

AslamAlaikum

My name is Aktham Badia from Iraq, under the grace of Almighty Allah I have been cleared FRCS Glasgow part 3 exam that held in Amman .

The examination was average in difficulty needs study for at least 3 months.

Experience:

First day (oral)

Post segment: 1. photo shows angioid streak: describe, associations, causes of drop of vision 2. scenario of bullous RD post cataract surgery: options for tx suitable for this patient and why 3. causes of drop of vision 2 years after cataract surgery (pco, RD, glaucoma, mac edema, mac hole, late onset endo etc)

Second examiner 1. scenario of post uveitis and cmv retinitis? how to tx cmv retinitis 2. photo of rubeosis iridis : describe , causes, tx? 3. choroidal melanoma. ddx? investigations in details? tx?

Medicine/neurology

1. VF bitemporal superior quadrantanopia causes? details of pituitary adenoma
2. AF in details causes? tx? cx?
3. scenario of diplopia : work up focusing on 6th nerve palsy
4. cause of esotropia in child? mx? how to mx amblyopia?

Anterior segment:

1. photo of old man with chronic dacryocystitis and cutaneous fistula and ectropion and ptosis and brow ptosis as well? comment? causes? how to tx ectropion ?
2. photo shows corneal edema and central thinning and bullae? dx? acute hydrops. pathophysiology? tx? is this condition painful (yes) why? exposed nerve, after acute episode ends up vision can improve (yes in some patient) why?
3. photo for grade 3 pterygium with Stoker line how to mx? how to decrease recurrence rate? what if patient also has cataract which one will tx first and why?
4. scenario for traumatic cataract with iridodialysis and lens subluxation how to mx? in details??

Clinical

Anterior segment:

1. young patient examine anterior segments of both eyes; lids ok, mild conj. congestion

with corneal opacity about 2mm in lower third of cornea, and inferior thinning, Ac was ok, iris ok no cataract, other eye was normal.

Discussion : dx i told him patient might have keratoconus i have to ask about glasses, vision? asked me what if i told u this patient had vision counting finger causes? previous hydrops, glaucoma, post-segment lesion etc normal discussion due examiner was a bit difficult!

2. middle age male with keratoprosthesis and Ahmed valve and surgical peripheral iridectomy superiorly

Discussion : what are indications for keratoprosthesis? do retro illumination and tell me what u see? Patent PI and holes to fixate prosthesis!

3. old man examiner told me to give spot diagnosis!!! i started to examine in proper way starting from lid, conj, and cornea was a bit edematous with small diffuse opacities, what is yr dx? Guttata!!!!

Posterior segment

1. 11 years boy, examiner told me take indirect ophthalmoscope and examine him Bilateral macular scars with peripheral flecks. ddx for flecks? yr impression? stargard disease, investigations in details .tx.?

2. 75 old man, again examiner told me examine this patient with indirect ophthalmoscope

Hard /some soft drusen with pigmentary changes at macula. impression (dry AMD) how to follow this patient (Amsler grid) what if patient develop cnv (anti VEGF).

Neurology/motility station

1. 55 years old lady, do confrontation VF test, patient was with inferior altitudinal field defect, ddx? examine fundus (pale disc/other eye crowded disc-dx? NAION

2. 60 years old lady with facial nerve palsy. examine for other cranial nerves? how to test hearing? test motility?

3. 6 years girl with thick glasses, do cover uncover test? (fully accommodative esotropia, which eye is dominant? how to tx? dont forget to mention that along with glasses i have to mx amblyopia.

Oculoplastic:

1. young male with very long nose and malpositioned puncta? dx; centurion syndrome, how to tx this condition (cut/shortened MCT!!) , commonest cause of epiphora in this age group?

2. 15yrs girl with mild to moderate ptosis? examiner was a bit irritant ! he told me its severe i told him no its mild to moderate! why? bec visual axis not covered by lid!! ok do measurements, why u measure MRD is it important? (yes sure! why) difference between simple congenital ptosis and senile ptosis? how to tx each?

3. young male with unilateral proptosis! how to confirm its true proptosis? from above and behind! when you ll say its proptosis? difference more than 2mm or values more 20-21mm ..

Best of luck to all candidates , any questions please contact me on my email aktham87_n@yahoo.com.

Regards