

1. First tx in spinal trauma? Cervical Immobilization
2. WFNS grading components? GCS , motor deficits
3. Hydrocephalus incontinence...
4. MC type of intracranial brain tumors? Brain mets
5. What is the first line of tx in uncomplicated herniated lumbar disk? NSAIDS , PHYSIO
6. Golden standard diagnostic tool for vasospasm? DCA
7. MC affected nerve in basal skull fracture? CN1
8. MRI Dx? astrocytoma
9. Cause of congenital hydrocephalus by maternal infection? Toxoplasmosis
10. Lumbar disc herniation causing radiculopathy? + Supine straight leg
11. Eye opening to verbal stimulation, incomprehensible words and withdraw right are to pain and localized pain with left arm? 10
12. All of the following considered vestibular schwannoma tx except? Chemotherapy
13. High morbidity with parenchymal injury
14. All of the following except? Appendicitis
15. Ipsilateral paralysis and contralateral pain and temperature loss? Brown sequard syndrome
16. Volume more than 35
17. All of the following are risk factor in ICP monitoring except? Normal ct with no swelling
18. Neural tube defects detection through? AFP+ US
19. A 19-year-old male suffered a high-speed vehicular accident. He is unable to move his lower limbs. BP = 90/65 mmHg, pulse = 45 bpm. On examination, minimal voluntary movement in lower limb (1/5), full power in upper limb except elbow extension and hand grasp. Sensation absent from chest down. CT cervical spine is shown. What is the most likely type of fracture? BURST COMBINED Fx
20. which factor favors to be abscess rather brain tumor? Renal dialysis