

Group B1

- 1. Name the sign?
- 2. What causes it?
- 3. Give one topical treatmnet?

- 1. Dendritic ulcer
- 2. HSV1 Virus
- 3. Acyclovir



Congenital glaucoma

- 1. name this sign?
- 2. name another sign associated with this disease?
- 3. what kind of surgery you can do?

- 1. Buphthalmous(mainly), corneal opacity
- 2. Other signs: tearing, photophobia, habb stria
- 3. Trabeculectomy, Goinotomy



Acute closed-angle glaucoma

- 1-what is the name of this procedure?
- 2-mention one indication?
- **Answers**:
- 1. Laser iridotomy
- 2. Acute closed-angle glaucoma

Figure 7. Laser peripheral iridotomy. The site of the laser iridotomy (performed in the acute angle-closure glaucoma setting) appears slightly more central as the anterior chamber deepens and the pupil becomes less dilated after resolution of the acute attack.

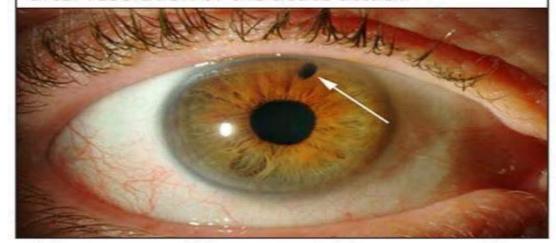


Image courtesy of International Journal of Clinical Reviews
http://www.remedicajournals.com/International-Journal-of-Clinical-Review
s/Browselssues/November-2010/Article-Management-of-Angle-Closure-Glaucoma

- ✓ 25 years old male with history of flu.
- 1-What is the diagnosis?
- 2. what is the cause?
- 3. treatment?
- **Answers**:
- 1. Viral Conjunctivitis
- 2. Adenovirus
- 3. conservative



Uveitis

1-what is the name of this sign? sorry we can't remember other questions.

Answers:

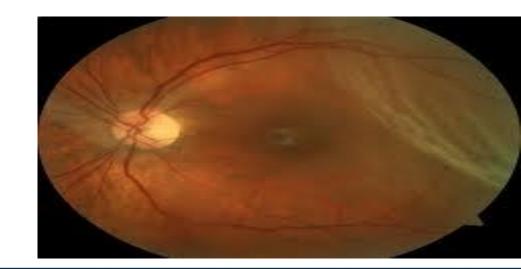
1. Hypopyon



Retinal detachment

- 1. PVD stands for what?
- 2. What is the type of retinal detachments that is treated medically?
- 3. what is the symptom associated with this?

- Posterior vetrious detachment
- 2. Exudative type
- 3. flashing lights, floaters



- 1.define astigmatism?
- 2.one pathology causes astigmatism?
- 3.treatment?

Answers:

- 1. Parallel rays come to focus in 2 focal lines rather than a single focal point .
- 2. Keratoconus, corneal infection.
- 3. Regular astigmatism: cylinder lenses with or without spherical lenses.

Irregular astigmatism: rigid CL, surgey.

Laser, intraocular toric lenses, limbal relaxing incision

- 1-mention cataract symptoms?
- 2-mention names of 3 surgeries can be done to correct cataract?

- 1. Painless gradual loss of vision, glare, myopic shift, altered color perception haloes maybe observed around lights.
- 2. Femtosecond laser (newest one), phacoemulsification method, extracapsular cataract extraction

Uveitis

- 1. what is this sign?
- 2. mention one topical treatment to treat anterior uveitis?
- **Answers**:
- 1. Keratic precipitate
- 2. Cycloplegic agent(ex : atropine)
- steroids



- 1-What is the diagnosis (which eye)?
- 2-what causes this condition?

- 1. Strabismus (exotropia or esotropia) depending on the pic.
- 2. Depending on th pic. Causes in general:
- Refractive errors (hypermetropia)
- Paralysis of cranial nerves (3rd, 4th. 6th)

1-what is this?

2-mention one modality of treatment?

- 1. Chalazion
- Resolves within 6 months.
 Hot compressors and chloramphenical ointment, if persists we may consider surgery



Define the glare.



A sensation caused by brightness within the visual field that is suffeciently greater than the luminance to which the eyes are adopted, results in annoyance, discomfort, decreased visual performance.

Source: internet! If u find a better one stick to it.

Group B2

Collected by B2 group members

- √ 75 years old present with headache and sudden unilateral loss of vision (with pic of optic disc swelling)
- 1. what is the most likely dx?
- 2. Which eye appear in the pic?

- 1. Diagnosis : giant cell arteritis _ AION.
- 2. It was the right eye.

- 1. mention 3 sx of cataract?
- 2. mention 2 comp of cataract surgery and tt of each.

- 1. Glare, altered color perception, change in refractive error (myopic shift)
- 2. Infective endophthalmitis >> tt : IV antibiotocs + vitrectomy
 - retinal detachment >> Laser surgery (photocoagulation)

ابو عيون زرق اللي لابس نظاره اللي بأسئلة السنوات) pic of >

- 1. what is dx?
- 2. for which refractive error he uses eyeglass?
- 3. if left untreated?

- 1. right accommodative esotropic child
- 2. Hypertropia
- 3. amblyobia

- ✓ pic of ciliary injection with corneal opacity ..
- 1. mention 2 signs?
- 2. mention one causative MO
- 3. 2 Risk factors?

- 1. Ciliary injection, corneal opacity
- 2. Staphylococcus aureus
- 3. Contact lens wear , keratoconjuctivitis sicca

- 1. Define astigmatism?
- 2. 2 modalities of treatment?
- 3. One pathological cause?

- 1. Parallel rays come to focus in 2 focal lines rather than single focal point .
- 2. Laser (not LASIK), intraocular toric lens
- 3. Keratoconus

✓ Mention 2 causes of red painful eye with blurred vision and photophopia?

- 1. Anterior uveitis
- bacterial keratitis
- 3. acute closure angle glaucoma

- Mention 3 differences between orbital and periorbital cellulits:
 orbital: positive (proptosis, decreased eye movement, decreased visual acuity)
 Periorbital (these signs are negative)
- 2. Mention treatment of periorbital cellulitis? oral Antibiotic.

- 1. What is this?
- When to treat ?
- 3. What is the treatment?





- 2. When it increase in size and affect the visual field
- 3. Intra-lesional steroid injection

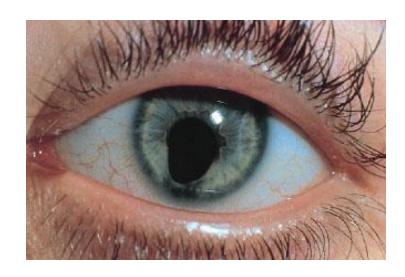


Fig. 1 A capillary hemangioma is an abnormal overgrowth of blood vessels that is sometimes referred to as a "strawberry" birthmark.

- 1. what is this?
- 2. Mention one associated symptom?

Answers:

- 1. Coloboma of the eye.
- 2.
- Charge syndrome (The letters stand for: Coloboma of the eye, heart defects, atresia of the nasal choanae, retardation of growth and/or development, genital and/or urinary abnormalities, and ear abnormalities and deafness)

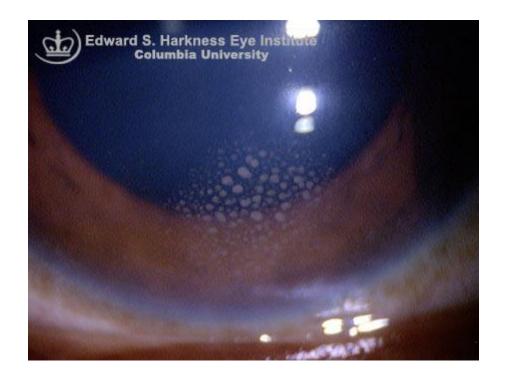


✓ patau syndrome

Case hx for (easy)

- 1. DX ? acute closure angle glaucoma
- 2. Risk factors? hypermetropia, mature cataract, steroid.
- 3. Main step of treatment : BILATERAL IREDETOMY .

- 1. What is this? keratitic precipitate
- 2. Mention 2 eye drops used ? Steriod , cycloplagic
- **Answers**:
- 1. Keratic precipitate
- 2. Steroid, cycloplegic



- 1. PVD refer to?
- 2. 3 causes of increased VEGF in eye?
- 3. one drug used to decrease VEGF?

- 1. Posterior vitreous detachment
- ROP (retinopathy of prematurity)
 PDR (proliferative diabetic retinopathy)
 venous occlusion
- 3. Avastin

Group B3

"The pictures are not the same as in the exam"

- 1. What's the abnormality seen in the eyelid?
- 2. Give one cause for this abnormality?
- 3. Give one complication?

- 1. Ectropion
- Old age
 (orbicularis oculi laxity)
 facial nerve palsy
- 3. Irritable eye (dry eye)



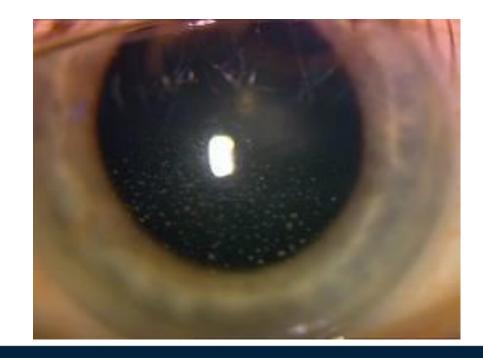
- 1. Name this sign?
- 2. What's the MO?
- 3. What's the topical medication?

- 1. Dentritic ulcer
- 2. HSV1
- 3. Acyclovir



- 1. What's the sign?
- 2. Give 2 topical medication?

- 1. Keratic precipitate
- Topical steroid,mydriatic agent "atropin"



About glaucoma medications:

- 1. Contraindication in asthmatic patient?
- 2. Dual action "increase the absorption and decrease production"?
- 3. Can be given orally and topical?

- 1. B- blocker
- 2. Alfa-2 agonist
- 3. Carbonic anhydrase inhibitor

Atypical case of MS "sorry I didn't remember it"

- 1. What's the diagnosis?
- 2. What's the medication?

- 1. Optic neuritis
- 2. 3 days IV steroid "methylprednisolone" then 11 day oral steroid

- 1. What's the diagnosis?
- 2. Give 2 sign seen on slit lamp exam?
- 3. What's the medication stop the pogression of the disease?

- 1. Keratoconus
- 2. vogt's striae, fleischer's ring prominent corneal nerve. apical scar.
- 3. Collagen cross-linking



- 1. What's the diagnosis? Give 2 sign
- 2. Give 3 cause for congenital cataract?

- Cortical cataract, sign: corneal opacity, myopic shift "not sure", absent red reflex
- 2. Down syndrome, galactosemia, rubella and toxopalsmosis



- 1. Give 2 differences between hard exudate and soft exudate?
- 2. what's the other name for soft exudate?
- 3. What's the content of soft exudate?
- 4. what is the area in the retina that is not supplied by retinal artery?
- 5. drusen in which layer?

- 1. Hard exudate: yellow, well differentiated soft exudate: white, ill differentiated
- 2. Cotton wool spot
- 3. Swollen nerve axons
- 4. Fovea
- 5. Bruch's membrane (sub-retinal pigmented epithelium)

Which one of cases at risk of glaucoma:

- 1. A 71 year old man with an IOP 21 or a young child with an IOP 21?
- 2. Patient with cup 0.6 and disc diameter 1 or cup 0.6 and disc diameter 2?
- 3. Central corneal thickness 450 or central corneal thickness 620?

*Answers:

- 1. The young child
- 2. Cup 0.6 and disc diameter 1(because cup-disk ratio higher)
- 3. Central corneal thickness 450 explanation:

(because thinner cornea give lower IOP readings while in fact the pressure in the eye is more! thicker cornea >> higher readings thinner cornea >> lower readings)

- 1. What's the cause of this disease?
- 2. Give 2 important investigation?
 - **Answers**:
- 1. Graves' disease
- 2. TSH, brain CT



Group B4

Done by: Talaal alwishah

- what is ur dx?
- 2. Give 2 complications

- 1. Pseudoexfoliation syndrome.
- 2. glaucoma
 - cataract



- 1. what is this sign?
- 2. give one risk factor that can lead to progression in ocular involvement?



- 1- lid lag
- 2- (not sure) hypertension Smoking? Thyroid hermone level?



- 1. What is most common type of cataract and give one typical sign .
- 2. What is 4 ddx of red painful eye with ciliary injection?
- 3. Give 2 ddx of abnormal red eye reflex?

- 1. age related nuclear, sign: opacity of the lens
- 2. bacterial conjunctivitis(not sure), scleritis, anterior uveitis, corneal ulcer, acute-closed angle glaucoma.
- 3. cataract, retinoblastoma

- 1. define myopia and give the type of correcting lens.
- 2. give one pathological cause of myopia.

- 1. Nearsightedness, Parallel rays converge at a focal point anterior to the retina. (seminar)
 - Correcting lens : concave.
- 2. keratoconus

- 1. What is layer that contain the Fleischer ring?
- 2. What the associated disease?

- 1. deep epithelial layer
- 2. keratoconus

- 1. give one sign
- associated disease (not sure)
 - **Answers**:
- 1. hypopyon
- 2. keratitis



- 1. mention 2 findings?
- 2. mention 2 medical lines of treatment?

- 1. cupping of disc
 - neovascularization
- Carbonic anhydraze inhibitor
 - Prostaglandin





Group D2

The pictures are not the same of that in the exam

Done by : Ayssar F. Smadi



- 1. What is this sign?
- 2. indications of TT?



- 1. Dermatochalasis
- 2. Cosmatic, dry eyes, drmatitis



- 1. Diagnosis?
- 2. Complication?
- **Answers**:
- 1. fully accommodative Rt. Esotropia
- 2. Amplyopia

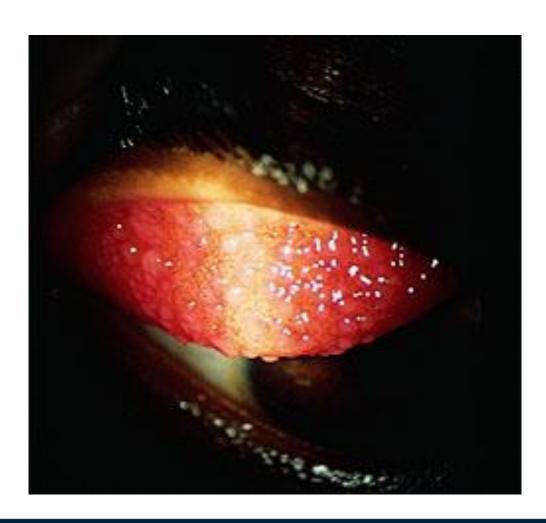
- 1) What is this tool?
- 2) When we consider the findings positive?

- 1. Exophthalmometer.
- Asymmetry > 2 mmbtw 2 eyes.
 - the reading is > 2.1 mm



- 1. What is this?
- 2. 2 causes ?

- 1) giant papillary conjunctival reaction.
- 2) 1. Vernal conjunctivitis.
 - 2. contact lens wear.
 - 3.foreign body



- 1. What is this sign??
- 2. Other sign you may find ??

- 1. Buphthalmus
- 2. Corneal opacityTearingPhotophobiaHaab stria



- 1. 2 findings ??
- 2.
- **Answers**:
- 1. cupping.
 - hemorrhage.

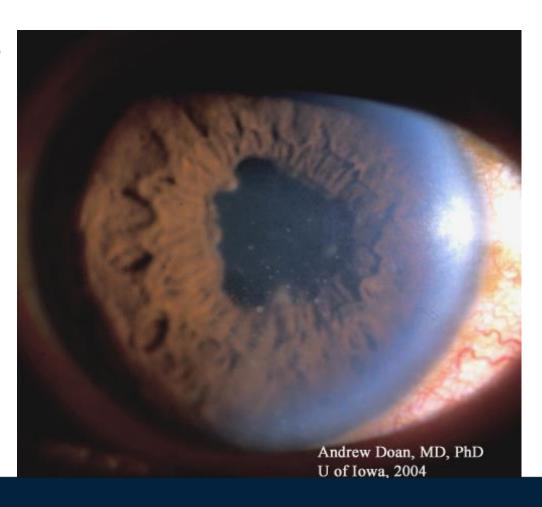


- 1. What is this mass?
- 2.
- **Answers**:
- 1. Capillary hemangioma
- 2.



- 1. What is this sign
- what is the Ocular disease?
- 3. Mention 2 systemic disease that can cause?

- 1. posterior synechiae
- 2. Anterior uveitis
- ankylosing spondylitisRA



- 1) 2 risk factors?
- 2) What are the most common organisms causing this ??

- 1. Trauma, contact lenses, topical long steroids use.
- 2. Staphylococcus, streptococcus, pseudomonas.



Theory question

- 1) 3 causes of absent or dim red reflex ??
- 2)
- 3)
- &Answers:
 - 1) Cataract, vetrious hemorrhage, retinobalstoma, corneal ulcer, hyphemia (anterior champer)

Very easy Qs ©

 There were 2 questions on retina one of them theory (about types of retinopathy, tt ,...)

- Sorry can't remember all Qs ,,,
- Each slide has 30-90 sec and 2 mins for the theory questions .

Group D3

✓ A young female complaining of low back pain pain and urinary symptoms.

Came with eye pain and redness and this pic

- 1. Whats the sign in the piture?
- 2. Name an HLA haplotype association.

- 1. Hypopyon
- 2. HLA B-27



- 1) What's the condition in the right eye?
- 2) What's the cause of this condition in <u>this</u> patient?
- **Answers**:
- 1. Ectropion
- 2. Right facial nerve palsy



Young female with history of painless eyelid mass (PIC)

- 1. What is this?
- 2. What is the treatment?
- **Answers**:
 - 1. Chalazion
 - Conservative ,, hot compressors ,, resolves within 6 months if not we may consider surgery (incision and curretage)

- 1. What are the types of amblyobia?
- What's the treatmeant?

- 1. a strabismus
 - b anisometropic
 - c Deprivational and occlusion amblyopia (like congenital cataract)
- 2. a -Treat underlying condition (cataract, refractive error...)
 - b Occlusion therapy (patching) (cover the normal eye)

- 1. What's the condition
- 2. What's the complication if treated surgically at this age?

- fully accommodative left esotropia.
- the patient will develop left exotropia when he gets old if treated surgically at this age instead of correction of the refractive error.



- 1. Whats the condition?
- 2. Give 3 the symptoms?

- 1. Cortical cataract.
- 2. People with cortical cataracts often experience problems with **glare**.



- About Anti-glaucoma drugs :
- ✓ Drug that can be given oral and systemic?
- ✓ Contraindicated in asthmatic patients?
- ✓ Work both on decreasing production of aquous humor and increase absorption ?

- 1. Carbonic anhydrase inhibitor.
- 2. B-Blocker.
- 3. Adrenergic stimulation (alpha-2 agonist)

- √ hyperopia
- 1. What is the pathological type of it?
- 2. What lens used to correct it?

- 1. ?
- 2. Convex lens

- 1. This is the eye of a patient with a history of flu came with eye discomfort, what's the Dx?
- 2. What's the most likely etiology?

- 1. Conjunctivitis.
- 2. Viral, Adenovirus.



QUESTION 10

- Q1 Retinoblastoma is the most common primary ocular tumor in children, whats the most common in adult? What's the most likely route of metastasis and where?
- Q2 What are the types of AMD and the treatment of each?
- Q3 write down 3 differences between rods and consother than color perception?
- & What are the main colors that cons can detect?

Answers:

Q1) Choroidal melanoma (most common in adult).

if they are asking about:

Retinoblastoma \rightarrow Hematogenous to the bone marrow mostly.

Choroidal melanoma \rightarrow Hematogenous to the liver (80%).

Answers:

Q2)

- "wet" AMD → anti-VEGF, laser photocoagulation
- "dry" AMD → There is no treatment to reverse dry macular degeneration. However, antioxidants and zinc in addition to life style changes can stop the progression only.

Answers:

Q3)

- 1. Cons are more at the macula and purely at the fovea, rods are distributed more peripherally.
- Cons are sensitive to bright light, Rods are sensitive to dim light
- 3. Cons have slower regeneration of light sensitive pigments, Rods have faster regeneration.
- 4. generally rods cells are much more numerous than con cells in the retina.
- the main colors that cons can detect: Red, Blue, Green

QUESTION 11

- 1. About keratoconus, give three slit-lamp signs.
- 2. One modality of treatment that may slow or stop the progression of the disease?

Answers:

- 1. Flisher ring, vogt's striae, thin cornea.
- 2. collagen cross linking.

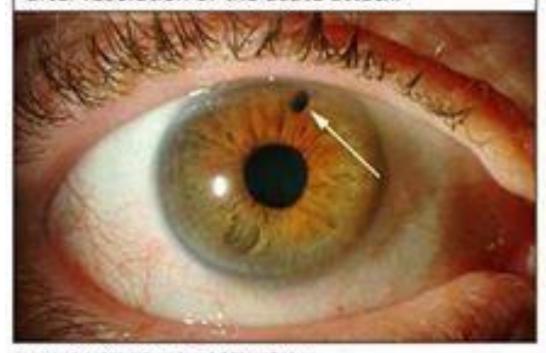
QUESTION 12

- 1. What's the name of the surgery this patient had?
- 2. mention one indication for it.

Answers:

- 1. Iridotomy
- Acute closed angle glaucoma

Figure 7. Laser peripheral iridotomy. The site of the laser iridotomy (performed in the acute angle-closure glaucoma setting) appears slightly more central as the anterior chamber deepens and the pupil becomes less dilated after resolution of the acute attack.



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جَهِ وَالَّذِينَ إِذَا فَعَلُوا فَاحَشَةُ أَوْ ظُلُمُوا أَنْفُسِمُمْ ذَكُرُوا اللّه فَاسْتَغَفِّرُوا لِذَّنُوبِهُمْ وَمَنْ يَغَفُّرُ الذَّنُوبِ ﴾ إلا الله ولم يصروا على ما فعلوا وهم يعلمون آل مدال ١٢٥٠ صَدَقَ اللّهُ الْعُطِيْمُ



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Mini-OSCE, Ophthalmology Group D4 Jan.2015

Done by:

Mohammad hawamdeh & thair

altrabsheh

Q1) about hyperopia

1- what's the associated condition in children?

2- the type of lens that we use to correct the vision?

3-true or false?
We can treat it surgically?T
they become presbyobic late?F

1- Accommodative esotropia

2- convex lens

Q2) pt. complain of back pain, redness and pain of the eye ...

1- what's this sign?

2- what's the type of HLA?



1- Hypopyon

2- HLA-B27

Q3) pt. complain of eye discomfort and redness that follow Hx. Of flu ...

1- what's the diagnosis?

2- what's the most common etilogy



1 - conjunctivitis

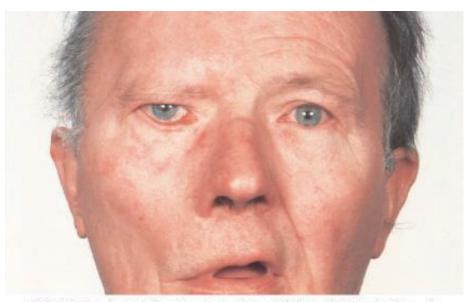
2- viral (adenovirus)

Q4) according to the picture ...

1- what's the diagnosis in the lower right lid?

2- what's the cause, be SPECIFIC?

The same picture



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1- ectropion

2- right side facial nerve palsy

Q5) according to the picture ...

1- what's your diagnosis?

2- when do we treat this lesion?

The same picture



1- capillary Hemangioma

2- according to time; if still present after the age of 7-years.

according to the condition; if increase in size or if affecting the axis of vision.

Q6) this lady complain of this painless mass ...

1- what's the diagnosis?

2- one form of treatment?



The same picture



1- chalazion

- 2- hot compressor, chloramphinicol, surgical drainage.
 - "I think any one of these will be right"

Q7) 65 year old pt. diabetic with this eye condition ...

1- what's the stage of the disease?

2- what will be the type of RD in such pt.?

The same picture



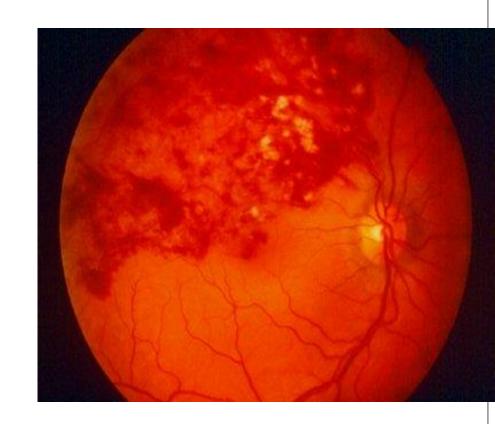
1- proliferative diabetic retinopathy

2- tractional RD

Q8) I can't remember the history!!

1- what's the diagnosis?

3- dose this condition affect the vision and why?



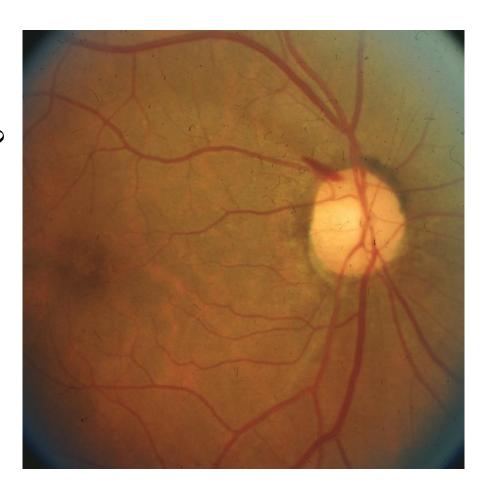
1-BRVO

3- yes; because the macula is involved

Q9)

1- what's the 2 main sign?

2- give two line of treatment?



1- cupping of the disc and splinter hemorrhage

2- prostaglandin analog carbonic anhydrase inhibitors **B-blockers** alpha -2 agonist anti cholinergic "any two of these will be right"

Q10)

1- give three cause for dim red light reflex?

cataract, vitreous hemorrhage, retinoblastoma ...

2- give two complication for cataract surgery?

Endoophthamitis, retinal detachment

Q11)

What is this sign and what is the disease that cause it?

Type of treatment medical or surgical other signs?



- 1-habb's stria, congential glucoma
 - Limbus injection
 - Surgical •

Q12)

- Keratoconus signs you see in slit lamp
- Sign in gross examination •

Fleischer ring and vogt's stria • Munson's sign •

Q13)

- amblyopia •
- Mention the types of amblyopia according to the etilogy?
 - When you treat it??

Refractive error, strabismus, deprivation •

At 8 years •