

EYE Emergencies

1- An infant who was delivered at home and received no perinatal care is brought in 12 days post-delivery for evaluation of a purulent eye discharge and cough. Examination reveals diffuse conjunctival injection and normal papillary reaction. The most likely etiologic agent is:

- a. *Staph. aureus*
- b. adenovirus
- c. *Chlamydia trachomatis*
- d. *Neisseria gonorrhea*

2- A 20-year-old male presents with redness and irritation of his right eye with an associated discharge. Eye findings includes diffuse conjunctival injection and a copious purulent discharge. Visual acuity and papillary reactivity are normal. The most likely etiologic agent is:

- a. *Neisseria gonorrhea*
- b. Herpes simplex
- c. Adenovirus
- d. Vernal conjunctivitis

3- All of the following entities are associated with painless decrease (or loss) of vision EXCEPT:

- a. Central retinal artery occlusion
- b. Acute iritis
- c. Retinal detachment
- d. Central retinal vein occlusion

4- Which of the following is associated with painless loss of peripheral vision?

- a. Primary open angle closure glaucoma
- b. Acute iritis
- c. Retrobulbar neuritis
- d. Eclipse burn

5- All of the following are appropriate in the treatment of acute traumatic iritis EXCEPT:

- a. A long-acting topical cycloplegic agent
- b. Topical steroids (in consultation with an ophthalmologist)
- c. Antibiotics ointment or drops
- d. Ophthalmology referral

6- The mechanism of action by which timolol and acetazolamide work in treatment of acute narrow angle glaucoma is:

- a. They pull the iris back from its anterior position, thereby opening the angle and allowing escape of aqueous humor
- b. They decrease the secretion of aqueous humor by the ciliary body
- c. They create an osmotic gradient, thereby decreasing the volume of fluid in the eye
- d. None of the above

7- A 77-year-old woman presents with a headache and sudden loss of vision in her left eye. Visual acuity is measured as bare light perception in this eye. The cornea is clear, papillary reactivity is normal and the ESR is 60. The most appropriate therapy for this patient is:

- a. Topical pilocarpine solution
- b. A topical steroid agent
- c. Ophthalmology referral for follow-up in 3-4 days
- d. High-dose corticosteroids, Preferably IV

8- Signs of blowout # of the orbit may include all of the following EXCEPT:

- a. Infraorbital anesthesia
- b. Pulsating exophthalmos
- c. Subcutaneous orbital emphysema
- d. Pain and diplopia on upward gaze

9- A patient presents with a laceration to his upper eyelid. On evaluation, you note a deep horizontal laceration toward the middle of the upper lid and associated ptosis. The globe itself does not appear to be injured. The most likely associated injury is damage to the:

- a. lacrimal canaliculi
- b. Orbital septum
- c. Levator muscle/tendon
- d. Canthal tendon

10- Findings suspicious for and/or consistent with a ruptured globe include all of the following EXCEPT:

- a. Decreased visual acuity
- b. Vitreous hemorrhage
- c. Exophthalmos
- d. A penetrating wound to the eyelid

11- The presence of Marcus-Gunn pupil on examination indicates which of the following?

- a. Infection
- b. Optic nerve damage
- c. Encephalitis
- d. All of the above

12- A 70-year-old woman presents with obvious signs and symptoms of acute angle closure glaucoma. Her past medical history is significant for poorly controlled congestive heart failure. All of the following would be appropriate in the management of this patient EXCEPT:

- a. Pilocarpine 2% solution
- b. Glycerol 50% solution
- c. Timolol 0.5 % solution
- d. Acetazolamide

13- Which of the following conditions does not classically produce a decrease in visual acuity?

- a. Traumatic lens dislocation
- b. Retrobulbar hematoma
- c. Periorbital cellulites
- d. Retrobulbar neuritis

14- A 25-year-old patient presents with a foreign body sensation in her left eye, Photophobia and tearing,. Evaluation reveals a visual acuity of 20/30, diffusely reddened eye, decreased corneal sensation and a dendritic lesion on fluorescein staining. Which of the following could produce rapid worsening of his condition and should NOT be prescribed by the emergency physician?

- a. A topical antibiotic
- b. A topical steroid
- c. A topical antiviral (in consultation with an ophthalmologist)
- d. a medriatic agent