



الطبيب والجراحة  
لجنتنة



# Ophthalmology mini-osce

By : malak hamasha

Rand smadi

Waleed ayoub

1. Distance the chart from patient ?

6m

2. Peripheral hospital test to determine whether refer patient to ophthalmology or optometry ?

Pupillary light reflex على الاغلب

3. If patient wear glasses with -5.00 D lens , he will see word ?

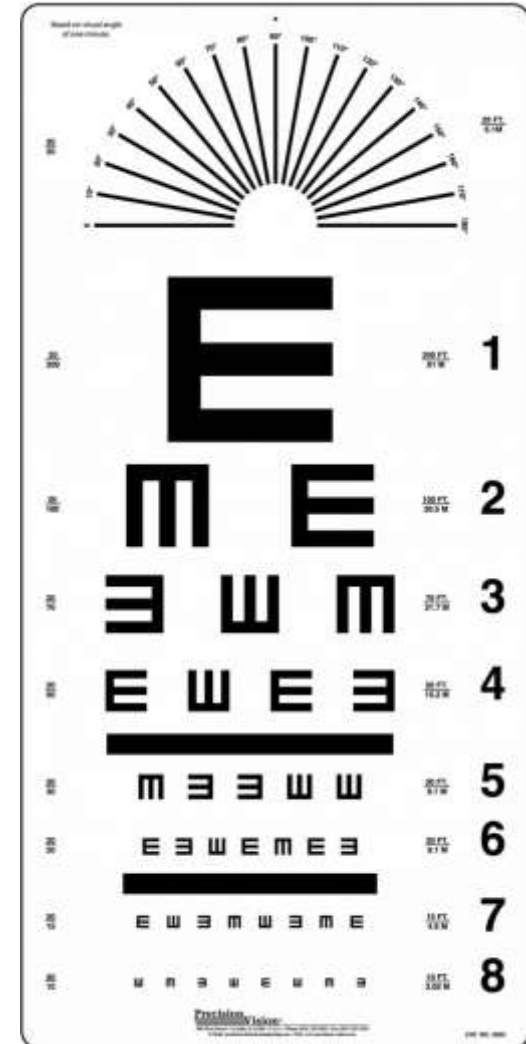
( smaller , bigger , not affect )

4. Chart we use it in children smaller than 3 years old ?

allens chart

5. If left eye see 20/200 and right eye see 20/60 , which eye is the worst ?

Left eye

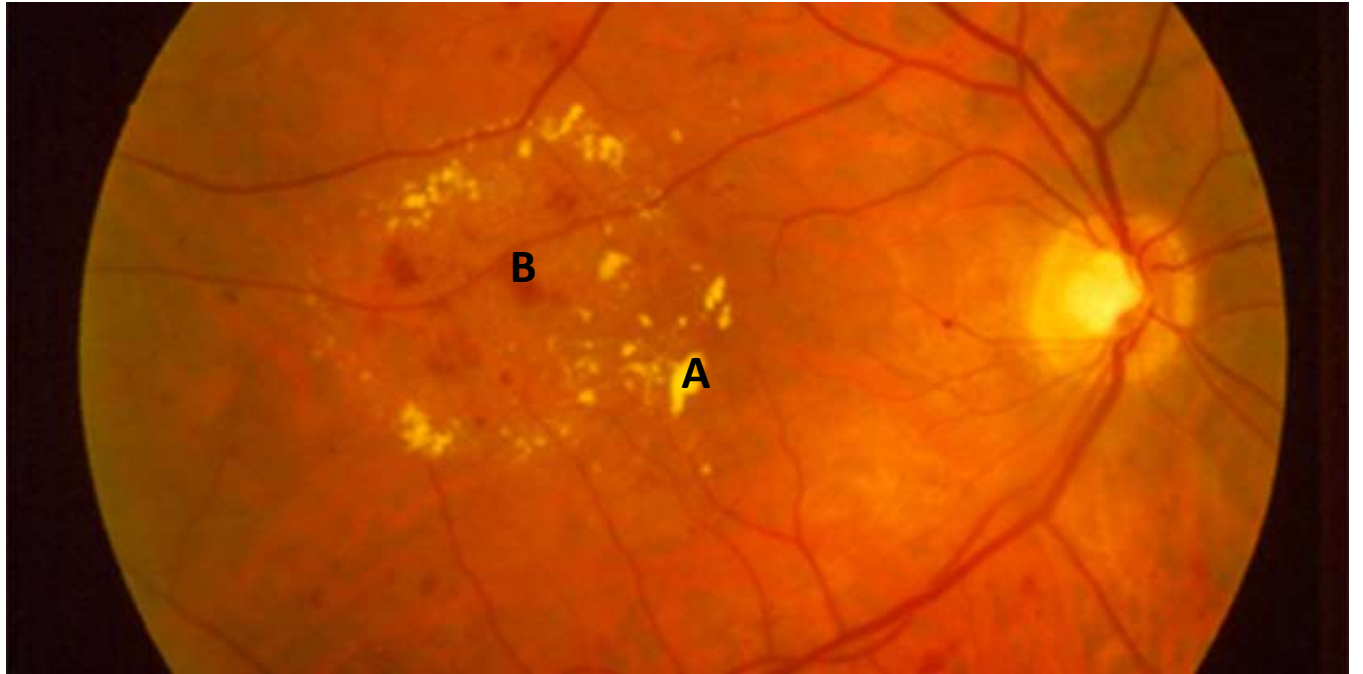




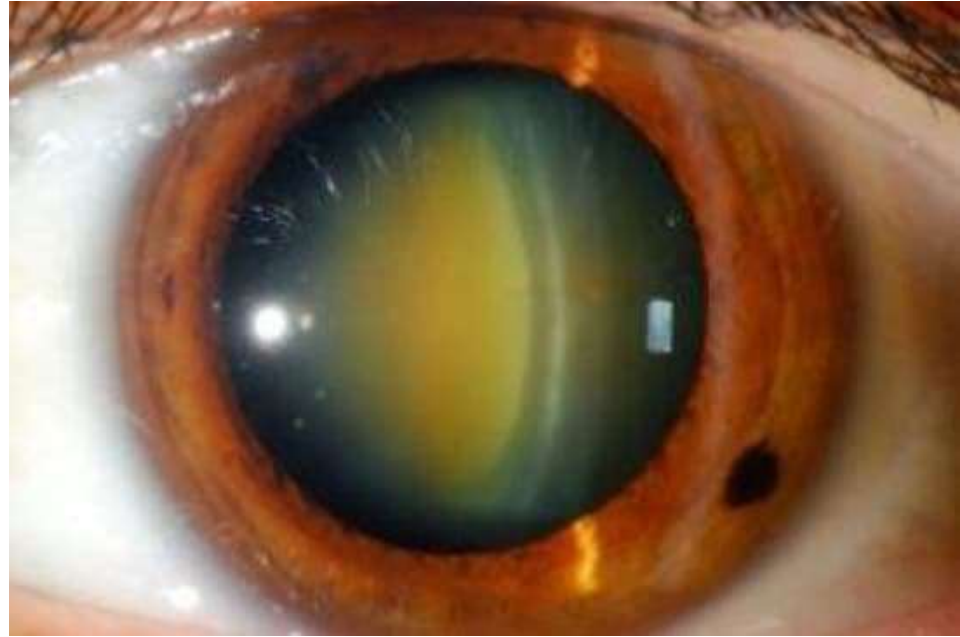
True or false :

1. Retinoblastoma most common primary tumor in children ? **True**
2. Mainly affect bilaterally ? **False**
3. Most common symptom is strabismus ?
4. Treated by chemotherapy ? **False**
5. Endophytic retinoblastoma mean it is subretinal space ?

سؤال من متعدد بس الجواب الصحيح هو  
A is hard exudate



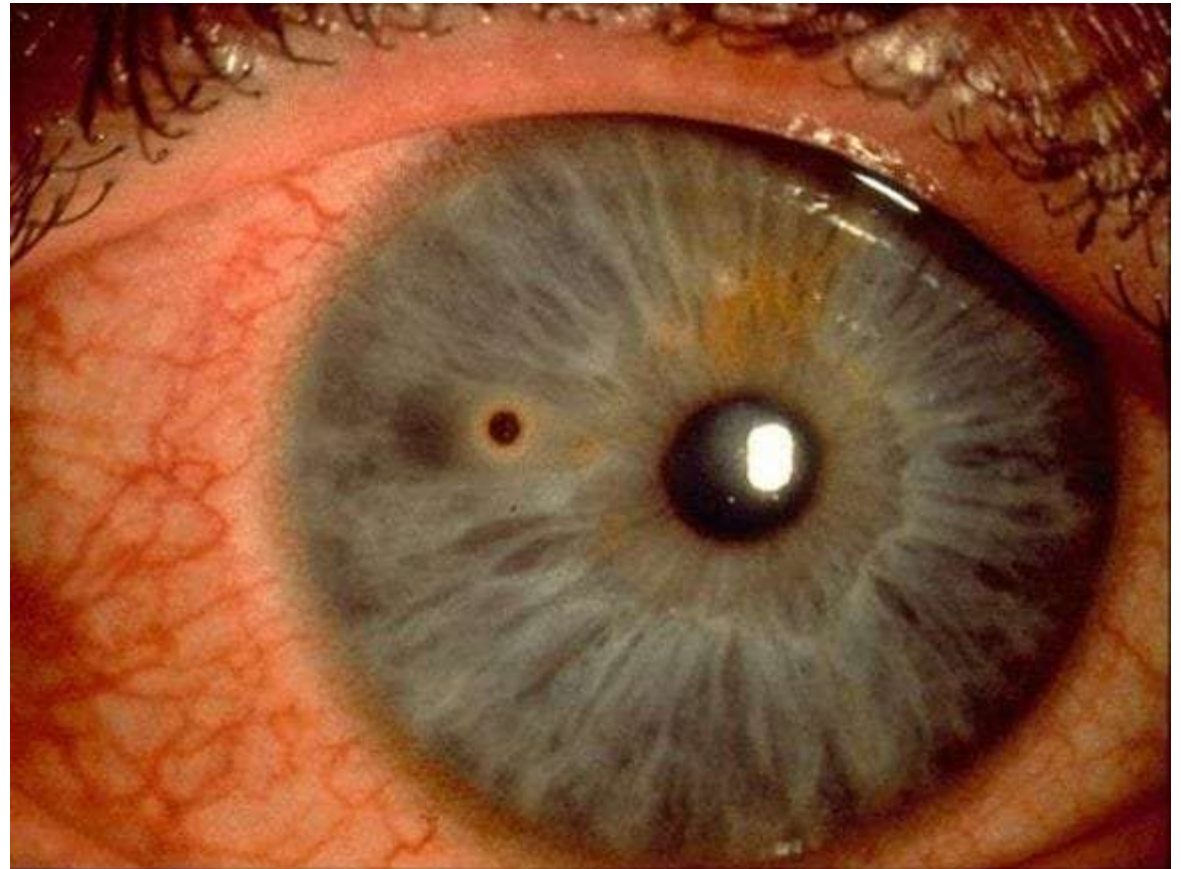
1. Diagnosis : **nuclear cataract**
2. Most common operation nowadays :  
**Phacoémulsifications**
3. one of the complication of this condition , what name of this accumulation in anterior chamber ? مع الصورة اللي تحت  
**hypopyon**



4. The management of this complication is vitrectomy ? **True**



1. What called this object ? **Foreign body**
2. Management ? **Remove it and give antibiotic**





1. Diagnosis ? **Exotropia**
2. Surgery can did it to treat muscle that affected in this condition ?  
**Bilateral lateral recession**
3. should we postpone operation till amblyopia treated for better result of operation ? **True**
4. Management of amblyopia is cover right eye and give it atropine in it ?  
**False**



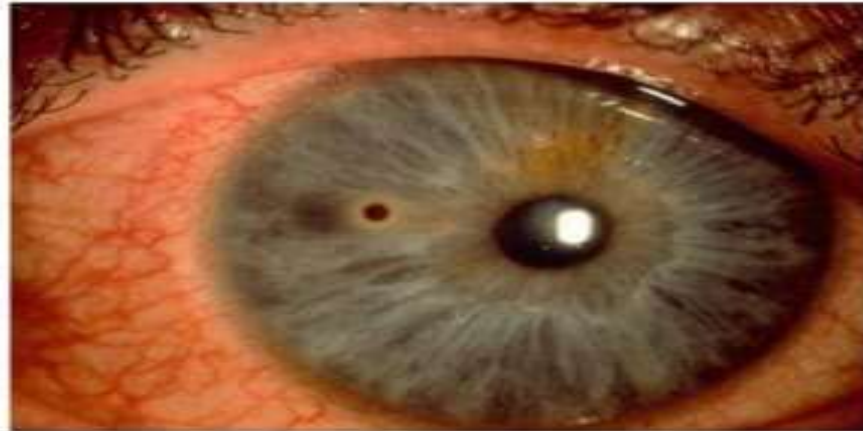
Ophthalmology archive

group A+B

الفصل الصيفي

1. What called this object ? **Foreign body**
2. Management ? **Remove it and give antibiotic**

السؤال كان كتابي



السؤال كان دوائر



1. Diagnosis ? **Exotropia**
2. Surgery can did it to treat muscle that affected in this condition ?  
**Bilateral lateral recession**
3. should we postpone operation till amblyopia treated for better result of operation ? **True**
4. if the right eye was -5.00 and the left -4.5 , we should cover the right eye ? **الصيغة مش حرفي بس هاد المعنى يعني false الجواب**

When should we use pan retinal photocoagulation?  
When there is peripheral retinal neovascularization without vitreal hemorrhage  
مثش متاكدين من الجواب

---

سؤال من متعدد بس الجواب الصحيح هو  
A is hard exudate



السؤال  
ل  
دوائر

# What is the sign? dendritic ulcer

What eye drop should we avoid?

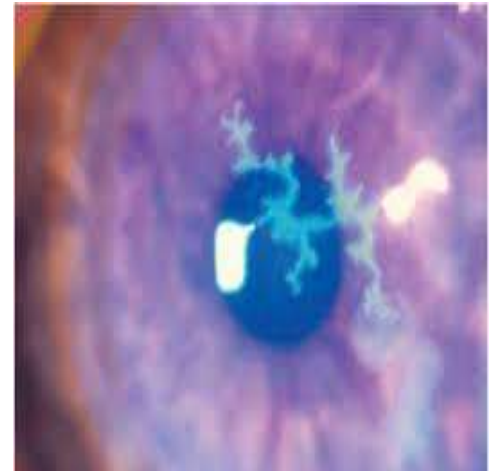
Steroids as they will exacerbate the condition

What is the dye?

Fluorescein

What is the treatment?

Topical antivirals



السؤال كتابي

## السؤال دوائر وكتابي

What is the name of the procedure?

Corneal graft or corneal transplant or keratoplasty

What part is taken for it?

Central cornea

If the iop is 43mmhg what is eye drop that we can stop?

The topical steroids



## السؤال دوائر

What is the diagnosis?

Nuclear cataract

What is the treatment?

Phacoemulsification



Nuclear cataract

What is the diagnosis?

Graves disease

what is the most commonly  
affected ocular muscle?

Levator palpebrae superioris

what is the thickest extraocular  
muscle?

Inferior rectus



السؤال كتابي

# Ophthalmology mini-osce

نبأ الحباشنة  
تمارا المحادين  
ساجدة المقابلة



1. What is the sign?

dendritic epithelial ulcer

2. What is the stain?

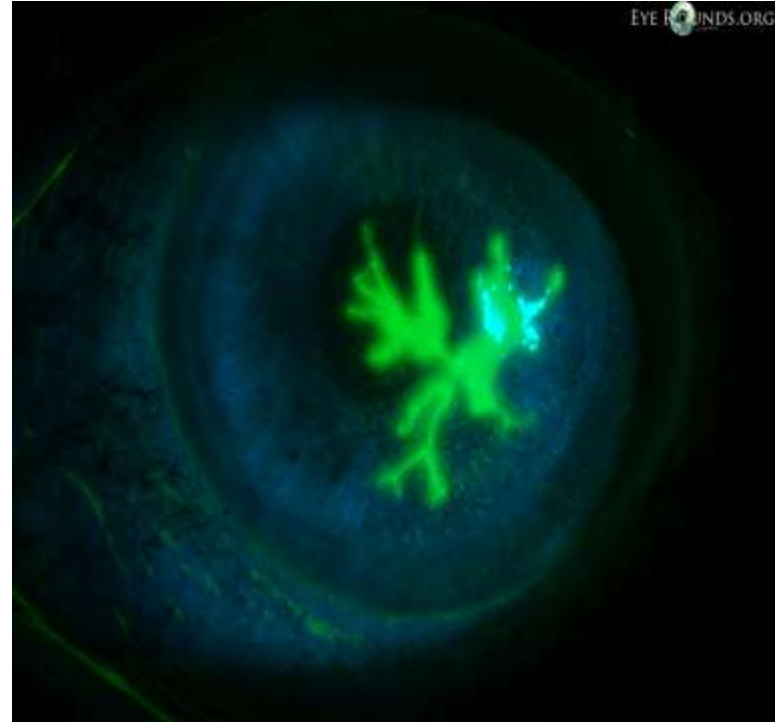
Fluorescein stain

3. What is the most appropriate medication?

anti viral: Acyclovir

4. What is the drug should be avoided?

Topical steroids



5. What is the surgery?

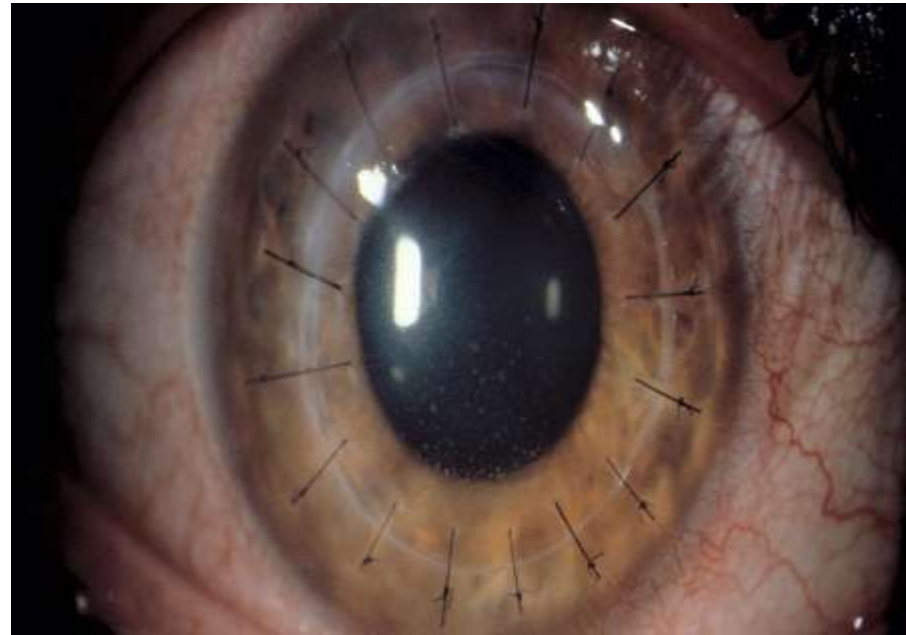
Keratoplasty

6. What is the part ?

Central cornea

7. If the IOP is 34mmHg what is the medication that causes it?

steroids



8. What is the disease?

Graves Disease

9. What is muscle involvement?

Levator palpebrae superioris  
muscle

10. What is the thickest  
muscle?

Inferior rectus

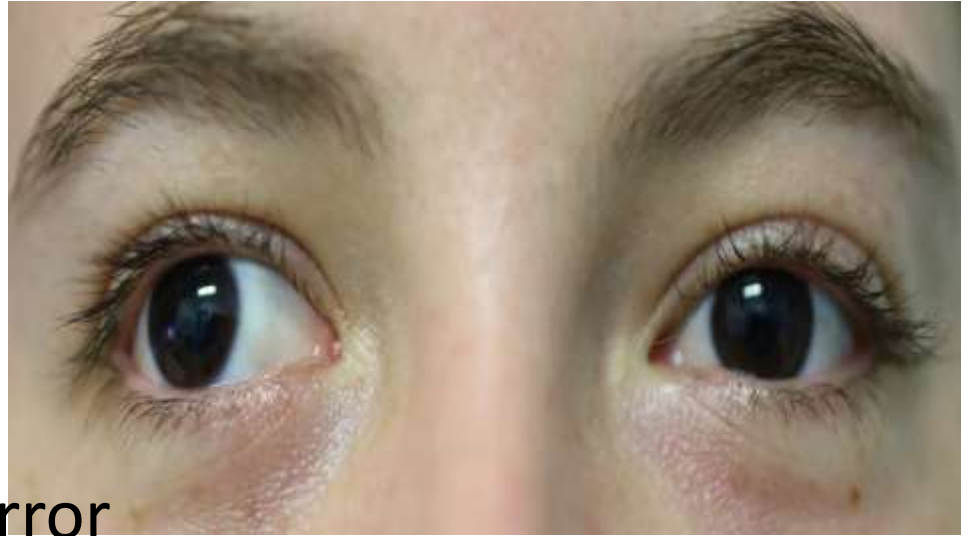


11. What is this?

Right-Exotropia

12. Surgery to this?

bilateral lateral rectus recession



13. If patient's refractive error is -4.5 on the left eye and -5 on the right eye, we have to cover his right eye after he wears a corrective spectacles to prevent amblyopia»». **false**

14. erythema and swelling in the upper and lower lid) but the pt can move his eye( so we rule out orbital cellulitis and we think about preseptal cellulitis), but the doctor doesn't think this is because inflammatory process he thinks about malignant cause, what do you think the cause is.....ans: **rhabdomyosarcoma**

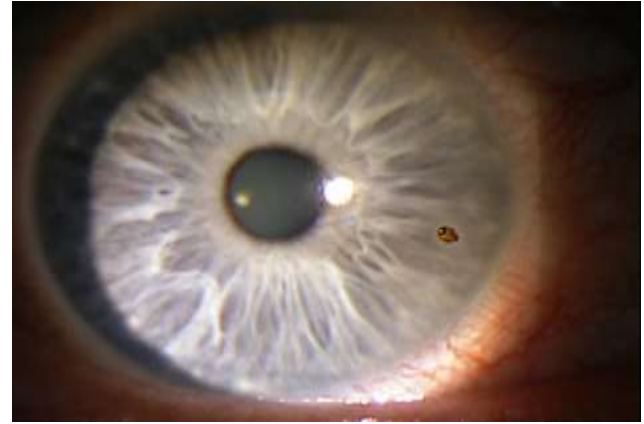
15. investigation

**CT-scan**

# MCQ

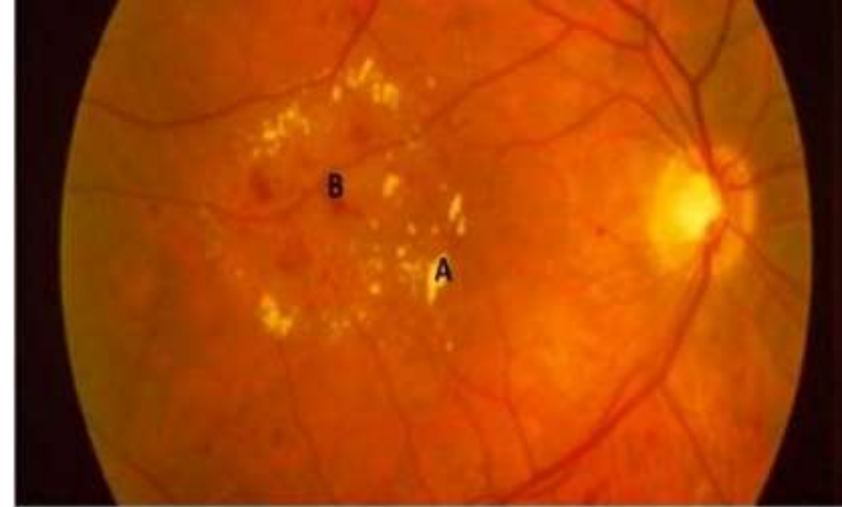
16. Foreign body

Remove and give antibiotic



.....  
.....  
17. A, Hard exudate

18. One of the following is an indication for pan retinal photocoagulation  
ans: neovascularization on the retina  
except if there is large vitreous hemorrhage



# *Group 4*

Leen & Rand Mbaidin

**Q1:** identify A and B ?

A..plot hemmorage

B..hard exudate

**Q2:** pic.of dendritic ulcer ..least uncommon of these for recurrence ?

**Q3:** all cause follicular conjectivies except?

**Q4:** pic of ptosis since born (6months child ):

Dx: congenital ptosis

Operations to know the cause : tarsoraphy?!

Investigation mcq

**Q5:** match each visual field defect with its cause

كانوا 7 أفرع

من جدول في موقع الدكتور خليل

**Q6:** regarding examination which is false?

It isn't mandatory to use dilator eye drops in children to examine the retina



**Q7:** pic. of medial tear (laceration )in the lower eye lid

1)what will you do?

Refer patient to ophthalmologist ✓☐

**Q8:** pic. of symblepharon which of the following doesn't cause it?

**Q9:** all of the following can be seen in trachoma except?

Ectropian

**Q10:** which of the following won't cause homonymous hemianopia field defect?

**Q11:** pic of cherry red spot

Dx: Central retinal artery occlusion

**Q12:** all of the following true except

Hypermetropia concave lens

**Q13:** true or false

nasolacrimal duct obstruction ٣ أشهر عنده طفل

لا أو بنعمله إذا سائل وكان

ophthalmology

november

1. All true about hypermetropia except

Needs minus lens

2. all are true except

cyclorefraction in children is not mandatory(not sure)

3. what is this pic?

Pic. Of rubiosis iridis



4. all are true except?

give steroid

beta blocker

drug causes meiosis

5. Caused by, except ?

iris bombe

glaucoma

cataract

6. most common cause for this condition other than

diabetic retinopathy?

CRVO

7. Case of optic neuritis all is of its symptoms except?

right ring scotoma (it causes central scotoma)

red green color impairment

rapd is common

right optic swelling

Case of DR name the indicated by arrow

8. what is A?

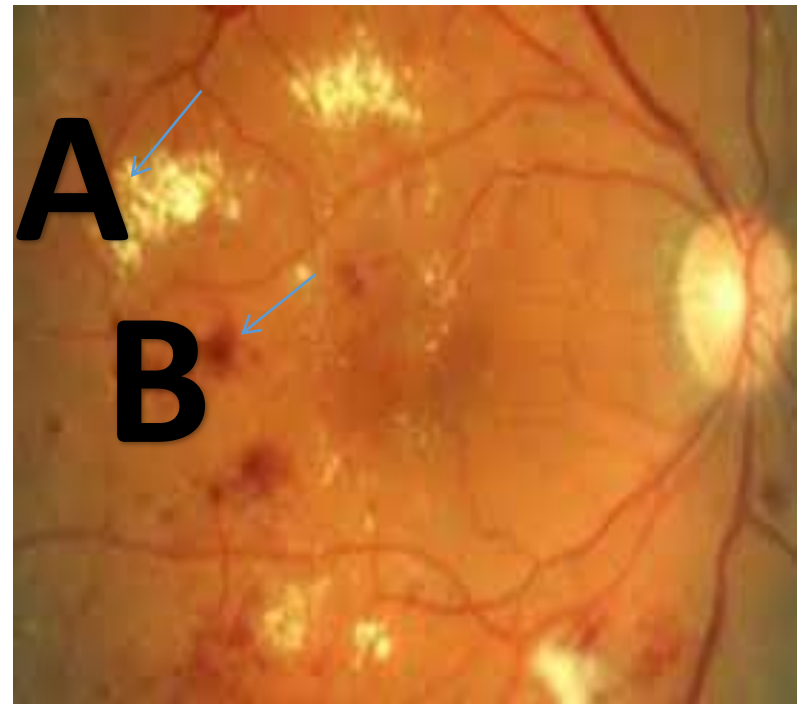
Hard exudate

9. what is B?

Dot/plot hemorrhage

10. Most common cause of blindness in DM?

macular edema (not sure)



11. case of uveitis all ass.w/ anterior uveitis except?

-KP

-macular edema

-post. synechia

-hypopyon

Pic of ptosis ,the mother say he has this condition since birth

12. Name the condition ?

Congenital ptosis

13. Name the surgery ?

Blepharoplasty or sling

14. What to do ?

Assure as it will improve spontaneous

Refere to ophthalmologist (not sure)

Refere to neurologist

order MRI



15. Case of vernal catarrh, all are true except ?

it causes keratoconus

vernal catarrh causes maculopathy

steroids causes cataract

steroids causes glaucoma



16. Pic. Of iris dialysis, all are true except?

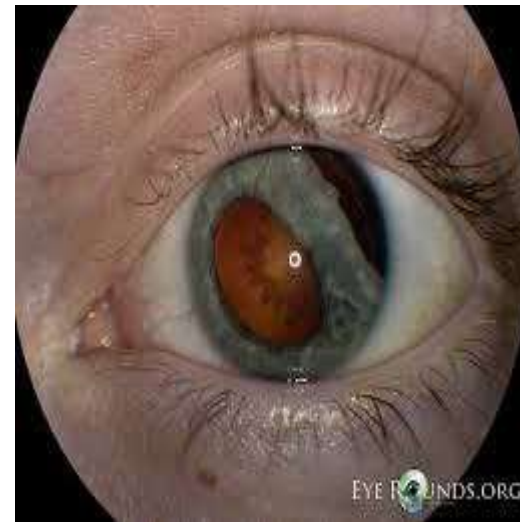
marfan

trauma

retinoplastoma

hypocystenurea

ehler danols type 6



17. Cataract surgery complications except?

vitrous loss

galucoma

hypermetropea

## Child with esotropia

18 .all are true except?

do exam to exclude secondary causes of squint

send home

19.

20: all are risk factor for retinopathy of prematurity except:

O<sub>2</sub>

under 32 week

weight under 1500 g

dilation eye drops



- **Ophthalmology**
  - **December**
- **20 questions mixed (MCQ&Written)**
  - **25 min 2 way**



Written

3. what is this pic?

Pic. Of rubiosis iridis

4. all are tru except?

give steroid

beta blocker

drug causes meiosis



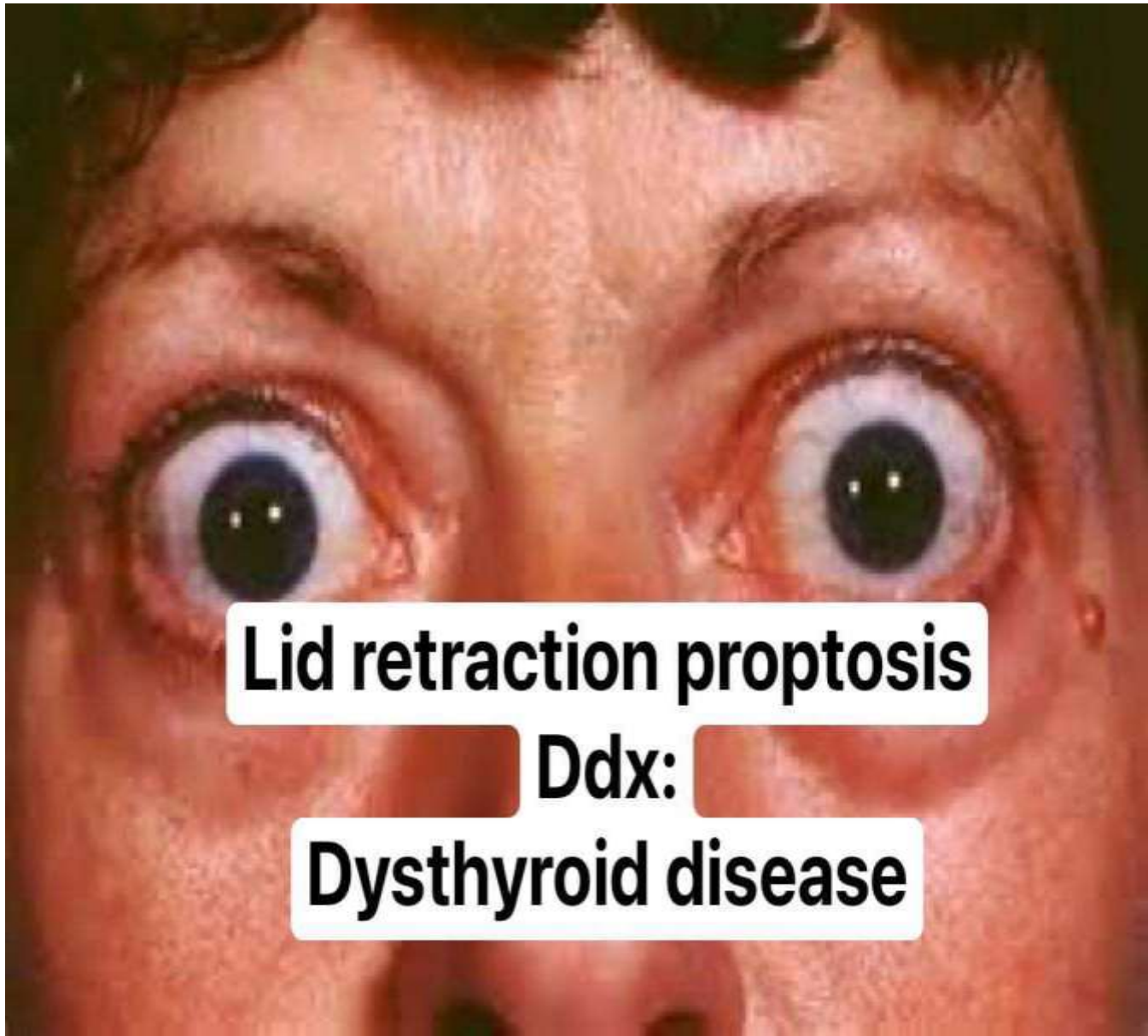
Written

-Type of glaucoma?

Secodary

neovascularization

glaucoma



**Lid retraction proptosis**

**Ddx:**

**Dysthyroid disease**

MCQ

**1 Type gaze affected by climb  
down ?**

**pt can't read**

**Ans:Downward!**

**(Not sure)**

**2**

pic.of dendritic ulcer ..least uncommon of these for recurrence ?

# Written

## Case of DR name the indicated by arrow

8. what is A?

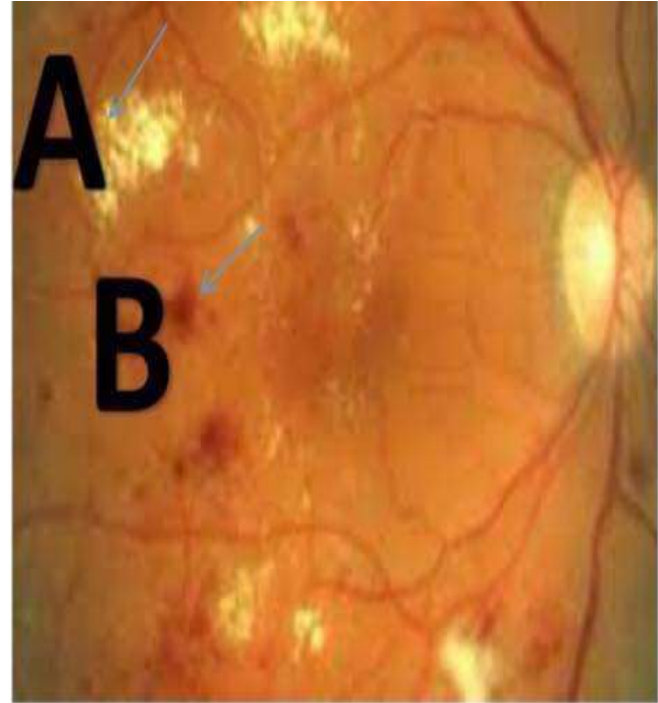
Hard exudate

9. what is B?

Dot/plot hemorrhage

10. Most common cause of blindness in DM?

macular edema (not sure)



# MCQ

5. Caused by, except ?

iris bombe

glaucoma

cataract

11. case of uveitis all ass.w/ anterior uveitis  
except?

-KP

-macular edema

-post. synechia

-hypopyon

**Uveitis**

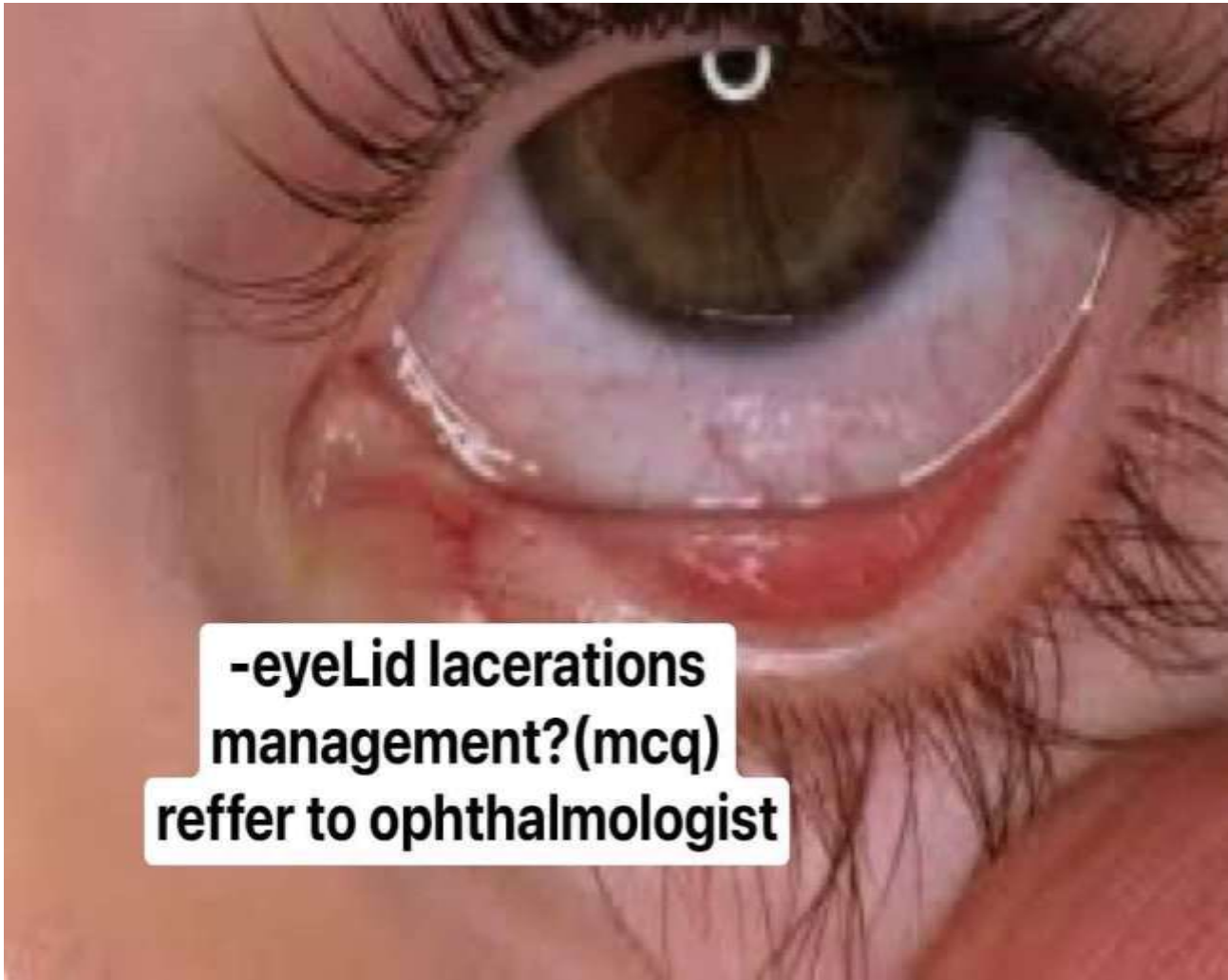
MCQ



MCQ



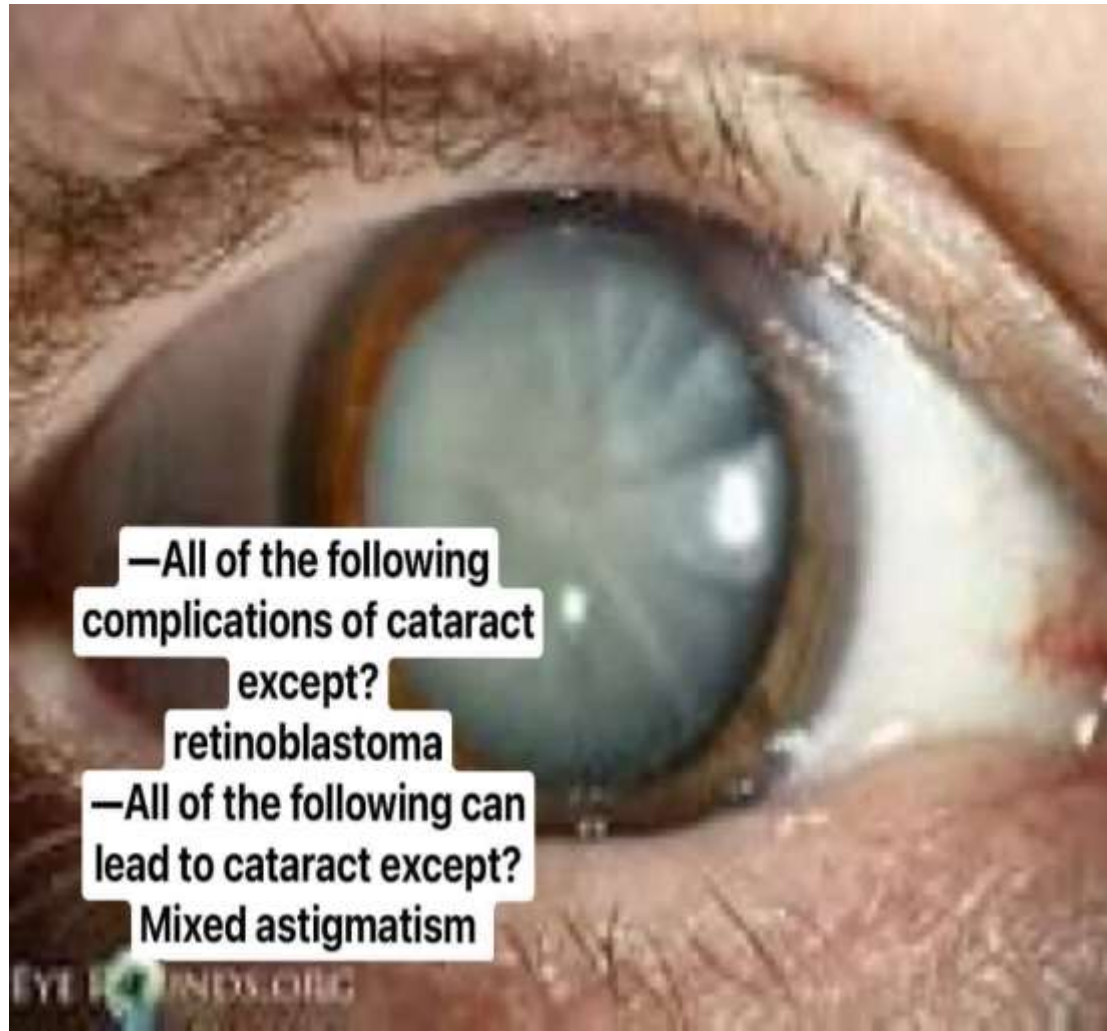
**All of the following true  
about this condition except?  
Large chalazion lead to  
astigmatism**

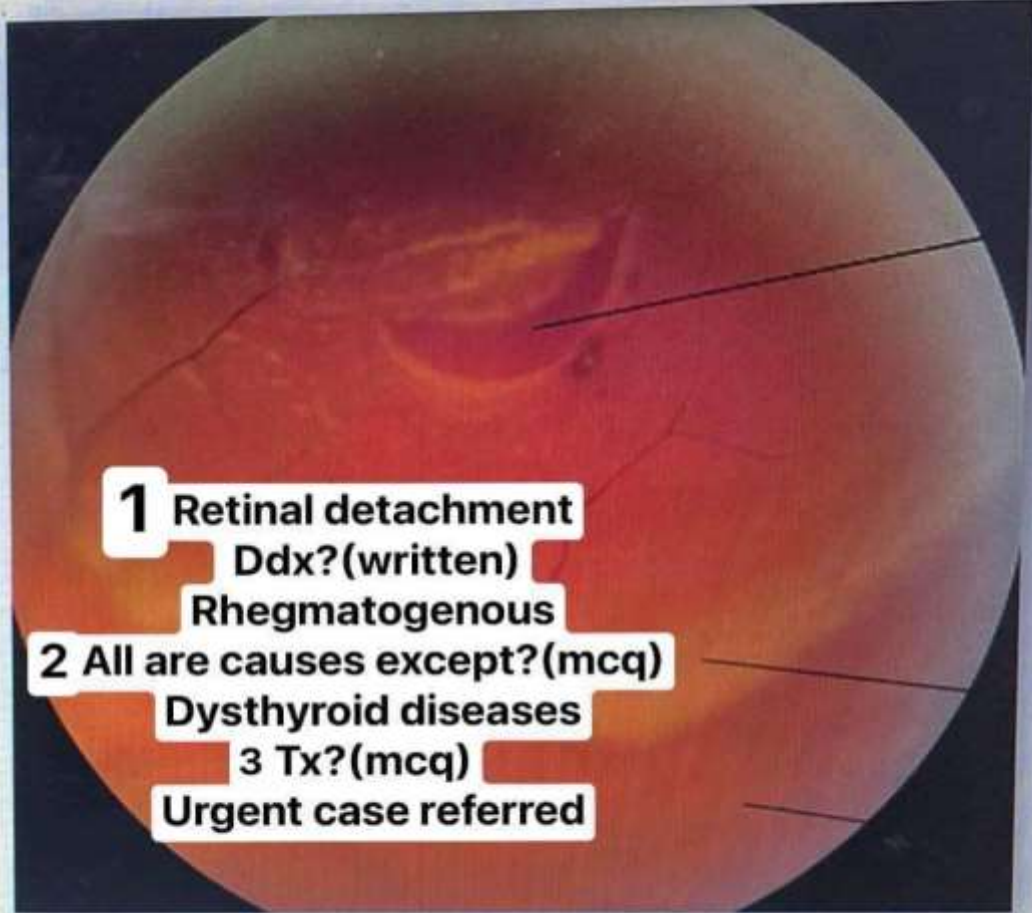


**-eyeLid lacerations  
management?(mcq)  
refer to ophthalmologist**



MCQ





**1 Retinal detachment**

**Ddx?(written)**

**Rhegmatogenous**

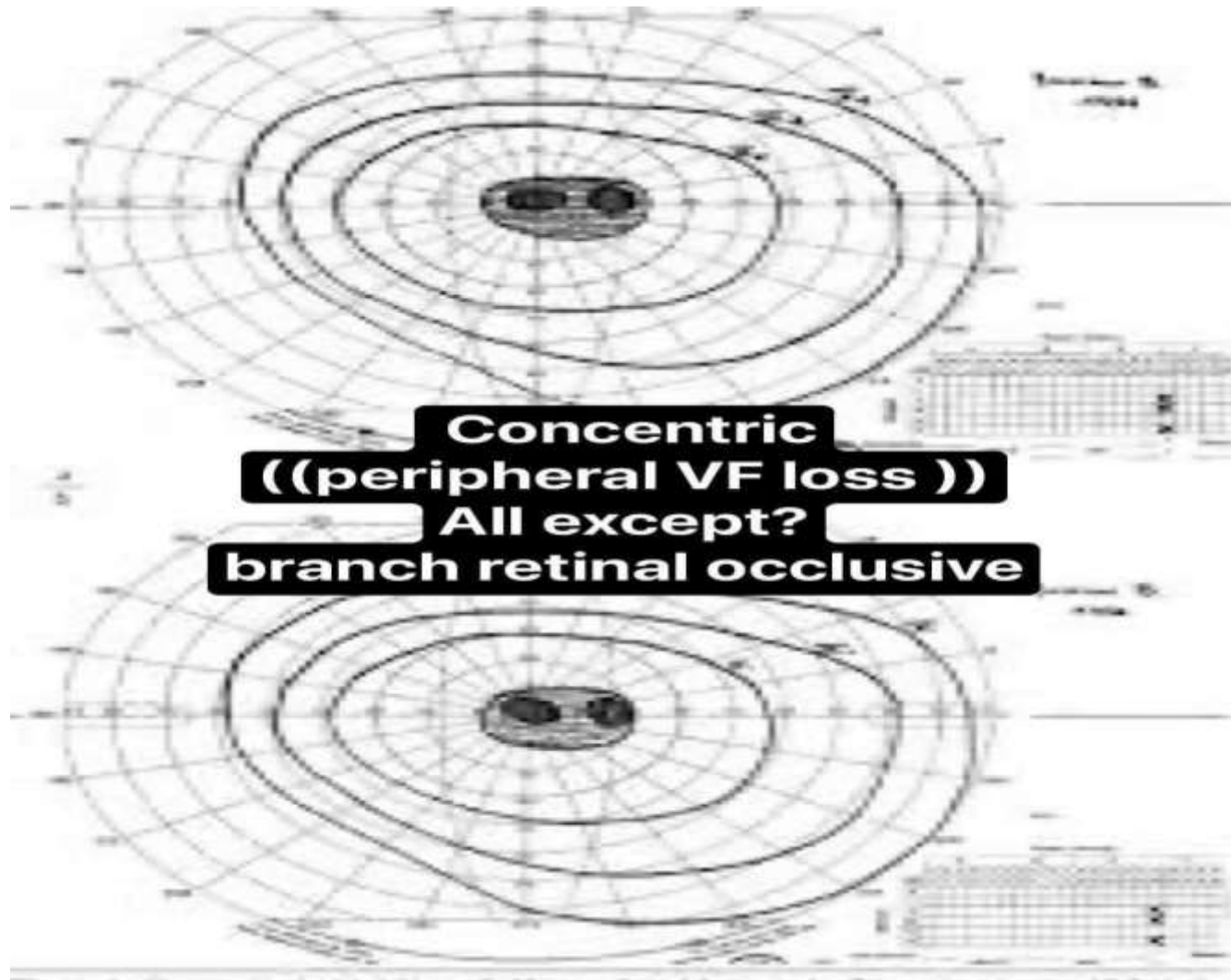
**2 All are causes except?(mcq)**

**Dysthyroid diseases**

**3 Tx?(mcq)**

**Urgent case referred**

MCQ



Ophthalmology mini-osce

By : Rahma Saraireh


Sara abdelaziz

**19 q in 25m**

**2024/2/8**



**All of the following true  
about this condition except?  
Large chalazion lead to  
astigmatism**



**—All of the following complications of cataract except?**

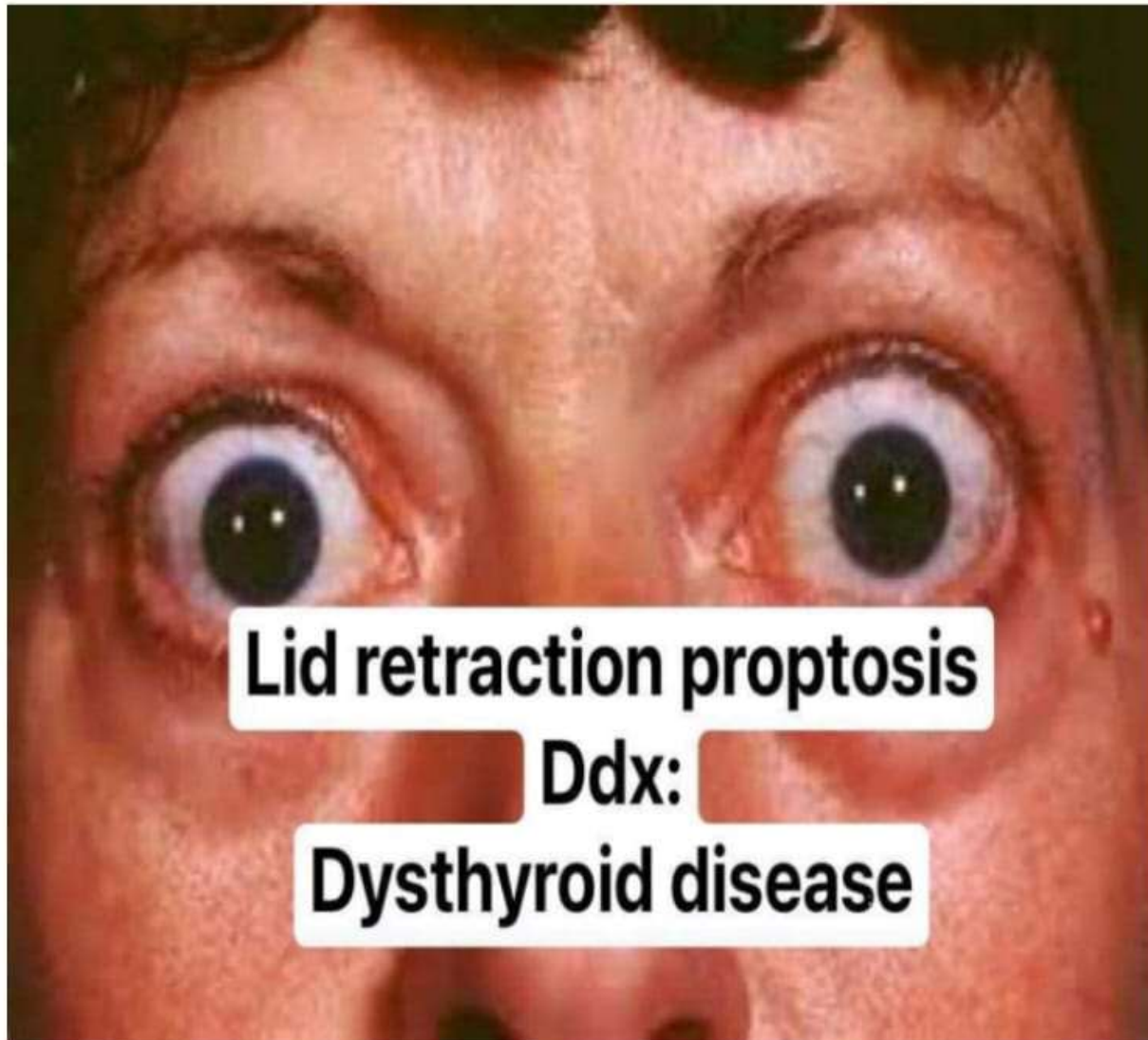
**retinoblastoma**

**—All of the following can lead to cataract except?**

**Mixed astigmatism**



**-eyeLid lacerations  
management?(mcq)  
refer to ophthalmologist**



**Lid retraction proptosis**

**Ddx:**

**Dysthyroid disease**



**1 Type gaze affected by climb  
down ?**

**pt can't read**

**Ans:Downward!**

**(Not sure)**

مش نفس الصورة\*



**All of the following cause  
Cicatrival inflammatory  
except?**

**Bollus pimhggoid**

Case of DR name the indicated by arrow

8. what is A?

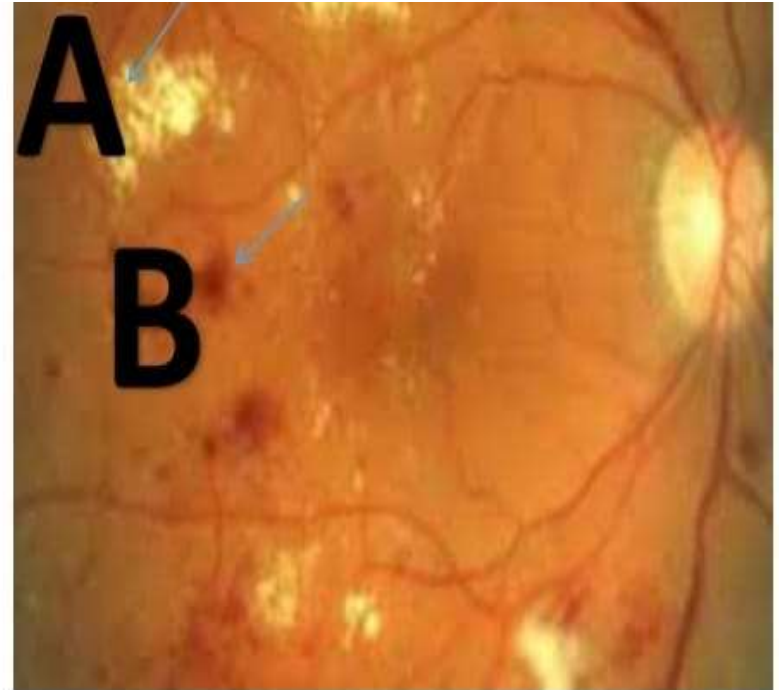
Hard exudate

9. what is B?

Dot/plot hemorrhage

10. Most common cause of blindness in DM?

macular edema (not sure)



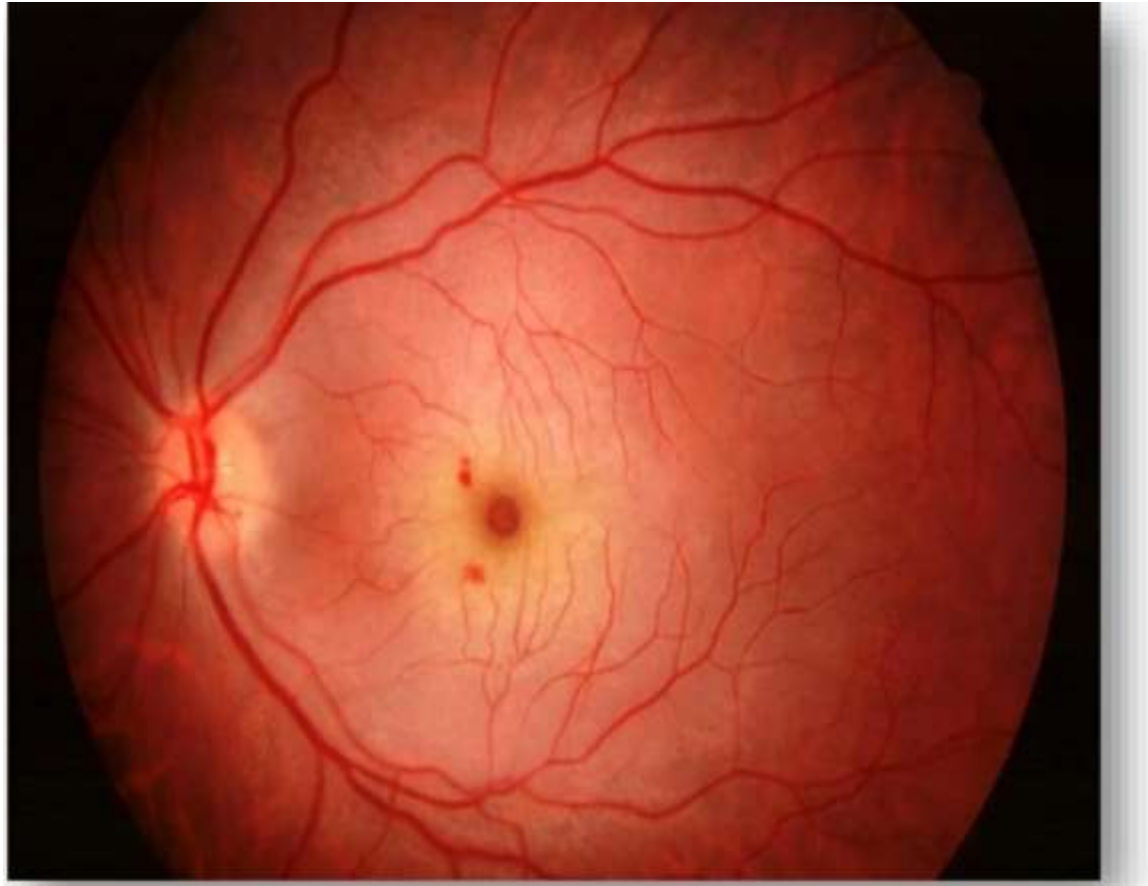
Diagnosis(Written) : Pterygium

True about it (mcq) : not premalignant



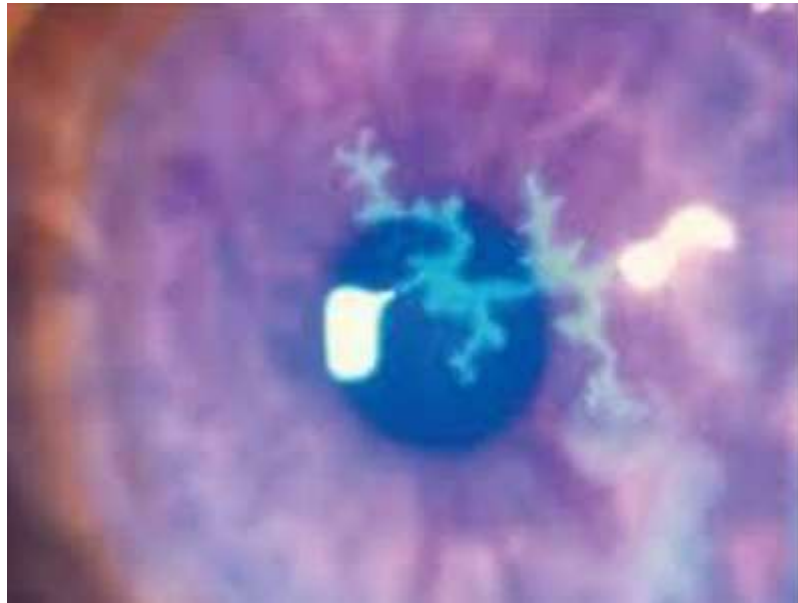
Written:

Central retinal artery occlusion



- dendritic ulcer ..least uncommon of these for recurrence : (MCQ)

antibiotic use



Diagnosis(mcq)

Keratoconus



child came with congenital nasolacrimal duct obstruction, we do probing ?

False

probing لأنه مش من اول مره نعمل ال  
نمشي بالخطوات

Spontaneous opening occur in most cases.

Lacrimal sac massage accompanied by lid hygiene.

If above failed Lacrimal sac syringing & probing

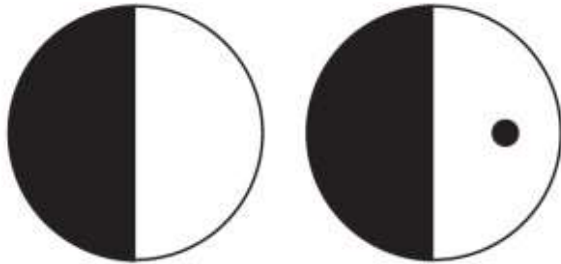


# match each visual field defect with its cause

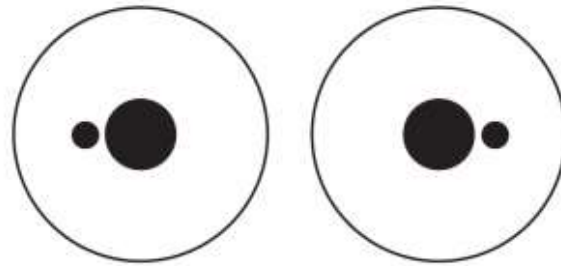
Notes	Typical lesions	Field defect	Blood supply	Locus of the visual pathway
	Optic neuritis Amaurosis fugax Optic atrophy Retrobulbar optic neuropathy Trauma	Ipsilateral monocular blindness	Ophthalmic artery	<b>Optic nerve</b>
	Central) (chiasm Pituitary adenoma Suprasellar aneurysm ----- Peripheral chiasm Internal carotid artery atheroma	Bitemporal hemianopia (central chiasm) ----- Ipsilateral monocular nasal hemianopia (peripheral chiasm)	:Branches from Internal carotid Posterior communicating artery Anterior cerebral artery Anterior communicating artery	<b>Optic chiasm</b>

7 خيارات وكل خيار بعلامة  
 من موقع الدكتور خليل

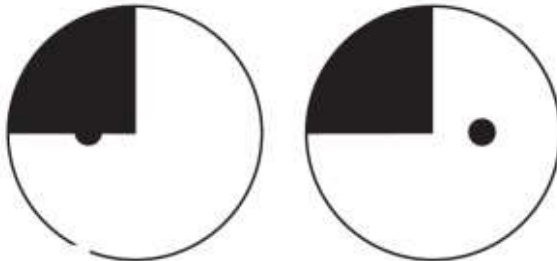
	MCA Stroke	Contralateral homonymous hemianopia	Middle cerebral artery (MCA)	<b>Optic tract</b>
	MCA Stroke	Contralateral homonymous quadrantanopia	Middle cerebral artery (MCA)	<b>Optic radiation</b>
	PCA, Posterior communicating artery	Contralateral homonymous hemianopia <b>with macular sparing</b>	Mostly by the PCA. The MCA also helps supply the anterior portion, which corresponds to the macula	<b>Calcarine sulcus</b>
	PCA, Posterior communicating artery	Contralateral homonymous hemianopia <b>with macular sparing</b>	Mostly by the PCA. The MCA also helps supply the anterior portion, which corresponds to the macula	<b>Occipital cortex</b>



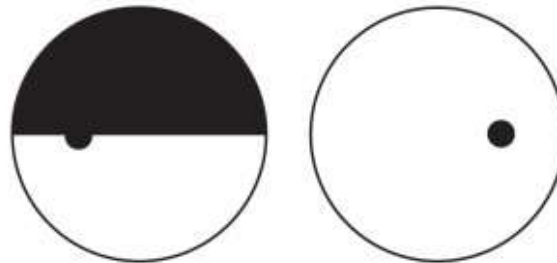
Left homonymous hemianopia.



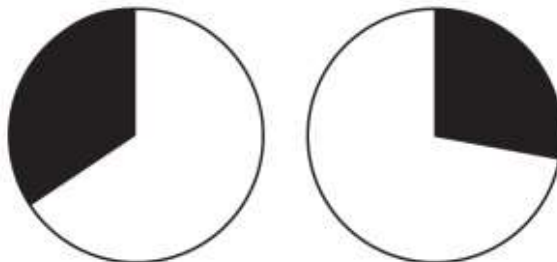
Central scotoma.



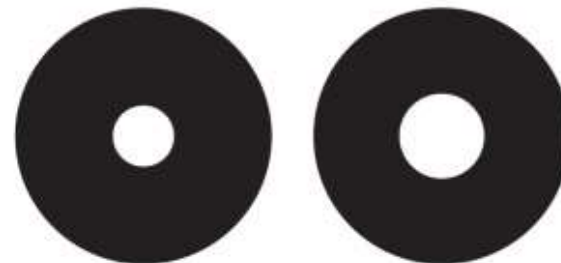
Left superior homonymous quadrantanopia.



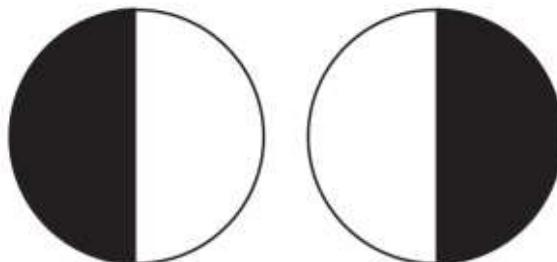
Superior altitudinal hemianopia in the left eye.



Bitemporal superior quadrantanopia.



Concentric peripheral field loss.



Complete bitemporal hemianopia.



**Al Salem** Eye Clinic  
Discover The Difference

## 2 question about congenital glaucoma



1) All true except :

- 1) Using Anesthesia can be delayed until 2nd year age and measure iop
- 2) Anesthesia use is mandatory for IOP measuring
- 3) Clear cornea doesn't exclude glaucoma

2) Maybe., all differential except : (

Nabed ophthalmology  
archive  
6th of March

done by : خزامى سعادة

Q1 ) 26 year old female pregnant lady presented with this sign , she has history of recurrent stomatitis , whats the most likely to be the cause of recurrence ?

A. topical steroids  
use

B. systemic  
steroids use

C. topical  
antibiotics use

**ANSWER : C**



Q2) A 3 years old child presented with excessive tearing and increase in the size of cornea , all of the following are true except ?

- A. it maybe congenital glucoma because the conditon is bilalteral
- B. a clear cornea dosen't exclude the diagnosis
- C. using anesthesia for diagnosis and measuring IOP can be postpond until 2 years of age
- D. using anesthesia is mandatory for diagnosis and measuring IOP



**ANSWER : D**

Q3) All of the following can be a cause of cloudy eye in infants excepty :

- A. congenital glucoma
- B. birth trauma
- C. congenital esotropia
- D. congenital rebulla

ANSWER : C



Q4) a 66 years old male patient with history of HTN presented with sudden onset visual loss in the right eye , the best corrected visual acuity in the left eye was 6/6 and in the right eye no light perception , the fundoscopic examination revealed the following sign , what's the most likely cause of this case ?

**ANSWER : central retinal artery occlusion  
( written )**



Q5) all are used in treatment except :

- A. topical cycloplegic
- B. topical steroids
- C. beta blockers
- D. drugs tha causes miosis

**ANSWER : D**

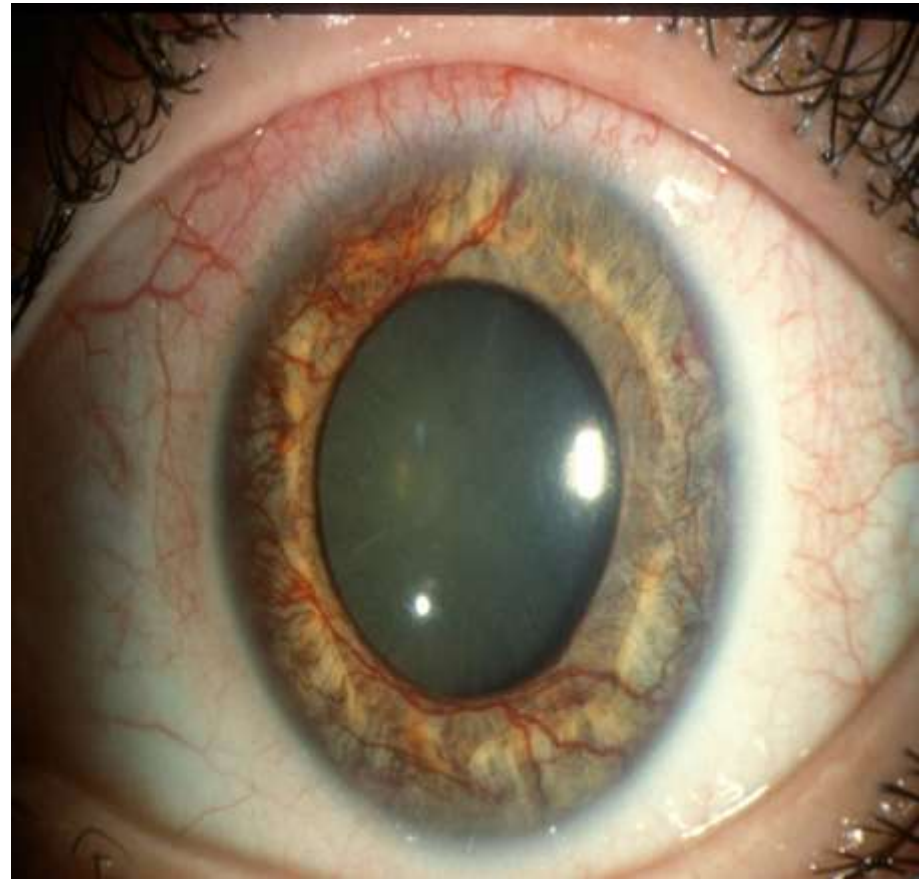
Q6) name of the sign :

**rubeosis iridis ( written )**

Q7) type of glucoma assossiated

:

**secondary neovascularization  
glucoma ( written )**



Q8) A child fell off his bicycle came to the ER with this presentation , what's your management :

- A. reassure the parents that it will heal spontaneously
- B. refer to the ophthalmologist for further management
- C. clean the wound and send home
- D. suture the wound by yourself

**ANSWER : B**



Q9) A female patient presented with this sign, CT imaging shows thickened extraocular muscles, the most likely cause of her condition :

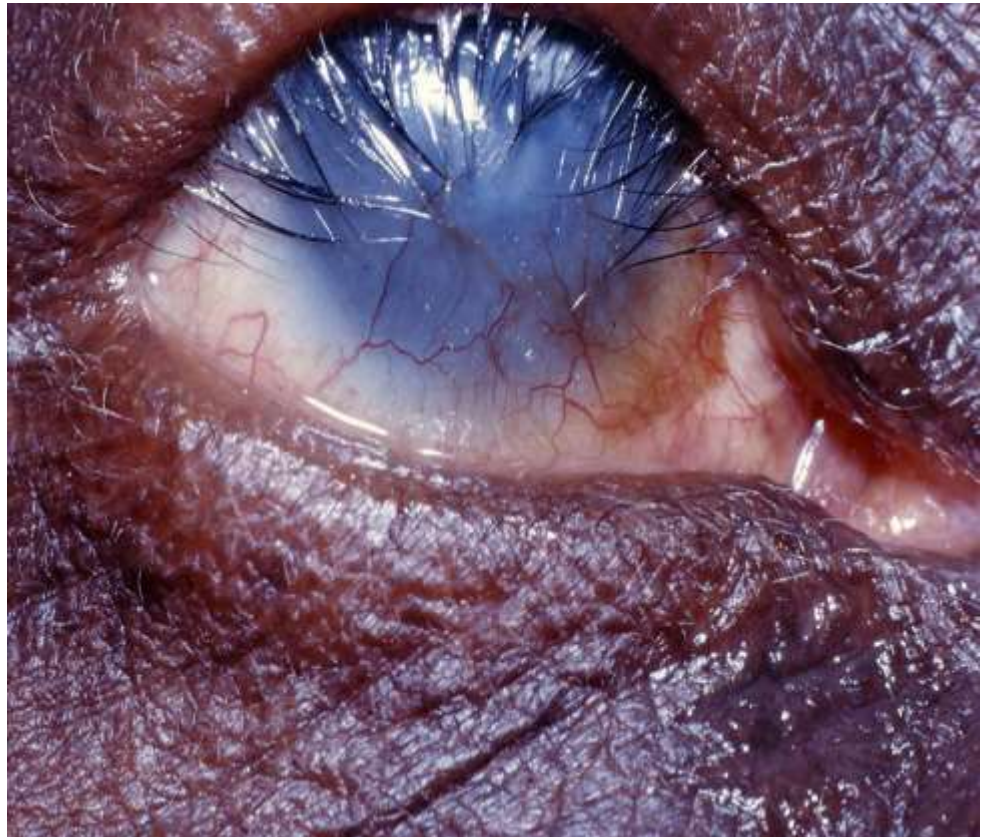
**ANSWER : dysthyroid disease**  
**(MCQ)**



Q10 ) All of the following are associated with trachoma except :

- A. trichiasis
- B. cicatrical ectropion
- C. pannus formation
- D. follicular conjunctivitis
- E. conjunctival scarring

**ANSWER : B**



Q11) All of the following causes homonymos hemonopia except :

- A. optic tract lesion before ...
- B. optic nerve
- C. optic tract lesion after ...
- D. optic radiation
- E. calcarine sulcus

**ANSWER : B**

Q12) A child presented with this sign , all of the following about this condition are true except ?

- A. it's caused by RB1 gene
- B. it's benign condition that doesn't require further intervention
- C. plaque radiotherapy can be used for solitary cases
- D. it may cause retinal detachment
- E. trilateral form tend to be bilateral

**ANSWER : 2**



Q13) Name of the sign :  
pterygium ( written )

Q14) All of the following about this case are true except :

- A. it occurs due to UV light and heat exposure
- B. it's premalignant
- C. it's removed when it's rapidly growing
- D. it's removed when it grows to cover the pupillary opening
- E. it may recur after removal

ANSWER : B





Q15) Match the following about direct and indirect ophthalmoscope

- 1) in direct ophthalmoscope the image is. > **virtual and erect**
- 2) direct ophthalmoscope magnification power > **\*15**
- 3) indirect ophthalmoscope magnification power > **3-5**
- 4) diameter of the field of observation in direct ophthalmoscope > **about 10°**
- 5) diameter of the field of observation in indirect ophthalmoscope is > **greater than 37° degree**
- 6) scleral indentation can not be seen using > **direct ophthalmoscope**
- 7) visualisation in hazy media is poor using > **direct ophthalmoscope due to low illumination**
- 8) image in indirect ophthalmoscope is . > **real and inverted**
- 9) structures seen using direct ophthalmoscope are. > **central retina only**
- 10) structures seen using indirect ophthalmoscope are > **central and peripheral retina**
- 11) indirect ophthalmoscope has > **high illumination**
- 12) Stenosis can be achieved by > **indirect ophthalmoscope**

Q16 ) Patient presented with blurry vision ,  
diagnosed with cataract , surgery was performed ,  
all of the following are complication of cataract  
surgery except :

- A. vitrous loss
- B. glucoma
- C. retinablastoma
- D. astigmatism
- E. endophthalamitis

**ANSWER : C**

Q17) All of the following can cause cataract except :

- A. trauma
- B. DM
- C. mixed astigmatism
- D. uveitis
- E. chemotherapy

ANSWER : C

Q18) The patient can't read and climb down the stairs , the affected gaze is :

- A. upward paralysis
- B. downward
- C. horizontal
- D. vertical
- E. mixed

ANSWER : B ?

Q19) Cicatrical inflammatory symblepharon is caused by all of the following except :

- A. bollous pemphegoid
- B. chemical burns
- C. steven johnson's syndrome
- D. trachoma

**ANSWER : A**



Nabed ophthalmology  
archive  
6th of March

done by : خزامى سعادة

Q1 ) 26 year old female pregnant lady presented with this sign , she has history of recurrent stomatitis , whats the most likely to be the cause of recurrence ?

A. topical steroids  
use

B. systemic  
steroids use

C. topical  
antibiotics use

**ANSWER : C**



Q2) A 3 years old child presented with excessive tearing and increase in the size of cornea , all of the following are true except ?

- A. it maybe congenital glucoma because the conditon is bilateral
- B. a clear cornea dosen't exclude the diagnosis
- C. using anesthesia for diagnosis and measuring IOP can be postpond until 2 years of age
- D. using anesthesia is mandatory for diagnosis and measuring IOP



**ANSWER : D**



Q3) All of the following can be a cause of cloudy eye in infants excepty :

- A. congenital glucoma
- B. birth trauma
- C. congenital esotropia
- D. congenital rebulla

ANSWER : C

Q4) a 66 years old male patient with history of HTN presented with sudden onset visual loss in the right eye , the best corrected visual acuity in the left eye was 6/6 and in the right eye no light perception , the fundoscopic examination revealed the following sign , what's the most likely cause of

**ANSWER : central retinal artery occlusion  
( written )**



Q5) all are used in treatment except :

- A. topical cycloplegic
- B. topical steroids
- C. beta blockers
- D. drugs tha causes miosis

**ANSWER : D**

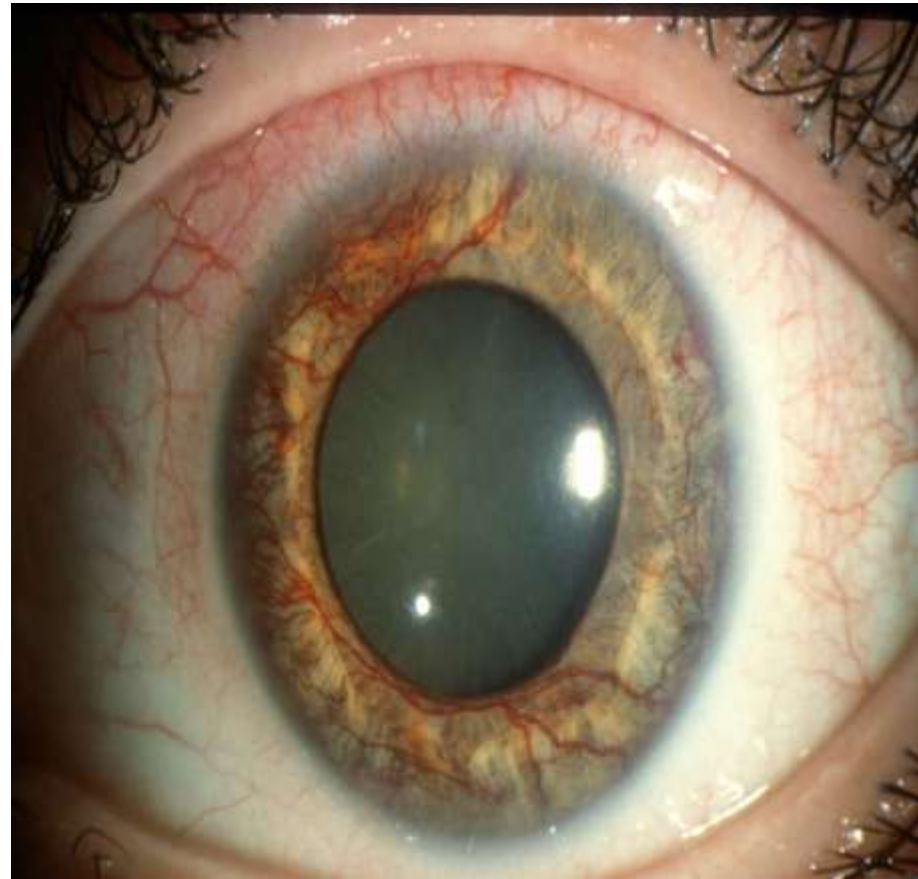
Q6) name of the sign :

**rubeosis iridis ( written )**

Q7) type of glucoma assosiated

:

**secondary neovascularization  
glucoma ( written )**



Q8) A child fell off his bicycle came to the ER with this presentation , what's your management :

- A. reassure the parents that it will heal spontaneously
- B. refer to the ophthalmologist for further management
- C. clean the wound and send home
- D. suture the wound by yourself

**ANSWER : B**



Q9) A female patient presented with this sign, CT imaging shows thickened extraocular muscles, the most likely cause of her condition :

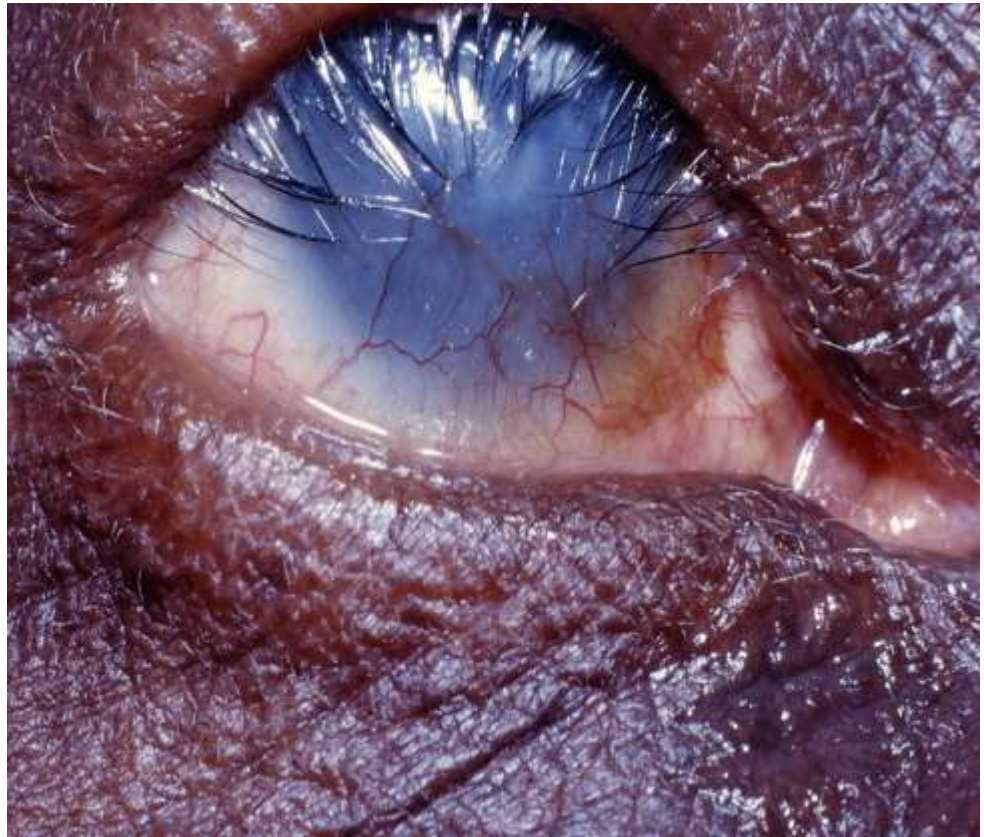
**ANSWER : dysthyroid disease**  
**(MCQ)**



Q10 ) All of the following are associated with trachoma except :

- A. trichiasis
- B. cicatrical ectropion
- C. pannus formation
- D. follicular conjunctivitis
- E. conjunctival scarring

**ANSWER : B**



Q11) All of the following causes homonymos hemonopia except :

- A. optic tract lesion before ...
- B. optic nerve
- C. optic tract lesion after ...
- D. optic radiation
- E. calcarine sulcus

**ANSWER : B**

Q12) A child presented with this sign , all of the following about this condition are true except ?

- A. it's caused by RB1 gene
- B. it's benign condition that doesn't require further intervention
- C. plaque radiotherapy can be used for solitary cases
- D. it may cause retinal detachment
- E. trilateral form tend to be bilateral

**ANSWER : 2**





Q13) Name of the sign :  
pterygium ( written )

Q14) All of the following about this case are true except :

- A. it occurs due to UV light and heat exposure
- B. it's premalignant
- C. it's removed when it's rapidly growing
- D. it's removed when it grows to cover the pupillary opening
- E. it may recur after removal

ANSWER : B



Q15) Match the following about direct and indirect ophthalmoscope

- 1) in direct ophthalmoscope the image is. > **virtual and erect**
- 2) direct ophthalmoscope magnification power > \***15**
- 3) indirect ophthalmoscope magnification power > **3-5**
- 4) diameter of the field of observation in direct ophthalmoscope > **about 10°**
- 5) diameter of the field of observation in indirect ophthalmoscope is > **greater than 37° degree**
- 6) scleral indentation can not be seen using > **direct ophthalmoscope**
- 7) visualisation in hazy media is poor using > **direct ophthalmoscope due to low illumination**
- 8) image in indirect ophthalmoscope is . > **real and inverted**
- 9) structures seen using direct ophthalmoscope are. > **central retina only**
- 10) structures seen using indirect ophthalmoscope are > **central and peripheral retina**
- 11) indirect ophthalmoscope has > **high illumination**
- 12) Stenosis can be achieved by > **indirect ophthalmoscope**

Q16 ) Patient presented with blurry vision ,  
diagnosed with cataract , surgery was performed ,  
all of the following are complication of cataract  
surgery except :

- A. vitreous loss
- B. glaucoma
- C. retinoblastoma
- D. astigmatism
- E. endophthalmitis

**ANSWER : C**

Q17) All of the following can cause cataract except :

- A. trauma
- B. DM
- C. mixed astigmatism
- D. uveitis
- E. chemotherapy

**ANSWER : C**

Q18) The patient can't read and climb down the stairs , the affected gaze is :

- A. upward paralysis
- B. downward
- C. horizontal
- D. vertical
- E. mixed

ANSWER : B ?

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**ANSWER : A**

