Case PnYmzBrDxbjlTyQ14316 — Questions

Case Details

Demographics 62-year-old Hispanic female; teaching assistant

Chief complaint blurred vision

History of present illness

Secondary complaints/symptoms none

Patient ocular history last eye exam 1 month ago at another office, wears single vision reading glasses only, new glasses are 2 weeks old; history of refractive surgery (unsure of procedure)

Family ocular history father: macular degeneration

Patient medical history rheumatoid arthritis

Medications taken by patient Plaquenil® 200 mg b.i.d.

Patient allergy history Demerol®

Family medical history mother: hyperthyroidism, father: tuberculosis

Review of systems

Mental status

Clinical findings

Uncorrected visual acuity

New spectacle Rx

Pupils: PERRL, negative APD

EOMs: full, no restrictions OU

Cover test: distance: orthophoria, near: 4 exophoria

Confrontation fields: full to finger counting OD, OS

Subjective refraction

Slit lamp

IOPs: OD: 16 mmHg, OS: 18 mmHg @ 10:05 am by Goldmann applanation tonometry
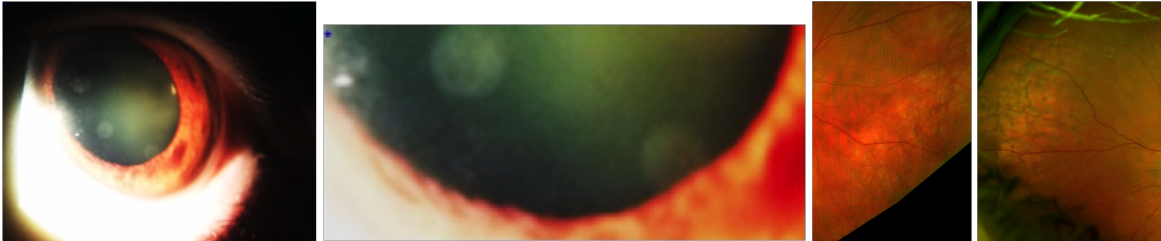
Fundus OD

Fundus OS deep and quiet OD, OS

Blood pressure: 112/82 mmHg, right arm, sitting

Pulse: 74 bpm, regular

- Character/signs/symptoms: blurry vision at near with new glasses
- Location: OD, OS
- Severity: moderate
- Nature of onset: noticed after picking up her new glasses
- Duration: 2 weeks
- Frequency: constant
- Exacerbations/remissions: vision improves if she brings reading material closer
- Relationship to activity or function: near vision tasks only
- Accompanying signs/symptoms: eye strain and fatigue
- Constitutional/general health: denies
- Ear/nose/throat: denies
- Cardiovascular: denies
- Pulmonary: denies
- Dermatological: denies
- Gastrointestinal: denies
- Genitourinary: denies
- Musculoskeletal: joint pain and stiffness
- Neuropsychiatric: denies
- Endocrine: denies
- Hematologic: denies
- Immunologic: denies
- Orientation: oriented to time, place, and person
- Mood: appropriate
- Affect: appropriate
- OD: VA distance: 20/20
- OS: VA distance: 20/30
- OD: +3.50 -0.25 x 133; VA near: 20/20 @ 33 cm
- OS: +4.25 -0.50 x 062; VA near: 20/20 @ 33 cm
- OD: +0.25 DS add: +2.50; VA distance: 20/20, VA near: 20/20 @ 40 cm
- OS: +1.00 -0.50 x 060 add: +2.50; VA distance: 20/20, VA near: 20/20 @ 40 cm
- lids/lashes/adnexa: dermatochalasis OD, OS
- conjunctiva: normal OD, OS
- cornea: OD similar to OS, OS 8 small circular scars noted circumferentially in peripheral cornea (see images 1 & 2)

- anterior chamber: deep and quiet OD, OS
- iris: normal OD, OS
- lens: trace nuclear sclerosis OD, OS
- vitreous: posterior vitreous detachment OD, OS
- C/D: 0.40 H/0.40 V
- macula: normal
- posterior pole: normal
- periphery: see images 3 & 4
- C/D: 0.40 H/0.40 V
- macula: normal
- posterior pole: normal
- periphery: similar to images 3 & 4

Question 1 / 5

Given images 1 and 2, what is the MOST likely type of refractive surgery undergone by this patient?

    A) Photorefractive keratectomy (PRK)

    B) Implantable collamer lens (ICL)

    C) Laser-assisted in situ keratomileusis (LASIK)

    D) Conductive keratoplasty (CK)

    E) Refractive lens exchange (RLE)

Question 2 / 5

Which of the following refractive errors is best suited for that specific type of surgery?

    A) +2.25 DS

    B) -2.75 -1.25 x 090

    C) -0.75 -0.75 x 180

    D) -1.25 DS

    E) +1.00 -1.00 x 180

    F) +4.25 -0.75 x 180

Question 3 / 5

How would you expect a patient's corneal topography to change after undergoing this type of refractive surgery?

    A) Central and mid-peripheral flattening

    B) Central flattening and mid-peripheral steepening

    C) The corneal topography is not expected to change

    D) Central and mid-peripheral steepening

    E) Central steepening and mid-peripheral flattening

Question 4 / 5

What is the MOST likely cause of the patient's entering visual concern?

    A) Undercorrection; causing an increased focal length and further working distance

    B) Overcorrection; causing an increased focal length and further working distance

    C) Undercorrection; causing a reduced focal length and closer working distance

    D) Overcorrection; causing a reduced focal length and closer working distance

Question 5 / 5

Which of the following represents the MOST appropriate diagnosis of the patient's retinal findings observed in images 3 and 4?

    A) Reticular pigmentary degeneration

    B) Retinitis pigmentosa

    C) Plaquenil® retinopathy

D) Lattice degeneration