

THEORY PAPER, 6th SEMESTER

OPHTHALMOLOGY

TIME: 2Hr

Total: 50 Marks

Answer all the questions

Illustrate your answer with suitable diagrams whenever necessary

- 9/10 grade
1. A 45 years old farmer gives history of pain, redness, watering, intolerance to light and decrease in vision on his right eye after fall of foreign body 3 day ago. On slit lamp examination reveal a central corneal epithelial defect with infiltration at base and margin of the lesion with lid edema.

(2+2+4+4+3=15 marks)

- What are the most probable differential diagnosis?
- What other signs will you examine in this case?
- What are the pathological stages of the disease?
- How this case shall be managed?
- What complications will occur if untreated?

Q2. Write short notes on any (4 x 5= 20 marks)

- Hypermetropia
- Xerophthalmia
- Trachoma
- Acute iridocyclitis

Q3. Describe the following: (2x7.5 =15 marks)

- Management of acute angle closure glaucoma
- Development of Human Lens

Part - B (Ophthalmology)

Q1. A 62 old diabetic for 15 years comes for routine vision examination. His vision on examination 6/36 in right eye and 6/18 in left eye. His blood sugar levels are within normal limits. His intraocular pressure is 12 mmHg in both eyes. (1+2=5)

- Describe the causes for diminution of vision
- Describe the fundus changes in Non Proliferative Diabetic Retinopathy.
- What are the treatment options for Proliferative Diabetic Retinopathy?

Q2. Write short notes on any two (3x5=15)

- Ocular manifestations of thyroid disease.
- Etiopathogenesis of papilledema.
- Pterygium
- Viral keratitis
- Complications of cataract surgery
- Angular conjunctivitis
- Episcleritis
- Salient features of eye banking
- Amblyopia

Section - B (Ophthalmology)

3. Describe the etiology, pathogenesis, clinical picture and management of Bacterial Corneal Ulcer. (8)

4. Write short notes on: (4X3=12)

- Primary angle closure glaucoma
- Ophthalmia neonatorum
- Congenital cataract
- Complications of diabetic retinopathy

Section - B (Ophthalmology) (20 marks)

Q1. A 30 year lady with complains of pain, redness, photophobia of right eye (RE) for 1 week with diminution of vision presents to eye OPD. She gives a history of trauma. On examination her vision in RE is 6/24 and LE is 6/60. There are aqueous cells and flare in (RE) with IOP 26 mmHg and 18 mmHg in (LE). Pupil reaction is sluggish.

- What are the anterior and posterior segment findings you will expect? (1)
- What are the provisional diagnoses in this case? (1)
- What are the causes for diminution of vision? (1)
- How do you manage this case? (1)
- What are the complications that can occur if untreated? (1)

Q2. WRITE SHORT NOTES ON: (answer all questions) (3x5=15)

- Complications of cataract surgery
- Entropion
- Retinoblastoma
- Lens induced glaucoma
- Episcleritis

Section - B (Ophthalmology) 20 marks

Q3. Describe the etiopathogenesis, clinical picture and management of Primary Angle Closure Glaucoma. (2.5+ 2.5 + 3 =8)

Q4. Write short notes on: (4 x 3 =12)

- Herpes Zoster Ophthalmicus
- Chronic dacryocystitis
- Fungal corneal ulcer
- Vision 2020

Section - C (ENT) 10 marks

Ophthalmology

Total marks: 20

Q1. A 65 year old male complains of frequent change of presbyopic glasses. On examination, Best Corrected Visual acuity is 6/36 in right eye and 6/60 in left eye. Anterior segment is normal. Intraocular pressure is 24 mm Hg and 28 mmHg in left eye. Funduscopy reveals disc cupping in both eyes. (8 marks)

- What are the probable causes for diminution of vision? (1 mark)
- What is normal intraocular pressure and how it is measured? (1 marks)
- What are the optic disc changes in Primary Open angle glaucoma? (2 marks)
- What is Open and Closed angle glaucoma? (1 mark)
- What are the Visual field changes in Primary open angle glaucoma? (1.5 marks)
- What is the treatment in this case? (1.5 marks)

Q2 Write short notes on any four (4X3 =12 marks)

- Herpes Zoster Ophthalmicus
- Endophthalmitis
- Acute Dacryocystitis
- Closed Globe Injury
- Rehabilitation of the blind

Section - B (Ophthalmology) 20 marks

3. A 42-year male who is a known diabetic for five years complains of sudden loss of vision in the right eye. On examination, Visual acuity is Finger counting 2 meters distance and LE is 6/36. Spectacle power is -12.0 DS in RE and -6.0DS in LE. Slitlamp biomicroscopy of anterior segment is normal. Right eye fundus shows dot hemorrhages and inferior retinal detachment. (8)

- What are the probable causes of sudden loss of vision? (1.5)
- What is the etiology, pathogenesis and treatment of primary retinal detachment? (3.5)
- What is clinically significant macular oedema (CSME)? (1.5)
- What are the fundus finding in myopia? (1.5)

4. Write short notes on: (3x 4=12)

- Binocular Single Vision
- Normal tension glaucoma
- Eye Banking
- Epidemic Keratoconjunctivitis

Section-B (Ophthalmology 25 marks)

Q. 4. Attempt following multiple choice question (5 x 1 marks = 5 marks)

1. Distichiasis is:
 - a. Misdirected eyelashes
 - b. Accessory row of eyelashes
 - c. Downward drooping of upper lid
 - d. Outward protrusion of lower lid
2. Band shaped keratopathy is commonly caused by deposition of:
 - a. Magnesium salt
 - b. Calcium salt
 - c. Ferrous salt
 - d. Copper salt
3. Irrespective of the etiology of a corneal ulcer, the drug always indicated is:
 - a. Corticosteroids
 - b. Cycloplegics
 - c. Antibiotics
 - d. Antifungals
4. Dense scar of cornea with incarceration of iris is known as:
 - a. Adherent Leucoma
 - b. Dense leucoma
 - c. Ciliary staphyloma
 - d. Iris bombe
5. Corneal sensations are diminished in:
 - a. Herpes simplex
 - b. Conjunctivitis
 - c. Fungal infections
 - d. Marginal keratitis

Q. 5. Defines the glaucoma. Give the classification of the glaucoma. Describe in detail the clinical features and management of angle closure glaucoma. 5 marks

Q. 6. Define leucokoria along with its differential diagnosis. Explain the clinical features of retinoblastoma along with its treatment options. 5 marks

Q. 7. Write short notes on any Five (5 x 2 marks = 10 marks)

1. Enumerate the various cycloplegic agents.
2. What is bitot's spot? Enumerate various manifestation of hypo and hypervitaminosis of vit A.
3. Enumerate the various cataracts associated with different metabolic diseases.
4. Classify the Diabetic retinopathy
5. What is OCT? Describe the role of OCT in various Ophthalmic diseases.

MBBS-2013 Batch

Internal Assessment Examination

Subject: Ophthalmology

Total Marks: 30
Time: 90 Mins

Answer briefly and to the point. Use diagrams/flowcharts where relevant.

1. A 15 years old female patient presented to OPD with complains of pain, redness and photophobia in right eye for 2 days. On examination Visual acuity was normal, circum-corneal congestion (ciliary) was present and examination of the anterior chamber revealed presence of cells and flare and on dilation festooned pupil was seen. The patient had similar attack 1 year back. Based on these findings answer following:

- a) What is your provisional diagnosis (2 marks)
- b) Enumerate the other signs of this disease (2 marks)
- c) What are the systemic diseases associated with it (2 marks)
- d) How will you manage such a case (2 marks)
- e) What are the complications associated with it (2 marks)

2. Short notes [Answer any of the five questions (5x4)]

- a) Myopia
- b) Hypermature Senile Cataract
- c) Complicated Cataract
- d) Viral keratitis.
- e) Scleritis
- f) Measurement of Intra Ocular Pressure (IOP)
- g) Fungal Corneal Ulcer

All India Institute of Medical Sciences, Raipur CG
MBBS Batch 2012
Pre-University Examination
Surgery Paper II

Note: Answer All the 3 sections in different answer sheets and mention clearly the section and subject.
Time : 3 Hours
Total Marks : 60

Section A: Ophthalmology

Total Marks: 20

Write short notes on (Attempt any four – 5 marks each)

- 1) Clinical features and management of bacterial corneal ulcer.
- 2) Describe the clinical features and management of acute primary angle closure glaucoma.
- 3) Difference between Granulomatous Uveitis & Non Granulomatous Uveitis.
- 4) Congenital and developmental Cataract.
- 5) Describe Astigmatism & types of Astigmatism.



All India Institute of Medical Sciences, Bhubaneswar

OPHTHALMOLOGY
6TH SEMESTER MBBS 2014

TOTAL MARKS: 30
TIME: 90 MINS

Answer briefly and to the point. Use diagrams/flowcharts where relevant.

1. A child is brought by the mother complaining of whitish discoloration in both the eyes seen 3 months after birth. On examination there is a whitish reflex in the pupillary area.

- A) What are the differential diagnosis of the case? (3)
- B) What is the etiology of congenital cataract? (3)
- C) What are the investigations required in this case? (3)
- D) What is the treatment of this case? (3)
- E) What are the intra-operative complications? (3)

2. Write short notes on any three (3x5=15)

- A) Disciform keratitis
- B) Ectropion
- C) Astigmatism
- D) Scleritis
- E) Management of acute angle closure glaucoma

MBBS 2012 BATCH INTERNAL ASSESSMENT EXAMINATION

Subject: Ophthalmology

Total marks: 30
Time: 90 minutes

Answer briefly and to the point. Use diagrams/ flowcharts where relevant.

1. A 25 year old female presents to eye OPD with history of trauma with vegetable matter and complaints of pain, redness and watering in right eye. On examination cornea shows an irregular whitish lesion. [10 marks]

- a. What is your provisional diagnosis? [2]
- b. Enumerate other associated signs in this case. [2]
- c. How will you manage this case? [3]
- d. Enumerate the complications associated with this case. [3]

2. Short notes: Answer any five questions. [5x4 marks]

- a. Signs and symptoms of anterior uveitis.
- b. Management of Acute angle closure glaucoma.
- c. Types of senile cataract.
- d. Chronic dacryocystitis.
- e. Types of refractive error.
- f. Differential diagnosis of red eye.



2) Write short notes on the following:-

- a) Eye Banking
- b) Retinopathy of Prematurity
- c) Normal Tension Glaucoma
- d) Epidemic Keratoconjunctivitis

(4x3=12)



All India Institute of Medical Sciences, Bhubaneswar
3rd Professional MBBS Final Examination 2020 (Batch 2017)
Time: 3 Hrs **Ophthalmology** **Max. Marks: 100**

Instructions: Answer all the questions. Draw neat labelled diagram wherever necessary. The subparts of a question must be answered together. Use separate answer sheets for Section 'A' & 'B'

SECTION – A (50 marks)

1. The mother of a 3-year-old female baby complained of seeing some white reflex in both eye since last 6 months. (10 marks)
- a. What are the casus for white reflex. (2)
- b. What investigation you will advise for this case. (2)
- c. What are the treatment options in this case. (2)
- d. What is the complications you will encounter during surgery. (2)
- e. What is a zonular cataract? Draw diagrams to illustrate it. How will you manage it? (2)

Write short notes on

(8x5=40)

2. A 40years old male complains of recurrent sectoral redness of conjunctiva, which was diagnosed as episcleritis. (2.5+2.5)
- a. How you will differentiate between episcleritis and scleritis. % of cases (2.5)
- b. How you will manage this case? (2.5)
3. A 60 years old lady complain with gross, painless, progressive loss of vision. (1+2+2)
- a. Most common cause and diagnosis? (1)
- b. What are the different clinical stages of this disease? (2)
- c. What are the complication if not treated? (2)
4. Principle of retinoscopy? Describe with ray diagrams. (1+4)
5. A 18 year old boy complains of sudden loss of vision in right eye. On examination, his vision is hand movements in right eye. His spectacle power is (-18.0Dsph) in both eyes. (1+2+2)
- a. What is the cause of vision loss? (1)
- b. What are the retinal finding? (2)
- c. What is the treatment? (2)
6. Write the difference between and explain with diagrams (2.5+2.5)
- a. bacterial corneal ulcer and fungal corneal ulcer. (2.5)
- b. granulo:matous and non-granulomatous uveitis. (2.5)
7. A 62 years old female complain, redness and vomiting for 1 day. On examination, visual acuity in right eye was PL+ve with corneal oedema. IOP in right eye was >50 mm Hg. The left eye was normal (2+2+1)
- a. What is the probable diagnosis. (2)
- b. What treatment is needed. (2)
- c. What complications you will have if left untreated. (1)



8. What is posterior capsular opacification (PCO), its cause and management? Enumerate other post-operative complications of cataract surgery. (1+2+2)
9. Herpetic viral keratitis - clinical features and its management (2.5+2.5)

SECTION – B (50 marks)

10. A 69 years old male presented with complain of sudden loss of vision in right eye. He is a known diabetic on insulin therapy since 10 years. Visual acuity is FC at 1 meter in right eye and 6/60 in left eye. (10 marks)
- What are the probable causes of vision loss. (1.5)
 - What are the risk factors for developing diabetic retinopathy. (1.5)
 - Describe the complications of diabetic retinopathy. (2)
 - What is diabetic macular edema and how to treat it. (3)
 - What is the treatment of proliferative diabetic retinopathy. (2)

Write short notes on (8x5=40)

11. A 46years lady with starring look, diagnosed as Ocular Graves' Disease (OGD). (2.5+2.5)
- What are the ideal investigations for OGD.
 - What is clinical activity score for periodic clinical work up to monitor the clinical course?
12. A 16year old boy comes to emergency OPD with chemical injury to his right eye. (2.5+2.5)
- How you will grade the severity of the injury?
 - How you will manage the case?
13. What is optic atrophy? Write the Classification and Pathogenesis of it. (1+2+2)
14. What are the clinical feature of convergent squint and its management. (2.5+2.5)
15. Discuss briefly the following (2.5+2.5)
- Lasers used in Ophthalmology.
 - Eye Donation facts & Eye banking
16. What are the objectives of VISION 2020. Discuss the strategies by GOI to achieve these targets? (2+3)
17. Describe screening and guidelines, treatment of retinopathy of prematurity. (2.5+2.5)
18. Etiology, clinical presentation and management of a case of third nerve palsy (1.5+1.5+2)
