

# Neuroscience Past-papers

Up to 2018

Part-1

**Neurosurgery**

# **Neuroscience Final 2018**

## **Neurosurgery**

- 1. What is the most common brain tumor to be associated with calcifications?**

Oligodendroglioma

- 2. Which of the following is false about high ICP?**

Loss of consciousness is an early sign of high ICP

- 3. Which of the following brain tumors is known to seed through the CSF?**

Medulloblastoma

- 4. Which of the following brain tumors has relatively the best prognosis?**

Meningioma

- 5. A patient with neck pain, weakness of biceps muscle, power is 3/5, what is the best next step?**

Anterior discectomy with fusion

- 6. What is the incidence of hydrocephalus in newborns with myelomeningocele?**

80-90 %

- 7. A patient with L4/L5 disc prolapse and the prolapse is far lateral, what is the neurological manifestations associated with it?**

L4 radiculopathy

**8. Which of the following is false about intractable epilepsy?**

In the Jordanian population of 10,000,000, the number of intractable epilepsy cases is 5000 (it should be 1/3 of 1 % of the population).

**9. Which of the following should not be done in the valuation of intractable epilepsy?**

- a) Neurological examination
- b) Psychiatric evaluation
- c) Psychological examination
- d) Endocrinological examination (this might be the answer).

**10. Which of the following causes communicating hydrocephalus?**

Choroid plexus papilloma

**11. A patient with epidural hematoma, how would it appear on CT scan?**

Hyperdense lens-shaped area

**12. Which of the following is false about spinal tumors?**

Meningioma is associated with neurofibromatosis type 1 (it should be NF2)

**13. The prognosis of subdural hematoma is worse than epidural hematoma, why?**

Because it is associated with more severe brain injury

**14. A patient with head injury has a GCS of 14/15, which of the following shouldn't be part of his management?**

- a) Endotracheal intubation and hyperventilation
- b) Admission for ICU for observation**

**15. Which of the following does not cause foot drop?**

Femoral nerve injury

**16. A pregnant lady was informed that her baby has myelomeningocele in an antenatal care clinic, which of the following is not true?**

Folic acid supplementation may reverse this condition

**17. What is the most common spinal cord injury among incomplete injuries?**

Anterior spinal syndrome

**Central spinal syndrome**

**18. Which of the following is not true about skull fractures?**

- a- Linear fractures shouldn't be treated unless complicated
- b- Compound depressed fractures are treated as an emergency
- c- All cases of basal skull fractures are associated with CSF leak (only 4 % of cases)**

**19. Which of the following does not occur in Chiari malformation?**

Large posterior fossa with wide fourth ventricle (this occurs in Dandy Walker syndrome)

**20. A child had VP shunt surgery when he was 40 days old, presented with fever and hypoactivity, which of the following is true?**

- a) Once infection is established, oral antibiotics are enough.
- b) Parenteral antibiotics is the only effective treatment in this case
- c) CT scan has a diagnostic role to exclude infection
- d) Do CSF examination if other causes of fever are excluded.**

**21. Pituitary tumor where medical rather than surgical treatment is the first option?**

Prolactinoma

**22. Brown-Sequard syndrome, which of the following correctly describes it?**

Ipsilateral loss of motor function with contralateral loss of pain and temperature sensation

**23. Which of the following is true about ligamentum flavum?**

It is attached to the inner part of the lamina above (the anterior surface) and the outer part of the lamina below (upper border).

**24. Most common site of Berry Aneurysm?**

Anterior communicating artery.

**25. A patient with benign intracranial hypertension, which of the following is not true?**

- a) OCPs is a risk factor of BIH
  - b) The patient may be treated by acetazolamide for 6 weeks**
  - c) Thecoperitoneal shunt is preferred over VP shunt because the ventricles are small
  - d) Diagnosis follows Dandy criteria
- 

**Neuromedicine**

**1. Which of the following supports the diagnosis of migraine?**

Unilateral throbbing facial pain that develops gradually

**2. Which of the following drugs is associated with Parkinsonism?**

Haloperidol

**3. Which of the following is not a criteria of brain death?**

The patient extends his limbs to painful stimuli

**4. Which of the following is a major sign of motor neuron disease?**

There must be no sensory signs

**5. Which of the following is a demyelinating neuropathy?**

GBS

**6. Which of the following vitamin deficiencies is associated with MS?**

Vitamin D

**7. Which of the following is false about GBS?**

Hyperreflexia

**8. Which of the following is true about essential tremor?**

It's improved by propranolol

**9. Which of the following nerves has parasympathetic fibers?**

Oculomotor nerve

**10. What is the artery associated with lateral medullary syndrome (Wallenberg Syndrome)?**

PICA

**11. Which of the following does not occur in right midbrain infarction (Weber's Syndrome)?**

Left ptosis and outward deviation of the pupil

**12. Which of the following is true about MS?**

Demyelinating disease

**13. A patient with personality changes indicative of frontal lobe lesion, which of the following will be associated with it?**

Grasp reflex (frontal lobe lesions are associated with reemergence of primitive reflexes)

**14. Which of the following is an abnormal finding in LP?**

Opening pressure > 270 cm H<sub>2</sub>O



**15. A 32-year-old lady presented with stroke, which if the following is not a risk factor?**

Her dad had sudden cardiac death at the age of 70

**16. One of the following causes acute dementia?**

Thalamic infarction (The other choices were: CJD, HIV, Huntington's).

**17. Antiepileptic drug that causes kidney stones?**

Topiramate

**18. Which of the following is not a contraindication to do lumbar puncture?**

Previous aspirin use (the other choices were: coma, and other choices indicating that there's focal neurological deficit).

**19. A 23-year-old patient presented with sudden onset of headache, neck stiffness and positive Kernig's sign. CSF examination showed (Protein 1.2 g/L, glucose 2 mg/dL, leukocytosis with 160 PMNs), what's the most likely diagnosis?**

Bacterial meningitis

**20. A patient with left-sided facial weakness and hemiplegia with no sensory deficits, what's the site of the lesion?**

Lacunar infarct in the right internal capsule

**21. Which muscle is responsible for foot inversion?**

Tibialis posterior

**22. Drug used in acute attack of migraine is?**

Ibuprofen

**23. A young primary school girl with frequent loss of consciousness and staring blankly into space, what is the most likely diagnosis?**

Petit mal (absence seizure)

**24. A patient with hemiballismus, where is the lesion?**

subthalamic nucleus

**25. Which of the following is true about polymyositis?**

- a) Associated with heliotrope rash
- b) Increased creatine kinase**
- c) Associated with distal muscle weakness
- d) Patients have diminished deep tendon reflexes

## Neurosurgery 2016

1. Most common tumour with Calcifications: **oligodendrioma**
2. Wrong about brain tumors: **ependymoma is the most common cancer in adults**
3. Not neuroepithelial origin: **hemangioblastoma**
4. ICP monitoring, what is wrong:
  - **There are 4 types of waveforms A,B,C,D \***
  - Complications are infections and hemorrhage, in that order.
5. Complication of shunt: **extradural hematoma**
6. Wrong about refractory seizures: **frontal lobe most common origin**
7. Neck pain, how to confirm disk: **cervical MRI**
8. About aneurysm management: **antifibrinolytics prevents rebleeding??**
9. Newborn known to have Mongolian spot what to do?
  - **Reassurance\***
  - spinal MRI
  - Prepare for surgery
10. Wrong about Spinal canal stenosis: **neurological symptoms are common**
11. Not a sign of increased intracranial pressure: **absent dural sinuses on CT**
12. Cauda equine: **positive Babinski**
13. Sudden onset Headache, seizure, no LOC, twice vomiting, Dx?  
**SAH**
14. What's wrong statement? **Female with benign spine tumor, it's most commonly due to schwannoma**
15. all of following are indications of hemispherectomy in refractory seizure except:
  - sturge weber syndrome
  - rasmussen disease
  - hemispheromegaly
  - **The answer was a syndrome starting with B alphabet (answered by exclusion :D )**

Neurosurgery

1. On this CT , your diagnosis is :
  - a. Subdural hematoma
  - b. Epidural hematoma
  - c. Subarachnoid hemorrhage
  - d. Brain abscess
  - e. Brain tumor
2. In the previous CT , all of the following is true except :
  - a. It's abnormal CT scan
  - b. There is abnormal ventricular systems
  - c. Sulci aren't effaced
  - d.
  - e.
3. All of the following indicate injury at S1 level except :
  - a. Weakened plantar flexion of the ankle
  - b. Weakened dorsiflexion of the four lateral toes
  - c. Upgoing plantar(extensor) reflex
  - d. Hypoesthesia on the lateral border of the foot
  - e. Absent ankle reflex
4. The most common primary brain tumor in adult is :
  - a. Glioblastoma
  - b. Ependymoma
  - c. Meningioma
  - d. Medulloblastoma
  - e. Pituitary adenoma
5. According to WHO classification , which of the following is grade II :
  - a. Anaplastic astrocytoma
  - b. Glioblastoma multiforme
  - c. Fibrillary astrocytoma (old classification)
  - d. Atypical meningioma (new classification)
  - e.
6. The most common route of metastasis in spinal tumors is :
  - a. Spinal seeding through meninges
  - b. Batson plexus
  - c. Direct spreading
  - d.
  - e.
7. The most common cervical injury is :
  - a. Degenerative
  - b. Transverse myelitis
  - c. Spondyloarthropaties
  - d.
  - e. Traumatic
8. Percentage of radiological vasospasm is :
  - a. 20%
  - b. 30%
  - c. 40%
  - d. 50%
  - e. 60%

9. The most common cause of hydrocephalus in children is :
- Congenital aqueductal stenosis**
  - Choroid plexus papilloma
  - Temporal lobe lesion
  - 
  -
10. One of the following isn't a complication of VP shunt :
- Infection
  - Electrolyte imbalance**
  - Displacement
  - 
  -
11. 50 year old male present with sudden onset morning headache & vomiting ,it was occipital , which of the following is correct :
- Nature of headache is tension-like
  - Consider migraine prophylaxis
  - This patient has Papilledema**
  - 
  - If there is neck stiffness , maybe he is having meningitis
12. All of the following can cause spinal canal stenosis except :
- Multiple osteophytes
  - Ligamentum flavum hypertrophy
  - Facet joint hypertrophy
  - Denticulate ligament hypertrophy**
  - Multiple disc bulges

13. Concerning epilepsy surgery , all of the following are correct except
- - 
  - 
  - Epileptic surgery associated morbidities are higher than that of other neurosurgical procedures**
  -
14. About CSF , all of the following are correct except :
- It's formed solely by choroid plexus**
  - Protein concentration is about 40mg/dL
  - 
  - 
  -
15. One of the following is correct about cerebral circulation :
- Cerebral circulation is controlled mainly by ANS.**
  - cerebral vasoconstriction occurs when blood pressure rises
  - 
  - 
  -
16. In subarachnoid hemorrhage , which one of the following is wrong
- - 
  - 
  - Berry aneurysm is symptomatic in most cases**

17. About spinal cord , All of the following are correct except :

- a. Denticulate ligament is formed by condensation of subarachnoid matter
- b.
- c.
- d. Artery of Adamkiewicz supplies the thoracic vertebrae
- e.

1- all are false about acute subdural hematoma except (= what is true)

- a. the blood clot is found between the skull and meninges
- b. most of the manifestations are due to the presence of the blood clot
- c. it is more dangerous than extradural hematoma\*\*
- d. treatment is by removal of the hematoma and excision of the affected brain area? using burr hole

2- what is the most common posterior fossa tumor in adults?

- a. ependymoma
- b. astrocytoma
- c. vermis medulloblastoma or something like that
- d. hemangioblastoma \*\*

3- before epileptic surgery, all of the following investigations should be done EXCEPT

- a. inter-ictal EEG
- b. video EEG
- c. brain MRI
- d. SPECT
- e. WADA test\*\*

4- all of the following are complications of vagal nerve stimulation EXCEPT

- a. dysphonia
- b. dysphasia\*\* ?
- c. dyspnea
- d. cough
- e. hoarseness

5- a disk prolapse at L4/L5 ? which of the following will happen

- a. knee reflex absent
- b. dorsiflexion of the foot weaker\*\*
- c. positive Babinski

6- a man with chronic low back pain, presented with acute pain and sciatica over the lateral leg and dorsum of foot and big toe, of 12 hours duration, +ve straight leg raise on lt. side, no other neurologic findings, what is true: cauda equine can't be excluded mostly he has L4/5 prolapse\*\* MRI should be done urgently Conservative treatment less than 20% respond

7- Jefferson fracture:  
Is a fracture of C1 vertebra\*\*  
Fracture of odontoid  
Fracture of C7

8- Most common location of intracranial meningioma:  
Parasagittal\*\*

9- In severe head injuries, which of the following is done to decrease ICP in order of safety?

- a. IV mannitol, hyperventilation, barbiturate coma, hypothermia?\*
- b. hyperventilation, mannitol, coma and hypothermia
- c. barbiturate coma, mannitol, hypervent (they are all the same but with different orders)

10- In benign intracranial hypertension, which is false:

- a. Intracranial pressure is >20
- b. Papilledema is always present
- c. There is a space occupying lesion in most cases\*\*
- d. Carbonic anhydrase inhibitor is part of the treatment
- e. LP shunt is effective

11- not an early complication of the SAH(something like that)  
a-re-bleeding  
b-Vasospasm\*\*  
c- hydrocephalus  
d-hyponatremia

12- M.e. vertebrae involved in a RTA:  
a-cervical \*\*  
b-thoracolumbar  
c-lumbar  
d-thoracic

13- Epidural hematoma what is the least affected age group:  
a-15-30  
b- >60\*\*  
c-mid age men  
d-mid age women

14- Which of the following does not cause cauda equina syndrome:  
a. transverse process fracture\*\*  
b. central disc prolapse  
c. A hematoma developing after laminectomy

15- a question about myelomeningocele: wt is wrong  
a- 85% of myelomeningocele have hydrocephalus  
b- 15% of meningocele have hydrocephalus  
c- most of patient with myelomeningocele have arnold chiari II \*\*\* ( el 3x s7ee7)

16- a lady came to you with 2 year history L.L weakness something like that .... ,the most likely Dx is:  
a-Breast CA  
b-spinal meningeoma\*\*  
c-schwannoma

17- wrong about SAH:  
LP is the only way to detect blood\*\*



## 2013

52. Medulloblastoma, which is not poor prognosis:

- a. no evidence of residual tumor after resection

53. wrong abt myelomeningocele

e agensisof corpus callosum

G associatedwith arnold- chiari malformation

G 85% associatedwth aqueductal stenosis  
main pathology is the absenceof vertebral arch

1& associatedwith tethered cord

54. depressed fracture--> do not elevate if less than the thickness of adjacent bone

- cosmetic

55. WHO classification of astrocytoma III (three)

- a. anaplastic

56. all are risk factors of meningioma except

- b. recurrent meningitis
  - c. trauma
  - d. radiation
  - e. female
- answer : a

57. Most common spinal tumor

- a.extradural Metastasis b.epyndemoma
- c.astrocytoma d.meningioma

58. a 60 year old female patient ... gradual pain over the past 2 months--> spinal meningioma

59. increase in ICP,all true except:

- a. WIDEsella turcica
- b. Eroded clenoid process
- c. Thumb prints
- d. Enlargedskull

60. Headtrauma with rhinorrhea, otorhea, which is wrong:

- b. Treatment of choice is LPshunt
- c. do lumbar drain
- d. most of them resolve spontaneously
- e.

61. all are prognostic factors of cerebral aneurysm except : age - general medical status...- size - hessand huntfisher

62. most common affected cranial nerve by injury: olfactory, abducent, facial, vagus, "The olfactory nerves. These are the most commonly affected and this may be as a result of either a fracture through the anterior cranial fossa, directly affecting the tracts, or tearing of the delicate nerve rootlets passingthrough the cribriform plate caused by the sudden brain movement, particularly from a blow to the back of the head." Neurosurgery essentials

63. Epilepsysurgery, all are good prognostic signs except: Localized,temporal lobe, central

64. classicextradural hematoma :.. LOCthen period of Lucid interval

65. subdural hematoma has poorer prognosis than epidural hematoma: cause its associated more severe head injury

66. wrong about 3rd ventriculostomy:a. infection less than shunt b.need to revise is less c.bleeding is more

67. late complication of SAH(not occurring before 72 hours) is:

- a. hypernatremia
- b. vasospasm
- c. rebleeding

68. most common indication for surgery -7  
a.neurological deficit b.intractable sciatica  
c.cauda equina surgery

66- Percentage of brain tumors within all body tumors:

- a- 2%
- b- 4%
- c- 6%
- d- 8%
- e- 10%

67- Headtrauma in RTAis:

- a- 20%
- b- 40%
- c- 60%
- d- 80%
- e- 90%

68- a patient has moderate head injury, the GlascoComaScaleis:

- a- below 6
  - b- below 8
  - c- 9 -12
  - d- 13-15
  - e- 14-15
- c

69- Concerning epidural hematoma all the following statements are true except:

- a- Characteristic biconvex shape
- b- Represent 3 % of all head injuries
- c- Rare to be seen before 2 years and those older than 60 years
- d- Have the characteristic lucent interval in 2/3 of cases
- e- Most common in the parietal lobe

70- all of the tumors are more common in males except:

- a- glioblastoma multiforme
- b- astrocytoma
- c- medulloblastoma
- d- pineocytoma

71- about meningioma wrong

- a- mets is common\*\*
- b- estrogen receptors

72- associated with high velocity pelvic fracture

- a- head injury
  - b- liver injury
  - c- peripheral nerves injury
  - d- spleen injury
- c

73- dandy walker wrong

a- small post fossa

74- medulloblastoma wrong

- a- radiosensitive
  - b- radiate whole cord
  - c- chemo resistant
- c

75- pt with headache vomiting stupor papilledema ..not likely caused by the following tumor

- a- 3rd ventricle
- b- choroid papilloma
- c- pseudotumor cerebri
- d- temporal

76- fracture to the body of vertebra most likely by

- a- flexion
- b- extension
- c- spinal stenosis
- d- spondylothesis

77- saccular aneurysm wrong

a- external lamina defect

78- saccular not risk factor

- a- marfan
  - b- down
  - c- HTN
  - d- atherosclerosis
- c

79- pt post RTAmild head injury with dementia the following few weeks ..cause  
a- chr. subdural hematoma  
b- intracerebral hematoma  
a

80- wrong about pituitary adenoma  
a- microadenoma less than 1 cm  
b- hyperprolactin m.c  
c- more in 40- 60 yo  
c

81- wrong about muscle strength  
a- zero no any  
b- 1 fasciculation  
c- 2 against gravity  
d- 5 full  
c

82- about contusion  
a- less happen in children  
b- frontal lobe most commonly  
c- accel-decelar

83- MRI is better than (T by all except  
a- hair fracture at temporal bone  
a

## Neurosurgery

1995

- 1- Incidence of myelomeningocele is:
  - a- **0.5-2/1000 birth**
  - b- 2-5/1000 birth
  - c- 5-15/1000 birth
  - d- 15-25/1000 birth
  - e- 25-35/1000 birth
- 2- Incidence of rupture cerebral aneurysm is:
  - a- 15-20/10000/year
  - b- 10-15/100000/year
  - c- 6-12/100000/year
- 3- Cerebral aneurysm of grade 1 after 3 months, incidence of death:
  - a- **2-5%**
  - b- 0-1%
  - c- 25%
  - d- 3.5%
- 4- One is not a manifestation of subarachnoid hemorrhage:
  - a- Headache
  - b- Neck stiffness
  - c- LOC
  - d- **Vertigo**
  - e- Vomiting
- 5- One is false about froins syndrome:
  - a- **Increase cell in CSF**
  - b- Increase protein
  - c- Xanthocromic
  - d- Clots
- 6- Patient with complete block at T5 compression in jugular vein and release of pressure during LP:
  - a- Rapid increase and rapid fall
  - b- Rapid increase and no fall
  - c- No increase and rapid fall
  - d- **No increase and on fall**
- 7- Transtentorial herniation at level of mid brain will affect all except:
  - a- Papillary size
  - b- Motor system
  - c- Respiratory system
  - d- Eye movement
  - e- Level of conciusness

- 8- One will cause calcification:
  - a- Oligodendroglioma
  - b- Ependymoma
  - c- **Both**
- 9- One is false about meningocele:
  - a- Cystic cavity of CSF lined with meninges or skin with no newel tissue
  - b- **More common than meningocele**
  - c- Transillumination is helpful
- 10- Intracranial pressure is:
  - a- Systolic + cerebral perfusion (CCP)
  - b- Systolic – cerebral perfusion
  - c- Mean arterial + CPP
  - d- **Mean arterial – CPP**
- 11- A patient with headache, blurring of vision, Rt homonymous hemianopia with loss of light reflex the lesion is in:
  - a- Frontal
  - b- Temporal
  - c- Parietal
  - d- **Occipital**
  - e- Corpus callosum
- 12- One is not seen in increase ICP:
  - a- Erosion of posterior clenoid
  - b- Thumb-eaten appearance
  - c- Erosion of dorsal sella
  - d- **Shallow posterior fossa**
  - e- Widening of sutures

1996

- 1- Most common first presentation of spinal tumor in children:
  - a- Gait
  - b- Sensory deficit
  - c- **Pain**
  - d- Motor deficit
  - e- Sphincter problem
- 2- All tumors has male predominance except:
  - a- **Neuroma**
  - b- Ependymoma
  - c- Medalloblastoma
  - d- Glioblastoma multiform

- 3- Neurofibroma all except:
  - a- **Usually in motor roots**
  - b- Arise from lateral or posterior side of spinal cord
  - c- May lead to increase of intravertebral foramen
- 4- Increase ICP all except:
  - a- Thumb imprenion (x-ray)
  - b- Wide suture
  - c- Skull enlargement
  - d- Erosion of posterior clenoid
  - e- **Enlargement of sella turcica**
- 5- 50 year old femal presented to ER with sudden onset sever headache and photophobia on exam, neck stiffness, Dx:
  - a- **Subarachnoid hemorrhage**
  - b- Meningitis
- 6- Hydrocephalum, shunt, complication all except:
  - a- Meningitis
  - b- Shunt rejection
  - c- Ventriliutis
  - d- **Subdural hematoma**
  - e- Epilepsy
- 7- Meningomyelocele, aims of treatment all except:
  - a- Plastic appearance
  - b- Decrease CSF leak
  - c- Prevent infection
  - d- **Prevent further neurological deficit**
- 8- Cushing's syndrome can be due to all except:
  - a- Adrenal tumor
  - b- Pit tumor
  - c- Lung tumor
  - d- **Breast CA**
  - e- Teratogenic
- 9- Subdural hematoma one is true:
  - a- Usually its prognosis is worse than extradural hematoma
  - b- **Arises from meningeal vessels**
  - c- Treatment of choice to evacuate hematoma and excisin of lacerated necrotic tissue by Burr holes
- 10- Epilepsy occurs post trauma due to all except:
  - a- Depressed fracture
  - b- Intracranial hematoma
  - c- **Dural tear**

2002/2003

- 1- In lateral herniation the structure damaged is:
  - a- **Uncus**
  - b- Tonsils
  - c- Brainstem
  - d- Cerebellum
- 2- Regarding myelomeningocele which is incorrect:
  - a- Associated with hydrocephalus in 80% of cases
  - b- **Male predominance**
  - c- Occurs during the first month of pregnancy
  - d- Associated with diastatomyelia
- 3- A 60 year old man, developed back pain followed by paraparesis then developed to paraplegia over 6 hours, on CXR, he had a hilar mass which of the following is most likely the diagnosis:
  - a- Extradural extramedullary neoplasm
  - b- Extradullary intradural neoplasm
  - c- Intramedullary intradural neoplasm
  - d- Hematomyelia
  - e- **Transverse myelitis**
- 4- Regarding spontaneous SAH, all are correct except:
  - a- Rebleeding may occur in following 3-10 days
  - b- **Vasospasm may occur in the following 1-3 days**
  - c- Conservative management is recommended in stage 1
- 5- An aneurysm in which of the following is most likely to cause unilateral 3<sup>rd</sup> cranial nerve palsy:
  - a- Anterior communicating artery
  - b- **Posterior communicating artery**
  - c- Middle cerebral artery



2003/2004

- 1- All are associated with spinal neurogenic shock except:
  - a- Dry skin
  - b- Warm skin**
  - c- Paralysis
  - d- Hypotension
- 2- All are true about benign intracranial HTN except:
  - a- High CSF open pressure
  - b- High CSF protein**
  - c- Young obese females
  - d- Best treatment is by LP shunt
  - e- CT shows small or normal sized ventricles
- 3- Which is true about subdural hematoma?
  - a- Blood between skull and dura
  - b- Worse prognosis than EDH**
  - c- Blood from meningeal artery
  - d- Best treatment is by Burr holes and evacuation
- 4- All can indicate the level of disc prolapsed except:
  - a- Muscle weakness
  - b- Absent reflex
  - c- Absent Babinski**
  - d- Radiation of pain
  - e- Dermatomal distribution of sensory loss
- 5- Which is incorrect about saccular aneurysm?
  - a- Most common aneurysm
  - b- Multiple in 20% of cases
  - c- Pathology is defective external lamina**
  - d- Mostly at bifurcation of arteries in the base of the brain
  - e- 90% in anterior circulation
- 6- Which is incorrect about subarachnoid hemorrhage?
  - a- Occurs only in adults**
  - b- Associated with sudden onset headache
  - c- Aneurismal hemorrhage has poorer prognosis than AVM
  - d- Surgery is not done for stage 4
- 7- The most common posterior fossa tumor with calcification is:
  - a- Ependymoma
  - b- Medulloblastoma
  - c- Pilocytic astrocytoma**
  - d- Choroid plexus papilloma

- 8- A 45 year old female, complaining of progressive back pain, LL paraparesis and LL hyposthesia over 2 years. The most likely is:
- a- Breast cancer metastasis
  - b- Spinal meningioma**
  - c- Spinal neurofibroma
- 9- About Dandy-Walker malformation, which is not true:
- a- Absent or hypoplastic cerebellar vermis
  - b- Post. Fossa cyst communicates with 4<sup>th</sup> ventricle
  - c- Associated with hypocephalus
  - d- Small post. Foss**
  - e- Can be associated with polydactaly
- 10- About meningioma, which is not true?
- a- Usually metastatizes**
  - b- Hx of radiation
- 11- About medulloblastoma, which is wrong?
- a- Resistant to CTX**
  - b- Occurs in children < 15 years old
  - c- Need neuraxis radiation
  - d- CSF seeding
- 12- About SAH, which is not true?
- a- F > M
  - b- Rebleeding mostly occurs in the 1<sup>st</sup> 3 days
  - c- Surgery aims at preventing rebleeding
  - d- Rebleeding partly occurs due to fibrinolytic activity in CSF
  - e- The only way to demonstrate blood in CSF is by LP**
- 13- All causes communicating hydrocephalus except:
- a- Meningitis
  - b- Aqueductal stenosis**

"تمت بحمد الله... والله الموفق"

# Part-2

## **Neurology**

24/5/2015

- 1- Which of the following drugs can be used to treat essential tremor:  
carbamazepine  
phenytoin  
**topiramate**  
lamotrigine  
valproate
- 2- Which of the following is wrongly mismatched:  
topiramate:focal epilepsy  
valproate: general epilepsy  
**haloperidol: Parkinson**
- 3- Which of the following is not seen in thrombosis of left MCA:  
vertigo  
left horner's syndrome  
dysphagia  
dysarthria  
**loss of right facial sensation**
- 4- The most common cause of pseudodementia in elderly is:  
-drug intoxication  
**-depression**  
-alzheimers
- 5- The most important risk factor for lacunar infarct is:  
diabetes  
**chronic HTN**  
hypothyroidism  
dyslipidemia  
smoking
- 6- The nerve responsible for foot eversion is:  
deep peroneal nerve  
**superficial peroneal nerve**  
tibial nerve  
femoral nerve  
sciatic nerve
- 7- The muscle that causes hip abduction is:  
gluteus maximus  
**gluteus medius**  
quadriceps femoris  
iliopsoas

- 8- All of the following can be caused by lacunar infarct except:  
 pure motor  
 pure sensory  
 ataxia hemiparesis  
**broca's aphasia**  
 multi-infarct dementia
- 9- All of the following causes autonomic dysfunction except:  
 Diabetes  
 multiple system atrophy  
 gullian barre syndrome  
 lambert-eaton syndrome  
**sjogren's syndrome**
- 10- A patient with bacterial meningitis, lumbar puncture is contraindicated in all of the following except:  
 witnessed seizures  
**had a head injury 1 year ago with transient loss of consciousness**  
 right hemiparesis  
 decreased level of consciousness  
 papilledema
- 11- All of the following have proven benefit in treating Parkinson except:  
 L-dopa  
 selegiline  
 promipexole  
**vitamin E**  
 amantadine
- 12- a patient with fever, headache, CSF showed increased lymphocytes, slightly elevated protein, normal glucose, no RBCs. MRI showed left temporal lobe abnormality, the CSF will also show which of the following:  
 indian ink for cryptococcal meningitis  
 gram stain for diplococcal strep  
 acid-fast stain for TB  
**HSV DNA by PCR**
- 13- a 63 year old women with saddle nose deformity, left ear otitis media, multiple peripheral nerves are affected, ESR 108, creatinine elevated (the same case is written at the end of chapter 19), what's the most likely diagnosis:  
 polyarteritis nodosa  
 rheumatoid arthritis  
**Wegner's granulomatosis**  
 Polymyositis

- 14- which of the following is true about cluster headache:  
duration 6-8 hours  
more common in females  
pain is in the parietal area  
**subcutaneous sumatriptan can be used in acute attacks**
- 15- which of the following neurobiochemical abnormality occur in Parkinson:  
dopaminergic excess  
cholinergic deficiency  
**cholinergic excess**  
serotonin deficiency
- 16- what is wrong about Wilson's disease:  
**increased ceruloplasmin**  
may present as jaundice in childhood
- 17- what is not part of the MMSE(mini-mental state examination):  
orientation  
**neglect**  
registration  
language  
attention
- 18- a patient with recurrent tonic clonic seizures, and myoclonus in the morning, whats the treatment:  
carbamazepine  
**valproate**  
phenytoin  
topiramate
- 19- which of the following indicate a spinal cord injury  
sensory inattention  
**a sensory level**
- 20- a tuning fork was put on the forehead will help you:  
see the bigger external ear  
the ear with the highest frequency range  
**to detect conductive and sensory hearing loss**
- 21- a patient with lower limb weakness and a T12 sensory level, had an MRI of the lower thoracic and lumbar spine and it was normal, the next step in management is:  
**MRI of cervical and upper thoracic**

22- the antibiotic used for prophylaxis of meningococcal meningitis is:

**Rifampicin**

ceftriaxone

ampicillin

vancomycin

23- which of the following is a Normal CSF finding:

**protein 0.1-0.4g/L**

300mm H<sub>2</sub>O pressure

15 WBC

oligoclonal bands

24- all of the following causes subarachnoid hemorrhage except:

rupture of berry aneurysm

**rupture of charcot-bochard aneurysm**

mycotic aneurysm

AV malformation

trauma

25- the most sensitive test for relapsing remitting MS is:

**MRI**

Visual evoked potentials

CSF assay

CT

26- which of the following is true about MS:

more common in tropical areas

more common in males

**its characterized by an inflammatory demyelination of CNS and spinal cord**

it's a disease of the gray matter

27- all of the following are features of ALS except:

fasciculations

may have dysphagia and dysarthria

affects both UMN and LMN

**hermitte sign**

28- Not found in relapsing remitting MS:

progressive bladder dysfunction

**recurrent tonic clonic seizures**

optic neuritis

29- EEG waves in a relaxed man with eyes closed will have a frequency of:

0-4 Hz

5-8 Hz

**8-13 Hz**

14-25 Hz

26-42 Hz

30- All can be seen in gullian-barre syndrome except:

respiratory dysfunction

bilateral facial weakness

**bilateral internuclear ophthalmoplegia**

31- Which of the following causes irreversible Parkinson:

LSD

**MPTP**

barbiturates

32- All of the following causes reversible dementia except:

B12 deficiency

**creutzfeldt-jakob disease**

HIV dementia

hypothyroidism

normal pressure hydrocephalus

33- All are true about Alzheimer's disease except:

characterized pathologically by neurofibrillary tangles and neuritic plaques

most common cause of dementia overall

**anticholinergic drugs are used to treat memory loss**

34- All of the following can be causes of gullian-barre syndrome except:

HIV

**TB**

CMV

mycoplasma pneumonia

campylobacter

35- A patient came to the ER with stroke, the most important test to do is:

MRI

CT with contrast

**CT without contrast**

EEG



36- All of the following are causes of lower motor neuron facial palsy except:

- bell's palsy
- parotid tumor
- sarcoidosis
- midbrain infarction**
- herpes zoster

37- All of the following are true about migraine headache except:

- occurs at the end of the week
- duration is 2 hours**
- throbbing in nature
- unilateral

38- A person with bitemporal hemianopia, where is the lesion:

- optic nerve
- optic radiation
- optic chiasm**
- retina

39- A patient with Wernicke's aphasia, thrombosis of which artery caused it:

- internal carotid artery**
- PICA
- AICA
- basilar artery

40- A woman with Breast cancer had left lower limb weakness with hyperreflexia and Babinski sign, loss of proprioception in left leg, loss of pain and temperature in right leg, what's the diagnosis:

- gullian-barre syndrome
- brown sequard syndrome**
- lambert-eaton

41- Damage to the left temporal lobe will result in:

- expressive aphasia
- global aphasia
- receptive aphasia**
- dyscalculia

42- All of the following causes pseudobulbar palsy only except:

- Motor neuron disease**
- myasthenia gravis
- carcinomatous meningitis
- syringobulbia

43- which of the following doesn't cause tunnel vision:

chronic glaucoma

retinitis pegmintosa

hysteria

bilateral cortical hemianopia with macular sparing

**infarction of the lateral geniculate body**

44- a 57 year old male, with htn and smoker, had recurrent seizures, all are part of investigations of seizures except:

EEG

CT

MRI

**chest xray**

CSF

45- One of the following not in vegatitive state:

**-dilated and fixed pupils**

-severe brain damage

-cycles of eye opening-closure as in sleep cycles

-intact brain stem

1. Which one of the following muscles is responsible for ankle eversion :
  - a. Peroneus longus muscle
  - b. Tibialis posterior
  - c. Tibialis anterior
  - d.
  - e.
2. Which one of the following muscles is responsible for ankle dorsiflexion
  - a. Peroneus longus
  - b. Tibialis anterior
  - c. Tibialis posterior
  - d.
  - e.
3. All of the following nerves are mixed(sensory and motor) except :
  - a. Sural nerve
  - b. Femoral nerve
  - c. Sciatic nerve
  - d. Tibial nerve
  - e. Peroneal nerve
4. Which nerve is associated with claw hand deformity ?
  - a. Radial nerve
  - b. Ulnar nerve
  - c. Median nerve
  - d. Anterior interosseus
  - e. Posterior interosseus
5. Tumor invading apex of the lung (Pancoast tumor ) will affect which of the following
  - a. C4 and C5
  - b. C5 and C6
  - c. C6 and C7
  - d. C8 and T1
  - e. T1 and T2
6. All of the following are associated with Horner's syndrome except :
  - a. Syringomyelia
  - b. Internal carotid artery dissection
  - c. Posterior communicating artery aneurysm
  - d. Cluster headache
  - e. Tumor invading apex of the lung
7. Friedrieh's ataxia is not associated with :
  - a. Truncal ataxia
  - b. Limb ataxia
  - c. Dementia
  - d. Loss of position
  - e.
8. All of the following are associated with acute cognitive deficit exept :
  - a. Thalamic infarct
  - b. Huntington's disease
  - c. HIV
  - d.
  - e.
9. All of the following are risk factors for Alzheimer's except :
  - a. Poor education
  - b. Age
  - c. Apolipoprotein E4
  - d. Down's syndrome
  - e. Male gender
10. Lesion in which one of the following sites will cause PURE sensory deficit ?
  - a. Thalamus
  - b. Basilar pontis
  - c. Internal capsule
  - d.
  - e.

11. A 16-year-old female previously healthy , went to her exam today where she had tonic-clonic convulsions , she denied any previous similar attacks when asking her mother : she said that she didn't sleep enough yesterday , and on the morning her mother noticed morning jerking upon waking up , what's the most likely diagnosis ?
- Pseudoseizures (retro-convulsions and hysteria)
  - Petit-mal epilepsy
  - Myoclonic juvenile
  - Grand-mal epilepsy on waking up
  - Complex partial seizure with secondary generalization
12. Drug that is associated with triad of hirsutism, weight gain and tremor ?
- Lamotrigine
  - Sodium valproate
  - Carbamazepine
  - Topiramate
  - Phenytoin
13. A 55-year-old female , had trigeminal neuralgia (case mentioned not the exact diagnosis) , what is the primary treatment ?
- Indomethacin
  - Sodium Valproate
  - Carbamazepine
  - Ethosuximide
  - e.
14. In patient who had contact with other patient whose infected with meningococcal meningitis , what drug to give prophylactically for the first patient ?
- Isoniazid
  - Rifampicin
  - Penicillin G
  - Ethosuximide
  - Tetracycline
15. all of the following drugs are used in PROPHYLAXIS of migraine except :
- valproate
  - ibuprofen
  - flunarizine
  - verapamil
  - amitriptyline
16. A 9-year-old female , a case of absence seizure (case mentioned not the exact diagnosis) , drug of choice is :
- Sodium valproate
  - Carbamazepine
  - Topiramate
  - Phenytoin
  - Lamotrigine
17. Which of the following is true about myasthenia gravis :
- Presynaptic block by anti-Ach Abs
  - Postsynaptic block by Anti-Ach receptor Abs
  - c.
  - d.
  - e.
18. Which of the following drugs/chemicals will cause irreversible features of Parkinson ?
- LSD ( lysergic acid)
  - MPTP
  - c.
  - d.
  - e.
19. About Parkinson , what is TRUE :
- Triad of tremor, bradykinesia and spasticity
  - Most common at age of 45
  - The aid of treatment is to increase dopamine levels
  - d.
  - e.

**20. Most common cause of myopathy before age of 40 is :**

- a. Cervical spondylosis
- b. Myasthenia gravis
- c. Multiple sclerosis
- d.
- e.

**21. Patient who is right handed , a lesion in the left parietotemporal area will cause :**

- a. Expressive aphasia
- b. Receptive aphasia
- c. Gait apraxia
- d.
- e.

**22. Hemiballismus is related to lesion in :**

- a. Subthalamic nucleus
- b. Caudate nucleus
- c. Putamen
- d. Nucleus basalis
- e.

**23. Regarding Alzheimer's , all are true except :**

- a. Common in all ages , and increased in elderly
- b. Characterized by intracellular neurofibrillary tangles and extracellular neuritic plaques
- c. Death of neurons in hippocampus , temporal neocortex and nucleus basalis of mynert
- d. Early course of disease is controlled by anticholinergic drugs
- e.

**24. About multiple sclerosis , one of the following is true :**

- a. Most common course is progressive
- b. Characterized pathologically by axonal degeneration
- c. More common in temperate area
- d.
- e.

**25. All of the following injuries are associated with sensory loss except :**

- a. Axillary nerve injury
- b. Anterior horn at C8
- c. C8 root injury
- d.
- e.

**26. Left hemi-dissection at thoracic level (Brown-sequard) , all of the following are true except :**

- a. Left lower spastic paresis
- b. Loss of position and vibration sensation in the left lower limb
- c. Loss of pain and temprature sensation in the left lower limb
- d. Loss of pain and temperature sensation in the right lower limb
- e. +ve Babinski reflex in the left lower lib

**27. Parient developed vomiting , photophobia , on examination only neck stiffness , nothing else , his CSF was as the following (normal pressure , elevated proteins , normal glucose levels , elevated WBC (100%lymphocytes)) what's your diagnosis**

- a. Tuberculous meningitis
- b. Herpes simplex encephalitis
- c. Bacterial meningitis
- d. Cryptococcal meningitis
- e. Viral meningitis

**28. Regarding CSF which of the following is true**

- a. Up to 5 neutrophils/microliter
- b. 160 cm CSF pressure
- c. 30 mg/dl glucose (blood 110 mg/dl)
- d. 80 mg/dl proteins
- e. Oligoclonal bands can be found in the normal CSF content

**29. Most important modifiable risk factor that can be controlled in stroke is :**

- a. Hypertension
- b. Hypercholesterolemia
- c. Smoking
- d. Diabetes
- e.

**30. Most common cause of seizures(epilepsy) in elderly is :**

- a. Primary tumor
- b. Tumor metastasis
- c. Stroke
- d.
- e.

**31. All of the following can cause multifocal neuropathy except :**

- a. SLE
- b. Vasculitis
- c. Hereditary neuropathy with pressure injury tendency
- d. Isoniazid
- e. Malignant infiltration

**32. Regarding stroke , all of the following are true except :**

- a. Seizure is one of the common complications of stroke
- b. Dementia is one of the common complications of stroke
- c. Medical treatment is very effective in reversing the resultant disabilities of stroke
- d.
- e.

**33. All of the following can be caused by Vit. B12 deficiency except :**

- a. Subacute combined degeneration of the cord
- b. Polyneuropathy
- c. Dementia
- d. Optic atrophy
- e. Cerebellar degeneration

**34. Regarding Guillain-Barre syndrome, all are true except :**

- a. Hyperreflexia
- b. Alternating blood pressure
- c. Diarrhea helps you in your diagnosis
- d. Progressive weakness over one week
- e.

**35. 24 - years - old female developed weakness on right side , previously healthy , which of the following isn't considered a risk factor for her condition**

- a. History of DVT
- b. History of OCPs use
- c. Her dad died at 70 years old due to stroke
- d.
- e.

**36. A 70-year-old male previously healthy , he developed a right sided hemiparesis of one week duration , on examination : no sensory disturbance , cranial nerves examination is normal . where is the site of lesion ?**

- a. Right inferior cerebral artery
- b. Right lacunar infarct in the internal capsule
- c. Left internal infarct in the internal capsule
- d.
- e.

**37. All of the following cause pseudotumor cerebri except :**

- a. Disorders of calcium metabolism
- b. SLE
- c. Hypervitaminosis E
- d. Tetracycline
- e. Intracranial venous sinus thrombosis

e.

**38. All of the following are considered cerebellar signs except :**

- a. Hypotonia
- b. Dysmetria
- c. Dyarthria
- d. Postural tremor
- e. Decreased rapid alternating hand movements

**39. Regarding essential tremor , all are true except**

- a. Positive family history
- b. It's a rest tremor
- c. Decreased by small amount of alcohol
- d. Improved with propranolol
- e.

**40. Regarding essential tremor , what is true :**

- a.
- b.
- c.
- d.
- e.

**41. Patient presented with upper and lower limb weakness , muscle atrophy (loss of muscle bulk) in upper limb , flaccidity in upper limb , and brisk reflexes in lower limb , your diagnosis is :**

- a. Amyotrophic lateral sclerosis
- b. Subacute combined degeneration of the cord
- c. Cervical spondylosis
- d.
- e.

**42. Patient , previously healthy , he developed tinnitus , vertigo in the left ear , also he developed hearing loss , on examination oculucephalic test was normal , wat's your diagnosis :**

- a. Meniere's disease
- b. Benign paroxysmal positional vertigo
- c.
- d.

**43. Lateral medullary (Wallenberg) syndrome is due to occlusion of :**

- a. Anterior cerebral artery
- b. Middle cerebral artery
- c. Posterior communicating artery
- d. Anterior inferior cerebellar artery
- e. Posterior inferior cerebellar artery

**44. Patient with Rt. midbrain infarction(Weber's syndrome) , all are true except :**

- a. Left sided weakness of the body
- b. Left facial weakness
- c. Left oculomotor palsy
- d.
- e.

**45. all of the following are contraindication to do lumbar puncture except :**

- a. Patient on aspirin
- b. Seizure
- c. Papilledema
- d. Coma
- e.

**46. All of the following need further investigations and neuroimaging studies for secondary causes of headache except :**

- a. Rapid progression of headache
- b. Fever
- c. previous similar attacks
- d.
- e.

**47. Responsible for myelination of common peroneal nerve is :**

- a. Oligodendrocytes
- b. Schwann cells
- c. Astrocytes
- d. Microglial cells
- e.

**48. All of the following block the action at the neuromuscular junction except :**

- a. Myasthenia gravis
- b. Botulinum toxin
- c. Periodic paralysis
- d. Organophosphate poisoning
- e. Lambert-Eaton myasthenic syndrome



**Neurology 4<sup>th</sup> year Final exam**  
**05/06/2014**

**Answers :**

1. A
2. B
3. A
4. B
5. E
6. C
7. A
8. A
9. E
10. A
11. C
12. B
13. C
14. B
15. B
16. A
17. B
18. B
19. C
20. C
21. B
22. A
23. D
24. C
25. B
26. C
27. E
28. B
29. A
30. C
31. D
32. C
33. E
34. A
35. C
36. C
37. C
38. D
39. B
40. ??

41. A
42. A
43. E
44. C
45. A
46. C
47. B
48. C
- 49.
- 50.

## Neurology Final Exam

2013 / 4<sup>th</sup> year

*Note: not all answers are for sure..  
(??) means also doubted answers*

1) All of the following are causes of reversible dementia except?

- **Pick's Disease**

- Vitamin B12 deficiency
- Chronic subdural hematoma
- Normal pressure Hydrocephalus

2) All of the following are causes of dementia except?

- Progressive multifocal leukoencephalopathy
- Thyrotoxicosis

3) A 45 year old patient presented to the clinic complaining of weakness of the lower limbs and inability to walk progressing during one week. He had a history of an uncomplicated diarrheal illness which resolved in the past month. The patient also complained of difficulty breathing. On examination he was found to have bilateral ptosis and facial weakness. The patient also had decreased vital capacity. Which of the following is the most likely diagnosis?

- Acute inflammatory demyelinating polyneuropathy (Guillain-Barré syndrome)

- Chronic inflammatory demyelinating polyneuropathy

- Poliomyelitis

- Acute poliomyelitis

4) Which of the following muscles is not supplied by the median nerve?

- **Supinator**

- Palmaris longus
- Pronator teres
- Flexor carpi radialis
- Flexor digitorum superficialis

5) A patient presented with pure right sided hemiparesis & hemianopia without sensory impairment ; a lesion at which of the following best explains the patient's presentation?

- **Lacunar infarct of the internal capsule**
- Right middle cerebral artery
- Left middle cerebral artery

6) A patient presented with left sided hemiparesis, On examination he appeared to have right eye ptosis and paralysis of down gaze with his right eye abducted. He had a dilated pupil and divergent sequent of the same eye. The patient's presentation would

be best explained by a lesion at which of the following?

**-Rt. Midbrain**

- Rt. Pons
- Rt. Medulla
- Right middle cerebral artery
- Left middle cerebral artery

7) Which of the following drugs is not an enzyme inducer?

- Carbamazepine
- Sodium valproate ??
- Phenytoin
- Phenobarbital
- None of the above

8) Which of the following is not caused by hypoparathyroidism?

- Tetany
- Myopathy
- Seizures
- Cerebellar syndrome ??

9) A lesion found on MRI at which of the following locations would be most specific for a diagnosis of multiple sclerosis?

- Corpus callosum ??
- Cerebellum

- Spinal cord
- Brain stem
- Internal capsule

10) All of the following are characteristics of Duchenne muscular dystrophy except?

- **Distal weakness**
- Elevated CPK
- Hypertrophy of calf muscle
- Normal deep tendon reflexes

11) All of the following are true about Wilson's disease except?

- Autosomal recessive inheritance
- **High levels of ceruloplasmin**
- Can present with isolated hepatic problems
- Nearly all patients with neurological manifestations will have a Kayser-Fleischer ring
- Involves deposition of copper in the basal ganglia

12) Meningitis due to head injury is mostly due to:  
Staph.aures

13) A pt having amaurosis fugax at the left eye, which of the following TIA territory will produce this symptom

- Left anterior cerebral artery

- Left common carotid

- **Left internal carotid artery**

- Left vertebral artery

- Left basilar

14) A finding of periodic lateralized epileptiform discharges (PLEDs) on EEG would be most readily explained by which of the following?

- **Herpes simplex encephalitis**

- Creutzfeldt-Jacob

- Meningococcal

15) Ampicillin added to regular meningitis antimicrobial coverage would be to cover which of the following bacteria?

- **Listeria monocytogenes**

- Neisseria meningitidis

- H. Influenzae

16) All of the following are true regarding meningitis except?

- Staphylococcus is involved in patients with head injury

- H. influenzae causes meningitis in children aged 3-9 months (Not quite sure about the wording of this choice)

- Neisseria meningitis spreads in epidemics

- Meningitis can cause hyponatremia ??

17) A patient presented with bilateral ptosis worse at the end of the day, he had normal pupil, pt was able to look downward on right eye, and abduct left eye (signs and symptoms suggestive of fatigue-able muscle weakness), what is the most likely diagnosis?

- Myasthenia gravis

18) A patient presenting with fasciculation and limb weakness, but also hyperreflexia and upgoing plantar response (mixed upper motor neuron and lower motor neuron signs and symptoms), what is the most likely diagnosis?

- Amyotrophic lateral sclerosis (Motor neurone disease)

19) All of the following are present in bulbar palsy except?

- Nasal speech

- Nasal regurgitation of fluids

- Impaired swallowing

- Wasted, fasciculating tongue

- Emotional lability

20) All of the following drugs are used to treat Parkinson's disease except?

- **Dopamine receptor antagonists**

- Amantadine

- L-DOPA

21) A 65 year old patient presented with a 5 year history of a tremor that increases on movement (he had trouble holding a pencil?), he states that his brother and father both had the same problem at around the same age. Which of the following is not true about this tremor?

- increases with rest

22) All of the following are used to treat essential tremor except?

**- L-DOPA**

- Ethyl alcohol
- Propranolol
- Topiramate
- Primidone

23) Young girl, attacks of stop talking, movement as she's arranging sth, lip smacking

Indicate;

- temporal epilepsy ??
- frontal epilepsy
- TIA

24) Which is true in pt with multiple sclerosis

- more common in tropical climate
- **relapsing remitting is most common pattern**

- occur between the age of 40-50

25) All of the following are true about physiological tremor except;

- no positive family history
- rest tremor ??
- increase by anxiety
- increase by bronchodilators
- decrease with beta blockers

26) Which of the following is true about idiopathic Parkinson

- destruction of globus pallidus
- clinical triad of akinesia, tremor, spasticity
- action tremor of 8-12 Hz frequency
- **anti cholinergic are effective to treat tremor**

27) A case of brown- seqward syndrome at the level of left C6

One of the following isn't found:

- Left leg brisk deep tendon reflexes
- left leg babinski+
- **Left leg temperature sensation loss**
- Right leg pinprick sensation loss
- loss of proprioception in the left big toe

28) Which of the following is true about polymyositis;

- **it has autoimmune base**
- it indicate an underlying malignancy
- it spare the pharyngeal muscles
- it affects distal muscle groups

29) Pt Developed impaired sensation of medial side of hand and forearm, wasting of thenar and hypothenar eminence, eye ptosis on same side he is smoker and had some wt loss recently:

>>> lower brachial plexus injury

30) Which of the following is the most common vascular risk factor of ischemic strokes;

- old age
- **hypertension**
- diabetes
- smoking
- hypercholesterolemia

31) Most of the intrinsic hand muscles are supplied by:  
Ulnar nerve

32) All of the following are useful to investigate for myopathy except;

- muscle biopsy

- single fiber EMG
- genetic test
- **repeated muscle stimulation**
- CPK

33) A stroke of which artery result in left hemiplegia, that pt denies, with left hemianopia

- **right middle cerebral**
- right anterior cerebral
- right posterior cerebral
- right basilar

34) Which of the following vitamin is deficient in wernickes encephalopathy

>>> thiamine

35) Pt had giant cell arteritis presentation, which of the following is done first;

- **ESR**
- temporal artery biopsy
- angiogram with contrast of carotid artery

36) All of the following CSF results indicate idiopathic intracranial hypertension except

- CSF color like water
- CSF pressure of 35 cm CSF
- glucose 80% of serum

- protein 40 % of serum

- WBCs 35/ mcl most lymphocytes ??

37) All of the following true about cluster headache except;

- steroids might be effective in treatment of acute attacks

- **Sleep can decrease pain**

- Associated with conjunctival injection and increased lacrimation

- Duration 20-120 min

38) Which of the following is true about absence seizures;

- **EEG spikes that are 3 Hz, symmetrical**

- associated mental retardation

- treatment of choice is carbamazepine

- Onset is mostly in adulthood

- there's usually a structural lesion on MRI

39) The most common cause of myelopathy in pt aged less than 40 years is

>>> multiple sclerosis

40) One of the following is not expected to be found with MS:

- Urinary urgency

- **fever**

- depression

- shooting tingling sensation in the arms with neck flexion

- fatigue

41) All of the following are associated with cerebellum dysfunction except

- **ipsilateral hypertonia**

- ipsilateral intention tremor

- ipsilateral dysmetria

- fall of the body to the affected side

- ipsilateral pendular reflexes

42) One of the following is not a feature with U.M.N.L:

- Brisk deep tendon reflexes

- fasciculations**

- Upgoing plantar reflex

- Absent abdominal reflex

- pronator drift

43) One of the following isn't found with optic neuritis in MS:

- Pain around the eye, especially with eye movement

- loss of color vision

- Relative afferent pupillary reflex

- **enlargement of the physiological blind spot**

44) What is the MOA of carbidopa;

>>> DOPA decarboxylase Inhibitor

45) Which if the following is function of non dominant hemisphere

- language
- calculation
- reading
- writing
- **visuospatial skills**

46) One of the following findings is considered a NORMAL CSF:

- Pressure: 80-180 mmCSF
- Glucose <30% serum
- Protein 65mg/dl
- cells : 35 /mCL
- oligoclonal bands

47) All of the following result in subarachnoid hemorrhage except;

>>> Charcot- Bouchard aneurysm

48) All of the following can be used as prophylaxis for migraine except;

- **sumatriptan**

- metoprolol
- topiramate
- sodium valproate
- amitryptiline

49) Which of the following anti epileptic drug is not given in pt with renal stones, due to risk of urolithiasis;

>> topiramate

50) Which of the following CSF analysis indicate bacterial meningitis

>> glucose 30% of serum, WBC **850**, neutrophil 90%, lymphocytes 3%, protein 50 mg

**\*\* A lesion at the right parietal lobe would result in which of the following patterns of visual loss;**

>>> left lower quadrantinopia



## Neurology Q's - 4th year 2012

1-which of the following cells is responsible for myelination of the neurons in the spinal cord :

a. oligodendrocytes

**b. Schwan cells**

2-not True about migraine :

a. 2 hours duration

b. at the end of a long week end

3-abduction of shoulder: axillary nerve

4-inversion of foot: tibialis posterior

5-causes both bulbar and pseudobulbar : motor neuron diseases

6- Which of the following causes fasciculations:

**a. ALS(amiotrophic lateral sclerosis)**

b. Myesthenia gravis

7- which of the following sentences is true regarding giant cell arteritis:

**a. amaurosis fugas is ominous symptom**

b. it may be associated with fibromyalgia

c. More common on men

8-wrong about Giant cell arteritis: tx is not initiated until biopsy confirmation

9-a case about myasthenia gravis next step: assess lung function

10- about multiple sclerosis pattern which is most sensitive test :

**a. MRI**

b. CSF for protein, cells, and glucose( note : to detect oligoclonal bands, which requires gel electrophoresis, you need to specify that)

c. Visual evoked potentials)

11-loss of temporal visual fields: optic chiasm

12-Which of the following is not a confirmed cause of Gullian-Barre syndrome:

**a. H. pylory**

b. Campylobacter jejuni

c. Mycoplasma pneumoniae

d. CMV

e. HIV

13-wrong about gullian barre: hemiparesis???

(hyporeflexia هو بـيـعمل areflexia?? جوابه??)

## Neurology Q's - 4th year 2012

14- true: most common cause of myelopathy in patients >50 is cervical spondylosis

15- wrong drug:disease match:

**a. aspirin-tx of A.fib,stroke and htn**

b. Topiramate:( I can't remember which form of epilepsy)

c. Topiramate : prophylaxis in migraine

16-doesn't cause focal epilepsy:  
benzodiazepine withdrawal

17- true about MS: seperated in time and space

18- Which of the following value is normal range regarding CSF:  
protein 30 mg/dl

19- which is the following CSF analysis results is consistent with bacterial meningitis: **the one with 85% neutrophils**

20- a case with visual hallucinations, flexed stooped posture, memory loss :

lewy dementia

21- true in alzheimer: intracellular tangles

22- not in tx of parkinson:

MAO-a inhibitor

23- not prophylaxis of migraine :

**a.lithium ??**

b. Sodium valproate

c. Topiramate

24- which of the following lesions is can cause pure motor loss:

**a. internal capsule**

b. caudate

25- Hx which is consistent with 3 days old stroke, what test should be done :

**a. non-contrast CT**

b. MRA with .. ??

c. contrast CT

26- The treatment of choice for absence seizure: na valproate

27- not tx in juvenile seizures:  
carbamazepine

## Neurology Q's - 4th year 2012

28- Pt with breast mass,,, with spastic paralysis in left leg with up-going plantar of the left foot, normal motor and sensation the upper limbs, loss of pain and vibration in the left LL:

injury in left epidural thoracic

29- wrong about Werneck's encephalopathy : associated with pyridoxine deficiency

30- Which of the following has no value in the Dx of brain death :

flat EEG

31- a case of meningitis( the patient has fever and has been taking antibiotics at home for the last 2 weeks):

a. blood sample ,give antibiotics and then LP.

b. Start ABO, then blood sample and LP

32-boutilinium toxin: dilated pupils

33- Which of the following sentences is wrong regarding alpha waves:

**a. recorded from frontal lobe**

b. 8-13 Hz

c. Increased with eye closure

d. decreased with eye opening

e. symmetrical

34-which of the following is wrong :

increase glucose( or normal, I can't remember): enterovirus

35- Which of the following not a frontal lobe function: visuospatial orientation

36- true: trigeminal is afferent in corneal reflex

37-A superior temporal lesion will result in:

**a. receptive aphasia**

b. expressive aphasia

c. global aphasia

38-Injury to which nerve will result in hand muscle wasting sparing the thenar muscles: ulnar nerve

39-Wrong about essential tremor :

a. Family Hx

b. Improves with alcohol

c. Treated with propranolol

## Neurology Q's - 4th year 2012

### d. Decrease with movement

40-which cause pseudobulbar :MS

41-another question about 3 Hz waves  
EEG:absence seizure of childhood

42- not a cause for subarachnoid  
hemorrhage:

a. microaneurysms of charcot bouchard

b. Trauma

43- signs of meningism, cyanosis, eyes roll  
up: viral encephalitis

44- not caused by lt vertebral artery  
infarction: rt face loss of sensation

45- Which of the following does not cause  
horner syndrome:

a- c6 neurofibroma\*\*\*

b- cervical cord syringio..

c- lung apex tumor

46- Which of the following is not a  
contraindication for LP in a patient with  
acute bacterial meningiti:

a- head trauma 1 year ago

b- epilepsy during illness( in the ER)

c- decreased consciousness during  
examination??

47- not a risk factor for pneumococcus  
meningitis:

**a.bronchiectasis**

b. old age

48- not associated with MS:

a- double vision

b- complex partial seizure

c-electrical like sensation on flexion the neck

d- urine incontinence

e.unilateral leg parasthesia

49- pt 2 weeks ago epilepsy, All of the  
following test are related to diagnosis  
except:

a.CSF

b. Chest X-ray

c. EEG

50.all are present in TIA of vertebrobasilar  
territory except: amaurosis fugas

# Neurology 2011

1. All of the following drugs can be given in the management of status epilepticus except:  
**carbamazepine**
2. All of the following can be caused by a lacunar infarct except:  
**Global aphasia**
3. A lady came with a history of multiple unprovoked seizures two weeks ago, physical exam is normal, all of the following is appropriate diagnostic workup except:  
**Serum sodium**
4. All can cause trigeminal neuralgia except:  
**Middle cerebral artery stroke**
5. Wernicke's encephalopathy, parenteral treatment:  
**Thiamine**
6. Anti-epileptic that causes renal stones :  
**topiramate**
7. A right sided patient presented with Broca's aphasia. Going back through patient's history, he had experienced three episodes of transient visual loss in his left eye. The patient's condition is explained by:  
**Internal carotid artery stenosis**
8. most common site of ulnar nerve injury :  
**elbow**
9. not a prophylactic drug for migraine:
  - a. topiramate
  - b. (...)triptan\*\*
  - c. Propranolol
  - d. Valproate
10. increase the risk for MS :  
**Vitamin D**
11. b12 deficiency is associated with all the following except :  
**spinocerebellar disease**
12. most common cause of myopathy in age more than 50 :  
**cervical spondylosis**
13. associated with MS except :  
**homonymous hemianopia**
14. the duration of the aura of migraine is :  
**5-60 mins**
15. which statement is wrong about the posterior column :  
it is **responsible for transmitting temperature**
16. a nerve injury that spares the thenar muscles:  
**ulnar radiculopathy**
17. recurrent vertigo with hear loss, tinnitus:  
**Ménière's disease**
18. which doesn't cause aseptic meningitis :  
**pneumococcal meningitis**
19. which distinguishes L5 injury from common peroneal injury:  
**foot inversion**
20. which one of the following is associated with skin rash  
**meningococcal meningitis**
21. surgical treatment is successful in 60-80%:  
**temporal epilepsy with...**
22. stimulation of which nerve may benefit epileptic patients:  
**vagus nerve**

23. used in the treatment of Parkinson except :  
**dopamine receptor antagonists**
24. right upper homonymous quadrantanopia, the lesion is in :  
**left temporal**
25. patient with fluctuating cognition with nocturnal confusion and visual hallucinations :
  - a. Lewy bodies dementia
  - b. Pseudodementia
  - c. Huntington's
26. a young female with a witnessed seizure and a history of throwing out her breakfast :  
**juvenile myoclonic epilepsy**
27. a child who suddenly stares blankly into space or there was an EEG abnormalities of 3Hz waves.. the treatment of choice is :  
**sodium valproate**
28. wrong about sodium valproate:  
is **the drug of choice in pregnant women**
29. which of the following doesn't cause 3rd nerve palsy :  
**Anterior communicating artery aneurysm**
30. How to differentiate parkinsons:  
**asymmetrical**
31. not a function of the frontal lobe :  
**calculation**
32. all are associated with flaccid paralysis except :  
**Brown-Sequard syndrome**
33. not associated with bilateral papilledema
  1. hypervitaminosis A
  2. protein C deficiency
  3. tetracycline
  4. hypo/hyperparathyroidism
- 5. Hypocapnia\*\***
34. case of cluster headache
35. Risk factors for hemorrhage except:
  - a. **hypercholesterolemia \*\***
  - b. alcohol
36. not a risk factor of Alzheimer
  - a. age
  - b. poor education\*\*
  - c. **male gender\*\***
37. case of broca's
38. numbness in right face, left body, with Rt. side horner ,dysmetria and dysarthria  
**right anterior inferior cerebellar artery**
39. not a cause of coma:
  - a. **pseudotumor cerebri** (aka= benign intracranial hypertension)
40. polymyositis, one of the following is associated with it:
  - a. knuckle rash
  - b. **dysphagia\*\***
41. a case of spastic paraparesis .. which one doesn't match with the diagnosis of M5:  
**fasciculation**
42. increasing weakness during day, strong in the morning , ptosis in one eye and occasional diplopia  
**Myasthenia gravis**

43. temporal arthritis, wrong:  
female at child bearing age
44. Myasthenia Gravis, most specific test:  
a. Tensilon  
b. acetylcholine receptor antibody test\*\*
45. wrong about essential tremor:  
a. present at rest\*\*  
b. could be relieved by alcohol
46. focal dystonia:  
a. botulinum toxin
47. wrong about Alzheimer:  
a. acetylcholine antagonist to improve memory
48. Delirium Vs Dementia: we give rivastigmine to treat memory loss
49. wrong about MS: between 40-50
50. treatment of acute cluster headache: 100% oxygen

Collected together by the students of 4<sup>th</sup> year 2010-2011

Re-organized by: Hamza Jassar (sorry for the mess anyway =D )

## NEUROMEDICEN

2003\2004

- 1) Romberg's sign is +ve in all except:  
a) ALS      b) cerebellar disease      c) lesion in the brainstem      d) sensory ataxia
- 2) A young man with sudden onset of severe headache, photophobia, and stiff neck after exercise. no obvious neurological deficits. the most likely dx is:  
a) thromboembolic stroke      b) ruptured berry aneurysm  
c) psychogenic headache      d) temporal arteritis      e) migraine
- 3) 58 y old female is brought to u for neurological evaluation. she speaks in only short poorly articulated phrases although she understands all the examiner's verbal instructions. her handwriting is messy and she can't repeat any spoken words. she also has a mild Rt hemiparesis. the most likely dx is:  
a) wernick's aphasia      b) Broca's area      c) transcortical sensory aphasia  
d) transcortical motor aphasia      e) Global aphasia
- 4) 6 y old child, with frequent epileptic spells consisting of a blank stare and eyelid fluttering. an EEG shows frequent 3Hz spike-wave discharges activated by hyperventilation. the 1<sup>st</sup> drug of choice for ttt of her epilepsy is:  
a) carbamazepine      b) phenytoin      c) primidone      d) Phenobarbital      e) valproic acid
- 5) Temporal arteritis is characterized by all the following except :  
a) polymyalgia rheumatica      b) visual disturbance      c) granulomatous inflammation  
d) response to corticosteroids      e) high incidence of obese women of childbearing age
- 6) Emergency ttt of wernicke's encephalopathy should consist of administration of:  
a) thiamine      b) niacin      c) pyridoxine      d) vit B12      e) phenytoin
- 7) 20 y old female is brought to ER in coma with finding of slow shallow breathing, pinpoint pupil, bradycardia, and hypothermia. the most appropriate emergency ttt would be administration of:  
a) thiamine      b) clonidine      c) diazepam      d) naloxone      e) 100% O<sub>2</sub>
- 8) the infectious agent of Creutzfeldt-Jakob disease is a:  
a) virus      b) bacteria      c) fungus      d) prion      e) protozoa
- 9) the Brown-Sequard syndrome is characterized by:  
a) ipsilateral spasticity and proprioceptive loss and contralateral loss of pain and temperature sensation  
b) greater weakness in arms than in legs, patchy sensory loss, and urinary retention.  
c) bilateral spasticity and loss of pain and temperature sensation with preservation of proprioception.



6<sup>th</sup> year medicine exam

5/5/2009

PSYCHIATRY

1. What do we use selective 5HT blockers for... **major depression**
2. Which one is an SSRI... **fluoxetine**
3. Major depression patients >> most common presentation is ... **somatic symptoms.**
4. Characteristic of schizophrenia... **auditory hallucinations**

NEUROLOGY

1. Patient has absent adduction and nystagmus on abducting eye bilaterally... **bilateral MLF damage**
2. Prostate cancer and bone mets, presents with bilateral leg weakness, brisk reflexes, upper plantar, where is the lesion... **thoracic compression (NOT cauda equina syndrome)**
3. UL and LL weakness and fasciculations and brisk reflexes with upper plantar (mixed UMNL & LMNL pure motor complaints)... **Amyotrophic lateral sclerosis**
4. Right hemiparesis and difficulty in speech, investigation of choice... **non contrast CT**
5. 69 y/o with 2 weeks headache not relieved by analgesics, do all the following except... **EEG (we do CT, MRI, ESR, intraocular pressure)**
6. Acute back pain and absent plantar flexion and loss of sensation on sole and lateral border of foot, with intact dorsiflexion >> **root affected is ... S1**
7. Classic meningitis presentation (headache, neck rigidity, fever), 1st step to be done ... **IV dexamethasone + IV vancomycin + IV ceftriaxone (NOT lumbar puncture)**
8. the most effective secondary prevention for stroke
  - endarterectomy in an 80% stenosed carotid
  - ASA in a patient with thrombotic stroke
  - Plavix = = = = = *Clopidogrel*
  - **Warfarin in a pt with AFib**

**Most properly**



هذه أسئلة قديمه معظمها خارج المنهج. المخطط هو الذي داخل

1995

1) angle of jaw sensation is mediated via :

- a) maxillary branch of trigeminal n.   b) mandibular   c) ophthalmic   d) C2

2) medial aspect of leg sensation :

- a) sural   b) posterior tibial   c) femoral   d) common peroneal   e) superficial peroneal

3) area corresponding to recent memory :

- a) hippocampus   b) amygdaloid nucleus   c) mamillary body

4) area responding to chorea is :

- a) caudate   b) substantia nigra   c) red nucleus

5) the tract of anti gravity muscle in human :

- a) rubrospinal   b) vestibulospinal   c) corticospinal   d) reticulospinal

6) area corresponding to constructional apraxia is :

- a) dominant parietal   b) dominant temporal   c) non-dominant parietal  
d) non-dominant temporal

7) a tract not connected with cerebellum:

- a) basal ganglia   b) vestibular   c) corticospinal   d) deep position sense  
e) spinothalamic

8) one is mismatch:

- a) supinator C5\C6   b) knee L1\L2   c) biceps C5\C6   d) triceps C7   e) ankle S1\S2

9) one is not found in Alzheimer disease:

- a) cortical atrophy   b) neurofibrillary tangle   c) lewy bodies

10) a patient has difficulty in walking, dementia, urine incontinence. dx is:

- a) normal pressure hydrocephalus

11) fasciculation in the tongue is seen in:

- a) Guillain Barre   b) motor neuron disease   c) subdural hematoma

12) one is wrong in multiple sclerosis:

- a) babinski +ve   b) absent jaw reflex   c) ophthalmoplegia   d) optic neuritis

13) one doesn't cause chorea :

- a) SLE   b) phenothiazine   c) dopa   d) rheumatic fever

14) in U.M.N.L one is false:

- a) weakness of abduction and external rotation of upper limb

d) bilateral flaccid paralysis, anesthesia, areflexia, and bladder and sphincter dysfunction.

e) bilateral loss of proprioception.

10) a 55 y old moderately obese woman complains of burning paresthesias and loss of sensation on her lateral thigh. the most likely dx is:

- a) Meralgia paresthetica   b) Trigeminal neuralgia   c) Wallenberg syndrome  
d) Bell's palsy   e) Lambert-Eaton syndrome

11) Foot drop would be expected with :

- a) femoral n palsy   b) peroneal n palsy   c) Erb-Duchenne palsy   d) Klumpke palsy  
e) Meralgia paresthetica

12) the disorder associated with dystrophin deficiency is :

- a) Myotonic dystrophy   b) Polymyositis   c) Myasthenia gravis   d) Duchenne dystrophy  
e) type 2 muscle fiber atrophy

13) a 30 y old man complaining of recurrent sudden attack of vertigo associated with tinnitus. audiometry indicates progressive high tone hearing loss. The most likely dx is:

- a) Meniere's disease   b) Benign positional vertigo   c) vestibular neuronitis  
d) motion sickness   e) basilar artery migraine

14) a 38 y old woman has recently noted galactorrhea and amenorrhea. neurologic exam is normal except for bitemporal hemianopsia. The most likely dx is:

- a) colloid cyst of 3<sup>rd</sup> ventricle   b) pituitary adenoma   c) pineal dysgerminoma  
d) pituitary apoplexy   e) trilateral retinoblastoma

15) the tremor characteristically associated with parkinson's syndrome is :

- a) Myoclonus   b) resting tremor   c) intention tremor   d) action tremor  
e) benign essential tremor

16) an organism acquired in the birth canal that frequently causes meningitis in neonates is:

- a) Neisseria meningitidis   b) Listeria monocytogenes   c) staphylococcus aureus  
d) Haemophilus influenzae   e) Staphylococcus epidermidis

1) a

2) b

3) b

4) c

5) e

6) a

7) d

8) d

9) a

10) a

11) b

12) d

13) a

14) b

15) b

16) b

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- b)absent abdominal reflex      c)excitatory muscle on EMG  
d)hypotonia due to loss of inhibition of corticovestibulospinal

15)one is not a feature of carotid territory infarction :

- a)hemianopia    b)hemisensory loss    c)hemiparesis    d)amnesia fugax  
e)curtain like loss of vision

16) a patient came with a history of weakness that disappeared after two days he has :

- a)TLA    b)stroke    c)reversible ischemic neurological deficit

17)one doesn't happen in transcortical aphasia :

- a)speech is spare    b)neologism    c)echolalia    d)bradylalia    e)affect  
comprehension

18)patient with history of fever, arthralgia, proximal muscle weakness, and macular rash, he has:

- a)thyrotoxicosis    b)dystrophy    c)polymyositis

19)soldier of 20 y old presented with history of fever, headache, convulsions, and +ve kerning's, he has:

- a)meningococcal meningitis    b)staph aureus meningitis    c)viral meningitis  
d)TB meningitis

20)one is wrong about meningitis (bacterial):

- a)CSF WBC>3000    b) papilledema may occur    c)kerning's and brodneski +ve  
after few hours    d)petechial rash mostly due to pneumococcus

21)Rt amnesia fugax due to:

- a)Rt internal carotid    b)Lt internal carotid    c)Lt basilar

22) ttt of choice for primary generalized seizure :

- a)phenytoin    b)primidone    c)carbamazepine    d)valproate

23) ttt to arrest ongoing seizures :

- a)IV diazepam    b)IV phenytoin    c)primidone

Note: If the pt comes in acute phase of seizures, start giving IV diazepam, if seizure don't stop then give IV phenytoin

24) one is false about myasthenia gravis :

- a)thymic abnormality in 20-30%    b)difficulty in respiration due to cardiac involvement  
— c)extra ocular palsy    — d)fatigability is most important feature  
e)presence of Ach receptor antibody 90% of the cases in which it's the only case to be found in

25) a pt with U.M.N.L affecting his face with ipsilateral equal upper and lower limb involvement, lesion in:

- a) cortex    b) medulla    c) midbrain    d) capsular    e) pons

26) one is not found in parkinsonism:

- a) difficulty in initiate motion    b) increase sweating and shiny skin  
c) tremor decrease by movement and increase by rest  
d) mild global weakness on affected side

27) diplopia on going down stairs due to palsy of:

- a) optic n.    b) oculomotor    c) trochlear    d) abducens

28) one is false about argyl roberston pupil:

- a) may be caused by syphilis    b) no accommodation

29) one is not part of Horner's:

- a) ptosis    b) decrease sweating    c) enophthalmus    d) miosis  
e) no convergence

30) one doesn't cause seizure:

- a) hyponatremia    b) hypernatremia    c) hypermagnesemia  
d) hypomagnesemia

- |      |      |      |      |      |      |      |      |      |      |
|------|------|------|------|------|------|------|------|------|------|
| 1)d  | 2)b  | 3)a  | 4)a  | 5)b  | 6)c  | 7)e  | 8)c  | 9)c  | 10)a |
| 11)b | 12)b | 13)c | 14)c | 15)e | 16)c | 17)b | 18)c | 19)a | 20)d |
| 21)a | 22)d | 23)a | 24)b | 25)e | 26)d | 27)c | 28)b | 29)e | 30)d |

1993

1) all will cause central scotoma except: suprasellar tumors

2) a statement about epilepsy is correct: valproic acid is effective against juvenile Myoclonic seizures

3) all about epilepsy are correct except:

most of generalized convulsions are preceded by an aura

4) all about partial complex seizures are correct except:

on EEG it's characterized by 3 waves

5) a pt has a sudden onset of Lt hemiparesis, with eyes deviated to the Rt side but with no aphasia. the most common probable site of the lesion is:

the Rt middle cerebral artery

6) the most common infarction is associated with:

long standing chronic HTN

7) the most common secondary tumor to brain comes from:

the lung.

8) a 65 y old female pt comes with a history of sudden onset of headache on her Rt side of the face, associated with local tenderness on the Rt temporal area. the first investigation to be done is : **ESR**

9) polymyalgia rheumatica is associated with

**temporal arteritis**

10) a 25 y old male pt, has a sudden onset of paraplegia, loss of pain and temperature. However, position sense and vibratio are preserved. lesion is :

**occlusion of the anterior spinal artery**

11) a 25 y old female pt with a clinical picture of MS. the investigation that you don't need is :

Acetyl-choline receptor antibody assay

12) +ve romberg's test is expected in all except :

motor neuron disease ✓

13) a 58 y old male pt, has a recent history of progressive tetraplegia, dysphagia, hyperreflexia, fasciculation. dx is:

motor neuron disease ✓

14) all about parkinsonism is correct except :

upgoing planter reflex

15) all are risk factors for pneumococcal meningitis except:

**crowding**

16) each disease has its correct mode of inheritance except:

Leber's hereditary optic neuropathy (autosomal dominant) AD

17) a 14 y old female has a history of sore throat followed by a clumsy, involuntary movements of the limbs. Most probable dx is:

Sydenham's chorea

18) all will cause muscle atrophy of the hand except :

MS

19) the most common cause of primary brain atrophy is

**Alzheimer disease** (10)

20) one of the following is present in classical migraine but not in common migraine:

fortification spectra

21) all are correct about Broca's aphasia except:

fluent speech

22) a symptom that occurs in Wernicke's encephalopathy is:

ophthalmoplegia

+ confusion + ataxia + Hypothermia

23) all will cause drop foot except :

a lesion of superficial peroneal nerve ✓

24) all are correct about median nerve entrapment except:

affection of adductor polices ✓ (ulnar n.)

25) all may cause bilateral facial weakness except :

hemangioblastoma ✓

26) the most important tract for antigravity muscle is :

vestibulospinal ✓

27) the ttt of choice for herpetic encephalitis is:

acyclovir ✓



28) dressing apraxia is caused by a lesion to:

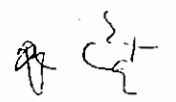
✓ non-dominant parietal lobe

29) the risk of rapid injection of phenytoin is

respiratory arrest

✓ 30) claw hand occurs with :

✓ ulnar n injury

✓ 31) what is a known complication of hypoparathyroidism? 

Benign intracranial HTN

✓ 32) all cause mononeuritis multiplex except:

✓ a) RA   b) alcohol   c) DM   d) Wegner granulomatosis   e) sarcoidosis

33) the most common myelopathy in pt <40y is due to :

MS ✓

34) the most common myelopathy in pt >40y is due to:

cervical spondylosis ✓

35) the ttt of choice for juvenile myoclonic seizures is :

valproic acid ✓

36) the ttt of choice for temporal lobe epilepsy is :

cervical spondylosis

37) in carotid artery disease, which of the following symptoms is expected:

a) ataxia   b) vertigo   c) dysphagia   d) amaurosis fugax



Q67: What lesion causes pure motor stroke?

- a- Caudate    b- Putamine    ☒ c- Int. capsule    d- Amygdala    e- Hippocampus

Q68: Which doesn't cause thenar eminence wasting?

- a- RA    b- Thoracic outlet synd    ☒ c- Ant. Interosseous n. injury    d- Carpal tunnel synd

Q69: Which is wrong about Lambert Eaton synd?

- ☒ a- Associated with thymoma  
b- Relieved by exercise.  
c- There's block in Ach secretion  
d- There's defect in  $Ca^{+2}$  influx in presynaptic terminal  
e- There's minimal ocular muscle affection

Q70: What is true about amyotrophic lat. sclerosis?

- a- Often there's dysphagia and dysarthria  
b- EMG shows ↓ action potential

Q71: Which isn't a common feature of MS?

- ☒ a- Pain    b- Parasthesia    c- Visual disturbances    d- Tremors and ataxia    e- Seizures

Q72: Which isn't a typical feature of Guillian-Barre synd?

- a- Asymmetrical sx    ☒ b- Steroids have proven benefit in tit    c- CSF WBC <10

Q73: All can cause death from status epilepticus except:

- ☒ a- Dehydration    b- Renal failure    c- Cardiac arrhythmia    d- Pneumonia and sepsis

Q74: All can cause lacunar stroke except:

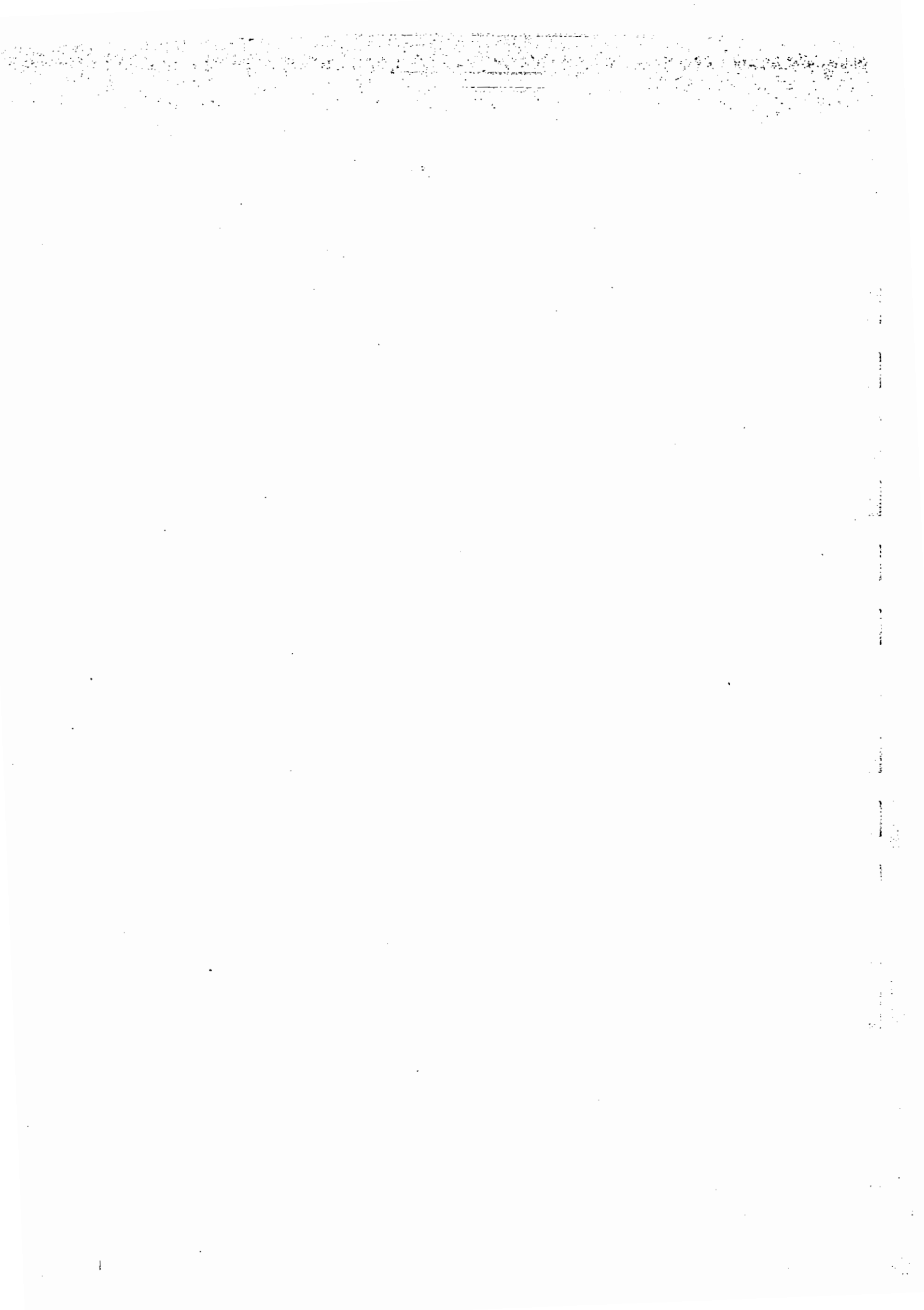
- a- Basilar art thrombosis    (I don't remember the rest of choices)

Q75: All are true about acathisia except:

- a- Pt is restless    b- May lead to suicide    c- Relieved by sleep    d- Dose dependent

Q76: All can cause seizures except:

- a- Cryptococcal meningitis  
b- MS  
☒ c- Subfrontal meningioma  
d- Pneumococcal meningitis  
e- Subarachnoid hemorrhage



## ASSESSMENT EXAMINATION

- visual hallucinations. The most likely type of epilepsy is:
- Lennox-Gastaut syndrome
  - Petit mal epilepsy
  - Benign centrotemporal epilepsy
  - Temporal lobe epilepsy
  - Focal motor seizures
19. The second grade teacher of a 8 year old girl has sent notes home to the parents indicating that the child seems to be daydreaming a lot. The teacher has noted that the child has momentary lapses in which she is unresponsive and occasionally has some eyelid fluttering. The child's physician has indicated that the problem is a form of epilepsy. The most likely diagnosis is:
- Myoclonic seizure
  - Astatic seizure
  - Absence seizure
  - Interictal seizure
  - Simple partial seizure
20. A 6 year old child has frequent epileptic spells consisting of a blank stare and eyelid fluttering. An EEG shows frequent 3 Hz spike-wave discharges activated by hyperventilation. The first drug of choice for treatment of this child's epilepsy would be:
- Carbamazepine (Tegretol)
  - Phenytoin (Dilantin)
  - Phenobarbital
  - Primidone (Mysoline)
  - Ethosuximide (Zarontin)
21. Childhood colic, motion sickness, or episodic abdominal pain often precede which later disorder:
- Migraine
  - Meniere's disease
  - Temporal arteritis
  - Trigeminal neuralgia
  - Pseudotumor cerebri
22. A 45 year old man has headaches that are usually associated with a partial Horner's syndrome. The most likely diagnosis:
- Tension headache
  - Cluster headache
  - Trigeminal neuralgia
  - Post-lumbar puncture headache
  - Pseudotumor cerebri
23. A 55 year old man complains of frequent episodic brief paroxysmal lancinating face pain. The pain is triggered by simply touching the skin adjacent his right nostril. The most likely diagnosis is:
- Meralgia paresthetica
  - Trigeminal neuralgia
  - Wallenberg syndrome
  - Bell's palsy
  - Lambert-Eaton syndrome
24. Which disorder is most often associated with papilledema:
- Tension headache
  - Cluster headache
  - Trigeminal neuralgia
  - Post-lumbar puncture headache
  - Pseudotumor cerebri
25. Temporal arteritis is characterized by all the following EXCEPT:
- Polymyalgia rheumatica
  - Visual disturbances
  - Granulomatous inflammation
  - Response to corticosteroids
  - High incidence in obese women of childbearing age
26. A 35 year old man presents to his physician with complaints of increasing headache and lethargy. Examination reveals erythematous, hyperkeratotic hands and feet along with white bands in his fingernails. The likely diagnosis is:
- Mercury poisoning
  - Ethylene glycol poisoning
  - Thiamine deficiency
  - Uremia
  - Arsenic poisoning
27. A college student presents to the hospital with relatively acute onset of fever, severe abdominal pain, confusion, and evidence of a rapidly progressive peripheral and cranial neuropathy, several hours after a wild party at a local bar celebrating his twenty-first birthday. Cerebrospinal

# SELF-ASSESSMENT EXAMINATION

fluid glucose and protein levels are normal. The most likely diagnosis is:

- ☒ A. Porphyria
- B. Wernicke-Korsakoff psychosis
- C. Alcohol withdrawal syndrome
- D. Guillain-Barré syndrome
- E. Methanol poisoning

28. A 4 year old child living in a poor neighborhood presents to the hospital with irritability, lethargy, and ataxia. Mother states that for the past several months, the child has been chronically constipated and complained of abdominal pain. Laboratory studies reveal anemia and basophilic stippling of red blood cells. The most likely diagnosis is:

- A. Methanol poisoning
- B. Cocaine poisoning
- ☒ C. Lead poisoning
- D. Mercury poisoning
- E. Vitamin A overdose

29. An infant born at home without medical care has ABO (blood group) incompatibility and develops severe hyperbilirubinemia during the neonatal period. Expected neurologic sequelae would be:

- ☒ A. Kernicterus
- B. Hepatic encephalopathy
- C. Porphyria
- D. Wilson's disease
- E. Wernicke's encephalopathy

30. A 48 year old chronic alcoholic man is admitted to the hospital for treatment of a severe scalp laceration. On the first hospital day the nurses noted his tremulousness, and on the second hospital day he has 3 brief generalized convulsions. The most likely diagnosis is:

- A. Petit mal epilepsy
- B. Temporal lobe epilepsy
- ☒ C. Alcohol withdrawal seizures
- D. Alcohol-induced hypoglycemic seizures
- E. Seizures resulting from cortical contusion

31. After 72 hours of alcohol abstinence, confusion, agitation, tremor, autonomic nervous system hyperactivity, and hallucinations become apparent in a 45 year old known chronic alcoholic man. The most likely diagnosis is:

- A. Wernicke's encephalopathy
- B. Korsakoff's psychosis
- C. Chronic auditory hallucinosis
- ☒ D. Delirium tremens
- E. Chronic subdural hematoma

32. A 53 year old woman with a long history of binge alcohol abuse presents to the emergency department with confusion, ataxia, and external ophthalmoplegia consistent with Wernicke's encephalopathy. Emergency treatment should consist of administration of parenteral:

- ☒ A. Thiamine
- B. Niacin
- C. Pyridoxine
- D. Vitamin B<sub>12</sub>
- E. Phenytoin

33. A lethargic 35 year old skid row alcoholic man is brought to the emergency room by ambulance in coma following several seizures. Laboratory studies indicate severe acidosis, elevated blood urea nitrogen (BUN) level, and cerebrospinal fluid pleocytosis (100 lymphocytes per cubic millimeter). Urinalysis shows numerous oxalate crystals. The most likely diagnosis is:

- A. Diabetic ketoacidosis
- B. Subdural hematoma
- ☒ C. Ethylene glycol poisoning
- D. Pneumococcal meningitis
- E. Wood alcohol poisoning

34. A 20 year old woman is brought to the emergency room in coma with findings of slow shallow breathing, pinpoint pupils, bradycardia, and hypothermia. The most appropriate emergency treatment would be administration of:

- A. Thiamine
- B. Clonidine (Catapres)
- C. Diazepam (Valium)
- ☒ D. Naloxone (Narcan)
- E. 100% oxygen

35. A difficult 9 year old girl with cystic fibrosis does not follow prescribed medical treatment. The mother is aware of frequent diarrhea. Over the past 18 months, the child has developed a progressive peripheral neuropathy and ataxia that mimics

## SELF-ASSESSMENT EXAMINATION

middle of the optic chiasm. The visual field defect associated with such a lesion would be:

- ☐ Hemianopsia
- ☒ Bitemporal hemianopsia
- ☐ Homonymous quadrantanopsia
- ☐ Unilateral blindness
- ☐ Binasal hemianopsia

A 60 year old man has a past history of a transient ischemic attack. Such a transient ischemic attack could have been characterized by:

- ☒ Rapidly developing neurologic deficit
- ☐ Persistence for more than 24 hours
- ☐ Pale (bland or white) infarction
- ☐ Lipohyalinosis of small penetrating arteries
- ☐ Severe headache, photophobia, and stiff neck

A 55 year old man with known atherosclerotic cardiovascular disease has a stroke that produces the locked-in syndrome. What of the following is the most likely etiology:

- ☐ A. Middle cerebral artery stroke syndrome
- ☐ B. Anterior cerebral artery stroke syndrome
- ☐ C. Posterior cerebral artery stroke syndrome
- ☐ D. Wallenberg syndrome
- ☒ E. Basilar artery occlusion

A 42 year old physician has sudden onset of severe headache, photophobia, and stiff neck after just scoring a double bogey on the 15th hole of a charity golf tournament. His golfing partner, a psychiatrist, notes no obvious neurologic deficit. The most likely diagnosis is:

- ☐ A. Thromboembolic stroke
- ☒ B. Ruptured berry aneurysm
- ☐ C. Temporal arteritis
- ☐ D. Psychogenic headache
- ☐ E. Migraine headache

A 48 year old man collapses from a cardiac arrest while walking through the local shopping mall. After about 12 minutes the emergency medical team is able to obtain a stable pulse and blood pressure. Three weeks later, in the hospital, he remains comatose, but breathes without assistance and has occasional reflex limb movements when stimulated. The most likely explanation for his neurologic condition is:

*lamellar cortical necrosis*

*Ruptured aneurysm*

- ☐ A. Middle cerebral artery stroke syndrome
- ☒ B. Lamellar cortical necrosis
- ☐ C. Wallenberg syndrome
- ☐ D. Lacunar stroke
- ☐ E. Global aphasia

*lamellar - C*

15. Two years following her left hemisphere stroke, a 58 year old woman is brought to the clinic by her son for neurologic evaluation. During the examination, the woman speaks in only short poorly-articulated phrases although she understands all the examiner's verbal instructions. Her handwriting is messy and she cannot repeat any spoken words. She also has a mild right hemiparesis. The most likely diagnosis is:

- ☐ A. Schizophrenia
- ☒ B. Broca's aphasia
- ☐ C. Malingering
- ☐ D. Wernicke's aphasia
- ☐ E. Wernicke-Korsakoff psychosis

*speech writing*

*understanding*

16. A 25 year old man has had temporal lobe epilepsy for the past 9 years. He also has evidence of behavioral problems associated with depression. Which of the following anticonvulsants would be most likely to control both his behavioral problems and the epilepsy:

- ☒ A. Carbamazepine (Tegretol)
- ☐ B. Phenytoin (Dilantin)
- ☐ C. Lamotrigine (Lamictal)
- ☐ D. Phenobarbital
- ☐ E. Ethosuximide (Zarontin)

17. A 6 month old infant has seizures with an EEG pattern of hypsarrhythmia. The most likely epilepsy syndrome to explain this problem would be:

- ☒ A. West syndrome (infantile spasms)
- ☐ B. Petit mal epilepsy
- ☐ C. Benign centrotemporal epilepsy
- ☐ D. Benign (simple) febrile seizures
- ☐ E. Temporal lobe epilepsy

18. A 30 year old woman has a history of epilepsy for about the past 12 years. She only rarely has a generalized convulsion. More often she has periods in which she becomes confused. She also has frequent complaint of auras consisting of déjà vu, epigastric sensations, and occasional unpleasant

## SELF-ASSESSMENT EXAMINATION

Normal retinal variations visible with the ophthalmoscope include which of the following:

- A. Flame hemorrhages
- B. Cotton wool spots
- C. Optic nerve drusen
- D. Papillitis
- E. Papilledema

During the examination of a 44 year old woman with a facial asymmetry, touching the cornea of either eye results in blink in only the right eye, although the patient indicates feeling the touch in both eyes. The most likely lesion is:

- A. Left abducens nerve palsy
- B. Right trochlear nerve palsy
- C. Left trigeminal nerve palsy
- D. Left facial nerve palsy
- E. Right oculomotor nerve palsy

The Babinski reflex is:

- A. Dorsiflexion of the big toe and fanning of the other toes following plantar stimulation
- B. Puckering of the lips in response to gentle tapping of the upper lip
- C. Brief visible muscle twitches following needle insertion
- D. Sudden flexion of the hyperextended wrist (flapping motion)
- E. Falling from a standing position following eye closure

A 44 year old woman presents after awakening in morning with slight headache, a generalized sense of fatigue, and visual loss. Examination reveals only a minimal light perception. Funduscopy is normal. The most likely diagnosis is:

- A. Papillitis
- B. Papilledema
- C. Retrobulbar neuritis
- D. Adhoff phenomenon
- E. Hermitte's symptom

5. Normal cerebrospinal fluid values are:

- A. Opening pressure > 200 mm of water
- B. Glucose level less than 40 mg/dL
- C. Up to five lymphocytes per cubic millimeter
- D. Protein level greater than 65 mg/dL
- E. Oligoclonal bands

6. The triad of miosis, ptosis, and anhidrosis characterizes:

- A. Partial oculomotor nerve palsy
- B. Trochlear nerve palsy
- C. Internuclear ophthalmoplegia
- D. Argyll Robertson pupil
- E. Horner's syndrome

7. The Romberg test is useful in evaluation of:

- A. Auditory acuity
- B. Pupillary reflexes
- C. Loss of proprioception
- D. Chorea-acanthosis
- E. Muscle strength

8. Signs of right hypoglossal nerve palsy include:

- A. Paralysis of head turning to right side
- B. Tongue deviation to right side
- C. Nystagmus with slow component to left side
- D. Right side anhidrosis, miosis, and ptosis
- E. Jaw deviation to left side

9. Optic atrophy is characterized by:

- A. Normal visual acuity
- B. Pale sharply margined optic disk
- C. Blurring of optic disk margins
- D. Small refractile bodies elevating optic nerve
- E. Venous enlargement

10. A 45 year old man presents with a history of galactorrhea and loss of libido. At another clinic he had an MRI study of the brain that showed a large pituitary adenoma which had extended upward through the diaphragma sellae and was impinging on

*Repetitive tingling sensation  
Shooting down the arm  
on neck flexion*

## ASSESSMENT EXAMINATION

spinocerebellar degeneration. There is no family history of neurologic disease. The most likely explanation is:

- A. Hypervitaminosis A
- ☒ B. Vitamin E deficiency
- C. Thiamine deficiency
- D. Vitamin K deficiency
- E. Hypervitaminosis D

36. An elderly man has had recent onset of symptoms consisting of unsteady gait, dementia, and urinary incontinence. Following a lumbar puncture, these symptoms improve. The most likely diagnosis is:

- A. Depressive pseudodementia
- B. Alzheimer's disease
- ☒ C. Normal pressure hydrocephalus
- D. Lacunar state
- E. Rinswanger's disease

37. A 40 year old woman with Down syndrome has recently lost many of her usual abilities of self-care and language. Histopathologic examination of her brain would most likely show characteristics of:

- ☒ A. Alzheimer's disease
- B. Pick's disease
- C. Creutzfeldt-Jakob disease
- D. Wilson's disease
- E. Parkinson's disease

38. An 18 year old boy has developed progressive ataxia, areflexia, spasticity, pes cavus foot deformity, and cardiomyopathy during the previous four years. This most likely diagnosis is:

- ☒ A. Friedreich's ataxia
- B. Progressive multifocal leukoencephalopathy
- C. Creutzfeldt-Jakob disease
- D. Ataxia-telangiectasia
- E. Wilson's disease

39. The infectious agent of Creutzfeldt-Jakob disease is identified as a

- A. Pick body
- B. Lewy body
- C. Negri body
- D. Neuritic plaque
- ☒ E. Prion

40. A 48 year old woman presents with an progressive dementia, ataxia, and myoclonus. Most likely diagnosis is:

- A. Alzheimer's disease
- B. Pick's disease
- ☒ C. Creutzfeldt-Jakob disease
- D. Wilson's disease
- E. Parkinson's disease

41. The 55 year old round head chief at a four restaurant has a history of heart disease that from coronary artery bypass surgery. One day while work, he suddenly collapses. When the emergency medical team arrives, exam reveals 4 mm diam symmetric unreactive pupils (midposition reactive pupils). The most likely site for the lesion producing this clinical picture is:

- A. Right frontal lobe
- B. Bilateral occipital poles
- C. Medulla
- D. Pons
- ☒ E. Midbrain

42. A 52 year old man with a history of chronic hypertension presents to the emergency department with sudden onset of vomiting, dizziness, ataxia, leg weakness. His blood pressure is 240/110 and pulse is 55 beats per minute. In the few minutes following his initial presentation to the emergency department, he becomes comatose, develops apnea, and then dies. His clinical symptomatology is most readily explainable as result of:

- A. Transtentorial uncal herniation
- B. Central rostral-caudal herniation
- C. Subfalcine herniation
- ☒ D. Cerebellar tonsillar herniation

43. Following resuscitation for a cardiac arrest, a year old man displays no responsiveness to stimuli, occasional spontaneous eye opening, and an EEG pattern consistent with a nearly normal sleep-wake cycle. This patient would be considered to have:

- A. Coma
- B. Locked-in syndrome
- ☒ C. Persistent vegetative state
- D. Delirium
- E. Normal state of consciousness

# SELF-ASSESSMENT EXAMINATION

44. A 50 year old pedestrian struck by an automobile has progressive signs consisting of initial pupillary dilation followed by loss of extraocular movements, contralateral hemiparesis, coma, and medullary dysfunction. The most likely explanation is:

- ☒ A. Transtentorial uncus herniation
- B. Central to tal-caudal herniation
- C. Subfalcial herniation
- D. Cerebellar tonsillar herniation

45. Brain death requires all the following criteria to be met EXCEPT:

- A. Established coma-causing cerebral lesion
- B. Apnea
- ☒ C. Absent spinal reflexes
- D. Absent brain stem reflexes
- E. Absence of toxins or metabolic abnormalities

46. A 24 year old woman was involved in an automobile accident, in which her car ran off a deserted mountain road and struck a tree. When she was discovered by a passerby some time later, the woman was alert but complaining of headache and had bruises on her forehead and face. By the time she arrives at a hospital emergency room (about an hour away), the personnel note she is lethargic but arousable, and has no obvious neurologic deficits on examination. Over the next hour she becomes progressively less arousable, her left pupil appears larger than her right pupil, and her right arm and leg seem weak. What is the most likely diagnosis?

- A. Chronic subdural hematoma
- B. Carotid-cavernous fistula
- ☒ C. Epidural hematoma
- D. Cerebral concussion
- E. Diffuse axonal injury

47. A 12 year old boy is brought to the emergency room by his mother after a fall from his bicycle in which he struck his head. He apparently was momentarily unconscious, but subsequently he seemed perfectly fine except for complaints of a slight headache. Examination reveals only a small bruise on his forehead and neurologic exam is normal. The most likely diagnosis is:

- A. Chronic subdural hematoma
- B. Carotid-cavernous fistula
- C. Epidural hematoma

- ☒ D. Cerebral concussion
- E. Diffuse axonal injury

48. The Brown-Séquard syndrome is characterized by:

- ☒ A. Ipsilateral spasticity and proprioceptive loss and contralateral loss of pain and temperature sensation
- B. Greater weakness in arms than in legs, patchy sensory loss, and urinary retention
- C. Bilateral spasticity and loss of pain and temperature sensation with preservation of proprioception
- D. Bilateral flaccid paralysis, anesthesia, areflexia, and bladder and sphincter dysfunction
- E. Bilateral loss of proprioception

49. A 73 year old woman is brought to the hospital by her son because of recent onset of confusion. The son indicates that his mother had been complaining of headaches for several weeks, ever since she was "roughed up" by hooligans trying to steal her purse. On examination, she appears drowsy, is unable to identify her surroundings, does not know the date or her son's name, and is weak on her left side. What is the most likely diagnosis?

- ☒ A. Chronic subdural hematoma
- B. Carotid cavernous fistula
- C. Epidural hematoma
- D. Cerebral concussion
- E. Diffuse axonal injury

50. The most important factor in post-traumatic epilepsy is:

- A. Lacunar infarcts
- ☒ B. Orbital frontal plaque
- C. Duret hemorrhages
- D. Arachnoidal fibrosis
- E. Ventricular dilation

51. A family presents to the neuromuscular clinic with a three generation history of distal muscle atrophy, pes cavus foot deformity, and sensory loss. The most likely diagnosis is:

- A. Amyotrophic lateral sclerosis
- ☒ B. Charcot-Marie-Tooth disease
- C. Guillain-Barré syndrome
- D. Tardy ulnar palsy
- E. Meralgia paresthetica



## ASSESSMENT EXAMINATION

Clumpke  
Dejerine

Following a brief flu-like illness, a 24 year old man presents with subacute onset over 5 days of asymmetric motor weakness, greater in the arms than in the legs. Lumbar puncture reveals moderately elevated CSF protein with few cells (albuminocytologic dissociation). The most likely diagnosis is:

- ☒ A. Guillain-Barré syndrome
- B. Porphyria
- C. Vitamin B<sub>12</sub> deficiency
- D. Alcoholic polyneuropathy
- E. Diabetic amyotrophy

53. A 24 year old woman complains of increasing weakness throughout the day, despite feeling strong upon awakening in the morning. In the evenings, she also notes drooping of one eyelid and occasional double vision. The most likely diagnosis is:

- A. Polymyositis
- B. Duchenne dystrophy
- C. Myotonic dystrophy
- D. Malignant hyperthermia
- ☒ E. Myasthenia gravis

54. A 55 year old moderately obese woman complains of burning paresthesias and loss of sensation on her lateral thigh. The most likely diagnosis is:

- ☒ A. Meralgia paresthetica
- B. Trigeminal neuralgia
- C. Wallenberg syndrome
- D. Bell's palsy
- E. Lambert-Eaton syndrome

55. A 14 year old previously healthy boy experiences a mild gastroenteritis followed by the rapid onset of flaccid weakness in the right arm and left leg. The most likely diagnosis is:

- A. Toxoplasmosis
- B. Tabes dorsalis
- C. Mucormycosis
- D. Cysticercosis
- ☒ E. Poliomyelitis

56. Horner's syndrome often accompanies which of the following conditions:

- A. Charcot-Marie-Tooth disease
- B. Meralgia paresthetica
- C. Erb-Duchenne palsy

☒ D. Klumpke-Dejerine palsy

E. Bell's palsy

57. A frail 60 year old widow who lives alone and has no friends in the community presents to a physician with a complaint of feeling chronically tired. On exam, she is noted to have loss of posterior column sensation, a positive Romberg test, spasticity, and bilateral Babinski reflexes. The most likely diagnosis is:

- A. Guillain-Barré syndrome
- B. Porphyria
- ☒ C. Vitamin B<sub>12</sub> deficiency
- D. Alcoholic polyneuropathy
- E. Diabetic amyotrophy

58. Foot drop would be expected with:

- A. Femoral nerve palsy
- ☒ B. Peroneal nerve palsy
- C. Erb-Duchenne palsy
- D. Klumpke-Dejerine palsy
- E. Meralgia paresthetica

59. A 55 year old woman with 70 pack-year history of smoking presents with complaints of generalized weakness. One month previously she had been diagnosed with small cell (oat cell) lung cancer. Repetitive nerve stimulation studies performed by the clinical neurophysiology laboratory reveal an incrementing response of the muscle action potentials. The most likely diagnosis is:

- ☒ A. Lambert-Eaton syndrome
- B. Botulism
- C. Malignant hyperthermia
- D. Myotonic dystrophy
- E. Myasthenia gravis

60. The disorder associated with dystrophin deficiency is:

- A. Myotonic dystrophy
- B. Polymyositis
- C. Myasthenia gravis
- ☒ D. Duchenne dystrophy
- E. Type 2 muscle fiber atrophy

61. A 59 year old hypertensive man presents to the emergency department with the acute onset of severe vertigo, nausea, vomiting, nystagmus, and difficulty

## SELF-ASSESSMENT EXAMINATION

swallowing. Exam shows a moderately severe gait ataxia, right arm dysmetria, loss of the corneal reflex on the right with reduced sensibility on the right side of the face, a right Horner's syndrome, and diminished sensation to pinprick on the left arm, trunk, and leg. He has no demonstrable limb weakness. The most likely diagnosis is:

- A. Ménière's disease
- ☒ B. Wallenberg syndrome
- C. Acoustic neuroma
- D. Basilar artery migraine
- E. Vestibular neuronitis

62. The illusion that stationary objects are moving back and forth is:

- ☒ A. Oscillopsia
- B. Dysequilibrium
- C. Dizziness
- D. Nystagmus
- E. Vertigo

63. A 30 year old man complains of recurrent sudden attacks of vertigo associated with tinnitus. Audiometry indicates progressive high tone hearing loss. The most likely diagnosis is:

- ☒ A. Ménière's disease
- B. Benign positional vertigo
- C. Vestibular neuronitis
- D. Motion sickness
- E. Basilar artery migraine

64. Acute onset of vertigo and nystagmus associated with viral nasopharyngitis is characteristic of:

- A. Ménière's disease
- B. Benign positional vertigo
- ☒ C. Vestibular neuronitis
- D. Motion sickness
- E. Basilar artery migraine

65. The illusion of rotational movement of self or the environment is termed:

- A. Oscillopsia
- B. Dysequilibrium
- C. Dizziness
- D. Nystagmus
- ☒ E. Vertigo

66. A 30 year old man presents with recent onset of ataxia, dizziness, and headache. Complete blood count indicates polycythemia. Magnetic resonance imaging (MRI) of the brain reveals a cystic cerebellar tumor near the foramen magnum. Computed tomographic (CT) scans of the abdomen identify cysts of the kidney and pancreas. The most likely diagnosis for the brain tumor is:

- A. Astrocytoma
- B. Meningioma
- C. Neurilemoma
- D. Colloid cyst of third ventricle
- ☒ E. Hemangioblastoma

67. A 32 year old man with a fifteen year history of temporal lobe epilepsy has recently had an increasing number of seizures despite the addition of several new medications to his anticonvulsant regimen. CT scan and MRI indicate a partially calcified mass in the anterior temporal lobe. The most likely histologic finding on biopsy of this mass would be:

- A. Glioblastoma multiforme
- B. Craniopharyngioma
- C. Neurilemoma
- ☒ D. Oligodendroglioma
- E. Medulloblastoma

68. Acoustic neuroma (neurilemoma or schwannoma) may be a part of what syndrome:

- ☒ A. Neurofibromatosis
- B. Cushing's disease
- C. Von Hippel-Lindau syndrome
- D. Acquired immunodeficiency syndrome (AIDS)
- E. Ataxia-telangiectasia

69. Which of the following tumors is associated with homozygous deletion of a region on chromosome 13 (region 13q14):

- A. Pineaal choriocarcinoma
- B. Pituitary adenoma
- ☒ C. Retinoblastoma
- D. Meningioma
- E. Ependymoma

70. A 38 year old woman has recently noted galactorrhea and amenorrhea. Neurologic exam is

swallowing. Exam shows a moderately severe gait ataxia, right arm dysmetria, loss of the corneal reflex on the right with reduced sensibility on the right side of the face, a right Horner's syndrome, and diminished sensation to pinprick on the left arm, trunk, and leg. He has no demonstrable limb weakness. The most likely diagnosis is:

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- ☒ B. Wallenberg syndrome
- C. Acoustic neuroma
- D. Basilar artery migraine
- E. Vestibular neuronitis

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- D. Nystagmus
- ☒ E. Vertigo

66. A 30 year old man presents with recent onset of ataxia, dizziness, and headache. Complete blood count indicates polycythemia. Magnetic resonance imaging (MRI) of the brain reveals a cystic cerebellar tumor near the foramen magnum. Computed tomographic (CT) scans of the abdomen identify cysts of the kidney and pancreas. The most likely diagnosis for the brain tumor is:

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67. A 32 year old man with a fifteen year history of temporal lobe epilepsy has recently had an increasing number of seizures despite the addition of several new medications to his anticonvulsant regimen. CT scan and MRI indicate a partially calcified mass in the anterior temporal lobe. The most likely histologic finding on biopsy of this mass would be:

- A. Glioblastoma multiforme
- B. Craniopharyngioma
- C. Neurilemoma
- ☒ D. Oligodendroglioma
- E. Medulloblastoma

68. Acoustic neuroma (neurilemoma or schwannoma) may be a part of what syndrome:

- ☒ A. Neurofibromatosis
- B. Cushing's disease
- C. Von Hippel-Lindau syndrome
- D. Acquired immunodeficiency syndrome (AIDS)
- E. Ataxia-telangiectasia

69. Which of the following tumors is associated with homozygous deletion of a region on chromosome 13 (region 13q14):

- A. Pinal choriocarcinoma
- B. Pituitary adenoma
- ☒ C. Retinoblastoma
- D. Meningioma
- E. Ependymoma

70. A 38 year old woman has recently noted galactorrhea and amenorrhea. Neurologic exam is

## ASSESSMENT EXAMINATION

Clumpke  
Dejerine

52. Following a brief flu-like illness, a 24 year old man presents with subacute onset over 5 days of asymmetric motor weakness, greater in the arms than in the legs. Lumbar puncture reveals moderately elevated CSF protein with few cells (albuminocytologic dissociation). The most likely diagnosis is:

- ☒ A. Guillain-Barré syndrome
- B. Porphyria
- C. Vitamin B<sub>12</sub> deficiency
- D. Alcoholic polyneuropathy
- E. Diabetic amyotrophy

53. A 24 year old woman complains of increasing weakness throughout the day, despite feeling strong upon awakening in the morning. In the evenings, she also notes drooping of one eyelid and occasional double vision. The most likely diagnosis is:

- A. Polymyositis
- B. Duchenne dystrophy
- C. Myotonic dystrophy
- D. Malignant hyperthermia
- ☒ E. Myasthenia gravis

54. A 55 year old moderately obese woman complains of burning paresthesias and loss of sensation on her lateral thigh. The most likely diagnosis is:

- ☒ A. Meralgia paresthetica
- B. Trigeminal neuralgia
- C. Wallenberg syndrome
- D. Bell's palsy
- E. Lambert-Eaton syndrome

55. A 14 year old previously healthy boy experiences a mild gastroenteritis followed by the rapid onset of flaccid weakness in the right arm and left leg. The most likely diagnosis is:

- A. Toxoplasmosis
- B. Tabes dorsalis
- C. Mucormycosis
- D. Cysticercosis
- ☒ E. Poliomyelitis

56. Horner's syndrome often accompanies which of the following conditions:

- A. Charcot-Marie-Tooth disease
- B. Meralgia paresthetica
- C. Erb-Duchenne palsy

☒ D. Klumpke-Dejerine palsy

E. Bell's palsy

57. A frail 60 year old widow who lives alone and has no friends in the community presents to her physician with a complaint of feeling chronically tired. On exam, she is noted to have loss of posterior column sensation, a positive Romberg test, spasticity, and bilateral Babinski reflexes. The most likely diagnosis is:

- A. Guillain-Barré syndrome
- B. Porphyria
- ☒ C. Vitamin B<sub>12</sub> deficiency
- D. Alcoholic polyneuropathy
- E. Diabetic amyotrophy

58. Foot drop would be expected with:

- A. Femoral nerve palsy
- ☒ B. Peroneal nerve palsy
- C. Erb-Duchenne palsy
- D. Klumpke-Dejerine palsy
- E. Meralgia paresthetica

59. A 55 year old woman with 70 pack-year history of smoking presents with complaints of generalized weakness. One month previously she had been diagnosed with small cell (oat cell) lung cancer. Repetitive nerve stimulation studies performed by the clinical neurophysiology laboratory reveal an incrementing response of the muscle action potentials. The most likely diagnosis is:

- ☒ A. Lambert-Eaton syndrome
- B. Botulism
- C. Malignant hyperthermia
- D. Myotonic dystrophy
- E. Myasthenia gravis

60. The disorder associated with dystrophin deficiency is:

- A. Myotonic dystrophy
- B. Polymyositis
- C. Myasthenia gravis
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- E. Type 2 muscle fiber atrophy

61. A 59 year old hypertensive man presents to the emergency department with the acute onset of severe vertigo, nausea, vomiting, nystagmus, and difficulty

## ASSESSMENT EXAMINATION

Klumpke  
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## SELF-ASSESSMENT EXAMINATION

- swallowing. Exam shows a moderately severe gait ataxia, right arm dysmetria, loss of the corneal reflex on the right with reduced sensibility on the right side of the face, a right Horner's syndrome, and diminished sensation to pinprick on the left arm, trunk, and leg. He has no demonstrable limb weakness. The most likely diagnosis is:
- Ménière's disease
  - Wallenberg syndrome
  - Acoustic neuroma
  - Basilar artery migraine
  - Vestibular neuronitis
62. The illusion that stationary objects are moving back and forth is:
- Oscillopsia
  - Dysequilibrium
  - Dizziness
  - Nystagmus
  - Vertigo
63. A 30 year old man complains of recurrent sudden attacks of vertigo associated with tinnitus. Audiometry indicates progressive high tone hearing loss. The most likely diagnosis is:
- Ménière's disease
  - Benign positional vertigo
  - Vestibular neuronitis
  - Motion sickness
  - Basilar artery migraine
64. Acute onset of vertigo and nystagmus associated with viral nasopharyngitis is characteristic of:
- Ménière's disease
  - Benign positional vertigo
  - Vestibular neuronitis
  - Motion sickness
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65. The illusion of rotational movement of self or the environment is termed:
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  - Dysequilibrium
  - Dizziness
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## ASSESSMENT EXAMINATION

normal except for bitemporal hemianopsia. The most likely diagnosis is:

- A. Colloid cyst of third ventricle
- ☒ B. Pituitary adenoma
- C. Pinal dysgerminoma
- D. Pituitary apoplexy
- E. Trilateral retinoblastoma

71. A 38 year old woman with a history of chronic schizophrenia has been hospitalized for treatment in the state mental facility for the past 22 years. Over these years she has been continuously treated with dopamine-blocking neuroleptic drugs. The attendants have observed that in the recent year she has more repetitive purposeless movements, particularly of the face and mouth. The most likely diagnosis is:

- A. Myoclonus
- B. Asterixis
- C. Parkinsonism
- D. Ballismus
- ☒ E. Tardive dyskinesia

72. A 14 year old girl presents with ataxia and chorcoathetosis. The ophthalmologist has identified Kayser-Fleischer rings during an eye examination. The most likely diagnosis is:

- A. Huntington's chorea
- ☒ B. Wilson's disease
- C. Gilles de la Tourette syndrome
- D. Progressive supranuclear palsy
- E. Tardive dyskinesia

73. A young single mother calls for an appointment for her 9 year old son who is now in the third grade. The teacher is complaining that the child disrupts the class because of his frequent facial grimaces, grunting and snorting sounds, and frequently shouted obscenities. The mother says that the child takes no medications and she denies any illicit drug use in the house. A likely explanation for this problem would be:

- A. Huntington's chorea
- B. Wilson's disease
- ☒ C. Gilles de la Tourette syndrome
- D. Progressive supranuclear palsy
- E. Tardive dyskinesia

74. The tremor characteristically associated with Parkinson's syndrome is:

- A. Myoclonus
- ☒ B. Resting tremor
- C. Intention tremor
- D. Action tremor
- E. Benign essential tremor

75. A 39 year old woman is brought to the emergency department for treatment of an attempted suicide which she took a sublethal dose of the tranquil diazepam (Valium). Her husband relates that she has been acting strangely for the past four years, increased forgetfulness, poor judgment, and irregular jerky limb movements. Apparently her mother had a similar clinical picture and successfully committed suicide at age 37 years. She also has an estranged older brother residing in a state mental hospital the past 5 years with dementia and a mood disorder. The most likely diagnosis is:

- ☒ A. Huntington's disease
- B. Gilles de la Tourette syndrome
- C. Neurofibromatosis type I
- D. Myasthenia gravis
- E. Progressive multifocal leukoencephalopathy

76. An organism acquired in the birth canal frequently causes meningitis in neonates is:

- A. *Neisseria meningitidis*
- ☒ B. *Listeria monocytogenes*
- C. *Staphylococcus aureus*
- D. *Haemophilus influenzae*
- E. *Staphylococcus epidermidis*

77. Examination of a 55 year old retired seaman sailor who spent many years working on cargo ships in the Orient reveals marked sensory loss involving mainly proprioception, a Romberg test, and severely deformed knees (Charcot joints). Pinprick exam. He complains of brief sharp lancinating pains in the lower extremities which can be brought on during the examination pinprick. The most likely diagnosis is:

- A. Toxoplasmosis
- ☒ B. Tabes dorsalis
- C. Mucormycosis
- D. Cysticercosis
- E. Poliomyelitis

78. The disorder of multiple brain cysts produced by the larval form of the pork tapeworm is:

- A. Neurosyphilis
- B. Lyme disease
- C. Toxoplasmosis
- ☒ D. Cysticercosis
- E. Scrub typhus

79. An elderly gentleman presents to the office with the complaint of sharp pains unilaterally in the upper abdomen and back in a band like distribution. Examination reveals reduced sensibility in the same area as the pain along with a vesicular rash. The most likely diagnosis is:

- A. Poliomyelitis
- ☒ B. Shingles
- C. Progressive multifocal leukoencephalopathy
- D. Subacute sclerosing panencephalitis
- E. Herpes simplex encephalitis

80. Two unrelated children in the same fifth grade classroom develop meningitis and a petechial skin rash. Both children die within several hours of the onset of the illness and at autopsy the medical examiner notes hemorrhagic infarction of the adrenal glands (Waterhouse-Friderichsen syndrome) in both children. The most likely causative agent is:

- ☒ A. *Neisseria meningitidis*
- B. *Listeria monocytogenes*
- C. *Staphylococcus aureus*
- D. *Haemophilus influenzae*
- E. *Staphylococcus epidermidis*

81. A 50 year old man is receiving various drugs for treatment for lymphoma. Over the past several weeks, he has developed a rapidly progressive dementia, associated with signs of ataxia, visual field defects, and spasticity. The most likely explanation is:

- A. Friedreich's ataxia
- ☒ B. Progressive multifocal leukoencephalopathy
- C. Creutzfeldt-Jakob disease
- D. Ataxia-telangiectasia
- E. Wilson's disease

82. The vaso-invasive organisms that spread from paranasal sinuses and retro-orbital tissues to produce

fatal brain infection in poorly-controlled diabetes mellitus are most likely to be:

- A. *Mycobacterium tuberculosis*
- B. *Cryptococcus neoformans*
- ☒ C. *Mucormycosis*
- D. *Borrelia burgdorferi*
- E. *Toxoplasma gondii*

83. While reviewing the medical record of a 55 year old recent immigrant from a Southeast Asia refugee camp, it is discovered that he has a positive syphilis serology in both his blood and cerebrospinal fluid. The ocular finding that would be useful in making the diagnosis of neurosyphilis in this man is:

- A. Partial oculomotor nerve palsy
- B. Trochlear nerve palsy
- C. Internuclear ophthalmoplegia
- ☒ D. Argyll Robertson pupil
- E. Horner's syndrome

84. A 40 year old outdoorsman presents for evaluation of a facial palsy, chronic headache, and leg pain, sensory disturbance, and some weakness in a radicular distribution. Further history indicates that he frequently camps outdoors for weeks at a time throughout the New England area. He admits to having been bitten by ticks, but does not remember when. A likely diagnosis would be:

- A. Neurosyphilis
- ☒ B. Lyme disease
- C. Toxoplasmosis
- D. Cysticercosis
- E. Scrub typhus

85. A 26 year old previously healthy woman experiences the subacute onset of behavioral changes, fever, and headache. Following a generalized seizure, she is brought to the emergency department where radiologic imaging studies show hemorrhagic necrosis of inferomedial temporal lobes. The most likely diagnosis is:

- A. Poliomyelitis
- B. Cysticercosis
- C. Progressive multifocal leukoencephalopathy
- D. Subacute sclerosing panencephalitis
- ☒ E. Herpes simplex encephalitis



## ASSESSMENT EXAMINATION

86. The disorder characterized by a fracture of the L5 vertebral neural arch occurring at or before birth is called:

- A. Klippel-Feil anomaly
- ☒ B. Spondylolysis
- C. Pott's disease
- D. Ankylosing spondylitis
- E. Syringomyelia

87. A 32 year old woman presents to the hospital because of a severe second-degree burn involving most of the palm of her left hand that occurred when she accidentally laid her hand on the burner of a stove and did not notice that the burner was hot. Exam reveals marked wasting and weakness of all intrinsic hand muscles bilaterally. She has loss of pain and temperature sense over both arms, shoulders, upper trunk and neck. Proprioception is preserved in her arms and hands. She also has bilateral extensor plantar responses (Babinski reflexes). The most likely diagnosis is:

- A. Klippel-Feil anomaly
- B. Spondylolysis
- C. Pott's disease
- D. Ankylosing spondylitis
- ☒ E. Syringomyelia

88. The anterior cord syndrome is characterized by:

- A. Ipsilateral spasticity and proprioceptive loss and contralateral loss of pain and temperature sensibility
- B. Greater weakness in arms than in legs, patchy sensory loss, and urinary retention
- ☒ C. Bilateral spasticity and loss of pain and temperature sensibility with preservation of proprioception
- D. Bilateral flaccid paralysis, anesthesia, areflexia, and bladder and sphincter dysfunction
- E. Bilateral loss of proprioception

89. Following surgery for an atherosclerotic abdominal aortic aneurysm, a 65 year old man with a 75 pack/year smoking history awakens with paraplegia and loss of pain and temperature sensation extending up to the T10 spinal cord level. Proprioception in his legs is preserved. The operative note from the surgeon indicates a difficult surgical repair of a large aneurysm that involved the origins of the renal

arteries (which had to be reimplanted above aortic-bypass graft used in the repair). The most likely diagnosis is:

- A. Syringomyelia
- B. Pott's disease
- ☒ C. Anterior spinal artery syndrome
- D. Ankylosing spondylitis
- E. Intramedullary metastasis of lung cancer

90. A 29 year old man complains of stiff back and neck particularly upon awakening in the morning. Exam shows limited neck motion and limited ability to bend forward at the waist. Spine radiographs show destruction of the sacroiliac joints and early bridging between vertebral bodies in the thoracic and lumbar spine. The most likely diagnosis is:

- A. Klippel-Feil anomaly
- B. Spondylolysis
- C. Pott's disease
- D. Ankylosing spondylitis
- ☒ E. Syringomyelia

91. Obstructive sleep apnea occurs during which sleep stage:

- A. Stage I sleep
- B. Stage II sleep
- C. Stage III sleep
- D. Stage IV sleep
- ☒ E. REM sleep

92. The symptom of narcolepsy in which there is sudden loss of muscle tone often precipitated by strong emotion (such as laughter) is:

- A. Sleep paralysis
- ☒ B. Cataplexy
- C. Hypnagogic hallucinations
- D. Pickwickian syndrome
- E. Pavor nocturnus

93. A 35 year old seemingly-healthy woman undergoing a dexamethasone suppression test shows no evidence of the normal circadian cortisol rhythm. The most likely explanation is:

- A. Somnambulism
- B. Simultaneous bromocriptine administration
- ☒ C. Depressive disorder
- D. Lambert-Eaton syndrome
- E. Binswanger's disease

94. Overly aggressive correction of hyponatremia can produce:

- A. Acute disseminated encephalomyelitis
- B. Experimental allergic encephalomyelitis
- ☒ C. Central pontine myelinolysis
- D. Acute transverse myelitis
- E. Retrobulbar neuritis

95. A 29 year old woman with multiple sclerosis has the following neurologic findings: with attempts to gaze to the left, the right (adducting) eye does not move past the midline, while the left (abducting) eye moves out but develops nystagmus; she can converge normally. The lesion producing these signs affects:

- ☒ A. Medial longitudinal fasciculus
- B. Right optic nerve
- C. Medial lemniscus
- D. Left Edinger-Westphal nucleus
- E. Right oculomotor nerve

96. A retarded teenage boy with large ears, prominent jaw, and macroorchidism would most likely have which disorder:

- A. Phenylketonuria
- B. Down syndrome
- ☒ C. Fragile-X syndrome
- D. Cretinism
- E. Adrenoleukodystrophy

97. At 3 months of age, the mother of a previously healthy infant first noted that the child had an exaggerated startle to slight noises in the bedroom. Developmental milestones have been delayed such that now at age 10 months the child still has poor sitting ability. Exam reveals generalized hypotonia. The child does not seem to respond visual cues. The optic fundus shows a macular cherry red spot. The most likely diagnosis is:

- ☒ A. Tay-Sachs disease
- B. Adrenoleukodystrophy
- C. Pompe's disease
- D. Autism
- E. Cretinism

98. In a newborn with a large tongue, abdominal distention, constipation, floppy, and prolonged neonatal jaundice the most likely diagnosis is:

- A. Phenylketonuria
- B. Down syndrome
- C. Fragile-X syndrome
- ☒ D. Cretinism
- E. Adrenoleukodystrophy

99. Elevated  $\alpha$ -fetoprotein levels in amniotic fluid are characteristic of which disorder:

- A. Tay-Sachs disease
- B. Adrenoleukodystrophy
- C. Pompe's disease
- D. Phenylketonuria
- ☒ E. Anencephaly

100. The disorder associated with abnormal peroxisomal  $\beta$ -oxidation of very long chain fatty acids is:

- A. Phenylketonuria
- B. Down syndrome
- C. Fragile-X syndrome
- D. Cretinism
- ☒ E. Adrenoleukodystrophy

# ASSESSMENT EXAMINATION

## Answers to Self-Assessment Examination

### Chapter 1

1. C
2. D
3. A
4. C
5. C
6. E
7. C
8. B
9. B
10. B

### Chapter 2

11. A
12. E
13. B
14. B
15. B

### Chapter 3

16. A
17. A
18. D
19. C
20. E

### Chapter 4

21. A
22. B
23. B
24. E
25. E

### Chapter 5

26. E
27. A
28. C
29. A
30. C
31. D
32. A
33. C
34. D
35. B

### Chapter 6

36. C
37. A
38. A
39. E
40. C

### Chapter 7

41. E
42. D
43. C
44. A
45. C

### Chapter 8

46. C
47. D
48. A
49. A
50. B

### Chapter 9

51. B
52. A
53. E
54. A
55. E
56. D
57. C
58. B
59. A
60. D

### Chapter 10

61. B
62. A
63. A
64. C
65. E

### Chapter 11

66. E
67. D
68. A
69. C
70. B

### Chapter 12

71. E
72. B
73. C
74. B
75. A

### Chapter 13

76. B
77. B
78. D
79. B
80. A
81. B
82. C
83. E
84. E
85. E

### Chapter 14

86. B
87. E
88. C
89. C
90. D

### Chapter 15

91. E
92. B
93. C

### Chapter 16

94. C
95. A

### Chapter 17

96. C
97. A
98. D
99. E
100. E

