



RASHIDA IQBAL FINANCIAL AID ORGANIZATION

GUIDELINES OF ANATOMY FOR 1ST YR PROFESSIONAL EXAMS

BY AHMAD HASSAN BHAI

Anatomy

- For anatomy viva you almost have to go through each and everything except histo and GA (there is no need for it).
- HOD can keep either models or specimen, limbs and he can ask for spotting, and sometimes he'll just ask you a single question aur bhej den ga aur kbhi kbhi dant bhi deta so it's your luck 😊
- Ps Dr Tahzeeb mostly don't fail, asks simple questions and internal assement unke lea matter krti ha. And if you forgot your roll number slip or sketch copy then most probably he won't be taking the viva so keep it with you and ghalat answer dena se bhtr ha sorry bool den.

• Before going for viva there used to be question for surface landmarks, mostly sir tariq used to take it, in which you are asked to draw the surface landmarks on model but don't know whether its included in the modular system or not

IMPORTANT QUESTIONS for viva includes

UPPER LIMB :-

- AXILLA BOUNDARIES AND CONTENTS
- MOVEMENTS OF SCAPULA (V.IMP)
- ALL NERVE INJURIES
- CARPAL TUNNEL SYNDROME
- MUSCLES FOR PRONATION AND SUPINATION
- LYMPHATIC DRAINAGE OF BREAST
- CUBITAL FOSSA
- SUPERFICIAL AND DEEP PALMAR ARCHES
- VENOUS N LYMPHATIC DRAINAGE (AIK TU MUST AATI HAI)
- DINNER FORK DEFORMITY
- ATTACHMENTS OF FLEXOR RETINACULUM AND CONTENTS IN AN ORDER PASSING BENEATH IT EXTENSOR RETINACULUM (COMPARTMENTS AND CONTENTS)

LOWER LIMB :-

- FEMORAL TRIANGLE(BOUNDARIES AND CONTENTS)
- FEMORAL CANAL (BOUNDARIES) [BETTER PREPARE THE DIGRAM FROM BD]
- ADDUCTOR CANAL
- ENUMERATING LIGAMENTS OF KNEE JOINT
- ANTERIOR AND POSTERIOR DRAWER'S SIGN
- MOVEMENTS OF HIP +MUSCLES
- MOVEMENTS OF KNEE AND MUSCLES
- MUSCLES FOR INVERSION/EVERSION ... DORSIFLEXION/PLANTAR FLEXION

- ALL NERVE INJURIES
- DORSALIS PEDIS ARTERY ARCHES (MORE IMP IN VIVA)
- FRACTURE OF HEAD OF FEMUR N NECROSIS POPLITEAL FOSSA

THORAX :-

- ANY MEDIASTINUM BOUNDARIES AND CONTENTS .
- LUNGS BRONCHOPULMUNARY SEGMENTS DRAW..NAME...WHICH AFFECTED WHEN .
- ASPIRATION OF FOREIGN BODIES .
- MEDIASTINAL SHIFT .
- RT ATRIUM or anyother part of heart
- INTERCOSTAL NERVE COURSE .
- OESOPHAGUS CONSTRICTIONS N WHY ARE THEY PRESENT
- VAGUS N PHRENIC NERVE (COURSE N RELATIONS) .
- CARINA AND ITS SIGNIFICANCE .
- BLOOD SUPPLY OF HEART N WHICH BLOOD VESSEL SUPPLYING THE HEART IS MOST COMMONLY BLOCKED N THE ORDER FROM MOST COMMONLY BLOCKED TO LEAST COMMONLY BLOCKED
- THORACOCENTESIS V V IMP .
- DRAWING ROOT OF LUNG .
- FUNNEL N PIGEON CHEST .
- CHEST TUBE/ THORACOCENTESIS / PLEURAL TAP
- TETRALOGY OF FALLOT

* THE CLINICALS , SCENARIOS AND MCQS FROM BD (APPENDIX THAT IS)

For ospe RAWALPINDI MEDICAL UNIVERSITY

Ospe includes observed and unobserved stations but in anatomy there won't be any observed stations. It just includes unobserved stations in which model or specimen will be present and you have to identify the muscle, nerve, artery or it can be a bone or tendon, besides you have to prepare the diagrams from KLM EMBRYOLOGY as they can also be asked in

stations. For histology slides try to go through the following link (they are imp)

<https://drive.google.com/folderview?id=13Na4ZjV7LIHf8M4h7zkfYPwt-f-76a4P>

*if you are unable to open the link then simple copy paste it in Google search bar

- Ospe also includes radiographs so you must prepare them well

