

SECOND PROFESSIONAL M.B.B.S. DEGREE EXAMINATION, AUGUST 2010**PATHOLOGY—Paper II****(SYSTEMIC PATHOLOGY AND HAEMATOLOGY)**

(2007 admissions)

Time : Two Hours

Maximum : 40 Marks

*Answer all the questions.**Answer Sections A and B in separate answer-books.**MCQs should be answered first in the response sheet provided.***Section A**

I. Multiple Choice Questions. Single response type 16 (separate sheet attached). (16 × ¼ = 8 marks)

II. Male 20-years presented with progressive pallor, bleeding gums, hepatosplenomegaly.

Hb = 6 gm %, TC 50000/cu.mm.

- (a) What is your provisional diagnosis?
- (b) Classify the condition.
- (c) Describe the peripheral smear findings in this condition.
- (d) Mention 2 cytochemical stains of diagnostic importance.

(1 + 3 + 2 + 2 = 8 marks)

Section B

- III. (a) What is the classification of Bone Tumours?
- (b) Write down the gross and microscopy of Osteogenic sarcoma.
- (c) Mention 2 bones most frequently involved.

(3 + 2 + 1 = 6 marks)

IV. Write short notes on :

- (a) Morphological changes of heart in 1st week of myocardial infarction.
- (b) Etiopathogenesis of carcinoma cervix.
- (c) Fibroadenoma.

(18 marks)



NOTE.—(1) Do not write anything on the question paper.

(2) Write your register number in the answer-sheet provided.

FirstRanker's choice

(3) Select one most appropriate answer and indicate the correct answer by marking the correct option in the answer-sheet provided.

1. Hyaline inclusions in hepatocytes in Alcohol liver disease is :
(A) Russell body. (B) Mallory body.
(C) Councilman body. (D) Sclerotic body.
2. Which of the following is a T-cell marker ?
(A) CD₁₀. (B) CD₁₉.
(C) CD₃₁. (D) CD₃.
3. Carcinoma breast usually showing bilateral involvement is :
(A) Ductal. (B) Lobular.
(C) Medullary. (D) Mucinous.
4. Gamna Gandy bodies are seen in :
(A) Liver. (B) Spleen.
(C) Lung. (D) Lymph node.
5. Aneurysm of Aorta with Tree bark appearance is :
(A) Syphilitic. (B) Atherosclerotic.
(C) Hypertensive. (D) Mycotic.
6. Defective platelet aggregation cause :
(A) Glanzman's disease. (B) May Hegglin anomaly.
(C) Storage pool disease. (D) Bernard-Soulier syndrome.
7. Pneumocystis carinii produce :
(A) Interstitial pneumonia. (B) Bronchopneumonia.
(C) Cavity lesion. (D) Lobar pneumonia.
8. An epiphyseal tumour of femur in a young adult showing expansile lytic lesion with their cortic. Most probable diagnosis :
(A) Aneurysmal bone cyst. (B) Osteogenic sarcoma.
(C) Ewing's sarcoma. (D) Giant cell tumour.

9. Following are true about Haemophilia-A *except* :
- (A) Autosomal recessive inheritance. (B) Deficiency of factor VIII.
(C) Prolonged clotting time. (D) Haemarthrosis.
10. Autosplenectomy occurs in :
- (A) Hereditary spherocytosis. (B) Sickle cell anaemia.
(C) Myelofibrosis. (D) Malaria.
11. An intraabdominal tumour clinically presenting as Paroxysmal episodes of hypertension is :
- (A) Adrenal cortical carcinoma. (B) Myelolipoma.
(C) Pheochromocytoma. (D) Neuroblastoma.
12. Features of Crohn's disease include all *except* :
- (A) Skip lesions. (B) Fissuring ulcers.
(C) Transmural inflammation. (D) Caseating granuloma.
13. H. Pylori is complicated as etiological agent in all Gastric lesions *except* :
- (A) Lymphoma. (B) Carcinoma.
(C) Chronic gastritis. (D) GIST.
14. MEN syndrome Type I includes all *except* :
- (A) Pheochromocytoma. (B) Parathyroid hyperplasia.
(C) Pituitary adenoma. (D) Pancreatic adenoma.
15. Which of the neoplasm is NOT a paraproteinemia :
- (A) Multiple Myeloma.
(B) Primary Amyloidosis.
(C) Waldenström's macroglobulinemia.
(D) Myeosis Fungoides.
16. Renal neoplasm associated with Tuberous sclerosis is :
- (A) Renal cell carcinoma. (B) Oncocytoma.
(C) Angiomyolipoma. (D) Nephroblastoma.