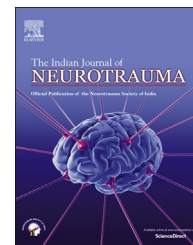




ELSEVIER

Available online at [www.sciencedirect.com](http://www.sciencedirect.com)

ScienceDirect

journal homepage: [www.elsevier.com/locate/ijnt](http://www.elsevier.com/locate/ijnt)

## Neurotrauma quiz – June 2014<sup>☆</sup>

- For brachial plexus reconstruction purposes what is not true?
  - Nine intercostal nerves are available: T3–T11.
  - The nerve T1 is a component of the brachial plexus hence not available.
  - T2 intercostal nerves are not accessible for harvesting.
  - Fourth intercostal nerve is the most suitable donor nerve out of the available Intercostal donor nerves.
- In obstetrical brachial plexus palsy a paralyzed diaphragm, determined by the inspiratory/expiratory chest X-ray, indicating the phrenic nerve dysfunction, which of the following is contraindicated?
  - Neurotization via intercostal nerves.
  - Neurotization of long thoracic nerve for stabilization of scapula and shoulder abduction.
  - Neurotization of the thoracodorsal nerve.
  - Muscles transfer and reinnervation of native muscles.
- What is not true about an intercostal nerves?
  - Contains no more than 1200–1300 myelinated fibers.
  - 80% of the fibers are motor fibers.
  - Intercostal nerves can be used for primary nerve repair.
  - Intercostal nerves are the ventral primary rami of spinal nerves.
- What is not true about Erb–Duchenne palsy?
  - Erb–Duchenne palsy Paralysis of the arm caused by injury to the upper trunk C5–C6 nerves.
  - The most common cause of Erb's palsy is dystocia, difficult childbirth.
  - Spontaneous recovery is a rule in this injury.
  - Early neurotization procedure can provide a useful function.
- Oberlin transfer technique is?
  - Extra-plexular neurotization.
  - Ulnar nerve to Musculocutaneous nerve transfer.
  - Radial nerve to axillary nerve.
  - Spinal accessory nerve to Suprascapular nerve transfer.
- The procedure of neurotization consists of?
  - Transferring an undamaged motor nerve to another injured nerve.
  - Technique of dissection of the nerve that presents a neuroma or from the fibrotic tissue.
  - Use of nerve grafts to reconstruct nerve losses.
  - All of the above.
- What is not true about Spinal accessory nerve to suprascapular neurotization?
  - The Spinal accessory nerve is a pure motor nerve.
  - Spinal accessory nerve contains approximately 1500 axons.
  - Prime function of this neurotization is shoulder stabilization.
  - Prime function of this neurotization is Elbow Flexion.
- In the axilla the pectoralis minor is a landmark, being closely related to all of the following structures except:
  - Cephalic vein
  - Cords of the brachial plexus
  - Lateral thoracic artery
  - Medial pectoral nerve
- In a case of Erb's palsy, which muscle is paralyzed?
  - Latissimus dorsi
  - Pectoralis minor
  - Supraspinatus
  - Trapezius
- The axillary nerve arises directly from which part of the brachial plexus?
  - Inferior trunk
  - Lateral cord
  - Medial cord
  - Posterior cord
- What is not true about Klumpke palsy?
  - Loss of adduction of the thumb (ulnar nerve).
  - Loss of abduction and adduction of metatarsophalangeal joints.
  - Flexion at the metatarsophalangeal.
  - Flexion of the interphalangeal joints.
- Which statement is true for Parsonage–Turner Syndrome?
  - Generally associated with a viral prodrome, immunizations.
  - May cause scapular winging.
  - Associated with acute, excruciating, unilateral shoulder pain.
  - All of the above are true.
- What is not true about Klumpke palsy?
  - This condition involves the lower root nerves of C8 and T1.

<sup>☆</sup> The Key to Neurotrauma Quiz can be found in online version of issue (June 2014).

- b) Sensory deficit is to the ulnar side of the forearm, hand, and ulnar 1.5.
- c) Seen following breech delivery.
- d) Complete flexion of distal interphalangeal joints'.
14. Loss of sensation from the tip of the index finger is indicative of injury to which nerve?
- a) Radial
- b) Median
- c) Ulnar
- d) Musculocutaneous
15. In a case of Erb's palsy, where roots C5 and C6 of the brachial plexus are avulsed which muscle is paralyzed?
- a) Latissimus dorsi.
- b) Pectoralis minor.
- c) Supraspinatus.
- d) Trapezius.

Pradipta Tripathy\*

Professor, Department of Neurosurgery,  
Ayush Hospital & Trauma Care, Bhubaneswar, Odisha, India

Yashbir Dewan

Senior Consultant, Max Institute of Neurosciences, Dehradun,  
Uttarakhand, India

\*Corresponding author. Tel.: +91 9439831761.

E-mail address: [pradipta\\_tripathy@yahoo.com](mailto:pradipta_tripathy@yahoo.com)

Available online 11 June 2014

<http://dx.doi.org/10.1016/j.ijnt.2014.05.006>

0973-0508/Copyright © 2014, Neurotrauma Society of India. All rights reserved.

**Key to Neurotrauma Quiz – June 2014**

Number	Question	Key
1	For brachial plexus reconstruction purposes what is not true?	d
2	In obstetrical brachial plexus palsy a paralyzed diaphragm, determined by the inspiratory/expiratory chest x-ray, indicating the phrenic nerve dysfunction, which of the following is contraindicated?	a
3	What is not true about an intercostal nerve?	b
4	What is not true about Erb–Duchenne palsy?	c
5	Oberlin transfer technique is?	b
6	The procedure of neurotization consists of?	a
7	What is not true about Spinal accessory nerve to suprascapular neurotization?	d
8	In the axilla the pectoralis minor is a landmark, being closely related to all of the following structures except:	a
9	In a case of Erb's palsy, which muscle is paralyzed?	c
10	The axillary nerve arises directly from which part of the brachial plexus?	d
11	What is not true about Klumpke palsy?	d
12	Which statement is true for Parsonage–Turner Syndrome?	d
13	What is not true about Klumpke palsy?	d
14	Loss of sensation from the tip of the index finger is indicative of injury to which nerve?	b
15	In a case of Erb's palsy, where roots C5 and C6 of the brachial plexus are avulsed which muscle is paralyzed?	c