



THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain
Reg No 1955/000003/08

Final Examination for the Fellowship of the College Of Pathologists of South Africa - Anatomical

26 July 2018



Paper 1

(3 hours)

All questions to be answered. Each question to be answered in a separate book (or books if more than one is required for the answer)

- 1 a) Discuss the selection of an antibody panel for the diagnosis and sub-classification of benign hepatocellular lesions. (11)
b) Write notes on the critical steps in molecular pathways of genetic alterations in follicular cell-derived malignancies of the thyroid gland. (10)
c) Describe the role of electron microscopy in the diagnosis of immotile cilia syndrome. (4)
[25]
- 2 a) Tabulate the light microscopic and immunohistochemical features that enable distinction between endocervical and endometrial adenocarcinoma. (9)
b) Discuss the genomic-based endometrial carcinoma subtypes. (10)
c) Discuss tumour budding in colorectal carcinoma. (6)
[25]
- 3 a) Discuss critical results in surgical pathology under the following headings:
i) Definition of a critical result. (1)
ii) Actions needed. (1)
iii) Examples of critical results. (6)
b) For each phase of the testing cycle in the anatomical pathology laboratory, i.e.
i) Pre-analytic. (7)
ii) Analytic. (6)
iii) And post-analytic. (4)
Outline its corresponding internal quality assurance activities as follows:
1) The general category of internal quality assurance activity performed.
2) Specific example activities.
3) And the main documentary items that would be recorded.
[25]
- 4 a) Discuss the following regarding frozen sections:
i) The indications for requesting a frozen section. (5)
ii) Illegitimate / unreasonable reasons for requesting a frozen section. (6)
b) Discuss the use of a panel of immunohistochemical markers that will assist in the distinction of epithelioid malignant mesothelioma from pulmonary adenocarcinoma (14)
[25]



THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain
Reg No 1955/000003/08

Final Examination for the Fellowship of the College
Of Pathologists of South Africa - Anatomical

27 July 2018



Paper 2

(3 hours)

All questions to be answered. Each question to be answered in a separate book (or books if more than one is required for the answer)

-
- 1 a) Discuss the microscopic and immunohistochemical features useful in distinguishing non-neoplastic breast lesions that mimic carcinoma in a core biopsy under the following subheadings
- i) Features useful in distinguishing between mucocele-like lesion and mucinous carcinoma. (6)
 - ii) Features useful in distinguishing between collagenous spherulosis and adenoid cystic carcinoma. (7)
- b) Write notes on anaplasia as a marker of unfavorable histology in the diagnosis of nephroblastoma under the following sub-headings
- i) Definition. (2)
 - ii) Conditions that must be met for the reporting of anaplasia. (10)
- [25]
- 2 a) Discuss the light microscopic features that can be used to distinguish between a parathyroid adenoma and a parathyroid carcinoma. (5)
- b) Discuss the histopathological features of primary bone tumours that involves the epiphysis. (9)
- c) Discuss the light microscopic features and differential diagnosis of the following variants of ependymoma:
- i) Clear cell ependymoma. (5)
 - ii) Myxopapillary ependymoma. (6)
- [25]
- 3 a) Write notes on the histomorphology, immunophenotype and Gleason grading of the variants of prostatic adenocarcinoma that have large duct morphology. (10)
- b) List the major vacuolar (cell poor) interface dermatoses and for each of the dermatoses listed note their distinguishing clinical and pathologic features, including any applicable ancillary investigations. (15)
- [25]
- 4 a) Discuss Primary low-grade gastric MALT lymphoma under the following headings:
- i) Microscopic features. (10)
 - ii) Immunohistochemical markers assisting in the diagnosis. (4)

- b) Describe the microscopic morphology and the immunohistochemical / molecular profile of the following:
- i) Gangliocytic Paraganglioma. (5)
 - ii) Ganglioneuroma / Ganglioneuromatosis. (6)
- [25]