# MCQs Eye, ENT, Dental

- 1. Which is not a cause of ptosis with a constricted pupil?
  - a) aneurysmal compression of the third cranial nerve
  - b) carotid aneurysm
  - c) brainstem infarction
  - d) thyroid malignancy
  - e) SCC lung
- 2. Which of these would not cause unilateral red eye?
  - a) acute closed angle glaucoma
  - b) iritis
  - c) scleritis
  - d) cavernous sinus thrombosis
  - e) dacrocystitis
- 3. Which is not a risk factor for acute angle closure glaucoma?
  - a) short sightedness
  - b) family history of the same
  - c) atrovent
  - d) atropine and tropicamide eye drops
  - e) salbutamol
- 4. Which is not a clinical feature of acute glaucoma?
  - a) hazy cornea
  - b) blurred vision with haloes around the lights
  - c) semidilated non reactive pupil
  - d) irregular pupil
  - e) increased intraocular pressure
- 5. Which should not be used to treat acute glaucoma?
  - a) morphine
  - b) acetzolamide
  - c) tropicamide drops
  - d) maxalon
  - e) mannitol
- 6. What is the normal intraocular pressure?
  - a) <5 mmHg
  - b) <10 mmHg
  - c) <15 mmHg
  - d) <25 mmHg
  - e) <30 mmHg
- 7. What is NOT a feature of iritis?
  - a) unilateral painful red eye
  - b) small or normal pupil
  - c) irregular pupil possible
  - d) possible hyphaema
  - e) WCC in anterior chamber

- 8. Which should not be used in treatment of iridocyclitis?
  - a) topical steroids
  - b) topical chloamphenicol
  - c) morphine
  - d) atropine topically
  - e) pilocarpine topcially
- 9. Which is not true of hyphaema?
  - a) it is usually due to trauma
  - b) it has an association with sickle cell disease
  - c) 10% will rebleed on 3-5
  - d) acute glaucoma is a possible complication
  - e) blod sits in the anterior chamber
- 10. Which is incorrect regarding treatment of hyphaemas?
  - a) aspirin is the analgesic of choise
  - b) bed rest with 30 degrees of elevation is the necessary
  - c) mydriatics may play a role
  - d) patch both eyes
  - e) acetzolamide may play a role
- 11. Which statement is incorrect?
  - a) dendritic ulcers are caused by herpes simplex
  - b) episcleritis is a serious condition
  - c) scleritis is a serious condition
  - d) herpes zoster opthalmicus is likely to involve the cornea if the tip of the nose is involved
  - e) all of the above are correct
- 12. Which condition is described? painless incomplete loss of vision, able to see fingers, over a few minutes. Fundoscopy shows flame hemorrhages and a swollen optic disc.
  - a) optic neuritis
  - b) central retinal artery occlusion
  - c) central retinal vein occlusion
  - d) vitreous hemorrhage
  - e) cataract
- 13. Which of the conditions listed above is described by sudden painless complete loss of vision?
- 14. Which is not characteristic of a retinal detachment?
  - a) painless
  - b) flashing lights seen
  - c) floaters seen
  - d) nearly always decreased visual acquity
  - e) decreased visual fields
- 15. Regarding the treatment of acute otitis media in children over 2 years of age, which is true?
  - a) penicillin is the antibiotic of choice
  - b) if not treated there is a high chance of chronic glue ear
  - c) antibiotic treatment is the best treatment of associated otologia
  - d) antibiotic treatment should be withheld for 24-48 hours and only commenced if the child remains febrile or symptomatic
  - e) none of the above are true

- 16.How should a haematoma of the pinna secondary to blunt trauma be managed?
  a) pressure bandage
  b) incision, drainage, not pressure bandage
  c) incision, drainage, and pressure bandage
  d) antibiotics alone
- 17.Regarding management of perforated eardrums secondary to blunt trauma which is FALSE?
  - a) they should be surgically repaired
  - b) they should be left to heal spontaneously

e) needle aspiration and pressure dressing

- c) it is important to administer topical antibiotics
- d) the ear canal should not be allowed to get wet
- e) B C and D are true
- f) B and D are true
- 18. Which is the most common organism of malignant otitis externa?
  - a) pseudomonas
  - b) MRSA
  - c) Anaerobes
  - d) Clostridium
  - e) Streptococci
- 19. Which is not routine management of sialolithiasis?
  - a) gland massage
  - b) local heat
  - c) sucking on lemon wedges
  - d) analgesia
  - e) decreased fluid intake
- 20. Which is false regarding sialolithiasis?
  - a) the diagnosis is usually clinical
  - b) intraoral radiographs show more stones than extra oral ones
  - c) sialography is being replaced by CT
  - d) the most common gland involved is the parotid gland
  - e) most patients can be discharged and managed as outpatients
- 21. Which is false of suppurative parotitis?
  - a) differentiation from a viral aetilogy is clinical
  - b) treatment is as for sialolithiasis plus antibiotics
  - c) it is more likely in a debilitated or dehydrated patient
  - d) diagnosis is clinical
  - e) inpatient treatment is manditory
- 22. How many adult teeth are there?
  - a) 20
  - b) 24
  - c) 28
  - d) 32
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- 23. What is the best transport medium for an avulsed tooth?
  - a) milk
  - b) saliva
  - c) iced salt water
  - d) iced tap water
  - e) in ice

24.A fracture of the tooth that is sensitive to temperature fluctuations and clinically the fracture part looks yellow, is what Ellis fracture classification?
a) 1
b) 2
c) 3
d) 4
e) 5
25.Which intraoral lacerations should be sutured?
a) 5mm

- b) >1cm
- c) if through and through lac, only suture external lac, not internal
- d) all of the above
- e) B and C
- 26. What is ludwigs angina?
  - a) ulcerative tonsillitis
  - b) cardiac ischemic pain felt in the jaw
  - c) bilateral cellulites of the submadibular and sublingual spaces
  - d) ulcerative gingivostomatis
  - e) impacted 3<sup>rd</sup> molar
- 27. Which age group is a retropharyngeal abscess most commonly seen in?
  - a) <1 year
  - b) 1-5 years
  - c) 5-12 years
  - d) 12-18 years
  - e) >18 years
- 28. How long should a patient with possible caustic ingestion be observed for and discharged if still asymptomatic?
  - a) 2 hours
  - b) 5 hours
  - c) 8 hours
  - d) 12 hours
  - e) 24 hours

## **ANSWERS**

1)A	2)E	3)A	4)D	5)C	6)D	7)D	8)E	9)E	10)A	11)B
12)C	13)B	14)D	15)D	16)C	17)F	18)A	19)E	20)D	21)E	22)D
23)B	24)B	25)B	26)C	27)A	28)B					

## MCQ

- 1. A 30 yr male presents after a fight with a grossly swollen face
- a) OPG (pannorex) is the best view to show mandibular symphysis fracture
- b) If there are signs of inferior rectus entrapment the best management is immediate surgery
- c) He has less chance of a zygomatic arch fracture than his 8 yr son would have
- d) LeForte 2 fractures never involve the zygoma
- e) 1/3 of the upper lip may be debrided during wound repair with preservation of cosmetic appearance
- 2. Ludwigs angina
- a) Is more common in males
- b) Is rarely due to dental abscess
- c) Is treated with antibiotics and dexamethasone 0.15mg/kg IV (max 12mg)
- d) Has a mortality of >50%
- e) The commonest cause of death is asphyxiation
- 3. The commonest site of sinusitis leading to periorbital cellulitis is
- a) Spenoid
- b) Frontal
- c) Ethmoid
- d) Maxillary
- e) Cavernous
- 4. A 30yr male presents with tension headache. The examination is otherwise unremarkable. During routine neurological examination you note the presence of cotton wool spots in the retinae. The most likely diagnosis is
- a) AIDS
- b) Diabetic retinopathy
- c) Hypertensive retinopathy
- d) Endocarditis
- e) Leukaemia

## **Answers**

#### MCQ

- 1. D
- 2. E
- 3. C
- 4. A