



Dermatology Clinical Blueprint

Academic Year 2023 - 2024

Fifth Year Dermatology Examination Blueprint

Purpose of the exam

The exam is designed to evaluate the knowledge, diagnostic reasoning, and clinical judgment skills expected of the certified junior doctor in the broad domain of Dermatology. The ability to make appropriate diagnostic and management decisions that have important consequences for patients will be assessed. The exam may require recognition of common clinical problems for which patients may consult a dermatologist.

Exam content

Exam content is determined by a pre-established blueprint, or table of specifications. The blueprint is developed by Department of Medicine – College of Medicine – Al-Nahrain University and is reviewed annually and updated as needed for currency. Recent graduates, trainees, training program directors, and certified practitioners in the discipline are surveyed periodically to provide feedback and inform the blueprinting process.

The primary Dermatology content categories of the blueprint are shown below, with the percentage assigned to each for a typical exam:

No.	Clinical Session Title	% of Exam	Hours
1	Taking proper history& detailed clinical examination	10	3
2	Eczema	7	3
3	Psoriasis	7	3
4	Acne& related diseases	7	3
5	Urticaria	7	3
6	Viral skin disorders	7	3
7	Bacterial skin disorders	7	3
8	Parasitic skin disorders	7	3
9	Lichen planus & Erythema multiforme	7	3
10	Hair diseases	5	3
11	Pigmentary skin diseases	7	3
12	Superficial fungal skin infections	7	3
13	Skin tumours	3	3
14	Dermatologic emergencies	7	3
15	Cutaneous manifestations of systemic diseases	5	3
	Total	100	45

Exam format

Clinical course assessment:

Daily assessing through questioning & clinical cases approach through Mini-Clinical Evaluation Exercise (mini-CEX), as well as mid-course exam. Comprise of 30% of total mark & final course exam. Which comprise 70 % of total mark (Recall information questions & analytic clinical question with slides show).

Most questions describe patient scenarios and ask about the work done (that is, tasks performed) by physicians during practice:

- Approach to the patient & proper history taking
- Ordering and interpreting results of tests
- Making a diagnosis
- Recommending treatment or other patient care
- Assessing risk, determining prognosis, and applying principles from epidemiologic studies

In all exams, clinical information presented may include patient photographs, and other media to illustrate relevant patient findings.

The primary medical categories can be expanded for additional detail to show topics that may be covered in the exam. Each primary medical content category is listed below, with the *percentage of the exam* assigned to this content area. Below each major category are subsection topics and their assigned percentages in the exam.

Please note: The percentages below describe content of a *typical* exam and are approximate; actual exam content may vary.

Taking proper history & detailed clinical examination	10 % of Exam
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- **History & Examination.**
 - **Morphology.**
 - **Distribution.**
- **Clinical signs.**
- **Diagnostic tests.**

Eczema and Dermatitis	7 % of Exam
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Introduction & definition of eczema.

- **Classification.**
- **Contact dermatitis:**
clinical pictures, diagnosis & treatment.
- **Infective & infected dermatitis.**
- **Seborrheic dermatitis:**
Clinical pictures, diagnosis,

differential diagnosis & treatment.

- Asteatotic eczema.

Atopic dermatitis:

- Clinical types and pictures, complications, diagnosis & treatment.
- Discoid eczema.
- Lichen simplex chronicus.
- Pompholyx.
- Gravitational eczema:

Pathogenesis, clinical pictures & Treatment.

Psoriasis	7 % of Exam
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Definition.

- Etiology.
- Provoking and exacerbating factors.
- Clinical features.
- Clinical variants.
- Differential diagnosis.
- Treatment: Local, scalp treatment, phototherapy (including PUVA in details) and systemic treatments.
- Erythroderma.

Acne & related conditions	7 % of Exam
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Introduction.

- Factors affect acne.
- Clinical features.
- Complications.
- Treatment.
- * Rosacea:
 - Introduction.
 - Etiology & exacerbating factors.
 - Clinical features.
 - Complications.
 - Differential diagnosis.
 - Treatment.
- * Peri - oral dermatitis.

Urticaria:	7 % of Exam
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- Introduction.
- Classification & types.
- Etiological (Provoking) factors.
- Clinical features.
- Investigations.
- Differential diagnoses.
- Treatment of urticaria.
- Treatment of anaphylaxis.
- * Angioedema:
 - Ordinary angioedema.
- * Antihistamines

Viral diseases of the skin**7 % of Exam****Introduction.**

- **Triggering factors.**
- ***Herpes virus:**
 - **Herpes simplex: orolabial, genital and others types.**
 - **Chicken pox & shingles.**
- ***Human papilloma virus: Warts.**
- ***Pox virus: Molluscum contagiosum, Orf & milker's nodules.**
- ***Pityriasis rosea: Clinical pictures, differential diagnosis & treatment**

Bacterial diseases of the skin**7 % of Exam****Clinical types:**

- **Impetigo: Bullous & non bullous.**
- **Ecthyma.**
- **Folliculitis: Superficial & deep.**
- **Pseudofolliculitis.**
- **Boil (Furuncle).**
- **Carbuncle.**
- **Hidradenitis suppurativa.**
- **Erysipelas and Cellulitis.**
- **Erythrasma.**

Parasitic diseases of the skin**7 % of Exam****I. Protozoal diseases:**

- **Leishmaniasis (C.L):**

Clinical types:**II. Arthropod infection:**

- A. **Pediculosis capitis (Head louse).**
- B. **Pediculosis corporis (Body louse).**
 - A. **Phthirus pubis (Pubic louse).**
 - B. **Epidemiology, clinical presentations, diagnosis and treatment**

III. Mite infection(scabies):**Epidemiology, clinical presentation, diagnosis and treatment****Lichen planus & Erythema multiforme****7 % of Exam****Lichen planus:**

- **Introduction**
- **Clinical features.**
- **Differential diagnoses.**
- **Clinical variants.**
- **Treatment.**

***Erythema multiforme:**

- **Clinical features.**
 - **Clinical forms.**
 - **Differential diagnoses.**
- Treatment.**

Hair diseases	5 % of Exam
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Hair cycle.

- **Hair types.**
- **Causes of hair loss.**
- **Alopecia areata.**
- **Androgenetic alopecia (male & female types).**
- **Telogen effluvium.**

Hirsutism.

Pigmentary skin diseases	7 % of Exam
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Hypopigmentation

- **Vitiligo:**
- **Post inflammatory Hypopigmentation.**
- **Pityriasis alba.**
- **Idiopathic guttate**
- **Hypomelanosis.**
- **Steroid leukoderma.**
- **Albinism.**

Hyperpigmentation:

- **Melasma.**
- **Post inflammatory Hyperpigmentation.**
- **Genetic conditions:**
 - a- **Becker nevus**
 - b- **café- au lait macule**
 - c- **Freckles (ephelides)**
 - d- **Lentigo**
 - e- **Xerodermapigmentosa**
- **Endocrine causes for hyperpigmentation.**
- **Metabolic causes.**
- **Nutritional causes.**
- **Drugs.**
- **Tumors. - Malignancy-associated acanthosis nigricans**

Superficial fungal skin infection**7 % of Exam****Dermatophytosis: (tinea or ringworm infection):****Clinical types.****Dermatophytid (Id reaction).****Diagnosis.****Treatment.****Pityriasis versicolor:****Etiology.****Clinical features.****Diagnosis****Treatment.****Candidiasis (Moniliasis):****Risk factors.****Laboratory diagnosis.****Clinical types.****Treatment.****Skin tumours****3 % of Exam****Classification.**

- Benign tumours.
- Pre - malignant conditions.
- Malignant tumours.
- Etiology.
- Differential diagnosis.
- Treatment.

Dermatologic emergencies**7 % of Exam**

- Classification

☒ INFECTIONS**☒ ERYTHRODERMA****☒ DRUG ERUPTIONS****☒ STEVENS-JOHNSON SYNDROME AND TOXIC EPIDERMAL NECROLYSIS****☒ BLISTERING DISORDERS****☒ ACUTE URTICARIA AND ACUTE ANGIOEDEMA****Approach to the patient**

- History
- Presentation- acute, ill appearing
- Skin lesions

Diagnostic testing**Skin signs a diagnostic clue****(to serious underlying disorder)****Severe Infections****(e.g. meningococcaemia,**

- necrotising fasciitis,
- staphylococcal scalded skin
- Acute autoimmune disease
(e.g. SLE, systemic vasculitis)
- Paraneoplastic
(e.g. dermatomyositis)
- Skin disease causing risk of vital organ failure
- Severe adverse drug reactions
(e.g. toxic epidermal necrolysis)
- Erythroderma
(e.g. due to extensive inflammatory skin disease)
- Autoimmune Blistering disorders
(e.g. pemphigus vulgaris)

Cutaneous manifestations of systemic diseases	5 % of Exam
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Xanthoma and hyperlipidemia:

- Introduction & types of hyperlipidemias.
- Clinical types, histology & treatment of xanthoma .
- *Diabetes mellitus.
- *Endocrine disorders.
- *Nutritional problems.
- * Liver diseases.
- *Chronic renal failure.
- *GIT problems.
- *Pyoderma gangrenosum.
- *Behcet’s disease.

Each exam will cover all the indicated clinical tasks in the approximate percentages

Clinical Task	<ul style="list-style-type: none"> • History & clinical examination • Evaluating symptoms and Signs 	<ul style="list-style-type: none"> • Ordering Investigations • Interpreting Investigations 	<ul style="list-style-type: none"> • Making Diagnosis 	<ul style="list-style-type: none"> • Recommending Treatment • Evaluating treatment
	30 %	30%	25%	15%

Questions will cover the following level of competences in the approximate percentages

Level of Competence	Recall of Knowledge	Application of Knowledge	Problem solving
	40 %	35 %	25 %