MUHS MBBS Question Papers

Ophthalmology

Winter 2014

2 and half hours 30 marks

SECTION - B: (SAQ) (12 marks)

- 2. Short answer question: (any 3 out of 5): (3x4=12)
- a) Pterygium
- b) Paralytic squint
- c) Effects of blunt injury on crystalline lens
- d) Ectropion
- e) Management of Retinoblastoma

SECTION - C: (LAQ)

3. Describe the etiology , clinical features , management and complications of corneal ulcer.

(18 marks)

4. Enumerate the causes for sudden loss of vision. Discuss the clinical features , differential diagnosis and treatment of optic neuritis.

Winter 2013

2 and half hours 30 marks

SECTION - B:

- 2. Brief answer questions (any 3 out of 5): (3x4=12)
- a) Myopia
- b) Management of Angle Closure Glaucoma
- c) Diabetic Retinopathy
- d) Trachoma

e) Congenital Dacryocystitis

SECTION - C: (LAQ)

- 3. Enumerate causes of Red eye. Describe etiopathogenesis , clinical features and management of Bacterial Corneal Ulcer. α
- 4. Describe ocular manifestation of Blunt trauma to eye and discuss management of such case. 9

Nov 2009

2 and half hours 30 marks

SECTION - B: (SAQ)

2. Write short answers (any 3 out of 5): (3x4=12)

- a) Trachoma
- b) Hypermature cataract
- c) Acute Iridocyclitis
- d) Diabetic Retinopathy
- e) Myopia

SECTION - C: (LAQ)

- 3. Describe clinical features and management of fungal corneal ulcer.
- 4. Describe the clinical features and management of Acute Congestive Glaucoma. 9

May 2009

2 and half hours 26 marks

SECTION - B:

2. Write briefly on any 3 out of 5:

(3x4=12)

- a) Sympathetic ophthalmia
- b) Astigmatism
- c) Pterygium
- d) Retinopathy in toxaemia of pregnancy
- e) Antifungal drugs

SECTION - C:

7

- 3. Write in brief about various types of congenital cataract and write how will you manage congenital cataract.
- 4. Describe and discuss differential diagnosis of nodule at limbus.

Nov 2008

2 and half hours

26 marks

SECTION - B:

2. Short answer questions. Attempt any 3 out of 5:

(3x4=12)

- a) Principles of treatment of bacterial corneal ulcer
- b) Myopia
- c) Atropine
- d) Diabetic retinopathy
- e) Entropion

SECTION - C: (LAQ)

- 3. Describe etiopathogenesis, clinical features and management of primary angle closure glaucoma. 7
- 4. Enumerate the various stages of senile cortical cataract. Describe preoperative investigations done before cataract surgery.

7

Nov 2007

2 and half hours 26 marks

SECTION - B: (SAQ)

2. Attempt any 3 out of 5: (3x4=12)

- a) Vernal catarrh
- b) Stages and treatment of retinoblastoma
- c) Hordeolum externum
- e) Symptoms and sign of paralytic squint

SECTION - C: (LAQ)

- 3. Discuss common and important complications of cataract surgery.
- 4. Clinical features and treatment of chronic dacryocystitis

Nov 2006 SECTION B.

7

2. ATTEMPT ANY 3.

- a) Early postoperative complications of cataract surgery and treatment.
- b) Signs of acute anterior uveitis.
- c) Management of acute dacryocystis.
- d) Differences between paralytic and comitant squint.
- e) Define retinal detachment. Mention its types and write clinical features of one types.

SECTION C.

- 3. Describe clinical features, field changes and treatment of primary open angle glaucoma.
- 4. Discuss etiology, symptoms, signs and complications of bacterial corneal ulcer.

June 2006 SECTION B.

2. ATTEMPT ANY 3.

- a) Presbyopia
- b) Define pterygium, types, clinical features and management
- c) Atropine.
- d) Congenital cataract.
- e) Buphthalmos- cause, signs, management.

SECTION C.

3. Write clinical symptoms, signs and management of herpes simplex keratitis

Dec 2005 SECTION B.

2. ATTEMPT ANY 3.

- a) Buphthalmos
- b) Chalazion.
- c) Pterygium
- d) Ectopia lentis.
- e) Proliferative diabetic retinopathy.

SECTION C.

- 3. Describe clinical features, complications and treatment of uncomplicated corneal ulcers.
- 4. Describe symptoms, signs and investigations in case of paralytic squint.

July 2005 SECTION B.

2. ATTEMPT ANY 3.

- a) Complicated cataract
- b) Pilocarpine
- c) Papilloedema
- d) Acute anterior uveitis
- e) Hypermetropia.

SECTION C.

- 3. Give aetiological classification of conjunctivitis and discuss clinical features and management of Vernal Conjunctivitis.
- 4. Define acute darcryocystis and give aetiology, clinical management and features.

Oct 2004 SECTION B.

2. ATTEMPT ANY 3.

- a) Mycotic corneal ulcer.
- b) Absolute glaucoma.
- c) Trachoma
- d) Paralytic squint
- e) Retinoblastoma

SECTION C.

- 3. Classify the various ocular injuries and write down in detail about ill effects of blunt injury over an eye.
- 4. Differential diagnosis of red eye and management

Oct 2003 SECTION B.

2. ATTEMPT ANY 3.

- a) Strum's conoid.
- b) Acute congetive glaucoma.
- c) Retinoblastoma.
- d) Timolol maleate.
- e) Proliferative diabetic retinopathy.

SECTION C.

- 3. Enumerate various stages of cortical senile cataract. Describe management of cataract in a 65 yr old patient.
- 4. Describe etiology, clinical features and management of hypopyon corneal ulcer.

May 2003 SECTION B

2. ATTEMPT ANY 3.



- a) Retinoscopy.
- b) Chronic dacryocystitis.
- c) Euphoria.
- d)Complicated cataract.
- e) Sympathetic ophthalmia.

SECTION C.

- 3. Discuss clinical picture of primary open angle glaucoma and its management.
- 4. Describe etiology, clinical features and treatment of acute bacterial corneal ulcer. enumerate complications of corneal ulcers.

Oct 2002 SECTION B

2. ATTEMPT ANY 3.

- a) Presbiopia.
- b) Differential diagnosis ofleuco coria in a child of 2 yrs of age
- c) Pterygium.
- d) Atropine
- e) Coronary cataract.

SECTION C

- 3. Define glaucoma, classify it; clinical features and management of acute congestive glaucoma.
- 4. Discuss complications cataract surgery.

Oct 2001 SECTION B (LAQ)

1.Attempt any 3

- a) Discuss aetiopathogenesis, clinical features and management of senile cataract.(7)
- b) What is differential diagnosis of white pupillary reflex? Discuss clinical stagewise management of retinoblastoma.

SECTION C (SAQ)

2. SHORT NOTES (ATTEMPT ANY THREE)

- a) chalazion
- b) proliferative diabetic retinopathy.
- c) hypermetropia.
- d) Pilocarpine eye drops.
- e) hypopyon corneal ulcer.