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| Fifth-year Neurosurgery Exam | | | |

**This folder contains NeurosurgeryMCQ questions from :**

**2018 , 2019,2020,2021 & Four unknown years**

**امتحان 2021 جديد وليس سنوات هنالك 5 اخطاء من ضمن الحل صاحب الاجابات حصل 35\40  
امتحان 2019 و2020 تم كتابتهم من دكتور الياس الضمور ولكن خرج سنة 2021**

**الامتحانات قبل 2019 هم امتحانات من دكاترة المدينة   
قام بجمع وترتيب هذاالنموذج طارق أبولبدة&عمار العضايلة ..**

**و لعام 2020 مهند الخزاعلة ولعام 2021 سارة خرفان ورهف الحسبان  
 وبإشراف لجنة الطب والجراحة ..**



**2021**

**1) The management of a skull fracture is highly dependent on the type and location of the fracture Which of the following statement is**

**true concerning skull fractures?**

Select one

a. Simple non-depressed linear skull fracture is of no significant consequence

O b. ALL depressed fractures require surgery to elevate the depressed bone regardless of neurologic status

c Basal skull fractures involve the base of the calvarium and suggested by bruising about the eye or the ear.

d. CSF thinorrhea associated with a basal skull fracture requires prompt surgical exploration and repair of the defect

e Prophylactic antibiotics are NOT indicated in all basal skull fractures associated with CSF minorthea or otorrhea

**2) A right-sided disc herniation at the L5-S1 level typically may cause:**

**Select one:**

a. Low back pain and right sciatica.

b. Weakness of dorsiflexion of the right foot.

C. A diminished or absent left ankle jerk.

d. Diminution of sensation over the medial aspect of the right foot, including the great toe.

e. Weakness of dorsiflexion of the left foot.

**3) CHORDOMAS' are tumours arising from remanents of**

**Select one:**

a. Ectopic Cord tissue.

b. Notochord tissue.

c. Rathke's pouch.

d. Ectopic lymphatic tissue.

e. Endoderm tissue

**4) Galactorhea, Amenorrhea syndrome is most commonly caused by:**

**Select one:**

a. Chromophobe adenoma.

b. Prolactinoma.

c. Chorionic Carcinoma.

d. Basophil ademoma.

e. Astrocytoma.

**5) The most common location for spontaneous intracerebral hemorrhage secondary to hypertension is:**

**Select one**

a. Cerebellum

b. Cerebral white matter

c Basal ganglia

d. Brainstem

e. Cerebral gray matter

**6) Which of the following lesions is not one of the cutaneous stigmata of occult spinal dysraphism?**

**Select one:**

a. Midline lumbar capillary hemangioma.

b. Focal hairy patch over the thoracolumbar spine.

C. Dermal sinus located above the midsacrum.

d. Café-au-lait spot over the thoracolumbar spine

e. Midline subcutaneous lipoma

**7) Arteriovenous Malformations of the Brain are most commonly seen in the distribution of**

**Select one:**

a. Anterior cerebral artery.

b. Basilar artery.

c. Middle cerebral artery

d. Posterior cerebral.

e. Vertebral artery

**8) Which of the following statements is true?**

**Select one:**

@ a The usual symptomatic lumbar disc herniation occurs in a far-lateral direction

b. Approximately 95 percent of lumbar disc herniations occur at the L5-S1 or L2-L3 level

C. Sciatica is a term used to denote pain felt along the distribution of the sciatic nerve:

d. Weakness of dorsiflexion of the foot is a mechanical sign of a lumbar disc herniation

e X-ray films of the lumbosacral spine are obtained to demonstrate the presence and location of a lumbar disc herniation

**9)Extradural haematoma is due to bleeding from all the following sources except:**

**Select one:**

a. Straight sinus

b. Transverse sinus.

C. Diploic Veins.

d. Middle meningeal artery.

e. Superior sagittal sinus

**10) Patients who have survived a subarachnold hemorrhage from a ruptured intracranial aneurysm are at risk for all except:**

Select one

a. Re-hemorrhage

b. Cerebral artery vasospasm

C. Ischemic stroke

d. Hydrocephalus

e. Cardiac arrhythmia

**11) Which of the following is not a component of lower motor neuron lesion?**

**Select one:**

a. Disuse atrophy

b. Absent deep tendon reflexes.

C. Fasciculations and fibrillations.

d. Hypotonia

e. Hyporeflexia

**12) Which of the following is NOT transmitted via the dorsal column system?**

**Select one:**

a. Position

b. Vibration

C. Pain

d. Fine touch

e. Pressure

**13)Which one of the following is not a component of Horner's syndrome?**

**Select one:**

a. Miosis

b. Enophthalmos.

C. Anhydrosis

d. Exophthalmos

e. Correctible ptosis.

**14)With the eyeball adducted (turned inward), the depression or downward movement of the eye ball is mediated through:**

**Select one**

a Superior oblique muscle.

O b. Inferior oblique muscle.

c. Inferior rectus muscle

d. Medial rectus muscle

e. Lateral rectus muscle

**15) Which of the following is NOT a characteristic of subacute subdural hematoma?**

**Select one:**

a. Compression of the lateral ventricle on the side of the hematoma.

b. Effaced sulci.

c. White matter buckling

d. Thick cortical mantle.

e. Insular ribbon sign.

**16) In spite of the best treatment, the highest mortality is associated with:**

**Select one:**

a. Extradural Hematoma.

b. Acute Subdural Hematoma.

C. Chronic Subdural Hematoma.

d. Subacute Subdural Hematoma.

e. Traumatic SAH.

**17) Surgery is usually not the primary treatment option in:**

**Select one:**

a. Prolactinoma.

b. Microadenoma with acromegaly.

c. Nonfunctioning pituitary adenoma.

d. Invasive pituitary adenoma.

e. Microadenoma with Cushing.

**18) Which of the following is NOT true concerning subarachnoid hemorrhage?**

**Select one:**

O a. A large amount of hemorrhage in the basilar cisterns could be a ruptured aneurysm.

O b. Subarachnoid hemorrhage most commonly occurs over the cerebral convexity

C. Subarachnoid hemorrhage can occur adjacent to a cerebral contusion.

d. On CT, the hemorrhage appears as focal hypodensity in sulci and fissures

e Subarachnoid hemorrhage occurs with injury of small arteries or veins on the surface of the brain.

**19) Acute onset of the "worst headache of my life" is typical of.**

**Select one:**

a. Intracerebral hemorrhage.

b. Subarachnoid hemorrhage.

c. Cerebellar hemorrhage.

d. Temporal arteritis.

e. Brain abscess.

**20) Bacterial brain abscesses are usually treated by:**

**Select one:**

a. Empiric antibiotics without biopsy.

b. Oral antibiotics for four weeks.

c. Radical surgical excision.

d. A two week course of antibiotics.

e. Stereotactic aspiration followed by 4-6 weeks of IV antibiotics

**21. A patient's blood pressure is 120/60mmHg and ICP reading is 30mmHg. What is his cerebral perfusion pressure (CPP)?**

**Select one:**

a. 50 mm Hg

b. 30 mm Hg

c. 90 mm Hg

d. 60 mm Hg

e. 70 mm Hg

**22. All of the following arteries are branches of the basilar artery except the:**

**Select one:**

a. Pontine Arteries

b. Middle Cerebral Artery

C. Posterior Cerebral Artery

d. Superior Cerebellar Artery

e. AICA

**23. Which of the following is NOT a sign indicating raised intracranial Pressure?**

**Select one:**

a. Sutural diastasis.

b. Beaten silver appearance.

C. Erosion of posterior clinoid processe.

d. Bone vascular invagination.

e. Intracranial Calcification.

**24. 'Cushings triad' in relation to raised intracranial pressure includes:**

**Select one:**

a. Headache, Vomiting and visual loss.

b. Pupillary dilatation, hypotension and tachycardia.

c. Decerebration, hypotension and tachycardia.

d. Pupillary dilatation, hemiplegia, altered sensorium.

e. Bradycardia Bradypnea and Hypertension.

**25. Which Spinal Cord Injury should Undergo Surgical Treatment?**

**Select one:**

a. Concussion.

b. Contusion.

c. Compression.

d. complete anatomic rupture.

e. Hematomyelia.

**26. The two lateral ventricles are separated by:**

**Select one:**

a. Falx cerebri.

b. Septum pellucidum.

c. Cavumvergae.

d. Corpus callosum.

e. Tentorium.

**27. Which of the following symptoms Is Not Typical For Subarachnoid Hemorrhage In rupture Of Arterial Aneurism Of Cerebral Vessels?**

Select one:

a Kemig's symptom

b. Brudzinskiy's symptom

c. occipital stiffness

d. paresis of the oculomotor nerve

e Horner's syndrome.

**28. Modic type two changes are:**

**Select one:**

a. Low signal T1 and High signal T2

b. Low signal T1 and Low signal T2

C. High signal T1 and High signal T2

d. High signal T1 and Low signal T2

e. High signal T1, High signal STIR, and Low signal T2.

**29. A 36-year-old man developed neck and left arm pain. He noted paresthesia in the left index and long fingers. He was found to have weakness of the left triceps muscle and a diminished left triceps jerk. His left-sided disc hemiation is most likely to be at:**

**Select one:**

a C3-C4

b. C4-C5

C. C5-C6

d. C6-C7

e C7-T1

**30. Which of the following is not a branch from the external carotid artery?**

**Select one:**

a. Ophthalmic artery.

b. Ascending pharyngeal artery.

c. Lingual artery.

d. Facial artery

e. Superior thyroid artery.

**31. The definition of low back pain in epidemiological studies is which one of the following statements:**

**Select one:**

a. Is any pain between T12 and the sacrum

b. is any midline pain between the sacroiliac joints and the superior margin of L1

c. Is any pain between T10 and the sacrun

d. Is any midline pain between T12 and the sacroiliac joints

e. Is any pain between the costal margin and the buttock crease.

**32. Inferior sagittal sinus drains into:**

**Select one:**

a. Sigmoid sinus

b. Inferior petrosal sinus.

c. Transverse sinus.

d. Straight sinus

e. Superior sagittal sinus.

**33. The commonest site for extradural hematoma is:**

**Select one:**

a. Subfrontal region.

b. Parietal region.

c. Parafalcine region.

d. Temporal region.

e. Posterior Fossa.

**34. What statement better describes Normal Pressure Hydrocephalus (NPH)?**

**Select one:**

a NPH is a common condition of newborns and never occurs in teenagers.

b. Patients with NPH, the ventricles enlarge put the pressure of the CSF is less than normal range.

C.NPH is a life-threatening condition and should be treated as an emergency.

d. Diagnostic criteria are easily applied due to knowledge of the underlying pathophysiology

e. The symptom might improve with shunting is incontinence then gait disturbance &; lastly dementia

**35. The part of the neuron that receives messages from other cells is called:**

**Select one:**

a. Axon.

b. Soma

c. Schwann cell.

d. Dendrites

e. End plate.

**36. In children 'Setting sun' is most commonly seen in:**

**Select one:**

a. Craniopharyngiomas.

b. Medulloblastoma.

c. Hydrocephalous.

d. Head Injuries.

e. Brain abscess

**37. Management options in the treatment of intracranial hypertension secondary to trauma include all of the following except:**

**Select one:**

a. High dose cortical steroids.

b. Mild sedation

c. External ventricular drainage

d. Use of osmotic diuretics

e Decompressive cranioectomy

**38. Cerebrospinal fluid is formed by:**

**Select one:**

a. Active secretion.

b. Filtration.

c. Both, Active secretion and Filtration.

d. Physical osmosis.

e. Diffusion.

**39. Which statement is wrong regarding head trauma?**

**Select one:**

a Normal ICP is 10mmHg.

b. A cerebral perfusion pressure &lt; 70mmHg is associated with bad outcome.

C. Cushing reflex will cause bradycardia and hypotension.

d. The midbrain passes thru the aperture of tentorium

e. The uncus is the medial part of the temporal lobe.

**40. Myelomeningoceles are congenital malformations of the spinal cord. Which of the following findings are not commonly associated?**

**Select one:**

a.Mandatory urinary incontinence

b. Chiari Il malformation

C. A midline dorsal spinal mass easily noted at birth

d. Skin, bone, and dural defects superficial to the neural placode

e Hydrocephalus

**2020**

**1 - Cephalohematoma is a?**

Select one:

a. Subcutaneous hematoma

b. Subaponeurotic hematoma

c. Subperiosteal hematoma

d. Subdural hematoma

e. Subtentorial hematoma

**2 - The proper method for surgical removal of a chronic subdural hematoma in an adult patient is?**

Select one:

a. burr hole and subdural drain insertion for evacuation

b. craniotomy and evacuation

c. endovascular removal

d. steriotactic removal

e. puncture and needle aspiration

**3 - Which one of the following is not a shunting proceedure for hydrocephalus?**

Select one:

a. Ventriculo-cystic shunt (to the urinary bladder) ????????

b. Ventriculo-pritoneal shunt (to the peritoneal cavity)

c. Ventriculo-pleural shunt (to the pleural space)

d. Ventriculo-atrial (to the heart)

e. Ventriculo-subarachnoid shunt (to the subarachnoid space)

**4 - Which one of the following best describes Lundberg (A) ICP (Intra-cranial pressure) waves?**

Select one:

a. periodic self-limited increase in ICP (20-50 mmHg) occuring every (1 to 2 minutes) and lasting several seconds

b. periodic self-limited increase in ICP (&lt;20 mmHg) occuring every (4 to 8 minutes)

c. periodic sustained increase in ICP (&lt;10 mmHg) lasting for (1 to 5 minutes)

d. it is a normal ICP wave form and it is of no pathological significance

e. periodic sustained increase in ICP (&gt;50 mmHg) lasting for (5 to 20 minutes)

**5 - Which of the following brain tumors can disseminate through CSF (drop metastasis) to the spine?**

Select one:

a. Oligodendroglioma

b. Pilocytic Astrocytoma

c. Diffuse astrocytoma

d. Medulloblastoma

e. Vestibular schwannoma

**6 - Which of the followings is wrong about spinal tumors?**

Select one:

a. The commonest tumor is metastases

b. Meningiomas tend to be associated with neurofibromatosis type I

c. Ependymomas are more common than astrocytomas?????(Ependymoma most common in adults, Astrocytoma most common in children)

d. Schwannomas are more easily excised than neurofibromas

e. Most prostatic metastases occur in the lumbar spine

**7 - A prolapsed intervertebral disc at L3-L4 level in a far lateral direction will produces?**

Select one:

a. L4 radiculopathy

b. L3 radiculopathy

c. L5 radiculopathy

d. L2 radiculopathy

e. Cauda equina syndrome

**8 - Cranial meningiomas arise from?**

Select one:

a. Dura

b. Neuroblast

c. Pia matter

d. Periosteum

e. Arachnoid cap cells

**9 - One of the following (must) be evaluated by a conventional cerebral angiogram?**

Select one:

a. meningitis

b. cerebellar tumor

c. cerebral tumor

d. spinal tumor

e. spontaneous subarachnoid hemorrhage

**10 - All of the following are intramedullary spinal tumors except?**

Select one:

a. Plasmacytoma

b. Ependymoma

c. Astrocytoma

d. Hemangioblastoma

e. Lipoma

**11 - Acute traumatic intracranial hematomas frequently manifest with?**

Select one:

a. Hypersalivation

b. Hyperhydrosis

c. Seizures ?????

d. Acute adrenal failure

e. Toxic shock

**12 - The typical appearance of an acute extradural hematoma on non-contrasted CT-scan of the head is?**

Select one:

a. Hypodense lens shape

b. Hypodense crescentric shape

c. Hyperdense crescentric shape

d. Hyperdense lens shape

e. Isodense lens shape

**13 - Which of the following nerve roots is involved in the ankle jerk?**

Select one:

a. L1

b. L4

c. S3

d. S1

e. L5

**14 - Source for formation of subdural hematoma?**

Select one:

a. Anterior choroidal artery

b. Pial veins

c. Choroid plexus of the lateral ventricles

d. Choroid plexus of the 4th ventricle

e. Arteries of the circle of Willis

**15 - Transition from prolonged coma to a stable or a transient vegetative state is seen after?**

Select one:

a. brain concussion

b. diffuse axonal injury of the brain

c. brain tumour

d. subgaleal hematoma

e. epidural hematoma

**16 - In which type of post traumatic intracranial hemorrhage a "lucid interval" is most likely to be seen?**

Select one:

a. cerebral contusion

b. brain concussion

c. epidural hematoma

d. subdural hematoma

e. subarachnoid hemorrhage

**17 - Most Common source for the formation of Epidural hematomas?**

Select one:

a. Cerebral arteries and veins

b. Choroid plexus of the 4th ventricle

c. Galen's Vein

d. Diploic vessels of the cranial bones

e. Middle meningeal arteries

**18 - Berry aneurysms are usually located in the circle of Willis. The commonest site is?**

Select one:

a. The basilar tip

b. The posterior cerebral artery

c. The anterior communicating artery

d. The middle cerebral artery bifurcation

e. The internal carotid artery bifurcation

**19 - What is the most common incomplete spinal cord injury type?**

Select one:

a. Anterior Cord

b. Central Cord

c. Posterior Cord

d. Cauda Equina

e. Brown Sequard

**20 - All the following sites may be used for ICP (intracranial pressure) monitoring except?**

Select one:

a. subdural

b. diploic (skull)

c. brain parenchyma

d. epidural

e. intraventricular

**21 - According to Glasgow Coma Scale, A severe craniocerebral traumatic injury would score?**

Select one:

a. 1-2 Points

b. 3-7 Points

c. 8-10 Points

d. 11-13 Points

e. 14-15 Points

**22 - Which of the following brain tumors has the best prognosis in general?**

Select one:

a. Glioblastoma

b. Ependymoma

c. Astrocytoma

d. Meningioma

e. Medulloblatoma

**23 - One of the following spinal cord tumors is considered most likely to be found in intradural intramedullary location?**

Select one:

a. Ependymoma

b. Schwannoma

c. Meningioma

d. Metastasis

e. Osteoma

**24 - Bradycardia, hypertension, Hemiparesis and anisocoria are classic presentations of?**

Select one:

a. Carotid cavernous fistula

b. Arnold-Chiari Malformation

c. spinal cord tumor

d. Compression vascular neuropathy

e. Traumatic intracranial hematoma

**25 - Which of the following is not a characteristic of the Brown-Sequard syndrome?**

Select one:

a. contralateral loss of temperature sensation 2-3 segments below the lesion

b. ipsilateral loss of position and vibratory sense below the lesion level

c. contralateral paralysis below the lesion level

d. ipsilateral pyramidal signs

e. ipsilateral complete loss of sensation at the lesion level

**26 - Which of the following is not a feature of the cauda equina syndrome?**

Select one:

a. flaccid paresis

b. hypo-reflexia

c. hyper-reflexia

d. symmetric neurological signs

e. muscle atrophy

**27 - One of the following is a known method for treatment of hydrocephalus?**

Select one:

a. Perforation of the septum pellucidum

b. dissection of the cerebellar vermis

c. puncture of the corpus callosum

d. ventriculoperitoneal Shunt

e. Arteriovenous shunting

**28 - Which of the followings is not seen in association with type II Chiari malformations?**

Select one:

a. Myelomeningocele

b. Hydrocephalus

c. Syringomyelia

d. Cerebeller herniation through foramen magnum

e. A large posterior fossa cyst in communication with the fourth ventricle

**29 - A fifty four old female patient presented to the emergency department with sudden onset headache associated with repeated vomiting ,her level of consciousness was 14/15 according to GCS,she had a significant neck stiffness, which of the following steps is wrong**

Select one:

a. Urgent CT-scan of the brain

b. Endotracheal intubation and hyperventilation

c. Lumbar puncture if the CT-scan revealed no abnormal findings

d. Ophalmological examination may be normal

e. Admission to an intensive care unit for observation

**30 - Acute Subdural hematomas have more mortality and morbidity than acute extradural hematomas because?**

Select one:

a. They are usually bigger than extradural hematomas

b. Because they always originate from the large superior sagittal sinus

c. Because they are always bilateral

d. Because they are usually associated with severe brain injury

e. Because they are nearer to the cortex than extradural hematomas

**31 - After the antenatal diagnosis of a Myelomeningocele in a pregnant woman, one of the following steps is false**

Select one:

a. Planning for the mode of delivery

b. Supplement with folic acid can correct the anomaly in the fetus

c. Psychological support for the family(counseling)

d. In some centers in-utero surgery can be offered

e. The alpha fetoprotein is usually raised in the serum of the pregnant mother

**32 - Which of the following is considered and absolute contraindication for a lumbar puncture?**

Select one:

a. high blood pressure

b. pregnancy

c. acute urinary retention

d. brain space occupying lesion

e. lumbar disc prolapse

**33 - Acute intracranial hematomas are those which form during the first?**

Select one:

a. 7 days

b. 14 days

c. 10 Days

d. 3 days

e. 21 days

**34 - All of the following can cause non-communicating hydrocephalus except?**

Select one:

a. Fourth ventricle ependymoma

b. Colloid cyst of the third ventricle

c. Choroid plexus papilloma of the lateral ventricle

d. Cerebeller pilocytic astrocytoma

e. Brain stem glioma

**35 - Epidural hematomas are usually limited by?**

Select one:

a. Cerebral cortex

b. Choroid plexuses

c. Falciform Processes

d. Tentorium cerebelli

e. Skull sutures

**36 - All the following are causes of loss of consciousness in subarachnoid hemorrhage except???????**

Select one:

a. Increase of intracranial pressure beyond cerebral perfusion pressure

b. Destruction of important areas of the brain stem

c. Hypovolemia

d. The occurrence of seizures

e. Lateral transtentorial herniation

**37 - One of the following tumors shows high incidence of calcification?**

Select one:

a. Pituitary adenoma

b. Anaplastic astrocytoma

c. Oligodendroglioma

d. Ependymoma

e. Medulloblastoma

**38 - Myelomeningoceles are congenital malformations of the spinal cord, which of the following findings is not commonly associated with it?**

Select one:

a. Hydrocephalus

b. Chiari II malformation

c. A midline lumbar or lumbosacral mass easily noted at birth

d. Skin, bone and dural defects superficial to the neural placode

e. Upper limb weakness

**39 - Otorrhea most often occurs in fractures of?**

Select one:

a. Petrous part of the temporal bone

b. Frontal Sinus

c. Cribriform plate of the ethmoid

d. Sphenoidal sinus

e. Lacrimal bone

**40 - Informative symptoms in the detection of hydrocephalus in newborns and infants (one of the following)?**

Select one:

a. increased motor activity

b. flaccidity

c. disproportional increase in the size of the infants head

d. increased excitability

e. good feeding

**2019**

**1- We used cerebral angiography in which of the following condition :  
Subarachnoid hemorrhage**

**2-Origin of bleeding in Subdural hematomas:   
Pia veins**

**3- Origin of bleeding of Epidural hematoma:  
 meningeal arteries**

**4-Acute epidural hematoma CT findings :  
Hyperdenselense shape**

**5-Treatment of Epidural hematoma :   
Craniotomy + evacuation**

**6- Most common site of Berry aneurysm is :   
anterior communicating**

**7- Case with Bradycardia, mydriasis and ….. , Dx is :  
 intracranial hematoma**

**8-Wrong statement regarding cranial tumor :  
Ependymoma more common than astrocytoma**

**9- One isn’t a non-communcating hydrocephalus :   
Choroid plexus tumor**

**10-Cephalohematoma is collection of blood in :   
subperiosteal space**

**11-Fracture that causes otorrhea :  
 temporal bone petrous part**

**12- Most common organism that causes infection at VP shunt :  
 Coagulase negative Staph**

**13- Which of the following is treatment of non-communicating hydrocephalus :   
VP shunt**

**14- One of the following is not step of treatment of Subarachnoid hemorrhage :  
 Intubation**

**15- Which of the following tumor shows high rate of calcification :  
oligodernderoma**

**16-drop-mets seen in :   
medulloblastoma**

**17- Not an Intramedullary tumor :  
Shwanoma**

**18- Not a feature of Conusmedullaris syndrome :  
 anal areflexia**

**19- Not a feature of caudaequina :   
Pyramidal signs**

**20- One is not associated with Myelomeningiocele :   
associated with upper limb weakness**

**21- Knee reflex root :   
L4**

**22- Far lateral L4-L5 disc prolapse causes :  
L4 radiculopathy**

**23- Not a feature of Arnold chiari :  
cyst compressing 4th ventricle**

**24- most common incomplete spinal injury :  
Central cord syndrome**

**25- contraindication of LP :  
 intracranial space occupying lesion**

**26-Not a treatment for myelomeningocele :   
Giving Folic acid will treat the case and induce growth of neural tube   
(or something like that )**

**27- Not a feature of spinal cord hemisection :  
 contralateral paralysis**

**28- origin of Meningioma :  
Arachnoid cup cells**

**29- One site we don’t monitoring of ICP :  
skull**

**30-most common symptom of intracranial hemorrhage :  
 seizure**

**31- which of the following are not ..... regarding subarachnoid hemorrhage :   
.... ??**

**32- Lucid of interval seen in :   
epidural hematoma**

**33- Sign of hydroceph :   
disproportion of head of baby**

**34- Severe head trauma GCS :  
 3-7**

**35- Character of Subdural :   
don’t cross suture line**

**36- Not true regarding spinal cord injury :   
More common in pediatrics**

**37- Duration of acute intracranial hemorrhage :  
 3 days**

**38- Why subdural more dangerous than epidural or something like that :   
more near to brain.**

**39- Best prognosis brain tumor in adult :   
Meningioma**

**40- Injury progress to vegetative state :  
 Axonal injury**