

(SVSU/2023-2024/R-A)

Printing Pages :2

Enrollment No.[illegible]

M.B.B.S.

Final Year Part-1 Examination

Subject Code MBBS-311

Subject Name – Ophthalmology

[Time : Three Hours]

[Max. Marks : 100]

Note: Attempt all the questions. Use separate answer sheets for Section A & Section B. Parts of a question must be attempted in sequence. Draw well labeled diagrams wherever necessary.

MCQs (separate sheet will be provided) [01x20=20]

Section - A

- 1. Write an Essay on the following: [4+3+3=10]**
- a. Acute Angle closure Glaucoma – Clinical features&management.**
 - b. Define & classify Cataract. Describe management of a case of mature cataract.**
 - c. Management of a case of mycotic keratitis.**
- 2. Describe in brief. [5x5=25]**
- a. Side effects of prostaglandin Analogues**
 - b. Colour vision Tests**
 - c. Chalazion**
 - d. Ectropion**
 - e. Panophthalmitis**
- 3. How will you explain about the prognosis of open angle glaucoma to the patient & relatives. [5]**

[P.T.O.]

Section - B

1. **Write an Essay on the following:** [4+3+3=10]
- a. Refractive Errors & their management in a patient having stable refraction after 21 years of age.
 - b. Management of a case of non-proliferative diabetic retinopathy.
 - c. Blunt Injury of the eye ball & management.
2. **Describe in brief.** [5x5=25]
- a. Myopia
 - b. Causes of Floaters
 - c. Causes of sudden Painful Diminution of vision
 - d. Signs of Aphakia
 - e. Stages of Diabetic Retinopathy
3. **How Will you inform to a patient having cataract with Age Related Macular Degeneration** [5]
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Enrollment No.

M.B.B.S.

Invigilator's Signature

Subject Code MBBS -311

Final Prof. Part I Examination

Subject Name- Ophthalmology

Multiple Choice Questions

[Time: 15 Minutes]

[Max. Marks: 20]

Note: Write your Enroll. Number on the Question paper. Each MCQ carries a half mark. Each Question has only one best correct response. Encircle the correct answer letter. More than one encircle or any overwriting will be considered as a wrong answer. There is no negative marking. DO NOT use a pencil for writing.

- I** Herbert pits are seen in
(a) Vernal Conjunctivitis
(b) Adenoviral Conjunctivitis
(c) Viral Kerato Conjunctivitis
(d) Trachoma
- II** The Yoke Muscle of the Right Inferior Rectus is
(a) Right Superior oblique
(b) Right inferior oblique
(c) Left Superior Oblique
(d) Left Superior Rectus
- III** Asteroid hyolosis is More common in patient with
(a) Atherosclerosis (b) Hypercalcemia (c) Diabetes Mellitus (d) Hypertension
- IV** Surgical Treatment of congenital ptosis with poor levator function is
(a) Levator Resection – anterior approach
(b) Fasanella- servat Procedure
(c) Frontalis Suspension
(d) Levator resection – posterior approach
- V** The beaten bronze appearance at the fovea is seen in
(a) Tuberos sclerosi (b) Stargadt Disease (c) Juvenile Retinoschisis (d)Cone Dystrophy
- VI** KAYSER- FLIESCHER RING is seen in
(a) Wilsons Disease (b) Keratoconus (c) Siderosis Bulbi (d)Fuch's Dystrophy
- VII** Choroidal Hemangioma is seen in
(a) Neurofibromatosis (b) Downs Syndrome (c) Carcinoma Prostate (d) Sturge - weber Syndrome
- VIII** Centrocecal scotoma is seen
(a) Retinitis Pigmentosa (b) Glaucoma (c) Toxic optic Neuropathy (d) Papilloedema
- IX** Intraocular feature in homo cystinuria is
(a) Pigmentary Retinopathy (b) Subluxation of Lens (c) Glaucoma (d)Cataract
- X** Herpes zoster ophthalmicus is caused by
(a) varicella Zoster Virus (b) Herpes simplex Virus (c) Cytomegalo Virus (d)None of the Above

[P.T.O.]

- XI** Hereditary Retinoblastoma is Inherited as
(a) Auto Somal Dominant (b) Auto Somal Recessive (c) X-Linked Dominant (d) X- Linked Recessive
- XII** Interstitial Keratitis is seen in infection with
(a) Pseudomonas
(b) Syphilis
(c) Candida
(d) Acanthamoeba
- XIII** Blood Staining of Cornea is Seen in
(a) Blunt Trauma to the eye with blood In the Anterior Chamber
(b) Vitreous haemorrhage
(c) Anterior Uveitis
(d) Acute Glaucoma
- XIV** Unilateral Diplopia is seen in
(a) Decentered Intraocular Lens
(b) Blowout Fracture orbit
(c) Thyroid eye diseases
(d) Retinitis Pigmentosa
- XV** Risk Factor for normal tension Glaucoma is
(a) Thick Cornea (b) Thin Cornea (c) Myopia (d) Age Below 30 Years
- XVI** Dalen. Fuch's Nodules are seen in
(a) Mycotic Keratitis
(b) Nodular Sclerosis
(c) Sympathetic ophthalmitis
(d) Pars planitis
- XVII** Astigmatism is
(a) Incurable Disease
(b) A Retinal Diseases
(c) Caused by Scleritis
(d) Refraction Error
- XVIII** Satellite Lesions are Seen in
(a) Mycotic Keratitis
(b) Hyphaema
(c) Retinal Detachment
(d) Diabetic Retinopathy
- XIX** One of the following is not a treatment of cataract
(a) Extracapsular Cataract Extraction
(b) Laser Photocoagulation
(c) SICS
(d) MICS- Phacoemulsification
- XX** One of the following is the treatment of corneal opacity
(a) Keratoplasty (b) Intraocular Lens (c) IOL Implant (d) SICS
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