

ANU

PROVISIONAL ANSWER KEY [CBRT]

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Instructions / સૂચના

Candidate must ensure compliance to the instructions mentioned below, else objections shall not be considered: -

- (1) All the suggestion should be submitted in prescribed format of suggestion sheet Physically.
- (2) Question wise suggestion to be submitted in the prescribed format (Suggestion Sheet) published on the website.
- (3) All suggestions are to be submitted with reference to the Master Question Paper with provisional answer key (Master Question Paper), published herewith on the website. Objections should be sent referring to the Question, Question No. & options of the Master Question Paper.
- (4) Suggestions regarding question nos. and options other than provisional answer key (Master Question Paper) shall not be considered.
- (5) Objections and answers suggested by the candidate should be in compliance with the responses given by him in his answer sheet. Objections shall not be considered, in case, if responses given in the answer sheet /response sheet and submitted suggestions are differed.
- (6) Objection for each question shall be made on separate sheet. Objection for more than one question in single sheet shall not be considered & treated as cancelled.

ઉમેદવારે નીચેની સૂચનાઓનું પાલન કરવાની તકેદારી રાખવી, અન્યથા વાંધા-સૂચન અંગે કરેલ રજૂઆતો ધ્યાને લેવાશે નહીં

- (1) ઉમેદવારે વાંધા-સૂચનો નિયત કરવામાં આવેલ વાંધા-સૂચન પત્રકથી રજૂ કરવાના રહેશે.
- (2) ઉમેદવારે પ્રશ્નપ્રમાણે વાંધા-સૂચનો રજૂ કરવા વેબસાઈટ પર પ્રસિધ્ધ થયેલ નિયત વાંધા-સૂચન પત્રકના નમૂનાનો જ ઉપયોગ કરવો.
- (3) ઉમેદવારે પોતાને પરીક્ષામાં મળેલ પ્રશ્નપુસ્તિકામાં છપાયેલ પ્રશ્નક્રમાંક મુજબ વાંધા-સૂચનો રજૂ ન કરતા તમામ વાંધા-સૂચનો વેબસાઈટ પર પ્રસિધ્ધ થયેલ પ્રોવિઝનલ આન્સર કી (માસ્ટર પ્રશ્નપત્ર)ના પ્રશ્ન ક્રમાંક મુજબ અને તે સંદર્ભમાં રજૂ કરવા.
- (4) માસ્ટર પ્રશ્નપત્ર માં નિર્દિષ્ટ પ્રશ્ન અને વિકલ્પ સિવાયના વાંધા-સૂચન ધ્યાને લેવામાં આવશે નહીં.
- (5) ઉમેદવારે જે પ્રશ્નના વિકલ્પ પર વાંધો રજૂ કરેલ છે અને વિકલ્પ રૂપે જે જવાબ સૂચવેલ છે એ જવાબ ઉમેદવારે પોતાની ઉત્તરવહીમાં આપેલ હોવો જોઈએ. ઉમેદવારે સૂચવેલ જવાબ અને ઉત્તરવહીની જવાબ ભિન્ન હશે તો ઉમેદવારે રજૂ કરેલ વાંધા-સૂચન ધ્યાનમાં લેવાશે નહીં.
- (6) એક પ્રશ્ન માટે એક જ વાંધા-સૂચન પત્રક વાપરવું. એક જ વાંધા-સૂચન પત્રકમાં એકથી વધારે પ્રશ્નોની રજૂઆત કરેલ હશે તો તે અંગેના વાંધા-સૂચનો ધ્યાને લેવાશે નહીં.

001. Schwalbe's line forming part of the angle of anterior chamber is the prominent end of:
 (A) Sclera
 (B) Descemet's membrane of cornea
 (C) Anterior limit of trabecular meshwork
 (D) Posterior limit of trabecular meshwork
002. Dry (atrophic) age related macular degeneration:
 (A) Is characterised by new vessel formation at the macula
 (B) Is rapidly progressive, leading to loss of central vision
 (C) Is characterised by hard drusen at the early stages
 (D) Is treatable with intravitreal injections
003. The layer of the cornea once destroyed does not regenerate is:
 (A) Epithelium (B) Descemet's membrane
 (C) Bowman's membrane (D) Stroma
004. Distichiasis is:
 (A) Misdirected eyelashes (B) Downward drooping of upper lid
 (C) Loss of Eyelashes (D) Accessory row of eyelashes
005. Dense scar of cornea with incarceration of iris is known as:
 (A) Ciliary staphyloma (B) Megalocornea
 (C) Adherent Leucoma (D) Iris bombe
006. The following are the branches of nasociliary nerve except:
 (A) Supraorbital (B) Long ciliary
 (C) Posterior ethmoidal (D) Infratrochlear
007. In diabetic retinopathy the new vessel formation is due to the following pathology
 (A) Retinal haemorrhage (B) Vitreous haemorrhage
 (C) Retinal oedema (D) Retinal ischemia
008. True intermittent proptosis occurs in:
 (A) Neurofibromatosis (B) Orbital varix
 (C) Meningoencephalocele (D) Cavernous sinus thrombosis
009. Earliest sign of cavernous sinus thrombosis is:
 (A) Oedema of eyelids (B) Proptosis
 (C) Paralysis of opposite lateral rectus (D) Vomiting
010. All of the following are the features of orbital apex syndrome except:
 (A) Ophthalmoplegia (B) Enophthalmos
 (C) Ophthalmic nerve anaesthesia (D) Amaurosis
011. Cataract blindness is:
 (A) Preventable (B) Avoidable
 (C) Non treatable (D) Curable
012. Commonest cause of blindness in India:
 (A) Vitamin A deficiency (B) Cataract
 (C) Trauma (D) Trachoma

013. All of the following are causes of night blindness except:
 (A) Oguchi's disease (B) Gyrate atrophy
 (C) Choroideremia (D) Devic disease
014. All of the following are given global prominence in the VISION 2020 goal, expect:
 (A) Refractive errors (B) Glaucoma
 (C) Cataract (D) Trachoma
015. Under the WHO "Vision 2020" program, the "SAFE" strategy is adopted for which of the following diseases:
 (A) Trachoma (B) Glaucoma
 (C) Diabetic retinopathy (D) Onchocerciasis
016. Isolated painful third nerve palsy is a feature of aneurysms of:
 (A) Vertebrobasilar artery (B) Ophthalmic artery
 (C) Posterior communicating artery (D) Anterior communicating artery
017. As per WHO classification 'X2' stage of xerophthalmia refers to:
 (A) Conjunctival xerosis (B) Bitot spots
 (C) Corneal ulceration (D) Corneal xerosis
018. All are seen in albinism except:
 (A) Glaucoma (B) Photophobia
 (C) Refractive error (D) Nystagmus
019. Sudden increase in blood sugar in a diabetic causes:
 (A) Hypermetropia (B) Presbyopia
 (C) Myopia (D) Anisometropia
020. Roth's spots in the fundus are seen in:
 (A) Diabetes (B) Chorioretinitis
 (C) Bacterial endocarditis (D) Retinoblastoma
021. Ptosis with orbicularis oculi palsy is seen in:
 (A) Eaton Lambert syndrome (B) Myasthenia gravis
 (C) Polymyositis (D) Motor neuron disease
022. The triad of proptosis, diabetes insipidus and bone lesion is characteristic of:
 (A) Marble bone disease (B) Paget's disease
 (C) Osteogenesis imperfecta (D) Hand-Schuller-Christian disease
023. Traumatic enophthalmos is seen after fracture of the:
 (A) Roof of orbit (B) Floor of orbit
 (C) Medial wall of orbit (D) Frontal bone
024. Intra-orbital calcification is present in all except:
 (A) Retinoblastoma (B) Orbital varix
 (C) Coats' disease (D) Lacrimal gland carcinoma
025. Tear drop sign seen by X-ray is present in:
 (A) Mastoiditis (B) Basal meningitis
 (C) Blow-out fracture of orbit (D) Orbital apex syndrome

026. Ptosis with lid lag on downgaze is:
 (A) Congenital (B) Abnormal synkineses
 (C) Neurogenic (D) Myogenic
027. Fasanella-Servat operation is indicated in ptosis:
 (A) Less than 6 mm (B) Less than 5 mm
 (C) Less than 4 mm (D) Less than 3 mm
028. In CRAO, a Cherry red spot is due to-
 (A) Haemorrhage at macula
 (B) Increased choroidal perfusion
 (C) Contrast between pale retina and reddish choroid
 (D) Increased in retinal perfusion at macula
029. Stargardt disease is characterized by all except-
 (A) ABCA-4 gene mutation
 (B) Scrambled egg appearance at macula
 (C) Increased autofluorescence on FAF
 (D) Loss of photoreceptor and RPE cells on SD-OCT
030. Ocriplasmin is used in-
 (A) Wet ARMD (B) Enzymatic vitreolysis
 (C) Trabeculectomy in POAG (D) Chronic Uveitis
031. Causes of Exudative retinal detachment, except-
 (A) Posterior scleritis (B) Toxaemia of pregnancy
 (C) Harada's disease (D) Sickle cell retinopathy
032. Angioid streaks are-
 (A) Abnormal vessels in retina (B) Breaks in Bruch's membrane
 (C) Choroidal neovascularization (D) Break in choroidal capillary layer
033. Cattle track appearance on fundoscopy seen in-
 (A) CRAO (B) CRVO
 (C) Diabetic retinopathy (D) Sickle cell retinopathy
034. Salmon patch haemorrhage seen in-
 (A) Sickle cell retinopathy (B) Eales disease
 (C) Toxoplasmosis (D) Coat's disease
035. Which of the following is not a feature of diabetic retinopathy-
 (A) Microaneurysm (B) Retinal haemorrhage
 (C) Arteriolar dilatation (D) Neovascularization
036. Which drug is used for photodynamic therapy-
 (A) Pegabtinib sodium (B) Brolicizumab
 (C) Ocriplasmin (D) Verteporfin
037. In normal ERG, 'a' wave is produced by-
 (A) Mullers cells (B) Photoreceptors
 (C) Horizontal cells (D) Ganglion cells

038. True about Retinal Angiomatosis Proliferans is-
 (A) Beaten bronze appearance (B) Proliferative vitreoretinopathy
 (C) Type 3 CNVM (D) Type of capillary hemangioma
039. In Central serous chorioretinopathy, fluid accumulates at-
 (A) Suprachoroidal space (B) Subretinal space
 (C) At outer plexiform layer of retina (D) Subhyaloid space
040. All are Uveitic phase manifestations of VKH disease except-
 (A) Iridocyclitis (B) Exudative retinal detachment
 (C) Sunset glow appearance (D) Optic disc swelling
041. Sauce and Cheese appearance in retina seen in-
 (A) Sarcoidosis (B) CMV retinitis
 (C) Proliferative vitreoretinopathy (D) Behcet's disease
042. Uhthoff's sign is seen in-
 (A) Diabetic retinopathy (B) Demyelinating optic neuritis
 (C) Neurofibromatosis (D) Anaemic retinopathy
043. Following materials are used for Frontalis sling operation except:
 (A) Autogenous fascia-lata (B) Prolene
 (C) Steel spring (D) Silicone
044. The correct description of myokymia is:
 (A) Involuntary, persistent and strong orbicularis spasm
 (B) Clonic contracture of isolated orbicularis fibres
 (C) Involuntary rhythmic contraction of orbicularis fibres
 (D) Fibrillar twitching of some orbicularis fibre bundles near lateral canthus
045. The commonest lid sign in ophthalmic Graves' disease is:
 (A) von Graefe (B) Stellwag
 (C) Dalrymple (D) Rosenbach
046. Tylosis is:
 (A) Infection of tarsal plate
 (B) Scanty eye lashes
 (C) Whitening of eye lashes
 (D) Drooping of lid due to weight of thickened lid
047. Ocular feature of Down Syndrome is:
 (A) Mongoloid slant of eyes (B) Translucent iris
 (C) Retinal angiomas (D) Pulsating exophthalmos
048. Of the following glands the accessory lacrimal gland is:
 (A) Henle (B) Krause
 (C) Moll (D) Zeis
049. In Schirmer's test the filter paper is kept in the outer half of lower fornix for:
 (A) 1 minute (B) 2 minutes
 (C) 3 minutes (D) 5 minutes

050. The direction of the nasolacrimal duct is:
 (A) Downward vertically
 (B) Downward, slightly laterally and posteriorly
 (C) Downward, slightly medially and posteriorly
 (D) Downward, slightly laterally and anteriorly
051. All the following affections are due to mucin deficiency in tear except:
 (A) Trachoma (B) Stevens-Johnson syndrome
 (C) Exposure keratopathy (D) Benign mucous membrane pemphigoid
052. Epiphora in facial palsy is due to:
 (A) Entropion (B) Lagophthalmos
 (C) Failure of lacrimal pump activity (D) Hypersecretion of tear
053. Herbert's pits are found in:
 (A) Molluscum contagiosum (B) Vernal keratoconjunctivitis
 (C) Staphylococcal conjunctivitis (D) Trachoma
054. All of the following can progress to Neovascular glaucoma except:-
 (A) Diabetic retinopathy (B) CRVO
 (C) Eales disease (D) Keratoconus
055. Treatment of choice for Congenital Glaucoma is-
 (A) Medical (B) Massage
 (C) Trabeculotomy (D) Trabeculectomy
056. In Angle recession glaucoma, the most important gonioscopic sign is-
 (A) Prominence of Schwalbe's line
 (B) Pigmented trabecular meshwork
 (C) Widening of distance between schwalbe's line and trabecular meshwork
 (D) Widening of distance between scleral spur and iris root
057. Spaeth grading system based on all except-
 (A) Insertion of Iris (B) Width of angle
 (C) Peripheral corneal thickness (D) Iris configuration
058. Inverse Glaucoma occurs in-
 (A) Spherophakia (B) Lenticonus
 (C) Subluxated lens (D) All of the above
059. All are true about Pigmentary glaucoma except-
 (A) It occurs more often in young myopic men
 (B) Iris transillumination defects are noted
 (C) It is associated with Krukenberg's Spindle
 (D) The intensity of pigment deposit in the angle is related to iris colour
060. All are true about Aqueous misdirection syndrome except-
 (A) Shallowing of both central and peripheral anterior chamber
 (B) Marked raised IOP often.
 (C) Usually occurs after intraocular surgery
 (D) Worsened by mydriatics

061. Glaucomflecken is-
 (A) Acute uveitis due to glaucoma (B) Lens opacity due to glaucoma
 (C) Retinal detachment due to glaucoma (D) Corneal opacity due to glaucoma
062. Argon Laser Trabeculoplasty is used in-
 (A) Closed angle glaucoma (B) Primary open angle glaucoma
 (C) Neovascular glaucoma (D) Aphakic glaucoma
063. Intractable secondary glaucoma is seen in-
 (A) Diffuse iris melanoma
 (B) Nodular iris melanoma
 (C) Melanocytic deposits in anterior parts of iris
 (D) Melanocytic proliferation in posterior uveal tissue
064. Sources of underestimation of IOP with use of Goldmann tonometer are all except-
 (A) Excessive contact time (B) Too much fluorescein
 (C) Corneal edema (D) Thin cornea
065. Ocular hypertension is characterized by all except-
 (A) IOP greater than or equal to 21 mm hg
 (B) Glaucomatous cupping of optic nerve
 (C) No evidence of visual field defect on perimetry
 (D) Open angles on gonioscopy
066. Express glaucoma shunt is made of-
 (A) Silicon (B) Stainless steel
 (C) Glass (D) Acrylic
067. Krukenberg's spindle are seen in-
 (A) Pseudoexfoliation glaucoma (B) Angle closure glaucoma
 (C) Pigmentary glaucoma (D) Angle recession glaucoma
068. Reverse pupillary block mechanism is seen in-
 (A) Primary angle closure glaucoma (B) Pigmentary glaucoma
 (C) Steroid induced glaucoma (D) Glaucomatocyclitic crisis
069. Chronic open angle glaucoma secondary to rhegmatogenous retinal detachment is-
 (A) Cogan Reese syndrome (B) Chandler's syndrome
 (C) Schwartz syndrome (D) Axenfield-Rieger syndrome
070. Travoprost is used in what concentration as eyedrop in treatment of glaucoma-
 (A) 0.005% (B) 0.004%
 (C) 0.05% (D) 0.04%
071. Periocular skin pigmentation and eyelash growth are classic side effects of –
 (A) Brinzolamide (B) Brimonidine
 (C) Bimatoprost (D) Betaxolol
072. Tip of G probe (laser probe) is placed at what distance posterior to limbus-
 (A) 1 mm (B) 1.2 mm
 (C) 1.5 mm (D) 2 mm

073. Treatment of choice in leucoma is:
 (A) Keratoplasty (B) Optical iridectomy
 (C) Keratectomy (D) Laser therapy
074. All the following are corneal dystrophies except:
 (A) Cornea guttata (B) Corneal verticellata
 (C) White limbal girdle (D) Keratoconus
075. Homonymous hemianopia is due to lesion at:
 (A) Optic tract (B) Optic nerve
 (C) Optic chiasma (D) Retina
076. All are seen in 3rd nerve palsy except:
 (A) Ptosis (B) Diplopia
 (C) Miosis (D) Outwards eye deviation
077. Retinitis pigmentosa most commonly presents as:
 (A) Night blindness (B) Diplopia
 (C) Scotoma (D) Bitemporal hemianopia
078. The most common primarily intraocular malignancy in adults is:
 (A) Retinoblastoma
 (B) Choroidal melanoma
 (C) Squamous cell carcinoma of conjunctiva
 (D) Iris nevus
079. Commotio retinae is seen in:
 (A) Concussion injury (B) Papilloedema
 (C) Central vein thrombosis (D) Central artery thrombosis
080. Mydriasis is present in all the following except:
 (A) Third nerve lesion (B) Pontine haemorrhage
 (C) Datura poisoning (D) Fourth stage of anesthesia
081. Drug of choice for treating iridocyclitis with secondary glaucoma is:
 (A) Pilocarpine (B) Atropine
 (C) Steroid (D) Timolol
082. Iris bombe occurs following:
 (A) Occlusio pupillae (B) Seclusio pupillae
 (C) Posterior synechia (D) Peripheral anterior synechia
083. The agent used in combination with pyrimethamine in treatment of toxoplasmosis is:
 (A) Folinic acid (B) Spiramycin
 (C) Clindamycin (D) Tetracycline
084. Sympathetic ophthalmitis is:
 (A) Unilateral suppurative inflammation (B) Unilateral non-suppurative inflammation
 (C) Bilateral non-suppurative inflammation (D) Bilateral suppurative inflammation
085. The most common complication of pars planitis is:
 (A) Secondary glaucoma (B) Macular degeneration
 (C) Complicated cataract (D) Retinal detachment

086. Evisceration is indicated in:
 (A) Endophthalmitis (B) Retinoblastoma
 (C) Severely injured blind eye (D) Painful blind eye
087. Scheimpflug imaging is used in evaluation of the following except:
 (A) Corneal diseases (B) Optic nerve
 (C) Glaucoma (D) Cataract
088. Laser used for LASIK is:
 (A) Krypton (B) Argon
 (C) Excimer (D) Nd: YAG
089. EPI – LASIK is:
 (A) Separating epithelium from Bowman’s membrane
 (B) Separating endothelium from Desmet’s membrane
 (C) Separating stromal layers
 (D) Separating anterior capsule from lens cortex
090. Following are the Phakic IOLs except:
 (A) Anterior chamber PIOL (B) Iris-fixated PIOL
 (C) Posterior chamber PIOL (D) Scleral-fixated PIOL
091. PRESBY-LASIK is used to correct following condition except:
 (A) Myopia (B) Aphakia
 (C) Presbyopia (D) Astigmatism
092. Specific tests for Tuberculosis are except:
 (A) Western blot test (B) Chest X-Ray
 (C) Mantoux test (D) QuantiFERON test
093. Flexner-Wintersteiner rosettes a microscopic finding is highly specific for:
 (A) Hamartomas (B) Congenital cataract
 (C) Retinoblastoma (D) Choroidal melanoma
094. Following are the macular function tests except:
 (A) Tonometry (B) Two-point discrimination
 (C) Maddox rod test (D) Photo stress test
095. Unilateral optic neuropathy will produce
 (A) Miosis (B) Mydriasis
 (C) Irregular pupil (D) Relative afferent pupillary defect
096. In Worth’s Four Dot Test, patient sees Two red-dots. Its interpretation is:
 (A) Right eye is blind (B) Suppression of left eye
 (C) Suppression of right eye (D) Exotropia
097. Which one of the following is not ocular cause of poliosis:
 (A) Chronic anterior blepharitis (B) Sympathetic ophthalmitis
 (C) Idiopathic uveitis (D) Vitiligo
098. The classification of ptosis include all of the following except :
 (A) Neurogenic (B) Aponeurotic
 (C) Pseudoptosis (D) Myogenic

099. Lid retraction correction include all the following procedures except:
 (A) Mullerotomy (B) Radiotherapy
 (C) Recession of lower lid retractors (D) Botulinum toxin injection
100. Following are the complications of Nd:Yag laser capsulotomy except:
 (A) Damage to the IOL (B) CME
 (C) Tractional RD (D) IOP elevation
101. Causes of heterochromia iridis (hypochromic type) all true expect:
 (A) Idiopathic congenital (B) Horner syndrome, particularly if congenital
 (C) Waardenburg syndrome (D) Sturge-Weber syndrome
102. Neovascular glaucoma occurs after ischemic CRAO in intervals from:
 (A) 2 weeks to 2 years (B) 4 weeks to 2 years
 (C) 1 week to 2 years (D) 4 weeks to 4 years
103. The colour of fluorescein staining in corneal ulcer is:
 (A) Yellow (B) Blue
 (C) Green (D) Royal blue
104. Optic disc drusen typically demonstrate all of the following features except:
 (A) Arcuate visual field defects
 (B) High reflective signal on B-scan ultrasonography
 (C) Visual acuity loss
 (D) Optic disc elevation and blurred margins
105. All of the following are common causes of transient visual loss except:
 (A) Nonarteritic ischemic optic neuropathy (B) Migraine
 (C) Giant cell arteritis (D) Pseudotumor cerebri
106. Two tumors commonly associated with so-called masquerade syndrome are:
 (A) Conjunctival lymphoma, choroidal melanoma
 (B) Conjunctival lymphoma, intraocular lymphoma
 (C) Eyelid sebaceous carcinoma, intraocular lymphoma
 (D) Basal cell carcinoma, retinoblastoma
107. All of the following are risk factors for cystoid macular edema after cataract surgery except:
 (A) diabetes mellitus
 (B) flexible open-loop anterior chamber IOL implantation
 (C) ruptured posterior capsule
 (D) vitreous loss
108. Which of the following viruses is transmissible even after medical instrumentation is cleaned with alcohol:
 (A) Herpes simplex virus (B) Adenovirus
 (C) Human immunodeficiency virus (D) Epstein-Barr Virus
109. Parasympathetic fibres destined for the pupil reside in the:
 (A) medulla (B) medial portion of CN III
 (C) posterior communicating artery (D) pons

110. Which of the following is a true basement membrane?
 (A) Bowman's layer (B) Zonules of Zinn
 (C) Descemet's membrane (D) Anterior border layer of iris
111. Which of the following nerves does not enter the orbit through the superior orbital fissure?
 (A) CN II (B) CN III
 (C) CN IV (D) CN VI
112. Reiter syndrome is associated with all except which of the following?
 (A) Nonspecific urethritis (B) Poly arthritis
 (C) Conjunctivitis (D) Ankylosing spondylitis
113. Vision loss in Riley-Day syndrome is most often due to?
 (A) cataracts (B) optic nerve hypoplasia
 (C) amblyopia (D) corneal scarring
114. "Morning glory" sign is seen in MRI of patients with?
 (A) Retinoblastoma (B) Progressive Supranuclear palsy
 (C) Multiple sclerosis (D) Retinal coloboma
115. In which of the following conditions bilateral inferior subluxation of lense is seen ?
 (A) Ocular trauma (B) Marfan's syndrome
 (C) Homocystinuria (D) Hyperlysinemia
116. FALSE regarding phthisis bulbi is?
 (A) Calcification of the lens (B) Thickened sclera
 (C) Size of the globe is reduced (D) I.O.P is increased
117. Retinoscopy is?
 (A) Visualization of retina alone
 (B) Visualization of retina and all other posterior segment contents
 (C) Objective measurement of the refractive error of patient
 (D) Subjective measurement of the refractive error of patient
118. Corneal nerves are NOT enlarged in
 (A) Keratoconus (B) Leprosy
 (C) Herpes simplex keratitis (D) Neurofibromatosis
119. Image produced by Indirect ophthalmoscopy is?
 (A) Virtual, erect (B) Virtual, inverted
 (C) Real, erect (D) Real, inverted
120. Phlyctenular Conjunctivitis is due to:
 (A) Endogenous allergy (B) Exogenous allergy
 (C) Degeneration (D) None of the above
121. Which of the following organism can penetrate intact corneal epithelium?
 (A) Streptococcus pyogenes (B) Staphylococcus aureus
 (C) Pseudomonas pyocyanea (D) Corynebacterium diphtheriae
122. Bandage of the eye is contraindicated in:
 (A) Corneal abrasion (B) Bacterial corneal ulcer
 (C) Mucopurulent conjunctivitis (D) After glaucoma surgery

123. Tranta's nodules are seen in:
 (A) Blepharconjunctivitis (B) Vernal conjunctivitis
 (C) Phlyctenular conjunctivitis (D) Herpetic keratitis
124. Marcus Gunn Pupil indicates disease of:
 (A) Lens (B) Sclera
 (C) Retina (D) Optic nerve
125. The only extraocular muscle which does not arise from the apex of the orbit is:
 (A) Superior rectus (B) Superior oblique
 (C) Inferior oblique (D) Inferior rectus
126. Dilator pupillae is supplied by:
 (A) Postganglionic sympathetic from cervical plexus
 (B) Preganglionic sympathetic from cervical plexus
 (C) III Nerve
 (D) Postganglionic sympathetic fibres from V nerve.
127. Sudden loss of unilateral vision and pain on movement is seen in:
 (A) Diabetes mellitus (B) Retrobulbar neuritis
 (C) Hypertension (D) Third nerve palsy
128. Following are avascular except:
 (A) Cornea (B) Sclera
 (C) Vitreous (D) Lens
129. Consecutive optic atrophy is secondary to:
 (A) Papilloedema (B) Papillitis
 (C) Diseases of retina and choroid (D) Glaucoma
130. In acute angle closure glaucoma the pupil is:
 (A) Rounded, nonreactive and dilated (B) Pin point constricted
 (C) Vertically oval, dilated, nonreactive (D) Normal sized, reactive
131. Vossius ring is iris pigments deposited on:
 (A) Posterior surface of the cornea (B) Anterior surface of the lens
 (C) Angle of the anterior chamber (D) Posterior surface of the lens
132. The sure sign of scleral rupture is:
 (A) Shallow anterior chamber (B) Decreased visual acuity
 (C) Prolapsed intraocular contents (D) Hypotony
133. The primary treatment of dacryocystitis in infant, should be:
 (A) Syringing (B) Antibiotics and massage
 (C) Dacryocystectomy (D) Dacryocystorhinostomy
134. Accommodation is maximum in:
 (A) Adulthood (B) Childhood
 (C) Middle age (D) Old age
135. A refractive error of +2.00 +2.00 X 180 would be classified as:
 (A) Mixed astigmatism (B) Compound hyperopic astigmatism
 (C) Compound myopic astigmatism (D) Simple hyperopic astigmatism

136. The most accurate method of measuring IOP is:
 (A) Digital (B) Applanation
 (C) Air-puff non-contact tonometer (D) Gonioscopy
137. The clinical features of symblepharon include:
 (A) Ectropion (B) Lagophthalmos
 (C) Chalazion (D) Xanthelasma
138. Following injury to the exiting eye, sympathetic ophthalmitis begins in:
 (A) In 4-6 days (B) In 4-6 weeks
 (C) In 8-12 weeks (D) After 12 weeks
139. Paralytic ectropion occurs in:
 (A) Third nerve paralysis (B) Trigeminal nerve paralysis
 (C) Facial nerve paralysis (D) Trochlear nerve paralysis
140. WHO definition of blindness is a visual acuity in the better eye equal to or less than:
 (A) 3/60 (B) 4/60
 (C) 5/60 (D) 6/60
141. Temporal lobe tumours may produce:
 (A) Crossed upper quadrantanopia (B) Crossed lower quadrantanopia
 (C) Uncrossed upper quadrantanopia (D) Uncrossed lower quadrantanopia
142. Which drug causes bull's eye macula:
 (A) Phenytoin (B) Chloroquine
 (C) Steroids (D) Ethambutol
143. Toxic amblyopia is produced by:
 (A) Isonicotinic hydrazide (INH) (B) Rifampicin
 (C) Ethambutol (D) Pyrazinamide
144. The presence of Kayser-Fleischer ring is pathognomonic of:
 (A) Keratoconus (B) Lowe's syndrome
 (C) Wilson's disease (D) Albinism
145. Internal ophthalmoplegia is seen in:
 (A) Migraine (B) Diabetes
 (C) Ethambutol toxicity (D) All of the above
146. Intravenous dose of Mannitol is:
 (A) 1-2 g/kg body weight of 20% solution in water
 (B) 3-4 g/kg body weight of 20% solution in water
 (C) 5-7 g/kg body weight of 20% solution in water
 (D) 8-10 g/kg body weight of 20% solution in water
147. Best method of detection of retained glass intraocular foreign body is:
 (A) CT scan (B) Radiography
 (C) Ultrasonography (D) Tonography
148. In sympathetic ophthalmitis, Dalen-Fuchs nodules are formed on the:
 (A) Iris (B) Ciliary body
 (C) Choroid (D) All of the above

149. The most common cause of pulsating exophthalmos is:
 (A) Orbital varices (B) Neurofibromatosis
 (C) Cavernous haemangioma (D) Carotico-cavernous fistula
150. Dalrymple's sign of ocular Graves' disease refers to:
 (A) Retraction of the upper lid (B) Retraction of the upper lid
 (C) Lid lag (D) Proptosis
151. Intermittent proptosis is a sign of:
 (A) Pseudotumour (B) Carotico-cavernous fistula
 (C) Capillary haemangioma (D) Orbital varices
152. Normal pH of tears is:
 (A) 5.7 (B) 6.7
 (C) 7.5 (D) 7.9
153. Crocodile tears are seen in:
 (A) Frey's syndrome (B) Conjunctivitis
 (C) Lacrimal tumour (D) Abnormal Seventh nerve regeneration
154. Innermost stratum of tear film is:
 (A) Mucus layer (B) Aqueous layer
 (C) Oily layer (D) None of the above
155. Ptosis with lid lag is seen in:
 (A) Traumatic ptosis (B) Myogenic ptosis
 (C) Synkinesis (D) Congenital ptosis
156. Of the following conditions most painful is:
 (A) Stye (B) Hordeolum internum
 (C) Ulcerative blepharitis (D) Inflammation of gland of Moll
157. Hirschberg test is used to detect:
 (A) Squint (B) Field defects
 (C) Glaucoma (D) Optic atrophy
158. Elevators of the eye are:
 (A) SR and IO (B) IO and SO
 (C) IR and SR (D) SO and SR
159. The common cause of bilateral internuclear ophthalmoplegia is:
 (A) Multiple sclerosis (B) Lead toxicity
 (C) Diphtheria (D) Diabetes mellitus
160. Secondary deviation of the eye is based on the following law:
 (A) Hering's (B) Listing's
 (C) Donders (D) Sherrington's
161. Pseudo-exotropia is associated with:
 (A) Prominent epicanthal fold (B) Positive angle kappa
 (C) Negative angle kappa (D) None of the above
162. Which of the following is not a point of firm attachment between the sclera and uvea?
 (A) Ora serrata (B) Scleral spur
 (C) Internal ostia of vortex veins (D) Peripapillary tissue

163. Which of the following signs is most likely to be present in a patient with Graves ophthalmopathy?
 (A) Exophthalmos (B) External ophthalmoplegia
 (C) Eyelid Retraction (D) Optic neuropathy
164. The average normal corneal thickness is?
 (A) 520 μm (B) 540 μm
 (C) 560 μm (D) 580 μm
165. Congenital anterior chamber anomalies include all of the follow except:
 (A) posterior embryotoxon (B) axenfeld-Rieger syndrome
 (C) posterior keratoconus (D) iris colomboas
166. Which of the following statements about pleomorphic adenoma of the lacrimal gland is false?
 (A) It can recur in a diffuse manner
 (B) It can transform to a malignant tumour if present long enough.
 (C) Recurrences can transform to malignancy
 (D) It can resolve spontaneously
167. What is the retinal magnification of an eye with a refractive error of +5D when viewed with a direct ophthalmoscope?
 (A) 13.75x (B) 15.00x
 (C) 10.75x (D) 5.00x
168. Which of the follow is most useful in distinguishing the cause of anisocoria that is greater in dark than in light?
 (A) Cocaine 10 % (B) Pilocarpine 0.1%
 (C) Pilocarpine 1% (D) Pilocarpine 2.5%
169. All of the following conditions have a characteristic anterior-segment finding except:
 (A) Sickle cell disease (B) Marfan syndrome
 (C) Galactosemia (D) Wilson disease
170. The superior transverse ligament is also referred to as?
 (A) Lockwood's ligament (B) Sommerring's ligament
 (C) The ROOF (D) Whitnall's ligament
171. Which of the following uveitic syndromes is least likely to require topical corticosteroid management?
 (A) Sarcoidosis (B) Juvenile rheumatoid arthritis
 (C) Fuch's heterochromic iridocyclitis (D) Reiter syndrome
172. Which eye movement disorder is most commonly seen in patients with paraneoplastic syndromes?
 (A) Downbeat nystagmus (B) Upbeat nystagmus
 (C) Superior oblique myokymia (D) Opsoclonus
173. Goldmann tonometry:
 (A) is not affected by alteration in scleral rigidity
 (B) is unaffected by laser in situ keratomileusis (LASIK)
 (C) may give an artificially high IOP measurement with increased central corneal thickness
 (D) may give pressure measurements taken over a corneal scar that are falsely low

174. Behcet syndrome is associated with all except which of the following?
(A) Aphthous stomatitis (B) Arthritis
(C) Genital ulceration (D) Retinal vasculitis
175. Source of bleeding in a case of hyphaema due to blunt injury eye is?
(A) Circulus iridis major (B) Circulus iridis minor
(C) Short posterior ciliary vessels (D) Iris vessels
176. Most common cause of vitreous hemorrhage in adults is?
(A) Trauma (B) Hypertension
(C) Diabetes (D) Pathological myopia
177. Most common secondary tumour in survivors of retinoblastoma is:
(A) Optic glioma (B) Thyroid cancer
(C) Pap CA thyroid (D) Osteosarcoma
178. Substance deposited in Band Shaped Keratopathy is:
(A) Calcium phosphate (B) Magnesium phosphate
(C) Magnesium sulphate (D) Iron
179. False about Bitot spots is?
(A) Accumulation of keratinized epithelial debris
(B) Appear on the conjunctiva
(C) Appear on the cornea
(D) Develop into xerophthalmia if not treated
180. Contraindication for enucleation is?
(A) Painful, blind eye (B) Endophthalmitis
(C) Congenital cystic eye (D) Retinoblastoma
181. Which is NOT a feature of 3rd Nerve palsy?
(A) Ptosis (B) Diplopia
(C) Miosis (D) Outwards Deviation of eye
182. Irrespective of the etiology of a corneal ulcer, the drug always indicated is:
(A) Corticosteroids (B) Cycloplegics
(C) Antibiotics (D) Antifungals
183. Corneal sensations are lost in:
(A) Herpes simplex (B) Conjunctivitis
(C) Fungal infections (D) Marginal keratitis
184. In viral epidemic kerato-conjunctivitis characteristically there is:
(A) Copious purulent discharge (B) Copious muco-purulent discharge
(C) Excessive watery lacrimation (D) Mucooid ropy white discharge
185. A painful, tender, non-itchy localized redness of the conjunctiva can be due to:
(A) Bulbar spring catarrh (B) Episcleritis
(C) Vascular pterygium (D) Phlyctenular conjunctivitis

186. In trachoma the patient is infectious when there is:
 (A) Arlt's line
 (B) Herbert's pits
 (C) Post-trachomatous concretions
 (D) Follicles and papillae in the palpebral conjunctiva
187. Fifth nerve palsy could cause:
 (A) Ptosis (B) Proptosis
 (C) Neurotrophic keratitis (D) Lagophthalmos
188. Advanced keratoconus is least to be corrected when treated by:
 (A) Hard contact Lens (B) Rigid gas permeable contact Lens
 (C) Spectacles (D) Keratoplasty
189. Which of the following is not a source of nutrients to cornea?
 (A) Air (B) Aqueous humour
 (C) Perilimbal capillaries (D) Vitreous humour
190. Treatment of phlyctenular conjunctivitis is:
 (A) Systemic Anti-TB drugs (B) Systemic steroids
 (C) Topical acyclovir (D) Topical steroids
191. Blood vessels in a trachomatous pannus lie:
 (A) Beneath the Descemet's membrane
 (B) In the substantia propria
 (C) Between Bowman's membrane & substantia propria
 (D) Between Bowman's membrane & Epithelium
192. Cobblestone appearance of conjunctiva is seen with:
 (A) Trachoma (B) Spring catarrh
 (C) Purulent conjunctivitis (D) Angular conjunctivitis
193. Intercalary staphyloma is located at:
 (A) Equator (B) Optic nerve
 (C) Limbus (D) Central cornea
194. Herpetic corneal ulcer is diagnosed by:
 (A) Giemsa stain (B) ELISA
 (C) Cell culture/PCR (D) Rose Bengal stain
195. Unilateral aphakia is likely to be corrected by any of the following except:
 (A) Anterior chamber intraocular lens (B) Posterior chamber intraocular lens
 (C) Contact lens (D) Glasses
196. The etiology of complicated cataract all, except:
 (A) Disciform keratitis (B) Iridocyclitis
 (C) Retinitis pigmentosa (D) Retinal detachment
197. In concomitant squint:
 (A) Primary deviation > Secondary deviation
 (B) Primary deviation < Secondary deviation
 (C) Primary deviation = Secondary deviation
 (D) None of the above

198. Most important complication of traumatic hyphaema is:
(A) Iridocyclitis (B) Iridodialysis
(C) Blood staining of cornea (D) Siderosis bulbi
199. What is Tylosis?
(A) Hypertrophy and dropping of eye lid (B) Inversion of eye lid
(C) Senile eversion of eye lid (D) Distortion of cilia
200. Management of acute central retinal artery occlusion includes the following except:
(A) Ocular massage (B) Anterior chamber paracentesis
(C) Intravenous acetazolamide (D) Miotics