FMGE June ‘26

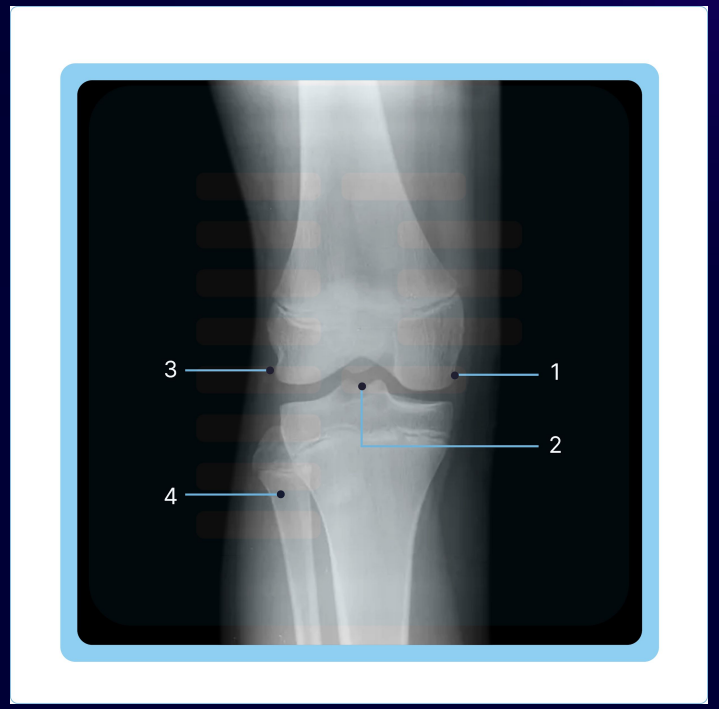
RECALL SESSION

A Mega Recall Session By India’s Top Educators

Orthopedics

Q. A 45-year-old construction worker presents to the emergency department after falling from a ladder and landing squarely on the lateral aspect of his right knee. An X-ray reveals a displaced fracture of the proximal fibula. Two weeks later, he returns to the clinic complaining that his foot feels "heavy" and he notices a "slapping" sound when he walks. He also reports a pins-and-needles sensation running down the front of his shin and onto the top of his foot. On physical examination, you note that he is unable to actively raise his toes off the ground, and when he tries to walk, his toes drag. Testing of his ankle reveals normal plantarflexion and normal inversion strength. He has decreased light touch sensation over the anterolateral shin and the dorsum (top) of his foot. Which of the following nerves is most likely injured?

a. Tibial nerve
b. Deep peroneal nerve
c. Superficial peroneal nerve
d. Common peroneal nerve



Orthopedics

Q.A 32-year-old office worker presents to the clinic complaining of a "clumsy" right hand. She states that she frequently drops her coffee mug and has difficulty holding a pen. She also mentions that she feels numbness and tingling on the thumb side of her palm and her index finger. Upon physical examination, you ask her to make a fist. She is able to curl her ring and pinky fingers tightly, but her index finger and thumb remain extended, pointing straight out. Additionally, she has significant weakness when trying to touch the tip of her thumb to the tip of her pinky finger.

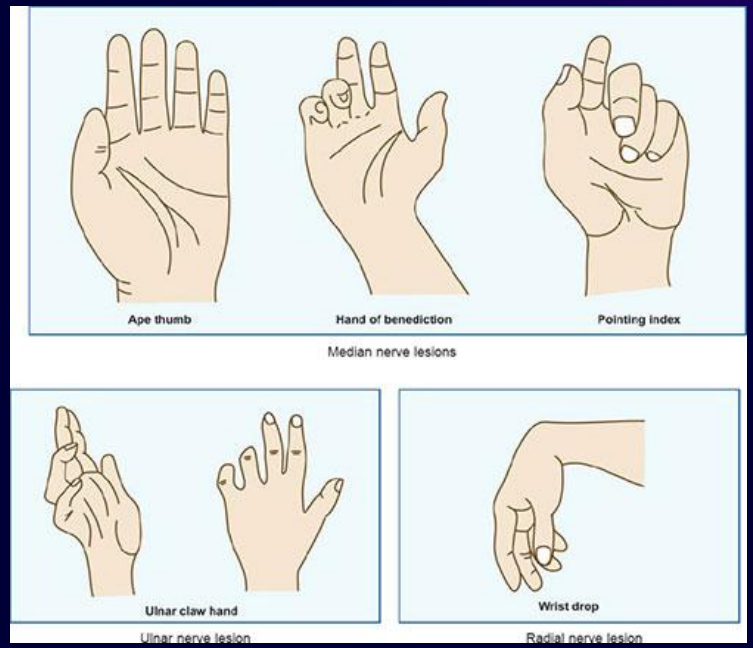
Which of the following nerves is most likely responsible for this patient's symptoms?

A. Radial nerve

B. Ulnar nerve

C. Median nerve

D. Musculocutaneous nerve



Orthopedics

Q.A 45-year-old woman presents with nocturnal burning pain and tingling in her right thumb, index, and middle fingers, which she often relieves by shaking her hand. Compression of which nerve is responsible for this patient's symptoms?

A. Radial nerve

B. Ulnar nerve

C. Median nerve

D. Musculocutaneous nerve

Orthopedics

Q. A 14-year-old boy from a rural area is brought to the orthopedic clinic by his parents. He has a history of a congenital foot deformity that was never treated during infancy. On physical examination, he has a fixed, rigid equinovarus deformity of his right foot. He walks on the lateral border of his foot and has significant pain with ambulation. Radiographs demonstrate severe structural adaptation of the tarsal bones with degenerative changes in the subtalar and transverse tarsal joints.

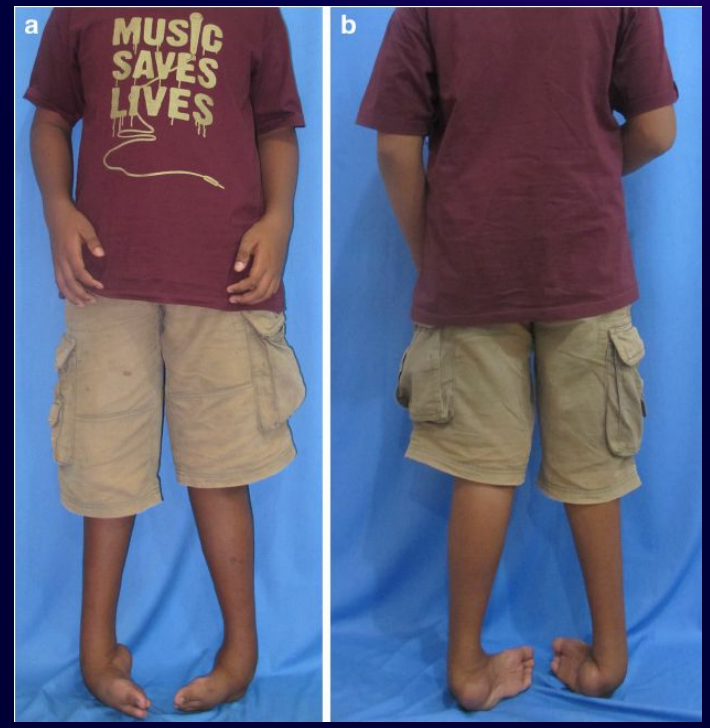
Because the patient has passed the window for soft tissue correction, surgical management is planned to provide a stable, painless, plantigrade foot. Which of the following surgical procedures is the definitive treatment of choice for this patient?

A. Ponseti casting and percutaneous Achilles tenotomy

B. Turco posteromedial soft tissue release

C. Triple arthrodesis

D. Ilizarov external fixator application alone



Orthopedics

Q. A 45-year-old man is brought to the emergency department after sustaining a mid-shaft humerus fracture during a fall. On examination, he is unable to actively extend his wrist or his metacarpophalangeal (MCP) joints, resulting in a "wrist drop" deformity. Which nerve has been injured?

A. Axillary nerve

B. Median nerve

C. Radial nerve

D. Ulnar nerve

Orthopedics

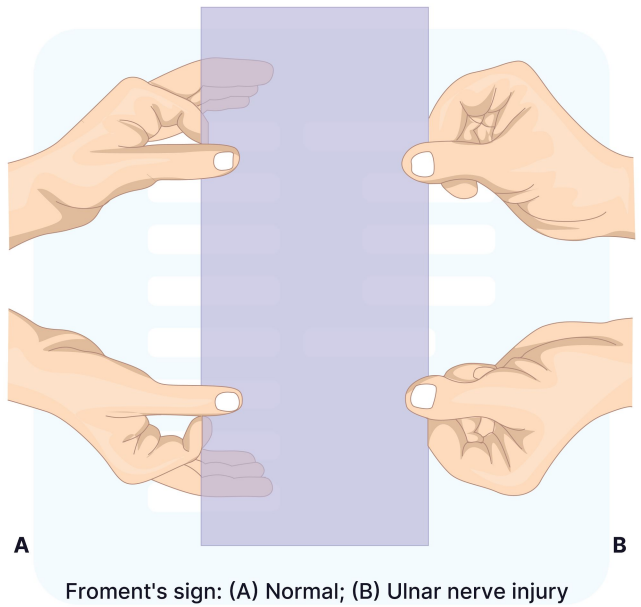
Q. A 48-year-old man presents with weakness in his right hand and noticeable muscle wasting in the web space between his thumb and index finger. On physical examination, the patient is asked to hold a piece of paper between his thumb and the radial side of his index finger while the examiner attempts to pull it away. The patient compensates by flexing his thumb at the interphalangeal (IP) joint to maintain his grip. Which peripheral nerve is most likely injured in this patient?

A. Radial nerve

B. Ulnar nerve

C. Median nerve

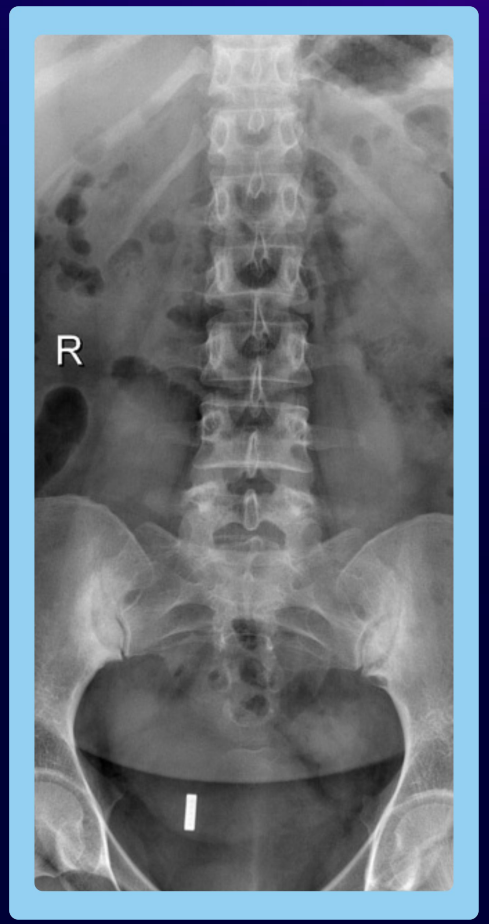
D. Musculocutaneous nerve



Froment's sign: (A) Normal; (B) Ulnar nerve injury

Orthopedics

Q. A 28-year-old man presents with chronic, aching low back pain that is worse in the morning and improves with activity. On physical examination, the patient is placed in a supine position. The examiner flexes, abducts, and externally rotates the patient's hip, placing the ipsilateral ankle on the contralateral knee. This maneuver reproduces the patient's deep gluteal pain. Which of the following conditions is most likely responsible for this positive provocative test?



A. Lumbar disc herniation

B. Osteoarthritis of the hip

C. Sacroiliitis

D. Trochanteric bursitis

THANK YOU