

# PathMD™: Board Review Letter

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Hematopathology - Part 1

Volume 1, Number 31

Case #1 A 45 y/o man presents with axillary adenopathy. A biopsy was performed and a representative image of the lymph node is shown. Immunohistochemistry showed the cells to be positive for EMA and CD30. CD20 and CD15 were negative. Based on these findings, the best answer is:

- A. Classical Hodgkin's Lymphoma
- B. Nodular Lymphocyte Predominant Hodgkin's Lymphoma
- C. Poorly Differentiated Carcinoma
- D. Diffuse Large B-Cell Lymphoma
- E. Anaplastic Large Cell Lymphoma

Case #2 A biopsy of a lymph node from a 30 y/o shows multiple foci of pigment throughout the lymph node which is represented in the image for this case. Upon close examination under high power, it does not appear to be intracellular. The lymph node otherwise appeared reactive. What is the most likely etiology?

- A. Formalin Pigment
- B. Melanin
- C. Lipofucin
- D. Iron Pigmentation
- E. Bile

Case #3 A 13 y/o girl presents with cervical adenopathy. A lymph node biopsy was performed and representative images are shown. Based on the findings, the best answer is:

- A. Kikuchi-Fujimoto disease
- B. TB lymphadenitis
- C. Cat-Scratch lymphadenitis
- D. Toxoplasmosis
- E. None of the above

Case #4 The cell pictured from a blood smear best represents, which of the following:

- A. Pelgeroid neutrophil
- B. Dyserythropoiesis
- C. Myelocyte
- D. Micromegakaryocyte
- E. None of the above

Case #5 The blood smear pictured from this case is from a 30 year old female with a history of travel to Africa 1 month ago and cyclic fevers every 48 hours. The RBCs pictured are normal in size. Based on the findings, the best diagnosis is:

- A. *P. vivax*
- B. *P. malariae*
- C. *P. ovale*
- D. *P. falciparum*
- E. *Babesia*

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**Case #6** The image for this case is from a lymph node in a 21 y/o male with a known history of Hodgkin's lymphoma. With regard to the large cell of interest (pictured), all of the following are true EXCEPT:

- A. CD45 positive
- B. B-cell origin
- C. CD30 positive
- D. CD15 positive
- E. CD20 negative

**Question #1** Which one of the following stains would be most helpful in differentiating a reactive and neoplastic lymph node:

- A. CD20
- B. Bcl-2
- C. Bcl-1
- D. Bcl-6
- E. FMC-7

**Question #2** A lymph node is composed of large, expanded, irregularly shaped follicles (some of which form giant geographic structures). The interfollicular areas have plasma cells, histiocytes, and monocytoid B-cells. This description best describes which of the following entities:

- A. Syphilis
- B. Rheumatoid Arthritis
- C. Castleman disease
- D. HIV-related lymphadenopathy
- E. Rosai-Dorfman

**Question #3** HHV-8 is associated with all of the following EXCEPT:

- A. Multi-centric Castleman's disease
- B. Progressive transformation of germinal centers
- C. Primary effusion lymphoma
- D. Kaposi's sarcoma

**Question #4** Which of the following is not part of the WHO's classification of acute myeloid leukemia with recurring genetic abnormalities?

- A. t(8;21)
- B. inv(16)
- C. t(9;22)
- D. t(15;17)
- E. 11q23 abnormalities

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## References:

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*Henry's Clinical Diagnosis and Management by Laboratory Methods.* McPherson RA, et al. Twenty First Edition. 2006. p

## Notes for question set:<sup>1</sup>

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