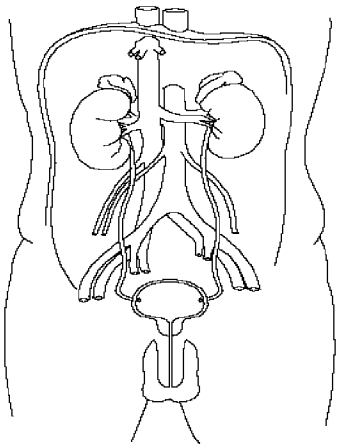
CALIFORNIA
TUMOR TISSUE REGISTRY

"URINARY TRACT PATHOLOGY"

Study Cases, Subscription A

February 2006



California Tumor Tissue Registry
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Web page: www.cttr.org
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: Carol Solomon, M.D. **Case No. 1 - February 2006**
San Diego, CA

Tissue from: Kidney **Accession #29996**

Clinical Abstract:

Evaluation of a 55 year old woman for microhematuria included a CT scan, which showed a 5.5 x 3 x 3 cm soft tissue mass in the lower pole of the left kidney.

Gross Pathology:

The 210 gram kidney had a 5 x 4.2 x 2.4 cm mass in the renal cortex, extending into the perirenal fat. The cut surface of the tumor was granular yellow-tan with foci of hemorrhage and calcification.

Contributor: Robert Zuch, M.D. **Case No. 2 - February 2006**
Baldwin Park, CA

Tissue from: Kidney **Accession #30077**

Clinical Abstract:

This 51 year old man had been on long-term dialysis and had a previous renal transplant, when he underwent a bilateral nephrectomy.

Gross Pathology:

Not available.

Contributor: Pamela Boswell, D.O. **Case No. 3 - February 2006**
San Diego, CA

Tissue from: Kidney **Accession #28930**

Clinical Abstract:

A chest CT scan of this 41 year old woman incidentally showed an enhancing left renal mass in the upper pole.

Gross Pathology:

The partial nephrectomy specimen showed a 4 x 3.8 x 3.2 cm multinodular, well circumscribed, yellow-tan tumor with small cystic spaces seen on cut surface.

Contributor: John McGill, M.D. **Case No. 4 - February 2006**
Pasadena, CA

Tissue from: Kidney **Accession #29030**

Clinical Abstract:

During evaluation for an incisional hernia, this 73 year old woman was found to have left renal mass. CT scan showed a 5 cm diameter enhancing heterogeneous mass in the upper pole of the left kidney.

Gross Pathology:

The 510 gram radical nephrectomy specimen showed a 5.3 x 5 x 4 cm well circumscribed mass in the upper pole of the kidney. The cut surface was variegated golden yellow and red with hemorrhagic cystic spaces and large areas of necrosis.

Contributor: Kenneth Frankel, M.D. **Case No. 5 - February 2006**
Glendale, CA

Tissue from: Kidney **Accession #30020**

Clinical Abstract:
A 71 year old woman underwent a left nephrectomy.

Gross Pathology:
The 185 gram, 12 x 11 x 8 cm kidney contained a 6 x 6 x 5.5 cm sharply circumscribed mahogany-tan mass in its mid-portion.

Contributor: LLUMC Pathology Group (jw) **Case No. 6 - February 2006**
Loma Linda, CA

Tissue from: Kidney **Accession #30032**

Clinical Abstract:
This 80 year old woman, with a history of lymphoma, was found on CT and ultrasound to have a solid left renal mass.

Gross Pathology:
The 689 gram nephrectomy specimen contained a 14 x 7 x 4.7 cm kidney. Within the upper pole was a well circumscribed 4.1 x 3.7 x 3.5 cm mottled yellow-tan mass with foci of hemorrhage and necrosis. A second mass in the mid-portion was 1.9 x 1.5 x 1.2 cm and similarly hemorrhagic.

Contributor: Xuedong Wang, M.D. **Case No. 7 - February 2006**
Pasadena, CA

Tissue from: Kidney **Accession #30008**

Clinical Abstract:

After complaining of nausea and acute right flank pain, this 75 year old woman was found to have a right renal mass with retroperitoneal hemorrhage, demonstrated on ultrasound and CT scan.

Gross Pathology:

The 754 gram resection specimen included an 11 x 9.5 x 8.5 cm bosselated mass in the upper pole of the kidney. The cut surface of the mass was partially cystic and variegated red-tan to gold to necrotic brown.

Contributor: Xuedong Wang, M.D. **Case No. 8 - February 2006**
Pasadena, CA

Tissue from: Kidney **Accession #29083**

Clinical Abstract:

For five years, this 75 year old woman was followed for hypertension and microhematuria. Four years prior to surgery, she had had a normal IVP. After she presented with severe abdominal pain, radiating to the back, a CT scan showed masses in the upper pole of the right kidney and in the right adrenal gland.

Gross Pathology:

Within the 1094 gram resection specimen was an ill-defined 8 x 5 x 2.5 cm friable gray-tan mass involving the perirenal adipose tissue that was contiguous with a 7.7 x 7.5 x 5.5 cm necrotic gray-tan mass replacing the upper pole of the kidney.

Contributor: K. Greg Peterson, M.D. **Case No. 9 - February 2006**
Sioux Falls, SD

Tissue from: Kidney **Accession #28845**

Clinical Abstract:
An 81 year old man presented with pain, gross hematuria, and anemia. Work-up found a right renal mass, with invasion of the inferior vena cava and evidence of vertebral metastases.

Gross Pathology:
The right kidney contained an 8.5 x 7 x 5.5 cm mass in the upper pole, replacing about two-thirds of the renal parenchyma.

Special Studies:
CD99 positive

Contributor: Jozef Kollin, M.D. **Case No. 10 - February 2006**
Lakewood, CA

Tissue from: Ureter **Accession #29988**

Clinical Abstract:
Because of persistent right flank pain and recurrent urinary tract infections, this 81 year old man was found to have a non-functional right kidney and a right ureteral tumor.

Gross Pathology:
A 27 cm long segment of ureter was attached to the right kidney. The upper two-thirds of the ureter was dilated with slightly hemorrhagic mucosa. Seven cm from the distal resection margin was a 5 cm long intraluminal mass obstructing the ureter. The tumor was friable, papillary and gray-tan.