Case TKjmAXvAEdgLyRVR5486 — Questions

Case Details

Demographics 6-year-old white male; student

Chief complaint mother reports that the patient constantly squints

History of present illness

Secondary complaints/symptoms none

Patient ocular history born without an iris in both eyes; last eye exam was when he was 6 months old by a specialist

Family ocular history mother: born without irides, father: high hyperopia

Patient medical history unremarkable, born full term; normal developmental milestones

Medications taken by patient none

Patient allergy history NKDA

Family medical history mother: asthma

Review of systems

Mental status

Clinical findings

Uncorrected visual acuity

Pupils: unable to test due to lack of irides

EOMs: see image 1

Cover test: 8 prism diopter constant left esotropia Confrontation fields: full to finger counting OD, OS

Stereo test: 0" by LANG II

Dry retinoscopy * note: the esotropia is still present with full correction

Slit lamp

IOPs: OD: 17 mmHg, OS: 15 mmHg @ 8:30 am by iCare tonometer

Fundus OD Fundus OS

- Character/signs/symptoms: squinting, photophobia, tearing
- Location: OD, OS
- Severity: moderate
- Nature of onset: gradual
- · Duration: since he was a baby
- Frequency: constant, worsening
- Exacerbations/remissions: none
- Relationship to activity or function: mostly noticeable when he is watching television and when playing outside
- Accompanying signs/symptoms: mother reports that he sits very close to the tv
- · Constitutional/general health: denies
- Ear/nose/throat: denies
- · Cardiovascular: denies
- · Pulmonary: denies
- Dermatological: denies
- Gastrointestinal: denies
- · Genitourinary: denies
- Musculoskeletal: denies
- Neuropsychiatric: hyperactivity
- Endocrine: denies
- · Hematologic: denies
- Immunologic: denies
- Orientation: oriented to time, place, and person (age appropriate)
- Mood: appropriate
- Affect: appropriate
- OD: VA distance: 20/150, VA near: 20/100 @ 40 cm
- OS: VA distance: 20/200, VA near: 20/150 @ 40 cm
- OD: +7.50 -2.00 x 005; VA distance: 20/40 (PHNI)
- OS: +7.75 -2.00 x 175; VA distance: 20/60 (PHNI)
- lids/lashes/adnexa: unremarkable OD, OS
- · conjunctiva: normal OD, OS
- cornea: clear OD, OS
- anterior chamber: deep and quiet OD, OS
- iris: see images 2 & 3 OD, OS
- lens: clear, (+) visualization of zonules OD, OS
- vitreous: clear OD, OS
- C/D: 0.35 H/0.35 V

· macula: normal

posterior pole: normal

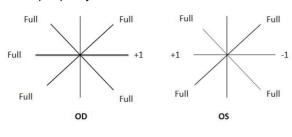
periphery: unremarkable

• C/D: 0.35 H/0.35 V

macula: normal

posterior pole: normal

periphery: unremarkable







Question 1/5

The genetic condition characterized by a lack of iris is known as which of the following terms?

- A) Aniridia
- B) Anisometropia
- C) Aniseikonia
- D) Anisocoria

Question 2 / 5

Which of the following ocular conditions has NOT been associated with the congenital lack of an iris?

- A) Glaucoma
- B) Keratoconus
- C) Foveal hypoplasia
- D) Nystagmus
- E) Lens opacities
- F) Strabismus

Question 3 / 5

Considering the extraocular muscle observations, which cranial nerve is MOST likely affected in this patient?

- A) CN IV
- B) CN III
- C) CN VI
- D) CN V

Question 4 / 5

What is the MOST appropriate spectacle prescription for this patient at this time?

- A) OD: +6.50 DS; OS: +6.75 DS
- B) OD: +7.00 -1.00 x 005; OS: +7.25 -1.00 x 175
- C) OD: +6.50 -2.00 x 005; OS: +7.75 -2.00 x 175
- D) OD: +6.50 -2.00 x 005; OS: +6.75 -2.00 x 175
- E) OD: +5.50 -1.00 x 005; OS: +5.75 -1.00 x 175
- F) OD: +6.50 -1.50 x 005; OS: +6.75 -1.50 x 175

Question 5 / 5

When should the patient return to your office for a follow-up visit once new glasses have been prescribed?

- A) 2 months
- B) 1 day
- C) No follow-up is required
- D) 1 week
- E) 12 months
- F) 6 months