|  |  |  |  |
| --- | --- | --- | --- |
| كلية الطب  جامعة مؤتة | |  | Faculty of Medicine,  Mu’tah University |
| Fifth-yearOphthalmology Exams | | | |

**This folder contains Ophthalmology questions from the years :  
 2010/2012/2014/2017/2018/2019\2020\2021\2023 and from 2 unknown folders**

**قام بجمع وترتيب هذه الأسئلة أحمد الخطايبة لغاية امتحانات سنة 2017 ..  
 وتم إضافة و تنسيق الإمتحانات حتى2019 عن طريق طارق أبو لبدة & سيف مدادحة ..**

**و امتحان 2020 عمل عبدالله عزام وامتحان 2021 عمل سجى الصرايرة   
 وبإشراف لجنة الطب والجراحة ..**



فانيل 2023 – وريد

تم جمع الأسئلة بواسطة: ليث النجادا - حوسبة : منذر القطاونة

1. Advantage of direct ophthalmoscope over indirect ophthalmoscope:
   1. Erect image XXX
   2. Use of a light source
   3. Less magnification
   4. Wider diameter of the visual field
   5. More difficult to use
2. When looking to a close object, the zonules:
   1. Contract
   2. Relax XXX
   3. Twist
3. True about myopia :  
   It increases the risk of retinal detachment XXX
4. Cylindrical lenses are usually prescribed in the treatment of:
   1. Astigmatism. XXX
   2. Myopia.
   3. Hypermetropia.
   4. Presbyopia.
   5. Squint.
5. HPV 6 and 8 are associated with:
   1. Keratoacanthoma
   2. Lid warts \*\*
6. The pathognomonic features of trachoma include all of the following signs Except Select one:
   1. Conjunctival follicles.
   2. Corneal pannus.
   3. Herbert s pits,
   4. Conjunctival scarring.
   5. Conjunctival Papillae. XXX
7. The important differential diagnosis of epihorato rule out in in a child is :
   1. Nasolacrimal duct obstruction XXX
   2. Corneal foreign body
   3. Keratitis
8. Wrong about herpes simples keratitis:
   1. It is best to start treatment with corticosteroids in the presence of dendritic ulcer XXX
   2. Primary infection can be asymptomatic
   3. Most common source is reactivation of latent infection in dorsal root ganglia
9. Steroid eye drops are contraindicated in which one of the following conditions: Select one:
   1. Anterior uveitis.
   2. Optic neuritis.
   3. Allergic conjunctivitis.
   4. Herpetic dendritic ulcer. XXX
   5. Viral conjunctivitis
10. Rupture of Descemet's membrane is most likely to be seen in which one of the following conditions? Select one:
    1. Senile arcus.
    2. Retinitis pigmentosa.
    3. Nuclear sclerosis.
    4. Rubella
    5. Keratoconus XXX
11. The embryonic origin of the lens is:
    1. Ectoderm XXX
    2. Endoderm
    3. Mesoderm
    4. Neural-crest cells
    5. Neuro-ectoderm
12. All of the following are early complications of cataract surgery, except:
    1. Posterior capsular opacification XXX
    2. Vitreous loss
    3. Iris prolapse
    4. Endophthamitis
13. The cataract that is associated with steroids use is:
    1. Posterior subcapsular XXX
    2. Anterior subcapsular
    3. Nuclear lamellar cataract
    4. Polar cataract
14. Wrong about chronic juvenile arthritis :
    1. The uveitis is usually severe and symptomatic XXX
    2. Can be either pauciarticular or polyarticular
15. The earliest sign to be seen in acute anterior uveitis is: Select one:
    1. a. Keratitic precipitates.
    2. b. Aqueous flare. XXX
    3. C. Hypopyon.
    4. d. Posterior synechiae.
    5. e. Posterior subcapsular cataract.
16. All of the following cause chronic open angle glaucoma, except:
    1. Pseudoexfoliative syndrome
    2. Iridocorneal angle recession
    3. Rubeosisiridis XXX
    4. Pigment dispersion syndrome
    5. Phakolytic glaucoma
17. One of the following is a risk factor for retinal detachment:
    1. Presbyopia
    2. Myopia XXX
    3. Hypermetropia
    4. Male
    5. Black
18. The most common primary intraocular tumour in children is: Select one:
    1. Medulloepithelioma.
    2. . Optic nerve glioma.
    3. Malignant melanoma.
    4. Retinoblastoma. XXX
    5. Astrocytoma.
19. the earliest sign to be found indiabetic retinopathy:
20. microanurisms \*\*
21. cotton wool
22. hemorrhages
23. All of the following affect the prognosis of diabetic retinopathy, except:
    1. Duration since diagnosis
    2. Associated systemic disease
    3. Smoking
    4. Type of diabetes XXX
    5. Control of diabetes
24. All of the following can cause Horner’s syndrome, except:
    1. Syringomyelia
    2. Carotid aneurysm
    3. Neck trauma
    4. Pancoast tumor
    5. Ciliaryganglionitis XXX
25. The most common cause of optic neuritis in a 30 year old adult woman is:
    1. Multiple sclerosis XXX
26. Ptosis in :3rd palsy
27. Latent divergent squint (exophoria) is most likely to be seen in which one of the following conditions: Select one:
    1. Hypermetropia.
    2. Presbyopia.
    3. Aphakia
    4. Pseudophakia.
    5. Myopia.
28. Management of chemical eye burn:
    1. Send to ER
    2. Copious water irrigation for at least 30 minutes XXX
    3. Vitamin C topical
    4. Tetracycline oral
29. All are associated with atopic eczema, except:
    1. Glaucoma
    2. Cataract
    3. Retinal detachment XXX
    4. Keratoconus
30. The primary action of the right superior oblique muscle in the primary gaze position is: Select one:
    1. Dextrodepression.
    2. Laevodepression. XXX
    3. Dextroelevation.
    4. Laevoelevation.
    5. Adduction.
31. Sudden loss of vision can occur in all of the following conditions Except:
    1. Optic neuritis.
    2. Central retinal artery occlusion.
    3. Central retinal vein occlusion.
    4. Papilloedema. XXX
    5. Vitreous haemorrhage
32. Vit A deficiency except :  
    dermoid cyst
33. Glucoma is not caused by :  
    occlusion of short ciliary arteries
34. Keiser flesher ring associated with elevated:
    1. Iron
    2. Copper XXX
35. Cause of congenital cataract:
    1. CMV
    2. Toxoplasmosis XXX
36. Endophthalmitis is an inflammation of the:
    1. Choroid
    2. Retina
    3. Internal part of the eya
    4. All parts of the eye
    5. Vitreous XXX
37. Incorrect about keratoacanthoma:
    1. do not exhibit cellular atypia ✅
    2. Associated with systemic disease
    3. Umbilication
    4. Spontaneously resolve
38. Stage 4 hypertensive retinopathy:
    1. Papilledema ✅
    2. AV nipping
    3. Flamed shape hemorrhage
39. Rhegamentous retinal detachment caused by:
    1. Retinal tear ✅
40. Sebaceous adenocarcinoma of the eyelid, one is incorrect:
    1. More common in female
    2. The 3rd most common malignancy of the lid
    3. Arise from meibomian and moll glands ✅ (its from meibomian and zeis glands)
41. One of the following used to evaluate the anterior chamber angle:
    1. Gonioscopy ✅
42. The skin fold that cover the inner fold of the eye:
    1. Epicanthum ✅
43. Glaucoma with uveitis, which of the following drug is contraindicated:
    1. Pilocarpine ✅
44. Sebaceous of the eye lids: which is false?
45. Is the third most common eyelid malignancy
46. IS more common in women than in men
47. Is more common on the upper eyelids
48. Must be confirmed by full-thickness wedge biopsy
49. Arises from the meibomian and glands XXX
50. Squamous cell carcinoma of the eyelids which is incorrect:
    1. Is more aggressive than basal cell carcinoma
    2. Is more common in lightly pigmented individuals than in dark pigmented ones
    3. May be potentiated by immunodeficiency
    4. Does not arise from actinic lesions XXX
    5. Often metastasizes along nerves

فيه سؤالين مكتوبين زيادة مش أرشيف 😊

**2021**

1.The highest visual resolution could be seen through which one of the following retinal areas? Select one:

a. Ora serrate.

b. Fovea centralis.

c. Macula lutea.

d. Optic disc.

e. Nasal retina.

2.Using the direct ophthalmoscope, the image that you will see is

1. Real, inverted, magnified.
2. Virtual, inverted, condensed
3. Virtual, erect, magnified.
4. Real, erect. condensed.
5. Real, erect, magnified,

3- The first order neuron of the visual pathway lies in which layer of the retina: Select one:

a. Inner nuclear layer.

b. Outer plexiform layer.

C. Ganglion cell layer. O

d. Optic nerve fiber layer.

e. Retinal pigment epithelial layer.

4- In managing unilateral aphakia, which one of the following is the least appropriate? Select one:

a. Spectacles.

b. Contact lenses.

C. Posterior chamber IOL (intraocular lens).

d. Anterior chamber IOL.

e Scleral fixation IOL

5- In which one of the following conditions, pulsating proptosis is most likely to be seen: Select one.

a. Arteriovenous aneurysm.

b. Cavernous sinus thrombosis.

c. Orbital varicose vein.

d. Thyrotoxicosis.

e Lacrimal gland tumour

6- The earliest sign to be seen in acute anterior uveitis is: Select one:

a. Keratitic precipitates.

b. Aqueous flare.

C. Hypopyon.

d. Posterior synechiae.

e. Posterior subcapsular cataract.

7- Commotio retinae is most likely to be seen in: Select one:

a. Posterior ischemic optic neuropathy.

b. Diabetic macular edema.

c. Sever blunt eye trauma.

d. Central retinal artery occlusion.

e Elevated ICP (intracranial pressure).

8- Which one of the following conditions is most likely to cause decrease in corneal sensation: Select one:

a. Staphylococcal corneal ulcer.

b. Traumatic corneal abrasion.

C. Anterior uveitis,

d. Fungal keratitis.

e. Herpes simplex keratitis.

9- The late clinical features of retinitis pigmentosa, may include all of the following Except: Select one:

a. Sheathing of retinal blood vessels.

b. Waxy pale optic disc.

C. Posterior subcapsular cataract.

d. Normal visual acuity

e. Cystoid macular oedema.

10- Vitreous haemorrhage could be seen in all of the following conditions Except: Select one:

a. Ocular trauma.

b. Diabetic retinopathy.

C. Chronic anterior uveitis.

d. Eale's disease.

e. Central retinal vein occlusion.

11- In penetrating eye injury, the worst complication of the following to occur is: Select one:

a. Vitreous haemorrhage.

b. Iridocyclitis.

C. Sympathetic ophthalmitis.

d. Subluxation of the lens.

e. Iris prolapse.

12- Complications of vitreous loss during cataract surgery may include all of the following Except: Select one:

a. Updrawn pupil.

b. Optic disc drusens.

C. Retinal detachment.

d. Corneal oedema.

e. Macular oedema.

13- High myopia is least likely to be associated with one of the following complications: Select one:

a. Closed angle glaucoma.

b. Cataract.

c. Retinal detachment.

d. Vitreous degeneration.

e. Open angle glaucoma

14- The cardinal feature of stage 4 hypertensive retinopathy in malignant hypertension is: Select one

a. Arteriovenous crossing changes.

b. Flame-shaped haemorrhage.

C. Soft exudates.

d. Bilateral optic disc swelling.

e. Dot-blot haemorrhage

15- Regarding the eyelid ptosis seen in Horner's syndrome, all of the following are true Except: Select one:

a. Associated with small miosed pupil.

b. Can be accompanied by difference in iris color.

C. Caused by paralysis of oculomotor nerve,   
d. Usually mild in magnitude.

e. May be caused by neck trauma.

16- In treatment of secondary open angle glaucoma associated with uveitis, which one of the following drugs is contraindicated Select one:

a. Atropine. O

b. Timolol maleate

C Pilocarpine

d. Cyclopentolate 1%.

e Dorzolamide

17- All of the following are early postoperative complications of cataract surgery Except: Select one:

a. Iris prolapse.

b. Acute postoperative endophthalmitis.

c. Shallow anterior chamber

d. Posterior capsular opacification.

e Mild corneal oedema

18- In managing congenital Nasolacrimal duct obstruction, which one of the following is most appropriate: Select one:

a. Syringing and probing as early as possible.

b. DCR (Dacryocystorhinostomy) at presentation regardless of the age

C. Lacrimal sac massage till the age of 8-12 months.

d. Probing with insertion of tubes at the time of presentation.

e. Massage to the lacrimal gland 4-5 times daily.

.

19- A 50 years old patient presented with acute painless loss of vision, general examination showed systolic murmur, fundus examination showed central cherry red spot, the most likely diagnosis is. Select one:

a.Central retinal vein occlusion

b. Central retinal artery occlusion.

c. Acute angle closure glaucoma O

d. Diabetic retinopathy

e. Acute anterior uveitis

20 - Glaucoma may be secondary to all of the following conditions Except: Select one

a. Anterior uveitis.

b. Age related macular oedema

. c. Hyphaema.

d. Hypermature cataract.

e Pigment dispersion syndrome.

21- Which one of the following conditions is most likely to be associated with intense ocular itching: Select one:

A.Episcleritis

b. Scleritis.

C. Cataract.

d. Spring catarrh.

e. Mild mucopurulent conjunctivitis

22- White pupillary reflex could be seen in all of the following conditions Except Select one:

a. Congenital cataract.

b. Retinoblastoma.

C. Total retinal detachment

d. Open angle glaucoma.

e. After cataract.

23- Steroid eye drops are contraindicated in which one of the following conditions: Select one:

a. Anterior uveitis.

b. Optic neuritis.

c. Allergic conjunctivitis.

d. Herpetic dendritic ulcer.

e. Viral conjunctivitis

24 - Rupture of Descemet's membrane is most likely to be seen in which one of the following conditions? Select one:

a. Senile arcus.

b. Retinitis pigmentosa.

c- Nuclear sclerosis.

d. Rubella

e Keratoconus

25 - The pathognomonic features of trachoma include all of the following signs Except Select one:

a. Conjunctival follicles.

b. Corneal pannus.

C. Herbert s pits,

d. Conjunctival scarring.

e. Conjunctival Papillae.

26- In managing glaucoma, which one of the following is not properly matched? Select one:

a. Neovascular glaucoma and retinal laser photocoagulation.

b. Acute angle closure glaucoma and YAG laser iridotomy.

C. Acute angle closure glaucoma and Atropine 1% eye drops for pain control.

d. Phacogenic glaucoma and cataract extraction.

e. Primary open angle glaucoma and Trabeculectomy

27 - The most common primary intraocular tumour in children is: Select one:

a. Medulloepithelioma.

b. Optic nerve glioma.

c. Malignant melanoma.

d Retinoblastoma.

e Astrocytoma.

28 - The most important step in managing ocular chemical burn is: Select one:

a. Removing particle material.

b. Antibiotic eye drops.

c. Neutralizing acids by bases.

d. Copious irigation.

e. Vitamin C tablets.

29 - The primary action of the right superior oblique muscle in the primary gaze position is: Select one:

a. Dextrodepression.

b. Laevodepression.

c. Dextroelevation.

d. Laevoelevation.

e. Adduction.

30 - All of the following signs are highly suggestive of post traumatic orbital compartment syndrome Except Select one:

a. Severe conjunctival chemosis.

b. Proptosis.

C. Dilated pupil.

d. Full extraocular motility.

e. Diminished visual acuity.

31- All of the following features could be seen in Oculomotor nerve palsy Except: Select one

a. Fixed dilated pupil.

b. Facial weakness.

c. Absent accommodation.

d. Divergent squint.

e. Ptosis.

32- all of the following characteristics of Squamous Cell Carcinoma of the eyelid are true Except Select one:

a. May arise de novo.

b. May arise from premalignant lesion.

C. May metastasize to local lymph nodes.

d. Less malignant than Basal Cell Carcinoma.

e. Exposure to UV (ultra violet) light is a risk factor.

33-In ophthalmology, prisms are used to measure and to treat one of the following conditions: Select one:

a. Hypermetropia.

b. Presbyopia.

C. Strabismus

d. Myopia.

e. Astigmatism.

34 - The least likely sign to be seen in acute anterior uveitis is: Select one

a. Keratitic precipitates.

b. Dilated pupil.

c. Low 10P (intraocular pressure).

d. High 1OP.

e. Hypopyon.

35The retina develops from one of the following structures: Select one.

a. Optic vesicle.

b. Mesoderm.

c. Surface ectoderm.

d. Embryonic fissure.

e. Ectoderm.

36 - A 75 years old Patient underwent cataract surgery, 4 days after that the patient presented with acute painful loss of vision, severe conjunctival redness, the most likely diagnosis is. Select one

: a. Cystoid macular edema.

b. Acute postoperative endophthalmitis.

c. Cystoid macular oedema.

d. Ruptured posterior capsule.

e. IOL (intraocular lens) dislocation

37- Latent divergent squint (exophoria) is most likely to be seen in which one of the following conditions: Select one:

a Hypermetropia.

b. Presbyopia. C. Aphakia

d. Pseudophakia.

e. Myopia.

38 - Bitemporal hemianopia may be seen with one of the following conditions: Select one:

a. Frontal lobe space occupying lesion.

b. Temporal lobe space occupying lesion.

c Occipital lobe space occupying lesion.   
d. Aneurysm of circle of Willis

e,Retinoblastoma

39-The pupil is most likely to be pinpointed in which one of the following conditions: Select one:

a. Optic atrophy.

b. Open angle glaucoma

C. Closed angle glaucoma.

d. Acute anterior uveitis.

e Age related macular degeneration.

40- Which one of the following conditions is most likely to be associated with epiphora? Select one:

a. Acute anterior uveitis.

b. Trachoma.

C. Acute congestive glaucoma.

d. Viral conjunctivitis.

e. Chronic dacryocystitis.

**2020**

**Question 1: Late complications of vitreous loss during cataract surgery include all of the followings except:**

**Select one:**

a. Retinal detachment.

b. Corneal oedema.

c. Macular oedema.

d. Secondary glaucoma.

e. Posterior capsular opacification.

**Question 2: Blood vessels in a trachomatous pannus lie:**

**Select one:**

a. In the stroma.

b. Between bowman’s membrane and epithelium.

c. Beneath the descemet’s membrane.

d. Between bowman’s membrane and stroma.

e. Beneath the endothelium.

**Question 3: Regarding buphthamos, all of the followings are correct except:**

**Select one:**

a. Occurs in congenital glaucoma.

b. Boys are affected more than girls. (explanation : Its autosomal ressisive inheritance)

c. Usually bilateral.

d. Trabeculotomy is the treatment of choice.

e. Occurs in acquired angle closure glaucoma.

**Question 4: Most common presenting feature in primary open angle glaucoma is:**

**Select one:**

a. Headache.

b. Eyeache.

c. Coloured halos.

d. Progressive visual field defect noticed in advanced cases.

e. Mid-dilated nonreactive pupil.

**Question 5: Exophoria is a common feature in one of the following conditions:**

**Select one:**

a. Myopia.

b. Aphakia.

c. Hypermetropia.?

d. Presbyopia.

e. Pseudophakia.

**Question 6: Concomitant convergent squint can be seen in all of the following conditions Except:**

**Select one:**

a. Hypermetropia.

b. Congenital myopia.

c. Opacities in the media.

d. Paralysis of the lateral rectus muscle.

e. Congenital cataract

**Question 7: Which one of the following pathogens can invade normal intact corneal epithelium:**

**Select one:**

a. Staphylococcus aureus.

b. Neisseria gonorrhoeae.

c. Escherichia coli.

d. Klebsiella.

e. Nocardia asteroids.

**Question 8: Lagophthalmos is the condition of:**

**Select one:**

a. Drooping of the upper eyelid below its normal position.

b. Lid margin rolls outwards.

c. Lid margin rolls inwards.

d. Incomplete closure of the palpebral aperture.

e. Upper lid retraction.

**Question 9 : Flame-shaped haemorrhages are most commonly seen in the retinopathy of:**

**Select one:**

a. Diabetes.

b. Retinitis pigmentosa.

c. Toxoplasmosis.

d. Hypertension.

e. Eale’s disease.

**Question 10:Cylindrical lenses are usually prescribed in the treatment of:**

**Select one:**

a. Astigmatism.

b. Myopia.

c. Hypermetropia.

d. Presbyopia.

e. Squint.

Question 11: D-shaped pupil is usually seen in one of the following conditions:

Select one:

a. Iridocyclitis.

b. Iridodialysis.

c. Open angle glaucoma.

d. Dislocation of the lens.

e. Cataract.

**Question 12:The symptoms of choroiditis include all of the following except:**

**Select one:**

a. Photopsia. ?

b. Macropsia.

c. Micropsia

d. Photophobia.

e. Metamorphopsia.

**Question 13:The most common orbital malignant tumor in children is:**

**Select one:**

a. Neuroblastoma.

b. Retinoblastoma.

c. Rhabdomyosarcoma.

d. Orbital lymphoma.

e. Optic nerve glioma.

**Question 14: All of the following signs and symptoms may be seen in Optic Neuritis Except:كلهن صح!!**

**Select one:**

a. Impaired color vision.

b. Optic disc swelling.

c. Normal Optic nerve head.

d. Intact pupillary light reaction

e. Pain upon adduction of the involved eye.

**Question 15:The lens derives its nourishment from:**

**Select one:**

a. Vitreous.

b. Air.

c. Aqueous humour.

d. Perilimbal capillaries.

e. Iris.

**Question 16: The most dangerous complication of orbital cellulitis is:**

**Select one:**

a. Abscess formation.

b. Cerebral involvement.

c. Diplopia.

d. Proptosis.

e. Sinusitis.

**Question 19:The deposits seen in arcus senilis is:**

**Select one:**

a. Hyaline.

b. Lipids.

c. Iron.

d. Copper.

e. Calcium.

**Question 18:The characteristic ocular features of AIDS include all of the followings except:**

**Select one:**

a. Cotton wool spots.

b. Conjunctival kaposi’s sarcoma.

c. Cytomegalovirus retinitis.

d. Molluscum contagiosum lesions.

e. Dermoid cyst.

**Question 19: Scleritis is often associated with all of the following diseases except:**

**Select one:**

a. Polyarteritis nodosa.

b. Dermatomyositis.

c. Systemic lupus erythematosus.

d. Rheumatoid arthritis.

e. Diabetes mellitus.

**Question 20:The association of keratoconjunctivitis sicca with rheumatoid arthritis is:**

**Select one:**

a. Stevens-Johnson syndrome.

b. Reiter’s syndrome.

c. Sjogren’s syndrome.

d. Mikulicz’s syndrome.

e. Cicatricial pemphigoid syndrome.

**Question 21:Black spots floating in front of eyes is a most likely symptom of:**

**Select one:**

a. Iritis.

b. Intermediate uveitis (Vitritis).

c. Acute angle closure glaucoma.

d. Open angle glaucoma

e. Bacterial keratitis.

**Question 22: True membranous conjunctivitis is usually caused by:**

**Select one:**

a. Adenovirus.

b. Trachoma.

c. Morax-Axenfeld bacillus.

d. Diphtheria.

e. Molluscum contagiosum virus.

**Question 23:Herbert’s pits are seen in which one of the followings:**

**Select one:**

a. Ophthalmia neonatorum.

b. Trachoma.

c. Herpetic conjunctivitis.

d. Spring catarrh.

e. Adenoviral conjunctivitis.

**Question 24: Sudden loss of vision can occur in all of the following conditions Except:**

**Select one:**

a. Optic neuritis.

b. Central retinal artery occlusion.

c. Central retinal vein occlusion.

d. Papilloedema.

e. Vitreous haemorrhage

**Question 25:The nasolacrimal duct opens in the nose at:**

**Select one:**

a. Superior meatus.

b. Inferior meatus.

c. Nasal septum.

d. Middle meatus.

e. Superior turbinate.

**Question 26:All of the following conditions can cause pseudoproptosis Except:**

**Select one:**

a. High axial myopia.

b. Buphthalmos.

c. Retraction of the upper eyelid.

d. Shallow orbit.

e. Hypermetropia.

**Question 27: Iridocyclitis is characterized by one of the following signs:**

**Select one:**

a. Dilated pupil.

b. Keratic precipitates.

c. Normal intraocular pressure.

d. Afferent pupillary defect.

e. Iris coloboma.

**Question 28: Eyes prone to angle closure glaucoma have all of the following characteristics except:**

**Select one:**

a. Large lens.

b. Hypermetropic.

c. Shallow anterior chamber.

d. Wide anterior chamber angle. ?

e. Short axial length

**Question 29 :All of the following are signs of Horner syndrome except:**

**Select one:**

a. Ptosis.

b. Myosis.

c. Mydriasis.

d. Apparent enophthalmos.

e. Anhydrosis.

**Question 30:All of the followings are common causes of cicatricial entropion except:**

**Select one:**

a. Chemical injury.

b. External hordeolum

c. Trachoma stage IV.

d. Steven’s Johnson syndrome.

e. Cicatricial pemphigoid syndrome.

**Question 31: Retinal detachment could be associated with all of the followings except:**

**Select one:**

a. Diabetic retinopathy.

b. Malignant melanoma.

c. High myopia.

d. Peripheral retinal tears.

e. Cataract.

**Question 32:Which one of the following is true regarding diabetic retinopathy:**

**Select one:**

a. Always associated with hypertension.

b. Seen only in uncontrolled diabetes.

c. Incidence increases with duration of the disease.

d. Determines prognosis of the disease.

e. Non-proliferative diabetic retinopathy is always associated with macular oedema

**Question 33: All of the followings are seen in Albinism except:**

**Select one:**

a. Nystagmus.

b. Refractive errors.

c. Angle closure glaucoma.

d. Photophobia.

e. Strabismus.

Question 34: Postoperative flat anterior chamber may occur due to all of the followings except:

Select one:

a. Pupillary block.

b. Choroidal detachment.

c. Leaking wound.

d. Secondary open angle glaucoma.

e. Malignant glaucoma.

**Question 35: All of the following visual field defects are characteristic of glaucoma except:**

**Select one:**

a. Arcuate scotoma.

b. Ring scotoma.

c. Baring of blind spot.

d. Binasal quadrantinopia.

e. Nasal step scotoma.

**Question 36:Visual field can be examined by one of the following tests:**

**Select one:**

a. Cover-uncover test.

b. Automated Goldmann perimeter.

c. Prism-cover test.

d. Optical Coherence Tomography (OCT).

e. Goldmann tonometer.

**Question 37 : In case of central dense and deep leucoma (opacity), the treatment of choice is:**

**Select one:**

a. Tattooing.

b. Enucleation.

c. Penetrating keratoplasty.

d. Evisceration.

e. Cyclosporine eye drops.

**Question 38 : The common indication for peripheral laser iridotomy is:**

**Select one:**

a. Open angle glaucoma.

b. Closed angle glaucoma.

c. Cataract.

d. Posterior uveitis.

e. Intermediate uveitis.

**Question 39 : halazion is a chronic inflammatory granuloma of:**

**Select one:**

a. Moll’s sweat gland.

b. Meibomian gland.

c. Zeis gland.

d. Wolfring gland.

e. Lacrimal gland.

**Question 40:Treatment of trichiasis includes all of the followings except:**

**Select one:**

a. Electrolysis.

b. Epilation.

c. Medical treatment with cyclopentolate 1% eye drops.

d. Removal with argon laser.

e. Skin-muscle resection.

**2019**

**1 - Presbyopia, patient unable to see near object, associate with :**

A - Myopia

**B - Hypermetropia \*\***

C - Keratoconus

D - Emmetropia

E - Astigmatism

**2 - All of the following are signs of Hornor's syndrome, except:**

A - Ptosis

B - Myosis

**C - Mydriasis \*\***

D - Anhydrosis

E - Apparent enophthalmos

**3 - Rubiosisiridis is caused by:**

**A - Central retinal vein occlusion \*\***

B - Cataract

**4 - Visual field can be examine by:**

A - Goldman Tonometer

**B - Automated Goldman Perimeter \*\***

C - Cover-uncover test

D - Prism-cover test

E - Cohrerence Tomography

**5 - The only structure of vascular eye :**

**A - Choroid \*\***

B - retina

**6 - Management of chalazon except:**

A - Warm compressor

B - Topical antbiotic

C - oral Doxydar

D - Steroid (intralesional)

**E - Surgery to lavator muscle \*\***

**7 - Cause of RAPD**

**A - optic neuritis \*\***

B - Cataract

**8 - Rhegmatogenous Retinal detachment:**

**A - Periphral retinal halos \*\***

B - Traction of retina

C - Exudate under retina

D - Retinal tumor

E - Managed medically

**9 - risk for contact lens keratitis except :**

A - Poor hygene

**B - Use of topical Antibiotic \*\***

C - cleaning by tape water

D - compromised ocular surface (dryness)

E - overnight wear

**10 - Medical Vs surgical 3rd nerve palsy :**

A - Fixed dilated pupils in medical

**B - Fixed dilated pupils in surgical \*\***

C - Eye deviated downward outward in medical

D - Eye deviated downward outward in surgical

E - Eye deviated inward and downward in medical

**11 - Tunnel vision caused by the following except:**

A - Extensive retinitis pegmintosa

**B - Pituitary adenoma \*\***

C - Occipital cortex infarct

D - Advanced glaucoma

E - DM retinopathy

**12 - Most important risk factor in progression of keratoconus is:**

A - Down's syndrome

**B - Eye rubbing \*\***

C - Hereditary factors

**13 - Ptosis can caused by the following except:**

**A - 7th CN palsy \*\***

B - 3rd CN palsy

C - Marcus gunn Jaw winking

D - Horner

E - Congenital malformation of the lavator muscle

**14 - congenital absence of iris:**

**A - Aniridia \*\***

B - Coloboma

**15 - Epiphora by :**

**A - NLD obstruction \*\***

B - Blepharitis

C - Allergic conjunctivitis

D - dry eye syndrome

**16 - Most common cause of unilateral proptosis :**

**A - Thyroid eye diseases \*\***

B - orbital pseudotumor

C - Optic glioma

D - Orbital hemangioma

**17 - When the image formed in front of the retina in the non-accommodative eye, its called:**

**A - Myopia \*\***

B - Hypermetropia

C - Astigmatism

**18 - Which of the following is a cause of angle closure glaucoma :**

**A - Rubeosisiridis \*\***

B - Pseudoexfoliative glaucoma

C - Hyphema

D - Pigmentary glaucoma

E - Phagolytic glaucoma

**19 - true about direct ophthalmoscope:**

**A - The image you see in the patient eyes is erect \*\***

B - 3D image

C - 5-7 times magnification

**20 - all of the following used to measure intraocular pr except :**

A - Goldman tonometer

B - Tono pen

C - Digital examination

D - Shoitztono,eter

**E - Indirect opthalmoscope \*\***

**21 - Most common sign in Grave's eye disease :**

**A - Lid lag & retraction \*\***

B - Proptosis

**22 - High success rate of corneal transplant because of :**

A - Transparent cornea

**B - Devoid of blood vessels \*\***

C - Has no antigens

D - No oxygen & free radicals

E - the cornea is the most sensitive part of the body

**23 - Fluorescent not used as :**

A - Detect corneal abrasion

B - Measure IOP

**C - Anti-glaucoma \*\***

D - IV to study retinal vessels

E - Seidels test اشيهيك

**24 - all used in epithelial keratitis except :**

A - oral Acyclovir

B - Topical Acyclovir

C - Debridement

**D - Topical steroid \*\***

E - Topical Ab to prevent 2ry infection

**25 - Sudden painless loss of vision in :**

**A - CRAO ( Central Retinal Artery Occlusion ) \*\***

B - Close angle glaucoma

**26 - Normal IOP:**

**A - 10-21 \*\***

**27 - HLA B27 associated with :**

**A - Psoriasis \*\***

B - Bahcet

C - TB

D - syphilis

E - TOxo

**28 - About orbital lymphatic except:**

A - Devoid of LN

**B - Has 3 groups of LN \*\***

**29 - Management of significant congenital cataract:**

**A - should be operated as soon as possible \*\***

**30 - True about Ectropion :**

**A - Very important cause of epiphora \*\***

**31 - On of the following is used as a visual acuity test :**

**A - Snellen's chart \*\***

**32 - Hypertropia :**

**A - Upward deviation \*\***

**33 - Retinoplastoma .. wrong?**

**A - There is no inherited form \*\***

**34 - drug used in treatment of glaucoma ?**

**A - Latanoprost**

**35 - 3 months baby presented with excessive lacrimation. You think he has nasolacrimal duct obstruction. What is your advice to his mother?**

**( Observation ) OR ( Massage + AB ) ???**

**36 - Anisocoria is caused by which of the following ?**

**A - Horner's syndrome \*\***

**37 - tear film :**

**A - don't absorb UV light \*\***

**2018**

1. **Meaning of Lagopthalmus :  
   incomplete closure**
2. **AIDS :  
   CMV**
3. **Contraindication to corticosteroids :  
   dendritic ulcer**
4. **Not caused by uveitis :  
   Corneal edema**
5. **Retinoblastoma :  
   most common tumor**
6. **In direct opthalmosope the pic. :  
   Is erect virtual magnified**
7. **Corneal sensation decrease in :  
   HSV**
8. **Follicles seen in :  
   Trachoma**
9. **In hypermetropic eye , the squint type is :  
   Convergant**
10. **Pseudoproptosis :  
    retro orbital tumor?**
11. **100 day cataract :  
    Central retinal vein occlusion**
12. **Wrong about SSC:  
     More malignant than basal**
13. **Hirscheperg test used in evaluation of :  
    squint**
14. **Earliest feature in uveitis :  
    Flare aqueous**
15. **The concomitant squint different to paralytic squint in all the following except ?**
16. **Vit A deficiency except :  
    dermoid cyst**
17. **Sensory branch of the eye :  
    optic**
18. **Glucoma is not caused by :  
    occlusion of short ciliary arteries**
19. **White reflex except in :  
    optic atrophy**
20. **Ptosis in :  
    3rd palsy**
21. **first symptom in corneal ulcer :  
    pain**
22. **hemangioma in check w lid + glucoma  :  
    Sturg weber syndrome**
23. **Decement membrane detachment in :  
    congenital glaucoma , keratoconus ? (Nobody Knows 😐 )**
24. **Scleritis not found in :  
     Toxoplasmosis**
25. **Epiphora :  
    chronic dacrocystitis??**
26. **post surgery complication except :  
    scleritis ?**
27. **All used in treatment of vetrious except :  
    lensectomy**
28. **complication of penetrating trauma  :  
     sympathetic ophthalmitis**
29. **Flame shaped hemorrhage :  
     HTN**
30. **All cause retinal detachment except :  
     anterior Uveitis**
31. **Maximal resolution :  
     Fovea**
32. **Bull’s dye :  
    chloroquine**
33. **Koeppenodulse in :  
    granulmatuosuvitis**
34. **Frightened man pupillary response :  
    Dilate**
35. **Rubeosis doesn't occur in...:  
    Mature cataract**
36. **Doesn’t cause sudden vision loss :  
    papilledema**
37. **Is not a symptoms of uveitis :  
    Mucopurulent exudates**
38. **Late complication for retinitis pigmentosa :  
    normal vision ???**
39. **Cobble stone :  
    pappilla vernal**
40. **primary colors of Rainbow :  
    Red blue green**

**2017**

1. **70 year old man having distorted central vision the most common cause is:**   
   **Age related macular degeneration.\*\***
2. **One is false about cornea :**  
   **Endothelium from the endoderm \*\***
3. **True about myopia :**  
   **It increases the risk of retinal detachment \*\***
4. **Neovascularglucoma , one of the following :**  
   **Central retinal vein occlusion \*\***
5. **One is not a cause of presenile cataract :**  
   **Hypermetropia \*\***
6. **Wrong about Retinal Arterial occlusion :**  
   **multiple retinal hemorrhage :**
7. **Wrong about optic neuritis :**  
   **Normal pupillary light reflex \*\***
8. **M.c. cause of weak vision worldwide :**  
   **Refractive error \*\***
9. **Which of the following doesn’t cause Proptosis :**  
   **horner syndrome \*\***
10. **Most common cause of unilateral proptosis :**  
    **Thyroid disease \*\***
11. **Best visual rehabalitation in :**  
    ICCE + IOL insertion  
    ECCE + IOL insertion   
    **Phacoemulsification + IOL (may be this) \*\***small sceleralinsision   
    Couching
12. **Enlarged pituitary gland :**  
    **Bitemporal hem. \*\***
13. **Marcus gunn jaw winking syndrome the wiring is between 3rd cranial nerve and :  
    Fifth CN \*\***
14. **Wrong about chronic juvinal arthritis :**  
    [**Asymptomatic**](https://www.facebook.com/hashtag/asymptomatic?hc_location=ufi) **\*\***
15. **All could be used treatment of acute "closed" angle glaucoma except :**  
    **1% Atropin \*\***
16. **Vit A deficiency, all except :  
    Dermoid cyst \*\***
17. **decrease corneal sensation caused by :**  
    **HSV \*\***
18. **Best to examine retina :**  
    indirect opthalmoscope ???  
    B ultrasound  ???
19. **Regarding BCC, what wrong :**  
    **Rapid growing \*\***
20. **One of them cause pinpoint pupil :**   
    **Iritis (may be this) \*\***Absolute glaucoma   
    Atropine   
    optic atrophy
21. **viral conjunctivitis , wrong :  
    greenish mucopurulent discharge (not sure)\*\***
22. **retinal changes in DM except :**  
    **Laser is used only focally \*\***
23. **most common bone fractured in blunt orbital trauma :**  
    **Maxillary \*\***
24. **one of the muscles not attached to orbital apex :**  
    **Inferior oblique \*\***
25. **Most important aproach in treating child e squint :**  
    **Correct refractive error \*\***
26. **most important in chemical trauma :**  
    **irrigation \*\***
27. **Limbaltrantas dots, come w/ :**  
    **Vernal conjuctivits \*\***
28. **Pinhole is useful to detect macular dis.**>>**it's false**
29. [**Least**](https://www.facebook.com/hashtag/least?hc_location=ufi)**suitable for aphakic eye correction :**Contact lense  
    **spectacles (may be this) \*\***post capsule IOL  
    ant. Capsule IOL
30. **Regarding ROM, what's wrong :** :/  
    **Gestational weight > 2500g \*\***
31. **All ass. with non proliferative diabetic RP except :**  
    **Vitreous hmg \*\***
32. **rhegamentous retinal detachment between which layers :**  
    **Between neuroretina and retinal pigmented epithelium \*\***
33. **All of the following presentation to lacrimal drainage obstruction except:**  
    **Affect EOM (extraocular muscles) \*\***
34. **Rossete cataract seen in cataract caused by :**  
    **Trauma  (may be this)\*\***Steroid  
    Radiation
35. **Considering aqueous secreation:**  
    **Active process from pigment ciliary epithelial process  (may be this) \*\***Could be drained via uveal pathway   
    Mostly drained though claasic way (trabiculate)  
    Elevated episceleralpr will decrease drainage
36. **Increase icp all true except :**  
    Acute visual loss or Amaurosisfugax ?
37. **about refraction which is true :**  
    **air- tear interface is the major \*\***
38. **Q about white pupillary reflex in all of them except :**congenital glaucoma   
    retinoblastoma   
    **optic atrophy (may be this) \*\***after cataract  
    complete retinal detachment
39. **Q all of the following can see it in the non-proliferative stage of Diabetic retinopathy except :**
40. **Q about 3rd CN palsy can cause all of them except :  
    neurotrophickeratopathy \*\***

**2014**

1. **all the following are benign tumors of the eye except :**  
   a) dermoid cyst   
   **b) rhabdomyosarcoma \*\***  
   c) capillary hemangioma   
   d) limbaldermoid
2. **the most common cause of "reduced vision " worldwide is :**  
   a) trachoma   
   b) diabetic retinopathy   
   **c) refractory errors \*\***d) glucoma   
   e) cataract
3. **a patient came to your clinic with diplopia of the eye in the primary position + ptosis in the left eye , and the eye ball was in the inferiolateral position ..dx :**  
   a)6th nerve palsy   
   b) 3rd nerve palsy   
   c)4th nerve palsy
4. **regarding sq.cell CA of the eyelid all are true except :**  
   a) UV exposure is a risk factor   
   b) can metastasize to LNs   
   c) can arise de novo   
   d) can arise from a pre-malignant lesion   
   **e) less malignant then basal cell CA \*\***
5. **of the following the least to cause bilateral conjunctivitis is :**  
   a) bacterial   
   b) vernal   
   c) contact dermatitis   
   d)viral   
   e) atopic conjunctivitis
6. **regarding herpes simplex infection of the eye one is false :**  
   a) caused by type 1 HSV   
   b) primary attack is usually asymptomatic  
   c)disciform reaction is an immunogenic reaction to herpes antigen   
   **d) affects immuno-competent patients \*\***
7. **clincal scenario ---- painful eye + high IOP .... , which of the following drugs is not used in the tx** :  
   a) steriods   
   b) pilocarpine   
   **c)atropine \*\***d) painkillers
8. **regarding congenital glucoma which one is wrong :**  
   congenital glucoma is usually treated medically \*\*
9. **which of the following can cause rosette shaped cataract :**  
   **a) blunt trauma to the eye \*\* ( not sure )**b) complicated cataract
10. **the most orbital bone susceptible to fracture in blunt trauma is :**  
    **a) maxillary \*\***b) zygomatic  
    c) ethmoid   
    d) sphenoid   
    e)lacrimal
11. **in aphakia all are true except:**  
    **the eye becomes myopic \*\***
12. **blood accumulation in ant.champer is called :**  
    **hyphema \*\***
13. **which of the following can't be managed by phacoemulsification :**a) immature cataract   
    b)mature cataract   
    **c) dislocated cataract\*\* (not sure )**d) hypermature cataract
14. **the least common cause of sudden visual loss is :**  
    a) optic neuritis   
    b) central retinal artery occlusion   
    b) central retinal vein occlusion
15. **a tumor in the pituitary gland is expected to cause :**  
    **bitemporalhemanopia \*\***
16. **in retinobalstoma the child presents with :**  
    **leukocoria \*\***
17. **regarding vernal conjunctivitis all are true except** :  
    a) IgE mediated reaction   
    b) presents with itchiness, lacrimation and photophobia   
    c) causes limbalfolicles  
    **d) can't present with atopic diseases as bronchial asthma \*\***
18. **contact lenses can cause all the following except :**  
    a)pigmentation of the cornea   
    b) permanent visual loss  
    c) corneal ulcer   
    d) corneal irritation
19. **in myopia the parallel rays of light are brought to a focus :**  
    **a) in front of the retina\*\***b) behind the cornea   
    c) behind the retina
20. **the nasolacrimal ducts opens in :**  
    **inferior meatus \*\***
21. **in orbital cellulitis the most distinctive clinical feature is :**  
    **reduced eye movement \*\***
22. **all are signs of ICP increase except :**  
    a) reduced visual acuity   
    b) restriction of the visual filed   
    c) swelling of the optic disc   
    d) increase in the blind spot   
    e)
23. **regarding cataract , patient complains of all the following except :**  
    **a) reduced vision in low illumination \*\***b) glare   
    c) reduced vision in bright light   
    d) loss of vision
24. **an eye which is medially rotated the muscle responsible for its depression is :  
    superior oblique \*\***
25. **what is the most common painless eyelid lesion :**  
    **a)chalazion \*\***b) cyst of Moll  
    c) cyst f zeis   
    d) internal hordoelum
26. **a child presents with epiphora + pus discharge from the puncta , regurgitation test +ve , the most likely dx is :**  
    **naso-lacrimal canal block \*\***
27. **which of the following doesn't cause conjunctivalcicatrisation. :**  
    a) cicatricialpemphigoid   
    b)Stevens- Johnson syndrome  
    **c) atopic conjunctivitis\*\***d)
28. **1st step in management of chemical burn :**  
    **irrigation \*\***

**2012**

1. **Regarding correction of refraction errors, one is false :**
   1. **Maximum correction of presbyopia at 40 years \*\***
   2. Keratoconus can be corrected by rigid lenses
   3. Presbyopia is corrected by concave (minus) lenses
   4. Myopia is corrected by convex lenses
2. **The cataract that is associated with steroids use is:**
   1. **Posterior subcapsular \*\***
   2. Anterior subcapsular
   3. Nuclear lamellar cataract
   4. Polar cataract
3. **A mother came to your clinic after noticing that the eyes of her 3 yo child are sometimes crossed. One of the following is an inappropriate statement:** 
   1. The child could have a visual acuity of 20/20
   2. **You must wait until adolescent period to make a corrective eye surgery \*\***
   3. It can be associated with permanent loss of vision
4. **One of the following is an indication for the surgical removal of a hemangioma:**
   1. **A newborn with a hemangiomacausing complete closure of the eyelid \*\***
   2. A hemangioma on the cheek away from the eye
   3. A small hemangioma on the medial canthus not occluding the visual pathway
5. **RAPD occurs in:**
   1. Horner’s syndrome
   2. Argyll Robertson pupil
   3. **Marcus Gunn pupil \*\***
   4. Holmes-Adie pupil
   5. Holiday syndrome
6. **All of the following can cause Horner’s syndrome, except:**
   1. Syringomyelia
   2. Carotid aneurysm
   3. Neck trauma
   4. Pancoast tumor
   5. **Ciliaryganglionitis \*\***
7. **All cause optic disc swelling, except:**
   1. Ischemic optic atrophy
   2. Malignant hypertension
   3. Space occupying lesion
   4. Increased ICP
   5. **Retinal artery occlusion \*\* (Correction: Retinalvein occlusion)**
8. **Wrong about carotid cavernous fistula:**
   1. Cause proptosis
   2. Increase in IOP
   3. **Restriction of eye movement \*\***
   4. Can cause retinal haemorrhage
9. **Wrong about orbital lymphoma:**
   1. Age of onset is 60-70
   2. **Treatment of choice is surgical resection \*\***
   3. Treatment of choice is radiotherapy
10. **Most common orbital tumor in adults is:**
    1. **Metastatic \*\***
    2. Lymphoma
    3. Rhabdomyosarcoma
    4. Squamous cell carcinoma
11. **All of the following can help in differentiating between preseptal and septal cellulitis, except:**
    1. Reduced visual acuity
    2. RAPD
    3. Reduction in extraocular muscles movement
    4. **Fever and malaise \*\***
12. **All of the following affect the prognosis of diabetic retinopathy, except:**
    1. Duration since diagnosis
    2. Associated systemic disease
    3. Smoking
    4. **Type of diabetes \*\***
    5. Control of diabetes
13. **The most common extraocular muscle to be affected in Graves eye disease:**
    1. Superior rectus
    2. **Inferior rectus \*\***
    3. Lateral rectus
    4. Superior oblique
    5. Inferior oblique
14. **One of the following is a risk factor for retinal detachment:**
    1. Presbyopia
    2. **Myopia \*\***
    3. Hypermetropia
    4. Male
    5. Black
15. **Presence of pus in the anterior chamber is termed:**
    1. **Hypopyon \*\***
    2. Hyphema
16. **The acqueous humor is produced in which chamber of the eye:**
    1. Anterior chamber
    2. **Posterior chamber \*\***
    3. Trabecular chamber
17. **Wrong about herpes zoster ophthalmicus:**
    1. **Ocular involvement is less likely to be present if the tip of the nose is involved \*\***
18. **Wrong about herpes simples keratitis:**
    1. **It is best to start treatment with corticosteroids in the presence of dendritic ulcer\*\***
    2. Primary infection can be asymptomatic
    3. Most common source is reactivation of latent infection in dorsal root ganglia
19. **All of the following are early complications of cataract surgery, except:**
    1. **Posterior capsular opacification \*\***
    2. Vitreous loss
    3. Iris prolapse
    4. Endophthamitis
20. **A woman who wears contact lens presents to you in the clinic. Examination revealed a 2-mm long corneal abrasion, your management is:**
    1. Eye patch for 2 days
    2. **Only lubricating eye drops \*\***
    3. Fusidic acid ointement
    4. Ciprofloxacin eye drops
    5. Bandage contact lenses
21. **The most common cause of optic neuritis in a 30 year old adult woman is:**
    1. **Multiple sclerosis \*\***
22. **A 30 year old woman, diabetic and takes medications for glaucoma, presented to you with red painful eye and decreased visual acuity to 20/30, the most likely cause is :**
    1. **Viral conjunctivitis \*\***
    2. Acute angle closure glaucoma
    3. Diabetic retinopathy
23. **When looking to a close object, the zonules:**
    1. Contract
    2. **Relax \*\***
    3. Twist
24. **Differentiation between dysthyroid eye disease and orbital myositis is via:**
    1. **MRI shows no affection of the tendon in dysthyroid eye disease \*\* ??**
    2. Orbital fat involvement
    3. Optic nerve involvement
    4. Muscle hypertrophy
25. **All of the following cause chronic open angle glaucoma, except:**
    1. Pseudoexfoliative syndrome
    2. Iridocorneal angle recession
    3. Rubeosisiridis
    4. Pigment dispersion syndrome
    5. Phakolytic glaucoma
26. **Management of epiphora in a 5 month year old child is:**
    1. **Antibiotic and massaging until 10 months of age \*\***
    2. Probing
    3. DCR
    4. Lid hygiene
    5. Warm compressors
27. **The important differential diagnosis of epihorato rule out in in a child is :**
    1. **Nasolacrimal duct obstruction \*\***
    2. Corneal foreign body
    3. Keratitis
28. **Which of the following conditions is associated with HIV:**
    1. **Molluscoumcontagiossum \*\***
    2. Xanthelasmas
    3. Chalazion
    4. Cyst of Mull
29. **Wrong about chronic juvenile arthritis :**
    1. **The uveitis is usually severe and symptomatic \*\***
    2. Can be either pauciarticular or polyarticular
30. **What is the most common eye sign in dysthyroid eye disease:**
    1. Proptosis
    2. **Lid symptoms (Lid lag and lid retraction) \*\***
    3. Optic nerve involvement
31. **Advantage of direct ophthalmoscope over indirect ophthalmoscope:**
    1. **Erect image \*\***
    2. Use of a light source
    3. Less magnification
    4. Wider diameter of the visual field
    5. More difficult to use
32. **The following is an indication for early surgery in a patient with orbital fracture:**
    1. Diplopia on upward gaze
    2. Diplopia in resting position
    3. Pain
    4. Restricted eye movement
33. **Management of chemical eye burn:**
    1. Send to ER
    2. **Copious water irrigation for at least 30 minutes \*\***
    3. Vitamin C topical
    4. Tetracycline oral
34. **The embryonic origin of the lens is:**
    1. **Ectoderm \*\***
    2. Endoderm
    3. Mesoderm
    4. Neural-crest cells
    5. Neuro-ectoderm
35. **The use of gonio lens is to overcome the principle of:**
    1. Total internal reflection \*\*
36. **All are associated with atopic eczema, except:**
    1. Glaucoma
    2. Cataract
    3. **Retinal detachment \*\***
    4. Keratoconus
37. **Wrong about optic nerve glioma:**
    1. Common with neurofibromatosis type 1
    2. Can be associate with neurofibromatosis type 2
    3. Management is conservative even for large tumour
38. **The most common tumor of the lacrimal gland is:**
    1. **Pleomorphic adenoma \*\***
    2. Mucoepidermoidtumor
    3. Reactive lymphoid reaction
    4. Adenocarcinoma
39. **HPV 6 and 8 are associated with:**
    1. Keratoacanthoma
    2. **Lid warts \*\***

**2010**

1. **The most important sign in Proliferative Diabetic retinopathy:**
2. **Neovascularization \*\***
3. **the earliest sign to be found indiabetic retinopathy:**
4. **microanurisms \*\***
5. cotton wool
6. hemorrhages
7. **Most common cause of blindness in diabeticretinopathy :**
8. Retinal detachment
9. Vitrous hemorrhage
10. **Macularedema\*\***
11. **all are causes of eosotropia except (meansboth eyes adducted):**
12. **3rd nerve palsy \*\***
13. Hypermetropia
14. Nystagmus
15. Infantile
16. tumors
17. **about hyphema .. one is wrong:**
18. the source of blood is from iris&ciliary body
19. most often innocuous&transient
20. may be associatedwith traumatic uveitis
21. **rebleeding is usually smaller than the originalbleed \*\***
22. may complicate corneal blood stain
23. **wrong about cataract:**
24. **adults with early cataract should betreated by placing lens as soon as possible\*\***
25. **the classical eye drops tobe given post op are :**
26. NSIAD alone
27. antibiotic drops alone
28. **NSAIDAND antibiotic \*\***
29. **glaucoma can be caused by:**
30. **all of theabove \*\***
31. **wrong about closed angle glaucoma:**
32. **we must have pressure of 21 to DX \*\***
33. **wrong about alkaline trauma to the cornea:**
34. immediateirrigation with allot of normal saline
35. **acid penetrates more thanalkali \*\***
36. **about lacrimation wrong:**
37. **lacrimal gland inthe superiomedial part \*\***
38. **not present in anterior uveitis:**
39. **hyphema \*\***
40. post psynechia
41. KP
42. cells in the ant chamber
43. **not present in 7th nerve palsy:**
44. **entropion \*\***
45. depressebbrow
46. exposure keratitis
47. lacriamtion
48. **advantage of phacco to ECCE :**
49. **decrease astigmatism \*\***
50. decrease infection
51. **most common cause of infantile proptosis:**
52. **dysthyroid disease \*\***
53. retinoblastoma
54. occularceluilitis
55. **most common symptomless anterior uveitis cause :**
56. **JRA \*\***
57. Sarcoidosis
58. toxoplasmosis
59. **If you want to look down and right you will use one of thefollowing :**
60. **Rt inferior rectus and Lt Superior Oblique \*\***
61. Rt inferior rectus and Lt inferior oblique
62. Rt superior rectus and Lt superior oblique

**Extra 1**

1. **Which one of the following bones does NOT form part of the orbit :**

palatine

frontal

zygomatic

**nasal\*\***

ethmoid

1. **Which of the following extraocular muscles does NOT originate anatomically from the orbital apex :**

**inferior oblique\*\***

inferior rectus

superior oblique

superior rectus

levatorpalpebraesuperioris

1. **Which one of the following structures is NOT transmitted through the superior orbital fissure :**

superior ophthalmic vein

superior division of the third cranial nerve

**ophthalmic artery\*\***

inferior division of the third cranial nerve

fourth cranial nerve

1. **The magnification of a retinal image afforded by the direct ophthalmoscope in an emmetropic eye is approximately :**

3x

10x

**15x\*\***

20x

60x

1. **An aphake uses a +10 D glasses for distance correction. How much image size change is generated with this correction :**

0%

**33% magnification\*\***

33% minification

33X magnification

33X minification

1. **Which of the following concerning light-near dissociation is/are true :**

a key finding in the diagnosis of Argyll-Robertson pupils is the presence of mydriasis

Argyll-Robertson pupils are the most common manifestation of neurosyphilis

the most common etiology of the dorsal mid-brain syndrome in a patient over the age of 60 is multiple sclerosis (MS)

**the most common etiology of the dorsal mid-brain syndrome in a child is pineal gland tumor\*\***

all of the above

1. **Which of the following concerning Horner's syndrome is/are true :**

the distribution of anhidrosis has nothing to do with the location of the lesion

cocaine 4% will dilate the pupil of a patient with Horner's syndrome but will leave the normal pupil unchanged

**the evaluation of a patient whose miotic pupil dilates in response to hydroxyamphetamine consists of chest x-ray and careful neurologic examination\*\***

a Horner's syndrome with coincident ipsilateral headache is indicative of carotid dissection, even in the setting of a normal carotid angiogram

all of the above

1. **A 45-yr old patient complains of headache and transient visual obscuration. His examination shows bilateral disc edema and swelling with some retinal exudates. The first diagnostic intervention to be taken is :**

lumbar puncture

automated perimetry

CT scanning

**measurement of blood pressure\*\***

measurement of ESR

1. **Which of the following concerning congenital obstruction of the nasolacrimal system is FALSE :**

it may mimic medial canthalhemangioma

acute dacryocyctitis is uncommon

**the defect in canalization is within the inraosseous portion of the nasolacrimal duct\*\***

common symptoms include epiphora and mucus discharge

if canalization has not occurred by the age of 12 months, it is unlikely to do so

1. **Recognized methods for long-term management of infantile glaucoma include all of the following EXCEPT :**

trabeculotomy

trabeculectomy

goniotomy

**oral carbonic anhydrase inhibitors\*\***

1. **Which of the following congenital cataract scenarios mandates the most urgent surgical intervention:**

monocular anterior polar cataract

binocular posterior lenticonus

monocular lamellar cataract

**monocular nuclear cataract\*\***

binocular nuclear cataract

1. **The probability of a patient who survives bilateral retinoblastoma giving birth to a child with retinoblastoma is :**

less than 1%

6%

25%

40%\*\*

80%

1. **The most common cause of unilateral proptosis in adults is :**

lymphoma

cavernous hemangioma

carotid-cavernous fistula

**thyroid ophthalmopathy\*\***

sphenoid wing hemangioma

1. **A patient with orbital cellulitis suddenly worsens with a virtually frozen globe, despite inapparent increase in proptosis. Corneal sensation is also diminished. The most likely explanation for these events is :**

central retinal artery occlusion secondary to orbital cellulitis

meningitis secondary to orbital cellulitis

panophthalmitis secondary to orbital cellulitis

endophthalmitis secondary to orbital cellulitis

**cavernous sinus thrombosis\*\***

1. **A 45-year-old woman presents with bilateral proptosis and lid retraction. There's no previous history of thyroid disease, and the patient denies any periocular pain. The one blood test that most likely to be of value in this circumstance is :**

total thyroxine (T4) levels.

free T4 levels

total triiodothyronine (T3) levels

thyroid hormone index (total T4 and thyroid-binding globulin levels)

**sensitive thyroid-stimulating hormone levels (TSH)\*\***

1. **Which one of the following regarding age-related macular degeneration (AMD) is FALSE :**

AMD is the most common cause of blindness in the developed countries

**there is no effective treatment for wet AMD\*\***

dry AMD is more common than wet AMD

the hallmark of dry AMD is the formation of drusens

blindness can occur due to subretinal hemorrhage and scarring

1. **The differential diagnosis of a true giant papillary conjunctivitis (GPC) includes all of the following EXCEPT :**

contact lens-related conjunctivitis

**trachoma\*\***

atopic keratoconjunctivitis

ocular prosthesis-related conjunctivitis

vernal keratoconjunctivitis

1. **Rounded, depressed regions of necrotic limbal follicles are termed :**

**Herbert's pits\*\***

von Arlet's line

Fuchs' spots

Horner-Trantas dots

Cogan's patches

1. **The treatment of choice in culture-proven gonococcal conjunctivitis is :**

topical penicillin G four times daily for 14 days

topical penicillin G four times daily with doxycycline 100 mg orally twice daily for 1 week

topical penicillin G four times daily and topical tetracycline four times daily for 1 week

ceftriaxone 1 g intramuscularly daily for 5 days

**ceftriaxone 1 g intramuscularly daily for 5 days and doxycycline orally twice daily for 3 weeks\*\***

1. **Which class of chemicals constitutes the greatest threat for ocular injury :**

solvents

petroleum products

acids

**alkali\*\***

detergent

1. **A patient presents with a tender mass below the medial canthal tendon and mucopurulent discharge from the inferior canaliculus. One week of oral antibiotic treatment and warm compresses leads to an increase in size and fluctuance of the mass. The next step in treatment should be :**

increasing the frequency of warm compresses

change in antibiotic agents

increasing the frequency of dosage of the antibiotic agent

probing and irrigation of the nasolacrimal system

**incision and drainage of the fluctuant mass\*\***

1. **A 33-yaer-old man presents to an ophthalmologist complaining of a "growth" on his eyelid. He maintains that the lesion developed over the preceding 4 weeks and is nontender. He produces a driver's license photo from 4 months earlier which shows normal eyelids. Examination discloses 3.5 cm round elevated lesion of the right lower eyelid with a central depressed area and debris within. There is no pigmentation. The most likely diagnosis is :**

seborrheic keratitis

actinic keratitis

**keratoacanthoma\*\***

basal cell carcinoma

squamous cell carcinoma

1. **Which one of the following conditions is not seen more commonly in patients with keratoconus :**

Down syndrome

atopic dermatitis

Ehler-Danlos syndrome

**diabetes mellitus, type I\*\***

vernal keratoconjunctivitis

1. **The most common cause of anterior uveitis in the adult population is :**

herpes simplex keratouveitis

herpes zoster keratouveitis

syphilitic uveitis

HLA-B27 iridocyclitis

**idiopathic iridocyclitis\*\***

1. **Which one of the following concerning uveitis associated with juvenile rheumatoid arthritis (JRA) is FALSE :**

the majority of affected children are girls

the majority of affected children have pauciarticular arthritis

the majority of affected children will be antinuclear antibody (ANA) positive

**the majority of affected children will be rheumatoid factor (RF) positive\*\***

the onset of anterior uveitis in the third decade of life of a patient with a remote history of pediatric arthritis does not preclude the diagnosis of JRA

1. **All of the following are considered clinical hallmarks of Fuchs' heterochromiciridocyclitis EXCEPT :**

diffuse atrophy of the iris stroma

gelatinous KPs with filamentous interconnections

mild or minimal anterior chamber reaction

**anterior and posterior synechiae\*\***

cataract which is posterior subcapsular

1. **The most common intraocular infection associated with HIV infection is :**

toxoplasmosis

acute retinal necrosis secondary to herpes simplex virus

pneumocystis choroiditis

**CMV retinitis\*\***

syphilitic Uveitis

1. **The side effect of carbonic anhydrase inhibitors that is most commonly encountered is:**

gastrointestinal distress

kidney stones

anemia

hypocalcemia

**paresthesia\*\***

1. **A 74-year-old man comes in complaining of difficulty driving due to decreased distance vision. Upon questioning, he has no complaints regarding his near vision. This is most consistent with :**

**nuclear sclerotic cataract\*\***

posterior subcapsular cataract

cortical cataract

anterior polar cataract

subluxated lens

1. **Which one of the following is TRUE concerning postoperative endophthalmitis :**

it most commonly presents 7 to 10 days postoperatively, and the most common etiologic agent is Streptococcus.

it most commonly presents 2 to 5 days postoperatively, and the most common etiologic agent is Streptococcus.

**it most commonly presents 2 to 5 days postoperatively, and the most common etiologic agent is Staphylococcus.\*\***

it most commonly presents 7 to 10 days postoperatively, and the most common etiologic agent is Staphylococcus.

agents responsible for these infections are generally part of the surgeon's normal flora.

1. **The initial step in the management of chemical burn must be :**

debridement of foreign particles

**copious irrigation\*\***

measurement of IOP

slit-lamp examination

fundus examination

1. **Which one of the following concerning hyphema is FALSE :**

the source of the hemorrhage is typically from the arterial circle of the iris

the incidence of complications from hyphema increases with rebleeding

the most frequent time for rebleeding is between 2 and 5 days after the original injury

optic nerve atrophy may develop more quickly and at lower IOP in patients with sickle cell disease.

corneal blood staining generally clears rapidly once IOP is normalized\*\*

1. **Histopathologic features seen in the retinal vasculature of patients with early diabetic retinopathy include all of the following EXCEPT :**

loss of arteriolar pericytes

thickening of endothelial basement membrane

capillary closure and/or nonperfusion

**medial hyperplasia\*\***

leakage of plasma and exudates

1. **Important markers of ischemic CRVO include all of the following EXCEPT :**

numerous cotton-wool spots

extreme venous dilatation

**retinal hemorrhages in all 4 quadrants\*\***

extensive nonperfusion on fluorecein angiography

ischemic electroretinogram (ERG)

1. **Which one of the following concerning congenital retinitis pigmentoas (RP) syndromes is FALSE :**

in Leber’s congenital amaurosis (LCA), the infant is typically blind at birth

in LCA, the electroretinogram is typically nonrecordable at birth

in LCA, the fundus examination is typically normal at birth

a variety of congenital RP is associated with macular coloboma and skeletal abnormalities

**the most common pattern of inheritance in congenital RP is autosomal dominant\*\***

1. **The key prognostic factor in predicting postoperative visual acuity following surgical repair of retinal detachment is :**

the size of the largest retinal break

the number of retinal breaks

**the presence and duration of macular detachment\*\***

the presence or absence of lattice degeneration

the presence or absence of myopia

1. **The primary intorter of the eye in primary position is the :**

**superior oblique\*\***

superior rectus

inferior oblique

inferior rectus

levator muscle

1. **During a routine examination, an alternate-cover test reveals outward fixation shifts of each eye as the cover is moved. The cover-uncover test reveals no shift reveals no shift of either eye as the cover is placed over either eye. The correct description of the patient’s motility status would be :**

orthophoric, orthotropic

orthophoric, esotropic

**orthotropic, esophoric\*\***

orthotropic, exophoric

this set of findings is not possible

1. **Appropriate surgical options for infantile esotropia include all of the following EXCEPT:**

bimedial recession

bilateral resection

ipsilateral medial rectus recession and lateral rectus resection

**bimedial resection\*\***

1. **A 4-year-old child with a moderate-angle esotropia is noted to have a left hypertropia on right gaze and a right hypertropia on left gaze. The most likely clinical diagnosis is:**

right hypertropia

left hypertropia

**esotropia associated with bilateral inferior oblique overaction\*\***

bilateral trochlear nerve palsy

esotropia associated with bilateral superior rectus overaction

**Extra 2**

1. **Cicatrizing conjunctivitis may be associated with all of the following except :**
2. Timolol
3. **Chloramphenicol \*\***
4. Pilcarpine
5. Idoxuridine
6. Echothiophote iodide
7. **The term “ mature cataract “ means :**
8. **A nuclear cataract present more than 10 years \*\***
9. A posterior subcapsular cataract that reduces best corrected visual acuity to 20/200 or worse
10. A cortical cataract that involves the entire cortex
11. An anterior subcapsular cataract that causes capsular wrinkling
12. None of the above
13. **Acute orbital infectious in young children are likely to arise from :**
14. the maxillary sinuses
15. **the ethmoid sinuses \*\***
16. the sphenoid sinuses
17. the frontal sinuses
18. A and D
19. **The most common identifiable cause of bilateral congenital cataracts is :**
20. Autosomal recessive inheritance
21. **Autosomal dominant inheritance \*\***
22. Galactosemia
23. Intrauterine infection
24. Multifactorial
25. **In the elderly the most common cause of permanent blindnessis :**
26. Trauma
27. Glaucoma
28. Infection
29. **Macular dequeneration \*\***
30. Retinal detachment
31. **Which one of the following is the earliest finding in glaucoma :**
32. Halos around lights
33. Mild ocular pain
34. Mild ocular inflammation
35. Loss of peripheral vision
36. **Measurable elevation in infraocular pressure \*\***
37. **The prevalence of glaucoma is :**
38. Egual in blacks and whites
39. Two times more commonin whites than in blacks
40. Eight to ten times more common in whites than in blacks
41. **Three to six times higher in blacks than in whites \*\***
42. Two times higher in blacks than whites
43. **4 year old boy presents with greenish-brown discoloration of the corneal margin, the most likely diagnosis is :**
44. sarcoidosis
45. optic neuritis
46. hemochromatosis
47. **Wilson’s disease \*\***
48. Multiple sclerosis
49. **the triad of cataracts, deafness, and cardiac anomalies is characteristic of :**
50. **rubella infection during the first trimester \*\***
51. rubella infection after the first trimester
52. Trisomy 13
53. Deletion of short arm of chromosome 11
54. Lowe syndrome
55. **Conjunctivitis is associated with :**
56. Psoriatic arthritis
57. **Reiter’s syndrome \*\***
58. Ankylosing spondylitis
59. Enteropathic spondylitis
60. Rhyeumatic fever
61. **Which of the following routes of administration of corticosteroids has been associated with cataract formation :**
62. Systemic
63. Topical
64. Subconjunctival
65. **All of the above \*\***
66. None of the above
67. **which one of the following agents is considered to be an appropriate treatment for uncomplicated acute bacterial conjunctivitis :**
    1. Oflaxacin
    2. Ciprofloxacin
    3. **Erythromycin \*\***
    4. Neomycin
    5. Polymyxin B.
68. **The world Health Organization estimates that 75% of cases of blindness in developing countries are avoidable. Which one of the following is one of the four leading causes of preventable. blindness in the world :**
69. Diabetic retinopathy
70. Retinal detachment
71. Glaucoma
72. **Trachoma \*\***
73. Amblyopia