

**KENYA MEDICAL TRAINING COLLEGE**

**DEPARTMENT: ORTHOPAEDICS AND TRAUMA MEDICINE**

 **DIPLOMA IN ORTHOPAEDIC AND TRAUMA MEDICINE**

**FINAL QUALIFYING EXAMINATION**

**PAPER:** TRACTION

**DURATION:** 3 Hours

**DATE:** 13/2/2019

**TIME:** 2:00 PM – 5:00 PM

**INSTRUCTIONS**

1. Write your examination number on answer book/sheet provided
2. Section one: MCQs – choose single best response
3. Section two: mark T(True) or F(False) for each response
4. Section three: answer all questions.
5. Section four: answer one question.
6. Do not cheat
7. Use legible handwriting

**SECTION ONE: MCQ [30 MARKS]**

1. **Below are traction techniques used in the management of fractures, which of the following is not skin traction technique**
2. Perkins traction
3. Russell’s traction
4. bucks traction
5. gallows traction
6. **Which of the following is not an indication for skin traction?**
7. femoral traction in children
8. displaced acetabulum fractures
9. after reduction of dislocated hip
10. temporary management of fracture of neck of femur
11. **Which of the following is not a traction apparatus?**
12. pulleys
13. stirrups
14. trolley
15. weights
16. **Why should the lateral skin traction tape, applied to a patient being placed in a Thomas splint for treatment of a fractured femur, be placed more posteriorly than the medial one?**
17. To correct external rotation of the limb
18. It will give more traction in that position
19. There will be less skin irritation
20. The groin ring pressure will be lessened
21. **Which is the suitable site for the insertion of the Kirschner wire in skeletal traction technique?**
22. tibia plateau
23. distal radius
24. distal metal carpal bone
25. all of the above
26. **What is the most indication for head halter traction?**
27. fracture lumber
28. neck fractures
29. clavicle fracture
30. none of the above
31. **Which of the following is not a skin traction component?**
32. crepe bandage
33. adhesive strapping
34. Steinman pin
35. foam stirrup
36. **Which of the following is not an indication for cervical spine traction?**
37. Fracture of the skull bones
38. Sub-axial cervical fractures that are mal-aligned
39. Sub-axial cervical facet dislocations
40. Odontoid fractures
41. **The following are complications of the skull traction except**
42. Skull perforation
43. Paraplegia
44. Pin migration
45. Injury to temporalis muscle
46. **Which of the following is a contra-indication of skeletal traction?**
47. Fractures of femur in adult patients
48. Displaced fractures of humerus in adults
49. Temporarily measure of compound femoral fractures in adults
50. Femoral fractures in elderly patients
51. **The following are components of the Orthopaedic bed except?**
52. Beams
53. Mattress
54. Fracture board
55. Braun frame
56. **Perkin’s skeletal traction is indicated for?**
57. Fracture distal femur.
58. Fracture upper femur
59. Supracondylar fracture femur
60. Fracture neck femur
61. **Which one of the following is not an indication of skin traction?**
62. Fracture femur in children.
63. Fracture femur in elderly.
64. Fractures of vertebral column.
65. Hip joint dislocation.
66. **What maximum amount of weight can be used in skin traction?**
67. 10lbs
68. 5lbs
69. 20lbs
70. 1lb
71. **The following are all requirements for fixing skin traction except**
72. Steinmann’s pin tray
73. Skin traction kit
74. Weight bags
75. Beams
76. **One of the instructions given to a patient after application of traction is**
77. Not to bear weight
78. Sleep all the time
79. Exercise the limb
80. Always move the limb
81. **How do you confirm the diagnosis of the patient before putting on traction?**
82. Patient file
83. X-rays
84. Patient history
85. Nurses cardex
86. **What is the role of an orthopaedic plaster technician after the application of skeletal traction to the patient?**
87. Discharge the patient home
88. Give antibiotics
89. Train the patient on how to use the crutches
90. Check whether the patient’s traction is insitu
91. **Thomas splint is used for the following except:**
92. Splinting fractures
93. Carrying patients
94. Elevating the fractured limb
95. Stabilizing spinal fractures
96. **What is the role of lignocaine in fixing traction**
97. Used as an analgesic
98. Used as a localizing anaesthesia
99. Controls bleeding
100. Improve blood circulation.
101. **Lignocaine is used during insertion of Steinmann pin in order to?**
102. Control bleeding
103. Relieve pain
104. Prevent infection
105. Localize the site
106. **Which one of the following is an indication of Russel’s skeletal traction**
107. Upper femoral fracture
108. Skull fracture
109. Distal femur fracture
110. Proximal tibia fracture
111. **Which one of the following is not a contraindication of skin traction?**
112. Wounds
113. Bruises
114. Sores
115. Pain
116. **Which of the following is a use of Thomas splint**
117. Splinting fractures
118. Carrying patients
119. Elevating the fractured limb
120. Stabilizing spinal fractures
121. **Which one of the following is an indication of Bohler Braun frame**
122. Splinting fractures
123. Carrying patients
124. Elevating the fractured limb
125. Stabilizing spinal fractures
126. **When putting weight in traction what do you consider?**
127. Patient’s weight
128. Orthopaedic bed
129. Instruction from the surgeon
130. Traction type
131. **What do you need when applying traction?**
132. Patient
133. Orthopaedic Bed
134. Weight
135. All the above
136. **When applying traction, what else can you use in absence of weights?**
137. Weight bags
138. Clothes
139. Boxes
140. None of the above
141. **What is the contraindication for Bohler Braun Frame?**
142. Fractures of femur in children.
143. Fractures of femur in adults.
144. Hip joint dislocation.
145. Vertebral column fractures.
146. **Monkey chains are used for?**
147. Elevation of the limbs
148. Lifting up of the patient
149. Tightening of the bed
150. Splinting fractures

**SECTION TWO: TRUE/FALSE [30 MARKS]**

1. **Complications of definitive skeletal traction are:**
2. Constipation.
3. Delayed union.
4. Anxiety.
5. Muscle atrophy.
6. Circulatory catastrophe.
7. **Manual traction is useful in:**
8. Reduction of shoulder joint dislocation.
9. Management of contractures at a joint.
10. Reduction of skull fractures.
11. Reduction of long bone fractures.
12. Management of prolapsed intervertebral disc.
13. **Monkey chain is used for the following reasons:**
14. Back exercises.
15. Easy Bathing.
16. Easy toiletry.
17. Easy walking.
18. Patient’s elevation.
19. **The following are uses of continuous mechanical traction in orthopaedic and trauma medicine:**
20. To relief muscle spasms.
21. Temporarily measure in fractures of femur in adults.
22. Management of club foot.
23. Definitive management of femoral fractures in children.
24. Management of clavicle fractures.
25. **Gallows traction may be useful in children with:**
26. Rickets.
27. Spina bifida.
28. Cerebral palsy.
29. Bilateral fracture of femur.
30. Spinal fractures.
31. **The following are site for Steinmann pin insertion.**
32. Calcaneus.
33. Tibial plateau.
34. Mid shaft femur.
35. Neck of femur.
36. Olecranon process.

**SECTION THREE: SHORT ESSAY QUESTIONS [20 MARKS]**

1. State three (3) indications of Russell’s traction. [3 marks]
2. Give three (3) indication of skull traction. [3 marks]
3. What do you understand by the term continuous mechanical traction? [2 marks]
4. List four (4) sources of weight that is used in traction. [4 marks]
5. Explain how to achieve the expected weight used in traction. [2 marks]
6. Name four (4) components of skin traction. [4 marks]
7. List two (2) major types of traction. [2 marks]

**SECTION FOUR: LONG ESSAY QUESTION [20 MARKS]**

**Answer only one question.**

1. Discuss in details the procedure of applying skeletal traction [20 marks]
2. Describe the procedure of applying skin traction on a patient. [20 marks]