

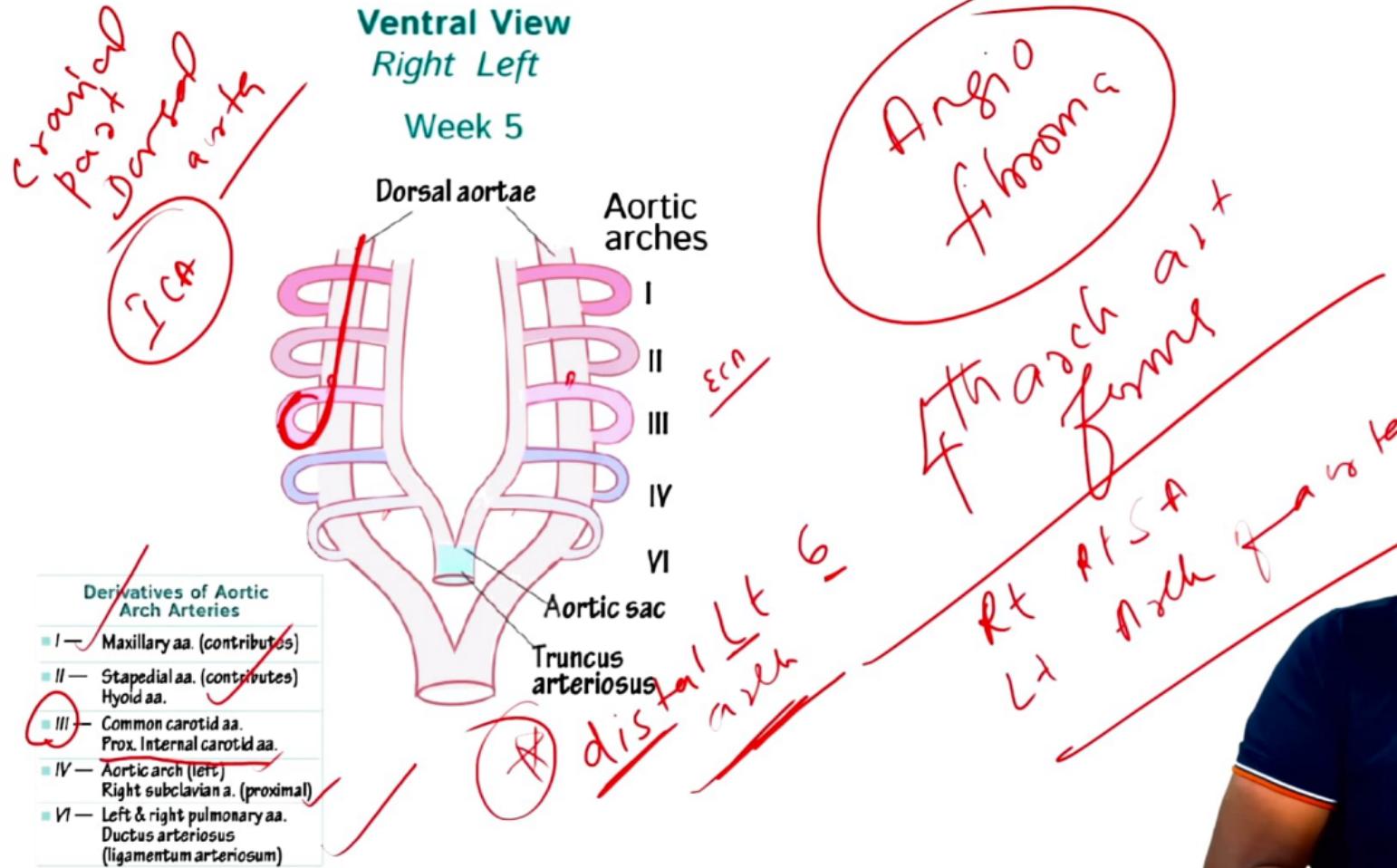
**Q. Incorrect match about the pharyngeal arch artery derivative?**

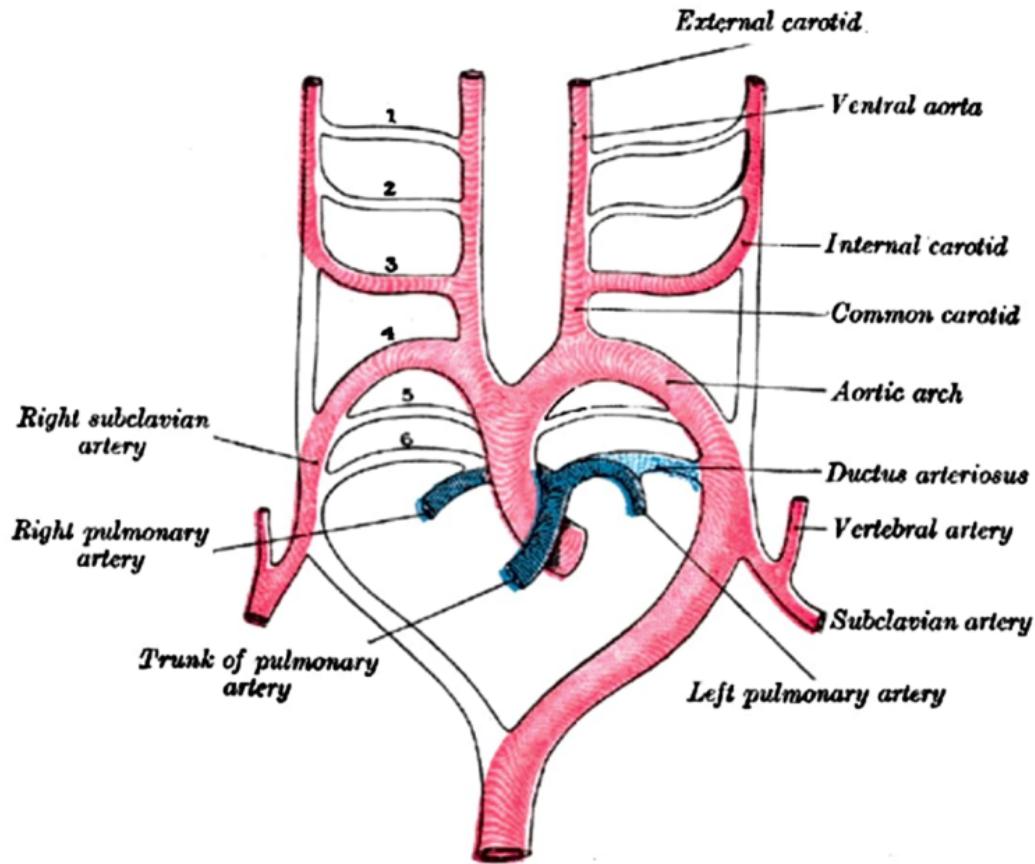
1. 1<sup>st</sup> arch – maxillary artery
2. 2<sup>nd</sup> arch – hyoid and stapedial artery
3. 3<sup>rd</sup> arch – common carotid & proximal part of ICA
4. 4<sup>TH</sup> arch – right subclavian artery
5. 6<sup>th</sup> arch – arch of aorta on the left side

- A. 4 & 5
- B. 3
- C. 5
- D. 2 & 3



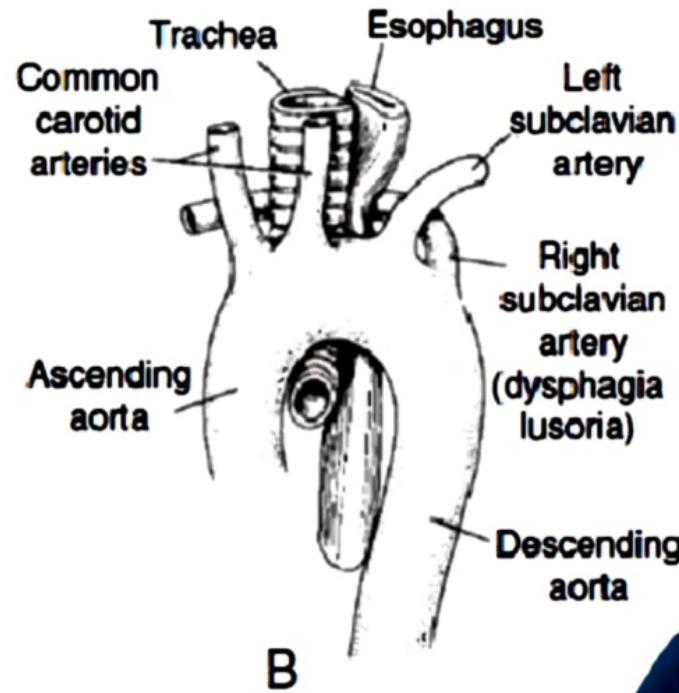
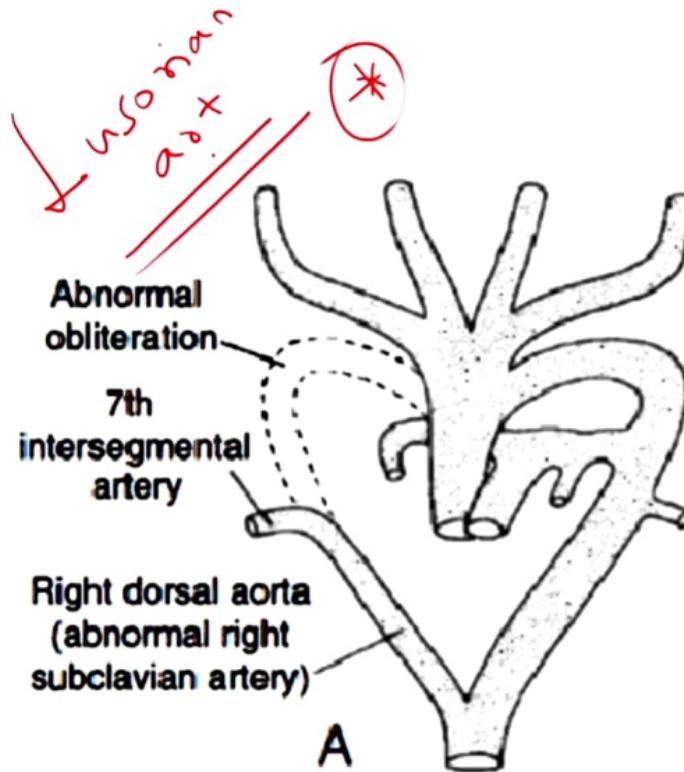
# MARROW





RT sub a<sup>rt</sup>  
RT 4 a<sup>rt</sup>  
a<sup>rt</sup>





Q. Incorrect match about the pharyngeal arch artery derivative?

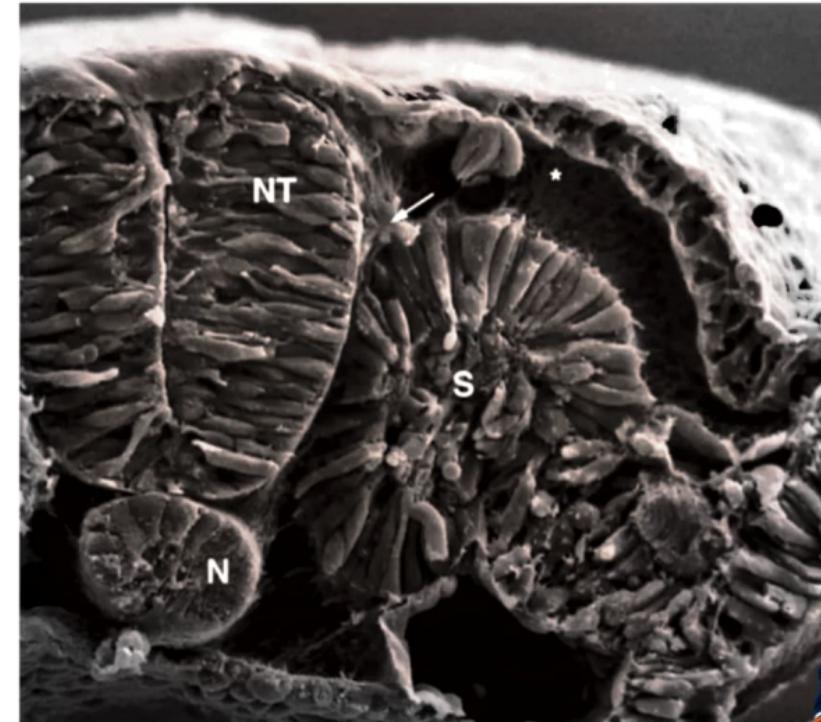
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- A. 4 & 5
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- C. 5
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Q. Which of the following is/are derived from the marked structure

- 1 - Odontoblasts,
- 2 - Sympathetic chain,
- 3 - Melanocytes,
- 4 - Nephrogenic cord
- 5 - Bulbus cordis
- 6 - Conotruncal septum

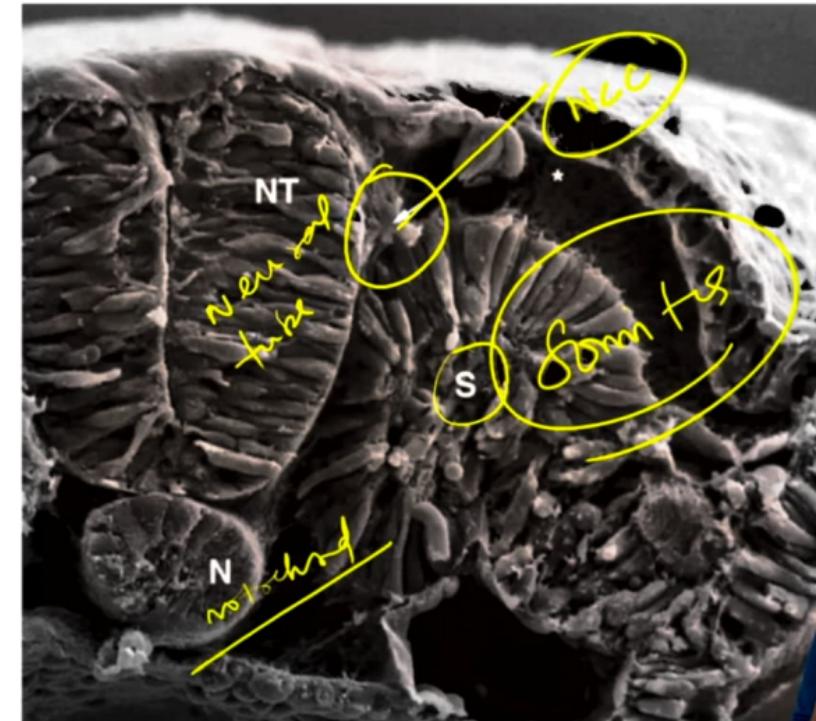
- A. 1,3,5,6
- B. 2,3,4,6
- C. 1,2,3,6
- D. 1,2,3,4



Q. Which of the following is/are derived from the marked structure

- 1 - Odontoblasts,
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- C. 1,2,3,6
- D. 1,2,3,4



## **Summary of the neural crest-derived cell types in the vertebrate embr**

### **Neural crest derivatives**

#### **Neuronal cells**

Sensory ganglia of cranial nerves V, VII, IX, X

Spinal ganglia

Ganglion cells of the autonomic nervous system

*Ganglions*

#### **Supportive cells of the nervous system**

Glial cells of the peripheral ganglia

Schwann cells of peripheral nerves

Meninges of the anterior brain

Pigment cells – (except for pigmented retina)

#### **Endocrine and paraendocrine cells**

Adrenomedullary cells

Calcitonin-producing cells

Type I cells of the carotid body

#### **Mesectodermal derivatives – (cephalic neural crest)**

Visceral and facial skeleton

Cranial vault

Walls of large arteries derived from the aortic arches

Connective tissue of thymus and parathyroid glands

Dermis of neck and facial regions

*pia arach  
melanocyte*



MARROW

## Derivatives of neural crest cells

4 Gangs PAS 2 Blasts

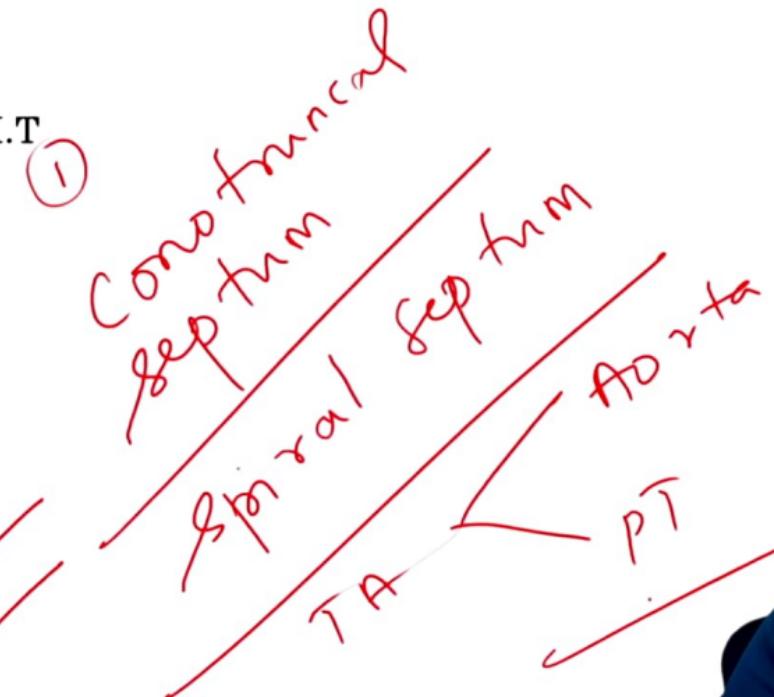
- GANGlia:
- Parasympathetic of G.I.T  
andd Pelvis
  - Sympathetic ( Pre  
aortic )
  - Dorsal root ganglia
  - Sensory of cranial  
nerves 5,7,8,9,10

Pia mater

Arachnoid mater

Schwann cells

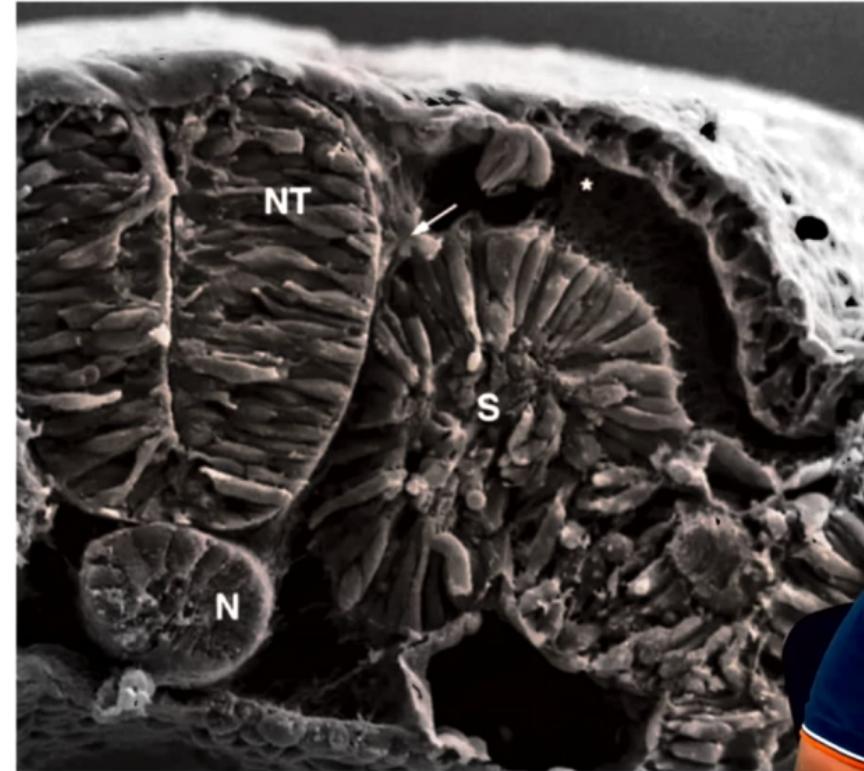
- BLASTS. :
- MelanoBLASTS
  - OdontoBLASTS



Q. Which of the following is/are derived from the marked structure

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- 3 - Melanocytes,
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- 5 - Bulbus cordis**
- 6 - Conotruncal septum**

- A. 1,3,~~5,6~~
- B. 2,3,~~4,6~~
- C. 1,2,3,6**
- D. 1,2,3,~~4~~

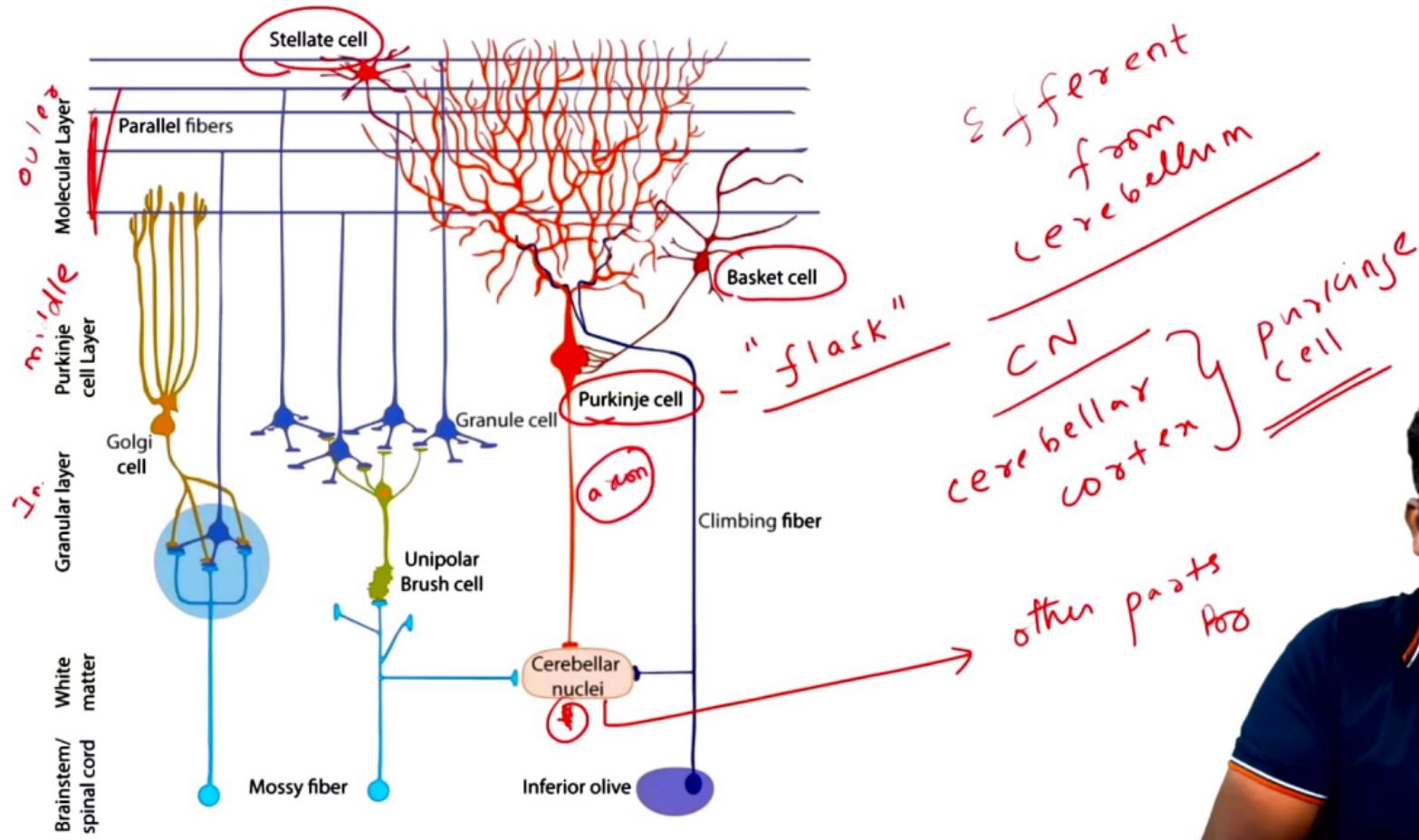


**Q. What are the cells present in molecular layer of cerebellum**

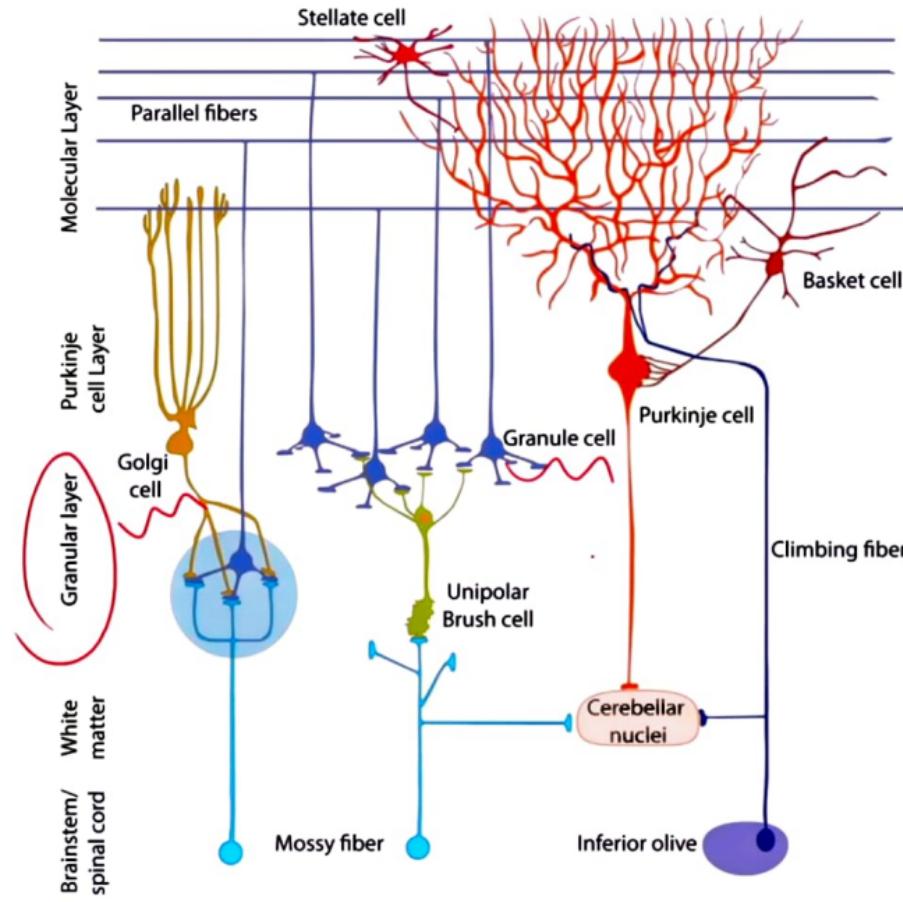
- 1. Stellate cells.**
  - 2. Basket cells**
  - 3. Purkinje cells.**
  - 4. Granular cells**
- A. 1,2
- B. 1,3
- C. 2,4
- D. 2,3



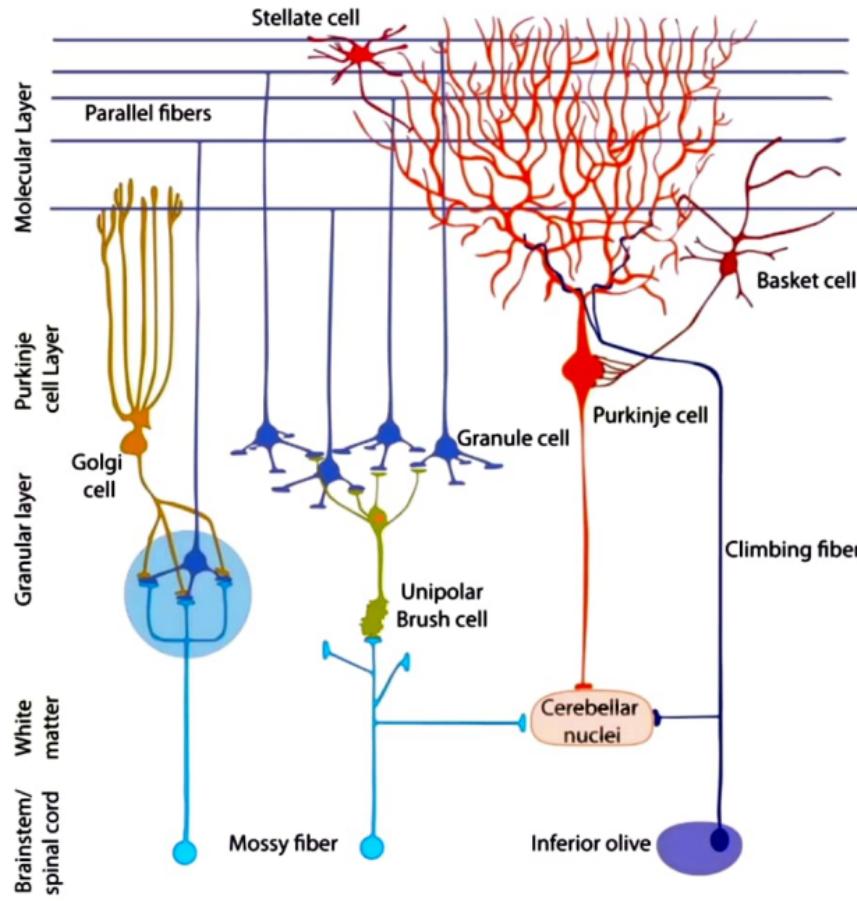
# MARROW

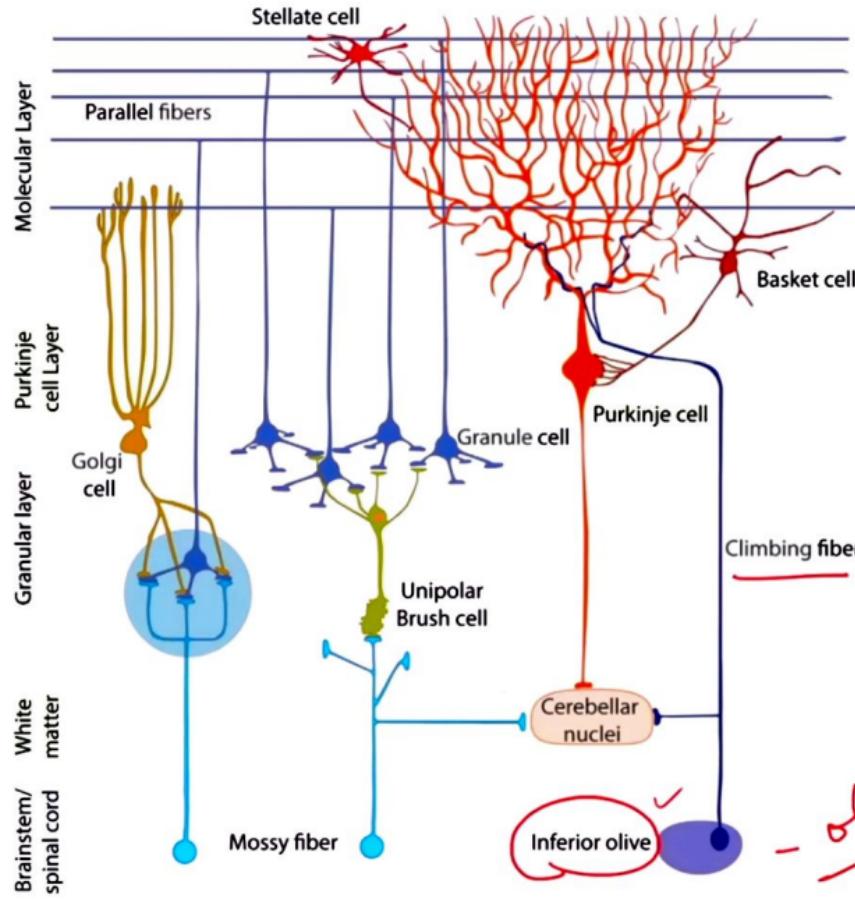


# MARROW



# MARROW



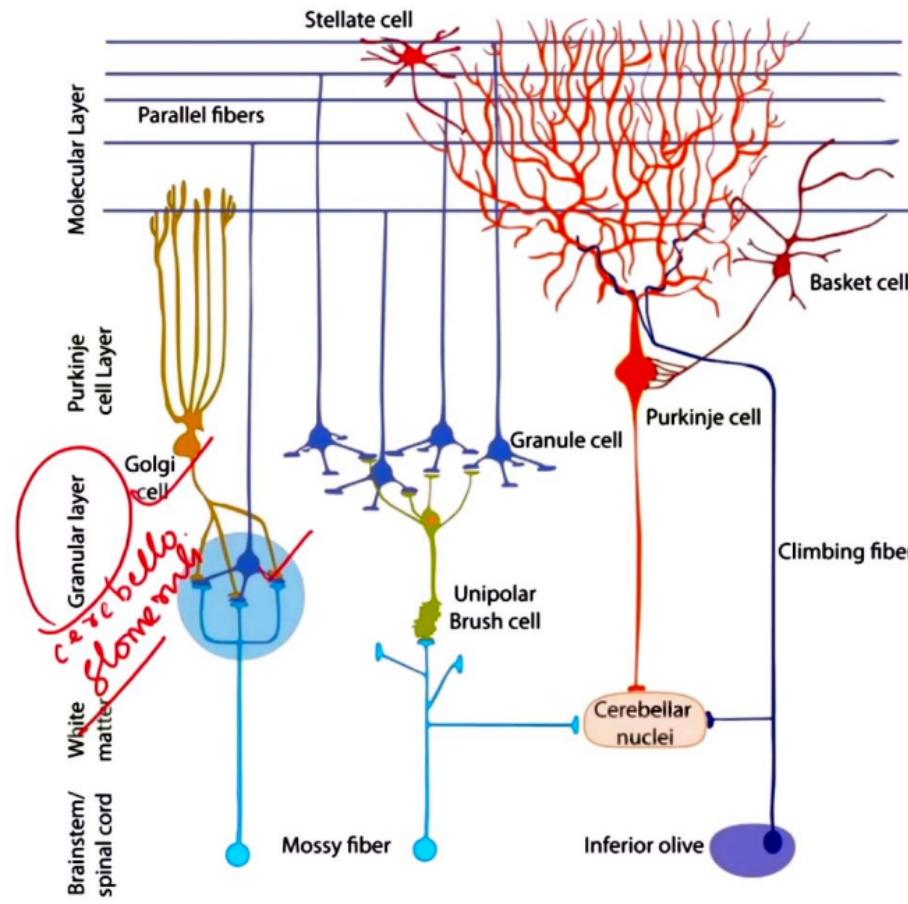


(\*)  
ION - cf  
I only  
use PC

- olive - medulla  
2015



# MARROW



climbing  
+  
Golgi  
+  
Granule



Q. What are the cells present in molecular layer of cerebellum

- 1. Stellate cells✓
- 2. Basket cells✓
- 3. Purkinje cells+
- 4. Granular cells+

A. 1,2

B. 1,3

C. 2,4

D. 2,3

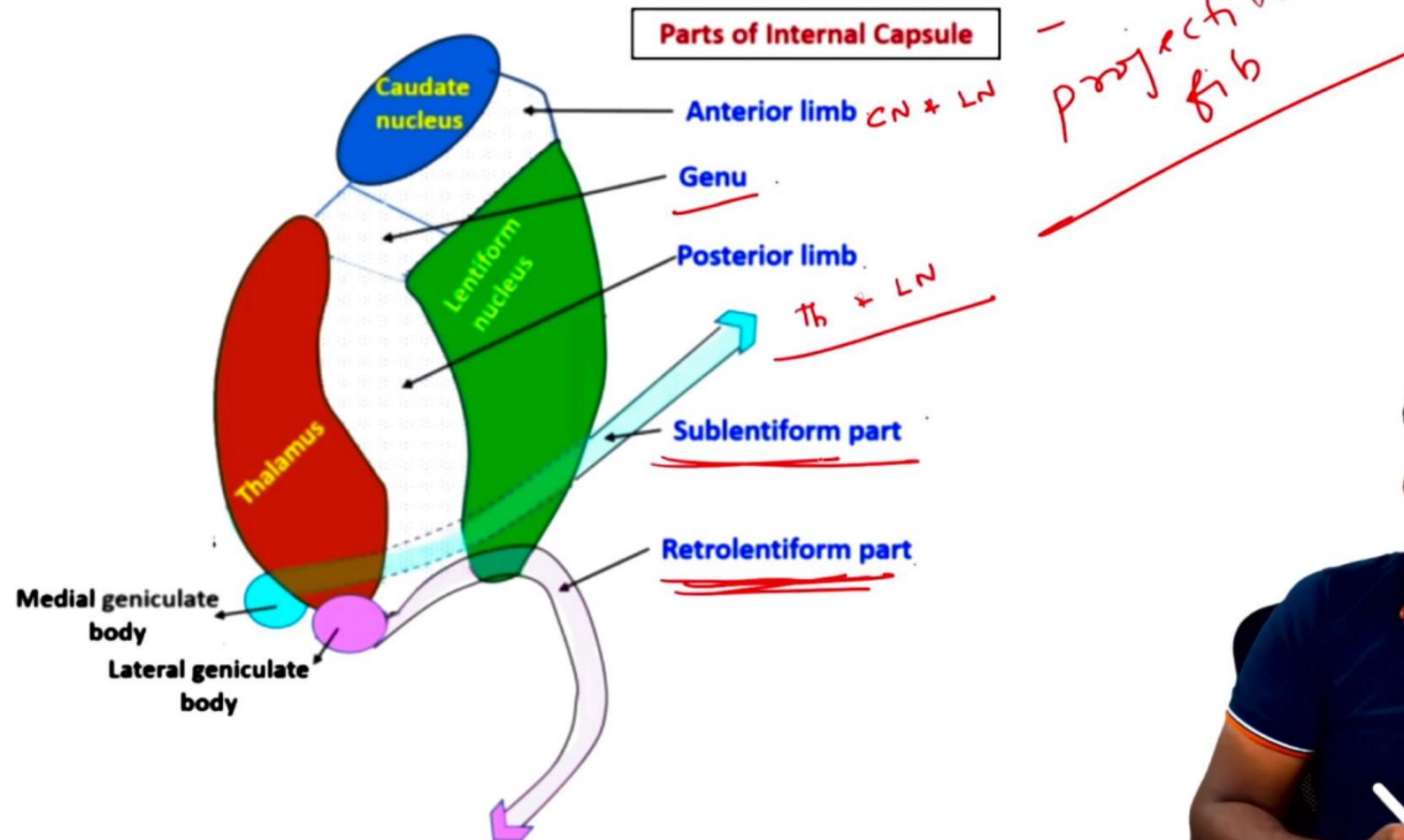


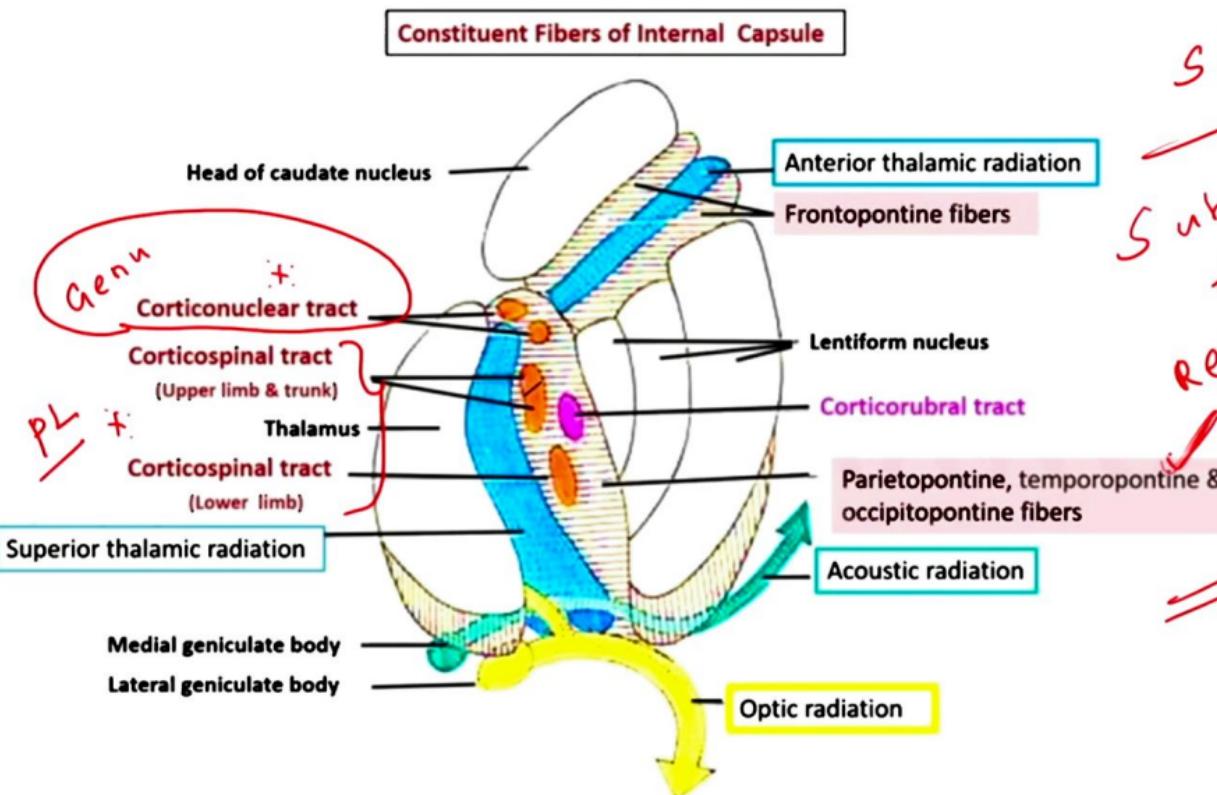
**Q. What all statements are correct about the internal capsule?**

- 1. Charcot's artery supplies the posterior limb**
- 2. Retro lenticular part of the internal capsule contains optic radiation**
- 3. Anterior limb of the capsule contains corticospinal tract fibres of the upper limb and face**
- 4. Internal capsule has projection fibres**

- A. 1,3,4
- B. 2,3,4
- C. 1,2,4
- D. 1,2,3





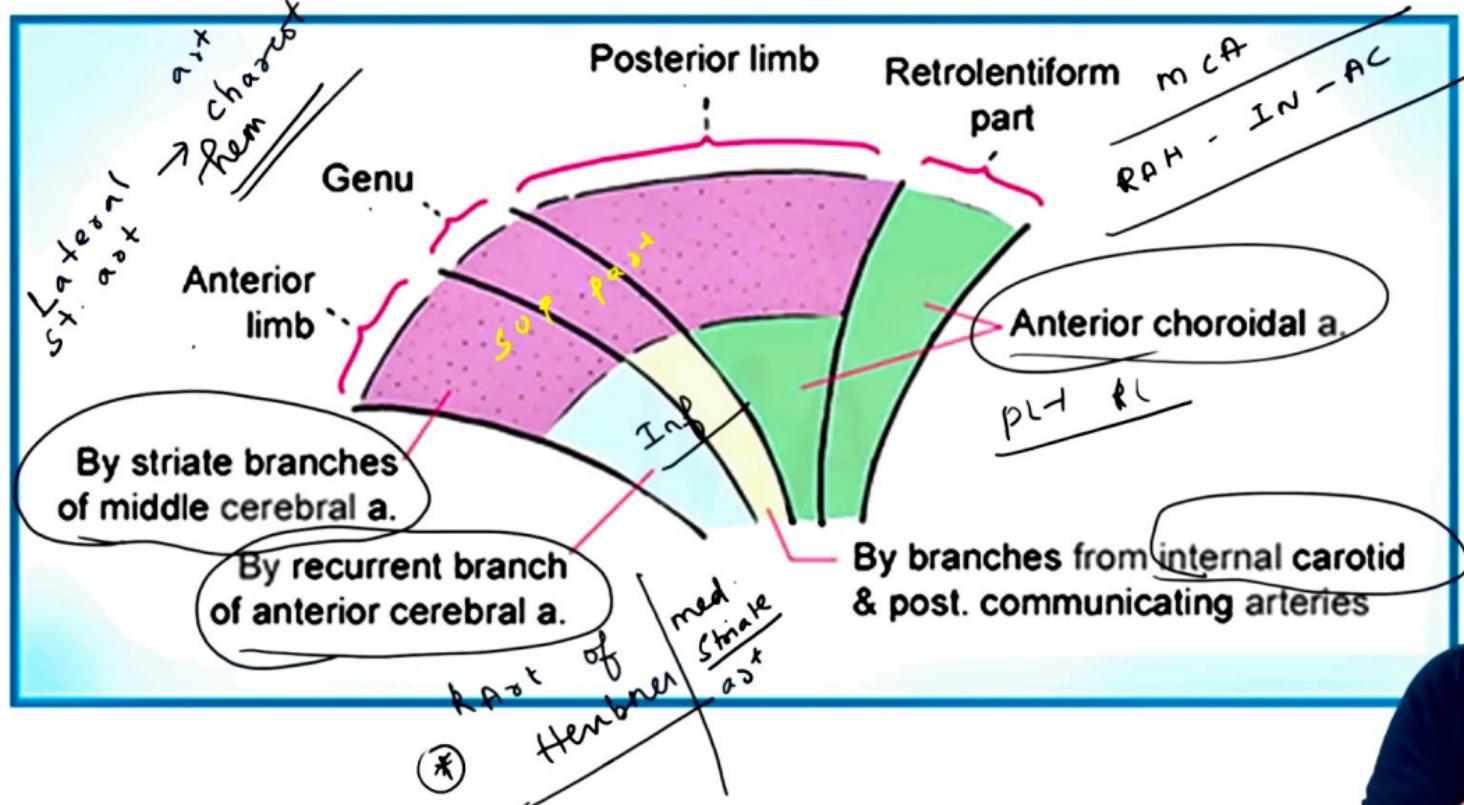


S A R D J A

Sub Lent - And Rad

retro Lent - OPTIC  
radiation





Q. What all statements are correct about the internal capsule?

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2. Retro lenticular part of the internal capsule contains optic radiation ✓
3. Anterior limb of the capsule contains corticospinal tract fibres of the upper limb and face ✓
4. Internal capsule has projection fibres ✓

A. ~~1,3,4~~

B. ~~2,3,4~~

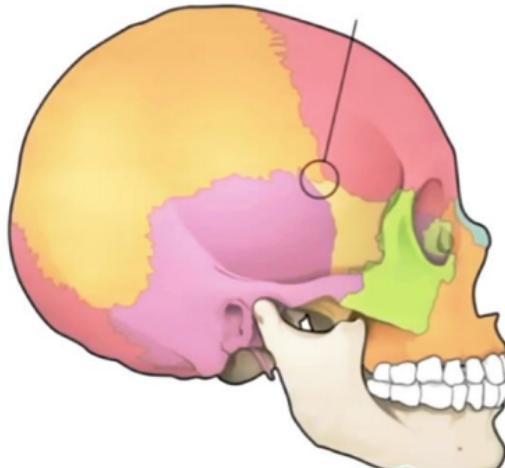
C. 1,2,4

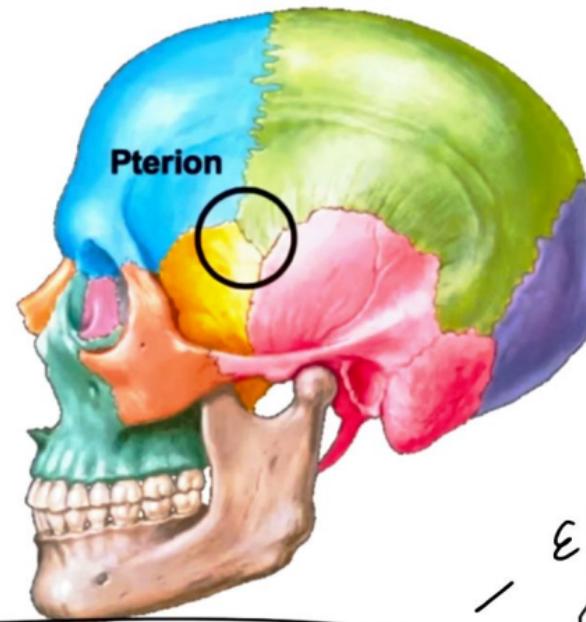
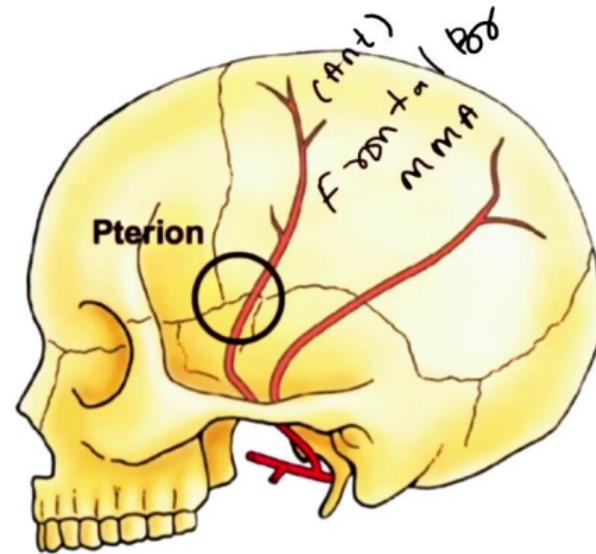
D. ~~1,2,3~~



**Q. Not True about the marked structure**

- A. It is the meeting point of parietal, temporal, frontal and sphenoid bone
- B. Accessory meningeal artery lies under this
- C. Blow to the lateral side of the face injures the marked structure
- D. It corresponds to site of anterolateral fontanelle of Fetal skull



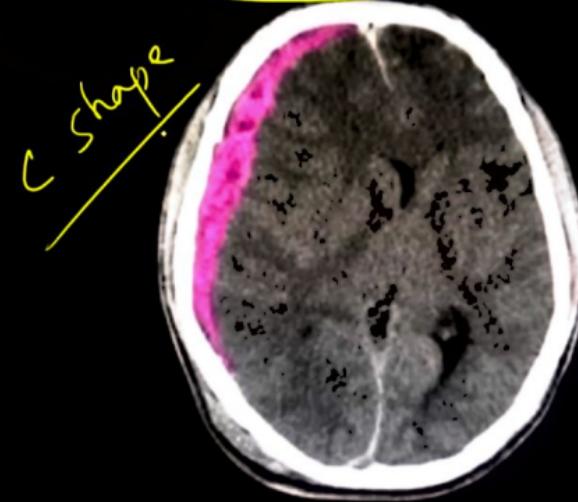


— epidural  
hem

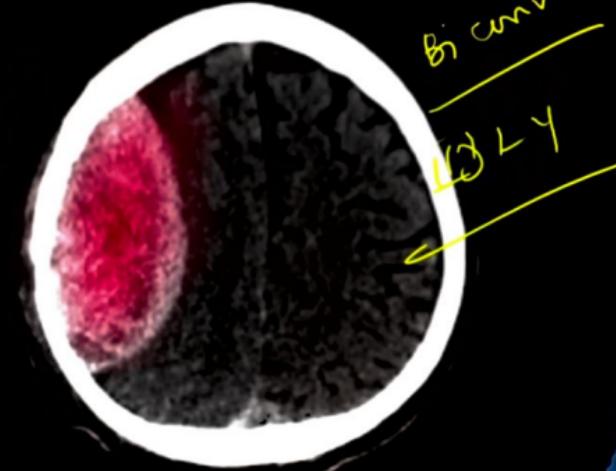
Fracture of pterion can be especially dangerous due to potential laceration of a branch of the middle meningeal artery



Subdural

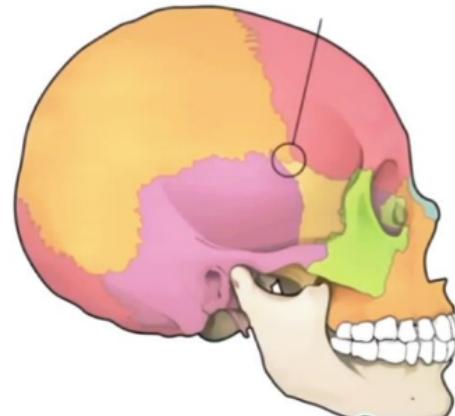


Epidural



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**Q. Bleeding as shown in the image is due to**

- A. Bridging veins
- B. Middle meningeal artery
- C. Lenticulo striate artery
- D. Vertebral artery



**Q. Bleeding as shown in the image is due to**

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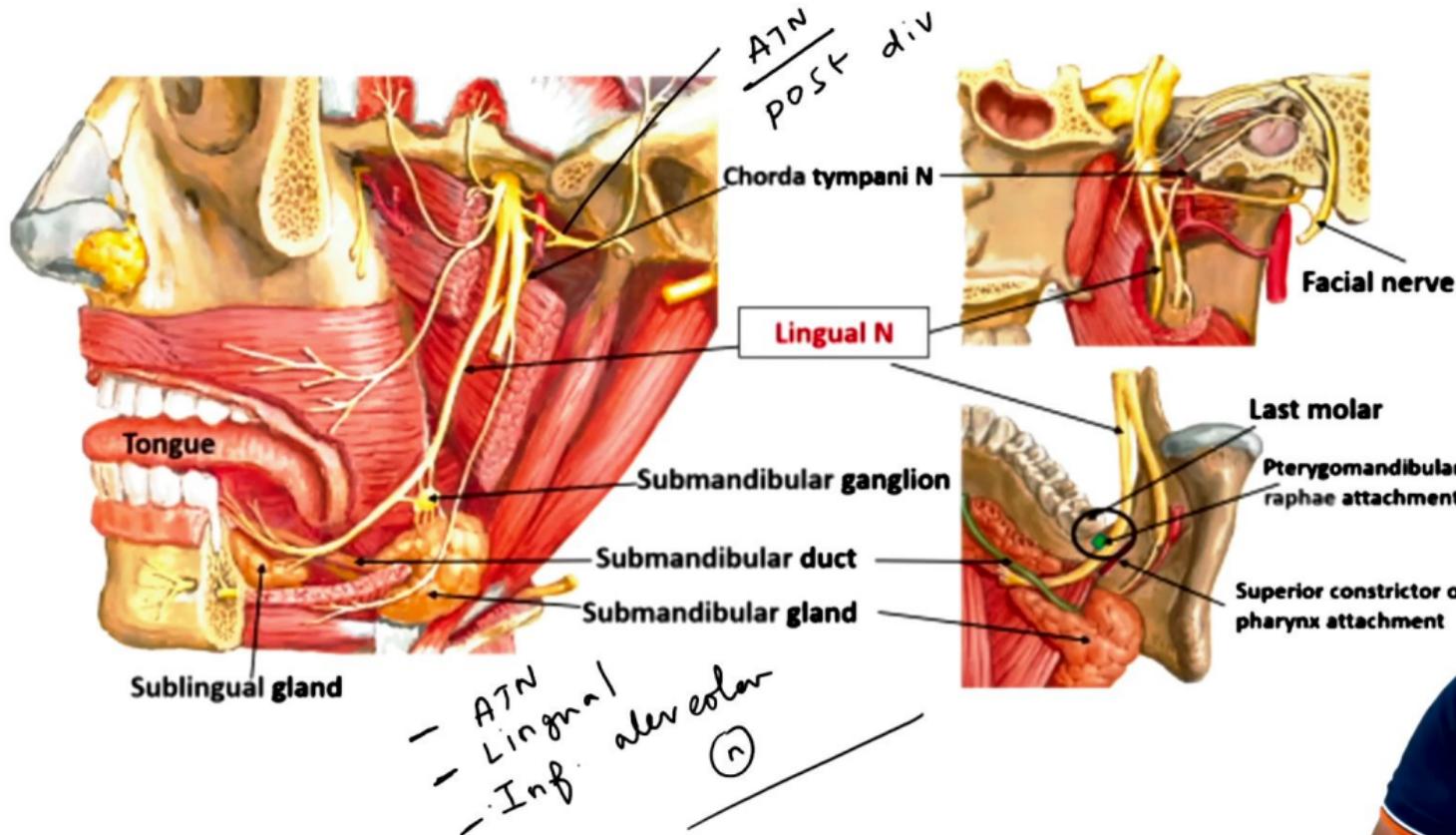


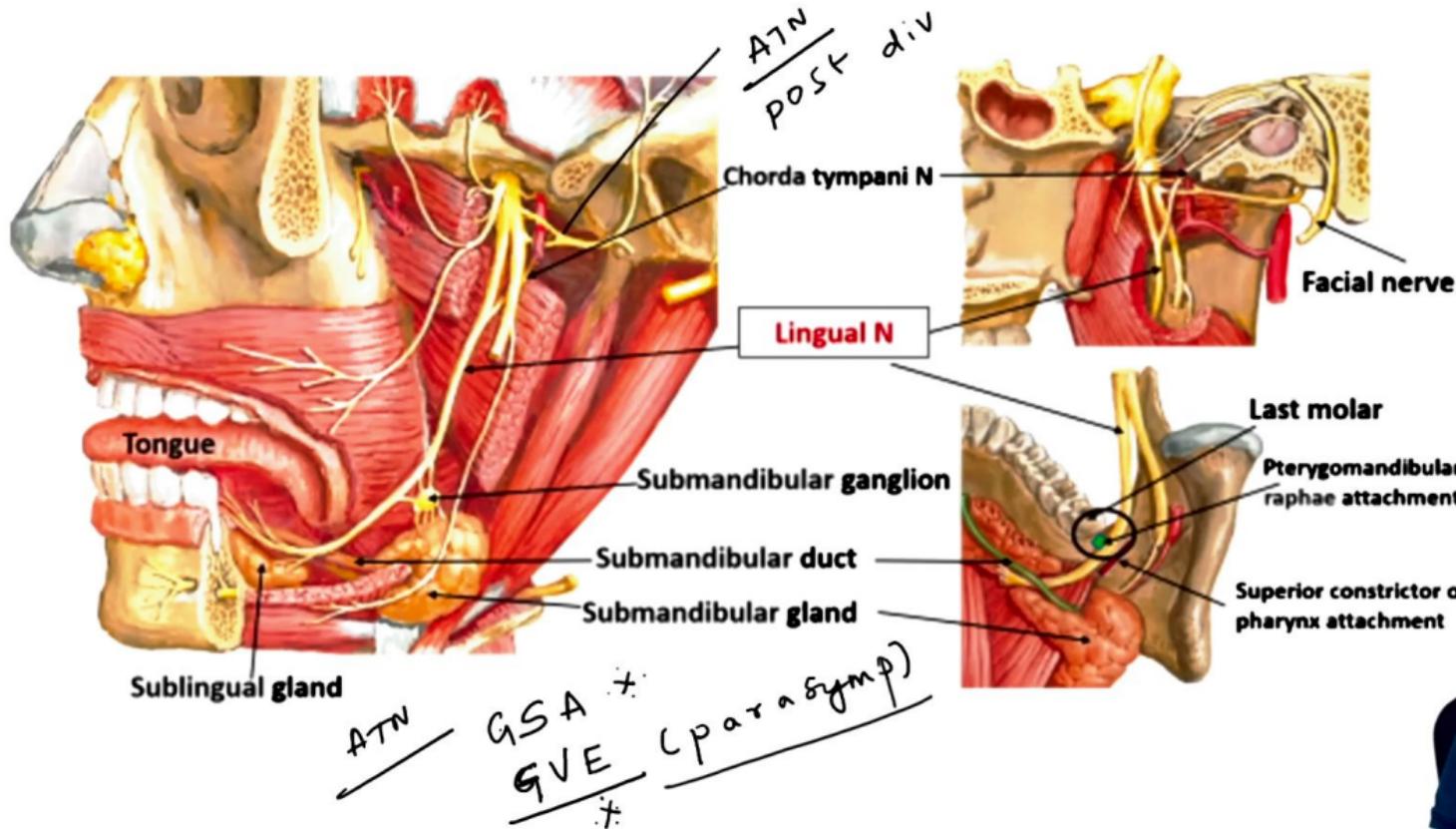
**Q. Which among the following statements is true regarding the course of mandibular nerve?**

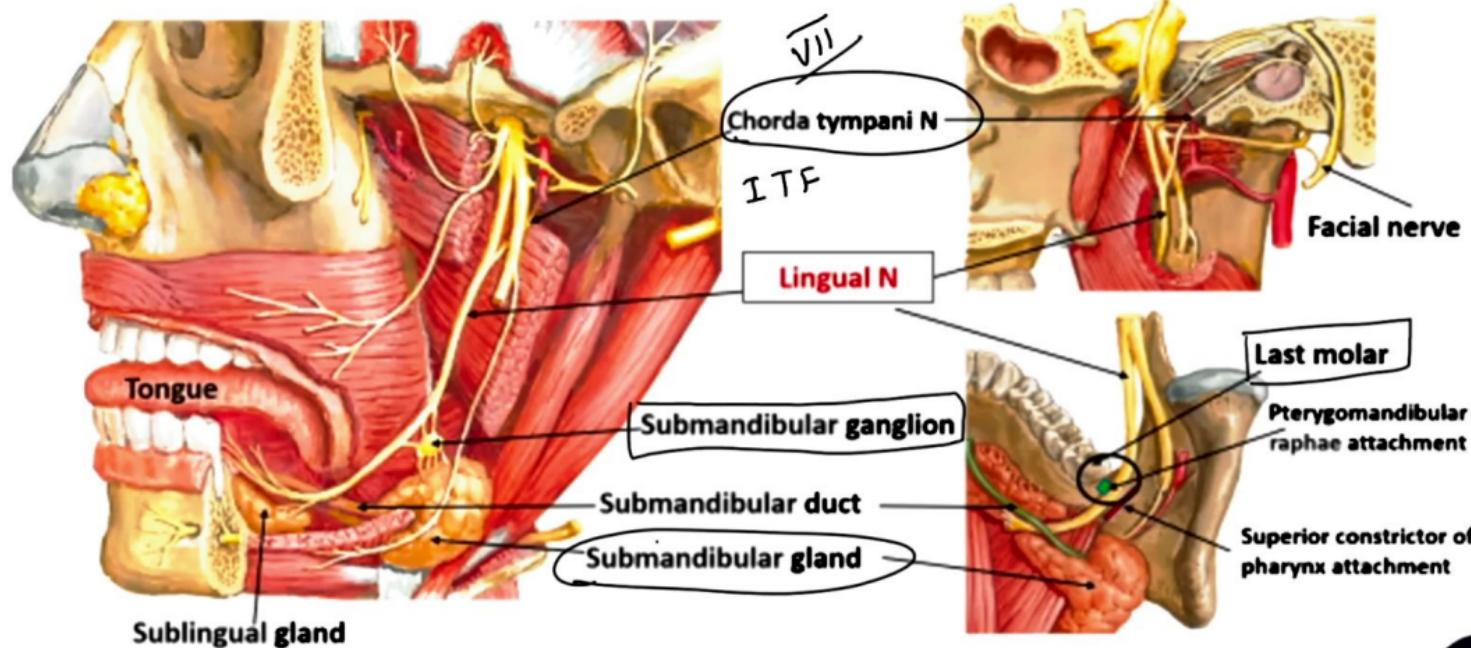
- 1. Auriculotemporal nerve emerges from behind the temporomandibular joint and is a branch from the anterior division of mandibular nerve**
- 2. Buccal branch emerges from behind the mandibular ramus is a branch from anterior division of mandibular nerve**
- 3. Lingual nerve arcs around the submandibular duct and is a branch from the posterior division of mandibular nerve**
- 4. Ophthalmic nerve arises in the middle cranial fossa and is a branch from anterior division of mandibular nerve**

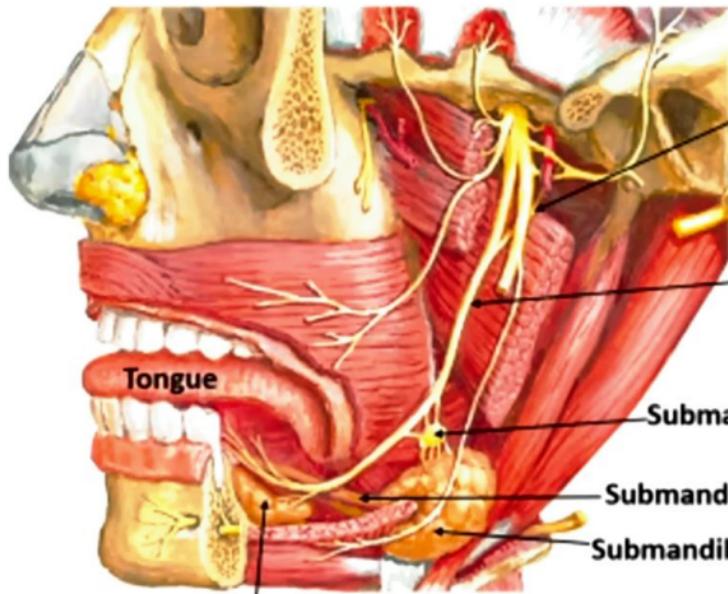
- A. 1, 2  
B. 3, 4  
C. 2, 3  
D. 1, 4











Chorda tympani N

Lingual N

Tongue

Sublingual gland

Submandibular ganglion

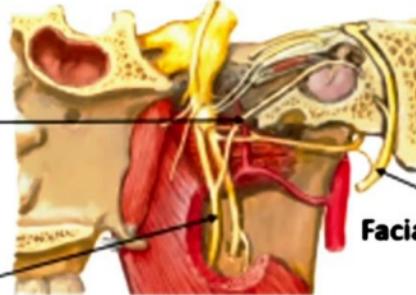
Submandibular duct

Submandibular gland

Last molar

Pterygomandibular raphae attachment

Superior constrictor of pharynx attachment

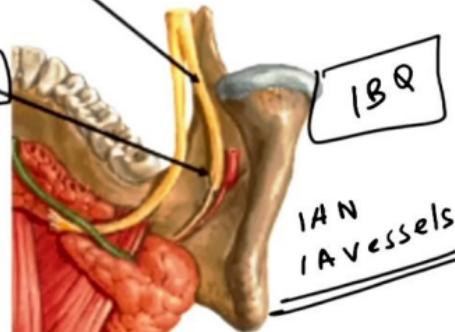
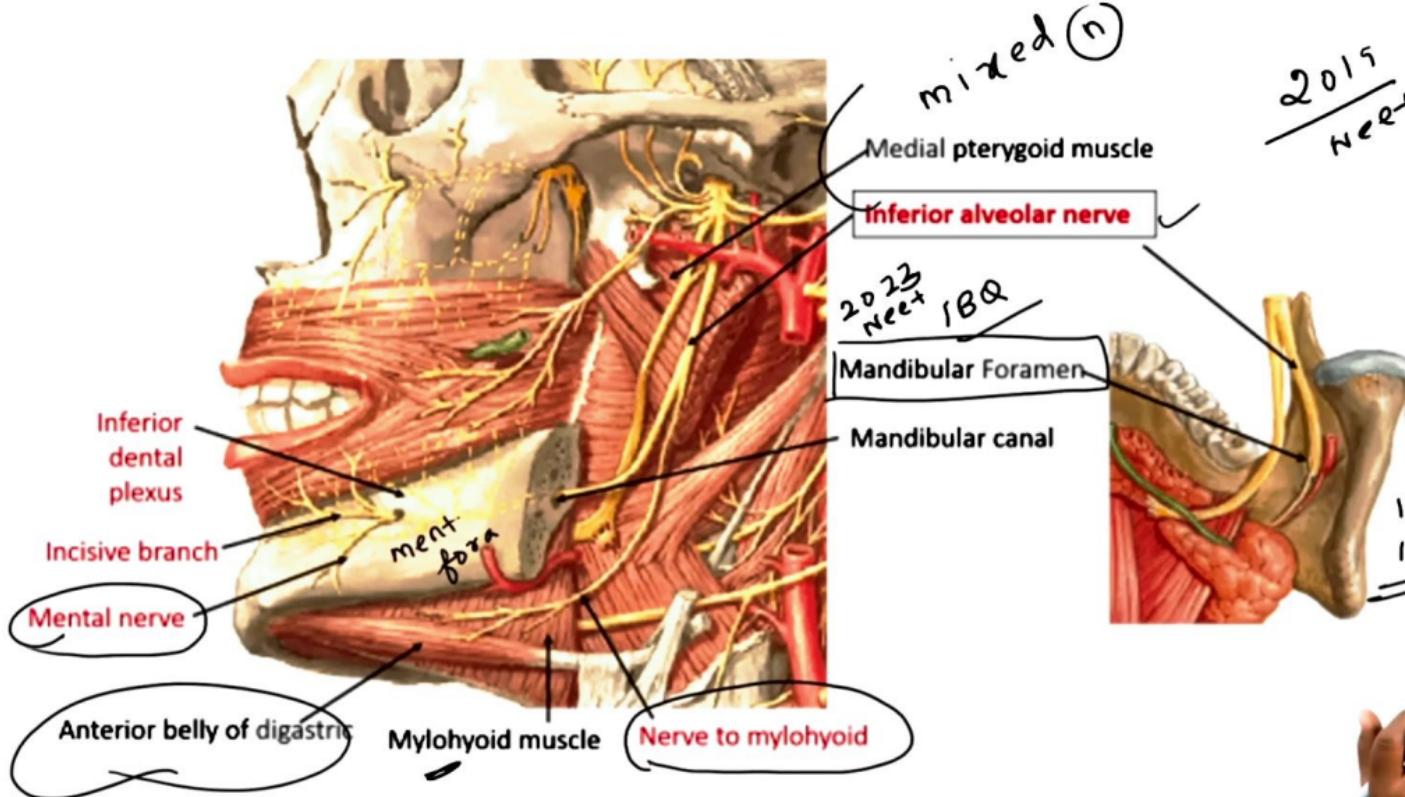


Facial nerve

v LN — crossed  
 by SM- duct  
 2021 Neop C  
 b/c NERVE  
 to be affected while removing



# MARROW



Q. Which among the following statements is true regarding the course of mandibular nerve?

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A. 1, 2

B. 3, 4

C. 2, 3

D. 1, 4

Ant div                    3<sup>rd</sup> motor |  
Sensory  
Branches



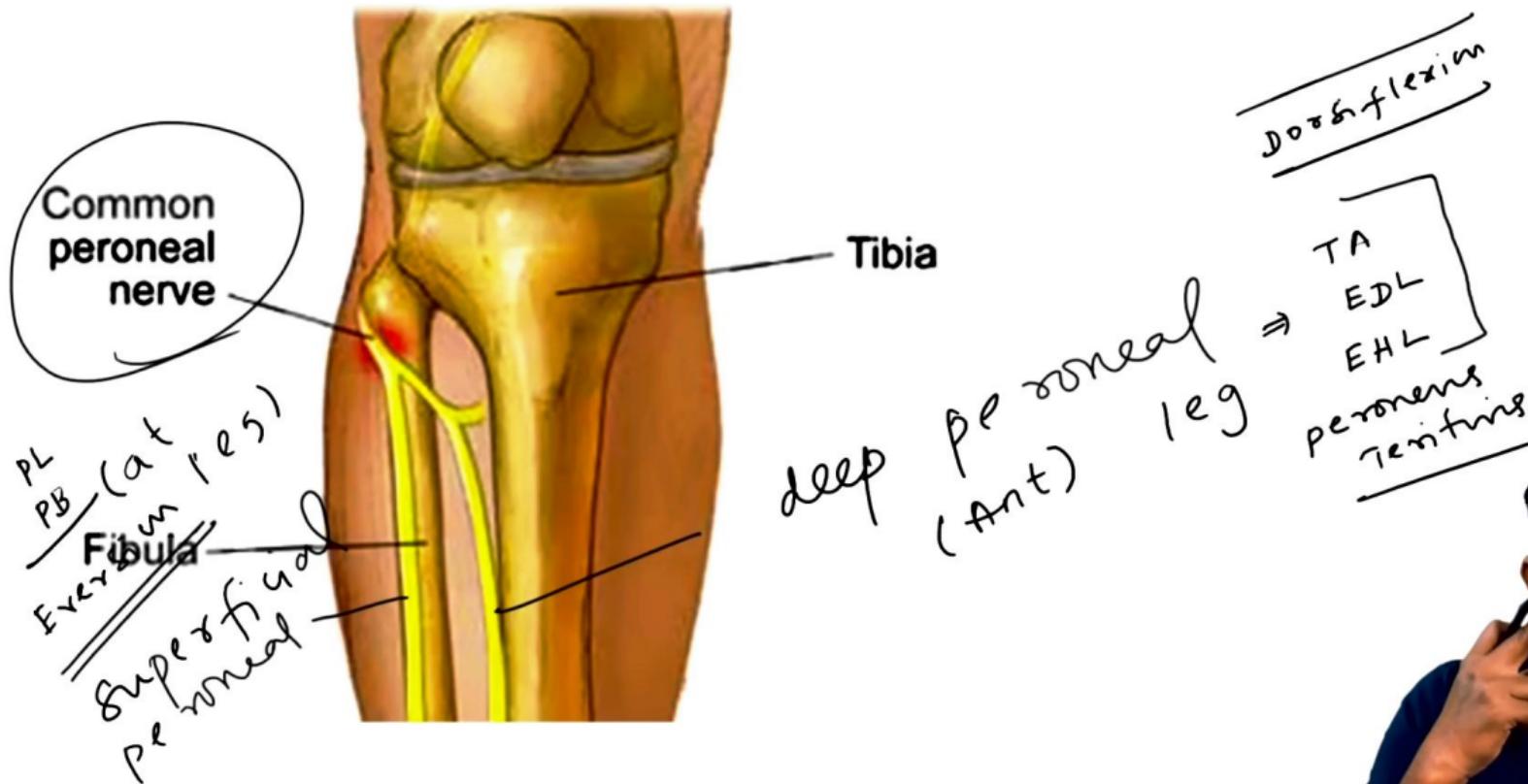
**Q. Identify the nerve passing around the marked structure**

- A. Sural nerve
- B. Common peroneal nerve
- C. Tibial nerve
- D. femoral nerve

A —



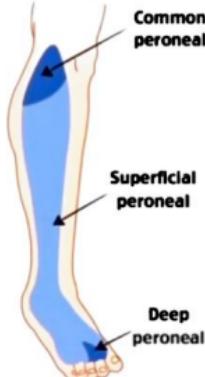
MARROW



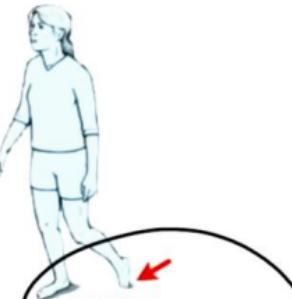
## Common Peroneal Nerve Injury



### Sensory Loss



### Motor Loss



**Loss of:**  
Foot eversion (superficial peroneal)  
Foot dorsiflexion (deep peroneal)  
Toe extension (deep peroneal)

# neck fibula  
foot drop  
dpr > CPN  
2019  
foot  
CPN  
neet

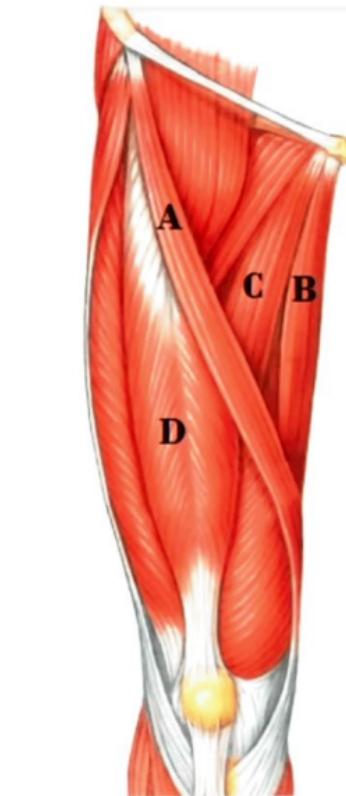


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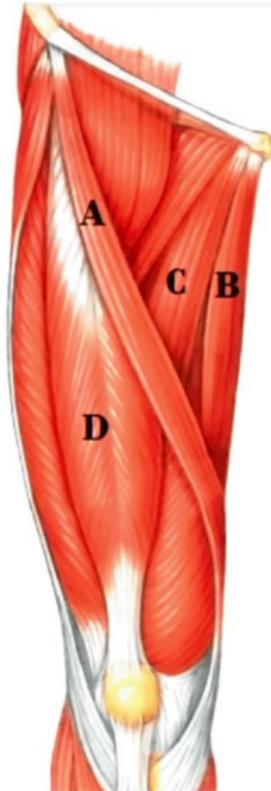


**Q. Which of the marked structure cause lateral rotation, flexion and abduction at the hip and flexion at the knee ?**



MARROW

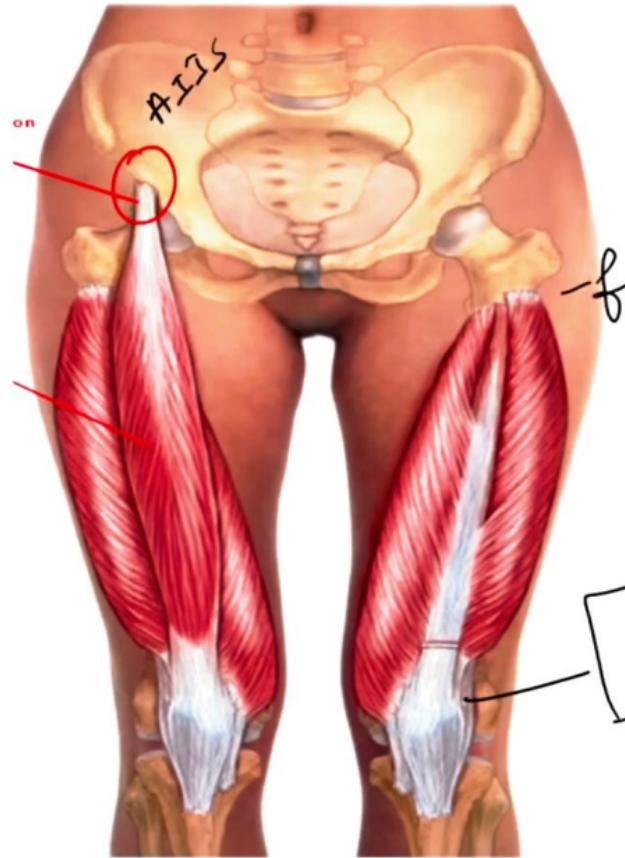
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B - Gluteus Maximus  
C - Adductor Magnus  
C - Sartorius  
A - Rectus Femoris  
D - RF



# MARROW



QF  
RF + (hip flex)  
3 vast - no act @  
hip at

locking knee

QF Tendon - Knee ext

unlocking popliteus



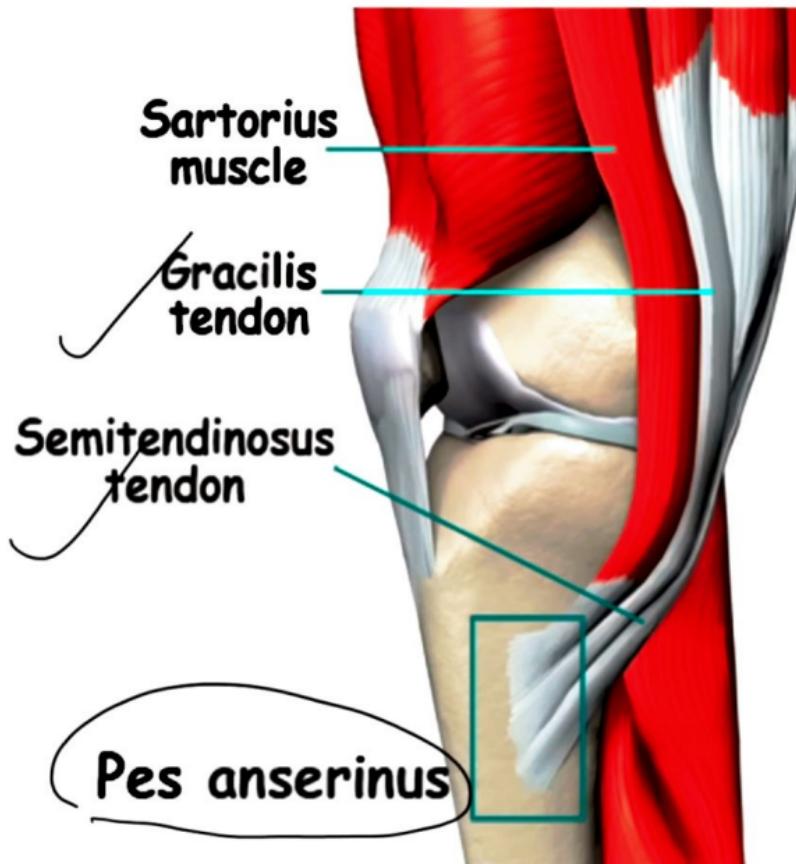


sciatis  
hip flex  
Abd  
LR

MARROW

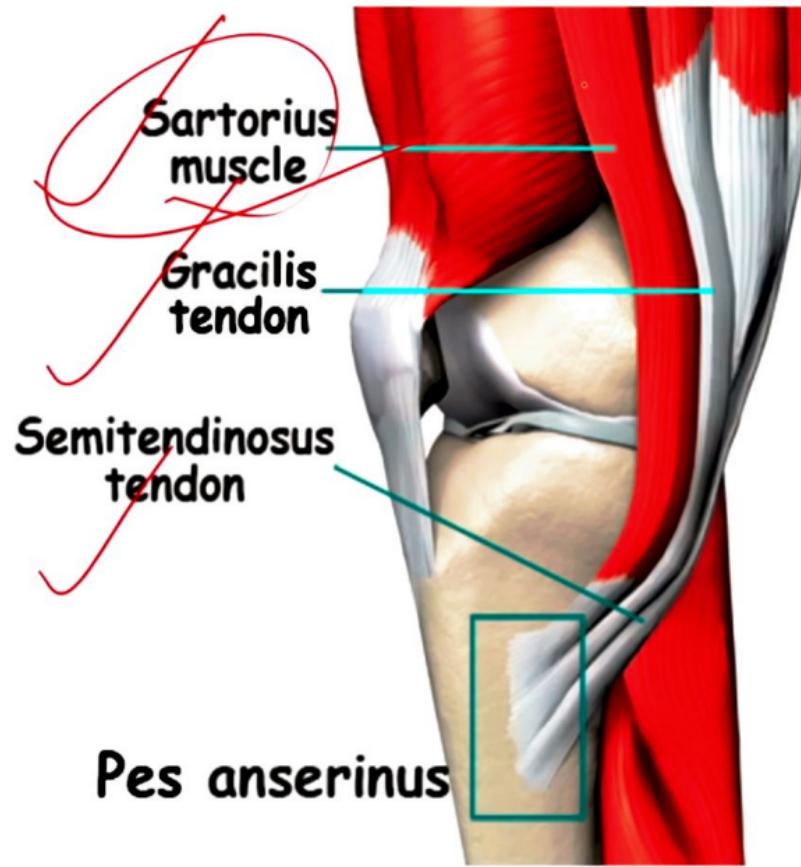


MARROW



medial sur face  
tibia





Any ropes

O - Hip

I - Tibia

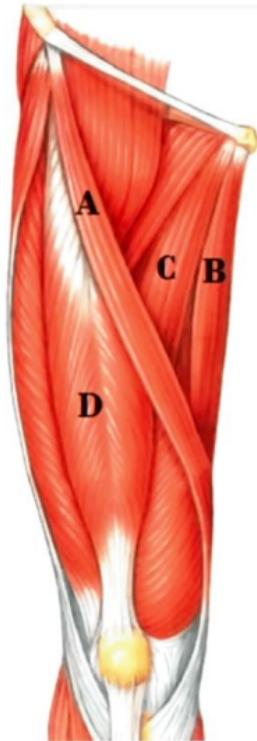
medial rot knee

knee + flex

MARROW



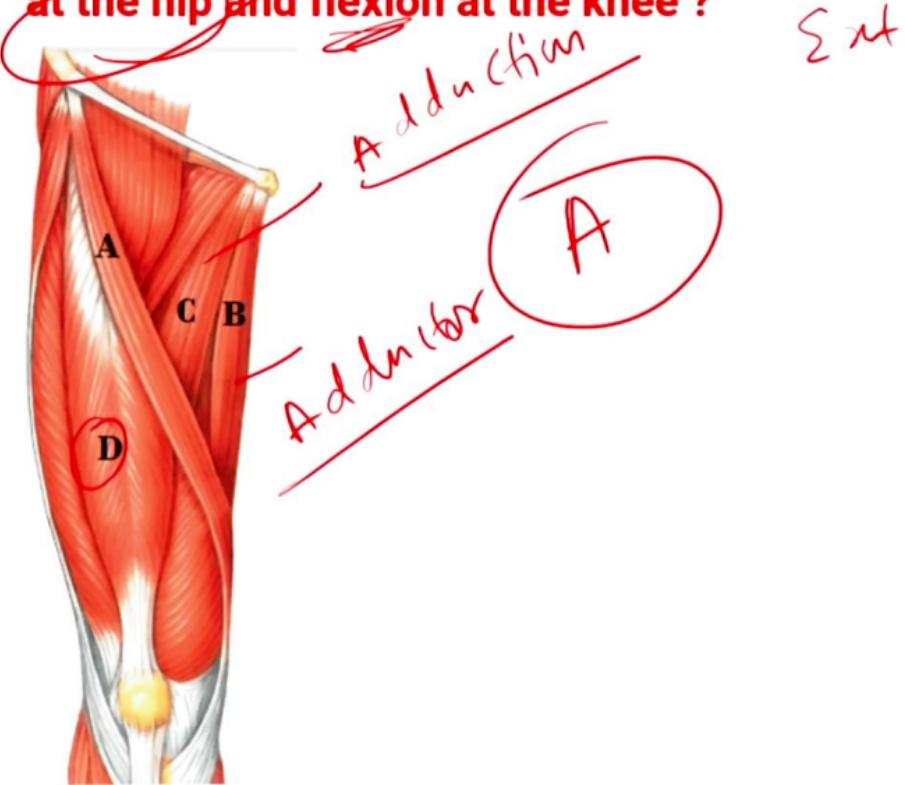
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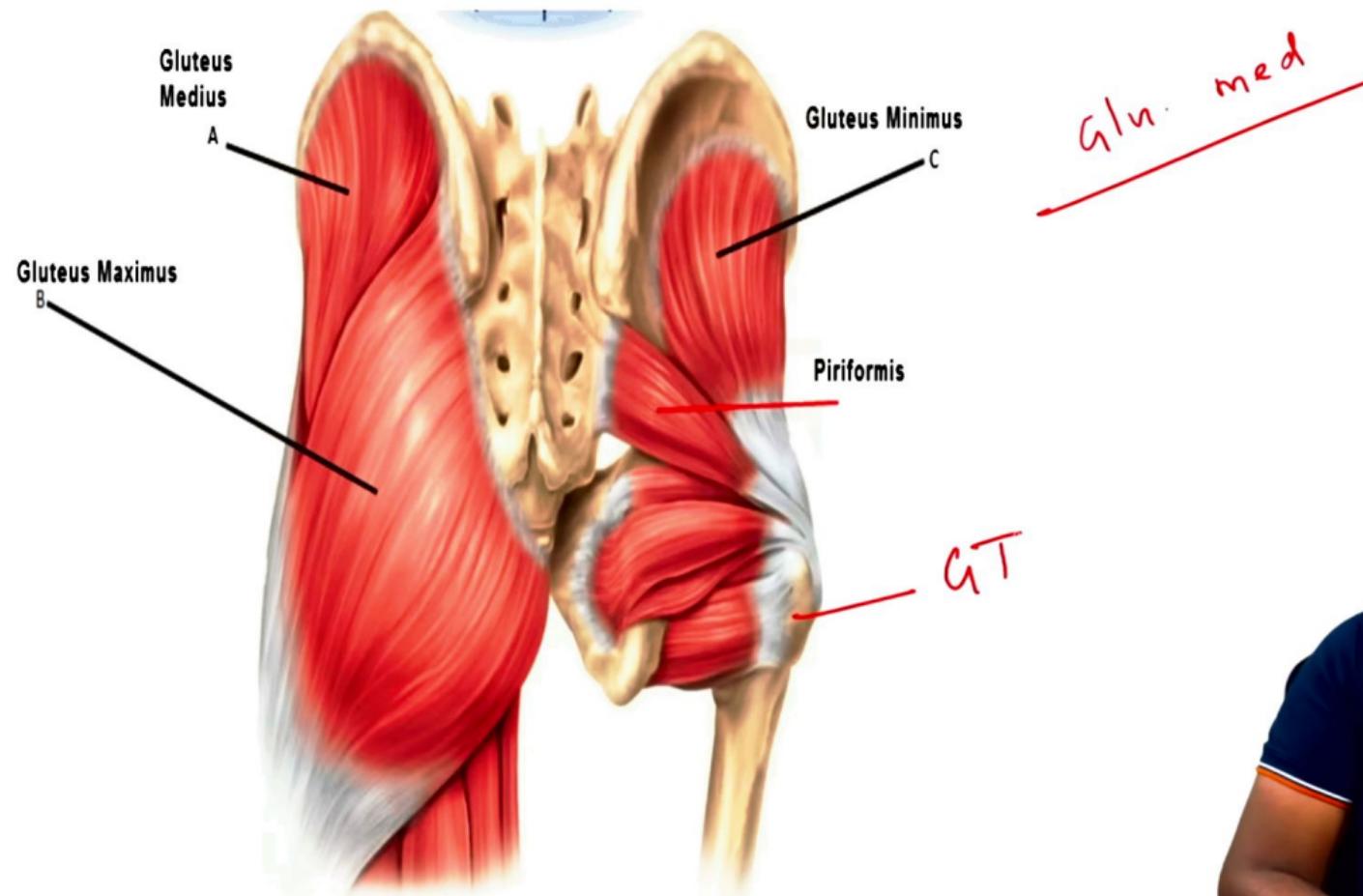
S anterior vs  
HIP      F IX  
Ab  
LR  
KNEE      MR  
FI

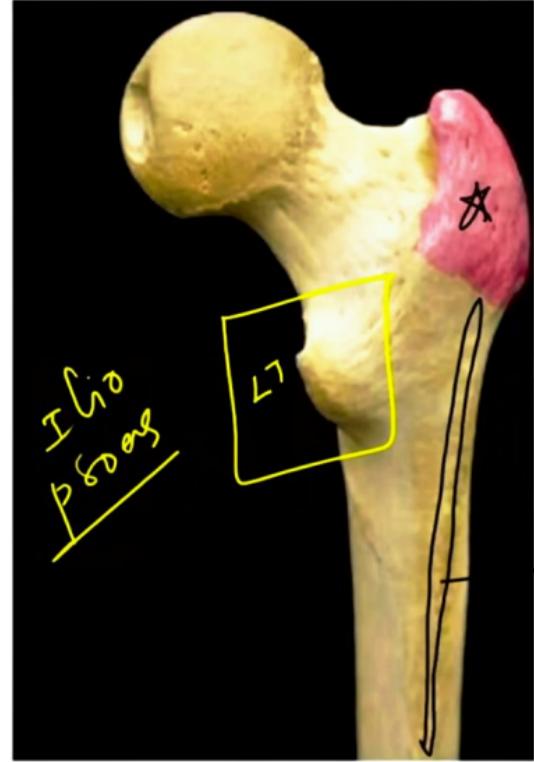
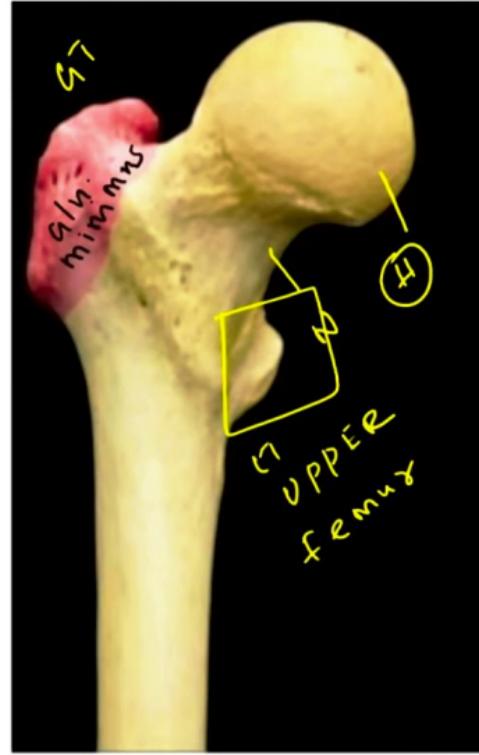


Q. Which of the marked structure cause lateral rotation, flexion and abduction at the hip and flexion at the knee?



# MARROW





oblique - lat  
surface -  
G1  
G1. medius  
an. tuberosity  
an. m. n.

MARROW





Gln. max

Ext - Hip

LR - Hip

Abd - Hip

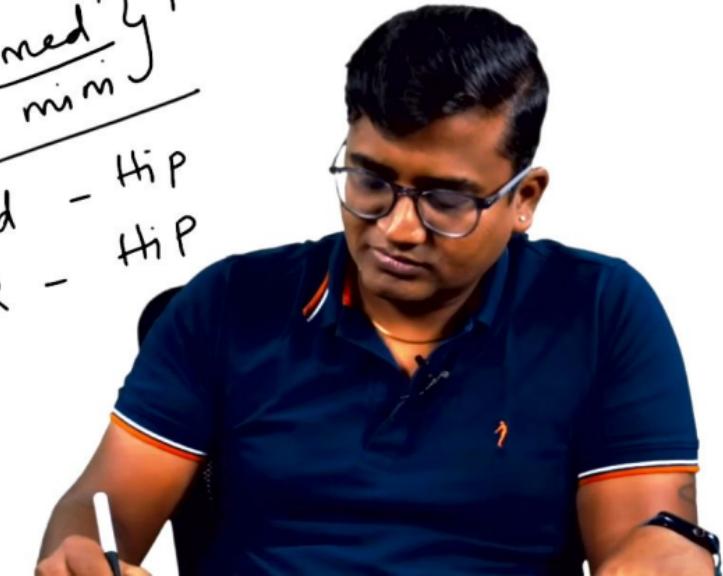
Gln. med

min

Abd - Hip

MR - Hip

MARROW



Q. Patient with positive Trendelenburg sign what is the action of the muscle involved?

- A. Flexion ✗
- B. Lateral rotation and abduction ✗
- C. Abduction and internal rotation ✓
- D. Abduction and flexion ✗

Glu. med  
mm m



**Q. Rupture of bulbar urethra does not cause extravasation of blood into which of the following spaces ?**

- A. Deep perineal pouch
- B. Superficial perineal pouch
- C. Walls of scrotum
- D. Ischiorectal fossa





## Definition & Meaning of "Straddle" | Picture Dictionary

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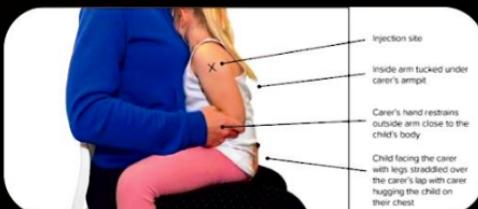
[Share](#)[Save](#)

Figure. Positioning a child in th...

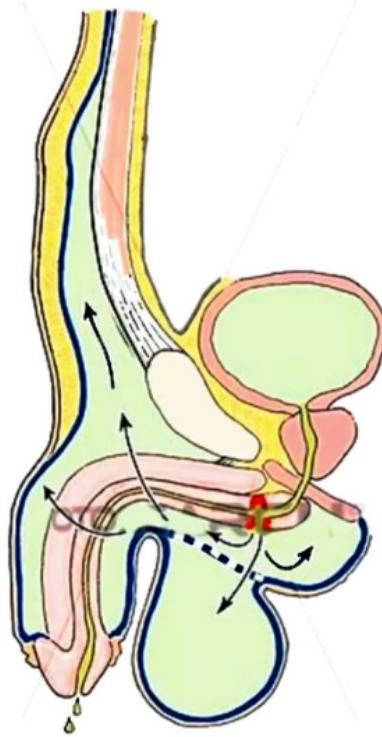
The Australian Immunisatio...



What does 'to straddle' mean?

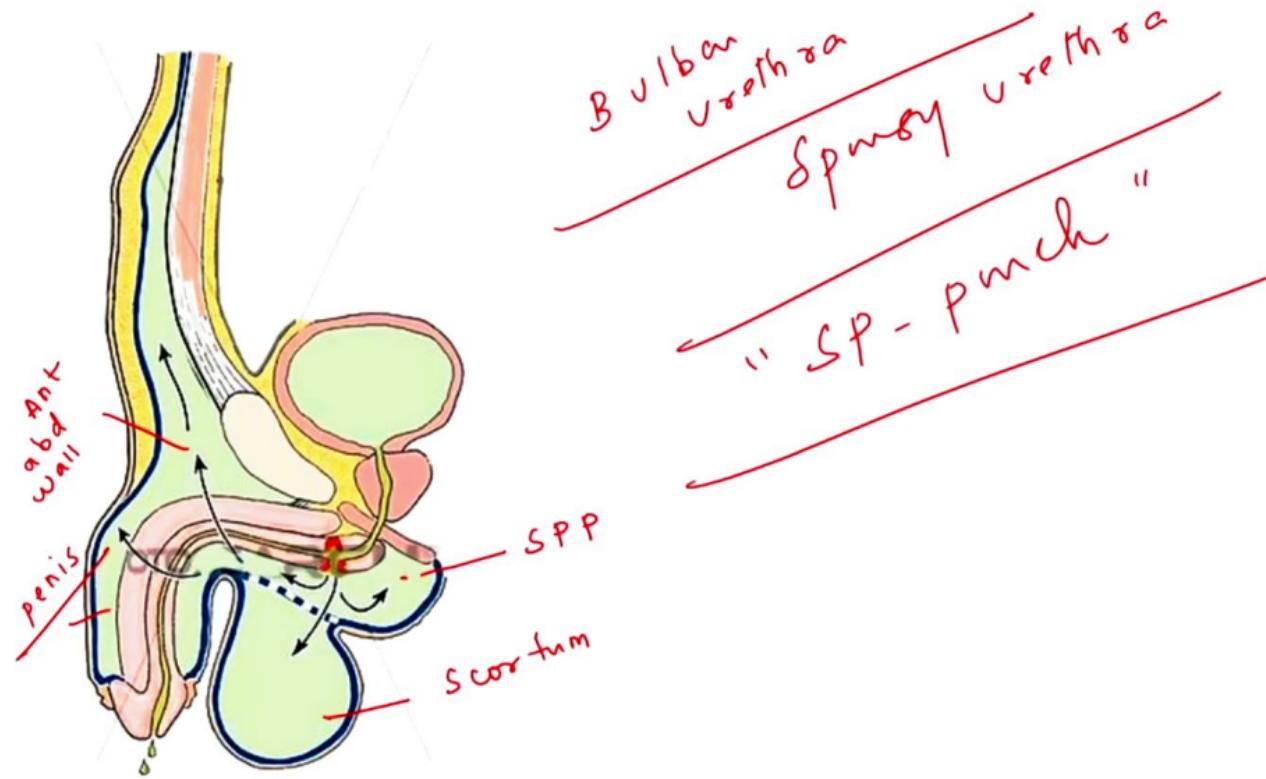
[YouTube](#)

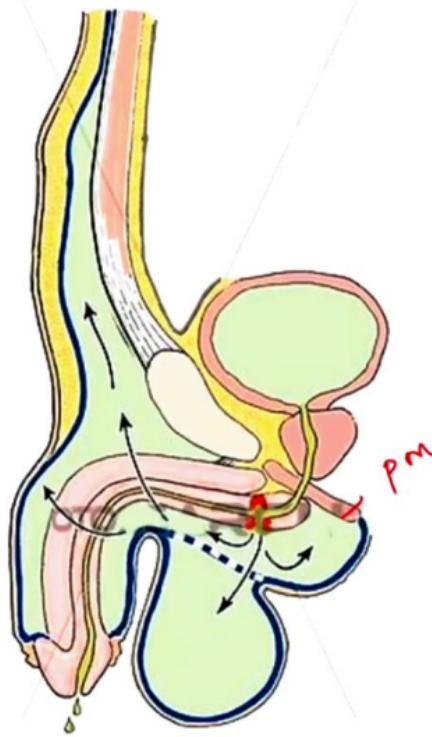




2022 neet  
Pelvic #  
Stoадde Inj  
memb.  
Urethra  
Bulbar  
Urethra





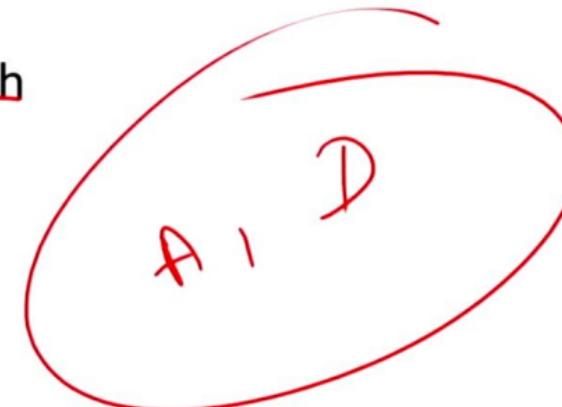


Not to  
Ischio rectal  
fossa - due to  
colles  
fascia  
DEEP perineal - PM  
ponch  
Thigh - fascia latae

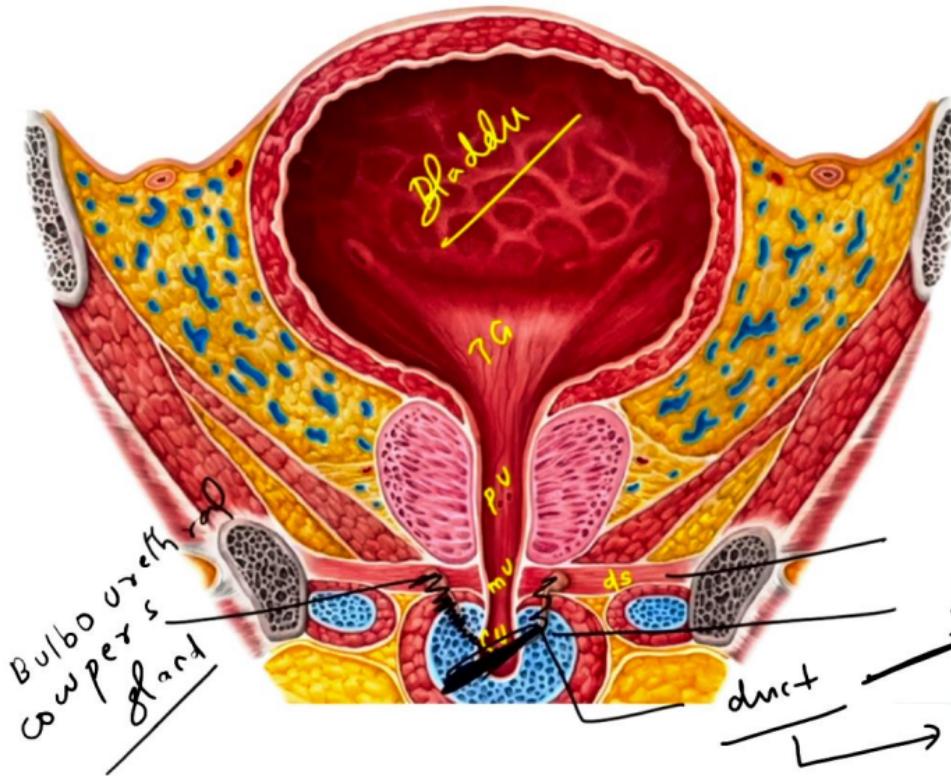


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- B. ~~Superficial perineal pouch~~
- C. ~~Walls of scrotum~~
- D. Ischiorectal fossa



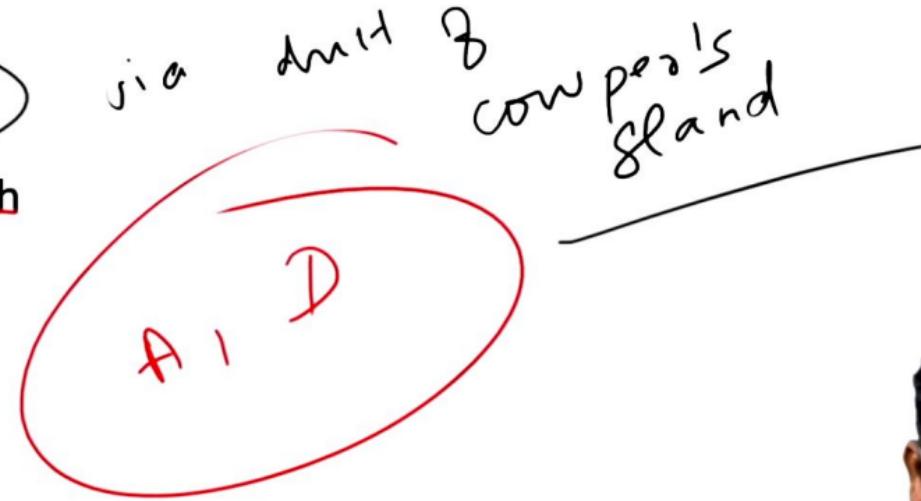
# MARROW



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MARROW

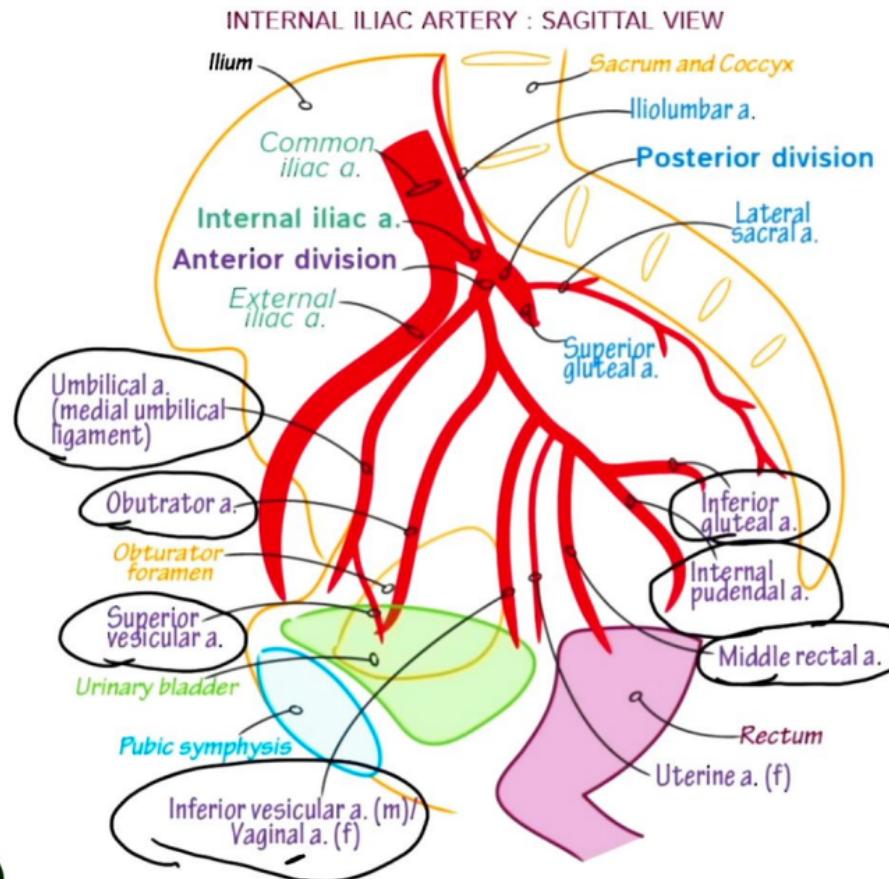
- A. Deep perineal pouch
- B. Superficial perineal pouch
- C. Walls of scrotum
- D. Ischiorectal fossa



**Q. Which of the following is not a branch of the posterior division of the internal iliac artery?**

- A. Iliolumbar artery
- B. Lateral sacral artery
- C. Superior gluteal artery
- D. Inferior gluteal artery





SILK

uterine art



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**Q. Which nerve is blocked when local anaesthesia is given below the inguinal ligament during femoral vein catheterisation?**

- A. Genitofemoral nerve
- B. Lateral cutaneous nerve of thigh
- C. Ilioinguinal nerve
- D. Femoral nerve



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- D. Femoral nerve

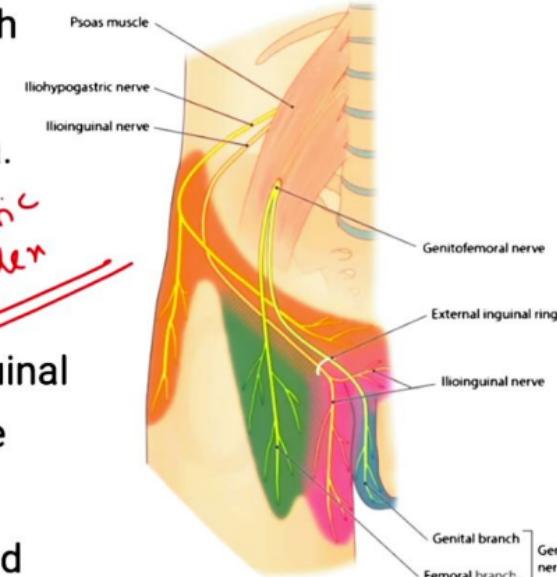


The genital branch enters the inguinal canal through the deep ring - superficial ring and supplies the cremaster muscle and skin of the external genitalia.



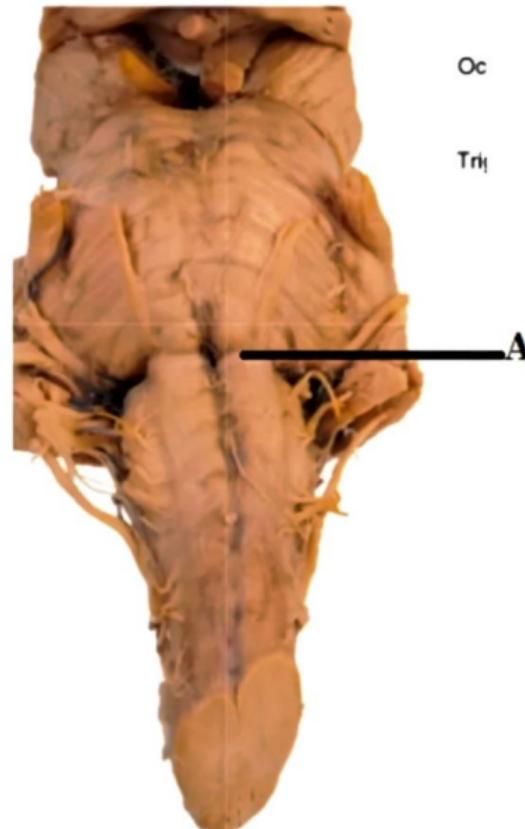
While the femoral branch descends behind the inguinal ligament and enter the femoral sheath lateral to the femoral artery.

It pierces the anterior wall of the femoral sheath and fascia lata gives **sensory supply** to the **antero medial thigh via femoral branch**.

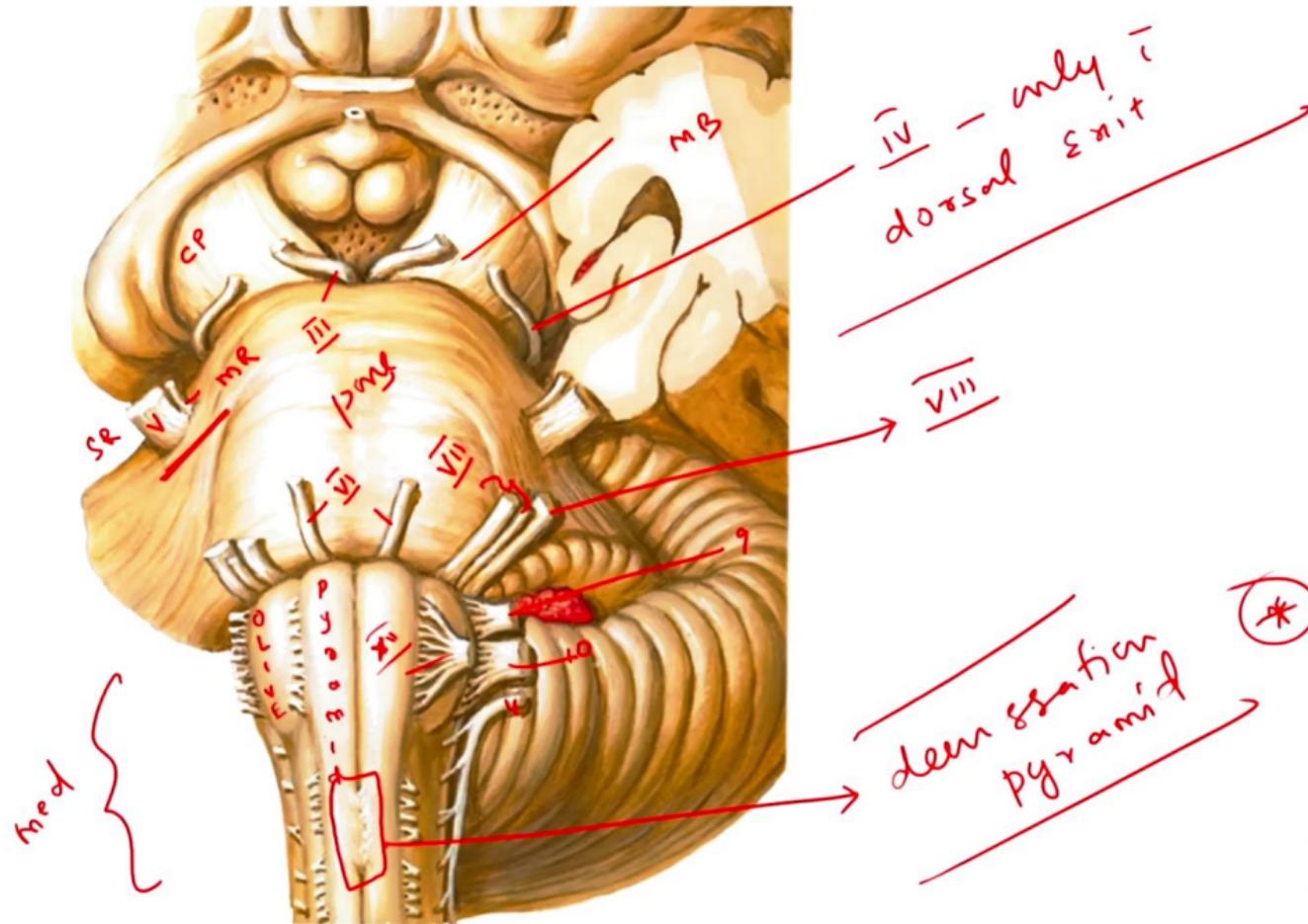


**Q. Nerve emerge at the marked point**

- A. 6<sup>th</sup> nerve
- B. 7<sup>th</sup> nerve
- C. 8<sup>th</sup> nerve
- D. 9<sup>th</sup> nerve



# MARROW



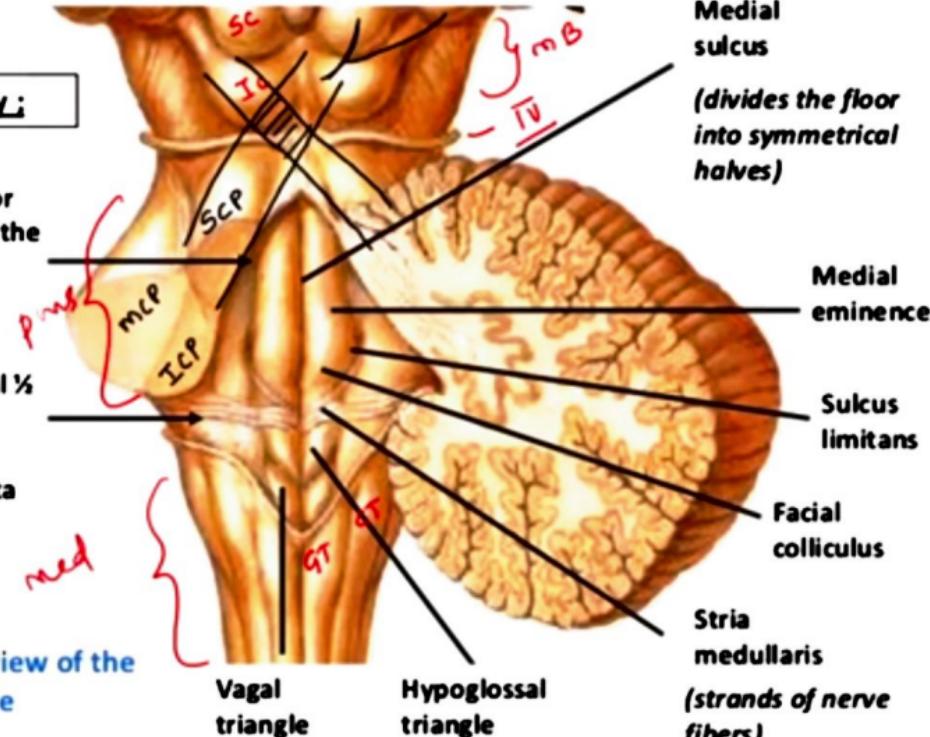
**Floor or rhomboid fossa of fourth ventricle :**

**Formed by :**

1. Posterior surface of the pons

2. Cranial % of the medulla oblongata

Posterior view of the 4<sup>th</sup> ventricle



corpus  
quadrigemina

SCP - demissate  
(@ MB @ IC)

SCP - end in  
Thalamus

Red row class



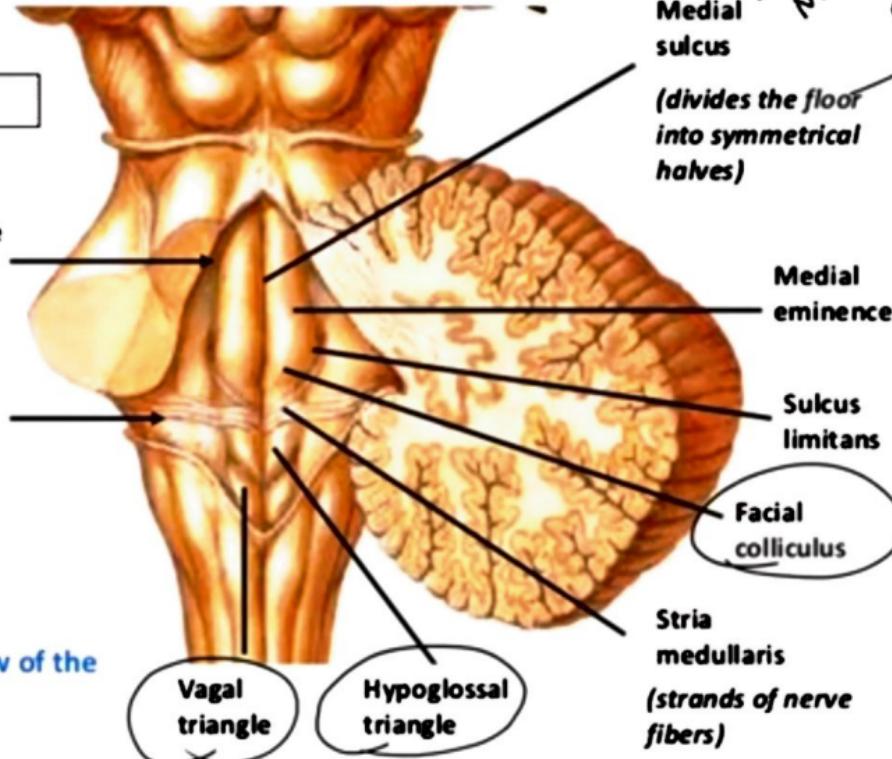
### Floor or rhomboid fossa of fourth ventricle :

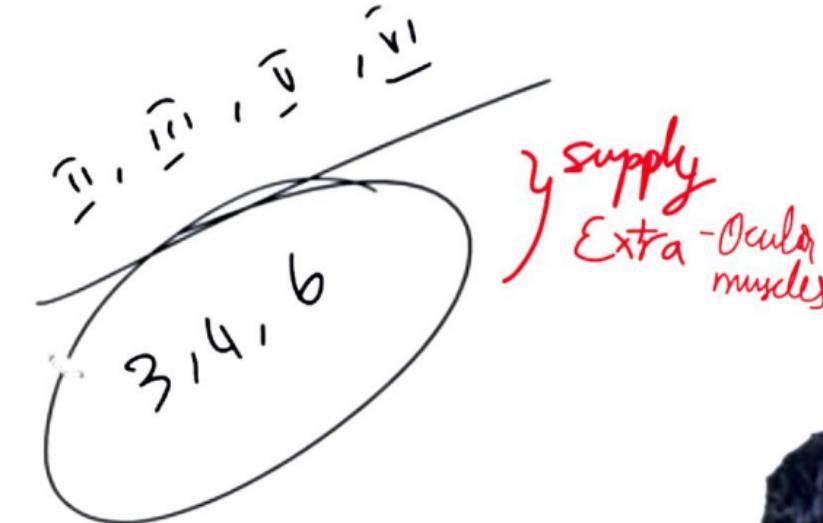
Formed by :

1. Posterior surface of the pons

2. Cranial % of the medulla oblongata

Posterior view of the 4<sup>th</sup> ventricle

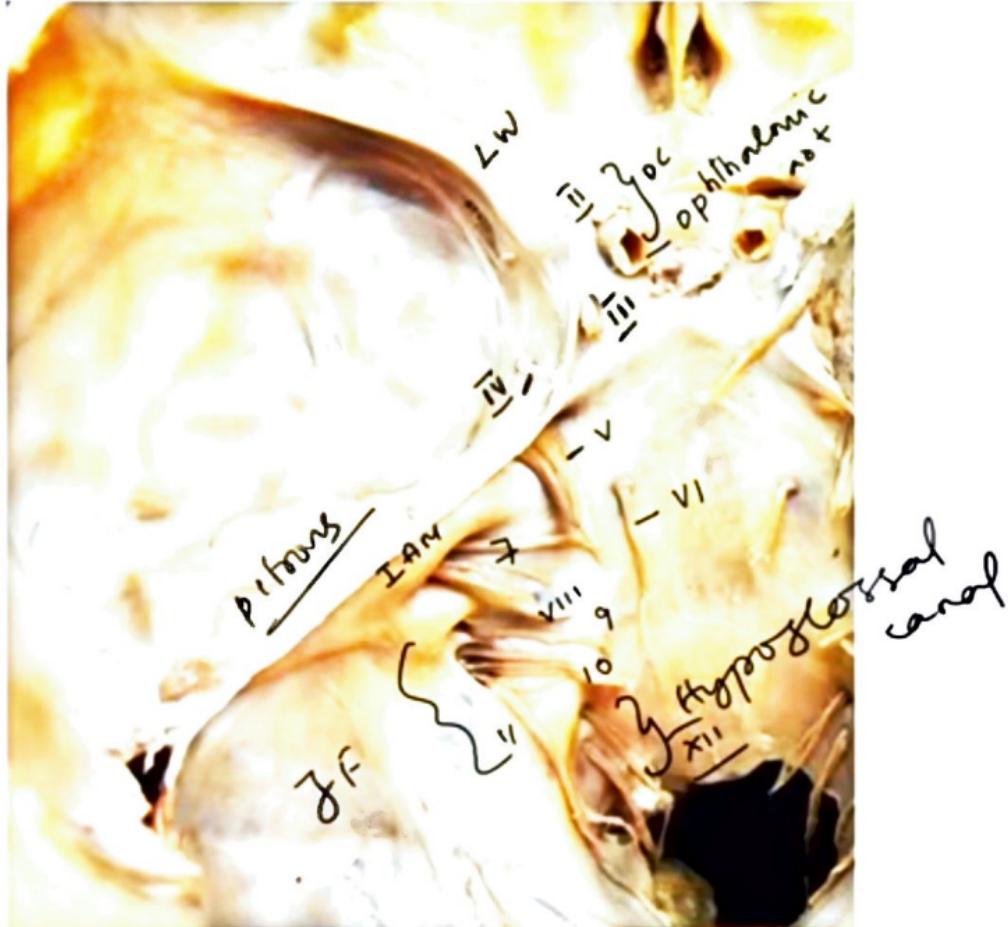




MARROW



MARROW



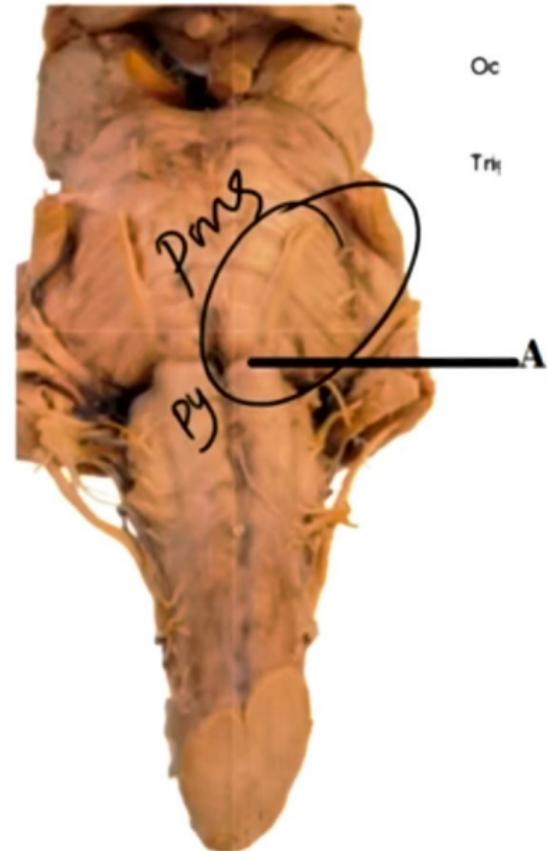
**Q. Nerve emerge at the marked point**

A. 6<sup>th</sup> nerve

B. 7<sup>th</sup> nerve

C. 8<sup>th</sup> nerve

D. 9<sup>th</sup> nerve

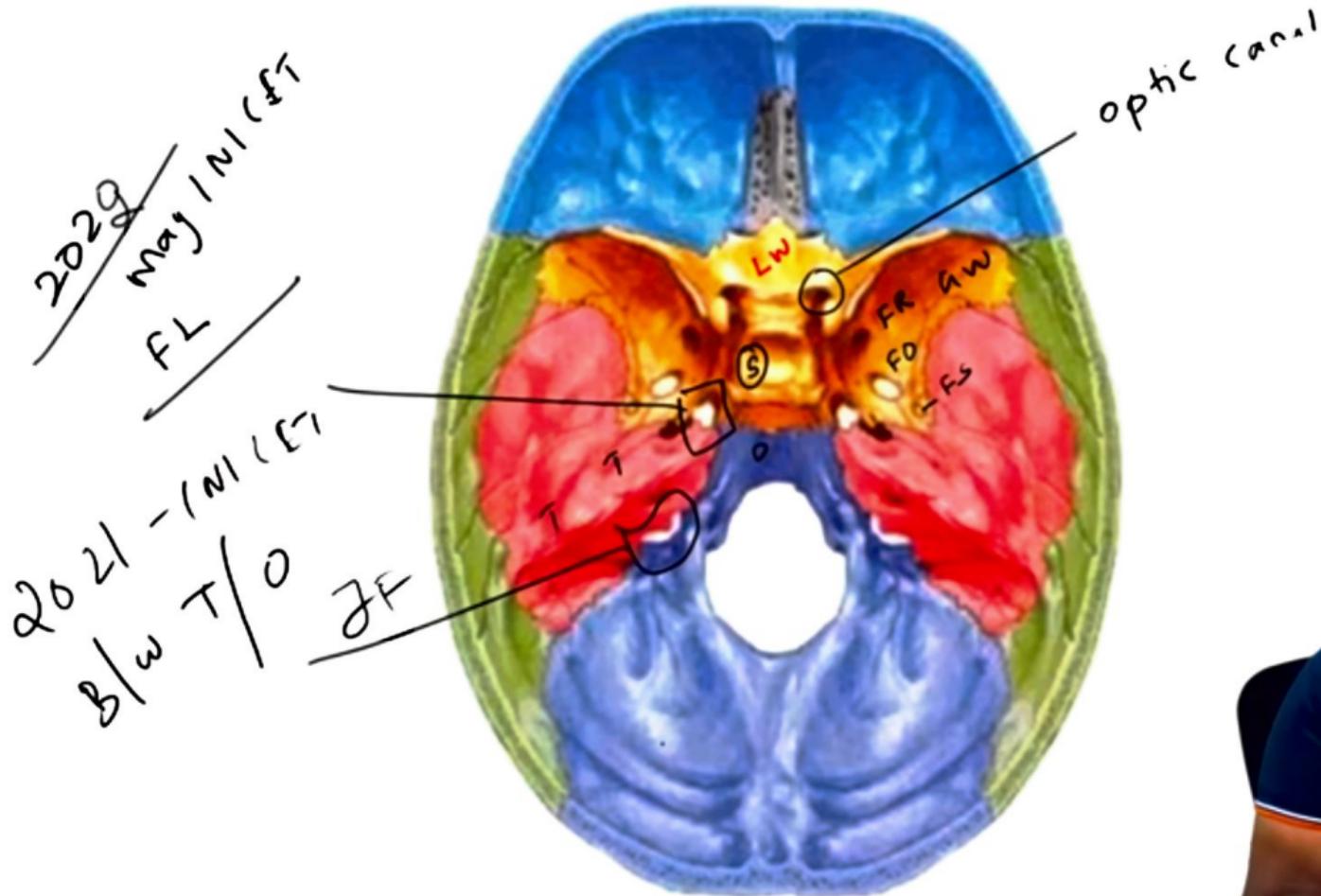


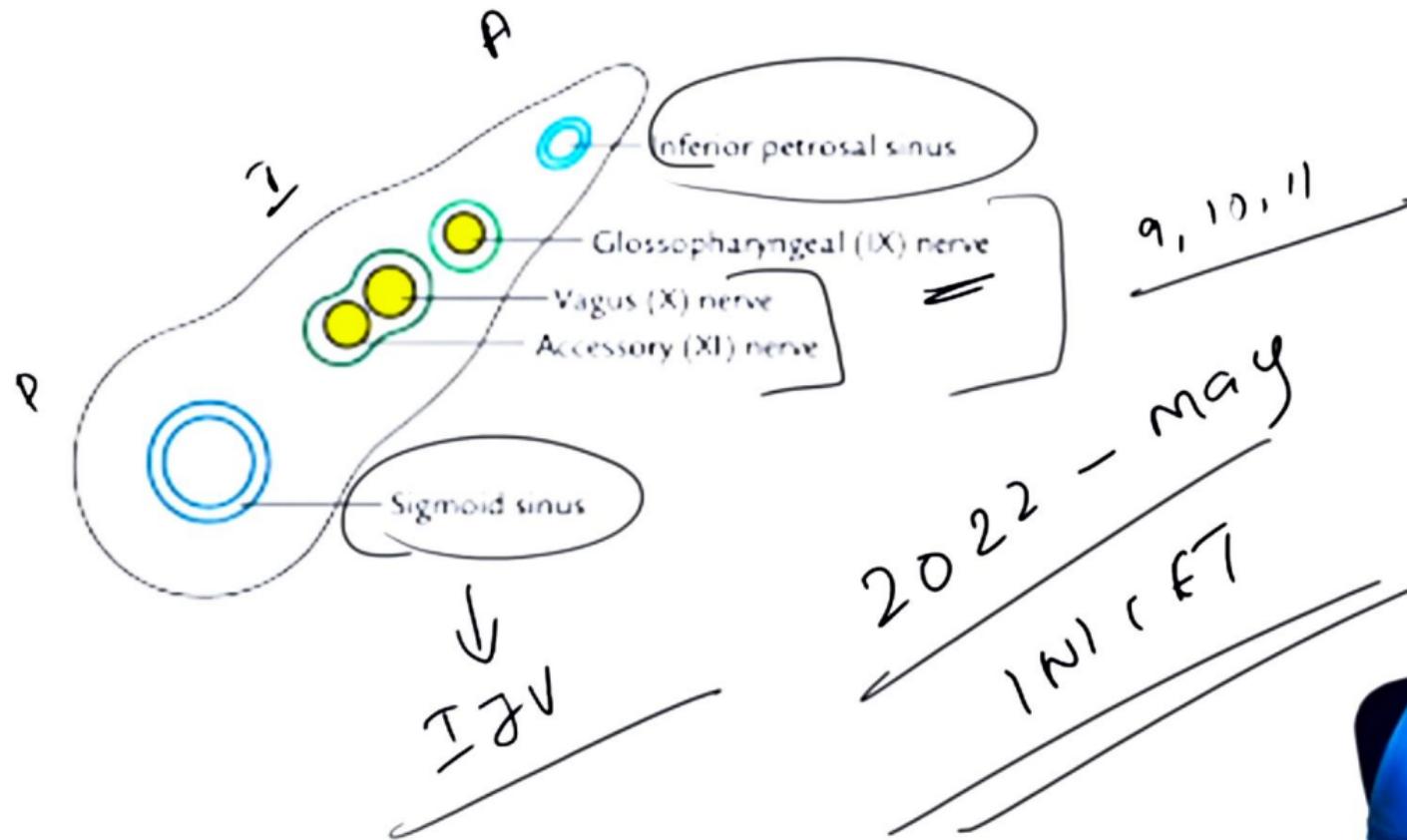
**Q. Fracture of jugular foramen present as**

- A. Loss of general sensation in anterior 2/3rd of tongue
- B. Loss of motor sensation in anterior 2/3rd of tongue
- C. Loss of taste sensation in anterior 2/3rd of tongue
- D. Loss of taste sensation in posterior 1/3rd of tongue



MARROW





**Q. Fracture of jugular foramen present as**

- A. Loss of general sensation in anterior 2/3rd of tongue
- B. Loss of motor sensation in anterior 2/3rd of tongue
- C. Loss of taste sensation in anterior 2/3rd of tongue
- D. Loss of taste sensation in posterior 1/3rd of tongue

9, 10, 11  
marks - JF  
JF - synd  
Vernet  
synd



Q. Fracture of jugular foramen present as

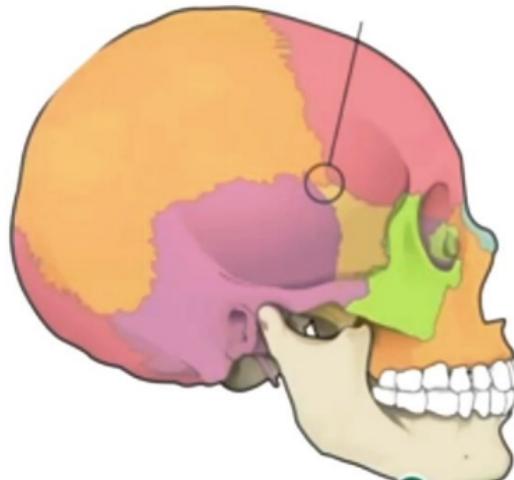
- A. Loss of general sensation in anterior 2/3rd of tongue
- B. Loss of motor sensation in anterior 2/3rd of tongue
- C. Loss of taste sensation in anterior 2/3rd of tongue
- D. Loss of taste sensation in posterior 1/3rd of tongue

Ling +  
9, 10, 11  
— XII  
— CTN- VII  
— IX



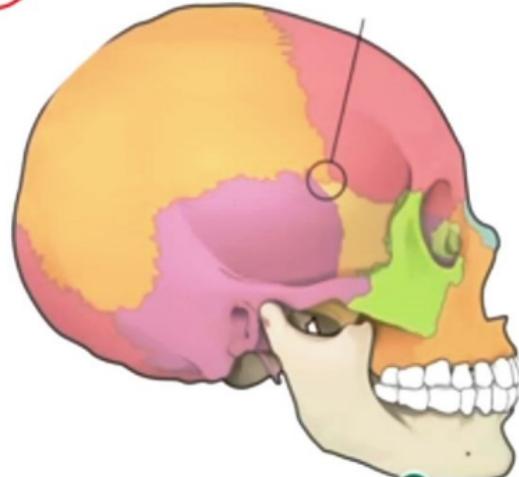
**Q. Structure present beneath the marked part**

- A. Anterior division of middle cerebral artery
- B. Posterior division of middle cerebral artery
- C. Stem of the middle meningeal artery
- D. Anterior division of middle meningeal artery



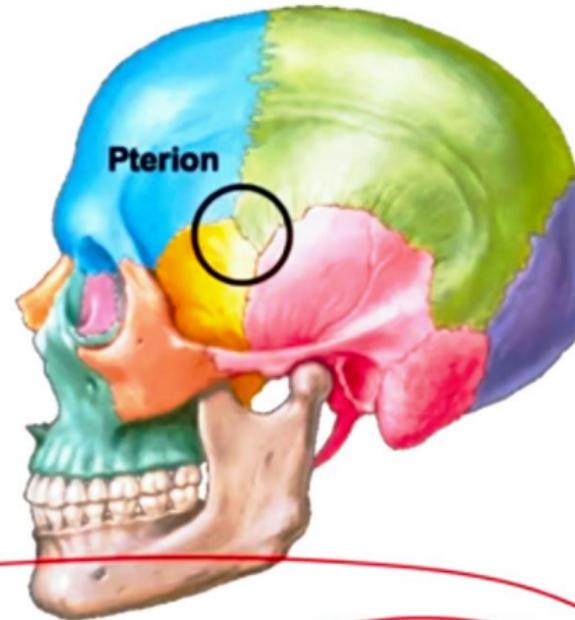
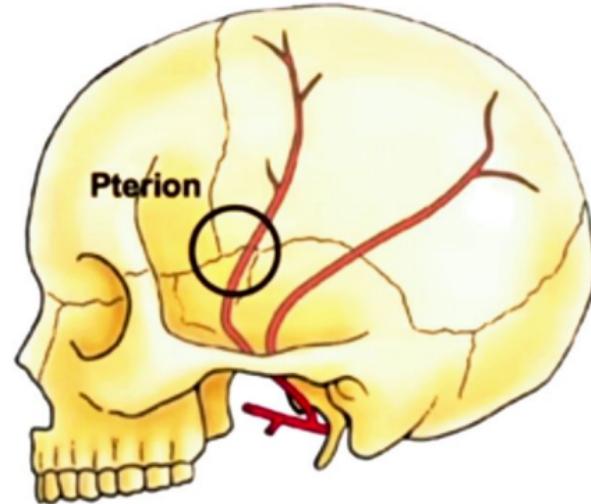
**Q. Structure present beneath the marked part**

- A. Anterior division of middle cerebral artery
- B. Posterior division of middle cerebral artery
- C. Stem of the middle meningeal artery
- D. Anterior division of middle meningeal artery



frontal div  
MMA



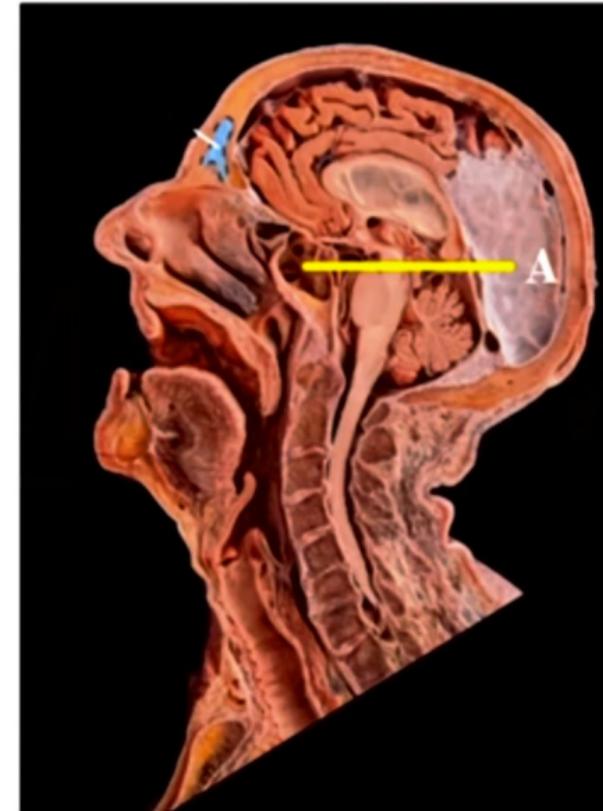


Fracture of pterion can be especially dangerous due to potential laceration of a branch of the middle meningeal artery

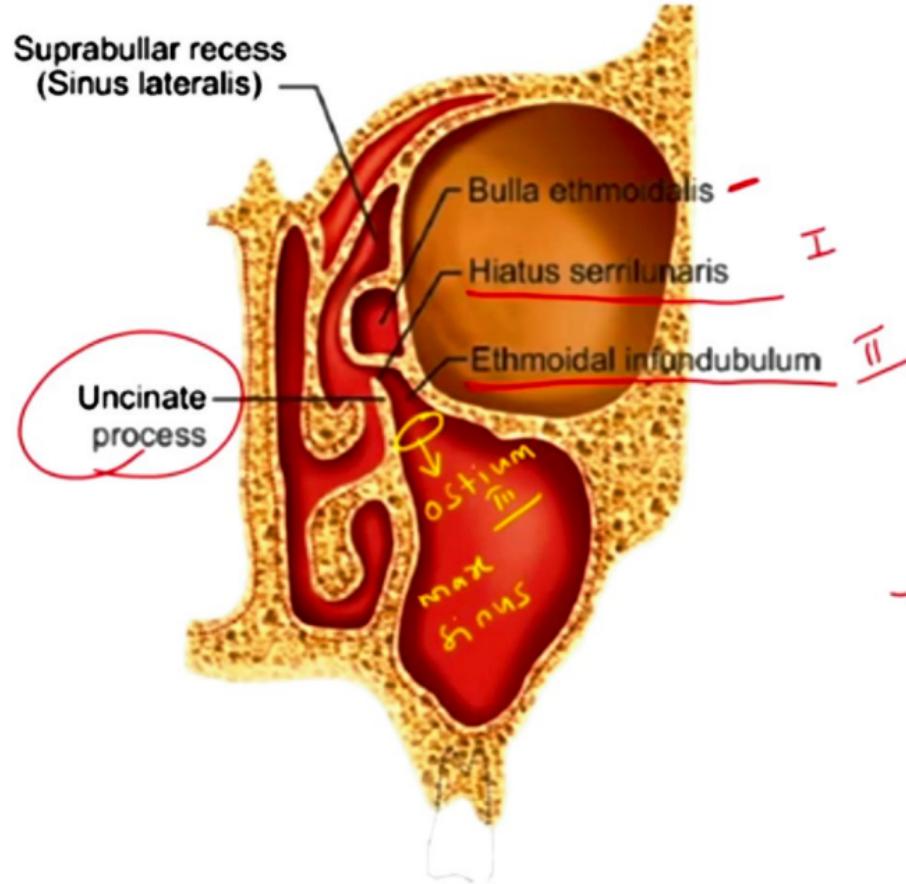


**Q. Marked structure opens in which of the following**

- A. Superior meatus
- B. Middle meatus
- C. Inferior meatus
- D. Sphenoethmoidal recess



MARROW



os teo met  
complex

3 sinus

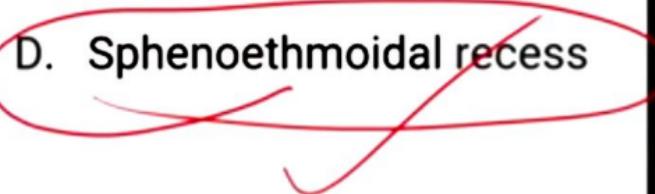
FS  
max. sinus

AES



**Q. Marked structure opens in which of the following**

- A. Superior meatus
- B. Middle meatus
- C. Inferior meatus
- D. Sphenoethmoidal recess



**Q. Lower brachial injury leads to Klumpke's paralysis. the characteristic clinical finding is**

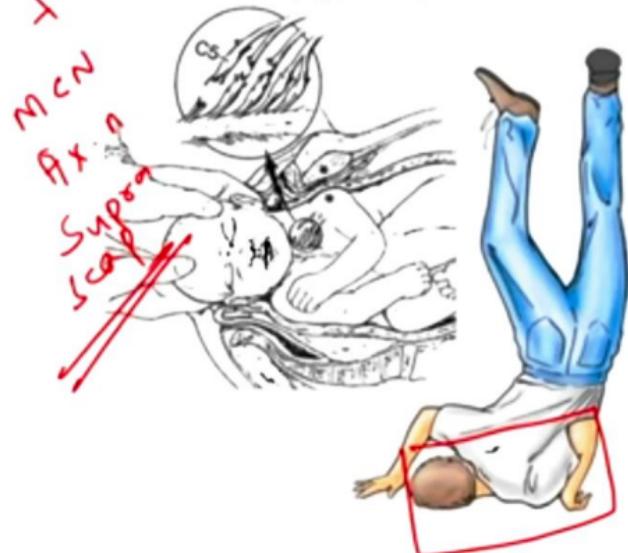
- A. Police man tip hand
- B. Claw hand
- C. Wrist drop
- D. Horner's syndrome



# Erb's Palsy vs. Klumpke's Palsy

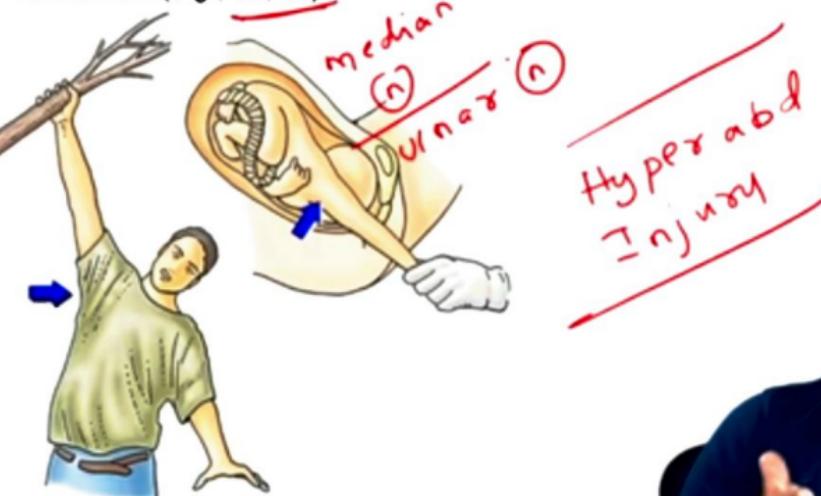
## UBP Injury – Erb's Palsy

- Increase in angle between neck & shoulder
- Traction (stretching or avulsion) of upper ventral rami (e.g., C5, C6)



## LBP Injury – Klumpke's Palsy

- Excessive upward pull of limb
- Traction (stretching or avulsion) of lower ventral rami (e.g., C8, T1)





complete claw hand  
is seen  
in  
Klumpke's palsy.



KLUMPKES  
palsy.

MARROW

Q. Lower brachial injury leads to Klumpke's paralysis. the characteristic clinical finding is

- A. Police man tip hand
- B. Claw hand ✓ (8%)
- C. Wrist drop
- D. Horner's syndrome

(8%)

71

B > D

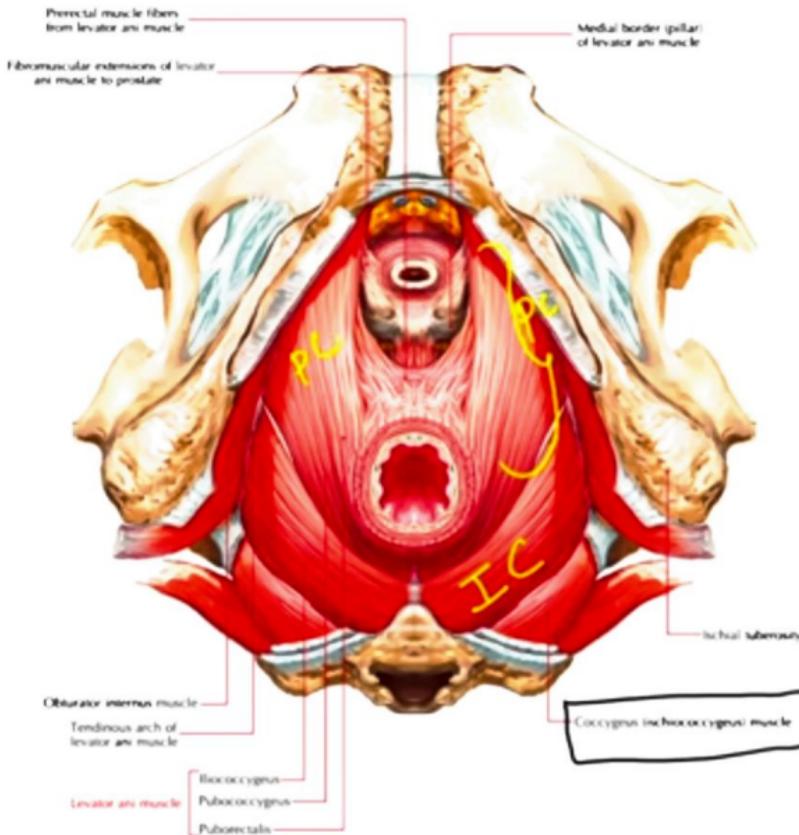


**Q. Which of the muscles make the pelvic diaphragm?**

- a. Iliococcygeus**
- b. Pubococcygeus**
- c. Obturator internus**
- d. Deep transverse perinei**

- A. A,B**
- B. A,B,C,D**
- C. A,B,D**
- D. A and D**



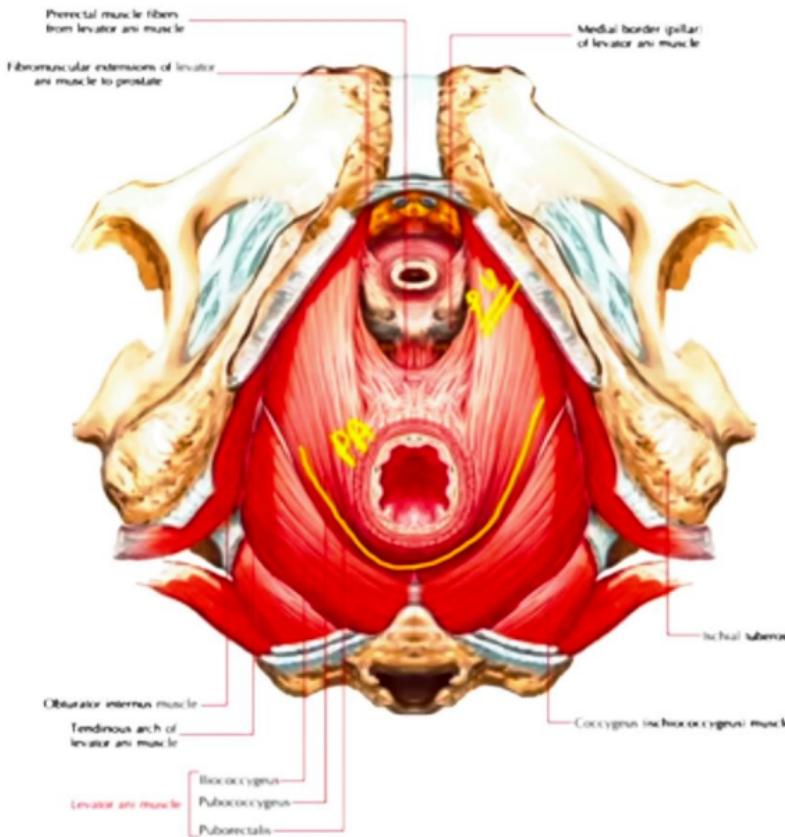


A hand-drawn anatomical diagram in red ink. At the top left, 'PD' is written above a diagonal line. To the left of the line, 'LA' is written above a horizontal line that extends downwards and to the right. To the right of the horizontal line, the text 'Ischio coccygeus' is written diagonally, followed by '(conus sens)' in parentheses. Below this, another diagonal line extends from the bottom left towards the right. At the end of this line, the text 'Ischio coccygeus' is written again. From the middle of the line, a vertical line extends downwards, ending in the word 'pubo'.

## MARROW



# MARROW



PC - prope<sup>t</sup>

PR - sling

pubo vaginalis

pubo prostatans



Q. Which of the muscles make the pelvic diaphragm?

- a. Iliococcygeus ✓
- b. Pubococcygeus ✓
- c. Obturator internus +
- d. Deep transverse perinei ✗

A. A,B

B. A,B,C,D

C. A,B,D

D. A and D

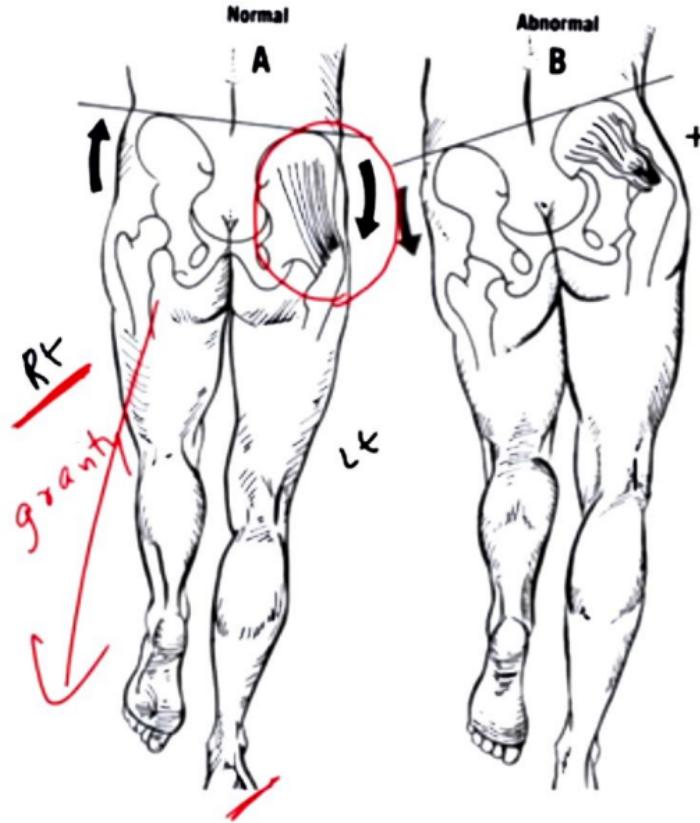
deep SP<sup>a</sup> a



**Q. A 50 year old male presented with positive Trendelenburg test on right side.  
Identify the nerve injured?**

- A. Right Superior gluteal nerve
- B. Right inferior gluteal nerve
- C. Left superior gluteal nerve
- D. Left inferior gluteal nerve



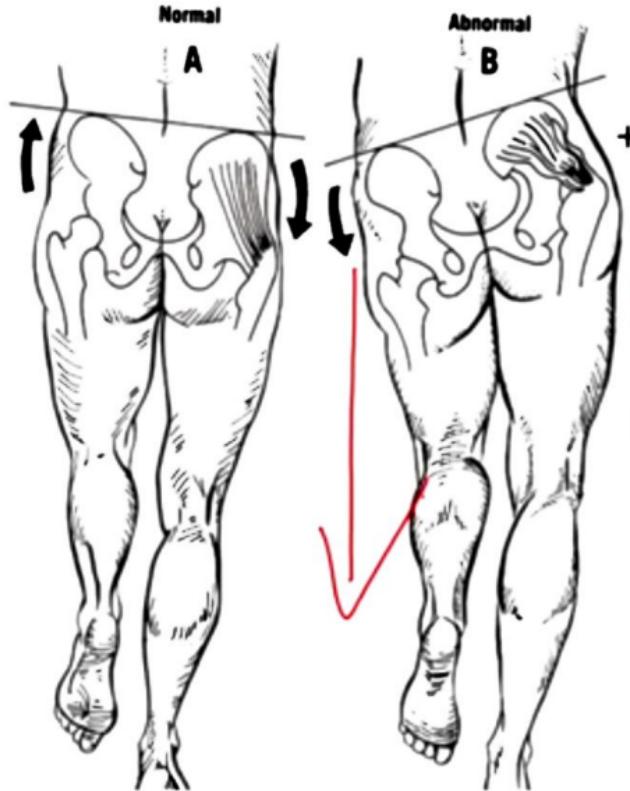


sinking pelvis - on  
 (R+) unsupported side  
 prevented by glu med  
minimus  
 Lt st  
 glu med  
 glu minimus  
 SGN  
 2022 - may  
 INCET

MARROW



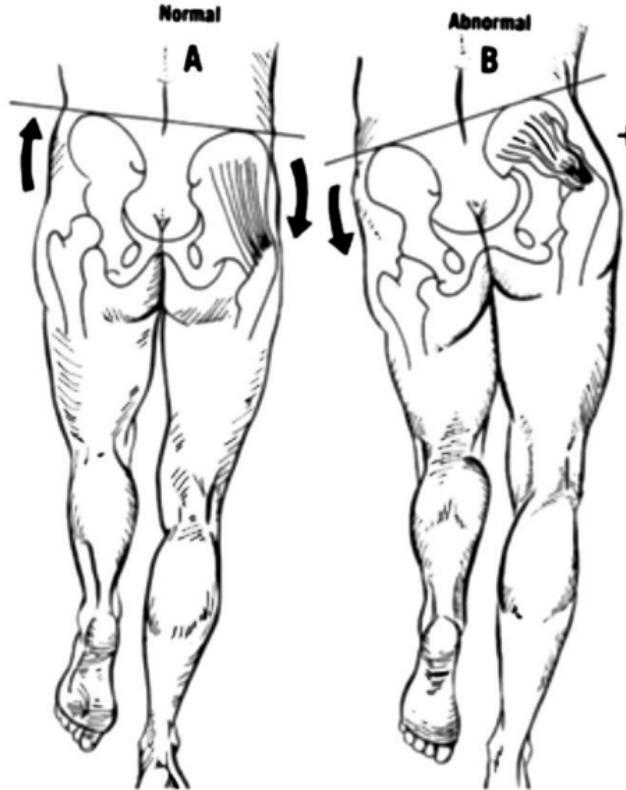
MARROW



*Sgn - paltry*  
*Lt sgn  
paltry*  
*Rt sgn med mir +*



# MARROW



pelvis - sinking R+ side  
unsupported side  
when pt standing ~  
Paralysed side  
lt side



**Q. A 50 year old male presented with positive Trendelenburg test on right side.  
Identify the nerve injured?**

- A. Right Superior gluteal nerve
- B. Right inferior gluteal nerve
- C. Left superior gluteal nerve**
- D. Left inferior gluteal nerve

Pelvis sinking - RT side  
pt standing palsy  
side - LT side  
Lt sign palsy



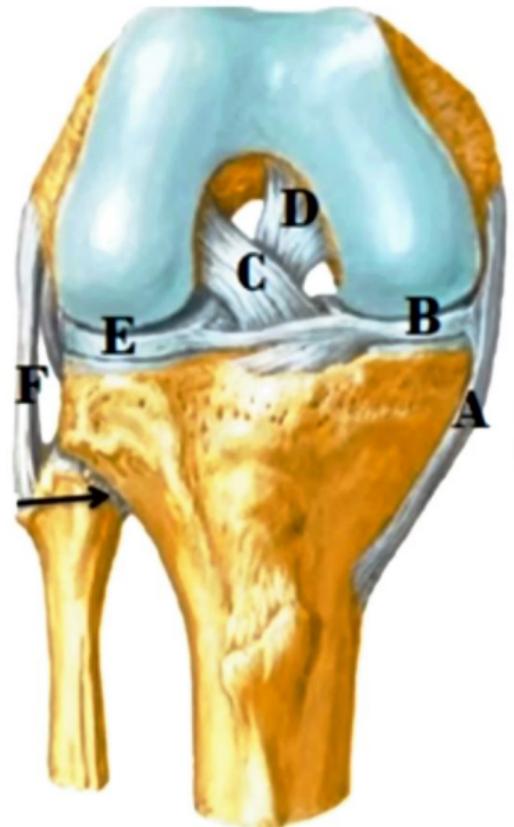
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Identify the nerve injured?**

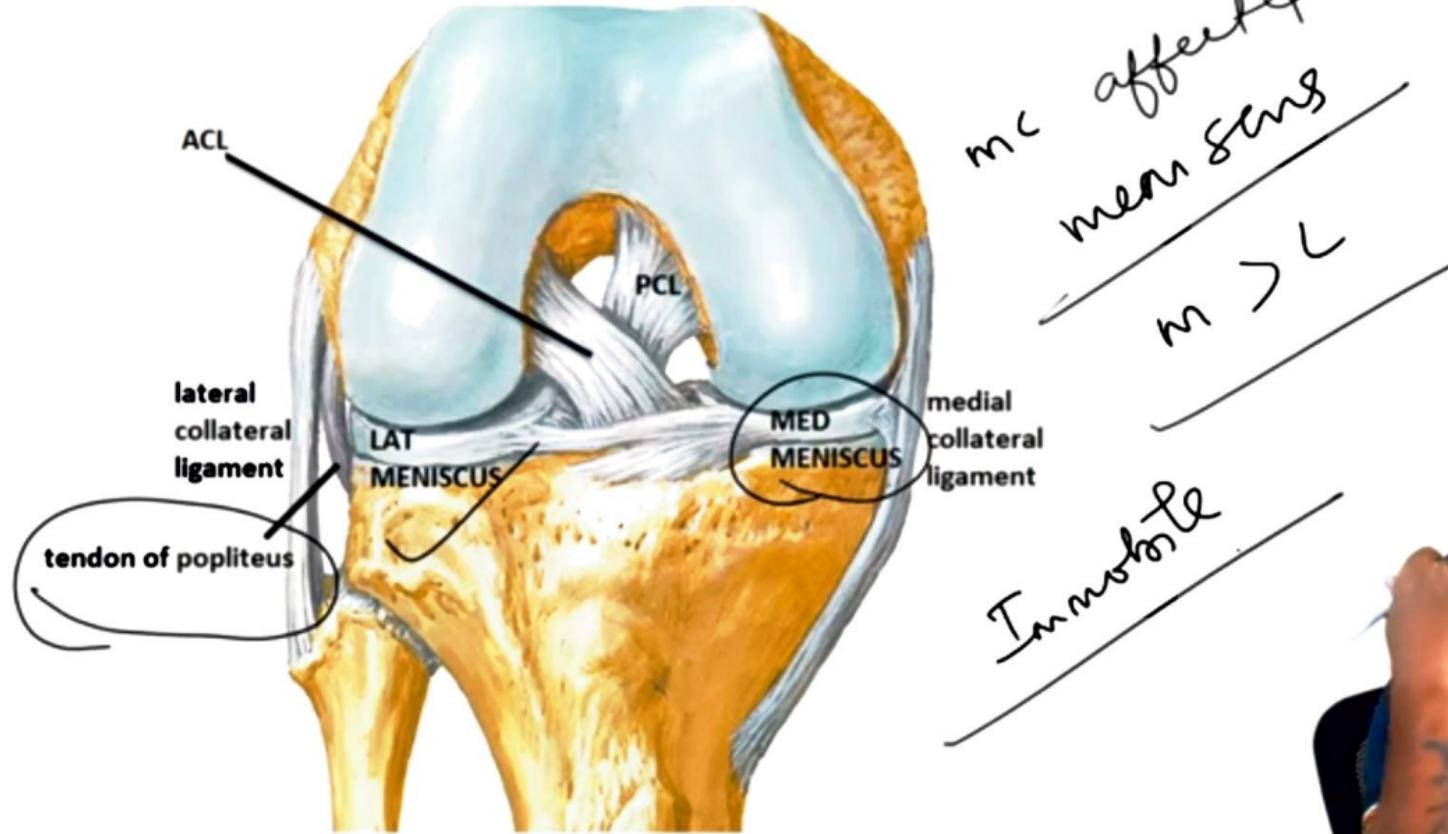
- A. Right Superior gluteal nerve
- B. Right inferior gluteal nerve
- C. Left superior gluteal nerve
- D. Left inferior gluteal nerve



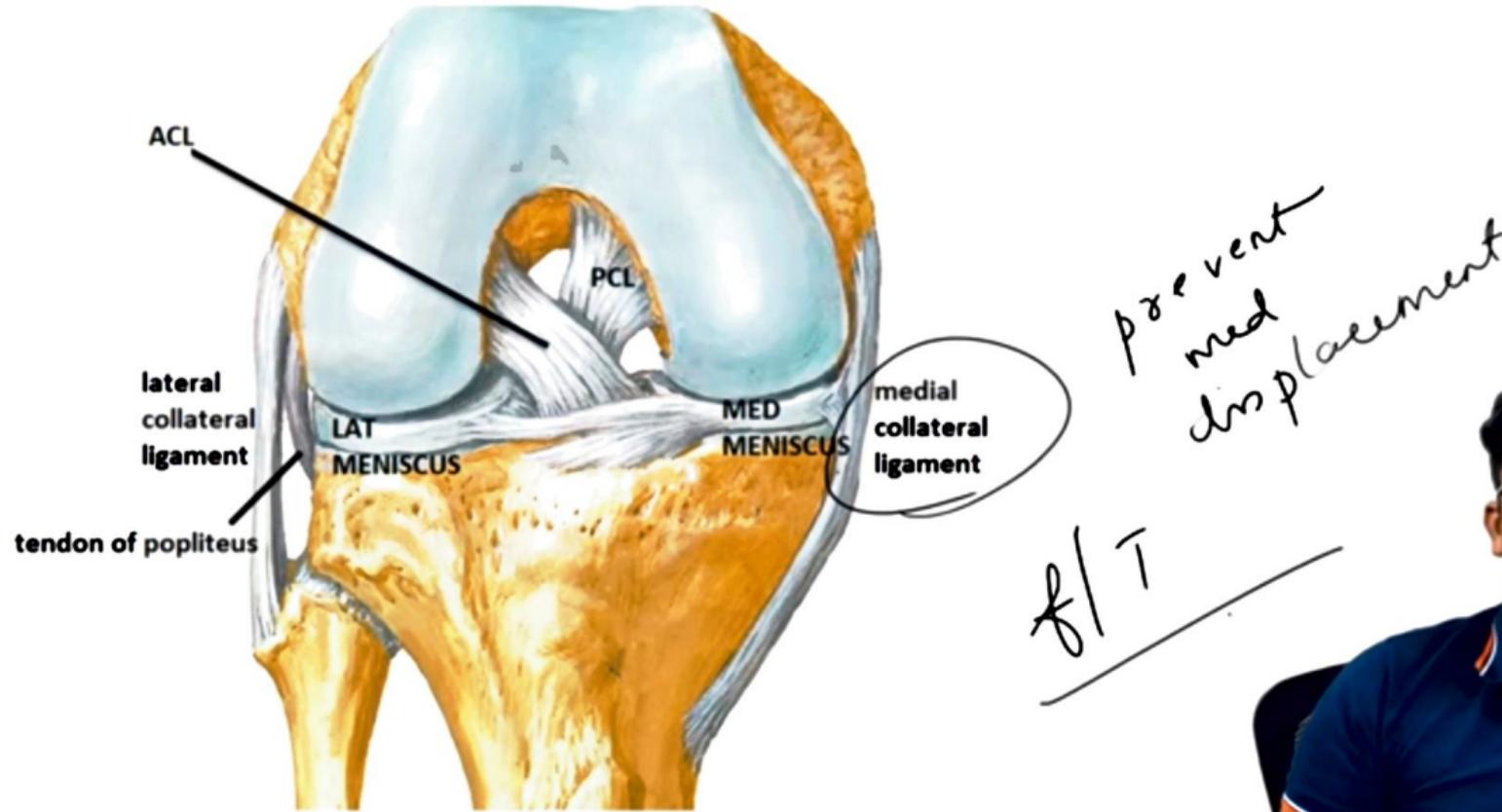
Q. Which of the following marked structures affected in the terrible triad

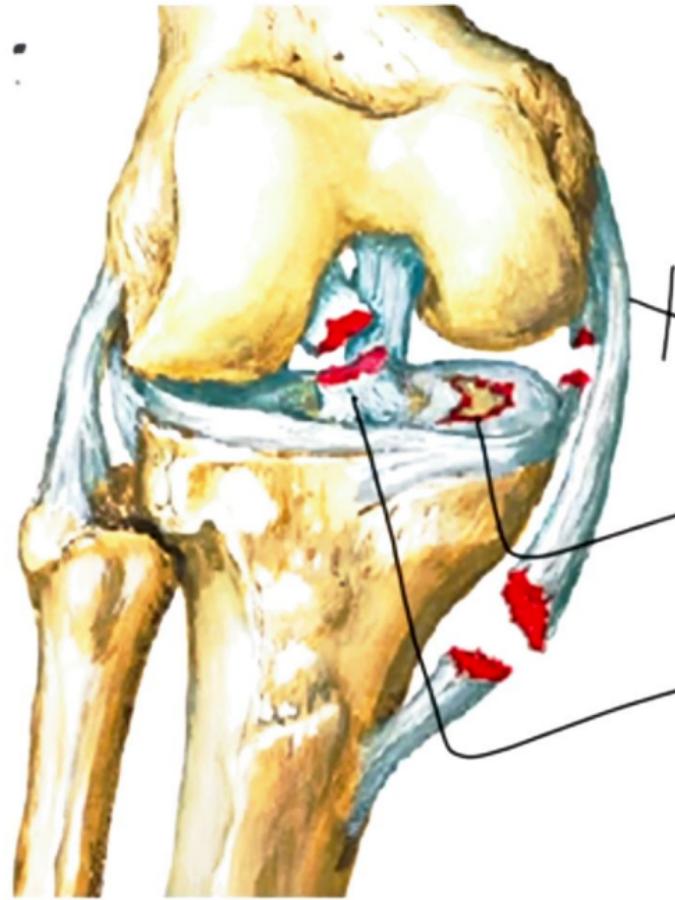
- A. A, B, C
- B. A, B, D
- C. A, E, D
- D. F, E, D





MARROW





MCL +

MM X

ACL X

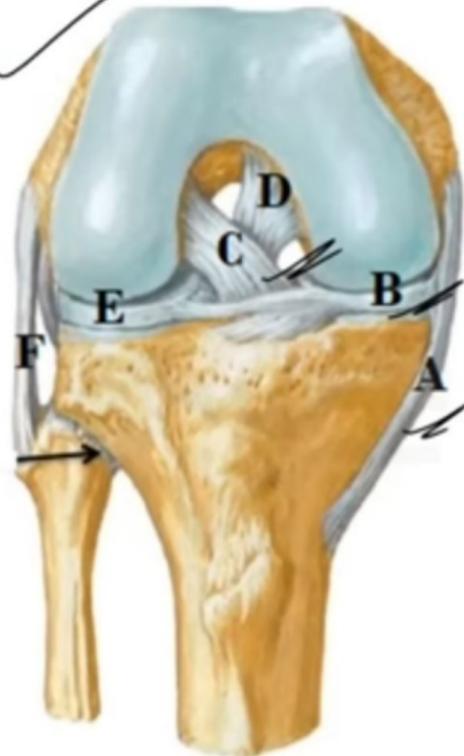
TERRIBLE  
/ unhappy  
triad

MARROW



Q. Which of the following marked structures affected in the terrible triad

- A. A, B, C
- B. A, B, D
- C. A, E, D
- D. F, E, D



A - mCL  
B - mm  
C - ACL  
D - PCL  
E - LM  
F - ECL

