



"اللَّهُمَّ بِكَ نَسْتَفِيحُ، وَبِكَ نَسْتَجِيحُ"

Which of the following is considered the most common non-motor clinical feature of Parkinson's disease?

- A) Constipation
- B) Loss of smell
- C) Depression
- D) Sleep disorders

Which true about idiopathic Parkinson ?

- A) Titubation
- B) Slow movement
- C) Intention tremor
- D) Tremors Decreased with sleep
- E) Unilateral tremor

Which of the following is NOT a risk factor for stroke?

- A) Hormonal replacement therapy
- B) Physical exercise
- C) HTN (Hypertension)
- D) Obesity

Which of the following is more characteristic of Parkinson's disease than drug-induced parkinsonism?

- A) Cogwheel rigidity
- B) Mask-like facial expression
- C) Bilateral involvement
- D) Flexed posture
- E) Restlessness in hands and legs

Pt wants to get pregnant she has epilepsy and on carbamazepine, and she is afraid of AED risks in pregnancy , what is your management?

- A) Continue carbamazepine
- B) Reduce then stop
- C) Switch to phenytoin
- D) Stop & discontinue in second trimester

A patient experiencing a crisis presents with several symptoms. Which of the following signs is characteristic of a myasthenic crisis but not typically seen in a cholinergic crisis?

- A) Miosis
- B) Bradycardia
- C) Normal pupils
- D) Fasciculations

All the following are optic nerve examinations except:

- A) Visual acuity test
- B) Fundoscopy
- C) Pupillary light reflex
- D) Corneal reflex



When inspecting the hand as part of a physical examination, all of the following are typically assessed or looked for, EXCEPT:

- A) Scars
- B) Wasting of muscles
- C) Involuntary movements
- D) Fibrillation
- E) Tremor

patient presented with lower limb weakness and sensory impairment. MRI showed multiple lesions resembling those seen in Multiple Sclerosis. The patient also had a history of being treated for optic neuritis last year, What the most likely diagnosis?

- A. Multiple sclerosis
- B. Clinically isolated syndrome
- C. radiologically isolated syndrome
- D. repeat MRI after one year

A patient demonstrates full range of motion of their left upper limb against gravity and resistance. Based on the Medical Research Council (MRC) scale for muscle power, what grade would you assign to this patient's left upper limb strength?

- A) Grade 2
- B) Grade 3
- C) Grade 4
- D) Grade 5

One of the following is wrong about Paroxysmal hemicrania:

- A) Severe stabbing or sometimes throbbing headache
- B) Periorbital or temporal area
- C) Each attack lasts from 2 to 60 seconds. (it's mins not secs)
- D) May have upto 12 or 15 episodes per day
- E) Strictly unilateral and always occurring on the same side



What is the most common site of encephalitis?

- A) Brainstem
- B) Spinal Cord
- C) Temporal lobes
- D) Cerebellum
- E) Occipital lobe

What is the best diagnostic test for an extradural hematoma?

- A) X-ray of the skull
- B) Lumbar puncture
- C) Computed Tomography (CT) scan of the brain without contrast
- D) Magnetic Resonance Imaging (MRI) of the brain
- E) Electroencephalogram (EEG)

Indication of evacuation in intracerebral hemorrhage:

- A) Lower limb weakness
- B) Intractable headache
- C) Cerebellar hemorrhage more than 5cm
- D) Fever
- E) Frequent seizure

Which of the following is the correctly matched couple of seizure semiology/feature and its most commonly associated brain region?

- A) Olfactory hallucinations = orbitofrontal cortex
- B) Fencing posturing = supplementary motor area
- C) Versive seizure = occipital lobe
- D) Auditory hallucinations = neocortical temporal lobe

مش متأكدين من إجابته



Regarding the management of viral meningitis, all of the following statements are generally correct, EXCEPT:

- A) Antibiotic therapy is mandatory for all confirmed cases.
- B) Pain and fever management are crucial for patient comfort.
- C) Antiviral medication is usually unnecessary, unless specific viral etiologies are suspected (e.g., Herpes Simplex Virus).
- D) Hospitalization may be considered for patients with severe symptoms or complications.
- E) Management is primarily supportive care.

Which of the following is NOT a management strategy for Guillain-Barré Syndrome (GBS)?

- A) Intravenous immunoglobulin (IVIG)
- B) Plasma exchange (PLEX)
- C) Corticosteroids
- D) Supportive care

What is the preferred treatment for Paroxysmal Hemicrania?

- A) Ibuprofen
- B) Paracetamol
- C) Indomethacin
- D) Tramadol

Which of the following medications is generally NOT routinely used in acute stroke management?

- a) Statin
- b) Heparin
- c) Thrombolytic
- d) Aspirin



A patient presents with signs suggestive of Dermatomyositis. Which of the following dermatological manifestations would you expect to see?

- A. Target lesion**
- B. Heliotrope rash**
- C. Shagreen**

Which of the following is true about Dopa Decarboxylase Inhibitors (DDCIs)?

- A) Increase levodopa's effect on the substantia nigra**
- B) Decrease extracerebral (peripheral) side effects**
- C) Decrease the risk of dyskinesia**

Best diagnostic test for ischemic stroke?

- A) Lumbar puncture**
- B) Electroencephalogram (EEG)**
- C) brain CT**
- D) Conventional X-ray**

All of the following are generally indicative of a good seizure prognosis EXCEPT:

- A) Normal IQ**
- B) Normal imaging**
- C) Normal EEG with medication**
- D) Multiple seizures**



Which of the following is NOT a common cause of embolic stroke?

- A) AFib
- B) Paradoxical emboli
- C) ICA
- D) Infective endocarditis
- E) HTN

Which of the following is wrong about generalized tonic-clonic seizure?

- A) Tonic phase
- B) Clonic phase
- C) Post-ictal confusion
- D) Automatism

Which of the following symptoms is not typically associated with Guillain-Barré Syndrome (GBS)?

- A) Progressive
- B) Ascending symmetrical limb weakness
- C) Muscle wasting
- D) Proximal more than distal weakness

What is the most common causative organism of encephalitis?

- A) HSV-1
- B) Enterovirus
- C) West Nile Virus
- D) Varicella-Zoster Virus



One of the following is NOT used as a treatment for cluster headache:

- A) High flow O2
- B) Steroid
- C) Lithium
- D) Morphine sulfate tablets
- E) Sumatriptan

All of the following are risk factors for headache of intracranial hypertension, except:

- A) Male sex
- B) Medications
- C) Polycystic Ovary Syndrome (PCOS)
- D) Obesity
- E) Female sex

A patient's symptoms worsened after a hot bath. This phenomenon is called:

- A) Romberg's sign
- B) Kernig's sign
- C) Uthoff phenomenon
- D) Brudzinski's sign

Which of the following is not a Miller Fisher syndrome symptom?

- A) Ataxia
- B) Ophthalmoplegia
- C) Loss of deep tendon reflexes
- D) Sensory level



Which of the following is most essential for the initial diagnosis of epilepsy?

- a) EEG findings
- b) Detailed patient history and neurological examination**
- c) Neuroimaging (e.g., MRI)
- d) Genetic testing

A 27-year-old Multiple Sclerosis (MS) patient presents with lower limb stiffness. Which of the following drugs is most important for managing this symptom?

- A) Interferon beta
- B) Glatiramer acetate
- C) Baclofen**
- D) Natalizumab

Which of the following is the least common presentation of Multiple Sclerosis (MS)?

- A) Numbness or tingling in the limbs.
- B) Vision problems (e.g., optic neuritis or double vision).
- C) Weakness or difficulty walking.
- D) Hypotonia.**

All of the following about headache are true except :

- A) Migraine is strictly unilateral.**
- B) Migraine may increase with head movement.
- C) Migraine may be associated with nausea.
- D) Migraine pain is typically throbbing.
- E) Aura, if present, typically precedes the headache phase.



Which of the following statements about neurological reflexes is correct?

- A) The accommodation reflex is preserved in oculomotor nerve palsy.
- B) Facial nerve palsy causes jaw deviation.
- C) Pupillary reflex can be preserved in oculomotor nerve injury.
- D) Glossopharyngeal nerve palsy or lesion causes tongue deviation.

Which of the following true ?

- A) Dysarthria caused by Wernicke's lesion
- B) Sensory and motor impaired repetition
- C) Sensory lesion associated grammatically errors
- D) Motor lesion with fluent
- E) Weakness tongue muscles cause expressive aphasia

مش متأكدين من إجابته

One is not in sensory examination?

- A) Pain
- B) Vibration
- c) Joint position
- D) Temperature
- E) Heel shin test

Which of the following medications is least commonly used in the acute treatment of Subarachnoid Hemorrhage (SAH)?

- A) Nimodipine
- B) Tranexamic acid
- C) Heparin
- D) Vit K
- E) statin



Choose the FALSE combination:

- A) Athetosis is slow writhing movement
- B) Tics are semivoluntary movement
- C) Hemiballismus due to contralateral lesion in subthalamic nucleus
- D) Myoclonus is regular jerk

للمراجعة
نقاط مهمة تكررت الأسئلة عليها خلال السنوات



MRC Muscle Power Scale

Score	Description
0	No contraction
1	Flicker or trace of contraction
2	Active movement, with gravity eliminated
3	Active movement against gravity
4	Active movement against gravity and resistance
5	Normal power

Table 20.3 Miller Fisher syndrome.

Ophthalmoplegia	1	
Ataxia	2	Triad
Areflexia	3	
Little or no weakness		
Association with a specific antiganglioside antibody		

Response	Scale	Score
Eye Opening Response	Eyes open spontaneously	4 Points
	Eyes open to verbal command, speech, or shout	3 Points
	Eyes open to pain (not applied to face)	2 Points
	No eye opening	1 Point
Verbal Response	Oriented	5 Points
	Confused conversation, but able to answer questions	4 Points
	Inappropriate responses, words discernible	3 Points
	Incomprehensible sounds or speech	2 Points
	No verbal response	1 Point
Motor Response	Obeys commands for movement	6 Points
	Purposeful movement to painful stimulus (<i>Localize Pain</i>)	5 Points
	Withdraws from pain	4 Points
	Abnormal (spastic) flexion, decorticate posture	3 Points
	Extensor (rigid) response, decerebrate posture	2 Points
	No motor response	1 Point

Minor Brain Injury = 13-15 points; Moderate Brain Injury = 9-12 points; Severe Brain Injury = 3-8 points

Clinical features of parkinson disease

- Tremor (pill-rolling tremor at rest)
- Rigidity (can be lead pipe or cogwheel)
- Akinesia (or bradykinesia)
- Postural instability
- Shuffling gait
- Small handwriting (micrographia)

Motor neuron signs

SIGN	UMN LESION	LMN LESION	COMMENTS
Weakness	+	+	Lower motor neuron (LMN) = everything lowered (less muscle mass, ↓ muscle tone, ↓ reflexes, downgoing toes)
Atrophy	-	+	
Fasciculations	-	+	Upper motor neuron (UMN) = everything up (tone, DTRs, toes)
Reflexes	↑	↓	
Tone	↑	↓	Fasciculations = muscle twitching
Babinski	+	-	Positive Babinski is normal in infants
Spastic paresis	+	-	
Flaccid paralysis	-	+	
Clasp knife spasticity	+	-	

Myasthenic Crisis and Cholinergic Crisis

Myasthenic crisis vs. cholinergic crisis		
	Myasthenic crisis	Cholinergic crisis
Shared symptoms	<ul style="list-style-type: none">• Muscle weakness• Dyspnea• Sweating• Agitation• Disorientation• Drowsiness• Urinary and fecal urgency	
Pupil	• Normal	• Miosis
Fasciculations	• None	• Present
Heart rate	• Tachycardia	• Bradycardia
Skin	• Cold and faint	• Warm and flushed
Bronchial secretion	• Normal	• Increased

يا رب؛ أنا عبدك الذي أعينته الحيل وتعطلت بين يديه الوسائل، وأنت الله الذي لا يمنع عطاءك انعدام الحيلة ولا عجز الوسيلة، فاكتب عاقبتك بقدرتك لا بجهد الهزيل، واكتب وصولي بكرمك لا بسيري الأعرج، واكتب رضي بابتغائي وجهك لا بخطواتي المكسورة.

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- شيماء هشام سعد.