# OSPE/ TOACS OPHTHALMOLOGY

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Chairman
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#### Ophthalmology Subject Marks = 200

Α.	Theory		Total Marks 100
Theor	y Marks Distribution:		10 Marks
i.	Internal Evaluation		90 Marks
ii.	Paper		45 Marks
*	MCQs (45 MCQs of One Best Ty SEQs 09 SEQs to be attempted		45 Marks 05 Marks)
В.	Practical		Total Marks 100
Practi	cal Marks Distribution:		10 Marks
i. ii.	Internal Evaluation Practical		90 Marks 60 Marks
a)	OSCE Stations	***************************************	(05 marks for each OSCE Station)
	12 working stations		05 Non-interactive / Observed
	03 Rest Stations -		Rest Stations carry no marks 10 Marks (05 marks each)
b)	02 Short Cases		20 Marks
c)	01 Long Case		

### OSPE/ TOACS

- 1. Clinical Skills
- 2. Investigations
- 3. Equipments
- 4. Instruments
- 5. Clinical Scenarios
- 6. Counseling

### 1. Clinical Skills

- Ocular Movements
- Cover Un Cover Test
   Hirshburg Test
- Visual Fields
   Humphry
   Goldman
   Confrontation (Bed side)
- Pupil Examination

### 2. Investigations

- B- Scan
- O.C.T
- Visual Fields
- Biometry

### 3. Equipments

- Slit Lamp
- Direct Ophthalmoscope
- Indirect Ophthalmoscope
- Tonometer
- Lens Box

### 4. Instruments

Operating Instruments

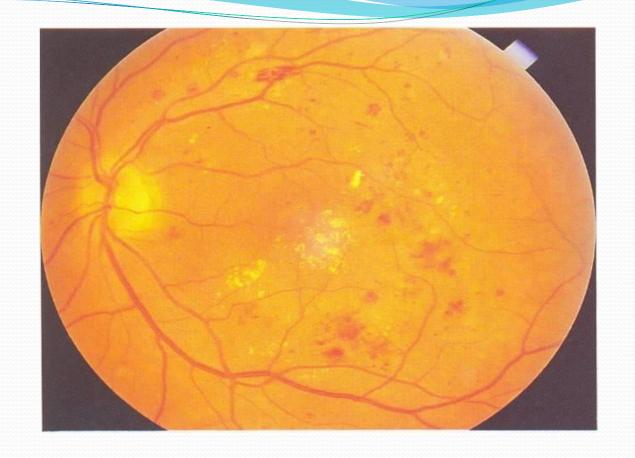
### 5. Clinical Scenarios

- Cataract
- Glaucoma
- Cornea
- Fundus
- Myopia / Hypermetropia
- Squint

### 6. Counseling

- Retinoblastoma
- Retinitis Pegmentosa
- Any Other

- Interactive /Observed
- Static



- 1. What findings are there in this fundus photograph?
- 2. What is your most probable diagnosis?
- 3. What is your differential diagnosis?
- 4. What options do we have to treat this patient?

#### STATION: DIABETIC RETINOPATHY

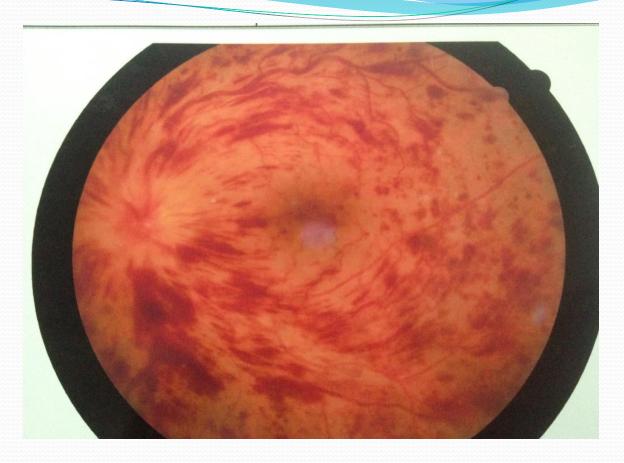
- 1. Retinal hemorrhages, Retinal exudates (Hard exudates) involving macula----- (1)
- 2. Diabetic Retinopathy(Non proliferative) with maculopathy-- (1)
- 3. Hypertensive retinopathy, CRVO, radiation retinopathy-----(1.5)
- - a) Control diabetes and systemic risk factors
  - b) Anti VEGF injections
  - c) Focal macular laser



- 1. What findings do you see in this photograph?
- 2. What is your most probable diagnosis?
- 3. Name any three types of medications (topical) are used to treat this condition?
- 4. What surgical procedure is the gold standard for treating this condition?

### STATION: OPTIC DISC CUPPING (OPEN ANGLE GLAUCOMA)

1. Optic Disc cupping	1
(Increased cup-disc ratio)	
2. Glaucoma (Open angle)	1.0
3	2 (Maximum)
i. Prostaglandin analogues	o.5/each
ii. Alpha-agonists (sympathetic) 0.5/each	
iii. B-Blockers	
iv. Para-sympathetic Pilocarpine)	
v. Carbonic anhydrase inhibitors	
4. Trabeculectomy	1



- 1. What findings can be seen in this photograph?
- 2. What is your most probable diagnosis?
- 3. What is your differential diagnosis?
- 4. What are its possible complications?

#### **STATION: CRVO**

- 2. CRVO-----1



- 1. What findings do you see in this photograph?
- 2. What are your primary concerns in this eye?
- 3. Is there any risk to the fellow eye?
- 4. How are you going to treat this eye?

#### STATION: OGI WITH UVEAL PROLAPSE

#### Key

- 1.OGI (Scleral laceration with uveal tissue prolapse and distorted pupil)-----1.5
- 2.
- a) Reduce pain------o.5/each (Max 1.5)
- b) Reduce inflammation
- c) Prevent infection
- d) Exclude IOFBs and so its related complications.
- e) Restore anatomical integrity (globe repair)
- 3. Sympathetic ophthalmia----- 1.0
- 4. Prepare for GA, Antibiotics, Anti inflammatory ----- drugs, Globe repair after excluding IOFBs ----- 1.0



- What findings do you see in this photograph?
- 2. What clinical tests/procedure you would like to perform for this patient?
- 3. What is the most common underlying cause in children for this condition?

#### **STATION: RIGHT ESOTROPIA (CHILD)**

- 1. Right convergent squint (Esotropia) -----1
- 2. -----1/each (Max 3.0)
  - a. VA check including amblyopia
  - b. Squint assessment tests (Hirshberg's, Krimsky etc)
  - c. Cycloplegic refraction
  - d. Fundoscopy
- 3. Hypermetropia-----1.0

#### STATION: DIRECT OPHTHALMOSCOPE

Command Please examine this patient's fundus with direct ophthalmoscope

1. Consent & introduction	0.5
2. Can hold and turn on correctly	0.5
3. Use his / her Rt eye, for examining Rt e	ye of the patient
	0.5
4. Perform distant direct ophthalmoscopy	/1
5. Perform fundus examination & able to	identify disc, vessels and

macula-----2.0

6. Thanks to patient -----`0.5

#### STATION PUPIL

Please perform pupil examination of this patient?

### **STATION: PUPIL**

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X			1

1. Consent & introduction0.5
2. Light reflex
a. Direct reflex1
b. Indirect light reflex1
c. Swinging light reflex1
3. Near response (reflex)1
4. Thanks to patiento.5

## Thank you