Case RzeulzYPwybOHrG10881 Details

**Demographics**

* 5-year-old white male; preschool student

**Chief complaint**

* one pupil appears white

**History of present illness**

* Character/signs/symptoms:the child's mother noticed that his left pupil looks white in recent photographs
* Location:OS
* Severity:moderate/severe
* Nature of onset:patient's mother is unsure
* Duration:first noticed last week
* Frequency:only observed in photographs
* Exacerbations/remissions:none
* Relationship to activity or function:none
* Accompanying signs/symptoms:none

**Secondary complaints/symptoms**

* none

**Patient ocular history**

* 1st eye exam

**Family ocular history**

* unremarkable

**Patient medical history**

* unremarkable; born full term, normal developmental milestones

**Medications taken by patient**

* none

**Patient allergy history**

* NKDA

**Family medical history**

* unremarkable

**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:age appropriate orientation to time, place, and person
* Mood:appropriate
* Affect:appropriate

**Clinical findings**

**Uncorrected visual acuity**

* OD:VA distance: 20/20
* OS:VA distance: CF @ 5 feet (PHNI)

**Pupils:**

* 1+ APD OS

**EOMs:**

* full, no restrictions OU

**Confrontation fields:**

* full to finger counting OD, OS

**Slit lamp**

* 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

**IOPs:**

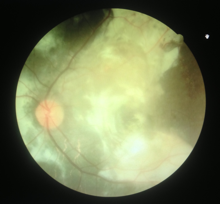
* soft and equal OD, OS with digital pressure

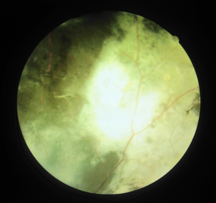
**Fundus OD**

* C/D:0.25 H/0.25 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:see image 2





## Question 1 / 5

What is the MOST appropriate diagnosis for the patient's retinal condition observed in images 1 & 2?

a) Retinopathy of prematurity

b) Choroideremia

c) Retinoblastoma

d) Familial exudative vitreoretinopathy

e) Eales disease

f) Coats disease

## Question 2 / 5

Which of the following BEST describes the pathogenesis of this retinal condition?

a) Failure of vascularization of the retinal periphery causes fibrovascular proliferation and eventual retinal detachment

b) Abnormal permeability of the retinal vascular endothelium causes breakdown of the blood-retinal barrier and leakage of lipid-rich exudates

c) Malignant transformation of primitive retinal cells occurs before they undergo final differentiation

d) Peripheral retinal capillary non-perfusion leads to neovascularization, recurrent vitreous hemorrhaging, and tractional retinal detachment

e) Progressive, diffuse atrophy of the choroid, retinal pigment epithelium, and retinal photoreceptor cells

## Question 3 / 5

Which of the following populations are MOST commonly affected by this retinal condition?

a) Patients with a family history of the disease

b) Caucasians

c) Females

d) Asians

e) Males

f) Premature children

## Question 4 / 5

What is the MOST preferred method of treatment for patients with moderate documented retinal changes associated with this diagnosis?

a) Monitor the condition

b) Enucleation

c) Cryotherapy

d) Vitreoretinal surgery

e) Focal laser photocoagulation

## Question 5 / 5

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

a) There is a possibility that this condition has metastasized to other areas of the body

b) This condition may be a precursor for an associated systemic disease and further blood testing should be completed

c) If left untreated, the patient may develop a painful secondary glaucoma

d) This condition has a hereditary component and may be passed down to future generations

e) It is very likely that the right eye will also develop this condition