



UNIVERSITY OF NAIROBI

DEPARTMENT OF ORTHOPAEDIC SURGERY

END OF ORTHOPAEDIC ROTATION ESSAY C.A.T- MBCHB YEAR 6 GROUP C1 – C5

DATE: - 10-06-2019
TIME: - 8.00 A.M TO 11.00 A.M
VENUE - LAB 1 & 2

ESSAY TIME --- 2 HOURS

INSTRUCTIONS.

1. Write your registration number on each page.
2. Each question must be answered on a separate booklet.
3. Questions 1 and 2 are compulsory.
4. Answer ONE from the remaining three questions.

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1. A 30 year old was involved in a road traffic accident and sustained cervical spine injury, lost sensation and power of the limb:-
 - a) Outline the initial management of this patient at Accident and Emergency.
 - b) Describe the general non-operative care in the ward.
 2. Write short notes on:-
 - a) Nutrition rickets
 - b) Birth related brachial plexus injury
 - c) Wound healing
 3. Write short notes on:-
 - a) Radiculopathy pain of lower limb
 - b) Flexible flat foot
 - c) Skeletal traction
 - ✓ 4. (a) What are the local causes of painful shoulder in 65 year old male?
(b) Describe the investigation protocol
(c) Outline the treatment of rotator cuff disruption.
 5. Write short easy on:
 - a) Simple bone cyst
 - b) Tennis elbow
 - c) Psoas abscess

UNIVERSITY OF NAIROBI
DEPARTMENT OF ORTHOPAEDIC SURGERY
END OF ROTATION YEAR 6 MCQ C.A.T

LEVEL 6 GROUP C1 – C5

DATE: MONDAY JUNE 10, 2019

M.C.Q

TIME: 1 HOUR.

Prab sehmi
5b answers

REGISTRATION NO: _____

INSTRUCTIONS: ANSWER ALL QUESTIONS. ONLY ONE ANSWER IS CORRECT

1. Intra-osseous skeletal tumour is best differentiated by:-
 - a) Bone scan with CT.
 - b) X-ray A
 - c) Bone scan
 - d) MRI
 - e) None of the above.

2. True about osteomyelitis in newborn:-
 - a) Most common in diaphysis
 - b) The infection is unifocal. C
 - c) Organism derived from maternal birth tract.
 - d) Most common organism is E-Coli.
 - e) Spares the growth plate.

3. What is brodie's abscess?
 - a) Long standing localized pyogenic abscess in bone.
 - b) Cold abscess
 - c) Collar stud abscess. A
 - d) Subperiosteal abscess
 - e) Soft tissue abscess.

4. Which of the following is an orthopaedic emergency?
 - a) Intra-articular fracture
 - b) Septic arthritis B
 - c) Fracture supracondylar humerus.
 - ✓ d) Fracture neck of femur
 - e) All of above.

5. Tom smith arthritis is infectious arthritis destroying:-
a) Femur neck
b) Acetabular roof.
c) Capital epiphyses femur
d) Greater trochanter
e) Lesser tronchanter. C
6. Infection of ulnar bursa is diagnosed by:-
a) Kanarvel's sign
b) Chosteks sign E
c) Gower sign
d) Ludloff sign
e) None of the above.
7. All are true about Pott's spine except:-
a) Thoracic vertebrae T6 - T8 is commonly affected. T8 to L3
b) Para discal is commonly variety
c) Muscular rigidly and stiffness is common.
d) Anterior part of vertebrae is commonly affected.
e) Back pain is commonest presenting symptoms. A
8. Wandering acetabulum is seen in:-
a) Fracture acetabular.
b) Hip dislocation in Marfan syndrome.
c) Rheumatoid arthritis.
d) Tb of the hip. D
e) Unicameral cyst.
9. Fallen fragment sign is a feature of:-
a) Simple bone cyst. A
b) Aneurysmal bone cyst.
c) Giant cell tumour.
d) Fibrosis dysplasia
e) Chondromyoid myxoma.
10. Which of the following is not true about osteoid osteoma?
a) Most common true benign tumour of bone. ✓
b) Occurs between 10-30 years of age. ✓
c) Lesions appear ill defined on x-ray with permeative margins. x C
d) Bone scan show increased uptake. ✓
e) Aspirin is drug of choice to relieve symptoms. ✓
11. Development of chondrosarcoma is related with:-
a) Maffucci syndrome A
b) Felty syndrome
c) Olliers disease
d) MC.Albright disease.
e) None of the above.

2. Dense calcification is found in:-

- a) Osteosarcoma
- b) Chondroblastoma
- c) Synovial sarcoma
- d) Osteoblastoma
- e) Erwing sarcoma.

A

13. A true statement about giant cell tumor is/are:-

- a) Malignant tumor.
- b) Most common around knee.
- c) Seen before puberty
- d) Local radiation is the treatment.
- e) Egg shell cracking is seen.

B

14. A characteristic feature of fibrous dysplasia is:-

- a) Cortical thickening.
- b) Cortical calcification.
- c) Ground glass appearance
- d) Bone enlargement
- e) None of the above.

Hallmark is replacement of bone with fibrous tissue

Ministotic form 20 to 30yrs

Polystotic in less 10yrs affecting maxilla and facial bones

15. A most common site of origin of ameloblastoma is:-

- a) Mandible near molar
- b) Middle overlap margins
- c) Hard palate.
- d) Mandible near symphysis menti
- e) Tibia

A

16. Management plan for osteogenic sarcoma of the lower end of femur must include:-

- a) Radiotherapy, amputation, chemotherapy
- b) Surgery alone
- c) Chemotherapy + Limb salvage surgery + chemotherapy
- d) Chemotherapy + radiotherapy.
- e) Chemotherapy alone.

C

17. Glycogen positive cells are seen in:-

- a) Ewing's sarcoma.
- b) Osteosarcoma
- c) Fibrosarcoma
- d) Osteoid osteoma.
- e) Eoginophillic granuloma.

A

18. Striated vertebra are seen in:-

- a) Metastasis
- b) Tuberculosis
- c) Hemangioma
- d) Osteoblastoma
- e) Osteomyelitis

C

19. The most likely diagnosis of Lytic punched out lesion in the skull x-ray is:-

- a) Osteosarcoma
- b) Multiple myeloma
- c) Metastasis
- d) Eosinophilic granuloma
- e) Poly osteotic fibrosa

B

* 20. Oncogenic osteomalacia is mediated by:

- a) Phosphatonin
- b) Calcitonin
- c) Interleukin 2
- d) Interleukin 6
- e) Hyperthyroidism

A

21. Major mineral of bone is:-

- a) Calcium chloride
- b) Calcium carbonate
- c) Calcium oxide.
- d) Hydroxy apptite
- e) Magnesium carbonate

D

22. The first centre of primary ossification appears at:-

- a) At the end of 2 months in intrauterine life.
- b) Beginning of 3rd month.
- c) End of 3rd month
- d) End of 4th month.
- e) At birth.

Ä

* 23. Marker for bone formation is:-

- a) Tartrate resistant acid phosphatase.
- b) Osteocalcium
- c) Urinary calcium
- d) Serum nucleotidase
- e) Osteoportegerin.

Alk pho
Procolladin
Osteocalcin

B

24. Investigation of choice in stress fracture is:-

- a) MRI
- b) CT Scan
- c) Bone Scan
- d) X-ray
- e) None of the above.

A

25. The time necessary for healing of fracture depends on the following factors:-

- a) Age of patient
- b) Location of fracture
- c) Type of fracture
- d) Degree of damage to soft tissue.
- e) All of above.

E

26. In cardiopulmonary resuscitation the fractured ribs are:-

- a) 1st and 2nd
- b) 3rd and 4th
- c) 5th and 6th
- d) 7th and 8th
- e) 8th and 9th

5, 6, 7 C

27. The first treatment of a seriously injured patient with cervical spine fracture and unconscious is:-

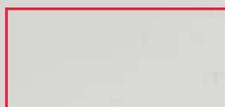
- a) GCS scoring
- b) Cervical spine stabilization.
- c) Manito drip to decrease ICT
- d) Airway maintenance
- e) Intermittent posture pressure ventilation.

B

28. Which of the following structure passes through quadrangular space?

- a) Median nerve
- b) Radial nerve
- c) Axillary nerve
- d) Brachial
- e) Circumflex humeral artery

C



*29. Lift off test is done for:-

- a) Supraspinatus
- b) Infraspinatus
- c) Teres major
- d) Subscapularis
- e) Teres Major.

Tear of subscapularis

lag test for supra and infraspinatus

drop test

lift off test

D

30. Luxatio erecta is:-

- a) Tear of the glenoid labrum.
- b) inferior dislocation of shoulder
- c) Anterior dislocation of shoulder
- d) Defect in humerus head
- e) None of the above.

complication

ant dislocation- externally rotated, abduction, flexion

bankart tear of labrum- AI

hill sach fracture of humerus

axillary n

posterior circumflex

rotator cuff tear

synonym

B

31. The most common cause of non union of fracture humerus is:-

- a) Comminuted fracture
- b) Open fracture
- c) Overriding fracture
- d) Distraction fracture site.
- e) Operative reduction.



D

32. Pointing index is a complication seen in:-

- a) Lateral humeral condyle.
- b) supracondylar fracture of humerus.
- c) Shoulder dislocation
- d) Fracture humerus shaft.
- e) None of the above.

Pointing index is by median nerve

PI

B

33. Tardy Ulna nerve palsy is seen in:-

- a) Medial condyle fracture humerus.
- b) Lateral condyle fracture humerus.
- c) Supracondylar fracture
- d) Humerus fracture
- e) Ulna stylos.

Its a late complication of lateral humeral fx cubitus valgus

34. Which is the earliest reliable sign of compartment syndrome?

- a) Pallor
- b) Pulselessness
- c) Paraesthesia
- d) Stretch pain
- e) Paralysis

Pain then parasthesia, pallor, paralysis, pulselessness

D

35. Volkmann ischaemic contracture is:-

- a) Due to nerve injury
- b) Due to distal radio-ulna fracture
- c) Flexor digitalis superficial usually involved.
- d) Treated when more than 30° deformity.
- e) Treated by releasing flexion pulley.

Brachial artery involved

B

36. Calf pressure during walking is:-

- a) 200-300mmHg
- b) 200 - 300 cm of H₂O
- c) 20 - 30 mmHg
- d) 20 - 30 Cm of H₂O
- e) None of the above.

37. All of the following are features of myositis ossificans except:-

- a) Commonly occurs around elbow.
- b) Migration of osteoblast into haematoma.
- c) Message of known associated failure.
- d) Matures from inside out.
- e) Immobilization is of acute myositis ossificans.

Matures from outside to inside. Immobilize it until it matures then surgery

38. Fracture of both forearm bones at same hand, position of arm in cast is:-

- a) Full supination
- b) 10 degree supination
- c) Full pronation
- d) Mid-prone
- e) None of the above.

D

39. Regarding sudeck osteodystrophy all are true except:-

- a) Burning pain
- b) Stiffness and swelling
- c) Erythematous and cyanotic.
- d) Self limiting and good progress.
- e) Decreased bone density.

It is a type 1 regional pain syndrome that dvlpes after indury to nerve that symptom unrelated to injury and nerve distribution Type 2

D

40. Chance fracture is fracture of vertebra of:-

- a) Thoracolumbar
- b) Dorsolumbar
- c) Lumbosacral
- d) Lumbar
- e) Cervical.

A

41. A substance that is used for vertebroplasty is:-

- a) Polymethyl methacrylate
- b) Polyethyl methacrylate
- c) Polymethyl ethacrylate
- d) Polyethyl ethacrylate
- e) Polyethyl ether ketone

A

42. In pelvis fracture, the amount of blood loss is around:-

- a) 1-2 units
- b) 2-4 units
- c) 2-6 units
- d) 4-8 units
- e) 5 litres.

D

1 unit is 500ml
Usual in pelvis 2 to 4 litres

43. Radiological factors indicating an unstable pelvis are all except:-

- a) Posterior sacroiliac complex displacement by 1 cm.
- b) Avulsion fracture of sacral or ischial and of the sacro spinous ligament.
- c) Avulsion fractures of the L5 transverse Process.
- d) Isolated disruption of pubic symphysis with pubic diastasis of 2 cm.
- e) None of the above.

D

44. Treatment of choice for fracture femur in a child less than 2 years of age is:-

- a) Gallows traction.
- b) Byrant traction.
- c) Hip spica
- d) Bucks traction
- e) Titanium elastic nails.

45. Which part of 2nd metatarsal is involved in the march fracture?

- a) Head
- b) Neck
- c) Shaft
- d) Base
- e) Any zone is at risk.

B

March fx is 2nd metatarsal neck greater than 3rd neck
Dancers fx involves 5th metatarsal avulsion
Lisfranc fx is tarsometatarsal fx mtdfoot

END