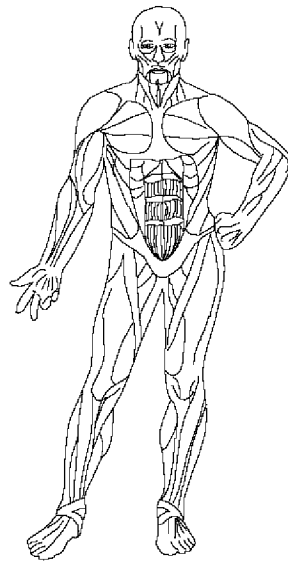




**CALIFORNIA  
TUMOR TISSUE REGISTRY**

## **Soft Tissue Tumors Study Cases, Subscription B**

**November, 2005**



**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](mailto:cttr@linkline.com)**  
**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: Mark Janssen, M.D.  
Anaheim, CA**

**Case No. 1 - November, 2005**

**Tissue from: Forehead**

**Accession #29995**

**Clinical Abstract:**

Following a four-month history, this 22-year-old man had a subcutaneous mass overlying the right eyebrow excised. The 2.5 cm mass was adherent to the periosteum and the subcutaneous muscle.

**Gross Pathology:**

Within the 2.4 x 1.5 x 1.3 cm fibrous tissue specimen was a 1.6 cm diameter spherical nodule. The cut surfaces were pink-tan with necrotic and gelatinous foci.

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**Contributor: LLUMC Pathology (pjw)  
Loma Linda, CA**

**Case No. 2 - November, 2005**

**Tissue from: Back**

**Accession #29985**

**Clinical Abstract:**

Because of concerns about masses in her upper back, a 59-year-old Hispanic woman had a CT scan, which revealed bilateral ill-defined masses. Physical examination showed a palpable, non-tender, non-erythematous mass inferior to the right scapula.

**Gross Pathology:**

The 9.0 x 9.0 x 4.5 cm specimen consisted of pink-tan and yellow-tan soft and rubbery fibrous tissue.

**Special Studies:**

Verhoeff's elastin stain = positive.

**Contributor: Peter R. Burke, M.D.**  
**Monterey Park, CA**

**Case No. 3 - November, 2005**

**Tissue from: Small Bowel**

**Accession #30102**

**Clinical Abstract:**

A 49-year-old man was found to have a mass attached to the small intestine.

**Gross Pathology:**

Within the mesentery of a loop of small intestine was a 4.2 cm, well-circumscribed, indurated white mass. Sectioning revealed no hemorrhage or necrosis. The tumor abutted the serosal surface of the bowel. The bowel had normal velvety mucosa without focal lesions.

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**Contributor: W. Michael Green, M.D.**  
**Oxnard, CA**

**Case No. 4 - November, 2005**

**Tissue from: Left shoulder**

**Accession #30064**

**Clinical Abstract:**

A 73-year-old man sought treatment for a cyst on his left shoulder.

**Gross Pathology:**

The specimen consisted of an ellipse of skin measuring 6.0 x 1.5 cm, with an attached, 6.0 x 5.0 cm, portion of fatty tissue. Sectioning showed a 3.5 cm ill-defined cystic mass filled with gelatinous material.

**Special Studies:**

Positive: CD34

**Contributor: James A. Gibbs, M.D.  
Huntington Park, CA**

**Case No. 5 - November, 2005**

**Tissue from: Retroperitoneum**

**Accession #30111**

**Clinical Abstract:**

A 44-year-old woman with cholelithiasis was also found to have an abdominal mass.

**Gross Pathology:**

The 1,211.3 gram specimen consisted of a 14.0 x 12.5 x 9.7 cm disc-shaped, apparently encapsulated structure. The cut surface was a bulging tan-yellow to red-tan.

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**Contributor: Etoi Davenport, M.D.  
Long Beach, CA**

**Case No. 6 - November, 2005**

**Tissue from: Mesentery**

**Accession #29978**

**Clinical Abstract:**

This 19-month-old boy underwent a partial resection of the small bowel and attached mesentery for a multinodular and cystic mesenteric mass.

**Gross Pathology:**

The 41.0 cm length of small bowel had an attached mesocolon containing a 14.9 x 7.5 x 3.5 cm multinodular and lobulated tan-pink mass that entirely replaced the mesocolonic fat. The cut surface exuded a milky tan fluid and was multinodular, cystic, and friable in some areas.

**Contributor: Peter L. Morris, M.D.**  
**Santa Barbara, CA**

**Case No. 7 - November, 2005**

**Tissue from: Abdominal wall**

**Accession #30086**

**Clinical Abstract:**

A 40-year-old, gravida 3, para 3, woman sought treatment for pelvic pain of two months' duration. Ultrasound revealed multiple large fibroids, in particular one 10-cm apparently pedunculated fibroid in the pelvis. At surgery, the mass was found to be in the anterior abdominal wall.

**Gross Pathology:**

The 914 gram specimen consisted of a 16 x 12 x 10 cm encapsulated, moderately firm mass with an intact capsule of smooth glistening areolar tissue. The sectioned surfaces showed a soft to moderately firm pink to gray-white parenchyma that was generally solid throughout with a few scattered 3-5 mm cystic areas.

**Special Studies:**

Positive: Smooth Muscle Actin  
Negative: S-100, CD34

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

**Case No. 8 - November, 2005**

**Tissue from: Chest wall**

**Accession #29982**

**Clinical Abstract:**

A 62-year-old woman with a longstanding history of tumor in the chest wall, confirmed by CT and MRI, underwent a radical resection of the chest wall and wedge resection of focally attached lung.

**Gross Pathology:**

The 10.0 x 8.5 x 5.0 cm specimen contained a 5.0 cm multilobulated, firm but not hard, fleshy gray tumor.

**Special Studies:**

Positive: Desmin (strongly positive)  
Negative: S-100, CD34

**Contributor: Peter R. Burke, M.D.**  
**Monterey Park, CA**

**Case No. 9 - November, 2005**

**Tissue from: Colon**

**Accession #30101**

**Clinical Abstract:**

An 80-year-old woman presented with an intraluminal rectosigmoid mass.

**Gross Pathology:**

The 21.0 cm long rectal resection specimen contained a free-floating, unattached 10.5 x 7.5 cm intraluminal mass. The bosselated yellow tan tumor was composed of individual bulging nodules with gelatinous yellow-tan cut surfaces. The rectal mucosa in that region was atrophic and thinned.

**Special Studies:**

Positive: CD34, CD117 (strongly positive)

Negative: Smooth muscle myosin, smooth muscle actin, cytokeratin

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**Contributor: Peter Chen, M.D.**  
**Sylmar, CA**

**Case No. 10 - November, 2005**

**Tissue from: Left thigh**

**Accession #29969**

**Clinical Abstract:**

A 48-year-old man presented with a recurrent mass in the left thigh. MRI confirmed an enhancing mass of the subcutaneous tissues of the left thigh.

**Gross Pathology:**

The 946 gram, 21.0 x 17.0 x 4.7 cm specimen consisted of skin and soft tissue. An 11.5 x 10.9 cm raised protruding tumor was present on the skin surface. Multiple serial sections revealed a 17.0 x 15.0 x 5.0 cm ill-defined tumor composed of firm and pink-yellow to pink-white tissue.

**Special Studies:**

Negative: S100, CK cocktail, Desmin