## Paper Code: MBBS302

## M.B.B.S. FINAL PROF. PART-I EXAMINATION, JANUARY/FEBRUARY- 2018 OPHTHALMOLOGY

[Time allotted: Three hours]

[Max Marks: 40]

Q. 1. Multiple choice questions (attempt all MCQs within allotted first 15 minutes in the OMR sheet) (½ x 16=08)

SET - D

- 1. Ideal cure for subacute angle closure glaucoma is:
  - a. Timolol
  - b. Peripheral iridectomy
  - c. Pilocarpine
  - d. Trabeculectomy
- 2. Which of following is **not** a feature in diabetic retinopathy on fundus examination?
  - a. Microaneurysms
  - b. Retinal hemorrhages
  - c. Arteriolar dilatation
  - d. Neo-vascularisation
- 3. Salt and pepper fundus is seen in:
  - a. Multiple sclerosis
  - b. Cystinosis
  - c. Weil-Marchaesani syndrome
  - d. Congenital rubella
- 4. The most common cause of vitreous hemorrhage in adults
  - a. Retinal hole
  - b. Trauma
  - c. Hypertension
  - d. Diabetes
- 5. Fundoscopic features of papilledema include all the following except:
  - a. Ill-defined disc margin
  - b. Deep physiological cup
  - c. Absent venous pulsation
  - d. Bending of blood vessels
- 6. Treatment of bilateral retinoblastoma is:
  - a. Chemotherapy
  - b. Enucleation
  - c. Radiotherapy
  - d. Cryc
- 7. In blunt injury to eye, following changes are seen except:
  - a. Macular hole
  - b. Berlin's edema
  - c. Subluxation of lens
  - d. Soft exudates
- 8. In sympathetic ophthalmitis, earliest sign is:
  - a. KP
  - b. Retrolental flare
  - c. Aqueous flare
  - d. Hypopyon

- In pupillary reflex, nerve tested is:
  - a. 2<sup>nd</sup> cranial nerve
  - b. 3<sup>rd</sup> cranial nerve
  - c. Both 2<sup>nd</sup> and 3<sup>rd</sup> cranial nerve
  - d. 4th cranial nerve
- 10. Bitemporal hemianopic field defect is characteristic of:
  - a. Glaucoma
  - b. Optic neuritis
  - c. Pituitary tumour
  - d. Retinal detachment
- Anteroposterior stability of eye ball is provided by all except:
  - a. Suspensory ligament of the eye ball
  - b. Superior oblique
  - c. Superior rectus
  - d. Orbital fat
- 12. Hemorrhagic conjunctivitis occurs with:
  - a. Herpes zoster
  - b. Herpes simplex
  - c. Acanthamoeba
  - d. Picornavirus
- 13. In keratoconus, all are seen except:
  - a. Munson's sign
  - b. Thinning of cornea in center
  - c. Distortion of cornea reflex at center
  - d. Hypermetropic refractive error found
- 14. Steroid induced cataract is:
  - a. Posterior subcapsular cataract
  - b. Anterior subcapsular cataract
  - c. Nuclear cataract
  - d. Cupulliform cataract
- 15. Dislocation of lens is seen in:
  - a. Trachoma
  - b. Diabetes mellitus
  - c. Homocystinuria
  - d. Turner's syndrome
- 16. First sign seen in open angle glaucoma:
  - a. Arcuate scotoma
  - b. Extension above blind spot
  - c. Roene's nasal step
  - d. Siedel's scotoma

## OPHTHALMOLOGY

Note: Attempt all questions. Draw suitable diagrams (wherever necessary) O. 2. Give reasons why: a. Daily sweeping of fornix is important in chemical burn of eye. b. Inj. Hyaluronidase (Hylase) is added in peribulbar block. c. Unilateral total congenital cataract should be operated as early as possible. d. Total hyphaema in blunt ocular injury should be drained early.  $(1 \times 4 = 04)$ O. 3. Problem based question: A 55 year female developed sudden, painless and marked decrease vision from right eye. She was operated for fracture shaft femur bone of right side recently. Answer following questions: a. What is your diagnosis? b. What is the cause of decreased vision? c. Write differential diagnosis of this condition. d. What is the management?  $(2 \times 4 = 08)$ Q. 4. Write short notes on: a. Acanthamoeba keratitis b. Choroiditis c. Thyroid eye disease d. Hypertensive retinopathy Q. 5. (i) What is sympathetic ophthalmitis? Discuss etiology, symptoms, signs & management of this (1+3=04)(ii) Discuss symptoms, signs, investigations and treatment of malignant glaucoma. (1+1+1+1=04) $(2 \times 4 = 08)$ O. 6. Write in brief about: a. Tests for dry eye diseases b. Per-operative complications of cataract surgery c. Posterior scleritis d. Paralytic squint