

Palestinian Medical School **AL – AZHAR UNIVERSITY**
4th Year Final Clinical Examination (2009) - INTERNAL MEDICINE
Station No. / History Taking

INSTRUCTIONS TO THE SIMULATED PATIENT

Please read carefully the instructions to the student and to the examiner prior to the start of the examination. Answer questions based on the following scenario.

Do not volunteer information unless asked.

This station tests the student ability to take a history from a patient.

One week ago you experienced an episodes of generalised swelling started in the face and then extend to whole body .

The urine is frothy but no blood or colour changes.

No headache or mental changes , no skin rash or joint pain.No dyspnoea or chest pain or jaundice.

You never had any history of cardiac or liver diseases

You was otherwise fit and well.

Family history : No family history of similar attacks.

Drug history : Not on any medications before thia new event

Social history : Not smoker

Occupation : Student

You was admitted to the hospital and treatment was started , but on 5th day of admission you start to have pain in the left loin pain, and the urine became scanty and bloody.

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INSTRUCTIONS TO THE STUDENT

This young patient has been referred by the GP complaining of generalised body swelling , started from the face and then extend to the lower limbs , abdomen and all the body. The urine is frothy but no blood or colour changes. No headache or mental changes.

Patient was admitted in the hospital for treatment but after few days of admission he noticed new problem developed

Please take a focused history and attempt to make a diagnosis.

After 4 minutes you will be asked what you think is the most likely **diagnosis and the main complication happened for this patient ,** and what would be the most useful **diagnostic investigations .**

Station No. / History Taking

INSTRUCTIONS TO THE EXAMINER

**STUDENT NAME..... EXAMINER
NAME.....**

Greet the student and give him/her the written instructions.

Please circle the appropriate mark for each criteria.

	Performed competently	Performed but not fully competent	Not performed or incompetent
Initial approach to the patient (introduces him- herself, explains what he/she will be doing)	2	1	0
History of cardiac causes for generalised oedema	1	.0.5	.0
History of liver causes for generalised oedema	1	0.5	0
History of renal causes for generalised oedema	1	0.5	0
History of loin pain ,haematuria , scanty urine	2	1	0
Differential Diagnosis of generalised oedema RENAL .CARDIAC, HEPATIC, NUTRITIONAL	2	0.5 – 1.5	0
Investigations, Diagnosis , Complication			
Urine analysis for casts & protein	2	1	0
Albumin quantification (24 hours urinary albumin & spot urine albumin creatinin ratio	2	1	0
RFT / Electrolytes / U.S Abdomen .Renal Biopsy	2	1	0
Nephrotic syndrome	2	1	0
Left Renal Vein Thrombosis	3	1	0
Total (max 20)			

Name

Signature

Date

OSCE STATION No

PHYSICAL EXAMINATION

INSTRUCTIONS TO THE STUDENT

This patient is 37 – year – old with neck swelling and abnormal facial appearance .The patient had history of weight loss& tremors of hands

Please examine this patient neck and face , and complete your examination by examining the other relevant systems related to this patient to help you for reaching the final diagnosis.

Please provide a commentary on what you are examining for as you go along and describe any abnormal findings you identify as you proceed.

STATION No..... PHYSICAL EXAMINATION

STUDENT NAME.....EXAMINERS NAME

Greet the student and give him/her the written instructions. Please circle the appropriate mark for each criteria.

	Performed competently	Performed but not competent	Not performed or incompetent
Initial approach to the patient (introduces him-herself, explains what he/she will be doing) and seat the patient appropriately	2	1	0
Inspection :			
Appearance ,hands for pulse , temperature ,clubbing onycholysis , tremors , palmer erythema	2	0.5 -1.5	0
Face :Eye brows , features , skin	1	0.5	0
Eyes : Proptosis ,exophthalmous , echymosis , led retraction and led lag , ophthalmoplegia	2	0.5 – 1.5	0
Mouth : thyroglossal cyst , tonsilitis	1	0.5	0
Swallowing : Pain / discomfort , thyroid (water drinking)	1	0.5	0
Neck : Scars , swelling , thyroid and distended veins	2	0.5 – 1.5	0
Palpation (from behind)			
Size ,site , shape , swelling (single or multiple) , consistency (soft , firm)tenderness , location (retrosternal – Pemberton's sign) lymph nodes	2	0.5 - 1-5	0
Trachea and carotid (from front)	1	0.5	0
Percussion (retrosternal goitre)	1	0.5	0
Auscultation (thyroid and carotids)	1	0.5	0
Diagnosis : Graves disease	2	1	0
Mention 3 modalities of treatment for hyperthyroidism	2	1	0
Total (max 20)			

NAME..... SIGNATURE.....DATE.....

OSCE STATION No

PHYSICAL EXAMINATION

INSTRUCTIONS TO THE STUDENT

This patient complaining of dragging pain in the left side of upper abdomen.

You suspect this patient problem either enlarged spleen or enlarged left kidney.

1-Please demonstrate how you will examine the spleen using the three techniques for examining the spleen.

2-Still you are not sure whether this is a spleen or left kidney, please demonstrate how you will differentiate between spleen and left kidney.

3- Mention 4 causes of huge spleen.

4- How you will prevent overwhelming post splenectomy infections (OPSI)

Please provide a commentary on what you are examining for as you go along and describe any abnormal findings you identify as you proceed.

STATION No..... PHYSICAL EXAMINATION

STUDENT NAME.....EXAMINERS NAME

Greet the student and give him/her the written instructions. ,Please circle the appropriate mark for each criteria.

	Performed competently	Performed but not competent	Not performed or incompetent
Initial approach to the patient (introduces him-herself, explains what he/she will be doing)	2	1	0
1-Examining the spleen :			
Supine position ,	2	1	0
Right lateral position ,	2	1	0
Percussion of Traubes area	2	1	0
2- Spleen or Left kidney			
Inspection : Move diagonally freely with breathing.	1	0.5	0
Palpation (Cannot put the fingers above the spleen + Medial Notch + Not balloted by bimanual examination	3	.05-2.5	0
Percussion : No resonant band anterior to spleen			
Auscultation : Not helpfull	1	0.5	0
3-			
CML , MYELOFIBROSIS , MALARIA	1 Mark for each with MAXIMAL 4 marks	1- 3	0
Bilharzial splenomegaly , Kala Azar			
Gauchers disease , Thalasaemia			
4-Patien instruction for any infection	1	0	0
-Polyvaent pneumococcal & HiB VACCINE	2	1	0
-Antibiotics to age of 18 years			
Total (max 20)			

NAME.....

SIGNATURE.....

DATE