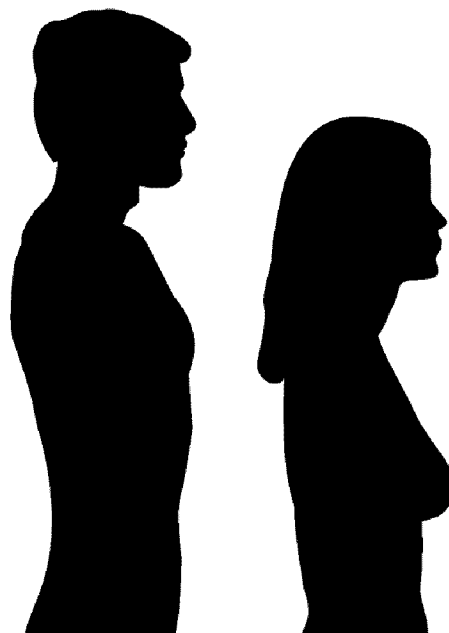




CALIFORNIA
TUMOR TISSUE REGISTRY

“GENERAL PATHOLOGY”
Study Cases, Subscription B

November, 2003



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
(909) 558-4788
FAX: (909) 558-0188
E-mail: cttr@linkline.com
Web site & Case of the Month: 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: Pamela Boswell, M.D.
San Diego, CA**

Case No. 1 - November, 2003

Tissue from: Left ovary

Accession #28750

Clinical Abstract:

A 25-year-old female complained of abdominal fullness and was found to have a large cystic mass on ultrasound, most likely arising from the left ovary.

Gross Pathology:

The 24 x 20 x 20 cm, 1750 gram specimen consisted of a multiloculated smooth-walled cyst filled with clear fluid.

**Contributor: Nora Ostrzega, M.D.
Sylmar, CA**

Case No. 2 - November, 2003

Tissue from: Bilateral ovaries

Accession #28263

Clinical Abstract:

During workup following a motor vehicle accident, this 22-year-old female recalled experiencing lower abdominal pain for several months, along with an increase in abdominal girth. On physical examination, the abdomen was distended, felt to most likely be ascites. Ultrasound revealed a pelvic mass.

Gross Pathology:

Both ovaries were replaced by a papillary proliferation. The left ovary measured approximately 6.0 x 3.0 cm. Omentum and numerous pelvic implants were also sampled.

**Contributor: Susan Murakami, M.D.
Pasadena, CA**

Case No. 3 - November, 2003

Tissue from: Left kidney

Accession #28686

Clinical Abstract:

A 57-year-old female, with a history of nephrolithiasis, presented with a 2-1/2 month history of worsening right-sided lower back pain, localized primarily in the right flank and right thoracolumbar paraspinal region. Workup revealed metastatic replacement of thoracic vertebrae and an enlarged left kidney. A left nephrectomy was performed.

Gross Pathology:

The left kidney weighed 292 grams and measured 14.0 x 8.0 x 5.5 cm. A white-tan, partially cystic sclerotic mass was present in the upper pole. The dilated renal pelvis contained a staghorn calculus.

**Contributor: Ales Pindur, M.D.
Riverside, CA**

Case No. 4 - November, 2003

Tissue from: Vulva

Accession #28498

Clinical Abstract:

A 69-year-old female presented with an enlarging vulvar mass, which had been present for several months. Physical examination was unremarkable except for the soft, 6.0 cm diameter, vulvar mass. Past medical history included DCIS, treated with lumpectomy and subsequent radiation one year previously.

Gross Pathology:

The 52 gram, 5.5 x 5.0 x 4.3 cm piece of nodular, gray-pink tissue had a soft, yellow-pink, partially gelatinous cut surface.

Contributor: Mary Beth Shwayder, M.D.
Pasadena, CA

Case No. 5 - November, 2003

Tissue from: Bilateral ovaries

Accession #28682

Clinical Abstract:

A palpable enlarging pelvic mass was noted in this 57-year-old female. CT scan revealed a complex pelvic mass without ascites. At surgery, bilateral ovarian masses were found, which were densely adherent to the omentum.

Gross Pathology:

The 1,364 gram, 20 x 20 x 9.5 cm right ovary was replaced by a solid and cystic mass. The largest solid area was 10 x 9.5 x 2.5 cm and consisted of homogeneous yellow, focally necrotic tissue. The 8 x 6 x 5 cm left ovary had a pink-tan, slightly bosselated, smooth surface and was replaced by a solid and cystic nodular tumor.

Contributor: Ellen Ko, M.D.
Los Angeles, CA

Case No. 6 - November, 2003

Tissue from: Right Ovary

Accession #28254

Clinical Abstract:

A 61-year-old female presented with abdominal pain, and was found to have a right ovarian cyst on work-up. Hysterectomy with bilateral salpingo-oophorectomy was performed.

Gross Pathology:

The 11.5 x 6.0 x 6.0 cm, multiloculated ovary had a smooth serosal surface. Sectioning revealed a multiloculated, clear fluid-filled cyst lined by friable papillary tissue and a 3.5 x 3.5 x 2.2 cm pink-tan, firm, bosselated solid area.

Special Studies: (Outside Facility)

Strongly positive: = AE1/AE3, EMA
Negative: = CEA, CA125, GCDFP-15

**Contributor: Thomas Heinz, M.D.
Orange, CA**

Case No. 7 - November, 2003

Tissue from: Right inguinal mass

Accession #28650

Clinical Abstract:

A 74-year-old male presented with complaints of swelling in his right groin. Examination showed a mass interpreted as a right inguinal hernia. At surgery, the mass originally interpreted as an incarcerated hernia was found to dissect free from surrounding tissues.

Gross Pathology:

The 3.7 x 3.2 x 1.7 cm, 10 gram, irregular, rubbery, firm, pale tan to red-tan tissue fragment had a variegated pale tan to red-tan cut surface.

Special Studies: (Outside Facility)

Positive: = Vimentin (strongly positive)

Negative: = Muscle Specific Actin, S-100 Protein, HMB-45, Desmin, CD34

**Contributor: Roger Terry, M.D.
San Gabriel, CA**

Case No. 8 - November, 2003

Tissue from: Left thigh

Accession #29701

Clinical Abstract:

For approximately six years, this 41-year-old male had been aware of a soft lump in his left posterior thigh. The lump caused occasional discomfort while sitting and he requested its removal. At surgery, it was found to be intramuscular in the lateral portion of the major flexor muscle.

Gross Pathology:

The 9.0 x 8.0 x 4.5 cm fragment of soft tissue contained a 6.2 cm well-circumscribed mass.

**Contributor: Galen Cortina, M.D.
Sylmar, CA**

Case No. 9 - November, 2003

Tissue from: Groin mass

Accession #28190

Clinical Abstract:

A 40-year-old female sought treatment for pain in the left leg, which radiated from the knee to the groin area, though she was able to move all extremities well. Physical examination revealed a palpable left groin mass.

Gross Pathology:

A 13 x 9 x 7.5 cm fusiform specimen with overlying skin contained an ovoid 12 x 4.5 cm circumscribed bosselated tan mass. The tumor grossly did not involve the overlying skin.

Special Studies:

Positive: = cytokeratin.

Negative: = Vimentin, HFVIII, Alpha fetoprotein, Mucin.

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

Case No. 10 - November, 2003

Tissue from: Retroperitoneal mass

Accession #29128

Clinical Abstract:

Following a near syncopal episode resulting in hospitalization, this 84-year-old man was found to have a retroperitoneal mass.

Gross Pathology:

The 1,430 gram, 19.5 x 15.8 x 10.2 cm specimen consisted of a yellow to gray mass that completely surrounded the kidney without grossly invading it.

Special Studies:

Positive: = Vimentin.

Negative: = Keratin, S-100 protein, Desmin, Actin.