PAM Examination - Minicase 1

Demographics
66-year-old white male; retired

Chief complaint
floaters OD > OS

Patient ocular history
uncomplicated cataract extraction with IOL implant OD, OS 1 year ago

Patient medical history
hypertension; hypercholesteremia

Medications taken by patient
hydrochlorothiazide; atenolol; Lipitor®; multivitamin

Patient allergy history
penicillin

Clinical findings

- **BVA:**
  - Distance:
    - OD: 20/25+1
    - OS: 20/20
  - Near (with +2.50 Add):
    - OD: 20/20-1
    - OS: 20/20

- **Pupils:** PERRL, negative RAPD

- **EOMs:** full, no restrictions

- **Confrontation fields:** full to finger counting OD, OS

- **Slit lamp:**
  - lids/lashes/adnexa: normal OD, OS
  - conjunctiva: normal OD, OS
  - cornea: clear with well healed incision OD, OS
  - anterior chamber: deep and quiet OD, OS
  - iris: normal OD, OS
  - lens: well-centered IOL with clear and intact posterior capsule OD, OS
  - vitreous: see Image 1 OD, clear OS

- **IOPs:** 10 mmHg OD, 11 mmHg OS @ 2:50 PM by non-contact tonometry

- **Fundus OD:**
  - C/D: see Image 1
  - macula: normal
  - posterior pole: normal
  - periphery: difficult to view

- **Fundus OS:**
  - C/D, macula, posterior pole: see Image 2
  - periphery: unremarkable

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Image 1

Image 2
1. Which of the following is the most likely diagnosis of the patient’s ocular findings OD in *Image 1*? *(Diagnosis)*

   a. Vitritis
   b. Chorioretinitis
   c. Vitreal syneresis
   d. Posterior vitreous detachment
   e. **Asteroid hyalosis**
   f. Weiss ring
   g. Persistent hyaloid artery
   h. Endophthalmitis

2. The findings visible in *Image 1* are most likely: *(Clinical Correlation of Basic Science Principles)*

   a. white blood cells.
   b. **calcium soaps.**
   c. condensed vitreal tissue.
   d. red blood cells.
   e. remnant embryonic vessel.
   f. retained lens material.
   g. pigment cells.

3. Which of the following is the most appropriate management for this patient’s ocular findings OD? *(Treatment/ Management)*

   a. Barrier peripheral laser
   b. Pars plana vitrectomy
   c. Oral prednisone 60 mg per day
   d. Vitreal tap and culture
   e. Intravenous Vancomycin 1g q.12h.
   f. **No treatment needed**
PAM Examination - Minicase 2

Demographics
44-year-old white male; registered nurse

Chief complaint
must turn head to keep things clear when viewing distant objects off to the side

History of present illness
Character/signs/symptoms: distance vision clear when looking straight ahead
Location: OD, OS
Severity: moderate
Nature of onset: when began wearing new glasses
Duration: 3 months
Frequency: always when looking off to the side
Exacerbations/remissions: worse while driving
Relationship to activity or function: most noticeable when driving
Accompanying signs/symptoms: intermediate or near vision unaffected

Secondary complaints/symptoms
sometimes difficult to read blue print

Patient ocular history
last eye examination 3 months ago; obtained first progressive addition lenses

Clinical findings
Habitual spectacle Rx: VA Distance VA Near (with Add)
(taken with the eyes in the position shown in Image 1)
OD: -0.50 DS 20/15 20/15
OS: -0.50 DS 20/15 20/15
+1.75 D Add

Pupils: PERRL, negative RAPD
EOMs: full, no restrictions
Confrontation fields: full to finger counting OD, OS

Cover test:
distance: orthophoria
near: 4Δ exophoria

Subjective refraction: VA Distance VA Near (with Add)
OD: plano 20/15 20/20
OS: plano 20/15 20/20
+1.25 D Add

Relative accommodation (over subjective refraction):
NRA: +1.50 D
PRA: -1.50 D

Image 1
1. Which of the following is the most likely diagnosis of the patient’s chief complaint? (Diagnosis)
   a. The distance power of the progressive addition lens is too strong (overminused).
   b. The power of the Add is too strong.
   c. The patient is having difficulty adapting to normal progressive lens distortions.
   d. The patient is looking through the intermediate corridor at distance.

2. Which of the following is the most appropriate advice to give the optician about remaking the lenses? (Related to Treatment/Management)
   a. Use a different lens material (index of refraction)
   b. Use a different power and lens centration
   c. Use a different brand of progressive lens
   d. Use a larger frame with a deeper B size

3. Based upon the results of the refraction, the TOTAL power for near at the proper reading area in the patient’s current glasses is: (Related to Diagnosis)
   a. 0.50 D too strong.
   b. 0.50 D too weak.
   c. 1.00 D too strong.
   d. 1.00 D too weak.
   e. Correct as prescribed.