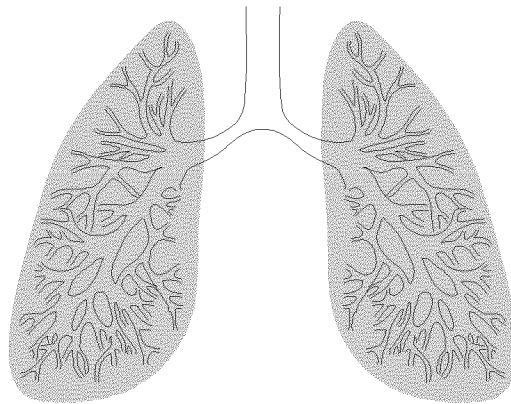




CALIFORNIA
TUMOR TISSUE REGISTRY

“TUMORS OF THE LUNG”
Study Cases, Subscription B

January, 2005



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

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: Nathan Morgenstern, M.D.
Oakland, CA**

Case No. 1 - January, 2005

Tissue from: Lung

Accession #24270

Clinical Abstract:

A male infant was born at 26 weeks gestation to a 32-year-old, Gravida 2, Para 1 female. The stillborn fetus was markedly edematous, weighing 1740 grams.

Gross Pathology:

A 7.0 cm mass occupied about 75% of the thoracic cavity. It appeared to arise from an anomalous middle pulmonary artery and bronchus, and could be easily dissected off the lung. The mass had a spongy texture with cysts, measuring up to 3 mm in diameter, and large amounts of mucus. No other anomalies were identified.

**Contributor: Dean Wiseley, M.D.
West Covina, CA**

Case No. 2 - January, 2005

Tissue from: Lung

Accession #15257

Clinical Abstract:

Routine chest x-ray performed during the course of a prenatal examination on a 20-year-old Caucasian female revealed a 2.5 cm lesion in the left lung. No calcification was evident. The patient was allowed to go to term and delivered without complications. Follow-up chest x-rays after the delivery showed no change in size or configuration of the lesion. Left thoracotomy and wedge resection of lung were performed.

Gross Pathology:

The 3.5 x 2.4 x 2.5 cm sharply circumscribed nodule was soft, and the cut surface was granular but uniform, and pale pink-tan in color. No calcifications were identified. There are unknown fixation deposits present (case submitted in 1966).

Contributor: E. M. Butt, M.D.
Pasadena, CA

Case No. 3 - January, 2005

Tissue from: Lung

Accession #7840

Clinical Abstract:

A 48-year-old Caucasian male was found to have a coin lesion at the extreme apex of the left chest on routine chest x-ray. Patient had no symptoms associated with the lesion, nor any significant history of previous illnesses.

Gross Pathology:

The 4.5 x 3.5 x 3.0 cm roughly oval bosselated specimen was covered by a thin fibrous capsule. Near one pole there were a few wispy strands of tissue grossly resembling peripheral nerve tissue. The cut surfaces showed a yellow to tan translucent peripheral zone surrounding a denser gray-tan, edematous, fibrous core, measuring 3.0 cm in diameter.

Contributor: Francis S. Buck, M.D.
Los Angeles, CA

Case No. 4 - January, 2005

Tissue from: Lung

Accession #17914

Clinical Abstract:

During routine chest x-ray, a 22-yearold African American male was found to have an asymptomatic mass in his lung. A left lobectomy was performed.

Gross Pathology:

The upper lobe measured 24 x 15 x 7 cm, and the lower lobe, which was atelectatic, measured 12 x 15 x 3 cm. The superior portion of the upper lobe was occupied by a 16 x 15 x 10 cm globular mass. Sectioning revealed the tumor to be somewhat lobulated, varying from tan to pinkish-yellow and white. The mass was smooth, rubbery, and firm, with some areas of hemorrhage and necrosis. A distinct capsule could not be identified.

Special Studies:

Positive:	Cytokeratin cocktail
Negative:	Desmin, smooth muscle actin (SMA)

Contributor: Xuedong Wang, M.D., Ph.D.
Pasadena, CA

Case No . 5 - January, 2005

Tissue from: Lung

Accession #29737

Clinical Abstract:

A 49-year-old male was found to have a mass in the right lower lobe of the lung. A lobectomy was performed.

Gross Pathology:

The specimen consisted of a right middle and lower lobe of lung, weighing 244 grams and measuring 15.0 x 10.0 x 6.0 cm. Situated 1.5 cm distal to the bronchial margin was a 6.5 x 3.5 x 3.0 cm multinodular mass. The mass involved both the middle and lower lobes and showed a gelatinous cut surface.

Contributor: Ronald E. Rocha, M.D.
San Luis Obispo, CA

Case No. 6 - January, 2005

Tissue from: Lung

Accession #29714

Clinical Abstract:

This 42-year-old female smoker was found to have a mass in her right lung.

Gross Pathology:

The 16.0 x 11.0 x 9.0 cm lobectomy specimen had a large intraparenchymal mass. Sectioning revealed a 9.6 x 6.5 x 8.0 cm well-circumscribed, bulging, fleshy and soft, pink-white mass with focal cystic degeneration.

Special Studies:

AE1/AE3 = Positive

Contributor: Thomas V. Colby, M.D.
Scottsdale, Arizona

Case No. 7 - January, 2005

Tissue from: Mediastinum

Accession #29891

Clinical Abstract:

There are two cases on the slide. Case one is from a 28-year-old male who presented with shortness of breath, and was found to have a mediastinal mass. Case two was from a 42-year-old male who was found to have a large lung mass. This was resected following needle biopsy.

Gross Pathology:

Case 1: A multiloculated mass measuring 8.0 cm in diameter, focally attached to the lung, was resected. Case 2: The mass measured 6.0 cm in size.

Contributor: S. K. Abul-Haj, M.D.
Ventura, CA

Case No. 8 - January, 2005

Tissue from: Lung

Accession #22305

Clinical Abstract:

Following an episode of hemoptysis, this otherwise healthy 73-year-old male was found to have a 7-8 cm solitary mass in the posterior aspect of the mid-portion of the left chest. A left thoracotomy was performed, with resection of a 7-8 cm, rounded mass within the superior segment of the left lower lobe.

Gross Pathology:

The 11.0 x 8.0 x 8.0 cm lung specimen contained a discrete 7.5 cm rounded mass with a granular, yellowish-gray cut surface mottled with hemorrhagic brown-red zones and small black anthracotic streaks.

Special Studies:

Positive: Vimentin
Negative: Cytokeratin, desmin

Contributor: Robert Hanan, M.D.
Oxnard, CA

Case No. 9 - January, 2005

Tissue from: Lung & Pleura

Accession #22208

Clinical Abstract:

A 78-year-old male with clinical suspicions of lung cancer underwent multiple pleural and lung biopsies.

Gross Pathology:

Multiple tan-brown tissue fragments were up to 13.0 x 3.0 x 0.5 cm. Some fragments were large, irregular, finely bosselated strips of tan-brown, shaggy tissue. The fragments cut easily, with no gritty or fibrous sensation, and consisted of homogeneous, soft, white tissue.

Special Studies:

Positive: Keratin, calretinin
Negative: CEA

Contributor: Delbert R. Dickson, M.D.
Santa Barbara

Case No. 10 - January, 2005

Tissue from: Lung

Accession #15068

Clinical Abstract:

Sudden onset hemoptysis brought this 62-year-old Caucasian male to the Emergency Room. He had noted a six-pound weight loss over two months, but noted no other symptoms. Radiographs demonstrated a 4.0 cm diameter soft tissue mass in the anterior segment of the left upper lobe. He had a history of cigarette smoking, but had given it up fifteen years previously. Past medical history was significant for a low grade follicular carcinoma of the thyroid, which had developed in a nodular goiter, diagnosed fifteen years previously. Thoracotomy and left upper lobectomy were performed.

Gross Pathology:

Within the anterior segment of the 190 gram lung was a 4.5 x 4.5 x 2.0 cm firm, well-circumscribed mass, which completely surrounded and obliterated the anterior segmental bronchus. Sectioned surfaces of the mass were lobulated, firm, and pink-white.

Special Studies:

Positive: Thyroglobulin (strongly), TTF