

ASSIGNMENT 13

Material Covered:
***Parts of Units 7.2 and 7.3 (p100 – 233) of Module 7
of the IACLE Contact Lens Course***

ASSIGNMENT 13

Read the questions carefully and record your answers on the answer sheet provided.

1. **Compared with daily wear, contact lenses worn on an extended wear (EW) basis increases the likelihood of corneal infection by:**
 - a. 1.5 to 2.5 times
 - b. 3 to 8 times
 - c. 10 to 24 times
 - d. 40 times

2. **Which of the following is NOT appropriate in the management of vascularized limbal keratitis (VLK) associated with RGP lenses?**
 - a. Redesign lens to achieve moderate edge lift
 - b. Use in-eye wetting drops
 - c. Fit larger lenses
 - d. Reduce wearing time

3. **All of the following have been proposed as possible factors contributing to microbial keratitis (MK) EXCEPT:**
 - a. Inadequate post-lens tear film volume
 - b. Deposits on the lens surface
 - c. Stagnation of the post-lens tear film
 - d. Poor patient compliance

4. **Which of the following slit-lamp illumination techniques is best used to observe corneal wrinkling?**
 - a. Direct illumination
 - b. Sclerotic scatter
 - c. Tangential illumination
 - d. Marginal retro illumination

5. **The MOST significant factor in the aetiology of contact lens-induced acute red eye (CLARE) is:**
 - a. Soft contact lens extended wear
 - b. Being female
 - c. Changing seasons
 - d. Having worn contact lenses for 3 years or more

6. **Which of the following is probably NOT a contributing factor to the aetiology of SEALS?**
 - a. Tight upper eyelids
 - b. Inadequate lens flexure
 - c. Tight lens fitting
 - d. Hypoxia

7. **Which statement about 3 & 9 o'clock staining is INCORRECT?**
 - a. Can improve with blinking exercises
 - b. Increases over time
 - c. Usually unilateral
 - d. Staining of areas not covered by the contact lens

8. **Which one of the following is NOT a typical sign of solution sensitivity?**
 - a. Mucopurulent discharge
 - b. Corneal infiltrates
 - c. Punctate epithelial staining
 - d. Changes in the palpebral conjunctiva

9. **The diameter of mucin balls is typically:**
 - a. 1 to 5 μm
 - b. 5 to 10 μm
 - c. 10 to 50 μm
 - d. 50 to 80 μm

10. **Which one of the following is the MOST significant factor contributing to closed-eye corneal oedema?**
 - a. Lowered tear osmolality
 - b. Hypoxia
 - c. Increased corneal temperature
 - d. Retarded efflux of carbon dioxide

11. **Anterior eye debris can be flushed from the eye using any of the following EXCEPT:**
 - a. Sterile saline solution
 - b. Artificial tears
 - c. RGP multi-purpose solution
 - d. In-eye wetting solution

12. **Which one of the following is NOT usually a sign of CLARE?**
 - a. Diffuse stromal infiltrates
 - b. Watery discharge
 - c. Central corneal oedema
 - d. Significant epithelial staining

13. **Which statement regarding superior arcuate epithelial lesions (SEALs) is CORRECT?**
 - a. Usually 3 to 5 mm from the limbus
 - b. Stain with fluorescein but not with Rose Bengal
 - c. Usually in 3 and 9 o'clock positions
 - d. More common in female presbyopes

14. **Which statement regarding mucin balls is CORRECT?**
- Associated with pain and discomfort
 - Cause a reduction in visual acuity
 - More common in wearers with steeper corneas
 - Seen exclusively in siloxane hydrogel lens wearers
15. **The aetiology of Dellen could include all of the following EXCEPT:**
- RGP contact lenses with thin edges
 - Pinguecula
 - Rectus muscle surgery
 - Dry corneal surface
16. **Which one of the following is typical of a contact lens-induced peripheral ulcer (CLPU)?**
- Increases in size over time
 - Bowman's layer remains intact
 - Usually occurs in the central cornea
 - Anterior chamber involvement
17. **Which clinical observation is MOST likely to result in patient symptoms?**
- Corneal vascularization
 - Epithelial microcysts
 - SEAL
 - Epithelial staining associated with solution toxicity
18. **Which one of the following is MOST commonly responsible for corneal infection?**
- Pseudomonas* sp.
 - Acanthamoeba* sp.
 - Candida* sp.
 - Staphylococcus* sp.
19. **'Smile' and desiccation staining are thought to be due to:**
- Oedema of the corneal epithelium
 - Depletion of the aqueous phase of the post-lens tear film
 - Solution toxicity
 - Lens surface deposits
20. **Which one of the following is NOT a typical sign of MK?**
- Bulbar redness
 - Mucopurulent discharge
 - Altered corneal astigmatism
 - Lid oedema