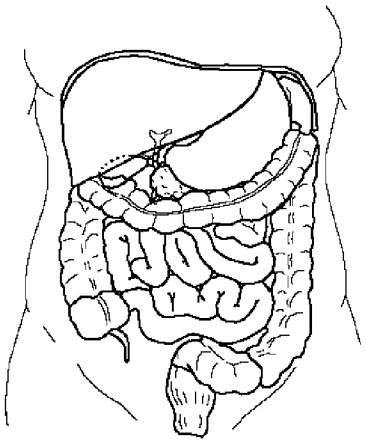
CALIFORNIA
TUMOR TISSUE REGISTRY

"GASTROINTESTINAL PATHOLOGY"

Study Cases, Subscription A

November 2007



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 a maximum of 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 Group (mp) **Case No. 1 - November 2007 A**
Loma Linda, CA

Tissue from: Small bowel **Accession #30652**

Clinical Abstract:

A 74 year old woman had a past history of endometrioid adenocarcinoma of the vagina. At a follow-up visit, a 10.0 cm proximal jejunal mass was discovered.

Gross Pathology:

A 277 gram, 11 x 11 x 6 cm mass was attached to a 3 cm length of small bowel. The well circumscribed white whorled mass appeared to arise from the bowel wall and did not involve the mucosa. The cut surface showed no necrosis or cystic degeneration.

Special Studies:

Negative: CD 34, CD117, S100
Positive: Desmin (strong), Smooth muscle actin (focal)

Contributor: Robert Zuch, M.D. **Case No. 2 - November 2007 A**
Baldwin Park, CA

Tissue from: Stomach **Accession #30593**

Clinical Abstract:

A 49 year old man presented with nondescript abdominal pain. A gastric biopsy was performed with subsequent gastric resection.

Gross Pathology:

The gastrectomy specimen had an intact mucosa. Detached from the gastrectomy specimen, but submitted with it, was a 1,835 gram, 22 x 19 x 11 cm mass. The cut surface was a variegated white-tan.

Special Studies:

Strongly positive: CD34, CD117
Negative: Desmin

Contributor: LLUMC Pathology Group (mp) **Case No. 3 - November 2007 A**
Loma Linda, CA

Tissue from: Stomach **Accession #30708**

Clinical Abstract:

A 79 year old woman presented with upper GI bleeding and was found to have an abdominal mass. Radiographic studies showed a lobulated mass involving the fundus of the stomach with central cystic change.

Gross Pathology:

This 6 x 3 x 3 cm portion of stomach was attached to an 11 x 7 x 3 cm spleen. A 6 x 5 x 4 cm mural-based nodule extended from the stomach and had a central pale gelatinous area.

Special Studies:

Positive: CD117

Contributor: LLUMC Pathology Group (ec) **Case No. 4 - November 2007 A**
Loma Linda, CA

Tissue from: Liver **Accession #30576**

Clinical Abstract:

A 35 year old man was found to have a liver mass. He had no history of cirrhosis.

Gross Pathology:

This 16 x 13 x 8 cm partial liver resection contained an 11.7 x 10.0 x 6.5 cm solitary, well-circumscribed yellow-white mass with a lobulated cut surface. The cut surface showed foci of hemorrhage and necrosis.

Contributor: Lester Thompson, M.D. **Case No. 5 - November 2007 A**
Woodland Hills, CA

Tissue from: Right ovary **Accession #30595**

Clinical Abstract:

A 65 year old woman presented with right lower quadrant abdominal pain. Ultrasound showed a heterogeneous mass in the right ovary.

Gross Pathology:

The 8.5 gram ovary was firm with a gray-tan lobulated but smooth surface. The cut surface was edematous and focally hemorrhagic.

Contributor: Guillermo Acero, M.D. **Case No. 6 - November 2007 A**
Ojai, CA 93023

Tissue from: Gallbladder **Accession #30491**

Clinical Abstract:

A 72 year old woman was in good health until the evening of Thanksgiving dinner, when she developed right upper quadrant pain. She denied weight loss or systemic symptoms. Radiographs showed gallstones and a possible mass at the tail of the pancreas. At surgery, the pancreas was normal.

Gross Pathology:

The 8 x 3.5 cm gallbladder had numerous calculi and a 2 cm indurated gray area at the neck.

Contributor: Lester Thompson, M.D. **Case No. 7 - November 2007 A**
Woodland Hills, CA

Tissue from: Gallbladder **Accession #30602**

Clinical Abstract:

An 87 year old man presented with an acute abdomen. A CT showed a liver lesion which yielded pus on aspiration. Gallstones were noted, along with a thickened gallbladder wall.

Gross Pathology:

The resected gallbladder was received in multiple fragments, accompanied by a single 4 cm diameter calculus.

Contributor: Rose Akin, M.D. **Case No. 8 - November 2007 A**
Fresno, CA

Tissue from: Pancreas **Accession #30767**

Clinical Abstract:

A 29 year old woman was found to have an abdominal mass.

Gross Pathology:

The 75 gram, 8 x 7 x 4.2 cm specimen included the tail of the pancreas and a portion of stomach. Within the pancreas was a 6.5 x 5.0 x 4 cm lobulated mass with a variegated cut surface showing focal hemorrhage and necrosis.

Contributor: Edgar Fischer, M.D. **Case No. 9 - November 2007 A**
Albuquerque, NM

Tissue from: Stomach **Accession #30411**

Clinical Abstract:

A 53 year old man presented with non-specific upper GI tract symptoms and was found to have a 10 cm mass in the proximal stomach.

Gross Pathology:

A 10 x 10 x 4.5 cm exophytic mass was present in the proximal stomach, near the gastro-esophageal junction.

Contributor: Ujvala Sawkar, M.D. **Case No. 10 - November 2007 A**
National City, CA

Tissue from: Cecum **Accession #30570**

Clinical Abstract:

A 73 year old man complained of sudden onset of acute abdominal pain, without accompanying nausea or vomiting. The right lower quadrant was tender to palpation.

Gross Pathology:

A 32 cm long portion of colon, terminal ileum and appendix included an 8 x 7 x 3 cm ulcerated mass in the cecum.

Special Studies:

Positive: Keratin, CEA
Weakly positive: CK7, CK20, Chromogranin
Negative: Synaptophysin