

Which of the following features favors Crohn's disease over ulcerative colitis?

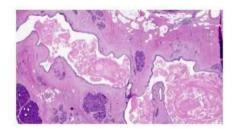
- A. Crypt architectural distortion
- B. Diffuse, continuous involvement of colon
- C. Nonnecrotizing granulomas
- D. Superficial, broad based ulceration

Answer 473 ▼

C. Nonnecrotizing granulomas

Comment Here

Reference: Crohn's disease



What are the cardinal features of chronic pancreatitis?

- A. Fat necrosis, chronic inflammation and loss of Langerhans islets
- B. Fibrosis, loss of acinar tissue and duct changes
- C. Giant cell granulomas, perineural inflammation and plasma cell infiltrate
- D. Intraductal proliferative lesions, lipomatous atrophy and perivenulitis
- E. Necrosis, granulocytic epithelial lesions and pseudocysts

Answer 450 ▼

B. Fibrosis, loss of acinar tissue and duct changes

Comment Here

Reference: Chronic pancreatitis

A 45 year old woman presented with abdominal pain and jaundice. Abdominal imaging showed a diffusely enlarged sausage shaped pancreas and stenosis of the main pancreatic duct. Serum amylase, lipase and IgG4 levels were not elevated. During the workup, endoscopic ultrasound guided fine needle biopsy was performed and histologic sections showed pancreatic duct centric inflammation including ductal epithelium with intra-epithelial neutrophils. Upon further gathering of past medical history, the patient was most likely found to have which of the following?

- A. Ankylosing spondylitis
- B. Inflammatory bowel disease
- C. Salivary gland enlargement and thyroiditis
- D. Systemic lupus erythematosus

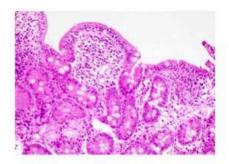
Answer 159 ▼

B. There is a known association between autoimmune pancreatitis type 2 and inflammatory bowel disease, especially ulcerative colitis, occurring in 15 - 20% of biopsy proven autoimmune pancreatitis type 2. The basis of this association is unclear.

Answer choice A: Ankylosing spondylitis is an inflammatory disease that is associated with HLA-B27 and is not known to be associated with autoimmune pancreatitis type 2.

Answer choice C: Autoimmune pancreatitis type 1 is an IgG4 related disease. Patients often present with extra pancreatic manifestations of systemic IgG4 related inflammation including enlarged salivary glands and Riedel thyroiditis or the sclerosing variant of Hashimoto thyroiditis.

Answer choice D: Systemic lupus erythematosus is not known to be associated with autoimmune pancreatitis type 2.



Which histological feature is most common in celiac disease?

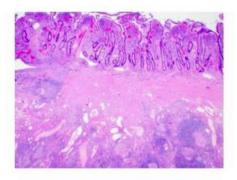
- A. Crypt hyperplasia
- B. Granulomas
- C. Intraepithelial lymphocytosis
- D. Mucosal eosinophilia
- E. Villous atrophy

Answer 433 ▼

C. Intraepithelial lymphocytosis. All celiac disease patients, except for those with Marsh type 0, show intraepithelial lymphocytosis.

Comment Here

Reference: Celiac sprue



A 30 year old woman presents with abdominal pain and bloody diarrhea. The patient is refractory to medical management and a resection of the small intestine is performed. What diagnosis is most consistent with the histological findings?

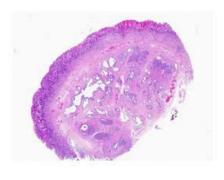
- A. Backwash ileitis
- B. Crohn's disease
- C. Drug associated enteritis
- D. Infections enteritis

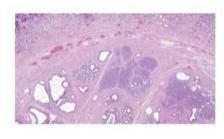
Answer 435 ▼

B. Crohn's disease

Comment Here

Reference: Crohn's disease





A 55 year old man presents with persistent anemia, abdominal pain and intermittent melena. Endoscopy reveals a subepithelial gastric antral mass with overlying umbilicated mucosa. Endoscopic mucosal resection shows the images above. What is the most likely diagnosis?

- A. Gastric adenocarcinoma
- B. Heterotopic pancreas
- C. Metastatic adenocarcinoma
- D. Pancreatic metaplasia

Answer 471 ▼

B. Heterotopic pancreas

Comment Here

Reference: <u>Heterotopic pancreas</u>

Which is the most important and frequently mutated gene in pancreatic ductal adenocarcinoma?

- A. ARID1A
- B. CDKN2A
- C. KRAS
- D. SMAD4
- E. TP53

Answer 309 ▼

C. KRAS is the most important and frequent mutated gene in pancreatic ductal adenocarcinoma.

Comment Here

Reference: Molecular aspects of pancreatic cancer

Which of the following histological features is useful to differentiate alcoholic liver disease from nonalcoholic fatty liver disease?

- A. Acute foamy degeneration
- B. Ballooning degeneration
- C. Mallory-Denk body
- D. Satellitosis
- E. Severe steatosis

Answer 448 ▼

A. Acute foamy degeneration. Acute foamy degeneration (diffuse microvesicular steatosis) is a rare presentation of severe acute alcoholic hepatitis presenting with jaundice and hepatomegaly. Rapid recovery occurs on abstinence from alcohol. Diffuse microvesicular steatosis is not a histological feature of nonalcoholic fatty liver disease.

Comment Here

Reference: Alcoholic liver disease



A 60 year old man was admitted with massive hematemesis and hypovolemic shock. He failed to respond to resuscitation. Postmortem examination revealed a liver shown as above. What is the most likely cause of his massive gastrointestinal bleeding?

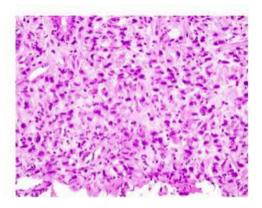
- A. Acute gastritis
- B. Aortoesophageal fistula
- C. Esophageal varices
- D. Hepatocellular carcinoma
- E. Peptic ulcer

Answer 364 ▼

C. Esophageal varices

Comment Here

Reference: Cirrhosis



Colorectal carcinomas with signet ring cells may display which of the following features?

- A. Concurrent BRAF and KRAS mutations
- B. Inability to breach the basement membrane
- C. Loss of CDX2 by immunohistochemistry
- D. Microsatellite instability

Answer 60 ▼

D. Microsatellite instability

Comment Here

Reference: Signet ring cell carcinoma

Which of the following is true about colon cancer?

- A. Commonly mutated genes include APC, TP53 and KRAS
- B. Most cases are poorly differentiated
- C. Most cases are positive for CK7 and negative for CK20 and CDX2
- D. Superficial / early tumors metastasize often

Answer 2 ▼

A. Commonly mutated genes include APC, TP53 and KRAS

Comment Here

Reference: Adenocarcinoma

What is the most common gastrointestinal malignancy in the U.S.?

- A. Colorectal adenocarcinoma
- B. Esophageal squamous cell carcinoma
- C. Gastric adenocarcinoma
- D. Small bowel adenocarcinoma

Answer 51 ▼

A. Colorectal adenocarcinoma

Comment Here

Reference: Colon carcinoma overview

Which of the following is not a typical feature of colonic inflammatory polyps?

- A. Crypt distortion / branching
- B. Granulation tissue changes
- C. Microsatellite instability
- D. Surface mucosal erosion

Answer 36 ▼

C. Microsatellite instability. Inflammatory polyps are a benign process with various degrees of mucosal erosion, increased vascular density similar to granulation tissue and architectural changes.

Comment here

Reference: Inflammatory polyp

Which of the following is true about Peutz-Jeghers syndrome?

- A. 1 Peutz-Jeghers polyp alone meets criteria to diagnose a patient with the syndrome
- B. Patients have essentially a 100% risk of developing malignancy
- C. Patients may develop mucocutaneous pigmentation
- D. Peutz-Jeghers polyps are most common in the colon

Answer 37 ▼

C. Patients may develop mucocutaneous pigmentation

Comment Here

Reference: Peutz-Jeghers syndrome

Gardner syndrome is caused by a germline mutation in what gene?

- A. APC
- B. BRAF
- C. MLH1
- D. STK11

Answer 45 ▼

A. APC

Comment Here

Reference: Gardner syndrome

What is the most common hereditary colorectal cancer syndrome?

- A. Familial adenomatous polyposis
- B. Juvenile polyposis
- C. Lynch syndrome
- D. MUTYH associated polyposis

Answer 3 ▼

C. Lynch syndrome

Comment Here

Reference: Lynch syndrome

What serum marker is often elevated in patients with hepatoid colon carcinoma?

- A. Alpha fetoprotein
- B. CA125
- C. CA19-9
- D. HER2

Answer 56 ▼

A. Alpha fetoprotein

Comment Here

Reference: <u>Hepatoid carcinoma</u>

The following syndromes confer an increased risk of colorectal carcinoma. Which syndrome is properly linked to its causative germline mutation?

- A. Familial adenomatous polyposis: MLH1 mutation
- B. Juvenile polyposis: SMAD4 mutation
- C. Lynch syndrome: STK11 mutation
- D. Peutz-Jeghers syndrome: APC mutation

Answer 52 ▼

B. Juvenile polyposis: SMAD4 mutation

Comment Here

Reference: Colon carcinoma overview

Patients with Turcot syndrome develop what tumors in addition to the typical manifestations of familial adenomatous polyposis?

- A. Desmoid tumors (fibromatosis)
- B. Gastrointestinal stromal tumors
- C. Keratoacanthomas
- D. Medulloblastomas

Answer 43 ▼

D. Medulloblastomas

Comment Here

Reference: Familial adenomatous polyposis,

classic

Which of the following is true about adenosquamous carcinoma of the colon?

- A. Always arises in the setting of HPV infection
- B. Has a good prognosis
- C. Often presents at an advanced stage
- D. Represents approximately 10% of colorectal carcinomas

Answer 55 ▼

C. Often presents at an advanced stage

Comment Here

Reference: Adenosquamous carcinoma