

① Presence of Disseptive infiltration of tumor cells
 ② often including signet ring cell - Not tubular form.
 2018 Alveolar & Solid Variant Consist of Circumscribed
 14187 cluster of tumor cell.
Shereena Alwan Difficult to palpate

Male Breast

TEST PATHOLOGY

MALE GENITAL SYSTEM, BREAST PATHOLOGY

SEQ

ATTEMPT ALL QUESTIONS.

TOTAL MARKS 30

TIME 50 MIN

PASS MARKS 15

15
30
41
B5

22
45
U5

15
15
30

1-A 30-year-old woman has felt a mass in her right breast for 6 months. On physical examination there is a 5 cm right breast mass and firm, non-tender lymphadenopathy. A right mastectomy with axillary lymph node dissection shows a poorly differentiated carcinoma that is negative for estrogen and progesterone receptors and negative for HER2/neu. One axillary lymph node demonstrates micrometastases. However there are no distant metastasis.

- Prognostic Factors
- Poor differentiation
- estrogen -ve
- Progesterone -ve
- Her2 -ve
- no metastasis

✓ What are different prognostic factors mentioned in above scenario. 2

✓ How to do you grade a tumour and what is the name and components of grading system used for breast carcinoma. 1.5 Bloom's Richardson Nodding System

1064 ✓ Name etiological factors for breast carcinoma. 1.5 Positive Radiation & Estrogen Exposure, Diet (Alcohol consumption), Environmental toxins, pesticides, Germinal mutations.

1053 ✓ 2-A 30 year old married female presents with breast lump in her right breast. The lump is slightly tender, lumpy bumpy but its not fixed to surrounding structures.

Fibrocystic change ↙ What can be the differential diagnosis 2 Fibroadenoma, Cystic DCIS, LCIS

1048 ✓ 3-A 24 Year old female presents to a breast surgeon with a solitary, discrete, rubbery, freely movable 2cm mass in the upper quadrant of the left breast. She feels a change in the size of mass during menstrual cycle. 1.5

What is the diagnosis, give its morphology as well. 1.5 Epithelial Suspended by stroma

Fibroadenoma

(1069)

→ Pericanalicular proliferation → Epithelium compressed by stroma
 → Intracanalicular proliferation → Slit spaces

a) Fibrocytic change

ultrasonography for breast
MRI

Noncomedoc

DCIS

3-A 50 year old lady presented with breast lump, which is fixed to surrounding structures. The tumour is also infiltrating the overlying skin. On microscopic examination, the tumour is showing tubule formation with central necrosis. Focal invasion is seen.

What is the diagnosis. 0.5

TD64

DCIS, LCIS

✓ What are different types of invasive and non-invasive breast carcinoma. 3

10 SS ← How do you classify breast carcinoma on the basis of receptor positivity and negativity. 1.5

• HER2+ TP53 2.0

• ER+, HER2- BRCA1 So-6S+

• ER-, HER2- BRCA1, IS; Triple negative basal like

4-A 70 year old man presents with frequency of micturition. On digital rectal examination, his prostate is stony hard. Biopsy shows sheets of tumor cells with hyperchromatic nuclei and frequent mitosis. Focal cribriform pattern is seen. If grading of this tumor is required for future treatment.

Which grading system will be used 0.5 4th grade Gleason Grading System

How will you grade this tumour. 2 2.0 well diff -

7-10 poorly differentiated

987 ✓ What is the pathogenesis of benign prostatic hyperplasia. 1.5 Q83.

988 ✓ Describe the role of PSA in prostate pathology. 1

Used in the Screening of Prostate Cancer

5-A 30 year old boy presents with testicular mass.

975 Give classification of testicular tumours with associated immunohistochemical markers and tumor markers 3.0 Neural tissue, muscle bundle, Island of C. markers and tumor markers 3.0 Clusters & sarcromyx ep, intestinal wall, liver

978 Give morphology of teratoma. 1.5 Alpha Feto Protein

977 What would be the morphology of tumour if it is producing AFP. 1 Yolk Sac

Yolk Sac histology examination ultrasound, DNA analysis tumor 6. a- How will you diagnose a case of infertility. 1.5 Seminal analysis b- If a patient presents with testicular swelling what can be the differential diagnosis. 1.5 Seminoma, inflammatory carcinoma, Hydrocele, Epididymitis, hydrocoele c- if the diagnosis is seminoma what are its different types and peritoneal metastasis. 1.5+0.5 Q76

for Men - Varicocele, hernia, orchitis
serum analysis M.CAPS (cervical fat necrosis
(trauma))

Malignant cells exclude from DCIS

with in the Ductal System

Vag Lactiferous Sinus into Wipple stain
crossing

→ Paroxysmal Disease

→ Rare Manifestation

Breast Cancer

Unlikely Eruption at Site

Pustitis is

and lesion can be mistake

eczema

1 Q Genetic testing.

2 D Testicular biopsy

3 E Imaging (MRI)

4 C Fertilization

5 a ovulation testing.

ovarian Reserve test

6 E Hormone testing

Q1

iOB

11 D

12 B

13 C

14 B