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2.

SHORT ESSAYS

Rajiv Gandhi University of Health Sciences, Karnataka

MBBS Phase - III (PART I) CBME Degree Examination - 15-Apr-2025

Time: Three Hours Max. Marks: 100 Marks

OPHTHALMOLOGY - (RS-4) QP CODE : 1033 (QP contains two pages)

Your answers should be specific to the questions asked Draw neat, labeled diagrams wherever necessary

LONG ESSAYS 2 x 10 = 20 Marks

 A 30 yrs old male, fruit seller by occupation complains of gradually progressive painless loss of vision in right eye from past 6 months. On Examination his vision in Right eye is 6/18 with a fleshy growth in conjunctiva encroaching upon cornea on the Nasal side. What is the most likely diagnosis? Describe the clinical features of this condition. Describe in detail the various treatment options available for this condition?

Describe the etiology, stages, clinical features and management of Bacterial corneal ulcer.

3. A 60 yr old male known poorly controlled Diabetic and Hypertensive complains of painless drooping of left upper eye lid of sudden onset with limitation of ocular movements except Abduction. What is the most probable diagnosis? How do you investigate and manage this case?

- 4. Classification of Astigmatism and its treatment options?
- 5. A 45 yr old female complains of constant watering of left eye associated with discharge from Left eye with mild congestion around the inner canthus which exacerbates during common cold. She complains of swelling around the inner canthus area. What is the probable diagnosis and how will you manage this condition?
- Discuss the etiological classification and management of Dry eye syndrome.
- 7. Clinical features and management of Non granulomatous Iridocyclitis
- 8. Describe the clinical features and management of acute congestive Glaucoma?
- Types of Entropion and its complications.
- Describe the first aid management of a patient with chemical injury of the eye.

SHORT ANSWERS 10 x 3 = 30 Marks

- Define Trichiasis. Enumerate the causes
- Second sight in Ophthalmology
- Causes of Neovascular glaucoma
- Signs of Horners syndrome
- Describe the action and nerve supply of Superior Oblique muscle
- Uses of cycloplegics in Ophthalmic conditions
- Episceritis
- Clinical Signs of Blunt injury
- Enumerate the causes of Corneal blindness in India
- 20. Argyl Robertson Pupil



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8 x 5 = 40 Marks



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Multiple Choice Questions

10 x 1 = 10 Marks

- The characteristic finding of Hypermature senile cataract
 - A. Visual acuity of 6/60
 - B. Liquefaction of the cortical matter
 - C. Coloured halos
 - D. Posterior sub capsular opacification
- Salmon patch appearance is a characteristic finding in
 - A. Neurotrophic keratitis
 - B. Exposure keratitis
 - C. Interstitial keratitis
 - D. Acanthamoeba Keratitis
- 21 iii) The best treatment option for a 60 year old patient with Aphakia who is Pseudophakic in the other eye is
 - A. Secondary Intra Ocular Lens implantation
 - B. Scleral contact Lenses
 - C. Radial keratotomy
 - D. Aphakic Glasses
- 21 iv) Heterochromia of Iris is
 - A. Absence of Iris
 - B. Multiple Iris
 - C. Eccentrically placed Iris
 - Change in the colour of Iris one from the Other
- Which anti glaucoma medication is contraindicated in patients with Bronchial asthma
 - A. Latanoprost
 - B. Timolol
 - C. Mannitol
 - D. Dorzolamide
- 22 i) The most common primary intraocular tumour in adult is?
 - A. Retinoblastoma
 - B. Squmaous cell carcinoma
 - C. Choroidal Melanoma
 - D. Astrocytoma
- 22 ii) Which of the following is used for intermediate method for storage of donor cornea
 - A. Optisol GS
 - B. Nutrient agar
 - C. Cryopreservation
 - D. Organ culture method
- 22 iii) Risk factors for primary open angle Glaucoma are all except
 - A. Family history of Glaucoma
 - B. High myopia
 - C. Hypertension
 - D. Young age
- 22 iv) All of the following are needed for corneal transparency except
 - A. Absence of blood supply
 - B. Absence of nerve supply
 - C. Arrangement of stromal lamellae
 - D. Endothelial pump
- Drug of choice for treatment of Fungal corneal ulcer is
 - A. Amphotericin B
 - B. Natamycin
 - C. Bleomycin
 - D. Neomycin

