

# MiniOSCE Training

## General

**Up: Tattoo**  
**Down: IV drug abuse**  
**Right: Deliberate self harm**



Fig. 3.2 Tattoos can be revealing.



**Dupuytren's contracture**

- Linked to alcohol related liver disease
- Commonly in ring and little fingers



**Onycholysis**

- Detachment of the nail
- Present in psoriasis and thyrotoxicosis



**Beau's Line**

- Present in severe systemic illness that affects the nail matrix



**Leuconychia**

- Has many causes
- Present in chronic liver disease



**Koilonychia**

- Spoon-shaped nails
- Present in iron deficiency anemia



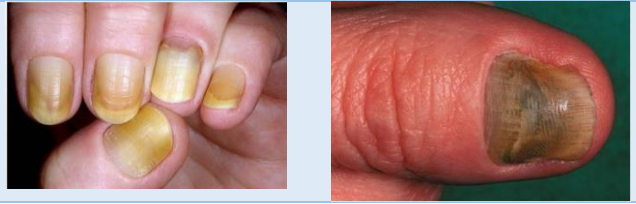
**Finger clubbing**

- Present in many GI, RS, CVS disease
- Diagnosed using: hyponychial angle, interphalangeal depth, Schamroth's window, fluctuation



**Yellow nails**

- Present in yellow nails syndrome



**Lindsay's nails**

- Half white – half brown
- Present in chronic kidney disease



**Vitiligo**

- Autoimmune
- Bilateral symmetrical depigmentation



**Hemochromatosis**

- Iron deposition and melanin production
- Can be associated with diabetes → bronze diabetes



**Erythema ab igne**

- Caused by heat
- Accumulation of hemosiderin



**Hypercarotenaemia**

- Yellowish discoloration (not seen in sclera)
- Causes include excessive vegetable ingestion



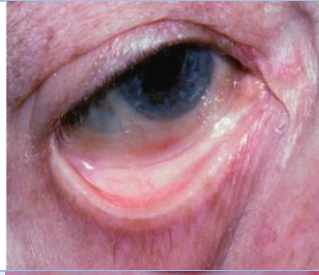
**Jaundice**

- Detected when bilirubin > 3mg/dL
- Has prehepatic (hemolysis), hepatic and post-hepatic (cholestasis) causes



**Conjunctival pallor**

- Occurs due to anemia



**1-Atrophic glossitis**

- Smooth red tongue

**2-Angular stomatitis**

- Both present in iron deficiency



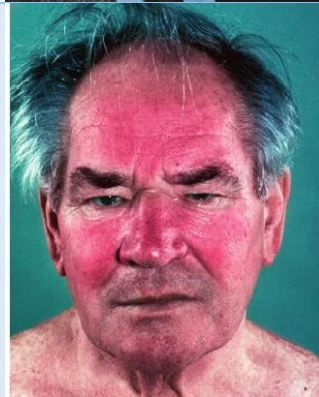
**Phenothiazine induced pigmentation**

- Slate - Grey



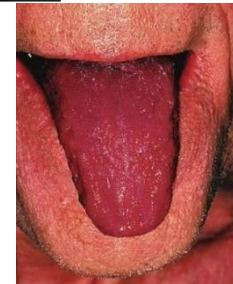
**Facial Flushing (Plethora)**

- Many causes include carcinoid syndrome and Menopause



**Cyanosis**

- Can be central or peripheral
- Detected when deoxyhemoglobin > 5g/dL



**Bleeding gums and Bruising**

- Present in scurvy

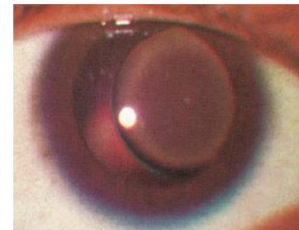
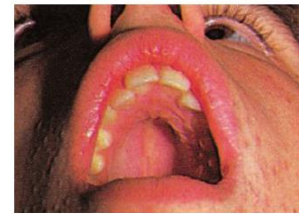


**Neurofibromatosis**



**Marfan syndrome**

- Tall stature with long arm span
- Arachnodactyly (long fingers)
- High arched palate
- Upward dislocation of the lens
- It is a connective tissue disease
- Associated with aortic dissection



**Angioedema**

- Due to allergy



**Lymphedema**

- In arms, can be commonly found after a mastectomy (for breast cancer)



**Blister on the leg**



**Petechia**

- Pinpoint bruising under the skin



**Blue sclera**

- Present in osteogenesis imperfecta
- Can be found in iron deficiency

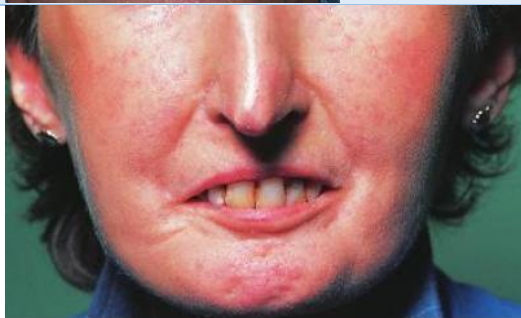


**Telengectasia**



**Systemic sclerosis**

- Beaking of the nose
- Tight skin



**Myotonic dystrophy**

- Bilateral ptosis
- Frontal balding



### Down syndrome

- **A:** Typical facial appearance
- **B:** Brushfield spots in iris
- More features include single palmar crease and low-set ears



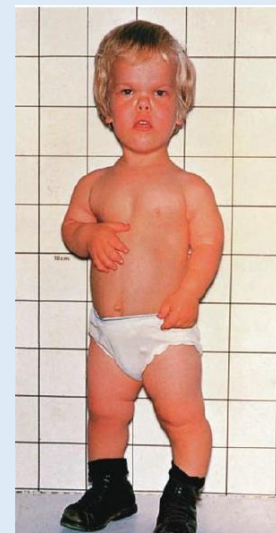
A



B

### Short stature

- **Left:** Turner syndrome
  1. Loss of X chromosome
  2. Shield like chest
- **Right:** achondroplasia
  1. Autosomal dominant
  2. Normal trunk



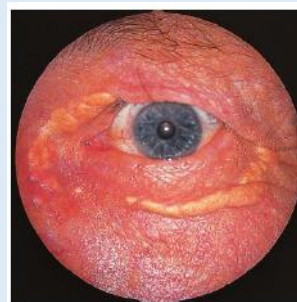
## Cardiovascular System

**A:** Xanthelasma

**B:** Tendon xanthoma

**C:** Corneal arcus

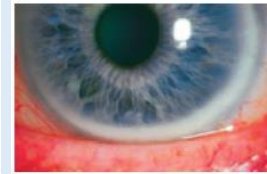
- All indicate hyperlipidemia



A



B



C

**Infective endocarditis signs**

**A: Janeway lesions**

- Painless

**B: Splinter hemorrhage**

- Can be present also in trauma

**C: Osler's nodes**

- Painful

**D: Roth spots**

- Found in the retina

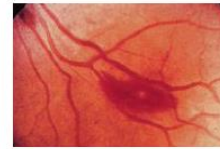
**E: Petechial hemorrhage in conjunctiva**



A



B



D



C



E

**Abdominal Aortic Aneurysm**

- Rupture causes abdominal/back pain and hypotension



**Raynaud's phenomenon**

- Can be primary or secondary
- Present as cyanosis, pallor or erythema
- B: progression to ulcers



A



B

**Left: Varicose veins**

**Right: Foot gangrene**



**Venous ulcer**

- Irregular margin
- Shallow pink or yellow/green sloughed in color



**Superficial thrombophlebitis**

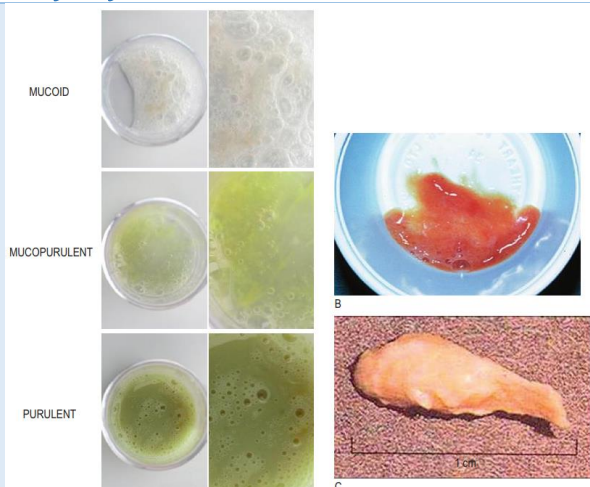


**Respiratory System**

**A: Purulent sputum seen in bronchiectasis**

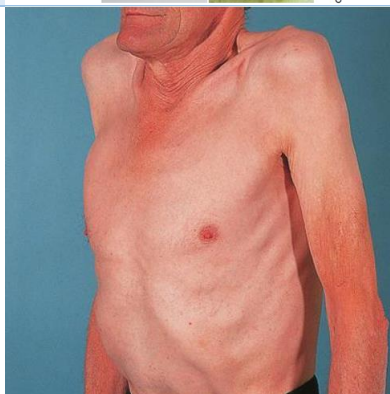
**B: Rusty red sputum seen in pneumococcal pneumonia**

**C: Mucus plug seen in asthmatics**



**Hyperinflated chest**

- Caused by chronic airflow obstruction



**Left: Pectus carinatum**

- Acquired
- Prominent sternum

**Right: Pectus excavatum**

- Congenital



**Metastatic nodule of lung cancer**



**Erythema nodosum**

- Found in legs
- Can be seen in sarcoidosis



**Tar staining**

- From tobacco use (smoking)



**Superior vena cava obstruction**

- Distended collateral veins
- Dusky swollen face and neck



**Thoracotomy scar**



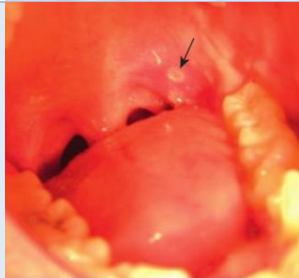
## Gastrointestinal System

### Lichen planus

- A dermatological disorder



### Apthous ulcers



### Abdominal distention

- Due to ascites (like in left fig.) or due to fat, flatus, feces, fetus, functional bloating



### Up: Spider nevi

### Down: Palmar erythema

- Both indicate excess estrogen and chronic liver disease
- Other indications include gynecomastia in men and breast atrophy in women



Up: Gynecomastia  
Down: Scratch marks



Melena

- Tarry black stool
- Indicates upper GI bleeding
- Must be >50 mL/day



Left: skin redundancy

- Rapid weight loss

Right: Stria

- Rapid weight gain
- Pregnancy
- Cushing disease



Sialadenosis/Sialadenitis

- If bilateral and painless might indicate chronic alcohol abuse or bulimia



Shape of umbilicus

- Inverted: Normal
- Sunken: Obesity
- Flat or Everted: Ascites



**Skin lesions**

- All are age related



**Left: Caput Medusa**

- Caused by portal hypertension (Liver disease)

**Right: Dilated tortuous veins**

- Inferior vena cava obstruction



**Bruising**

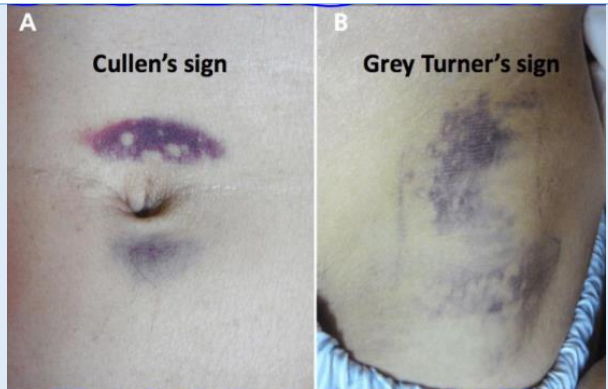
**A: Cullen's sign**

- Around the umbilicus

**B: Grey-turner sign**

- In the loin

They indicate hemorrhagic pancreatitis, ruptured AAA, or ruptured ectopic pregnancy



**Stomas**



**Incisional hernias**

- At site of scars
- More obvious if the patient coughs



**Divarication of the recti**



**Splenomegaly**

- It has to be at least 3 times larger so it can be palpable
- Has many causes including hematological and infectious



**Pyoderma Gangrenosum**



## ***Renal System***

**Muehrcke's lines**

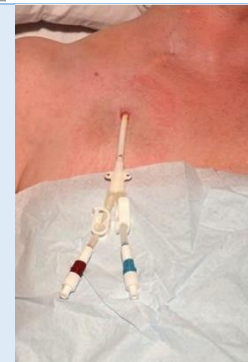
- Can be a sign of hypoalbuminemia



**Left: Hemodialysis fistula**

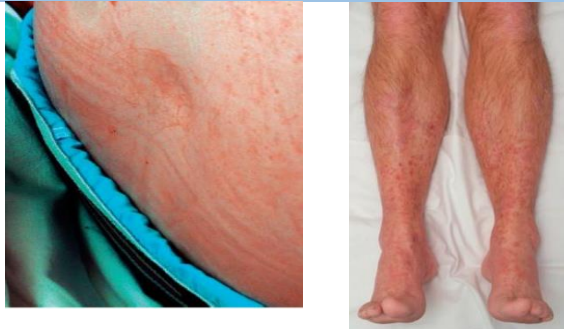
**Right: Tunnelled venous access catheter**

- Infections are a common complication for dialysis



**Left: Sacral pitting edema**  
• Caused by proteinuria

**Right: Vasculitic rash**



**Renal transplant scar in the right iliac fossa**



### ***Nervous System***

**Addie's pupils**

- Mid dilated pupil
- Reacts poorly to light and accommodation
- Caused by parasympathetic dysfunction



**Left oculomotor nerve palsy**



**Herpes zoster infection**

**A: Involvement of ophthalmic branch**  
**B: Involvement of maxillary branch of trigeminal**

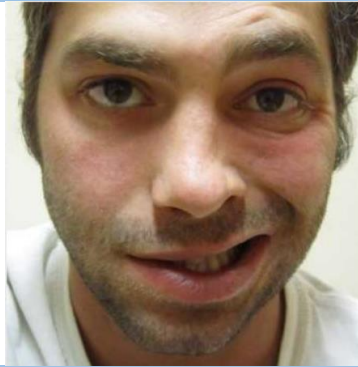


A

B

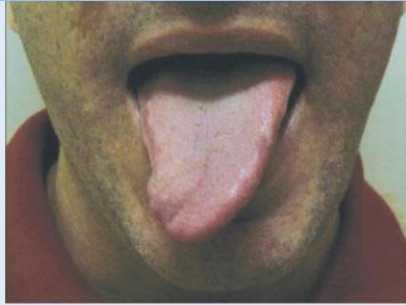
Facial nerve palsy: lesion in the **lower** motor neuron on the **right** side

- **Wrinkles are absent**
- **Symptoms are on the right side**



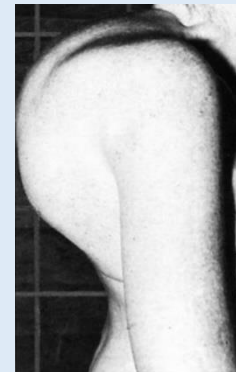
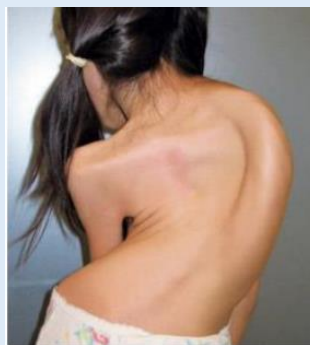
**Right** hypoglossal nerve palsy

- **Deviation to affected side**



### *Musculoskeletal system*

Left: Scoliosis  
Right: Kyphosis



Left: Lordosis  
Right: Gibbus



Swelling

- Such as in hemarthrosis (left) and bursitis (right)



**Charcot joint**

- Painless



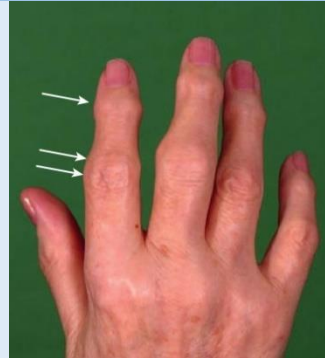
**1 arrow: Heberden's nodules**

- At the DIP

**2 arrows: Bouchard's nodules**

- At the PIP

Both are hard and present in osteoarthritis



**Gouty tophi**

- Composed of monosodium urate
- Can ulcerate and discharge



**Left: Psoriasis**

- Scaly plaques

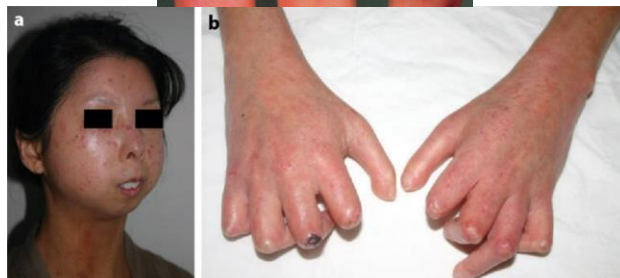
**Right: Pitting of the nails**

- Also found in psoriasis



**More signs of Systemic sclerosis**

**Up:** Calcium deposits ulcerating through the skin



**Rheumatoid arthritis**

Up: Nodules at the extensor surface

Down: Nodules and ulnar deviation on MCP joints



**T1 nerve root lesion**

- Wasting of thenars and interossei
- Flexed posture of the fingers due to lumbrical denervation



**Boutonniere's deformity at middle finger**

**Swan neck deformity at index**

- The both occur in rheumatoid arthritis



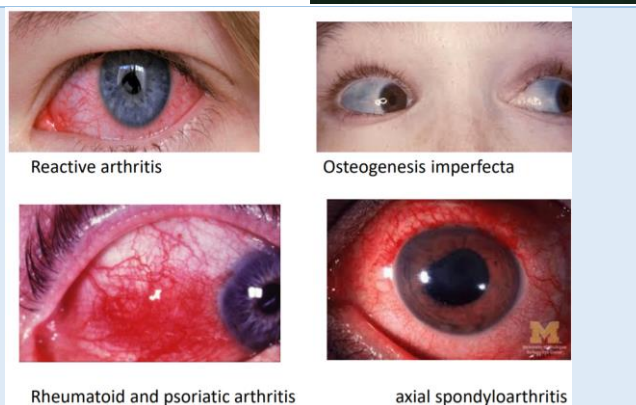
**Left: Swelling of MCPs**

**Right: Swelling of MCPs and PIPs in index and middle finger**



**Eye presentation in MSS diseases**

- **Reactive arthritis: Iritis**
- **Rheumatoid arthritis: episcleritis**
- **Osteogenesis imperfecta: Blue sclera**



**Left: Valgus**

**Middle: Varus**

**Right: Baker's cyst**



**Normal knee**

- Medial hollow sign is present



## ***Thyroid***

**Thyroid enlargement**

- Left: Diffuse goiter
- Right: solitary nodule



**Graves ophthalmopathy**

- Exophthalmos (specific to Graves)
- Lid retraction
- Eye inflammation can be seen



**Thyroid acropachy**

- Specific to Graves
- Looks similar to clubbing



**Pretibial Myxedema**

- Specific to Graves



**Typical face in hypothyroidism**

- Weight gain
- Dry coarse hair
- Periorbital edema
- Others that may be seen:  
lethargy, loss of lateral third of eyebrows



Done by: Ameen Alsaras

*Good luck*