

Gastrointestinal Pathology

	hich of the following is a characteristic histopathological feature of Ulcerative litis?
A) G	ranulomas
B) Cı	rypt abscesses
C) Tr	ransmural inflammation
D) Sl	kip lesions
2. W	Thich of the following causes of Crohn's are INCORRECT
A) G	Genetics
B) A	autoimmunity
C) G	Gut microbiome
D) S	tress

- 3. Which of the following malignancy is most commonly associated with Barrett's esophagus?
- A) Squamous cell carcinoma
- B) Adenocarcinoma
- C) Small cell carcinoma
- D) Lymphoma

- 4. A 25-year-old man presents with abdominal pain and diarrhea for 3 months. He also reports weight loss and intermittent rectal bleeding.
- ➤ Colonoscopy: Patchy mucosal ulceration with skip lesions and cobblestone appearance.
- ➤ Biopsy: Transmural inflammation and granulomas.

- A. Ulcerative colitis
- **B.** Crohn's disease
- C. Infectious colitis
- **D.** Irritable bowel syndrome

5. Which part of the gastrointestinal tract is most commonly affected by Ischemic
colitis?
A) Ascending colon
B) Left colon
C) Rectum
D) Duodenum

6. Which of the following dietary habits is associated with increased risk of gastric cancer?

- A. High intake of fresh fruits and vegetables
- B. High intake of smoked and salted foods
- C. Vegetarian diet
- D. High fiber diet

7. In which of the following conditions is the "Apple core" sign commonly seen on a Barium enema?

A) Colorectal cancer

B) Crohn's disease

C) Diverticulosis

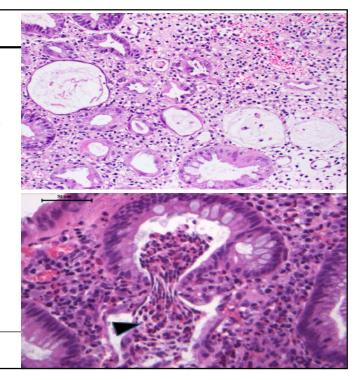
D) Ulcerative colitis

- 8. What is the typical clinical hallmark of classic Familial adenomatous polyposis (FAP)?
- A. Multiple gastric ulcers
- B. Multiple colon polyps (>100)
- C. Brain tumors
- D. Early-onset diabetes mellitus

9. A colonic biopsy shows **crypt** abscesses, goblet cell depletion, and continuous mucosal involvement.

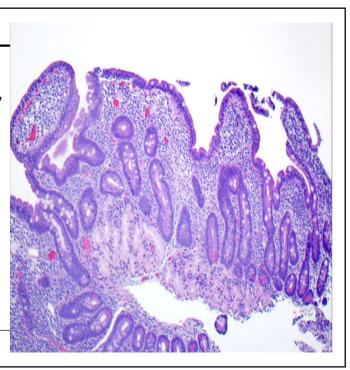
What is the most likely diagnosis?

- A. Crohn's disease
- **B.** Ulcerative colitis
- C. Infectious colitis
- **D.** Ischemic colitis



10. A histology slide from a small intestinal biopsy shows villous atrophy, crypt hyperplasia, and increased intraepithelial lymphocytes. What is the likely diagnosis?

- **A.** Whipple disease
- **B.** Celiac disease
- C. Tropical sprue
- **D.** Crohn's disease



Hepatobiliary Pathology

- 1. Which of the following liver enzymes is most **SPECIFIC** in alcoholic liver disease?
- A) Alanine aminotransferase (ALT)
- B) Aspartate aminotransferase (AST)
- C) Alkaline phosphatase (ALP)
- D) Gamma-glutamyl transferase (GGT)

2. Which is the hallmark feature of Cirrhosis on histopathology?
A) Fatty infiltration
B) Fibrosis & regenerative nodules
C) Granulomas
D) Cellular atypia

- 3. What is the most common cause of Non-alcoholic fatty liver disease (NAFLD)?
- A) Viral hepatitis
- B) Obesity and metabolic syndrome
- C) Alcohol consumption
- D) Medications

4. What is	he most common cause of	Acute liver failure in adults?	
A) Hepatit	s B		
B) Alcoho	ic hepatitis		
C) Acetam	nophen toxicity		
D) Non-ale	oholic steatohepatitis (NA	SH)	

5. Which of the following is the most common type of liver cancer in adults?

A) Hepatocellular carcinoma

B) Cholangiocarcinoma

D) Hepatic lymphoma

C) Angiosarcoma

6. Which of the following is a potential complication of gallstones?
A) Peptic ulcer disease
B) Acute cholecystitis
C) Acute appendicitis D) Gastroesophageal reflux disease (GERD)
D) Gastrocsophagear remux disease (GEND)

7. Which condition is most likely to result in jaundice due to obstructive pathology?

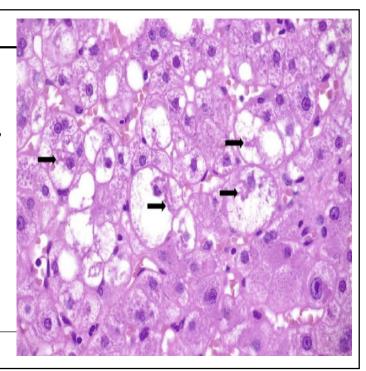
- A) Hepatitis A
- B) Hepatic cirrhosis
- C) Cholelithiasis
- D) Gilbert's syndrome

A) Fatty infiltration of the liver
B) Thickening and fibrosis of the bile ducts
C) Multiple intrahepatic bile duct stones
D) Chronic hepatitis

- 9. Which of the following is **NOT** a common feature of acute viral hepatitis?
- A) Jaundice
- B) Elevated AST and ALT
- C) Hepatomegaly
- D) Steatosis

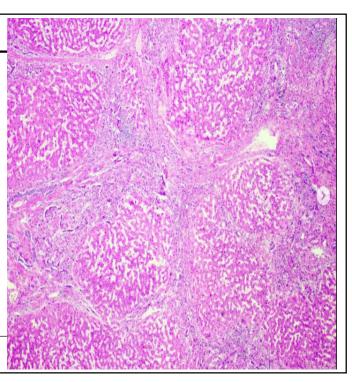
10. Here is shown a liver biopsy image showing ballooned hepatocytes, Mallory-Denk bodies, and neutrophilic infiltration. What is the most likely diagnosis?

- **A.** Viral hepatitis
- **B.** Alcoholic hepatitis
- **C.** Autoimmune hepatitis
- **D.** Wilson's disease



11'. A liver histology image shows bridging fibrosis and regenerative nodules. What condition is most likely responsible?

- **A.** Cirrhosis
- **B.** Steatosis
- C. Acute hepatitis
- D. Hepatocellular carcinoma



12. A 52-year-old man presents with fatigue, jaundice, and right upper quadrant discomfort. He has a history of alcohol abuse.

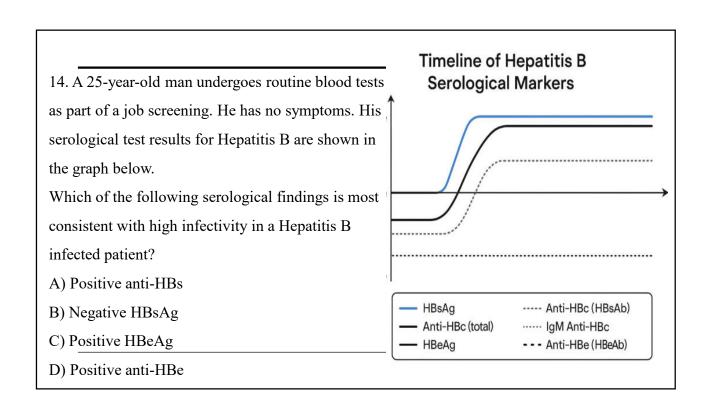
- ➤ Lab results:
- AST: 178 U/L, ALT: 85 U/L, GGT: 230 U/L
- Total bilirubin: 4.5 mg/dL, Albumin: 2.8 g/dL
- ➤ Liver biopsy shows hepatocyte ballooning, Mallory-Denk bodies, and neutrophilic infiltration.

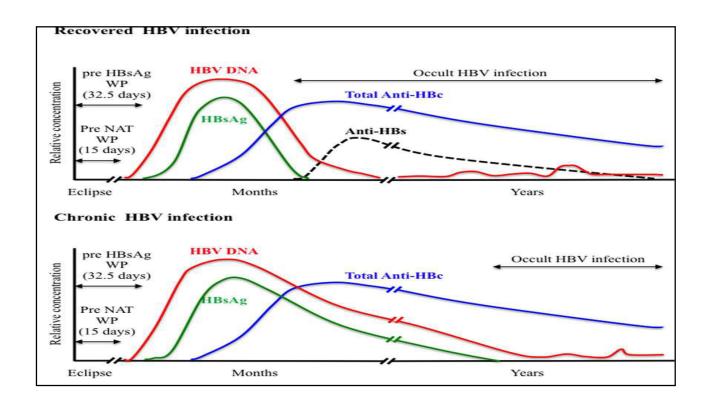
- A. Alcoholic hepatitis
- **B.** Viral hepatitis
- C. Autoimmune hepatitis
- **D.** Non-alcoholic steatohepatitis (NASH)

13. A 40-year-old woman presents with pruritus and fatigue. She has elevated alkaline phosphatase and GGT.

- > ANA: Positive
- > AMA (anti-mitochondrial antibody): Positive
- > Liver biopsy shows portal inflammation with bile duct loss and granulomas.

- A. Primary sclerosing cholangitis
- **B.** Autoimmune hepatitis
- C. Primary biliary cholangitis
- **D.** Hepatitis C infection





Renal Pathology

1.Which of the following is characteristic of Minimal change disease? A) Hypercellularity of glomeruli B) Thickening of the glomerular basement membrane C) Effacement of podocyte foot processes D) Subendothelial deposits 2. Which of the following is a typical feature of Acute glomerulonephritis (AGN). A) Nephrotic syndrome B) Hematuria and proteinuria C) Elevated blood urea nitrogen (BUN)		
B) Thickening of the glomerular basement membrane C) Effacement of podocyte foot processes D) Subendothelial deposits 2. Which of the following is a typical feature of Acute glomerulonephritis (AGN): A) Nephrotic syndrome B) Hematuria and proteinuria	1.	Which of the following is characteristic of Minimal change disease?
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B) Hematuria and proteinuria	Δ)	Nenhrotic syndrome
C) Elevated blood urea nitrogen (BUN)		-
D) Pyuria		

A) Nephrotic syndron	ne
B) Hypertensive neph	nropathy
C) Acute renal failure	e due to sepsis
D) Acute tubular necr	rosis
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4. What is the most c	common cause of Nephrotic syndrome in children?
	phropathy
A) Membranous nep	
	glomerulosclerosis
B) Focal segmental g	
B) Focal segmental g	disease
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5. Which of the following is a common cause of prerenal Acute kidney injury (AKI)?
A) Acute tubular necrosis
B) Dehydration
C) Renal artery stenosis
D) Glomerulonephritis

6. Which of the following findings is suggestive of Diabetic nephropathy on renal biopsy?

- A) Mesangial expansion and thickening of the glomerular basement membrane
- B) Crescent formation
- C) Wire loop lesions
- D) Fibrinoid necrosis

C) Renal artery stenosis D) Hypotension	
D) Hypotension	
8. What is the characteristic finding in Nephritic syndrome?	
A) Massive proteinuria	
B) Hematuria and oliguria	
C) Hypoalbuminemia	

7. Which of the following is a classic complication of Polycystic kidney disease?

9. Which type of kidney stone is most commonly associated with a Urinary tract
infection caused by Urea-splitting organisms?

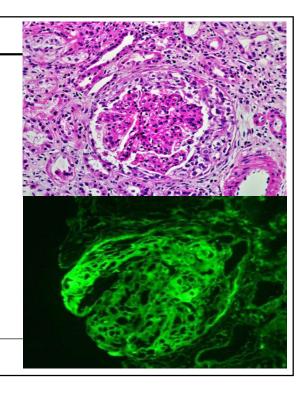
- A) Calcium oxalate
- B) Struvite
- C) Uric acid
- D) Cystine

10. Which of the following conditions is associated with the formation of crescents in glomeruli?

- A) Goodpasture syndrome
- B) Nephrotic syndrome
- C) Focal segmental glomerulosclerosis
- D) Diabetic nephropathy

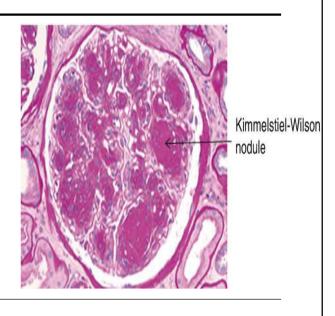
11. A renal biopsy shows crescent formation in most glomeruli, with fibrin deposition and epithelial proliferation. What is the most likely type of glomerulonephritis?

- A. Minimal change disease
- B. Membranous nephropathy
- C. Rapidly progressive glomerulonephritis (RPGN)
- D. IgA nephropathy



12. Image shows nodular glomerulosclerosis with PAS-positive Kimmelstiel-Wilson nodules. Which of the following is the most likely underlying condition?

- A. Amyloidosis
- B. Diabetic nephropathy
- C. Focal segmental glomerulosclerosis
- D. Lupus nephritis



13. A 22-year-old man presents with hematuria and mild proteinuria.

Lab tests: Serum creatinine: 1.3 mg/dL, Urinalysis: RBCs, mild proteinuria

Renal biopsy: Mesangial proliferation with deposits (immunofluorescence)

- A. Post-streptococcal glomerulonephritis
- **B.** IgA nephropathy
- C. Lupus nephritis
- **D.** Alport syndrome