

Department
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4th Year MBBS, 14, December, 2017
(Pathology-Subjective Part)

Time Allowed: 50 min

Blood

Total Marks: 30

Q1- A 20 year old female comes to the hospital with the complaints of weakness, lethargy & shortness of breath on exertion.

On examination:

Pallor + Pulse 100/min, BP 100/80mmHg
Hb 10g/dl TLC 4000/mm³ plt 200,000/mm³
MCV 65fl MCH 30

What is the diagnosis?

What is the diagnostic approach to this condition?

What are the causes of this condition?

Q2- a 40 years old female comes to the hospital with the complaints of numbness in the right hand & tingling sensations in the finger. She is purely vegetarian for 2 years.

Lab investigations show:

Hb 11g/dl, MCV 110fl, TLC 5000/mm³

What is the diagnosis?

What are the causes of this condition?

What investigation needs to be done?

Q3- A mother brings a one year old baby boy to the hospital. She complains of poor feeding irritability, & weakness.

ON EXAMINATION: PALLOR + BOSSING OF SKULL

HB 4G/DL MCV 45FL

SERUM IRON NORMAL

SERUM FERRITIN NORMAL

What is diagnosis? - B-thalassemia

What is the confirmatory test? WHAT happens to TIBC.

What is COOLEYS Anemia?

What genes are responsible for this disease?

this is the most severe form of beta Thalassemia in which complete lack of beta Protein in the hemoglobin

Q4- A 38 year old man presents with a few tender, rubbery lymph cervical lymph node limited to the neck.

Hodgkin Lymphoma

What is the appropriate investigation to perform after a full physical exam?

CBC, ESR, liver and kidney function test

What is the clinical difference between Hodgkin & non Hodgkin lymphoma 607 (2)
607
Classify NHL and describe morphology of Burkitt's Lymphoma 30 May 607 597 (2)

G3 by

35

Q5- A 12 years old girl comes to emergency with the complaint of severe pain in the back & abdomen.

He also c/o of excessive fatigue & repeated infections

On examination: leg ulcer & leg tenderness

Labs show: Hb low MCV normal MCH normal. Peripheral picture shows abnormal cells which look like spindles

SICKLE CELL DISEASE (1)

What is the diagnosis? (4)

Classify hemolytic anemias

Q-6 Classify Hodgkin's Lymphoma and give morphology of each type.

b- what immunomarkers are needed for its diagnosis. (4+1)

CD20 and BCL6

① N.S.: - Deposition of collagen in bands

• Reed Sternberg cell

• CD15, CD30, CD45

② M.L.: - Reed Sternberg cells, mononuclear

variant, lymphocyte-like R.S.

③ L.R.: - Reactive lymphocyte, cellular infiltrate

④ D.D.: - Pleomorphic variants, cellular infiltrate

SL.P.: - Pop corn cell, Reed Sternberg cell

CD20, BCL6

Synthetic

Intrinsic Abnormalities

Hereditary

membrane abnormalities

Enzyme deficiency

Disorder of Hemoglobin

membrane defect

Intrinsic Abnormalities

Antibody-Mediator

Antibodies

immunological trauma to red cell

microangiopathic hemolytic anemia

- ① High mitotic index
- ② ~~numerous~~ apoptotic cells
- ③ Starry sky pattern
- ④ Royal D.