Case PkPWNTFFPyYprsu10754 Details

**Demographics**

* 34-year-old Asian female; housekeeper

**Chief complaint**

* eye pain

**History of present illness**

* Character/signs/symptoms:eye is painful, watery, and sensitive to light
* Location:OD
* Severity:severe
* Nature of onset:acute
* Duration:5 minutes (patient ran over from a house down the street)
* Frequency:constant
* Exacerbations/remissions:better if she keeps her eyes closed, worse with blinking
* Relationship to activity or function:a bottle of vinegar dropped and the contents splashed into her eye
* Accompanying signs/symptoms:blurred vision

**Secondary complaints/symptoms**

* none

**Patient ocular history**

* last eye exam 5 years ago; unremarkable

**Family ocular history**

* unremarkable

**Patient medical history**

* history of gastrointestinal bleeding

**Medications taken by patient**

* Maalox®, multivitamins

**Patient allergy history**

* penicillin

**Family medical history**

* father: cardiovascular disease

**Review of systems**

* 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

**Mental status**

* Orientation:oriented to time, place, and person
* Mood:appropriate
* Affect:appropriate

**Clinical findings**

**Uncorrected visual acuity**

* OD:VA distance: 20/30
* OS:VA distance: 20/20

**Slit lamp**

* lids/lashes/adnexa:unremarkable OD, OS
* conjunctiva:see image 1 OD, normal OS
* cornea:see image 1 OD, clear OS
* anterior chamber:deep and quiet OD, OS
* iris:normal OD, OS
* lens:clear OD, OS
* vitreous:clear OD, OS

**IOPs:**

* OD:13 mmHg, OS: 12 mmHg @ 3:35 pm by iCare tonometer

**Fundus OD**

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

**Fundus OS**

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



## Question 1 / 5

Which of the following BEST describes the solution that caused the corneal chemical burn in this patient?

a) Acidic solution with a pH > 10

b) Irritant with a neutral pH

c) Alkaline solution with a pH < 4

d) Alkaline solution with a pH > 10

e) Acidic solution with a pH < 4

## Question 2 / 5

Which of the following is TRUE regarding the pathophysiology of ocular chemical burns?

a) Alkaline burns are typically confined to superficial tissues

b) Acidic burns occur more frequently than alkali burns

c) Acids tend to bind with tissue proteins and coagulate the surface epithelium

d) Acidic burns may continue to penetrate the cornea long after the initial trauma

## Question 3 / 5

Which of the following best describes the FIRST action that should be taken when a patient with an ocular chemical burn presents to your office?

a) Copious irrigation with saline solution

b) Copious irrigation with a weak basic solution to neutralize the acidic chemical

c) Copious irrigation with a weak acidic solution to neutralize the alkaline chemical

d) Detailed case history

e) Careful examination of the corneas with slit-lamp biomicroscope

## Question 4 / 5

Which of the following topical medications is NOT indicated in the treatment of patients suffering from a corneal chemical burn?

a) Scopolamine

b) Pilocarpine

c) Prednisolone acetate

d) Ketorolac

e) Moxifloxacin

## Question 5 / 5

Which of the following oral pain management medications should be used with caution in this patient?

a) Advil®

b) Aleve®

c) Tylenol®

d) Aspirin®

e) Motrin®