

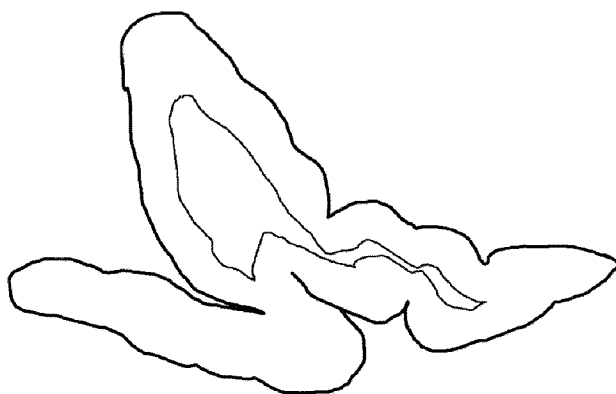


CALIFORNIA
TUMOR TISSUE REGISTRY

“ENDOCRINE PATHOLOGY”

Study Cases, Subscription A

March 2010



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

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 - March 2010 A

Tissue from: Thyroid

Accession #31006

Clinical Abstract:

A 79 year old woman presented with multinodular thyroid gland enlargement with an apparently dominant mass on the right side.

Gross Pathology:

The resected thyroid had a beefy red cut surface and showed a 3.8 cm mass in the right lobe.

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

Case No. 2 - March 2010 A

Tissue from: Thyroid

Accession #31286

Clinical Abstract:

This 73 year old woman presented with a rapidly enlarging mass in the midline of the neck. She had a history of a “thyroid cyst” for a number of years.

Gross Pathology:

The resected isthmus of the thyroid contained a 7.5 cm mass.

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

Case No. 3 - March 2010 A

Tissue from: Thyroid

Accession #30912

Clinical Abstract:

This 55 year old man presented with a thyroid nodule.

Gross Pathology:

The 54 gram, 7.3 x 5 x 2.6 cm left lobe of thyroid was almost completely replaced by a yellow to mahogany brown lobulated mass, leaving a thin rim of compressed uninvolved thyroid.

Contributor: Pamela Boswell, D.O.
La Jolla, CA

Case No. 4 - March 2010 A

Tissue from: Thyroid

Accession #30995

Clinical Abstract:

A 48 year old woman presented with a thyroid nodule.

Gross Pathology:

The 8 x 3.5 x 2 cm left lobe of thyroid contained a 4 x 4 x 2 cm bulging mass. The cut surface was multinodular, pale tan and homogeneous with focal calcifications and a thin grossly apparent capsule.

**Contributor: Pamela Boswell, D.O.
La Jolla, CA**

Case No. 5 - March 2010 A

Tissue from: Thyroid

Accession #31044

Clinical Abstract:

A 56 year old woman presented with a nodular thyroid gland.

Gross Pathology:

The 42.9 gram total thyroidectomy specimen included a 5.2 cm right lobe, 2 cm isthmus and a 5.2 cm left lobe. Attached to the lower pole of the left lobe was a 4.5 x 3 x 2 cm well circumscribed mass and an additional 2 cm mass within the left lobe.

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

Case No. 6 - March 2010 A

Tissue from: Pancreas

Accession #31112

Clinical Abstract:

Work-up for early satiety in this 50 year old woman resulted in the finding of a mass in the tail of her pancreas.

Gross Pathology:

The resection specimen included a 3.1 x 3 x 2.4 cm firm, solid light tan mass.

**Contributor: Pamela Boswell, D.O.
La Jolla, CA**

Case No. 7 - March 2010 A

Tissue from: Left adrenal

Accession #30938

Clinical Abstract:

Work up for hypertension and tachycardia in this 31 year old woman showed increased plasma metanephrine levels and an MRI showed an adrenal gland mass.

Gross Pathology:

The 172 gram fluctuant, 7 x 7 x 5.5 cm resected mass had an attached 3.5 cm portion of yellow-tan uninvolved adrenal gland. The well-circumscribed mass had a tan-gray, vaguely nodular bulging cut surface.

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

Case No. 8 - March 2010 A

Tissue from: Right adrenal

Accession #30801

Clinical Abstract:

A 17 year old young woman presented with hypertension and central obesity. Work up found a right adrenal mass.

Gross Pathology:

The 22 gram, 5.5 x 3.7 x 1.5 cm soft tan nodular mass had a delicate fibrous capsule. No definite adrenal gland was identified.

Contributor: Lester Thompson, M. D.
La Jolla, CA

Case No. 9 - March 2010 A

Tissue from: Adrenal gland

Accession #31064

Clinical Abstract:

A 58 year old woman presented with hypertension of new onset. She appeared to be slightly round-faced with acne. An adrenal mass was noted on work up.

Gross Pathology:

The resected specimen included a 4.4 cm diameter mass.

Contributor: Alicia Calderon, D.O.
Long Beach, CA

Case No. 10 - March 2010 A

Tissue from: Adrenal gland

Accession #31008

Clinical Abstract:

A 2 year old girl had a one month history of hirsutism, increase abdominal girth and hypertension. CT scan showed a left suprarenal mass. Serum testosterone levels were elevated at 834 and estradiol was 85.

Gross Pathology:

The 378 gram adrenal mass was 12 x 8.5 x 6 cm.