



CALIFORNIA
TUMOR TISSUE REGISTRY

“HEMATOLYMPHOID NEOPLASMS”

Study Cases, Subscription B

September 2009



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:

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: Anthony Victorio, M.D.
Turlock, CA**

Case No. 1 - September 2009 B

Tissue from: Small Bowel

Accession #31071

Clinical Abstract:

A 66 year old man underwent resection of a portion of his small intestine.

Gross Pathology:

A 4 cm long segment of small bowel had a 2.5 cm diameter raised submucosal area of rubbery glistening pale tan tissue.

Special Studies:

Positive: CD3, Mum-1 (weakly positive)

Negative: CD10, BCL6, BCL2

Ki67: High proliferation index

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

Case No. 2 - September 2009 B

Tissue from: Spleen

Accession #31086

Clinical Abstract:

A 67 year old woman had her enlarged spleen removed.

Gross Pathology:

The 1,400 gram spleen was diffusely infiltrated by multiple small white nodules.

Special Studies: Immunohistochemistry

Positive: BCL1, BCL2 (focal), CD20

Negative: BCL6, CD3, CD10, CD45

Special Studies: Flow cytometry

Positive: CD45, CD20, CD19, Lambda, FMC7 (dim), CD38, CD22

Negative: CD14, CD3, CD7, CD4, CD8, CD10, Kappa, CD5, CD23, CD43, CD11c, CD25, CD103

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

Case No. 3 - September 2009 B

Tissue from: Submandibular gland

Accession #31061

Clinical Abstract:

For four months, this 64 year old woman had noticed a slowly enlarging mass in the region of her submandibular gland.

Gross Pathology:

The resected submandibular gland has a fish-flesh cut surface.

Contributor: Sherrita Wilson, M.D.
Edmond, OK

Case No. 4 - September 2009 B

Tissue from: Sternoclavicular region

Accession #31010

Clinical Abstract:

A 43 year old man had a mass from his sternoclaviular region resected.

Gross Pathology:

The soft purple-tan resected mass was 3.8 x 2.8 x 2.0 cm.

Special Studies:

Spindle & epithelial cells: positive for cytokeratin

Epithelial cells: positive for CK7

Tumor cells: BCL2 positive

Contributor: Loma Linda Pathology Group (jc)
Loma Linda, CA

Case No. 5 - September 2009 B

Tissue from: Anterior mediastinum

Accession #30845

Clinical Abstract:

For about two months, this 59 year old man had noticed a sensation of lump in his throat. His past medical history included partial resection of his lip for melanoma 20 years ago. A chest x-ray and subsequent CT showed a 6 x 5 x 4 cm mass in his anterior mediastinum. There was no cervical or axillary lymphadenopathy.

Gross Pathology:

The 72 gram, 7 x 6 x 3.5 cm brown-tan lobulated soft tissue mass had an intact capsule. The cut surface was pink-tan with foci of hemorrhage and fibrosis.

Special Studies: Immunohistochemistry

The vast majority of lymphocytes were CD45, CD3, CD43-positive T cells variably intermixed with pancytokeratin-positive epithelial cells. CD79a, CD20-positive B cells and CD30-positive cells were only rarely noted.

Contributor: Loma Linda Pathology Group (ec)
Loma Linda, CA

Case No. 6 - September 2009 B

Tissue from: Mediastinum

Accession #30650

Clinical Abstract:

A 37 year old woman had a mediastinal tumor. Following chemotherapy, she underwent debulking of the residual mass which was surrounding superior vena cava, phrenic nerve and portions of lung.

Gross Pathology:

The 92 gram, 8 x 7 x 3 cm firm white mass had a rubbery white-tan cut surface.

Contributor: Gordon Honda, M.D.
Fresno, CA

Case No. 7 - September 2009 B

Tissue from: Cecum

Accession #28487

Clinical Abstract:

After presenting with acute bowel obstruction, this 78 year old woman was found on CT to have a complex mass near her cecum. At surgery, the mass was adherent to the cecum and a portion of small bowel, with exudates and adhesions suggestive of prior perforation.

Gross Pathology:

Within the cecum was a 10 x 9 x 9 cm fungating mass that had eroded through the cecal wall and into the mesenteric root.

Special Studies:

Positive: CD30, CD43

Negative: CD3, CD15, CD45ro

Contributor: Mark Janssen, M.D.
Anaheim, CA

Case No. 8 - September 2009 B

Tissue from: Chest wall

Accession #27850

Clinical Abstract:

After 4 weeks of vague chest pain, night sweats, increasing fatigue and malaise, and cough, this 31 year old man presented with an anterior chest wall mass. A CT scan shows a mass involving the pleural space and chest wall.

Gross Pathology:

The 49 gram specimen consisted of multiple irregular fragments of soft white tissue.

Special Studies:

Positive: LCA, EMA, CD3 (weak), UCHL-1 (weak)

Negative: Desmin, S100, Keratin, L26

**Contributor: John Svirbely, M.D.
Oxford, OH**

Case No. 9 - September 2009 B

Tissue from: Stomach

Accession #30724

Clinical Abstract:

A person of unknown age and gender presented with abdominal pain and pneumoperitoneum.

Gross Pathology:

A subtotal gastrectomy specimen was 19 x 16 x 1.5 cm and had a 3 cm diameter transmural defect. Focally the wall was up to 3 cm thick with a fish flesh appearance.

**Contributor: Mark Carter, M.D.
Chico, CA**

Case No. 10 - September 2009 B

Tissue from: Right axillary lymph node

Accession #31108

Clinical Abstract:

This 18 year old woman presented with bilateral axillary adenopathy.

Gross Pathology:

The 5.9 x 3 x 2.5 cm lymph node had a nodular tan-red cut surface.

Special Studies:

Positive in cells of interest: CD15, CD30

Negative in cells of interest: CD20, Pax5

Admixed small T & B cells were CD3 and CD20 positive