

Appropriate Terminology for Answers to Image Recognition Examination Section

The following list of terms has been approved by the Examination Committee for use in questions on the ABVO Image Recognition examination. The candidates should familiarize themselves with this list in preparation for the certification examination. Though there may be differences of opinion with regard to the correct usage some of these terms, this is the terminology the Committee has determined to use on the Image Recognition exam. The term to be used on the examination is listed first, followed by synonyms with which the term is often used (these synonyms will not generally be used on the exam), followed by examples of what the term represents:

<u>TERM</u>	<u>SYNONYMS</u>	<u>EXAMPLES</u>
ABNORMALITY	conditions features lesions significant findings clinical signs	corneal edema keratic precipitate retinal detachment granulomatous inflammation hypolucent area hyperfluorescence

Note that abnormality can refer to clinical findings, histopathologic or cytologic findings, and findings in ancillary tests such as gonioscopy, fluorescein angiography, radiography or other imaging techniques, laboratory tests, etc. The question may be stated as, list the "clinical abnormality" or list the "histopathologic abnormality," etc. If asked for an abnormality, the candidates should list what they see, not the interpretation of what they see, and the abnormality should be described in as much detail and to the highest level possible from what is shown on the image. For example, the image may depict corneal edema, and if the examiners felt the image adequately depicted this lesion, the candidate would be expected to list this as an abnormality, not "corneal cloudiness" or "white area in the cornea." Note that with a fundus photograph, which clearly shows a retinal detachment, the abnormality would be listed as a "retinal detachment." However, with an ultrasound the abnormality should be listed as "hyperechoic lines radiating from optic disc and extending into vitreous". In the latter example, retinal detachment would be a **DIAGNOSIS**. The examiners take these types of terminology overlap into consideration when formulating the questions and assessing the candidate's answers. Do not assume that if the question asks for any abnormalities that one is necessarily present. If no abnormality is present, the candidate would be expected to write "normal" or "no abnormality." Likewise, the question may ask for "the most significant abnormalities" with a number of correct responses accepted. However, if a lens luxation and retinal detachment are present, listing conjunctival hyperemia instead will not be accepted.

<u>TERM</u>	<u>SYNONYMS</u>	<u>EXAMPLES</u>
DIAGNOSIS	differential diagnosis conditions interpretation disease process	anterior uveitis primary glaucoma lymphocytic/plasmacytic anterior uveitis melanoma

internal ophthalmoplegia

Diagnosis refers to an interpretation of the abnormalities or findings. The question may be qualified to ask for a "histopathologic diagnosis," "morphologic diagnosis," "clinical diagnosis," an "ultrasonographic diagnosis," etc. Again, the diagnosis should be listed in the most specific terms possible from the findings on the image and the information given in the question. Diagnosis will generally not be used to refer to a specific cause/etiology.

<u>TERM</u>	<u>SYNONYMS</u>	<u>EXAMPLES</u>
ETIOLOGIC DIAGNOSIS	differential diagnosis syndromes causes underlying cause causative agent	E. coli VKH-like syndrome trauma systemic hypertension

Etiologic diagnosis refers to a specific cause for the abnormalities or diagnosis. The question may be qualified and ask for an "etiologic factor," "etiologic agent," a "noninfectious etiologic agent," etc. An etiologic diagnosis is more specific than a clinical diagnosis.

<u>TERM</u>	<u>SYNONYMS</u>	<u>EXAMPLES</u>
PATHOGENESIS	mechanism account for reaction pathophysiology	autoimmune disorder UV light exposure type II hypersensitivity fluid vitreous entering subretinal space through retinal tear

Pathogenesis will be used to refer to the cellular events and reactions or other pathologic mechanisms occurring in the development of a disease. It is distinguished from "etiologic diagnosis" by being more specific and referring to mechanism (often cellular) rather than cause (such as a microbe, trauma, etc.).

MISCELLANEOUS TERMINOLOGY:

The following terms are also used on the image exam and are usually qualified in some fashion in terms of the specific answer requested:

<u>TERM</u>	<u>EXAMPLE OF QUALIFICATION</u>
PROGNOSIS	for remission, for globe, for life (generally the terms poor, fair, good or excellent used here)
OUTCOME	most likely, expected, long term, etc.
SIGNIFICANCE	for vision, for breeding purposes, for function of eye
THERAPY	most appropriate, several possible therapies, generally accepted therapy

DIAGNOSTIC TESTS most appropriate, physical exam, noninvasive, radiographic
IDENTIFY
STRUCTURES area generally identified on image

Sample Image Recognition Questions

EXAMPLE 1: A series of images show a Siberian Husky with a splotchy pink and black nose, corneal edema, aqueous flare, and an exudative retinal detachment. The question could ask for any or all of the following:

QUESTION

Clinical Abnormality

Most likely ocular, clinical diagnosis

Most likely etiologic diagnosis

Pathogenesis

Prognosis for complete resolution

APPROPRIATE ANSWER

vitiligo or dermal depigmentation

corneal edema

aqueous flare

retinal detachment

panuveitis (with secondary ret. detachment)

VKH-like or uveodermatologic syndrome

autoimmune destruction of melanocytes

poor

EXAMPLE 2: An image shows a horse with a typical "melting" corneal ulcer. The question could ask for:

QUESTION

Clinical Abnormality

Most likely bacterial etiologic agent

Pathogenesis

APPROPRIATE ANSWER

"melting" corneal ulcer (would also likely accept an
as

"5 mm central corneal ulcer with stromal necrosis,"

Pseudomonas aeruginosa

Collagenolytic, proteolytic destruction of cornea

EXAMPLE 3: An image shows a dog with a dense, black pigmented mass in the posterior chamber, apparently arising from the ciliary body. Questions could include:

QUESTION

Clinical Abnormality

Most likely histopathologic diagnosis

Prognosis for patient's life

APPROPRIATE ANSWER

black mass in posterior chamber

uveal melanoma

good, (<5% metastasis rate)