

# Case RNKpTpiYCzuXZlv11917 — Questions

## Case Details

**Demographics** 69-year-old white female; retired

**Chief complaint** loss of vision

**History of present illness**

**Secondary complaints/symptoms** none

**Patient ocular history** last eye exam 3 years ago; unremarkable, wears PALs full time

**Family ocular history** mother: macular degeneration

**Patient medical history** hypertension, hypercholesterolemia, sleep apnea, type II diabetes, FBS: 126 mg/dL (this morning), HbA1c: 6.2% (6 weeks ago)

**Medications taken by patient** metformin, losartan, simvastatin

**Patient allergy history** NKDA

**Family medical history** father: type II diabetes, hypertension, hypercholesterolemia

**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, superior restriction OS

**Slit lamp**

**IOPs:** OD: 16 mmHg, OS: 18 mmHg @ 12:15 pm by Goldmann applanation tonometry

**Fundus OD**

**Fundus OS**

**Blood pressure:** 117/76 mmHg, right arm, sitting

**Pulse:** 66 bpm, regular

- Character/signs/symptoms: sudden loss of superior portion of vision in the left eye
- Location: OS
- Severity: severe
- Nature of onset: acute
- Duration: 1 week
- 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: sleep apnea (wears CPAP)
- 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: +2.25 -1.25 x 070 add: +2.50; VA distance: 20/25, VA near: 20/25 @ 40 cm
- OS: +2.00 -0.75 x 100 add: +2.50; VA distance: 20/25, VA near: 20/25 @ 40 cm
- lids/lashes/adnexa: dermatochalasis OD, OS
- conjunctiva: normal OD, OS
- cornea: clear OD, OS
- anterior chamber: deep and quiet OD, OS
- iris: normal OD, OS
- lens: 1+ nuclear sclerosis OD, OS
- vitreous: posterior vitreous detachment OD, OS
- C/D: 0.30 H/0.30 V
- macula: normal
- posterior pole: normal
- periphery: unremarkable

- C/D: see image 1
- macula: see image 1
- posterior pole: see image 1
- periphery: unremarkable



### Question 1 / 5

Which of the following represents the BEST diagnosis for the patient's left eye retinal condition?

- A) Branch retinal artery occlusion
- B) Central retinal artery occlusion
- C) Branch retinal vein occlusion
- D) Cilioretinal artery occlusion
- E) Ocular ischemic syndrome

### Question 2 / 5

Which 2 of the following statements are TRUE in regard to retinal occlusive disease? (Select 2)

- A) The most common retinal arterial occlusion involves the central retinal artery
- B) Temporal retinal arteries are most frequently involved in branch occlusions
- C) Nasal retinal arteries are most frequently involved in branch occlusions
- D) The most common retinal arterial occlusion involves the cilioretinal artery
- E) The most common retinal arterial occlusion involves a branch retinal artery

### Question 3 / 5

Which of the following observations would you MOST likely expect to see if fluorescein angiography was performed on this patient's left eye?

- A) Delayed venous filling, capillary non-perfusion, and microvascular abnormalities in the involved area of the retina
- B) Delay in the appearance of fluorescein in the both the retinal and choroidal circulation
- C) Delay in the appearance of fluorescein in the choroidal circulation
- D) Delayed arterial filling and hypofluorescence of the involved area of the retina
- E) Complete lack of filling of the involved vessel and associated area of the retina

### Question 4 / 5

Which of the following should be included in your patient education for this case?

- A) The peripheral vision loss in your left eye will likely continue to worsen over time
- B) The peripheral vision loss that you are experiencing in your left eye will be permanent
- C) The peripheral vision loss in your left eye is acute and will return once your condition resolves
- D) The peripheral vision loss in your left eye is not related to this acute retinal vascular condition

### Question 5 / 5

What is the BEST treatment for this patient's condition?

- A) Intravenous acetazolamide
- B) No treatment is necessary; follow up with the patient in 3 months
- C) Anterior chamber paracentesis
- D) Pan-retinal laser photocoagulation
- E) Ocular massage