

OSCE April 2003

Question 1

Given data for a feverish hypoxic asthmatic child.

4 immediate treatments

Protect airway and administer high concentration (85%) Oxygen

Nebulised salbutamol

Paracetamol 15mg/kg

Hydrocortisone 4mg/kg intravenously

3 more treatment options

Call Paediatric anaesthetist

Repeat salbutamol neb and add ipratropium

Intravenous Salbutamol/ Aminophylline/ Magnesium according to age/drug history and local guidelines

4 signs of a severe asthma attack in a child ?

Age 2-5 or over 5 respectively

Pulse greater than 130 or 120

Respiratory rate greater than 50 or 30

Unable to talk

PEFR<50% best or predicted

Question 2

Shown picture of a vehicle involved in side impact RTA.

5 likely injuries from such a side impact

Pick any five from the right side of the body

4 treatments you can begin at the roadside

Protect airway and administer high concentration (85%) Oxygen

Intravenous fluids

Analgesia

Splint limbs

What investigations you would request once at the hospital ?

(Pregnancy Test)

Chest and pelvic radiographs

Spinal series

FBC/U&E/X-match 6 units/ COAG/ amylase

ECG

Blood glucose

Urinalysis

CT/US as indicated

Question 3

Elderly diabetic chap with chest pain. shown ECG, CXR, and ABG results.

Asked to describe them and give differentials?

LBBB

Pulmonary oedema and consolidation right lower lobe

Respiratory acidosis with hypoxia

MI, LVF, Pneumonia

Question 4

Shown CXR and Right Shoulder X-Ray of trauma victim (one passenger died)

Comment on x-ray findings and possible complications

Right 1st and 2nd ribs

AC joint dislocation

Pneumothoraces

OA etc.

Question 5

Elderly chap with chest pain radiating to back.

3 possible causes

MI

Dissecting thoracic aneurysm

Acute pancreatitis

3 investigations

ECG

CXR

Spiral CT chest with intravenous contrast

then shown a thoracic CT final diagnosis? – Dissecting thoracic aortic aneurysm

Question 6

Shown x-ray of index finger of netball player.

Asked for diagnosis and complication ?(Volar plate injury, OA)

Question 7

Photo of atraumatic swollen right knee in a young Caucasian.

Differential diagnosis

Septic arthritis

Gout

CPPD

Seronegative arthritis (e.g. assoc with UC/Ank spond/Reiters syndrome)

Haemarthrosis

Specific tests from lab?

Gram stain, microscopy and culture on joint aspirate

Polarisation studies on the joint aspirate

FBC/CRP/PV

Clotting studies and factor 8 assays

Question 8

Young West-Indian man on way home from night-club. Develops pain in his legs and abdomen.

Differential diagnosis

Rhabdomyolysis due to MDMA (or cocaine or PCP)

Sickle crisis (abdominal crisis)

Question 9

Given data for a pyrexial child with purpuric rash.

Management steps

Protect airway and administer high concentration (85%) Oxygen

Blood cultures/FBC/U&E/COAG/PCR

Blood glucose – correct with 5mls/kg 10% dextrose if less than 3mmols/l

Intravenous Cefotaxime 80mg/kg

Intravenous fluids if shocked (20mls/kg N.Saline or HAS)

Intravenous dexamethasone (0.15mg/kg)

Paracetamol 15mg/kg

Inform paediatrics +/- PICU

Urinalysis

Throat swab

Question 10

25 yr old man collapses

Hb 9

WBC 2

Plt 90

Give 3 possible causes of the collapse

Overwhelming sepsis /Intracerebral infection

Intracerebral bleed

Toxicological reasons eg MDMA

Investigation of choice?

Blood glucose

Initially CT head followed by Bone marrow biopsy under admitting team

Question 11

Shown spinal xrays of young man fallen from ladder.

Diagnoses

C1 Jefferson's #

C2 Hangman's #

Wedge # L3

3 management procedures?

ABC (Protect airway with cervical spine immobilization, Support breathing if compromised with high concentration oxygen/ bag and mask ventilation, Circulation – intravenous fluids initially for hypotension)

Analgesia

Involve spinal surgeons early to guide further investigations and prepare for surgical stabilization

Question 12

12 Another set of blood gases.....Can't remember