



OPHTHALMOLOGY CASE PROFOMA

History:

Demographic details:

Name:
Age:
Sex:
Occupation:
Locality:

Chief complains:

History of presenting illness:

The patient was apparently normal before _____, after which he/she developed

1. Decreased vision – Left or Right or Both eyes
 - a. Onset
 - b. Progression or non-progressive
 - c. Near or far vision
 - d. Diurnal variation
 - e. Aggravating and relieving factors
 - f. Associated factors

2. Mass on Right or Left eye
 - a. Onset
 - b. Progressive or non-progressive
 - c. Associated factors:
 - i. Diplopia
 - ii. Irritation
 - iii. Foreign body sensation
 - iv. Redness

3. Discharge
 - a. Onset
 - b. Duration
 - c. Amount of discharge

- d. Type of discharge
- e. Diurnal variation
- f. Aggravating and relieving factor

4. Other histories: (after describing chief complains)

- a. H/O Pain
- b. H/O redness
- c. H/O diplopia, polyopia
- d. H/O photophobia
- e. H/O colored halos
- f. H/O flashes
- g. H/O floaters
- h. H/O glare
- i. H/O trauma
- j. H/O foreign body sensation

Past history:

- o H/O similar complaints in the past
- o H/O other ocular complaints
- o H/O any systemic illness:
 - Diabetes mellitus
 - Hypertension
 - Asthma
 - Tb
 - Epilepsy
 - Coronary artery disease

Duration, treatment – regular or irregular and type of medication

H/O surgical history

Personal History:

- Diet
- Sleep
- Appetite
- Bowel and bladder movements
- Alcohol, smoking

Family history:

- If any, to be mentioned

Examination:

General Examination:

Built and nourishment
Consciousness and orientation
Vitals

- o Temperature
- o Blood pressure
- o Respiratory rate
- o Pulse rate

- Palor, icterus, clubbing, cyanosis, lymphadenopathy, pedal oedema

Systemic examination:

- Central Nervous System
 - o Cranial nerves intact
 - o Superficial and deep reflexes normal
- Cardiovascular System
 - o S1 and S2 heard
 - o No abnormal sound heard
- Respiratory System
 - o Normal vesicular breath sound
 - o No added breath sound
- Abdomen
 - o No organomegaly
 - o No tenderness

Ocular Examination:

- Head position
 - o Tilt – lagophthalmos, ptosis
 - o Face turn - squint
 - o Chin up/ down
- Facial symmetry

	RightEye followed by left eye
Visual acuity	Improvement on pinhole?
Eyebrow	Present or absent Extent – med. To lat. Canthus In supra orbital ridge Madarosis TB, Leprosy, radiation Poliosis senile
Eyelids	Closed: o Eyelid proper

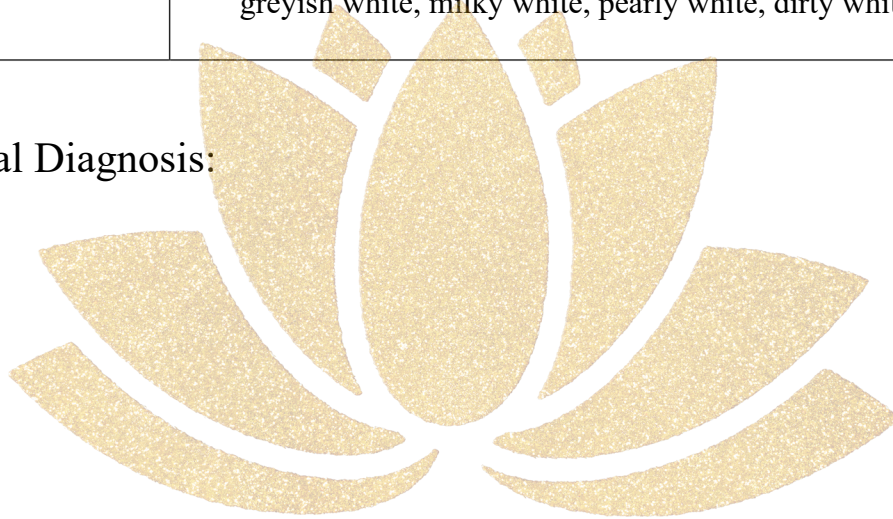
	<p>Lagophthalmos 7th nerve palsy Check for bells phenomenon Surface - scar, swelling (chalazion, hordeolum internum), ulcer, elevation, depression</p>
	<p>Open:</p> <ul style="list-style-type: none"> Interpalpebral fissure (9 to 11mm) Ptosis(<9mm) Lid Retraction (>11mm) <p>o Lid margin</p> <ul style="list-style-type: none"> Ectropion, Entropion Crusting, scaling, ulcer (ulcerative blepharitis) Ant. Border – round Post. Border – angulated Meibomian gland duct opening – normal <p>o Eye lashes</p> <ul style="list-style-type: none"> Madarosis, Poliosis Trichiasis (trachoma), Districhiasis
Lacrimal Apparatus	<p>Punctum (lower) – visible Signs of inflammation Dacryocystitis ROPLAs test</p>

Orbit and its contents

Orbit (margin of orbital inlet)	<p>Inspection – scar, irregularity, swelling Palpation – irregularity, tenderness</p>
Eyeball	Position, Visual access, Size, Movement
Conjunctiva	<p>Bulbar – color, congestion, chemosis, discharge, fleshy vascular mass, Bitot’s spot Palpebral – color, ulcer, swelling, concretions, papillae, follicle Fornix – congestion, discharge,</p>
Cornea	<p>Dimension Edema Sensation Active ulcer – location, size Scarring – location(peripheral/pupillary), size Opacity Color</p>
Sclera	<p>Signs of inflammation Traumatic perforation Dilation/bulging Depth</p>
Anterior Chamber	Eclipse sign

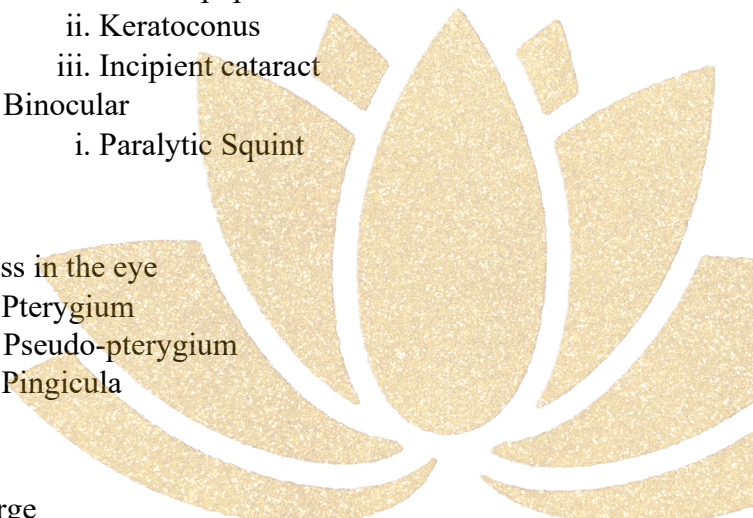
	Hypopyon, hyphema Abnormal constituents present or absent
Iris	Present / absent Colour Pattern Iris nodules iridocyclitis Iridodonesis
pupil	Number of pupil Shape Pupillary light reflex
Lens	Present/ absent/ IOL Transparency? greyish white, milky white, pearly white, dirty white opacity

Provisional Diagnosis:



VIVA Questions

1. Occupationrelated diseases
 - a. Farmers – pterygium, cataract, traumatic fungal ulcers
2. Loss of vision
 - a. Sudden painful loss of vision
 - i. Acute angle closure glaucoma
 - ii. Iridocyclitis
 - iii. Trauma
 1. Chemical
 2. Mechanical
 - b. Sudden painless loss of vision
 - i. CRAO
 - ii. Massive vitreous haemorrhage
 - iii. Ischemic CRVO
 - c. Sudden painless defective vision
 - i. Optic neuritis
 - ii. Methyl alcohol amblyopia
 - iii. Central serous chorioretinopathy
 - iv. Non ischemic central vein occlusion
 - d. Gradual painful defective vision
 - i. Chronic iridocyclitis
 - ii. Corneal ulceration
 - e. Gradual painless defective vision
 - i. Progressive pterygium
 - ii. Corneal degeneration / dystrophy
 - iii. Developmental / senile cataract
 - iv. Optic atrophy
 - v. Chorioretinal degeneration
 - vi. Age related macular degeneration
 - vii. Diabetic retinopathy
 - viii. Refractive errors
3. Floaters
 - a. Vitreous hemorrhage
 - b. Vitreous degeneration
4. Photopsia – flashes of light
 - a. Posterior vitreous detachment
 - b. Vitreous traction band

5. Photophobia
 - a. Conjunctivitis
 - b. Keratitis
 - c. Anterior uveitis
 6. Coloured halos
 - a. Intumescent cataract
 - b. glaucoma
 7. Diplopia
 - a. Uniocular
 - i. Double pupil
 - ii. Keratoconus
 - iii. Incipient cataract
 - b. Binocular
 - i. Paralytic Squint
 8. DD mass in the eye
 - a. Pterygium
 - b. Pseudo-ptyerygium
 - c. Pingicula
 9. Discharge
 - a. Watery/ serous – viral
 - b. Mucoïd – allergic
 - c. Stringy/ ropy – VKC/ spring catarrh
 - d. Mucopurulent – acute conjunctivitis, bacterial, chlamydial
 - e. Bloody (sanguinous) – gonococcal
 - f. Purulent – gonococcal
 10. Colors of sclera
 - a. Yellow – icterus
 - b. Blue – cyanosis, thinning of sclera
 - c. Brown – melanin deposition
 11. Corneal opacity grading
 - a. Nebula
 - b. Macula
 - c. Leucoma
- 

d. Adherent leucoma

