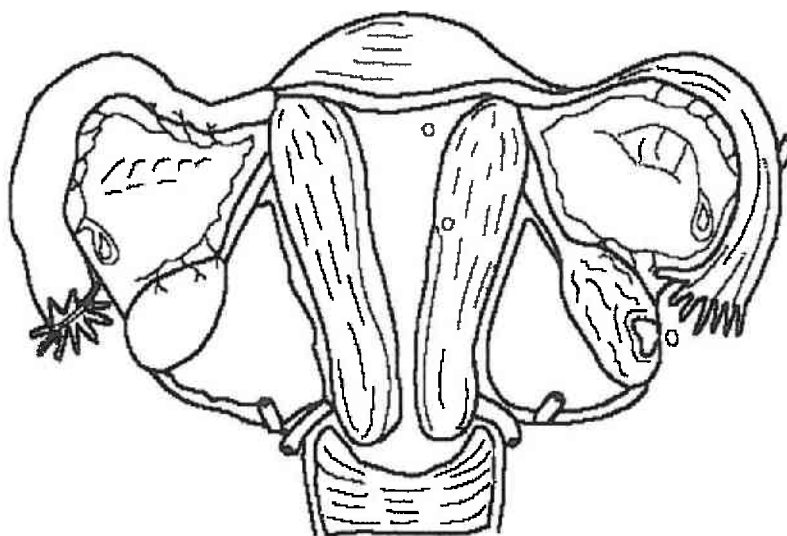


**CALIFORNIA
TUMOR TISSUE REGISTRY**

**“TUMORS OF THE FEMALE GENITAL TRACT”
Study Cases, Subscription B**

January, 2004



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

Case No. 1 - January, 2004

Tissue from: Uterus

Accession #29639

Clinical Abstract:

During work-up for abdominal pain, this 50-year-old female was found to have a pelvic mass. Hysterectomy, bilateral salpingo-oophorectomy, and multiple peritoneal biopsies were performed.

Gross Pathology:

The 147 gram, 9.5 x 6.5 x 6.0 cm uterus had multiple whorled nodules ranging from 0.9 to 2.1 cm in diameter within the myometrium.

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

Case No. 2 - January, 2004

Tissue from: Uterus

Accession #28091

Clinical Abstract:

A 69-year-old, gravida 6, para 5, ab 1, female was referred for work-up after an abnormal Pap smear. Ultrasound revealed a 3.0 cm density in the myometrium.

Gross Pathology:

The 82.5 gram, 9.0 x 7.0 x 4.0 cm, previously opened uterus had a 3.0 cm, intramural well-circumscribed, whorled, white nodule.

**Contributor: Jack Garfinkle, M.D.
Sherman Oaks, CA**

Case No. 3 - January, 2004

Tissue from: Uterus

Accession #25621

Clinical Abstract:

A 47-year-old, gravida 3, para 3, female presented with prolonged and irregular menses. She had not had a pelvic exam for eighteen years. Physical examination revealed a hard, smooth, globularly enlarged uterus, measuring approximately 12 weeks in size. Adnexa had no masses, fullness or tenderness. Hysterectomy and bilateral salpingo-oophorectomy was performed.

Gross Pathology:

The 788 gram, bulging uterus measured 15 x 12 x 11 cm. It was markedly distorted by a single, 11.0 cm diameter, mass occupying the intramural and submucosal portions with polypoid extensions into the endometrial cavity. The tumor was gray-tan and coarsely trabeculated.

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

Case No. 4 - January, 2004

Tissue from: Uterus

Accession #29760

Clinical Abstract:

A 32-year-old, gravida 3, para 2, ab 1, female presented with irregular vaginal bleeding and pain in the left lower quadrant. Examination under anesthesia revealed a 4 cm cervical ulcerative tumor. CT of the abdomen and pelvis showed a 6.0 cm cervical lesion.

Gross Pathology:

The 131 gram, 5.0 x 5.0 x 4.5 cm uterus included attached 5.0 x 4.5 x 3.8 cm cervix and vaginal cuff. A 4.0 x 3.5 x 2.0 cm yellow-tan, fleshy mass almost totally replaced the cervix and involved the entire endocervical canal, with distal extension into the vaginal cuff.

Contributor: Gary N. Pesselnick, M.D.
Canoga Park, CA

Case No. 5 - January, 2004

Tissue from: Uterus

Accession #24534

Clinical Abstract:

Due to vaginal bleeding, a 56-year-old female underwent a D&C, followed by a hysterectomy and bilateral salpingo-oophorectomy.

Gross Pathology:

The 11.0 x 7.5 x 5.0 cm uterus had an extensively hemorrhagic endometrial lining and endocervical canal, consistent with recent curettage. Near the fundus, was a poorly-defined, 3.0 cm diameter, focally hemorrhagic nodule that extended approximately 1.5 cm into the underlying myometrium. There were also many intramural and submucosal myomata, ranging up to 2.5 cm in diameter.

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

Case No. 6 - January, 2004

Tissue from: Right Ovary

Accession #29646

Clinical Abstract:

A 19-year-old female presented with abdominal pain. Work-up revealed a giant abdominal cyst. Unilateral salpingo-oophorectomy, appendectomy, and cholecystectomy were performed.

Gross Pathology:

The 7440 gram, 33 x 40 x 19 cm right ovary consisted of a large, multiloculated cystic mass. The serosal surface was tan-white and focally had surface mucoid material. The tumor was multiloculated and filled with gelatinous, mucoid material. No papillations were identified. The appendix had serosal mucoid material but no internal cystic mass.

Contributor: David M. Lawrence, M.D.
Santa Maria, CA

Case No. 7 - January, 2004

Tissue from: Right ovary

Accession #28341

Clinical Abstract:

A 43-year-old, gravida 2, para 2, female presented with complaints of mild lower abdominal discomfort. Work-up revealed a 12 cm pelvic mass.

Gross Pathology:

The 777 gram, 15 x 10.7 x 5.0 cm smooth, grayish-white, kidney-shaped mass had an edematous, glistening cut surface with areas of hemorrhage and cyst formation.

Special Studies:

Vimentin	=	Positive
Cytokeratin	=	Negative

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

Case No. 8 - January, 2004

Tissue from: Left Ovary

Accession #28049

Clinical Abstract:

A 58-year-old, gravida 4, para 4, female presented with complaints of vaginal bleeding. The patient had been on hormone replacement therapy for one year. Ultrasound revealed a large complex mass. Physical examination confirmed a mass at 14-16 weeks in size.

Gross Pathology:

The ovary was replaced by a 15.0 x 7.0 cm cystic structure. The external surface was smooth. The internal surface showed a few polypoid structures measuring between 1-3 cm in diameter.

Contributor: David M. Lawrence, M.D.
San Luis Obispo, CA

Case No. 9 - January, 2004

Tissue from: Ovary

Accession #28057

Clinical Abstract:

A 46-year-old, gravida 3, para 3, female was found to have a mass incidentally on pelvic exam. She was otherwise asymptomatic with normal menses. There were no lesions in the opposite ovary, and no significant pathology within the uterus.

Gross Pathology:

The specimen weighed 150 grams and measured 7.8 x 7.3 x 6.9 cm.

Contributor: Gordon Hadley, M.D.
Hangzhou, China

Case No. 10 - January, 2004

Tissue from: Lung

Accession #28382

Clinical Abstract:

A 27-year-old female presented with metrorrhagia of two months' duration. Ultrasound revealed a tumor in the right adnexa, thought to be an ovarian cyst. Chest x-ray showed a mass in the left lower lobe of lung. A right oophorectomy and left lower lobectomy were performed.

Gross Pathology:

The tumor in the lung was solid and firm, measuring 8.0 x 6.0 x 5.0 cm. Sectioning revealed a gray-white solid mass with well-delineated borders.

Special Studies:

Alpha-1 antitrypsin	=	Positive
Alpha fetoprotein	=	Positive
PAS-diacetate	=	Positive
Beta-HCG	=	Focally positive
Cytokeratin-7	=	Focally positive
Placental alkaline phosphatase (PLAP)	=	Positive