

## SAUDI BOARD RESIDENCY TRAINING PROGRAM

### PATHOLOGY

#### Final Written Examination

##### Examination Format:

A Saudi board final specialty written examination shall consist of two papers each with 100-125 Single Best Answer MCQs. Up to 10% unscored items can be added for pretesting purposes.

##### Passing Score:

The passing score is 70%. However, if the percentage of candidates passing the examination before final approval is less than 70%, the passing score must be lowered by one mark at a time aiming at achieving 70% passing rate or 65% passing score whichever comes first. Under no circumstances can the passing score be reduced below 65%.

### **Suggested References:**

1. Robbins and Cotran Pathologic Basis of Disease. 10<sup>th</sup> Edition
2. Rosai and Ackerman's Surgical Pathology. 11<sup>th</sup> Edition
3. WHO classification Series. IARC
4. Cytology: Diagnostic Principles and Clinical Correlates, by Edmund Cibas and Barbara Ducatman
5. Manual of Surgical Pathology, by Susan Lester
6. College of American Pathologist quality manual
7. Simpson's Forensic Medicine, 13<sup>th</sup> Edition. Jason Payne - James, Richard Jones, Steven B Karch, John Manlove.
8. The Bethesda System for 1-Reporting Thyroid Cytopathology: Definitions, Criteria and Explanatory Notes. 2010<sup>th</sup> Edition By Syed Ali and Edmund Cibas
9. The Bethesda System for Reporting Cervical Cytology: Definitions, Criteria, and Explanatory Notes. 3<sup>rd</sup> ed. 2015 Edition By Ritu Nayar and David Wilbur
10. Professionalism and Ethics, Handbook for Residents, Practical guide, Prof. James Ware, Dr. Abdulaziz Fahad Alkaabba, Dr. Ghaiath MA Hussein, Prof. Omar Hasan Kasule, SCFHS, Latest Edition.
11. Essentials of Patient Safety, SCHS, Latest Edition.
12. The Bethesda system for reporting thyroid cytopathology, Syed Z. Ali, Edmund S. Cibas, 2017

### **Note:**

This list is intended for use as a study aid only. SCFHS does not intend the list to imply endorsement of these specific references, nor are the exam questions necessarily taken solely from these sources.

**Blueprint Outlines:**

No.	Sections	Percentage
1	Surgical Pathology (including frozen section)	50%
2	Cytopathology	18%
3	Quality and Safety	12%
4	Special Stains and Immunohistochemistry	5%
5	Molecular and Cytogenetics studies and electron microscopy	5%
6	General Pathology	5%
7	Autopsy and Forensic Pathology	5%
<b>Total</b>		<b>100%</b>

**Note:**

- Blueprint distributions of the examination may differ up to +/-5% in each category.
- Percentages and content are subject to change at any time. See the SCFHS website for the most up-to-date information.
- Research, Ethics, Professionalism and Patient Safety are incorporated within the various domains.

## Example Questions

### EXAMPLE OF K2 QUESTIONS

#### Question 1

A 42-year-old man has bloody diarrhea, abdominal cramps, and fever for three days. He is febrile and has abdominal pain (see reports).

**Stool sample:** occult blood.

**Colonoscopy:** marked mucosal erythema with focal ulceration and inflammatory polyps from the rectum to the ascending colon.

**Colonic biopsy:** broad based flask shaped ulcer. The ulcer does not penetrate the muscularis propria. There are macrophages like cells clustered at the luminal surface and within the debris. Their cytoplasm is abundant and vacuolated and contains ingested red blood cells.

Which of the following is the most likely diagnosis?

- A. Vibrio cholera
- B. Giardia lamblia
- C. Salmonella enterica
- D. Entamoeba histolytica

### EXAMPLE OF K1

#### Question 2

A 45-year-old woman presented with hematuria.

What is the main aim of urine cytology to detect according to Paris system of reporting urine cytopathology?

- A. Infection
- B. Microhematuria
- C. Low-grade urothelial carcinoma
- D. High-grade urothelial carcinoma