

# fifth- year Pediatrics mini-osce

17-10-2019

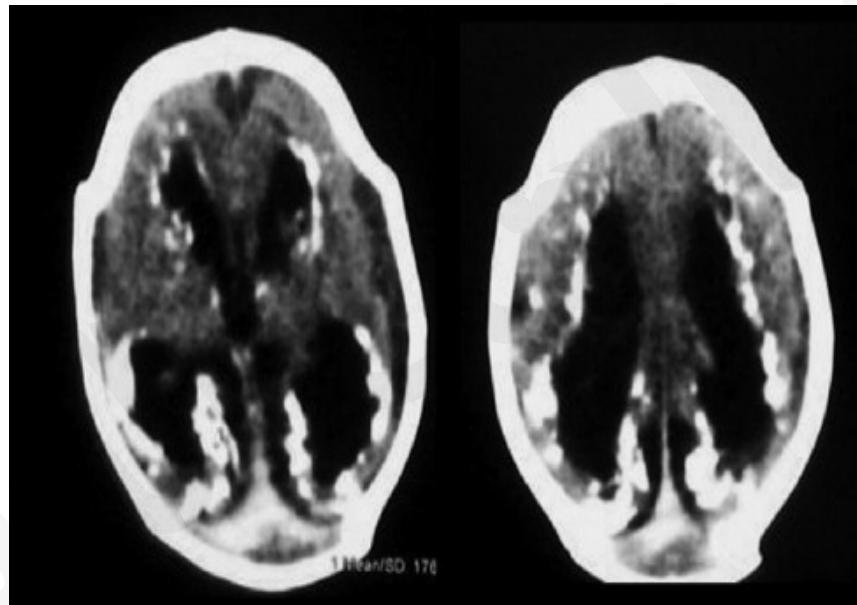
Group A

**Q1 :What is the diagnosis?**

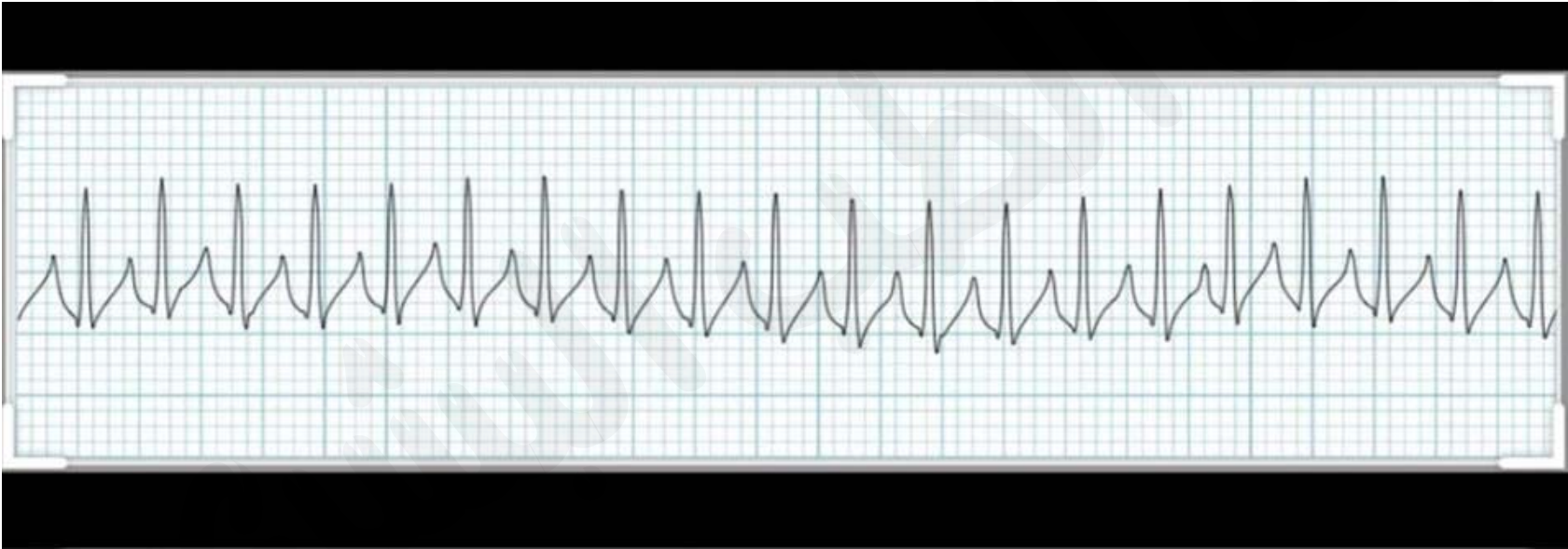
**-Duodenal atresia.**



Q2:What is the diagnosis?  
-Congenital CMV.



Q3:What is the diagnosis?  
-Supraventricular tachycardia.



Q4: A: What is the diagnosis?

-Chickenpox.

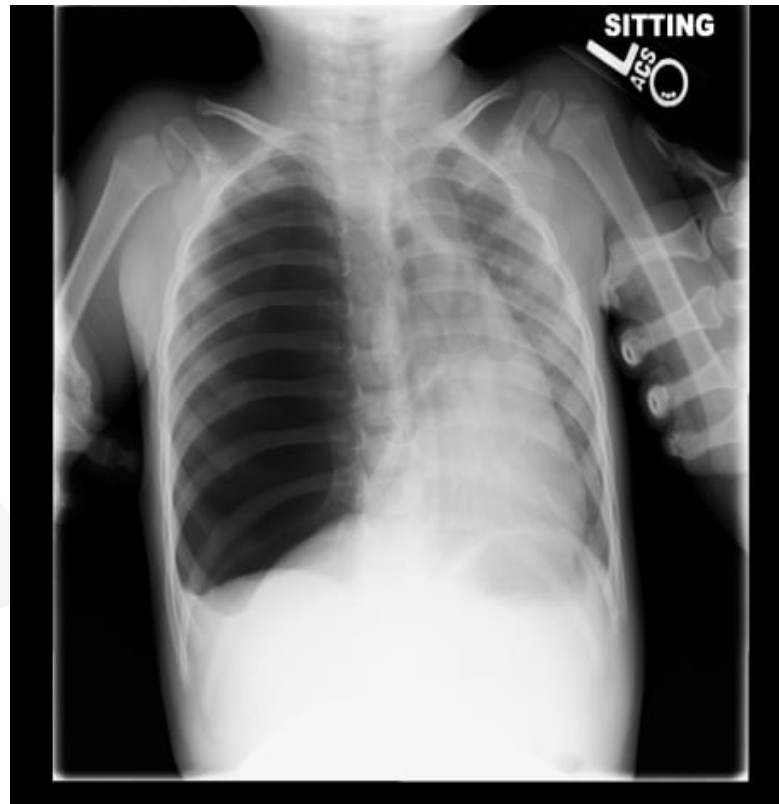
B:What is the causative microorganism?

-Varicella zoster.



Q5:A:what is the diagnosis?  
-Right-sided pneumothorax.

B: Mention one cause?  
-Trauma.



Q6: The case was about dehydrated child his weight is 10 kg, he was hypotensive for 10 days.

A:What is the sign?  
-Skin retraction.

B:What is the initial fluid to give?  
-Normal saline.

What is the amount ?  
- 20-30 ml/kg.



Q7: A: Name this neurological test?  
-Rebound test.

B: What does it assess?  
-Cerebellar function.





Q9 : The history was about child with red urine and hypertension of 3 days duration.

A:What is the diagnosis?

-Acute nephritic syndrome.

B:Mention tow abnormalities in the urine?

-Proteinuria.

-RBCs,RBC casts.



Q9:A: What is the causative microorganism?  
-Neisseria meningitidis.

B:What does it stain?  
-Red gram-negative diplococci



Q 10:History of cyanosis and FTT.

A: What is the diagnosis?

-TOF.

B:mention tow known complications?

-Heart failure, clubbing.



# PEDIATRICS MINI OSECE

Group B

Soul batch 2021

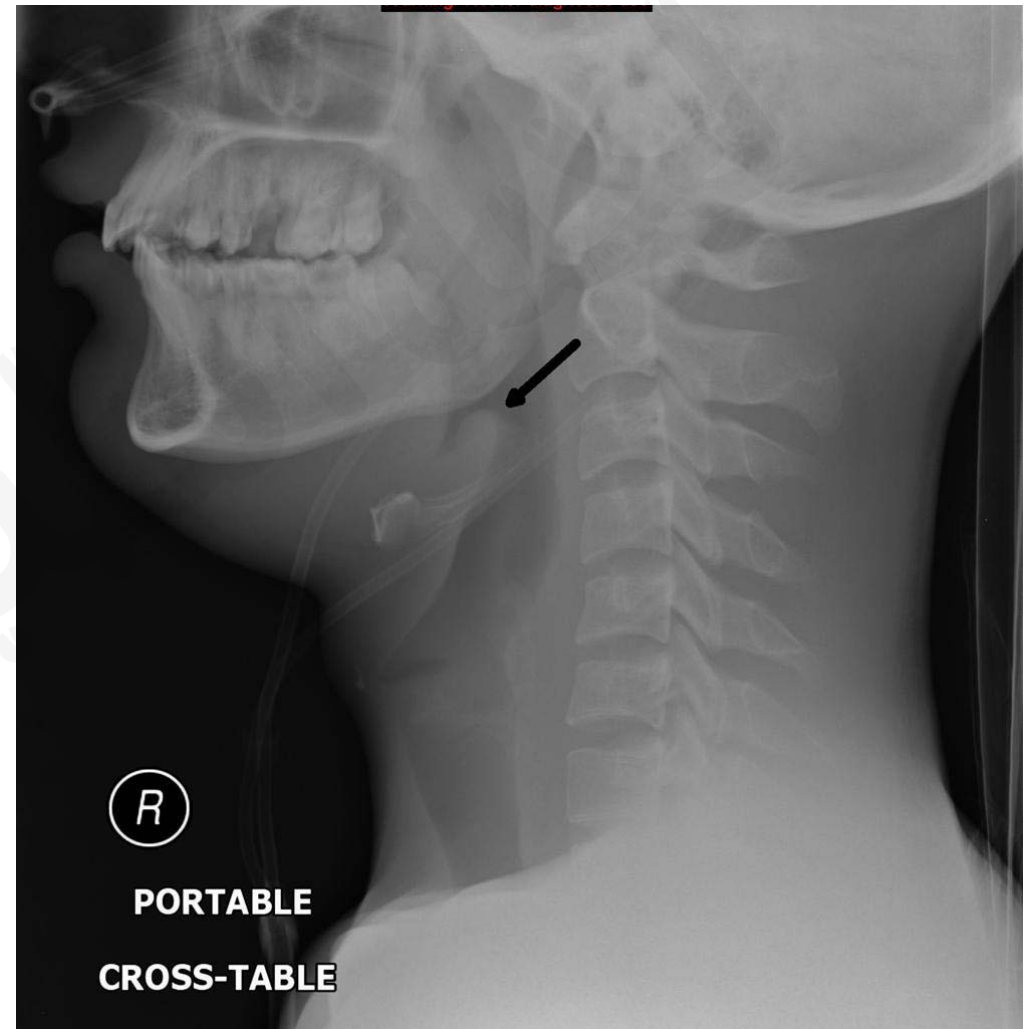
3 year old unvaccinated  
presented with SOB and  
stridor

- **What is your diagnosis?**

Epiglottitis

- **What is the most important  
step in management?**

Intubation in O/R



scaly rash around the mouth, with red urine, headache, BP 140/100

- **What is your diagnosis?**

PSGN

- **What is the prognosis/poor or good?**

Good



- **What does it show?**

Air fluid levels

- **Name one cause?**

Intestinal obstruction



- **What is this test called?**

Tandem test/heel to toe test

- **What does it for?**

Cerebellar function





- **is this doctor trying to test for?**

Asymmetrical tonic neck reflex

- **At what age does it disappear?**

3-4 months





- **Xray of RDS, what is your diagnosis?**

Respiratory Distress Syndrome

- **What substance is administered through endotracheal tube?**

Surfactant



Newborn full term, severe cyanosis, no murmur, single S2, no tachypnea.

- **What is the xray finding?**

Egg on a string

- **Diagnosis?**

Transposition of great vessels

الصورة كانت زي الي قدامكم فممكن  
تلخبطها مع ال TOF بس الإجابة بتبين من  
الهيستوري انو ال cyanosis بيبيش من  
أولها او بكون طفيف



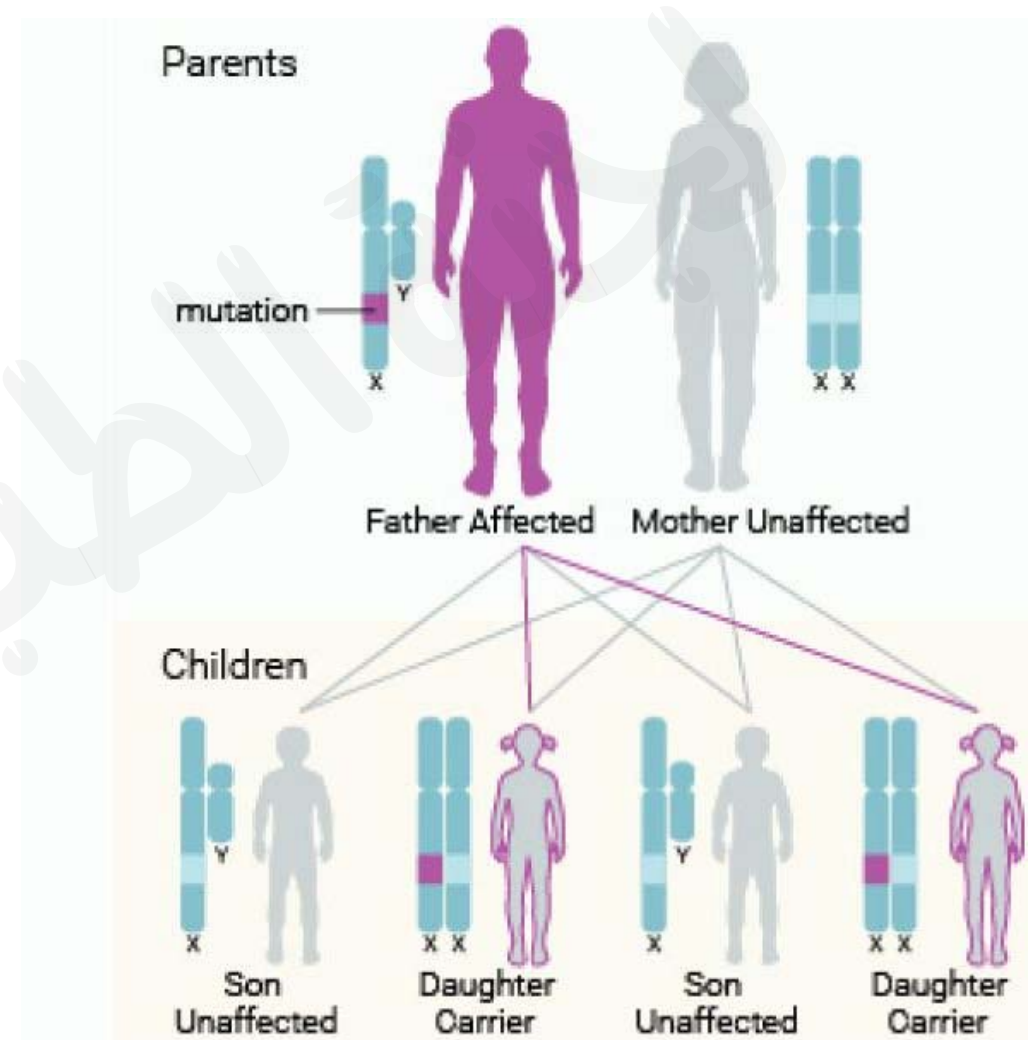
6 year old boy presented with acute onset of hematuria, jaundice, pedigree chart showing mode of inheritance

- **What is the mode of inheritance?**

X-linked recessive

- **Mention the disease?**

G6PD



- **What is the device used in the picture?**

Spacer

- **Name one medication used?**

SABA



Mini-Osce Pediatrics  
Soul Batch  
Group C

- 1-CBC showing ? Iron deficiency anemia.
- 2-uncompensated respiratory acidosis with hypoxia.
- OSCE > chronic diarrhoea.

<p><b>Q: Breast fed one year infant with this CBC:</b></p> <p><b>1. What is your Dx?</b> Iron Deficiency Anemia</p> <p><b>2. Mention 2 further tests to confirm your diagnosis:</b></p> <p>a. TIBC</p> <p>b. Serum ferritin level</p> <p>c. Transferrin saturation ratio</p>	<b>WBC</b>	5.5	
		%	#
	<b>NE</b>	54.7	3.0
	<b>LY</b>	34.1	1.9
	<b>MO</b>	7.5	0.4
	<b>EO</b>	3.0	0.2
	<b>BA</b>	0.7	0.0
	<b>RBC</b>	4.28	L
	<b>HGB</b>	9.7	L
	<b>HCT</b>	29.9	L
	<b>MCV</b>	69.7	L
	<b>MCH</b>	22.6	L
	<b>MCHC</b>	32.4	L
	<b>RDW</b>	18.4	H
<b>PLT</b>	331		
<b>MPV</b>	8.8		



- High arm blood pressure with low lower limb blood pressure.
  - 1- What is the differential? Coarctation of Aorta
  - 2- What is the sign in the picture? Radiofemoral delay

- Hx of delayed meconium passage + picture of finger clubbing.
  - 1- What is the differential? Cystic Fibrosis
  - 2- What is the mode of inheritance? AR
  - 3- Most common gene? CFTR

- X-ray showing boot shaped heart
  - 1- What's the differential? Tetralogy of Fallot
  - 2- Finding on ECG? Right axis deviation

- A child with fever of 8 days duration and a picture showing swollen lymph node in the neck and abdominal distention (hepatosplenomegaly)
  1. give two DDx
  2. Mention two lab tests that help in diagnosis



**Cruises**  
**10-11 months**

**Skips**  
**5 years**



## Parachute Reflex

Appears at **6-9 months**, and lasts for the rest of life



**Q: picture of patient with non-blanchable purpuric rash in the lower limbs:**

**Q1: what is the Dx?**

- HSP

**Q2: mention 2 clinical findings in this pt?**

- 1) Arthralgia
- 2) Abdominal pain
- 3) Renal manifestation (hematuria)

**Q3: name 2 important tests you will order?**

- 1) KFT
- 2) Skin biopsy from the lesion
- 3) Urine analysis

**Q4: if the pt has a toxic appearance with a rapidly evolving rash what will be your Dx?**

- Acute meningococemia

**Q5: Name 2 complications?**

- Nephritis
- Intussusception



**Final mini-OSCE**  
**5<sup>th</sup> year**  
**Hashemite university**

**09 / 06 / 2020**

Group D Online Exam



## **Question 1**

**A 2-day-old baby required this form of therapy.**

**Mention one disease (situation) that may require this form of therapy.**



## Question 2

**One-year-old child ingested the object shown.**

**What is the first line of management?**



### Question 3

Give the developmental age of the child shown in the picture.



## Question 4

Name one disease associated with the finding shown in the picture.



## **Question 5**

The examiner in the picture is assessing the tone of this infant.

Give the developmental age where this response starts normally.

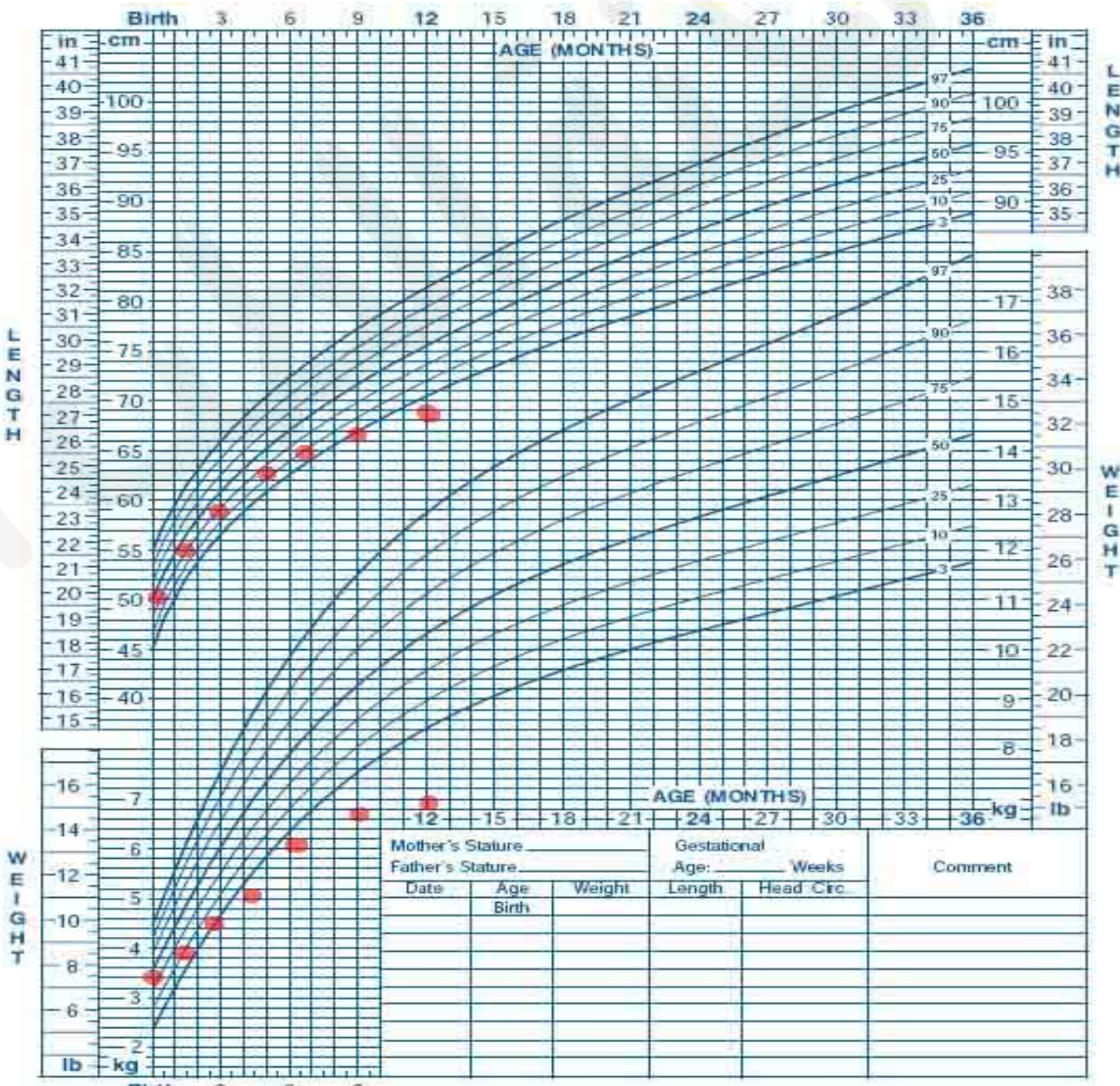


# Question 6

This is the growth chart of a 3-year-old child with nasal polyps as shown.



What disease you should rule out?



## Question 7

This test is performed in a patient with Guillain-Barre syndrome.

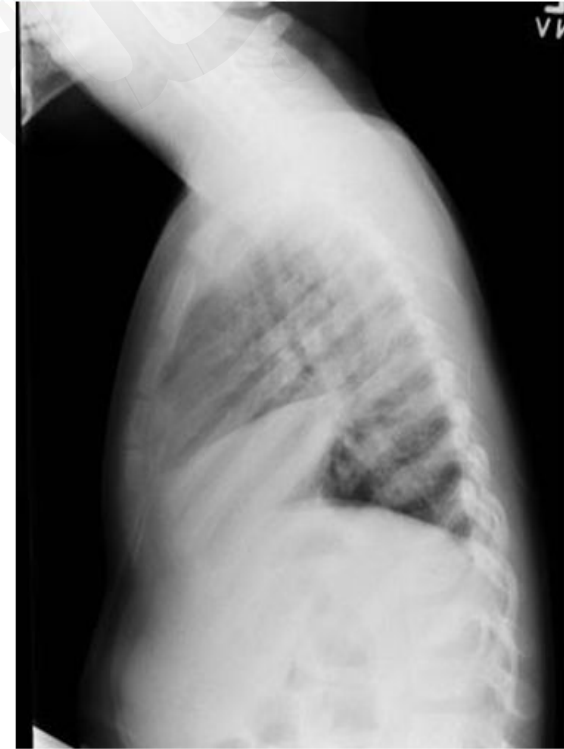
What is the expected response ?



## **Question 8**

**This is a chest X-ray of a 3-year-old child who presented with cough and high fever.**

**What is your diagnosis?**





## Question 9

**Describe the posture you see in this infant.**



## Question 10

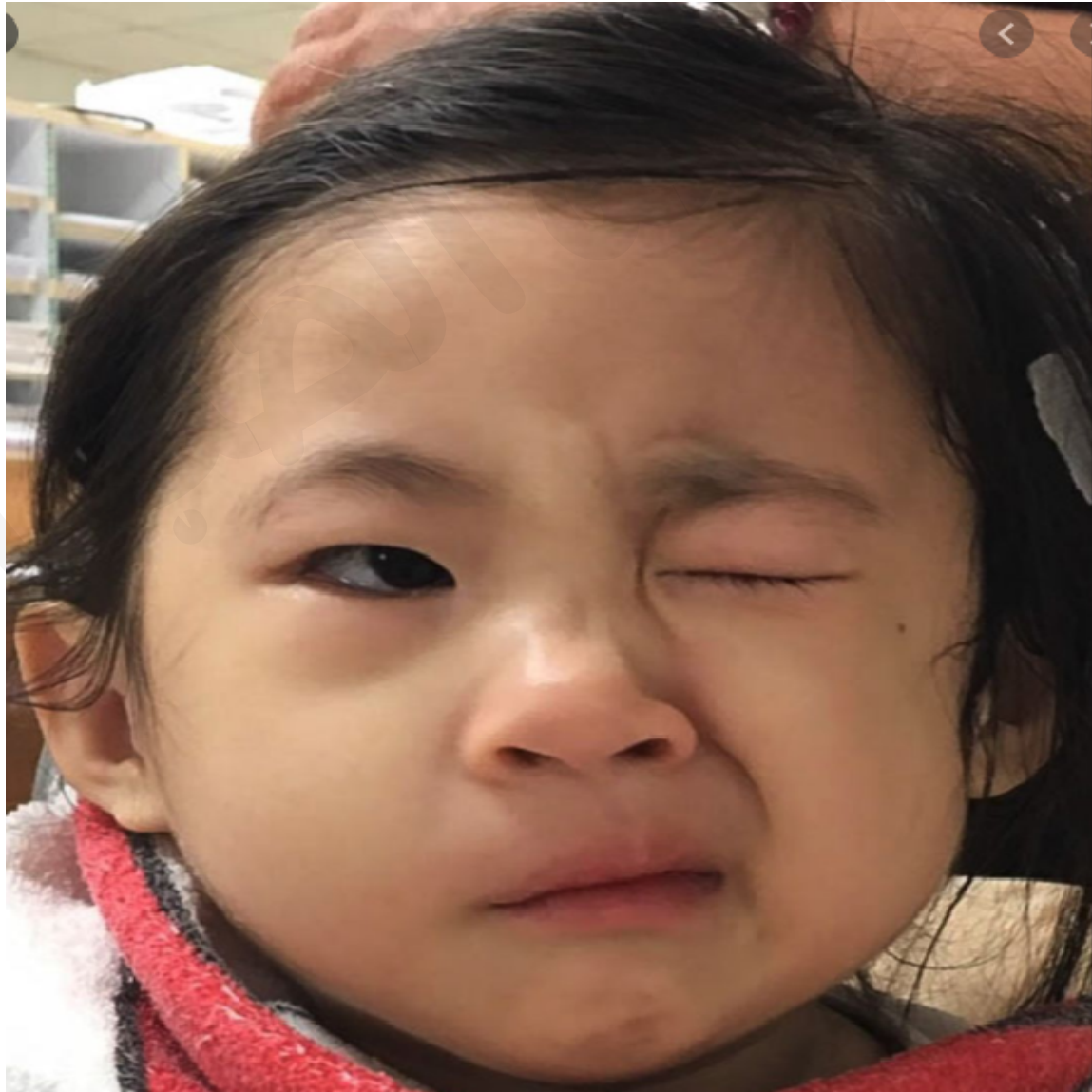
**Looking at the  
nails of this  
patient.**

**What is your  
diagnosis ?**



## Question 11

What is your diagnosis according to the findings seen in this picture ?



## **Question 12**

**This 14-year-old girl presented with photophobia and this rash.**

**A. What is your diagnosis?**

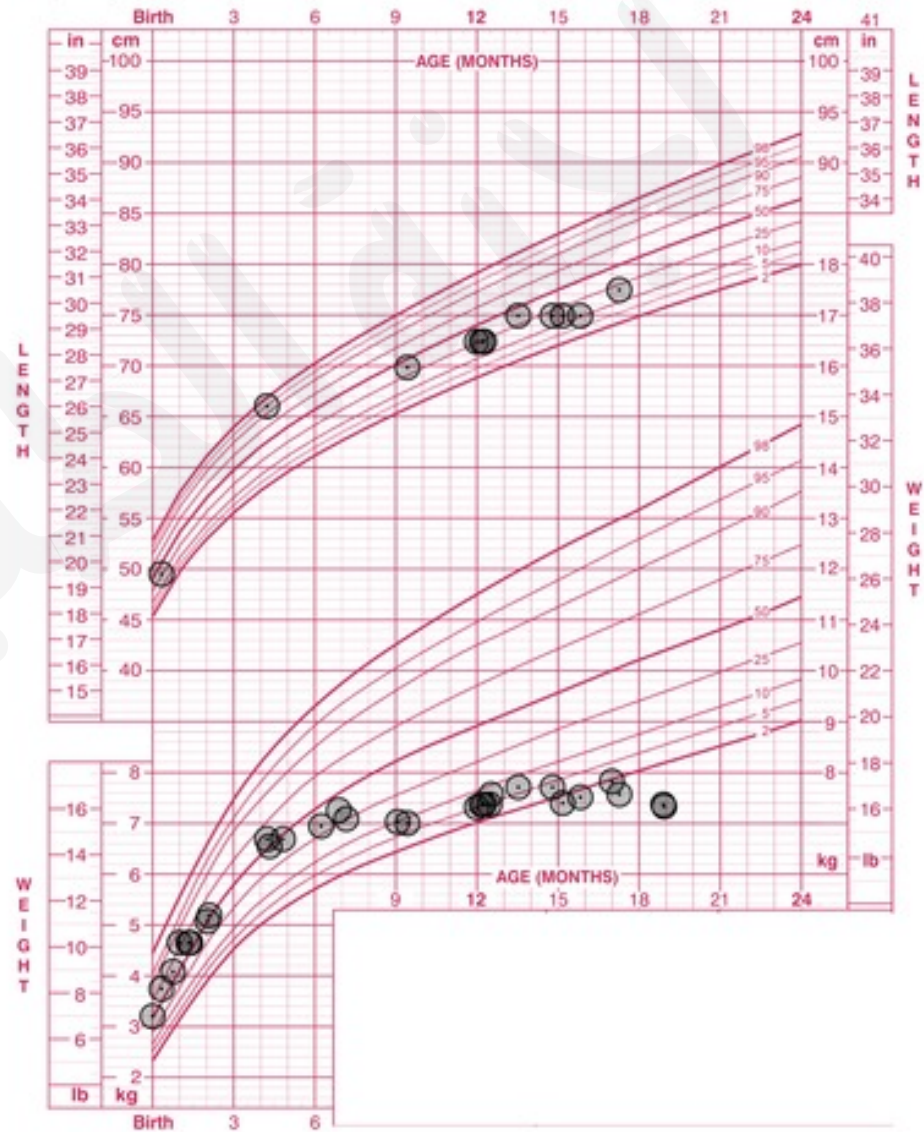


**Question 13**

**This is a growth chart for an infant girl (for weight and length).**

**What is your diagnosis?**

A Body Length and Weight



## **Question 14**

**Five-year-old boy presented with fever.**

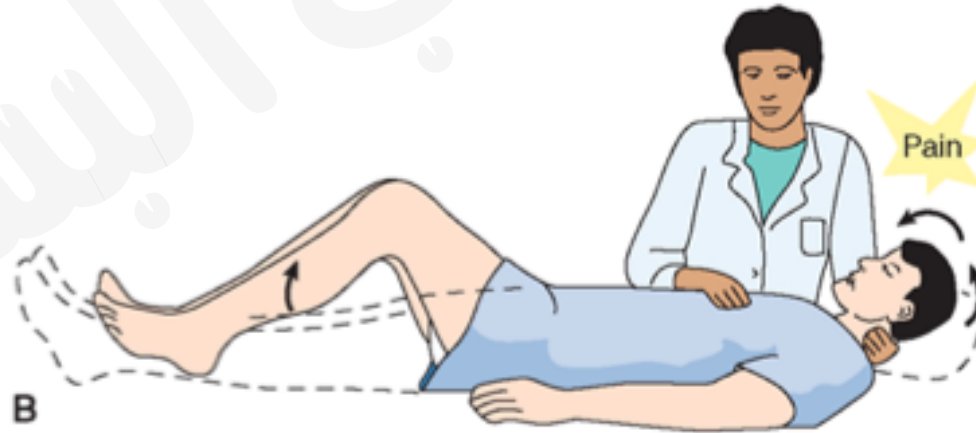
**The picture show findings in his throat.**



**mention the most likely bacterial pathogen in this situation?**

## Question 15

What is the name of the sign (test) you see in the picture?



## **Question 16**

**This boy is known to have cyanotic congenital heart disease. He prefers to sit-down in this posture (as shown) when the cyanosis is exacerbated & when he gets shortness of breath.**

**What is the most likely diagnosis of his cardiac anomaly?**





## Question 17

**In this is a 10-year-old girl.**

**A. What is the finding you see in the picture?**



## Question 18

**This is a 2-day-old full term newborn. He developed central cyanosis few hours after birth.**

**Mention one differential diagnosis.**



## Question 19

This is a one-month-old boy.

The picture shows the way he vomits.

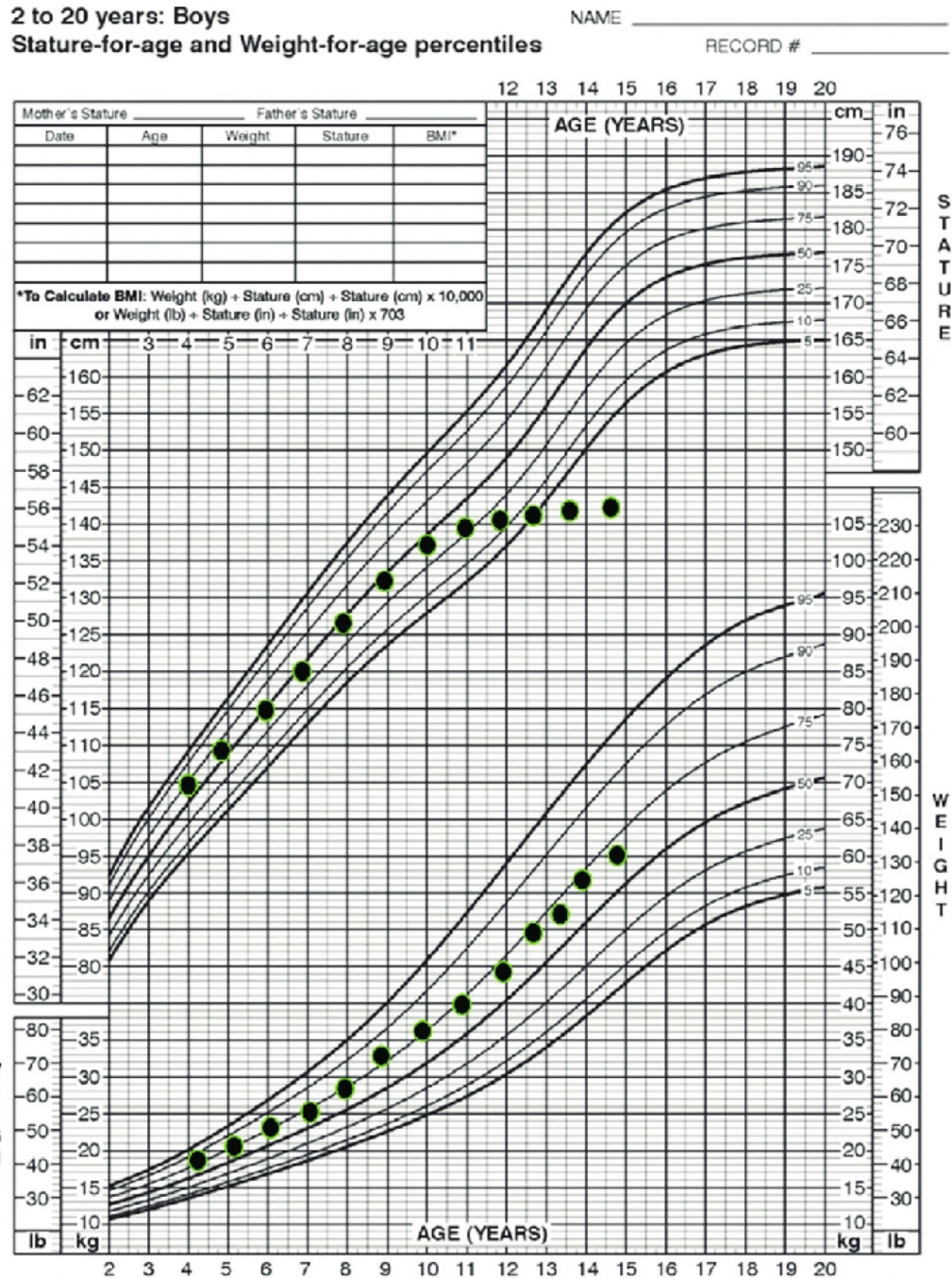
His venous blood gases revealed metabolic alkalosis.

What is the most likely diagnosis?



# Question 20

What is the main finding that you can see in this growth chart ?



## Question 21

This is a 2-month-old infant with Down Syndrome. He presented with shortness of breath. Upon exam, he had a systolic murmur, but no cyanosis.

Mention the most common anomaly leading to the finding that you can see in his chest x-ray ?



## Question 22

This is a 5-year-old child who presented with fever, cough & shortness of breath.

What do you see in his chest X-ray ?



## Question 23

**This is a very sick 4-year-old boy who had fever, neck stiffness, and sudden appearance of this rash.**



**What is the most likely causative organism?**

## **Question 24**

**The mother of this newborn baby had gestational diabetes.**

**Mention one possible complication expected to occur in this newborn.**





## **Question 25**

**This child presented with periorbital swelling. He was found to have hypertension.**

**The lower slide shows his urine analysis (microscopy).**

**What is your diagnosis?**



## Question 26

**This 3-year-old child presented with anemia.**

**What is your diagnosis ?**



## Question 27

- This CBC is for a 1 year old Breast fed infant. What is the diagnosis?

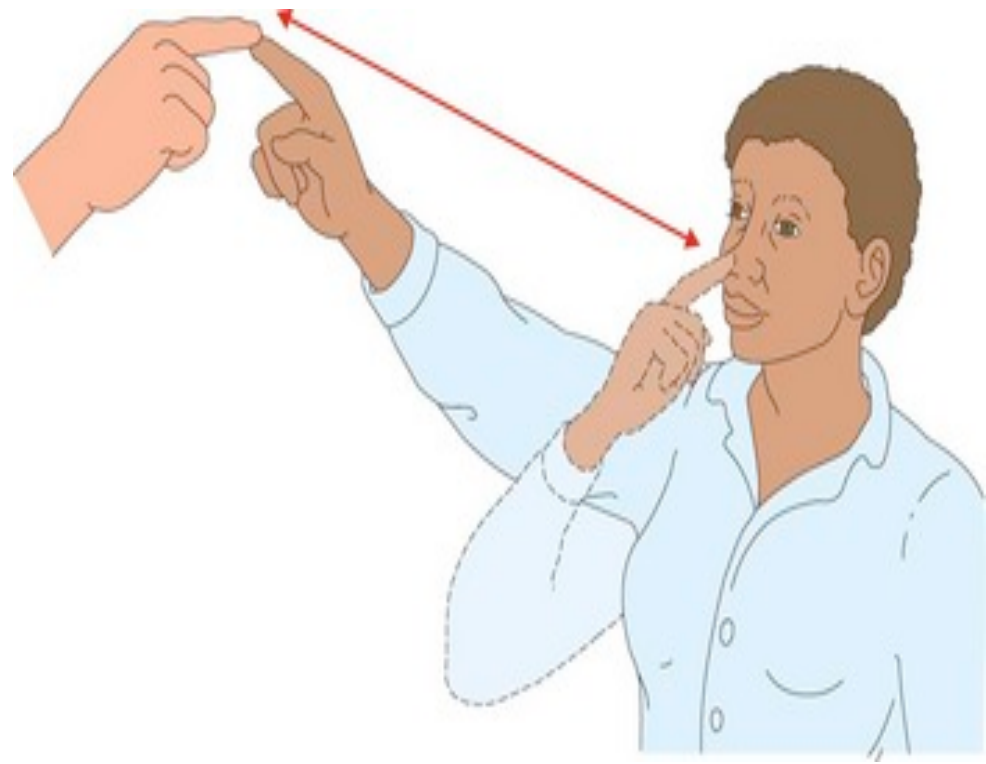
WBC	5.5		
	%		#
NE	54.7		3.0
LY	34.1		1.9
MO	7.5		0.4
EO	3.0		0.2
BA	0.7		0.0
RBC	4.28	L	
HGB	9.7	L	
HCT	29.9	L	
MCV	69.7	L	
MCH	22.6	L	
MCHC	32.4	L	
RDW	18.4	H	
PLT	331		
MPV	8.8		

## Question 28

**This one-month-old baby had direct hyperbilirubinemia.**

**Name one possible etiology.**





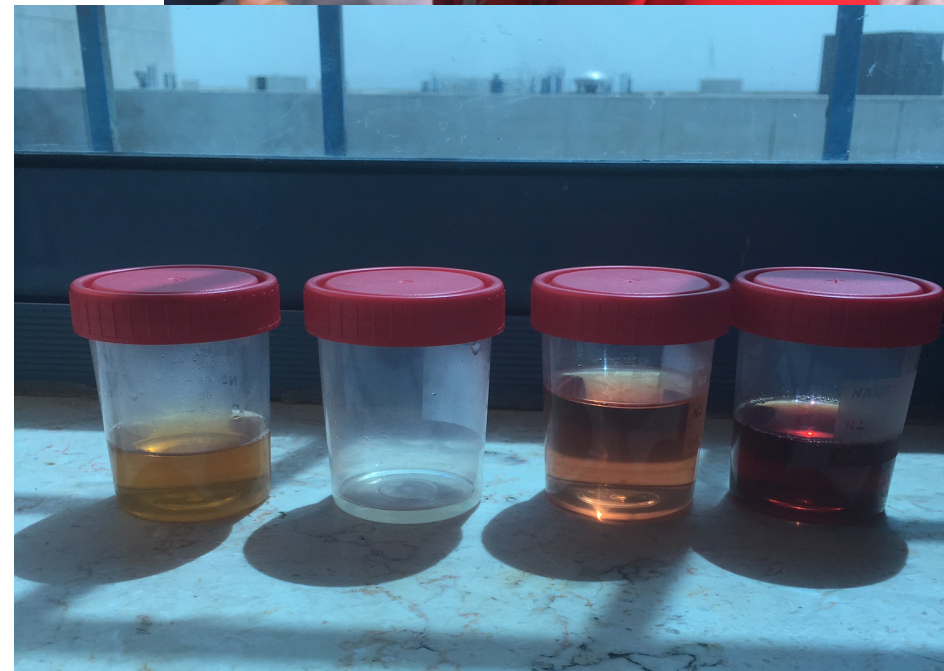
## Question 29

**What does this test for ?**

## Question 30

**This child presented with acute onset of pallor, jaundice, and red urine (as shown).**

**What is the most likely cause?**



Good Luck