

4<sup>th</sup> PROFESSIONAL MBBS ANNUAL EXAMINATION 2020 OPHTHALMOLOGY

(SEQ's)

Time Allowed: 2 HOURS

Roll No. \_\_\_\_ Total Marks: 45

Instr	

- Attempt all questions.
- 2. All question carry equal marks.
- 3. The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
- Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper.
- Do not write your name or disclose your identity in anyway.
- A 20 years female presented with a small nodule at her left upper eyelid margin with severe pain, watering & redness for last 3 days
  - a) What is your diagnosis? 1
    b) What is pathogenesis of this condition? 2
  - c) How will you manage this patient?2
- A 50 years old lady has come with severe pain and redness in right eye for last 4 days, associated with vomiting. On ocular examination, there is ciliary congestion, cornea is hazy and pupil mid-dilated, oval and nonreacting to light. She gives H/O episodes of halos around light and decreased vision.
  - a) What is the most probable diagnosisb) Give differential diagnosis of red eye
  - c) How will you manage this patient

2

3. A patient presented with severe pain and decreased vision in his left eye 3 days after phacoemulcification, on examination his vision is

decreased, anterior chamber is full of grade 4 cells with hazy fundus view. The red reflex is absent and there is hypopyon in the anterior chamber.

- a) What is your diagnosis?
- b) Name the commonest pathogens responsible for this condition.1
- c) How you will manage this patient?
- 4. A young laborer has come to an eye clinic with complaints of splashing of his eyes with lime while whitewashing roof of a room followed by intense pain, redness, hazy vision and watering from his eyes.
  - a) What type of chemical burn do you suspect in this case? 1
  - b) How will you manage this condition

1

			a)	What is most likely diagnosis?	1
			b)	What is differential diagnosis of epiphora at this age?	
			c)	Briefly discuss management of this case.	
			d)		
	6.	painle	ss	ar old women presents in the eye out patient with loss of vision of her left eye for last 6 months. She notic lem gets aggravated in bright sunshine. There was no e.	ced that
			a)	What is most likely diagnosis?	1
			b)	How will you confirm the diagnosis?	2
			c)	How will you manage this case?	
			d)		
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	7.	photo used t	pho tap		and she
	7.	photo used t pseud	pho tap lod	obia and blurring of vision. She is a contact lens wearer a water to clean the lenses. On examination there are	and she
	7.	photo used t pseud	photap lod a)	obia and blurring of vision. She is a contact lens wearer a water to clean the lenses. On examination there are endrities on cornea.	
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	8.	A mot of his  a) b) A 10 y both e seaso	photaplod a) b) c) therefore peace a) b)	obia and blurring of vision. She is a contact lens wearer as water to clean the lenses. On examination there are lendrities on cornea.  What is the diagnosis?  What is the differential diagnosis?  How would you treat this patient?  In brought her 6 months old infant with complaints of devices. On examination the right eye is deviated inwards.  It is most probable diagnosis at this age would be?  It is condition.  It is old boy presented with ropy discharge and severe itch is, his mother states that the symptoms aggravate in sun.  What is the most probable diagnosis?	1 2 2 iation 1 4 ing in nmer 1
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5. A mother brought her 3 month baby with complaints of watering from his right eye since birth. There is no history of any birth trauma:

of his eyes with lime while whitewashing roo		laborer has come to an eye clinic with complaints of sp yes with lime while whitewashing roof of a room follo pain, redness, hazy vision and watering from his eyes.	2 10 10 1 10 1 10 10 10 10 10 10 10 10 10
	a)	What type of chemical burn do you suspect in this case?	1
	b)	How will you manage this condition	4
5.		r brought her 3 month baby with complaints of watering t eye since birth. There is no history of any birth trauma:	from
	a)	What is most likely diagnosis?	1
	b)	What is differential diagnosis of epiphora at this age?	
	c)	Briefly discuss management of this case.	
	d)		
6.	painless	ar old women presents in the eye out patient with loss of vision of her left eye for last 6 months. She notice lem gets aggravated in bright sunshine. There was no rese.	ced that
	a)	What is most likely diagnosis?	1
	b)	How will you confirm the diagnosis?	2
	c)	How will you manage this case?	
	d)		

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	c)	How you will manage this patient?	3
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decreased, anterior chamber is full of grade 4 cells with hazy fundus view. The red reflex is absent and there is hypopyon in the anterior

- 1. A patient had undergone phacoemulsification surgery 3 days back, presented with severe pain and decreased vision in that eye, he. On examination anterior chamber has flare and grade 4 cells and hypopyon and there is no fundus view:
- a) What could be the most probable diagnosis?

1

- b) Name commonest pathogen involved in this condition.1
- c) What treatments options do we have for this patient?
- a) Diagnosis AcutePostoperativeEndophthalmitis

Scanned with CamScanner

1. An 18 year old male patient complaints of loss of vision like a curtain falling in-front of his Left eye, he has an old history of refractive error. On examination there is decreased vision and field defect. RAPD is present in the left









eye and on fundus examination there is a break at the superotemopral quadrant of retina. What is the most probable a) 1 diagnosis? What are the differential b) diagnosis of this condition? 2 What are the types of retinal 2 detachment? a) Dx: Rhegmatogenous Retinal detachment Scanned with CamScanner A 55 years old farmer 3. presented in eye out patient with a pinkish mass encroaching on black of his eyes for last few months. His distant vision is normal and he uses glasses for reading and there is no H/O trauma: a) What is most probable diagnosis? 1 How will differentiate it from b) other similar lesions? 1 What are treatment options for this patient? 2 d) What are indications for surgery in this condition?

- 4. A 60 years old female patient presented in ophthalmic emergency, with severe pain in her right eye, associated with headache and projectile vomiting. On examination, there is ciliary congestion, cornea is hazy and pupil is mid-dilated, oval and non-reacting to light. She gives past history of halos and decreased vision.
- a) The most probable diagnosisis?
- b) How will you manage this patient?

4

#### a) Acute Angle Closure Glaucoma

Scanned with CamScanner

5. An eight years old boy is brought to the physician 3 days back after sustaining a small laceration of the left eyebrow. His temperature is 102.6F. Examination shows erythema and edema of the left eyelid and periorbital region with moderate proptosis and decreased ocular movement. Eye movements are painful.

- a) What is your diagnosis?
  1
  b) What is pathogenesis of this condition?
  c) How will you manage this case?
  2
- a) Dx: Orbital Cellulitis

Scanned with CamScanner

- 6. A patient presented with sudden unilateral loss of vision, pain and defective colour vision of his left eye. On examination visual acuity 6/6 in right & 6/60 in left eye with positive RAPD, Fundus is normal and extra ocular movements are painful, there is enlargement of blind spot on V/F examination.
- a) What is your diagnosis?

1

- b) Write down the differential diagnosis?2
- c) What is the best possible treatment? 2
- A) diagnosis Optic Neuritis.

- 7. An 11 years old child presents in the eye outpatient with redness, chemosis and mucopurulent discharge from left eye followed by right after 2 days. His sister had similar symptoms a week ago. His tarsal conjunctiva shows severe follicular reaction:
- a) What is most likely diagnosis?

1

b) How will you manage this case?

2

- c) Write down preventivemeasures to avoid spread of thedisease? 2
- a) epidemic keratoconjunctivitis (adenovirus)

Scanned with CamScanner

- 8. A 60 year old women presents in the eye out patient with gradual painless loss of vision of her left eye for last 6 months. She noticed that her problem gets aggravated in bright sunshine. There was no redness in her eye.
- a) What is most likely diagnosis?

•	How will you confirm the nosis?	2
	How will you manage this	_
case		
A) D	x: Posterior subcapsular	
Cata	aract (senile Cataract)	
	Scanned with CamScar	ner
early	A twenty year old boy present history of night blindness sind y childhood. One of his elder her is having same problem	
a)	What is probable diagnosis?	
		1
	What clinical findings do you ect on dilated fundus	
	examination of this patient?	
	3	
c)	How will you do genetic	
cour	nselling of the parents	
	1	

A) Diagnosis: Retinitis Pigmentosa

- 10. A child aged 4 years was brought to general physician by the parents complaining of squinted eyes. The child was referred to ophthalmology clinic.
- a. What ocular examinationshould be carried out in the clinic?
- b. What should be the line of treatment in this case?



4th PROFESSIONAL MBBS

#### ANNUAL EXAMINATION 2019

#### OPHER ENDINOTED CAY

SPOS

Roll No. F15-23

Time Allowed: 2 hours

Total Marks: 45

#### Instructions

- The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
- Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper, 2.
- Do not write your name or disclose your identity in anyway.
  - 1. A 60 year old man presents with tired sore eyes with his eyelids crusting in the morning. Sometimes the white of his eye is red. He is otherwise fit and well.
    - a) What is probable diagnosis?

b) What other signs would you look for?

c) How can this condition be treated?

- A 13-year-old boy presented with recurrent irritation and severe itching in his both eyes, he has this complaint since his childhood and his condition gets aggravated in spring and summer season. On examination there are cobblestone papillae on upper eyelid conjunctiva:
  - what is most likely diagnosis?

1

b) What is etiology of this disease?

2

c) How will you manage this case?

2

- 3. A lady brought her 1 year old child and her complaints is that she noticed the whitish opacity in his right eye since birth, the rest of the siblings are normal. She suffered from some viral infection during her pregnancy:
  - a) What is your diagnosis?

d) Give differential diagnosis of leukocoria?

2

c) How will you manage this case?

P.T.O

tin eve OPD with sudden loss or	, IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
4. A 70 year old man presented in eye OPD with sudden 1033 of	dus examination
4. A 70 year old man presented in eye OPD with sudden to eye, he is hypertensive and diabetic for last 30 years, on fund there is generalized ischemia/ paler and a cherry red spot at method is generalized.	nacula.
to a la generalized ischeme, Pos.	1 %
Write down the diagnosis	2
What is the pathogenesis?	
What is the patricial with the treatment.	2
c) Write down the dedant	
5. A 68 years old female presented in outpatient departmen	it with gradual
5. A 68 years old female presented in outpatient apparent of painless decrease in vision in both eyes for the last 2 years.	There is no H/O
painless decrease in vision in both eyes for	
diabetes or hypertension:	
a) "Write down the differential diagnosis."	
in all and explicate a nation of coldinate au feet yet and	eratively?2 (
- Line - tenerative complications of coldinate su	rgery? 2-2,
6. A child of 2 years age was brought to eye OPD. He was diagn	oseu a case or
congenital squint	
a) Classify squint	2
Write down the treatment of congenital squint.	3
The second of th	
Say high (2) as the say high and all the say high and a say high and a say high a say hi	
7. A 55 years old farmer presented with severe pain in his right eye	
his vision was all right 15 days ago when he encountered a vege	
while working in the field. On examination there is decreased vis and painful, cornea is hazy and fluorescein staining is positive	ion, eye is rea
<del></del>	come
What is your diagnosis?	1
b) What is differential diagnosis?	2
c)How will you manage this patient?	2
8. A 62 years old man has come to eye OPD with severe pain in his le	eft eve for last
2 days; the pain is associated with vomiting and headache. On	
there is ciliary congestion, cornea is hazy and pupil is mid-dilated,	
reacting to light. His IOP is 50 mm Hg. He gives past history	
decreased vision in the same eye.	
a. What would be the most probable diagnosis?	1
b. What is emergency/immediate treatment of this case?	2
c. What is long term management of this patient?	2
9.	*
a. What is Optic Neuritis?	1
b. Enumerate its different causes	
The resident House of the second seco	. 2
c. How will you manage a case of retro bulbar optic neuritis	2
c. How will you manage a case of retro bulbar optic neuritis	2

# AZRA NAHEED MEDICAL COLLEGE

# Department of Ophthalmology

**SEND UP 2019** 

SEQ PAPER

Date: 19-09-19

Time allowed: 2 hours

Maximum Marks: 45

- 1. A 24 years female presented with a small nodule at her right upper eyelid margin with severe pain & redness for last 3 days
  - a) What is your diagnosis
    b) What is pathogenesis of this condition
    c) How will you manage this patient
  - A patient presented with severe pain in his left eye 3 days after phacoemulcification cataract surgery. His vision is much decreased, anterior chamber is full of grade 4 cells with hazy fundus view.
    - a) What is your diagnosis?

      b) What precautionary measures are required to avoid such condition? 2

      c) How you will manage this patient?
  - A 60 year man has come with pain in his left eye with decreased vision. There
    is watering and photophobia. On examination there is a typical branching type
    corneal lesion with positive fluorescin staining.
    - a) What is your diagnosis? Epithel 1
      b) What pathogenesis of this disease? 2
      c) How will you treat this patient? 2
  - 4. A 60 year old patient presents with occasional headaches & discomfort in his eyes. On examination his vision was normal, his intra ocular pressure was 30 mm Hg in right & 28 mm Hg in left eye. On fundoscopy he has enlarged optic cup in both eyes.
    - a) What is most likely diagnosis?

      b) How will you further investigate this case

      c) How will you manage this condition

5. An old man of 70 yrs is admitted for cataract surgery	
Name surgical procedures available to treat this patient What are late post operative complications of cataract	it? 2
6. A 30 years old man came to eye opd with intense pain in decreased vision. There is watering and photophobia. On ex- marked perilimbal congestion. Pupil is small and non-rea- eyeball is tender.	camination there is acting to light. The
	ant =
a) What investigations are necessary in this patient.  b) How will you treat this patient  7. Describe briefly clinical features of	to clescits
7. Describe briefly clinical features of	
a) Rhegmatogenous Retinal Detachment	3
b) Diabetic retinopathy	2
8. A 3 year child was thought of having squint by his parents and to the GP clinic. He referred the case to hospital.	
<ul> <li>a) What ocular examination should be conducted in the hos</li> <li>b) What should be the line of treatment in this case?</li> </ul>	
, and a should be the line of treatment in this case?	3
A seven years old boy is brought to the physician 3 days back a small laceration of the left eyebrow. His temperature is 101.6 I shows erytherama and edema of the left eyelid and periorbit moderate proptosis and decreased and painful ocular movement.	Fo. Examination
a) What is most likely diagnosis? b) How will you investigate this case? c) How will you manage this condition?	

## AZRA NAHEED MEDICAL

## THE SUPERIOR UNIVERSITY LAHORE

#### SEND UP EXAMINATION 2018

#### OPHTHALMOLOGY

## Short Essay Questions (SEOs)

Short Essay Questions (SEQS)	
Total Marks	:- 45
Time allowed:- 2 Hours  Date 13	-09-18
A girl of 12 years age presented in the eye out patient with drooping	of his eye
a) What is most likely diagnosis?	1 2 2
c) How will you differentiate between 1 tools	114-
2 A 10 year girl presents with severe itching & ropy discharge from	eyes. Her
That MAP CVIIID LUITS Be TOO MANAGEMENT OF THE PARTY OF T	1 summer
and respond Well to topical to	1
1 What is probable diagnosis:	2
b) What is eitiology of the disease?	2
A 60 years old farmer presented with severe pain in his right eye. It vision was alright 15 days ago when he encountered injury while work field. On examination there is decreased vision, eye is red and painful field.	le told his king in the
	1
a) what is your diagnosis? b) How you will manage this patient?	4
A 57 year old male presents in the eye out patient with gradual pain vision of his left eye for last 6 months. He was operated for cataract eye 1 year ago.	less loss of in his right
	1
a) What is most likely diagnosis?	2
a) What is most likely diagnosis? b) What pre operative assessment will you do in this patient? c) What surgical options are available to treat this case?	2

		70
	An 41 year old lady presents in the eye out patient	department with
	An 41 year old lady presents in the eye out patient difficulty in reading especially small prints, his distance	vision is 6/6 in
5.	An 41 year old lady prescially small prints, his distance	Wo diabetes or
	difficulty in reading of therwise normal. There is no	H/O Lulabetes
	both eyes. His eyes are officially H/O wearing glasses:	
	both eyes. His eyes are otherwise Hypertension. There is no previous H/O wearing glasses:	
		1
	a) What is your diagnosis?	2
	b) What is pathogenesis of the condition?	2
	c) How will you treat this patient?	
	A 16 years old boy presents with night blindness which is prog	gressive in nature.
6.	His father and uncle also have difficulty at night vision.	Presidently the
/	a) What signs will you look for in the retina of this patient	? 1
	b) What is the most likely hereditary pattern?	2
	c) What advice will you give to this patient?	2
		billion of Lucy and St.
A	A 70 years old man presents with sudden painless loss	of vision in his
ت	left eye. Fundus shows dilated veins and haemorrhage	es all over the
	retina:	
	a) What is your diagnosis?	to id majular ordina dedis
1	b) How will you investigate this case?	to lo custad ma week
	c) What complications do you expect in this pateint?	peosis iviais quicora
	- X	
8.	A 25 years old female has come to eye out patient department vin her left eye with decreased vision. There is watering and p	hotophohia On
	examination there is marked perilimbal congestin. Pupil is	small and non-
	reacting to light. The eyeball is tender, on examination there are	
	reacting to light. The cycles	
	What investigations are necessary in this patient	2 0
	How will you treat this parient	3
9.	. Ayoung labourer has come to an eye clinic with splashing of his	
/	while whitewashing roof of a room followed by intense pain	, redness, hazy
	vision and watering from his eyes	
	a) What type of ocular burn do you suspect in this case?	2
	b) How will you manage this condition	3



4th PROFESSIONAL MBBS ANNUAL EXAMINATION 2018

## DPHTHALMOLOGY

SIXON

Roll No. -16

Time Allowed: 2 hours

Total Marks: 45

#### Instructions

The SEQ's part is to be submitted within 2 hours, Extra time will not be given.

Neat Hand Writing use of murgin and marker for headlines will increase the presentation of your paper.

Do not write your name or disclose your identity in anyway.

1.	A 60 year old man presents with tired sore eyes with his eyelids crusting in the
	morning. Sometimes the white of his eye is red. He is otherwise fit and well.

- 3. What is probable diagnosis? b. What other signs would you look for?
  - c. How can this condition be treated?
- 2. An eight years old boy is brought to the physician 3 days back after sustaining a small laceration of the left eyebrow. His temperature is 101.6F. Examination shows arythema and edema of the left eyelid and periorbital region with moderate proptosis and decreased ocular movement. Eye movements are painful.
  - a) What is your diagnosis
  - b) What are the treatment options?

arbitel

3. A patient presented with severe pain and blurring of vision in his operated eye, he phacoemulsification 3 days back. On examination anterior chamber has flare and grade 4 cells and hair line hypopyon and fundus view is hazy:

a) What could be the most propable diagnosis?

b) What treatments options do we have for this patient?

4. A 16 year old girl presented with gradual decrease in vision, on examination visual scuity was 6/24 in the right eye and 6/12 in left eye . The visual acuity got better with pin hole test.

a. Enumerate different types of refractive errors. Define myopia?

b. How will you evaluate & treat a case of refractive error?

Estimated to a shaden whole

3 redeptediation to

	& discomfort in
5. A 70 year old patient complaint of occasional headaches his both eyes .On examination his vision was decreased; pressure was 30 mm Hg in right & 28 mm Hg in left eyes	his intra ocular . On funduscoole
axamination optic cup in both eyes is emarge.	61.
a) What is most likely diagnosis? b) How will you further investigate this case?	2
c) How will you manage this condition?	. 2
5. A patient presented with sudden unilateral loss of vision, pain	and defective color
this left ave on examination visual acuity 6/6 in right	OX 0/00 III lett che
positive RAPD, Fundus is normal and extra ocular move	ments are paiding,
there is enlargement of blind spot on V/F.examination	1
3. What is the diagnosis?	edeman;
b. Write down the differential diagnosis?	2
c. What is the best possible treatment?	
7. A 25 year old male gives history of redness, pain and diminution 5 days. There is also history of low backache for their presentation there is circum corneal congestion, corneal precipitates on endothelium, there are 2+ cells in anterior intraocular pressure is within normal limits. Pupil is small and it	has few keratic
intraocular pressure is within horniar mines.	1
What is your diagnosis?      What investigations are done to evaluate this patient? !	2
c) What treatment is advised in this condition?	2
3. A painter had a lime splash on his face, he presented in opinthal	lmic emergency
3. What is the emergency/ immediate treatment?	1
What is the long term treatment?	3
O year old man presented in eye OPD with sudden loss of vi	sion in his right eye,
se is hypertensive and diabetic for last 30 years, on fundus e generalized ischemia/ paler and a cherry red spot.	xamination there is
3. Write down the diagnosis	1
5. What is the pathogenesis?	2
	1

!/rite down the treatment.

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reparting - 2000.



3rd PROFESSIONAL MBBS ANNUAL EXAMINATION 2017

### **OPHTHALMOLOGY**

(SEQ's)

Roll No. LUIS

The SEQ's part is to be submitted within 2 hours, Extra time will not be given.

Do not write your name or disclose your identity in anyway.

Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper.

Instructions

Time Allowed: 2 hours

Total Marks: 45

(1.) A 10 year old girl presented in eye OPD with lid swelling redness, chemosis	e and water
discharge from eyes. Her siblings had similar symptoms a week ago. Her	
	conjunctiva
a) What is the most likely diagnosis?	1
b) How would u treat this patient?	2
c) What measures should be taken to prevent the spread of the disease?	. 2
. ~ 1~1~	
1 2. An 8 years old boy was brought to eye OPD with history of trauma to let	t eye 3 days
back, sustaining a small laceration of eyebrow. His temperature	Is 101.6 F.
Examination shows erythema and edema of the left eyelid and periorbita	region with
moderate proptosis and decreased ocular movement.	
a) What is differential diagnosis? o-bltal cellulitis	1
b) What is your diagnosis?	1
c) Name one life threating complication?	1
d) Give your treatment plan.	2
- Catalaio la	
(3) A patient presented with severe pain and blurring of vision in his operated	d eye, he had
undergone phacoemulsification 3 days back. On examination anterior	chamber has
flare and grade 4 cells and hair line hypopyon and fundus view is hazy:	
a) What could be the most probable diagnosis?	ritir 1
di windi codio de alle	3
b) What treatments options do we have for this patient?	1
c) Name 3 Important precautions to avoid such complications?	*
COL	at has shild's
4. A mother brought her 1 week old Infant to eye OPD, she complains the	abatanhahia
eyes are large, there is constant lacrimation, cornea is hazy and he is	photophobic
Sittle Dittil vision	ct glancom
a) What is your diagnosis?	1
b) Write down the differential diagnosis of this condition	1
1 U	3

-9	
5. A 45 year old patient complaints of occasional headaches & discon	ofort i
both eyes .On examination his vision was decreased; his intra ocul-	ar press
was 25 mm Hg in right & 28 mm Hg in left eye. On funduscopic of	yaminatio
a) What is most likely diagnosis?	- 1
b) How will you further investigate this case?	2
c) How will you manage this condition?	2
A patient sustained blunt ocular trauma, after that his vision decreased; the	re was,
Unlopia and pain.	
What signs would you notice in this patient of blunt trauma to orbit?	2
b) Write down the treatment of hyphema.	3
TA DUCKE IN	
7.) A 25 year old male gives history of redness, pain and diminution of vision	for past 5
days. There is also history of low backache for the past one year. On example of the past one year.	mination
endothelium, there are 2+ cells in anterior chamber and intraocular pressure	tates on
normal limits	is within
a) What is your diagnosis? Anterior Ovates	1
(a) What investigations are done to evaluate this patient?	2
What treatment is advised in this condition?	2
A ROTTO	
A 5 months old infant was brought to OPD having white pupillary reflex and s	quint in
his right eye, his 2-year-old brother had the same history, his B-Scan showed	whitish
calcification.  a) What is the most likely diagnosis?	act
b) Name 4 differential diagnosis this patient?	1
	2
d) How will you counsel the patient?	1 0
9. A 60-year-old male patient presented in eye OPD with gradual decree	
both eyes. He noticed that his problem aggravated in height libble etter dim light. His vision was 6/12 and 6/18 respectively in a light exceedable and a light with a light was a undus	In
a) What is most likely diagnosis?	
b) How will you confirm this diagnosis?	
c) Name 2 surgical options for this patient.	
d) Name procedure of your 1 <sup>st</sup> . Choice with two justifications?	
ida a Dancona	
Congenital of Iducana	

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(4)V

# AZRA NAHEED MEDICAL COLLEGE Sendup Examination- OPHTHALMOLOGY

4th Year-session 2016-2017

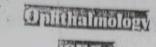
Short Essay Questions (SEQ, s)

Fala Lubha

Time allowed: - 2 Hours Total Marks 45 A patient has undergone cataract surgery for cataract 2 days back, now he presents with decrease in vision and pain in the operated eye, On examination anterior chamber has hypopyon and fundus view is hazy the red glow is absent : a) What could be the most probable diagnosis? b) What treatments options do we have for this patient? 56 years old woman presented to eve OPD with severe pain in her right eye, the pain is associated with vomiting and headache. On examination there is ciliary congestion, cornea is hazy and pupil is mid-dilated, oval and non-reacting to light. She A (whe consessing 9 lence gives past history of halos and decreased vision in the same eye a) What would be the most probable diagnosis? How will you manage this patient? 10 year old man presented in eye OPD with complaints of sudden painless decrease in vision in left eye for the last 4 days, he stated that it started like a curtain falling in front of his eyes; he had myopia since childhood. On funduscopic examination there Bregnatogens + ctiral, was a horse shoe tear in retina superiorly. a) What is the most likely diagnosis? b) What is the classification of this disease? c) What are the signs and symptoms of this disease? Conjectu 5 A 7 year old boy presented in eye OPD with lid swelling redness, chemosis and watery discharge from both eyes. His conjunctive showed follicular reaction, His siblings had U17409 similar symptoms: a) What is the most likely diagnosis? b) How would u treat this patient? c) What measures should be taken to prevent the spread of the disease?

5. A 22 year old male gives history of redness, pain and diminution of vision for past week. There is history of low backache. On examination there is circumcornea congestion, keratic precipitates on endothelium, 2+ cells in anterior chamber and Antirios we alis intraocular pressure is within the normal limits a) What is your diagnosis? 5) What investigations are done to evaluate this patient? What treatment is advised in this condition? 2 A 5 years old boy sustained a small laceration on the right periorbital area. On examination there is erythema and edema of the periorbital region with moderate proptosis and decreased ocular movements. His eye movements are painful. His temperature is 101.6 F. a) What is most likely diagnosis? b) How will you investigate this case? c) How will you manage this condition? A 23 years old girl presents with a painful red eye and increasingly blurred vision for last 2 days. On examination her vision was 6/60 in the right eye. Conjunctiva 5 inflamed and there is a central corneal opacity with small hypopyon. She wore soft Bacteral Conent will es contact lenses on a party 2 days ago What is the most likely diagnosis? What is the differential diagnosis? What is the appropriate treatment for this condition? A child of 2 years age was brought to OPD; he was diagnosed a case of congenital Write down the treatment of congenital squint. りつの「ひん」 a) Enumerate five common causes of optic disc pallor 2.5 b) How will you manage a case of chemical injury

#### 3<sup>rd</sup> PROFESSIONAL MBBS ANNUAL EXAMINATION 2016



Roll No. --

Time Allower	d: 2 hours	PINOS	Total	
			1 013	I Marks: 45
	ert is to be submitted within 2 hours, e enting, use of margin and marker for h your name or disclose your identity in	and Hilliam to the second of t		
			h.	T
o- cotols	الر		- /	
O coxo-				->
0.13 A 9 month	old child was referred	C 1: . :		
something shining	old child was referred	From pediatrics OPD	with complaint of n	nother that there is
listant direct ophi	g (like cat eye) in his F	o ged glow in that ave	ation there was leuki	ocorea in right. On
ye. On Pediatries	evaluation he is otherwis	se a healthy child with	normal mile stones	rea glow in his left
11 What does leuk	ocorea means? Whi his	sh Parpillan v	ette	The ter
i) Give your differ	rential diagnosis of leuko	corestantent ret	noblayteria.	(2)
) How will your	nanage this case? ECCE	Dhecorony	<b>六</b>	(2)
STON				
.2= A boy of 12	years age presented in th	e eye out patient with	drooping of his right	eye lid since early
ildhood:	-14:in D1-c1			time to underlying a
	kely diagnosis? Plose		Surgery faisanells	servatoporter).
	ifferentiate between Ptosi	S & Pseudontosis	Lecutor Sling pro	resection (2)
TION WIT YOUR		s & T seudoptosis?	Aponeu	OHE Strengthing.
	ld farmer presented with	severe pain in his righ		
is non then he	e encountered injury wh	ile working in the ne	ld On examination	
ion, eve is red.a	agnosis? Forgod (Le	Makitic, Transmal	& Veralla	
Vhat is your dia	agnosis? Forgot (F	. 1011 (13)	- termine	(1)
low you will m	nanage this patient?		A PARTY OF THE PARTY.	(4)
1 x00 ml	310.00 ·			
	ld lady has come with sev			
:xamination, th	here is ciliary congestion.	comea is nazy and pur	oil mid-dilated, oval a	nd non-reacting to
. She gives par	st history of halos around	ingit and decreased vis	IN come is by	1 (1)
hat is the mos	t probable diagnosis? Acanage this patient?	a accommode some	7 (A Blones	(4)
- Caren	ace ace	acolonide a topical	of striods to DI	ops de waged me one
A 60 years of	ld patient presented with	gradual painless loss o	Lyision in both eyes.	His visual aquity
5/60 in right	eye and 6/36 in left ey	e. Examination reveal		
Hine lengand	rest of eye examination	vas unremarkable.	Sandric	anuplarial larer i
ne possible c	auses of this condition.	sanile College	01. 70	(2)
	19 - Th. No. 18			Takewet 10mg
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				proviposal iside clony
The state of the s		Designation of the last	()	hone

# AZRA NAHEED MEDICAL COLLEGE Sendup Examination- OPHTHALMOLOGY

### 4th Year- session 2016-2017

## Short Essay Questions (SEQ, s)

Land to the second the second to the second	
Time allowed: - 2 Hours Total Marks 45	
<ol> <li>A patient has undergone cataract surgery for cataract 2 days back; now he with decrease in <u>vision</u> and pain in the operated eye, On examination chamber has hypopyon and fundus view is hazy the red glow is absent:</li> </ol>	present
a) . What could be the most probable diagnosis?	1
b) What treatments options do we have for this patient?	4
2. A 56 years old woman presented to eye OPD with severe pain in her right pain is associated with vomiting and headache. On examination there congestion, cornea is hazy and pupil is mid-dilated, oval and non-reacting to	is ciliary
gives past history of halos and decreased vision in the same eye	1
a) What would be the most probable diagnosis? Ab  b) How will you manage this patient?	4
3. A 40 year old man presented in eye OPD with complaints of sudden painless in vision in left eye for the last 4 days, he stated that it started like a curtain front of his eyes; he had myopia since childhood. On funduscopic examination was a horse shoe tear in retina superiorly.	falling in
a) What is the most likely diagnosis?	1
b) What is the classification of this disease?	2
c) What are the signs and symptoms of this disease?	2
<ol> <li>A 7 year old boy presented in eye OPD with lid swelling redness, chemosis and discharge from both eyes. His conjunctiva showed follicular reaction, His sible</li> </ol>	d watery ings had
similar symptoms:	1
a) What is the most likely diagnosis?	2
b) How would u treat this patient? c) What measures should be taken to prevent the spread of the disease?	2

drace pain and diminution of	vision for pask
5. A 22 year old male gives history of redness, pain and diminution of week. There is history of low backache. On examination there is week. There is history on endothelium, 2+ cells in anterior	s circumcorne
week. There is history of low backache. On examination there is week. There is history of low backache. On examination there is week. There is history of low backache. On examination there is week. There is history of low backache. On examination there is congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion, keratic precipitates on endothelium, 2+ cells in anterior congestion congesti	or chamber and
week. There is the precipitates on endothelium, 2+ cells in afterno	of thermet did
intraocular pressure is within the normal limits	
intraocular pressure is within the north	1
a) What is your diagnosis?	2
b) What investigations are done to evaluate this patient?	2
c) What treatment is advised in this condition?	
the right period	rbital area. On
6. A 5 years old boy sustained a small laceration on the right perior	with moderate
avanciantion there is envihema and edema of the perforbital region	***************************************
proptosis and decreased ocular movements. His eye movements a	re paintul. His
temperature is 101.6 F.	
a) What is most likely diagnosis?	1
b) How will you investigate this case?	2
c) How will you manage this condition?	2
h i i i i i i i i i i i i i i i i i i i	
7. A 23 years old girl presents with a painful, red eye and increasingly blue	rred vision for
last 2 days. On examination her vision was 6/60 in the right eye. (	Conjunctiva is
inflamed and there is a central corneal opacity with small hypopyon. S	She wore soft
contact lenses on a party 2 days ago	
What is the most likely diagnosis?  What is the differential diagnosis?	1
What is the differential diagnosis?	2
What is the appropriate treatment for this condition?	2
8. A child of 2 years age was brought to OPD; he was diagnosed a case of	of congenital
squint	
Write down the treatment of congenital squint.	5
9. a) Enumerate five common causes of optic disc pallor	2.5
b) How will you manage a case of chemical injury	2.5
Q. No. 1. Endophthalmitis	
a. 10.1. Dosman anald classes	allan
2 - Acute Primary angle closure	graucoma
	The state of the s

# AZRA NAHEED MEDICAL COLLEGE Send Up Examination- OPHTHALMOLOGY

4th Year- session 2014-2015

# Short Essay Questions (SEQs)

Time anowed:- 2 Hours	Total Marks:-45
Attempt all questions	03-08-2015
All question carry equal marks	Model what we are a time
A 20 year old girl presents in the eye out patient departm nodular, swelling in her right upper eyelld well away from	nent with a painless
2 months.	
a) What is most likely diagnosis? What is most likely diagnosis?	rasi 1
b) What options are available to manage this condition?	2
g) Briefly explain the surgical procedure for its treatment	2
accetalant.	
A 60 year old women presents in the eye out patient wit	h gradual painless loss
of vision of her left eye for last 6 months. She noticed the	
aggravated in bright sunshine. There was no redness in h	
Gen. J.	illi citation
What is most likely diagnosis?	1
b) How will you confirm the diagnosis?	2'
How will you manage this case?	2
a) What are the advantages of Phacoemulcification over	evtra cansular cataract
	3 2/
extraction(ECCE).	to the
(b) What are per-operative complications of cataract sur	gery \ 2 pg= 19
- Willia FCA	
Q.4) A middle aged man has come with intense pain in his les	ft eye with decreased
vision There is watering and photophobia. On examinal	tion there is marked
ciliary injection. Pupil is small and non-reacting to light.	The eyeball is tender
Not: 2100	
to the bable diagnosis () Vy ( (U)	1
( a) what is the most probable diagnosis \( \sqrt{\chi} \) \( \chi	2
	2
c) how will you treat this patient	

A seven years old boy is brought to the physician 3 days back after sustaining a small laceration of the left eyebrow. His temperature is 101.6 F°. Examination shows erytherama and edema of the left eyelid and periorbital region with moderate proptosis and decreased ocular movement. His eye movements are painful. a) What is most likely diagnosis? (). How will you investigate this case? A How will you manage this condition? A middle aged man has come with intense pain in his left eye with decreased vision. There is watering and photophobia. On examination there is marked ciliary injection. Pupil is small and non-reacting to light. The eyeball is tender. a) What is the most probable diagnosis with b). How will you investigate this case t) How will you treat this patient . A 50 years old lady has come with severe pain in right eye for last 4 days, associated with vomiting, On ocular examination, there is ciliary congestion, cornea is hazy and pupil mid-dilated, oval and non-reacting to light. She gives past history of halos and decreased vision. al What is the most probable diagnosis الط How will you manage this patient Describe briefly clinical features of a)Proleferative Diabetic Retinopathy of Rhegmatogenous Retinal Detachment (a) Enumerate five common causes of optic disc pallor How will you manage a case of chemical injury

#### THE SUPERIOR UNIVERSITY LAHORE

## 3rd Professional MBBS 1st Annual Examination

#### OPHTHALMOLOGY

#### Short Essay Questions (SEQs) Paper 3

5040	ubl.			Date
		ts in the eye out patie	ent departmen	t with a painle
		ight upper eyelid we		
last 2	months.		_	, v
A day		Distribution in the	C 1	ساسلور
	a) What is most		_	1
la.	b) What options	are available to mana the surgical procedu	age this condition	on? 2
Eyelia	c) Briefly explain	the surgical procedu	re for its treatn	nent? 2
0				3.04
	at are different cau		-2	3
		ase of serile entropio		
Co	yutura	ts with burning, seve	re itching in his	eves with this
		12 MILLI DOLLINGE, 2CAC	e treatment are the	-,
3 A 12 V	ear old boy presen	tion gets aggravated	in spring and su	immer season.
ropy d	ischarge. His condi	tion gets aggravated	in spring and su	immer season.
ropy d	ischarge. His condi	tion gets aggravated	in spring and su	immer season.
ropy d	a) What is most	likely diagnosis?	in spring and su	immer season
ropy d	a) What is most b) What is etiological	likely diagnosis?	in spring and su	immer season.
гору с	a) What is most b) What is etiolo	likely diagnosis?  gy of the disease?  manage this case?	vernal	immer season.
ropy d	a) What is most b) What is etiolo c) How will you	likely diagnosis?  ogy of the disease?  manage this case?	vernul	immer season.
A. A 60	a) What is most b) What is etiolo c) How will you  year old women pr	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out	patient with g	immer season.  2 2 radual painles
A. A 60	a) What is most b) What is etiolo c) How will you rear old women pr f vision of her left of	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out  eye for last 6 months.  sunshine. There was	patient with g	radual painles
A. A 60 loss of gets a	a) What is most b) What is etiolo c) How will you rear old women pr f vision of her left ggravated in bright a) What is most	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out eye for last 6 months.  sunshine. There was likely diagnosis?	patient with g	radual painles
A. A 60 loss of gets a	a) What is most b) What is etiolo c) How will you  rear old women provision of her left of the work of the book of the book of the book of the work of the book of	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out eye for last 6 months.  sunshine. There was likely diagnosis?  confirm the diagnosis	patient with g	immer season.  2 2 radual painles
A. A 60 Noss of gets a	a) What is most b) What is etiolo c) How will you  rear old women pr f vision of her left of gravated in bright a) What is most b) How will you c) How will you	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out eye for last 6 months.  sunshine. There was likely diagnosis?	patient with g	radual painles
A. A 60 loss of gets a	a) What is most b) What is etiolo c) How will you rear old women provision of her left a) What is most b) How will you c) How will you	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out eye for last 6 months.  sunshine. There was likely diagnosis?  confirm the diagnosis manage this case?	patient with go. She noticed the no redness in h	radual painles at her probler er eye.
ropy d	a) What is most b) What is etiolo c) How will you  rear old women provision of her left a) What is most b) How will you c) How will you c) How will you	likely diagnosis?  gy of the disease?  manage this case?  esents in the eye out eye for last 6 months.  sunshine. There was likely diagnosis?  confirm the diagnosis	patient with some redness in h	radual painles at her probler er eye.

# Mega Test (1) 4th Year MBBS (SEQs)

Time Allowed:-50 min

Total Marks:-40

02-08-2017

Q1. A 62 years old man has come to eye OPD with severe pain in his left eye for last 2 days; the pain is associated with vomiting and headache. On examination there is ciliary congestion, cornea is hazy and pupil is mid-dilated, oval and non-reacting to light. He gives past history of halos and decreased vision in the same eye Acute congestive glacem a. What would be the most probable diagnosis? b. How will you manage this patient? A 10 days old neonate is having profuse purulent discharge from his both eyes. a) What is your diagnosis? OphThalmia neonalows b) Name two commonest bacteria responsible for the disease? c) What prophylactic treatment is advised in this condition? Q3. A 23 years old girl presents with a painful, red eye and increasingly blurred vision for last 2 days. On examination her vision was 6/60 in the right eye. Conjunctiva is inflamed and there is a central corneal opacity with small hypopyon. She wore soft contact lenses on a party 2 days ago Bouterial corneal ulcare a) What is the most likely diagnosis? b) What is the differential diagnosis? c) What is the appropriate treatment for this condition? 04. A 65 year old man presented in the eye out patient with gradual painless loss of vision of his left eye for last 1 year. He noticed that his problem aggravated in bright light and was better in dim light. Otherwise he has no other active complaints Posterior subcapsular s Service cataract a) What is most likely diagnosis? b) How will you confirm this diagnosis? What is the differential diagnosis? Q5. An 18 year old boy presents in the eye out patient department with a painless nodular, swelling on his right upper eyelid well away from the lid margin for last 2 b) What options are available to manage this condition? Lowerie Continue of the surgical procedure for its treatment? Chalación. months. It is neither infected nor painful > postoir capsule opacification. Le colerent Age related

O O macular degeneration

SHOT-ON POCO X3-NFC