

## Memory Test - Extremity\_Class Test\_Online\_Foundation\_1

Total Mark: 100

Time: 90 Min

<p><b>1. The brachial plexus:</b>  A) Originates from roots which emerge in front of scalenus anterior  B) Forms cords which are closely related to the Axillary artery  C) gives branches from its lateral cord to the extensor muscles of upper limb  D) Supplies the latissimus dorsi muscle from its medial cord  E) Supplies the pectoralis major muscle  <b>Answer:</b> F, T, F, F, T  <b>Discussion:</b>  <b>Reference:</b></p>	<p><b>2. The sciatic nerve-</b>  A) Root value is L4-S3  B) Tibial part is formed by dorsal divisions of L4-S3 ventral primary rami  C) it passes through the piriformis at greater sciatic foramen  D) it enters the back of thigh at the lower border of gluteus maximus  E) When its division occur in pelvis tibial nerve pierces the piriformis to enter gluteal region  <b>Answer:</b> T, F, F, T, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: Vishram/2nd/Vol-2/P-468]</p>
<p><b>3. Anterior cruciate ligament of knee</b>  A) Is avascular in structure  B) Consists of two bundles  C) Is intraarticular and extra synovial  D) Is primary resistant to rotational stability  E) Has attachment with the posterior cruciate ligament  <b>Answer:</b> F, T, T, T, F  <b>Discussion:</b> Explanation: a) Middle geniculate artery  <b>Reference:</b> (Ref) BD 6TH V-2,P-142+ Datta, 4th V-3, P- 237)</p>	<p><b>4. Features of cartilaginous joint-</b>  A) Articular cartilage in Synchondroses is fibrocartilage  B) Symphyses allows little movement  C) Cartilages of symphyses joint may ossify  D) Synchondroses present in growing end of bone  E) In symphyses apposed bony surface is coated by fibrocartilage, united by hyaline cartilage  <b>Answer:</b> F, T, F, T, F  <b>Discussion:</b>  <b>Reference:</b></p>
<p><b>5. Following action impaired in Erb's paralysis:</b>  A) Extension of elbow joint  B) Pronation at elbow  C) Lateral rotation of shoulder  D) Extension of wrist joint  E) Abduction of shoulder  <b>Answer:</b> F, F, T, T, T  <b>Discussion:</b> F(Flexion)F(supination)TTT  <b>Reference:</b> (Ref-BD chaurasia-6th/P-59)</p>	<p><b>6. Muscles of having dual nerve supply in the upper extremity</b>  A) Pronator teres  B) Pectineus  C) Flexor pollicis muscle  D) Adductor magnus  E) Flexor digitorumprofundus  <b>Answer:</b> F, F, T, F, T  <b>Discussion:</b> [b and d are muscle of lower extremity]  <b>Reference:</b></p>
<p><b>7. Powerful abductors of thigh muscles are</b>  A) Piriformis  B) Gluteus medius  C) Sartoris  D) Gluteus minimus  E) Quadratus femoris  <b>Answer:</b> F, T, F, T, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD/P-69]</p>	<p><b>8. regarding locking</b>  A) By popliteus muscle  B) Initiated by quadriceps femoris muscle  C) Anterior cruciate ligament taut  D) Rectus femoris is relaxed  E) Occurs during hyperextension  <b>Answer:</b> F, T, T, T, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD 6th V-2 P-146]</p>

<p><b>9. Regarding supination and pronation movement-</b></p> <p>A) It is a rotatory movement around an oblique axis</p> <p>B) Supination is an antigravity movement.</p> <p>C) Pronation is more powerful than supination</p> <p>D) Rapid supination done mainly by supinator</p> <p>E) Pronator teres is chief pronator</p> <p><b>Answer:</b> F, T, F, F, F</p> <p><b>Discussion:</b> ( Supination and pronation occur around a vertical axis. supination is more powerful. Rapid supination- Biceps, Slow supination with extended elbow-supinator .Chief pronator – pronator quadratus.</p> <p><b>Reference:</b></p>	<p><b>10. Rotator cuff is formed by</b></p> <p>A) Supraspinatus</p> <p>B) Subscapularis</p> <p>C) Teres major</p> <p>D) Levator scapulae</p> <p>E) Serratus anterior</p> <p><b>Answer:</b> T, T, F, F, F</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> [Ref: BD 6TH P-68,V-1]</p>
<p><b>11. Scaphoid bone</b></p> <p>A) Found in the floor of anatomical snuff box</p> <p>B) Lies lateral to lunate</p> <p>C) Receives its blood supply by its distal part</p> <p>D) Fracture is caused by fall on outstretched hand</p> <p>E) Goes to avascular necrosis when fracture of distal part</p> <p><b>Answer:</b> T, T, T, T, F</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> [Ref: Harold Ellis/P-176-178]</p>	<p><b>12. Structures passing superficial to flexor retinaculum are-</b></p> <p>A) Ulnar nerve</p> <p>B) Median nerve</p> <p>C) Tendons of Flexor digitorum superficialis</p> <p>D) Tendon of Flexor pollicis longus</p> <p>E) Ulnar vessel</p> <p><b>Answer:</b> T, F, F, F, T</p> <p><b>Discussion:</b> (Superficial to flexor Retinaculum- Palmaris longus tendon, Ulnar nerve, Ulnar vessel, Palmar cutaneous branch of median nerve , Palmar cutaneous branch of ulnar nerve.</p> <p><b>Reference:</b></p>
<p><b>13. The cubital fossa:</b></p> <p>A) Is a quadrilateral space situated in front of the elbow joint</p> <p>B) Is floored by the bicipital aponeurosis</p> <p>C) Contains the median nerve</p> <p>D) Contains the radial nerve</p> <p>E) Is crossed by the medial cutaneous nerve of the forearm</p> <p><b>Answer:</b> F, F, T, T, T</p> <p><b>Discussion:</b> F (Triangular fossa) F (Roof) TTT</p> <p><b>Reference:</b> [Ref: Vishram/2nd/Vol-3/P-100]</p>	<p><b>14. The great (long) saphenous vein</b></p> <p>A) Is anterior to the lateral malleolus</p> <p>B) Is anterior to the saphenous nerve in the leg</p> <p>C) Has no valves in its course in the leg</p> <p>D) Is connected to the deep veins of the lower limb by channels which have no valves</p> <p>E) After passing through the saphenous opening receives the superficial Epigastric and external pudendal veins</p> <p><b>Answer:</b> F, F, F, F, F</p> <p><b>Discussion:</b></p> <p><b>Reference:</b></p>

<p><b>15. The radial artery</b></p> <p>A) Passes superficial to brachioradialis  B) Lies lateral to the radial nerve in the forearm  C) Lies on the anterior surface of the lower end of the radius  D) Passes between the two heads of first dorsal interosseous muscle  E) Terminates in the superficial palmar arch</p> <p><b>Answer:</b> F, F, T, T, F  <b>Discussion:</b>  <b>Reference:</b> (Ref: Dutta)</p>	<p><b>16. The Triceps muscle</b></p> <p>A) Long head arise from Scapula  B) Lateral head arise from humerus  C) Acts mainly at shoulder joint in  D) Is supplied by median nerve upool  E) Is a powerful extensor of elbow</p> <p><b>Answer:</b> T, T, F, F, T  <b>Discussion:</b> TTF(Elobow)F(Radial)T  <b>Reference:</b> [Ref: Lumley/BD/P-100]</p>
<p><b>17. Wrist drop</b></p> <p>A) Unopposed flexor muscle of wrist  B) Makes one able to firm grip of object  C) Produce total anesthesia in dorsum of the hand  D) Injury to radial nerve in axilla  E) Due to injury to redial nerve in below elbow</p> <p><b>Answer:</b> T, F, F, T, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD 6th V-1 P-98]</p>	<p><b>18. Adductor canal</b></p> <p>A) Lies on adductor magnus  B) Roof formed by sartorius  C) Contain femoral nerve  D) Also called subsartorial canal  E) Contain ascending genicular artery</p> <p><b>Answer:</b> T, T, F, T, F  <b>Discussion:</b> ( Saphenous N) TF ( Descending)  <b>Reference:</b></p>
<p><b>19. Floor of femoral triangle formed by</b></p> <p>A) Sartorius  B) Adductor longus  C) Vastusmudialls  D) Psaso major  E) Pectineous</p> <p><b>Answer:</b> F, T, F, T, T  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD/V-1/P-49-50]</p>	<p><b>20. Following muscle help in flexion of knee</b></p> <p>A) Rectus femoris  B) Biceps femoris  C) Adductor magnus  D) Quadratus femoris  E) Piriformis</p> <p><b>Answer:</b> F, T, T, F, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD/P-84]</p>
<p><b>21. Lumbricals muscle are supplied by</b></p> <p>A) Radial nerve  B) Median nerve  C) Deep branch of ulnar nerve  D) Superficial branch of ulnar nerve  E) Interosseous nerve</p> <p><b>Answer:</b> F, T, T, F, F  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD/P-124]</p>	<p><b>22. Median nerve injury causes</b></p> <p>A) Ape thumb deformity  B) Weak flexion of wrist  C) Loss of pronation of forearm  D) Loss of hypothenar eminence  E) Loss of extension at interphalangeal joint of thumb</p> <p><b>Answer:</b> T, T, T, T, T  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD /P-183]</p>

<p><b>23. Regarding breast -</b></p> <p>A) Is attached to chest wall on pectoral fascia  B) Lactiferous duct is converged to areola  C) Montgomery Tubercle is modified sweat gland  D) Coopers ligament anchors the breast to anterior chest wall  E) Alveolar epithelium is columnar in the resting phase</p> <p><b>Answer:</b> T, F, F, T, T  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD Chaurasia/V-1/P-36-41]</p>	<p><b>24. Regarding Gluteus Maximus Muscle:</b></p> <p>A) Supplied by Superior gluteal nerve  B) Supplied by inferior gluteal nerve  C) Produce lateral rotation of thigh  D) Produce adduction of thigh  E) Is an anti-gravity muscle</p> <p><b>Answer:</b> F, T, T, F, T  <b>Discussion:</b> (Abduction)T  <b>Reference:</b> [Ref: BD/P-69]</p>
<p><b>25. Regarding synovial joint</b></p> <p>A) Present in cervical spine  B) Non-essential of movement  C) Covered by hyaline cartilage  D) Surrounded by synovial membrane externally  E) Internally lined by transitional epithelium</p> <p><b>Answer:</b> F, F, T, F, F  <b>Discussion:</b>  <b>Reference:</b></p>	<p><b>26. A 60 year old woman slips and falls on the bathroom floors.as a result she has a posterior dislocation of the hip joint and a fracture of the neck of femur. rupture of the ligamentum teres capitis femoris may lead to a branch of which of the following arteries?</b></p> <p>A) Medial circumflex femoral  B) Lateral circumflex femoral  C) Obturator  D) Superior gluteal  E) Inferior gluteal</p> <p><b>Answer:</b> C  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD 6th/ P-63]</p>
<p><b>27. After injury to shoulder region,a person cannot performed swimming. which muscle is injured?</b></p> <p>A) Supraspinatus  B) Latissimus dorsi  C) Subclavius  D) Deltoid  E) Infraspinatus</p> <p><b>Answer:</b> B  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD 7th/Page-65]</p>	<p><b>28. A 20 years old patient presented with anorexia, nausea, diarrhoea. He diagnosed as acute appendicitis. Which of the following type of appendix involved?</b></p> <p>A) Retrocolic  B) Subcaecal  C) Pelvic  D) Paracolic  E) Midinguinal</p> <p><b>Answer:</b> C  <b>Discussion:</b>  <b>Reference:</b> [Ref: Bailey &amp; Love/V-2/P-1304]</p>
<p><b>29. What happens in ulnar nerve lesion</b></p> <p>A) All the thenar muscles are paralysed  B) All the lumbricles are paralysed  C) Dorsal interossi are unaffected  D) Plamer interossi are unaffected  E) Adduction of the thumb is affected</p> <p><b>Answer:</b> E  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD 7 th /Page-205]</p>	<p><b>30. During a street fight a 25-year-old man suffered a blow over his right arm. Following that blow, he noticed some weakness in flexion of the elbow and supination of the arm. Which of the following nerves is most likely to be injured?</b></p> <p>A) Median  B) Ulnar  C) Radial  D) Musculocutaneus  E) Axillary</p> <p><b>Answer:</b> D  <b>Discussion:</b>  <b>Reference:</b></p>

<p><b>31. In Erb's palsy which movement of arm &amp; of rearm are lost</b></p> <p>A) Abduction of arm B) Medial rotation of arm C) Pronation of forearm D) Flexor of hand E) Extension of forearm</p> <p><b>Answer:</b> A <b>Discussion:</b> <b>Reference:</b> [Ref: BD/V-1/P-59-60]</p>	<p><b>32. A 25-year-old man attended AEA following a stab wound to the mid-thigh. On assessment, the wound was found to be involving the subsartorial (adductor) canal. Which of the following structures is most likely to be injured in this case?</b></p> <p>A) Great saphenous vein B) Nerve to sartorius C) Nerve to vastus medialis D) Obturator nerve E) Popliteal artery</p> <p><b>Answer:</b> C <b>Discussion:</b> <b>Reference:</b></p>
<p><b>33. A boy fall from height on out stretched hand after some days his thenar muscles is found wasting which nerve most commonly affected</b></p> <p>A) Femoral nerve B) Axillary nerve C) Radial nerve D) Median nerve E) Ulnar nerve</p> <p><b>Answer:</b> D <b>Discussion:</b> <b>Reference:</b> (REF-BD CHAURASIA-6TH-123)</p>	<p><b>34. A Structure starting at the level of the end of axillary artery runs behind the base of the medial epicondyle of the humerus &amp; enters the palm at the radial site of pisiform bone</b></p> <p>A) Radial artery B) Ulnar nerve C) Radial nerve D) Median nerve E) Ulnar Artery</p> <p><b>Answer:</b> B <b>Discussion:</b> <b>Reference:</b> [Ref: BD Chaurasia/V-1/P-110]</p>
<p><b>35. After a fall from a height intrinsic muscle of right hand of a person is paralysed. which nerve root is mainly involved ?</b></p> <p>A) C5 B) C6 C) C7 D) C8 E) T1</p> <p><b>Answer:</b> E <b>Discussion:</b> <b>Reference:</b> [Ref: BD 7th/Page- 59]</p>	<p><b>36. After fall from a height a person lost his sensation lateral side of upper left arm. Which nerve root mainly injured?</b></p> <p>A) C6 B) C7 C) T1 D) T2 E) C5</p> <p><b>Answer:</b> E <b>Discussion:</b> (Lateral side of upper arm is supplied by C5) <b>Reference:</b> (Ref-BD 7th Page 59.)</p>
<p><b>37. After falling on the shoulder, abduction and lateral rotation of the arm of a person is lost. which nerve root mainly injured?</b></p> <p>A) C5 B) C6 C) T1 D) T2 E) C8</p> <p><b>Answer:</b> A <b>Discussion:</b> <b>Reference:</b> Ref-BD 7th/Page-59)</p>	<p><b>38. After severe accident, upward displacement of head of the humerus occurs in a person. which muscle prevents this displacement?</b></p> <p>A) Deltoid B) Biceps Brachii C) Triceps brachii D) Trapezius E) Serratus anterior</p> <p><b>Answer:</b> B <b>Discussion:</b> (Long head of Biceps brachii prevents upward displacement of head of humerus) <b>Reference:</b> (Ref-BD 7th Page 91)</p>

<p><b>39. After sudden pressure on the shoulder from above a person cannot perform pushing and punching actions. Which muscle is mainly injured?</b></p> <p>A) Deltoid B) pectoralis major C) Latissimus dorsi D) Trapezius E) Serratus anterior</p> <p><b>Answer:</b> E</p> <p><b>Discussion:</b> (The serratus anterior is occasionally called the "big swing muscle" or "boxer's muscle" because it is largely responsible for the protraction of the scapula — that is, the pulling of the scapula forward and around the rib cage that occurs when someone throws a punch.)</p> <p><b>Reference:</b> (Ref-BD 7th Page 60)</p>	<p><b>40. All the following parts of the Scapula can be felt except:</b></p> <p>A) acromian process B) crest of spine C) upper border D) inferior angle E) tip of coracoid process</p> <p><b>Answer:</b> C</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> (Ref-BD 7th/Page-9)</p>
<p><b>41. An old woman is unable to invert her foot after she stumbled on her driveway. which of the following nerves are most likely injured?</b></p> <p>A) Superficial and deep peroneal B) Deep peroneal and tibial C) Superficial peroneal and tibial D) Medial and lateral planter E) Obturator and tibial</p> <p><b>Answer:</b> B</p> <p><b>Discussion:</b> (Ref-BD 6th Page 108) (Two muscle is responsible for inversion of foot. Tibialis anterior and Tibialis posterior. Tibialis anterior is supplied by deep peroneal nerve. Tibialis Posterior is supplied by Tibial nerve)</p> <p><b>Reference:</b> (Ref-BD 6th Page 108)</p>	<p><b>42. Femoral pulsation is felt against</b></p> <p>A) Inguinal ligament B) Pubic bone C) Ischium D) Ilium E) Head of femur</p> <p><b>Answer:</b> E</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> [Ref: BD/V-1/P-55]</p>
<p><b>43. Fracture of the neck of the femur results in avascular necrosis of the femoral head, probably resulting from lack of blood supply from which of the following arteries?</b></p> <p>A) Obturator B) Superior gluteal C) Inferior gluteal D) Medial femoral circumflex E) Lateral femoral circumflex</p> <p><b>Answer:</b> D</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> (Ref-BD 6th/Page-63)</p>	<p><b>44. In the fracture of mid shaft of humerus which nerve is commonly injured?</b></p> <p>A) Radial nerve B) Median nerve C) Ulnar nerve D) Musculo cutaneous nerve E) Axillary nerve</p> <p><b>Answer:</b> A</p> <p><b>Discussion:</b></p> <p><b>Reference:</b> [Ref: BD/V-2/P-17]</p>

<p><b>45. Initiation of abduction is caused by</b>  A) Supraspinatus  B) Subscapulari  C) Intraspinatus  D) Trapezius  E) Deltoid  <b>Answer:</b> A  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD/V-1/P-149 + Harold Ellis/P-180]</p>	<p><b>46. Skin sensation and paralysis of muscles on the planter aspect of the medial side of foot. which of the following nerves is most likely damaged?</b>  A) Common peroneal nerve  B) Tibial nerve  C) Superficial peroneal nerve  D) Deep peroneal nerve  E) Sural nerve  <b>Answer:</b> B  <b>Discussion:</b>  <b>Reference:</b> [Ref-BD 6th/Page-80]</p>
<p><b>47. Which Carpal bone ossifies first</b>  A) Triquetral  B) Capitate  C) Lunate  D) Scaphoid  E) Trapezium  <b>Answer:</b> B  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD Chaurasia /V-1/P-26]</p>	<p><b>48. Which hand muscle is supplied by median nerve -</b>  A) Adductor pollicis  B) Abductor digitiminimi  C) Flexor pollicis brevis  D) Palmaris brevis  E) Interosseous  <b>Answer:</b> C  <b>Discussion:</b>  <b>Reference:</b> [Ref: BD Chaurasia/V-1/P-120]</p>
<p><b>49. Which surface marking knowledge important for venesection of logn saphenous vein?</b>  A) Draining into femoral vein  B) Lies in front of medial Maleolus  C) Passing super ficial to the propliteal fossa  D) Venous drainage through perforator  E) Superficial inguinal lymph node lie along  <b>Answer:</b> A  <b>Discussion:</b>  <b>Reference:</b> [Ref: Harold Ellis/P-224-225]</p>	<p><b>50. While performing a radical mastectomy, the surgeon injured the long thoracic nerve, Which of the following muscles will be affected due to injury to the long thoracic nerve?</b>  A) Anterior scalene  B) Middle scalene  C) Serratus anterior  D) Subscapularis  E) Teres major  <b>Answer:</b> C  <b>Discussion:</b>  <b>Reference:</b> Ref: Vishram/2nd/Vol-1/P-]</p>