

Case EkcALOWaSjlEJj11717 — Questions

Case Details

Demographics 61-year-old white female; food service manager

Chief complaint loss of vision

History of present illness

Secondary complaints/symptoms none

Patient ocular history last eye exam 5 years ago; amblyopia OS; wears PALs full time

Family ocular history father: retinal detachment

Patient medical history type II diabetes; last HbA1c: 8.7% (last month), FBS: 205 mg/dL (this morning), depression

Medications taken by patient Glucophage® Avandia®, Glucotrol®, Wellbutrin®

Patient allergy history NKDA

Family medical history father: type II diabetes

Review of systems

Mental status

Clinical findings

Habitual spectacle Rx

Pupils: PERRL, negative APD

EOMs: full, no restrictions OU

Confrontation fields: full to finger counting OD, OS

Slit lamp

IOPs: OD: 15 mmHg, OS: 13 mmHg @ 1:30 pm by Goldmann applanation tonometry

Fundus OD

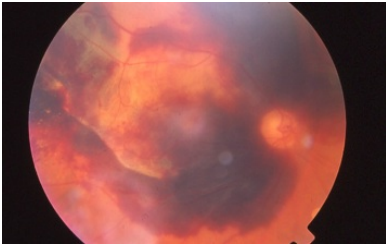
Fundus OS

Blood pressure: 127/82 mmHg, right arm, sitting

Pulse: 78 bpm, regular

- Character/signs/symptoms: suddenly can't see out of the right eye
- Location: OD
- Severity: severe
- Nature of onset: acute
- Duration: 4 hours; noticed when she woke up this morning
- Frequency: constant
- Exacerbations/remissions: none
- Relationship to activity or function: none
- Accompanying signs/symptoms: none
- 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: +1.00 -0.50 x 080 add: +2.25; VA distance: CF @ 5 feet (PHNI)
- OS: +5.25 -0.75 x 095 add: +2.25; VA distance: 20/400 (PHNI)
- lids/lashes/adnexa: 1+ MGD OD, 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: see image 1 OD, posterior vitreous detachment OS
- C/D: see image 1
- macula: see image 1
- posterior pole: see image 1
- periphery: unremarkable
- C/D: 0.25 H/0.25 V

- macula: normal
- posterior pole: several dot/blot hemorrhages along arcades
- periphery: unremarkable



Question 1 / 5

What is the MOST appropriate diagnosis of the patient's right eye condition observed in image 1?

- A) Preretinal hemorrhage
- B) Vitreous hemorrhage
- C) Ocular ischemic syndrome
- D) Valsalva retinopathy
- E) Central retinal vein occlusion
- F) Malignant hypertension

Question 2 / 5

Which 3 of the following are known as "high-risk" characteristics for patients with this retinal diagnosis? (Select 3)

- A) Any degree of neovascularization of the optic disc (NVD) with an associated pre-retinal or vitreous hemorrhage
- B) Neovascularization elsewhere (NVE) with a size greater than 1/2 of the disc area when associated with a pre-retinal or vitreous hemorrhage
- C) Neovascularization within 1 disc diameter of the optic disc (NVD) with a size greater than 1/4 to 1/3 of the disc area
- D) Any retinal edema within 500 microns of the center of the fovea
- E) Retinal edema greater than 1 disc area in size and within 1 disc diameter of the center of the fovea
- F) At least one quadrant of intraretinal microvascular abnormalities (IRMA)

Question 3 / 5

Which of the following systemic conditions can cause a falsely low measurement of a patient's hemoglobin A1c level?

- A) Chronic opioid use
- B) Iron deficient anemia
- C) Hyperbilirubinemia
- D) Pregnancy
- E) Alcoholism

Question 4 / 5

Which of the following is the BEST initial treatment option for this patient, considering her diagnosis and history of amblyopia?

- A) Monitor the condition for resolution
- B) Pars plana vitrectomy
- C) Panretinal photocoagulation
- D) Intravitreal injection of Vitrase®
- E) Intravitreal injection of Avastin®

Question 5 / 5

Which of the following classes of medication does Glucophage® belong to?

- A) Sulfonylureas
- B) Alpha-glucosidase inhibitors
- C) Meglitinides
- D) Biguanides
- E) Thiazolidinediones