



4th Year Mini OSCE Mock Exam

Mar 2021

CXR for 40 yrs. Old patient post blunt central chest trauma, he was hypotensive, his neck veins were distended

1. What is the pathology shown?

— (cardiac tamponade)

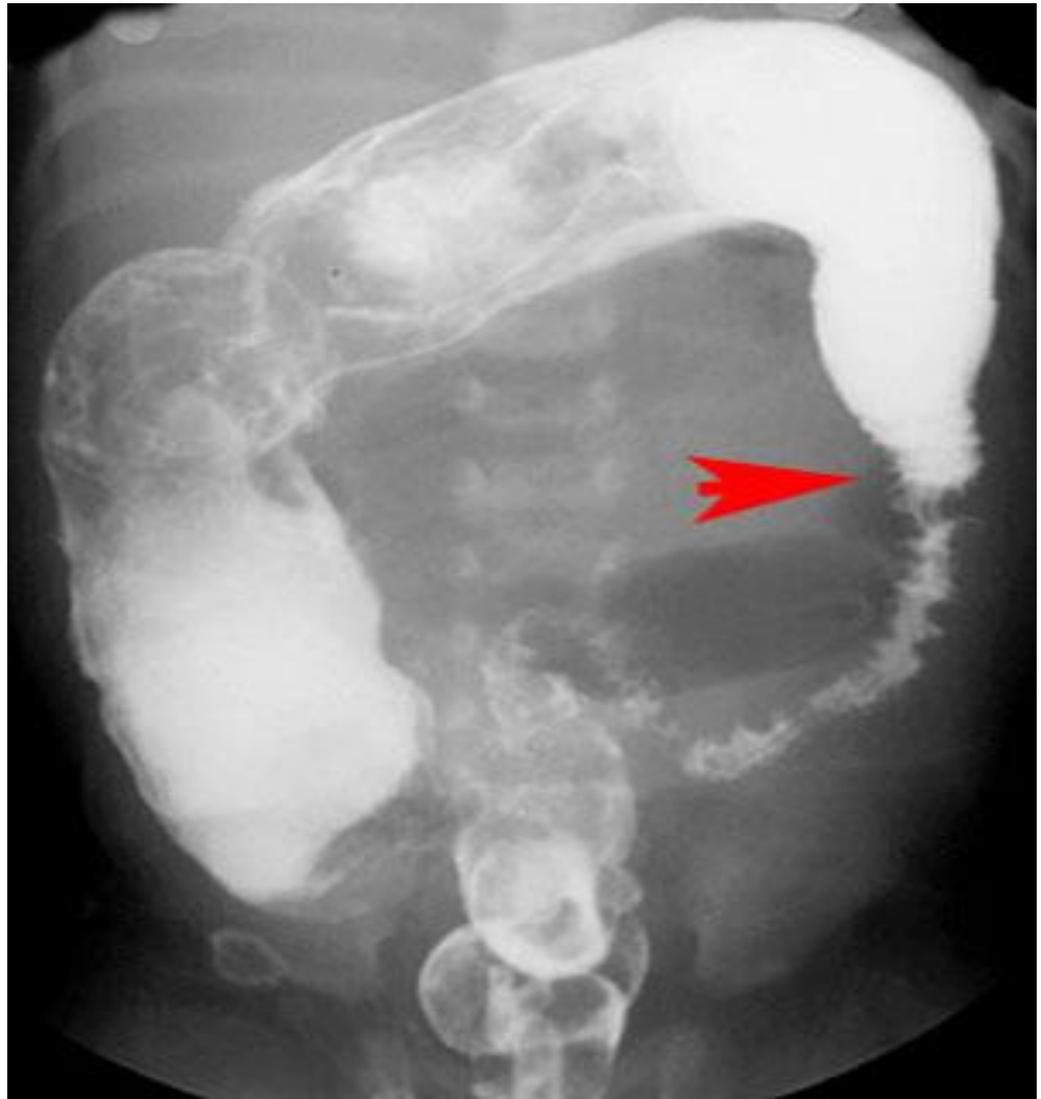
2. How should you manage it

— (pericardiocentesis)



2-month-old male with abdominal distention and history of delayed passage of meconium at birth.

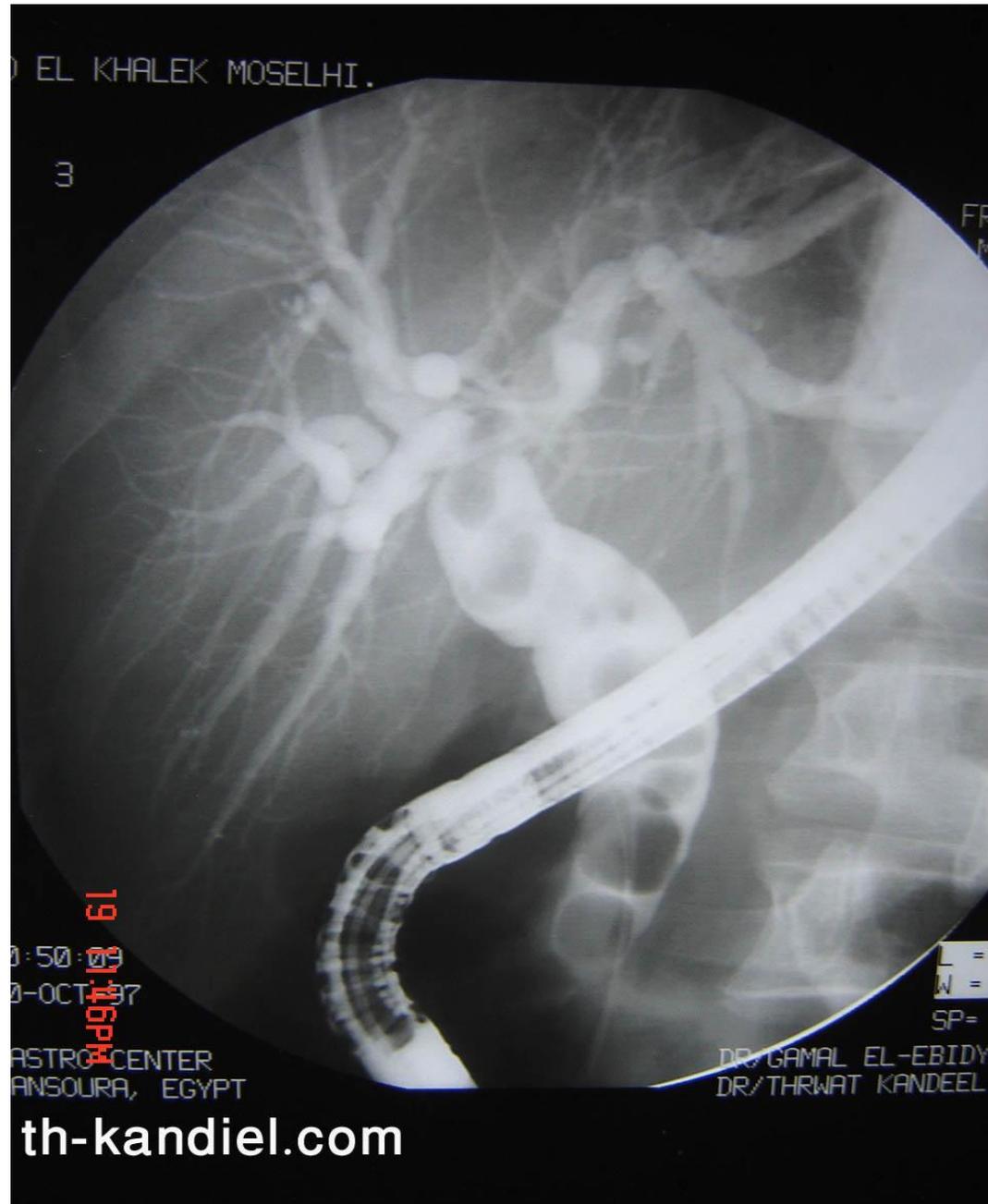
- Name this imaging study.
 - Contrast/ barium enema
- Name the gold standard diagnostic method for this problem.
 - Rectal biopsy



- What is the name of this investigation?

ERCP

- Mention two abnormalities seen in this picture.
 - Dilated CBD
 - Multiple filling defects (stones) in CBD



This is an abdominal x-ray of 40-year-old patient known case of ulcerative colitis and presented with abdominal pain and increasing abdominal distension

- A- What is the most likely diagnosis

Toxic dilatation of transverse colon (toxic mega-colon)

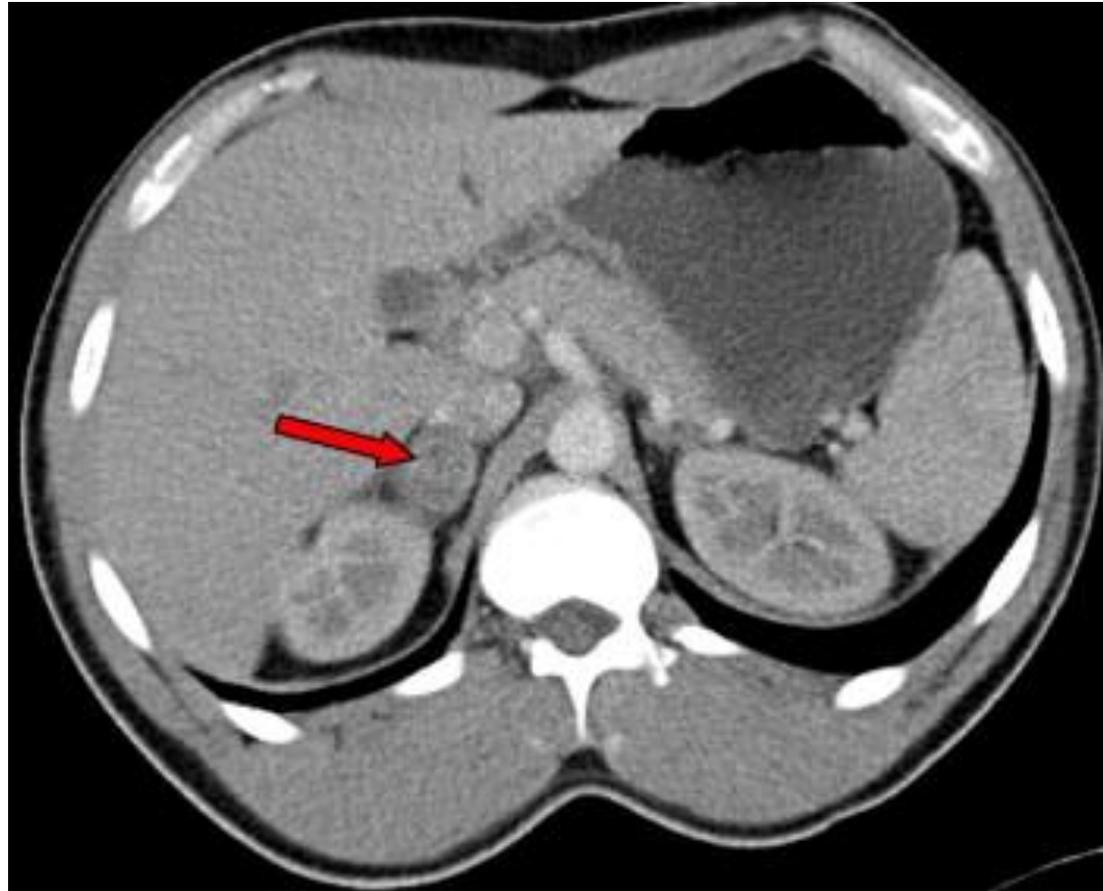
- B- Mention one possible complication: perforation



This lesion was detected incidentally on CT of the abdomen.

The next step in evaluating the patient is:

Name 2 indications for surgery:



The figure represents a finding in a 40-year-old female undergoing abdominal US prior to a bariatric procedure



- 1. What is the diagnosis?**
- 2. Name two indications for surgery in asymptomatic patients with this condition.**
- 3. In case of inflammation, name two locations where the pain will be felt.**

A 45-year-old euthyroid patient presented underwent fine needle aspiration for a palpable left-sided thyroid nodule. This was reported as a follicular neoplasm.

Which Bethesda category does this represent?

What is the implied risk of malignancy?

What is the recommended treatment?

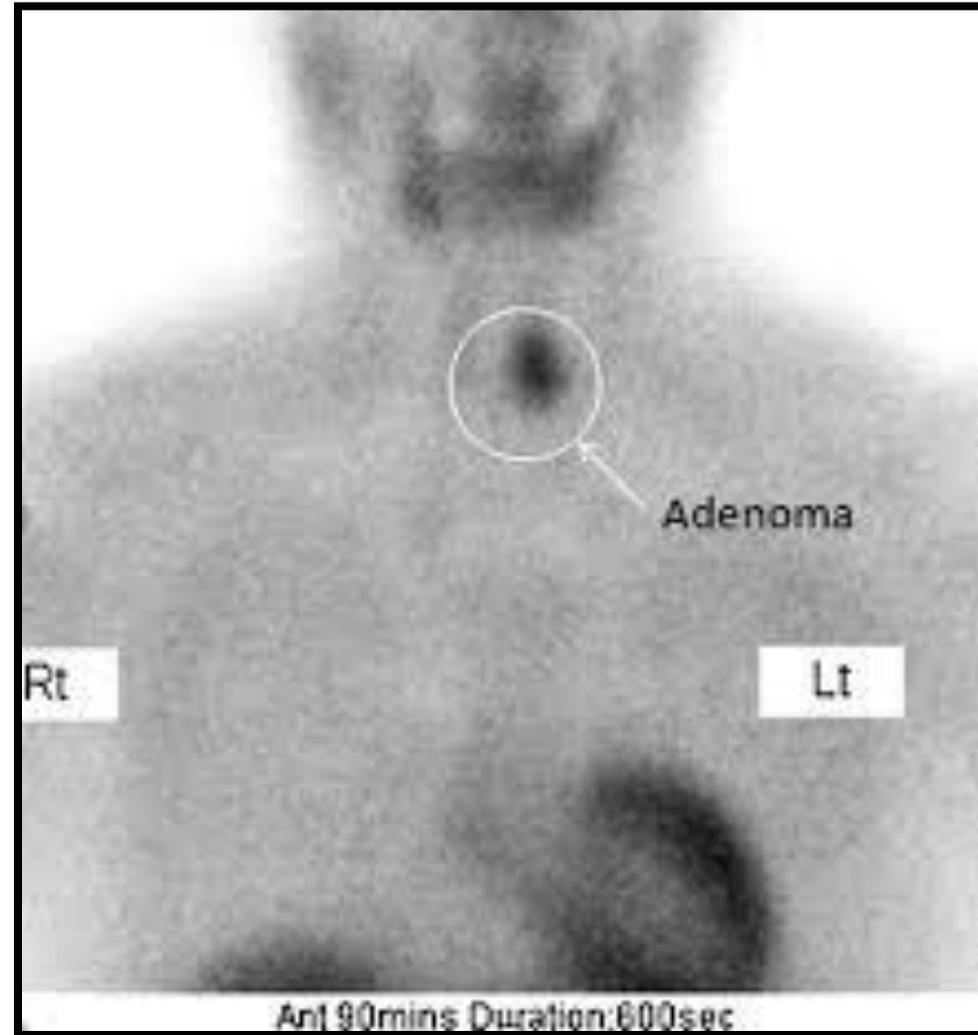


This 53-year-old female has a serum calcium level of 11.8 mg/dl and a PTH level of 209 pg/ml.

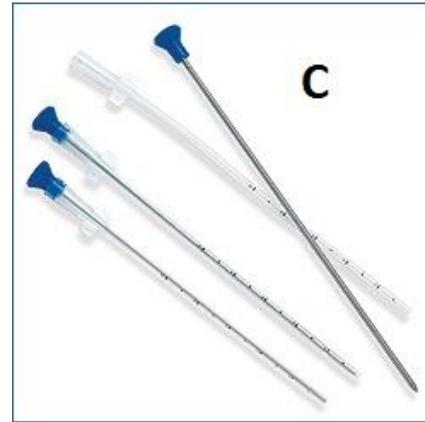
Name the imaging (localization) study used here:

What is the embryologic origin of the inferior parathyroid gland

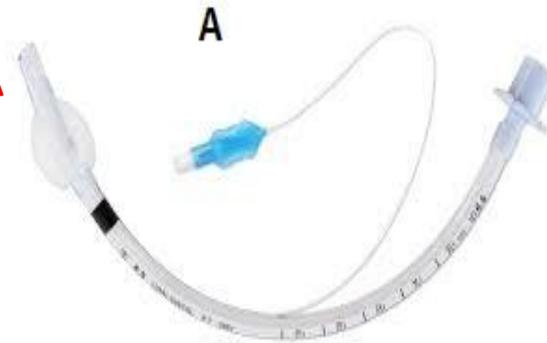
What is the likelihood that the patient's condition is due to single gland disease?



1. Of the instruments shown, what is the least likely to be used in primary survey? (D)



2. If needed, which of those has the highest priority to be used? (A or A+B)



A



B



What is A & B

A Colostomy Base

B Colostomy bag

Mention three indications for the medical condition that (A & B) are used for

(1) Protect distal anastomosis

(2) Diversion

(3) Defunctioning

This patient underwent US-guided FNAC for a nodule in a background of Hashimoto's thyroiditis, that was reported as Bethesda category III



- 1. What does this category represent?**
- 2. What is the implied risk of malignancy?**
- 3. What is your next step?**
- 4. Name one cancer whose risk is increased by the patient's condition.**

1. What's the name of this device?
(2 marks)
NGT
2. Mention three indications for its use?
(2 marks)
GI Obstruction, Feeding, GI Bleeding, Lavage (e.g. poisons), decompression (e.g. over an anastomosis), decrease risk of aspiration.
3. What's the anatomical location of its tip end in the patient?
(2 marks)
Stomach



what minimal invasive vein procedure produced this result? Name two modalities.



What would you call this ulcer?

Venous Ulcer

Looking at the leg, What is the underlying disease?

Chronic Venous Insufficiency

What type of skin malignancy would this ulcer change to?

Squamous Cell Carcinoma (SCC)



What would you call this ulcer?

Neuropathic Ulcer

Mention two underlying causes of this type of ulcer?

...**Diabetes Mellitus**

...**Neurological Disease (Neuropathy)**



5 days post right hip surgery your patient developed this

What is the most likely diagnosis?

Deep Venous Thrombosis

What medication would you use to treat this patient?

... Any 2 of **heparin** (UF or LMWH), **warfarin**, **Apixiban**, **Rivaroxiban**



- Name 4 differential diagnoses for this condition.
- A. inguinal hernia
- B. hydrocele
- C. testicular tumor
- D. testicular torsio
- Idiopathic scrotal edema



- What is your diagnosis?

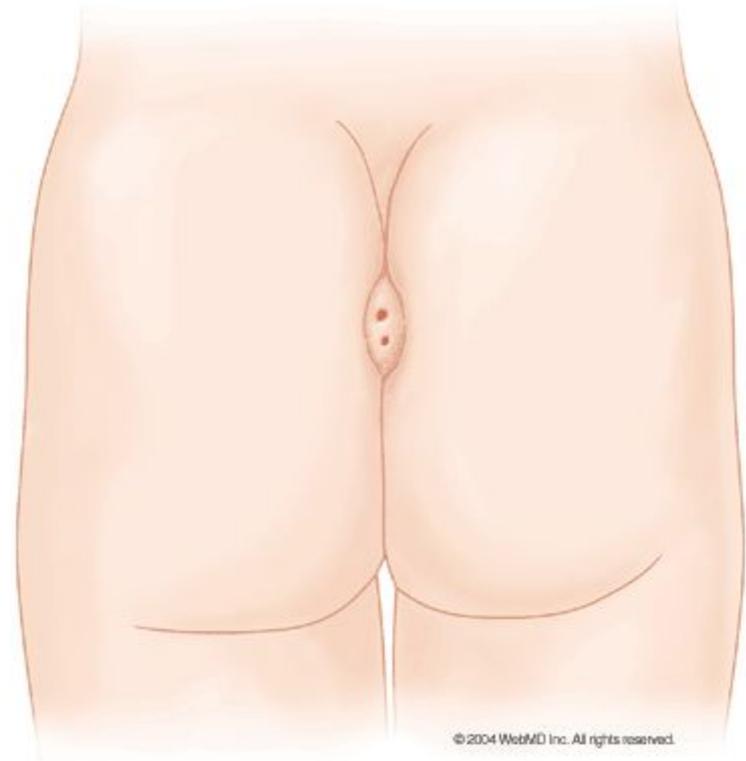
Pilonidal Sinus at sacral area

- Mention three other sites where this problem can happen

(1) Umbilicus

(2) Axilla

(3) Finger webs



The morning following total thyroidectomy

1. Name the sign you see:

(3 marks)

Trousseau's sign

2. What is the most likely cause for the patient's condition?

(3 marks)

Transient hypoparathyroidism

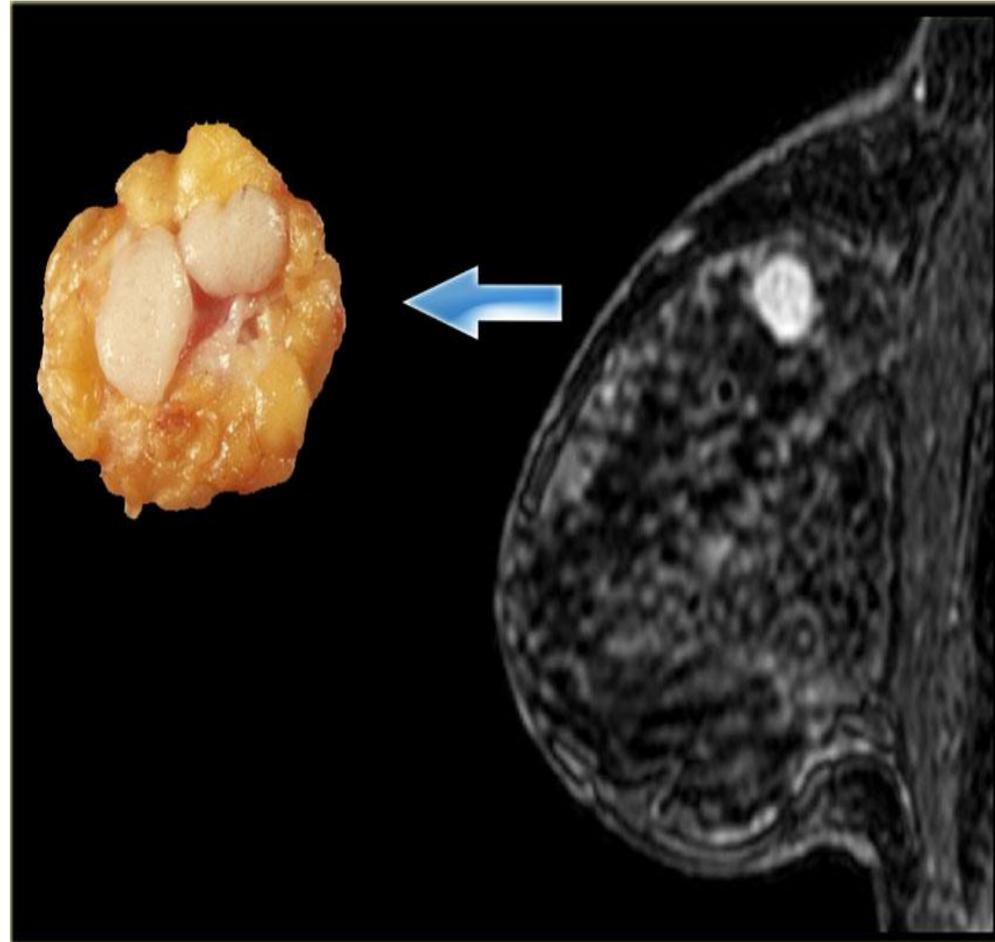


A 23-year-old female underwent triple assessment for an asymptomatic mobile breast lump.

What is the most likely diagnosis?

What is the FNA category reported?

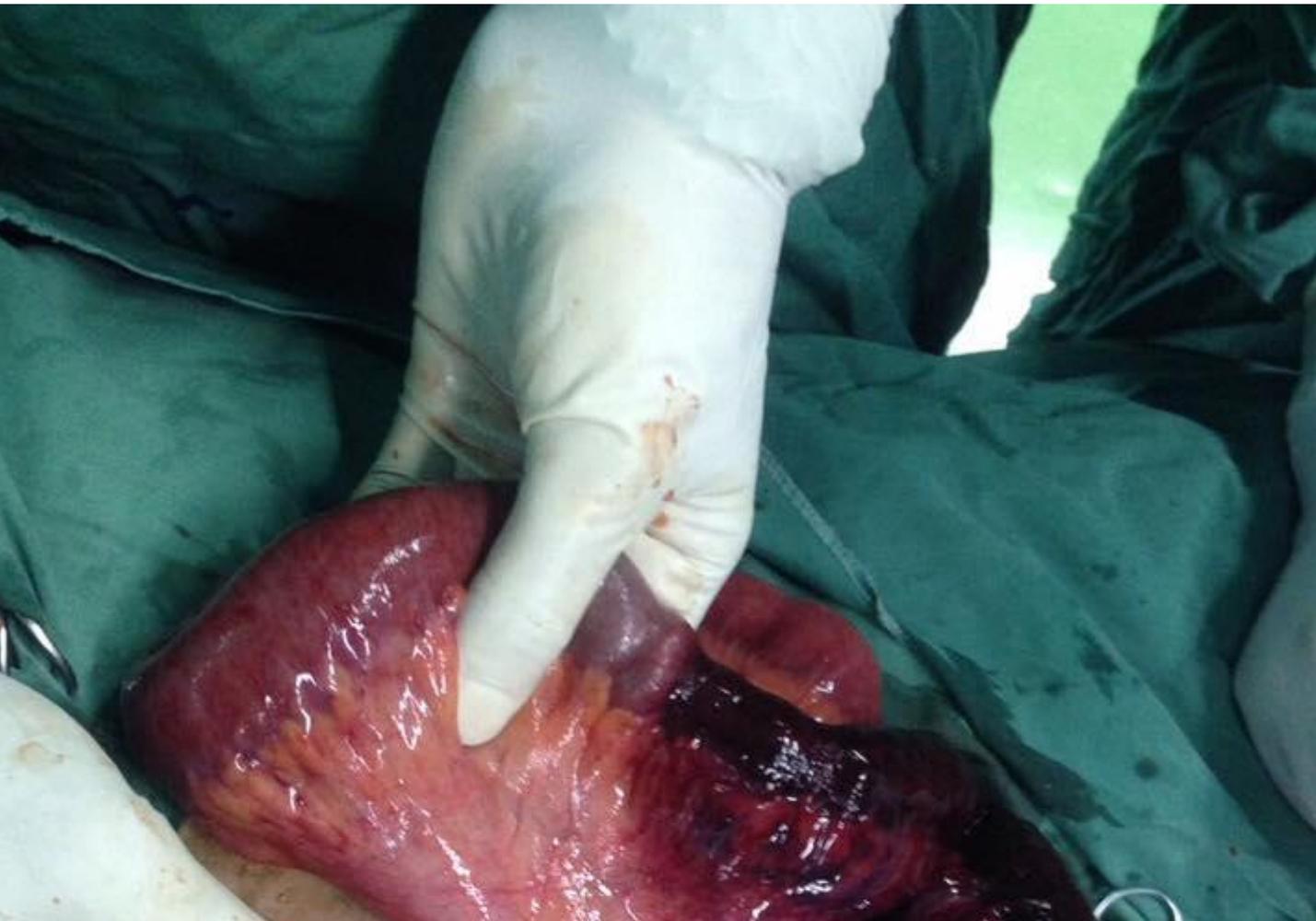
Give 2 indications for surgery:



A punch biopsy was taken from the nipple that revealed large cells with a clear cytoplasm, high-grade nuclei and prominent nucleoli

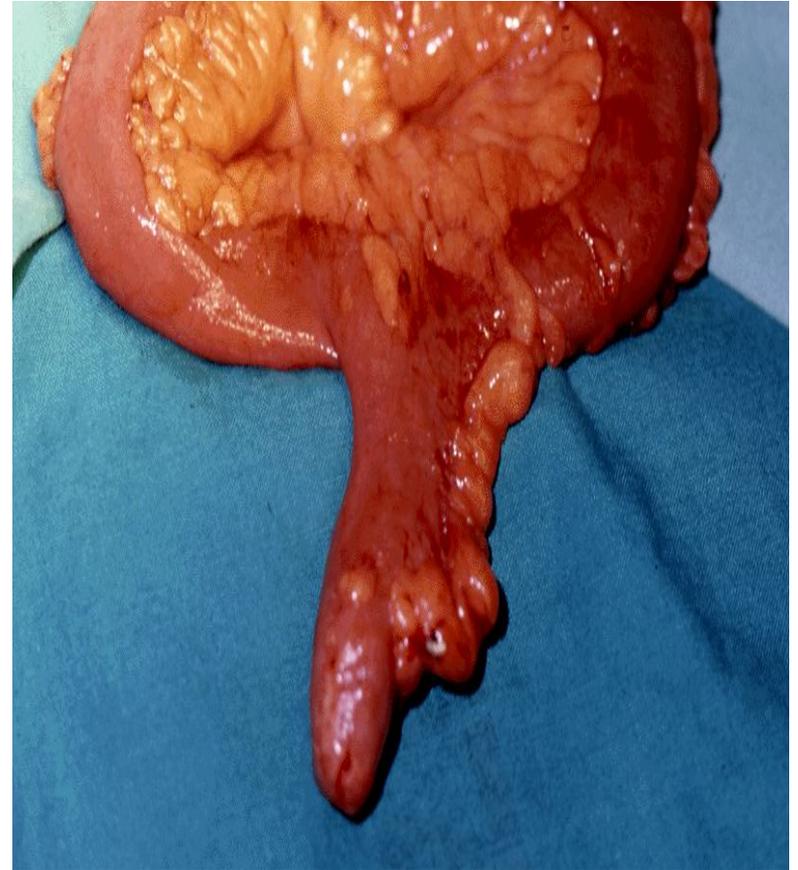


- 1. What is the diagnosis?**
- 2. Name two markers that can differentiate it from Melanoma on immune histochemistry.**



16 years old female patient with 24 hours compliant of right lower abdominal pain, this pathology was found in the distal small bowel

1. What is the pathology shown?
2. This structure is the remnant of which embryological duct?
3. Name 3 possible complications for this structure



While performing an upper GI endoscopy, you saw this lesion in the stomach

1. Describe what you see

(2 marks)

ulcer

2. What is the most likely diagnosis

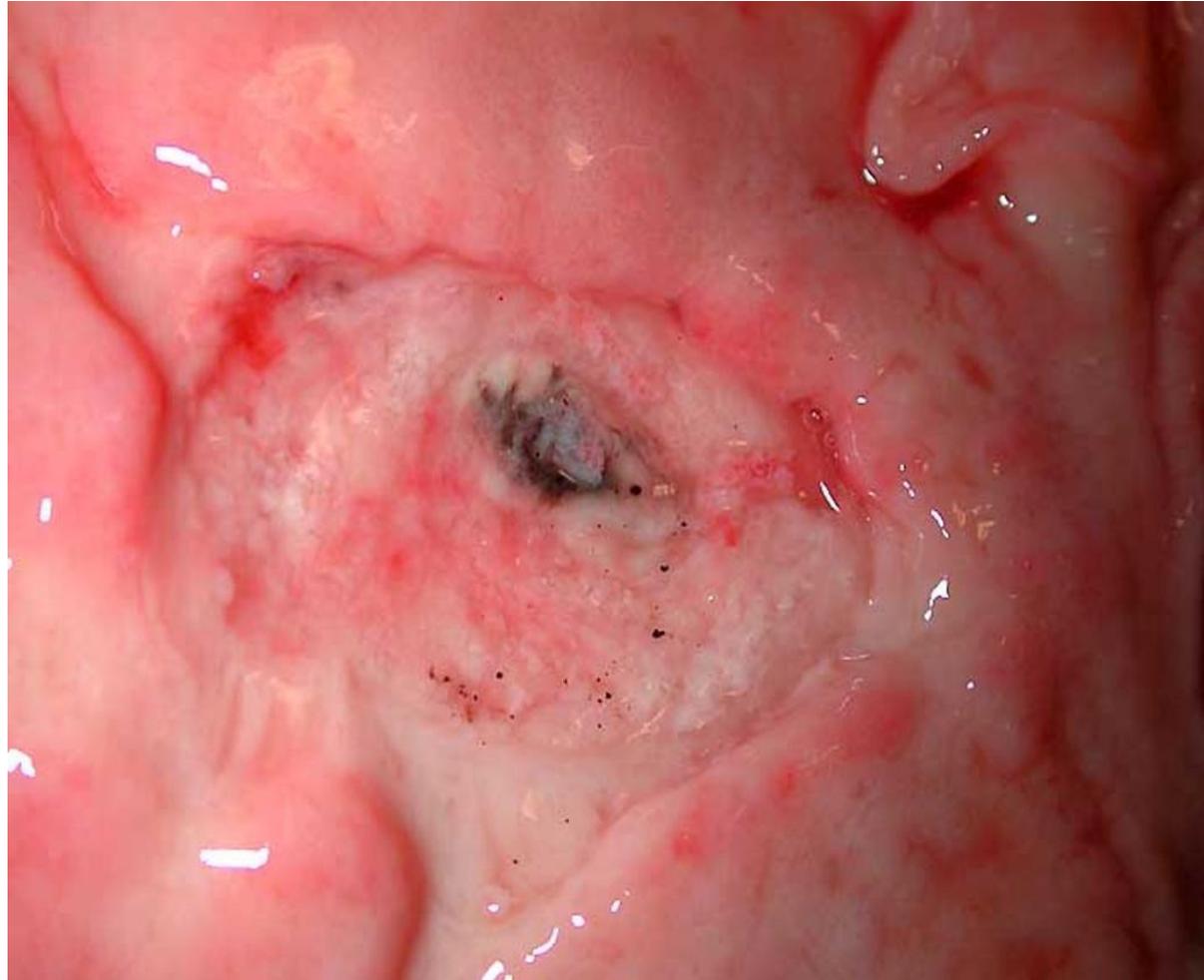
(2 marks)

gastric cancer

3. What is your next step

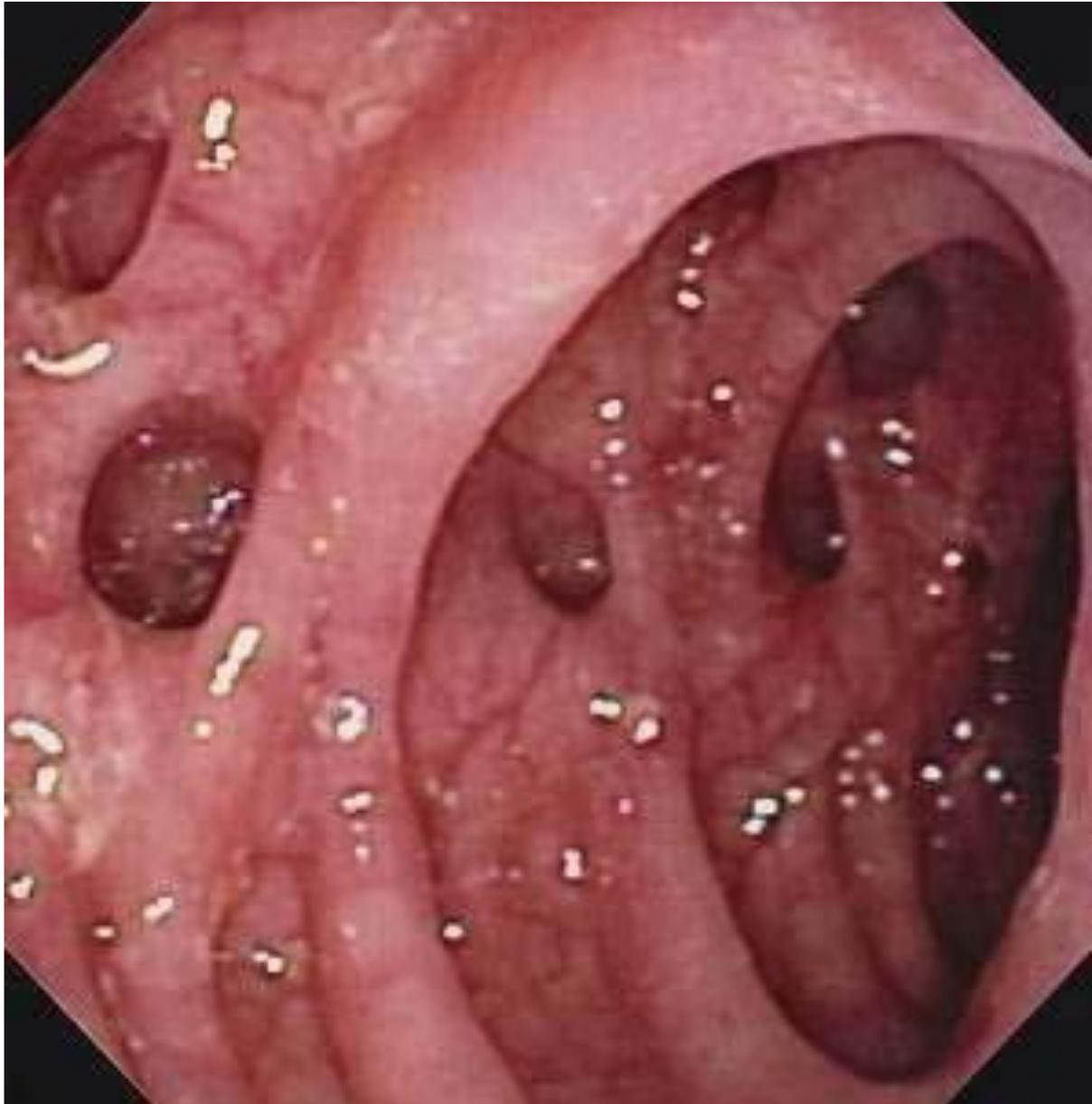
(2 marks)

biopsy



While performing a colonoscopy you found this abnormality

1. Name this pathology
(2 marks)
diverticular disease
2. What is the most common location
(2 marks)
sigmoid colon
3. Mention 2 possible complications
(2 marks)
Bleeding,
perforation,
stricture,
diverticulitis



This patient has this severe infection after having splenectomy post abdominal trauma.

1. This severe infection is most likely due to what organism?

(encapsulated Strep. Pneumoniae)

2. How to reduce the possibility of this infection? (giving

vaccination for encapsulated organisms)



You are holding the laparoscope

1. What is the name of the procedure

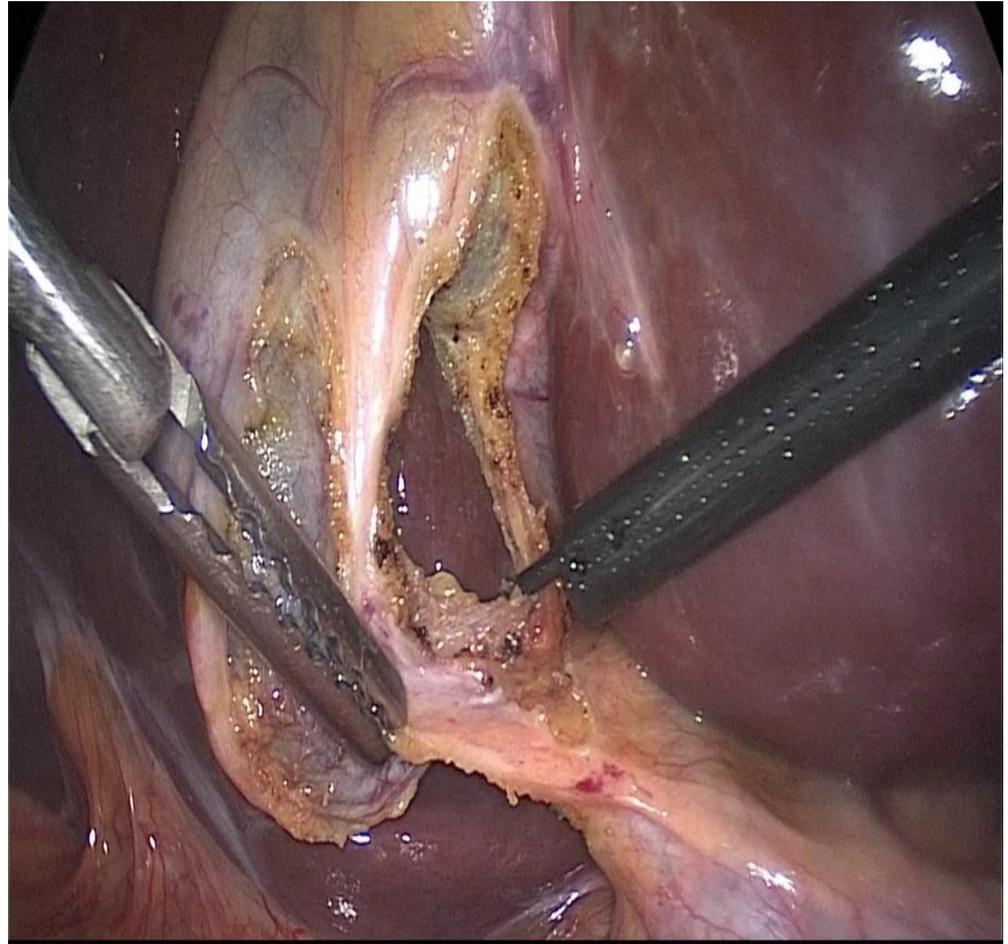
(2 marks)

2. Name the area the surgeon is dissecting

(2 marks)

3. Name the anatomic structure arrows 1&2 are pointing to

(2 marks)



You are the on call medical student over the weekend. The surgical ward nurse told you that they have a 65-year-old patient who had laparotomy, anterior resection and primary anastomosis 5 days ago. The patient is now complaining from increasing abdominal pain and abdominal distention for the last 10 hours. His vital signs are as follows: BP 80/40 mm Hg, PR 115 BPM, RR 24, Temp 39.9, O₂ sat 88.

A. What is your diagnosis?

Septic shock

B. What is the most appropriate next step?

ABCDE