

II – M.B.B.S.: SUMMER – 2019
SUBJECT : PATHOLOGY PAPER – I

Day : Tuesday
Date : 02/07/2019

Time : 2.00 PM to 4.00 PM
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Draw neat and labelled diagram **WHEREVER** necessary.
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- Q.1** a) A 50 year old male known alcoholic presented with hematemesis. On examination icterus, flapping tremors were present. There was atrophy of bilateral testes. What is the likely diagnosis? Describe the morphological features of the disease and enumerate its complications. [05]
- b) A 24 year old female had injury to right forearm in road traffic accident. X-ray was done and plaster cast was applied. Describe the pathological process involved in her right forearm leading to recovery. Enumerate factors which would delay healing of this lesion. [05]
- Q.2** a) Define necrosis. Describe the morphological features of different types giving example of each. [05]
- b) Define embolism. Write in brief about amniotic fluid embolism. [05]
- Q.3** a) Discuss the pathogenesis, morphology and complications of lobar pneumonia. [05]
- b) Define inflammation. Describe the vascular and cellular events in acute inflammation. [05]
- Q.4** Write short notes on **ANY FIVE** of the following: [10]
- a) Chronic venous congestion of liver
 - b) Hyaline change
 - c) Heart in Rheumatic fever
 - d) Chronic Pyelonephritis
 - e) Downs syndrome
 - f) Dry gangrene

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II – M.B.B.S.: SUMMER – 2019
SUBJECT : PATHOLOGY
PAPER – II

Day : Wednesday
Date : 03/07/2019

Time : 2.00 p.m. to 4.00 p.m.
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Draw neat and labelled diagram **WHEREVER** necessary.
-

- Q.1** a) A 55 year old female with postmenopausal bleeding presented with weakness, fatigue and pedal oedema. On examination pallor was present. Her nails were spoon shaped. What is the likely diagnosis? How will you investigate the anemia? Describe her peripheral smear findings. [05]
- b) A 22 year old male, hosteller presented with weakness, anorexia and vomiting. On examination icterus was present and liver was palpable and tender. What is the likely diagnosis? How will you investigate? [05]
- Q.2** a) What are blood transfusion reactions? How will you investigate the case of mis-matched blood transfusion? [05]
- b) Define and classify leukemias. Describe pathogenesis, clinical features and peripheral smear findings in chronic Myeloid leukemia. [05]
- Q.3** a) Define and classify neoplasia. Differentiate between benign and malignant tumors. Describe grading and staging of tumors. [05]
- b) Describe the pathogenesis, morphology and clinical features of lung carcinoma. [05]
- Q.4** Write short notes on **ANY FIVE** of the following: [10]
- a) Investigation in sickle cell anemia
 - b) Fibroadenoma
 - c) Laboratory diagnosis of Diabetes Mellitus
 - d) Seminoma
 - e) Bleeding time
 - f) Bence Jones proteins

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II – M.B.B.S.
SUBJECT : PATHOLOGY – I

Day : Wednesday
Date : 02/01/2019

Time : 2.00 PM to 4.00 PM
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labelled diagrams **WHEREVER** necessary.
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- Q.1** a) A 52 year old male, who was a manager in software company presented with epigastric pain for last one month. The pain was aggravated after taking food. Occasionally he had vomiting which relieved the severity of the pain. What is the probable clinical diagnosis? Describe morphological features and complications of this disease? [05]
- b) A 14 years old boy was brought by his mother to hospital with complaints of fever, malaise, nausea for last 3 days. He also had swelling of his feet, hands and around his eyes. He had decreased urine output and urine was smoky dark in colour. Mother reported that he had sore throat two weeks back. What is the probable diagnosis? Write etiopathogenesis and morphological features of this disease. [05]
- Q.2** a) Enumerate various reversible cell injuries. Write a note on Mucoid change. [05]
- b) Define and classify shock. Describe etiopathogenesis of hypovolemic shock. [05]
- Q.3** a) Enumerate major disorders in COPD. Describe etiopathogenesis and morphological features in bronchiectasis. [05]
- b) Describe morphological, clinical features and complications of subacute bacterial endocarditis. [05]
- Q.4** Write short notes on **ANY FIVE** of the following: [10]
- a) Tuberculous osteomyelitis
 - b) Fat necrosis
 - c) Polyarteritis Nodosa
 - d) Downs Syndrome
 - e) Fate of thrombus
 - f) Giant cell

II – M.B.B.S.: WINTER – 2018
SUBJECT : PATHOLOGY – II

Day : Thursday
Date : 03/01/2019

Time : 2.00 PM to 4.00 PM
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Draw neat and labelled diagrams **WHEREVER** necessary.
-

- Q.1 a)** A 68 year old male presented with weakness, fatigue and dyspnoea. On clinical examination he had pallor and nontender discrete lymphadenopathy. He also gave history of repeated respiratory infections in the past. His WBC Count was 62,000/cm and PBS showed predominantly small mature lymphocytes and smudge cells. What is the probable clinical diagnosis? Describe the laboratory findings and course of the disease in this case. **[05]**
- b)** A 8 year old male child was brought to hospital by his mother with the complaints of impaired growth development, fatigue and weakness. Since yesterday the child had abdominal pain and he had similar attacks in the past. On clinical examination patient had pallor, mild icterus and splenomegaly. What is the probable clinical diagnosis? Describe clinical and laboratory findings in this disease. **[05]**
- Q.2 a)** Mention criteria's for selection of blood donor. Describe how blood products are stored in blood bank. **[05]**
- b)** Describe briefly laboratory diagnosis of cancer. **[05]**
- Q.3 a)** Classify ovarian tumours. Write a note on Mature Teratoma. **[05]**
- b)** Write a note on Von Willebrands disease. **[05]**
- Q.4** Write short notes on **ANY FIVE** of the following: **[10]**
- a) Auer rod
 - b) Burkitts lymphoma
 - c) Bombay blood group
 - d) Nephroblastoma
 - e) ESR
 - f) Glycosylated Hb

SARASWATHI –II: JULY – 2018
SUBJECT : PATHOLOGY PAPER-I

Day: Monday
Date: 02/07/2018

Time: 2.00 pm To 4.00 pm
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate full marks.
- 4) Neat and labelled diagram must be drawn **WHEREVER** necessary.

- Q.1** a) A 50 year old male presented to the hospital with severe sudden onset precordial chest pain not relieved by rest. ECG revealed ST segment elevation and T wave inversion. What is your most probable diagnosis? Describe the sequential morphological changes occurring in this condition and enumerate its possible complications. **(05)**
- b) A 28 year old male was brought to the casualty with multiple injuries in a semiconscious state following a road traffic accident. His pulse was rapid and thready and blood pressure was 80/60 mmHg. What is your most probable diagnosis? Describe the pathophysiology of this condition and the morphological changes seen in various organs. **(05)**
- Q.2** a) Discuss the mechanisms of and morphological changes seen in apoptosis. **(05)**
- b) Define and classify amyloidosis. Describe the staining features of amyloid. **(05)**
- Q.3** a) Define and classify cirrhosis. Describe post hepatic cirrhosis. **(05)**
- b) Enumerate renal clinical syndromes. Describe diabetic nephropathy **(05)**
- Q.4** Write short notes on **ANY FIVE** of the following: **(10)**
- a) Dysplasia
 - b) Cell cycle
 - c) Red infarct
 - d) Gauchers disease
 - e) Endometriosis
 - f) CSF picture in meningitis

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SARASWATI-I : JULY – 2018
SUBJECT : PATHOLOGY PAPER –II

Day: Tuesday
Date: 03/07/2018

Time: 2.00 pm To 4.00 pm
Max. Marks.: 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) All questions carry **EQUAL** marks.
 - 3) Figures to the **RIGHT** indicate full marks.
 - 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
-

- Q.1 a)** A 5 year old girl was brought with history of fever. Examination revealed hepatosplenomegaly and sternal tenderness. Investigations showed Hb 6 gm/dL and total WBC count of 1.2 lakhs/cumm. with presence of abnormal precursors. What is your most probable diagnosis? How will investigate the patient and confirm your diagnosis? **(05)**
- b)** A 40 year old male was brought with a history of fever followed by development of jaundice. What is your most probable diagnosis? How will you confirm your diagnosis and establish the cause of jaundice? **(05)**
- Q.2 a)** Enumerate the various blood group systems. Describe the indications and procedure for blood grouping and cross matching. **(05)**
- b)** Enumerate the causes of thrombocytopenia. Describe the features of Disseminated intravascular coagulation? **(05)**
- Q.3 a)** Describe the differences between benign and malignant ulcers. Write a note on grading and staging of cancer. **(05)**
- b)** Discuss the etiopathogenesis of carcinoma colon. Write a note on polyposis syndromes. **(05)**
- Q.4** Write short notes on **ANY FIVE** of the following: **(10)**
- a) Hemolytic disease of the newborn
 - b) Macrocytic anaemias
 - c) Proteinuria
 - d) Diagnostic criteria of diabetes mellitus
 - e) Pleomorphic adenoma
 - f) Tumour markers

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II-M.B.B.S. WINTER 2017
SUBJECT: PATHOLOGY PAPER-I

Day : Tuesday
Date : 02/01/2018

W-2017-3267

Time: 2.00 pm To 4.00 pm
Max. Marks: 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate full marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1** a) A 24 year old malnourished female presented with high grade fever with chills. (05)
productive cough with rusty sputum and breathlessness. What is the most likely
diagnosis? Describe the morphology of the organ involved in various stages of
the disease. Enumerate its complications.
- b) A 12 year old male presented with recent onset flitting joint pains and swellings (05)
of his major joints following a sore throat along with progressive dyspnoea.
Chest auscultation revealed a murmur. What is the most probable diagnosis?
Discuss the pathogenesis of this condition and enumerate its diagnostic criteria.
- Q.2** a) Describe the mechanisms of cell injury. (05)
- b) Define inflammation. Classify chemical mediators of acute inflammation. (05)
Add a note on cytokines.
- Q.3** a) Classify ulcers of the intestine. Differentiate typhoid from tubercular intestinal (05)
ulcers.
- b) Define nephrotic syndrome. Enumerate the types of glomerulonephritis (05)
leading to nephrotic syndrome and describe the morphology of any one type.
- Q.4** Write short notes on **ANY FIVE** of the following: (10)
- a) Apoptosis
 - b) Air embolism
 - c) Dystrophic calcification
 - d) Type III Hypersensitivity reaction
 - e) Sago spleen
 - f) Thyroiditis

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II M.B.B.S. WINTER 2017
SUBJECT: PATHOLOGY PAPER-II

Day : Friday
Date : 12/01/2018

Time: 2.00 pm To 4.00 pm
Max. Marks: 40

W-2017-3268

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate full marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

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- Q.1 a)** A 35 year male came to the hospital with profound weakness, bleeding gums and fever off and on. On examination, he had marked pallor, sternal tenderness and mild splenomegaly. Laboratory investigations showed TLC 40,000/cmm. PBS showed numerous immature W.B.Cs. What is the likely diagnosis? Classify the disease. Enumerate laboratory investigations for confirmation of diagnosis. (05)
- b)** A 58 year female came to hospital with generalized weakness, loss of weight polyuria, polydipsia and a non-healing ulcer over foot. What is the likely diagnosis? Describe the laboratory investigations done in such a case. (05)
- Q.2 a)** Enumerate complications of blood transfusion. Enlist laboratory investigations in a case of hemolytic transfusion reaction. (05)
- b)** Enlist the causes of megaloblastic anemia and laboratory investigations required for its diagnosis. (05)
- Q.3 a)** Enumerate chemical carcinogens. Describe the process of chemical carcinogenesis. (05)
- b)** Classify bone tumours. Describe gross and microscopy of osteosarcoma. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Sickling test
 - b) Malignant melanoma
 - c) Differences between microscopic appearances of benign and malignant tumours
 - d) C.S.F. picture in tuberculous meningitis
 - e) Causes of eosinophilia
 - f) Thyroid function tests

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SARASWATI-II: SUMMER 2017
SUBJECT: PATHOLOGY PAPER-I

Day : Saturday
Date : 01/07/2017

Time: 2.00 pm To 4.00 pm
Max. Marks: 40.

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
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Q.1 a) A 40 year old male presented with a history of recurrent episodes of pain in the epigastrium following meals. The pain increased at night and was relieved by antacids. He also gave a history of passing tarry stools on and off. What is the most likely diagnosis? Describe the morphology of this condition and enumerate its complications. **(05)**

b) A 10 year old girl presented with breathlessness at rest, swelling of face and feet and a history of passing reddish urine in reduced volumes. There was a past history of a sore throat. What is the most likely diagnosis? Describe the morphology and sequelae of this disorder. **(05)**

Q.2 a) Describe healing by secondary intention and enumerate the causes of delayed wound healing. **(05)**

b) Define infarction. Discuss the etiopathogenesis and morphology of infarction. **(05)**

Q.3 a) Describe the etiopathogenesis of atherosclerosis and enumerate its complications. **(05)**

b) Classify pneumonias. Describe the morphology of lobar pneumonia. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

- a) Cytokines
- b) Miliary tuberculosis
- c) Laboratory diagnosis of amyloidosis
- d) CVC liver
- e) Benign prostatic hyperplasia
- f) Bacterial endocarditis

SARASWATI-II: JULY 2017
SUBJECT: PATHOLOGY PAPER-II

Day : Monday
Date : 03/07/2017

Time: 2.00 pm To 4.00 pm
Max. Marks: 40.

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
-

- Q.1 a)** A 40 year old male presented to the hospital with low grade fever, dragging sensation in the left hypochondrium and weakness of 2 months duration. Examination revealed massive splenomegaly. Investigations revealed marked leukocytosis with a large number of immature myeloid precursors. What is the most likely diagnosis? Describe the diagnostic laboratory investigations in this case and enumerate its sequelae. (05)
- b)** A 45 year old obese female presented with nocturia, polyuria and polydipsia of 2 months duration associated with loss of weight. Investigations revealed a positive Benedict's test in urine examination. What is the most probable diagnosis? Describe the role of laboratory in the management of this disease and enumerate its complications. (05)
- Q.2 a)** Classify blood transfusion reactions. Discuss the laboratory investigations in a suspected case of transfusion reaction. (05)
- b)** Describe the pathogenesis of and laboratory investigations in a case of megaloblastic anaemia. (05)
- Q.3 a)** Define carcinogenesis. Describe the role of viruses in carcinogenesis. (05)
- b)** Classify tumours of the breast. Discuss the role of the laboratory in the diagnosis and management of carcinoma breast. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Eosinophil
 - b) Criteria for selection of a blood donor
 - c) Carcinoma cervix
 - d) Prothrombin Time
 - e) Tumour markers
 - f) Proteinuria

SARASWATI-II: JANUARY 2017
SUBJECT: PATHOLOGY PAPER-I

Day : Monday
Date : 02/01/2017

Time: 2.00 pm to 4.00 pm
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
-

- Q.1** a) A 51 year old male, a known alcoholic, presented to the hospital with a history of blood mixed vomiting. Examination revealed signs of icterus, flapping tremors and bilateral atrophic testes. What is the likely diagnosis? Describe the morphological features of the disease and enumerate its complications. **(05)**
- b) A 25 year old female suffered a fracture of her femur in a road traffic accident. She was operated on and required 6 months to recover. Discuss the factors leading to her prolonged recovery and likely complications of her injury. **(05)**
- Q.2** a) Define inflammation. Describe the cellular events in acute inflammation. **(05)**
- b) Classify amyloidosis and describe the morphologic characteristics of amyloid. **(05)**
- Q.3** a) Describe the etiopathogenesis, morphology and complications of acute rheumatic fever. **(05)**
- b) Define nephritic syndrome. Enumerate its causes and describe the renal morphology of the disease. **(05)**
- Q.4** Write short notes on **ANY FIVE** of the following: **(10)**
- a) Chronic venous congestion lung
 - b) Lepromatous leprosy
 - c) Apoptosis
 - d) Intestinal tuberculosis
 - e) Cell cycle
 - f) Dystrophic calcification

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SARASWATI-II: JANUARY 2017
SUBJECT: PATHOLOGY PAPER-II

Day : Tuesday
Date : 03/01/2017

Time: 2.00 pm to 4.00 pm
Max. Marks: 40.

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
-

- Q.1 a)** A 40 year old male reported to the hospital with extreme weakness following medication taken for suspected malaria. Examination revealed severe pallor with icterus. Indirect serum bilirubin level was raised. What is your most probable diagnosis? Outline a plan of investigation for the diagnosis of this condition. **(05)**
- b)** A 20 year old male reported to the hospital with a history of painless enlargement of his left testis. Examination revealed a solid mass in his testis. His serum LDH level was raised and AFP level was normal. What is your differential diagnosis? Describe the morphological features of any one type. **(05)**
- Q.2 a)** Enumerate the causes of transfusion reactions. Outline a plan briefly for investigation of the same. **(05)**
- b)** Discuss the etiopathogenesis of microcytic hypochromic anaemia. **(05)**
- Q.3 a)** Describe the etiopathogenesis, classification and morphological features of Carcinoma lung. **(05)**
- b)** Differentiate between benign and malignant neoplasms. Write a note on modes of spread of cancer. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Giant cell
 - b) Investigations in proteinuria
 - c) Platelet count
 - d) Exfoliative cytology
 - e) Meningioma
 - f) ABO blood group system

63

SARASWATI - II: JANUARY - 2016
SUBJECT : PATHOLOGY - I

Day : Friday
Date : 01.01.2016

Time : 2.00 P.M. to 4.00 P.M.
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Draw neat and labeled diagrams **WHEREVER** necessary.
-

- Q.1** a) A 12 year old boy was brought with a 2 day history of malaise, fever, nausea and vomiting. His mother reported that he had decreased urine output and that his urine was dark and smoky in colour. There was a history of swelling of his hands and feet and around his eyes. He suffered a sore throat two weeks back. What is the most likely diagnosis? Describe the mechanism involved and the microscopic features of this disease. [05]
- b) A 78 year old man was brought to the emergency department with a history of fatigue, fever and a productive cough of several days duration. A chest X-ray showed consolidation and Gram Stain of sputum showed predominance of gram positive cocci in pairs and chains. What is the most likely diagnosis? Enumerate the common etiologic agents and describe the pathologic stages of this disease. [05]
- Q.2** a) Define oedema. Describe the aetiopathogenesis and morphological features of pulmonary oedema. [05]
- b) Define necrosis. Describe the morphological features of different types of necrosis giving an example of each type. [05]
- Q.3** a) Define cirrhosis. Enumerate the causes of cirrhosis. Describe the morphological features of post hepatic cirrhosis. [05]
- b) Describe the gross and microscopic features of Acute Myocardial Infarction and enumerate its complications. [05]
- Q.4** Write short notes on **ANY FIVE** of the following: [10]
- a) Vascular changes in acute inflammation
 - b) Systemic embolism
 - c) Down's syndrome
 - d) Tuberculoid leprosy
 - e) Morphology of ulcerative colitis
 - f) Ghon's complex

SARASWATI – II: JANUARY – 2016
SUBJECT: PATHOLOGY PAPER– II

Day: Saturday
 Date: 02/ 01/ 2016

Time: 2.00. p.m. to 4.00. p.m.
 Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the right indicate **MAXIMUM** marks.
- 3) Draw neat and labeled diagrams **WHEREVER** necessary.

-
- Q.1** a) A 37 year old lady came with the complaint of easy fatiguability and breathlessness on accustomed exertion. Examination revealed koilonychia and pallor. Stool examination showed eggs of hookworm. What is the most likely diagnosis? Describe the findings of the required laboratory investigations in this case. (05)
- b) A 21 year old nulliparous lady reported with a feeling of heaviness in her right lower abdomen. Investigations revealed a 9cm right adnexal mass that was cystic and solid with calcified areas in the mass. What is the most likely diagnosis? What are the expected morphological findings of this mass? (05)
- Q.2** a) How do you classify leukaemias? Describe the peripheral blood smear and bone marrow findings in a case of Acute Myeloid Leukaemia. (05)
- b) Enumerate the causes of Transfusion Reactions. How do you investigate a suspected case of transfusion reaction? (05)
- Q.3** a) Define Anaplasia. Describe the modes of spread of cancer. (05)
- b) Classify tumours of the skin. Describe the pathological features of Squamous cell carcinoma of the skin. (05)
- Q.4** Write short notes on **ANY FIVE** of the following: (10)
- a) Haemolytic disease of the newborn
 - b) Tumour markers
 - c) Fibroadenoma breast
 - d) Differences between a transudate and an exudate
 - e) Basophil
 - f) Prothrombin Time



SARSWATI - II : JULY - 2015
SUBJECT : PATHOLOGY - I

Day : Wednesday
Date : 01/07/2015

Time : 2.00 pm to 4.00 pm
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) Figures to the right indicate **FULL** marks.
 - 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
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- Q.1** a) A 46 year old male came with complaints of hypopigmented patch on right side of trunk since one year. On examination there is loss of touch, pain and temperature sensation on the patch. Paratrochlear nerve was also thickened. What is the likely diagnosis? Classify the disease and draw a labeled diagram of microscopic features of the same disease. [05]
- b) A 22 year old female girl presented in casualty with colicky pain in right iliac fossa with fever, nausea and vomiting. She also had mild pyrexia and investigations showed leucocytosis with neutrophilia. What is the likely diagnosis in this case? Write etiology, gross and microscopic feature of this lesion. [05]
- Q.2** a) Describe aetiopathogenesis, morphology and complications of lobar pneumonia. [05]
- b) Define Repair. Describe differences between repair by primary and secondary intention. [05]
- Q.3** a) Describe aetiopathogenesis, gross and microscopic features of chronic pyelonephritis. [05]
- b) Describe aetiopathogenesis and morphology of atherosclerosis of aorta. [05]
- Q.4** Write short notes on **ANY FIVE** of the following: [10]
- a) Dystrophic calcification
 - b) CVC lung
 - c) Aschoff nodule
 - d) Fate of thrombus
 - e) Granuloma
 - f) Dry gangrene

SARASWATI - II : JULY - 2015
SUBJECT : PATHOLOGY PAPER - II



Day : Thursday
Date : 02-07-2015

Time : 2 P.M. TO 4 P.M.
Max. Marks : 40

N.B.

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1** a) A 42 year old male came to hospital with complaints of weakness, fatigue and weight loss from last two months. On examination he had pallor, bleeding from gums and splenomegaly. PBS showed severe leucocytosis, thrombocytopenia and presence of 40% blast cells. What is the most likely diagnosis? Write laboratory findings in this case. (05)
- b) A 45 year male came to hospital with polyuria, polydypsia and polyphagia with nonhealing ulcer on left foot. What is the diagnosis? Describe laboratory investigations of this case. (05)
- Q.2** a) Enumerate criterias of a selection of blood donor. (05)
- b) Mention causes of thrombocytopenia. Describe Idiopathic thrombocytopenic purpura. (05)
- Q.3** a) Define neoplasm. Describe classification of tumours. (05)
- b) Classify bone tumours. Describe osteogenic sarcoma. (05)
- Q.4** Write short notes on **ANY FIVE**: (10)
- a) Hodgkins lymphoma
- b) Laboratory findings in thalassemia major
- c) Eosinophil
- d) ESR
- e) Coombs test
- f) Squamous cell carcinoma

LIBRARY
58

SARASWATI-II : JANUARY 2015
SUBJECT : PATHOLOGY PAPER-I

Day : Friday
Date : 02/01/2015

Time : 2.00 pm to 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a) A 24 year old male sustained injury to his right forearm in road traffic accident. X-ray for the right forearm was done and he was given plaster cast as a treatment. Describe the pathological process involved in his right forearm leading to recovery. Enumerate the factors which would delay healing of this lesion. (05)
- b) A 52 year old business executive complained of pain in right hypochondrium for last 3 months. The pain was more severe at night and pain was relived after taking the food. He also had melena. What is the most likely diagnosis? Write pathogenesis, gross and microscopic findings in the organ involved. (05)
- Q.2 a) Define embolism. What are the various types of emboli? Describe fat embolism. (05)
- b) Write gross, microscopic features and complications of lobar pneumonia. (05)
- Q.3 a) Define Inflammation. What are signs of inflammation? Describe systemic effects of acute inflammation. (05)
- b) Write etiopathogenesis, gross and microscopic features of post streptococcal glomerulonephritis. (05)
- Q.4 Write short notes on any **FIVE** of the following: (10)
- a) Aschoff nodule
 - b) Giant cell
 - c) Diffuse toxic Goitre
 - d) Fatty liver
 - e) Syphilitic aneurysm
 - f) Cell derived chemical mediators.



SARASWATI - II: JANUARY - 2015
SUBJECT: PATHOLOGY PAPER - II

Day: Saturday
Date: 3/01/2015

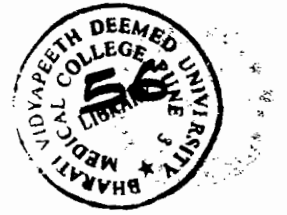
Time: 2.00 p.m. to 4.00 p.m.
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a) A 60 year old male was admitted to medicine ward with complaints of fatigue and weakness since last 3 months. His laboratory investigations revealed TLC as 1, 20,000/cmm. The differential leucocyte count showed 90% of mature lymphocytes and many smudge cells. His Hb was 8 gm%. Platelet count was normal. What is the likely diagnosis? Write laboratory investigations findings in this case and draw a labeled diagram of PBS in this case. (05)
- b) A 40 year old rural female came to OPD with complaints of progressive weakness, fatigue, lassitude and palpitation for last 1 year. On examination she had pallor, glossitis, stomatitis and koilonychia. What is the diagnosis? Describe laboratory investigations findings in this case. (05)
- Q.2 a) Describe blood transfusion reactions. (05)
- b) Describe Renal function tests. (05)
- Q.3 a) Define neoplasm. Describe biologic carcinogenesis. (05)
- b) Classify Thyroid tumors. Describe papillary carcinoma of thyroid. (05)
- Q.4 Write short notes on any **FIVE** of the following: (10)
- a) Urinary crystals
 - b) RBC indices
 - c) Osteoclastoma
 - d) Carcinoma in situ
 - e) PAP smear
 - f) Basophil

SARASWATI – II: JULY - 2014
SUBJECT: PATHOLOGY PAPER - I



Day: Tuesday
Date: 01/07/2014

Time: 2.00 p.m. To 4.00. p.m.
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 3) Draw neat diagrams **WHEREVER** necessary.

- Q.1** a) A 43 year old male patient comes to medicine department, he is complaining of cough with expectoration since two months. He also has occasional haemoptysis. His X-ray findings show calcification and cavitary lesions in upper lobe of right lung. What is the likely diagnosis in this case? Write gross and microscopic findings in the involved organ. (05)
- b) A 60 year old male, who is managing director of the reputed company came to casualty with complaints of severe chest pain on the left side, breathlessness and sweating. The pain was radiating to the left arm and neck. What is the likely diagnosis? Describe gross and microscopic findings in the organ involved. (05)
- Q.2** a) Define thrombosis. Describe fate of thrombus and clinical effects of thrombosis. (05)
- b) Define Inflammation. Mention types of inflammation. Describe vascular events in acute inflammation. (05)
- Q.3** a) Describe etiology, gross and microscopic features of lung in lobar pneumonia. (05)
- b) Write gross features, microscopic features and complications of Crohn's disease. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Syphilitic aortitis
 - b) Granulation tissue
 - c) Rapidly progressive glomerulonephritis
 - d) Dry gangrene
 - e) Apoptosis
 - f) Complications of peptic ulcer



SARASWATI-II : JULY 2014
SUBJECT : PATHOLOGY PAPER-II

Day : Wednesday
Date : 02/07/2014

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 56 year old male patient was complaining of fatigue and weakness since last two months. On clinical examination he had massively enlarged spleen and mild pallor. His laboratory investigations showed total WBC count 1,12,000/cmm. The differential WBC count showed 40% immature cells consisting of promyelocytes, myelocytes, metamyelocytes and band cells. Hb% was slightly reduced and platelet count was normal. What is the likely diagnosis? Write etiopathogenesis and laboratory investigations findings in this case. (05)
- b)** A 7 year old female child came to paediatric department with complaints of high grade fever and convulsions. Child also had projectile vomiting. On clinical examination there was neck stiffness. What is the most likely diagnosis? Discuss the laboratory investigations findings in this case. (05)
- Q.2 a)** How will you select ideal blood donor for donation of blood. (05)
- b)** Classify haemolytic anaemia. Describe in detail laboratory diagnosis of sickle cell anaemia. (05)
- Q.3 a)** Define Neoplasm. Write classification of tumours based on histogenesis (cell of origin). Enumerate different ways of spread of malignant tumour. (05)
- b)** Classify tumours of breast. Describe in detail infiltrating duct carcinoma. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Carcinoma in situ
 - b) Exfoliative cytology
 - c) Eosinophilia
 - d) Bombay blood group
 - e) Basal cell carcinoma
 - f) Packed Cell Volume (PCV)

SARASWATI - II: JANUARY - 2014
SUBJECT: PATHOLOGY PAPER - I

Day: Wednesday
Date: 01/01/2014

Time: 2.00 p. m to To 4.00 p.m.
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 4) Draw neat diagrams **WHEREVER** necessary.



- Q.1 a)** A 13 year old male came to OPD with complaints of fever, breathlessness, fatigue and fleeting type of joint pains. In the past he had streptococcal pharyngitis. On examination he had spherical nodules on both wrists and elbows. Investigations revealed raised ESR, raised C- reactive proteins and leucocytosis. What is the likely diagnosis in this case? Write etiopathogenesis, gross and microscopic features of the organ involved in this case. (05)
- b)** A 63 year male was hospitalized for treatment of fracture of neck of right femur for 3 months. On the 2nd day after the discharge while patient was walking patient developed sudden breathlessness, tachypnoea, tachycardia and cyanosis. Patient was suddenly rushed to the hospital but he could not survive. What is the probable diagnosis in this case? Write the pathogenesis, gross and microscopic features of the organ involved in this case. (05)
- Q.2 a)** Classify glomerulonephritis. Describe rapidly progressive glomerulonephritis. (05)
- b)** Define and classify emphysema. Describe etiopathogenesis of emphysema. (05)
- Q.3 a)** Define inflammation. Describe cellular events in acute inflammation. (05)
- b)** Describe vascular changes in systemic hypertension. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Differences between necrosis and apoptosis
 - b) Complications of fracture healing
 - c) Amyloidosis of spleen
 - d) Duodenal ulcer
 - e) Dystrophic calcification
 - f) Cytokines

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Day: Thursday
Date: 02/01/2014

Time: 2.00 p.m. To 4.00 p.m.
Max. Marks: 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 4) Draw neat diagrams **WHEREVER** necessary.

Q.1 a) A 43 year old vegetarian male patient came to medicine OPD with complaints of weakness, fatigue, weight loss and tingling numbness in both lower legs for last 4 months. On clinical examination he had smooth, red beefy tongue and pallor. On laboratory investigation his haemoglobin was 10 gm%, he also had hypergastrinemia and raised homocysteine levels. What is the probable diagnosis? Describe peripheral blood smear and bone marrow findings in this case. **(05)**

b) A 12 year old male child was brought to emergency room with complaints of high grade fever, headache and projectile vomiting. On examination he had rigidity and kernig sign was positive. What is the likely diagnosis? Describe the investigations to diagnosis this case and what will be the most likely findings of this investigations. **(05)**

Q.2 a) Classify haemolytic anaemia. Describe in detail laboratory diagnosis of β -thalassemia. **(05)**

b) Enumerate blood transfusion reactions. Describe non-immune transfusion reactions. **(05)**

Q.3 a) Enumerate DNA oncogenic viruses. Write in detail about viral oncogenesis. **(05)**

b) Classify ovarian tumours. Describe benign cystic teratoma in detail. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

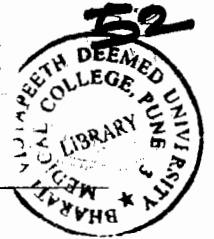
- a) FNAC
- b) Papillary carcinoma of thyroid
- c) Auer rod
- d) Coombs test
- e) Semen analysis
- f) Squamous cell carcinoma

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SARASWATI-II : JULY 2013
SUBJECT : PATHOLOGY PAPER-I

Day : Tuesday
Date : 02/07/2013

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.



N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 3) Draw neat labeled diagrams **WHEREVER** necessary.

- Q.1** a) 64 year old male executive, a known case of hypertension was brought to the emergency room for severe chest pain and excessive sweating. On clinical examination he was in critical condition and showed abnormal ECG findings. What is the likely diagnosis? Describe gross and microscopic findings in the organ involved in this case. (05)
- b) A 43 year male came with the complaints of hypopigmented patch on the trunk since 8 months. On general examination he had loss of pain, touch and temperature sensation on the patch. He also had thickening of paratrochlear nerve. What is the likely diagnosis? Classify the disease and draw the labelled diagram of the microscopic features of the same. (05)
- Q.2** a) Define inflammation. Describe pathogenesis of granulomatous inflammation in tuberculosis. (05)
- b) Define gangrene. Describe etiopathogenesis and differences between dry and moist gangrene. (05)
- Q.3** a) Mention the ulcerative lesions of GIT. Describe gross and microscopic features of typhoid ulcer. (05)
- b) Define pneumonia. Classify pneumonia. Describe stages of lobar pneumonia. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Acute appendicitis
 - b) Fat necrosis
 - c) Granulation tissue
 - d) Chronic pyelonephritis
 - e) Hypertrophy and Hyperplasia
 - f) Hashimotos thyroiditis.

Day : Wednesday
Date : 03/07/2013

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.



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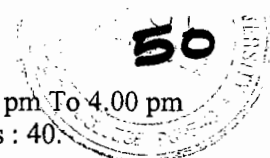
- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 36 year old multiparous female from low socioeconomic class came to hospital with complaints of weakness, fatigability since 2 months. On clinical examination she had a marked pallor, angular stomatitis and Koilonychia. What is the likely diagnosis? Describe peripheral blood smear and bone marrow findings in this case. **(05)**
- b)** A 46 year old female presented with bleeding gums, fever since 7 months. On clinical examination she had pallor, hepatosplenomegaly. Investigations showed TLC 92,000/ cmm, peripheral blood smear showed 22% abnormal cells including blast cells with auer rods in cytoplasm. What is the likely diagnosis? Classify the disease and describe further investigations to diagnosis this case. **(05)**
- Q.2 a)** Discuss the laboratory investigations in a case of mismatched blood transfusion reaction. **(05)**
- b)** Classify diabetes mellitus. Describe the laboratory investigations of diabetes mellitus. **(05)**
- Q.3 a)** Define Neoplasia. Describe modes of metastasis of malignant tumours. **(05)**
- b)** Classify bone tumours. Discuss gross and microscopic features of Osteoclastoma. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Lymphocytosis
 - b) PAP smear
 - c) Seminoma
 - d) RBC indices
 - e) Blood components
 - f) Thrombocytopenia.

SUBJECT : PATHOLOGY PAPER-I

Day : Wednesday
Date : 02/01/2013

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.



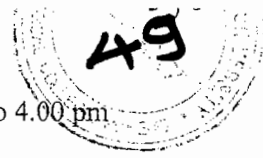
N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 62 year old male, chronic smoker presented in OPD with history of slowly increasing exertional dyspnoea with scanty mucoid sputum. On clinical examination the chest was barrel shaped and hyperresonant on percussion. X-ray chest showed hyperinflated lungs. Describe etiopathogenesis, gross and microscopic features in lungs in above case. **(05)**
- b)** A 13 year old girl came to general practitioner with history of fever and nonpruritic erythematous rash on extremities. She also had a history of migratory polyarthritides and past history of sore throat. Lab investigations revealed leucocytosis, raised ESR and C reactive protein. Write gross and microscopic features of organ involved in this disease. **(05)**
- Q.2 a)** Define shock. Describe its various types and etiopathogenesis of septic shock. **(05)**
- b)** Describe effects of systemic hypertension in kidney. **(05)**
- Q.3 a)** Define granuloma. Mention types of tuberculosis and describe Ghons complex in detail. **(05)**
- b)** Describe gross and microscopic features of Crohn's disease. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Wet gangrene
 - b) Phagocytosis
 - c) Fatty liver
 - d) Complications of atherosclerosis
 - e) Acute appendicitis
 - f) Hyaline change.

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SARASWATI-II : JANUARY 2013
SUBJECT : PATHOLOGY PAPER-II



Day : Thursday
Date : 03/01/2013

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 7 year old male child was brought to paediatric OPD with complaints of impaired growth and development. He also complained of generalized weakness, fatigue, repeated infections and bony pain. Clinical examination revealed splenomegaly and bony tenderness. What is the likely diagnosis? Describe laboratory diagnosis in given case. **(05)**
- b)** A 50 year old female came with complaints of increased appetite, increased frequency of micturition and increased thirst for last 3 months. For last 2 days patient had nausea, vomiting and difficulty in respiration. What is the likely diagnosis? Describe laboratory diagnosis in the given case. **(05)**
- Q.2 a)** Enumerate criterias for selection of a blood donor, Which tests are done mandatorily on the donors blood to prevent transfusion transmitted diseases. **(05)**
- b)** Describe findings of CSF examination in different types of meningitis. **(05)**
- Q.3 a)** Define neoplasia. Describe chemical carcinogenesis. **(05)**
- b)** Classify breast tumours. Describe fibroadenoma in detail. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Basal cell carcinoma
 - b) ESR
 - c) Carcinoma in situ
 - d) Cross matching
 - e) Acute leukemia
 - f) Neutrophilia.

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SARASWATI-II : JULY 2012
SUBJECT : PATHOLOGY PAPER-I



Day : Monday
Date : 02/07/2012

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 46 year male truck driver, who is chronic alcoholic complaints of distension of abdomen. On clinical examination he had icterus, ascitis and spider naevi. Laboratory investigations showed deranged LFT. What is the likely diagnosis? Describe gross and microscopic features of the organ involved in this case. (05)

b) A 30 year old female came to OPD with complaints of low grade fever, cough with expectoration and haemoptysis. He also had pain in right mid and lower chest area. X-ray chest showed haziness in mid and lower zones of right lobe of lung. What is the likely disease? Describe gross and microscopic features of the lung in this case. (05)

Q.2 a) Define thrombosis. Describe in detail pathogenesis of thrombosis and its complications. (05)

b) Define Necrosis. Mention various types of necrosis and write in detail about coagulative necrosis. (05)

Q.3 a) Classify Glomerulonephritis. Describe gross and microscopic features of poststreptococcal glomerulonephritis. (05)

b) Describe aetiology, gross and microscopic features of chronic peptic ulcer in stomach. (05)

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Apoptosis
- b) Lobar pneumonia
- c) Dry gangrene
- d) Aschoff nodule
- e) Chemical mediators
- f) Sago spleen.

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47

SARASWATI-II : JULY 2012
SUBJECT : PATHOLOGY PAPER-II

Day : Tuesday
Date : 03/07/2012

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
 - 2) All questions carry **EQUAL** marks.
 - 3) Figures to the **RIGHT** indicate full marks.
 - 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.
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- Q.1 a) A 8 year old girl was brought to emergency room with complaints of high grade fever, vomiting and neck stiffness for last two days. On clinical examination kernigs signs was positive. What is the likely diagnosis? Describe the findings in CSF in this case. (05)
- b) A 40 year old male who is a strict vegetarian came to OPD with complaints of weakness, fatigue, tingling numbness in hands and feet. Clinical examination revealed pallor, red beefy tongue and paraesthesia. What is the likely diagnosis? Describe laboratory findings in this case. (05)
- Q.2 a) Classify hemolytic anemia. Describe pathogenesis and laboratory diagnosis of β -thalassemia. (05)
- b) Describe the criterias for selecting a blood donor. (05)
- Q.3 a) Classify breast tumors. Describe gross and microscopic features of infiltrating duct carcinoma. (05)
- b) Define neoplasm. Describe spread of malignant tumours. (05)
- Q.4 Write short notes on any **FIVE** of the following: (10)
- a) Squamous cell carcinoma
 - b) FNAC
 - c) Osteogenic sarcoma
 - d) Eosinophil
 - e) Coombs test
 - f) CML.

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SARASWATI-II : JANUARY 2012
SUBJECT : PATHOLOGY PAPER-I



Day : Monday
Date : 02/01/2012

Time : 2.00 pm to 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 10 year old male child came to hospital with complaints of periorbital oedema and passing smoky coloured urine for last 2 days. He gave past history of sore throat 2 weeks back. On clinical examination child had hypertension and his urine examination showed proteinuria and haematuria. What is the probable diagnosis in this case? Describe the gross and microscopic lesions in the organ involved in this disease. **(05)**
- b)** A 34 year old female came with complain of pain over right iliac fossa, fever and vomiting for 2 days duration. Her clinical examination revealed temp 39°C, tachycardia, abdominal rigidity and tenderness over Mac Burneys point. What is the likely diagnosis in this case? Describe gross and microscopic features of the organ involved. Draw a labeled diagram of the lesion. **(05)**
- Q.2 a)** Define COPD. Describe in detail bronchiectasis. **(05)**
- b)** Describe pathogenesis and complications of atherosclerosis. **(05)**
- Q.3 a)** Write pathological calcification in detail. **(05)**
- b)** Define Thrombus. Describe fate and clinical effects of thrombus. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Hashimoto's thyroiditis
 - b) Fatty liver
 - c) Caseous necrosis
 - d) Healing by primary intention
 - e) Aschoff nodule
 - f) Phagocytosis.

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SARASWATI-II : JANUARY 2012
SUBJECT : PATHOLOGY PAPER-II



Day : Tuesday
Date : 03/01/2012

Time : 2.00 pm to 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Draw neat diagrams **WHEREVER** necessary.

Q.1 a) A 25 year old female came with complaints of menorrhagia, dyspnoea on exertion and palpitation. On clinical examination she had pallor, angular stomatitis and koilonychia. What is the probable diagnosis? Discuss the laboratory findings in this case. **(05)**

b) A 32 year old pregnant female delivered a dead baby in her home, next day she started bleeding profusely per vaginum, nose and mouth. She was immediately admitted to the hospital. After clinical examination and laboratory investigation it was concluded that she had amniotic fluid embolism. What is the probable diagnosis in this case? Write etiopathogenesis of this disease. **(05)**

Q.2 a) Define leukemoid reaction. Write in detail about myeloid leukemoid reaction. **(05)**
Draw a labeled diagram.

b) What are the criteria for selecting a blood donor? How is the donor's sample processed in a blood bank? **(05)**

Q.3 a) Define Carcinogenesis. Describe biologic carcinogenesis. **(05)**

b) Classify tumors of testis. Describe seminoma in detail. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

- a)** Pap smear
- b)** Proteinuria
- c)** Osteoclastoma
- d)** Metastasis
- e)** Oat cell carcinoma
- f)** Pleomorphic adenoma.

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SARASWATI-II : JULY 2011
SUBJECT : PATHOLOGY PAPER-II



Day : Saturday
Date : 02/07/2011

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Draw neat diagrams **WHEREVER** necessary.

- Q.1 a) A 15 year old female was admitted to ward with history of convulsions, high grade fever and neck stiffness. What is the likely diagnosis in this case? Write down the laboratory findings in this case. (05)
- b) A 42 year old male came with complaints of polyuria, polydypsia polyphagia and burning sensation in feet. What is your likely diagnosis? Describe the laboratory investigations you would like to do to diagnose the disease. What are the various complications of this disease? (05)
- Q.2 a) Enumerate blood transfusion reactions. Describe laboratory tests done in a case of blood transfusion reaction. (05)
- b) Describe laboratory investigations done in a case of sickle cell disease. (05)
- Q.3 a) Classify ovarian tumours. Describe gross and microscopic features of benign cystic teratoma. (05)
- b) Describe various ways by which tumour spreads. (05)
- Q.4 Write short notes on any **FIVE** of the following: (10)
- a) Aplastic anemia
 - b) Osteoclastoma
 - c) Basal cell carcinoma
 - d) Pleomorphic adenoma
 - e) Leukemoid reaction
 - f) Bombay blood group.



SARASWATI - II : JULY - 2011
SUBJECT : PATHOLOGY PAPER - I

Day : Friday
Date : 01/07/2011

Time : 2:00 p.m. to 4:00 p.m.
Max. Marks : 40

N.B.

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 55 year old male had complaints of severe chest pain, dyspnoea (05)
accompanied by sweating. Describe the pathological lesion in the heart in
this case and mention the laboratory findings to confirm the diagnosis.

b) Define Oedema. Describe the etiopathology of oedema due to cardiac (05)
diseases.

Q.2 a) A 22 year old boy was suffering from high grade fever, cough with rusty (05)
expectoration for last 10 days. X-ray chest revealed consolidation of both
lower lobes. Describe the sequential changes in the lungs.

b) Define Embolus. Mention different types of embolism. Discuss briefly fat (05)
embolism.

Q.3 a) Classify leprosy. Describe pathology of tuberculoid leprosy. (05)

b) Describe etiopathogenesis, gross and microscopic feature of rapidly (05)
progressive glomerulonephritis.

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Aschoff body
- b) Fatty change
- c) Virchows triad
- d) Lipofuscin pigment
- e) Typhoid fever
- f) Apoptosis

SUBJECT : PATHOLOGY PAPER-I

Day : Saturday
Date : 01/01/2011

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.



N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 20 years male boy came with complaints of fever, abdominal pain and vomiting. Pain is more in right iliac region. What is your clinical diagnosis? Write briefly about the pathogenesis and complication of lesion. **(05)**

b) Define granuloma. Mention the types of diseases with granulomatus inflammation. Describe the lesions in primary tuberculosis. **(05)**

Q.2 a) Define shock and classify the types of shock. Discuss the aetiopathogenesis of septicemic shock. **(05)**

b) Discuss aetiopathogenesis and clinical features of cholelithiasis. Mention the morphology of different types of gall stones and also mention complications of gall stones. **(05)**

Q.3 a) Mention ulcerative lesions of the small intestine. Discuss briefly the differences between the crohn's disease and ulcerative colitis. **(05)**

b) Define chronic obstructive lung diseases. Discuss in detail Emphysema. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

- a) Retrogressive changes
- b) Primary Amyloidosis
- c) Cardiac markers in Myocardial Infarction
- d) Hydronephrosis
- e) Mention chemical mediators of inflammation
- f) Factors delaying wound healing.

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SARASWATI-II : JANUARY 2011
SUBJECT : PATHOLOGY PAPER-II



Day : Monday
Date : 03/01/2011

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 1 year old male child had complaints of anorexia, diarrhoea, recurrent fever and failure to thrive. He also had repeated blood transfusions in the past. On examination he had severe pallor and hepatosplenomegaly. What is your probable clinical diagnosis and how will you arrive at a diagnosis of child by laboratory investigation. **(05)**

b) A 44 year old female presented with fever, weight loss, bleeding gums and hepatosplenomegaly since 7 months. Laboratory investigations showed TLC 90,000/cmm and peripheral blood smear showed blasts cells with auer rods. What is likely clinical diagnosis? Describe further investigations to diagnose this case. **(05)**

Q.2 a) Define and classify thrombocytopenia. Write briefly about Idiopathic Thrombocytopenic Purpura. **(05)**

b) Discuss the indications and contraindications of bone marrow aspiration. Discuss the bone marrow findings in Megaloblastic anaemia. **(05)**

Q.3 a) Describe chemical carcinogenesis. **(05)**

b) Classify breast tumors. Describe fibroadenoma of breast. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

- a) Exfoliative cytology
- b) Tumour markers
- c) Blood donor reactions after donating blood
- d) Dysplasia
- e) ESR
- f) Squamous cell carcinoma.

SARASWATI-II : JULY 2010
SUBJECT : PATHOLOGY PAPER-I



Day : Friday
Date : 02/07/2010

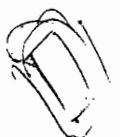
Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1** a) A 8 years girl complained of throat pain 2 weeks ago. At present she is suffering from migratory polyarthritis and breathlessness. What is the probable diagnosis in this case? Write etiopathogenesis and describe the pathology in the heart. (05)
- b) Describe chemical mediators of Inflammation. (05)
- Q.2** a) A 38 year old male patient comes with the history of breathlessness, cough with expectoration, loss of weight, loss of appetite and evening rise of temperature for last one month. X-ray chest showed bilateral cavitory lesions. What is the probable diagnosis in this case? Describe the gross and microscopic features in the lung and mention its complications. (05)
- b) Define and mention the types of Necrosis. Write the causes and pathology of each type of necrosis. (05)
- Q.3** a) Write gross and microscopic features of crohn's disease. (05)
- b) Define oedema. Describe the pathogenesis and pathology of cardiac oedema. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Dystrophic calcification
 - b) Gas gangrene
 - c) Bronchopneumonia
 - d) Fate of thrombosis
 - e) Granulation tissue
 - f) Fatty liver.

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SARASWATI-II : JULY 2010
SUBJECT : PATHOLOGY PAPER-II

39

Day : Saturday
Date : 03/07/2010

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labelled diagrams must be drawn **WHEREVER** necessary.

20

- Q.1 a)** A 40 year old vegetarian male complained of breathlessness on exertion, easy fatigability since two months. On examination he had pallor of conjunctiva and skin, he had red beefy tongue. Now for last 15 days he is complaining of tingling and numbness in all four limbs. What is the probable diagnosis? Write the laboratory findings and draw PBS picture in this case. (05)
- b)** A 60 year old male was admitted in the hospital with history of pathological fractures. On investigations his ESR was 160 mm at the end of one hour. Peripheral blood smear showed increased rouleaux formation. X-ray spine showed multiple lytic lesions. What is your diagnosis? What are the other hematological and urinary findings positive in such case and write the bone marrow findings in this condition. (05)
- Q.2 a)** Mention the differences between benign and malignant tumors. Discuss the method of spread of tumours. (05)
- b)** Classify Hemolytic anaemia. Write in detail the laboratory investigations done in these cases. (05)
- Q.3 a)** Classify testicular tumors. Describe in detail seminoma. (05)
- b)** Mention indications and contraindications of lumbar puncture and write briefly about CSF findings of tuberculous meningitis. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Criteria for selection of a blood donor
 - b) Pleomorphic adenoma
 - c) Reed-Sternberg cell
 - d) Exfoliative cytology
 - e) Erythrocyte sedimentation rate
 - f) Dysplasia.

SARASWATI-II : JANUARY 2010
SUBJECT : PATHOLOGY PAPER-I



Day : Saturday
Date : 02/01/2010
J

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) An 80 year old man who was bed ridden for 20 days, developed sudden severe chest pain, breathlessness and cyanosis 2 days after mobilisation. What is the most probable diagnosis? Describe the sequence of events that may have led to his symptoms. Enumerate the changes that may be seen in the lungs of such a patient. (05)

b) Define amyloidosis. Classify it. Enumerate the clinical effects of amyloidosis of the heart and the suprarenal glands. (05)

Q.2 a) A 30 year old male, a known case of rheumatic mitral stenosis developed high grade fever with chills. On auscultation, there were changing murmurs over the precordium. His cardiac condition had worsened over the past 3 days. Blood culture was positive for α -haemolytic streptococci. What is the most probable diagnosis? Enumerate the risk factors for development of this condition. Describe the pathogenesis of the same. (05)

b) Enumerate ulcerative lesions of the intestine. Write differences between ulcerative colitis and crohn's disease. (05)

Q.3 a) Classify chemical mediators of inflammation. Describe their role in inflammation. (05)

b) Enumerate lesions seen in different stages of syphilis. Describe gross and microscopic features of syphilitic aortitis. (05)

Q.4

Write short notes on any **FIVE** of the following: (10)

- a) Enumerate 8 causes of obstruction of the urinary tract
- b) Differences between tuberculoid and lepromatous leprosy
- c) Complications in a peptic ulcer
- d) Fibrinoid necrosis
- e) Haemosiderosis
- f) Granulation tissue.

SUBJECT : PATHOLOGY PAPER-II

37

Day : Monday
Date : 04/01/2010

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 3 year old male child, born of consanguinous marriage was brought with failure to thrive and jaundice. On examination he had hepatosplenomegaly, large skull and severe anaemia. What is the most probable diagnosis? Write in detail laboratory diagnosis of the same. **(05)**

b) A 14 year old male patient living in a boarding school complained of fever, nausea, vomiting and pain in abdomen for 4 days. On examination, there was yellowish discolouration of sclera and tenderness over the right hypochondrium. What is the most probable diagnosis? Describe the laboratory investigations you will do in such a case. **(05)**

Q.2 a) Describe pathogenesis of leukaemia. Draw a neat labelled diagram of P.B.S. in chronic myeloid leukaemia. **(05)**

b) Write the antigens and corresponding antibodies of various ABO and Rh blood groups present in the blood of human beings. Enumerate blood transfusion reactions. **(05)**

Q.3 a) Define neoplasia. Discuss the mode of spread of tumours. **(05)**

b) Classify ovarian tumours. Describe in detail teratoma. **(05)**

Q.4 Write short notes on any **FIVE** of the following: **(10)**

- a) C.S.F. picture in pyogenic meningitis
- b) Haematuria
- c) Early gastric cancer
- d) Thrombocytopenia
- e) Reed-Stenberg cell
- f) Aplastic anaemia.

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SUBJECT : PATHOLOGY PAPER-I

36

Day : Friday
Date : 03/07/2009

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A 48 year old diabetic male was admitted to ICU with sudden onset presternal chest pain radiating to left arm. The patient had profuse sweating and breathlessness. What is the most probable diagnosis? Describe the risk factors and etiopathogenesis of this condition. **(05)**
- b)** Define inflammation. Discuss pathogenesis of cardinal signs of inflammation. **(05)**
- Q.2 a)** A six year male child was brought with fever, oliguria, smoky brown urine and oedema over face for 2 days. There was a history of sore throat 2 weeks back. What is the diagnosis? Classify the disease. Describe the gross and microscopic appearance of the organ involved. **(05)**
- b)** Describe etiopathogenesis and pathology of chronic peptic ulcer. **(05)**
- Q.3 a)** Define gangrene. Enumerate the differences between dry and wet gangrene. **(05)**
- b)** Define thrombosis. Describe pathogenesis and pathology of a thrombus. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a)** Complications of liver cirrhosis.
 - b)** Caseous necrosis.
 - c)** Bronchopneumonia.
 - d)** Secondary amyloidosis.
 - e)** Syphilitic aortitis.
 - f)** Complications of lobar pneumonia.

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SARASWATI
SUBJECT : PATHOLOGY PAPER – II

Day : Saturday
Date : 04/07/2009

Time : 2.00 pm to 4.00 pm.
Max. Marks : 40

35

N.B.

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the right indicate **FULL** marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** needed.

- Q.1 a) A male aged 35 years complained of easy fatigability, dyspnoea on exertion and tingling numbness in legs. O/E pallor ++, angular stomatitis present. What is the probable diagnosis? Write the lab. investigations done in such a case. Draw a PBS picture of the same. [05]
- b) A 44 years old obese patient complained of increased frequency of micturition, increased thirst and loss of weight over the past 2 months. His appetite was increased. What is the most probable diagnosis? List the investigations you will do in such a case. List the complications of this disease. [05]
- Q.2 a) Define and classify leukaemia. Draw a labeled diagram of P.B.S. in chronic myeloid leukaemia. [05]
- b) Classify Lymphoma. Write gross and microscopy of Hodgkin lymphoma. [05]
- Q.3 a) Describe laboratory diagnosis of cancer. [05]
- b) Classify haemorrhagic disorders. Enumerate the lab. investigations in a case of haemophilia. [05]
- Q.4 Write short notes on **ANY FIVE** of the following. [10]
- a) Teratoma
 - b) Microscopic differences between benign and malignant tumors
 - c) Give names of **four** blood components and their specific uses.
 - d) Metaplasia
 - e) Semen examination
 - f) Enumerate **two** most common sites of involvement in a squamous cell carcinoma in our country and the causative agent in each of them.

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SARASWATI-II : JANUARY 2009
SUBJECT : PATHOLOGY PAPER-I



Day : Friday
Date : 02/01/2009

Time : 2 pm To 4 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 60 year old uncontrolled diabetic female had a shoe bite one month ago. (05)
The wound did not heal and developed oozing and foul smelling discharge through it. The limb was swollen and discoloured upto knee joint. The patient showed signs of toxaemia and amputation of the limb was advised. What is the diagnosis? Describe aetiopathogenesis of this condition.

b) Define inflammation. Describe cellular events in acute inflammation. (05)

Q.2 a) A 45 year old, chronic alcoholic male complained of loss of weight, potbelly (05)
abdomen and pedal oedema. On examination he had ascites, mild jaundice, splenomegaly and spider naevi. What is the most probable diagnosis? Describe pathophysiology of oedema and ascites in this condition.

b) Describe pathogenesis and pathology of chronic pyelonephritis. (05)

Q.3 a) Enumerate ulcerative lesions of small intestine. Describe pathogenesis and (05)
pathology of typhoid ulcer in detail.

b) Classify risk factors for development of atherosclerosis. Describe an atheroma (05)
in detail.

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Primary amyloidosis.
- b) Hydatidiform mole.
- c) Bronchopneumonia.
- d) Complications of bacterial endocarditis.
- e) Virchow's triad.
- f) Complications of tertiary syphilis.

SARASWATI – II : JANUARY 2009
SUBJECT : PATHOLOGY PAPER-II



Day : Saturday
Date : 03/01/2009

Time : 2 pm To 4 pm
Max. Marks : 40

N. B.

- 1) All questions are **compulsory**.
- 2) Figures in bracket indicate full **marks**.
- 3) Neat & labeled **diagrams** must be drawn wherever needed.

- Q. 1** a) A 10 year male child was brought with history of repeated swelling of knees, ankles & elbow joints on trivial injury. There was also history of prolonged bleeding after tooth extraction. On aspiration, haemorrhagic fluid was obtained from knee joint. The child had received one fresh blood transfusion one year ago. What is the most probable diagnosis? Describe pathogenesis & laboratory investigations in such a case. **(05)**
- b) Enumerate criteria for selection of a blood donor. Which tests are done mandatorily on the donor's blood to prevent transfusion-transmitted diseases? **(05)**
- Q. 2** a) A 50 year old woman was brought to the hospital with puffiness of face. On examination she had mild pedal oedema. Sr. creatinine 2.5 mg/dl. There was a past history of repeated urinary tract infection. What is the probable diagnosis? Describe laboratory investigations you will do in such a case. **(05)**
- b) Discuss pathogenesis & lab investigations in a suspected case of thalassaemia major. **(05)**
- Q. 3** a) Discuss chemical carcinogenesis. **(05)**
- b) Classify bone tumours & describe in detail Ewing sarcoma. **(05)**
- Q. 4** Write short notes on **Any Five** of the followings. **(10)**
- a) Draw a neat labeled diagram of peripheral blood picture in chronic myeloid leukaemia.
- b) Pernicious anaemia
- c) Microalbuminuria
- d) Dysplasia
- e) Exfoliative cytology
- f) Causes of haemolytic transfusion reaction.

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SARASWATI-II : JULY 2008
SUBJECT : PATHOLOGY PAPER-I



Day : Friday
Date : 04/07/2008

Time : 2.00 pm TO 4.00 pm
Max. Marks : 40

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** marks.
- 3) Figures to the **RIGHT** indicate full marks.
- 4) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

Q.1 a) A 30 year old female complained of breathlessness on exertion and cough (05)
with reddish brown streaks of blood in sputum. On examination she had mid-diastolic murmur. There was a past history of repeated attacks of sore throat which were followed by fleeting joint pains and joint swelling affecting ankle, elbow and knee joints. What is the likely diagnosis? Describe pathogenesis and pathology of this condition.

b) Define thrombosis. Describe its pathogenesis. What are fates of a thrombus? (05)

Q.2 a) A 12 year old boy had fallen from a height of about 10 feet. He complained of (05)
inability to stand on his feet and excruciating pain in left leg. On examination, his left leg was swollen and x-ray showed a discontinuity in the shaft of tibia. What is the diagnosis? Describe how healing will occur in this case? Enumerate the factors that delay healing.

b) Classify glomerulonephritis and describe minimal change disease in detail. (05)

Q.3 a) Enumerate the causes of cell injury. Describe pathogenesis and pathology of (05)
fatty liver.

b) Define chronic peptic ulcer. Describe pathogenesis of peptic ulcer in detail. (05)

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Phagocytosis.
- b) Haemochromatosis.
- c) Pulmonary embolism.
- d) Bronchopneumonia.
- e) Chronic hepatitis.
- f) Gumma.

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SARASWATI-II : JULY 2008
SUBJECT : PATHOLOGY PAPER-II



Day : Saturday
Date : 05/07/2008

Time : 2.00 PM TO 4.00 PM
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate full marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** necessary.

- Q.1 a)** A four year old boy was brought to the hospital with repeated attacks of upper respiratory tract infection, fever and excessive tiredness. On examination, he had pallor, mild hepatosplenomegaly, cervical lymphadenopathy and petechial haemorrhages on the body. Hb 6.5 gm/dl, TLC 25,000/ - DLC - presence of immature cells in P.B.S. platelet count 80,000/ cu.mm. What is the child suffering from? Classify the disease. Draw a neat labeled diagram of the expected P.B.S. findings. (05)
- b)** What are blood groups and Rh factor? Describe the importance Rh negativity. (05)
- Q.2 a)** Classify haemolytic anaemias. Describe thalassaemia in detail. (05)
- b)** Tabulate the findings of C.S.F. examination in pyogenic and tuberculous meningitis. (05)
- Q.3 a)** Classify neoplasia. Add a note on grading and staging of tumours. (05)
- b)** Classify testicular tumours and describe seminoma in detail. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Anaplasia.
 - b) Megaloblast.
 - c) Haematuria and haemoglobinuria.
 - d) Osteosarcoma.
 - e) Carcinoma in -situ.
 - f) Criteria for selection of a blood donor.

SARASWATI-II : JANUARY 2008
SUBJECT : PATHOLOGY PAPER-I

30

Day : Monday
Date : 07/01/2008

Time : 2.00 P.M TO 4.00 P.M.
Max. Marks : 40

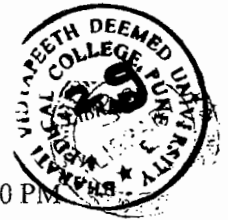
N. B.

- 1) All questions are **COMPULSORY**.
- 2) All questions carry **EQUAL** Marks.
- 3) Figure in bracket indicates **FULL** marks.
- 3) Neat and labeled diagrams must be drawn **WHEREVER** needed.

- Q.1** a) Male, 18 yrs from lower socio-economic strata, came with loss of weight, fever with evening rise, cough and few episodes of haemoptysis. His cervical lymphnodes were enlarged and ESR was 70 mm in the first hour. Enumerate the other lesions of similar type and describe the pathogenesis of this disease, and gross & microscopic features of lung. (05)
- b) A 55 years old, obese, diabetic male patient was admitted in medical emergency ward, having sudden onset of excruciating pre-sternal chest pain, radiating to the left arm & shoulder with excessive perspiration. Describe aetiology & clockwise sequelae of gross and microscopic changes seen in the affected organ in the disease. (05)
- Q.2** a) What are the vascular changes of acute inflammation? (05)
- b) Define thrombosis & discuss its complications. (05)
- Q.3** a) Describe aetiopathology of rapidly progressive glomerulonephritis. (05)
- b) Define and classify cirrhosis of liver. Describe causes and pathology of cirrhosis of post-necrotic origin. (05)
- Q.4** Write short notes on **Any Five**. (10)
- a) Classification of leprosy
 - b) Gross and microscopic features of infarct of spleen.
 - c) Dry gangrene
 - d) Complications of peptic ulcer
 - e) Hypoplasia
 - f) Metastatic calcification

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SARASWATI-II : JANUARY 2008
SUBJECT : PATHOLOGY PAPER-II



Day : Tuesday
Date : 08/01/2008

Time : 2.00 PM TO 4.00 PM
Max. Marks : 40

N.B.

- 1) All questions are **compulsory**.
- 2) All questions carry **equal** marks.
- 3) Figures in bracket indicate **full** marks.
- 4) Neat & labeled **diagrams** must be drawn wherever needed.

Q.1 a) An adult with history of passing blood and mucus in stools has reported to you, what are the most likely causes, and how will you investigate to confirm the diagnosis? (05)

b) Define oedema. What are the causes of oedema? Classify on the basis of aetiology. (05)

Q.2 a) What is ESR? Describe methods of estimation, normal values, increase-decrease and factors affecting it. (05)

b) Enumerate the types of anaemias. How will you investigate a case with pallor and dyspnoea? (05)

Q.3 a) Describe the spread of tumours. (05)

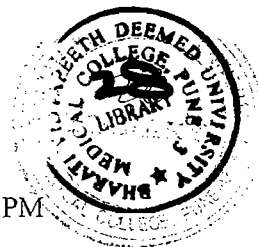
b) Classify thyroid tumours. Describe gross and microscopic features of thyroid adenoma. (05)

Q.4 Write short notes on **Any Five** of the followings. (10)

- a) Coomb's test – Principle & indications
- b) Differences between transudate & exudate
- c) Name four most important tests while screening blood donors.
- d) CSF findings in pyogenic meningitis
- e) Draw a trophozoite of plasmodium vivax
- f) Bombay Blood Group

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SARASWATI-II (NEW RULES) : JULY 2007
SUBJECT : PATHOLOGY PAPER-II



Day : Tuesday
Date : 03/07/2007

Time : 2.00 PM TO 4.00 PM
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate full marks.
- 3) Draw neat labeled diagrams wherever necessary.

Q.1 a) A 2 year old boy had severe pallor and required repeated transfusions at intervals. Examination revealed hepatosplenomegaly. Sickling test was negative. Describe laboratory investigations in such a case. (05)

b) A 40 year old female presented with fever, weight loss, bleeding gums and hepatosplenomegaly since 6 months. Investigations showed TLC 80,000 /cumm, peripheral blood smear showed abnormal cells including blast cells with 3-5 nucleoli and auer rods in cytoplasm. What is likely diagnosis? Classify the disease and describe further investigations to diagnose the case. (05)

Q.2 a) Enumerate blood transfusion reactions. Describe investigations in haemolytic transfusion reactions. (05)

b) Describe findings of CSF examinations in different types of meningitis. (05)

Q.3 a) Describe chemical carcinogenesis. (05)

b) Classify breast tumours. Describe fibroadenoma of breast. (05)

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Microscopic criteria for malignancy
- b) Blood donor reactions after donating blood
- c) Megaloblast
- d) Seminoma of testes
- e) Eosinophil.
- f) ESR.

SARASWATI-II (NEW RULES) : JULY 2007
SUBJECT : PATHOLOGY PAPER-I

Day
Date

Monday
02/07/2007

Time : 2.00 PM TO 4.00 PM
Max. Marks : 40.



N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate full marks.
- 3) Draw neat labeled diagrams wherever necessary.

Q.1 a) A 30 year old female came with complaints of weakness, evening rise of temperature, cough with expectoration, blood tinged sputum at times. Investigations showed ESR 75 mm fall at first hour, sputum tested positive in microbiology. Describe gross and microscopic pathology and evolution of the diseases in lungs with neat diagram. (05)

b) A 7 year old boy was brought with history of swelling all over body, more so in periorbital region. Urine output was irregular and 24 hrs. urinary proteins was 4.2 gms. Classify the causes of this disease, describe gross and microscopic features in one case. (05)

Q.2 a) Describe aetiopathogenesis and pathology of fatty change in liver. (05)

b) Describe vascular changes in acute inflammation. (05)

Q.3 a) Define cirrhosis, classify it and describe gross and microscopic features and complications of any one of them. (05)

b) Define repair, describe healing of wound and enumerate factors which delay healing. (05)

Q.4 Write short notes on any **FIVE** of the following: (10)

- a) Special stains for amyloid
- b) Dystrophic calcification
- c) Apoptosis
- d) Virchow's triad
- e) Pathogenesis of cardiac oedema
- f) Valvular lesions in bacterial endocarditis.

CHANDRASEKHAR UNIVERSITY
DEPARTMENT OF PATHOLOGY PAPER-III



Date: 12/05/2024
Page: 4 of 4

Time: 1.00 pm to 2.00 pm
Max. Marks: 40

N.B:

- 1) All questions are **COMPULSORY**.
- 2) Nest diagrams must be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1 a) A 30 year old multiparous female from lower socio-economic class came with complaints of palpitations, weakness and fatigability since 2 months. Examination revealed marked pallor and koilonychia. What is likely disease? Describe haematological and biochemical investigations with their findings in this case. (05)
- b) A 10 year old boy was brought with history of fever, headache, occasional vomiting and neck stiffness of 4 days duration. Examination revealed positive Kernig's sign. What is the likely disease? Describe method of collection of CSF and its findings in this case. (05)
- Q.2 a) Describe selection of blood donor and complications of donating blood. (05)
- b) Describe examination of urine with its significance. (05)
- Q.3 a) Define Neoplasia Describe differences between benign and malignant tumours. (05)
- b) Classify bone tumours. Describe Giant cell tumour (osteoclastoma). (05)
- Q.4 Write short notes on any FIVE of the following: (10)
- a) HbA_{1c}
 - b) MCV
 - c) draw a labelled diagram of FBS in various myeloid leukaemia.
 - d) White cell count
 - e) Wilms' tumour
 - f) Tumour markers

SARASWATI-II : JULY 2006
SUBJECT : PATHOLOGY PAPER-I



Day : Wednesday
Date : 05/07/2006

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams must be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

-
- Q.1 a)** A 12 year male was brought with complaints of pain in right iliac fossa, fever, nausea and vomiting of 3 days duration. Examination revealed tenderness at Mac Burny's point, guarding / rigidity \pm . What is the likely disease? Describe gross and microscopic features of the organ involved. (05)
- b)** A 28 year old labourer got wet in fields and 7 days later came with complaints of fever, cough with blood tinged sputum and pain right mid and lower chest. Examination revealed reduced air entry over right mid and lower zone. X-ray chest showed hazy right mid and lower lobes. What is the disease? Describe gross and microscopic features of the lungs in this case. (05)
- Q.2 a)** Describe process of repairs of fractures and factors, which delay their healing. (05)
- b)** Classify Leprosy. Describe pathology of Tuberculoid leprosy. (05)
- Q.3 a)** Describe aetiopathogenesis of atherosclerosis and its complications. (05)
- b)** Describe aetiopathogenesis and complications of peptic ulcer. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Apoptosis.
 - b) Wet gangrene.
 - c) Metastatic calcification.
 - e) Hashimoto's thyroiditis.
 - d) Fatty change.
 - f) Chronic pyelonephritis.

SARASWATI-II : JULY 2006
SUBJECT : PATHOLOGY PAPER-II



Day : Thursday
Date : 06/07/2006

Time : 2.00 pm To 4.00 pm
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams must be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1**
- a) A 45 year old vegetarian female came with complaints of weakness, burning red tongue, tingling-numbness in hands and feet. Examination revealed pallor, large beefy red tongue, paraesthesia in legs. What is likely diagnosis? Describe PBS examination and bone marrow smear findings in this case. Mention any other tests you would like to do. (05)
 - b) A 35 year old male married for 4 years has no children. He works in a factory near hot furnace and is exposed to very high temperature. What is likely diagnosis? Describe examination and findings of semen analysis in this case. (05)
- Q.2**
- a) Classify haemolytic anaemia. Describe various investigations and their findings in haemolytic anaemia. (05)
 - b) Classify blood transfusion reactions. Describe aetiology and investigations in haemolytic transfusion reaction. (05)
- Q.3**
- a) Define Neoplasia. Describe chemical carcinogenesis. (05)
 - b) Classify tumours of kidney. Write in details about Wilm's tumour. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Megaloblast.
 - b) ESR.
 - c) Dysplasia.
 - e) Glycosylated haemoglobin. (Hb 1C)
 - d) O^h phenotype. (Bombay blood group)
 - f) Leiomyoma.

SARASWATI-II : JANUARY 2006
SUBJECT : PATHOLOGY PAPER-I



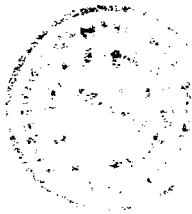
Day : Wednesday
Date : 04/01/2006

Time : 2.00 P.M. TO 4.00 P.M.
Max. Marks : 40.

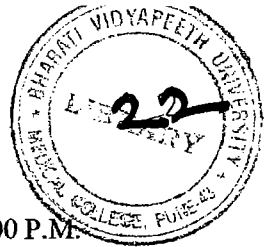
N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams should be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1 a)** A 20 years old male came with complaints of hypopigmented patches on low back since one year. Examination showed loss of pain, touch, and temperature sensations on the patches. There was thickening of paratrochlear and tibial nerves. What is the likely disease? Classify the disease and describe microscopic features of the above patches with diagram. (05)
- b)** A 45 years old male, a chronic alcoholic was admitted for anorexia, weakness and mild yellow discolouration of skin. He gave past history of haematemesis. Clinical Exam showed mild icterus, gynecomastia, spider naevi and ascitis. What is likely diagnosis? Describe pathogenesis, gross and microscopic features of pathology of liver. (05)
- Q.2 a)** Define infarction. Enumerate different types of infarcts. Write actiology, gross and microscopic features of Infarct of kidney. (05)
- b)** Classify pigments. Write in details about endogenous pigments. (05)
- Q.3 a)** Describe gross and microscopic features of Lobar pneumonia. Enumerate various complications of Lobar pneumonia. (05)
- b)** Enumerate ulcerative lesions of intestines. Describe gross and microscopic features of Crohn's disease. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Aschoff body.
 - b) Granulation tissue.
 - c) Air embolism.
 - d) Sago spleen.
 - e) Panacinar Emphysema.
 - f) Caseous necrosis.



SARASWATI-II : JANUARY 2006
SUBJECT : PATHOLOGY PAPER-II



Day : Thursday
Date : 05/01/2006

Time : 2.00 P.M. TO 4.00 P.M.
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat-labelled diagrams should be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1 a)** A multiparus, postmenopausal female came with complaints of P/V bleeding of six months duration. Clinical exam revealed an ulcerated growth with firm to hard margins on the cervix. PAP smear of cervix showed squamous malignant cells. She underwent hysterectomy. What is likely disease? Describe gross and microscopic features of the hysterectomy specimen. (05)
- b)** A 25 years old man was undergoing blood transfusions. During transfusion of second unit of blood he developed high fever with rigors, pain in loins and along the vein. Later he developed yellow brown coloured urine. Describe lab investigations in this case. (05)
- Q.2 a)** Describe haematological and biochemical findings in a case of Iron deficiency Anaemia. (05)
- b)** Describe CSF exam findings in Acute pyogenic and Tubercular meningitis. (05)
- Q.3 a)** Define Neoplasia. Give an account of biological carcinogens. (05)
- b)** Classify ovarian tumours. Describe gross and microscopic findings of Benign cystic teratoma. (05)
- Q.4** Write short notes on any **FIVE** of the following: (10)
- a) Interpretation of oral GTT.
 - b) Serum blood grouping (Reverse grouping).
 - c) Leiomyoma.
 - d) Sick cell and its genesis.
 - e) FNAC.
 - f) HIV related lymphadenopathy.

SARASWATI-II : JULY 2005
SUBJECT : PATHOLOGY PAPER-I



Day : Wednesday
Date : 06/07/2005

Time : 2.00 PM TO 4.00 PM
Max. Marks : 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams should be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1** a) A 20 year old male came with complaints of pain Rt. lower abdomen, fever, nausea and vomiting of 4 days duration. Examination revealed temperature 38°C , pulse 112/min, tenderness on MacBurney's point and abdominal rigidity/ guarding \pm . What is the most likely disease? Describe gross and microscopic features of the organ involved and its likely complications. (05)
- b) A 42 year old male, a chronic smoker came with complaints of cough with plenty of foul smelling mucid expectorations with vague occasional pain in Rt. lower chest since last 7 months. X-ray chest revealed dilated bronchi on Rt. mid and lower lung fields. What is the likely diagnosis? Describe gross and microscopic features of the pathology in lungs. (05)
- Q.2** a) Define oedema. Enumerate different types of oedema and describe pathogenesis of renal oedema. (05)
- b) Define necrosis. Enumerate different types of necrosis. Describe caseous necrosis in detail. (05)
- Q.3** a) Classify Glomerulonephritis. Describe pathological features of Poststreptococcal Glomerulonephritis (05)
- b) Describe gross and microscopic features of ulcerative colitis. (05)
- 4 Write short notes on any **FIVE** of the following: (10)
- a) Melanin.
 - b) Amniotic fluid embolism.
 - c) CPVC liver.
 - d) Gumma.
 - e) Virchow's triad.
 - f) Giant cells.



SARASWATI-II : JULY 2005
SUBJECT : PATHOLOGY PAPER-II
(HAEMATOLOGY, TRANSFUSION MEDICINE, CLINICAL PATHOLOGY & NEOPLASIA)

Day : Thursday
Date : 07/07/2005

Time : 2.00 pm To 4.00 pm
Max. Marks: 40.

N.B.:

- 1) All questions are **COMPULSORY**.
- 2) Neat-labelled diagrams should be drawn **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate full marks.

- Q.1 a)** A 30 year old multiparous female from poor labourer family came with complaints of weakness and fatigue of 6 months duration. Examination revealed marked pallor, smooth red tongue and koilonychia. What is most likely diagnosis? Describe haematological and biochemical investigations to diagnose this case. **(05)**
- b)** A 5 year old female was brought with complaints of fever, headache and occasional vomiting. Examination revealed temperature 38°C, pulse 110/min., neck stiffness and rigidity with positive Kernig's sign. CSF was turbid. What is most likely diagnosis? What are the likely CSF findings in this case? **(05)**
- Q.2 a)** Describe how you will select an individual for blood donation. Enumerate complications after blood donation? **(05)**
- b)** Describe urine examination and its significance. **(05)**
- Q.3 a)** Define neoplasia. Describe differences between benign and malignant tumours. **(05)**
- b)** Classify kidney tumours. Describe Gross and microscopic features of Wilm's tumour. **(05)**
- Q.4** Write short notes on any **FIVE** of the following: **(10)**
- a) Haematocrit (PCV).
 - b) Draw a labelled diagram of PBS in Chronic Myeloid Leukemia.
 - c) Metaplasia.
 - d) Seminoma.
 - e) Hashimoto's thyroiditis.
 - f) Characteristics of a malignant cell.

SWARSWATI - II (NEW RULES) : JULY - 2004
SUBJECT : PATHOLOGY PAPER - I
(GENERAL AND SYSTEMIC PATHOLOGY)



Day : Thursday
Date : 01/07/2004

Time : 2.00 P.M. To 4.00 P.M.
Max. Marks : 40

N. B. -

- 1) All questions are **compulsory**.
- 2) Neat diagrams should be drawn **wherever** necessary.

- Q.1 a) 18 years male came with complaints of fever, pain abdomen more on Rt side and occasional vomiting of two days duration. Examination revealed temp 38°C , pulse - 110/min, abdominal guarding \pm and tender Mac Burney's point. What is the likely diagnosis? Describe gross and microscopic features in the organ involved with labeled diagram. (05)
- b) A 50 years male was found to have gradually increasing hypertension for last two years. Describe gross and microscopic features in his Kidney. (05)
- Q.2 a) Define granuloma. Describe evolution of tubercle. Draw labeled diagram. (05)
- b) Define and classify gangrene. Describe gross and microscopic features of any one of them giving aetiology. (05)
- Q.3 a) Classify Liver Cirrhosis. Describe gross and microscopic features of any one of them. Mention complications of Liver Cirrhosis. (05)
- b) Describe aetiology, gross and microscopic features of chronic peptic ulcer. (05)
- Q.4 Write short notes on **Any Five** of the following. (10)
- a) Tuberculoid Leprosy
 - b) Coagulative necrosis
 - c) Differences between transudate and exudate
 - d) Colloid goitre
 - e) Emphysema
 - f) Virchow's triad

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SARASWATI - II (NEW RULES) : JULY - 2004
SUBJECT : PATHOLOGY PAPER - II
(HAEMATOLOGY, TRANSFUSION MEDICINE, CLINICAL PATHOLOGY & NEOPLASIA)



Day : Friday
Date : 02/07/2004

Time : 2.00 p.m. To 4.00 p.m.
Max. Marks : 40

N. B. -

- 1) All questions are **compulsory**.
- 2) Neat diagrams should be drawn **wherever** necessary.

- Q.1 a) A 35 years multiparous female from poor family came with complaints of weakness, breathlessness, fatigability and palpitations of 6 months duration. Examination revealed pallor ++ & Koilonychia. What is the likely disease? Describe haematological and biochemical investigations you will do in this case and their results. (05)
- b) A 40 years male came with complaints of polyuria, polydypsia and burning feet since six months. He also had a chronic ulcer on his left foot. He gave H/O Diabetes in his father. Describe lab investigations you will do to diagnose the likely disease. What are the complications of this disease? (05)
- Q.2 a) Describe how you will select an individual for blood donation. Enumerate the complications of blood donation. (05)
- b) Describe CSF examination. What are the findings in Acute Pyogenic Meningitis? (05)
- Q.3 a) Define Dysplasia and Neoplasia. Describe Precancerous lesions. (05)
- b) Classify Ovarian tumors. Describe pathology of any one malignant tumor of the ovary. (05)
- Q.4 Write short notes on **ANY FIVE** of the following- (10)
- a) Chronic myeloid leukemia
 - b) Urinary casts
 - c) Sick cell anaemia
 - d) Hodgkins lymphoma
 - e) Characteristics of malignant cell
 - f) Fibroadenoma breast

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SARASWATI – II (NEW RULES) : JANUARY : 2004
SUBJECT : PATHOLOGY PAPER – I
(GENERAL AND SYSTEMIC PATHOLOGY)



Day : Monday
Date : 5/1/2004

Time : 2.00 p.m. to 4.00 p.m.
Max. Marks : 40

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams should be drawn **WHEREVER** necessary.

- Q.1 a) A 70 year old man who was bed ridden for the last 15 days developed severe chest pain, breathlessness and cyanosis when he started moving about. What is the most probable diagnosis? Discuss the sequence of events that may have taken place. Describe the gross and microscopic changes in the lung in such a case. [05]
- b) A 40 year old lady had raised blood urea and serum creatinine levels. Her urine showed pus cells, pus cell casts and epithelial cell casts. She had a history of repeated urinary tract infection. What is the most probable diagnosis? Describe the pathogenesis, gross and microscopic appearance of the organ involved. [05]
- Q.2 a) Discuss the modes of transmission, classification of leprosy. Enumerate the differences between the two polar forms of leprosy. [05]
- b) Describe aetiopathogenesis and complications of atherosclerosis. [05]
- Q.3 a) Define necrosis. Enumerate types of necrosis. Describe fat necrosis in detail. [05]
- b) Enumerate ulcerative lesions of intestine. Describe gross and microscopic appearance of Crohn's disease. [05]
- Q.4 Write short notes on **ANY FIVE**. [10]
- a) Chemical mediators of inflammation
 - b) Hashimoto's thyroiditis
 - c) Differences between dry and wet gangrene
 - d) Aschoff nodule
 - e) Bronchiectasis
 - f) Chronic active hepatitis

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Day : Tuesday
Date : 6/01/2004

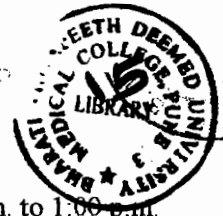
Time : 2:00 p.m. to 4:00 p.m.
Max Marks : 40

N. B.

- 1) All questions are COMPULSORY.
- 2) Neat diagrams should be drawn wherever necessary.

- Q.1 a) A five year old boy came with marked pallor, hepatosplenomegaly & mild jaundice. P.B.S. showed microcytic hypochromic anaemia. X-ray skull showed hair-on-end appearance. What is the most probable diagnosis ? Discuss in detail the laboratory diagnosis in such a case. (05)
- b) A forty year old man came with fever off and on & dragging pain in left hypochondrium for two months. On examination, he had marked pallor, sternal tenderness and huge splenomegaly. P.B.S. showed immature W.B.C.s. What is the most probable diagnosis ? Classify the disease and draw the peripheral blood picture in this case. (05)
- Q.2 a) Describe C.S.F. examination. What are the C.S.F. findings in meningitis ? (05)
- b) Describe laboratory diagnosis of haemolytic transfusion reactions. (05)
- Q.3 a) Define neoplasia. Classify carcinogens. Write a note on viral carcinogenesis. (05)
- b) Classify lung tumours. Discuss aetiopathogenesis and pathology of bronchogenic carcinoma. (05)
- Q.4 Write short notes on any five. (10)
- a) Haemophilia
 - b) Megaloblast
 - c) Glucose tolerance test
 - d) Ewing's sarcoma
 - e) Exfoliative cytology
 - f) Melanoma.

SARASWATI-II (NEW RULES): JANUARY 2003
SUBJECT: PATHOLOGY PAPER-I
(GENERAL AND SYSTEMIC PATHOLOGY)



Day : Monday
Date : 06-1-2003

Time : 11:00 a.m. to 1:00 p.m.
Max Marks : 40

N.B.

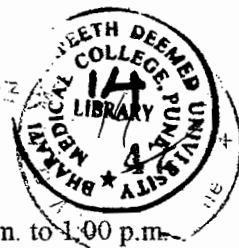
- 1) All questions are COMPULSORY.
- 2) Neat diagrams should be drawn WHEREVER necessary.

- Q.1 a) A 55 year old man developed sudden, severe chest pain, sweating and breathlessness. Describe gross and microscopic changes found in heart. (05)
- b) A 30 year old female developed jaundice 3 months after multiple blood transfusions she received during a major surgery. Describe gross and microscopic changes found in liver. (05)
- Q.2 a) Describe healing by primary intention. Describe in brief factors influencing healing. (05)
- b) Define oedema. Describe etiopathology of oedema due to liver disease (05)
- Q.3 a) Describe renal changes in Hypertension (05)
- b) Describe clinical features and morphologic features of Bronchiectasis. (05)
- Q.4 Write short notes on ANY FIVE of the following: (10)
- i) Hyaline change
 - ii) Anthracotic pigment
 - iii) Lepromatous leprosy
 - iv) Gross appearance of kidney in chronic pyelonephritis
 - v) Adenomyosis
 - vi) Stains for Amyloid

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SAVED VALL-II (NEW RULES): JANUARY:2003

**SUBJECT: PATHOLOGY PAPER-II
(GENERAL AND SYSTEMIC PATHOLOGY)**



Day : Tuesday
Date : 7-1-2003

Time : 11:00 a.m. to 1:00 p.m.
Max Marks : 40

N.B.

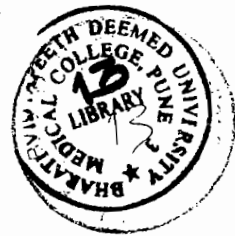
- 1) All questions are COMPULSORY.
- 2) Neat diagrams should be drawn WHEREVER necessary.

- Q.1 a) A 5 year old boy having progressive pallor and weakness, required repeated blood transfusions. Describe lab investigations in this case. (05)
- b) A 60 year old male, known hypertensive was admitted with decrease in urinary output and signs and symptoms of uraemia. Describe the laboratory findings in this case. (05)
- Q.2 a) Describe Coomb's Test and write its clinical significance. (05)
- b) Describe the laboratory findings in obstructive jaundice. (05)
- Q.3 a) Define Neoplasia. Describe spread of malignant neoplasms. (05)
- b) Classify Breast tumors. Describe gross and microscopic features of Infiltrating Duct Carcinoma. (05)
- Q.4 Write short notes on ANY FIVE of the following: (10)
- i) Haematuria
 - ii) Differences between Exudate and Transudate
 - iii) ESR
 - iv) FNAC
 - v) Retinoblastoma
 - vi) Morphology of Red cell and its significance

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41

SARASWATI-II (NEW RULES): JANUARY:2002
SUBJECT: PATHOLOGY PAPER-I
(GENERAL AND SYSTEMIC PATHOLOGY)



Day : Monday
Date : 07/01/2002

Time : 11:00 a.m. to 1:00 p.m.
Max Marks : 40

N.B.

- 1) All questions are COMPULSORY.
- 2) Neat diagrams should be drawn WHEREVER necessary.

-
- Q.1 a) A 10 year old boy had acute tonsillitis. Then he developed migratory polyarthritis and subcutaneous nodules. Describe pathological changes found in heart. (05)
- b) A 50 year old chronic alcoholic developed bleeding from GIT. Describe gross and microscopic features found in liver. (05)
- Q.2 a) Describe the pathogenesis and morphologic features of Primary Tuberculosis. (05)
- b) Describe pathology of Crohn's disease. (05)
- Q.3 a) Describe morphologic change and clinical features of endometrial hyperplasia (05)
- b) Describe etiopathology of brown atrophy of heart. (05)
- Q.4 Write short notes on ANY FIVE of the following: (10)
- i) Virchow's triad of thrombosis ✓
 - ii) Apoptosis
 - iii) Zenker's degeneration
 - iv) Exudate in acute inflammation
 - v) Phagocytosis
 - vi) Brown induration of Lungs.

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SARASWATI-II (NEW RULES): JANUARY:2002
SUBJECT: PATHOLOGY PAPER-II
(GENERAL AND SYSTEMIC PATHOLOGY)



Day : Tuesday
Date : 08/01/2002

Time : 11:00 a.m. to 1:00 p.m.
Max Marks : 40

N.B.

- 1) All questions are COMPULSORY.
- 2) Neat diagrams should be drawn WHEREVER necessary.

- Q.1 a) A 40 year old female had tingling and numbness in lower limbs, progressive pallor and weakness. Examination showed marked pallor and smooth tongue. Describe the peripheral blood smear and bone marrow findings in this case. (05)
- b) A 30 year old female had mismatched transfusion. Describe the possible complications and laboratory investigations in this case. (05)
- Q.2 a) Describe lab investigations in a case of sickle cell disease. (05)
- b) Describe lab investigations in a case of Hepatocellular jaundice. (05)
- Q.3 a) Describe peripheral blood smear and bone marrow findings in a case of Acute myeloid Leukemia. (05)
- b) Classify Bone Tumors. Describe gross and microscopic appearances of Osteogenic Sarcoma. (05)
- Q.4 Write short notes on ANY FIVE of the following: (10)
- i) Occupational Cancer
 - ii) P.C.V.
 - iii) Biological Carcinogens
 - iv) Spread of malignant tumors
 - v) Schwannoma
 - vi) Dermoid cyst

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ESR ✓
PCV ✓
Frozen plasma

SARASWATI-II (NEW RULES) : JANUARY 2001
SUBJECT : PATHOLOGY PAPER-I
(GENERAL AND SYSTEMIC PATHOLOGY)

Day : Monday
Date : 08/01/2001

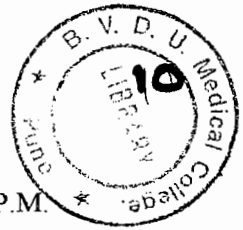
Time : 11.00 A.M. TO 1.00 P.M.
Max. Marks : 40.

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams should be drawn **WHEREVER** necessary.

-
- Q. 1 a) A 16 year old boy presented with high grade fever and cough with rusty expectoration since 3 days. Describe the sequential pulmonary changes. (05)
- b) Describe the Vascular changes in a 45 year old hypertensive with hypercholesterolemia. (05)
- Q. 2 a) What is embolism. Describe types of emboli. (05)
- b) Describe the characteristic gross and microscopic features of ulcerative colitis. (05)
- Q. 3 a) Describe the clinical effects of amyloidosis. (05)
- b) Describe the pathogenesis and complications of sub-acute bacterial endocarditis. (05)
- Q. 4 Write short notes on any **FIVE** of the following: (10)
- i) Hemochromatosis.
 - ii) Dystrophic calcification.
 - iii) Oxygen derived free radicals.
 - iv) Alcoholic cirrhosis of liver.
 - v) Chronic Pyelonephritis.
 - vi) Ghon's lesion.
- * * *

SARASWATI-II (NEW RULES) : JANUARY 2001
SUBJECT : PATHOLOGY PAPER-II
(HEMATOLOGY, BLOOD BANK AND NEOPLASIA)



Day : Tuesday
Date : 09/01/2001

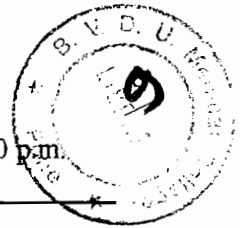
Time : 11.00 A.M. TO 1.00 P.M.
Max. Marks : 40.

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Neat diagrams should be drawn **WHEREVER** necessary.

-
- Q. 1 a) A 15 year old boy came with history of neck stiffness, headache and vomiting. Describe how laboratory investigations will lead you to the diagnosis ? (05)
- b) Draw and label a picture of peripheral blood smear in thalassemia major. (05)
- Q. 2 a) Describe the laboratory investigations which will confirm the suspicion of obstructive jaundice. (05)
- b) What will be your considerations while selecting a blood donor ? (05)
- Q. 3 a) Classify malignant tumors of the breast. How are ductal carcinoma's staged ? (05)
- b) Give an account of laboratory diagnosis of multiple myeloma. (05)
- Q. 4 Write short notes on any **FIVE** of the following: (10)
- i) Osteosarcoma.
 - ii) Coomb's test.
 - iii) Basal cell carcinoma. —
 - iv) Paraneoplastic syndromes.
 - v) Reed-Sternberg cell.
 - vi) Bombay blood group.

SARASWATI-II (OLD): APRIL/MAY 2001
SUBJECT: PATHOLOGY



Day : Monday
Date : 16/04/2001

Time : 10.00 a.m. – 1.00 p.m.
Max. Marks : 100

N.B.

- 1) Answer to the **TWO** sections should be written in **SEPARATE** answer books.
- 2) Draw neat **DIAGRAMS** wherever necessary.
- 3) Figures to the **RIGHT** indicate full marks.

SECTION-I

- Q.1 Define neoplasia. Explain the role of carcinogenic agents in development of neoplasms. (13)
- Q.2 Write short notes on **ANY TWO** of the following :- (12)
- a) Fatty change in liver
 - b) Necrosis
 - c) Chemical mediators of inflammation
- Q.3 Enumerate the viruses causing hepatitis. Describe the pathology and complications of viral hepatitis. (13)
- Q.4 Write short notes on **ANY TWO** of the following :- (12)
- a) Adenocarcinoma of stomach
 - b) Emphysema
 - c) Markers of myocardial injury

SECTION-II

- Q.5 Give an account of megaloblastic anemia. (13)
- Q.6 Write short notes on **ANY TWO** of the following :- (12)
- a) Urinary deposits
 - b) Selection of a blood donor
 - c) Hodgkin's disease
- Q.7 Classify bone tumors. Describe the pathology of one of the malignant bone tumors of age group below 20 years. (13)
- Q.8 Write short notes on **ANY TWO** of the following :- (12)
- a) Miliary tuberculosis
 - b) Astrocytoma
 - c) Pyogenic meningitis

BRAMHAPUTRA - AUGUST - 2001
SUBJECT : PATHOLOGY

Day Tuesday
Date 07/08/2001

Time : 10.00 a.m. to
Marks : 100



N.B.

- 1) All questions are **COMPULSORY**.
- 2) Draw neat diagrams **WHEREVER** necessary.
- 3) Figures to the **RIGHT** indicate maximum marks.
- 4) Use **SEPARATE** answer sheet for each section.

SECTION - I

- Q.1 Enumerate routine and special stains in surgical pathology. Describe in detail special stains for amyloid demonstration. (15)
- Q.2 Discuss the role of absolute indices in determining the morphological type of anaemia. Add a note on laboratory diagnosis of megaloblastic anaemia. (15)
- Q.3 Write short notes on any four (20)
- a) Tissue fixatives
 - b) Frozen section
 - c) Exfoliative cytology
 - d) Mounting and care of a pathology museum specimen
 - e) Eosinophilia

SECTION - II

- Q.4 Describe urine examination in detail. Add a note on special tests done on a urine sample. (15)
- Q.5 Enumerate blood transfusion reactions. Describe laboratory tests in a case of blood transfusion reaction. (15)
- Q.6 Write short notes on any four (20)
- a) Reticulocyte count
 - b) Storage of blood in a blood bank
 - c) C.S.F. examination
 - d) Semen analysis
 - e) Special stains for leukaemia

SARASWATI -II (NEW RULES) : JULY - 2000
SUBJECT : PATHOLOGY-I (GENERAL AND SYSTEMIC
PATHOLOGY)



Day : Monday
Date : 3/07/2000

Time : 11.00 a.m. to 1.00 p.m.
Max Marks : 40

N.B.

- 1) All questions are **COMPULSORY**
- 2) Neat diagram should be drawn whenever necessary.

- (10)
- Q.1 a) A 8 year old boy presented with puffiness of face and oliguria, 3 weeks after sore throat. Describe in detail the pathological lesion in Kidney. (5) (5)
- b) A 50 year old male developed sudden chest pain and perspiration. On 3rd day he died. Describe the Pathological lesion in heart in this case and lab investigations to confirm the Diagnosis (5) (15)
- (10)
- Q.2 a) Give an account of chemical mediators of inflammation. (5) (10)
- b) What is Oedema and describe the causes of non-inflammatory Oedema. (5) (05)
- (05)
- Q.3 a) Describe Pathology of inflammatory bowel disease. (5) (10)
- b) Describe morphological changes and complications of bronchopneumonia. (5) (05)
- (10)
- Q.4 Write short notes on **ANY FIVE**. (10)
- i) Granuloma
 - ii) Lipofuscin pigment
 - iii) Apoptosis
 - iv) Caission's disease.
 - v) Osteomyelitis.
 - vi) Aneurysm.

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SARASWATI-II (NEW RULES) : JANUARY-2000
SUBJECT : PATHOLOGY-I (GENERAL AND SYSTEMIC
PATHOLOGY)



Day : Monday
Date : 17/01/2000

Time : 11.00 a.m. to 1.00 p.m.
Max Marks : 40

N.B.

- 1) All questions are **COMPULSORY**
- 2) Neat diagram should be drawn whenever necessary.

- Q.1 a) A 30 year old man developed hypopigmented patch with loss of sensation. Nerves were thickened. Describe the most probable pathological lesion in this case (5) (10)
- b) A 40 year old Chr. Alcoholic complained of anorexia, yellowness of eyes and ascites. Describe in detail the pathological changes in liver in this case. (5) (5)
- Q.2 a) Define embolism. Name the various types. Describe Pulmonary embolism. (5) (10)
- b) Define inflammation and describe the cellular events in detail. (5) (05)
- Q.3 a) Define emphysema. Mention its Pathogenesis and describe its Pathology in detail. (5) (10)
- b) What is atherosclerosis. Describe its Pathological lesions and their effects. (5) (05)
- Q.4 Write short notes on **ANY FIVE**. (10) (10)
- i) Aschoff bodies.
 - ii) Rapidly progressive glomerulonephritis.
 - iii) Hashimoto's thyroiditis.
 - iv) Tuberculous meningitis.
 - v) Coagulative necrosis.
 - vi) Septic shock.

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SARASWATI-II (NEW RULES) : JANUARY-2000
SUBJECT : PATHOLOGY-II (HAEMATOLOGY, BLOOD – BANKING AND NEOPLASIA)



Day : Tuesday
Date : 18/01/2000

Time : 11.00 a.m. to 1.00 p.m.
Max Marks : 40

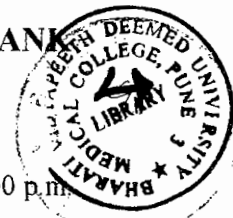
N.B.

- 1) All questions are **COMPULSORY**
- 2) Neat diagram should be drawn whenever necessary.

- (10)
- Q.1 a) A 20 year old female came with history of repeated urinary tract infection. Describe urine analysis findings in this case and any other renal function tests you will like to do in this case. (5)
- b) A 25 year old female came with anaemia, leukopenia and bleeding spots following ingestion of chloramphenicol. Describe various blood and marrow findings in this case. (5)
- (10)
- Q.2 a) Mention donor screening criteria for blood donation and storage of blood in Blood-Bank. (5)
- b) Describe in detail pleural fluid analysis and its significance. (5)
- (10)
- Q.3 a) Classify carcinogens and describe in detail chemical carcinogens. (5)
- b) Describe Pathology of Cervical Cancer along with its staging. (5)
- (10)
- Q.4 Write short notes on **ANY FIVE**. (10)
- i) Basal Cell carcinoma.
 - ii) Thalassemia.
 - iii) Pleomorphic adenoma.
 - iv) P.S. in C. M. L.
 - v) Sediments in urine.
 - vi) Follicular carcinoma of thyroid.

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SARASWATI -II (NEW RULES) : JULY - 2000
SUBJECT : PATHOLOGY-II (HAEMATOLOGY, BLOOD – BANK
AND NEOPLASIA)



Day : Tuesday
 Date : 4/07/2000

Time : 11.00 a.m. to 1.00 p.m.
 Max Marks : 40

N.B.

- 1) All questions are **COMPULSORY**
- 2) Neat diagram should be drawn whenever necessary.

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|-----|--|---|------|------|
| | | | (10) | |
| Q.1 | a) | A 40 year old man came with loss of appetite and yellowness of eyes. What are the liver function tests you will like to do and describe importance of each one of them. | (5) | |
| | b) | A 16 year old boy came with spontaneous haemorrhages. Describe the haematological investigations which you will like to do in this case. | (5) | 05) |
| | | | (10) | (05) |
| Q.2 | a) | Describe the peripheral smear and bone marrow findings in a case of megaloblastic anaemia. | (5) | |
| | b) | Describe the C.S.F. exam. | (5) | (05) |
| | | | (10) | (05) |
| Q.3 | a) | Describe the lab diagnosis of Cancer. | (5) | (05) |
| | b) | Classify testicular tumors and describe gross and microscopic of Seminoma. | (5) | (05) |
| | | | (10) | (05) |
| Q.4 | Write short notes on ANY FIVE . | | | |
| | i) | Carcinoma of stomach. | | |
| | ii) | Osteogenic sarcoma. | | (10) |
| | iii) | Para-neoplastic syndrome. | | |
| | iv) | Acute leukemia | | |
| | v) | Sickle cell anaemia. | | |
| | vi) | Fibro adenoma breast. | | |

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SARASWATI - II (OLD RULES) OCT./NOV. 1999
SUBJECT : PATHOLOGY



Day : Saturday Time: 11.00 A.M. To 2.00 P.M.
Date : 16/10/1999 Max. marks: 100

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate **FULL** marks.
- 3) Answers to the two sections should be written separately.
- 4) Draw neat diagram wherever necessary.

SECTION - I

- Q. 1 Define inflammation, enumerate cardinal signs of acute inflammation. Describe in detail vascular phenomenon of acute inflammation. (13) (05)
- Q. 2 Write short notes on any **TWO** of the following:- (12) (05)
- a) Evolution of a tubercle.
 - b) Infarction.
 - c) Exogenous pigment.
- Q. 3 Define and classify cirrhosis of liver and discuss Alcoholic cirrhosis. (13) (05)
- Q. 4 Write short notes on any **TWO** of the following:- (12) (05)
- a) Crohn's Disease.
 - b) Morphology of Broncho-Pneumonia.
 - c) Hashimoto's thyroiditis.

SECTION - II

- Q. 5 Define and classify haemolytic anaemias. Discuss lab. investigations in a case of congenital haemolytic anaemia. (13) (05)
- Q. 6 Write short notes on any **TWO** of the following:- (12) (05)
- a) Proteinuria.
 - b) Acute leukemia.
 - c) Glucose - tolerance test.
- Q. 7 Classify tumors of breast and describe medullary carcinoma of breast. (13) (10)
- Q. 8 Write short notes on any **TWO** of the following:- (12)
- a) Wilm's tumor.
 - b) Hypertrophy, hyperplasia.
 - c) F.N.A.C.

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SARASWATI - II APRIL/MAY 1999
SUBJECT : PATHOLOGY

Day : Monday Time: 11.00 A.M. To 2.00 P.M.
Date : 19/4/1999 Max. marks: 100

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Figures to the **RIGHT** indicate **FULL** marks.
- 3) Answers to the two sections should be written separately.
- 4) Draw neat diagram wherever necessary.

SECTION - I

- Q. 1 Describe Pathophysiology of Oedema. (13) (05)
- Q. 2 Write short notes on any **TWO** of the following:- (12)
- a) Necrosis.
 - b) Stains for Amyloidosis. (05)
 - c) Endogenous pigment.
- Q. 3 Give an account of Atherosclerosis. (13)
- Q. 4 Write short notes on any **TWO** of the following:- (12)
- a) Ulcerative colitis. (05)
 - b) Morphology of lobar pneumonia. (05)
 - c) Kidney in Acute glomerulonephritis. (05)

SECTION - II

- Q. 5 Enumerate various blood group systems. Describe the harmful effects of blood transfusion (13) (10)
- Q. 6 Write short notes on any **TWO** of the following:- (12)
- a) P. C. V.
 - b) Glycosuria.
 - c) C. S. F. in bacterial meningitis.
- Q. 7 Describe tumors of ovaries. (13)
- Q. 8 Write short notes on any **TWO** of the following:- (12)
- a) Biological carcinogens.
 - b) Bronchogenic carcinoma.
 - c) Pre cancerous lesions.

COURSE): APRIL/MAY 1999
SUBJECT: FORENSIC MEDICINE AND TOXICOLOGY



Day : Monday
Date : 26/04/1999

Time: 11.00 A.M. TO 2.00 P.M.
Max. Marks: 100.

N.B.

- 1) All questions are **COMPULSORY**.
- 2) Answer each Section in a **SEPARATE** answer paper.
- 3) Figures to the **RIGHT** indicate full marks.

SECTION-I

- Q. 1 Define 'Identity'. Discuss the medico-legal importance of Age. (10) (05)
- Q. 2 Describe the external and internal NECK findings in a case of Hanging and Strangulation. Add a note on 'Lynching'. (10) (05)
- Q. 3 Define 'Drunkenness'. Describe the procedure of examining a suspected alcoholic. (10) (05)
- Q. 4 Write short notes - (20)
- a) Adipocere (05)
 - b) Negative Autopsy
 - c) Witness (05)
 - d) Drug Abuse.

SECTION-II

- Q. 5 Classify mechanical Injuries. Describe 'Lacerations' in details. (10) (05)
- Q. 6 Define and classify 'Unnatural Sexual offences'. Describe Sodomy'. (10) (10)
- Q. 7 Define and classify 'Professional Negligence' in medical practice. Enumerate the differences between the two main types of professional negligence. (10)
- Q. 8 Write short notes - (20)
- a) Mc Naughten's Rule
 - b) Hydrostatic test
 - c) Delusion
 - d) Contusion.