

MBBS III (Third) Professional Part-1 Examination 2018-19

Course Code:MBS302 Paper ID: 03118303

Ophthalmology

Time: 2 Hours 40 Minutes Max Marks: 30

Note: Attempt all questions. Draw proper diagrams to support your answer.

Part 'B'

- 1. Describe the symptoms and signs in a patient with attack of acute angle closure glaucoma. Enumerate the principles in its management.
- Enumerate the signs of mature senile cataract. Describe in 2. brief the management of it.
- Write short notes on followings:

(8x2=16)

- Vision 2020
- Vernal Kerato conjunctivitis (VKC)

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Student's Signature												Invigilator's Sign	ature		
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Course Code:MBS302												Pap	Paper ID: 0311830.		
												Ophthalmology			

Part 'A'

Time: 20 Minutes Max Marks: 10

Note: 1. Attempt all questions and return this part of the question paper to the invigilator after 20 Minutes.

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- Please tick (v) correct one only. Cutting, overwriting or any other marking are not allowed.
 For answering please use Ball- pen only.





Ciliary body, Scleral spur, Trabecular meshwork, Schwalbe's line

In management of acute irido cyclitis which of the following medications you will NOT 0.2

use:

Pilocarpine

b) Atropine

c) Prednisolone

d) None of the above

Q.3 Topical carbonic anhydrase inhibitor is:

Acetazolamide

b)

Bimatoprost Brimonidine c)

Brinzolamide d)

Q.4 Convex lenses are used in all EXCEPT:

Indirect ophthalmoscopy

b) Hypermetropia

Simple myopia c)

Aphakia d)

0.5 Uncrossed diplopia occurs in:

a) Exotropia

Esotropia b)

Hypertropia c)

d) Alternative fixation

Color blindness in Protanopia is for which 0.6 color:

> Red a)

b) Green

c) Blue

Red + green +blue d)

Q.7 Soemmering's ring is seen after:

Glaucoma surgery

b) Extra capsular cataract extraction (ECCE)

Intra capsular cataract extraction c) (ICCE)

Blunt Ocular trauma

Definitive management of buphthalmic 0.8 patient is:

Iridocyclitis

d) Cataract removal

Q.17 Exentration of eye means:

Removal all ocular contents leaving a)

the sclera

Removal of whole globe b)

Removing whole globe along with orbital periosteum c)

d) Removal of crystalline lens

Q.18 Entropion is:

Rolling of eyelid margin inward a)

b) Rolling of eyelid margin outward

Irregular direction of eye lashes

d) Additional row of eyelashes

Lateral Rectus muscle is supplied by: Q.19

3rd Cranial Nerve a)

b) 4th Cranial Nerve 5th Cranial Nerve

6th Cranial Nerve d)

www.FirstRanker.com Extra ocular muscles are developed from:

Neural ectoderm

b) Surface ectoderm Endoderm

c) Mesoderm

d)

Immature cataract www.FirstRanker.com

d) After cataract

a)

Iris shadow is usually seen in

Q.10 Keratic precipitates are seen in:

PTO

Acute iridocyclitis a)

b) Acute congestive glaucoma c) Conjunctivitis

d) Cataract

Q.11 Intorsion is caused by the action of:

Superior rectus

b) Inferior rectus

Lateral rectus c) Medial rectus d)

Q.12 Bilateral temporal hemianopia is seen in:

a) Glaucoma

Pituitary tumour b)

Age Related Macular Degeneration c)

Occipital cortex lesion

Q.13 Painless progressive diminution of vision is seen in all EXCEPT:

Senile cataract

b) Primary open angle glaucoma

c) Iridocyclitis

Retinitis pigmentosa d)

Q.14 Couching was used in management of:

Glaucoma

b) Cataract

Iridocyclitis c)

Endophthalmitis d)

Q.15 Increased cup to disc ratio (C:D ratio) is usually seen in:

Optic neuritis

Papiledema b)

Glaucoma c)

Age related macular degeneration

Q.16 Descemetocele is usually seen after:

Sloughed corneal ulcer

Corneal edema