilloedema 8- A 30y Young male presented with progressive walking difficulty O/E his Power is Grade 3/5, Reflexes exaggerated, Planters bilateral upgoing. His upper limbs are normal. The most likely Localization of Lesion is A) Brain

C)Dorsal Spine D)Lumber Spine E) Sacrum 9- A baby delivered with enlarged **Head CT Scan Brain reveal Hydrocephalus:** The most Common Cause is A) Aqueductal Stenosis B) Foramen Monro block. C) Foramen megendie block. D) Foramen Luschka block. E) Subarachnoid Space maldevelopment 10- A 40 years old Female presented in E/R with H/O Assault Head injury CT Scan brain reveals brain oedema To reduce intracranial pressure, mannitol was advised. Mannitol act as a.

B) Cervical Spine

A) Loop diuretic

- D) Carbonic anhydrase inhibitorE) Choroid plexus suppressor
 - *OSPE*

B) potassium Sparing diuretic.

C) Osmotic Diuretic

- 1. What Neurological Exam you performed in head injury Patient.
- 2. Signs of Uncus herniation with Reasons.
- 3. A 10 years old boy presented in E/R with H/O head injury with CSF Rhinnorhoea.
- Pt was admitted & managed in ward.
- His CSF leakage Stopped
- Pt Discharged on his foot
 Afer 3 months Pt presented mith fever severe headache, vomiting Altered
 - Conscious Level meninaltis was suspected.
 - Pt admitted in medical ward his Temp

Subsided but headache persist Ct scan planned & Neurosurgeon taken on board. What could be the most likely pathology.

4. A well Literate mother brought his

baby as a case of congenital
hydrocephalus. Vp Shant planned.
During her stay in ward she Obserned
The Complications of surgery shant
she denied the shant surgery for her
baby.
What is alternate method of treating

5. write down the ferer difference between upper motor & Lower motor neuron Lession

hydrocephalin

6. write down the name of 3 Common posterior fossa Paediatric tumor

7. Difference b/w complete & Incomplete Spinal injury

8. A 20 years old male presented with headach fits & altered conscious level he has no history of trauma CT scan brain nevel temporal lobe bleed.

What is your diagnosis

9. Components of GCS with descriptor How you Classifes head injury on basis of crcs

10. write down the signs & Symptoms of raised Intracranial pressine.