

1. Which of the following is most associated with an increase in minimal change disease?
 - A. Mantle cell lymphoma
 - B. Multiple myeloma
 - C. CLL
 - D. Hodgkin's disease
 - E. DLBCL
2. This lesion can easily be overlooked on renal biopsy, especially if there are too few glomeruli for evaluation. It may also be mistaken initially for minimal change disease. Which of the following diagnoses best fits this description?
 - A. Membranous Glomerulonephritis
 - B. Focal Segmental Glomerulosclerosis
 - C. Amyloidosis
 - D. Rapidly Progressive Glomerulonephritis
 - E. Diabetic Glomerulonephropathy
3. This disease is characterized by nephritis which progresses to chronic renal failure in patients who also have nerve deafness and various eye disorders. The hereditary pattern is X-linked.
 - A. Thin basement membrane disease
 - B. Benign Familial Hematuria
 - C. Alport's syndrome
 - D. Polycystic Kidney Disease
 - E. FSGS
4. This disease is characterized by familial asymptomatic hematuria, which is usually found incidentally. Renal biopsy shows a glomerulobasement membrane 150-250 nm in thickness. The best diagnosis is:
 - A. IgA nephropathy
 - B. X-linked Alport's syndrome
 - C. Chronic GN
 - D. Thin Basement Membrane Disease
 - E. HIV Nephropathy
5. This syndrome is characterized by skin lesions, usually involving the extensor surfaces of the arms and legs, abdominal pain (nausea, vomiting, GI bleeding), and joint pain in addition to renal pathology. The renal manifestations includes nephrotic syndrome. Renal biopsy shows IgA deposition in the mesangium. The skin lesions are noted to have a necrotizing vasculitis in the small vessels. The best diagnosis is:
 - A. RPGN type 1
 - B. Membranoproliferative GN
 - C. FSGS
 - D. Henoch-Schonlein purpura
 - E. Membranous GN

Cases Associated Website Images

Case #1 After undergoing a renal transplant, a 32-year-old is found to have pyelonephritis. A renal biopsy is performed and represented images including a special immunohistochemistry stain are shown. Based on the history and histologic findings, what virus is immunohistochemistry stain specific for?

- A. Cytomegalovirus
- B. Polyoma Virus
- C. Herpes Simplex Virus
- D. Human Papilloma Virus
- E. Epstein-Barr Virus

Case #2 A 60-year-old man with hypercalcemia is found to have a tubulointerstitial nephritis. An image of the immunofluorescence for kappa is shown. The immunofluorescence highlights like chain deposition in the glomerular basement membranes and tubular basement membranes. Based on these findings what is the patient's most likely diagnosis?

- A. Nephrocalcinosis
- B. NSAID induced glomerulonephropathy
- C. Multiple Myeloma
- D. Henoch-Schönlein Purpura
- E. Chronic Hyperparathyroidism

Case #3 A HIV infected patient presents with nephrotic syndrome. A renal biopsy is performed and representative light microscopic images are shown. Low-power examination shows focal cystic dilation of tubule segments and scattered inflammation. Jones stain highlights the glomerular pathology. Electron microscopy (not shown) shows tubuloreticular inclusions within the endothelial cells. Based on these findings, what is the most likely diagnosis?

- A. Minimal Change Disease
- B. Rapidly Progressive Glomerulonephritis
- C. Membranoproliferative Glomerulonephritis
- D. SLE Glomerulonephritis
- E. Focal Segmental Glomerulosclerosis-Collapsing Variant

Case #4 A 60-year-old patient with multiple myeloma presents with renal failure. A renal biopsy is performed, and represented images are shown. Based on the findings, what is the best diagnosis?

- A. Cast nephropathy
- B. Light Chain Deposition Disease
- C. Bence-Jones proteinuria
- D. Nephrocalcinosis
- E. Amyloidosis

Case #5 A biopsy from a 44 y/o patient with a significant past medical history shows nodular glomerulosclerosis in which the nodules in the image (trichrome stain) for this case are also PAS positive within the glomerular lobules. The surrounding capillary loops are patent. These features are most characteristic of:

- A. FSGS
- B. Kimmelstiel-Wilson Nodules
- C. Crescentic GN
- D. Collapsing FSGS
- E. Amyloidosis

Notes for question set:¹

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