पुस्तिका में पृष्ठों की संख्या—32 No. of Pages in Booklet -32 पुस्तिका में प्रश्नों की संख्या—180 No. of Questions in Booklet -180

Paper Code: 14

SUBJECT: Neuro Surgery

(Super Speciality)

समय : 3.00 घण्टे Time: 3.00 Hours SSAP-22

240006

प्रश्न पुस्तिका संख्या, Question Booklet No

अधिकतम अंक : 180 Maximum Marks: 180

प्रश्न-पत्र पुस्तिका के पेपर सील / पॉलिथिन बैग को खोलने पर परीक्षार्थी यह सुनिश्चित कर लें कि प्रश्न पुस्तिका संख्या तथा ओ.एम.आर उत्तर-पत्रक पर अंकित बारकोड समान हैं। इसमें कोई भिन्नता हो तो परीक्षार्थी वीक्षक से दूसरा प्रश्न-पत्र प्राप्त कर लें। ऐसा सुनिश्चित करने की जिम्मेदारी

On opening the paper seal /polythene bag of the Question Booklet the candidate should ensure that Question Booklet Number and Barcode of OMR Answer Sheet must be same. If there is any difference, candidate must obtain another Question Booklet from Invigilator. Candidate himself shall be responsible for ensuring this.

परीक्षार्थियों के लिए निर्देश

- 1. सभी प्रश्नों के उत्तर दीजिए।
- 2. सभी प्रश्नों के अंक समान हैं।
- 3. प्रत्येक प्रश्न का केवल एक ही उत्तर दीजिए।
- एक से अधिक उत्तर देने की दशा में प्रश्न के उत्तर को गलत माना जाएगा।
- 5. प्रत्येक प्रश्न के चार वैकल्पिक उत्तर दिये गये हैं, जिन्हें क्रमशः
 1, 2, 3, 4 अंकित किया गया है। अभ्यर्थी को सही उत्तर निर्दिष्ट करते हुए उनमें से केवल एक गोले अथवा बबल को उत्तर—पत्रक पर नीले बॉल प्वॉइंट पेन से गहरा करना है।
- 6. OMR उत्तर-पत्रक इस परीक्षा पुस्तिका के अन्दर रखा है। जब आपको परीक्षा पुस्तिका खोलने को कहा जाए, तो उत्तर-पत्रक निकाल कर ध्यान से केवल नीले बॉल प्वॉइंट पेन से विवरण भरें।
- 7. प्रत्येक गलत उत्तर के लिए प्रश्न अंक का 1/3 भाग काटा जायेगा। गलत उत्तर से तात्पर्य अशुद्ध उत्तर अथवा किसी भी प्रश्न के एक से अधिक उत्तर से है। किसी भी प्रश्न से संबंधित गोले या बबल को खाली छोड़ना गलत उत्तर नहीं माना जायेगा।
- 8. मोबाइल फोन अथवा इलेक्ट्रॉनिक यंत्र का परीक्षा हॉल में प्रयोग पूर्णतया वर्जित हैं। यदि किसी अभ्यर्थी के पास ऐसी कोई वर्जित सामग्री मिलती है, तो उसके विरुद्ध आयोग द्वारा नियमानुसार कार्यवाही की जायेगी।
- कृपया अपना रोल नम्बर ओ.एम.आर. पत्रक पर सावधानीपूर्वक सही भरें।
 गलत अथवा अपूर्ण रोल नम्बर भरने पर 5 अंक कुल प्राप्तांकों में से काटे जा सकते हैं।
- 10. यदि किसी प्रश्न में किसी प्रकार की कोई मुद्रण या तथ्यात्मक प्रकार की त्रुटि हो, तो प्रश्न के हिन्दी तथा अंग्रेज़ी रूपान्तरों में से अंग्रेज़ी रूपान्तर मान्य होगा।

चेतावनी: अगर कोई अभ्यर्थी नकल करते पकड़ा जाता है या उसके पास से कोई अनिधकृत सामग्री पाई जाती है, तो उस अभ्यर्थी के विरुद्ध पुलिस में प्राथमिकी दर्ज कराते हुए विविध नियमों—प्रावधानों के तहत कार्यवाही की जाएगी। साथ ही विभाग ऐसे अभ्यर्थी को भविष्य में होने वाली विभाग की समस्त परीक्षाओं से विवर्जित कर सकता है।

INSTRUCTIONS FOR CANDIDATES

- 1. Answer all questions.
- 2. All questions carry equal marks.
- 3. Only one answer is to be given for each question.
- If more than one answers are marked, it would be treated as wrong answer.
- Each question has four alternative responses marked serially as 1, 2, 3, 4. You have to darken only one circle or bubble indicating the correct answer on the Answer Sheet using BLUE BALL POINT PEN.
- The OMR Answer Sheet is inside this Test Booklet. When you are directed to open the Test Booklet, take out the Answer Sheet and fill in the particulars carefully with blue ball point pen only.
- 7. 1/3 part of the mark(s) of each question will be deducted for each wrong answer. A wrong answer means an incorrect answer or more than one answers for any question. Leaving all the relevant circles or bubbles of any question blank will not be considered as wrong answer.
- Mobile Phone or any other electronic gadget in the examination hall is strictly prohibited. A candidate found with any of such objectionable material with him/her will be strictly dealt as per rules.
- Please correctly fill your Roll Number in O.M.R. Sheet.
 Marks can be deducted for filling wrong or incomplete Roll Number.
- 10. If there is any sort of ambiguity/mistake either of printing or factual nature, then out of Hindi and English Version of the question, the English Version will be treated as standard.

Warning: If a candidate is found copying or if any unauthorized material is found in his/her possession, F.I.R. would be lodged against him/her in the Police Station and he/she would liable to be prosecuted. Department may also debar him/her permanently from all future examinations.

इस परीक्षा पुस्तिका को तब तक न खोलें जब तक कहा न जाए। Do not open this Test Booklet until you are asked to do so.

NEURO-SURGERY

1.	Among the surgeons who was first to treat cerebral aneurysms surgically by obliterating them			
	through	the use of snare ligatures or metal clips	?	
	(1)	Dorcas H. Padget	(2)	Walter Dandy
	(3)	Moses Allen Starr	(4)	Charles H. Frazier
2.	Wilhelm	m Rontgen (1845-1923) considered the fa	ather o	of diagnostic radiology was a german -
	(1)	Neurosurgeon	(2)	Radiologist
	(3)	Mechanical Engineer	(4)	Electrical Engineer
3.	First E0	C-IC (External Carotid-Internal Carotid)	bypas	s procedure in human was done by -
	(1)	Charles Frazier	(2)	William Macewen
	(3)	M. Gazi Yasargil	(4)	C.G. Drake
4.	PET sc	an was developed by -		
	(1)	Phelps et al	(2)	Numoto
	(3)	Spiegel and Wycis	(4)	Ernst von Bergmann
5.	First successful cerebral angiography was performed by -			
	(1)	Egas Moniz	(2)	Harvey Cushing
	(3)	Victor Horsley	(4)	Irving Cooper
6.	A lesio	-	e colu	mn of the spinal cord is most likely to cause
	(1)	discriminative touch and proprioception	n on tl	ne ipsilateral side
	(2)	pain and temperature sensations on the	contra	alateral side
	(3)	pain and temperature sensation on the i	psilate	eral side
	(4)	voluntary movement on the ipsilateral s	side	
7.	High S	teppage Gait is present in -		
	(1)	Diabetic neuropathy		
	(2)	Common peroneal nerve palsy		
	(3)	Progressive spinal atrophy		
	(4)	All of the above		

	(1)	Apraxia can affect common learned ac	tion			
	(2)	Language apraxia implies a left hemisp	heric	lesion		
	(3)	Lesion of cortex and thalamocortical control of cortex and thalamocortical control of the cortex and t	ircuit (can cause apraxia		
	(4)	Dyslexia is a form of aphasia apraxia				
9.	Loss of	f corneal reflex is seen in all, except -				
	(1)	Cerebellopontine angle tumor				
	(2)	Caudal 1/3 of spinal trigeminal tract le	sion			
	(3)	Rostral 2/3 of spinal trigeminal tract lesion				
	(4)	Carotid aneurysm				
10.	Which	statement about the oculomotor nerve is	corre	ct?		
	(1)	It exits the brainstem in the rostral pon-	s			
	(2)	(2) It has both somatic motor and parasympathetic components				
	(3)	It has its cell bodies in the lateral part of	of the	midbrain		
	(4)	It innervates the superior oblique musc	le of t	he eye		
11.	Traube	Hering waves are -				
	(1)	Lundberg type A wave				
	(2)	Lundberg type B wave				
	(3)	Lundberg type C wave				
	(4)	None of the above				
12.	The be	st view to demonstrate cervical articular	masse	es is -		
	(1)	Towne's view	(2)	Caldwell-Luc's view		
	(3)	Swimmer's view	(4)	Pillar's view		
13.	J-shape	ed sella is seen in -				
	(1)	Empty sella syndrome	(2)	Hurler syndrome		
	(3)	Craniopharyngioma	(4)	Pituitary adenoma		
[14]	4 1111	Page 3 of 3	32			

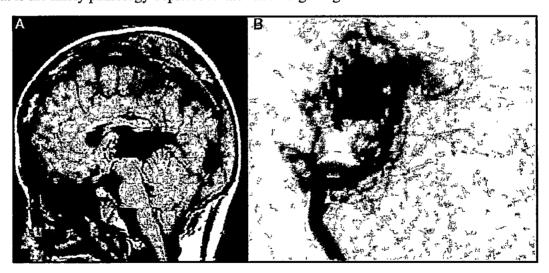
8.

Which statement is false about Apraxia?

14.	Causes of Hyperintensity on MRI T1Wl are -			
	(1)	Very high protein content		
	(2)	Melanin		
	(3)	Hypercellularity with low cytoplasm is	seen	in medulloblastoma
	(4)	Edema		
15.	Which	stage of sleep is prominent on EEG at th	e ons	et of narcoleptic sleep attacks?
	(1)	Stage 1	(2)	Stage 2
	(3)	Stage 3	(4)	REM
16.	Unders	standing the circulation of the cerebros	pinal	fluid is critical for the ability to diagnose
	disorde	ers where circulation is abnormal and fo	or the	ability to take samples of CSF for analysis.
	Which	statement concerning spinal meninges a	nd cer	rebrospinal fluid is correct?
	(1)	CSF travels in the subarachnoid space		
	(2)	CSF is typically sampled from the epid	lural s	pace
	(3)	The dural sac that surrounds the spinal	cord e	ends at the L1-L2 vertebral level
	(4)	The pia mater adheres tightly to the ara	chnoi	d mater
17.	"Insen	sitive space" as related to myelography -		
	(1)	L3 - L4	(2)	L4 - L5
	(3)	L5 - S1	(4)	All of the above
18.	Bioche	emical defect present in the majority of	of bra	in tumor measured by magnetic resonance
	spectro	oscopy -		
	(1)	Decreased Lactate		
	(2)	Decreased Lipid		
	(3)	Decreased NAA		
	(4)	Decreased Choline		
19.	Radiat	ion level CT scan per examination is -		
	(1)	3 – 5 cGy	(2)	5 – 10 cGy
	(3)	10 – 15 cGy	(4)	15 – 20 cGy
[14]	4 mii	Page 4 of a	32	

20.	The m	most sensitive non-invasive monitor of venous air embolism is -			
	(1)	Auscultation of the chest with a stethoscope			
	(2)	End-tidal pCO2			
	(3)	End-tidal pN2			
	(4)	Precordial Doppler			
21.	CSF pr	roduction is increased by which drug?			
	(1)	Isoflurane	(2)	Enflurane	
	(3)	Sevoflurane	(4)	Ketamine	
22.	Factors	s that lower the seizure threshold -			
	(1)	sleep deprivation	(2)	alkalosis	
	(3)	cerebral ischemia	(4)	All of the above	
23.	How lo	ong after a stroke should surgery be defer	red fo	r an elective surgical procedure?	
	(1)	1 week	(2)	6 weeks	
	(3)	6 months	(4)	1 year	
24.	Drugs	shown to reduce the risk of osteoporotic	fractu	re are all, except -	
	(1)	Bisphosphonate	(2)	Tamoxifen	
	(3)	Progesterone	(4)	Transdermal estrogen	
25.	All of	the following antiepileptic drugs are indu	cer of	liver cytochrome P450 enzyme, except -	
	(1)	Primidone	(2)	Carbamazepine	
	(3)	Phenytoin	(4)	Lamotrigine	
26.	Which one of the following statements regarding neuroendoscopy is least accurate?				
	(1)	Image guidance system are not currentle	y com	patible with neuroendoscopes.	
	(2)	Generally do not provide stereoscopic v	vision.		
	(3)	Single anatomic corridor can result in in	nstrun	nent clashing.	
	(4)	Usually requires an assistant to hold so	cope if	f the primary surgeon wishes to bimanually	
		manipulate a lesion.			

- 27. Which approach is favoured for a patient with a 6 mm acoustic neuroma in which hearing preservation is a goal?
 - (1) Suboccipital
 - (2) Translabyrinthine
 - (3) Middle fossa
 - (4) None of the above
- 28. During endoscopic third ventriculostomy, stoma is made in -
 - (1) Lateral wall
 - (2) Anterior wall of the third ventricle
 - (3) Roof of the third ventricle
 - (4) Pre-mammillary membrane
- 29. Poppen approach for surgery of pineal tumor is -
 - (1) Infratentorial supracerebellar approach
 - (2) Paramedian transtentorial approach
 - (3) Occipital transtentorial approach
 - (4) Transventricular approach
- **30.** What is the likely pathology depicted in the following image?



- (1) Dural AVM
- (3) Sagittal sinus thrombosis
- (2) Moyamoya disease
- (4) Vein of Galen malformation

- 31. Which one of the following dural sealants is made from human fibringen and thrombin only?
 - (1) DuraSeal (Confluent Surgical Inc., Waltham, MA, USA)
 - (2) Bioglue (Cryolife, Kennesaw, GA, USA)
 - (3) Tisseel (Baxter International Inc., West-lake Village, CA, USA)
 - (4) Evicel (Johnson & Johnson Wound Management, Ethicon Inc., Somerville, NJ, USA)
- **32.** You use a 2-0 coated vicryl suture to close the galea during closure of a craniotomy. Which one of the following statement is correct?
 - (1) It is a synthetic, braided absorbable suture
 - (2) It is a synthetic, braided non-absorbable suture
 - (3) It is a synthetic, monofilament absorbable suture
 - (4) It is a synthetic, monofilament non-absorbable suture
- 33. A 29-year-old is assaulted and is GCS E3V4M5 at the scene. On examination there is significant bruising to the right side of his head with a 5-cm laceration and does not appear to have any focal neurological deficit. He is awaiting a CT scan when you are told he is less responsive. On examination, he is GCS E2V3M4, his right pupil is dilated and on application of painful stimulus appears to only to be moving his left side. Which one of the following is most likely to be responsible for these findings?
 - (1) Transalar (transsphenoidal) herniation
 - (2) Unilateral uncal herniation
 - (3) Ascending transtentorial herniation
 - (4) Tonsillar herniation through the foramen magnum
- 34. Which one of the following statement regarding decompressive craniectomies is least accurate?
 - (1) DECRA trial has shown the utility of early decompressive craniectomy in neuroprotection.
 - (2) DECRA trial utilized decompressive craniectomy at tier 2 management of ICP.
 - (3) Primary decompressive craniectomy is usually performed during evacuation of an acute subdural hematoma due to concerns regarding brain swelling.
 - (4) Secondary decompressive craniectomy is usually undertaken as a last tier therapy when a patient has intractable intracranial hypertension.

35.	Surgical approach for thoracic disc herniation is associated with maximal neurologic injury -			
	(1)	costotransversectomy	(2)	midline laminectomy
	(3)	transpedicular	(4)	transthoracic
36.	Among	g all the factors in GCS the most prognos	stic is -	
	(1)	verbal response	(2)	motor response
	(3)	eye opening	(4)	All of the above
37.	A pati	ent is having Diffuse Axonal Injury	(DAI)	, histologically there are axonal swelling
	(retract	tion ball) in cerebral white mater, corpus	s callo	osum, dorsolateral quadrant upper brainstem
	and su	perior cerebellar peduncle and a focal les	sion in	the corpus callosum. He is having -
	(1)	Grade I DAI	(2)	Grade II DAI
	(3)	Grade III DAI	(4)	None of the above
38.	Type I	I odontoid fracture is -		
	(1)	Fracture of tip		
	(2)	Fracture of base of neck		
	(3)	Fracture of body		
	(4)	Fracture of arch		
39.	Brown	-Sequard syndrome is most common due	e to -	
	(1)	Intramedullary tumor		
	(2)	Intradural extramedullary tumor		
	(3)	Extramedullary tumor		
	(4)	None of the above		
40.	Amon	g which of the following incomplete spin	nal cor	d injury has the best prognosis -
	(1)	Anterior cord syndrome		
	(2)	Posterior cord syndrome		
	(3)	Central cord syndrome		
	(4)	Brown-Sequard syndrome		
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[14]	≠ mii	Page 8 of 3	32	

41.	Head trauma result in all, except -			
	(1)	↑ extracellular K ⁺		
	(2)	↑ intracellular Ca ⁺⁺		
	(3)	↓ adenosine		
	(4)	↓ glutamine intracellularly		
42.	Follow	ing are indicated in brain edema of head	injury	, except -
	(1)	Mild hypothermia		
	(2)	Barbiturate		
	(3)	Phencyclidine		
	(4)	Selenium		
43.	Which	one of the following AP diameters of	f a d	ecompressive hemicraniectomy flap is the
	minimu	m size thought to prevent local complication	itions	relating to brain herniation?
	(1)	10 cm	(2)	12 cm
	(3)	14 cm	(4)	16 cm
44.	About 1	Post-traumatic Epilepsy (PE) all are true,	exce	pt -
	(1)	Seizure presenting after 24 hrs is more	comm	on than within 24 hrs
	(2)	AED do not reduce the frequency of late	e PE l	but have effect on early PE
	(3)	Cerebral contusion, penetrating SDH i of late PE	njury.	, depressed fracture have more incidence
	(4)	Hereditary factor probably does not play	y any	role in PE
45.	А 78-у	ear-old man with ankylosing spondyli	tis su	stains a minor fall. Shortly afterwards he
	experie	nces sudden worsening of his chronic	e bac	k pain and is brought to the emergency
	departn	nent by his caregiver. Radiographs and	l a C	T scan of the spine do not show a clear
	fracture	e. What is the most appropriate next step?	?	
	(1)	Nonsteroidal anti-inflammatory drugs		
	(2)	MRI of the spine		
	(3)	CT myelography		
	(4)	Flexion-extension plain films		
[14]	≠ um	Page 9 of 3	2	

46.	A you	ng man is brought to the emergency dep	artmei	nt following a motor vehicle accident, intial		
	examir	mination shows motor weakness (spinal shock) in the myotomes for the leg. A computed				
	tomography scan reveals crushed vertebrae that have lesioned his spinal cord at T8. What are the					
	immed	liate consequences for the bladder function	n?			
	(1)	(1) He will feel when his bladder is full and can then self catheterize				
	(2)	He will not be able to store any urine in	his b	ladder		
	(3) He will have reflex bladder function					
	(4)	He will have complete urinary retention	n			
47.	Not a s	surgical indication of depressed fracture s	kull -			
	(1)	Fracture over dural sinuses				
	(2) Fracture with depression thickness > 10 mm					
	(3) Open depressed fracture					
	(4)	Fracture with CSF leak				
48.	A 23-	year-old man is evaluated in the en	merge	ncy department after a diving accident.		
	Radiographs reveal bilateral jumped facets at C6-7. Examination reveals no motor function					
	below the C7 level. There is some maintained sensation in the lower extremities. What is the					
	patient's current grade on the ASIA (American Spinal Injury Association)?					
	(1)	ASIA A	(2)	ASIA B		
	(3)	ASIA C	(4)	ASIA D		
49.	Kernol	han's notch is -				
	(1)	Hemiparesis ipsilateral to lesion				
	(2)	Hemiparesis contralateral to the lesion				
	(3)	Monoparesis ipsilateral to lesion				
	(4)	Monoparesis contralateral to the lesion				
50.	Not us	eful in traumatic brain injury -				
	(1)	Mannitol	(2)	Corticosteroids		
	(3)	Hyperventilation	(4)	Furosemide		

- 51. When evaluating a patient with a lumbar burst fracture, the integrity of the posterior ligamentous complex must be evaluated. Which of the following is a complete and accurate list of the components of the posterior ligamentous complex?
 - (1) Supraspinous ligament, interspinous ligament, ligamentum flavum and the facet joint capsules
 - (2) Supraspinous ligament, interspinous ligament, ligamentum flavum, facet joint capsules and disks
 - (3) Supraspinous ligament interspinous ligament and ligamentum flavum
 - (4) Supraspinous ligament, interspinous ligament, ligamentum flavum and the facet joints
- 52. Burst lobe is often referred to as the combination of -
 - (1) acute SDH + extensive lobar contusion
 - (2) extensive lobar contusion + ICH
 - (3) acute SDH + extensive intracerebral hemorrhage
 - (4) acute SDH + extensive lobar contusion + intracerebral hemorrhage
- 53. Head injury is most frequent among which age group in India?
 - (1) children more than 5 years
- (2) 20 40 years

(3) 40 - 60 years

- (4) > 60 years
- 54. Flexion injuries are all, except -
 - (1) Wedge compression fracture
- (2) Facet dislocation
- (3) Clay shoveler fracture
- (4) Hangman fracture
- 55. Which of the following injury patterns is most likely to result from a hyperextension mechanism to the cervical spine?
 - (1) Unilateral facet dislocation
 - (2) Bilateral facet dislocation
 - (3) Quadrangular fracture
 - (4) Central cord syndrome

56.	A 35-year-old transplant patient develops headache, neck stiffness, photophobia and fever.					
	Cerebi	Cerebrospinal Fluid (CSF) testing with India ink stain reveals a fungal infection. Which one of				
	the fol	lowing is the cause of this patient's fung	al mer	ningitis?		
	(1)	Aspergillus b.	(2)	Blastomyces c.		
	(3)	Candida	(4)	Cryptococcus		
57.	During	g formation of an abscess capsule, when	does n	ecrosis begin?		
	(1)	Days 1 – 3	(2)	Days 4 – 9		
	(3)	Days 10 – 13	(4)	Days 14 – 20		
58.	About	cerebral abscess, all statements are true,	ехсер	t -		
	(1)	Metastatic brain abscess is more comm	on in	occipital lobe.		
	(2)	In both developed and developing cour	ntries o	otogenic abscess is the commonest cause.		
	(3)	Cut off margin of the size of abscess above which it should be treated by surgical means				
		is 5 cm.				
	(4)	H. influenzae is the most common cause	se for i	infection.		
59.	In neurocysticercosis, true statement is -					
	(1)	Man is both definitive and secondary h	ost			
	(2)	Pig is definitive host				
	(3)	Dexamethasone can decrease the level	of alb	endazole by 50%		
	(4)	Intraventricular cyst respond to medica	l thera	ру		
60.	Which	one of the following antimicrobials is	not f	First line therapy for active Mycobacterium		
	tuberci	ulosis infection?				
	(1)	Ethambutol	(2)	Isoniazid		
	(3)	Pyrazinamide	(4)	Streptomycin		
61.	Not a g	rlial tumor -				
	(1)	Oligodendroglioma	(2)	Ganglioglioma		
	(3)	Medulloblastoma	(4)	GBM		

62.	Å neurofibroma is thought to arise from what structure?			
	(1)	Epineurium	(2)	Perineurium
	(3)	Endonerium	(4)	Schwann cell
63.	Menin	giomas tend to demonstrate what charact	eristic	positivity?
	(1)	Vimentin	(2)	GFAP
	(3)	Synaptophysin	(4)	Neurofilament
64.	Which	one of the following factors is most imp	ortant	in improving length of survival in gliomas?
	(1)	1p/19q codeletion	(2)	ATRX mutation
	(3)	EGFR mutation	(4)	IDH1/2 mutations
65.	10-yea	r-old child presented with Bilateral mult	iple cr	anial nerve palsy with Horner syndrome. He
	has als	o developed long tract signs but still the	re wa	s no sign of raised intracranial tension, most
	likely	diagnosis is -		
	(1)	Cerebellar astrocytoma	(2)	Ependymoma
	(3)	Brain stem glioma	(4)	Medulloblastoma
66.	CSF se	eeding of tumor cells is least seen in -		
	(1)	Hemangioblastoma	(2)	Ependymoma
	(3)	GBM	(4)	Medulloblastoma
67.	Calcifi	cation are most commonly seen in -		
	(1)	Craniopharyngioma	(2)	Oligodendroglioma
	(3)	Ependymoma	(4)	Medulloblastoma
68.	Intrave	entricular tumor are all, except -		
	(1)	Astrocytoma	(2)	Ependymoma
	(3)	Choroid plexus papilloma	(4)	Hemangioblastoma
69.	Hypod	ense on CT scan are all, except -		
	(1)	Epidermoid	(2)	Lipoma
	(3)	Dermoid	(4)	Colloid cyst

70.	Which type of meningioma is considered a WHO grade III lesion?			
	(1)	Angiomatous	(2)	Psammomatous
	(3)	Rhabdoid	(4)	Chordoid
71.	Foster	Kennedy syndrome is due to tumor in -		
	(1)	superior frontal region	(2)	inferior frontal region
	(3)	inferior temporal region	(4)	inferior occipital region
72.	The m	ost common primary PNET responsible f	for ext	raneural spread is -
	(1)	Medulloblastoma	(2)	Meningioma
	(3)	Pinealoblastoma	(4)	Ependymoma
73.	Calcifi	ed brain metastasis occur with -		
	(1)	Bronchogenic carcinoma	(2)	Carcinoma breast
	(3)	Ovarian carcinoma	(4)	Renal cell carcinoma
74.	Negative prognostic factor for low grade glioma are all, except -			ıll, except -
	(1)	largest diameter of tumor > 6 cm	(2)	histology is astrocytoma
	(3)	age > 30 years	(4)	tumor crosses midline
75.	Most c	common site of Epidermoid cyst in head i	is -	
	(1)	CP angle	(2)	Intraventricular (IV) ventricle
	(3)	Suprasellar	(4)	Parasellar
76.		acoustic schwannoma, all statements are	true,	except -
	(1)	B/L tumor operated at the same time		
	(2)	NF-I with café-au-lait spot may be asso	ociated	i
	(3)	Autosomal dominant		
77	(4)	Gamma knife can be an alternative		
77.		of the following tumor is associated with	h med	ically intractable seizure?
	(1)	Chiamatasia analasi		
	(2)	Gliomatosis cerebri		
	(3)	Pleomorphic xanthoastrocytoma	~=	
	(4)	Dysembryoplastic neuroepithelial tumo	JΓ	

78.	Tumor	Tumor amenable to surgical resection and have most favourable prognosis are all, except -		
	(1)	Juvenile pilocytic astrocytoma		
	(2)	Oligodendroglioma		
	(3)	Ganglioglioma		
	(4)	Pleomorphic xanthoastrocytoma		
79.	Chordo	omas are nervous system neoplasm that h	ave al	ll of the following characteristics, except -
	(1)	Occurrence in childhood		
	(2)	Location in sacrococcygeal region		
	(3)	Characteristic physaliphorous cells		
	(4)	Slow growth		
80.	Moleci	ular agents inhibiting EGFR and being us	sed to	treat malignant glioma are all, except -
	(1)	Imatinib Mesylate	(2)	Erlotinib
	(3)	Cetuximab	(4)	Gefitinib
81.	Not gi	ven in prolactinoma -		
	(1)	Bromocriptine		
	(2)	Cabergoline		
	(3)	Pergolide		
	(4)	Octreotide		•
82.	Chemo	otherapy used for oligodendroglioma incl	lude a	ll, except -
	(1)	Procarbazine	(2)	Cyclophosphamide
	(3)	Vincristine	(4)	Nitrosourea
83.	Drugs	used in Cushing disease are all, except -		
	(1)	Cyproheptadine	(2)	Ketoconazole
	(3)	Mitotane	(4)	Bromocriptine
84.	Radio	sensitizing agents are all, except-		
	(1)	BUdR	(2)	IUdR
	(3)	5-FU	(4)	Interleukin-2
[14]	[14] **** Page 15 of 32			

- 85. Regarding Neurotransmission, true statement is -
 - (1) There is a single receptor identified for glutamate
 - (2) Muscarinic acetylcholine receptors are associated with a cation channel
 - (3) Ionotropic receptors are generally G-protein linked
 - (4) An inhibitory postsynaptic potential is created by increasing the membrane permeability to chloride ion
- 86. About staining all statements are true, except -
 - (1) Osmium used in electron microscopy.
 - (2) Silver impregnation method used for showing whole of neuron.
 - (3) Marchi's method used for staining myelin.
 - (4) Eosin stains rough endoplasmic reticulum + DNA.
- 87. Match the incorrect mechanism of anti-cancer drug -
 - (1) Nitrosourea \rightarrow DNA alkylation
 - (2) Vinca alkaloid → microtubule function inhibitor
 - (3) Cisplatin \rightarrow chelation via intrastrand crosslinks
 - (4) Tamoxifen \rightarrow protein kinase C inhibitor
- 88. About Radiotherapy in CNS tumors, all statements are true, except -
 - (1) The most common external beam radiation therapy regimen for brain metastasis is 30 Gy in 10 fractions over 2 weeks.
 - (2) Most appropriate radiation protocol for glioma is 6000 cGy in 200 cGy daily fraction.
 - (3) Germinomas are very sensitive to radiotherapy.
 - (4) Cerebral PNETs are usually localized and require local radiation after surgery.
- 89. True about knife are all, except -
 - (1) Cobalt 60
 - (2) Frameless stereotaxy for localization
 - (3) Single session is required
 - (4) Used in management of AVMs

	(1)	Stavudine	(2)	Zidovudine
	(3)	Didanosine	(4)	Zalcitabine
91.	About	Pediatric Disc Disease, all statements are	e true,	except -
	(1)	The segmental distribution of disc herr	niation	in children is similar to that seen in adults.
	(2)	Disc herniation is most often sub-ligan	nental	and more than 80% are posterolateral.
	(3)	30% to 60% children with symptoma	atic lu	mbar disc herniation have direct history of
		trauma.		•
	(4)	Well managed by conservative treatme	ent.	
92.	Which	surgical approach for thoracic disk h	erniat	ions is associated with the highest rate of
	neurolo	ogic injury?		
	(1)	Costotransversectomy	(2)	Lateral Extracavitary
	(3)	Midline Laminectomy	(4)	Transpedicular
93.	Pain se	ensitive structure in vertebral body are al	l, exce	ept -
	(1)	Periosteum		
	(2)	Annulus Fibrosus		
	(3)	Epidural vein		
	(4)	Posterior Longitudinal Ligament		
94.	Site of	entry for thoracic pedicle screw is best of	descril	ped as which one of the following?
	(1)	Where the facet joint and transverse pr	ocess	intersect
	(2)	Where the pars interarticularis and lam	nina in	tersect
	(3)	Where the superior facet and lamina in	itersec	t
	(4)	Where the inferior facet and lamina in	tersect	:
95.	A 13-y	vear-old patient presents with bilateral s	spastic	lower limb weakness & pain at night with
	gibbus	, most likely diagnosis is -		
	(1)	Thoracic disc prolapse	(2)	Tuberculous spine
	(3)	Ependymoma	(4)	Neurofibroma
[14]	4 000	Page 17 of	32	

90.

Peripheral neuropathy is seen with all, except -

96.	Cordotomy causes -				
	(1)	C/L loss of pain only	(2)	I/L loss of pain & temperature	
	(3)	C/L loss of pain & temperature	(4)	I/L loss of pain only	
97.	Proced	ure for treating medically refractive pain	are al	l, except -	
	(1)	Cingulotomy	(2)	Anterior thalamotomy	
	(3)	Dorsal rhizotomy	(4)	Anterolateral cordotomy	
98.	True st	atement regarding complex regional pair	synd	rome or causalgia is -	
	(1)	The oedema and trophic changes are du	e to o	ver activity of sympathetic out flow	
	(2)	Regional sympathetic blockade is effect	tive fo	or complex regional pain	
	(3)	Sympathetic out flow to the affected re-	gion is	s increased in most patients	
	(4)	Spread of the distribution of pain and se	ensory	changes is common and does not implicate	
		a psychogenic etiology			
99.	In the	technique of percutaneous radiofrequen	cy tri	geminal gangliolysis, the needle is inserted	
	into the	e-			
	I	Foramen rotundum			
	II	Trigeminal cistern			
	III	Foramen spinosum			
	IV	Foramen ovale			
	(1)	I, II, III	(2)	I, III	
	(3)	II, IV	(4)	All of the above	
100.	Baclofe	en act as -			
	(1)	agonist on GABA A receptor	(2)	antagonist on GABA A receptor	
	(3)	agonist on GABA B receptor	(4)	antagonist on GABA B receptor	
101.	Adhere	ence of posterior communicating artery a	aneury	sm to the temporal lobe is most likely in a	
	patient	that presents with -			
	(1)	loss of consciousness	(2)	seizures	
	(3)	third nerve involvement	(4)	no third nerve involvement	

102.	Which vascular malformation has no intervening brain parenchyma between blood vessels?			
	(1)	Capillary telangiectasias	(2)	Cavernous hemangioma
	(3)	Cryptic AVM	(4)	Venous angiomas
103.	Which	of the following is superior anastomotic	vein?	
	(1)	Vein of Galen	(2)	Vein of Labbé
	(3)	Vein of Trolard	(4)	Pre-central cerebellar vein
104.	A patie	ent received in emergency, CT scan sho	wed S	SAH with acute blood intraventricularly and
	in sept	um pellucidum, probably the aneurysm t	o blee	d is -
	(1)	Anterior communicating artery	(2)	ICA bifurcation
	(3)	M2 segment	(4)	Posterior communicating artery
105.	The ve	enous thrombosis is most frequent during	pregn	nancy puerperium in -
	(1)	Superior sagittal sinus	(2)	Inferior sagittal sinus
	(3)	Cortical venous system	(4)	Transverse sinus
106.	The m	ost common site of origin of the recurrer	ıt artei	ry of Heubner is the -
	(1)	A1 segment	(2)	A2 segment
	(3)	Internal carotid artery	(4)	M1 segment
107.	"Medu	asa head" appearance is seen in cerebral a	angiog	graphy in which malformation?
	(1)	AVM	(2)	Cavernous angioma
	(3)	Venous angioma	(4)	Capillary telangiectasia
108.	The m	ost sensitive test for SAH is -		
	(1)	Lumbar puncture	(2)	MRI
	(3)	Non contrast CT	(4)	Cerebral angiogram
109.	Tersor	n syndrome, which occur in case of aneur	rysma	1 SAH is -
	(1)	Subhyaloid hemorrhage	(2)	Intraretinal hemorrhage
	(3)	Vitreous humor hemorrhage	(4)	Paroxysmal headache

110.	The si	ne single most common site of aneurysm presenting with SAH is -		
	(1)	Anterior communicating artery aneurysm		
	(2)	PCOM aneurysm		
	(3)	DACA aneurysm		
	(4)	MCA aneurysm		
111.	Ophth	almic artery aneurysm result in the following visual defect, except -		
	(1)	Ipsilateral monocular superior nasal quadrantanopia		
	(2)	Junctional scotoma		
	(3)	Ipsilateral inferior nasal cut		
	(4)	Bitemporal hemianopia		
112.	Charac	eteristic "Popcorn" appearance seen on T2WI on MRI is seen in -		
	(1)	AVM (2) Cavernous angioma		
	(3)	Venous angioma (4) Capillary telangiectasia		
113.	What	technique would be useful during microsurgical clipping of an ophthalmic artery		
	aneury	sm?		
	(1)	Intradural posterior clinoidectomy		
	(2)	Frontal sinus cranialization		
	(3)	Anterior clinoidectomy		
	(4)	Cisterna magna decompression		
114.	Which	one of the following statements regarding Transcranial Doppler Ultrasound is least		
	accura	te?		
	(1)	Doppler effect is the apparent change in frequency of a wave as the source moves		
		relative to the observer.		
	(2)	Transcranial Doppler takes advantage of reflection of sound waves off blood vessels		
	4.00	walls.		
	(3)	May be useful in distinguishing vasospasm from hyperemia.		
	(4)	A Lindegaard ratio (LR) of > 3 suggests vasospasm.		
[14]	4 001	Page 20 of 32		

115.	71	1	(AV)	wis) generally refer to which one of the	
	following?				
	(1)	Conus medullaris AVM			
	(2)	Dural Arteriovenous Fistula (AVF)			
	(3)	Intradural Perimedullary AVF			
	(4)	Intramedullary Glomus AVM			
116.	Choro	id plexus is absent in all, except -			
	(1)	Frontal horn	(2)	Occipital horn	
	(3)	Cerebral aqueduct	(4)	Temporal horn	
117.	Colpo	cephaly commonly seen in neonate is -			
	(1)	disproportionate dilatation of occipital	horn		
	(2)	disproportionate dilatation of frontal h	orn		
	(3)	disproportionate dilatation of temporal	horn		
	(4)	disproportionate dilatation of third ven	tricle		
118.	Base c	of dens develop from -			
	(1)	Proatlas	(2)	First occipital sclerotome	
	(3)	First cervical sclerotome	(4)	Second cervical sclerotome	
119.	Comm	nunicating hydrocephalus is seen in all, e	xcept	-	
	(1)	SAH	(2)	Arnold Chiari malformation	
	(3)	Anencephaly	(4)	Choroid plexus papilloma	
120.	Which	of the following radiological measurem	ent is	the most sensitive for BI?	
	(1)	McRae line	(2)	McGregor line	
	(3)	Chamberlain line	(4)	Wackenheim clivus canal line	
121.	Secon	dary ossification center which appear at	sumn	nit of dens between age 3-6 years fuses with	
	rest of	dens by the age of -			
	(1)	10 years	(2)	12 years	
	(3)	14 years	(4)	16 years	
	-				

122.	Trigonocephaly result from the premature closure of -				
	(1)	coronal suture bilaterally	(2)	coronal suture unilaterally	
	(3)	lambdoid suture	(4)	metopic suture	
123.	Two n	eurocentral synchondrosis on atlas fuse a	ıt aboı	nt -	
	(1)	4 years	(2)	8 years	
	(3)	9 years	(4)	10 years	
124.	Bones	of skull that are formed in membrane are	e all, e	xcept -	
	(1)	Frontal	(2)	Parietal	
	(3)	Maxilla	(4)	Occipital	
125.	The m	ost common cause and site of shunt malf	unctic	on is -	
	(1)	obstruction distal end	(2)	obstruction proximal end	
	(3)	disconnection distal end	(4)	disconnection proximal end	
126.	You a	re called to the emergency department to	o eval	uate an 8 months old infant with the CT-re-	
	constru	action demonstrated. He is also exhibit	ing a	"cock-robin" deformity. If this condition is	
	due to	Grisel's syndrome, what is the best treat	ment?		
	(1)	Surgical debridement and fusion	(2)	NSAIDs and Philadelphia collar	
	(3)	Antibiotics and Philadelphia collar	(4)	Cervical traction	
127.	Which	of the following embryological events of	ccur f	irst?	
	(1)	Neural tube edges meet	(2)	Anterior neuropore closes	
	(3)	Posterior neuropore closes	(4)	Notochord develops	
128.	Schize	ncephaly is essentially a -			
	(1)	Demyelinating illness	(2)	Disorder of neuronal migration	
	(3)	Neurodegenerative disorder	(4)	Psychiatric disorder	
129.	Fronto	-orbital advancement surgery is most l	likely	considered in which one of the following	
	scenari	ios -			
	(1)	Apert's syndrome	(2)	Fibrous dysplasia	
	(3)	Paget's disease	(4)	Sagittal synostosis	

130. The MRI shown below demonstrates features of which one of the following conditions?



- (1) Chiari I malformation
- (2) Chiari II malformation
- (3) Chiari III malformation
- (4) Chiari IV malformation
- 131. Lesion of temporal lobe produce -
 - (1) Anton syndrome

- (2) Balint syndrome
- (3) Disconnection syndrome
- (4) Complex partial seizure

- 132. "Parosmia" is for those -
 - (1) who recognise and name the odour quickly
 - (2) who recognise but cannot name
 - (3) those for whom each odour smells the same but is distorted and unpleasant
 - (4) those who can smell nothing in one or both nostrils
- **133.** Which of the following is a positive abnormality?
 - (1) Spasticity

(2) Hemiparesis

(3) Loss of memory

- (4) Impaired sensation
- 134. The telencephalon gives rise to each of the following, except -
 - (1) Amygdala

(2) Caudate nucleus

(3) Claustrum

(4) Globus pallidus

135.	Papez circuit includes all, except -				
	(1)	Occipito-frontal fasciculus	(2)	Fornix	
	(3)	Ansa lenticularis	(4)	Mamillo-thalamic tract	
136.	Which	of the following symptoms of Park	inson'	s disease is most likely to respond to a	
	stereot	actic lesion in the posterior ventral oval	(VOI	P)/ventral intermediate (VIM) (ventrolateral)	
	thalam	us?		•	
	(1)	Bradykinesia	(2)	Gait disturbance	
	(3)	Rigidity	(4)	Tremor	
137.	Which	one of the following targets is most com-	monl	y used for the treatment of dystonia?	
	(1)	GPi	(2)	Vim thalamus	
	(3)	Vo thalamus	(4)	STN	
138.	In Alzl	neimer's disease, which one of the follo	wing 1	argets for deep brain stimulation has shown	
	promis	e?			
	(1)	Caudate	(2)	Fornix	
	(3)	Globus pallidus externa	(4)	Nucleus accumbens	
139.	The mo	ost common cause of spasticity in children	en is li	kely to be -	
	(1)	Cerebral palsy	(2)	Multiple sclerosis	
	(3)	Stroke	(4)	Traumatic spinal injury	
140.	Selecti	ve dorsal rhizotomy for spastic cerebral	palsy	works by -	
	(1)	Electrical stimulation of dorsal root ent	ry zor	ne	
	(2)	Interruption of a subset of alpha-motor	neuro	ns	
	(3)	Interruption of gamma-motor neurons			
	(4)	Interruption of the spinal reflex arc			
141.	Isoelec	tric EEG is produced by -			
	(1)	Morphine + Fentanyl	(2)	Mepride	
	(3)	Barbiturate	(4)	Barbiturate + Isoflurane	

142.	GABA	ergic neurons are present in all, except -						
	(1)	pars compacta of substantia nigra	(2)	ventral tegmental area				
	(3)	raphe nuclei	(4)	superior colliculus				
143.	Neurop	sychological testing preoperatively before	re epil	epsy surgery is unable to -				
	(1)	aid lateralization of the epileptogenic zo	one					
	(2)	predict postoperative deficits						
	(3)	assess patients mental reserve capacity						
	(4)	define the epileptogenic zone preoperat	tively					
144.	Which	electrolyte is most affected by acid base	chang	res?				
	(1)	Sodium	(2)	Potassium				
	(3)	Calcium	(4)	Magnesium				
145.	A seizu	are arising in one motor cortex starts mos	st freq	uently in any of the following, except -				
	(1)	Thumb	(2)	Eyelid				
	(3)	Angle of mouth	(4)	Great toe				
146.	True st	tatement about antiepileptic drug is -						
	(1)	Therapeutic level of phenytoin is 20 –	30 µg/	/mL				
	(2)	At therapeutic level the elimination of	pheny	toin becomes zero order kinetic				
	(3)	Carbamazepine can be started at high o	lose fr	om starting				
	(4)	Carbamazepine has more effect on cog	nitive	function than phenytoin				
147.	False s	statement about febrile seizure is -						
	(1)	Febrile convulsion are the most comm	on typ	e of seizures				
	(2)	Febrile seizure prevalence is 27%						
	(3)	Risk of developing epilepsy after comp	plex fe	ebrile seizure is 6%				
	(4)	Carbamazepine and phenytoin are drug	g of ch	noice				
148.	Uncin	ate seizures typically produce -						
	(1)	Auditory hallucinations	(2)	Gustatory hallucinations				
	(3)	Olfactory hallucinations	(4)	Visual seizures				
[14] Page 25 of 32								

149.	Approximately what proportion of patients with epilepsy have medically refractory seizures?			
	(1)	0-20%	(2)	20-40%
	(3)	40-60%	(4)	60-80%
150.	Which	one of the following is the most epilepto	ogenic	primary brain tumor?
	(1)	DNET/ganglioglioma	(2)	Low grade glioma
	(3)	Meningioma	(4)	Metastasis
151.	Which	one of the following is currently seen	as the	e best marker of severity of traumatic brain
	injury	in survivors?		
	(1)	Length of coma	(2)	Mechanism of injury
	(3)	Initial CT scan	(4)	Post-traumatic amnesia
152.	Which	one of the following Karnofsky perform	rmanc	e scores is commonly used as a cutoff for
	function	onal independence in neuro-oncology?		
	(1)	50	(2)	60
	(3)	70	(4)	80
153.	Neuron	rehabilitation in the context of spinal core	d injur	y has all the following goals, except -
	(1)	Ensure that required adaptations and eq	luipmo	ent are identified and provided
	(2) Management of excretion from bowels and bladder			
	(3) Minimize the risk of preventable complications (e.g., pressure sores)			
	(4)	Routine recruitment into neural stem ce	ell tran	splantation trials for spinal cord injury
154.	A 63-y	ear-old male presents as a World Federa	tion o	f Neurosurgical Societies (WFNS) grade III
				f a basilar tip aneurysm. After a prolonged
				scharged from the ward. He is able to walk
		w Outcome Scale scores respectively?	nd sho	owering. What are his modified Rankin and
	(1)	mRS 2 and GOS 3		
	(2)	mRS 3 and GOS 2		
	(3)	mRS 3 and GOS 3		
	(4)	mRS 4 and GOS 3		
[14]	ф ии	Page 26 of 3	32	

155.	Not a n	nodality of Rx for pan brachial plexus injury-		
	(1)	Neurolysis	(2)	Spinal cord stimulation
	(3)	Division of nerve	(4)	Stellate ganglion block
156.	When	compared with open TLIF, MIS-TLIF is	assoc	iated with -
	(1)	shorter hospital stay	(2)	lower rates of fusion
	(3)	higher complication rates	(4)	worse long-term outcomes
157.	What of	donor nerve is commonly used to rein	nervat	e the brachialis muscle and help reanimate
	flexion	of the elbow?		
	(1)	Musculocutaneous nerve	(2)	Ulnar nerve
	(3)	Axillary nerve	(4)	Radial nerve
158.	The tra	ansforaminal approach to the disc space	e util	izes the Kambin's triangle. Which of these
	anaton	nical structures does not form a boundary	y of th	is triangle?
	(1)	Exiting nerve root		
	(2)	Superior border of the caudal vertebra		
	(3)	Superior articulating facet		
	(4)	Dura		
159.	Which	is the most significant benefit of percu	itaneo	us Transforaminal Lumbar Interbody Fusion
	(TLIF) vs open Posterior Lumbar Interbody Fu	ision ((PLIF)?
	(1)	Preservation of the paraspinal muscle	sleeve	•
	(2)	Higher fusion rate		
	(3)	More measurable intraoperative blood	l loss	
	(4)	Improved ability to evacuate the disk	space	
160.	Brains	stem death -		
	(1)	can be diagnosed in a spontaneously v	ventila	iting patient.
	(2)	can be diagnosed by any consultant ac	cting a	lone.
	(3)	is impossible to diagnose in a sedated	patie	nt.
	(4)	is confirmed after one set of 'brain-ste	em tes	ts'.
[14]	4 0111	Page 27 o	of 32	

161.	The most common muscle involved in the peroneal nerve palsy is -				
	(1)	EDL	(2)	Peroneus longus	
	(3)	Tibialis anterior	(4)	EHL	
162.	Tarsal	Tunnel Syndrome involves the following	g nerv	re -	
	(1)	anterior tibial nerve	(2)	posterior tibial nerve	
	(3)	common peroneal nerve	(4)	musculocutaneous nerve of leg	
163.	The th	oracodorsal nerve arises from what region	n of t	he brachial plexus?	
	(1)	Upper trunk	(2)	Posterior cord	
	(3)	Lateral cord	(4)	Medial cord	
164.	What 1	MRI finding is most consistent with nerv	e root	avulsion in a patient who was involved in a	
	motoro	cycle accident who present with a flail ar	m?		
	(1)	Perineural edema	(2)	Neuroma-in-continuity	
	(3)	Pseudomeningoceles	(4)	Coexistent vascular injury	
165.	Weakn	ess of the deltoid muscle is caused by in	jury to	o the -	
	(1)	Axillary nerve	(2)	Dorsal scapular nerve	
	(3)	Musculocutaneous nerve	(4)	Suprascapular nerve	
166.	Ophtha	almic artery in Relation to optic nerve is	_		
	(1)	Superomedial	(2)	Inferomedial	
	(3)	Superolateral	(4)	Inferolateral	
167.	The ve	in of Galen is present in -			
	(1)	Quadrigeminal cistern	(2)	Ambient cistern	
	(3)	Suprasellar cistern	(4)	Interpeduncular cistern	
168.	Descen	ding fibers of the Medial Longitudinal	Fascio	culus (MLF) arise from all of the following	
	structur	res, except -			
	(1)	Inferior colliculus	(2)	Cajal interstitial nucleus	
	(3)	Pontine reticular formation	(4)	Superior colliculus	

169.	The me	embrane of Liliequist separates which of the following subarachnoid cisterns?					
	(1)	Ambient cistern and crural cistern					
	(2)	Ambient cistern and quadrigeminal cistern					
	(3)	Interpeduncular and chiasmatic cistern					
	(4)	Interpeduncular and prepontine cistern					
170.	The an	terior choroidal artery supplies portions of each of the following structures, except the-					
	(1)	amygdala (2) hippocampus					
	(3)	hypothalamus (4) internal capsule					
171.	Which	one of the following statements regarding image-guided neurosurgery in pediatric patients					
	is most	t accurate?					
•	(1)	Optical frameless stereotactic navigation is ideal for children with unfused skull sutures.					
	(2)	Electromagnetic frameless stereotactic navigation is more appropriate for neuro-					
		endoscopy in children.					
	(3)	Reference array for electromagnetic navigation must be fixed to bone.					
	(4)	Electromagnetic navigation requires a clear visual line of sight between the tracker and					
		the stylet.					
172.	All of	ll of the following are true about growing skull fracture, except -					
	(1)	can cross suture line					
	(2)	may be associated with underlying dura injury					
	(3)	most common in frontoparietal region					
	(4)	most common in the 3 to 5 years age group					
173.	True s	statement about Multiple Sclerosis (MS) -					
	(1)	Two lesions at the same site are diagnostic of MS.					
	(2)	In CSF IgM is raised.					
	(3)	Associated with retrobulbar neuritis and blindness.					
	(4)	Trigeminal neuralgia can be present in MS.					
[14]	4 0111	Page 29 of 32					

174.	In Fov	rille syndrome, all are true, except -
	(1)	VII th nerve paresis
	(2)	Ipsilateral paralysis of conjugate gaze
	(3)	Contralateral corticospinal hemiplegia
	(4)	Bilateral paralysis of conjugate gaze
175.	Corpus	s Callosotomy is most effective for which form of Epilepsy?
	(1)	Atonic
	(2)	GTC (Generalized Tonic Clonic)
	(3)	SPE (Simple Partial Epilepsy)
	(4)	CPE (Complex Partial Epilepsy)
176.	Which	one of the following Least accurately describes, how surgeons interact with currently
	availab	le surgical robots?
	(1)	Master-slave
	(2)	Supervisory controlled
	(3)	Shared control
	(4)	Augmented reality
177.	The blo	ood-brain barrier is made up of what structures?
	(1)	Astrocytic foot process
	(2)	Endothelial tight junctions
	(3)	Ependymal gap junctions
	(4)	Glial membrane
178.	Pregnai	ncy is most likely to affect the symptoms in a patient with what tumor type?
	(1)	Glioblastoma
	(2)	Ependymoma
	(3)	Meningioma
	(4)	Lung metastases
[14]	≠ 000	Page 30 of 32

179.	MRI is Cl in all except (Cl = contraindicated) -		
	(1)	Pregnancy	
	(2)	Cervical cord lesion with respiratory involvement	
	(3)	Patients with pacemaker	
	(4)	Intracranial ferromagnetic aneurysm clip	
180.	The po	The power of a study is best described as which one of the following?	
	(1)	The probability of a significant finding	
	(2)	The probability of correctly rejecting the null hypothesis	
	(3)	The probability of needing further data at the end of the study period	
	(4)	The probability of accepting the null hypothesis	

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[14]