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BRAINWARE UNIVERSITY

Term End Examination 2024-2025 Programme - B.Physiotherapy-2021/B.Physiotherapy-2022 Course Name - Neurology and Neurosurgery Course Code - BPTC604 (Semester VI)

Full Marks: 60 Time: 2:30 Hours

[The figure in the margin indicates full marks. Candidates are required to give their answers in their own words as far as practicable.]

Group-A

(Multiple Choice Type Question)

1 x 15=15

- 1. Choose the correct alternative from the following:
- (i) Predict the main complication of lacunar infarcts in the basal ganglia
 - a) Hemorrhagic transformation
 - c) Seizures
- (ii) Define Reversible Ischemic Neurological Deficit
 - a) A brief episode of neurological dysfunction caused by focal brain, spinal cord, or retinal ischemia.
 - c) A condition involving transient loss of consciousness due to cerebral hypoperfusion.
- A form of ischemic stroke lasting less than 24 hours.
- d) A neurological deficit that lasts longer than 24 hours but resolves completely within weeks.
- (iii) Recall the main investigation for assessing the extent of carotid artery stenosis
 - a) Electrocardiogram (ECG)
 - c) Carotid angiography

- b) Magnetic resonance angiography (MRA)
- d) Transcranial Doppler ultrasound
- (iv) Recall the primary risk factor for lacunar infarcts
 - a) Hyperlipidemia
 - c) Atrial fibrillation
- (v) Explain the term Stroke in evolution
 - a) It refers to a completed stroke with irreversible damage.
 - c) It describes a transient ischemic attack evolving into a full stroke.
- b) Diabetes mellitus

b) Neurological deficits

d) Dementia

- d) Smoking
- b) It denotes a stroke with fluctuating symptoms over time.
- It signifies a stroke occurring during sleep.
- (vi) Predict the main cause of intracerebral hemorrhage
 - a) Arteriovenous malformation
- b) Aneurysm rupture

c) Hypertension

- d) Thrombosis
- (vii) Select the primary management approach for ischemic stroke within the therapeutic window

a) Surgical revascularization c) Antiplatelet therapy (viii) Tell the correct statement about a lacunar infal	b) Intravenous thrombolysis d) Anticoagulation therapy	
a) It typically results from large-artery atherosclerosis.	b) It is commonly associated with cardioembolic events.	
 c) It often involves small, deep perforating arteries. (ix) Predict the clinical sign associated with Horner 	 d) It primarily affects the middle cere artery. 's syndrome 	oral
a) Ptosisc) Miosis(x) Identify a diagnostic method used in Transverse	b) Anhidrosis d) All of these	
a) Lumbar puncture c) MRI	b) CT scan d) X-ray	
(xi) Select the clinical sign associated with spinal Ea) Hyperreflexiac) Hypotension	b) Bradycardia d) Radicular pain	
(xii) Predict a brief rapid (<100ms) shock like , jerky multiple repetitive discharges.		
a) Chorea c) Ballismus (xiii) Define Ballismus	b) Myoclonus d) Tics	
a) Involuntary muscle contractions causing repetitive movements or abnormal postures	b) Sudden, violent flinging movement limbs	s of
 c) Slow, writhing movements due to basal ganglia dysfunction (xiv) Recall the primary medical management appro 	d) Rapid, involuntary jerks	
a) Antipsychotic medications c) Anti-inflammatory drugs (xv) Choose the correct definition of Parkinson's dis	b) Dopamine replacement therapy d) Chelation therapy	
a) An autoimmune disorder affecting the central nervous systemc) A genetic disorder causing involuntary muscle contractions	 b) A neurodegenerative disorder char by tremors, bradykinesia, and rigid d) A vascular disorder leading to sudd muscle spasms 	ity
Group-B (Short Answer Type Questions) 3 x 5=15		
 Explain spina bifida occulta Discuss the management of transverse myelitis Explain the primarily clinical features in Parkinsor Discuss the clinical manifestations and diagnostic 	ism	(3) (3) (3) (3)
6. Prepare a note on tabes dorsalis. OR Explain the symptoms of Lambert-Eaton syndrome.		(3)
Grou (Long Answer T		5 x 6=30
 Explain the clinical features in spinal shock Discuss the clinical features in meningitis Discuss the clinical features in EDH 		(5) (5) (5)

 Explain the significance of the Glasgow Coma Scale in classifying the severity of head injuries. 	(5)
11. Explain signs and symptoms of Anterior Cerebral Artery Syndrome	(5)
12. Explain the pathophysiology in transverse myelitis	(5)
OR	
Illustrate the ocular manifestations and diagnostic features of Horner's syndrome	(5)

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