



Psychiatry Mini-OSCE

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020 MiniOSCEs

1st rotation

Case 1

Woman came to ER with panic attack, calmed down with breathing technique vital signs were normal (HR normal). History shows she had a job interview?. She has always been shy in public, and afraid to say silly things. She doesn't expect another panic attack

1. What is the diagnosis?

Social phobia

2. Does she meet criteria for panic disorder?

No

3. She was given SSRI (escitalopram), which drug should be given with it?

Benzodiazepines

4. She came the next day with another panic attack, why?

Due to side effect (anxiety) of SSRI and need time to exert the effect

5. If a patient had fear of public speaking, what medication do you give?

B- blockers

Case 2

Patient brought by concerned family, very talkative over enthusiastic, exchanged numbers with attractive lady, buys a lot of things, stays up at night doesn't sleep, talks on phone... Had a depressive episode 5 years ago.

1. Diagnosis?

Bipolar 2

2. Medication to give?

Lithium

3. Which medication should be avoided?

Antidepressants

4. Is there a genetic relationship with this disease?

Yes

5. If patient with same current episode came the following year?

With psychosis, what will his diagnosis be? **No (it is not mania /no functional impairments)**

Case 3

Patient found walking on the streets talking to himself doing wierd inappropriate signs, when police confronted him he ran away yelling "ما حخلي العصابات يمسوني (اشي زي "هيك" he had poor higene, long hair... Etc

1. Name the 3 phases of this condition?

Prodromal / active / residual

2. Name the 3 categories of symptoms?

Positive, negative, cognitive

3. Why is it more common in lower Socioeconomic groups?

Downward drift phenomenon / many patients face barriers to higher education, regular employment and other resources, so they tend to drift downward Socioeconomically.

4. Which have better prognosis males or females?

Females.

5. Compare old and new medications side effect profile?

Typical antipsychotics - extra pyrimdial symptoms / atypical antipsychotics metabolic .

Case 4

Patient brought by his friends, he went to a party with them, took a substance to help him feel energized and stay up all night. After a while he started hearing voices and seeing things. Became paranoid of ghosts chasing him.

1. What class of drugs does the substance belong to?

Stimulants

2. Are pupils dilated or constricted in patients taking this substance?

Dilated

3. What neurotransmitters is increased?

Dopamine

4. What medication is given in intoxiaction?

Naloxone?

5. Is sudden stopping of drug life threatening?

No

6. In withdrawl is patient sedated or aroused?

Sedated

7.is there antidote?

No

Case 5

Patient revisiting clinic asked you the following

1. Which 2 organs are affected by lithium ?

Kidney / thyroid

2. Lethal serum level of lithium?

0.6 - 1.2 mEq/L

3. Therapeutic serum level of valproic acid?

80 -120 mg/L

4. 2 classes of medication that increase serum level of lithium?

Thiazide diuretics

- NSAIDs
- ACE inhibitors
- Metronidazole
- Tetracycline

5. Life threatening side effect of Lamotrigine?

Stevens-johnson syndrome

6. Teratogenic effect of anticonvulsants in pregnancy?

Neural tube defects.