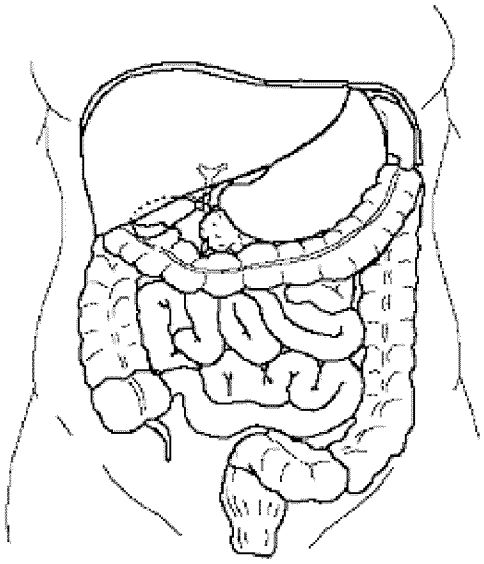
CALIFORNIA
TUMOR TISSUE REGISTRY

"DIGESTIVE SYSTEM PATHOLOGY"

Study Cases, Subscription A

September 2006



California Tumor Tissue Registry
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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:
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: Philip Robinson, M.D. **Case No. 1 - September 2006**
Boynton Beach, FL

Tissue from: Small Intestine **Accession #29217**

Clinical Abstract:

This 76 year old woman presented with abdominal pain and was found to have cholelithiasis and a small bowel intussusception.

Gross Pathology:

An 18 cm long segment of small bowel included a 10 cm long intussusception. At the leading edge of the intussusception was a 4 cm diameter submucosal mass with overlying erosion of the mucosa. The cut surface of the mass was homogeneous tan-brown and extended to the underlying muscularis propria.

SPECIAL STUDIES:

Spindle cells were negative for pankeratin, S100, desmin and CD34.

Contributor: James McCusker, M.D. **Case No. 2 - September 2006**
Woodland, CA

Tissue from: Sigmoid colon **Accession #30166**

Clinical Abstract:

A 74 year old woman had a portion of her sigmoid colon resected at the time of a ventral hernia repair.

Gross Pathology:

A 12 cm long portion of colon contained two polyps and multiple diverticula. The polyps were 1.2 x 0.7 cm and 1 x 0.8 cm in diameter. The cut surfaces were cystic, filled with gelatinous material, as were several foci in the underlying subperitoneal tissues.

Contributor: LLU Pathology Group (jdc) **Case No. 3 - September 2006**
Loma Linda, CA

Tissue from: Cecum **Accession #29734**

Clinical Abstract:
An 80 year old man with cirrhosis underwent a right hemicolectomy.

Gross Pathology:
Adjacent to the ilececal valve in this 16 cm long segment of colon and terminal ileum was a 6.0 x 5.0 x 2.5 cm red-brown mass with heaped up edges.

Contributor: James Anhalt, M.D. **Case No. 4 - September 2006**
Bakersfield, CA

Tissue from: Small bowel **Accession #29445**

Clinical Abstract:
A 57 year old man presented with symptoms of bowel obstruction and underwent segmental resection of his small intestine.

Gross Pathology:
A 10 cm long segment of small intestine showed a 2 cm long region of narrowing by a submucosal nodular thickening. The cut surface was golden-yellow and fibrotic.

Contributor: LLU Pathology Group (mrd) **Case No. 5 - September 2006**
Loma Linda, CA

Tissue from: Gastric omentum **Accession #29093**

Clinical Abstract:

An 81 year old man complained of increasing abdominal girth. CT scan showed a large abdominal mass in the left upper quadrant, abutting and displacing the stomach, left lateral segment of liver, inferior vena cava and spleen. The mass was resected along with a partial gastrectomy and partial resection of the liver.

Gross Pathology:

The 3450 gram specimen included a 30 x 26 x 12 cm, multinodular, partially cystic soft tissue mass attached to a 7 cm long portion of gastric wall. The cut surface was yellow-white with multiple areas of cystic degeneration and hemorrhage.

Special Studies:

Positive: CD34, smooth muscle actin
Negative: Desmin, S100

Contributor: Garib, Albert, M.D. Case #6 September 2006

Tissue from: Stomach **Accession #30125 (originally #30109)**

Note: Corrected History: Original mailing inadvertently included the wrong clinical data for case 6. *Please replace this page with the one that was originally sent to you.*

Clinical Abstract:

A 75-year-old male resident of a care facility was brought in the ER for abdominal discomfort ,weakness and hypoglycemia. Workup revealed that the patient had pancreatitis. He had had some upper abdominal gastric surgery previously. A re-excisional biopsy was performed.

Gross Pathology:

The 25 gram oval, velvet, pink specimen measured 5.5 x 4.0 x 4.0 cm. Much of the structure was covered with a pink, smooth membrane. There were two sutures present that marked the margins of a resection on the pink membrane.

Special studies:

Positive: CD34, CD117
Negative : S100

Contributor: LLU Pathology Group (kt) **Case No. 7 - September 2006**
Loma Linda, CA

Tissue from: Gallbladder & Liver **Accession #29340 & TR54-6038**

Clinical Abstract:

A 57 year old woman underwent a liver transplant for advanced cirrhosis associated with alcoholic liver disease.

A 61 year old man had a known lung mass. He had a rapid downhill course and died.

Gross Pathology:

The 1,350 gram, 24.0 x 14.5 x 8.5 cm multinodular liver had an attached 9.0 x 5.5 x 2.5 cm gallbladder with a single 2.5 cm smooth black stone. Within the wall of the gallbladder was a 2.2 x 1.5 x 1.1 cm firm mass. Grossly, the overlying mucosa was intact.

Autopsy showed a 4 cm diameter mass occluding the right mainstem bronchus and numerous nodules involving the liver.

Special Stains:

Variably positive: Cytokeratin cocktail, CAM 5.2, chromogranin
Strongly positive: Synaptophysin, NSE

Contributor: Peter Morris, M.D. **Case No. 8 - September 2006**
Santa Barbara, CA

Tissue from: Gallbladder **Accession #29440**

Clinical Abstract:

During work-up for gallstone pancreatitis, this 72 year old woman was found on CT to have a polypoid mass within her gallbladder.

Gross Pathology:

The 64 gram, 8.5 x 4.5 x 4.5 cm gallbladder was filled by a 7.5 x 3.5 x 3.0 cm red-tan, focally hemorrhagic exophytic mass attached to the wall by a 5.5 cm wide base. Cut sections show the mass to penetrate into the gallbladder wall to within 0.1 cm of the serosal surface and liver bed margins.

Contributor: John McGill, M.D. **Case No. 9 - September 2006**
Pasadena, CA

Tissue from: Pancreas **Accession #30146**

Clinical Abstract:

After complaining of persistent abdominal pain, this 62 year old woman was found to have a large mass involving the body and tail of her pancreas.

Gross Pathology:

The distal pancreas and attached spleen weighed 422 grams. A 12 .5 x 7.2 x 6.5 cm mass replaced most of the resected pancreas. The cut surface showed multiple small cysts, devoid of papillations and filled with clear fluid. There were occasional foci of hemorrhage and greater than half of the mass was calcified.

Contributor: Faramarz Azizi, M.D. **Case No. 10 - September 2006**
Fontana, CA

Tissue from: Pancreas **Accession #29954**

Clinical Abstract:

After experiencing two episodes of peri-umbilical pain radiating to the right upper quadrant, this 33 year woman presented for work-up. An ultrasound of the abdomen showed a 5.1 x 4.8 cm solid mass in the pancreas. CT scan showed a 7 x 5 cm heterogeneous mass, predominantly solid, in the body and tail of the pancreas. She underwent a distal pancreatectomy.

Gross Pathology:

The 210 gram, 15.2 x 7.3 x 6.5 cm distal pancreas contained a 6.5 x 6.0 x 5.2 cm hemorrhagic, variegated gray-white mass.

Special Studies:

Negative: pancytokeratin, chromogranin, synaptophysin, glucagon, insulin