FACULTY OF SCIENCE AND ENGINEERING

DEPARTMENT OF OPTOMETRY

BACHELOR OF SCIENCE HONOURS DEGREE IN OPTOMETRY

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- JUN 2025

OPTC 408: ADVANCES IN OPTOMETRY

DURATION: 3 HOURS

(100 MARKS)

<u>INSTRUCTIONS</u>

Attempt ALL questions. Answer Section A on the question paper and Section B in the booklet.

SECTION A. Attempt ALL Questions in this Section (1 Mark each) Instructions: Choose the best answer for each question.

- 1. What is the primary purpose of a Slit Lamp Biomicroscope?
- a) Measure intraocular pressure
- b) Visualize retinal layers
- c) Examine anterior eye structures (cornea, lens, iris) in high magnification
- d) Assess visual field defects
- 2. Which instrument is used to measure intraocular pressure (IOP)?
- a) Keratometer
- b) Ophthalmoscope
- c) Tonometer
- d) Pachymeter
- 3. Fluorescein Angiography (FA) is primarily used to evaluate?
- a) Corneal abrasions
- b) Retinal and choroidal vasculature
- c) Lens opacities
- d) Optic nerve function

- 4. Direct Ophthalmoscopy allows visualization of?
- a) Anterior chamber angle
- b) Optic disc and macula (monocular view)
- c) Peripheral retina
- d) Corneal thickness
- 5. Which test assesses the drainage angle of the anterior chamber?
- a) Perimetry
- b) Gonioscopy
- c) Keratometry
- d) A-scan ultrasound
- 6. Optical Coherence Tomography (OCT) is analogous to?
- a) X-ray imaging
- b) Ultrasound B-scan
- c) microscopic histology
- d) Radiography
- 7. The Amsler Grid test detects abnormalities in:
- a) Color vision
- b) Central visual field (e.g., macular degeneration)
- c) Pupillary reflexes
- d) Intraocular pressure
- 8. Schirmer's Test measures:
- a) Tear film stability
- b) Tear production (aqueous deficiency)
- c) Corneal sensitivity
- d) Lacrimal drainage
- 9. Which instrument measures corneal curvature?
- a) Pachymeter
- b) Keratometer
- c) Aberrometer
- d) Retinoscope

- 10. Electroretinography (ERG) evaluates:
- a) Optic nerve function
- b) Retinal electrical activity
- c) Visual cortex response
- d) Extraocular muscle function
- 11. Confocal Microscopy of the cornea is used to?
- a) Measure endothelial cell density
- b) Assess tear film breakup time
- c) Detect microbial keratitis
- d) Evaluate lens opacity
- 12. The primary use of a B-scan ultrasound is?
- a) Measuring axial length
- b) Imaging intraocular structures when media is opaque (e.g., dense cataract)
- c) Assessing corneal topography
- d) Diagnosing glaucoma
- 13. Which test quantifies color vision deficiency?
- a) Snellen chart
- b) Ishihara plates
- c) Amsler grid
- d) Goldman perimetry
- 14. Corneal Topography maps?
- a) Retinal thickness
- b) Anterior chamber depth
- c) Corneal surface shape and power
- d) Lens density
- 15. Indocyanine Green Angiography (ICGA) is superior to FA for imaging:
- a) Retinal arteries
- b) Choroidal vasculature
- c) Corneal nerves
- d) Optic disc

- 16. Pachymetry measures:
- a) Pupil diameter
- b) Corneal thickness
- c) Anterior chamber depth
- d) Lens thickness
- 17. Which instrument objectively determines refractive error?
- a) Phoropter
- b) Autorefractor
- c) Slit lamp
- d) Keratometer
- 18. Visual Field Testing (Perimetry) is essential for diagnosing?
- a) Cataracts
- b) Glaucoma
- c) Conjunctivitis
- d) Strabismus
- 19. The Seidel Test detects?
- a) Dry eye
- b) Corneal abrasions
- c) Aqueous humor leakage (e.g., post-trauma)
- d) Retinal detachment
- 20. Specular Microscopy evaluates?
- a) Retinal pigment epithelium
- b) Corneal endothelial cells
- c) Lens capsule integrity
- d) Vitreous humor
- 21. What is the key principle behind Wavefront-Guided Refractive Surgery (e.g., LASIK/PRK)?
 - a) Correcting only sphere and cylinder
 - b) Creating a standardized ablation profile based on average eyes
- c) Measuring and correcting unique higher-order aberrations in addition to sphere and cylinder
 - d) Only treating presbyopia

- 22. Which OCT advancement allows for imaging of blood flow in the choroid?
 - a) Time-Domain OCT (TD-OCT)
 - b) Enhanced Depth Imaging OCT (EDI-OCT)
 - c) Swept-Source OCT (SS-OCT)
 - d) Anterior Segment OCT (AS-OCT)
- 23. Atropine therapy for myopia control typically uses what concentration for its best balance of efficacy and side effects based on recent studies?
 - a) 1.0%
 - b) 0.5%
 - c) 0.1%
 - d) 0.01%
- 24. What does "Optical Biometry" (e.g., IOLMaster, Lenstar) measure for IOL power calculation?
 - a) Only corneal curvature (Keratometry)
 - b) Only axial length
 - c) Axial length, corneal curvature, and anterior chamber depth (often non-contact)
 - d) Only intraocular pressure
- 25. Which term describes the integration of eye-tracking technology into VR/AR headsets for potential applications in vision therapy and diagnostics?
 - a) Tele-optometry
 - b) Adaptive Optics
 - c) Immersive Binocular Vision Assessment/Therapy
 - d) Electroretinography (ERG)
- 26. Which test is applicable in contact lens practice?
 - a) Measure corneal thickness
 - b) Assess the electrical response of the retina to light stimulation
 - c) Determination of tear film breakup time
 - d) Image the optic nerve head
- 27. Which advancement in glaucoma management involves a minimally invasive device implanted 'during' cataract surgery to enhance aqueous outflow?
 - a) Trabeculectomy
 - b) Tube Shunt
 - c) iStent inject / Hydrus Micro stent (MIGS Minimally Invasive Glaucoma Surgery)
 - d) Selective Laser Trabeculoplasty (SLT)

- 28. How do Defocus Incorporated Multiple Segments (DIMS) spectacle lenses work for myopia control?
 - a) By constantly changing power
 - b) By using peripheral plus add and clear central vision
 - c) By creating alternating zones of clear vision and myopic defocus across the lens
 - d) By filtering blue light
- 29. Which imaging modality is considered the gold standard for assessing the health of the optic nerve head and retinal nerve fiber layer (RNFL) in glaucoma?
 - a) Color Fundus Photography
 - b) Fluorescein Angiography (FA)
 - c) Optical Coherence Tomography (OCT)
 - d) Ultrasound Biomicroscopy (UBM)
- 30. What is a key benefit of Electronic Health Records (EHRs) in modern optometric practice?
 - a) Eliminating the need for technicians
 - b) Guaranteeing higher reimbursement rates
 - c) Improving patient safety, coordination of care, and practice efficiency
 - d) Replacing the need for diagnostic equipment
- 31. The fundamental cause of a refractive error is:
 - A. Abnormal retinal function
 - B. Abnormal corneal curvature
 - C. Mismatch between the optical power of the eye and its axial length
 - D. Weakness of the ciliary muscle
- 32. A patient has clear distance vision but needs glasses (+1.50 D lenses) to read comfortably. The refractive error is:
 - A. Simple myopia
 - B. Simple hyperopia
 - C. Compound myopic astigmatism
 - D. Presbyopia
- 33. In a myopic eye, the far point is:
 - A. At infinity
 - B. Behind the retina
 - C. In front of the retina
 - D. Closer than infinity, in front of the eye

- 34. Axial myopia primarily results from?
 - A. Excessive curvature of the cornea
 - B. Increased refractive index of the lens
 - C. An abnormally long eyeball
 - D. Spasm of the ciliary muscle
- 35. Regular astigmatism is most commonly caused by?
 - A. Irregular corneal scarring
 - B. A non-spherical (toroidal) corneal surface
 - C. Cataract formation
 - D. Retinal distortion
- 36. The correct lens to prescribe for a hypermetrope to improve distance vision is?
 - A. A minus (diverging) lens
 - B. A plus (converging) lens
 - C. A cylindrical lens
 - D. No lens is needed
- 37. A spectacle prescription reads: OD: -3.00 DS / -1.50 DC x 180°. This indicates?
 - A. Simple hyperopic astigmatism in the right eye
 - B. Compound myopic astigmatism in the right eye
 - C. Mixed astigmatism in the right eye
 - D. Simple myopia in the right eye
- 38. A symptom MOST characteristic of uncorrected astigmatism is?
 - A. Complete blurring of both near and distance vision
 - B. Eyestrain and headaches, especially after near work
 - C. Difficulty seeing distant objects clearly, with near vision unaffected
 - D. The need to hold reading material very close
- 39. In retinoscopy, a "with" movement is observed in an emmetropic eye when?
 - A. No working lens is in place
 - B. A plus working lens is used
 - C. A minus working lens is used
 - D. The eye is accommodating

40. Which refractive error typi A. Simple myopia B. Simple hyperopia C. Regular astigmatism D. Irregular astigmatism	cally shows	a distorted or	"scissor" re	flex during re	etinoscopy?
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Section B Answer ALL questions

- Question 1. Differentiate between emmetropia and ametropia, and show the examples of ametropia in a reduced eye. (6 Marks)
- Question 2. Explain the relationship between hypermetropia and accommodation. (6 Marks)
- Question 3. Name the clinical characteristics or manifestation of convergence insufficiency.

 Briefly describe its management. (6 Marks)
- Question 4. Name seven (7) techniques used for visualization of ocular surface tissues. Briefly mention the advantages of each. (6 Marks)
- Question 5. What is the primary clinical test to assess corneal epithelial integrity?

 (6 Marks)
- Question 6. How do you differentiate between a simple corneal abrasion and a sight-threatening corneal ulcer? (6 Marks)
- Question 7. Name two critical slit lamp techniques for evaluating corneal pathology.

 (6 Marks)
- Question 8. What corneal topography pattern is classically associated with keratoconus? (6 Marks)
- Question 9. Why is measuring central corneal thickness (pachymetry) essential before glaucoma assessment or refractive surgery? (6 Marks)
- Question 10. What key details must be recorded when documenting corneal findings?

 (6 Marks)

END OF PAPER