Introduction
The possession and use of the faculty of sight has always been one of the most cherished gifts of mankind. From time immemorial, it has been the most valued special sense.

Detection of abnormalities that cannot be visualized clinically due to opaque light conducting ocular media i.e. cornea, aqueous, lens, vitreous has been a limitation of diagnosis in ophthalmology in the past. Such circumstances occur frequently in trauma, inflammatory, neoplastic and congenital abnormalities, which obscures the view and makes thorough clinical examination impossible. Ultrasonography has emerged in recent years as a useful technique for detecting and outlining soft tissue abnormalities of the eye regardless of intervening opacities or tissues.

Ultrasonography is a painless, non-invasive, well tolerated and a non-toxic diagnostic technique. B-Scan ultrasound is primarily used because it provides two dimensional sections of the orbit, facilitating orientation and recognition of normal or pathologic ocular ultrasonic tissue patterns. It is a modality that is a safe, portable inexpensive and easily repeated thus helping to study the incidence, timing and evolution of ocular lesions. It is an ideal method for screening in ocular trauma.

There has been recently a greater awareness of the sub group constituted by such patients with corneal, lenticular or vitreal opacities, in whom a presurgical evaluation is necessary for various diagnostic purposes. In such
patients the B-Scan provides quick, sensitive and specific information regarding the status of the posterior segment. Effective medical and surgical therapy is thereby enhanced with ultrasonic evaluation. It is also valuable for postoperative follow-ups and early detection of recurrences. So, now it is often the appropriate first line investigation following clinical evaluation.

This study was conducted to review the role of real time B-Scan ultrasound in ocular and orbital pathologies.