Station 1

A 72 years lady is suffering from inability to sit, to stand & to walk .She is only relieved on lying flat .Examination elicited a localized severe pain on taping in mid lumbar spine .Her MRI shows wedge fracture .

Which level is the wedge fracture based on (figures 1.1&1.2)?

Which type of radiology is used in above figures ?

Vertebroplasty was decided.What is the usual gauge needle used in vertebroplasty ?

What is the usual volume of cement injected ?

Vertebroplasty under C arm caused severe left sided leg pain .Real time screening with unionized dye (omnipaque300)delineated left nerve root (figure 2.01); procedure abandoned .

Why bilateral Selective Nerve Root Block was later performed ?

(Figures 2.26& 2.47).

STATION 2

A middle age man is suffering from pelvic pain one year after abdominoperineal resection for cancer rectum. He has had chemotherapy & radiotherapy following surgery .Intervention is decided to relief his pevic pain .

Figure 1 & 2 show the main neurolytic block.

What is the name of the block ?

Mention type of solution, volume & concentration ?

Elaborate on common complications of this neurolytic block ?

Figure 3 & 4 show an additional block ?

What is the name of the block ?

Mention type of solution , volume & concentration ?

Station 3

A 53 years lady is suffering of right radicular pain reaching the thumb .

She refused any further pharmacological treatment .

What is the test used to confirm cervical radicular pain& how can you elicit it?

Hyperpathia & hyperalgesia is provoked on examination.

What does these words mean &what does it denote ?

Which type of sagittal xray is associated & what level nerve is potentially compressed ?

Figure one & two show the intervention under C arm .

What is the position of patient &what is the name of the procedure ?

Kindly mention the machine set up used for your therapeutic intervention ?

Station 4

A 40 years man is suffering from back & leg pain 8 years after laminectomy .

His main complain is inability to stand & to walk .

On examination he has positive Straight Leg Raising (SLR) on left side

Tender left Sacroiliac joint & painful left pyriformis muscle .

Describe how to test for lower radiular lumbar pain ?

Describe How to test for sacroiliac joint tenderness & Pyriformis pain ?

What is the intervention in figure 1?

How can you avoid spinal tap?

What is the intervention in figure 2 & 3 ?

What are the drugs & volume/concentration used in such syndrome ?

Denervation of Sacroiliac joint is decided.

Mention the detailed branches of nerve roots involved in order to have prolonged successful pain relief ?

Station 5

A lady under Rivaroscaban (XARELTO 10mg) for the prevention of venous thromboembolism is for emergency total hip replacement.

What is the mode of action of Rivaroscaban?

How can you rapidly prepare the patient for the operation?

Central neuroaxial was excluded and fascial block was decided.

What are the names given for the below numbers:

1

2

3

4

5

6

Describe the technique.

Station 6

J. aged 28 years suffers from pain all along the right arm up to mainly the middle & index finguer particularly on abduction . She has always attacks of pain & numbness on manual work or when she carries her 3 years daughter . Occasionaly pain is associated with bluish colouration of the hand .

EMG : - Delayed F wave latency of right Median Nerve .

- Reduced amplitude of right Ulnar nerve on stimulation on abduction .

Enclosed the plain xray of the cervical spine .

What is the anomaly in such xray ?

Is stellate the ideal treatment ?

A surgery to relieve the compression was decided to relieve the proximal compression (Thoracic Outlet Syndrome).

What is the name of the operation ?

In relation to the first rib tick only the correct statement :

The subclavian artery is anterior to anterior scalene ……

The subclavian vein is posterior to anterior scalene ……

The subclavian artery is posterior to anterior scalene …….

Brachial plexus is medial to subclavian artery ……

How can you rationalize/explain the blue colouration of the hand& why ?

Station 7

A 20 years student is suffering from metastatic breast cancer .She had right radical mastectomy 2years ago followed by both chemo & radiotherapy .

Recently she received radiotherapy for bony metastasis affecting her 2nd&3rd lumbar vertebra & her right upper femur .

Nowadays she has attacks of severe shooting pain in the right upper thigh as shown in the enclosed diagram despite the below medications :

50µg fentanyl patch

100mg long acting tramadol twice daily

1gm paracetamol twice daily

75mg pregabalin twice daily

What is defective in the current medication ?

How can you explain the development of her recent shooting annoying pain ?

How can you improve her pain status ?