1) Which is FALSE about floaters?
   A) They often decrease in number with age
   B) They become more noticeable when someone mentions them.
   C) They are mostly composed of collagen fibers released from the vitreous.
   D) They appear to drift downward but they are actually floating upward.
   E) They are visible because they move across the retina.

2) Which is FALSE about the visibility of white blood cells?
   A) They are noticeable because they cast a dark shadow on the retina.
   B) They are usually most obvious against a bright blue sky.
   C) They appear as little white moving spots.
   D) The speed that they move is related to blood flow in retinal capillaries.
   E) Their presence is normal, and is not a sign of any particular clinical condition.

3) The Purkinje Tree refers to
   A) The visible shadow of one’s own superficial retinal vasculature.
   B) A very large floater left over from the hyaloid artery.
   C) A shadow of striations in the lens that is visible viewing with a pinhole.
   D) A shadow of eye lashes that is visible viewing with a pinhole.
   E) A windmill pattern in the macula caused by the Henle fibers.

4) Putting a pinhole at the anterior focal point of the eye can allow you to see
   A) Shadows of corneal spots and folds.
   B) Cataracts.
   C) Floaters.
   D) Your pupil margin.
   E) All of the above.

5) How does human vision compare to computer vision?
   A) Computers now solve all vision problems much better than humans.
   B) Computers are nowhere close to humans at any vision problems.
   C) The most advanced computer programs are just now catching up to human abilities at vision problems like face recognition.
   D) Computers cannot solve vision problems because vision is mental and computers don’t have minds.
   E) Vision is not a problem, it’s easy. See?

6) The darkest part of a shadow is called the
   A) eclipse.
   B) penumbra.
   C) umbra.
   D) muscae volitantes.
   E) dark side of the force.

7) If a patient complains of floaters that have slowly increased over the years, the most likely treatment would be
   A) None.
   B) Pars plana vitrectomy.
   C) “Floaterectomy” (partial posterior vitrectomy).
   E) YAG laser treatment.

8) When floaters increase quickly, they are sometimes accompanied by a perception of flashes. What causes the flashes?
   A) Collisions between the floaters and the photoreceptors.
   B) Static electricity discharge caused by the floaters rubbing against the retina.
   C) Traction on the retina caused by vitreal detachment.
   D) Migraine headaches from trying to focus the eye on the floaters.
   E) Rapid eye movements made trying to follow the floaters.
9) Which of the following was suggested as a way to measure interocular pressure using an entoptic phenomenon?
   A) Estimate the speed of white blood cells to indicated relative perfusion
   B) Count the number of floaters in the upper vs. lower visual field
   C) Press on the eye until you see flashes
   D) Move the eye quickly and estimate the size of the "flick phosphenes"
   E) Use a pinhole to visualize the flow of aqueous

10) The Argus II retinal implant seeks to restore vision by producing what phenomenon?
    A) floaters
    B) flick phosphenes
    C) pressure phosphenes
    D) electrical phosphenes
    E) cortical phosphenes

11) Which is FALSE regarding migraine auras?
    A) They affect vision through one eye or the other, usually not both
    B) They have a slowly moving leading edge that scintillates (a flickering “fortification” pattern)
    C) They produce a scotoma that recovers after a few minutes
    D) They are a cortical phenomenon
    E) They may precede or occur in conjunction with severe headache.

12) The perceived alignment of afterimages is used as a test for
    A) retinal detachment
    B) macular degeneration
    C) corneal dystrophy
    D) glaucoma
    E) anomalous retinal correspondence

13) Which is FALSE regarding Maxwell’s spot?
    A) It can be used to diagnose eccentric fixation
    B) It arises from absorption by the macular pigment
    C) It appears as a bright area around the fixation mark when looking at a blue field
    D) It is not usually noticed because it moves with the eye
    E) It is most easily seen with alternating illumination, like alternating blue and green fields.

14) Which of the following is caused by umbras?
    A) Angioscotoma
    B) Foveal Scotopic Scotoma
    C) Physiological Blind Spot
    D) Scintillation Scotoma
    E) Ring Scotoma

15) Which of the following may refer to an optical effect from a high plus lens?
    A) Angioscotoma
    B) Foveal Scotopic Scotoma
    C) Physiological Blind Spot
    D) Scintillation Scotoma
    E) Ring Scotoma

16) The Amsler Grid is used to detect field defects, but filling-in causes a scotoma to not be perceived. What percentage of patients with scotomas smaller than 6 degrees see the Amsler grid fill in, according to Shuchard, 1993?
    A) 5%
    B) 10%
    C) 25%
    D) 33%
    E) 75%