

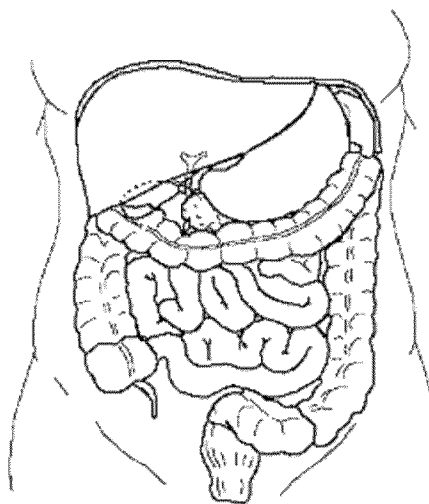


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“PATHOLOGY OF THE DIGESTIVE SYSTEM”**

**Study Cases, Subscription A**

**November 2010**



**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](mailto:cttr@linkline.com)  
Web page: [www.cttr.org](http://www.cttr.org)  
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:**

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 (dr)  
Loma Linda, CA**

**Case No. 1 - November 2010 A**

**Tissue from: Right parotid gland**

**Accession #31238**

**Clinical Abstract:**

This 72 year old man had a right neck mass.

**Gross Pathology:**

The 15 gram, 5 x 4 x 2 cm yellow-brown specimen contained a 3 cm well-circumscribed mass with both friable and firm brown areas.

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**Contributor: Robert Zuch, M.D.  
Baldwin Park, CA**

**Case No. 2 - November 2010 A**

**Tissue from: Pancreas**

**Accession #30637**

**Clinical Abstract:**

A 59 year old woman was found to have an asymptomatic mass in the tail of her pancreas.

**Gross Pathology:**

The 63 gram, 14 x 10 x 6.5 cm distal pancreatic resection specimen showed a 7.5 cm diameter multilobulated mass. The mass was well delineated from the surrounding pancreas and its cut surface had a soft honeycomb spongy appearance.

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

**Case No. 3 - November 2010 A**

**Tissue from: Pancreas**

**Accession #30544**

**Clinical Abstract:**

A 70 year old woman presented with radiating lower back pain. There was no jaundice. A CT scan showed a complex mass in the body and tail of the pancreas. The patient's CA19-9 was elevated.

**Gross Pathology:**

The distal pancreatectomy specimen contained a 6.5 cm firm mass with cystic spaces containing cheesy material.

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

**Case No. 4 - November 2010 A**

**Tissue from: Liver**

**Accession #31181**

**Clinical Abstract:**

A 41 year old man presented with abdominal pain. Work-up for possible colon cancer found two large liver masses. The colonic work-up was benign. After careful questioning, the patient admitted to using anabolic steroids for muscle build-up 10-15 years earlier.

**Gross Pathology:**

The 1732 gram, 20 x 18 x 10 cm portion of liver contained a 16 cm diameter irregular, multinodular mass. Within the mass were foci of cystic change, hemorrhage and scar.

**Contributor: Julio Ibarra, M.D.**  
**La Jolla, CA**

**Case No. 5 - November 2010 A**

**Tissue from: Liver**

**Accession #30969**

**Clinical Abstract:**

This 68 year old man with a history of hepatitis B was found to have an elevated alpha-fetoprotein and liver masses. He underwent a left hepatic lobectomy and radiofrequency ablation of segments 5 and 8.

**Gross Pathology:**

The 29 gram, 8.5 x 4.3 x 2.2 cm resection specimen had a bulging well-circumscribed 2.3 cm nodule.

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**Contributor: Chester A. Spears, M.D.**  
**Sikeston, MO**

**Case No. 6 - November 2010 A**

**Tissue from: Stomach**

**Accession #31258**

**Clinical Abstract:**

After biopsy, this 53 year old man underwent a gastrectomy.

**Gross Pathology:**

The 19 x 13 cm gastrectomy specimen had a 4 x 4 x 1 cm gray-white elevated mass that extended through the entire thickness of the gastric wall.

**Contributor: Alexandra Reichman, M.D.**  
**Marysville, CA**

**Case No. 7 - November 2010 A**

**Tissue from: Duodenum**

**Accession #31200**

**Clinical Abstract:**

This 41 year old man presented with abdominal pain and upper GI tract bleeding. A CT scan showed a thickened duodenum without associated adenopathy. He underwent a pancreaticoduodenectomy.

**Gross Pathology:**

The 16 cm long segment of duodenum had an area of mucosal depression and erythema just distal to the ampulla. Immediately underlying this region was a 4.8 cm diameter mass.

Special Studies:

Positive: Cytokeratin AE1, CAM5.2

Negative: Chromogranin, Synaptophysin

In situ hybridization for EBV: positive

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

**Case No. 8 - November 2010 A**

**Tissue from: Left colon**

**Accession #31263**

**Clinical Abstract:**

A 44 year old woman presented with abdominal pain and was found to have a left colonic intussusception with obstruction.

**Gross Pathology:**

The 530 gram, 54 cm long portion of large bowel contained a 5.2 x 4.9 x 1 cm fungating polypoid mucosal mass.

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

**Case No. 9 - November 2010 A**

**Tissue from: Liver**

**Accession #31244**

**Clinical Abstract:**

This 58 year old woman had stage IV colon cancer and underwent partial resection of the liver for multiple liver metastases.

**Gross Pathology:**

Six portions of liver contained ill-defined firm white nodules varying from 2 to 3.5 cm in greatest diameter.

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

**Case No. 10 - November 2010 A**

**Tissue from: Colon and ileum**

**Accession #31285**

**Clinical Abstract:**

This 21 year old man presented with diarrhea and weight loss. Evaluation for sprue was negative. A CT scan showed generalized thickening of the bowel wall in the terminal ileum and cecum. After biopsies, a resection of the affected area was performed.

**Gross Pathology:**

Not available.