

Case RcqJOhGgkbicYGXK7953 — Questions

Case Details

Demographics 12-year-old white male; student

Chief complaint worsening vision

History of present illness

Secondary complaints/symptoms none

Patient ocular history 1st eye exam

Family ocular history father: blepharoplasty OU

Patient medical history Gilbert syndrome

Medications taken by patient none

Patient allergy history NKDA

Family medical history father: COPD

Review of systems

Mental status

Clinical findings

Uncorrected visual acuity

Pupils: 1+ RAPD OS

EOMs: full, no restrictions OU

Cover test: distance: 10 exophoria, near: 10 exophoria

Confrontation fields: full to finger counting OD, OS

Subjective refraction

Slit lamp

IOPs: OD: 13 mmHg, OS: 14 mmHg @ 12:02 pm by Goldmann applanation tonometry

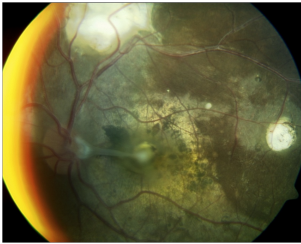
Fundus OD

Fundus OS

Blood pressure: 102/72 mmHg, right arm, sitting

- Character/signs/symptoms: blurred vision
- Location: OS
- Severity: severe
- Nature of onset: gradual
- Duration: 1 year
- 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: occasional abdominal pain and diarrhea
- Genitourinary: denies
- Musculoskeletal: denies
- Neuropsychiatric: denies
- Endocrine: denies
- Hematologic: denies
- Immunologic: denies
- Orientation: oriented to time, place, and person
- Mood: appropriate
- Affect: appropriate
- OD: distance: 20/25, near: 20/25 @ 40 cm
- OS: distance: 20/400; PHNI, near: 20/400 @ 40 cm
- OD: +1.25 -0.25 x 030; VA distance: 20/20, VA near: 20/20 @ 40 cm
- OS: +1.50 -1.00 x 180; VA distance: 20/400, VA near: 20/400 @ 40 cm
- lids/lashes/adnexa: unremarkable 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: clear OD, OS
- C/D: 0.15 H/0.15 V

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



Question 1 / 6

What is the MOST likely diagnosis of this patient's retinal condition?

- A) Presumed ocular histoplasmosis
- B) Retinoblastoma
- C) Toxocariasis
- D) Toxoplasmosis

Question 2 / 6

Which of the following laboratory tests would be the MOST useful in helping to confirm this patient's diagnosis?

- A) Serum anti-Toxoplasma antibody titer
- B) FTA-ABS testing
- C) HLA-B27 testing
- D) Fluorescein angiography
- E) B-scan ultrasonography
- F) Toxocara ELISA testing

Question 3 / 6

What type of organism is the causative agent for this patient's suspected retinal condition?

- A) Oncotic cells
- B) Bacterium
- C) Virus
- D) Protozoan
- E) Nematode
- F) Fungus

Question 4 / 6

Which of the following treatments would be the MOST appropriate for this patient?

- A) Chemotherapy
- B) Thiabendazole
- C) Prednisone
- D) Trimethoprim & sulfamethoxazole
- E) Pyrimethamine & sulfadiazine

Question 5 / 6

Which of the following ocular signs is MOST commonly observed in a patient with Gilbert syndrome?

- A) A shallow anterior chamber
- B) Corneal guttata
- C) Optic nerve pallor
- D) Yellowing of the sclera
- E) Sloughing of iris pigment
- F) Subluxation of the crystalline lens

G) A relative afferent pupillary defect

Question 6 / 6

Which 3 of the following are thought to be risk factors for chronic obstructive pulmonary disease (COPD)? (Select 3)

- A) Alpha-1 antitrypsin deficiency
- B) Overexposure to lead
- C) Decreased angiotensin converting enzyme (ACE) levels
- D) Overexposure to a decreased partial pressure of oxygen
- E) Low birth weight
- F) An increased production of surfactant
- G) Frequent childhood infections