Macro images

- 1. Total laryngectomy specimen with contiguous left& right selective neck dissections plus right hemi- thyroidectomy
- 2. A pylorus preserving pancreatoduodenectomy (Whipples or Kausch-Whipples resection)

Surgicals

- 1. Oesophageal biopsy- Gastric mucosal heterotopia
- 2. Lymph node- Syphilitic lymphadenitis
- 3. Chronic lymphocytic thyroiditis, consistent with Hashimoto's disease. Well differentiated papillary thyroid carcinoma, follicular variant. Solitary oxyphil follicular tumour (SOFT)
- 4. Sarcomatoid/spindle/giant squamous SCC (carcinoma with sarcomatoid stroma, Lane tumour)
- 5. Primary lympho-epithelilal carcinoma (undifferentiated carcinoma of nasopharyngeal type, UCNT)
- 6. CIN 3 with vascular invasion (does not upstage to carcinoma)
- 7. Complete hydatidiform mole (saying incomplete was basically failing the question)
- 8. Plasma cell vulvitis (corresponds to male Zoon's balanitis)
- 9. Skin-GVHD (erytrhema multiforme type features)
- 10. Breast biopsy- Complex epithelial lesion with papillary structure. Highly suspicious for invasive carcinoma (B5a at least)
- 11. Skin- Naevus of spitzoid type
- 12. Hysterectomy- uterus with proliferative phase endometrium and a single granuloma- sarcoidosis
- 13. Malignant tumour from biopsy of ampullary region (give differential diagnosis)
- 14. Renal biopsy with a few malignant cells ~(difficult to see)

Long cases

- 1. Loop with CGIN amd curettings showing endometrial carcinoma.
- 2. Liver cirrhosis due to a-1 antitrypsin deficiency
- 3. Kidney biopsy- Necrotising Ig-A nephropathy