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36	A	B	C	D	E
37	A	B	C	D	E
38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

Saudi Commission For Health Specialties (SCFHS)

OPTH

Ophthalmology

EDITION

Demo

QUESTIONS

9

ISSUED

September 3, 2026

Before you begin

What this is

9 practice questions for Saudi Commission For Health Specialties (SCFHS) **OPTH** , each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **OPTH**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

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QUESTION 1

SINGLE CHOICE

A contact lens wearer presents with a painful corneal ulcer, ring infiltrate, and severe pain out of proportion to clinical signs. Which organism is most likely responsible?

- ☒ **A** Acanthamoeba species
- ☐ **B** Streptococcus pneumoniae
- ☐ **C** Herpes simplex virus
- ☐ **D** Candida albicans

ANSWER A

WHY Acanthamoeba keratitis classically occurs in contact lens wearers exposed to contaminated water, presenting with severe pain disproportionate to clinical findings and a ring infiltrate.

QUESTION 2

SINGLE CHOICE

A 65-year-old woman presents with acute onset of severe eye pain, headache, nausea, and vomiting. Examination shows a mid-dilated fixed pupil, corneal edema, and IOP of 55 mmHg. What is the most appropriate immediate treatment?

- ☐ **A** Topical antibiotics and patching
- ☒ **B** Intravenous mannitol and topical IOP-lowering agents
- ☐ **C** Immediate penetrating keratoplasty
- ☐ **D** Oral corticosteroids

ANSWER B

WHY Acute angle-closure glaucoma requires urgent IOP reduction with systemic hyperosmotic agents (mannitol) and topical agents (beta-blockers, alpha-agonists, carbonic anhydrase inhibitors, pilocarpine) prior to laser iridotomy.

QUESTION 3

SINGLE CHOICE

A patient presents with sudden onset of flashes of light followed by a curtain-like visual field defect. Fundoscopy reveals a horseshoe tear with subretinal fluid. What is the most appropriate diagnosis?

- ☐ A Central retinal vein occlusion
- ☒ B Rhegmatogenous retinal detachment
- ☐ C Posterior vitreous detachment without retinal break
- ☐ D Exudative retinal detachment

ANSWER B

WHY A horseshoe retinal tear with subretinal fluid and a curtain-like field defect is characteristic of rhegmatogenous retinal detachment caused by vitreous traction on the retina.

QUESTION 4

TRUE FALSE

Occlusion (patching) therapy is an effective treatment for amblyopia when initiated during the critical period of visual development in childhood.

- ☒ A True
- ☐ B False

ANSWER A

WHY Patching the dominant eye forces use of the amblyopic eye, and is most effective when started early during the critical period of visual development.

QUESTION 5 SINGLE CHOICE

A 30-year-old woman presents with acute unilateral vision loss, pain on eye movement, and a relative afferent pupillary defect. MRI shows demyelinating lesions. What is the most likely diagnosis?

- ☐ A Ischemic optic neuropathy
- ☒ B Optic neuritis
- ☐ C Papilledema
- ☐ D Optic nerve glioma

ANSWER B

WHY Optic neuritis, often associated with multiple sclerosis, classically presents with pain on eye movement, unilateral vision loss, and an afferent pupillary defect, with demyelinating lesions on MRI.

QUESTION 6 MULTIPLE CHOICE

Which of the following systemic conditions are commonly associated with HLA-B27-related anterior uveitis? (Choose two.)

- ☒ A Ankylosing spondylitis
- ☒ B Reactive arthritis
- ☐ C Rheumatoid arthritis
- ☐ D Systemic lupus erythematosus

ANSWER A - B

WHY HLA-B27-associated anterior uveitis is classically linked to seronegative spondyloarthropathies including ankylosing spondylitis and reactive arthritis (Reiter syndrome).

QUESTION 7

SINGLE CHOICE

During phacoemulsification, a posterior capsule rupture occurs with vitreous loss. Which of the following is the most appropriate immediate management step?

- ☐ A Continue phacoemulsification as planned
- ☒ B Perform anterior vitrectomy before proceeding with IOL implantation
- ☐ C Close the wound and reschedule surgery in one week
- ☐ D Inject intracameral antibiotics and end the procedure without further intervention

ANSWER B

WHY Posterior capsule rupture with vitreous loss requires anterior vitrectomy to remove vitreous from the anterior chamber before safely proceeding with IOL placement, reducing risk of retinal traction and endophthalmitis.

QUESTION 8

SINGLE CHOICE

An elderly patient presents with inward turning of the lower eyelid margin causing lashes to rub against the cornea, associated with horizontal lid laxity. What is the most likely diagnosis?

- ☐ A Ectropion
- ☒ B Involutional entropion
- ☐ C Blepharochalasis
- ☐ D Trichiasis without lid malposition

ANSWER B

WHY Involutional entropion, common in the elderly, results from horizontal lid laxity, causing the lower lid margin to turn inward with lash-corneal contact.

QUESTION 9

SINGLE CHOICE

Which biometric measurement error has the greatest impact on the accuracy of intraocular lens power calculation?

- ☐ A Corneal curvature (keratometry) error
- ☒ B Axial length measurement error
- ☐ C Anterior chamber depth error
- ☐ D Lens thickness error

ANSWER B

WHY Axial length measurement error has the greatest effect on IOL power calculation accuracy; a 1 mm error can result in approximately 2.5-3 diopters of refractive error.