

1. All of the following are useful in diagnosing acute CMV infection of the GI tract EXCEPT:

Answer: D. CMV may be excreted for months to years after primary infection and does not necessarily mean active infection. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 32.)

2. Which of the following is the most valuable diagnostic tool for herpes infection of the GI tract:

Answer: D. Viral culture is the most valuable tool, in contrast to CMV infection. Intranuclear inclusions are found in only a minority of patients. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p. 33)

3. All of the following are characteristics of acute self limited colitis (ASLC) EXCEPT:

Answer: E. ASLC characteristically lacks basal plasmacytosis. All of the other answers are features of ASLC. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p. 34) A similar pattern to IBD except without the findings of chronicity.

4. Which of the following are associated with bloody diarrhea:

Answer: A. *E. coli* H7:O157 is the most common strain of Enterohemorrhagic *E. coli*. The other four groups of *E. coli* infection (Enterotoxigenic, Enteropathogenic, Enteroinvasive, and Enteroadherent) do not usually cause bloody diarrhea. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 34-35)

5. *C. diff.* related pseudomembranous colitis (PMC) is most commonly related to which of the following antibiotic treatments:

Answer: B. Ampicillin (most common cause in children), amoxicillin, and clindamycin are the classical drugs associated with PMC. ([www.MayoClinic.com](http://www.MayoClinic.com)) *Test taking strategy*. Clinical based questions are no fun for pathologists, but antibiotics have been known to come up as questions on the boards. Virtually any antibiotic can cause PMC, but Flagyl and “oral” vancomycin should be recognized as treatments for PMC. Tetracycline can cause PMC, but is not one of the classic offenders.

6. Which of the following is the most common mycobacterium isolated from the GI tract?

Answer: D. *M. avium-intracellulare* (MAI) is the most common mycobacterium isolated from the GI tract. Remember the differential to differentiate it from Whipple’s disease. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 39-40)

7. Which of the following is the best diagnosis for the images for “Case 1” (see website) from an appendix?

Answer: C. This is a case of pinworm. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p. 52-53)

8. Which of the following is the best diagnosis for the images for “Case 2” (see website) in a biopsy from the small intestine?

Answer: B. *Giardia lamblia*. This is often described as falling leaves in duodenal biopsies. Note the absence of significant pathology in the tissue. Always remember to look in the space surrounding the tissue in small bowel biopsies. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 49)

9. Which of the following is the best diagnosis for the images for “Case 3” (see website) in a biopsy from the stomach?

Answer: A. CMV infection. This infection is characterized by “owl’s eye” inclusions, which can be either intranuclear or cytoplasmic. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 31-32)

10. Which of the following is the best diagnosis for the images for “Case 4” (see website) in a biopsy specimen from the stomach?

Answer: E. *Strongyloides stercoralis*. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 52-54)

11. Which of the following is the best diagnosis for the images for “Case 5” (see website) in a biopsy specimen from the small intestine?

Answer: B. This is an illustration of Whipple’s disease. (*Surgical Pathology of the GI Tract, Liver, Biliary Tract, and Pancreas*, Odze, R. et al. 1<sup>st</sup> Edition. 2004. p 40) This author has heard some GI pathologists state that Whipple’s disease can be differentiated from MAI by the presence of “fat droplet” spaces within the histiocytic infiltrate, which is not present in MAI infection.