Case ZMBZKUDVAiMGInv14250 — Questions

Case Details

Demographics 31-year-old white female; professional skydiver

Chief complaint problems with contact lenses

History of present illness

Secondary complaints/symptoms none

Patient ocular history last eye exam 1 year ago; wears soft monthly disposable contact lenses, compliant with cleaning and replacement regimen, sleeps in contacts a few times per month

Family ocular history unremarkable

Patient medical history unremarkable

Medications taken by patient none

Patient allergy history NKDA

Family medical history father: hepatitis C

Review of systems

Mental status

Clinical findings

Habitual contact lens Rx

Pupils: PERRL, negative APD **EOMs:** full, no restrictions OU

Confrontation fields: full to finger counting OD, OS

Subjective refraction

Slit lamp

IOPs: OD: 13 mmHg, OS: 12 mmHg @ 12:00 pm by Goldmann applanation tonometry

Fundus OD Fundus OS

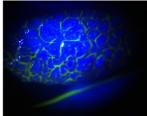
Blood pressure: 105/73 mmHg, right arm, sitting

Pulse: 70 bpm, regular

- Character/signs/symptoms: contact lenses are very uncomfortable; can only wear them for a few hours
- Location: OD, OSSeverity: moderate
- Nature of onset: gradual
- Duration: 2 months
- Frequency: occurs every time she wears contacts
- Exacerbations/remissions: worsens with increased contact lens wear time; improved when removes contacts
- Relationship to activity or function: contact lens wear
- · Accompanying signs/symptoms: itchy eyes, ropy discharge, blurred vision
- Constitutional/general health: denies
- · Ear/nose/throat: denies
- · Cardiovascular: denies
- · Pulmonary: denies
- Dermatological: denies
- · Gastrointestinal: denies
- · Genitourinary: denies
- Musculoskeletal: denies
- · Neuropsychiatric: denies
- Endocrine: denies
- Hematologic: denies
- Immunologic: denies
- Orientation: oriented to time, place, and person
- Mood: appropriate
- Affect: appropriate
- OD B+L Ultra / 8.5 / 14.2 / -3.50 DS; VA distance: 20/20
- OS B+L Ultra / 8.5 / 14.2 / -3.50 DS; VA distance: 20/25
- OD: -3.50 -0.25 x 170; VA distance: 20/20
- OS: -4.25 -0.25 x 005; VA distance: 20/20
- lids/lashes/adnexa: see images 1 & 2 OD, OS similar to OD
- conjunctiva: 1+ injection OD, OS
- cornea: clear OD, OS
- · anterior chamber: deep and quiet OD, OS
- iris: normal OD, OSlens: clear OD, OSvitreous: clear OD, OS

- C/D: 0.20 H/0.25 V
- macula: normal
- posterior pole: normal
- periphery: unremarkable
- C/D: 0.20 H/0.25 V
- · macula: normal
- posterior pole: normal
- · periphery: unremarkable





Question 1/5

What is the MOST appropriate diagnosis of the patient's anterior segment condition?

- A) Epidemic keratoconjunctivitis
- B) Bacterial conjunctivitis
- C) Vernal keratoconjunctivitis
- D) Giant papillary conjunctivitis
- E) Superior limbic keratoconjunctivitis

Question 2 / 5

What is the MOST likely etiology of the patient's ocular condition observed in Images 1 and 2?

- A) Mechanical trauma
- B) Contact lens wear
- C) Idiopathic
- D) Unknown
- E) Viral pathogen
- F) Bacterial pathogen

Question 3 / 5

What is the MOST appropriate treatment for the patient's ocular condition?

- A) Oral antihistamine
- B) Topical cyclosporine drops
- C) Topical antiviral drops
- D) Topical fluoroquinolone drops
- E) Preservative-free artificial tears
- F) Topical mast cell stabilizer and antihistamine drops

Question 4 / 5

After the initiation of treatment, approximately when should the patient return to your office for a follow-up visit?

- A) 1 day
- B) 2 weeks
- C) 2 months
- D) 6 months
- E) 7 weeks
- F) 1 year

Question 5 / 5

The FDA classification system groups hydrogel contact lens materials according to care system compatibility. Upon which of the following parameters is this system based?

- A) Permeability and modulus
- B) Wettability and lubricity
- C) Water content and ionicity

D) Transmissibility and center thickness	