

CPG DIABETIC RETINOPATHY

ASSESSMENT

PART 1

Question 1

The following are risk factors for sight threatening DR:

- a) Renal impairment (T/F)
- b) Previous stroke (T/F)
- c) CVS disease (T/F)
- d) Longer duration of DM (T/F)
- e) Hypercholestrolemia (T/F)
- f) COAD (T/F)

Question 2

List the stages of Diabetic Retinopathy:

I.

II.

III.

IV.

V.

VI.

Question 3

Please state true or false for each of the statements:

The following about Diabetic Retinopathy :

- a. Diabetic Retinopathy is the one of main cause of blindness in Malaysia
- b. Incidence and severity is only related to uncontrolled diabetes mellitus
- c. In the early stages, diabetic retinopathy almost always affect vision
- d. Regular eye examination is not a must for diabetic patients
- e. Smoking is not the risk factor for diabetic retinopathy

Question 4

The following is the criteria for severe NPDR:

- I. More than 10 intraretinal haemorrhages in each of 4 quadrants
- I. More than 20 intraretinal haemorrhages in 2 quadrants
- I. More than 20 intraretinal haemorrhages in each of 4 quadrants
- II. Venous beading in 2 or more quadrants
- III. Prominent IRMA in 1 or more quadrants

A I, IV, V

C III, IV, V

B II, IV, V

D all the above

Question 5

Name 4 Instruments that can be used in DR screening.

a) _____

b) _____

c) _____

d) _____

Question 6

Which of the following are true:

- I. Diabetic macula edema is only seen in severe NPDR or worse
- II. Diabetic macula edema can be present in any stage of retinopathy
- III. Cotton wool spots are a feature of Diabetic macula edema
- IV. Retinal thickening or hard exudates in the posterior pole are characteristic of diabetic macula edema

A I, III, IV

B II, III, IV

C II, IV

D III, IV

E all the above

Question 7

A 56 year old lady was newly diagnosed with DM in a Klinik Kesihatan. She was also noted to have uncontrolled Hypertension and renal impairment.

When will you refer her for eye screening?

.....

What is the best way to perform eye screening?

What are her risk factors for sight threatening DR?

Question 8

A 25 year old obese man was noted to have a blood sugar of 25mmol/L and BP 190/100mmHg. He was not known to have DM prior to this and was diagnosed with Type 1 DM. He is a chronic smoker.

When will you refer him for the first eye screening?

What are his risk factors for DR?.....

.....

What advise will you give him?

.....

Question 9

Please state true or false for each of the statements:

Diabetes and pregnancy:

- a. Screening should be done every 6 months
- b. Diabetic retinopathy in pregnancy can progress to severe NPDR in a short duration
- c. Pregnancy does not influence diabetic retinopathy
- d. Patient need to be screened before, during and after pregnancy
- e. Bleeding do not occur during labour

Question 10

A 30 year old lady with underlying DM for 2 years has a positive urine pregnancy test.

Does she need to be referred for eye screening?

.....

When should the first eye screening be performed?

.....

Question 11

A 38 year old lady who came to the antenatal clinic for her 1st booking in the 1st trimester of pregnancy was noted to have a high blood glucose level. She was diagnosed with Gestational DM.

- a. Does she need to be referred for eye screening?
- b. Do all patients with Gestational DM need to be referred for eye screening?

Question 12

Which of the following statements are true.

- I. In Malaysia, the commonest cause of visual loss among working adults is diabetic eye disease
- II. The prevalence of DR is not linked to the duration of DR
- III. Screening for DR and early treatment can prevent visual loss in diabetics
- IV. Good control of DM will slow down the progression of diabetic retinopathy

A. all of the above

B. I, III, IV

C. II, III, IV

D. III, IV

Question 13

How can the quality of photography be improved if the pupil is small?

a) _____

b) _____

c) _____

Question 14

Please state true or false for each of the statements

Diabetic retinopathy screening photography:

- a. Should repeat Mild NPDR every 2 months
- b. Normal fundus, schedule for repeat photo is every year
- c. Unclear photo need not be repeated
- d. Need to take four views for each eye
- e. Referral should be done only if patient is symptomatic.

Question 15

Choose the correct statements:

- I. Non-mydriatic fundus camera should be used as a screening tool for DR when possible
- II. One single fundus photo is adequate for each eye
- III. If the pupil is small it should be dilated with tropicamide 1% before taking the fundus photo
- IV. Only Doctors can perform screening and grading of DR

A I,II,III

B I, II

C I, III

D I,III,IV

E II,III,IV

Question 16

Please state the recommended follow-up schedule for the following:

- No DR
- Mild NPDR , no maculopathy
- Moderate NPDR, no maculopathy
- Mild NPDR with maculopathy
- Proliferative DR
- Advanced Diabetic Eye Disease

Question 17

A 65 year old man came to the Klinik Kesihatan for DM follow up. His FBS was 8.4 and HbA1C was 8.0. The BP was 150/90. The Fasting serum lipids showed TG 3.5, HDL 1.0 and LDL 3.3. The renal function test was normal. He was found to have bilateral mild NPDR with right maculopathy.

- a) What are the main modifiable risk factors for DR?
1..... 2..... 3.....
- b) What should the target level be for:
FBS..... HbA1c.....
BP..... TG.....HDL.....LDL.....
- c) When should he be followed up?.....

Question 18

What are the 2 main pathogenesis of Diabetic Retinopathy?

a) _____

b) _____

Question 19

State 2 features of PDR and ADED:

PDR:

- a.
- b.

ADED:

- a.
- b.

Question 20

State the timing of first screening for the patients below :-

a)Adults T1DM

b)Pregnant Women with Pre-existing DM

c)Children with T2DM

Question 21

State 2 referral criterias to the Ophthalmologist based on the level of urgency: .

URGENCY OF REFERRAL	OCULAR FEATURES
Emergency (same day referral)	1. 2.
Within 1 week	1. 2.
Within 4 weeks	1. 2.

Question 22

- What are the options of treatment for Diabetic Macula Edema?

a) _____

b) _____

c) _____

Question 23

- What are the known side effects/complication of laser treatment for PDR?

a) _____

b) _____

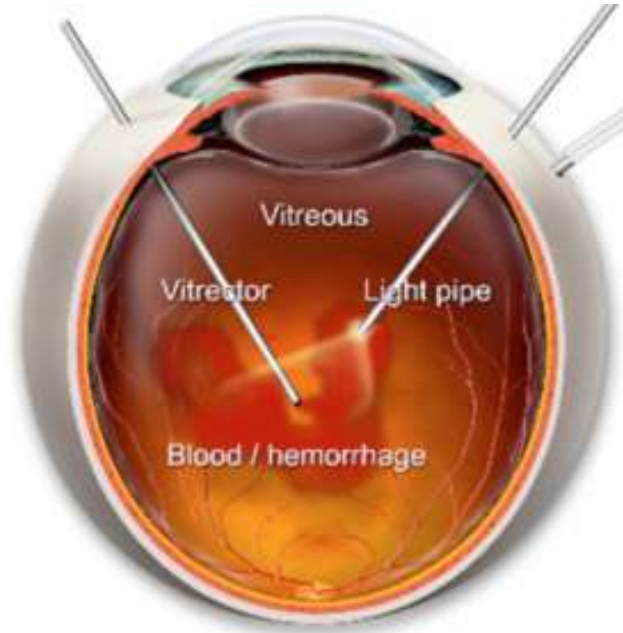
c) _____

Question 24

Please state true or false for each statement:

- a. Laser therapy is the only treatment for all stages of Diabetic Retinopathy
- b. PDR will never be improved with laser therapy
- c. Advanced diabetic eye disease cannot be treated
- d. Surgical treatment can be done for all types of diabetic retinopathy
- e. Good diabetic control can delay diabetic retinopathy

Question 25



1. Name the above procedure
2. State 2 indications for above procedure
 - a.
 - b.