

Microbial Keratitis/Ulceration 2007
Optometric Co Management of Corneal Refractive Surgery
Selective Laser Trabeculoplasty
Co Management of Cataract Patient

QEI Educational Topic Quiz 2007

1. All of the following are true with corneal ulcers except?
 - a. Extended contact lens wear decreases the risk of bacterial corneal ulceration.
 - b. Immediate diagnosis and treatment are critical to avoid vision loss.
 - c. Signs and symptoms include redness, pain, photophobia, infiltrate, and AC reaction.
 - d. Pools and hottubs are sources for acanthamoeba.
 - e. Bacterial corneal ulcers are the most common form of corneal ulceration.

2. Which of the following is not an indication to culture?
 - a. Organic trauma-related ulcers.
 - b. Mild to moderate peripheral ulcers in extended wear contact lens wearers.
 - c. Atypical corneal ulcers, or ulcers with questionable etiology.
 - d. Ulcers unresponsive to therapy w/in 24 hours.
 - e. Ulcers in immunocompromised or hospitalized patients.

3. Match the culture media with the organism to be tested.

<input type="checkbox"/> Sabourad's agar	a. H. Influenza, gonorrhea
<input type="checkbox"/> chocolate agar	b. acanthamoeba
<input type="checkbox"/> blood agar	c. staph, strep, most bacteria
<input type="checkbox"/> thioglycolate broth	d. fungi
<input type="checkbox"/> Lowenstein-Jensen	e. mycobacteria, nocardia
<input type="checkbox"/> Non-nutrient agar with E. Coli overlay	f. transport media

4. Which of the following is true?
 - a. Fluoroquinolones are as effective as prepared fortified antibiotics in most cases.
 - b. Fortified antibiotics are the first line treatment for bacterial corneal ulcers today.
 - c. Cycloplegia is not typically necessary with ulcers.
 - d. The fourth generation fluoroquinolones are FDA approved for bacterial corneal ulceration.

5. Appropriate treatment of bacterial corneal ulcers are?
 - a. Preferably a fourth generation fluoroquinolone is initiated every 5 minutes for 30 minutes then every 30 minutes for 2-6 hours.
 - b. Patient may be directed to use the fluoroquinolone drops through the night if severe.
 - c. On 24 hour follow-up subjective improvement expected with resolving signs in 2-3 days.
 - d. Topical steroids are not recommended in early treatment, but may be necessary to reduce corneal scarring.
 - e. All of the above.

6. Patients who develop acute postoperative endophthalmitis.
 - a. always have vision loss
 - b. always have evidence of a hypopyon
 - c. always have vision loss
 - d. may present without symptoms

7. IFIS (intraoperative floppy iris syndrome) may be caused by:
 - a. alpha 1 blockers
 - b. alpha 1 agonist
 - c. beta blockers
 - d. sigma agonists

8. Intra Ocular Pressure spikes 1 day after cataract surgery are usually caused by:
 - a. steroid response
 - b. angle closure
 - c. obstruction of the trabecular meshwork
 - d. is treated by performing laser iridotomy

9. Cystoid macular edema following cataract surgery typically occurs:
 - a. 6-8 months after surgery
 - b. 3-4 months after surgery
 - c. 3-4 weeks after surgery
 - d. 3-4 days after surgery

10. If pigment is present in the anterior vitreous, the clinician should be concerned about:
 - a. endophthalmitis
 - b. cystoid macular edema
 - c. retinal tear or detachment
 - d. hyphema

11. The safe limit for the residual stromal bed in microns after LASIK surgery is?
 - a. 200-250
 - b. 250-300
 - c. 300-350
 - d. 350-400

12. The most common post LASIK symptom is?
 - a. glare at night
 - b. fluctuating vision
 - c. reading difficulty
 - d. dry eye

13. True or False
Recent reports conclude LASIK could be performed effectively and safely in selected patients with stable and controlled systemic diseases.

14. Complications from LASIK include
- slipped or wrinkled flaps,
 - epithelial defects,
 - epithelial ingrowth,
 - diffuse lamellar keratitis (DLK),
 - infection
 - a, b, and d
 - all the above
15. True or False
Today the risk of visually significant haze is very low with the use of mitomycin C (MMC)
16. Which of the following statements regarding SLT is False?
- SLT uses less laser energy than ALT
 - SLT requires a shorter laser pulse than ALT
 - SLT uses a smaller spot size than ALT so as minimize thermal collateral damage
 - With SLT treatment, the laser spots are applied in a confluent pattern.
17. The specific targeting of pigmented cells with SLT is referred to as:
- selective photothermolysis
 - selective photosynthesis
 - selective chemosynthesis
18. True or False
The treatment effect with SLT is independent of the amount of angle pigmentation.
19. Which of the following statements regarding SLT is False?
- There is similar efficacy of SLT treatment in patients with and without a history of previous ALT.
 - 90° treatment with SLT is generally as effective as 180° or 360° treatment
 - The treatment effect with SLT lasts at least 1-5 years in the majority of patients
 - SLT is potentially repeatable
20. It has been shown that when one eye is treated with SLT, the IOP of the untreated eye may decrease as well. This crossover effect supports which mechanism of action for SLT.
- Mechanical theory
 - Cell division theory
 - Cellular (biologic) theory