

## **ASSIGNMENT 16**

**Material Covered:**  
***Units 8.2, 8.3 and 8.4 of Module 8  
of the IACLE Contact Lens Course***

## ASSIGNMENT 16

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

1. **Which one of the following is NOT a desirable factor when fitting presbyopic patients with contact lenses?**
  - a. Lower sensitivity to ghosting
  - b. Previous success with contact lens wear
  - c. Dependence on near vision correction
  - d. Large pupil size
  
2. **Which one of the following is the MOST appropriate soft lens parameters for a paediatric aphake aged 21 months?**
  - a. BOZR of 7.4 mm; BVP of +34 D
  - b. BOZR of 7.7 mm; BVP of +29 D
  - c. BOZR of 7.9 mm; BVP of +23 D
  - d. BOZR of 8.1 mm; BVP of +26 D
  
3. **Which statement regarding diffractive bifocal contact lenses is INCORRECT?**
  - a. Suited to patients requiring a moderate near addition
  - b. Success is independent of lens centration
  - c. Night vision problems are fairly common
  - d. Good vision independent of pupil size
  
4. **Which one of the following is the LEAST likely cause of a cataract?**
  - a. Splashes of household acids
  - b. Radiation exposure
  - c. Blunt-force trauma to the globe
  - d. Diabetes mellitus
  
5. **All of the following are disadvantages of conventional, aphakic, hydrogel lenses, EXCEPT:**
  - a. Poorer oxygen transmission
  - b. May exacerbate existing dry eye problems
  - c. Poor lens centration
  - d. Require more care and maintenance than RGPs
  
6. **The segment height of an alternating vision RGP bifocal lens on the eye is too high. Which of the following actions is LEAST appropriate?**
  - a. Truncate the lens superiorly
  - b. Reduce the BOZD
  - c. Reduce the lens total diameter (TD)
  - d. Steepen the BOZR

7. **Which statement regarding silicone elastomer contact lenses is INCORRECT?**
- Have high oxygen transmissibility
  - Good deposit resistance
  - Durable and able to withstand most handling and cleaning procedures
  - Lens removal may be difficult
8. **All of the following are contraindications to the use of translating, bifocal contact lenses, EXCEPT:**
- Loose lids (reduced muscle tonus)
  - Lower lid below the limbus
  - Small pupil size
  - Lower lid too far above the limbus
9. **When educating a monovision wearer about lens insertion and removal, it is best to suggest that they:**
- Insert the near lens first and remove the near lens last
  - Insert and remove the near lens first
  - Insert the distance lens first and remove the distance lens last
  - Insert and remove the distance lens first
10. **Which statement regarding the fitting of lenticulated, aphakic, rigid contact lenses is INCORRECT?**
- Total lens diameter should be at least 1.5 mm larger than the FOZD, for an effective minus carrier
  - Smaller lens diameters may reduce the severity of 3 and 9 o'clock staining
  - Usual fitting philosophy is to choose a BOZR that gives apical clearance
  - A smaller FOZD can be ordered to reduce the centre thickness
11. **Aspheric, simultaneous vision, progressive addition, centre distance (C-D) contact lenses can be configured as:**
- A spherical front surface and an oblate back surface
  - A prolate front surface and an oblate back surface
  - A spherical front surface and a prolate back surface
  - A prolate front surface and a spherical back surface
12. **Which one of the following patients would be the MOST likely to have near vision difficulties when changing from spectacles to contact lenses?**
- A 19-year old with a prescription of +7.50 D
  - A 25-year old with a prescription of -3.50 / 0.50 x 178
  - A 39-year old with a prescription of +8.75 / 0.75 X 164
  - A 41-year old with a prescription of -6.75 D

13. **Which statement regarding rigid, aspheric, bifocal contact lenses is INCORRECT?**
- The greater the surface eccentricity, the higher the reading addition
  - VA is independent of pupil size
  - Compensate for corneal astigmatism
  - Inferior decentration adversely affects distance vision
14. **The MOST significant barrier to the success of soft, translating bifocals to date has been:**
- Their failure to achieve adequate translation and comfort on the eye
  - The difficulty of manufacturing a reproducible product
  - The relatively poor oxygen transmissibility of the lenses offered
  - The small size of the potential market for such lenses
15. **What is the average power of the human cornea at birth?**
- 46 D
  - 48 D
  - 50 D
  - 52 D
16. **A presbyope, who is strongly right eye dominant, has the following spectacle Rx:**  
**RE: +1.50 D**  
**LE: +2.00 D**  
**Add : +1.25 D**  
**What would probably be the MOST suitable monovision prescription for this patient?**
- Right +1.50 D and Left +3.25 D
  - Right and Left +2.75 D
  - Right +2.75 D and Left +2.00 D
  - Right and Left +3.25 D
17. **All of the following are common complications of aphakic, RGP contact lenses, EXCEPT:**
- Deposits
  - Dehydration
  - Loss of the lens from the eye
  - Lens displacement onto the conjunctiva
18. **Which statement regarding centre-near (C-N), concentric, bifocal contact lenses is INCORRECT?**
- Successful fitting relies on good lens centration
  - Minimum clinically acceptable lens movement is desired
  - Distance vision is typically best in high illumination
  - Most C-N lenses have central zone diameters of < 3 mm

- 19. The advantages of monovision contact lens correction for presbyopia include all of the following, EXCEPT:**
- Ideal for occasional contact lens users
  - No reduction in stereo acuity
  - Less practitioner chair time is required
  - Higher success rate than many bifocal contact lenses
- 20. When fitting a RGP lens for aphakia, a lenticulated design is usually selected because lenticulation:**
- Shifts the centre of gravity forward
  - Reduces the tendency for the lens to ride high
  - Reduces the centre thickness
  - Allows the BOZD and the FOZD to be made approximately equal