

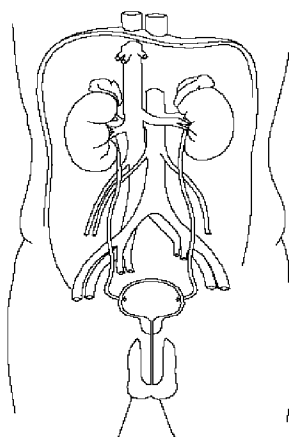


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“GENITOURINARY PATHOLOGY”**

**Study Cases, Subscription A**

**February 2008**



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

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: Lester Thompson, M.D.**  
**Woodland Hills, CA**

**Case No. 1 - February 2008 A**

**Tissue from: Prostate**

**Accession #30597**

**Clinical Abstract:**

Complaining of urinary retention, this 59 year old man presented to his urologist. His PSA levels were mildly elevated and CT scan showed an enlarged prostate. Digital exam showed an enlarged but smooth prostate. Biopsies were initially benign. A suprapubic prostatectomy was performed at which time a presumed adenoma was enucleated from the surrounding prostatic shell.

**Gross Pathology:**

The specimen weighed 89 grams and was 6 x 5 x 3/5 cm.

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**Contributor: Lester Thompson, M.D.**  
**Woodland Hills, CA**

**Case No. 2 - February 2008 A**

**Tissue from: Kidney**

**Accession #30678**

**Clinical Abstract:**

A 54 year old woman with a long history of polycythemia presented with left flank pain and hematuria. Radiographic studies showed a 2.5 cm mass in the kidney parenchyma.

**Gross Pathology:**

The resected specimen included a well-circumscribed pale gray, slightly soft mass with focal cyst formation and areas of calcification.

**Contributor: LLUMC Pathology Group (cz)  
Loma Linda, CA**

**Case No. 3 - February 2008 A**

**Tissue from: Right kidney**

**Accession #30704**

**Clinical Abstract:**

A 3 year old boy was found to have a larger renal mass.

**Gross Pathology:**

The 770 gram, 16 x 12 x 6 cm radical nephrectomy specimen was largely replaced by tumor, with fluctuant cystic necrotic areas in the upper pole. In the lower pole was a mixture of renal parenchyma and tumor nodules up to 4 cm in diameter.

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**Contributor: LLUMC Pathology Group (cz)  
Loma Linda, CA**

**Case No. 4 - February 2008 A**

**Tissue from: Kidney**

**Accession #30499**

**Clinical Abstract:**

A 5 year old boy was found to have both renal and brain masses. A radical nephrectomy was performed.

**Gross Pathology:**

The 700 gram, 15 x 13 x 7 cm nephrectomy specimen had a 12 x 9 x 7 cm white-tan, soft, friable tumor largely replacing the kidney.

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

**Case No. 5 - February 2008 A**

**Tissue from: Right kidney**

**Accession #30676**

**Clinical Abstract:**

During work up for hypertension, this 53 year old man was found by ultrasound to have a right renal mass. An MRI showed a solid mass with a cystic center.

**Gross Pathology:**

The 770 gram radical nephrectomy specimen had an 8 x 5 x 4 cm well-circumscribed red-brown mass with a central scarred area present in the upper pole of the kidney.

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**Contributor: LLUMC Pathology Group (gs)  
Loma Linda, CA**

**Case No. 6 - February 2008 A**

**Tissue from: Left kidney**

**Accession #30703**

**Clinical Abstract:**

This 60 year old woman was found to have a left renal mass and retroperitoneal lymphadenopathy.

**Gross Pathology:**

The 1,480 gram, 18 x 15 x 9 cm nephrectomy specimen showed a kidney largely replaced by a white to yellow-tan tumor.

**Contributor: Lester D.R. Thompson, M.D.  
Woodland Hills, CA**

**Case No. 7 - February 2008 A**

**Tissue from: Kidney**

**Accession #30681**

**Clinical Abstract:**

This 67 year old man presented with left flank pain and hematuria. Work up showed renal mass.

**Gross Pathology:**

The tumor was 4/5 cm in greatest diameter.

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

**Case No. 8 - February 2008 A**

**Tissue from: Bladder**

**Accession #30563**

**Clinical Abstract:**

A 71 year old man was found to have a mass in the bladder base with extension into the adjacent prostate.

**Gross Pathology:**

The 470 gram, 21 x 12 x 7 cm cystoprostatectomy specimen showed a 7 cm diameter white-tan, focally hemorrhagic tumor arising from the base of the bladder and encompassing the urethra and extending into the underlying prostate and into the perivesicular fat.

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

**Case No. 9 - February 2008 A**

**Tissue from: Ureter**

**Accession #30721**

**Clinical Abstract:**

During work up for an abdominal aneurysm, this 78 year old woman was found to have right hydronephrosis and a right ureteral obstruction.

**Gross Pathology:**

The 600 gram 15 x 6 x 1 cm composite resection of kidney and ureter showed a white-tan friable mass completely filling the ureteral lumen.

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**Contributor: Lester Thompson, M.D.**  
**Woodland Hills, CA**

**Case No. 10 - February 2008 A**

**Tissue from: Adrenal gland**

**Accession #30680**

**Clinical Abstract:**

A 91 year old man presented with hematuria and abdominal pain. A renal pelvis mass was identified radiographically.

**Gross Pathology:**

The 4.5 cm mass in the renal pelvis extended into renal parenchyma. The accompanying adrenal also contained a tumor.