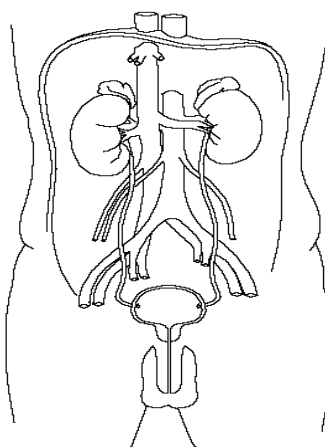


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“PROSTATE AND GU PATHOLOGY”**

**Study Cases, Subscription B**

**September 2000**



**California Tumor Tissue Registry**  
**c/o: Department of Pathology and Human Anatomy**  
**Loma Linda University School of Medicine**  
**11021 Campus Avenue, AH 335**  
**Loma Linda, California 92350**  
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**Web Page: [www.cttr.org](http://www.cttr.org)**  
**Case of the Month: [www.llu.edu/llu/cttr/cotm](http://www.llu.edu/llu/cttr/cotm)**

**Target audience:**

Practicing pathologists and pathology residents.

**Goal:**

To acquaint the participant with the histologic features of a variety of benign and malignant neoplasms and tumor-like conditions.

**Objectives:**

The participant will be able to recognize morphologic features of a variety of benign and malignant neoplasms and tumor-like conditions and relate those processes to pertinent references in the medical literature.

**Educational methods and media:**

Review of representative glass slides with associated histories.  
Feedback on consensus diagnoses from participating pathologists.  
Listing of selected references from the medical literature.

**Principal faculty:**

Weldon K. Bullock, MD  
Donald R. Chase, MD

**CME Credit:**

Loma Linda University School of Medicine designates this continuing medical education activity for up to 2 hours of Category I of the Physician's Recognition Award of the American Medical Association.  
CME credit is offered for the subscription year only.

**Accreditation:**

Loma Linda University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians.

**Contributor: H.E. Otto, M.D.  
Cheboygan, MI**

**Case No. 1 - September 2000**

**Tissue from: Left testis**

**Accession #27067**

**Clinical Abstract:**

This 32-year-old white male had a four month history of left testicular enlargement and presented after one week of testicular pain. A left radical orchiectomy was performed.

**Gross Pathology:**

The 170 gram, 7.0 x 6.0 x 3.5 cm testis was 90% replaced by a bulging tan-gray multinodular tumor. Multiple sections through the tumor showed focal areas of hemorrhage and necrosis up to 2.0 cm in diameter.

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**Contributor: Usha Garg, M.D.  
Oxnard, CA**

**Case No. 2 - September 2000**

**Tissue from: Right testicle**

**Accession #26316**

**Clinical Abstract:**

For one month this 29-year-old male had experienced hardness in the right testicle, for which he was treated with antibiotics, without results. Examination showed the right testis to be 1½ times the size of the left.

**Gross Pathology:**

The 50 gram testis contained two adjacent nodules, 3.5 and 1.5 cm in greatest diameter.

**Contributor: E. DuBose Dent, M.D.**  
**Glendale, CA**

**Case No. 3 - September 2000**

**Tissue from: Left testicle**

**Accession #**

**Clinical Abstract:**

A 36-year-old Caucasian male found a mass in his left testicle. An orchiectomy was performed.

**Gross Pathology:**

The 5.0 x 4.0 x 3.5 cm testicle had a 3.0 cm diameter ovoid mass.

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**Contributor: Richard Folkes, M.D.**  
**Orange, CA**

**Case No. 4 - September 2000**

**Tissue from: Right testicle**

**Accession #20192**

**Clinical Abstract:**

During a routine physical this 45-year-old male was found to have a testicular mass.

**Gross Pathology:**

A 2.0 x 1.7 x 1.3 cm ovoid, rubbery firm encapsulated white nodule, with surrounding testicular tissue, was removed. The cut surface was granular with focal areas of reddening.

**Contributor: John P. Blanchard, M.D.**  
**Santa Barbara, CA 93111**

**Case No. 5 - September 2000**

**Tissue from: Bladder**

**Accession #22475**

**Clinical Abstract:**

For six months this 54-year-old Caucasian male experienced gross painless hematuria. An intravenous pyelogram revealed a thickened, trabeculated bladder wall, without a filling defect. Cystoscopy and TUR were performed.

**Gross Pathology:**

The specimen consisted of fourteen pieces of moderately soft, pale tan tissue. They ranged in size from a few millimeters to 1.7 cm in greatest diameter.

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**Contributor: Douglas A. Kahn, M.D.**  
**Sylmar, CA**

**Case No. 6 - September 2000**

**Tissue from: Bladder**

**Accession #27953**

**Clinical Abstract:**

This 63-year-old male presented with gross hematuria. Cystoscopy revealed two large bladder tumors.

**Gross Pathology:**

The 10.0 x 7.0 x 5.0 cm bladder contained a 3.5 x 3.0 cm polypoid tumor.

**Contributor: Howard E. Otto, M.D.  
Cheboygen, MI**

**Case No. 7 - September 2000**

**Tissue from: Bladder**

**Accession #26940**

**Clinical Abstract:**

This 87-year-old female was found on IVP to have severe left sided hydronephrosis and mild right hydronephrosis. CT scan revealed an irregular mass involving the floor of the urinary bladder and bladder neck. Following biopsy, a radical cystectomy was performed. She had had a TAH-BSO for an ovarian mass (diagnosis not available) one year earlier.

**Gross Pathology:**

The previously opened bladder was 8.0 x 7.0 cm. In the fundal portion was a 3.0 x 3.0 indurated area which extended through to the serosal surface. The serosa in that region was fixed to firm fat. The remaining portions of bladder wall were also indurated, up to 1cm thick. Cut surfaces were firm, gray and gritty.

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**Contributor: Richard D. Myers, M.D.  
Long Beach, CA**

**Case No. 8 - September 2000**

**Tissue from: Bladder**

**Accession #22916**

**Clinical Abstract:**

For approximately one month this 65-year-old male had been experiencing intermittent, hematuria. Cystoscopy demonstrated a tumor involving the anterior bladder wall. A segmental cystectomy was performed.

**Gross Pathology:**

The 5.5 x 4.5 x 3.0 cm ulcerated tumor was a heaped-up nodulo-papillary mass which arose from the mucosa and was somewhat necrotic.

**SPECIAL STAINS:**

NSE	positive
CEA	negative
Keratin	negative

**Contributor: Arno Roscher, M.D.  
Valencia, CA**

**Case No. 9 - September 2000**

**Tissue from: Right kidney**

**Accession #27967**

**Clinical Abstract:**

This 23-year-old pregnant female experienced sudden onset of severe right-sided flank pain. A renal ultrasound revealed an irregular mass and perirenal bleeding. A nephrectomy was performed.

**Gross Pathology:**

The 450 gram, 16.0 x 11.0 x 8.0 cm kidney showed a 6.5 cm diameter well-demarcated, fleshy pink and gray-tan mass projecting from its surface at the inferior pole. The cut surface of the tumor mass showed extensive areas of red-black hemorrhage and softening.

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**Contributor: Wilfrido D. Mojica, M.D.  
Williamsville, NY**

**Case No. 10 - September 2000**

**Tissue from: Right kidney**

**Accession #28437**

**Clinical Abstract:**

Severe right renal pain and transient episodes of gross hematuria led to a work-up of this 37-year-old female. CT and ultrasound disclosed a solid mass in the central portion of the right kidney.

**Gross Pathology:**

Within the medial aspect of the kidney was a 5.0 x 4.7 x 2.6 cm yellow, multinodular solid rubbery mass.