

Third Examination for Medical Degrees (Part II) - July / August 2018 Pathology Paper I

Monday 30th July 2018

9.00 am to 11.00 am **Two hours**

Answer ALL FOUR questions.

Answer each part in a SEPARATE book.

•		Part A		
1.				
1.1	List three ty	pes of non-neoplastic polyps in the colon.	(10 marks)	
1.2	Compare and contrast the microscopic appearance of adenomatous polyps and colorectal carcinoma. (20 marks)			
1.3	Describe the pathological basis of the different clinical presentations of colorectal in relation to the part of the colon involved.		l carcinoma (40 marks)	
1.4	Briefly describe the pathogenesis of colorectal carcinoma.		(30 marks)	
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2.		<u>Part B</u>		
2.1	Describe th	e pathogenesis of atherosclerosis.	(50 marks)	
2.2	Explain the pathological effects of atheromatous plaques in the			
	2.2.1 card	otid arteries.	(20 marks)	
	2.2.2 abd	ominal aorta.	(30 marks)	
	•	n		
3.		Part C		
3.1	Compare and contrast primary pulmonary tuberculosis and post primary pulmonary tuberculosis. (60 marks)			
3.2	Describe the macroscopic and microscopic appearance of kidneys in chronic py		elonephritis. (40 marks)	
4.		Part D		
4.1	Haemolytic	nemolytic anaemia is a common clinical condition you will see in clinical practice.		
	4.1.1 Det	fine haemolytic anaemia.	(10 marks)	
	4.1.2 Sta	te briefly how haemolytic anaemia is classified.	(10 marks)	
		t four different laboratory findings you would expect to see in all type:	s of haemolytic	

4.1.4 Explain the pathological basis of two of the findings you mentioned in 4.1.3 above.

4.2.1 Define "acute kidney injury".

(10 marks)

- **4.2.2** Name the **three** pathogenic mechanisms leading to acute kidney injury giving examples for each mechanism. (15 marks)
- **4.2.3** State **four** first line biochemical tests you would request for a patient presenting with acute kidney injury and explain the pathological basis for the expected alterations in each test.

(20 marks)

4.2.4 List **two** important biochemical parameters you would monitor in a patient with acute kidney injury for staging of the disease severity.

(05 marks)