

Past Papers

- 1) Page #3 Q21:-
Option B is wrong also NOT only c (oogonia reaches the maximum # by the 5th month NOT the 7th).
- 2) Page #6 Q18:-
Adductor polices is supplied by the ulnar nerve (true).
- 3) Page #6 Q22:-
Winged scapula results from injury of long thoracic nerve (thoracodorsal nerve innervates latissimus dorsi muscle, we haven't taken this with dr Mahir).
- 4) Page #7 Q38:-
answer is true.

Lower Limb

Sheet # 16:-

- 1) Page #2: condyles of femur for articulation with tibia only.
- 2) Page #4: the vomiting thing I believe it's better to delete it , since the dr didn't mention it.
- 3) Page #5: sartorius action is lateral rotation of the thigh NOT medial rotation.
- 4) Page #6: rectus femoris action is extension of knee joint and assists in flexion of hip joint.
- 5) Page #6: origin of vastus intermedius: anterior surface of femur (NOT written)
- 6) Page #6: about quadriceps femoris all heads originate from femur except rectus femoris from anterior inferior iliac spine.

sheet # 17:-

- 1) Page #8: origin of the hamstring part of adductor magnus is ischial tuberosity NOT ischial ramus.

sheet # 19:-

- 1) Page #7: external iliac artery continues as femoral artery not nerve.
- 2) Page #9: biceps femoris long head also extend the hip joint.

sheet # 20:-

- 1) Page #7: the deep fascia of the leg (NOT foot) sends 3 septa divide the leg into 3 compartments.
- 2) Page #7: lateral comp is for eversion of foot NOT inversion.

Upper Limb

Sheet #4:-

- 1) Page #4: axillary vein will begin at the level of the lower border of teres major NOT minor.

Slides #4:-

- 1) Slide #40 where the pyramid figure is opposite to what the figure in slide #41 says . The correct answer according to gray's is that the central group will receive lymph from lateral , anterior , posterior groups then this lymph will be sent to the apical group , as well the infraclavicular group will send lymph to the apical group then all the lymphs in the apical group will be sent to the subclavian lymph trunk.

Sheet #7:-

- 1) Page #3: line 2 it is flexion NOT extension.
- 2) Page #4: Ulna decreases in size from distal to proximal NOT increases.
- 3) page #4: last line in the box , to move the wrist laterally NOT medially.
- 4) page #5: long head of biceps brachii originates from supraglenoid tubercle of the scapula NOT humerus.
- 5) Page #6: action of the coracobrachialis assists flexion of the shoulder joint NOT elbow joint.
- 6) Page #6: Insertion of the brachialis coronoid process of ulna and tuberosity of ulna NOT coracoid.

Sheet #8:-

- 1) Page #2: Ulnar nerve and median nerve don't supply any muscle in the UPPER arm Not the arm.

Sheet #10:-

- 1) Page #5: the insertion of flexor carpi ulnaris is NOT just pisiform but also the hamate and 5th metacarpal bones.

Sheet #11:-

- 1) Page #3: Palmar branch of median N passes above the flexor retinaculum NOT below it.
- 2) Page #6: ulnar nerve supplies one and half muscles of the anterior compartment of the forearm (FCulnaris & ulnar side of FD profundus).
- 3) Page #7: Deep branch of the radial N is named like this while its within the supinator but the continuity is called posterior interosseous N (NOT as written after the two stars **).
- 4) Page #10: Radial artery passes between two muscles : Extensor Brachioradialis (NOT Flexor) and Flexor carpi radialis).
- 5) Page #11: as the dr said that nerves , arteries & veins move in both sides of the fingers.

Embryology

Sheet #9:-

- 1) Page #4 : there's nothing called 184 chrmatids so they're 46 chromosomes with 92 chromatids after duplication.
- 2) Page #5 : all books agree that after meiosis I the cell with become a haploid cell EXCEPT iron-man -_- so follow him.

Sheet #14:-

- 1) Page #7: at birth it's 2 million.

Sheet #21:-

- 1) Page #4: again dr.Mahir contradict science and he says that after meiosis I the cell remains diploid. It's totally wrong but follow him.