

لجنة الطب البشري - الجامعة الهاشمية

PAST PAPERS - MINI OSCE



NEURO-MEDICINE

Neurology Past Papers

لجنة الطب البشري

نظام الامتحان

- الامتحان عبارة عن امتحان شفوي (oral), أي أنه كل طالب يدخل على غرفة الامتحان لما الدكتور ينادي على اسمه والدكتور يسأله أكم من سؤال وهو يجاوب في لحظتها شفويًا.
- الامتحان سهل والدكاترة متعاونين جداً وبحطوا علامات عالية, فادرسوا منيح وما تخافوا من إشي
- كل مجموعة بمتحنها الدكتور إلي درسهم خلال الدوام
- كل طالب تقريباً لازم يجيبه سؤال عن ال cranial nerves
- الأسئلة موزعة في الملف حسب الدكتور

أسئلة الدكتور عبدالرحيم

- Mention drugs given in epilepsy
- what are the side effects of phenytoin? most important is gingival enlargement and hirsutism
- contraindications of lumbar puncture
- what is the normal value of INR
- clinical presentation of meningitis, most common causative agent, treatment
- virus that reduces the level of glucose in CSF in meningitis
 - * mumps
- Case: patient with severe headache, neck stiffness,, etc ..
 1. answer : subarachnoid hemorrhage
 2. Diagnosis : CT scan is positive in 95%, in 5% we should use lumbar puncture
 3. how to differentiate between subarachnoid hemorrhage and trauma by your needle
- bonus:
 - TB meningitis
- Mention the types of epilepsy

أسئلة الدكتور عبدالرحيم

- Drug used for absence seizures
- Pathophysiology of myasthenia, and its disease of Neuromuscular junction postsynaptically
- Drugs of myasthenia gravis
Why immunosuppressant given life long
- Drugs used in tension-type headache
- Examination of 9th cranial nerve
- 9th cranial nerve supply
- SE of lamotrigine
- SE of phenytoin
- Indications for lumbar puncture
- Different between parkinson and parkinson plus

أسئلة الدكتور عبدالرحيم

- GBS diagnose and Treatment
- case: patient with numbness and weakness in upper and lower limb, most likely to be??? GBS
- Most common cause of death in GBS
- Treatment of parkinson and side effect of sinement
- Myasthenia gravis and Treatment Myasthenia crises
- Afferent and efferent to gag reflex
- Signs of increased icp (redflags)
- side effects of valproaic acid
- most common cause of viral encephalitis and its treatment
- parkinson clinical feature

أسئلة الدكتور عبدالرحيم

- Most common side effect of senemit
- Facial nerve examination...and which muscle in the neck supplied by facial
- Comparison between migraine and cluster headache
- treatment of acute attack of cluster headache
- Bad prognosis of multiple sclerosis,
- The treatment of acute attack and long-term ms
- The divisions of the trigeminal nerve
- What's the origin of CN3 ?
It's job ?
Damage to it results in what ?
What's the most common cause of surgical damage to CN3 ?
- What are the 3 criteria to diagnose parkinson ?
- Name some of the drugs used to treat parkinson disease

أسئلة الدكتور عبدالرحيم

- What's the origin of the facial nerve ?
what does it supply ?
How many divisions does it have?
Name the division which supplies the tongue "bonus"
How to examine it ?
- What are the differences between optic neuritis and papilledema?
- Types of MS
The drug of choice for relapsing-remitting MS?
Side effects for interferons?
- Drugs used to treat migraine?
- Trigeminal nerve : origin , branches , motor supply ?
Name the muscles
Ophthalmic and maxillary pass through cavernous sinus
- What is jaw jerk reflex ?
What is the normal?
When is this reflex abnormal? In pseudobulbar palsy
- What is pseudobulbar palsy?

أسئلة الدكتور عبدالرحيم

- Absence seizure:
Duration and Tx
- Side effects of valproate:
teratogenicity
effect on baby?
Neural tube defect
- Everything about the 6th nerve (origin -palsy - why its called false localizing)
- Contraindicated and the drugs used in Myotonic epilepsy
- all differences between papilledema and optic neuritis
- talk about pseudotumor cerebri

أسئلة الدكتور مجدي

- How to examine accessory nerve ?
- all about ms?
- internuclear ophthalmoplegia what do you know about it ?
- all about myasthenia gravis
- management of myasthenic crisis and difference between myasthenic crisis and cholinergic crisis
- radial palsy
- what dose medial nerve supply

أسئلة الدكتور مجدي

- how to examine hypoglossal nerve
- what is the albuminocytological dissociation (high protein & normal cell in csf in GBS)
- classification of neuropathy ; definition & examples for each type
- case with headache, fever,vomiting, neck stiffness and photophobia.
- diagnosis & approach (cns infection , ask about type &duration of headache, fever,vomiting[projectile or non] and full history socrates,past medical.
- signs (kernig & meningism & brudzinski)
- Investigation ct [if there infarction and before LP to exclude space occupying lesion] if you dont have ct use fundoscopy
- Lumbar puncture (high pressure,high protein,high wBC,no RBC,low glucose)
- CBC for platelets
- INR for coagulation

أسئلة الدكتور مجدي

- Early and late complication of SAH
- Definitions, epidemiology and etiology of stroke
- Treatment of SAH
- Parkinson
- Hypoglossal nerve examination
- Talk about optic nerve
- GBS
- MS

أسئلة الدكتور مجدي

- All about Trigeminal nerve .
- Types of neuropathy .
- Infections cause Neuropathy .
- drugs cause neuropathy .
- GBS presentation
- MS types .
- One peripheral post-infection disease -> (GBS)
- Lhermitte sign (tingling when neck flexion)
- Name of sign in MS which is related to hot path .
- Infections cause GBS

أسئلة الدكتور مجدي

- Facial nerve palsy
- UMN & LMN lesions
- Parkinson "gait"
- SAH
- Neuropathy
- Differences between myopathy and neuropathy
- How to examine optic nerve?
- Types of visual field defect, and the cause of each one?
- How to diagnose myasthenia gravis clinically

أسئلة الدكتور مجدي

- احكي لي كلشي بتعرفو عن ال oculomotor nerve كلشي من طقطق للسلام عليكم
- خلينا نطلع من الكرانيل نيرفز واحكي لي كلشي بتعرفو عن parkinson disease
- واخر اشي حالة عن ال carpel tunnel syndrome وال differential diagnosis تبعها
- Talk about optic nerve??
- Case for iih
- female married come to your clinic with morning headache, vomiting(papilloedema established by fondoscopy so she had high icp) and when u examined here she had paralysis in 6th nerve....what is the d.d for this case?what is the tests must be made(cts mri(to exclude ISt)? what is the treatment?

أسئلة الدكتور مجدي

- what do you know about superficial reflexes?
- You have to say everything about plantar, abdominal ,and cremasteric reflexes...
- examine the Trigeminal nerve:
- The most important thing to mention is the 3 reflexes: corneal, jaw jerk, oculocardiac .
- And follow macleods order and steps.
- What do you know about Myasthenia gravis ?

أسئلة الدكتور مجدي

- Superficial reflexes ?
- Talk about Myasthenia Gravis ?
- Type of movement in Myasthenia Gravis ?
- Describe Waddling gait?
- Side effect of Valproic acid ?
- What are the cortical sensations? (as 2 point discrimination , graphesthesia , stereognosis)
- What are the reflexes of trigeminal nerve (with efferent and afferent pathway)?
- Talk about CSF anatomy and Philosophy (site of production and flow pathway and absorption)?
- Talk about Multiple Sclerosis?
(Definition , clinical course , types
& What are the differentials)

أسئلة الدكتور مجدي

- Talk about myasthenia gravis clinically?
- What are the types of myasthenia gravis ?
- How we classified neuropathies and what are the causes of each?
- What is the pathway of the corneal reflex, light reflex , jaw reflex ?
- Mention the Superficial reflexes?
- Tell me everything you know about Epilepsy?
- Hypoglossal nerve examination?

أسئلة الدكتور مجدي

- Brain stem reflexes (Cranial nerves reflexes)?
- What do you know about "Doll's eye maneuver" ?
- Nystagmus types and definition?
- What do you know about "Bell's phenomenon"?
- Myoclonic epilepsy clinical triad?
- Talk about Myasthenia Gravis?
- What are the cranial reflexes?
- What are the superficial reflexes?

أسئلة الدكتور مجدي

- Talk about Parkinson's disease?
- Mention the Brain stem reflexes?
- Drugs for Epilepsy?
- Tell me everything you know about Parkinson's disease?
- Talk about epilepsy ,and the myoclonic type.
- How to examine the accessory nerve ?
- Talk about secondary headache.
- Case about female obese young with frontal headache
 - What is your DDx ? (IIH+ venous thrombus)
 - What should you ask her ?
 - What are the signs do you see on examination ?
 - Treatment ? Optic nerve sheath incision is for preserving the compromised eye with papilledema via laser

أسئلة الدكتور مجدي

- Epilepsy, Myoclonus time of attack and treatment ?
- Talk about MS, Common sites of plaques ?
- Superficial reflexes ?
- Carpal tunnel syndrome ?
- What is your seminar?
 - neuropathy
- Ok, tell me every thing about epilepsy
- What is the triad of myoclonic type and How can we manage it ?
- How to examine 7th CN , what does it do?
- What do we mean by “albuminocytological dissociation “ ?

أسئلة الدكتور مجدي

- What's your seminar ?
Me: spinal conditions
Doctor: so talk about MS (everything you know)
- How to examine 3rd and 12th nerves ?
- Talk about Parkinson Disease :
 - I start with definition and pathophysiology
 - then the Dr. ask me about clinical presentation (tetrad)
 - What do we mean by “Festinating Gait” ?
 - What are the NON motor symptoms in PD ? (like autonomic symptoms, depression...)
- What is the primitive reflex that can be seen in PD ? >> glabellar tap
- What are the superficial reflexes ? cremasteric, abdominal, plantar.

أسئلة الدكتور مجدي

- Talk about Strokes (everything you know)
- Carpal tunnel syndrome ?
- Cortical sensations ?
- Clinical presentations of MG ?
- Types of gaits ?
- Gait of myasthenia graves ?
- SAH >>4 early complication and 4 late complication ?
- SAH treatment ?
- Differences between Parkinson and Parkinson plus ?
- Foot drop cause and hand drop cause ?

أسئلة الدكتور مجدي

- Talk about MG
definition ,clinical presentation ,PE and ttt ?
- Talk about Parkinson?
 - Differences between Parkinson & Parkinson plus?
 - How do we diagnose it?
 - Differences between Parkinson tremor and essential tremor?
 - Motor and Non motor symptoms of the disease ?
 - TTT and what do we give to pts to make other symptoms better ?
- Case of a woman who came to ER with sudden bilateral lower limb paralysis, Patellar response mute.
 - What is the first thing that you should do that would indicate it's a spinal cord lesion? >> Do sensation test on the level of the umbilicus-> T10 And on the on the level of the nipples-> T5 To know which level is it on.
- Diplopia on downward gaze? And how do pts present with?
- 4th CN palsy/ head tilted to the side of lesion.
- Explain the consensual light reflex of the eyes ?

أسئلة الدكتور ماجد

- سألني عن اذا اجاك مريض loss of cons وشو يكون وشو الاشياء اللي بتعمل loss of cons وشو بنعمل اله وسألني عن ال case مريض اجاك باكثر من attack لمدة 3 دقائق كل وحدة شو يكون وشو بتعمل اله وبتلنهاية طلع السؤال مفخومه ميز بين epilepsyal pseuduepi
- سألني عن ال light reflex وشو بصير ... وحجم العينتين وال efferent وال afferent

- Talk about peripheral neuropathy
- Talk about MS
- How to differntiate between migrain and cluster headech
- How to examin trigeminal nerve
- Muscle of mastication

أسئلة الدكتور ماجد

- Ocular movement examination
Pain on eye movement indicates what? optic neuritis كأنه
- احكي عن ال myasthenia gravis بشكل
- عدد انواع ال epilepsy وسأل اسئلة بسيطة عنها
- Clinical feature of Parkinson
- Cranial nerve 2
- Types of elilpsy
- Scale of power

أسئلة الدكتور ماجد

- how do u examine optic nerve?
- what are the main symptoms of parkinson's?
- what are the types of epilepsy and clinical presentation?

أسئلة الدكتور أكرم

- Triad of parkinson ?
- 7th cranial nerve examination?
- Definition of status epilepticus and first line treatment ?
- Side effect of phenytoin?
- How to examine optic nerve Optic nerve edema
- what causes Optic neuritis
- Multiple sclerosis.. acute MS Treatment.. doses?
- Status epilepticus

أسئلة الدكتور أكرم

- Status epilepticus (definition,,treatment)
- Optic nerve examination
- Optic nerve swelling is caused by?
- Status epilepticus
 - definition
 - Affected group?
 - First line treatment (how to manage at ER)
 - what you gonna give to induce general anesthesia?
- the difference between 3rd nerve palsy(surgical) 3rd never palsy (medical)
- Causes of surgical 3rd nerve palsy

أسئلة الدكتور أكرم

- optic nerve aspects of examination
- optic neuritis signs and symptoms
- MS acute phase ttt
- MS bad prognostic factors
- CN 3 ,4,6 supply which muscles & lesion effect
- question about internuclear ophthalmoplegia
- Surgical and medical 3rd nerve palsy
- Superior oblique lesion how patient will go upstairs
- 5 signs of worse prognosis of MS

أسئلة الدكتور أكرم

- What muscle does the facial nerve supply in the ear? Stapedius muscle
- Function of stapedius: stabilization
- Most common cause of facial nerve palsy: infection
- In Ramsay Hunt syndrome there's hyperacusis
- Side effects of phynetoin
- Drugs used for status epilepticus
- Causes of status epilepticus

أسئلة الدكتور أكرم

- Treatment of myasthenia gravis
- definition of myasthenic crisis and its treatment
- how to examine facial nerve
- muscle in the neck that facial nerve supplies +how to examine it
- Myasthenia gravis definition
- Tests for myasthenia gravis
- UMNL in 7th CN palsy causes lower muscle impairment of the face but LMNL causes all facial muscle impairment
- causes of bilateral facial nerve paralysis

أسئلة الدكتور أكرم

- If there was right 5th nerve lesion, to which side would muscles be deviated
- What is the trigeminal branch most affected by herpes zoster
- which branches are most affected in trigeminal neuralgia
- What are the lesions that cause trigeminal neuralgia

أسئلة الدكتور أكرم

- Mentions the types of epilepsy
- Drug used for absence seizures
- Pathophysiology of myasthenia gravis, and it is disease of Neuromuscular junction postsynaptically
- Drugs of myasthenia gravis, Why immunosuppressant given life long
- Treatment of myasthenia crisis

Neurology- Oral

SOUL 2021



At the end of the file you will find miscellaneous questions that were not specified to any doctor.

Dr Majed

- Talk about MS
- How to differentiate between upper and lower facial lesion?
- What is 3rd cranial nerve disorders?
- What nerves supply hand, and what are their sensations?
- What is different between migraine and cluster headache?
- Talk about Parkinson
- Parkinson treatment
- Surgical treatment of Parkinson
- Types of rigidity on Parkinson
- Talk about cluster headache
- Talk about GBS
- Oculomotor nerve examination, pulsy , function
- Meningitis symptoms
- What muscles does CN5 supply? And How do you examine them?
- Corneal reflex afferent and efferent pathways.
- Jaw jerk afferent and efferent pathway.
- Other superficial reflexes?
- Talk about MG, What blood tests are done?, what happens to CK enzyme is it elevated or remains unchanged? What's the pattern on MG?
- Trigeminal innervates what muscle?

- Light reflex pathway
- Cortical sensation
- Subarachnoid H early and late manifestation
- Hypoglossal examination
- talk about Myasthenia gravis and the difference between it and crisis
- facial nerve innervates what muscles
- how to differentiate between UML and LML in facial paralysis
- symptoms of oculomotor paralysis
- Explain Abdominal reflex and Gag reflex
- False localizing Sign
- Signs of Third nerve palsy
- Types of gait and Parkinson gait
- MS type, MS Treatment
- extra-ocular muscle innervation
- Premotor Parkinson symptom
- About Stroke
- What is the area in the brain affected by MS
- what are the types of epilepsy
- types of generalized epilepsy
- talk about absence epilepsy
- treatment of absence epilepsy

- difference btw Parkinson's disease and Parkinsonism
- causes of parkinsonism (what drugs can cause parkinsonism)
- Types of epilepsy, examples, and def of status eplipticus,
- Talk about stroke
- Differences between resting tremor and action tremor
- prodromal stage of Parkinson
- What do you know about Hypnic headache
- talk about GBS , what's the main cause of death in this syndrome?
- 12th CN exam
- Most common cause of bilateral wasting tongue with fasciculations
- Talk about ALS
- Talk about Parkinson's disease
- Types of tremor and the cause of each one
- Talk about cerebellum Talk about 3rd cranial nerve
- Talk about the types of tremor Trigeminal nerve examination Haw can diagnose the MS the clinical feature of the MS Innervation of the tongue

Dr Aktham

-how to examine optic nerve?

-what is optic neuritis and what might cause it?

-triad of Parkinson disease and what type of tremor unilateral or bilateral?

-Talk about optic nerve examinations :

1/visual acuity by “ snellen chart”

2/visual field by “confrontation “

3/color vision by “ Ichihara “

4/fundoscopy : to detect optic disc atrophy or swelling

5/papillary reflexes

- what can you detect optic swelling :

1/optic neuritis

2/bilateral optic swelling “ papilledema “

- what causes of papilledema:

(Idiopathic ICP +tumor +hydrocephalus + hemorrhages)

-pathologic manifestation of Parkinson disease

Which is loss pigmentation of substantia nigra

-What diseases cause bilateral facial nerve palsy

-physical exam of facial nerve

-Difference between third CN palsy (surgical Vs medical) and causes for each

- Position of eye in 3th CN palsy

- Case about patient with first time epilepsy : according to history what things you want to ask to make sure it's epileptic Seizure . (Epilepsy Vs Pseudo-seizure)

- Status epileptics : definition and first line ttt in ER

-32 years old man patient complain from thunderclap headache it was the worst headache in my life the duration was 30minute then i come to clinic What is the type of headache?

Subarachnoid hemorrhage

-What is the investigation? Ct scan

-Why we use ct rather than mri?

Because ct take few second and mri take long time , Also the ct scan demonstrate hemorrhage better than mri .

Ok after the result come the ct scan was free what will you do to the patient ct scan or mri ? You can do angiograph or ct scan again cause you suspect hemorrhage and we do CSF to see

-Facial (7th) nerve examination?

Wrinkling fore head Squeeze eyes Clench teeth Blow cheeks Platysma

-What the sensory part receive?

-Mention causes of bilateral lower motor 7th nerve palsy?

GBS Myasthenia gravis ...

-Case of SAH -Investigation?

-What is status epilepticus?

-What are the 2 age peaks in MG

-What are the clinical findings?

-How do we diagnose it?

-Who are the pts most at risk of developing GBS

-What can we find in the CSF if we do a lumbar puncture

Dr Majdi

- What are the muscles supplied by facial nerve?
- How to examine facial nerve?
- Case: Patient presents with complete unilateral facial paralysis, where is the lesion? And what's the difference between upper and lower motor lesion?
- What is Bell's Phenomenon?
- What are the superficial reflexes?
- Case: Patient presents with complete sudden bilateral lower limb paralysis, areflexia, no plantar reflex. What's the next step? (Check for sensory level) And what's the most likely cause? Spinal lesion
- Name types of generalized seizures.
- What is parasomnia? And what condition presents with parasomnia? (Temporal lobe epilepsy)
- What are efferent and afferent pathways of light reflex and corneal reflex ?
- What is the normal response of corneal reflex ?
- Everything you know about Parkinson?
- Describe the gait in Parkinson disease?
- What are the non-motor symptoms of Parkinson?
- What types of drugs do we use in Parkinson?
- What muscles does the trigeminal nerve supply ?

-How do you examine them ?

*3 cases about 3rd nerve palsy, 4th nerve palsy and 6th nerve palsy

-Explain Gag reflex

-all about GBs

-Describe general epilepsy attack, and mention types of general epilepsy

-What are the cortical sensations?

-accessory nerve examination

-All about myasthenia gravis

-How to examine the 12th nerve

-classification of partial seizure

-type of partial seizure

- talk about temporal lobe epilepsy?

-what is isolated clinical syndrome

-classification of neuropathy according to the cause , anatomy

-example of metabolic neuropathy

- the most important to monitor in GBS

- variants of GBS : 4 TYPES

-what is the specific antibody we look for in Miller Fisher variant ?
antiganglioside antibody specifically anti-GQ1b

-Gag reflex (afferent , efferent)

-Cortical sensations

-GBS every thing about it (detention , clinical presentation , investigation, ...) What do you see in Lumber puncture ? ...

-Hypoglossal nerve examination

- patient with drooping shoulder and asymmetrical neckline! —->
accessory nerve palsy , muscles names

-Cortical sensations

-Reflex of trigeminal

-nerve pathway

-Light reflex pathway

-Superficial reflexes

-Pupillary reflexes

-talk about MG

Dr Abd-Alraheem

- Trigeminal nerve motor and sensory supply
- 2 Reflexes to test trigeminal nerve
- What is jaw reflex
- give 3 DDX for Ptosis?
- Tests to diagnose Myastheni Gravis
- The features of facial nerve paralysis(asymmetry, weakness of eye closure.. etc)
- And the difference between UMN and LMN patterns of weakness in facial nerve (lecture notes page 29)
- Guillain Barre syndrome clinical features, investigations and diagnosis, and treatment (lecture notes page 174-175)
- CN 3 paralysis:
ptosis , - eye is "down - out" because unopposed action of " superior oblique - lateral rectus" - pupil is fixed & dilated (surgical palsy) pupil is spared (medical palsy)

مريض عمره ٦٠ سنة إجاك عالطوارئ الساعة ٤ الفجر عنده ألم رأس شديد صحاه من النوم)
خذ هستوري تطلع منه التشخيص؟ بيهمنا أنه severe / sudden / occipital ، ، عشان
نعرف أنه # subarachnoid hemorrhage أيش ال signs اللي بتشوفها عند physical
examination؟ الدكتور بده ال neck stiffness / papilledema / retinal
hemorrhage أيش بتعمله وأنت بالطوارئ عشان تتأكد من تشخيصك؟ # " CT scan "
بما أنه ٥٪ من ال CT بتطلع معاك negative ، وأنت متأكد من التشخيص بالعلامات اللي
فوق، أيش لازم تعمل في هذه الحالة؟ " Lumpur Puncture "

- ttt for tremors in general.
- MS types.
- bad prognostic factors for ms.
- optic neuritis, is it a good or bad sign in ms patient? It is good bcz the motor signs are always the bad, not the sensory.
- accessory nerve examination.
- the most common disease that affect sternocleidomastoid: dystonia.
- Trigeminal nerve Which Number ? Division ? Types ?
- Features of ophthalmic nerve ? Motor division (mandibular) supply which muscles ?
- Case : Female pt بتسكر عينها فترة وبعدين بتفتحها What do you want to ask her ? What is the diagnosis and what do want to diagnose ? What is the relation of thymus ? TTT?
- examination of 12th CN
- Types of Epilepsy
- Absence Epilepsy , drug ?
- Side effects of anti epileptic drugs ?
- Status epilepsy ? Management ?
- Horner syndrome ?
- ask about subarachnoid hemorrhage and thunder clumps headache?
- Talk about third cranial nerve palsy?
- Side effects of sodium valproate

- Case about myasthenia and what is the management in the ER?
- Examination of trigeminal nerve
- Trigeminal nerve supply??
- causes of bilateral facial palsy
- Talk about the migraine?
- Talk about the cluster headache?
- Talk about tension headache?
- Talk about the optic nerve palsy and differentiate it from oculomotor nerve palsy
- Optic neuritis(case)
- Oculomotor nerve palsy
- Dr shows a Video and asks what's wrong with this man i video?
has seizure.
- What is the type of the seizure?
tonic - clonic.
- What is the management for this type ?
stages of management
- If the pt. is alcoholic what should we do ?
give thiamine with dextrose
- Phenytoin side effects
- Tell me about trigeminal nerve function, divisions, palsy

-Good prognostic factors for MS

-oculomotor nerve, what muscles it innervates,

-CN 3 palsy effects

-difference between true seizure and functional seizure

miscellaneous

- Viral and bacterial meningitis
- Non motor symptoms of Parkinson
- Trigeminal reflexes
- Everything about SAH
- Seminar dementia types ,
- Talk about Alzheimer
- Alzheimer vs lewy bodies
- MG how to treat
- UMN facial nerve
- MS types 5
- MG diagnosis
- Accessory nerve examination
- Muscle enzyme in MG
- Seminar stroke: presentation of anterior carotid and posterior carotid
- Talk about bilateral hemiplegia with bladder constricted what's the next step of examination
- Epilepsy (generalized types) more specific about tonic clonic (what happens in post ictal phase)
- Where do you see automatism/ what it is
- CSF normal readings protein, sugar and pressure

- Definition of status epilepticus
- Abcd (airway/breathing/circulation/drugs)
- Refractory phase medication
- Wbc count in CSF and glucose and protein
- Bad prognosis of MS
- Talk about GBS and stroke
- Trigeminal nerve origin and palsy
- Difference between surgical and medical 6th nerve lesion .
- Status epileptics definition and treatment .
- Difference between true seizure and pseudo seizure .
- Urine incontinence.
- Treatments of types of seizure .
- Bilateral papilledema --> causes and diseases responsible
- Valporate side effects?
- Also asked about diseases that mimics MS presentations (epilepsy migraine TIA vacuities)
- Oculomotor --> damage causes? Talk about surgical and medical lesions?
- Trochlear nerve --> damage causes? And how does the pt. Go down the stairs?
- Optic neuritis(bilateral) --> causes
- Rituximab (monoclonal antibody)

-INO --> what is it?

-Define status epileptics?

-How to differentiate between true and pseudo seizures?(according to everything but specifically he asked about the eyes and the duration of each one and then he left me to talk about them all)

-How to deal with status epileptics in emergency cases ?

-What are the anesthetics used in status epileptics ?

-How does a pt with subarachnoid hemorrhage present to the ER?

-What is the description of his pain ?

-After a clear CT scan what should you do if you still suspect subarachnoid hemorrhage?

-Describe the triad of subarachnoid hemorrhage "thunderclap headache, neck stiffness, altered level of consciousness "What do you do? CT
Why? Because CT is cheaper and quicker and can detect 95% of bleeds
If CT was negative? Perform LP, 3 tube test will show the same amount of RBCs in all 3 test tubes... Xanthochromia test will show positive only after 6-12 hours

-All about optic nerveWhat is the difference between optic neuritis and papilledema ?

-What is the cause of Papilledema? (Increased ICP)

-Cause of optic neuritis? MS and NMO

-What is the 4th CN? What does it supply ?

-How does the patient compensate it's injury?

-Facial nerve: - commonest causes of bilateral complete CN7 palsy (MG,sarcoidosis, lyme disease (rarest of them), GBS, botulism)

- UMN LMN lesions; upper affects only the lower muscles while LMN affects all the lesion at the same side.

- Structures supplied by the facial nerve and how do we test them?

-Muscles of facial expressions and the taste in anterior 2/3 of the tongue, stapedius muscle of the middle ear; Ask the pt to open, close their eyes, whistle, puff out cheeks, both passively and against force, and to smile (“show your teeth”).

-18 years old male medically free .the chief complaint is headache dull all over his head associated with fever, neck pain and photophobia the pain increase when he tilt his head downward what is your DD in the physical exam what you will do (look for neck stiffness and Kernig's sign) then what's your the next step before doing the LP what you should check ? at any level you will do it what you spouse to find in CSF ? then what's the management for this pt ?

- Female patient of 24 years old came to ER complaining about severe headache since of 4 weeks, the pain mainly in right side especially around the eye but sometimes she feels it on the left side, the pain stays from 6hrs to 2 days usually and go 2 - 3 days (free time), the pain was sudden in nature and intermittent, throbbing - like , associated with nausea and vomiting, she also gets upset from sounds and light.

The pain relief by sitting in the dark room and when sleep and increased with walking and movements, analgesics usually don't stop it completely but just decrease it briefly :

A. What is the main diagnosis?

B. Why it is not a cluster headache? and talk about all differences between them from all aspects.

C. How can we diagnose the problem?

D. What is the management and prophylaxis?

- patient of 50 years old came to the clinic complained from drooping of upper eyelid and he can't see properly, sometimes he see double vision..

A. What do you think a problem?

B. What are the symptoms of Horner syndrome and where we see it?

C. What are the muscles that innervated by oculomotor nerve?

D. What is the nerve that supply superior oblique muscle and what is the nerve supply of lateral rectus muscle?

-If you see the pupil of patient in another position of normal, what do you think about that..?

A. If it was outward and downward, what do you think the problem?

B. Talk about 6th cranial nerve palsy.

-Facial nerve examination causes of bilateral face weakness differentiate between true epilepsy and pseudo

- muscle power grading

-upper motor neuron lesion vs lower motor neuron lesion in 7th cranial nerve

-bilateral facial nerve palsy causes

-A history of a patient in ER with rapid neurological manifestation that the doctor mentioned..Management of stroke in less than 3.5 hours..

what the dose of alteplase? Je joked to test me is alteplase the same antithrombin and tpa?

-He gave two CSF results one was bacteria and the other was TB..

-A history of progressive headache for two weeks came to the ER.. what are you going to do to him.. i said i'll do something that increasing the ICP.. do CT scan to see if there's a tumor occupying lesion.. if nothing than LP.. then told to talk about idiopathic intracranial pressure...

-Drugs side effect (carbamazepine, phenytoin, sodium valproate)

-Mention Cases that we treat epileptic patient from the first attack

-Bad prognosis for ms

-Most common cause of death in the world is MI, (after strokes do a cath because atherosclerosis is a systemic disease.)

-How to diagnose the patient clinically (not tensilon test, (not in the notes), he mention something with ice, or ask the pt to focus on something to induce ptosis)

-What's do you know about trigeminal neuralgia

-examination ,bell's palsy, UMN vs LMN

-second cranial nerve examination

-afferent and efferent for pupillary reflex

Nuorology Harmony 2019-2020

Dr.Majdi

1. How do we examine the facial nerve
2. What are the cortical sensations
two points discrimination, bilateral simultaneous stimuli, stereognosis, graphesthesia, barognosis, tactile discrimination, texture.
3. Talk about myasthenia gravis
4. What's the difference btw myasthenic crisis and cholinergic crisis
5. How do you examine the hypoglossal nerve?
6. To what side the tongue deviates if there's lesion in hypoglossal nerve?
7. Talk about Parkinson.
8. What are the non-motor symptoms of Parkinson?
9. What is the drug treatment of Parkinson?
10. What are the antibodies we look for in MG?
11. What is the difference between myasthenia crisis and cholinergic crisis?
12. Motor examination of trigeminal nerve
13. Transverse myelitis , case of a women complaining of sudden distal muscle weakness , with areflexia and urinary retention)

→The lesion is below the umbilicus , what are the levels of the lesion (بتذكر حكا)
(بس مومتاكدة t10 w t5)

14.Types of GBS

15.Rx and definition of trigeminal neuralgia

16. Visual pathway in details

17. Reflexes tested for a comatose patient

18.cranial nerves examination in an unconscious patients:-

- light reflex for midbrain viability
- Corneal reflex for Pons viability
- Doll's eye test and caloric test for midbrain and pons viability
- Breathing pattern and gag reflex to check for medullary viability
- you detect the exact level of damage in brainstem by testing the afferents and efferent of reflexes to know the exact damaged nuclei
- GCS with interpretation

19.superficial reflexes:

→polysynaptic reflexes that are detected from skin

→ they are the:

- abdominal:scratching of umbilicus causes flexion of abdominal wall towards you
- Plantar:details
- Cremasteric:its details

20.Ramsey hunt syndrome

21. Talk about MG and MS
22. Types of Gaits you know
- 23.- Reflexes of trigeminal nerve
24. Afferent and efferent of corneal reflex and jaw jerk
25. -Trigeminal nerve examination +mention jaw jerk and corneal reflex -
Superficial reflexes (plantar cremastic and abdominal)
26. -cortical sensations (two point discrimination , sensory inattention ..)
27. -case of a female obese patient that have headache when lying down
and is worse in the morning . (raised ICP , start with fundoscopy you will
see bilateral papilledema , examination do ct or mri to exculde mases
and other differentials , LP then performed -> high csf pressure with
normal cells , normal csf pressure 5-18 , what do you do next ? منسحب
شوي من السائل منخفض What's the differential ? Tumor , benign idiopathic
Intracranial hypertension, superior saggital sinus thrombosis , the pt
came back after a period of time and there's still papilledema what do
you ? Optic sheath fenstreation or lumboperitoneal shunt)
28. -cortical sensation
29. -talk about Ms (don't forget to mention the stages)
30. -what is apraxia
31. -why when we have weakness in one side our eyes look to the other
side
32. talk about 3rd nerve and 12 nerve
33. epilepsy and sezuredefention
34. epilepsy types
35. talk about absence epilepsy
36. mention old and new drug for ttt of epilepsy
37. 3rd nerve palsy examination and presentation
38. Parkinson's disease everything you know about it
39. Trigeminal nerve reflexes
40. Corneal reflex afferent and efferent pathway
41. Multiple sclerosis types
42. 3rd nerve palsy presentation

43. Case of a patient who came with fever , headache , neck stiffness (what questions you will ask after that , investigations & diagnosis)
44. Cerebellar manifestations and the deference btw sensory & motor ataxia
45. The deference btw MG & Lambert Eaton Sy.
46. Cortical sensations
47. Hypoglossal nerve examination (and whether it is motor , sensory or both)
48. all you know about MG and the treatment of it (pyridostigmine)
49. superficial reflexes (plantar / abdominal / cremasteric - in males -)
50. - nystagmus definition and types
51. 3rd nerve examination
52. Talk about MS
53. Case about women came to you with headache (morning, global>> ask full history + Socrates...) she's taking oral contraceptives= venous thrombosis What you should do?
54. Talk about MG & Parkinson Cortical sensations
55. accessory nerve examination-
56. Case with bilateral ascending paralysis , RS infection before 2 weeks (ask socrates + what you will see in CSF) .
57. obese woman has morning headache (IIH) worse when lying down ,(investigation , treatment) first fundoscopy for papilledema and then CT + LP .
58. what are the types of GBS .
59. -what do you know about intranuclearophthalmoplegia (definition, clinical presentation, signs and symptoms)
60. how to examine the hypoglossal nerve -what are the cortical sensations
61. patient present with fever and headache what will you do after:
 - take history first(mention the symptoms you have to ask about)
 - then physical exam(kernigs sign and brudzinski)
 - then the investigations: first cbc then a CT(if not available do fundoscopy and check for pappiledema)
 - then LP -what are the normal contents of the CSF

DrAktham

1. Parkinson triad.. Explain each one of them
 2. How to differentiate UMNL from LMNL in the facial nerve, and justify the difference
 3. A patient in the emergency department complaining of severe headache described as thunder-clap
 - What do you suspect? SAH
 - How to diagnose it? Based on symptom + CT scan + LP
 4. Causes of bilateral facial palsy
 5. A case of a man witnessed his son who has recently experienced an episode of muscular spasms in all his body , with “crying- like “ very loud voice in the dawn time of the day , what’s your steps of diagnosis and management
 1. Make sure it is a true seizure not a pseudo seizure → true
 2. After confirming that , classify it to which type of seizures → tonic clonic
 3. Exclude 2ry causes of seizures → was primary
 4. Follow up with him till the next seizure occur
 5. If did , starts him on antiepileptic drugs , monotherapy is enough
 6. What symptoms patient may come with in case of optic neuritis , and on examination what you will find , give one common cause of unilateral optic neuritis
 - pain in the eye , aggravated when moving it
 - scotoma , color desaturation, impaired visual acuity , +\- papilledema
 - MS
 7. Define status epilepticus , stages and treatment options in each
 8. Define Myasthenia graves , what structures it affect and what regions in the body mostly , signs and symptoms
1. Q1. Talk about the triad of Parkinson’s disease

2. Q2. Talk about GBS. Clinical features, diagnostic procedures (for conformation of the clinical diagnosis), treatment, causes (the most common infectious cause).
3. Q3. adverse effects of anti-epileptic drugs
4. Q4. status epilepticus definition and treatment
5. Q5. MS acute phase treatment and dose?
6. Q6. MS worst and best prognosis -risk factors
7. Q7. How to examine optic nerve
8. Q8. What is the difference between surgical and medical 3rd nerve palsy and what is the most common of medical one
9. Q9. Talk about myasthenia Gravis what is it and is it pre or post synaptic and what are the clinical features and the 2 peaks of age.
10. Q10. What is the disease that is pre synaptic and similar to myasthenia
11. Q11. What is the most common causes of subarachnoid hemorrhage
12. Q12. How do we investigate SAH
 - (CT scan is the gold standard coz it takes short time and can demonstrate hemorrhage better than MRI)
 - If the CT scan didn't work what should we do
13. Q13. What is the most common place in the brain to have aneurysm
14. Q14. Myasthenia gravis vs Eaton Lambert EMG

15. Q15. Myasthenia :
 - site
 - signs and symptoms
16. → investigations and speak about the tests
17. → Myasthenia Tx
18. → Myasthenia peak ages 20-40 women, 60-70 men
19. Q16. Stroke treatments :
20. → Type of fluid we use → Normal saline Why don't you use glucose
21. Q17. Edema What causes edema in stroke
 - Electrolyte imbalance
 - What's the most important electrolyte here → Na, Sodium level we maintain in stroke 155
22. Q18. Facial nerve (examination, lesions how to differentiate between umnl and lmn1 and what is the main cause of it bilateral lesions causes, name of the test that is done on the eye and involves the facial nerve, name of the muscle group supplied by this nerve)
23. Q19. Status epileptics (definition, lines of treatment - phenytoin is the second line of treatment-)
24. Q20. Side effects of valproic acid
- 25.
26. Q21 . cause of optic neuritis
27. Q22. Papillary edema cause
28. Q23. Triad of Parkinson disease and describe the gate

29. Q24. Prognosis of MS (motor defects are worse than sensory ones)

Q25. Papillary reflex pathway (afferent is 2nd nerve and efferent is the 3rd)

Facial nerve examination

Upper lower lesion

differing facial nerve Diseases that causes bilateral lesion in facial nerve (6 causes)

What is miler fisher خاوة جبتها

A case of patient with parkinson features but he can't roll his eyes up ,, what is the diagnosis ? PSP

Myasthenia Gravis -definition -types of affected receptors -signs and symptoms -diagnosis (with explanation of ice pack and edrophonium tests)

-How do we start steroids ttt (small or large dose & why)

Triad of parkinson

-type of tremor

-if the pt has bilateral tremor, what is the differential diagnosis

Case of pt complaining from severe headache for 30 minutes -history taking - test (why CT-scan not MRI) -if CT-scan result doesn't show hemorrhage, what is the next step

#Trigeminal nerve branches and examination

#Case of Stroke symptoms before 4 hours give tpa After 10 hours give baby aspirin

#Case started unilateral tremor and rigidity then in 3 months Bilateral.
Answer exclude Parkinson مش متزكرة شو بالزبط

#Miller fissure what is it and the antibody found

#Treatment of GBS

Dr. AbdAlrahim

1. Oculomotor palsy .
2. Parkinson triad diagnosis. &ttt
3. Migraine and cluster and ttt of cluster
4. bells palsy and phenomenon
5. Bilateral facial nerve damage
6. parkinson triad
7. the benefit of anticholinergic treatment
8. how we test bradykinesia by supination and pronation
9. GIT symptoms of parkinson (constipation) سؤال عن حالة المريض بالبيت (نايم و ما بيتحرك) هاد السؤال ل مرافق المريض
10. Trigeminal nerve
11. Subarachnoid hemorrhage diagnosis and management
Note: Calcium channels blocker to avoid vessel spasm
12. trochlear nerve palsy
13. Trigeminal neuralgia
14. What is the motor supply of trigeminal nerve
15. Effect of facial nerve lesion on the voice Causes of bilateral facial nerve palsy
16. Case of myasthenia gravis :Investigations+treatment
17. Effect of facial nerve lesion on hearing.
18. The name of the type of tremor in the parkinson dz
19. Case/someone with diplopia and fatigue so what do you think about/differential diagnosis Mg (definition, investigation, treatment)
20. The name of Mg in arabic language 12th nerve palsy
21. 12th cranial nerve palsy. –
22. 2 day history of headache and fever. (meningitis or subarachnoid hemorrhage)

→ it was about meningitis. And the doctor asked about the management and about CSF characteristics.

23.-causes of aseptic meningitis.

→bonus: if you were sure about the diagnosis of bacterial meningitis but the cultures were negative, what test would you perform? Latex agglutination test

24.origin of hypoglossal nerve

25.4th cranial nerve name , origin and its palsy

26.22 yrs old female patient with weakness 4 months ago , take hx

→ dx meningitis

→physical examination

→ treatment

→ tests

27.Bonus Q : cluster patients , years later comes with facial pattern

→Leonine facies

28.What is the name of the 11th cranial nerve ?

29.→What's its function ?

→What happens with flexion of one of the sternomastoids ?

→What happens when they both contract at the same time ?

→What is another name for cervical dystonia ? What's its management

30.C.n7 + 9 paralysis

31.How the patient present with gbs + investigation

32.Cn 6 , name , palsy, feature false - localizing and why?

33.Patient with sever chronic headache, take history

→morning headache , exacerbated by exercise, distributed all over head, pressure like , signs of red flag * and what you think of diagnosis?

→ increased intracranial pressure because of a tumor

34.Differentiate between cluster and migraine.

35.Management of migraine ?

Nurology Hope oral exam 2021

- 1- Facial nerve palsy ? (upper , lower)
- 2- Stroke all you know ?
- 3- Oculomotor nerve palsy ?
- 4- MS all you know ?
- 5- Seizure treatment ?
- 6- Trigeminal nerve examination ?
- 7-UMNL ?
- 8- all about MS
- 9- Migraine all you know ?
- 10- epilepsy ?
- 11- most common disease in optic nerve ? (optic neuritis)
- 12- Accessory nerve ?
- 13- Grades of power ?
- 14-Occulomotor nerve?
- 15- myasthenia gravis ?
- 16- trigeminal nerve examination - Trigeminal neuralgia explain every thing
- 17- GBS symptoms + diagnosis
- 18- Cluster headache all you know? " Diagnose the case? Treatment?
Prophylaxis? Doses of prophylaxis?
- 19- vestibular nerve the Origen
- 20-GBS causes, symptom, treatment and diagnosis
- 21-reflexes for upper and lower limb
- 22- 3rd nerve palsy (medical and surgical)
- 23-main symptoms of Parkinson and diagnosis and ttt
- 24- nerve supply of eye muscles
- 25- diagnosis of GBS and ttt
- 26- Papillary light reflex
- 27-Valproate side effects
- 28- Viral meningitis all you know?
- 29- status epileptics all you know?
- 30- Risk factors of headaches?
- 31- Lower motor neuron lesion examples?
- 32- Clinical medication of myasthenia gravis?
- 33- Most common non traumatic cause (aneurysm)?
- 34-Investigation of meningitis?
- 35-Examination cranial Nerve (3,4,6) 3.
- 36-Physical examination of hypoglossal (function: only motor)

- 37-talk about myasthenia gravis: presentation, examination, path physiology, types of myasthenia gravis, tests... Etc 1.
- 38-examination of (trigeminal+ accessory)
- 39-talk about myasthenia gravis.(difference between myasthenia crisis& cholinergic crisis)
- 40-superficial reflexes 1 Physical
- 41-Talk about intracranial hemorrhage
- 42- Ramsay hunt syndrome
- 43-talk about subarachnoid hemorrhage
- 44- Painted come with photophobia و headache و fever on physical exam what you see? Neck stiffness
- 45-Different between akinesia and bradykinesia
- 46-Definition and scales of Reflex
- 47-Definition and type of TONE
- 48-What do you know about ophthalmoplegia

اسئلة دكتور محمد العظومات

- 1-hypoglossal nerve
- 2-Accessory nerve
- 3- Cervical dystonia
- 3-Epilepsy classification and drugs Side effects of sodium valproate
- 4-Trigeminal nerve (anatomy+ examination+ trigeminal neuralgia)
- 5-Guillian bare (investigation+ treatment + complications that might lead to death)
- 6- LMNL (Characteristics/ causes)
- 7- Myasthenia Gravis (Symptoms/ Tests / Treatment/ Treatment of acute attack)
- 8-facial n origin ,what it supply, all signs of lower and upper neuron lesion ,why forehead area is spared in upper lesion,
- 9-how to examine it MG diagnosis clinically + tests (tensilon + icepack test) ,treatments ,investigations
- 10-4th and 6th cranial nerves examination + palsies + origins + functions.
- 11-Migraine all you know
- 12- Treatments of Parkinson. _
- 13-Type of gait (all type 7 type)
- 14-different between spasticity and rigidity
- 15-Grade of power
- 16-diagnosis Guillian-bare ttt
- 17-stroke case
- 18-Optic nerve as general 1)all tests 2)origin
- 19-Multiple sclerosis clinical feature

- 20- How to diagnose the optic neuralgia
- 21-Drug of multiple sclerosis
- 22-3rd cranial nerve origin and course 3rd cranial nerve function 3rd nerve palsy and everything you know about it + its causes
- 23- Parkinson disease major criteria ,Head features and symptoms in Parkinson disease, Treatment of Parkinson disease
- 24-why we use amantidie in parkinson tratment
- 25-types of dysphasia (brain area of them and blood supply of these area)
- 26- reflexes of upper and lower limb
- 27- facial changes in Parkinson
- 28- Accessory nerve Epilepsy
- 29-calcification +treatment Ms types
- 30-four uses of carbamazepine
- 31-complications Parkinson upper limb
- 32-Coordination test

cases33- بين ال مريض عمرة 60 سنة ضغطه 100/200 وما بحرك ايدو ورجلو الشمال وال CT scan

نورمال شو بتعملي لهاد المريض والأدوية الي بتنعطى

- 34-Disease affect sternocleidomastoid
- 35 - myasthenia gravies treatment
- 36-Tell me about the third cranial nerve.
- 37-What would happen in a third nerve palsy?
- 38-How to differentiate between a medical and a surgical cause?
- 39-A patient comes to the ER with diplopia and fatigue. What's your diagnosis?
How would you
- 40-confirm your diagnosis? (Myasthenia gravis and the clinical tests and investigations needed)
- 41-Type of headache and how to differentiate between cluster and migraine
- 42-What is the reflexes
- 43-Talk about epilepsy
- 44-tremors
- 45-MS ttt
- 46-antiepileptics
- 47-1st line ttt for generalized seizures
- 48-Case pt came to ER with headache and fever What should you do ? ABC , check if there is papilledema , ct to exclude lesions Then lumbar puncture Neutrophils 200 , protein 80 , culture need 3 day ? Give broad spectrum antibiotic Power grade ? Investigation of myasthenia graves?
- 49- what is the symptom of M.S that patient come
- 50- optic never all you know

51-A patient was admitted to the ER with status epilepticus ? What should you do?
Give IV

52-Benzodiazepine What should you do if he had an attack again? Give diazepam
up till 30mg.

53-Talk about the types of epilepsy

54-What is an UMN? What's its features?

55-What are the AEs of Na Valproate?

56-Tell me about facial nerve Examination of facial nerve Patient with injury in
facial nerve behind his ear LMN lesion symptoms

57-Adverse effect of phenytoin and what is the contraindication

اسئلة دكتور مجدي

1. A. Talk about the examination of the hypoglossal nerve. Is it sensory, motor or mixed?

2. Examination of the trigeminal nerve especially motor part.

3. Mention the routinely examined superficial reflexes.

4. Talk about Parkinson's disease: Pathophysiology.

5 -Mention the motor and non-motor symptoms and discuss treatment of
Parkinson's disease.

6. Talk about subarachnoid hemorrhage : Definition, Common causes,

7-What do patient with SAH complain from i.e. What are the main clinical
features of SAH?

-8different between Spasticity and Rigidity

9-Superficial reflex Light reflex pathway Corneal reflex

10- The different between shuffling and festinate

11- non motor symptom and autonomic symptom , drug of Parkinson

12- classification of Ms CIS ,RIS ,Uhthoff' phenomenon, Lhermitte's sign

13-The different between MS attack and psuedoattack

14- epilepsy (types of epilepsy (with the meaning of each type) , medication used
in epilepsy)

15-Facial nerve examination ,Lower and upper motor neuron lesions (Facial nerve
)

16-accessory nerve Examination

17-myasthenia gravis (difference between cholinergic crisis and myasthenic crisis)
epilepsy

18- Parotid gland supply by which nerve?!

19-Talk about MG (Definition and clinical presentation) Causes of Myasthenic
crisis

- 20-Give example of Antiepileptic drug cause increase in weight
- 21-what symptoms complex partial seizure come with when administrated
- 22-bilateral hemanopia cause
- 23-Different between medical and surgical oculomotor palsy
- 24-Myasthenia graves 1-what is the difference btw myasthenia gravis and crises
- 25-in myasthenia gravis antibody is found in (name of receptor) and if the antibody is in presynaptic membrane what is the name of the disease ?
- 25-what medication we used in myasthenia graves and family name of these drugs ?
- 26-what is xanthochromia and when we see this ?
- 27- what is the INO (internuclear ophthalmoplagia
- 28-what is the difference btw seizure and epilepsy ?
- 29-what is the definition of absence and myoclonic seizure ?
- 30-what is the main epileptically drugs and what is the side effect of them ?
- 31- what is the cortical sensations ?
- 32-what is the definition of MS ?
- 33-What are the adverse effects of topiramate: weight loss and renal stones
- 34-grades of muscles power –
- 35-Types of guillian bare syndrome?
- 36-case of a patient with his eye deviated down and lateral? 3rd nerve palsy, other expected signs in his eye? Ptosis
- 37-efferent and afferent of jaw jerk
- 38-efferent and afferent of corneal reflex
- 39-Talk about Jacksonian epilepsy
- 40-examination for nystagmu

اسئلة دكتور عوني

- 1-Complications of subarachnoid hemorrhage and when cause stroke after SAH
- 2-Cause of hyponatremia in SAH - cerebral salt wasting of SIADH
- 3-Treatment of SAH
- 4-Red flags for headache
- 5-Difference between classical and common migraine and treatment of migraine
- 6-The main difference between cluster headache and migraine
- 7- trigeminal autonomic symptoms with cluster headache so it is classified with trigeminal autonomic cephalalgias
- 8- Case about symmetrical ascending lower limb weakness, what do you think the cause? Management and investigations? GBS if the history showed previous RS of GI infection
- 9-Classification of epileptic syndromes

10-Triad of Parkinson

11-Sever first headache causes? SAH ,and what is the physical examination? neck stiffness

12-What function facial nerve supply?

13-Migraine definition, Treatment of migraine

14-Triggers of migraine Types of headache

15-Examples on 2ry headache

16-Complications of SAH The most important thing in physical examination to diagnose SAH investigations of SAH

17-definition of tone & abnormalities and example on rigidity UMNL (tone, power, etc..)

18-Types of headache Diagnosis of migraine

19-Risk factor of stroke

20-UMNL

21-Myasthenia gravis definition , type , Investigation

21-Types of seizures and explain them. Definition. Of epilepsy and diagnosis criteria, how to calculate 60% probability

22-Reflex and power grades

23-Upper limb reflex, muscle, and nerve

24-Parkinson- trap

25-GBS features ,Treatment of GBS

26-WBCs (normal) or increased in GBS ?

27-Other than infection causes of GBS ?

Dr. Shafer Aletan

الدكتور الدوام معه ممتع ومتعاون وشرحه كثير مرتب الاسئلة

1-MG all you know

2-management of status epilepticus in the ER

3 -3rd nerve pulsy

4 -Ocular MG examinations

5-What is the definition of thunderclap headache

6-Tell me what you know about ischemic Stoke, hemorrhagic stroke

7 -Cranial nerve examination

8-tone definition

واغلب الوقت انه شو تأثير disease معين على ال tone او ال power او ال reflexes