



Dermatology mini osce

Group 5

11th Mach 26

Dermatologia

Gabriela
Sapina V.



Station 1: Syphilis & Clinical Features

A. Three manifestations of secondary syphilis

1. Maculopapular rash involving palms and soles
2. Condyloma lata
3. Generalized lymphadenopathy

B. Typical clinical feature of a chancre

Painless, firm, indurated ulcer with a clean base.

Station 2: Clinical Identifications

- Ichthyosis linearis circumflexa is a clinical feature of:
Netherton syndrome
- The characteristic primary skin lesion in acne vulgaris is:
Comedone (open or closed)
- Rhinophyma can be seen in patients with:
Rosacea
- Chronic paronychia is caused by:
Candida albicans

Station 3: True or False

- Systemic steroid is used as a treatment option for psoriasis vulgaris.
False
- Asteatotic eczema is usually seen in the elderly.
True
- Tinea capitis is more common in adults.
False
- Pityriasis rosea is contagious.
False

Station 4: Pathogenesis & Lichen Planus

A. Two factors involved in the pathogenesis of acne

1. Increased sebum production
2. Cutibacterium (Propionibacterium) acnes proliferation
(Other acceptable answers: follicular hyperkeratinization, inflammation)

B. Complete the following

- The primary skin lesion in lichen planus pigmentosus is:
Hyperpigmented macule
- The most common oral mucous membrane lesion in lichen planus is:
Wickham striae (reticular white lines)
- Individual lesions of acute urticaria usually persist for more than 48 hours.
False (Usually less than 24 hours)
- Pathognomonic burrow in scabies: female mite tunnel in stratum corneum.
True

Station 5: Psoriasis & Intertrigo

- Three comorbidities associated with psoriasis
 1. Psoriatic arthritis
 2. Metabolic syndrome
 3. Cardiovascular disease
(Other acceptable: diabetes mellitus, obesity)
- Characteristic clinical lesion in Candidal intertrigo / Napkin intertrigo
Satellite pustules

Station 6: Infections & Blistering Disorders (True / False)

- Acute cellulitis infection involving the dermis and subcutaneous tissue.
True
- Erythrasma is a non-contagious fungal infection.
False (It is a bacterial infection caused by Corynebacterium minutissimum)
- Individual lesions of acute urticaria usually persist for more than 48 hours.
False (Usually less than 24 hours)
- Pathognomonic burrow in scabies: female mite tunnel in stratum corneum.
True

- **Pediculosis capitis is primarily transmitted through airborne spread of lice.**

False (Transmission occurs **by direct contact**)

- **Cutaneous leishmaniasis often presents as a chronic painless ulcer.**

True

- **Androgenetic alopecia is characterized by miniaturization of hair follicles.**

True

- **In pemphigus vulgaris, blister formation occurs due to autoantibodies against desmogleins.**

True

- **Onychomycosis most commonly affects fingernails rather than toenails.**

False (Toenails are more commonly affected)

- **Spoon-shaped nails are due to vitamin B12 deficiency.**

False (Usually due to iron deficiency anemia)

Station 7: Comprehensive Completion

- **Deep bacterial infection of hair follicles forming a painful nodular lesion:**

Furuncle (Boil)

- **Virus responsible for chickenpox:**

Varicella-zoster virus

- **Characteristic primary lesion of scabies:**

Burrow

- **Intracellular form of parasite in macrophages in leishmaniasis:**

Amastigote (Leishman-Donovan bodies)

- **Pediculosis corporis refers to infestation with:**

Body lice

- **Hormone mainly responsible for follicular miniaturization in androgenetic alopecia:**

Dihydrotestosterone (DHT)

- **Clinical sign in pemphigus vulgaris where slight rubbing causes epidermal separation:**

Nikolsky sign

- **Separation of the nail plate from the nail bed:**

Onycholysis

- **Whitish spots on nails are due to:**

Leukonychia (usually due to minor trauma to the nail matrix)

- **Exclamation mark hair when present:**

Alopecia areata