A 47-year-old woman with history of multiple sclerosis on ocrelizumab was referred for evaluation of leukoplakic placoid inferiorlimbal-corneal lesion of the left eye (A). Anterior-segment OCT demonstrated a well-circumscribed intraepithelial mass (B). Theconjunctiva and eyelids were unremarkable. The lesion did not respond to topical interferon-alpha for presumed ocular surface squamousneoplasia, so the mass underwent excision. Histopathology revealed a thickened limbal-corneal epithelium with hypergranulosis (arrow),surface keratinization (asterisk), and molluscum contagiosum bodies (arrowheads) (C, hematoxylin-eosin, 400). Further questioningdisclosed a history of multiple self-limited eyelid margin nodules, suggestive of cutaneous molluscum contagiosum