



DERMATOLOGY MiniOSCE

Nabed

2-Aug-2023

Q1: Write the name of the disease for each lesion :

- 1. Flaccid bullae : pemphigoid vulgaris
- 2. Tenses bullae: bullus pemphigoid
- 3. Vesicles : dermatitis herpetiform
- 4. Target lesions: erythema multiforme

- Lichen planus variants that can cause SCC:
- Lichen sclerosis
- Hypertrophic
- Ulcerative

Q2: Definition of :

- *Beau's lines : single horizontal ridge caused by severe short term illness such as heart attack and measles
- *Pterygium : the cuticle grows forward over the base of the nail and attaches itself to the nail plate
- *Onycholysis : nail plate separate from nail bed
- *Halo nevus : mole surrounded by a white ring
- *Burrow : Slightly elevated, grayish, tortuous line in the skin ended by papule
- *crust: Dried exudates such as pus or blood
- *Nymph : eggs brown in color containing the louse
- * Anonychia : absence of nail

- Non treponemal syphilis tests: الدكتور طلب الأسماء كاملة
- RPR rapid plasma reagin
- VDRL venereal disease research laboratory

Q3: Causative organisms of:

- *Hand foot mouth disease: **Coxsackie A16 virus**
-
- *Herpes zoster : **Varicella zoster virus**
-

Q3: first line treatment of :

- *Urticaria : 2nd generation anti-histamine
-
- *Freckles : sun protection
-
- *Alopecia Areata in adult: Intralesional topical steroid
-
- *adult with scabies : 25% benzyl benzoate lotion 3 applications between each of them 12 hours and repeat after 1 week

Q4: 2 systemic treatment of psoriasis :

- Phototherapy (PUVA and NB-UVB)
- Methotrexate (low weekly dose)
- Retinoids (Vit.A derivatives : Acitritin)
- Cylosporin
- Apremilist
- Biological treatment(Adalimumab, Etanercept, Secukinumab,Ustekinumab and others)

Q5: 5 variants of warts:

- Common wart
- Genital wart
- Plane warts
- Filiform warts
- Periungual wart:

Q5:

Three skin manifestation of SLE:

1. Malar rash
2. Photosensitivity
3. Discoid skin lesion
4. Urticaria, vasculitic urticaria
5. Periungual telangiectasia and erythema
6. Livido reticularis

Q : mention the organisms causing these diseases:

- **Hand Foot Mouth Disease:** Coxsackie A16 Virus
- **Chronic paronychia:** Candidiasis

Station 9

- **Mention 2 clinical features of pityriasis rosea?**
 1. Herald patch
 2. Collarette scale
 3. Christmas tree distribution

- Causative organisms of :

*

*Kerion: Dermatophyte (Cattle ringworm)

9-Mention 2 variants of Acne (severe forms) indicate systemic Vit A Derivative :

- 1 Acne Fulminans
- 2 Acne Conglobata
- 3 Acne Vulgaris with scar Tendency

** inheritance of lamellar ichthyosis:

Autosomal recessive

inheritance of ichthyosis vulgaris

dominant

- DX : atopic dermatitis
- Mention 3 symptom that patients suffer from ?
Dryness , itchy , Specific
eczematous lesions
especially in flexures



-Two drug induced acne

Corticosteroids

Lithium

Vit. B12

Dermatology Mini-OSCE

30/ 8 /2023

By : malak hamasha

Station 1

1. Mention 2 systemic disease associated with sweet syndrome (acute febrile neutrophilic dermatosis) ?

- RA

- SLE

- DM

2. Mention 2 oral antifungal ?

- Fluconazole

- Itraconazole

Station 2

- Write the name of the disease for each lesion :

1.Flaccid bullae : pemiphegoid vulgaris

2.Tenses bullae: bullus pemiphegoid

3.Vesicles : dermatitis herptiform



4.Target lesions: erythema multiforme

Station 3

1. Write 2 contraindication of using systemic isotretinoin ?

- Pregnancy
- Liver disease

2. Most common site of these types of endogenous eczema :

- A. Dyshidrotic eczema  hands (between fingers)
- B. Stasis eczema  legs

Station 4

- Definition of :
 - Beau's lines : single horizontal ridge caused by severe short term illness such as heart attack and measles
 - Pterygium : the cuticle grows forward over the base of the nail and attaches itself to the nail plate
 - Onycholysis : nail plate separate from nail bed
 - Anonychia : absence of nail

Station 5

Define these :

- Halo nevus : mole surrounded by a white ring
- Burrow : Slightly elevated, grayish, tortuous line in the skin ended by papule
- crust: Dried exudates such as pus or blood
- Nymph : eggs brown in color containing the louse

Station 6

1. Causative organisms of:

A. Hand foot mouth disease: **Coxsackie A16 virus**

B. Herpes zoster : **Varicella zoster virus**

2. 5 variants of warts :

1. Common wart

2. Genital wart

3. Plane warts

4. Filiform warts

5. Periungual wart

Station 7

- first line treatment of :
 - Urticaria : 2nd generation anti-histamine
 - Freckles : sun protection
 - Alopecia Areata in adult: Intralesional topical steroid
 - adult with scabies : 25% benzyl benzoate lotion 3 applications between each of them 12 hours and repeat after 1 week

Station 8

1. 2 diagnostic test of gonorrhea :

- Urethral discharge smear and culture

2. Mention 2 mucus membrane changes occur in Oral lichen planus ?

- Pigmented

- Reticular

Station 9

1. Write the cause of :

A. Syphilis  Treponema pallidum

B. Tinea incognito  dermatophyte (prolonged use of topical steroids) اكتبوا الجوابين احتياط

2. Write 2 skin manifestation with AIDS ?

Kaposi's sarcoma

Hairy leukoplakia

Station 10

1. Spot diagnosis :

Psoriasis inversa

2. Write 3 ddx :

-lichen plans

-fungal infection

- Eczema

بعرفش اذا الإجابة هيك بس هاي اجاباتي



Dermatology nabed

4/10/2023

Salma almawajdeh

Leen mbaidin

Fuad aljawazneh

1) Mention 2 systemic manifestations of acne fulminans :

- fever
- osteolytic lesions

2) Mention most common location for :

- pityriasis rosea : trunk or neck
- Discoid (nummular) eczema : extremities

3) Mention 3 causes for recurrent boils (Furunculosis) :

1. Health care worker carrier MRSA
2. Anemia
3. Diabetes
4. Obesity

4) Describe :

- oil-drop lesion : yellow or salmon circular discoloration of nail seen in psoriasis
- Onycholysis: Nail plate separates from the nail bed

- 5) mention poor prognosis markers of alopecia areata :

- Childhood onset of disease

- Atopy.

- Ophiasis (band of alopecia in occipital region)

- Nail dystrophy

- Family history of other autoimmune disorders

- Presence of autoantibodies.

6) Clinical manifestations of netherton syndrome :

Ichthyosis linearis circumflexa , Eczematous pruritic plaques due to atopy,
Hair shaft abnormality since infancy (bamboo hair) , Scalp alopecia

7) Mention 2 Skin manifestations of AIDS:

- Severe seborrheic dermatitis
- Eosinophilic folliculitis of AIDS

8) Skin manifestations of Dermatomyositis:

- Periungual telangiectasia and erythema
- Heliotrope erythema
- Gottron's papules
- Photo distributed Poikiloderma (Triad of: Atrophy + Hyperpigmentation + Telangiectasia +/- Hypopigmentation)

9) What are the characteristics of impetigo lesions ?

- Pustules and honey-colored crusted erosions

10) Characteristics of guttate psoriasis:

-Characterized by small, scattered, pink, oval (drop-shaped) papules with silvery scaling that usually appear on the trunk and extremities

11) what is the causative agent of :

-syphilis : *Treponema pallidum* spirochete

-Majocchi granuloma : Dermatophytes

12) Treatment of crusted scabies :

-repeated oral and topical treatments over several weeks or longer.

13) Pic of urticaria :

-what's the primary lesion : wheal or hives

- skin tests needed : Skin prick test and RAST (radioallergen sorbent tests) or CAP fluoroimmunoassay

- primary lesion of Urticarial vasculitis urticaria-like plaques (wheal or hives)

14) Pic of groin erythematous lesion

- diagnosis : erythrasma

-ddx : psoriasis , candida infection

15) Describe the disease pattern of telogen effluvium:

-following a number of stimuli the majority of hair follicles may enter the resting phase (telogen) at the same time (synchronously) resulting in diffuse shedding approximately 2 months after the triggering event, often described as the hair 'falling out by the roots. This is usually an acute self-limiting phenomenon, usually resolving within 6 months

16) Mention 2 blood tests of lichen planus

- fasting blood glucose - lvt (hep.c)

17) Difference between common insect bite and sand-fly :

-Insect bites are localized, often clustered in groups of 3–5 lesions, and they appear in crops. Bites persist for days. Close inspection reveals a central punctum

Sand fly:Painless small red papule or nodule

18) Difference between chilblains and Raynaud's phenomenon:

-chilblains An itchy, sore, tingly, red area resulting in broken skin , when Prolonged exposure to cold and poor circulation

- Raynaud's phenomenon :fingers that turn pale or white then blue when exposed to cold, then red when the hands are warmed as a result of systemic disease

Nabed

Done by:

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Q.1 Define :

A.pytregium: an abnormal winged like growth of skin (living tissue)on the nail plate

B.condyloma acuminatum :is a genital wart caused by HPV

Q2.What is the indication of uses wood's light (cause+color)

1.Tinea capitis :bright green

2.Tinea versicolor:golden yellow

3.Erythrasma: coral pink

4.pitted keratolysis: coral red

Q3.One disease treated by intralesional steroids

Alopecia areata

Q4.Types of pediculosis

1.pediculus humanus var. capitis» The head louse

2.pediculus humanus var humanus» The body louse

3. Phthirus pubis» The pubic louse

Q5.complication of Gonorrhea

- 1.epididymitis, orchitis and proctitis in male**
- 2. salpingitis and PID in females**
- 3.infertility**
- 4.Gonococemia**

Q6.What is the causative agent of:

- a. bullous impetigo: staphylococcus aureus**
- b. erysiples: staphylococcus aureus**

Q7.Primary lesion of:

a. psoriasis: plaques

b. acne vulgaris: comedones

Q8.Raynaud's phenomenon color change in order

White» blue» red

Q.9.Skin site of:

- a. Dishydrotic eczema: Hands, feet
- b. atopic dermatitis on children: flexures
- c. seborrheic dermatitis on adults: nasolabial folds

Q.10 Non invasive test in clinic for:

- 1.Kerion: wood's light and KOH
- 2.contact allergic dermatitis: patch test

Q11.Two clinical manifestation of lamellar ichthyosis:

- 1.scarring alopecia
- 2.Ectropion, Eclabium

Q12.Three causes of postinflammatory hypopigmentation:

- 1.Tinea versicolor
- 2.pityriasis alba
- 3.psoriasis

Q13.Causes of bullous (Two metabolic, one infectious):

1.DM 2.?? 3. ??

Q14.skin manifestation of parathyrodism??

Q15. Four difference between herpes zoster and herps simplex

1.casetive agent: zoster by varicella zoster virus

herpes by HSV 1,2

2.herpes zoster: painful, herpes simplex: painless

3.Herpes zoster presents on dermatomal disturbution

4.primary lesion of herpes simplex is blister,

herpes zoster is vesicles and blister

Q16.

a. describe the picture:

b. D.Dx:

1.secondary syphilis

2.Lichen planas

3.Guttate psoriasis

