

Memory Test - Neurology_Class Test_Online_Davidson_Plus_1

Total Mark: 100

Time: 90 Min

<p>1. Causes of pseudobulbar palsy are</p> <p>A) Motor neuron disease B) Cerebral vasculitis C) Gullain-Barre syndrome D) Myasthenia gravis E) Lyme disease</p> <p>Answer: T, T, F, F, F Discussion: Reference: [Ref: Davidson-23rd/Box-25.24/P-1093]</p>	<p>2. Cause of intracerebral haemorrhage</p> <p>A) Ampbetamines B) Cocaine C) Proparolol D) Amyloid angiopathy E) Impaired blood clotting</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1155]</p>
<p>3. Causes of chorea</p> <p>A) Huntington's disease B) Parkinson's disease C) Wilson's disease D) Dentato rubro pallidoluyisian atrophy E) Myasthenia gravis</p> <p>Answer: T, F, T, T, F Discussion: Reference: [Ref : Davidson's 23rd P-1085]</p>	<p>4. Causes of hyper somnolence</p> <p>A) Narcolepsy B) Brain injury C) Restless syndrome D) Parkinsonism E) Depression</p> <p>Answer: T, T, T, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1105]</p>
<p>5. Components of Rosier scale</p> <p>A) Loss of consciousness □ +1 B) Seizure □ +1 C) Speech loss □ +1 D) Visual field defect +1 E) Unilateral leg weakness +1</p> <p>Answer: F, F, T, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1149]</p>	<p>6. Drug causes chorea</p> <p>A) Levodopa B) Ant platelet C) Antiepileptics D) Antipsychotics E) OCP</p> <p>Answer: T, F, T, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1085]</p>
<p>7. Following are the contraindication of lumbar puncture</p> <p>A) Papilloedema B) Space occupying lesion C) Thrombocytopenia D) Hydrocephalus E) Antiplatelet treatment</p> <p>Answer: T, T, F, T, F Discussion: Reference: Ref : Davidson's 23rd P-1076]</p>	<p>8. Following are true regarding tendon reflexes</p> <p>A) Biceps jerk -C5 B) Triceps jerk- C6 C) Supinator jerk - C7 D) Knee jerk -L5 E) Ankle jerk - S1</p> <p>Answer: T, F, F, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1063]</p>
<p>9. Following dugs causes contraceptive failure</p> <p>A) Carbamazepine B) Phenytoin C) Sodium valporate D) Levetiracetam E) Lamotrigine</p> <p>Answer: T, T, F, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1103]</p>	<p>10. Followings are the common cause of ptosis</p> <p>A) 3rd nerve palsy B) Horner's syndrome C) 6th nerve palsy D) Myasthenia gravis E) Dystrophia myotonica</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1091]</p>

<p>11. Function of non-dominant temporal lobe</p> <p>A) Auditory perception B) Melody /pitch perception C) Verbal memory D) Small E) Micturition</p> <p>Answer: T, T, F, T, F Discussion: Reference: [Ref : Davidson's 23rd P-1066]</p>	<p>12. Indication for brain imaging in epilepsy</p> <p>A) Epilepsy starting after the age of 16 yrs B) Seizures having focal features clinically C) Genetic generalized seizures D) EEG showing a focal seizures source E) Central of seizures difficult or deteriorating</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1101]</p>
<p>13. Lewy body found in the</p> <p>A) Nigral cell B) Basal ganglia C) Brainstem D) Cerebellum E) Cortex</p> <p>Answer: T, T, T, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1112]</p>	<p>14. Regarding Bell's palsy</p> <p>A) Most common cause of facial weakness B) Lower motor neuron lesion of 7th nerve within facial canal C) Symptoms develops slowly over weeks D) Antiviral drug is effective if started within 72 hours of onset E) Crocodile tears & synkinesis occur during recovery</p> <p>Answer: T, T, F, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1083]</p>
<p>15. Regarding Botulism</p> <p>A) Caused by neurotoxin of chostridium botulism B) Extremely potent neurotoxin C) Causes asymmetric descending weakness D) Predominantly causes bulbar & ocular palsies E) A polyvalent antitoxin is effective against infantile botulism</p> <p>Answer: T, T, F, T, F Discussion: Reference: [Ref : Davidson's 23rd P-1126]</p>	<p>16. Regarding essential tremor</p> <p>A) Affects bilateral areas & head B) High frequency C) High amplitude D) Positive family history E) 50% respond to alcohol</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1085]</p>
<p>17. Regarding Huntington's disease</p> <p>A) Autosomal recessive disorder B) Progressive behavioral disturbance C) Usually chorea present D) Cognitive impairment leading to dementia E) Diagnosis confirmed by MRI</p> <p>Answer: F, T, T, T, F Discussion: Reference: [Ref : Davidson's 23rd P-1115]</p>	<p>18. Regarding lumbar disc herniation</p> <p>A) Usually precipitated by lifting heavy weight in flexed spine B) Nucleus pulposus may bulge through annulus fibrosus C) The roots most frequently affected are L2, L3 D) Less of lumbar lordosis E) Lasègue sign positive</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1135]</p>

<p>19. Regarding migraine</p> <p>A) More common in female B) Has hormonal influence C) 80% patients have migraine □ aura D) 20% patients have no aura E) Headache is actually severe & throbbing □ photophobia, phonophobia & vomiting</p> <p>Answer: T, T, F, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1096,1097]</p>	<p>20. Regarding occipital lobe lesion</p> <p>A) Distributed vision to one side of midline B) Homonymous hemianopia □ macula sparing C) Monocular blindness D) Difficulty in reading E) Bumping into things</p> <p>Answer: T, T, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1089]</p>
<p>21. Regarding physiological tremor</p> <p>A) Both arms > leg B) Frequency low C) Small (Fine) amplitude D) 50% respond to alcohol E) Enhanced by anxiety ,emotion drugs</p> <p>Answer: T, F, T, F, T Discussion: Reference: [Ref : Davidson's 23rd P-1085]</p>	<p>22. Regarding poliomyelitis</p> <p>A) Usually occurs through nasopharynx B) Incubation period 9-90 days C) Virus infect gray matters of spinal cord, brainstem & cortex D) CSF shows lymphocytic pleocytosis E) Death occur from respiratory paralysis</p> <p>Answer: T, F, T, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1123]</p>
<p>23. Regarding rabies</p> <p>A) Infects CNS & salivary glands of mammals B) Incubation periods varies from 9 days to many C) At onset fever & parasthesia of brte side D) Hydrophobia is characteristic feature E) Terminal hyperthermia is common</p> <p>Answer: T, T, T, T, F Discussion: Reference: [Ref : Davidson's 23rd P-1112]</p>	<p>24. Regarding transverse myelitis</p> <p>A) Acute, demyelinating disorder affecting spinal cord B) Usually post infectious origin C) CSF shows cellular pleocytosis D) Oligoclonal bands present in CSF E) All potentials develop MS</p> <p>Answer: T, T, T, F, F Discussion: Reference: [Ref : Davidson's 23rd P-1110]</p>
<p>25. Regarding upper motor neuron lesion</p> <p>A) Muscle ton increased B) Clonus absent C) Preferentially affects flexors if arm & extension of leg D) Deep tendon reflexes increased E) Planter response –extensor</p> <p>Answer: T, F, F, T, T Discussion: Reference: [Ref : Davidson's 23rd P-1082]</p>	<p>26. A young female presents to you with specific weakness of lower limb with a sensory level at the umbilicus. Upper limb jerks are normal. Where is the lesion?</p> <p>A) C5 B) T1 C) T10 D) L1 E) L5</p> <p>Answer: C Discussion: Reference: Ref: Davidson 23r</p>

<p>27. Dysarthria occurs in lesions of following areas, except</p> <p>A) Cerebellum B) Brainstem C) Upper cranial nerve D) Lower cranial nerve E) Neuro muscular junction</p> <p>Answer: C Discussion: Reference: (Ref: Davidson 23rd, P-1087)</p>	<p>28. Features suggestive of functional disorder except</p> <p>A) Situational provocation of events B) No associated mental health disorder C) Lack of anatomical coherence to neurological symptoms D) Bizarre descriptions of individual symptoms E) Positive Hoover's sign</p> <p>Answer: B Discussion: Reference: (Ref: Davidson 23rd, Box-25.26, P-1095)</p>
<p>29. Hallmark of idiopathic Parkinson's disease is</p> <p>A) Tremor B) Bradykinesia C) Cognitive impairment D) Altered postural reflex E) Dementia</p> <p>Answer: B Discussion: Reference: (Ref: Davidson 23rd, P-1112)</p>	<p>30. In case of essential tremor which one is true?</p> <p>A) Affects bilateral arms, never head B) Appears at rest C) Frequency 3-4 Hz D) Jerky tremor E) Responds to Ethanol</p> <p>Answer: E Discussion: Reference: (Ref: Davidson 23rd, Box-25.16, P-1085)</p>
<p>31. In case of hyperkalemic periodic paralysis which muscle channelopathy occurs?</p> <p>A) Sodium B) Calcium C) Potassium D) Chloride E) Ryanodine receptor</p> <p>Answer: A Discussion: Reference: (Ref: Davidson 23rd, Box-25.94, P-1145)</p>	<p>32. In case of lower limb neurological examination on a patient of multiple sclerosis which one of the following findings is least typical?</p> <p>A) Decreased tone B) Patellar clonus C) Upgoing plantars D) Weakness E) Brisk reflexes</p> <p>Answer: A Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>
<p>33. In case of Millard-Gubler syndrome the lesion is in</p> <p>A) Lateral Medulla B) Medial medulla C) Tectum D) Pontomedullary junction E) Mid brain</p> <p>Answer: D Discussion: Reference: (Ref: Davidson 23rd Box-25.3, P-1072)</p>	<p>34. In case of MRI which one is true?</p> <p>A) Resolution unaffected by bone B) Images vessel anatomy C) Widely available D) Intra arterial angiography E) Ligand binding</p> <p>Answer: A Discussion: Reference: (Ref: Davidson 23rd Box-25.4, P-1073)</p>

<p>35. In case of raised intracranial pressure which cranial nerve is most commonly affected?</p> <p>A) 3rd cranial nerve B) 4th cranial nerve C) 5th cranial nerve D) 6th cranial nerve E) 7th cranial nerve</p> <p>Answer: D Discussion: Reference: (Ref: Davidson 23rd, P-1128)</p>	<p>36. In ER a 23 year old manis presented with jerky movement of upper limbs,aggressive behavior and impaired cognition.Onqueryhis attendant giveshistory that his paternal uncle also has similar symptoms.What may be the possible diagnosis?</p> <p>A) Wilson's disease B) Huntington's disease C) Hunter's disease D) Progressive supranuclear palsy E) Neuroacanthocytosis</p> <p>Answer: B Discussion: Reference: (Ref: Davidson 23rd, P-1115)</p>
<p>37. In lower motor neuron lesion of the facial nerve, which one of the following is true?</p> <p>A) Only causes unilateral facial weakness B) Common following lower respiratory tract illness C) There is objective sensory loss D) Antiviral drugs are moderately effective E) Most patients recover spontaneously</p> <p>Answer: E Discussion: Reference: (Ref: Davidson 23rd, P-1082-83)</p>	<p>38. In mononeuritis multiplex which is not a feature?</p> <p>A) Lesion in multiple nerve roots B) Length dependent pattern C) Vacuities is a common causes D) Associated with anti-GM1 antibodies E) Responds to intravenous immunoglobulin</p> <p>Answer: B Discussion: Reference: (Ref: Davidson 23rd, P-1140)</p>
<p>39. Lateral medullary syndrome is caused by occlusion of which one of the following blood vessel?</p> <p>A) Anterior inferior cerebellar artery B) Posterior cerebral artery C) Lateral sinus thrombosis D) Middle cerebral artery E) Posterior inferior cerebella artery</p> <p>Answer: E Discussion: Reference: (Ref: Past Medicine, 2019 MRCP Part-1)</p>	<p>40. Most common cause of benign brain tumor is?</p> <p>A) Craniopharyngioma B) Pituitary adenoma C) Meningioma D) Neurofibroma E) Ependymoma</p> <p>Answer: C Discussion: Reference: (Ref: Davidson 23rd, Box-25.76, P-1129)</p>
<p>41. Most common cause of positive visual phenomena</p> <p>A) Epilepsy B) Charles Bonnet syndrome C) Migraine D) Cluster headache E) SUNCT</p> <p>Answer: C Discussion: Reference: (Ref: Davidson 23rd, P-1088)</p>	<p>42. Regarding Motor neuron disease which one is true?</p> <p>A) More common in females B) Cognitive and behavioral features are uncommon C) Sensory deficit is prominent D) Spinal fluid analysis is not usually necessary E) Riluzole prolongs median survival to about 5 years</p> <p>Answer: D Discussion: Reference: (Ref: Davidson 23rd, P-1117)</p>

<p>43. Tics occurs in which of the following disease</p> <p>A) Parkinson's disease B) Huntington's disease C) Tourette's syndrome D) Epilepsy E) Torticollis</p> <p>Answer: C Discussion: Reference: (Ref: Davidson 23rd, Box-25.18, P-1085)</p>	<p>44. Which is not a clinical feature of botulism?</p> <p>A) Presence of fever B) Symmetrical neurological deficits C) Patient is responsive D) Normal blood pressure E) No sensory deficits</p> <p>Answer: A Discussion: Reference: (Ref: Davidson 23rd, Box-25.75, P-1126)</p>
<p>45. Which of the following feature is most associated with temporal lobe lesions?</p> <p>A) Astereognosis B) Auditory agnosia C) Visual agnosia D) Disinhibition E) Expressive aphasia</p> <p>Answer: B Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>	<p>46. Which one is not a feature of cavernous sinus thrombosis?</p> <p>A) Proptosis B) Seizure C) Ptosis D) Headache E) Papilledema</p> <p>Answer: B Discussion: Reference: (Ref: Davidson 23rd, Box-26.11P-1162)</p>
<p>47. Which one of the following is least associated with the development of chorea?</p> <p>A) Haemochromatosis B) Ataxia telangiectasia C) Carbon monoxide poisoning D) SLE E) Huntington's disease</p> <p>Answer: A Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>	<p>48. Which one of the following is not a recognized adverse effect of phenytoin use?</p> <p>A) Slurred speech B) Nystagmus C) Gynaecomastia D) Diplopia E) Ataxia</p> <p>Answer: C Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>
<p>49. Which one of the following is not a recognized cause of miosis?</p> <p>A) Old age B) Pontine hemorrhage C) Holmes Adie pupil D) Argyll- Robertson pupil E) Horner's syndrome</p> <p>Answer: C Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>	<p>50. A 34 year old female presents with vomiting preceded by occipital headache of acute onset. On examination she was conscious and alert with photophobia but no neck stiffness. CT brain is reported as normal. What is the most appropriate further management?</p> <p>A) CT brain with contrast B) Repeat CT brain in 24h C) CSF examination D) Cerebral angiography E) MRI of brain</p> <p>Answer: C Discussion: Reference: (Ref: Past Medicine, 2019 MRCP)</p>