

## **Ophtho Core Content**

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**❖ HN: 37-64, R:2698-2719, T 1501-1518**

### **❖ Caveats**

- **Visual Acuity**
- **? Herpes, check sensation before tetracaine**
- **High-velocity FB?**
- ❖ Blunt Trauma**
  - **Subconjunctival Hemorrhage: trauma vs. nontrauma**
  - **Hyphema:**
  - **Blowout Fracture, other orbital fractures: CT, discharge, refer**
  - **Retrolbulbar hemorrhage: lateral canthotomy**
  - **Burns, chemical exposure: Alkali: check pH 10-30' later, Morgan lenses**
  - **Actinic keratitis (alcohol "keratitis")**
  - **Anoxic keratitis**
  - **Abrasions:**
    - **patching? antibiotic choice?**
    - **corneal FB? rust ring?**
    - **eyelid eversion/FB?**
    - **lacerations?**
    - **Corneal FB/rust ring?**
    - **ulcers/erosions?**
    - **child finger with staph?**
  - **Post-traumatic iritis**
  - **Traumatic paralysis of iris**
  - **Lens subluxation**

- **Conjunctival/Scleral laceration**
- **High-velocity FB?**
- **Vitreous hemorrhage/retinal tear-separation**
- ❖ **Penetrating trauma**
  - **Lacerations: lid margins, canaliculi, septum (fat in laceration is through septum)**
  - **Sympathetic ophthalmia**
- ❖ **Conjunctival diseases**
  - **Conjunctivitis**
  - **EKC (adeno 8+19)**
  - **other viral (many)**
  - **bacterial: GC, chlamydia,**
  - **antibiotic choice: Neosporin (yechh!)**
- ❖ **Corneal:**
  - **HSV keratitis**
  - **Zoster**
  - **anoxic keratitis**
- ❖ **Lids**
  - **Hordeolum: acute occlusion of meibomian glands, Chalazion is chronic**
  - **Dacrocystitis**
- ❖ **Glaucoma:**
  - **open (chronic, slow), pilocarpine: cholinergic, adrenergic: increase outflow; beta-blocker: decrease production) vs. narrow angle: acute, (palpation of globe)**
  - **Rx: pilocarpine 2% Q15' until constricted, then 0.5% Q6H; timolol**

**0.5%; Diamox 500 mg IV/PO, 50% glycerol 200 cc or mannitol 20% 200-400 cc, then laser iridectomy.**

❖ **Visual Loss:**

- **central retinal artery/vein**
- **vitreous hemorrhage, retinal detachment, macular degeneration, cataracts**
- **Optic Neuritis: ? MS, treat with 3 days IV steroids**
- **ischemic neuritis (DM, idiopathic)**
- **amaurosis fugax**
- **giant cell arteritis (temporal arteritis)**
- **aneurysm, tumor (e.g., pituitary), infection (e.g., sinusitis): other cranial nerves**
- **cortical blindness (Anton's syndrome: denial)**
- **hysteria: flat affect**
- **malingerer: optokinetic nystagmus**

❖ **Anisocoria:**

- **CCU nurse**
- **Gary's migraine patient**

❖ **Inflammation:**

- **iritis (uveitis, iridocyclitis)**
- **Episcleritis**
- **other**