

MCQs

- Write your Roll No. on Scoring sheet & Question Paper.
- Select the best answer from given choices by filling the circle in Scoring sheet as ●

Time: 90 min

Marks: 90

1. A 16-year-old contact lens wearer since last 1 year, presents to your clinic with pain, lacrimation, and foreign body sensation in both eyes. On examination, there is papillary conjunctivitis. What is the most probable diagnosis?
 - a. Bacterial keratitis
 - b. Corneal foreign body
 - c. Acute congestive glaucoma
 - d. Giant papillary conjunctivitis
 - e. Blepharitis
2. A 25 yrs old male presents to eye clinic with corneal opacity in right eye. He gives a history of trauma in this eye followed by corneal repair. There is no fluorescein staining. You note a dense corneal scar with incarceration of iris in it and call it as
 - a. Corneal ulcer
 - b. Adherent leucoma
 - c. Staphyloma
 - d. Scleritis
 - e. Conjunctival mass
3. 8 years old child brought by his parents with chief complaints of mucopurulent discharge, redness and swelling of both eyes for the last two months. On examination there are follicles on the upper tarsal conjunctiva and superior corneal pannus. Which one is the most probable diagnosis?
 - a. Allergic conjunctivitis
 - b. Chronic bacterial conjunctivitis.
 - c. Ligneous Conjunctivitis
 - d. Trachoma
 - e. Viral conjunctivitis
4. A 56 yr. old female presenting to eye clinic with scleritis in both eyes for last 5 years. She also has keratoconjunctivitis sicca (KCS) and peripheral ulcerative keratitis in both eyes. she has been taking some steroids and immunomodulator therapy. What systemic disease she might be having?
 - a. Toxoplasmosis
 - b. Lymphoma
 - c. Rheumatoid arthritis
 - d. Sarcoidosis
 - e. Tuberculosis
5. A 25-year female presented to the eye OPD with history of sudden loss of vision in her right eye. On examination her VA is 6/60 in the effected eye and there is relative afferent papillary defect and defective color vision with normal fundus. What is your diagnosis?
 - a. Amblyopia
 - b. Anterior ischemic optic neuropathy.
 - c. Leber hereditary optic neuropathy
 - d. Retrobulbar optic neuritis.
 - e. Toxic optic neuropathy
6. A 50 yr old female presented to eye OPD with symptoms of redness pain and discomfort in left eye. There is a nodule beneath the conjunctiva in the interpalpebral zone with associated engorged blood vessels. To differentiate whether it is scleritis or episcleritis, you will do?
 - a. Visual acuity testing
 - b. Visual field testing
 - c. Intraocular pressure check
 - d. Extraocular movements
 - e. Phenylephrine test
7. A 30 years old male with high myopia comes to the eye OPD with a 2 weeks history of photopsia, decrease vision and floaters in his left eye. On examination his VA is CF and there is relative afferent pupillary defect and tobacco dust in the vitreous. Which on e of the following is the most accurate diagnosis?
 - a. Choroidal detachment
 - b. Exudative Retinal Detachment
 - c. Rhegmatogenous Retinal Detachment
 - d. Retinoschisis.
 - e. Tractional Retinal Detachment
8. A 40-year-old female comes to the eye OPD with prominent eyes, grittiness and foreign body sensations in her both eyes for the last 6 months. On examination there is bilateral asymmetrical axial proptosis with lid retraction and lid lag. CT-Scan shows enlargement of recti muscles. Which is the most probable diagnosis?
 - a. Cavernous hemangioma
 - b. Orbital pseudo-tumor
 - c. Orbital cellulitis.
 - d. Optic nerve meningioma
 - e. Thyroid eye disease.

9. A 35 yrs. old male presents to eye clinic with symptoms of redness and discomfort in right eye. On examination you find pterygium. You have advised him surgery because it has caused?
- Retinal detachment
 - Cataract
 - Astigmatism
 - Optic neuritis
 - Macular degeneration
10. A 7-year-old child is brought by his mother with leuco-coria in his right eye for the last one month. According to the mother there is a history of long contacts with puppies. What is your most probable diagnosis?
- Congenital cataract
 - Persistent primary hyperplastic vitreous.
 - Retinoblastoma
 - Retinopathy of prematurity
 - Toxocara granuloma
11. Parents bring their 2 yrs. old child to an ophthalmologist, who diagnosed him as a case of congenital glaucoma/Buphthalmos. What is the corneal feature suggestive of Buphthalmos?
- Increased Intraocular pressure.
 - Optic disc cupping
 - Large corneal diameters
 - Cataract
 - Pterygium
12. A 25 year old male comes to the clinic with a 3 months history of painless swelling on his right upper lid. On examination there is posterior blepharitis and a smooth rounded nodule slightly away from the lid margin. What is your most probable diagnosis?
- Chalazion.
 - Dermoid
 - Haemangioma
 - Papilloma
 - Sebaceous cyst
13. An ophthalmologist examined a 25 yr old man with signs and symptoms of corneal ulcer in his right eye. He is a known myope. He gives history of smoking and had been wearing contact lens in the recent past. What is the risk factor for development of corneal ulcer in this case?
- Male gender
 - Young age
 - Contact lens
 - Smoking
 - Myopia
14. A 60-year-old female comes to you with severe pain and visual loss in her left eye for the last 2 days. On examination there is corneal edema and shallow anterior chamber with raised IOP. She was diagnosed as acute angle closure glaucoma. What is the best treatment option?
- Anti-glaucoma, miotics and steroids.
 - Anti-glaucoma, cycloplegics and steroids.
 - Anti-glaucoma, miotics and antibiotics
 - Anti-glaucoma and antibiotics
 - Miotics and antibiotics.
15. A 70 years male comes to the eye department with a visual loss in his right eye. On examination his vision was reduced to no light perception with afferent papillary defect. Fundus shows diffuse retinal edema and cherry red spot at macula. What is the most probable diagnosis?
- Anterior ischemic optic neuropathy.
 - Central retinal vein occlusion.
 - Central retinal artery occlusion
 - Nutritional optic neuropathy
 - Optic neuritis.
16. Regarding human eye: -
- All refractive errors are corrected to 6/6 with a pin hole.
 - Astigmatism is corrected with plus lens in the prescription.
 - In an uncorrected hypermetropia the image falls behind the retina
 - In myopia (uncorrected) the image falls behind the retina
 - Minus lens is used to correct astigmatism
17. Orbital Cellulitis: -
- Does not cause motility disturbance.
 - Frequently causes intracranial infection in children.
 - Gentamycin is an appropriate antibiotic.
 - Is most frequently caused by sinus infection?
 - Is usually not accompanied by fever.
18. Sub conjunctival hemorrhage is a typical feature of:
- Allergic conjunctivitis
 - Corneal ulcer
 - Fungal Keratitis
 - Ophthalmia neonatorum
 - Subarachnoid hemorrhage
19. Relative Afferent Pupillary Defect (RAPD) is seen in :-
- A mature cataract
 - Hypertensive retinopathy
 - Retinal detachment
 - Viral Keratitis
 - Vitamin A deficiency

Insertion of inferior oblique is immediately adjacent to:-

- a. Lacrimal Sac
- b. Macula
- c. Nasolacrimal duct
- d. Optic foramen
- e. Superior orbital fissure

b

21. A young boy presents with itching, watering, and redness in both his eyes. It recurs every summer season. On examination, there are cobble stone papillae on palpebral conjunctiva. What is the most likely diagnosis?

- a. Bacterial conjunctivitis
- b. Viral conjunctivitis
- c. Vernal conjunctivitis
- d. Trachoma
- e. Cicatricial conjunctivitis

c

22. Axial Proptosis occurs in

- a. Frontal Mucocele
- b. Lacrimal gland tumors
- c. Maxillary carcinoma
- d. Orbital floor fracture
- e. Thyroid Ophthalmopathy

e

23. An 80 years old female complains of recent problems with reading vision, specifically words appearing distorted and blank patches being present. The most probable cause is:-

- a. Acute angle closure Glaucoma
- b. Age-related macular degeneration
- c. Anterior ischemic optic neuropathy
- d. Cataract
- e. Central retinal artery occlusion

b

24. The following ocular investigation has a risk of anaphylactic shock.

- a. B/Scan
- b. Biometry
- c. FFA
- d. HRT
- e. OCT

c

25. The test used to calculate the power of intraocular lens prior to cataract surgery is

- a. B /Scan
- b. Biometry
- c. FFA
- d. HRT
- e. OCT

b

26. A fit 48 years old woman complains of a very severe headache and droopy left upper lid, she gets double vision when she lifts up her eye lid. The diagnosis is

- a. Fifth cranial nerve palsy
- b. Fourth cranial nerve palsy
- c. Seventh cranial nerve palsy
- d. Sixth cranial nerve palsy
- e. Third cranial nerve palsy

e

27. The retina in case of dense cataract can be assessed best by:

- a. B-Scan
- b. CT Scan orbit
- c. FFA
- d. MRI Scan
- e. Retinoscopy

a

28. Lid retraction is a characteristic sign of

- a. Acute facial nerve palsy
- b. Myasthenia gravis
- c. Myotonic dystrophy
- d. Third nerve palsy
- e. Thyrotoxicosis

e

29. Major cause of world blindness is

- a. Cataract
- b. Diabetic retinopathy
- c. Glaucoma
- d. Onchocerciasis
- e. Trachoma

a

30. Following drugs are used as anti-glaucoma except.

- a. Dipivefrin
- b. Latanoprost
- c. Pilocarpine
- d. Timolol
- e. Tropicamid

e

Cherry red spot in the macular area of the retina is seen in:-

- a. Age related macular degeneration
- b. Central chorio-retinitis
- c. Central retinal artery occlusion
- d. Central retinal vein occlusion
- e. Central serous retinopathy

c

32. All of the following are causes of leuco-coria except
- a. Buphthalmos
 - b. Coats disease
 - c. Congenital cataract
 - d. Persistent hyper-plastic primary vitreous
 - e. Retinopathy of prematurity
33. The following Laser is used for posterior capsulotomy in posterior capsular opacification.
- a. Argon laser
 - b. Carbon dioxide laser
 - c. Diode laser
 - d. Excimer laser
 - e. YAG laser
34. Unilateral aphakia when the other eye is normal, is best corrected by any of the following except:
- a. Anterior chamber intraocular lens
 - b. Contact lens
 - c. Epikeratophakia
 - d. Glasses
 - e. Posterior chamber intraocular lens
35. Phacolytic glaucoma is best treated by:
- a. Cataract extraction
 - b. Cyclo-destructive procedure
 - c. Diode laser Cycloablation
 - d. Fistulizing operation
 - e. Miotics and Beta blockers
36. The best Optical management for Aphakia is
- a. Anterior chamber IOL
 - b. Contact lens
 - c. Excimer laser
 - d. Posterior chamber IOL
 - e. Spectacles
37. Following usually cause complicated cataract, except:
- a. Disciform Keratitis
 - b. Iridocyclitis
 - c. Retinitis pigmentosa
 - d. Retinal detachment
 - e. Scleritis
38. Cylindrical lenses are used in the treatment of:
- a. Aphakia
 - b. Astigmatism
 - c. Hypermetropia
 - d. Myopia
 - e. Presbyopia
39. Most common cause of adult unilateral proptosis is?
- a. Inflammation
 - b. Lymphoma
 - c. Meningioma
 - d. Metastasis
 - e. Thyroid orbitopathy
40. Ultrasonography is helpful in confirming the diagnosis of:
- a. Central retinal artery occlusion
 - b. Central retinal vein occlusion
 - c. Retinitis pigmentosa
 - d. Subluxated clear crystalline lens
 - e. Thyroid Ophthalmopathy
41. The first line of treatment in chemical injury is
- a. Oral analgesia
 - b. Saline Irrigation
 - c. Topical antibiotics
 - d. Topical cycloplegia
 - e. Topical Steroid
42. In blow out fracture the commonest bone to fracture is
- a. Ethmoidal (medial wall)
 - b. Frontal (roof)
 - c. Lacrimal (medial wall)
 - d. Maxillary (floor)
 - e. Zygomatic (lateral wall)
43. The commonest painless lid swelling is
- a. Chalazion
 - b. Cyst of Moll
 - c. Cyst of Zeis
 - d. Externa Hardeolum
 - e. Internal Hardeolum
44. The commonest cause of cataract is;
- a. Diabetes
 - b. Hypo-parathyroidism
 - c. Old age
 - d. TORCH infections
 - e. Trauma

tion to High IOP and High vertical cup-disc ratio, risk factors for POAG include all of the following except

- a. Black race c
 - b. Family history
 - c. Hypermetropia
 - d. Increasing age
 - e. Myopia
46. The earliest visual field defect in POAG is
- a. Arcuate scotoma.
 - b. Bjerrums scotoma
 - c. Central Scotoma
 - d. Centro-cecal scotoma e
 - e. Isolated paracentral scotoma
47. In myopia, which one is true
- a. The radius of Corneal curvature is less.
 - b. The radius of Corneal curvature is more. b
 - c. Lens is less spherical.
 - d. Length of eyeball is short.
 - e. Patient can see far objects clearly when he exerts accommodation.
48. Symptoms of cataract include all the following except:
- a. Color vision defects a
 - b. Decreased vision in bright light
 - c. Decreased vision in low illumination
 - d. Glare
 - e. Haloes
49. WHO grading of trachoma includes all except
- a. TF follicles
 - b. TI inflammation
 - c. TS scarring e
 - d. TT trichiasis
 - e. TP pannus
50. Complications of contact lenses include all the following except
- a. Allergy
 - b. Corneal infiltrates
 - c. Corneal pigmentation
 - d. Corneal ulcer c
 - e. Giant papillary conjunctivitis
51. Pupil in acute anterior uveitis is
- a. Dilated and irregular with good reaction.
 - b. Dilated and regular with poor reaction
 - c. Mid-dilated and oval with poor reaction
 - d. Miosed and irregular with poor reaction d
 - e. Miosed and regular with poor reaction
52. When the eye is medially rotated, the prime depressor muscle of eyeball
- a. Inferior rectus
 - b. Inferior oblique
 - c. Inferior rectus and inferior oblique
 - d. Lateral rectus
 - e. Superior oblique e
53. Radioscopy is done for Examination of
- a. Axial length of eye
 - b. Optic nerve
 - c. Refractive power of eye c
 - d. Retina
 - e. the Fundus
54. Which of the following ocular structures produces mucin, which contributes to the stabilization of the tear film?
- a. Conjunctival epithelium a
 - b. Glands of Zeiss
 - c. Meibomian glands
 - d. Glands of Moll
 - e. Glans of Wolfring
55. Which one of the following is used to stain dead and devitalized tissues?
- a. Fluorescein stain
 - b. Rose Bengal stain
 - c. Indo-cyanine green
 - d. Methylene blue d
 - e. Hematoxylin
56. Which one of the following organisms is able to penetrate intact corneal epithelium?
- a. Staphylococcus aureus
 - b. Streptococcus pneumoniae
 - c. Streptococcus pyogens
 - d. Neisseria gonorrhoea d
 - e. Staphylococcus epidermidus
57. All of the following are used as objective tests in the diagnosis of squint except.
- a. Hirschberg Test
 - b. Maddox rod
 - c. Maddox wing
 - d. Synaptophore
 - e. Maddox tangent e

58. Parents brought 2-years old child to OPD, they are very concerned about esotropia of their child. What is the most important first step in the management of this child?

- a. Observation only
 - b. Cycloplegic refraction
 - c. Squint surgery
 - d. Amblyopic treatment
 - e. Prescription of prisms
- b not sure

59. Which statement about the inferior rectus muscle is not true?

- a. It is rarely involved in thyroid myopathy
 - b. It is connected to lower lid by Lockwood's ligament
 - c. It's actions are depression, extorsion and adduction
 - d. It runs between the globe and inferior oblique muscle
 - e. It's yoke muscle is the superior oblique
- b
a is also correct its commonly involved

60. All the following are true complications of strabismus surgery except

- a. The most common complication is unsatisfactory alignment
 - b. Diplopia after surgery is common if there is under correction
 - c. Perforation of sclera is rarely followed by serious complications
 - d. Anterior segment ischemia can occur after surgery on 3 recti muscles.
 - e. Pyogenic granuloma can occur at conjunctival suture site.
- e

61. All the following are the features of hereditary Retinoblastoma except

- a. It's usually multifocal
 - b. Accounts about 40% of all cases
 - c. Presents earlier
 - d. Chromosomal anomaly is germ line mutation
 - e. Chromosomal anomaly is somatic mutation
- e

62. Which one of the following is the most common presentation of retinoblastoma?

- a. Strabismus
 - b. Anterior uveitis
 - c. Leukocoria
 - d. Secondary glaucoma
 - e. Metastasis
- c

63. Which one of the following is the most common tumor found on the lower lid?

- a. Squamous cell carcinoma
 - b. Basal cell carcinoma
 - c. Malignant Melanoma
 - d. Capillary hemangioma
 - e. Sebaceous cell carcinoma
- b

64. Which one of the following is the best indicator for enucleation in a patient with retinoblastoma?

- a. Tumor involving > 50% of the globe
 - b. Orbital or optic nerve involvement
 - c. Anterior segment involvement
 - d. Neovascular glaucoma
 - e. All of the above
- b

65. Which one of the following is best procedure in the management of the lid tumor removal, to preserve normal lid tissue?

- a. Radiotherapy
 - b. Chemotherapy
 - c. Surgical excision with 2mm normal lid margins
 - d. Moh's microsurgical procedure
 - e. None of the above
- c

66. The most common systemic disease associated with optic neuritis is which one of the following?

- a. Multiple Myeloma
 - b. Multiple sclerosis
 - c. Herpes simplex
 - d. Chicken pox
 - e. Rubella
- b

67. A 36 young male is diagnosed with grade three pterygium, which one of the following is the best treatment option for this patient?

- a. Simple excision
 - b. Excision along with 5 FFU drops
 - c. Excision along with MMC drops
 - d. Excision along stem cell graft
 - e. All of the above
- c

68. Majority of the Posterior Vitreous Detachment patients present with which one of the following scenarios.

- a. Retinal detachment (RD)
 - b. Retinal tear
 - c. Vitreous hemorrhage
 - d. Without any sequelae
 - e. Vitreous hemorrhage with RD
- e

69. Retinal detachment (RD) which is characterized by presence of retinal break held open by vitreoretinal traction that allows accumulation of liquefied vitreous under NSR separating it from RPE, is referred as which one of the following types?

- a. Tractional Retinal Detachment (RD)
 - b. Rhegmatogenous RD
 - c. Traumatic RD
 - d. Exudative RD
 - e. None of the above
- b

- contact area of Goldman prism to corneal surface is
- 0.06 mm
 - 1.06 mm
 - 2.06 mm
 - 3.06 mm
 - 4.06 m
71. Maddox wing is used for diagnosis of
- Near esophoria / exophoria
 - Distant exophoria / exotropia
 - Esotropia
 - Exotropia
 - Hypertropia
72. Distance of Snellen chart from patient while testing for visual acuity is
- 5 meter
 - 6 feet
 - 6 meter
 - 10 meter
 - 20 meter
73. Synoptophore is used for all the following except?
- Color blindness
 - Depth perception
 - Abnormal retinal correspondence
 - Esotropia
 - Exotropia
74. Angle subtended by the letters of Snellen acuity chart at the nodal point of the eye is equal to;
- 5 min/ arc
 - 4 min/ arc
 - 3 min/ arc
 - 2 min/ arc
 - 1 min/ arc
75. A 65 years old lady with a history of Diabetes Mellitus for last 15-years, presented with sudden loss of vision in her Right Eye. On examination visual acuity in Right Eye was hand movements and Left Eye 6/12. Her both pupils were reactive to light. Anterior segment of both eyes was normal. Her right Fundus was not visible while her left fundus showed signs of Proliferative Diabetic Retinopathy. The most likely cause for her visual loss in the right eye is;
- Central Retinal Artery Occlusion
 - Central Retinal Vein Occlusion
 - Vitreous hemorrhage
 - Retrolbulbar Optic Neuritis
 - Retinal Detachment
76. A 70-years old man presented to OPD with a sudden loss of vision in his left eye. He has been suffering from Hypertension and also from Chronic Open Angle Glaucoma. On Examination he has visual acuity of 6/18 in his right eye and Hand movements in his left eye. On examination of Fundus, his right eye showed early hypertensive retinopathy with 0.7 cup/disc ratio. His left fundus showed dilated and tortuous blood vessels with widespread hemorrhages and cotton wool spots with blurred optic disc margins. The most probable diagnosis is
- Central Retinal Artery Occlusion
 - Central Retinal Vein Occlusion
 - Diabetic Retinopathy
 - Hypertensive Retinopathy
 - Retinal Detachment
77. A patient presents postoperative day 1 with an IOP of 4 mmHg, shallow anterior chamber and a large diffuse bleb that is Seidel negative. Posterior examination is normal. The likely process for the low Intraocular pressure is:
- Over-filtration
 - Bleb leak
 - Choroidal effusion
 - Aqueous misdirection
 - Aqueous suppression
78. According to the International Council of Ophthalmology (ICO), a patient with moderate, non-proliferative DR with central-involved DME should be re-examined in how long?
- 12 months
 - 9 months
 - 6 months
 - 3 months
 - 1 month
79. Which of the following is the most common cause of severe vision loss related to proliferative disease in DR?
- Cataract and neovascular glaucoma
 - Preretinal/vitreous hemorrhages and tractional retinal detachments
 - Rhegmatogenous retinal detachment and preretinal/vitreous hemorrhages
 - Neovascular glaucoma and tractional retinal detachments
 - Macular edema and neo-vascular glaucoma
- Which of the following is the most sensitive for assessing presence and severity of diabetic macular edema (DME)?
- Fluorescein angiography (FA)
 - Ocular coherence tomography (OCT)
 - Slit lamp fundus examination.
 - Fundus photographs
 - Fundus examination with ophthalmoscope

81. Which of the following grading levels for diabetic retinopathy (DR) is associated with the presence of diabetic macular edema (DME)?
- Mild, non-proliferative DR
 - Proliferative DR
 - Severe, non-proliferative DR
 - Severe Proliferative Diabetic retinopathy
 - DME can be present in any level of DR
82. Which of the following is a proper indication for laser pan retinal photocoagulation treatment?
- Patients with severe non-proliferative diabetic retinopathy and poor compliance with follow-up
 - Patients with moderate non-proliferative diabetic retinopathy and center involved macular edema.
 - Anterior segment neovascularization in patient with white cataract
 - Patient with combined tractional and rhegmatogenous retinal detachment
 - Diabetic Macular Edema
83. A 50-year-old diabetic patient presents to you. He has decreased vision in the right eye for the last 1 yr. on examination his lens is clear, and you can't see fundus due to vitreous hemorrhage. What will be the best treatment option in this case?
- Cataract surgery
 - Glaucoma surgery
 - Laser
 - Pars plana vitrectomy
 - No treatment
84. A 32 yr old female has variable ptosis in both her eyes with complains of diplopia as well. She reports generalized fatigability as well. The symptoms get worse in the evening. What would you suspect in this case?
- Congenital ptosis
 - Multiple sclerosis
 - Myasthenia gravis
 - Thyroid eye disease
 - Third nerve palsy
85. A 20 yr old male presented to your clinic with decreased vision at night. On examination you saw a relatively pale disc, vascular attenuation, and bone spicule type pigmentation in the fundus. You will make a diagnosis
- Central serous chorioretinopathy
 - Posterior uveitis
 - Toxoplasmosis
 - Retinitis pigmentosa
 - Retinal detachment
86. A 2 Year boy presented with right Retinoblastoma on examination there is total retinal detachment and proptosis with left normal eye findings best treatment for right eye is
- Photocoagulation therapy
 - Cryofreez therapy
 - Enucleation
 - Brachytherapy
 - Evisceration
87. A newborn with left cystic swelling of medial canthus with bluish discoloration of overlying skin. The probable diagnosis would be.
- Dermoid cyst
 - Dacryoceles
 - Encephalocele
 - Cavernous Hemangioma
 - Capillary Hemangioma
88. A 12-year-old boy with Keratoconus, having a visual acuity of 6/12 in both eyes corrected with glasses. The Keratoconus is progressive as seen on corneal topography. The best treatment option to stop progression would be.
- Rigid contact lens
 - Spectacles
 - Keratoplasty
 - Lubricating eye drops
 - Collagen Cross linkages
89. A patient came to OPD with refraction done having +1.00 in right eye and +5.00 in left eye rest of eye examination is Normal. What type of AMBLYOPIA will patient have?
- Strabismus amblyopia
 - Anisometropic Amblyopia
 - Ametropic Amblyopia
 - Meridional Amblyopia
 - Organic Amblyopia
90. Blow out fracture characterized by:
- Proptosis
 - Enophthalmos
 - Fracture of the inferior orbital rim
 - Diplopia increased on down gaze.
 - Cataract