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BRAINWARE UNIVERSITY

Term End Examination 2024-2025

Programme – B.Optomtry-2021/B.Optomtry-2022

Course Name – Binocular Vision-II

Course Code - BOPTOC602

(Semester VI)

Full Marks : 60

Time : 2:30 Hours

[The figure in the margin indicates full marks. Candidates are required to give their answers in their own words as far as practicable.]

Group-A

(Multiple Choice Type Question)

1 x 15=15

1. Choose the correct alternative from the following :

- (i) The following are signs of accommodation excess, EXCEPT:
 - a) Low MEM finding
 - b) Normal AC/A ratio
 - c) Low Negative Relative Accommodation
 - d) Monocular accommodative facility fails minus(-) lens
- (ii) Which one of the following is not recommended for bifocal spectacle prescription in accommodative esotropia for young children?
 - a) Using frame made of durable plastic materials
 - b) Prescription of Executive Style segment bifocals
 - c) Prescription of flat top or D-style segment bifocals
 - d) segment height of the ADD passes through the centre of pupil
- (iii) Select the correct meaning of right jerk horizontal nystagmus
 - a) Eye movement increase in left gaze
 - b) Eye movement increase in right gaze
 - c) Eye movement same in all gaze
 - d) All of these
- (iv) Write the method that takes the difference with and without lenses to calculate the AC/A ratio
 - a) Heterophoria Method
 - b) Gradient Method
 - c) Distant near method
 - d) Calculated Method
- (v) Choose the type of movement where The two eyes move symmetrically in the same direction
 - a) Version
 - b) Vergence
 - c) Convergence
 - d) Divergence
- (vi) Identify the working distance of MEM Retinoscopy
 - a) 20 cm
 - b) 40 cm
 - c) 60 cm
 - d) 1 m
- (vii) If a Patient's park's three step test shows right hyper tropia which increases on right gaze and right head tilt then the paralyzed muscle is :

- a) Left inferior oblique muscle b) Right inferior rectus muscle
 c) Right superior oblique d) Left superior rectus
- (viii) If a patient's park's three-step test shows right hypertropia, which increases on left gaze and right head tilt, then the paralyzed muscle is
- a) Right superior oblique. b) Right inferior rectus.
 c) Left inferior oblique. d) Left superior rectus.
- (ix) All the following tests are used for diagnosing diplopia EXCEPT:
- a) Hess chart b) Krimsky test
 c) Diplopia charting d) Lancaster red green test
- (x) Treatment for refractive accommodative esotropia is
- a) Orthoptic exercise. b) Surgery.
 c) Full spectacle correction. d) All of the above.
- (xi) While checking visual acuity of a patient with Latent Nystagmus, vision should be checked
- a) Unilocularly b) Binocularly
 c) Binocularly with high plus power lens in one eye d) Binocularly with high minus power lens in one eye
- (xii) Which of the following is a common cause of amblyopia?
- a) Corneal abrasion. b) Retinal detachment.
 c) Strabismus. d) Conjunctivitis.
- (xiii) Limitation of Adduction visible in type _____ Duane's Syndrome.
- a) I b) II
 c) III d) IV
- (xiv) The limitation of elevation during adduction is visible in _____.
- a) Mobious syndrome b) monocular elevation deficiency syndrome
 c) Brown syndrome d) Ciancia syndrome
- (xv) Which test is commonly used to assess the angle of deviation in "A" and "V" pattern strabismus?
- a) Visual field test b) Prism cover test
 c) Extraocular Motility test d) Park's three-step test

Group-B

(Short Answer Type Questions)

3 x 5=15

2. Summarize various signs of accommodative excess. (3)
3. Write a short note on acute esotropia. (3)
4. what is the Etiology of Brown's Syndrome? (3)
5. Discuss various etiology of periodic alternating nystagmus. (3)
6. A 20 years old woman patient complaints of intermittent diplopia when looking at near objects. The alternating cover test examination shows Exophoria at near greater than distance. Also having reduced PFV at near. What is the best diagnosis for this patient and discuss what are the other possible criteria should match to support your diagnosis. (3)

OR

One 15 years old patient come to your clinic and having complaints of headache with eyestrain after 20 minutes of reading. On prism bar cover test for distance is showing 4 BI at distance and for near 14 BI. What further assessment you have to perform for this patient and explain why? (3)

Group-C

(Long Answer Type Questions)

5 x 6=30

7. How will you differentiate various types of true divergence excess type exotropia mechanism? (5)

8. Based in clinical findings, how will you identify a case of blowout fracture of orbit? (5)
9. Describe etiology and characteristic and treatment of sixth nerve palsy (5)
10. Explain the clinical tests that is necessary to differentiate types of intermittent exotropia. (5)
11. Explain the clinical features of convergence insufficiency. (5)
12. One 17 years old patient come for binocular vision evaluation. On vergence facility assessment with 3BI and 12BO is showing 1 cpm difficulty with BI prism. Explain what you will suspect for that patient and explain what further assessment procedure you have to perform to confirm your diagnosis and explain suggested reading from those procedure to support your diagnosis. (5)

OR

One 15 years old patient come to your clinic with complaints of difficulty with focusing problem at distance after 1 hour of continuous near work. On evaluation it is seen that NRA (≤ 1.50) and PRA. (≤ 1.25). Explain what you will suspect for that patient and explain what further assessment procedure you have to perform to confirm your diagnosis and explain suggested reading from those procedure to support your diagnosis. (5)

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