



CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“GENERAL PATHOLOGY”**

**Study Cases, Subscription A**

**September, 2003**



**California Tumor Tissue Registry**  
c/o: Department of Pathology and Human Anatomy  
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Web site & Case of the Month: [www.cttr.org](http://www.cttr.org)

**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: LLUMC Pathology Group (md)  
Loma Linda, CA**

**Case No. 1 - September 2003**

**Tissue from: Small bowel**

**Accession #28766**

**Clinical Abstract:**

After three months of increasing left-sided scrotal swelling, this 55-year-old male presented for examination. A 5.5 cm left testicular mass was found on ultrasound and an orchiectomy was performed. Work-up showed evidence of metastatic disease in the bone marrow, stomach, small bowel and mesentery, and supraclavicular soft tissue. Portions of perforated small bowel was resected.

**Gross Pathology:**

The 92 gram segment of small bowel included a 5.0 x 4.0 x 2.5 cm mass within the mesentery. The cut surface showed yellow-tan homogeneous parenchyma that eroded into the small bowel mucosa.

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**Contributor: Kenneth Frankel, M.D.  
Glendale, CA**

**Case No. 2 - September 2003**

**Tissue from: Left thyroid**

**Accession #29688**

**Clinical Abstract:**

This 53-year-old female had an enlarging left thyroid mass.

**Gross Pathology:**

The 30.5 gram thyroid gland was 6.1 x 3.5 x 2.9 cm. The parenchyma contained several nodules up to 1.2 cm in greatest diameter.

**SPECIAL STUDIES:**

Calcitonin                      negative

**Contributor: Phillip C. Gordon, M.D.**  
**Winter Haven, FL**

**Case No. 3 - September 2003**

**Tissue from: Mediastinum**

**Accession #29358**

**Clinical Abstract:**

Because of vague chest discomfort, this 41-year-old female had a chest x-ray which revealed a mediastinal mass.

**Gross Pathology:**

The 12.0 x 8.0 cm specimen included a 4.0 cm encapsulated mass.

**SPECIAL STUDIES:**

Cytokeratin	epithelial cells positive
LCA	lymphoid cells positive

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**Contributor: Pamela Boswell, D.O.**  
**San Diego, CA**

**Case No. 4 - September 2003**

**Tissue from: Right upper lobe of lung**

**Accession #29392**

**Clinical Abstract:**

A 65-year-old male with a history of cigarette smoking presented with a right upper lobe lung mass.

**Gross Pathology:**

The 18.5 x 10.0 x 8.0 cm portion of lung, with attached sections of ribs, included an 8.0 x 5.0 x 5.0 cm necrotic tumor in the inferior portion of the right upper lobe.

**Contributor: Philip Robinson, M.D.  
Boynton Beach, FL**

**Case No. 5 - September 2003**

**Tissue from: Left lower lung**

**Accession #29053**

**Clinical Abstract:**

This 87-year-old male was found to have a mass in his left lower lung.

**Gross Pathology:**

The 330 gram lung specimen was 19.5 x 11.5 x 4.5 cm. It contained a 7.0 x 6.0 x 2.0 cm pink, mucinous tumor infiltrating the visceral pleura.

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**Contributor: David Shimizu, M.D.  
Honolulu, HI**

**Case No. 6 - September 2003**

**Tissue from: Left knee**

**Accession #29448**

**Clinical Abstract:**

Following a two-year history of a mass in his left knee, this 68-year-old male had an MRI which showed a heterogeneous enhancing mass.

**Gross Pathology:**

A 6.4 x 6 x 3 cm ovoid lobulated myxoid mass was present within skeletal muscle.

**SPECIAL STUDIES:**

Vimentin	positive
Cytokeratin	negative
EMA	negative
S-100	negative

**Contributor: Douglas G. Hoffman, M.D.**  
**Atlanta, GA**

**Case No. 7 - September 2003**

**Tissue from: Falx cerebri**

**Accession #29469**

**Clinical Abstract:**

After a long history of headaches, this 30-year-old female had a radiologic study showing a bifrontal neoplasm. At surgery, the mass was found to be attached to the falx cerebri and was very firm.

**Gross Pathology:**

The 7.0 cm mass consisted of glistening firm pink-white tissue.

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**Contributor: John McGill, M.D.**  
**Pasadena, CA**

**Case No. 8 - September 2003**

**Tissue from: Left testis**

**Accession #29451**

**Clinical Abstract:**

For two to three months this 41-year-old male noticed an enlarging firm mass in his left testicle.

**Gross Pathology:**

The 60 gram testis was largely replaced by a 5.5 x 3.5 x 2.8 cm homogeneous tan mass.

**Contributor: Diane Rogers, M.D.**  
**Lynwood, CA**

**Case No. 9 - September 2003**

**Tissue from: Left breast**

**Accession #29160**

**Clinical Abstract:**

This 83-year-old female noted a rapid growing mass in her left breast. Mammogram showed abnormal calcifications, suspicious for malignancy.

**Gross Pathology:**

The 3.5 x 3.0 x 3.0 cm firm, tan-white mass was covered by a thin layer of fat.

**SPECIAL STUDIES:**

SMA	positive
Cytokeratin	negative

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**Contributor: W.P. Illig, M.D.**  
**Tulsa, OK**

**Case No. 10 - September 2003**

**Tissue from: Left frontal fossa**

**Accession #29115**

**Clinical Abstract:**

Three years earlier, this 59-year-old male had had a resection of a left frontal fossa tumor attached to the dura. The tumor recurred and was again excised. The study material is from the recurrence.

**Gross Pathology:**

The 70 gram mass was 9.0 x 8.0 x 2.0 cm.

**SPECIAL STUDIES:**

EMA	positive
S-100	negative
Keratin	negative
Mucin	weak positivity