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ANMC PATHOLOGY DEPARTMENT

M.B.B.S. 4TH YEAR (2015-16)

Total Marks : 50

Name : -----

Roll No : -----

REVISION TEST

Time Allowed : 1 Hr & 20 min

SEQs

1. A 40 yrs old female has noticed abdominal enlargement for last 5 months. Abdominal scan shows bilateral cystic ovarian mass. Histological examination reveals papillary structures with psammoma bodies, lined by atypical cuboidal cells that invade underlying stroma.

a. What is the most probable diagnosis? Papillary carcinoma serous (01)

b. Classify Ovarian tumors along with their respective tumor markers and one histological characteristic finding. (04)

2. A 50 yrs obese diabetic female presented with heavy menstrual bleeding. On microscopic examination of this large exophytic endometrial mass revealed irregular complex glands, arranged back to back, lined by pleomorphic cells having hyperchromatic nuclei.

a. What is the most likely diagnosis? Endometrial (01)

b. Tabulate the differences between type-I and type-II endometrial carcinoma. 1032 (04)

3. A 50 yrs female presented with ulcerative mass in upper outer quadrant of left breast. Histological examination reveals sheets and nests of pleomorphic cells with abundant abnormal mitosis.

a. What is your diagnosis? DCIS (01)

b. Classify breast tumors according to their genetic expression. (02)

c. Briefly discuss prognostic factors of breast carcinoma. Dist HER2 nuclei (02)

4. A 52 yrs female patient presented with nipple discharge. On microscopic examination of a left sided breast mass revealed nests of atypical cells limited within the basement membrane of the ducts. paget disease of

a. What is the probable diagnosis? (01)

b. Describe the microscopic architectural patterns of this lesion. (02)

c. Discuss changes in fibrocystic disease of breast. 1074 table (02)

5. A 40-year-old woman becomes increasingly dyspneic over the years' time and is afebrile, with no cough or sputum production. She has decreased breath sounds with hyper resonance in all

lung fields. A chest X-RAY reveals increased lucency of all lung fields with history of alpha-1

antitrypsin deficiency.

Emphysema

a. Which is the most likely diagnosis?

b. Describe the types of emphysema. Panacinar, centriacinar, irregular.

c. Discuss the pathogenesis of emphysema. distal

6. A 45-year-old man had a high grade fever shaking chills and mucopurulent sputum with

occasional hemoptysis that worsened over several days. Diffuse crackles are heard at the right

lung base. Laboratory studies are as follows: hemoglobin: 13.3 g/dL; platelet count: 291,800/mm³

WBC count: 15,240/mm³ with differential count: neutrophils-79%, lymphocytes-16% and

monocytes-5.

Pneumonia

a. What is most the likely diagnosis?

b. Describe the four classic stages of lobar pneumonia in terms of

temporal features and morphology.

congestion and hepatization caused by bronchi and bronchioles

7. Discuss bronchiectasis, in terms of

a. Definition and predisposing conditions

b. The types of organisms typically cultured from bronchi

c. Discuss the Reid index.

At is defined as ratio of the thickness of submucosal

resecting gland and the thickness of the epithelium and cartilage

8. A 35-year-old female patient of SLE develops progressive renal failure with high level of BUN and

Serum Creatinine. Renal biopsy reveals the lesion of rapidly progressive glomerulonephritis.

194m

a. What are different types of primary glomerulopathies? (02)

b. What are features of glomerular syndromes associated with rapidly progressive

glomerulonephritis. Acute renal failure, proteinuria, hematuria

c. Name the laboratory tests for assessment of renal failure.

creatinine, RFT, Serum Creatinine, BUN

9. A 60-year-old man with long history of smoking has costovertebral pain with hematuria.

a. What is most likely diagnosis of this disease? Renal cell carcinoma

b. Describe the pathogenesis along with morphology of and different variants of this lesion. (04)

Von Hippel Lindau

10. a. Briefly describe the Henoch-Scholein Purpura along with renal manifestation. (2.5)

b. Describe the laboratory diagnosis of Nephrotic Syndrome. (2.5)