

AZRA NAHEED MEDICAL COLLEGE

DEPARTMENT OF OPHTHALMOLOGY

Retina  
CLASS TEST MBBS 4TH YEAR

14058

TIME ALLOWED: 1 hour

DATED: 26-7-18

TOTAL MARKS: 25

Q1. A 70 year old man presented in eye OPD with sudden loss of vision in his right eye, he is hypertensive and diabetic for last 30 years, on fundus examination there is a cherry red spot.

- a. Write down the diagnosis (1) Central Retinal Artery Occlusion  
 b. What is the pathogenesis? (2) emboli & thrombus form due to arteriosclerosis  
 c. Write down the treatment. (2) → relieve the spasm of vessels, dislodge the emboli  
 Sol lowered by mannitol, Streptokinase inj, inhalation of 5% CO<sub>2</sub> & 95% O<sub>2</sub>

Q2. A mother brought her 13 years old son to eye OPD with complaints of decreased vision at night, his elder brother also had this problem, and on examination the retina was not normal

his retinal haemorrhage  
 tolazoline inj)  
 isosorbide nitrate  
 sublingually

- a. What is the diagnosis? (1) Retinitis pigmentosa  
 b. What are the sign and symptoms of this disease? (2) 205  
 c. What is the inheritance pattern? (2) 204.

Q3. A 67 year old female presented with gradual loss of vision over last 5 years, she is diabetic and hypertensive for last 25 years. On examination there are hard exudates, micro aneurysms, and neovascularization on disc and retina. Diabetic Retinopathy

- a. What ocular and systemic examination would you advice for this patient? (2) 185  
 b. Suggest the treatment plan in detail for this patient. 185 (3)

Q4. A one year old baby was brought to OPD her mother complaints of noticing a white reflex (leukocoria) in the right eye of the baby, on examination there are vitreous seedlings and on B Scan there is whitish calcification.

- a. Write down the diagnosis (1) Retinoblastoma  
 b. Differential diagnosis (2) Congenital cataract, endophthalmitis, coat's disease, Pseudogliomas  
 c. Treatment plan (2) ~~Use of sunglasses~~ 207

Q5. A 37 years old patient came to OPD with sudden loss of vision in his right eye 24 hours ago, he is nearsighted for last 20 years, and he complains of flashes, floaters and peripheral field loss, on examination a superior temporal break on retina was found.

- a. Write down the diagnosis (1) Rhegmatogenous RD.  
 b. Types of retinal detachment (2) — (1) Rhegmatogenous (2) Non-rhegmatogenous  
 c. Treatment of rhegmatogenous retinal detachment (2) tractional, exudative.

To seal retinal breaks.  
 (1) photocoagulation. (2) Cryosurgery

To adhere retinal, choroid & sclera

- (1) Scleral buckling  
 (2) Drainage of SRF  
 (3) Vitrectomy  
 (4) Pneumoxotindexu.