



Nabed
3rd of August 2023

:إعداد

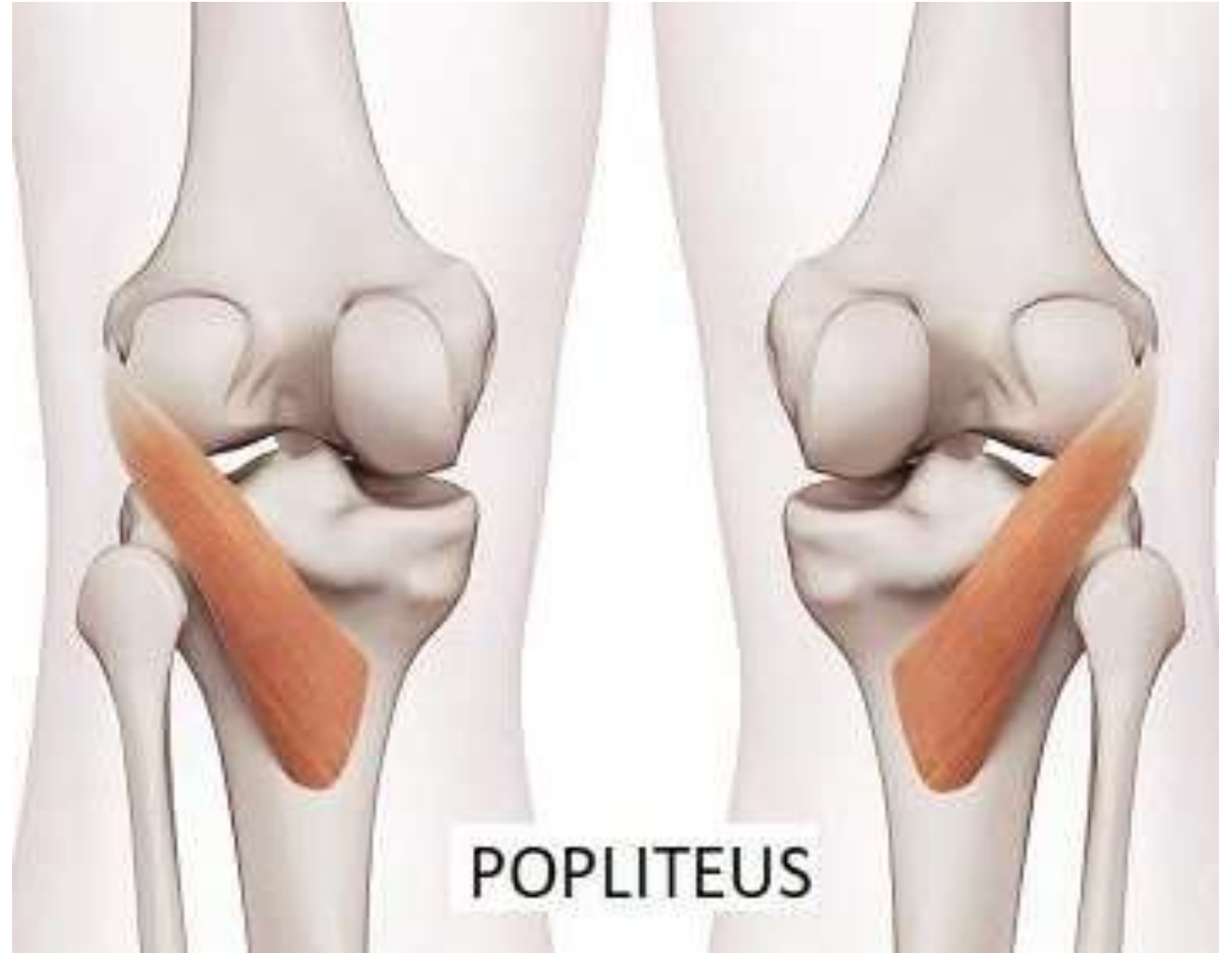
خزامى عبد الفتاح سعادة

أميمة أنور البداينة

1. All of the are true following about this muscle, except :

- A. Originate from the lateral aspect of the lateral femoral condyle
- B. Supplied By tibial nerve
- C. supplied by popliteal artery
- D. one of the main stabilizers of the Posterior aspect of knee
- E. it “unlock” the knee joint by flexion and medial rotation of femur over tibia.

Answer : E



2. 75 years old patient felt a back pain from leaning forward presented with shown image, What investigation we should do for follow up?

- A. MRI
- B. SPECT
- C. DEXA

Answer : C



3. A case of patient had lumbar canal stenosis (this information was not written in the question), according to difference between vascular and neurological claudication choose the true answer

Answer :Downhill more painful



4. This patient came to ER after RTA, vasculature is intact, according to the management of this type of injury all of the following are true except

- A. Anti-tetanus
- B. Intravenous 1st & 2nd generation cephalosporine
- C. Irrigation by normal saline
- D. Acute suturing & repair
- E. Analgesia

Answer : D



5. A case of Osteoarthritis, the pathophysiology of the marked change :

- a. Progressive softening and disintegration of articular cartilage
- b. due to increased water permeability of synovial fluid
- c. deposition Of bone to increase the surface area
- d. New bone and cartilage formation
- e. Increase water content in cartilage



Answer : A

6. Name of the classification of this type of fracture :

- A. Schatzker Classification
- B. Weber Classification
- C. Ruedi and Allgower Classification
- D. Sanders Classification
- E. Hawkins classificatio

Answer : B



7. One of the following is true :

- A. First metatarsal is in valgus position
- B. big toe is in varus
- C. Intermetatarsal angle is less than 10
- D. History of rheumatoid arthritis
- E. Usually unilateral

Answer : D



8. Pain elicited on performing this test indicates tenosynovitis of

Abductor pollicis longus and extensor pollicis brevis



9. Manegment

- A. Short cast
- B. Long cast
- C. closed reduction And cast

Answer : B



10.diagnosis

- A. Perthes
- B. hip Dislocation
- C. SCFE

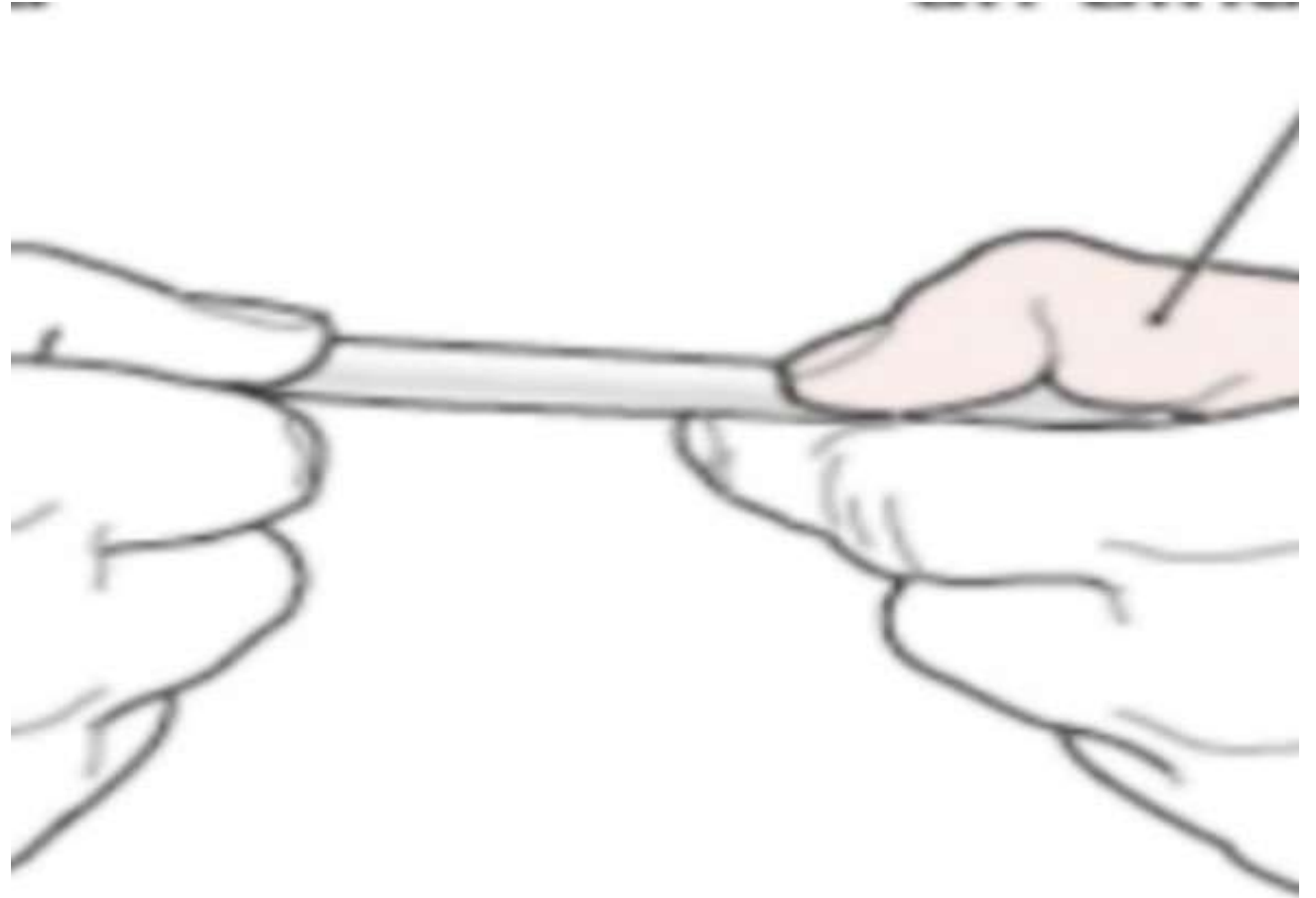
Answer :C



11. Name of the nerve examined :

- A. Radial
- B. anterior interosseous
- C. Posterior interosseous
- D. Ulnar
- E. Median

Answer : D



12. Hip position that produce the least compression on the joint capsule :

External rotation and flexion



13. RTA patient, complains from pressure sensation around the leg and pain That doesn't resolve with narcotics, what's your next step in management of this patient ?

Fasciotomy and fixation



14. All These tests are used in examination of this injury except :

- A. Lachman test
- B. pivot shifting Test
- C. anterior drawer test
- D. Lever (Lelli's) test
- E. Mucmmury's test

Answer : E



15. Mechanism of injury

Vertical shear



16. Diagnosis :

Osteosarcoma



17. Salter harris Classification :

- A. Type 1
- B. Type 2
- C. Type 3
- D. Type 4
- E. Ttpe 5

Answer : C



18. The true statement about this case

- A. Varus of the midfoot
- B. valgus of the Ankle joint
- C. Equinus at the Ankle joint
- D. valgus at the midfoot
- E. Equinus at the midfoot

Answer : C



19. All of the following are true except

- A. Internally rotates the shoulder
- B. supplied by upper and lower Subscapular nerves
- C. Insert in the lesser tubercle of humerus
- D. One of the static stabilizers of the shoulder joint
- E. Supplied by Subscapular artery

Answer : D



20. Fracture type

- A. Buckle
- B. greenstick
- C. Plastic deformity

Answer : B



Nabed

31 /8/2023

20 question in 40 minute

Rahma saraireh

Sara saraireh

Shahed saraireh

ebtehal qudah

Heba saraireh

Dema saraireh

Baraah qudah

Anood maaitah

1- Salter harris Classification :

A.Type 1

B.Type 2

C.Type 3

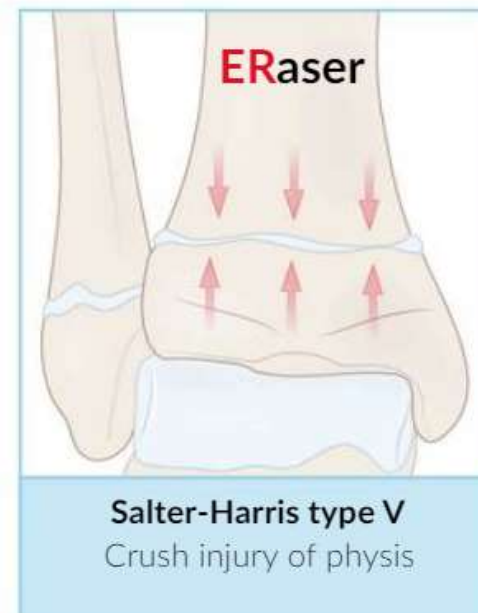
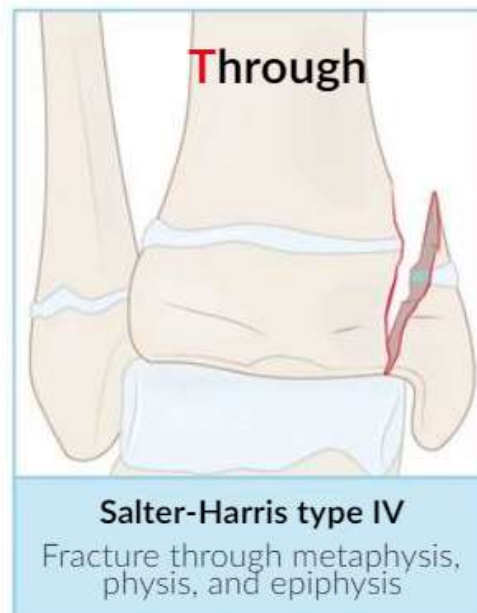
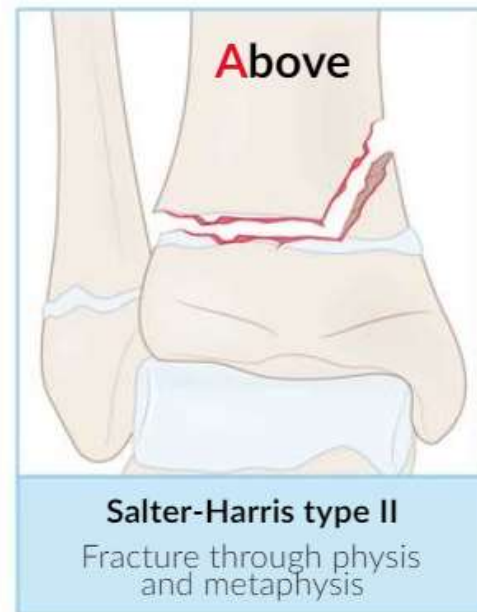
D.Type 4

E. Ttpe 5





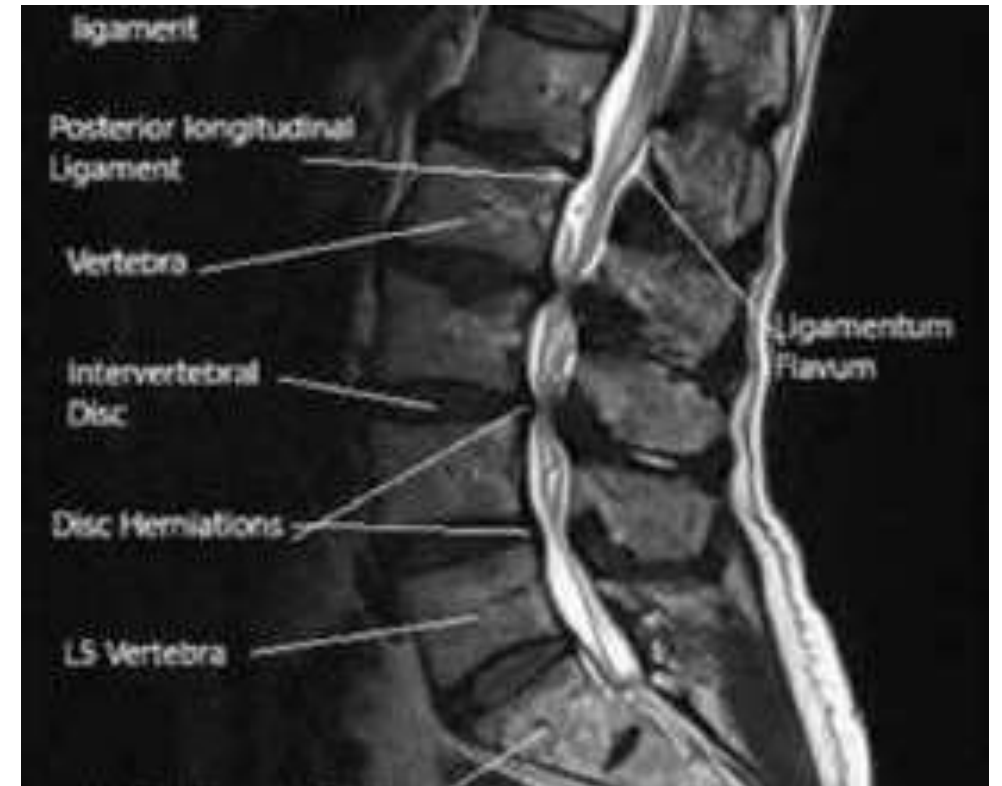
Salter-Harris classification of physal fractures



- ① Metaphysis
- ② Physis
- ③ Epiphysis

2- A case of patient had lumbar canal stenosis (this information was not written in the question), according to difference between vascular and neurological claudication choose the true answer

- Answer :Downhill more painful



Neurogenic Vs Vascular claudication

Symptoms	Neurogenic	Vascular
Back Pain	Common	Uncommon
Pain Relief	Sitting or flexed posture Standing and resting usually insufficient Often slow (>5 mins)	Not positional Pain relief while standing Almost immediate
Ambulatory tolerance	Variable	Fixed
Uphill vs. Downhill	Downhill more painful (extended posture)	Uphill more painful
Bicycle ride	No pain	Pain

3- In a 19year old this was an incidental finding, how is it managed ?

- A-Conservative without follow up
- B-Bracing
- C-Arthrodesis
- D-Completespine MRI
- E-Conservative+ follow up every 6 months for the second two years



4. This patient came to ER after RTA, vasculature is intact, according to the management of this type of injury all of the following are true except

- A. Anti-tetanus
- B. Intravenous 1st & 2nd generation cephalosporine
- C. Irrigation by normal saline
- D. Acute suturing & repair
- E. Analgesia



5-Spondylolysis

What test should we do?

1-Leg hyperextension test



Scottie dog with a collar sign

6- case and All These tests are used in examination of this injury except :

- A. Lachman test
- B. pivot shifting Test
- C. anterior drawer test
- D. Lever (Lelli's) test
- E. Mucmmury's test



Isolated fibula fracture

7- Which nerve is affected in this injury ?

- Common peroneal nerve



8- Fracture type

A. Buckle

B. greenstick لأنه فيه كسر على الـ 2 bone

C. Plastic deformity

D. Plastic and greenstick



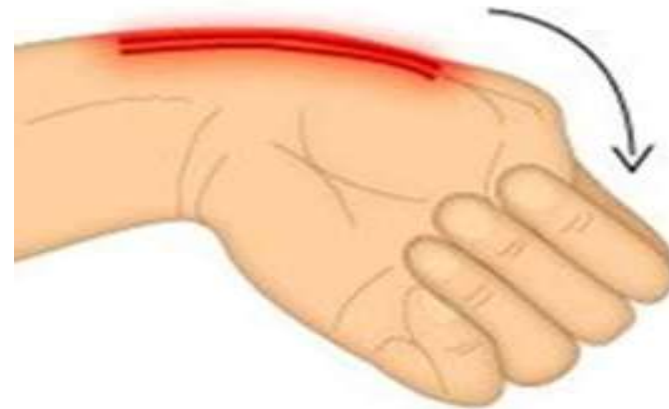
9- Pain elicited on performing this test indicates tenosynovitis of

- Abductor pollicis longus and extensor pollicis brevis

1. Place thumb in a closed fist

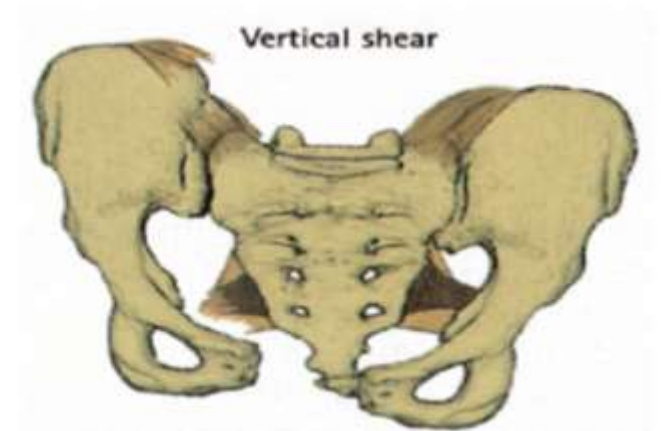
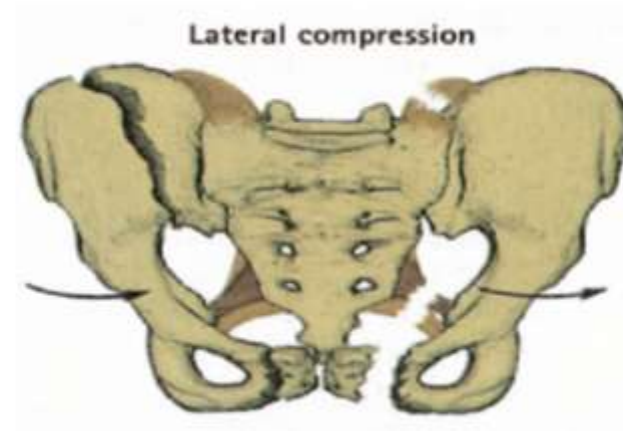
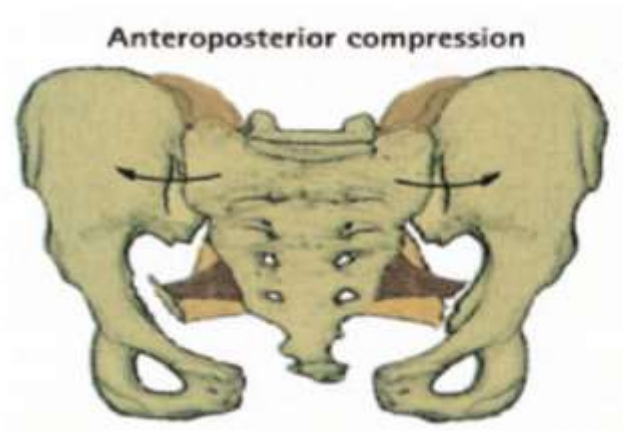


2. Tilt hand down



10- Mechanism of injury

- a. Vertical shear
- b. Anteroposterior compression
- c. Stress fracture
- d. Lateral compression
- e. Avulsion



11- diagnosis

A. Perthes

B. hip Dislocation

C. SCFE

D. Displacement of head



12- Manegment

A.Short cast

B.Long cast

C.closed reduction And cast



13- The true statement about ttt of this case

- A. we start with Varus
- B. The late deformity ttt is Pes Cavus
- C. There are several methods of treatment, depends Talocalcaneal angle
- D. Serial casting using 5 – 6 different types of casts that are used in a gradual sequence of correcting the deformity every 2 month
- E. **relapse** is common (even in successful treatment), especially in babies with associated neuromuscular disorders



14- Diagnosis

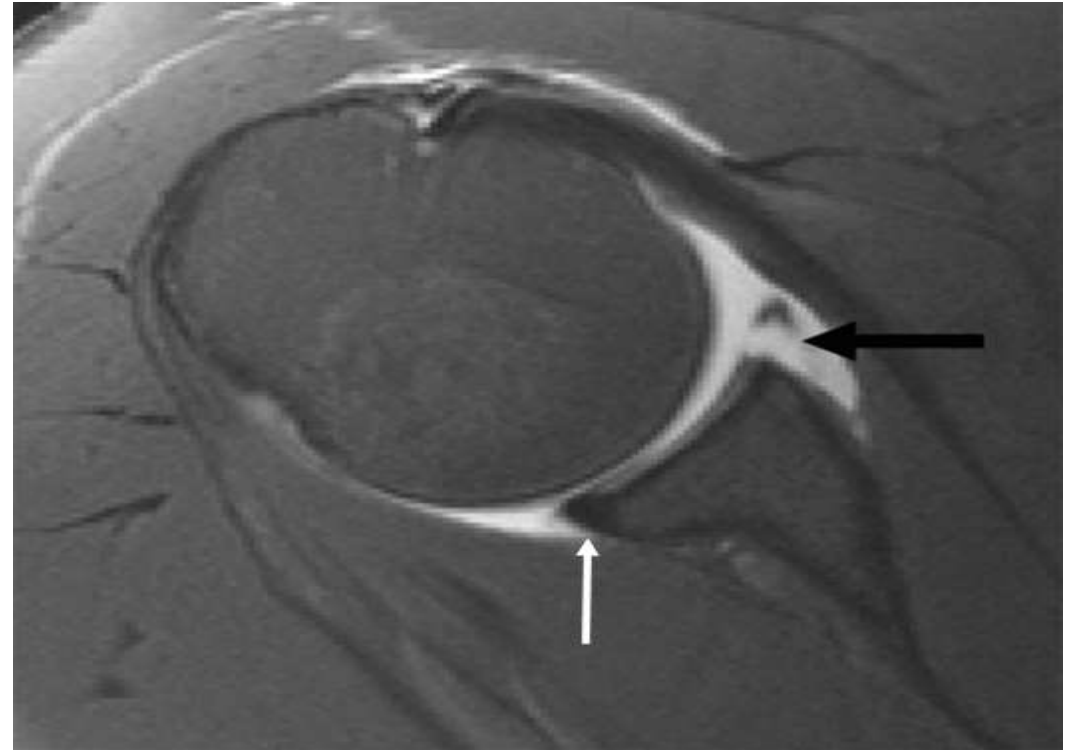
1. Osteosarcoma
2. Chondrosarcoma
3. Chondroblastoma
4. Osteochondroma
5. Osteoid osteoma



15- Bankart lesion :

1. anterior inferior glenoid labrum injury
2. anterior superior glenoid labrum injury

Bankart lesion: injury of the anterior inferior lip of the glenoid labrum due to traumatic anterior shoulder dislocation



- MRI-Arthrogram of Bankart Lesion (black arrow). Labrum is dark triangular structure at edge of socket (white arrow shows normal labrum in back).

16 - Best ttt and mangment:

1. Surgical intervention??
2. Advanced image
3. Pain killer



17- Scaphoid fracture

1. Wrist splint with pain killer ??
2. Fixation with plate and screws



Management

- Pain management:
 - Over-the-counter analgesics and strengthening exercises
- Nondisplaced fractures or displaced fractures < 1 mm:
 - **Wrist immobilization via thumb spica cast** for a minimum of 6–8 weeks with x-ray re-evaluation in 2 weeks
- Surgical treatment
 - Usually, internal fixation
 - Indications are complicated cases that include:
 - **Displaced fractures > 1 mm**
 - **Open fractures**
 - **Proximal pole fractures high risk of AVN**

18- A case of Osteoarthritis, the pathophysiology of the marked change :

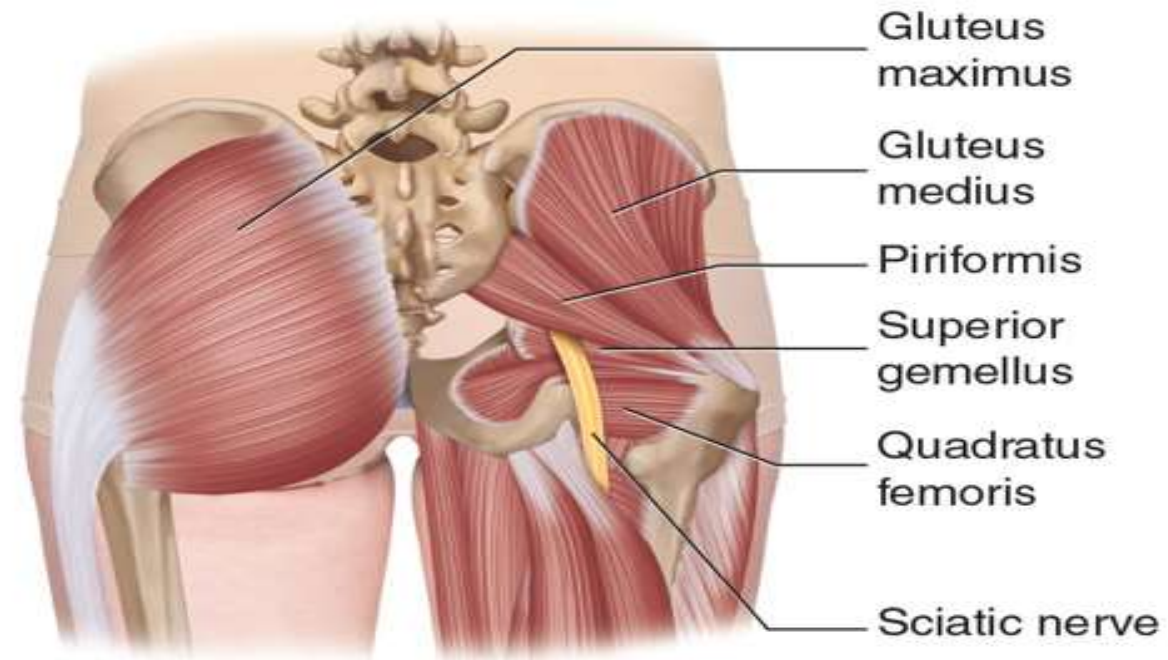
- a. Progressive softening and disintegration of articular cartilage??
- b. due to increased water permeability of synovial fluid
- c. deposition Of new bone in subarticular cartilage ??
- d. New bone and cartilage formation
- e. Increase water content in cartilage



Sclerosis كان مباشر على

19- piriformis Ms

1. originates from the posterior sacrum and Gluteal surface of ilium at level of lesser sciatic notch
2. Inserts on the greater trochanter
3. muscle receives its vascular supply from Superior gluteal artery, inferior gluteal artery, gemellar branches of the internal pudendal
4. Help in hip rotation
5. innervated by the piriform nerve



20- Which of the following injury

1. Soft tissue injury
2. Ligamintous
3. Osteochondral

