A 61-year-old man presented with acute-onset blurriness in both eyes (OU). His medical history was significant for biopsy-negativetemporal arteritis and long-term systemic corticosteroid use. On presentation, visual acuity was 20/40 with 3-4þ cells in the anteriorchamber and 1þ cells in the vitreous OU. Fundus examination revealed elevated optic nerve margins and peripheral retinal whitening (A).Laboratory work-up showed positive syphilis serology and elevated rapid plasma reagin 1:512. He received intravenous penicillin, and vision improved to 20/20 with resolution of retinitis (B).