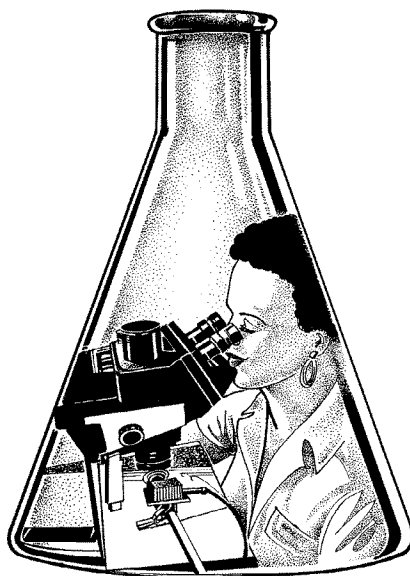




**CALIFORNIA  
TUMOR TISSUE REGISTRY**

**General Pathology  
Study Cases, Subscription B**

**November, 2006**



**California Tumor Tissue Registry**  
c/o: Department of Pathology and Human Anatomy  
Loma Linda University School of Medicine  
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Loma Linda, California 92350  
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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:**

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: Pamela Boswell, D.O.  
San Diego, CA**

**Case No. 1 - November, 2006**

**Tissue from: Left frontal skull**

**Accession #29463**

**Clinical Abstract:**

Approximately 23 years after first noting a left frontal skull mass, this 27-year-old man requested its removal. There had been no change in size.

**Gross Pathology:**

The 2.6 x 2.4 x 1.6 cm rounded portion of bone had one flat surface. The other surface was rounded and knobby.

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**Contributor: Theodore Coonrod, M.D.  
Bishop, CA**

**Case No. 2 - November, 2006**

**Tissue from: Left knee**

**Accession #28929**

**Clinical Abstract:**

An 18-year-old man had been experiencing problems with both of his knees since Junior High School, when he began playing football. A mass developed in his left knee, which was becoming slightly larger, with accompanying soreness. The mass was excised.

**Gross Pathology:**

The specimen consisted of two portions of bone, the largest measuring 5.0 x 3.0 x 2.5 cm, and the smaller measuring 2.0 x 1.0 x 0.5 cm.

**Contributor: Richard R. Wilber, M.D.**  
**Santa Rosa, CA**

**Case No. 3 - November, 2006**

**Tissue from: Right lower lobe of lung**

**Accession #29922**

**Clinical Abstract:**

During work-up for an ovarian dermoid tumor, this 42-year-old woman was found to have a large mass in the right lower lobe of the lung. After following it for approximately six years, she decided to undergo surgery. A right lower lobectomy was performed.

**Gross Pathology:**

Within the lobe resection specimen was a 13.5 cm, well-circumscribed, gritty gray-white cartilaginous-appearing neoplasm. The tumor peeled easily from the adjacent pulmonary parenchyma. No necrosis or hemorrhage was seen.

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**Contributor: Peter FitzPatrick, M.D.**  
**Queensland, Australia**

**Case No. 4 - November, 2006**

**Tissue from: Right ankle**

**Accession #30049**

**Clinical Abstract:**

A 35-year-old woman presented with a swollen ankle.

**Gross Pathology:**

The specimen consisted of a piece of skin and rubbery firm subcutaneous tissue measuring 0.55 x 0.35 x 0.3 cm.

**Contributor: Robert H. Zuch, M.D.  
Baldwin Park, CA**

**Case No. 5 - November, 2006**

**Tissue from: Femur**

**Accession #29977**

**Clinical Abstract:**

A 51-year-old man presented with pain and discomfort in the pelvic region. CT scan demonstrated a large pelvic mass. A hemipelvectomy was performed.

**Gross Pathology:**

Encasing the entire femoral head was a firm gritty white-tan tumor measuring up to 22 cm (lateral-medial) x about 20 cm (superior-inferior).

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

**Case No. 6 - November, 2006**

**Tissue from: Thymus**

**Accession #29906**

**Clinical Abstract:**

A chest x-ray, performed during work-up of a 33-year-old male who sought treatment for coughing, revealed a mediastinal mass.

**Gross Pathology:**

The 5.0 x 3.5 x 2.5 cm specimen contained a 3.3 x 2.1 x 1.9 cm soft nodule, mottled yellow-tan and gray with foci of hemorrhage. The cut surface showed a distinct thin white capsule.

**Special Studies:**

Flow cytometry showed no evidence of an abnormal T or B cell lymphoproliferative process.

**Contributor: John C. Blaustein, M.D.**  
**Santa Barbara, CA**

**Case No. 7 - November, 2006**

**Tissue from: Mediastinum**

**Accession #30093**

**Clinical Abstract:**

Six months previously, this 31-year-old man had presented with shortness of breath and bilateral pleural effusions. Pleural fluid was benign. A mass was noted on CT scan, and after six months of following, the mass was excised.

**Gross Pathology:**

The thinly encapsulated specimen was 3.5 x 2.0 x 1.6 cm and had a gray-white, indurated, fibrous cut surface with pale yellow-tan nodular background.

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**Contributor: Jozef Kollin, M.D.**  
**Lakewood, CA**

**Case No. 8 - November, 2006**

**Tissue from: Left lower lobe**

**Accession #29938**

**Clinical Abstract:**

A wedge resection of the left lower lobe of lung was performed on a 52-year-old man after a mass was identified on workup.

**Gross Pathology:**

The wedge of lung was 5.0 x 3.0 x 4.0 cm. It contained a firm multinodular lesion with a cut surface showing lobular hyalinized-appearing grayish-white confluent nodules measuring between 0.3 to 1.5 cm in greatest diameter. Grossly, no evidence of necrosis or hemorrhage was present.

**Special Studies:**

Fungal stains were negative for fungal elements.

**Contributor: Kenneth A. Frankel, M.D.  
Glendale, CA**

**Case No. 9 - November, 2006**

**Tissue from: Sigmoid colon**

**Accession #29963**

**Clinical Abstract:**

A 75-year-old man was found to have a sigmoid mass.

**Gross Pathology:**

The 33.0 cm long segment of colon had a 16.0 cm firm plaque-like, gray-white tumor attached to the serosal surface of the colon and present within the attached pericolic soft tissue. On cut section, the mass was composed of multiple nodules of firm, tan-white tissue.

**Special Studies:**

Positive: Pankeratin (strongly), Calretinin (strongly), HMBE-1 (focally).  
Negative: Vimentin, CEA, CD117, BER-EP4.

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**Contributor: Kenneth A. Frankel, M.D.  
Glendale, CA**

**Case No. 10 - November, 2006**

**Tissue from: Small bowel**

**Accession #29923**

**Clinical Abstract:**

This 32-year-old woman was found to have a jejunal mass.

**Gross Pathology:**

The 13.0 cm long segment of small bowel had a 3.5 cm nodular pink-tan, large mass that was somewhat “dumbbell” shaped in the attached soft tissue, extending into the bowel wall and submucosa. Sectioning of the mass revealed a somewhat nodular and lobulated pale tan appearance.