

**NEUROSURGERY(PART-II/FINAL)**  
**PAPER-II**

Time: 3 hours  
Max. Marks:100

NS2/J/20/21/II

**Important Instructions:**

- *Attempt all questions in order.*
- *Each question carries 10 marks.*
- *Read the question carefully and answer to the point neatly and legibly.*
- *Do not leave any blank pages between two answers.*
- *Indicate the question number correctly for the answer in the margin space.*
- *Answer all the parts of a single question together.*
- *Start the answer to a question on a fresh page or leave adequate space between two answers.*
- *Draw table/diagrams/flowcharts wherever appropriate.*

**Write short notes on:**

1. Intraoperative Neurophysiologic monitoring: 4+3+3
  - a) Indications of IONM.
  - b) Necessary precautions.
  - c) Complications.
2. Discuss about visual field defects with lesions at: 3+3+4
  - a) Chiasm.
  - b) Lateral geniculate body.
  - c) Occipital lobe tip.
3. Normal pressure hydrocephalus: 3+3+4
  - a) Differential diagnosis.
  - b) Programmable shunts.
  - c) Predictors of successful surgical outcome.
4. Spinal AVM: 5+2+3
  - a) Classification.
  - b) Clinical presentations.
  - c) Angiographic finding.
5. Elaborate Horner's syndrome: 3+3+4
  - a) Clinical features.
  - b) Causes.
  - c) Pathway of sympathetic system.
6. Post SAH Vasospasm: 7+3
  - a) Theories of pathogenesis of vasospasm in spontaneous SAH.
  - b) Role of calcium channel blockers.
7. Endoscopic third Ventriculostomy: 7+3
  - a) Indications and procedure.
  - b) Complications.

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| 8.  | Ventriculo-peritoneal shunts:                    | 5+5   |
|     | a) Sites of lateral ventricular puncture.        |       |
|     | b) Complications of ventriculo-peritoneal shunt. |       |
| 9.  | Ossified Posterior Longitudinal Ligament:        | 3+3+4 |
|     | a) Classification.                               |       |
|     | b) Pathogenesis.                                 |       |
|     | c) Current concepts in management.               |       |
| 10. | Brachial plexus injury:                          | 3+4+3 |
|     | a) Clinical evaluation.                          |       |
|     | b) Draw and label the brachial plexus neatly.    |       |
|     | c) Current options in its management.            |       |

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