Develop a systematic approach to recognizing headache, referring emergences

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?
   a. more than 50
   b. more than 100
   c. more than 150
   d. more than 200

2. The role of an optometrist in the evaluation and management of headache is unique in that the optometrist:
   a. takes a medical history
   b. measures blood sugar
   c. differentiates whether the headache is vision-related
   d. suspects whether the patient is malingering

3. All of the following are differential diagnoses for vision-related headaches, except:
   a. ocular misalignment
   b. cluster headache
   c. acute angle closure
   d. amaurosis fugax

4. Small ocular misalignment can lead to asthenopia, which tends to cause headache in which part of the head?
   a. hemispheric
   b. holosensory
   c. frontal
   d. occipital

5. Why may vision-related headaches be misdiagnosed?
   a. Binocular anomaly is a rare ocular condition.
   b. The clinician is too busy to do a thorough binocular analysis.

6. Without proper instruments and tests such as gonioscopy and tonometry, intermittent angle closure may be misdiagnosed as:
   a. migraine headache with aura
   b. tension headache
   c. cluster headache
   d. sinus headache after a cold

7. All of the following are headache emergencies except:
   a. tension headache
   b. pituitary apoplexy
   c. carotid artery dissection
   d. subarachnoid hemorrhage

8. An expanding aneurysm of the posterior communicating artery or the basilar artery often manifests as:
   a. proptosis
   b. intracranial pressure spike
   c. chiasma
   d. 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?
   a. migraine with aura
   b. acute angle closure
   c. cerebral artery dissection
   d. giant cell arteritis

10. All of the following are clinical features of internal carotid artery dissection except:
    a. palsy
    b. miosis
    c. homodynamic
    d. amaurosis fugax

11. Select the incorrect statement about pituitary apoplexy:
    a. Apoplexy is old terminology for a stroke.
    b. Acute hormonal deficiency is a result of pituitary apoplexy.
    c. Most common cause of pituitary apoplexy is diabetes.
    d. 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?
    a. older than 35 years
    b. older than 45 years
    c. older than 55 years
    d. older than 65 years

13. What is still the gold standard for a definitive diagnosis of GCA?
    a. duplex scanning of the temporal artery
    b. physical examination of the temporal artery
    c. erythrocyte sedimentation rate measurement
    d. biopsy of the temporal artery

14. All of the following are possible causes of idiopathic intracranial hypertension except:
    a. weight loss
    b. isoretinoin
    c. lacteouscine
    d. venous congestion

15. What is the pathognomonic sign of pseudotumor cerebri?
    a. optic neuritis
    b. papilledema
    c. retinal hemorrhage
    d. macular edema

16. What treatment can be given to patients in office to reduce the intracranial pressure for those suspected of having pseudotumor cerebri?
    a. acetazolamide
    b. acetaminophen
    c. ibuprofen
    d. sugar tablet

17. Which class of drugs can be used temporarily to resolve brain edema in a space-occupying lesion?
    a. nonsteroidal anti-inflammatory drugs
    b. fluoroquinolones
    c. progestaglandin analogs
    d. corticosteroids

18. What is the most common cause of poisoning in the U.S.?
    a. lorazepam
    b. morphine
    c. carbon monoxide
    d. omeprazole

19. All of the following drugs have been implicated frequently in medication-overuse headache, except:
    a. diuretics
    b. triptans
    c. ergotamine
    d. NSAIDs

20. Although rare in the eye care setting, clinicians should watch for:
    a. a patient with an ocular migraine
    b. a patient with convergence insufficiency
    c. a patient with drug seeding behavior
    d. a patient with hypertension

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