



ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Fellowship Examination 2011

# Neurosurgery

## Written Paper One

Tuesday 12 April 2011

Reading Time: 10 Minutes

Writing Time: 2 Hours

### QUESTION BOOK

<i>Section</i>	<i>Number of Questions to be Answered</i>
One - Essay Questions	1
Two - Short Answer Question	2

**Candidates are permitted to bring into the examination room:**

- Pens
- Pencils
- Erasers

**Candidates are not permitted to bring into the examination room:**

- Blank sheets of paper
- White-out liquid/tape

**Materials supplied:**

- Question Book of 3 pages
- Answer Book

**Instructions to candidates:**

- Write your candidate number on the front of each Answer Book.
- Write your response in the Answer Book provided.
- All answers must be written in English.

At the end of the examination, candidates are to leave the Question Book and Answer Book on their desk.

Candidates are not permitted to remove the Question Book from the examination room.

**Candidates are NOT permitted to bring mobile phones and/or any other unauthorised devices into the examination room.**

:

## **Section One: Essay Question**

**Write your response in the answer book provided.**

**Clearly number the question you are answering.**

### **Question 1**

Removed due to copyrighted image

## **Section Two - Short Answer Questions**

**Write your response in the answer book provided.**

**Clearly number the question you are answering.**

### **Question 2**

Write brief notes on:

- (A) The indications for intracranial pressure monitoring (ICPM) following closed head injury. Discuss the different methods of ICPM (pros and cons)
- (B) Discitis following lumbar discectomy. Prevention, diagnosis and management.
- (C) Mesial sclerosis and temporal lobe epilepsy
- (D) Management of intraventricular haemorrhage in premature neonates.
- (E) Investigation and medical management of Trigeminal Neuralgia

### **Question 3**

Discuss the anatomy of the supraclinoid internal carotid artery including its branches and their distribution. Include a discussion of the embryology of the posterior communicating artery and the clinical significance of a persisting foetal pattern.



ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Fellowship Examination 2011

# Neurosurgery

## Written Paper Two

Tuesday 12 April 2011

Reading Time: 10 Minutes

Writing Time: 2 Hours

### QUESTION BOOK

<i>Section</i>	<i>Number of Questions to be Answered</i>
One - Essay Questions	2
Two - Short Answer Questions	1

**Candidates are permitted to bring into the examination room:**

- Pens
- Pencils
- Erasers

**Candidates are not permitted to bring into the examination room:**

- Blank sheets of paper
- White-out liquid/tape

**Materials supplied:**

- Question Book of 4 pages
- Answer Book

**Instructions to candidates:**

- Write your candidate number on the front of each Answer Book.
- Write your response in the Answer Book provided.
- Clearly number the question you are answering.
- All answers must be written in English.

At the end of the examination, candidates are to leave the Question Book and Answer Book on their desk.

Candidates are not permitted to remove the Question Book from the examination room.

**Candidates are NOT permitted to bring mobile phones and/or any other unauthorised devices into the examination room.**

## **Section One – Essay Questions**

**Candidates are required to write one extended response for each question in the Answer Book provided.**

**BOTH questions are to be answered.**

### **Question 1 & 2**

Removed due to copyrighted image

## **Section Two – Short-Answer Question**

**Write your response in the Answer Book provided.**

**Clearly number the question you are answering.**

### **Question 3**

Write brief notes on:

- (A) The incidence, time course and management of cerebral vasospasm following subarachnoid hemorrhage
- (B) Assessment and management of thoracolumbar fracture following trauma.
- (C) Tethered cord syndrome in childhood
- (D) Management of tardy ulnar palsy (suspected entrapment at the elbow)
- (E) Clinical spectrum of cryptococcal infection in the CNS.