



## Develop a systematic approach to recognizing headache, referring emergencies



- 1. According to the most recent edition by the International Classification of Headache Disorders (ICHD-2), how many disease entities have headache as a common symptom?**

  - more than 50
  - more than 100
  - more than 150
  - more than 200
- 2. The role of an optometrist in the evaluation and management of headache is unique in that the optometrist:**

  - takes a medical history
  - measures blood sugar
  - differentiates whether the headache is vision-related
  - suspects whether the patient is malingering
- 3. All of the following are differential diagnoses for vision-related headaches, except:**

  - ocular misalignment
  - cluster headache
  - acute angle closure
  - amaurosis fugax
- 4. Small ocular misalignment can lead to asthenopia, which tends to cause headache in which part of the head?**

  - hemicranial
  - holocranial
  - frontal
  - occipital
- 5. Why may vision-related headaches be misdiagnosed?**

  - Binocular anomaly is a rare ocular condition.
  - The clinician is too busy to do a thorough binocular analysis.
  - Ocular misalignment only causes headache in children.
  - Computer use is the main cause of vision-related headaches.
- 6. Without proper instruments and tests such as gonioscopy and tonometry, intermittent angle closure may be misdiagnosed as:**

  - migraine headache with aura
  - tension headache
  - cluster headache
  - sinus headache after a cold
- 7. All of the following are headache emergencies except:**

  - tension headache
  - pituitary apoplexy
  - carotid artery dissection
  - subarachnoid hemorrhage
- 8. An expanding aneurysm of the posterior communicating artery or the basilar artery often manifests as:**

  - proptosis
  - intraocular pressure spike
  - chalazion
  - pupil-involving CN3 palsy
- 9. What is the most common cause of potentially life-threatening stroke in young adults between ages of 35 and 50?**

  - migraine with aura
  - acute angle closure
  - cervical artery dissection
  - giant cell arteritis
- 10. All of the following are clinical features of internal carotid artery dissection except:**

  - ptosis
  - miosis
  - hordeolum
  - amaurosis fugax
- 11. Select the incorrect statement about pituitary apoplexy:**

  - Apoplexy is old terminology for a stroke.
  - Acute hormonal deficiency is a result of pituitary apoplexy.
  - The most common cause of pituitary apoplexy is diabetes.
  - Sudden diplopia and headache are two of the symptoms.
- 12. At what age should giant cell arteritis (GCA) be a part of the differential diagnosis in patients with a new onset of headache and visual disturbance?**

  - older than 35 years
  - older than 45 years
  - older than 55 years
  - older than 65 years
- 13. What is still the gold standard for a definitive diagnosis of GCA?**

  - duplex scanning of the temporal artery
  - physical examination of the temporal artery
  - erythrocyte sedimentation rate measurement
  - biopsy of the temporal artery
- 14. All of the following are possible causes of idiopathic intracranial hypertension except:**

  - weight loss
  - isotretinoin
  - tetracycline
  - venous congestion
- 15. What is the pathognomonic sign of pseudotumor cerebri?**

  - optic neuritis
  - papilledema
  - retinal hemorrhage
  - macular edema
- 16. What treatment can be given to patients in-office to reduce the intracranial pressure for those suspected of having pseudotumor cerebri?**

  - acetazolamide
  - acetaminophen
  - ibuprofen
  - sugar tablet
- 17. Which class of drugs can be used temporarily to resolve brain edema in a space-occupying lesion?**

  - nonsteroidal anti-inflammatory drugs
  - fluoroquinolones
  - prostaglandin analogs
  - corticosteroids
- 18. What is the most common cause of poisoning in the U.S.?**

  - loratadine
  - morphine
  - carbon monoxide
  - omeprazole
- 19. All of the following drugs have been implicated frequently in medication-overuse headache, except:**

  - diuretics
  - triptans
  - ergotamines
  - NSAIDs
- 20. Although rare in the eye care setting, clinicians should watch for:**

  - a patient with an ocular migraine
  - a patient with convergence insufficiency
  - a patient with drug seeking behavior
  - a patient with hypertension

### PCON November 2012

#### Develop a systematic approach to recognizing headache, referring emergencies

by Len V. Hua, OD, PhD

COPE Course ID: 35749-NO

This course is jointly sponsored by PCON, the State University of New York State College of Optometry and Vindico Medical Education. It is COPE-approved for 2 continuing education credits.

#### Mail or fax your quiz answer sheet to

Vindico Medical Education, PO Box 36, Thorofare, NJ 08086

fax: (856) 384-6680

Those who submit a quiz scoring at least 70% along with their \$30 payment will be sent CE certificates within 8 weeks. This test is valid until Oct. 31, 2013.

- |             |             |
|-------------|-------------|
| 1. a b c d  | 11. a b c d |
| 2. a b c d  | 12. a b c d |
| 3. a b c d  | 13. a b c d |
| 4. a b c d  | 14. a b c d |
| 5. a b c d  | 15. a b c d |
| 6. a b c d  | 16. a b c d |
| 7. a b c d  | 17. a b c d |
| 8. a b c d  | 18. a b c d |
| 9. a b c d  | 19. a b c d |
| 10. a b c d | 20. a b c d |

#### Please print clearly

First & last name, degree \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail address \_\_\_\_\_ Birthdate \_\_\_\_\_

#### Payment Information

Enclosed is my check payable to "Vindico Medical Education" paid in U.S. dollars, drawn on a U.S. bank.

#### Please bill my

Visa  MasterCard  American Express

Account # \_\_\_\_\_ Exp. date \_\_\_\_\_ 3- or 4-digit security code \_\_\_\_\_

I authorize my credit card to be charged \$30 for this activity.

Signature \_\_\_\_\_ Name on card \_\_\_\_\_