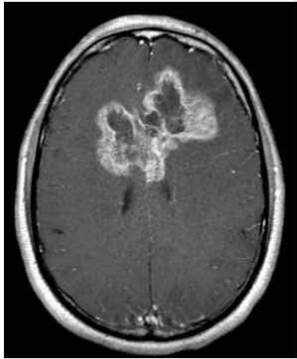


Neurosurgery Archive



- 1-Histological: pseudo palisading and central necrosis
- 2- treatment: Surgical then chemotherapy then radiation therapy
- 3- symptoms: headache/ seizures/ hemiparesis/ (all of the above)
- 4-One of the following will mostly be associated with abscess but not glioblastoma: Renal disease/ dialysis



[pic was not the same and not sure of the answers]

- 1-Cells of this type of tumor: ependymal cells (?)
- 2- Management: surgery (?)
- 3-MC symptom with such tumor: back pain (?)

Subdural

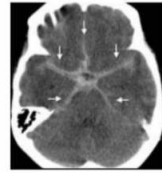
- 1)All except??
Don't cross suture
- 2)Indication for intubation except??
Hypoxemia
Rapid loss of consciousness
GCS<8
Skull fracture ✓
- 3)Do decompression to???
Relief pressure symptoms
- 4)GCS ???
Open eye to painful stimuli
Displays flexion to pain
Incomprehensible Word



What is the most common site of spontaneous cause of SAH

- A. Base of skull
- B. Intracerebral
- C. Intracranial

Ans : A



Which of the following factor favor clipping than coiling

- A. Young age
- B. Narrow nick
- C. Multipel comorbidities

Ans : A

What is the percentage of paientes dies before reach hospital

- A. 70%
- B. 35%
- C. 15%
- D. 25%

Ans: c

What the name of the anomaly?
Scaphocephaly



What is the most common craniocynosis present in male

- A. Scaphocephaly
- B. Plagiocephaly
- C. Trigonocephaly
- D. Brachiocephaly

Ans: A

What is the most type of chiari malformation present in mayelomeningocele

- A. Chiari one
- B. Chiari two
- C. Chiari three
- D. Chiari four

Ans: B

What is the most type of chiari malformation present in mayelomeningocele

- A. Chiari one
- B. Chiari two
- C. Chiari three
- D. Chiari four

Ans: B

What is the surgery of choose for CSO

- A. Strip craniectomy