

## Orthopedics Bank 2600 MULTIPLE CHOICE QUESTIONS

*Providing the most appropriate solution when the choices are many* 

\*Covers Questions For All NEET SS Courses Chapter Wise Explanatory Videos Available in App

### Table of Content

Chapter	Page No.	Chapter	Page No.
1. Applied Anatomy	3-4	30. Tumor	91-92
2. Applied Anatomy	5-6	31. Tumor	93-96
3. Applied Anatomy	7-8	32. Tumor	97-99
4. Basic Sciences	11-12	33. Trauma	103-105
5. Basic Sciences	13-15	34. Trauma	106-107
6. Basic Sciences	16-18	35. Trauma	108-111
7. Imaging	21-22	36. Trauma	112-114
8. Imaging	23-24	37. Trauma	115-118
9. Imaging	25-27	38. Trauma	119-120
10. Imaging	28-30	39. Trauma	121-122
11. Imaging	31-33	40. Trauma	123-124
12. Imaging	34-37	41. Trauma	125-126
13. Imaging	38-41	42. Trauma	127-129
14. Imaging	42-45	43. Trauma	130-131
15. Imaging	46-49	44. Trauma	132-133
16. Imaging	50-53	45. Trauma	134-136
17. Imaging	54-57	46. Shoulder	139-141
18. Infections	61-63	47. Shoulder	142-144
19. Infections	64-65	48. Shoulder	145-147
20. Infections	66-67	49. Elbow	151-153
21. Tuberculosis	71-72	50. Elbow	154-157
22. Tuberculosis	73-74	51. Elbow	158-159
23. Tuberculosis	75-75	52. Wrist	163-165
24. Tuberculosis	77-78	53. Wrist	166-168
25. Tumor	81-82	54. Wrist	169-171
26. Tumor	83-84	55. Wrist	172-175
27. Tumor	85-86	56. Nerves	179-180
28. Tumor	87-88	57. Nerves	181-182
29. Tumor	89-90	58. Nerves	183-185

Chapter	Page No.	Chapter	Page No.
59. Spine	189-190	91. Arthritis	275-276
60. Spine	191-192	92. Arthritis	277-278
61. Spine	193-195	93. Arthritis	279-280
62. Spine	196-197	94. Arthritis	281-282
63. Spine	198-199	95. Arthritis	283-284
64. Spine	200-201	96. Arthritis	285-286
65. Spine	202-203	97. Arthroplasty	289-290
66. Hip	207-209	98. Arthroplasty	291-292
67. Hip	210-212	99. Arthroplasty	293-294
68. Hip	213-214	100. Arthroplasty	295-297
69. Hip	215-217	101. Arthroplasty	298-300
70. Knee	221-223	102. Arthroplasty	301-303
71. Knee	224-225	103. Pediatrics	307-309
72. Knee	226-227	104. Pediatrics	310-312
73. Knee	228-229	105. Pediatrics	313-315
74. Knee	230-231	106. Pediatrics	316-318
75. Foot and Ankle	235-237	107. Pediatrics	319-321
76. Foot and Ankle	238-239	108. Pediatrics	322-323
77. Metabolic Disorders	243-244	109. Pediatrics	324-325
78. Metabolic Disorders	245-246	110. Pediatrics	326-327
79. Metabolic Disorders	247-248	111. Pediatrics	328-329
80. Metabolic Disorders	249-250	112. Orthotics	333-334
81. Metabolic Disorders	251-252	113. Orthotics	335-336
82. Metabolic Disorders	253-254	114. Recent Advances	339-341
83. Metabolic Disorders	255-256	115. Amputation	345-347
84. Metabolic disorders	257-258	116. Amputation	348-349
85. Metabolic Disorders	259-260	117. Mock Test-1	353-358
86. Arthritis	263-264	118. Mock Test-2	359-364
87. Arthritis	265-267	119. Mock Test-3	365-370
88. Arthritis	268-270	120. Mock Test-4	371-377
89. Arthritis	271-272	121. Mock Test-5	378-384
90. Arthritis	273-274	122. Mock Test-6	385-389

### **Applied Anatomy**

- **1.1.** Which of the following regarding Thoracic Outlet is true?
- A. There are two potential areas in the thoracic outlet region where compression can occur
- **B.** The portion where the brachial plexus divisions lie is the costoclavicular space
- C. The cervical rib is of three types
- D. The cervical rib has to be excised in all cases
- E. Nerve conduction studies are not required when a suspicion of Thoracic outlet syndrome is present

#### Ans

- 1.2. The ventral rami of C5 and C6 combine to form
- A. Superior trunk
- B. Middle trunk
- C. Lower trunk
- D. Dorsal scapular nerve
- E. Long thoracic nerve

#### Ans

- **1.3.** There are lateral, medial and posterior cords formed from the various divisions of the trunks. These cords lie
- A. Over the pectoralis minor
- B. Beneath the pectoralis minor
- C. Pierce the pectoralis minor
- D. Over the pectoralis minor except for the posterior cord
- E. Beneath the pectoralis minor except for the lateral cord

#### Ans

- **1.4.** Each cord divides into two end branches. The axillary nerve is an end branch of the
- A. Medial cord B. Lateral cord
- C. Middle cord D. Posterior cord
- E. Both lateral and the middle cord

#### Ans

- 1.5. What is true about Erb's Palsy?
- A. Adduction + Internal rotation
- B. Supination seen
- C. C5, C6 roots affected
- D. Lower trunk injury causes this deformity
- E. Claw hand is seen

#### Ans

- **1.6.** Which of the following is not true about Klumpke's paralysis?
- A. Involves lower trunk of brachial plexus
- B. Intrinsic muscles of hand are paralyzed
- C. Claw hand is a feature
- D. Horner's syndrome can never be associated
- E. None Of Above

#### Ans

- 1.7. Erb's palsy involves injury to:
- A. C5, C6 roots
- B. C6 C7 roots
- C. C7, C8 roots
- D. C8, T1 roots
- E. None Of Above

#### Ans

- **1.8.** Brachial plexus injury with Horner's syndrome, nerve root level involved is.
  - A. C5 B. C6
  - C. C7 D. T1
  - E. None Of Above

#### Ans

- **1.9.** Which of the following deformity is evident in case of Erb's palsy?
- A. Policeman tip deformity
- B. Winging of scapula
- C. Claw hand
- D. Wrist drop
- E. None Of Above

#### Ans

- 1.10. Aeroplane splint is used in:
  - A. Radial nerve injury
  - B. Ulnar nerve injury
  - C. Brachial plexus injury
  - D. Scoliosis
  - E. None Of Above

#### Ans

- 1.11. Muscles paralyzed in Erb's paralysis are all except:
- A. Biceps B. Triceps
- C. Brachioradialis D. Brachialis

#### E. None Of Above

- A. C1-2
- B. C4-5
- C. C5-6
- D. C8 T1
- E. None Of Above

#### Ans

- **1.13.** Which of the following is a correct statement with regards to ossification centers around elbow?
- A. Capitellum → lateral epicondyle → trochlea → olecranon
- B. Capitellum  $\rightarrow$  radial head  $\rightarrow$  trochlea  $\rightarrow$  olecranon
- C. Capitellum  $\rightarrow$  trochlea  $\rightarrow$  radial head  $\rightarrow$  olecranon
- D. Capitellum  $\rightarrow$  medial epicondyle  $\rightarrow$  radial head  $\rightarrow$  olecranon
- E. Capitellum  $\rightarrow$  medial epicondyle  $\rightarrow$  radial head  $\rightarrow$  lateral epicondyle

#### Ans

- 1.14. Erb's palsy all the movements are lost except:
- A. Supination
- B. External rotation at shoulder
- C. Abduction at shoulder
- D. Pronation
- E. None Of Above

#### Ans

- 1.15. A 45-year-male present with abrupt onset, pain, weakness, loss of contour of shoulder and wasting of muscle of arm on 5th day of tetanus toxoid immunization in deltoid. Likely cause is:
- A. Radial nerve entrapment
- B. Thoracic outlet syndrome
- C. Brachial neuritis
- D. Hysteria
- E. None Of Above

#### Ans

- 1.16. All are true regarding brachial plexus injury, except:
- A. Preganglionic lesions have a better prognosis than postganglionic lesions
- B. Erb's palsy causes paralysis of the abductors and external rotators of the shoulder
- C. In Klumpke's palsy, Homer's syndrome may be present on the ipsilateral side
- D. Histamine test is useful to differentiate between

the preganglionic and postganglionic lesions

E. None Of Above

#### Ans

- 1.17. Retraction of conjoint tendon cause what nerve injury ?
- A. Radial
- B. Musculocutaneous
- C. Ulnar
- D. Median
- E. All of the above

#### Ans

- 1.18. Most common cause of neurological deficit in upper limb is:
- A. Polio
- B. Erb's palsy
- C. C1–C2 dislocation
- D. Fracture dislocation of cervical spine
- E. None Of Above

#### Ans

- 1.19. Which of the following is the nerve root of the phrenic nerve?
- A. C4
- **B**. C5
- C. C3
- D. C3, C4
- E. C3, C4, C5

#### Ans

- **1.20.** The following form the superior boundary of the subacromion space except
- A. Acromion
- B. Coraco-acromial ligament
- C. Coracoid
- D. Coraco acromial arch
- E. Clavicle

### Applied Anatomy

2.1.	. Which of the following reduction parameters of		Type A Dorr is also known as Champagne flute
	the lower end of radius is not acceptable?		Type B Dorr is also known as Champagne flute
Α.	Radial shortening of 4 mm at the DRUJ	D.	Type C Dorr is also known as Stove pipe
В.	Radial inclination of 16 degree	E.	Type C Dorr has a wide canal with narrow cortex
C.	Intraarticular step of 1mm	Ans	
D.	Articular incongruity of 1 mm at the sigmoid notch	2.6.	The root value of the sciatic nerve is
E.	Volar tilt of 21 degree	Α.	L4, L5, S1 B. L4, L5, S1, S2
Ans		C.	L4, L5, S1, S2, S3 D. L5, S1, S2, S3, S4
2.2.	The Modified Henry's approach is performed between	E.	S1, S2, S3, S4, S5
Α.	FCR and the radial artery	Ans	
В.	FCR and the Palmaris longus	2.7.	What is false regarding the Stoppas approach?
C.	Brachioradialis and the radial artery	Α.	It is an extension to the ilioinguinal approach
D.	Brachioradialis and the first extensor compartment	Β.	It helps in visualising the quadrangular plate better
E.	None of the above	C.	It helps in visualizing the pelvic brim
Ans .		D.	It is not very useful in obese patients
2.3.	Which of the following is the largest muscle among	E.	It was first described by Cole and Bolhofner
	the rotator muscle groups?	Ans	
Α.	Teres minor B. Teres major	2.8.	The following are few statements that describe
C.	Supraspinatus D. Subscapularis		the skin incisions over the hand. Which of the
E.	Infraspinatus		following are false?
Ans	Break Antonio Brance March 1	A.	The subcutaneous fat is plenty in the deep crease
2.4.	Which of the following statements regarding the		area and should be preferred for incision
stifie	intrinsic muscles of the hand are true?	Β.	Z plasty incision is preferred for a Dupuytren's
A.	There are a total of 3 lumbricals and 4 interossei	c	contracture Straight line incisions have to be avoided
Β.	The tendon of the dorsal component of the DI passes almost directly over the axis of rotation of	C. D.	Straight line incisions can be used on the dorsal
	the joint and thus may extend, flex, or abduct the	υ.	aspect while treating a Rheumatoid deformity of
	phalanx; its angle of attack is 0 to 5 degrees.		the hand
C.	The palmar components of the dorsal and the	E.	All are false
	palmar interossei attack the joint well below the	Ans	
	axis and thus are capable of flexing the MCP joint more strongly, as well as of extending the	2.9.	All of the following regarding hip aspirations are true except
	interphalangeal joints; their angle of attack is 20 to 25 degrees.	Α.	A lateral, anterior and medial approach can be used for aspiration
D.	Each lumbrical approaches the MCP joint palmar	B.	While performing a medial approach one should
U.	to the transverse metacarpal ligament and is mechanically best suited to initiate flexion of	D.	place the needle inferior to the adductor longus tendon
	the MCP and to insert force on the joint when in	C.	While performing an anterior aspiration the needle is inserted 2.5 cm medial and distal to the palpable
_	flexion; their angle of attack is 35 degrees.		femoral artery
Ε.	All except (a) is true	D.	An additional arthrogram should be used when
Ans .	Der desification is		over it is possible
2.5.	Which of the following about Dorr classification is	Ε.	The position of ease in a hip effusion is flexion and
Α.	false? Type A Dorr femurs have thick cortex and a narrow	Ans	abduction
	canal	74115	

- 2.10. The following is the principle of Ganz safe surgical dislocation of the femoral head
- Posterior dislocation of the hip is the safest A.
- The medial circumflex artery lies posteriorly and Β. hence an anterior dislocation is preferred
- The obturator externus is the only structure that is С. sacrificed to prevent AVN
- A trochanter osteotomy is avoided to prevent D. damage to the blood supply
- None E.

#### Ans

- 2.11. Which of the following is true about LobenhofferApproach?
- It is the posterior approach to fix the elbow A.
- It is the posterior approach to the hip Β.
- It is lateral approach to release the compartment C. syndrome
- It is the posteromedial approach to the proximal tibia D.
- It is the both posteromedial and posterolateral E. approach to the proximal tibia

#### Ans

- 2.12. Which of the following is true about the joint reaction force in a hip?
- Twice during SLRT A.
- 6 times in single leg stance Β.
- 2 times in walking C.
- D. Upto 5 times while running
- E. Increased on using a cane

#### Ans

- 2.13. Which of the following were Sir John Charnley's concepts to improve the hip function in arthroplasty?
  - A. Shorten the lever arm of the body weight by deepening the acetabulum
  - B. centralize the femoral head
  - C. Lengthen the lever arm of the abductor mechanism by reattaching the osteotomized greater trochanter medially.
- D. Moment produced by the body weight is increased and the counterbalancing force that the abductor mechanism must exert also is increased improving the hip biomechanics.
- E. Both A and B

#### Ans

- 2.14. Which of the following closely resembles the hip biomechanics?
- Plier Β. Can opener Α.
- Wheel barrow D. C. Cantilever
- E. None

- 2.15. The ankle follows which class of lever
- B. Class 2 A. Class 1
- Class 4 C. Class 3 D.
- E. Class 1 while stance and class two while swing

#### Ans

- 2.16. Which of the following is not possible by a pelvic osteotomy?
- A. Relief in pain
- Β. Realign the coverage
- C. Improve the alignment
- D. Correct limb length discrepancy
- E. Improve abductor function

#### Ans

- 2.17. Which of the following regarding functional cast bracing is true?
- It encourages the osteogenesis A.
- Β. Promotes tissue healing
- C. Prevents joint stiffness
- D. All of the above
- E. None of the above

#### Ans

- 2.18. The blood supply to the fracture site is increased by
- Muscle contraction A.
- Β. Loading
- C. Micromotion at the fracture site
- D. Absolute stability
- All except d E.

#### Ans

- 2.19. Which of the following regarding cast index is true?
- It was described by Sarmiento A.
- It is the ratio between the width of the cast in an Β. AP xray to that in the lateral view
- It was used traditionally for forearm fractures C.
- Ideal cast index should be more than 1 D.
- Cast index less than 0.8 indicates poor casting

- 2.20. Which of the following is true regarding padding index?
- It is the ratio of padding thickness in the plane of Α. maximum deformity correction and the greatest interosseus distance in the AP view.
- It was described by Bhatia and Housden in 2006 Β.
- The value should be below 0.3 C.
- It indicates a 3 point fixation of the fracture if D. padding is adequate
- All of the above E.
- Ans

- - E.

#### Ans

-

6

# Chapter **3** Applied Anatomy

- 3.1. Shoulder flexion is done by:
- Α. Posterior fibres of deltoid
- Β. Pectoralis major
- C. Pectoralis minor
- D. Latissimus dorsi
- E. None of Above

#### Ans

- 3.2. What is the normal orientation of humeral head?
- Α. Retroversion of 80 degrees
- Β. Retroversion of 30 degrees
- C. Anteversion of 15 degrees
- D. Anteversion of 50 degrees
- E. None of Above

#### Ans

- 3.3. Which of the following structure passes through the quandrangular space?
- Α. Axillary nerve
- Β. Radial nerve
- C. Median nerve
- D. Brachial artery
- E. Musculocutaneous nerve

#### Ans

- 3.4. Dynamic stabilisers of shoulder joint:
- Α. Glenoidal labrum
- Rotator cuff muscles Β.
- C. Glenohumeral ligament
- D. Coracohumeral ligament
- Ε. Brachial plexus

#### Ans

- 3.5. For long the muscle was not given its due importance and was called Forgotten muscle of rotator cuff which one is it?
- Α. **Subscapularis**
- Β. Supraspinatus
- C. Infraspinatus
- D. **Teres** minor
- E. **Teres** major

#### Ans

- 3.6. Rotator interval is between:
- Α. Supraspinatus and teres minor
- Β. Teres major and teres minor

- C. Supraspinatus and subscapularis
- D. Subscapularis and infraspinatus
- None of Above E.
- Ans
- 3.7. Muscle crossing through the shoulder joint is:
  - A. **Biceps short head**
  - Β. **Biceps long head**
  - С. Triceps long head
  - D. Coracobrachialis
  - None of Above Ε.
- Ans
- 3.8. Weakest portion of shoulder joint capsule is:
  - Α. Anterior
  - Β. Posterior
  - С. Inferior
  - D. Superior
  - E. None of Above
- Ans
- 3.9. 1st Carpal bone to ossify:
- A. Trapezoid
- Β. Capitate
- C. Lunate
- D. Pisiform
- E. None of Above

#### Ans

- 3.10. Ossification center of scaphoid appears at:
  - A. 1-6 months
  - Β. 1 to 2 years
- C. 2 to 4 years
- D. 4 to 6 years
- E. None of Above

#### Ans

- 3.11. Axis of upper limb passes through:
  - Capitulum A.
  - Β. Trochlea
  - C. Olecranon
- D. Radial styloid
- Ε. DRUJ

- **3.12.** A patient came with complaint of difficulty in climbing upstairs. When he is made to stand on his right leg left side of pelvis fell to a lower level. When he stands on left leg then right side of pelvis can be drawn up. Which of the following nerve of him has got affected?
- A. Right inferior gluteal
- B. Right superior gluteal
- C. Left superior gluteal
- D. Left inferior gluteal
- E. None of Above

#### Ans

- 3.13. Which of the following has not been shown in the literature to increase the risk of heterotopic ossification?
- Prolonged ventilator time in multiply traumatized patients
- B. Spinal cord injury
- C. Amputation through the zone of injury in patients injured in blasts
- D. Open fractures
- E. Severe burns

#### Ans

- 3.14. Which of the following is the boundaries of the Babcocks triangle?
- A. Medially- physis of the head of the femur
- B. Laterally- primary compressive trabeculae
- C. Inferiorly- inferior border of neck of femur
- D. All of the above
- E. Laterally- secondary compressive trabeculae

#### Ans

3.15. Singhs index. False is

- A. Stage 1- loss of secondary tensile trabeculae
- B. Stage 2- loss of secondary compression trabeculae
- C. Stage 3- loss of primary tensile trabeculae
- D. Stage 4- loss of primary compression trabeculae
- E. Stage 5- loss of secondary compression trabeculae

#### Ans

\ns

- 3.16. Which of the following is the most common position of ease in a hip joint?
- A. Flexion abduction and external rotation
- B. Flexion adduction and external rotation
- C. Flexion abduction and internal rotation
- D. Extension abduction and external rotation
- E. Extension abduction and internal rotation

- **3.17.** Where in orthopedics, is the technique of 'rolling thumb' and 'three circles' used?
- To palpate the femoral artery before technique of embolization
- B. To palpate the hamstring graft
- C. To palpate distal to the listers tubercle to place portals for arthroscopy
- D. To palpate crepitus for fractures
- E. To palpate the medial portal for the knee arthroscopy

#### Ans

- 3.18. Harmons posterolateral approach is used in case of?
  - A. Femur fracture
- B. Proximal radius fracture
- C. Tibia shaft fracture
- D. Posterior proximal tibia fixation
- E. None

#### Ans

- **3.19.** Which of the following can prevent an injury to the posterior interosseus nerve while approaching the radius posteriorly with certainty?
- A. Detaching the insertion of supinator
- B. Subperiosteal elevation of the bone
- C. Hold the forearm in maximum pronation
- D. Hold the forearm in maximum supination
- E. Full dissection of the nerve

- 3.20. Lobenhoffers approach was described to
  - A. Lateral approach to distal femur
  - B. Transtrochanteric approach to the hip
  - C. Posterolateral and posteromedial approach to the proximal tibia
- D. Posterolateral approach to the posterior malleolus
- E. Posterior approach to elbow
- Ans

# **Basic Sciences**

# Chapter **4** Basic Sciences

- 4.1. The organic component of bone matrix, which includes collagen, proteoglycAns-, and other noncollagenous proteins, comprises what proportion of the dry weight of bone?
- 20% B. 40% Α.
- C. 60% D. 80%
- E. 95%

#### Ans

- 4.2. Most of the growth of the arm is contributed by
- Α. 60 percent by the proximal humerus
- Β. 50 percent by the lower end of the humerus
- C. 85 percent by the proximal humerus
- D. 30 percent by the proximal humerus
- E. 20 percent by proximal humerus

#### Ans

- 4.3. Most of the growth of the forearm arm is contributed by
- A. 60 percent by the proximal forearm
- Β. 75 percent by the lower end of the forearm
- 85 percent by the proximal forearm С.
- D. 30 percent by the proximal forearm
- E. 20 percent by proximal forearm

#### Ans

- 4.4. Which of the following is responsible for calcification of the zone of provisional calcification?
- A. Apoptosis of chondrocytes
- Vascular invasion from the metaphyseal blood Β. vessels
- The arrangement of the cells C.
- Hypertrophy of the chondrocytes D.
- None of the above Ε.

#### Ans

- Which of the following is the first to appear in an 4.5. elbow radiograph of an infant ?
- Capitellum Β. Radial head Α.
- Medial epicondyle D. Lateral condyle С.
- None Ε.

#### Ans

- **4.6.** Which of the following is true regarding the growth of the lower limb?
- More than two thirds of the growth of the lower Α.

limb occur at the ankle and the proximal femoral physis together

- Β. More than two thirds of the growth of the lower limb occur at the distal femur and the proximal tibial physis together
- 30 percent of the lower limb growth is contributed C. by the distal femur
- D. All of the above
- None of the above E.
- Ans
  - 4.7. What is common in all types of rickets?
  - A. Low vitamin D
  - Β. Low calcium
  - C. Abnormal matrix structure
  - D. Failure of provisional zone calcification
  - E. All of the above

#### Ans

- 4.8. Which of the following is common in most of infections in childhood?
  - Α. Very common cause is trauma
  - Β. Most common cause is exposure to low sunlight
  - C. Hematogenous spread happens in most cases
  - D. Diaphyseal involvement is very common
  - E. Epiphyseal infections are common in growing children

#### Ans

- 4.9. Which of the following are the proposed hypothesis for a slip in SCFE?
  - Α. Genetic
- Β. Hormonal
- С. High BMI
- Relative weakness of the fibrous ring D.
- All of the above Ε.

- 4.10. Which of the following is false?
- Α. Physis responds only to stresses
- Β. The stress across the physis helps it to grow
- С. The compression across the physis can cause retardation of growth
- D. The tensile side of the physis have more growth
- Ε. Compression if not uniform across physis can lead

#### to deformities

#### Ans

- 4.11. Wolf law states that
- A. Bone remodelling happens due to compression
- B. Bone remodelling happens due to stresses across the bone
- C. It states that the bone is mechano resistant
- D. Increased stresses can lead to weakening of the bones
- E. None of the above

#### Ans

- **4.12.** Physeal injury patients are followed up till maturity occurs to look for growth arrest. When will you consider that the child has grown satisfactorily enough?
  - A. Compare the child's height with the elder child
  - B. Compare the child's height with the arm span
  - C. Compare the child's height with that of the average of the parents height
  - D. Look for parallel Harris growth arrest lines on xrays
  - E. All of the above

#### Ans

- **4.13.** What size of the growth plate bony bridge cannot be resected?
- A. Bony bridge of surface area more than 20 percent size of the whole growth plate
- B. Bony bridge of surface area more than 40 percent size of the whole growth plate
- C. Bony bridge of surface area more than 60 percent size of the whole growth plate
- D. Bony bridge of surface area more than 80 percent size of the whole growth plate
- E. Bony bridge of surface area more than 20 percent size of the whole growth plate

#### Ans

- **4.14.** Which of the following can affect the epiphysis of a child?
- A. Osteogenesis imperfecta
- B. Osteopetrosis
- C. Achondroplasia
- D. Enchondromatosis
- E. Trevors disease

#### Ans

- **4.15.** Pseudo achondroplasia affects which part of the bone
- A. Diaphysis B. Metaphysis
- C. Metadiaphyseal junction

- D. Physis
- E. Epiphysis

P-P-P

#### Ans

- **4.16.** Which of the following is a basic back bone of bisphosphonates?
- A. P-C-P B. P-O-P
- C. P-N-P D. P-H-P

#### E. Ans

- **4.17.** Which of the following is true regarding bisphosphonates?
- A. The basic back bone structure is responsible for its activity
- B. The basic back bone is resistant to phosphatases
- C. The bisphosphonates act by directly stabilizing the hydroxyapatite crystal
- D. It should not be used in cases of osteogenesis imperfecta
- E. All except d

#### Ans

- **4.18.** Warfarin is a anticoagulant which has a structure similar to that of vitamin K and it inhibits the Vitamin K dependent gama carboxylation of glutamate residues of all of the following except
- A. Factor II B. Factor V
- C. Factor VII D. Factor X
- E. Factor IX

#### Ans

- **4.19.** BMD by DEXA scan is the method to measure the level of mineral in the bones. Which of the following is true regarding BMD
- A. It can give separate densities of the cortical and cancellous bone
- **B.** It can give a better interpretation of osteoporosis on an AP view of the spine
- C. If there is an associated fracture of the vertebra then there can be a false high density value
- D. In the femur the density of the femoral neck alone is utilized
- E. All are true

- **4.20.** Which of the following is considered as a severe osteoporosis?
- A. When T score is more than -1
- B. When T score is in between -1 and 2.5
- C. When the T score is more than 2.5
- D. When the T score is more than -2.5 with any fragility fractures
- E. Both C and D
- Ans

### **Basic Sciences**

- 5.1. Which of the following regarding tendons are 5 wrong?
- A. Tendons transmit the tensile loads from muscle to bone
- B. Tendons store energy
- C. Tendons have a fibroblast: collagen ratio is 80:20
- D. Tendons have less elastin than ligaments
- E. Tendons help to give more exertion of movement of a joint

#### Ans

- 5.2. Which of the following is false about collagen?
  - A. More than 90 percent of collagen in tendons are type 1
  - B. Type 1 collagen has three polypeptide chains which are arranged in a right handed triple helix
  - C. Inter bonding is done by hydrogen
  - D. The arrangement of the collagen in tendons are staggered and not parallel
  - E. The ligaments have a more layered arrangement and this sustains the tensile stresses

#### Ans

- **5.3.** The ligaments and tendons insert into the bone and consists of four zones of indirect insertion. Which of the following is true regarding the zones
- A. Zone 1 has mineralized fibrocartilage and merges into the cortical bone
- B. Zone 2 has onset of mineralization of the fibrocartilage
- C. Zone 3 has collagen fibres intermesh with unmineralized fibrocartilage
- D. Zone 4 has parallel collagen fibres at the end of the end of the ligament
- E. Perforating fibres of Sharpey cross all 4 zones of the insertion

#### Ans

- 5.4. Tendons receive nutrition from
- A. Small arterioles that supply it
- B. Vincula
- C. Mesotenon and paratenon
- D. Through diffusion
- E. All of the above

#### Ans

- 5.5. Bone formation occurs in several ways. Which of the following involves undifferentiated mesenchymal cells aggregating into layers, then differentiating into osteoblasts, and finally depositing an organic matrix that mineralizes?
  - A. Appositional ossification
  - B. Embryonic long bone formation
  - C. Enchondral ossification
- D. Intramembranous ossification
- E. Ossification of fracture callus
- Ans5.6. Which of the following characterizes fresh-frozen
- 5.6. Which of the following characterizes fresh-frozen cortical allograft as a bone graft material?
- A. Osteoconductive, osteogenic, good structural integrity
- B. Osteoconductive, osteoinductive, osteogenic
- C. Osteoconductive, osteoinductive, good structural integrity
- D. Osteoconductive, osteogenic, low immunogenicity
- E. Osteoconductive, osteoinductive, lacks structural integrity

- 5.7. Which of the following is false regarding healing?
- A. Growth factors increase fibroblast proliferation
- B. Steroids increase the adhesive property during the healing
- C. Hyaluronic acid reduces the adhesive property during healing
- D. Hyaluronic acid reduces the rate of tendon healing
- E. Steroids can lead to infection during the healing process leading to halt in the whole process
- Ans
- **5.8.** Which of the following regarding meniscus is false?
  - A. Each meniscus covers more than two thirds of the corresponding condyle of the tibia
  - B. The peripheral border is concave
- C. The peripheral border is attached to the capsule
- D. The inner most edge of the meniscus is free
- E. A meniscus trAns-plant can be offered in patients with in partial and post menis cectomy patients
- Ans

- 5.9. What is the definition of creep of any material?
  - A. Increase in deformation or strain that occurs when a constant load is applied over an extended period and as time passes this strain becomes less pronounced
  - B. Is the loss of heat when load is applied on an object
  - C. Decrease in the stress in a body when exposed to constant pressure
  - D. When maturing the number of cross-linking increases
  - E. None of the above

#### Ans

- **5.10.** Which of the following is an example of creep in orthopedics?
- A. Bone cement setting
- B. Ponsetti casting for deformity correction
- C. Application of plate over the tensile side of the bone
- D. Application of plate on the compressive side of the bone
- E. Hoop stresses that arise when passing an intramedullary nail

#### Ans

- 5.11. Which of the following is true about the tendon strength?
- A. When there is high loading, the tendon bone complex is the weakest point
- B. When there is low loading, the tendon itself is weak
- C. The cross section of the muscle if less then more is the strain on the tendon
- D. When a muscle is maximally contracted the tensile stress on the tendon is the highest
- E. A concentric contraction can lead to more stress than an eccentric contraction on the tendon

#### Ans

- 5.12. Which of the following regarding meniscus is true?
- A. It is a fibrocartilaginous structure
- B. It has around 70 percent of water in the extracellular matrix
- C. It has mainly collagen type 1
- D. The collagen in the middle layer shows a circumferential orientation
- E. The meniscus provides lesser contact area and more greater contact stress

#### Ans

- 5.13. What is true about healing by intramembranous ossification ?
- A. It has a cartilaginous phase before getting

converted into the osteogenic phase.

- **B.** It is seen in development of most of the long bones and in fractures which attempt to heal with relative stability or secondary healing.
- C. It has an anabolic phase where there is increase in chondroblasts
- D. It has a catabolic phase when there is increased activity of osteoclasts and osteoblasts.
- E. Happens in fracture healing by an interfragmentary lag screw compression

#### Ans

- 5.14. What is true about soft callus?
- A. There is minimal mesenchymal cells derived from the marrow alone
- B. The pericytes donot contribute to MSC at this stage
- C. There is hypertrophy of the chondrocytes and is regulated by the Sox9 gene
- D. Mainly occurs in fracture healing through intramembranous healing
- E. The chondrocytes are weak and atrophied here and can later undergo apoptosis

#### Ans

- 5.15. Which of the following regarding SMOKING is false?
- A. It causes decrease rate of fracture healing
- B. inhibits growth of new blood vessels as bone remodels
- C. increase risk of non-union
- D. increases risk of pseudoarthrosis in spine fusion by 500%
- E. it increases the strength of fracture callus

#### Ans

- 5.16. What is a tidemark in the articular cartilage?
- A. It is the boundary between the calcified and the uncalcified cartilage
- B. It is an area in the articular cartilage where there is maximum number of cells
- C. It separates the superficial gliding zone and the middle trAns-itional zone
- D. It separates the middle trAns-ition zone and the deep radial zone
- E. None of the above

- 5.17. Which of the following is true about collagen 10?
- A. Most abundant collagen
- B. Is present in the uncalcified areas of the cartilage
- C. It is associated with calcification of the cartilage
- D. It is produced by the atrophied chondrocytes
- E. It is absent in fracture callus
- Ans

15

- 5.18. Which of the following is true about type 1 collagen?
- A. Usually absent in articular cartilage but can occur in an injured cartilage with Fibrocartilage development
- **B.** It is the collagen found in maximum Quantity in the articular cartilage
- C. Helps in cartilage calcification
- D. Found in bone tissue in least Quantity
- E. Seen synovial tissue

#### Ans

#### 5.19. What is true about osteoarthritis?

- A. Chondrocytes mimic an enchondral bone formation
- B. There is excessive collagen type X synthesis
- C. There is increase in water content
- D. There is formation of matrix vesicles and matrix calcification
- E. All of the above

#### Ans

- **5.20.** Which are the three most common primary tumors to metastasize to bone?
- A. Lung, kidney, thyroid
- B. Breast, brain, lung
- C. Lung, breast, brain
- D. Breast, prostate, lung
- E. Breast, lung, thyroid

- 6.1. Which of the following groups correctly identifies serologic tests that are required by the American Association of Tissue Banks (AATB) for musculoskeletal tissue allografts?
- Cytomegalovirus, Hepatitis A, Hepatitis B, Hepatitis C, A. HIV, Syphillis
- Cytomegalovirus, Hepatitis A, Hepatitis B, Hepatitis C. Β. HIV
- C. Hepatitis A, Hepatitis B, Hepatitis C, HIV, Syphillis
- Hepatitis B, Hepatitis C, HIV, Syphillis D.
- Ε. Hepatitis B, Hepatitis C, HIV

#### Ans

- 6.2. Which of the following study designs represent a level III evidence study?
- Prospective, randomized controlled trial A.
- Retrospective case-control study Β.
- C. Retrospective case series
- Prospective cohort study D.
- E. Expert opinion

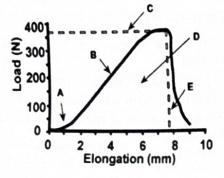
#### Ans

- Vitronectin is an important receptor involved in 6.3. which of the following functions?
- Interacts with RANK Ligand to stimulate osteoclasts A.
- Osteoclasts attaching to bone Β.
- Competitive inhibition of RANK Ligand C.
- Chemotaxis in fracture healing D.
- Type II collagen formation E.

#### Ans

- The femur radiograph of a healthy 25-year-old 6.4. female is compared to the femur radiograph of a healthy 85-year-old female. Which of the following best describes the 25-year-old's femur?
- Increased cortical thickness and a smaller A. medullary canal volume
- Decreased cortical thickness and larger Β. a medullary canal volume
- Equivalent cortical thickness and medullary canal C. volume
- Increased cortical thickness and larger medullary D. canal volume
- Decreased cortical thickness and a smaller E. medullary canal volume

A typical load-elongation curve of a ligament 6.5. is shown in Figure A. What region of the curve represents elastic deformation occurring after the crimped ligament fibrils have been straightened?



D.D E.E

A. A

**B**. B

C.C

#### Ans

- The active form of vitamin-D (calcitriol) is 6.6. produced by the enzyme 1-alpha-hydroxylase. What hormone activates this enzyme?
- Thyroid stimulating hormone (TSH) Α.
- Parathyroid hormone (PTH) B.
- C. Estrogen
- Progesterone D.
- Testosterone E.

#### Ans

- Using levels of evidence in research studies, which 6.7. of the following represents a level II study?
- Retrospective case control study A.
- Prospective cohort study Β.
- Case report of 3 patients with the same disease C.
- High-quality randomized prospective clinical trial D.
- The opinion of a review panel at the annual AAOS E. meeting

Ans

- The injury in the region of the groove of Ranvier 6.8. can affect growth of the bone. What is this region of the growth plate responsible for?
- Longitudinal bone growth Α.
- Β. Appositional bone growth

- C. Supplying cartilage cells to the articular surface
- D. Calcification of the matrix within the growth plate
- E. Organization of the growth plate into distinct zones of proliferation and hypertrophy.

#### Ans

- **6.9.** Which of the following is true of both calcium phosphate and calcium sulfate?
- A. They have high resistance to shear forces
- B. They have high resistance to torsional forces
- C. They are contraindicated in spinal fusion
- D. They provide a scaffold for bone progenitor cells
- E. They are not biocompatible with stainless steel orthopedic implants

#### Ans

- 6.10. Which of the following best describes the mechanism by which osteoprotegerin(OPG) plays a role in RANKL mediated osteoclast bone resorption?
- A. Inhibits RANKL-mediated osteoclast bone resorption by directly binding to RANKL
- B. Inhibits RANKL-mediated osteoclast bone resorption by directly binding to the RANK receptor on osteoclasts
- C. Stimulates RANKL-mediated osteoclast bone resorption by directly binding to RANKL
- D. Stimulates RANKL-mediated osteoclast bone resorption by directly binding to the RANK receptor on osteoclasts
- E. Stimulates RANKL-mediated osteoclast bone resorption by directly binding to PTH

#### Ans

**6.11.** A 10-year-old child falls from a standing height and sustains the injury shown in Figure A. Her medical history includes hearing defects and the facial appearance shown in Figure B. In addition to operative fixation of her fracture she is scheduled to receive cyclical intravenous pamidronate administration as a treatment after the fracture is healed. Which of the following is associated with this form of treatment?



- A. No change in bone pain
- B. No change in future fracture incidence
- C. An increase in osteoblast density
- D. An increased risk of secondary osteosarcoma
- E. An increase in bone density

- **6.12.** Osteonecrosis of the jaw has been recognized as a possible complication of chronic therapy with which of the following medications?
  - A. Warfarin
  - B. Low-molecular weight heparin
  - C. Diclofenac
- D. Ketorolac
- E. Alendronate

#### Ans

- **6.13.** Disruption of which of the following interrupts the major source of nutrients to the growth plate?
- A. Diaphyseal artery B. Metaphyseal artery
- C. Perichondrial artery D. Synovial fluid
- E. Synovial blood vessels

#### Ans

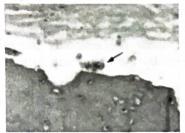
- **6.14.** Radiographic changes suggestive of osteopetrosis in children are a known complication of which of the following types of medications?
  - A. TNF-alpha inhibitors
  - B. Bone morphogenic proteins
  - C. Bisphosphonates
  - D. Fluoroquinolones
  - E. RANKL antibiodies

#### Ans

- 6.15. Which of the following bone graft material contains live mesenchymal osteoblastic precursor cells?
  - A. Fresh-frozen allograft bone
  - B. Recombinant bone morphogenic protein
  - C. Demineralized bone matrix
  - D. Autologous iliac crest marrow aspirate
  - E. Calcium phosphate putty

#### Ans

**6.16.** Which of the following is true regarding the cell seen in Figure A?



- A. Originates from hematopoietic cells from a macrophage lineage
- B. Derived from undifferentiated mesenchymal cells
- C. They are former osteoblasts trapped in the matrix they produced

- D. They become cartilage under intermediate strain and low oxygen tension
- E. They form bone by producing non-mineralized matrix

#### Ans

- 6.17. A study was designed to measure the benefit of subacromial corticosteroid injections. Participants were randomized to methylprednisolone acetate 40 mg with lidocaine 1% or lidocaine 1% alone. The participants were not provided with information of their treatment allocation. The subacromial injection was prepared and administered by a single orthopaedic surgeon. Results were collected by the orthopaedic surgeon using clinical and patient satisfaction outcome scores at 6, 12, and 24 weeks. Which of the following would best describe this type of study?
  - A. Double blinded randomized and controlled study
  - B. Single blinded randomized study
  - C. Retrospective study
  - D. Case-control study
  - E. Prospective cohort study

#### Ans

- **6.18.** While conducting a retrospective review of patients undergoing two different techniques for open reduction and internal fixation of ankle fractures, the investigator would like to assess whether there is any significant difference between the mean patient age in the two groups. The two groups are normally distributed. Which of the following tests would be most appropriate?
- A. Student t-test
- B. Analysis of Variance (ANOVA)
- C. Fisher exact test
- D. Kruskal-Wallis test
- E. Chi-square test

#### Ans

- **6.19.** A 60 year-old male was brought into the operating room for total hip replacement. Before making the incision, what precautionary procedure must be performed by the entire staff to minimize surgical error?
- A. Mark the word "No" on the nonoperative extremities
- B. Use intraoperative fluoroscopic imaging
- C. Perform "timeout"
- D. Perform "sign out"
- E. Use the newest prosthesis

Ans

- **6.20.** A 13-year-old girl with a displaced proximal tibia fracture is brought into the emergency department by her adult cousin. The fracture needs surgical management. The child is living with her cousin's family while her parents are in Dubai. While the child speaks fluent English, her cousin and her parents are Arab speaking. How should you consent this patient?
  - A. No consent is needed given the urgent nature of the injury, proceed with surgery
  - B. Talk with the cousin, using the child as a translator
  - C. Talk with the cousin, using a translator
  - D. Call the parents in Dubai, using the child as a translator over the phone
  - E. Call the parents in Dubai, using a translator over the phone

Ans

#### 18

# Imaging