**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**END OF BLOCK FOUR (4) EXAMINATION**

**MARCH 2012 KRCHN CLASS (PRE-SERVICE)**

**OPHTHALMOLOGY EXAMINATION**

DATE: 31/4/2015 TIME:8.30 – 11.30pm

**INSTRUCTIONS**

1. Enter your examination number and question number on each page used.
2. ALL questions are compulsory.
3. For part 1 (MCQs), write the answer in the spaces provided on the answer booklet.
4. For Part 2 (SHORT ANSWER QUESTIONS), answer the questions following each other.
5. For Part 3 (LONG ANSWER QUESTIONS), answer to each question MUST start on a separate page.
6. Omission of and or wrong numbering of a question or part of the question will result in 10% deduction of the marks scored from the relevant part.
7. Do NOT use a pencil.
8. Mobile phones are NOT allowed in the examination hall.

For Examiner:

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| --- | --- | --- | --- | --- |
| **MCQS** | **SAQS** | **LAQS 1** | **LAQS 2** | **TOTAL** |
|  |  |  |  |  |

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) OPHTHALMOLOGY– 10 MARKS**

Q.1. A chalazion:

1. Is a superficial lid gland infection by staphylococcus aureus.
2. Is the common eyelid malignancy.
3. Refers to ineffective closure of the eyelid due to blepharitis.
4. Is a cyst like, firm lesion of the glands of the eyelid.

Q.2. A Snellen chart is useful in assessment of:

1. Refraction of light.
2. Accommodation.
3. Visual acuity.
4. Visual fields.

Q.3. The following are classes of retinal degeneration which one is NOT?

1. Age related macula.
2. Rhinitis pigments.
3. Dry / non exudate.
4. Peripheral degeneration.

Q.4. Cavernous sinus thrombosis presents with:

1. High grade fever with rigors.
2. Flashes.
3. Toxaemia in pregnancy.
4. Intraocular inflammation.

Q.5. Bacterial conjunctivitis is usually caused by the following organisms except:

1. Staphylococcus aureus.
2. Streptococcus pneumonia.
3. Neisseria gonorrhoea.
4. Chlamydia trachomatis.

Q.6. Cataract:

1. Is a clouding of the eyes natural lens.
2. Is a painless progressive diminished visual acuity.
3. Could be as a result of blunt trauma, thermal injury and foreign bodies.
4. Is a clear, transparent, burton like structure lying in the back of the iris.

Q.7. Cardinal signs of glaucoma include:

1. Conjuctival laceration, increased intraocular pressure, cupping.
2. Decreased in visual acuity, cupping, pupil displacement.
3. Loss of visual acuity, increased intraocular pressure, decrease in visual acuity.
4. Atrophy of optic nerve endings, cupping, haemorrhage.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) OPHTHALMOLOGY– 10 MARKS**

Q.8. Which of the following statements is true about accommodation:

1. Constricting of the pupils.
2. Convergence.
3. Changing the power of the lens.
4. Testing for pupillary light.

Q.9. Orbital cellulitis results from:

1. Foreign bodies and pre-existing ocular infection.
2. Accumulation of pus in the anterior chamber.
3. One person to another.
4. Inflammation of the……………

Q.10. The following are the diagnostic tests used to examine the eye. Which one is NOT:

1. Computer tomography.
2. Angiography.
3. Magnetic resonance imaging.
4. Snellen’s chort.

**PART TWO: SHORT ANSWER QUESTIONS – OPHTHALMOLOGY – 20 MARKS**

Q.1. Explain the management of a penetrating eye injury at a health centre. 5 marks

Q.2. State five (5) complications of eye trauma. 5 marks

Q.3. Distinguish between ametropia and emmetropia. 6 marks

Q.4. State four (4) causes of blindness. 4 marks

**PART THREE: LONG ANSWER QUESTIONS – OPHTHALMOLOGY – 20 MARKS**

Q.1. Master Z 10 years old has been admitted with conjunctivitis.

1. Define conjunctivitis. 1 mark
2. Outline five (5) signs and symptoms of conjunctivitis. 5 marks
3. State three (3) types of conjunctivitis. 3 marks
4. Explain the management of master Z. 9 marks
5. List four (4) complications of conjunctivitis. 2 marks