

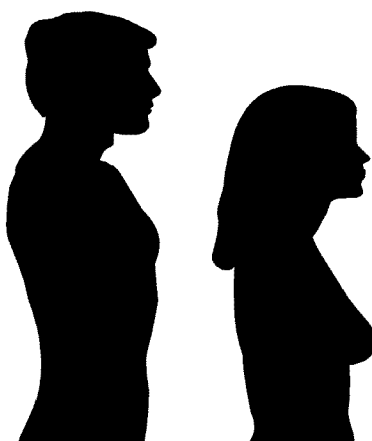


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“GENERAL PATHOLOGY”**

**Study Cases, Subscription A**

**September 2004**



**California Tumor Tissue Registry**  
**c/o: Department of Pathology and Human Anatomy**  
**Loma Linda University School of Medicine**  
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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: Jozef Kollin, M.D.**  
**Lakewood, CA**

**Case No. 1 - September 2004**

**Tissue from: Right neck**

**Accession #29846**

**Clinical Abstract:**

A mass was discovered in the right neck of this 44 year-old male.

**Gross Pathology:**

The 3.0 x 2.5 x 2.4 cm ovoid well circumscribed right neck mass was tan-gray, without nodularity.

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**Contributor: Kenneth A. Frankel, M.D.**  
**Covina, CA**

**Case No. 2 - September 2004**

**Tissue from: Parotid gland**

**Accession #29582**

**Clinical Abstract:**

This 41-year-old female was found to have a mass in her right parotid gland.

**Gross Pathology:**

The 4.6 x 3.2 x 2.5 cm parotid gland had a 2.2 cm diameter solid and cystic appearing nodule.

**Contributor: LLUMC Pathology Group (mtm)  
Loma Linda, CA**

**Case No. 3 - September 2004**

**Tissue from: Retroperitoneal mass**

**Accession #29665**

**Clinical Abstract:**

A 44-year-old male had a history of hypertension (180/122) with a stroke at age 41. During follow-up for pancreatitis, a CT scan showed two retroperitoneal masses. A 2.5 cm mass was present along the medial aspect of the inferior vena cava. The second mass was inferior to the first, between the right kidney and the vena cava. This second mass was estimated at 5.5 cm and it compressed and displaced the adjacent vena cava.

**Gross Pathology:**

Adjacent to the resected right kidney was a 5.5 x 5.4 x 4.0 cm encapsulated lobulated pink-tan mass with a homogeneous red-tan cut surface.

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**Contributor: LLUMC Pathology Group (dc)  
Loma Linda, CA**

**Case No. 4 - September 2004**

**Tissue from: Right adrenal**

**Accession #29759**

**Clinical Abstract:**

During follow up for a 4-vessel coronary artery bypass graft, this 47-year-old male was discovered to have a right adrenal mass. A composite resection of right adrenal and kidney was performed.

**Gross Pathology:**

Within the 1950 gram, 20.2 x 19.5 x 13.5 cm resection specimen was a 14.5 x 9.5 x 9.0 cm multinodular, heterogeneous, gray to yellow-tan mass that was adjacent to the upper pole of the kidney.

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

**Case No. 5 - September 2004**

**Tissue from: Right testicle**

**Accession #29624**

**Clinical Abstract:**

After ten years of treatment for multiple myeloma, this 82-year-old male was found to have right testicular enlargement. A right orchiectomy was performed.

**Gross Pathology:**

The 4.5 cm testicular tumor had a cuff of residual normal-appearing parenchyma. The cut surface of the tumor was homogeneous tan, finely granular with focal hemorrhage but no apparent necrosis.

**SPECIAL STUDIES (Outside):**

PLAP	negative
Wide spectrum keratin	negative
Kappa	negative
Lambda	positive
CD20	negative
PCA (plasmacytic antigen)	positive
CD45	10% of the small-sized tumor cells were positive

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**Contributor: Rebecca L. Christensen, M.D.**  
**San Diego, CA**

**Case No. 6 - September 2004**

**Tissue from: Omentum**

**Accession #29718**

**Clinical Abstract:**

A 41-year-old female with a history of endometriosis presented with a left complex adnexal mass. The patient's CA-125 was elevated. She underwent a hysterectomy with bilateral salpingo-oophorectomy as well as omentectomy.

**Gross Pathology:**

The 138 gram uterus was grossly unremarkable. The left ovary had cysts that microscopically show endometriosis. The 15.0 x 10.0 x 1.0 cm portion of omentum included a 6.5 x 6.5 x 4.0 cm lobulated mass.

**SPECIAL STUDIES:**

Negative:	Pancytokeratin, CK7, CK20, EMA, S-100, Chromogranin A, Synaptophysin, NSE, SMA, CD117
Positive:	Vimentin

**Contributor: Alexander K. Lyster, M.D.**  
**Victoria, TX**

**Case No. 7 - September 2004**

**Tissue from: Right breast**

**Accession #29857**

**Clinical Abstract:**

This 21-year-old female presented with a right breast mass. A right lung nodule was also noted. She had recently been pregnant. Laboratory studies are not available.

**Gross Pathology:**

The 6.0 x 4.0 x 3.0 cm firm irregular ovoid portion of breast tissue contained a 5.0 x 3.0 x 2.0 cm dark hemorrhagic tan gray mass.

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**Contributor: Howard Otto, M.D.**  
**Cheboygan, MI**

**Case No. 8 - September 2004**

**Tissue from: Right kidney**

**Accession #29869**

**Clinical Abstract:**

During work-up for a colovesical fistula, thought to be due to perforated diverticulitis, this 63-year-old male was found to have a right kidney mass.

**Gross Pathology:**

The 14 x 7.5 x 6.5 cm kidney had a 6.0 cm x 5.0 cm well-demarcated cortical nodule bulging from the upper portion. The cut surface was tan-gray-brown, similar to the adjacent renal cortex. There was no invasion of hilum or renal capsule.

**Contributor: Tai-Po Tschang, M.D.  
Fresno, CA**

**Case No. 9 - September 2004**

**Tissue from: Paratesticular tissue**

**Accession #29642**

**Clinical Abstract:**

This 54-year-old male complained of a left scrotal mass. A left orchiectomy was performed for removal of a large paratesticular mass.

**Gross Pathology:**

The 418 gram testicular resection specimen included a 14.5 x 11.5 x 4.5 cm rubbery, yellow to tan-brown paratesticular mass.

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**Contributor: LLUMC Pathology Group (wc)  
Loma Linda, CA**

**Case No. 10 - September 2004**

**Tissue from: Omentum**

**Accession #29751**

**Clinical Abstract:**

A CT exam for abdominal pain in this 58-year-old female showed ascites and a cyst in the liver. An ultrasound was also performed, showing multiple masses throughout the abdomen. The ovaries were not visualized. She had had a prior hysterectomy but without oophorectomy. At surgery, tumor was found to involve the appendix, both ovaries, serosal surface of cecum and sigmoid colon, the pelvic peritoneum and produced a large omental mass.

**Gross Pathology:**

The 820 gram omentum measured 19.5 x 19.0 x 6.0 cm and contained multiple white and red-tan nodules ranging from 0.5 cm to 3.5 cm.

**SPECIAL STUDIES:**

CK20	positive
CK7	negative