## HAND and WRIST QUIZ



#### The extended FCR Approach involves release of:

- a. Carpal Tunnel
- b. ECRL
- c. Brachioradialis
- d. FPL
- e. DRUJ

### Concerning the philosophy of volar distal radius fixation:

- a. Distal row supports dorsal subarticular surface
- b. Proximal row supports volar subarticular surface
- c. Styloid screws to maintain volar tilt
- d. Proximal row supports dorsal subarticular surface
- e. Act as a Buttress plate in dorsally displaced fracture

### Which is a four strand core suture construct?

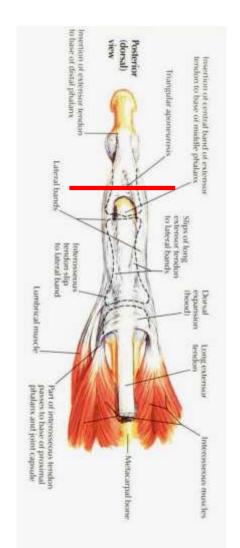
- a. Cruciate
- b. Kessler
- c. Kessler-Tajima
- d. Bunnell
- e. Mason Allen

## Which of the following is not part of standard flexor tendon rehab in first 6 weeks after flexor tendon repair:

- a. Rubber band traction
- b. Passive Extension
- c. Passive Flexion
- d. Active Extension
- e. Active Flexion

## Division of the extensor tendon in zone II might NOT stop DIPJ extension because of:

- a. Lumbricals
- b. Interossei
- c. Sagittal bands
- d. Oblique retinacular ligament
- e. Volar plate



## Which of the following are Kanavel's sign?

- Sausage digit, Pain on Passive Flexion,
   Paraesthesia
- b. Pain on extension, Paraesthesia, Pallor
- c. Sausage digit, Flexor Sheath tenderness, Pain on passive extension, Flexed posture of digit
- d. Pain on Passive Flexion and Flexed Posture
- e. Sausage digit, Paraesthesia, Flexor Sheath tenderness, Flexed Posture of digit

# Which of the following is NOT an option for cover of an index finger tip amputation?

- a. Thenar flap
- b. Cross finger flap
- c. Foucher (Kite) Flap
- d. Atasoy Flap
- e. Venkataswami Flap

#### Vaughan Jackson syndrome is:

- a. Rupture of FPL
- b. Subluxation of carpus
- c. Progressive rupture of Extensors from degenerate DRUJ
- d. Posterior Interosseous Nerve Compression in Rheumatoid Arthritis
- e. Multiple Z deformities in digits

## Assessing the severity of Swanneck deformity is by:

- a. Elson's test
- b. Table top test
- c. Bunnell-Finochetti test
- d. Mannerfelt Manouvre
- e. Hippocratic manouvre

#### The most appropriate surgical procedure from the following in this case is:

- a. Total Wrist replacement only
- b. Sauve Kapandji procedure and Radioscapholunate fusion
- c. Darrach's and Chamay Fusion
- d. Total Wrist fusion and Darrach's
- e. 4 corner fusion



#### Most likely Diagnosis is:

- a. Exostosis
- b. Giant Cell Tumour
- c. Osteochondroma
- d. Enchondroma
- e. Osteosarcoma



## Concerning constructs for PIPJ fusion, the biomechanically strongest method is:

- a. Plate fusion
- b. Cross K-wire
- c. Tension Band Wiring
- d. Type A Lister Wiring
- e. 90/90 Wiring

## Which cell type is implicated in the pathophysiology of Dupuytren contracture?

- a. T Lymphocyte
- b. Fibroblast
- c. B Lymphocyte
- d. Eosinophils
- e. Myofibroblast

## Abnormal structures involved in Dupuytren include the following except?

- a. Grayson's ligament
- b. Pretendinous band
- c. Spiral band
- d. Cleland ligament
- e. Lateral digital sheet

#### Four corner fusion involves

- a. Scaphoid, Lunate, Distal Radius, Capitate
- b. Lunate, Triquetrum, Distal Radius, Distal Ulna
- c. Lunate, Capitate, Scaphoid, Trapezoid
- d. Lunate, Triquetrum, Hamate, Capitate
- e. Capitate, Trapezoid, 2<sup>nd</sup> Metacarpal, 3<sup>rd</sup> Metacarpal

## Regarding Kienbock Disease which of the following is correct:

- a. Lichtman stage II means loss of carpal height and a flexed scaphoid
- b. Is more common with an X type vascular pattern of the lunate
- c. Is more common in ulnar plus
- d. Is more common in ulnar minus
- e. Ulnar shortening is a method of treatment

### Concerning acute scaphoid fixation which is correct?

- a. Herbert screw is cannulated
- b. Dorsal percutaneous screw insertion is not suitable for waist fracture
- Fully threaded headless screws have differential pitch
- d. Herbert screw has same pitch in both parts
- e. Should not be fixed in conjunction with perilunate dislocation to avoid devascularisatoin

## Which is incorrect regarding Ulnar impaction syndrome?

- a. Can lead to Lunotriquetral instability
- b. Can cause lunate cyst
- c. Can be treated with ulnar lengthening
- d. Can be treated with arthroscopic wafer procedure
- e. Can occur after distal radius fracture malunion

## The following can be use for opponensplasty except:

- a. Palmaris longus
- b. FDS Ring
- c. EIP
- d. Brachioradialis
- e. Abductor Digiti Minimi

### Regarding Brachial Plexus which is correct?

- a. Radial nerve is a branch of lateral cord
- b. Ulnar nerve is a branch of posterior cord
- c. Cords are name in relation to subclavian artery
- d. Median nerve has contribution from medial and posterior cord
- e. The Radial nerve and musculocutaneous nerve supply the Brachialis muscle

## Regarding electrophysiology testing which is correct?

- a. Loss of amplitude means there is a loss of Schwann cells
- b. Fasciculation potentials are normal
- c. F waves are present in neurotmesis
- d. Decreased conduction velocity means there is compression neuropathy
- e. F waves are only present in lower limb nerves

## You have a child with a mild hypoplastic thumb. You are going to treat it with a Huber transfer. This is transfer of:

- a. EIP to restore Thumb adduction
- b. Brachioradialis to restore Thumb IPJ flexion
- c. ADM to restore Thumb opposition
- d. PL to restore Thumb Extension
- e. EIP to restore thumb retropulsion

## Differentiation of limb bud to ulnar and radial side depends on

- a. HOX genes
- b. Apical Ectodermal Ridge
- c. BMP 2
- d. Zone of Polarising Activity
- e. Wingless gene

## The most common type of Thumb duplication is

- a. Wassell type I
- b. Wassell type II
- c. Wassell type III
- d. Wassell type IV
- e. Wassell type V

Concerning Finger flexion deformity in CP patients. If finger extension is not possible with maximum wrist flexion then treatment includes the following EXCEPT:

- a. FDP to FDS Transfer
- b. FDS to FDP Transfer
- c. Flexor Aponeurosis release
- d. Flexor Pronator Slide
- e. FCU to ECRB transfer