



BRAINWARE UNIVERSITY

Term End Examination 2023-2024
Programme – B.Optomety-2021
Course Name – Paediatric Optometry
Course Code - BOPTOC605
(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) At what age do most children achieve near-normal adult levels of visual acuity?
- a) 1 year
b) 2-3 years
c) 5 years
d) 8 years
- (ii) CSM Stands for What?
- a) circular steady maintained
b) central steady maintained
c) circular straight maintained
d) central straight maintained
- (iii) Snellen equivalent of 10 cpm is _____.
- a) 20/40
b) 20/20
c) 20/60
d) 20/80
- (iv) Which of the following is a preferential looking test?
- a) Snellen Chart
b) Teller acuity chart
c) pelli-robson chart
d) Key Picture Chart
- (v) Which of the following best describes the vestibulo-ocular reflex (VOR)?
- a) A reflex that regulates blood pressure in response to head movements
b) A reflex that coordinates eye movements with head movements to stabilize gaze
c) A reflex that controls the contraction of muscles in the inner ear
d) A reflex that helps maintain balance during locomotion
- (vi) The VOR is primarily responsible for:
- a) Maintaining balance while standing still
b) Stabilizing gaze during head movements
c) Initiating the fight-or-flight response
d) Controlling the sense of smell
- (vii) Monocular smooth pursuit asymmetry present in between.
- a) 0-2months.
b) 2-6months.
c) 6-12months.
d) 1-2years.
- (viii) Normal Visual Milestone for 3-5 years old is:
- a) 20/30 and not more than 2 Snellen lines difference
b) 20/40 and not more than 2 Snellen lines difference

- c) 20/60 and not more than 2 Snellen lines difference d) 20/80 and not more than 2 Snellen lines difference
- (ix) Which type of low vision aid is worn like glasses and provides magnification for both distance and near tasks?
- a) Handheld magnifier b) Telescopic lens
c) Spectacle-mounted magnifier d) Electronic magnification device
- (x) Which type of contact lens is often recommended for children with irregular corneas, such as in keratoconus?
- a) Scleral lenses b) Hybrid lenses
c) Orthokeratology lenses d) Piggyback lenses
- (xi) What is the primary advantage of using soft contact lenses for pediatric patients?
- a) Better oxygen permeability b) Greater durability
c) Easier handling and insertion d) Lower risk of infection
- (xii) What is the primary consideration when selecting the lens material for a child with a high refractive error?
- a) Cost-effectiveness b) Weight of the lenses
c) Impact resistance d) Aesthetic appearance
- (xiii) How does patching therapy contribute to the management of amblyopia associated with strabismus?
- a) By strengthening the weaker eye b) By improving ocular alignment
c) By dampening nystagmus movements d) By relaxing accommodation in the stronger eye
- (xiv) How will you take visual acuity for a latent nystagmus patient?
- a) by covering one eye b) by opening both eyes
c) binocularly by putting high plus lens in one eye d) binocularly by putting high minus lens in one eye
- (xv) To eliminate abnormal head posture in the nystagmus, we provide a _____ prism.
- a) Risley b) yoke
c) ground d) slab-off

Group-B

(Short Answer Type Questions)

3 x 5=15

2. Define a visual developmental milestone. (3)
3. What is Vestibulo-Ocular Reflex? (3)
4. Write down the advantage and disadvantage of Worth Four dot test. (3)
5. Explain the role of Vertical prism test in visual assessment of preverbal Children. (3)
6. What are the criteria you need to consider while selecting frame for children? (3)

OR

- What is the importance of crest height in pediatric dispensing? (3)

Group-C

(Long Answer Type Questions)

5 x 6=30

7. Write a short note on Congenital hereditary endothelial dystrophy (CHED). (5)
8. How will you identify amblyopia (Suppression) by using Prism? (5)
9. A 4-year-old child got congenital aphakia, and you want to give him a contact lens. (5)
10. Emily Watson, an 8-year-old girl, was referred to our clinic for evaluation of congenital nystagmus. Her parents reported noticing involuntary eye movements in Emily since birth, which seemed to affect her ability to track objects smoothly. There was no family history of eye diseases or neurological conditions. Clinical Examination: Upon examination, Emily's visual acuity was 20/30 in both eyes without correction. Her eye movements showed (5)

characteristic horizontal pendular nystagmus, with equal amplitude in both eyes and no associated head turn or tilt. There were no signs of other ocular abnormalities or refractive errors. How will you manage the patient ?

- 11. Write about various clinical characteristics and management of retinoblastoma. (5)
- 12. While doing cover test in a patient, you have observed variable findings from previous cover test findings. What are the causes of variable measurements? (5)

OR

A 3 years old patient having esotropia in right eye and you want to measure the deviation, (5) but you can't perform the Prism bar cover test on the patient. What other test you can perform to measure the deviation quantitatively? Explain in details.
