Case RNKpTpIYCzuXZIv11917 Details

**Demographics**

* 69-year-old white female; retired

**Chief complaint**

* loss of vision

**History of present illness**

* 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

**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**

* 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

**Mental status**

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

**Clinical findings**

**Habitual spectacle Rx**

* 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

**Pupils:**

* PERRL, negative APD

**EOMs:**

* full, no restrictions OU

**Confrontation fields:**

* full to finger counting OD, superior restriction OS

**Slit lamp**

* 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

**IOPs:**

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

**Fundus OD**

* C/D:0.30 H/0.30 V
* macula:normal
* posterior pole:normal
* periphery:unremarkable

**Fundus OS**

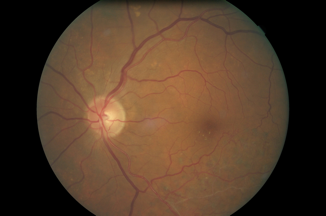
* C/D:see image 1
* macula:see image 1
* posterior pole:see image 1
* periphery:unremarkable

**Blood pressure:**

* 117/76 mmHg, right arm, sitting

**Pulse:**

* 66 bpm, regular



## 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