



قائمة الاسئلة

(40 degrees) ophthalmology- fourth year medical student exam

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- 1) painful red eye is not a manifestation of
 - 1) - Corneal ulcer
 - 2) - Acute anterior uveitis
 - 3) posterior uveitis
 - 4) - Scleritis
- 2) the following investigation is not matched
 - 1) Fluorescein angiography for corneal ulcer diagnosis
 - 2) - Slit lamp for anterior chamber evaluation
 - 3) - Tonometry for intraocular pressure measurement
 - 4) - Retinoscopy for refractive errors detection
- 3) the lens capsule is thinnest at the
 - 1) - center anteriorly
 - 2) posterior pole
 - 3) - equator
 - 4) - anterior pole
- 4) sudden loss of vision is not a manifestation of :
 - 1) - Trauma
 - 2) - Vitreous hemorrhage
 - 3) - Central artery occlusion
 - 4) Open angle glaucoma
- 5) bony orbit is formed of
 - 1) 4 walls
 - 2) - 5 walls
 - 3) - 6 walls
 - 4) - 7 walls
- 6) Systemic evaluations is not required in :
 - 1) Chronic blepharitis
 - 2) - non concomitant esotropia
 - 3) - Optic neuritis
 - 4) - Retinitis pigmentosa
- 7) Unilateral diplopia is related to
 - 1) - Paralytic strabismus
 - 2) Early cataract
 - 3) - Acquired anisometropia
 - 4) - Thyroid ophthalmopathy
- 8) In examination of the extraocular muscles movements which statement is false
 - 1) - Duction is monocular
 - 2) - Version is binocular
 - 3) - Upper left gaze is from left superior rectus and right inferior oblique
 - 4) The left medial rectus and right lateral rectus are antagonist muscles
- 9) Slit lamp uses is not valid in
 - 1) - Retinal evaluation
 - 2) - Intraocular pressure evaluation
 - 3) Extraocular muscle evaluation
 - 4) - Vitreous evaluation





- 10) The following equipment is not related to the mentioned aim
- 1) - Indirect ophthalmoscope for peripheral retina evaluation
 - 2) - Humphery perimetry for visual field evaluation
 - 3) - yag laser for posterior capsular opacity management
 - 4) Argon laser delivery for exudative retinopathy management
- 11) the best management of immature senile cataract is
- 1) - ECCE
 - 2) - ICCE
 - 3) - lensectomy
 - 4) phacoemulcefication
- 12) Koeppes nodules are
- 1) - Features of non granulomatous inflammation
 - 2) Found at the pupillary margin
 - 3) - Found on the surface of the iris away from the pupil
 - 4) - early sign of glaucoma
- 13) keratic periseptates(KPS) are
- 1) Cellular deposits on the corneal endothelium
 - 2) - Cellular deposits on the corneal epithelium
 - 3) - Protein deposits on the corneal endothelium
 - 4) - Protein deposits on the iris
- 14) the most common site of basal cell carcinoma of the lids is
- 1) lower lid
 - 2) - medial canthus
 - 3) - lateral canthus
 - 4) - upper lid
- 15) The lateral orbital wall composed of
- 1) - Lacrimal bone
 - 2) - Ethmoidal bone
 - 3) - Maxillary bone
 - 4) Zygomatic bone
- 16) all are manifestations of behcets disease except
- 1) - genital ulceration
 - 2) dendertic corneal ulcer
 - 3) - oral ulceration
 - 4) - recurrent acute anterior uveitis with hypopyon
- 17) the most common cause of adult unilateral proptosis is
- 1) Thyroid ophthalmopathy
 - 2) - metastasis
 - 3) - lymphoma
 - 4) - meningioma
- 18) about Orbital cellulitis, one is false
- 1) Infection in front of the orbital septum
 - 2) - Usually secondary to ethmoiditis
 - 3) - Painful ophthalmoplegia
 - 4) - Proptosis
- 19) Deep dermoid cyst
- 1) - Associated bony defect
 - 2) - Non- Axial proptosis
 - 3) - CT shows a heterogeneous, well-circumscribed lesion





- 4) Present in childhood
- 20) 10 years old child come to emergency complain of right eye trauma with mild right eye hyphema
- 1) hyphema mean anterior chamber pus
 - 2) should be cleaned surgically
 - 3) intraocular pressure should be managed and followed
 - 4) hyphema is not cleared spontaneously
- 21) Cavernous hemangioma, one is false
- 1) Most common malignant orbital tumor in adult
 - 2) Usually located behind the globe
 - 3) Presents -4th to 5th decade
 - 4) Slowly progressive axial proptosis
- 22) Neovascular glaucoma is cused by :
- 1) Diabetic Retinopathy
 - 2) Acute congestive glaucoma
 - 3) Staphylococcal infection
 - 4) Hypertension
- 23) A one-month old baby is brought with history of photophobia and tearing; Clinical examination shows normal tear passages and clear but large cornea. The most likely diagnosis is
- 1) Congenital dacryocystitis
 - 2) Interstitial keratitis
 - 3) Keratoconus
 - 4) Buphthalmos
- 24) a case of open angle glaucoma. Which of the following would be an important point in diagnosing the case
- 1) Shallow anterior chamber
 - 2) Optic disc cupping
 - 3) Narrow angle
 - 4) refractive error
- 25) The surgery of choice in refractory glaucoma is
- 1) Trabeculoectomy
 - 2) Yag laser iridotomy
 - 3) Trabeculotomy
 - 4) Glaucoma Drainage Device
- 26) Aqueous fluid is produced in which chamber
- 1) anterior chamber
 - 2) vitreous chamber
 - 3) posterior chamber
 - 4) trabecular chamber
- 27) regarding emryological development of eyelid , one is true :
- 1) eyelid are developed from mesoderm
 - 2) upper and lower lids close at 5th months
 - 3) the eyes are completely opened at the 7th month
 - 4) lid coloboma is a part of optic fissure coloboma
- 28) referactive index of the cornea is
- 1) 1.42
 - 2) 1.37
 - 3) 1.3
 - 4) 1.45
- 29) transient myopia can occure in all except
- 1) uncontrolled diabetes mellitus





- 2) - senile nuclear cataract
3) pressure on globe from behind as in orbital tumor
4) - ciliary spasm in iridocyclitis
- 30) the nodal point of the eye is present in
1) - the anterior capsule of the crystalline lens
2) the posterior capsule of the crystalline lens
3) - the posterior surface of the cornea
4) - the anterior surface of the cornea
- 31) the best treatment of aphakia is
1) - contact lens
2) - glasses
3) intraocular lens
4) - corneal graft
- 32) lasik is
1) - procedure on the lens to correct myopia
2) procedure on the cornea to correct myopia
3) - procedure on the retina to correct myopia
4) - procedure to remove cataract
- 33) in trachoma, the patient is infectious when there are
1) follicles and papillae
2) - corneal opacity
3) - arlets line
4) - herberts pits
- 34) normal field of vision extends on the nasal side to
1) - 30 degree
2) 60 degree
3) - 70 degree
4) - 100 degree
- 35) a patient with 8 weeks history of ocular redness was found to have papillary conjunctival reaction (papillae larger than 1mm), all of the following are possible causes except
1) - spring catarrh
2) - atopic keratoconjunctivitis
3) trachoma
4) - contact lens use
- 36) which of the following statements regarding conjunctival anatomy is false
1) - the bulbar conjunctiva is continuous with corneal epithelium
2) - goblet cells are found in the conjunctival epithelium
3) - palpebral conjunctiva is firmly adherent to the tarsus
4) accessory lacrimal glands are found in the conjunctival epithelium
- 37) 7 years old child came to ophthalmic clinic complaining of left upper and lower lid swelling and redness with fever and tachycardia, patient looks ill with poor pupillary reaction. Which is correct .
1) it is an emergency case and need admission
2) - give systemic antibiotics without admission
3) - managed by antibiotic drops with daily follow up
4) - surgery is the best choice for management
- 38) large blind spot on perimetry results from , one is false
1) - papilloedema
2) - optic disc drusen
3) - myelinated nerve fiber layer





- 4) + pituitary adenoma
- 39) regarding visual field , one is true
- 1) - nasal field larger than inferior field
 - 2) + junctional scotoma results from lesions at the junction of the optic nerve and optic chiasm
 - 3) - mono ocular field loss occur due to optic tract lesions
 - 4) - cortical lesions cause bilateral field defects with loss of pupillary reaction
- 40) about ocular manifestations of diabetic mellitus which is true
- 1) + proliferative diabetic retinopathy always need management
 - 2) - cranial nerves paresis usually need surgical intervention
 - 3) - cataract will improve after blood sugar control
 - 4) - Argon laser is the best management for severe non proliferative diabetic retinopathy

