

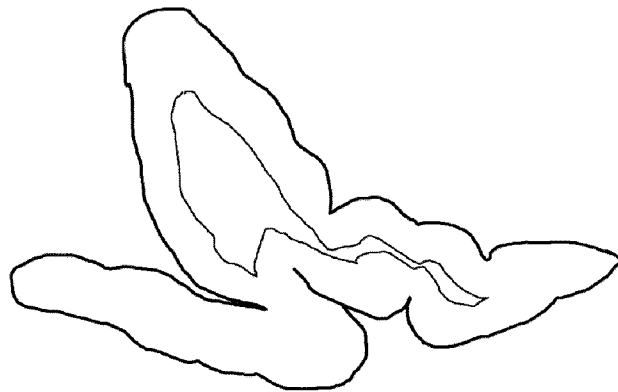


CALIFORNIA
TUMOR TISSUE REGISTRY

“NEUROENDOCRINE PATHOLOGY”

Study Cases, Subscription B

February 2010



California Tumor Tissue Registry
c/o: Department of Pathology and Human Anatomy
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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 - February 2010 B

Tissue from: Pancreas

Accession #30474

Clinical Abstract:

A 53 year old man presented with left upper quadrant abdominal pain. He had lost about 22 pounds during the past 5 months. He complained of diarrhea. A CT scan demonstrated a large mass in the pancreas, with blurring of the plane between the pancreas and spleen, and between the stomach and adrenal gland. Multiple nodules were noted in the liver.

Gross Pathology:

Not available.

Contributor: Xuedong Wang, M.D.
Pasadena, CA

Case No. 2 - February 2010 B

Tissue from: Right adrenal gland

Accession #29472

Clinical Abstract:

Multiple medical problems developed in this 33 year old woman during the late stages of her pregnancy. She was admitted at 36 weeks' gestation because of fetal demise. During work-up, a mass was noted in her right adrenal gland. Very high norepinephrine levels were found.

Gross Pathology:

The 120 gram, 7.5 x 6.5 x 4.8 cm adrenal gland was largely replaced by a yellow-gray mass with areas of necrosis.

**Contributor: Roger Terry, M.D.
San Gabriel, CA**

Case No. 3 - February 2010 B

Tissue from: Right neck

Accession #24816

Clinical Abstract:

For about one year, this 61 year old man had noticed a painless, progressively enlarging mass at the angle of his right jaw. At surgery the mass was posterior and medial to the external carotid artery. The vagus nerve was identified and appeared to enter and exit through the main part of the tumor. It did not involve the carotid body or the surrounding arterial structures.

Gross Pathology:

A 20 gram, 4.0 x 2.5 x 2.2 cm ovoid mass was light tan and bulged from under a thin fibrous capsule.

**Contributor: George Meador, M.D.
San Diego, CA**

Case No. 4 - February 2010 B

Tissue from: Left upper lobe of lung

Accession #12704

Clinical Abstract:

A 49 year old man, a dairy farmer who had never smoked, was found to have a coin lesion on routine chest x-ray. The mass had not been present on a radiograph taken two years earlier.

Gross Pathology:

The 4.5 x 3 x 2 cm pyramidal portion of lung contained a 2.3 x 1.8 x 1.5 cm sharply circumscribed light gray, firm nodule.

**Contributor: John H. Manwaring, M.D.
Greenbrae, CA**

Case No. 5 - February 2010 B

Tissue from: Right testicle

Accession #24734

Clinical Abstract:

A young man was told by his girlfriend during a conjugal visit that he had a right testicular mass.

Gross Pathology:

The 5 x 3 x 3 cm resected testicle contained a sharply defined yellow rubbery mass in the center of the testis.

Contributor: LLUMC Pathology Group (np)

Case No. 6 - February 2010 B

Tissue from: Right lung

Accession #30635

Clinical Abstract:

At the time of a parathyroidectomy for hyperparathyroidism and hypercalcemia, this 64 year old man was found to have a large mass involving the right upper lobe of lung, extending into the right superior mediastinum and encompassing the aorta, superior vena cava, pericardium, trachea and esophagus. He died about a week after the surgery and an autopsy was performed.

Gross Pathology:

A 12 x 7 x 3 cm mass infiltrated the right lung, right main bronchus, superior vena cava and upper portion of the heart. The tumor was soft, friable and hemorrhagic.

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

Case No. 7 - February 2010 B

Tissue from: Retroperitoneum

Accession #31132

Clinical Abstract:

This 10 year old boy had recently undergone chemotherapy for a retroperitoneal mass involving colon, spleen, pancreas, superior mesenteric artery, celiac axis, left kidney and aorta. A composite resection of retroperitoneal tumor with distal pancreas, spleen and left sided colon was performed.

Gross Pathology:

The 1,026 gram specimen included a 12 x 10 x 6 cm mass composed of both solid and cystic regions. The tumor parenchyma was generally white glistening and gelatinous with firm white areas.

**Contributor: J. J. Bocian, M.D.
Fresno, CA**

Case No. 8 - February 2010 B

Tissue from: Pelvic and sacral soft tissues

Accession #19362

Clinical Abstract:

A 16 year old girl was hospitalized for severe left hip and leg pain. Rectal exam shoed an exquisitely tender, knobby, irregular mass in the hollow of the sacrum, seemingly along the sheath of the sciatic nerve. A barium enema showed displacement of the rectosigmoid to the right by an adjacent mass.

Gross Pathology:

A 12 x 8 x 7 cm non-encapsulated hard mass was attached to the posterior aspect of the uterus and infiltrated the right buttock and sacral canal.

**Contributor: Joseph Carberry, M.D.
Lynwood, CA**

Case No. 9 - February 2010 B

Tissue from: Thyroid

Accession #21076

Clinical Abstract:

Because of a non-function firm mass in the left lobe of her nodular thyroid, this 72 year old woman underwent a total thyroidectomy. Family history included a daughter with thyroid cancer and a grandson with a pheochromocytoma.

Gross Pathology:

The 17 gram, 5 x 3.5 x 2.4 cm left lobe of thyroid was occupied by a 4 x 2.4 x 2.2 cm firm nodule. The cut surface was solid, firm and focally calcified with areas varying from tan and yellow to hemorrhagic and pink.

Special Studies:

Positive: Congo red

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

Case No. 10 - February 2010 B

Tissue from: Right ear

Accession #30981

Clinical Abstract:

An 87 year old man had a mass in the skin near his ear requiring resection of the right parotid gland and right external ear.

Gross Pathology:

The 141 gram resection specimen included a portion of the right ear, 4 cm of skin, right parotid, right neck contents and a portion of temporal bone. A 6.4 x 6 x 4 cm lobulated tumor was present immediately below the ear. The cut surface was white-tan with occasional areas of hemorrhage.

Special Studies:

Positive: CK 20 (dot-like positivity), synaptophysin, NSE

Negative: CK7, Chromogranin