EXTERNAL (DR QAMAR)...
What is your favorite topic.
Us me se qs.

INTERNAL (DR FAWAD NIAZI)
Red eye causes
Cataract treatment.

Ophthamoscope

Drug tropicamide  cyclopentolate MOA uses

Mostly ptosis, strabismus and extra ocular movements k baray main pochty hn

Ahmad hassan bhai ne jo ospe k topics mention kiye hn almost sari ospe usi se aati hy Vivas
Dr. Qamar ... cataract surgery and steps (thora btao to baqi khud e bta dete hn) and its complications

Dr Rashid... red eye causes, acute congestive glaucoma
Acute iridocyclitis
Examinations main pupillary light reflex lazmi aa rha hy baqi dosray station jo sir ka dil kry jese mujhy confrontation method krwaya

A.congective glaucoma
During ward kya dekha OT me
Pupil examination

EVENING BATCH OSPE: Chalazion, applanation tonometer, bitemporal hemianopia, proliferative diabetic retinopathy, infantile galucoma, cataract, drug station(maybe tropicamide), dacrocystitis-type something.

VIVA: Dr. Qamar: Asks what you like/studied: What is cataract? What is mature cataract? What are the subjective tests and objective tests which will confirm that it is a mature cataract? (I guess, Subjective: Slit-lamp examination, iris shadow test etc. Objective: Visual acuity. Not completely sure) The Other Viva Station: If there's an uneventful cataract extraction surgery but the patient develops pain in the eye 6-8 hours onward, what can it be: Endophthalmitis. And then the difference between endophthalmitis and panophthalmitis

The picture of a drug-bottle, like eye drops, with a red cap(mydiatic). Its company name was mentioned on it. We had to tell the active ingredient in it, and its uses.

The instrument was applanation tonometer. We had to identify it, give its principle, and the normal IOP.

Compiled by: Hassan Ahmad (President RIFAO, Batch 41 RMC)
OPHTHALMOLOGY OSPE VIVA 2016  
(BATCH 40)

OSPE:
Fundoscopic image of glaucoma
Fundoscopic image of NVD
Drug: Alkane
Instruments: lacrimal probe, punctum dilator
Chalazion
Hypopyon corneal ulcer/ fungal keratitis
Pterygium
Morgagnian Cataract
Dermoid cyst
Observers stations: general questions about glaucoma, treatments,
Sir Fuad: a 60 yr diabetic and hypertensive patient complains of sudden painless loss of vision give DDs
Sir Qamar: ocular examination ( start with visual acuity and do ask to have snellen’s chart, Sir pointed it specially )
Explain 6/60 visual acuity
Give its numerical value
Drugs - Active ingredient aur uses

EVENING BATCH:

Ospe:
- Hordeolum internum
- Retinitis pigmentosa
- Pterygium
- Ophthalmoscope or retinoscope
- Timolol Maleate
- Vernal keratoconjunctivitis
- Esotropia
- Posterior sub-capsular cataract
- Subconjunctival haemorrhage
- Acute dacryocystitis

Station 1:
- Check visual acuity by confrontation method

Station 2:
- Perform extraocular movements
- A and B scan
- Types of squint
- Types of retinal detachment
- Diabetic retinopathy
Station 3:
- Causes of sudden visual loss (Asked in the form of a scenario)

Station 4:
- Indications of keratoplasty
- What type of corneal bulge is seen in keratoconus

OSPE AFTERNOON BATCH:
Stye, cortical cataract, retinitis pigmentosa, acute dacryocystitis, retinoscope (hint was the last question was related to myopia), timolol maleate (group, indication, MOA), subconjunctival hemorrhage, pterygium, can’t remember the rest
Viva: One one table Sir Fuad and Sir Rashid took combined viva, senerio: a 60 yr old diabetic and hypertensive with sudden painless loss of vision, tell the cause.
On 2nd table Mam Kanwal took viva, cataract, it’s treatment, why phaco is better, why called sutureless surgery, types of IOL, there names, how foldable lenses are implanted
Observed 1: perform extraocular movements (saccadic movements are also a part of this) then they also took viva regarding squint and cataract
Observed 2: perform confrontational method

We were asked to write the findings on retina jis ki picture thi in OSPE.

it's better if you give the entire retina chapter a quick read, they are asking stuff from there in vivas, not too detailed but you should know the basics. Plus do all figures, at least one will come in ospe

OSPE MORNING BATCH:
1. Anterior uveitis with post synche formation(notched dilated eccentric pupil)
3. Keratome
   Different sizes available?
   Indications
4. Morgagnian cataract
5. Suture + hypopyon
Sugery?
Medical treatment?
6. Pilocarpine
   MOA
   Indications
7. Pterygium
   Complications
   Treatment
8. Swelling on lateral side of eye.
9. Painless nodule on lower eyelid
   Chalazion

Compiled by: Hassan Ahmad (President RIFAO, Batch 41 RMC)
OPTHALMOLOGY OSPE VIVA 2016
(BATCH 40)

Rx
10. Ophalmia neonatorum
Causes
Complications

Observed:
1. Cause of sudden loss of vision
2. Acute congestive glaucoma
3. Fundus findings in RVO and RAO

1. Causes of sudden loss of vision
2. Causes of gradual loss of vision
3. Differentiate papillitis and papilloedema

1. Anterior uveitis
2. Paralytic squint after performing Extraocular movements
3. Mature cataract

1. Cataract complications investigations etc.

Observed: Light pathway, Squint treatment, vitreous hemorrhage treatment, corneal ulcer treatment, drug contraindicated in corneal ulcer, define saccadic movements, what is it's pathway, what are it's dimensions, nystagmus, name of prism used for squint treatment

OSPE:
1. Alcane
2. Aplanation tonometer.
3. Eccentric pupil
4. Fundoscopy and indications.
5. Acute dacryocystitis.
7. Cataract and its treatment with complication.
8. Corneal opacity diagram (WHICH GRADE)?
9. Papilloedema
10. I forgot.

Observed:
confrontation method.

VIVA: DR. RIZWAN
Glaucoma treatment, trachoma treatment, diabetic retinopathy treatment, Non rhegmatogenous RD treatment, Anterior uveitis characteristic finding and treatment.

tropicamide... tonometer... central vien occlusion... cataract... congenital glaucoma..

Compiled by: Hassan Ahmad (President RIFAQ, Batch 41 RMC)
OPHTHALMOLOGY OSPE 2017 ANNUAL
(Batch 41 RMC)

1) Congenital Glaucoma (Buphthalmos)
2) Hypermature/Morgagnian Cataract
3) Goldman Aplanation Tonometer.
4) Pterygium
5) Vernal keratoconjunctivitis
6) Dacrocystitis
7) Subconjunctival Hemorrhage
8) Hypertensive Retinopathy
9) Bitemporal Hemianopsia
10) Mydriacyl (Tropicamide)

Dr.Rizwan asked about Retinitis Pigmentosa and its treatment.
Dr.Qamar about Discharge from Eye k Differentials. Conjunctivitis k symptoms and Red Eye.

1. Exophthalmos (diagnosis, investigation, complications)
2. Glaucoma (diagnosis, any 2 drugs with dose and moa, other treatment option)
3. Senile cataract (diagnosis, treatment, early post op comp)
4. Ophthalmoscope (identify, uses)
5. Retinitis pigmentosa (diagnosis, 3 clinical signs)
6. Cycloplegolate (class of drug, action in eye, uses)
7. Pterygium (diagnosis, symptoms, complications)
8. There was a swelling in the upper eyelid at medial margin
9. dermoid cyst
	n 9. White pupil (not sure about the diagnosis but first part was to describe the anomaly seen in the picture) (identify, diagnosis, treatment)
	n 9: Complicated cataract of chronic iridocyclitis

Dr Rizwan : Urdu mai squint samjhao
Dr Qamar : Blephritis treatment
Dr Niazi : causes of red eye
Cl of B blocker
What is glaucoma

1) dose of timolol
2) dose of latanoprost
3) ak old age coughing insaan ko timolol ki kia dose do gae (ni detay)
4) teach glaucoma to a HO
5) cover un cover test mein hath bilkul eyes kay samnay rakhna hta hay
6) pterygium ki treatment
7) define glaucoma

ospe

1) retinitis pigmentosa 3 characteristics
2) uveitis
3) propotosis investigations complications
4) ophthalmoscope its uses n SOPs of use
5) astigmatism its correction name refractive errors

Today's ospe
OPHTHALMOLOGY OSPE 2017 ANNUAL (Batch 41 RMC)

1) Xray orbit showing intraocular foreign body
2) Neonatal conjunctivitis
3) Chalazion
4) Keratotome
5) Hypermetropia figure
6) Pilocarpine (green bottle)
7) New vessels at disc
8) Hyphema and treatment
9) Morgagnian cataract
10) Congenital ptosis

Todays ospe

1) Blow out fracture
2) Keratoconus
3) Veneral keratoconjunctivitis
4) Esotropis
5) Acute dacrocystitus
6) Brimonidine
7) Corneal ulcer
8) Cataract
9) Basal cell carcinoma
10) Entropion clamp

ospe..

1) Glaucoma lacrimal probe and punctum dilator
2) topical anesthesia and uses
3) hemangioma
4) dermoid cyst D/D
5) hypopyon D/D
6) CRAO
7) Morgagnian cataract
8) ptterygium

EXTERNAL

1) role of vitamin C in eye
2) cause of night blindnes
3) dose of vit A
4) role of vit A in visual cycle
5) retinoblastoma, treatment

INTERNAL

what is strabismus,
cataract, surgical procedure
dif btw ECCE and ICCE

Compiled by: Hassan Ahmad (President RIFAO, Batch 41 RMC)
complication of cataract surgery.
pupil examination main accommodation test bhe add kr lo
Dr faud: Causes of Red eye, uveitis ko kesy diagnose kren gy (single most imp investigation),
uveitis k pt ko sif 2 drops dny hain kn c?
Dr Rizwan: Treatment of POAG, Treatment of myopia, Retinal detachment.
Which is most Imp investigation in uveitis? Slit lamp examination. Aqueous flare/cells etc isi me nazar aty hain.
Dr faud: Red eye D/d,white eye D/d. Endophthalmitis treatment how will you check antibiotic sensitivity.most imp investigation.
Dr Qamar:hypermature cataract, its mechanism.
Dr Rizwan: RD,treatment,ptosis,treatment
Dr Qamar: conjunctivits symptoms,red eye cause,hypermature cataract,lens liquefaction reason
Squint,ptosis,false localization,
papilledema,facial nerve examination,
hypermature cataract,why does liquefaction occurs in it?,autolysis and lens embryology.
Dr qamar. Trichiasis causes , complications

Internal: treatment of glaucoma
Treatment of cataract and complications of cataract surgery
External :effects of hypertension and diabetes on eye. senile cataract
Examination :pupil reflexes + EOM

Dr Qamar : mechanism of hypermature cataract.
And everything else about cataract.
The other one : complications of orbital cellulitis . Details about cavernous sinus thrombosis. Iridocyclitis - Complications
Causes of sudden loss of vision

Ospe(morning batch)

1) Irrigation aspiration cannula
2) Hordeolum
3) Cataract
4) Esotropia
5) Papilledema(findings on fundus)
6) Pterygium
7) Ectropion?
8) Snellen chart
9) Timolol (uses,MOA,group)

Internal (Dr Qamar)

1) Definition of glaucoma (He was asking about the LATEST definition )

Compiled by: Hassan Ahmad (President RIFAQ, Batch 41 RMC)
OPHTHALMOLOGY OSPE 2017 ANNUAL
(Batch 41 RMC)

2) Cover uncover
3) Hirschberg test

External (another sir from HFH thy us waqt wahan...don't know his name...(not Dr rizwan):
Difference btw chalazion and stye ...and treatments
Causes of CRVO
Diplopia mechanism
A 40yr old diabetic male presents with diplopia...most possible cause?(I said paralytic squint...retinopathy but
he asked most common cause)
Conjunctivitis k sath agr pain ho in preauricular area...diagnosis???
Examinations k stations pe b viva tha just...ek pe female PG and ek pe dr rizwan...mam was asking about
uveitis...clinical features...complications
Types of keratic precipitates

Today's ospe

1) Pterygium
2) Timolol
3) Irrigation cannula
4) Papilledema
5) Leukocoria
6) Stye
7) Mature cataract
8) Snellen's chart
9) Squint (esotropia)
10) Ectropion

Internal viva: DDs for an old man with gradual visual loss apart from cataract (glaucoma, diabetes, ARMD)
Cataract surgery is performed when patient asks for it due to significant visual loss (Dr. Fuad)
Horner syndrome, third nerve palsy, congenital ptosis and treatment (Dr. Rizwan)
External: peroperative and late complications of cataract surgery, diseases for which treatment is laser. Ocular
tests for catarct (woh examination k points nsi sif tests k names sunna chah rhe the like Regurgitation test)

Occular tests for cataract,
1. Biometry
2. A scan
3. B scan

Ospe 2nd time !!

1) Ptosis
2) Dendritic ulcer
3) Mannitol
4) Cataract
5) FFA
6) cataract extaraction(phaco)
7) Chlazion clamp
8) Herpez zoster ophthalmicus
9) Chlazion
10) Dermoid cyst

Compiled by: Hassan Ahmad (President RIFAO, Batch 41 RMC)
Define glaucoma? Kon si book se parhi yeh def? Jatoi. Sir ko definition pasand nhi ae koi modified
definition khud hi suna k bhej diya 😊
External koi nhi thy internal hi external bne hue thy 😞 Phacoemulsification uses advantages &
complications that’s all.
i did extraocular movements, usky sath doll's reflex bhi chk kr lena chahye
Dusry station pa mam ny optic nerve chk krwai us mai light reflex, visual acuity, color blindness & contrast
sensitivity sb chk krty