

Ophthalmology

(SEQs)

Roll No. _____

Time Allowed: 2 hours

Total Marks: 45

Instructions

1. The SEQs part is to be submitted within 2 hours, extra time will not be given.
2. Neat hand writing, use of margin and marker for headlines will increase the presentation of your paper.
3. Do not write your name or disclose your identity in anyway.

- cataract*
- Q A 9 month old child was referred from pediatrics OPD with complaint of mother that there is something shining (like cat eye) in his Right eye. On examination there was leukocoria in right. On direct ophthalmoscopy there was no red glow in that eye while it was normal red glow in his left. On Pediatrics evaluation he is otherwise a healthy child with normal mile stones.
- Q What does leukocoria means? → Due to lack of Tapetum Lucidum white (1)
- Q Give your differential diagnosis of leukocoria. (2)
- Q How will you manage this case? (2)
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- Q A boy of 12 years age presented in the eye out patient with drooping of his right eye lid since early childhood:
- Q What is most likely diagnosis? *eyelid* (1)
- Q How will you manage this case? (2)
- Q How will you differentiate between Ptosis & Pseudoptosis? (2)
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- Q A 55 years old farmer presented with severe pain in his right eye. He told his vision was alright 15 days ago when he encountered injury while working in the field. On examination there is decreased vision. The eye is red and painful:
- Q What is your diagnosis? *Keratitis* *Cornea* (1)
- Q How will you manage this patient? (4)
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- Q A 50 years old lady has come with severe pain in right eye for last 4 days associated with vomiting. On examination, there is ciliary congestion, cornea is hazy and pupil mid-dilated, oval and non-reacting to light. She gives past history of halos around light and decreased vision:
- Q What is the most probable diagnosis? (1)
- Q How will you manage this patient? (4)
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- Q A 60 years old patient presented with gradual painless loss of vision in both eyes. His visual acuity is 6/60 in right eye and 6/36 in left eye. Examination revealed posterior sub capsular opacities in the lens and rest of eye examination was unremarkable.
- Q Give possible causes of this condition. (2)