

1. about this pic....

All of the following DDX except :

- A. Congenital cataract
- B. Retinoblastoma
- C. Melanoma
- D. Thickening of vetrus body

✓ ANSWER: C



Scenario:

A 62-year-old man with a history of diabetes mellitus and hypertension came for routine eye examination.

On ophthalmoscopic exam, yellow-white spots with sharp margins are seen in the retina (labeled A).

Q2: What is structure A?

- A. Nerve Fiber infarction
- B. Hard exudate
- C. Microaneurysm
- D. Flame-shaped hemorrhage

✓ Answer: A

Q3: What is the cause of these lesions at B ?

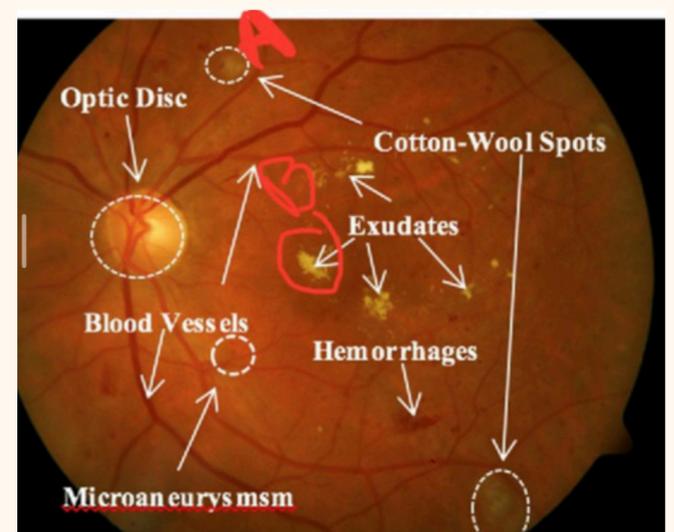
- A. Protein leakage
- B. Lipid deposition from leaking capillaries
- C. Retinal ischemia
- D. Venous obstruction

✓ Answer: B

Q4: What is the next management step?

- A. Urgent laser photocoagulation
- B. Vitrectomy
- C. Control blood glucose and blood pressure
- D. Intravitreal steroids immediately

✓ Answer: C



5. Unilateral leukocoria

Stablize and refaire to ophthalmologist



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9. Post-cataract surgery with eye inflammation

👉 Scenario:

A 68-year-old patient presents 3 days after cataract surgery with eye pain, redness, and marked decrease in vision.

On slit-lamp examination,

Q9: What is this complication called?

- A. Retinal detachment
- B. Corneal ulcer
- C. Endophthalmitis
- D. Acute angle-closure glaucoma

✅ Answer: C



10. What is the name of the white layer seen in the anterior chamber?

- A. Hyphema
- B. Hypopyon
- C. Pterygium
- D. Pinguecula

✅ Answer: B

11. What is the recommended management?

- A. Topical antibiotics only
- B. Systemic corticosteroids
- C. Vitreous tap and intravitreal antibiotics
- D. Observation and follow-up

✅ Answer: C



12. All of true about follicle except : Allergy

13. A 40 year-old patient after laser surgery (there was some thing related to retina abnormalitiy)

Q1: What is the most likely diagnosis?

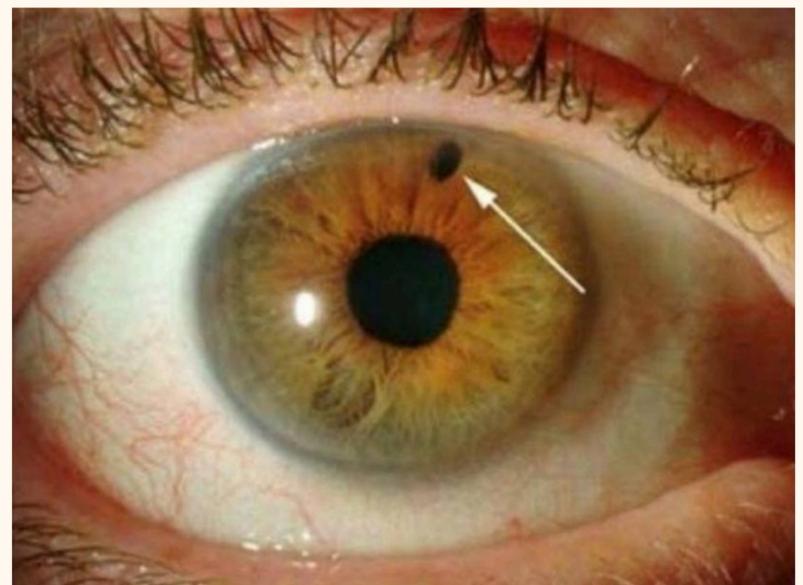
- A. Retinal detachment
- B. Optic neuritis
- C. Closed-angle glaucoma
- D. Central retinal artery occlusion

✅ Answer: C

14. What is the definitive treatment for this condition?

- A. Topical steroids
- B. Peripheral iridotomy
- C. Vitrectomy
- D. Laser photocoagulation

✅ Answer: B



Q3: suppose the laser wasn't done, and the patient's IOP is 50, what should be done regarding the management?

- A. Delay until pain subsides
- B. Observe and reassess later
- C. Urgent – do not delay
- D. No treatment needed

✅ Answer: C

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man presents with blurred vision and corneal opacity noted on slit-lamp examination. Laboratory tests show positive VDRL, while ANA and rheumatoid factor are negative. On exam, keratic precipitates are seen on the corneal endothelium.

13. : What is the corneal finding called?

- A. Hypopyon
- B. Keratic precipitate
- C. Corneal ulcer
- D. Arcus senilis

✓ Answer: B

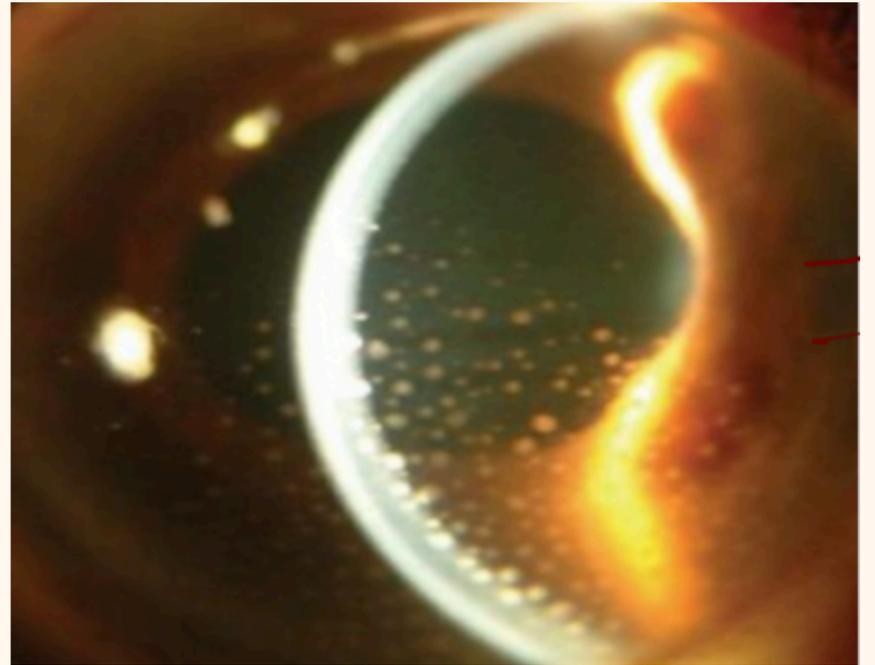
14. : What is the appropriate treatment?

- A. Corticosteroids
- B. Penicillin
- C. Antiviral therapy
- D. Antifungal drops

✓ Answer: B

15. What is the underlying cause of this condition?

✓ Answer: syphilis



16. Match

- 1) Giant Papillary conjunctivitis: contact lens induced conjunctivitis
- 2) conjunctival Follicles : viral conjunctivitis
- 3) Bacterial keratitis : yellow discharge
- 4) Acanthamoeba : contact lens by tap water
- 5) Arlt line : Trachoma
- 6) Salmon lesion : lymphoma
- 7) symblepharon : chemical injury
- 8) Band keratopathy : hypercalcemia
- 9) Trantas dots : allergic conjunctivitis
- 10) keratoconus : Down syndrome

