

Case hJqfPxFLmsaCnxy11084 — Questions

Case Details

Demographics 16-year-old Hispanic male; student

Chief complaint watery eye

History of present illness

Secondary complaints/symptoms none

Patient ocular history 1st eye exam

Family ocular history father: chronic iritis

Patient medical history cystic acne

Medications taken by patient none; previous Accutane® use

Patient allergy history erythromycin

Family medical history father: pancreatitis, ulcerative colitis

Review of systems

Mental status

Clinical findings

Uncorrected visual acuity

Pupils: PERRL, negative APD

EOMs: full, no restrictions OU

Confrontation fields: full to finger counting OD, OS

Slit lamp

IOPs: OD: 13 mmHg, OS: 14 mmHg @ 9:12 am by Goldmann applanation tonometry

Fundus OD

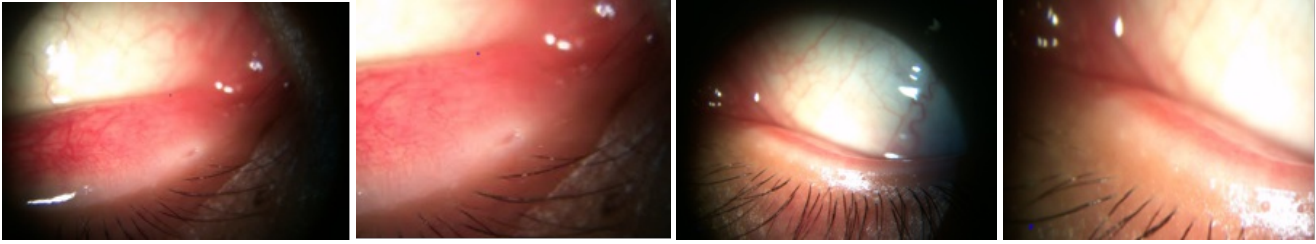
Fundus OS

Blood pressure: 101/73 mmHg, right arm, sitting

Pulse: 67 bpm, regular

- Character/signs/symptoms: eye waters and tears run down his cheek
- Location: OS
- Severity: mild
- Nature of onset: unsure
- Duration: since he can remember
- Frequency: occurs several times a day
- Exacerbations/remissions: worse with near work or looking at the board in class, but also often occurs spontaneously
- Relationship to activity or function: none
- Accompanying signs/symptoms: none
- Constitutional/general health: denies
- Ear/nose/throat: denies
- Cardiovascular: denies
- Pulmonary: denies
- Dermatological: acne
- 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: VA distance: 20/20; VA near: 20/20 @ 40 cm
- OS: VA distance: 20/20; VA near: 20/20 @ 40 cm
- lids/lashes/adnexa: see images 1 & 2 OD, see images 3 & 4 OS
- conjunctiva: normal OD, OS
- cornea: clear OD, OS
- anterior chamber: deep and quiet OD, OS
- iris: normal OD, OS
- lens: clear OD, OS
- vitreous: clear OD, OS
- C/D: 0.20 H/ 0.20 V
- macula: normal
- posterior pole: normal
- periphery: unremarkable

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



Question 1 / 4

What is the MOST likely diagnosis of the patient's left eye anterior segment condition?

- A) Canaliculitis
- B) Punctal obstruction
- C) Centurion syndrome
- D) Punctal stenosis
- E) Punctal atresia

Question 2 / 4

What is the MOST appropriate treatment to help resolve this patient's chief complaint of epiphora?

- A) Nasolacrimal probing and irrigation
- B) Cannulation with placement of silicone tubes
- C) A canaliculotomy
- D) Blepharoplasty to reposition the puncta against the globe
- E) Topical corticosteroids
- F) Topical antibiotics

Question 3 / 4

What is the MOST common etiology of the patient's anterior segment condition?

- A) Congenital
- B) Cicatricial
- C) Developmental
- D) Involutional
- E) Secondary to chronic rubbing/manipulation
- F) Secondary to multiple eyelid infections

Question 4 / 4

The patient stated that he previously took Accutane® for his cystic acne. Which of the following is the MOST common side effect associated with Accutane® use?

- A) Corneal whorl-like deposits
- B) Optic atrophy
- C) A red-orange tinge to urine, sweat, and tears
- D) Elevated intraocular pressure
- E) Increased sun sensitivity