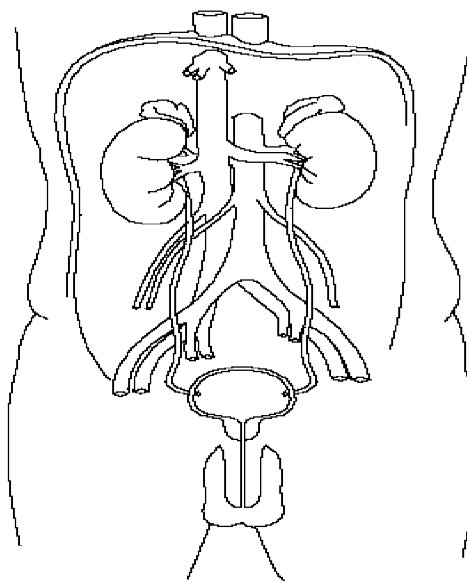




CALIFORNIA
TUMOR TISSUE REGISTRY

“GENITOURINARY PATHOLOGY”
Study Cases, Subscription B

May 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
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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: LLUMC Pathology Group (drc)
Loma Linda, CA

Case No. 1 - May 2003

Tissue from: Kidney

Accession #29378

Clinical Abstract:

This 73-year-old male experienced mild pain in his right flank and had hematuria for over two years prior to admission. CT results revealed a renal mass. A right radical nephrectomy was performed.

Gross Pathology:

The 14.5 x 10.5 x 10.0 cm kidney was mostly occupied by a 12 cm diameter tumor that had pink and yellow nodules with interspersed foci of necrosis and hemorrhage. The tumor extended through the capsule into the perinephric fat.

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

Case No. 2 - May 2003

Tissue from: Kidney

Accession #28962

Clinical Abstract:

At 83 years of age, this female was found to have a right renal mass and underwent a right radical nephrectomy.

Gross Pathology:

Within the upper pole of the kidney was a 7.2 x 4.5 x 5.2 cm pale tan lobulated tumor. Cut section showed the tumor infiltrated into Gerota's fascia and into the renal vein. Adjacent to the main mass were nodules of pale tan tumor that were separate from the main tumor.

Contributor: Robert J Rosser, M.D.
Palm Springs, CA

Case No. 3 - May 2003

Tissue from: Kidney

Accession #29341

Clinical Abstract:

Work-up of this 82-year-old male for gross hematuria and pain in the right flank included a CT scan of the abdomen and pelvis, which found a mass in the right kidney. A right radical nephrectomy was performed.

Gross Pathology:

The 600 gram, 16.0 x 11.0 x 8.0 cm right radical nephrectomy specimen had a 6.0 x 5.0 x 5.0 cm region of pallor in the upper pole, with a slightly bulging architecture.

Contributor: Jack Leissring, M.D.
Santa Rosa, CA

Case No. 4 - May 2003

Tissue from: Kidney

Accession #27576

Clinical Abstract:

During work-up for marked anemia, this 51-year-old female was found to have microscopic hematuria. Ultrasound showed a solid right renal mass, confirmed by CT scan. A right radical nephrectomy was performed.

Gross Pathology:

The 240 gram nephrectomy specimen included a 5.5 x 4.8 x 4.2 cm well circumscribed bright yellow mass in the upper pole.

SPECIAL STUDIES:

Keratin	positive
Vimentin	positive
EMA	positive

Contributor: LLUMC Pathology Group (byw)
Loma Linda, CA

Case No. 5 - May 2003

Tissue from: Left testicle

Accession #28063

Clinical Abstract:

This 27-year-old male had a mass in the lower pole of his left scrotum, which slowly increased in size over three to four years. Ultrasound showed an irregular, solid, non-homogeneous mass. At surgery, the mass was separate from the lower pole of the testis and was easily dissected from the vas deferens and epididymis.

Gross Pathology:

The 16 gram, 3.5 x 3.0 x 3.0 cm round pink-tan mass was covered with clear membrane. Cut surface showed a whorled tan, homogenous surface.

Contributor: Philip C. Gordon, M.D.
Winter Haven, FL

Case No. 6 - May 2003

Tissue from: Testicle

Accession #29003

Clinical Abstract:

A 31-year-old male presented with a right testicular mass. He underwent a radical orchiectomy.

Gross Pathology:

The specimen was a 5.5 x 3.0 x 2.0 cm testicle with attached 8 cm of spermatic cord. Sections displayed a hemorrhagic red tan tumor, which measured 2.8 cm in diameter.

SPECIAL STUDIES:

Cytokeratin	strongly positive
PLAP	moderately positive
AFP	weakly and focally positive
HCG	negative

**Contributor: Albert Garib, M.D.
Huntington Beach, CA**

Case No. 7 - May 2003

Tissue from: Testicle

Accession #27907

Clinical Abstract:

This 32-year-old male had a six month history of a mass in his left testicle.

Gross Pathology:

The 7.5 x 5.0 x 5.0 cm testicle had a 4.5 cm hemorrhagic, oval, friable yellowish mass.

**Contributor: William Illig, M.D.
Tulsa, Ok**

Case No. 8 - May 2003

Tissue from: Testicle

Accession #28178

Clinical Abstract:

At age 3, this 39-year-old male underwent right orchipexy and right inguinal hernia repair. He was lost to follow-up until age 37, when he complained of a painless enlarged testicle. Two years later, because of increasing discomfort, he underwent orchiectomy.

Gross Pathology:

The 506 gram 12.0 x 9.0 x 8.0 cm orchectomy and hydrocele specimen showed replacement of the entire testicle by a golden yellow tan tumor with focal cystic areas.

Contributor: Dorothy Tatter, M.D.
Los Angeles, CA

Case No. 9 - May 2003

Tissue from: Prostate

Accession #19796

Clinical Abstract:

The 87-year-old male was admitted due to deteriorating health and vomiting black material. He was found to have complete urethral obstruction and a suprapubic catheter was placed. He expired two days after admission.

Gross Pathology:

At autopsy, the prostate was extensively infiltrated by multiple white, confluent nodules of tumor which also involved bladder, seminal vesicles and adjacent colon.

SPECIAL STUDIES

CAM5.2 positive

Contributor: W. E. Carroll, M.D.
Santa Barbara, CA

Case No. 10 - May 2003

Tissue from: Prostate

Accession #19173

Clinical Abstract:

After developing acute urinary retention, this 56-year-old male underwent prostatectomy. At surgery, 'large globs' of mucus were noted but there was no demonstrable connection with the rectum.

Gross Pathology:

The 32 gram, 3.8 x 3.3 x 2.5 cm specimen consisted of multiple firm hemorrhagic tan-pink tissue fragments with attached mucoid material.