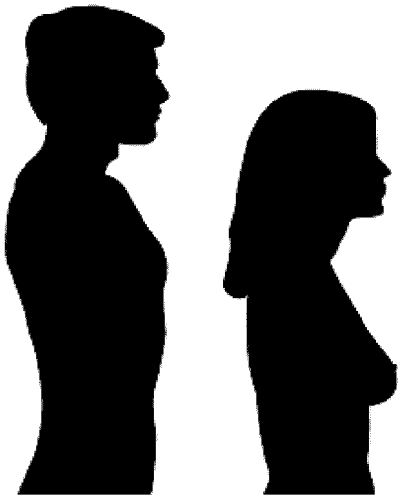
CALIFORNIA
TUMOR TISSUE REGISTRY

"GENERAL PATHOLOGY"

Study Cases, Subscription A

March, 2007



California Tumor Tissue Registry
c/o: Department of Pathology and Human Anatomy
Loma Linda University School of Medicine
11021 Campus Avenue, AH 335
Loma Linda, California 92350
(909) 558-4788
FAX: (909) 558-0188
E-mail: cttr@linkline.com

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: **M. Rose Akin, M.D.** **Case No. 1 - March A**
Fresno, CA

Tissue from: **Heart** **Accession #30218**

Clinical Abstract:
A 66 year old man underwent removal of a right atrial mass at the time of a coronary artery bypass graft.

Gross Pathology:
The 22 gram specimen was 4.5 x 3 x 3 cm. The cut surfaces were glistening gelatinous yellow, with focal hemorrhage and areas of fibrosis.

Contributor: **Loma Linda Pathology Group (ec)** **Case No. 2 - March A**
Loma Linda, CA

Tissue from: **Left kidney** **Accession #30030**

Clinical Abstract:
After presenting with gross hematuria and left flank pain, this 80 year old man was found to have a left renal mass.

Gross Pathology:
The 981 gram, 27 x 14 x 6.5 cm kidney resection specimen showed a 5 x 4 x 3 cm well-defined variegated yellow to white-tan tumor involving the renal parenchyma adjacent to the hilum, and bulging into the renal pelvis.

Contributor: Loma Linda Pathology Group (rc) **Case No. 3 - March A**
Loma Linda, CA

Tissue from: Left parotid gland **Accession #29089**

Clinical Abstract:

For five years, this 48 year old woman noticed a gradually enlarging mass in her left neck. She denied dysphagia, otalgia or weight loss. Examination showed a firm well demarcated but non-mobile mass at the angle of the jaw on the left side.

Gross Pathology:

The 16 gram, 5.5 x 2.5 x 2.3 cm portion of parotid gland contained a 4 x 1.5 x 1.2 cm firm, white gritty mass.

Contributor: Robert James, M.D. **Case No. 4 - March A**
Ventura, CA

Tissue from: Left ovary **Accession #30172**

Clinical Abstract:

A 47 year old woman with a past history of breast cancer was found to have a left adnexal mass.

Gross Pathology:

The 7.6 x 5.0 x 3.5 cm mass was bosselated red-tan-yellow. The cut surface showed numerous yellow masses up to 3.4 cm in greatest diameter.

Contributor: Kenneth Frankel, M.D. **Case No. 5 - March A**
Glendale, CA

Tissue from: Breast **Accession #29964**

Clinical Abstract:
A 32 year old woman presented with a large mass in her left breast.

Gross Pathology:
The lumpectomy specimen showed a 13 x 12 x 11 cm well circumscribed portion of pink-gray nodular tissue. The cut surface had an arborizing, leaf-like pattern.

Contributor: Albert Garib, M.D. **Case No. 6 - March A**
Huntington Beach, CA

Tissue from: Axillary lymph node **Accession #29993**

Clinical Abstract:
During work-up for nausea, vomiting, diarrhea, weight loss and fever, this 79 year old woman was found to have cervical and axillary lymphadenopathy. There was no mediastinal adenopathy. An ENT exam showed no oral or pharyngeal lesions.

Gross Pathology:
Two oval masses were 2.5 x 2 x 2 cm and 3 x 2.8 x 2 cm. Both had white firm parenchyma with foci of mucoid degeneration.

Special Studies:

Kappa/Lambda:	Less than 3-5% positive
CD20	Scattered individual and small clusters of B cells positive
CD23	Dendritic cell meshwork positive
CD30	Rare immunoblasts positive
CD43	T-cells positive (scattered)
CD68	Many histiocytes positive (predominant staining pattern)

Contributor: Douglas Eglen, M.D. **Case No. 7 - March A**
Kokomo, IN

Tissue from: Right lung **Accession #30054**

Clinical Abstract:

Work-up for a chronic cough in this 42 year old woman discovered a large tumor in the right lung.

Gross Pathology:

The 9 x 8 x 5 cm partial lobectomy specimen contained a 6.2 cm well-defined yellow friable tumor with focal hemorrhage.

Special Studies:

Positive: vimentin, smooth muscle actin
Negative: S100, EMA, ALK-1

Contributor: Loma Linda Pathology Group (ec) **Case No. 8 - March A**
Loma Linda, CA

Tissue from: Mesentery **Accession #29623**

Clinical Abstract:

Following an episode of idiopathic pancreatitis, this 19 year old woman developed a pancreatic-cutaneous fistula. She was followed for 3 ½ months for an enlarging abdominal mass, thought to be retroperitoneal inflammation, associated with her pancreatitis. When this did not resolve, she underwent resection.

Gross Pathology:

The 3,350 gram, 36.9 x 29.2 x 8.3 cm bilobed brown white mass was attached to a segment of small bowel. The cut surface showed uniformly white-tan fibrous tissue.

Special Studies:

Positive: CD117, CD30
Negative: CD34, ER, PR

Contributor: Loma Linda Pathology Group (wc) **Case No. 9 - March A**
Loma Linda, CA

Tissue from: Posterior mediastinum **Accession #29613**

Clinical Abstract:
While being worked up for arthritis, this 32 year old woman was found to have a posterior mediastinal mass.

Gross Pathology:
A 55 gram, 5.4 x 4.8 x 4 cm mass had a uniform yellow tan cut surface.

Special Studies:

S-100	positive
Desmin	negative

Contributor: Gholam Pezeshkpour, M.D. **Case No. 10 - March A**
Fontana, CA

Tissue from: Retrorectal region **Accession #30553**

Clinical Abstract:
A 66 year old man complained of chronic constipation and was found to have a large retro-rectal mass.

Gross Pathology:
The 18 x 10 x 10 cm resection specimen contained a 12 x 10 x 10 cm, apparently intramuscular lobulated mass. The cut surface was gelatinous to solid white with areas of hemorrhage and necrosis.

Special Studies:

S-100	negative
CK	positive