## **Dermatology**

- A 20-year-old female presented with a single non-pruritic plaque on her back with inward pointing scale. She developed similar smaller papules and plaques on the back over a one week period. The most appropriate management is:
  - a) Topical antifungal
  - b) Topical antibiotic
  - c) Oral antifungal
  - d) Topical corticosteroids as needed
  - e) Oral antibiotic
- 2) A 8-year-old black boy presented with a round, scaly patch of hair loss on the occipital scalp with scale and occasional pustules. The most appropriate management is:
  - a) Topical antifungal
  - b) Topical antibiotic
  - c) Oral antifungal
  - d) Intralesional corticosteroid injections
  - e) Oral antibiotic
- 3) A 29-year-old woman presents with a 5 day history of arthralgias and a purpuric eruption on the lower legs. The most appropriate initial management is:
  - a) Topical cortyicosteroids
  - b) Oral corticosteroids
  - c) Compression of the lower legs
  - d) Reassurance
  - e) Urinalysis
- 4) The following statements regarding contact dermatitis are true EXCEPT:
  - a) Phototoxic dermatitis following topical application of creosote requires UV light
  - b) Photoallergic contact dermatitis requires UV light to be manifested
  - c) Contact eczema involves a type IV delayed hypersensitivity reaction
  - d) Contact urticaria or hives is a common form of dermatitis
  - e) Chemical burns by HCl and KOH may result in an irritant contact dermatitis

- 5) 18 year-old female with initial onset of pruritic rash characterized by excoriations, scaling and crusting and distributed on the extremities, neck and eyelids. Past medical history is significant for asthma and hay fever. The most likely diagnosis is:
  - a) Scabies
  - b) Atopic dermatitis
  - c) Contact dermatitis
  - d) Shingles
  - e) Dyshidrotic eczema
- 6) 8 year-old black male comes in with an asymptomatic erythematous eruption characterized by oval patches with collarette scaling. It is distributed as a "Christmas tree" pattern on the back. Father states that there was originally one lesion on the abdomen a few weeks prior. What is the most likely diagnosis:
  - a) Pityriasis rosea
  - b) Tinea corporis
  - c) Lichen planus
  - d) Psoriasis
  - e) None of the above
- 7) 30 year-old female comes in with a soft smooth, glistening, erythematous nodule on her lower lip. She states that a few weeks prior she had some chapped lips with occasional bleeding. Now, the lips have healed but this lesion arose suddenly in its place. It is occasionally tender on pressure. The most likely diagnosis is:
  - a) HSV1
  - b) Cherry hemangioma
  - c) Pyogenic granuloma
  - d) Dermal nevus
  - e) None of the above

- 8) An 11 year-old male comes in with erythematous pustules, inflamed nodules and cysts with some scaring distributed on the face predominantly. Diagnosis of acne vulgaris was given. Topical erythromycin was used for 2 weeks, several months ago, with no response. What treatment would you prescribe now?
  - a) Isoretinoin immediately
  - b) Topical tretinoin
  - c) Topical benzoyl peroxide
  - d) Topical antibiotic other than erythromycin
  - e) Oral antibiotic
  - f) Oral antibiotic and topical tretinoin
- 9) A 40 year-old woman develops recurrent papules and pustules in a symmetrical pattern on her cheeks, nose, chin and forehead. She blushes easily, especially when consuming hot liquids, alcohol, or spicy foods. The most likely diagnosis is:
  - a) Acne vulgaris
  - b) Perioral dermatitis
  - c) Acne rosacea
  - d) Seborrheic dermatitis
  - e) Carcinoid syndrome
- 10) Which of the following is not associated with thyroid disease?
  - a) Dermatitis herpetiformis
  - b) Urticaria
  - c) Porphyria cutanea tarda
  - d) Vitiligo
  - e) Alopecia areata
- 11)All of the following are treatments for nonscarring alopecia EXCEPT:
  - a) Spironolactone
  - b) Minoxidil
  - c) Hair transplantation
  - d) Intralesional triamcinalone
  - e) Finasteride

- 12) Which of the following is associated with thyroid disease?
  - a) Neurofibromatosis
  - b) Vitiligo
  - c) Erythema nodosum
  - d) Pemphigus vulgaris
  - e) Icthyosis vulgaris

## **ANSWERS**

1. D 2. C

4. D 5. B 6. A

7. C 8. F 9. C

10. C 11. D 12. B

3. E