

Q.P. Code: 319001

Reg. no.:

Third Professional MBBS Part II Degree Supplementary Examinations

October 2025

Ophthalmology

(2019 Scheme)

Time: 3 Hours

Total Marks: 100

- Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers
- Indicate the question number correctly for the answer in the margin space
- Answer all parts of a single question together • Leave sufficient space between answers
- Draw table/diagrams/flow charts wherever necessary

1. Multiple Choice Questions

(20x1=20)

The responses for MCQ questions (Q.No. i to Q.No. xx) shall be written in the space provided for answering MCQ questions at page No. 51 of the answer book (the inner portion of the back cover page (PART III)). Responses for MCQs marked in any other part/page of the answer book will not be valued

Question Numbers i - v are case scenario-based questions.

A 35 year old male patient complaints of pain, redness, watering and decreased vision in his right eye for 5 days following trauma to his eye by the tail of a cow. On examination he was found to have a white corneal lesion and visual acuity of counting finger at one meter distance in that eye. His left eye was normal

- What is the most likely diagnosis in this patient
 - Acute angle-closure glaucoma
 - Viral keratitis
 - Fungal keratitis
 - Endophthalmitis
- Which of the following is the most common causative organism following trauma with vegetative material
 - Aspergillus
 - Candida albicans
 - Staphylococcus aureus
 - Pseudomonas aeruginosa
- What is the best diagnostic test
 - Fluorescein stain
 - Corneal scraping with KOH mount
 - B-scan ultrasonography
 - Schirmer's test
- Which of the following is the most appropriate first-line treatment
 - Natamycin 5% eye drops
 - Ciprofloxacin 0.3% eye drops
 - Acyclovir 3% eye ointment
 - Prednisolone acetate 1% eye drops
- Which of the following factors predisposes the patient
 - Trauma with vegetative material
 - Chronic use of antihypertensives
 - Long-standing use of Anti glaucoma medication
 - Swimming in contaminated water

For questions vi - x, there are two statements marked as Assertion (A) and Reason (R). Mark your answers as per the options provided:

- Both A & R are correct and R is the reason for A
- Both A & R are correct but R is not the reason for A
- A is incorrect and R is correct
- A is correct and R is incorrect

- Assertion:** Angle-closure glaucoma is more common in hypermetropic eyes.
Reason: Hypermetropic eyes have a shallow anterior chamber.
- Assertion:** Diabetic retinopathy is a leading cause of blindness in adults.
Reason: Prolonged hyperglycemia causes microvascular damage in the retina.
- Assertion:** In myopia, the image is focused behind the retina.
Reason: Myopia is caused by an increase in axial length of the eyeball.
- Assertion:** Keratoconus is characterized by thinning of the central cornea.
Reason: The condition leads to irregular astigmatism and visual distortion.
- Assertion:** Conjunctivitis is a painless condition.
Reason: Conjunctivitis involves inflammation of the cornea.

Question numbers xi-xv are multiple-response type questions. Read the statements & mark the answers appropriately.

- Which of the following are features of acute anterior uveitis
 - Ciliary congestion
 - Photophobia
 - Shallow anterior chamber
 - Mutton fat keratic precipitates
 - 1, 2, 4
 - 1, 4
 - 2, 3, 4
 - 1, 2

(PTO)

- xii. Which of the following are true regarding diabetic retinopathy
 1) Microaneurysms are the earliest clinical finding
 2) Hard exudates are caused by leakage of lipoproteins
 3) Neovascularization is a feature of non-proliferative diabetic retinopathy
 4) Vitreous hemorrhage may occur in proliferative diabetic retinopathy
 a) 1, 3 b) 1, 2, 4 c) 3, 4 d) 2, 3, 4
- xiii. Which of the following drugs are used in the treatment of glaucoma
 1) Timolol 2) Acetazolamide 3) Atropine 4) Latanoprost
 a) 1, 4 b) 1, 2 c) 1, 3 d) 1, 2, 4
- xiv. Which of the following are true regarding keratoconus
 1) It is characterized by thinning of the cornea 2) Fleischer's ring is seen around the limbus
 3) It leads to irregular astigmatism 4) Munson's sign is a clinical finding
 a) 1, 3, 4 b) 2, 4 c) 2, 3, 4 d) All
- xv. Which of the following are risk factors for retinal vein occlusion
 1) Hypertension 2) Diabetes mellitus 3) Glaucoma 4) Age less than 20 years
 a) 1, 2 b) 1, 2, 3 c) 2, 4 d) All

Question numbers xvi-xx are single-response type questions

- xvi. SAFE' strategy is used for control of
 a) Viral keratitis c) Vitamin A deficiency
 b) Trachoma d) Vernal keratoconjunctivitis
- xvii. A boy has a history of watering from his left eye since birth. He was diagnosed to have congenital nasolacrimal duct obstruction. Already two sittings of probing are done for him, which has failed. Optimum age for performing dacryocystorhinostomy operation for this child is
 a) 1 year b) 2 year c) 4 year d) 8 year
- xviii. The type of optic atrophy seen in Retinitis pigmentosa is
 a) Secondary optic atrophy c) Glaucomatous optic atrophy
 b) Consecutive optic atrophy d) Segmental optic atrophy
- xix. Toxic amblyopia is caused by:
 a) Propranolol b) Loteprednol c) Ethambutol d) Paracetamol
- xx. Which of the following is the first-line treatment for acute primary angle-closure glaucoma
 a) Prostaglandin analog c) Beta-blockers
 b) Laser peripheral iridotomy d) Hyperosmotic agents

Long Essays:

(2x10=20)

2. A 50-year-old female presents with a gradual, painless loss of vision in both eyes over the past two years. She reports difficulty reading and recognizes faces only when close. On examination, her visual acuity is 6/36 in both eyes, and a slit-lamp examination reveals lens opacities.
 a) What is the most probable diagnosis.
 b) Mention two differential diagnoses.
 c) How will you confirm the diagnosis
 d) Describe the treatment options and the role of preoperative counseling. **(1+2+3+4)**
3. Classification, clinical features and treatment of Diabetic Retinopathy. **(6x6=36)**

Short Essays:

4. Papilledema.
 5. Paralytic Squint.
 6. Orbital Cellulitis.
 7. Complications and Sequelae of Anterior Uveitis.
 8. Explain stages of maturation of cortical type of Cataract.
 9. NPCB.

Short Answers:

(6x4=24)

10. Draw cross section of eye lid.
 11. Contraindication to eye donation.
 12. Enucleation and its indications.
 13. Functions of eye bank.
 14. Tonometry.
 15. Stages of acute dacrocystitis.
