Viva Voce

Viva Voce – Back

Surface Landmarks (Q1–10)

Q1. Which vertebra is called vertebra prominens?
? C7.

Q2. Which vertebral level corresponds to the spine of scapula?
? T3.

Q3. Inferior angle of scapula corresponds to which vertebra?
? T7.

Q4. What is Tuffier's line and its significance?
? Intercristal line (joining iliac crests) ? passes through L4 ? landmark for lumbar puncture.

Q5. PSIS dimples correspond to which vertebral level?
? S2.

Q6. Where is sacral hiatus located and what is its clinical use?
? Lower end of sacrum; landmark for caudal epidural anesthesia.

Q7. Vertebral level for termination of spinal cord in adults?
? L1–L2.

Q8. Vertebral level for termination of spinal cord in children?
? L3.

Q9. Vertebral level corresponding to external occipital protuberance?
? Level of superior nuchal line attachment; palpable landmark for trapezius.

Q10. Which surface landmark is used for identifying T7 vertebra?
? Inferior angle of scapula.

Skin & Fascia (Q11–15)

Q11. Cutaneous innervation of skin of back is by?

? Posterior (dorsal) rami of spinal nerves.

Q12. Why is back skin prone to acne?

? Rich in sebaceous glands.

Q13. What is thoracolumbar fascia?

? Thickened deep fascia in lumbar region with posterior, middle, anterior layers.

Q14. Clinical importance of thoracolumbar fascia?

? Provides attachment for latissimus dorsi, transversus abdominis, internal oblique; transmits mechanical stresses.

Q15. Which fascia continues upward as ligamentum nuchae?

? Deep fascia of cervical region.

Superficial Muscles (Q16–25)

Q16. Nerve supply of trapezius?

? Spinal accessory nerve (motor), C3–C4 ventral rami (sensory).

Q17. How do you clinically test trapezius?

? Ask patient to shrug shoulders against resistance.

Q18. Action of trapezius in overhead abduction of arm?

? Upper and lower fibers rotate scapula upward.

Q19. Nerve supply of latissimus dorsi?

? Thoracodorsal nerve (C6–C8).

Q20. How do you test latissimus dorsi clinically?

? Ask patient to adduct/extend arm against resistance (as in climbing).

Q21. What is surgical importance of latissimus dorsi?

? Used in muscle flap for breast reconstruction.

Q22. Nerve supply of levator scapulae and rhomboids?

? Dorsal scapular nerve.

Q23. Action of rhomboids?

? Retract and stabilize scapula.

Q24. What happens if dorsal scapular nerve is injured?

? Lateral displacement of scapula due to rhomboid paralysis.

Q25. Which muscles form posterior axillary fold?

? Latissimus dorsi and teres major.

Intrinsic Muscles (Q26–32)

Q26. Which muscles form erector spinae group?

? Iliocostalis, longissimus, spinalis.

Q27. Which muscles form transversospinalis group?

? Semispinalis, multifidus, rotatores.

Q28. Nerve supply of intrinsic back muscles?

? Dorsal rami of spinal nerves.

Q29. Main action of erector spinae?

? Extension of vertebral column.

Q30. Clinical condition due to strain of erector spinae?

? Lumbago.

Q31. Which muscles stabilize vertebrae during movements?

? Transversospinalis group.

Q32. Which small segmental muscles assist fine adjustments?

? Interspinales, intertransversarii, levatores costarum.

Clinical Anatomy (Q33–40)

Q33. What is Pott’s spine?

? Tuberculosis of vertebrae producing kyphosis.

Q34. What is scoliosis?

? Lateral curvature of spine with rotation.

Q35. What is kyphosis?

? Exaggerated posterior curvature of thoracic spine.

Q36. What is lordosis?

? Exaggerated anterior curvature of lumbar spine.

Q37. Why does disc herniation cause back pain radiating to limbs?

? Herniated disc compresses spinal nerve roots.

Q38. What is the nerve lesion in shoulder droop?

? Accessory nerve ? trapezius paralysis.

Q39. What is the nerve lesion in difficulty climbing/rowing?

? Thoracodorsal nerve ? latissimus dorsi paralysis.

Q40. Which nerve is affected in scapular instability (lateral displacement)?

? Dorsal scapular nerve (rhomboids).