

Lens

1. Which laser is used for capsulotomy?

- a. Diode laser
- b. Carbon dioxide laser
- c. Excimer laser
- d. Yag laser

2. Unilateral aphakia is likely to be corrected by any of the following except:

- a. Anterior chamber intraocular lens
- b. Posterior chamber intraocular lens
- c. Contact lens
- d. Glasses

3. Phakolytic glaucoma is best treated by:

- a. Fistulizing operation
- b. Cataract extraction
- c. Cyclo-destructive procedure
- d. Miotics and Beta blockers

4. Lens induced glaucoma least occur in:

- a. Intumescent cataract.
- b. Anterior lens dislocation,
- c. Posterior subcapsular cataract
- d. Posterior lens dislocation

5. After 48 hours of a cataract extraction operation, a patient complained of ocular pain and visual loss. On examination, this eye looked red with ciliary injection, corneal oedema and absent red reflex.

The first suspicion must be:

- a. Secondary glaucoma.
- b. Anterior uveitis.
- c. Bacterial endophthalmitis.
- d. Acute conjunctivitis

6. Treatment of choice in Aphakia is:

- a. Spectacles
- b. Contact lens
- c. Anterior chamber intraocular lens
- d. Posterior chamber intraocular lens

7. The etiology of complicated cataract all, except:

- a. Lagophthalmos
- b. Iridocyclitis
- c. Retinitis pigmentosa
- d. Retinal detachment

8. Best site where intraocular lens is fitted:

- a. Capsular ligament
- b. Endosulcus
- c. Ciliary supported
- d. Capsular bag

9. Earliest visual rehabilitation occurs with:

- a. Phacoemulsification
- b. Intracapsular cataract extraction plus intraocular lens
- c. Extracapsular cataract extraction plus intraocular lens
- d. Intracapsualr cataract extraction alone or laser

Answers

1- d	2- d	3-b	4-c	5-c
6-d	7-a	8-d	9-a	

Glaucoma

1. Pneumato-tonometer is a type of:

- a. Goniolens
- b. Tonometer
- c. Perimeter
- d. Tonography

2. When there is intumescence of the lens causing glaucoma?

- a. Trephining should be done
- b. Paracentesis is indicated
- c. Lens should be extracted
- d. Glaucoma should be treated medically only

3. All the following associated open angle glaucoma include all the following except:

- a. Roenne's nasal step
- b. Enlarged blind spot
- c. Generalized depression of isopters
- d. Loss of central fields
- e. Tubular vision

★ 4. The treatment of choice for the other eye in angle closure glaucoma is:

- a. Surgical peripheral iridectomy
- b. Yag laser iridotomy
- c. Trabeculotomy
- d. Trabeculectomy

5. Topical atropine is contraindicated in:

- a. Retinoscopy in children
- b. Iridocyclitis
- c. Corneal ulcer
- d. Primary angle closure glaucoma

6. The following type of glaucoma is improved with mydriatics:

- a. Primary open angle glaucoma.
- b. Infantile glaucoma.
- c. Phacolytic glaucoma.
- d. Pupillary block glaucoma.

7. A newly born, presented with big hazy cornea and photophobia.

His management begins with:

- a. Electrophysiological study of the retina,
- b. Syringing of naso-lacrimal duct.
- c. Fluorescein stain to the cornea.
- d. Measuring his ocular tension.

8. Total unilateral blindness (no PL) is a feature of:

- a. Corneal ulcer
- b. Mature senile cataract
- c. Absolute glaucoma
- d. Macular degeneration

9. When visual deterioration in a glaucomatous patient reaches no PL the diagnosis is:

- a. Acute congestive glaucoma
- b. Chronic congestive glaucoma
- c. Chrome open angle glaucoma
- d. Absolute glaucoma

10. In acute angle closure glaucoma the pupil is:

- a. Rounded, irreactive and dilated
- b. Pin point constricted
- c. Vertically oval dilated
- d. Normal sized, reactive

11. Which of the following conditions need immediate hospitalization?

- a. Central retinal vein occlusion
- b. Open angle glaucoma
- c. Denderitic ulcer
- d. Acute angle closure glaucoma

12. Glaucoma field changes included all the following except:

- a. Arcuate scotoma.
- b. Hemianopia
- c. Enlarged blind spot
- d. Centrocecal scotoma.

13. In case of buphthalmos we usually find:

- a. shallow anterior chamber

(b) Large Hazy cornea > 13mm.

c. Leukocoria

d. Occlusio pupille

14. 100 days glaucoma is seen in: *A Retina*

a. Central retinal artery occlusion

(b) Central retinal vein occlusion

c. Neovascular glaucoma

d. Steroid induced glaucoma

15. Neovascular glaucoma follows: ** Retina*

(a) Thrombosis of central retinal vein

b. Acute congestive glaucoma

c. Staphylococcal infection

d. Hypertension

e. Interference of aqueous drainage by Schlemm's canal mechanism.

16. A one-month old baby is brought with complaints of photophobia and watering. Clinical examination shows normal tear passages and clear but large cornea. The most likely diagnosis is:

a. Congenital dacryocystitis

b. Interstitial keratitis

c. Keratoconus

(d) Buphthalmos

17. Neovascular glaucoma can be best treated by:

A. trabeculectomy

d. Pinpoint

22. In a patient with acute glaucoma the prophylactic treatment for other eye is:

- a. Peripheral iridotomy
- b. Schele's operation
- c. Anterior sclerotomy
- d. Iridenclesisis

23. All the following anatomical changes will predispose to primary angle closure glaucoma except:

- a. Small cornea
- b. Flat cornea
- c. Anterior chamber shallow
- d. Short axial length of eye ball

24. You have been referred a case of open angle glaucoma. Which of the following would be an important point in diagnosing the case?

- a. Shallow anterior chamber
- b. Optic disc cupping
- c. Narrow angle
- d. visual acuity and refractive error

25. Which one of the following drugs is contraindicated in the treatment of primary glaucoma?

- a. Pilocarpine
- b. Homatropine

c. Acetazolamide

d. Timolol

Answers

1- b	2- c	3- d	4- b	5-d
6-d	7-d	8-c	9-d	10-c
11-d	12-b	13-b	14-b	15-a
16-d	17-c	18-b	19-c	20-b
21-b	22-a	23-b	24-b	25-b

Retina

1. Number of layers in neurosensory retina is:

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- a. 9
- b. 10
- c. 11
- d. 12

2. In retinal detachment, fluid accumulates between:

- a. Outer plexiform layer and inner nuclear layer.
- b. Neurosensory retina and layer of retinal pigment epithelium
- c. Nerve fiber layer and rest of retina.
- d. Retinal pigment epithelium and Bruch's membrane.

3. 100 days glaucoma is seen in: ✓

- a. Central Retinal Artery Occlusion
- b. Branch Retinal Artery Occlusion
- c. Central Retinal Vein Occlusion
- d. Branch Retinal Vein Occlusion

4. A young patient with sudden painless loss of vision, with systolic murmur and ocular examination reveals a cherry red spot with clear AC, the likely diagnosis is: ✓

- a. Central Retinal Artery Occlusion
- b. Central Retinal Vein Occlusion
- c. Diabetes Mellitus
- d. Branch Retinal Vein Occlusion

5. Triad of retinitis pigmentosa includes all except:

- a. Waxy disc pallor
- b. Arteriolar attenuation
- c. Macular hypopigmentation
- d. Bone specule pigmentation

6. Retinitis pigmentosa most commonly presents as:

- a. Night blindness
- b. Diplopia
- c. Scotoma
- d. Bitemporal hemianopia

7. In Central retinal artery occlusion, a cherry red spot is due to:

- a. Hemorrhage at macula
- b. Increased choroidal perfusion
- c. Increase in retinal perfusion at macula
- d. The contrast between pale retina and reddish choroids

8. The most common primary intraocular malignancy in adults is:

- a. Retinoblastoma
- b. Choroidal melanoma
- c. Squamous cell carcinoma of conjunctiva
- d. Iris nevus

9. Which of the following is ideal for evaluating macular functions in a patient whose vision is only hand movement (HM)?

- a. Color perception
- b. Confrontation test
- c. Light projection
- d. Light perception

10. Night blindness is caused by:

- a. Central retinal vein occlusion
- b. Dystrophies of retinal rods
- c. Dystrophies of the retinal cones
- d. Retinal detachment

11. A patient of old standing diabetes mellitus noticed sudden muscae volitantes. On examination, the red reflex was dim, with no details of fundus could be seen. He might have:

- a. Non proliferative diabetic retinopathy
- b. Cystoid macular edema
- c. Vitreous hemorrhage
- d. Central retinal vein occlusion

12. Occlusion of the lower nasal branch of the central retinal artery results in one of the following field defects:

- a. Lower nasal sector field defect
- b. Upper nasal sector field defect
- c. Upper temporal field defect
- d. Lower temporal sector field defect

13. Which of the following is true of Diabetic retinopathy?

- a. Always associated with hypertension
- b. Seen only in uncontrolled diabetes
- c. Incidence increases with duration of disease
- d. Determines prognosis of the disease

14. Commotio retinae is seen in:

- a. Concussion injury
- b. Papilloedema
- c. Central retinal vein thrombosis
- d. Central retinal artery thrombosis

15. Simple retinal detachment is usually due to:

- a. Tumour
- b. Choroidal haemorrhage
- c. Exudative retinitis
- d. None of the above

16. Cherry red macula is seen in:

- a. Acute Congestive glaucoma
- b. Uveitis
- c. Central retinal artery occlusion
- d. Central retinal vein occlusion

17. Retinal change specific in proliferative diabetic retinopathy is:

- a. Microaneurysm
- b. Soft cotton wool exudates

c. A-V shunt

d. Neovascularization

18. Commonest lesion which hinders vision in diabetic retinopathy is:

a. Macular oedema

b. Microaneurysm

c. Retinal hemorrhage

d. Retinal detachment

19. Which of the following not found in diabetic retinopathy on fundus examination:

a. Microaneurysms

b. Retinal hemorrhages

c. Arteriolar dilatation

d. Neovascularisation

20. Amaurotic cat's eye reflex is seen in:

a. Papilloedema

b. Retinoblastoma

c. Papillitis

d. Retinitis

Answers

1-a	2-b	3-c	4-a
5-c	6-a	7-d	8-b
9-a	10-b	11-c	12-c
13-c	14-a	15-d	16-c
17-d	18-a	19-c	20-b