



CALIFORNIA
TUMOR TISSUE REGISTRY

“GENERAL PATHOLOGY”
Study Cases, Subscription B

February, 2006



California Tumor Tissue Registry
c/o: Department of Pathology and Human Anatomy
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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: LLUMC Pathology (pjw)
Loma Linda, CA

Case No. 1 - February, 2006

Tissue from: Left ovary and tube

Accession #30029

Clinical Abstract:

A 35-year-old gravida 2, para 2 woman presented with complaints of pelvic pain. CT of the abdomen revealed a 10 x 11 x 6 cm cystic and solid left pelvic mass.

Gross Pathology:

The 585 gram, 12.6 x 10.4 x 8.6 cm multicystic pink-tan ovary contained an 8.5 x 4.2 x 3.9 cm hemorrhagic, fluid-filled, smooth-walled cyst adjacent to an 11.5 x 8.1 x 7.9 cm firm, solid, uniformly white-tan mass.

Contributor: Guillermo Acero, M.D.
Santa Paula, CA

Case No. 2 - February, 2006

Tissue from: Right ovary

Accession #29952

Clinical Abstract:

For six-months, this 29-year-old gravida 1, para 1 woman had had irregular menses, accompanied by an increase in abdominal girth. Before that time her menses had been regular. Ultrasound revealed a pelvic mass that appeared to be cystic with solid components. There was no family history of ovarian cancer. On physical examination, a smooth and non-tender mass was palpable at the umbilicus.

Gross Pathology:

The 1727 gram specimen consisted of a multilobulated cystic and solid mass measuring 20.0 x 15.0 x 11.5 cm. The cut surface showed multiple cystic cavities from 0.6 to 7.0 cm in greatest dimension, filled with cloudy and some hemorrhagic brown fluid. There were focal areas of induration and areas of necrosis measuring up to 4.0 cm in greatest diameter.

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

Case No. 3 - February, 2006

Tissue from: Esophagus

Accession #29728

Clinical Abstract:

After several years of being treated for esophageal reflux disease, this 69 year old man underwent an esophagectomy.

Gross Pathology:

The 106 gram, 14 x 7 x 2 cm gastroesophageal resection included a 4.5 cm segment of distal esophagus and a 7 cm segment of proximal stomach. Approximately 1.5 cm from the proximal esophageal margin, there was a 1.4 x 1.3 cm firm white-tan mass that extended 0.3 cm into the esophageal wall, without gross involvement of the muscularis propria. The surrounding esophageal mucosa was yellow-tan, roughened and coarsely nodular. These mucosal changes extended to the gastroesophageal junction.

**Contributor: Philip Robinson, M.D.
Boynton Beach, FL**

Case No. 4 - February, 2006

Tissue from: Right ovary

Accession #29147

Clinical Abstract:

A 55-year-old woman was found to have a pelvic mass. Hysterectomy and bilateral salpingo-oophorectomy, omentectomy, and cholecystectomy were performed.

Gross Pathology:

The 1,130 gram, 18.5 x 19.3 x 10.5 cm multinodular, gray ovary had a central area of necrosis and hemorrhage with a thickened gray wall.

Special Studies:

Positive: Mucin

Contributor: LLUMC Pathology (cwz)
Loma Linda, CA

Case No. 5 - February, 2006

Tissue from: Left adrenal gland

Accession #29599

Clinical Abstract:

A 9-month-old girl with no past medical history began to grow pubic hair. During work-up for precocious puberty, an abdominal ultrasound reveal a 7.0 x 5.0 cm mass of the left adrenal.

Gross Pathology:

The 152 gram, 9.0 x 7.0 x 4.5 cm solid, soft, rubbery, red-tan tumor had a soft, friable, homogeneously red-brown cut surface. It was covered by an intact thin membranous capsule.

Special Studies:

Positive: p53 (moderate, 10-15%), Ki-67 (moderate, 5-10%)

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

Case No. 6 - February, 2006

Tissue from: Lung

Accession #29578

Clinical Abstract:

This 56-year-old man presented with hemoptysis and work-up revealed a left lower lobe lung mass. Past medical history was significant for retro-orbital resection of the left eye for a tumor ten years previously, followed by post-operative radiation therapy. A left lower lobectomy was performed.

Gross Pathology:

The 262 gram, 16.0 x 8.0 x 8.0 cm left lower lobe of lung contained a large, firm mass within the inferior medial aspect. Sectioning revealed a large, pushing, tan, non-glistening, 4.5 x 3.5 x 3.0 cm tumor subpleurally within the inferior medial segment.

**Contributor: Duyet Vo, M.D.
Wildomar, CA**

Case No. 7 - February, 2006

Tissue from: Right knee

Accession #29608

Clinical Abstract:

A 35-year-old woman sought treatment for knee pain, which had been present since the age of 16. The condition was interpreted as a Baker's cyst and she underwent arthroscopic surgery.

Gross Pathology:

The 10 x 5.5 x 2.5 cm specimen consisted of an oval, smooth, tan-white piece of tissue with glistening, gray-tan cut surfaces.

**Contributor: Anthony Migler, M.D.
Oxnard, CA**

Case No. 8 - February, 2006

Tissue from: Right anterior thigh

Accession #29600

Clinical Abstract:

A 62-year-old woman presented with an enlarging, painful right thigh mass. She stated that the mass was interfering with her ability to void, walk or sit with her legs together. A 'volleyball-sized' mass of subcutaneous tissue was excised.

Gross Pathology:

The 28.0 x 10.0 x 8.0 cm specimen included an ellipse of light tan skin with underlying lobulated adipose tissue traversed by gray rubbery areas.

Contributor: Brad S. Adler, M.D.
Ventura, CA

Case No. 9 - February, 2006

Tissue from: Right hip

Accession #29976

Clinical Abstract:

A 32-year-old man sought treatment for a mass on the right hip. The mass was excised.

Gross Pathology:

The specimen consisted of an ellipse of tan skin overlying a 6.5 x 6.0 x 4.5 cm circumscribed, lobulated, ovoid, tan mottled soft tissue mass. The mass was 1.5 cm deep to the skin.

Special Studies:

Positive: EMA (strongly), Cytokeratin (spotty)
Negative: S-100 protein, Desmin

Contributor: Catherine Odell, M.D.
Riverside, CA

Case No. 10 - February, 2006

Tissue from: Uterus

Accession #30042

Clinical Abstract:

A 43-year-old, gravida 5, para 5, woman was scheduled to have elective hysterectomy because of menorrhagia, dysmenorrhea and pelvic pressure and pain, associated with uterine fibroids. By ultrasound and pelvic examination, the uterus measured to approximately 18 weeks, and was irregularly-shaped. Total abdominal hysterectomy was performed.

Gross Pathology:

The 640 gram, 7.0 x 6.0 x 2.0 cm uterus had multiple intramural nodules. The largest nodule was 9.0 x 6.0 x 5.0 cm, well-circumscribed with a fleshy lobular appearance. Additional myomas were present up to 6.0 cm in greatest dimension, and were well-circumscribed, white-tan, firm and whorled to lobular in appearance.