

NORA Fellowship Level I Open Book Examination Questions

Please type your answers under each questions following the format guidelines below to ensure a smooth and efficient review process:

1. Use Microsoft Word or a compatible document (do not save as PDF)
2. Times New Romans font or equivalent
3. 11 Font Size
4. 1.5 line spacing
5. Narrow margins of 0.5 inch top, 0.5 inch bottom, 0.5 inch left and 0.5 inch right
6. No page breaks between questions
7. No more than 2 pages of answers per question
8. Do not include this first page
9. Save document name as follows, with candidate's initials and month-day-year of submission. For example:
 - FNORA Level 1 OBQ JS 9 28 2019
10. Please email the completed answers to NORA Fellowship Committee Chair at fnoraofficial@gmail.com.

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1. Define **Post Trauma Vision Syndrome**. Briefly describe its prevalence, signs/symptoms, how you typically test for it, and at least 3 to 5 possible treatment options.
2. Define **Visual Midline Shift Syndrome**. Briefly describe its prevalence, signs/symptoms, how you typically test for it, and at least 2 possible treatment options.
3. Define **Hemianopia**. Briefly describe its prevalence, signs/symptoms, how you typically test for it, and at least 2 to 3 possible treatment options.
4. Define **Unilateral spatial inattention (visual neglect)**. Briefly describe its prevalence, signs/symptoms, list at least 2 to 3 possible tests that you know how to perform to test for it, and at least 2 to 3 possible treatment options.
5. Define **Yoked Prisms**. Discuss what vision conditions can be treated with Yoked Prisms and how Yoked Prisms are typically used in Neuro-Optometric Rehabilitation. Which professionals are licensed to prescribe yoked prisms?
6. List **at least 6 to 10 types of professionals** that you currently refer to or consult with for your patients with traumatic brain injury or stroke. Briefly explain what you would expect in terms of diagnosis, treatment, and management for each of these professionals listed.

List **3 to 5 other professionals** that you do not currently work with but may be helpful to collaborate with in the near future and how these other 3 to 5 professionals may contribute to the care of your patient.

7. **Answer the questions for the three cases below and consider the possible problems that the patient may have in addition to the history given:**

Case 1

A 52 year old female with a history of stroke six months ago wants to return to her job in retail management. She presents with a left homonymous hemianopsia, and mild left hemiparesis.

She lives alone. She has recovered from much of the relatively minor motor and speech impairment that resulted from the stroke but has a left homonymous hemianopsia and

difficulty moving her left arm.

Points to address:

1. What questions would you ask in the case history?
2. What problems do you think she might encounter in her efforts to return to work?
3. What are the most important elements of the evaluation you would perform? What specific tests are critical for stroke and/or hemianopsia?
4. What specific rehabilitation strategies/treatment would you recommend for this patient?
5. How might you coordinate treatment and utilize the services of other rehabilitation professionals in returning her to work?

Case 2

A 60 year old male patient suffered a left cerebellar stroke and is experiencing difficulty with reading and mobility. He is an insurance agent and spends a great deal of time on the computer. The letters and words run together when he reads and balance is a problem.

Points to address:

1. What questions would you ask in the case history?
2. What are the most important elements of the evaluation you would perform? What specific tests are critical?
3. What oculomotor, binocular, and/or visual perceptual test do you typically consider to perform in such a patient?
4. What specific rehabilitation strategies/treatment would you recommend for this patient?
5. Which other professionals might you consider referring this patient to for an evaluation and why?

Case 3

The patient, age 23, was involved in an automobile accident and suffered a head injury that left him with a non-concomitant binocular vision dysfunction and left fourth nerve palsy. The patient noted that he would become very disoriented in the market or in the mall. He wants to drive again and return to college.

Points to address:

1. What would you ask in the case history, especially related to the fourth nerve palsy?
2. What are the most important elements of the evaluation you would perform? What specific tests are critical for fourth nerve palsy?
3. What treatments and specific rehabilitation strategies would you recommend for this patient? What is a likely estimated frequency and time frame for your rehabilitation program?
4. Would this patient be a good candidate for strabismus (eye muscle) surgery to improve binocular vision?
5. What other professional could you consider referring this patient to for his goals of driving again and return to college.

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