

All To assess Vestibulocochlear nerve EXEPT ??

Fukuda test

Whisper test from behind

Weber +Rinne test.

Romberg

Head pulse test

False matching:

Cataplexy: antipsychotics

Akathesia: continuous urge to move

C Upper&Lower motor neuron signs: motor neuron disease

D Dystonia: continuous muscle contraction

A patient presented with status epilepticus, eh was given 10mg of diazepam but didn't get better,What is the next step?

A. 20mg of phenytoin + saline for 2 minutes

B.20mg of phenytoin +glucose infusion

C.20mg of phenytoin + saline infusion

D.20mg of phenytoin +glucose for 2minutes

E. Diazepam 10

انتبهوا بفرق عن سؤال الدوسية ، كانت propofol

All are true about mini mental status examination except?

MMSE is 30 points screening tool used to diagnose dementia

100-7 > Registration

score of 23 risk for mild dementia

It's affected by the patient education

Patient came with fever and headache, if this sign was positive One of the following is wrong?

CSF analysis can be relied on after days of antibiotics

A patient opens their eyes only to painful stimuli, localizes pain, and speaks in a confused manner. What is their Glasgow Coma Scale (GCS) score?

A. 13

B.9

C.10

D. 11

Pt complained of one seizure, which statement is true?

- A. Routine EEG could be normal in epilepsy ***
- B. A normal EEG rules out the possibility of epilepsy.
- C. Immediate antiepileptic drug (AED) therapy is always required after a first seizure.
- D. Neuroimaging (e.g., MRI) is unnecessary if the neurological exam is normal.

Which of the following is ^{not} true regarding the oculomotor nerve?

Accommodation is usually affected in oculomotor nerve lesions

Ptosis is always due to oculomotor nerve palsy

It is involved in the pupillary light reflex examination

Patient came with weakness and numbness of lower extremities more than upper extremities, with hyperreflexia. The most important next step in diagnosis will be:

- A. Nerve conduction study
- B. Perform spinal MRI
- C. Lumbar puncture

***75 years old male came with acute stroke. He has right side weakness. He has spontaneous speech with occasional paraphrasic errors. He cannot understand and follow commands, and repetition is affected.**

•Which of the following best explains his speech pattern?

Broca aphasia

Transcortical aphasia

Conduction aphasia

Wernicke aphasia

Global aphasia

All of the following are correctly matched except :

Resting tremor is characteristic for

Parkinson's disease

Intention tremor increase while getting closer to the target

Myoclonus is sudden and irregular

Tic voluntary

50 years old female pt came to ER with progressive sever headache, your initial investigation to do:

ESR and CRP

spinal cord MRI

CSF analysis

brain CT scan

pt presented with symmetrical loss of position, touch, vibration and sensation of both feet up to the ankle joint, he is most likely suffer from?

- A. polyneuropathy
- B. L5-S1 disc prolapse
- C. mononeuropathy
- D. spinal cord lesion

Old patient came to ER with bilateral lower limb weakness, & other signs), areflexia

What is the investigation?

spinal MRI

csf analysis

lumber MRI

patient with Optic neuritis, all of the following finding are present in this patient except:

Visual acuity defect

Visual field defect

Color vision normal

Fundoscopy maybe normal

The score or degree of patient who can flex arm against gravity but not against resistance is

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

According to the sensory examination. One of the following is False?

small nerve neuropathy lead to balance problem

Which of the following is wrong about bulbar palsy ?

Has hyperreflexia

not look to the right, fast phase of nystagmus to the left, what's the type of nystagmus?

- a) right jerky nystagmus
- b) left jerky nystagmus
- c) multidirectional nystagmus
- d) left pendular nystagmus
- e) right pendular nystagmus

Vagus and glossopharyngeal nerve :
Ophthalmoplegia

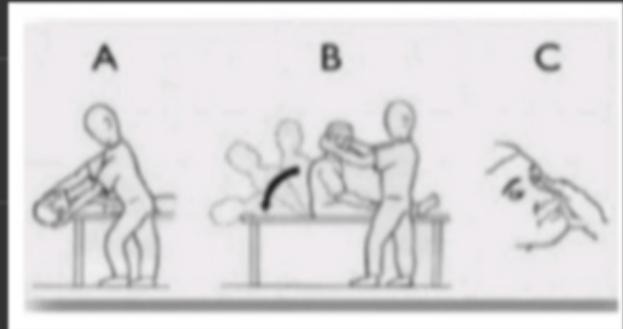
Pt. With GBS , one of the following is true :

- A Spastic
- B Clonus
- C Absent ankle reflex

Otolith in endolymph :
BPPV

1- This test used to asis

- A. Otolith in posteior semicircular canal
- B. Otolith in lateral semi circular canal
- C. Otolith in anterior semi circular canal
- D. Exsiccive endo lymph



سؤال ثاني عليه :

Coordination : Dix hallpike test

27.

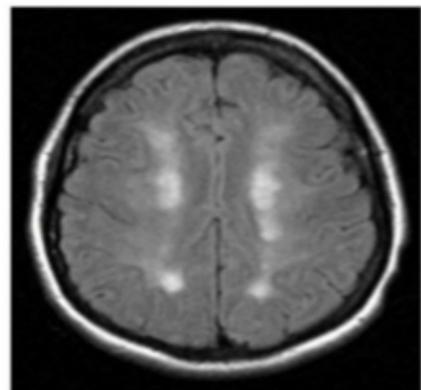
In clinical exam was asked the pt to close her eye, possible extra lesion:

- A. Tongue deviation
- B. Loss of taste
- C. Jaw jerk hyperreflexia
- D. Swallowing difficulty
- E. left ear hyperacusis ***



This condition is caused by ?

- A. Severe hypertension
- B. Severe hypotension**
- C. Encephalitis
- D. Meningitis
- E. Vasculitis



① CT shows :

- A) subarachnoid hemorrhage
- B) subdural hematoma
- C) interstitial edema
- D) cytotoxic edema
- E) intracerebral hematoma

Ans: B



④ Which of the following is true?
Left pterygoid muscle is affected



⑤ Which cerebellum is the test in the photo examining

A. Left cerebellum

B. Right cerebellum

C. Left cerebral

D. Right cerebral



Q18 Choose the correct answer

A. (A fungal)

B. (A viral)

C. (B viral)

D. (A TB)

	A	B
Opening pressure	elevated	elevated
WBCs	Elevated mainly lymphocytes	Elevated mainly neutrophils
RBCs	none	few
Glucose	Marginally Slightly low	low
Protein	high	high
Appearance	turbid	turbid

Q1. patient has sensory loss in the highlighted area , most likely clinical sign found :

- A. Weakness of tibialis anterior
- B. Weak eversion
- C. Plantar flexion upward



ANSWER : A

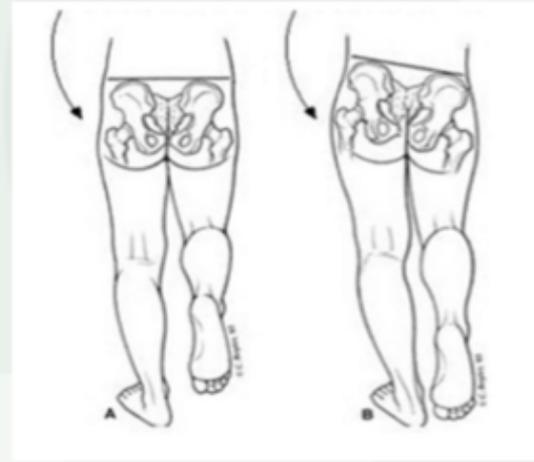
The name of this condition?
Meralgia paresthetica

السؤال هون كان كاتب اسم الحالة و بدو الصح عنها
Sensory only

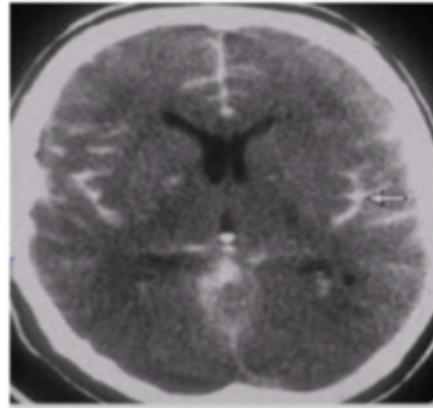


34.

which nerve is affected?
Superior gluteal nerve**



8-what is the diagnosis?
Subarachnoid hemorrhage



• What is the diagnosis?
Dermatomyositis.



Source: IMACS

False about this condition?

- Mostly inherited
- bilateral homogenous symmetrical

- ankle reflex preserved

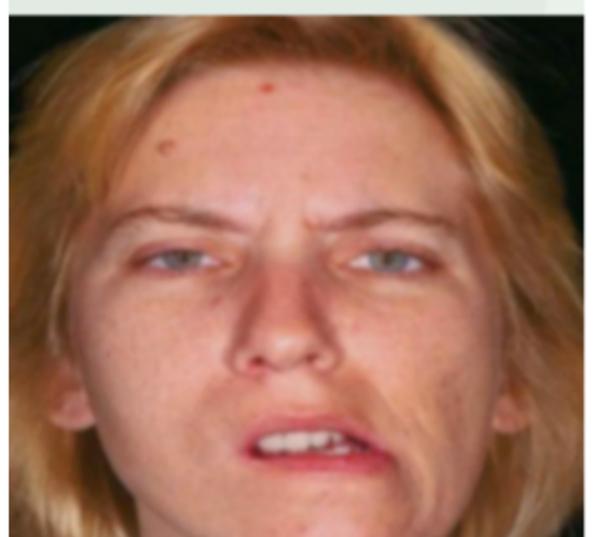


كان العكس المطلوب العكس

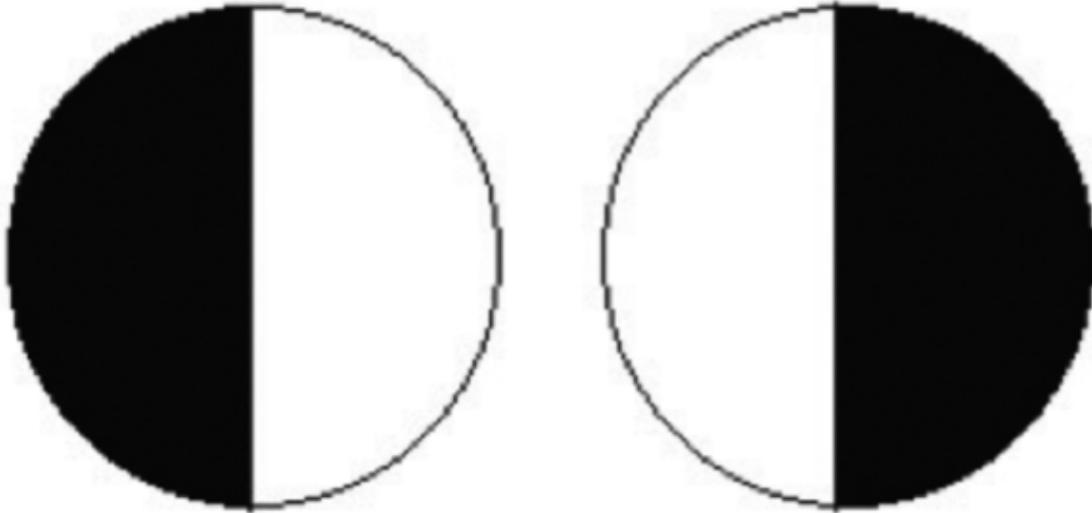
**Pt. With Bell's palsy ,
one of the following is
true :
Ophthalmoplagia**



**Features of Trigeminal
nerve :
Left angle of mandible
preserved**



Bitemporal hemianopia:



Caused by a lesion at the optic chiasm.
Loss of the temporal half of vision in both eyes.

Syringomyelia

❖ Mention 3 symptoms in this patient

- Cape like distribution loss of pain and temperature
- Cape like distribution dysesthetic pain
- Cape like distribution muscle atrophy, fasciculations, and areflexia
- Spastic paraparesis of the lower limbs may occur
- Autonomic disturbances
- Respiratory insufficiency

❖ What you think about reflexes ?

- Hyper (UML)



كان الجواب Knee Rflex hyper