



The Royal College of Pathologists

## Diploma examination

### Dermatopathology: First paper

Tuesday 27 March 2007

*Candidates must answer FOUR questions ONLY*

**Time allowed: 3 hours**

1. Discuss the advantages and disadvantages of a multidisciplinary meeting for the management of melanoma and complex skin cancers.
2. Write short notes on:
  - (i) the role of electron microscopy in the diagnosis of skin disease
  - (ii) vertical versus transverse sections in skin biopsies in the diagnosis of alopecia
  - (iii) the use of immunocytochemistry in the diagnosis of melanoma
  - (iv) clinical indications and cases suitable for Mohs' surgery
3. Describe the molecular components of the epidermis and basal membrane zone that are relevant in the pathogenesis of autoimmune blistering diseases.
4. Discuss the importance of dermatopathology in the diagnosis of genetic skin diseases.
5. Discuss the relevance of cytogenetic studies in the diagnosis and classification of cutaneous soft tissue tumours.



The Royal College of Pathologists

## Diploma examination

### Dermatopathology: Second paper

Tuesday 27 March 2007

*Candidates must answer FOUR questions ONLY*

**Time allowed: 3 hours**

1. Describe the clinical and histological manifestations of cutaneous sarcoidosis.
2. Write short notes on:
  - (i) actinic cheilitis
  - (ii) perforating collagenoses
  - (iii) sebaceous carcinoma
  - (iv) deep fungal infections
3. Faced with a biopsy from a patient with a clinical picture that is suggestive but not diagnostic of cutaneous lymphoma describe how you will examine the biopsy to attempt to achieve a final diagnosis?
4. You receive an excision biopsy of a pigmented lesion from the back of a middle-aged woman. What features will you take into account in your differential diagnosis and in particular which benign lesions may present clinically as darkly pigmented lesions?
5. Discuss the possible subtypes of cutaneous squamous cell carcinoma. How might this predict biological behaviour and how might this influence subsequent clinical management?



**THE ROYAL COLLEGE OF PATHOLOGISTS**

**Diploma Examination**

**Tuesday 14 March 2006**

**DERMATOPATHOLOGY**

**First Paper**

*Candidates must answer FOUR questions ONLY*

**Time allowed - THREE HOURS**

1. Describe how you would handle a biopsy with a dense dermal lymphocytic infiltrate with details of how you would reach a definitive diagnosis.
2. Melanoma is a frequent cause of diagnostic difficulty. What mechanisms should be in place to reduce diagnostic error?
3. Outline the histopathological findings in cutaneous drug eruptions.
4. Compare and contrast Kaposi's sarcoma and angiosarcoma of the skin.
5. Write short notes on THREE of the following:
  - a) Fabry's disease
  - b) Colloid milium
  - c) Hobnail haemangioma
  - d) Erythema dyschromicum perstans (ashy dermatosis)



## THE ROYAL COLLEGE OF PATHOLOGISTS

### Diploma Examination

Tuesday 14 March 2006

### DERMATOPATHOLOGY

### Second Paper

*Candidates must answer FOUR questions ONLY*

**Time allowed - THREE HOURS**

1. Give an account of cutaneous disorders that are characterised by a dermal wedge-shaped infiltrate, with particular emphasis on the clinicopathological correlation of such disorders.
  
2. Write short notes on how you would distinguish between the following differential diagnoses (answer ALL parts of this question):
  - a) psoriasis vs lichen simplex chronicus
  - b) verrucous lupus erythematosus vs hypertrophic lichen planus
  - c) vulval lichen planus vs vulval lichen sclerosus
  - d) spongiotic dermatitis vs mycosis fungoides
  
3. Describe the pathological features and differential diagnosis of tumours in the skin and subcutis which may consist of clear cells as a prominent histological feature.

**Please turn over for Questions 4 and 5**

4. Outline the clinicopathological features useful for diagnosis in a biopsy from a patient with scarring alopecia.
  
5. Write short notes on each on the following:
  - a) deep penetrating naevus
  - b) Muir-Torre syndrome
  - c) epithelioid sarcoma
  - d) post-irradiation atypical vascular proliferations



**THE ROYAL COLLEGE OF PATHOLOGISTS**

**Diploma Examination**

**Tuesday 15 March 2005**

**DERMATOPATHOLOGY**

**First Paper**

**Candidates must answer FOUR questions ONLY**

**Time allowed - THREE HOURS**

1. Discuss the current status of sentinel lymph node biopsy in the management of primary cutaneous melanoma.
2. Discuss the systems that should be in place to assure the quality and accuracy of dermatopathology reporting.
3. Discuss the value of immunofluorescence studies in the diagnosis of non-bullous skin disease.
4. Critically discuss the proposition that lichen sclerosis is a pre-malignant disease.
5. Discuss the role of ultraviolet light in the pathogenesis of skin tumours, including particular reference to the molecular aspects of pathogenesis.



## **THE ROYAL COLLEGE OF PATHOLOGISTS**

### **Diploma Examination**

**Tuesday 15 March 2005**

### **DERMATOPATHOLOGY**

#### **Second Paper**

**Candidates must answer FOUR questions ONLY**

**Time allowed - THREE HOURS**

1. Describe the principles of Mohs' micrographic surgery indicating in particular the types of cases that are suitable and the advantages/disadvantages of frozen section versus formalin fixed techniques.
2. Discuss the dermatological complications of renal failure including renal transplantation.
3. Discuss the so-called "invisible dermatoses", ie on biopsy and haematoxylin & eosin examination the biopsy looks "normal" and clues to their diagnosis.
4. A biopsy of a skin nodule shows adenocarcinoma in the dermis. What features would suggest a metastasis rather than a primary tumour and how might you determine a possible primary site.
5. Write an essay on the dermatopathological changes that can be associated with rheumatoid arthritis.



**THE ROYAL COLLEGE OF PATHOLOGISTS**

**Diploma Examination**

**Tuesday 16 March 2004**

**DIPLOMA IN DERMATOPATHOLOGY**

**First Paper**

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. Discuss the importance of patient consent to the practice of dermatopathology.
2. What are microarrays and discuss their application to dermatopathology.
3. Write short notes on:
  - (a) Pathological staging of melanoma skin cancer
  - (b) Pathological staging of skin lymphoma
  - (c) Pathological staging of non-melanoma and non-lymphoma skin cancer
4. Describe the haemangioendothelioma group of tumours with reference to clinical presentation, histopathological features and prognosis.
5. Describe the use of immunohistochemistry in dermatopathology.





**THE ROYAL COLLEGE OF PATHOLOGISTS**

**Diploma Examination**

**Tuesday 16 March 2004**

**DIPLOMA IN DERMATOPATHOLOGY**

**Second Paper**

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. Give a detailed account of the cutaneous conditions that are characterised by a combination of both vasculitis and granuloma formation.
2. Give an account of the spectrum of diseases that are regarded as constituting the "photodermatoses". Describe the pathological and immunofluorescence findings that are of value in distinguishing these conditions in a diagnostic punch biopsy of a phototest site.
3. Write short notes on:
  - (a) Pyoderma gangrenosum
  - (b) Cutaneous leiomyosarcoma
  - (c) Lichen amyloidosis
  - (d) Trichoblastoma

**Please turn over for Questions 4 and 5**

4. Write short notes on:
  - (a) Pagetoid reticulosis
  - (b) Paraneoplastic pemphigus
  - (c) Melkersson-Rosenthal syndrome (orofacial granulomatosis)
  - (d) Malignant atrophic papulosis (Degos' disease)
  
5. Discuss the diagnostic problems and your approach to the assessment of spitzoid tumours.



# THE ROYAL COLLEGE OF PATHOLOGISTS

## Part 1 Examination

Tuesday 18 March 2003

### DIPLOMA IN DERMATOPATHOLOGY

#### First Paper

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. Write an essay on the dermatopathological changes that may be identified in patients with cardiac disease.
2. Discuss the new World Health Organization 'Tumours of Haematopoietic and Lymphoid Tissues' T-cell classification entities of primary cutaneous anaplastic large cell lymphoma, lymphomatoid papulosis and borderline lesions.
3. Discuss ways to minimise the potential for diagnostic errors in dermatopathology reporting.
4. Discuss the pathogenesis and dermatopathology of cutaneous drug reactions.
5. Write short notes on the dermatopathological aspects of:
  - (a) Cutaneous Leishmaniasis,
  - (b) Perforating collagenoses,
  - (c) Hair shaft abnormalities,
  - (d) The glucagonoma syndrome.



# THE ROYAL COLLEGE OF PATHOLOGISTS

## Part 1 Examination

Tuesday 18 March 2003

### DIPLOMA IN DERMATOPATHOLOGY

#### Second Paper

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. Write an essay on the dermatopathological aspects of pregnancy and its associated dermatoses.
2. With specific reference to cutaneous malignant melanoma, describe the pathology of sentinel lymph node biopsies. Include in your answer, details as to how the biopsies may be handled within a histopathology department, the investigative techniques that can be applied and the clinical value of the procedure.
3. Write short notes on the dermatopathological aspects of:
  - (a) Perineuroma,
  - (b) Glomeruloid haemangioma,
  - (c) Lichen nitidus,
  - (d) Aggressive digital papillary adenoma/adenocarcinoma.
4. Write an essay on the dermatopathology of Herpesvirus infections.
5. Describe the pathology of basal cell carcinoma, including particular reference to the molecular aspects of pathogenesis and a critical assessment of which histological information is most relevant to clinical management and prognosis.



# THE ROYAL COLLEGE OF PATHOLOGISTS

## Part 1 Examination

March 2002

### DIPLOMA IN DERMATOPATHOLOGY

#### First Paper

**Candidates must answer FOUR questions ONLY**

**Time allowed – THREE HOURS**

1. Discuss systems that should be in place to assure the quality and accuracy of dermatopathology reporting, by both histopathologists and dermatologists.
2. Discuss recent advances in the classification of skin lymphoma and in particular the application of the new WHO classification\* to this area.  
\* World Health Organisation Classification of Tumours of Haemopoietic and Lymphoid Tissues
3. Write short notes on:
  - (a) Comparative genomic hybridisation,
  - (b) DNA microarray analysis (gene expression profiling),
  - (c) Fluorescence in-situ hybridisation,
  - (d) Loss of heterozygosity.Your answer should incorporate explanations of these terms and comments on their relevance to the pathogenesis and diagnosis of diseases in dermatopathology.
4. Critically discuss the proposition that atypical fibroxanthoma represents a common histological pattern rather than a specific disease entity.
5. Discuss the molecular biology of basal and squamous cell carcinoma.



# **THE ROYAL COLLEGE OF PATHOLOGISTS**

## **Part 1 Examination**

**March 2002**

### **DIPLOMA IN DERMATOPATHOLOGY**

#### **Second Paper**

**Candidates must answer FOUR questions ONLY**

**Time allowed – THREE HOURS**

1. Write a critical account of histopathological prognostic indicators in primary cutaneous malignant melanoma and indicate how they have been incorporated into the latest American Joint Committee of Cancer (AJCC) staging system for cutaneous melanoma.
2. Discuss those features which suggest that a cutaneous neoplasm may be of apocrine differentiation and briefly describe the entities in this group of tumours.
3. Discuss cutaneous diseases of haemopoietic and lymphoid tissues that are characterised by CD56 positivity on immunophenotypic analysis.
4. Give an account of cutaneous disorders that can be characterised by a heavy infiltrate of eosinophils, with particular emphasis on distinguishing dermatopathological features.
5. Discuss the diagnostic value of a skin biopsy in the diagnosis of 'collagen and elastic' disorders.



# THE ROYAL COLLEGE OF PATHOLOGISTS

## Part 1 Examination

March 2001

### DIPLOMA IN DERMATOPATHOLOGY

#### First Paper

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. What risk factors are known for the development of skin cancer? Discuss underlying pathogenetic mechanisms with special attention to molecular aspects.
2. Discuss the possible diagnostic impact of the effects of tissue sampling by both the dermatologist and dermatopathologist. What steps would you take to minimise these and provide examples using both inflammatory and neoplastic diseases?
3. Discuss how a knowledge of normal hair growth is relevant to the dermatopathological assessment of scalp alopecia.
4. What minimum dermatopathological data should be included in a report of cutaneous basal cell carcinoma and why?
5. Write short notes on the dermatopathological aspects of:
  - (i) sodium chloride split skin preparation
  - (ii) Mohs surgery
  - (iii) CD 56 positive immunohistochemistry
  - (iv) in-situ hybridisation.



# THE ROYAL COLLEGE OF PATHOLOGISTS

## Part 1 Examination

March 2001

### DIPLOMA IN DERMATOPATHOLOGY

#### Second Paper

**Candidates must answer FOUR questions ONLY**

*Time allowed - THREE HOURS*

1. Describe the dermatopathology of leprosy.
2. Describe the types of cell found in the normal eccrine sweat gland and the benign neoplastic lesions that can arise from them.
3. Discuss the dermatopathology of the pemphigoid group of disorders. Include in your answer our current understanding of target antigens in relation to these conditions and how the antigens can be demonstrated.
4. Describe the dermatopathology of pemphigus and incorporate in your answer the significance of recent genomic findings in this group of disorders.
5. Write short notes on dermatopathological aspects of:
  - (i) *Borrelia burgdorferi*
  - (ii) microcystic adnexal carcinoma
  - (iii) problems in the evaluation of a congenital melanocytic naevus in a young child.
  - (iv) neurothekeoma.