

(#109) Is it Real or No Big Deal?
2026 SECO CEE/TQ Questions
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(correct answers indicated by)

1. Which of the following is true of peri-optic neuritis:
 - a. It is never caused by multiple sclerosis
 - b. It always causes significant visual field loss
 - c. It is always treated with steroids
 - d. It is never painful

2. A positive RPR test in the setting of a negative FTA-ABS test is most likely indicative of which of the following:
 - a. Definite syphilis
 - b. False negative for syphilis
 - c. False positive for syphilis
 - d. Definite absence of syphilis

3. Unilateral optic disc elevation is LEAST likely caused by which of the following:
 - a. Ischemic optic neuropathy
 - b. Vitreopapillary traction
 - c. Perioptic neuritis
 - d. Papilledema

4. Assuming no contraindications, what is the recommended treatment for neurosyphilis?
 - a. Oral Azithromycin
 - b. Oral penicillin
 - c. IV penicillin
 - d. IV steroids

5. Which of the following OCT measurements is MOST useful when assessing for papilledema vs pseudopapilledema?
 - a. Neuroretinal rim thickness
 - b. Disc Area
 - c. RNFL thickness
 - d. C/D ratio

6. What do vitreous cells look like when imaged on OCT?
 - a. Horizontal lines
 - b. Vertical lines
 - c. Diagonal lines
 - d. Zig-zagged lines

7. Which of the following features is MOST consistent with increased intracranial pressure?
 - a. Bruchs membrane complex sloped upward toward center of disc
 - b. Vitreopapillary traction
 - c. Large optic disc area

- d. Presence of a spontaneous venous pulsation
8. Semaglutide use has a potential risk for which of the following optic disc conditions?
- a. Papilledema
 - b. Optic neuritis
 - c. Arteritic anterior ischemic optic neuropathy
 - d. Non-arteritic anterior ischemic optic neuropathy
9. Which of the following features of the OCT is most helpful to confirm the presence of vitreopapillary traction?
- a. Ganglion cell analysis
 - b. En face analysis
 - c. Average RNFL thickness
 - d. Disc area
10. Which of the following is a characteristic of non-organic eye movement abnormalities?
- a. Sustainable
 - b. Associated blinking
 - c. Pendular
 - d. Rhythmic
11. Which of the following is LEAST likely a risk factor for a non-organic clinical presentation?
- a. Emotional trauma / stress
 - b. Anxiety disorder
 - c. Middle Aged Adult
 - d. Family history of conversion disorder
12. Which of the following is NOT consistent with mild traumatic brain injury:
- a. Loss of consciousness
 - b. Concussion
 - c. Visual symptoms
 - d. Sleep disturbance
13. Which of the following is NOT associated with Chiari malformation:
- a. Photophobia
 - b. Eye Pain
 - c. Diplopia
 - d. Proptosis
14. Alzheimer's Disease is LEAST likely to be associated with which visual manifestation:
- a. Gradual reduced visual acuity
 - b. Sudden reduced visual acuity
 - c. Decreased contrast sensitivity
 - d. Decreased color discrimination

15. Visual field loss in Alzheimer's disease is mainly:
- Superior
 - Inferior
 - Nasal
 - Temporal
16. Which of the following conditions is not a neurodegenerative disease?
- Alzheimer's Disease
 - Parkinson's Disease
 - Posterior Cortical Atrophy
 - Medulloblastoma
17. Which of the following is the most likely cause of true downbeat nystagmus:
- Alzheimer's Disease
 - Syphilis
 - Chiari Malformation
 - Conversion Disorder
18. Obstructive hydrocephalus is most likely caused by a mass in which of the following locations:
- Orbit
 - Suprasellar cistern
 - Nasal cavity
 - 4th ventricle
19. Which finding is LEAST likely to warrant referral to the emergency department for urgent neuroimaging?
- Bilateral disc elevation with vessel obscuration and Paton's lines
 - Bilateral disc elevation with vitreopapillary traction and +SVP
 - Sudden change in mental status
 - Sudden onset homonymous hemianopia
20. What is the mean average peripapillary RNFL thickness in children?
- 87um
 - 97um
 - 107um
 - 117um