Paper Code: MBBS302

OPHTHALMOLOGY

Note: Attempt all questions.

Draw suitable diagrams (wherever necessary)

Q. 2. Give reasons:

 $(1 \times 4 = 04)$

- a. Posterior chamber lens implantation is not possible in grossly subluxated lens.
- b. Blind spot is not visible in the field of vision in normal individuals.
- F Iris neovascularization is seen in retinal ischemia.
- d Secondary deviation is more than primary deviation in paralytic squint.

Problem based question:

 $(1 \times 4 = 04)$

A 60 years old short statured female presented in the casualty with history of sudden onset of very severe pain in the right eye with redness and marked impairment of vision in the same eye. She is also having systemic symptoms of headache and vomiting. She gives history of seeing colored haloes in the past. Answer the following:

- a. What is the probable diagnosis?
- b. What is the differential diagnosis?
- c. What are the clinical features of the condition?
- d. How will you manage the case?

Q. 4. Write short notes on:

 $(2 \times 4 = 08)$

- a. Aphakia
- b. National programme for control of blindness
- c. Diabetic retinopathy
- d. Berlin oedema

(i) Discuss symptoms, signs, investigations and treatment of fungal corneal ulcer. Q. 5.

(1+1+1+1=04)

(ii) Classify cataract and discuss about clinical features and management of senile cataract.

(1+1+2=04)

Write in brief about: Q. 6.

 $(2 \times 4 = 08)$

- a. Ophthalmia neonatorum
- b. Posterior scleritis
- c. Blepharitis
- d. Test for dry eye

5-708

M.B.B.S. FINAL PROF. PART-I EXAMINATION, JANUARY/FEBRUARY- 2019 OPHTHALMOLOGY

[Time allotted: Three hours]

[Max Marks: 40]

Q. 1. Multiple choice questions (attempt all MCQs in the allotted 15 minutes in the OMR sheet)

 $(\frac{1}{2} \times 16 = 08)$

SET - C

- 1. The effective treatment of dendritic ulcer of the cornea is:
 - a. Surface anesthesia
 - b. Local corticosteroids
 - c. Systemic corticosteroids
 - d. Acyclovir ointment
- 2. Chalazion is a chronic inflammatory granuloma of:
 - a. Meibomian gland
 - b. Zies's gland
 - c. Sweat gland
 - d. Wolfring's gland
- 3. Ptosis in Horner's syndrome, is due to paralysis of:
 - a. Riolan's muscle
 - b. Horner's muscle
 - c. Muller's muscle
 - d. The levator palpebral muscle
- 4. All are features of acute granulomatous anterior uveitis except:
 - a. Mutton fat KPs
 - b. AC cells
 - c. Koeppe's nodules
 - d. Chorioretinitis
- 5. Which optic nerve finding is most concerning for glaucomatous damage?
 - a. Large disk size
 - b. Horizontal cupping
 - c. Vertical cupping
 - d. Disk tilt
- 6. Megalocornea is seen in:
 - a. Keratoconus
 - b. Keratoglobus
 - c. Argyrosis
 - d. Buphthalmos
- 7. All are features of diabetic retinopathy except:
 - a. Hard exudates
 - b. Dot blot hemorrhages
 - c. Flame shaped hemorrhages
 - d. Macular edema
- 8. The commonest cause of unilateral proptosis is:
 - a. Thyroid eye disease
 - b. Basal cell carcinoma of the lid
 - c. Orbital cellulitis
 - d. Cavernous sinus thrombosis

- 9. After 48 hours of a cataract extraction operation, a patient complained of ocular pain and visual loss. On examination, this eye looked red with ciliary injection, corneal oedema and absent red reflex. The first suspicion must be:
 - a. Secondary glaucoma
 - b. Anterior uveitis
 - c. Bacterial endophthalmitis
 - d. Acute conjunctivitis
- 10. Christmas tree cataract is seen in:
 - a. Diabetes mellitus
 - b. Trauma
 - c. Myotonic dystrophy
 - d. Myasthenia gravis
- 11. A recurrent bilateral conjunctivitis occurring with the onset of hot weather in young boys with symptoms of burning, itching, and lacrimation with large flat topped cobble stone papillae raised areas in the palpebral conjunctiva is:
 - a. Trachoma
 - b. Phlyctenular conjunctivitis
 - c. Mucopurulent conjunctivitis
 - d. Vernal keratoconjunctivitis
- 12. Which of the following organism can penetrate intact corneal epithelium?
 - a. Streptococcus pyogenes
 - b. Staphylococcus aureus
 - c. Pseudomonas pyocyanaea
 - d. Corynebacterium diphtheria
- 13. In chemical injury with lime what should be done first:
 - a. Take the patient to the ophthalmologist
 - b. Wash the eye with copious amount of water
 - c. Dilate the pupils with atropine
 - d. Start antiglaucoma immediately
- 14. Corneal Herbert's rosettes are found in:
 - a. Mucopurulent conjunctivitis
 - b. Phlyctenular kerato-conjunctivitis
 - c. Active trachoma
 - d. Spring catarrh
- 15. A painful, tender, non-itchy localized redness of the conjunctiva can be due to:
 - a. Bulbar spring catarrh
 - b. Episcleritis
 - c. Vascular pterygium
 - d. Phlyctenular conjunctivitis
- 16. Fifth nerve palsy could cause:
 - a. Ptosis
 - b. Proptosis
 - c. Neuropathic keratopathy
 - d. Lagophthalmos

Paper Code: MBBS302

OPHTHALMOLOGY

Note: Attempt all questions.

Draw suitable diagrams (wherever necessary)

Q. 2. Give reasons:

 $(1 \times 4 = 04)$

- a. Acute angle closure occurs in evening time.
- b. Near vision improves in nuclear sclerosis.
- c. Jet black pupil is seen in aphakia.
- d. Real and inverted image on indirect ophthalmoscopy

Q. 3. Problem based question:

 $(1 \times 4 = 04)$

A 73 year old woman presents with a red, painful, right eye. Examination of the involved eye reveals HM vision, IOP of 46 mmHg, mild corneal edema, mature cataract, and shallow anterior chamber.

- a. What is your diagnosis?
- b. What is your differential diagnosis?
- c. How will you investigate the patient?
- d. How will you treat this condition?

Q. 4. Write short notes on:

 $(2 \times 4 = 08)$

- a. Dendritic ulcer
- b. Astigmatism
- c. Posterior staphyloma
- d. Contral retinal artery occlusion

Q. 5. (i) Define and classify trachoma. What are the symptoms, signs and management of trachoma?

(1+1+2=04)

(ii) Describe classification and clinical features of angle closure glaucoma. Discuss its investigations and management. (1+1+1+1=04)

Q. 6. Write in brief about:

 $(2 \times 4 = 08)$

- a. Fungal keratitis
- b. Thyroid ophthalmopathy
- c. Retinitis pigmentosa
- d. Ptosis

M.B.B.S. FINAL PROFESSIONAL PART-I EXAMINATION, MAY/JUNE-2019 OPHTHALMOLOGY

[Time allotted: Three hours]

SET-B

[Max Marks: 40]

Q. 1. Multiple choice questions (attempt all MCQs in the allotted 15 minutes in the OMR sheet)

 $(\frac{1}{2} \times 16 = 08)$

- 1. Permanent corneal scarring occurs if there is damage to:
 - a. Epithelium
 - b. Bowman's membrane
 - c. Descemet's membrane
 - d. Endothelium
- 2. Evisceration is done for:
 - a. Panophthalmitis
 - b. Endophthalmitis
 - c. Retinoblastoma
 - d. Vitreous hemorrhage
- 3. Marcus gunn pupil is seen with involvement of:
 - a. Lens
 - b. Retina
 - c. Optic nerve
 - d. Cornea
- 4. Dendritic ulcer is seen in which infection?
 - a. Fungal
 - b. Bacterial
 - c. Parasitic
 - d. Viral
- 5. Extraocular muscles arises from annulus of Zinn except:
 - a. Inferior oblique
 - b. Superior rectus
 - c. Inferior rectus
 - d. Medial rectus
- 6. Retinitis pigmentosa consists of all except:
 - a. Night blindness
 - b. Optic disc pallor
 - c. Tubular vision
 - d. Central scotoma
- 7. Third nerve palsy causes:
 - a. Ptosis
 - b. Entropion
 - c. Retinal detachment
 - d. Hemianopia
- 8. The cattle track appearance on fundus is seen in:
 - a. Diabetic retinopathy
 - b. Central retinal vein occlusion
 - c. Central retinal artery occlusion
 - d. Anterior uveitis

- 9. Snellens chart is used to test:
 - a. Visual acuity
 - b. Presbyopia
 - c. Color vision
 - d. Stereopsis
- 10. All are cycloplegics except:
 - a. Atropine
 - b. Timolol
 - c. Homatropine
 - d. Cyclopentolate
- 11. D' shaped pupil is seen in:
 - a. Iridocyclitis
 - b. Lens dislocation
 - c. Central retinal venous occlusion
 - d. Iridodialysis
- 12. Vossious ring is seen on:
 - a. Anterior capsule of lens
 - b. Cornea
 - c. Iris
 - d. Retina
- 13. Total number of bones forming the orbit are:
 - a. 7
 - b. 4
 - c. 6
 - d. None of the above
- 14. The nerve supply of cornea is from:
 - a. Facial nerve
 - b. Trigeminal nerve
 - c. Optic nerve
 - d. Abducent nerve
- 15. Which of the following is a late sequelae of trachoma?
 - a. Entropion
 - b. Staphyloma
 - c. Cataract
 - d. Arcus senilis
- 16. Follicular conjunctivitis is caused by:
 - a. Adenovirus
 - b. Pseudomonas
 - c. Corynebacterium diphtheriae
 - d. All of the above