

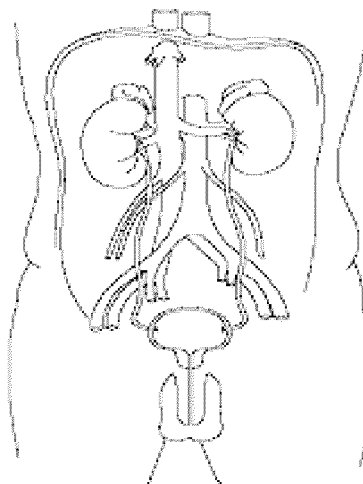


CALIFORNIA
TUMOR TISSUE REGISTRY

“GENITOURINARY PATHOLOGY”

Study Cases, Subscription B

February 2013



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

Case No. 1 - February 2013 B

Tissue from: Left kidney

Accession #31586

Clinical Abstract:

A 2 year-old girl presented with a large kidney mass and small lung lesions.

Gross Pathology:

The 350 gram, 12 x 8.5 x 5 cm kidney showed a 6.8 x 5 x 4 cm granular mass protruding from the renal hilum.

**Contributor: James C. Valentine, M.D.
San Diego, CA**

Case No. 2 - February 2013 B

Tissue from: Left kidney

Accession #31584

Clinical Abstract:

At the time of an appendectomy complicated by perforation, this 39 year-old woman was found to have a left renal complex cyst. After she recovered from post-operative complications, the renal mass was resected.

Gross Pathology:

The lower pole of the left kidney showed a 4.5 x 4 x 3.5 cm round encapsulated tumor with homogeneous yellow-tan bulging cut surfaces.

Special Studies:

Positive: RCC

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

Case No. 3 - February 2013 B

Tissue from: Left kidney

Accession #31517

Clinical Abstract:

This 62 year-old man had a left renal mass.

Gross Pathology:

The 46 gram partial nephrectomy specimen consisted of a 6 x 4 x 4 cm homogeneous white tumor with foci of hemorrhage

Contributor: Cynthia Pettross, M.D.
Marysville, CA

Case No. 4 - February 2013 B

Tissue from: Right ureter

Accession #26358

Clinical Abstract:

A 28 year-old woman presented with left groin pain and was found to have a left groin hernia. At age 4 she had had problems with urinary retention and an IVP at that time showed normal kidney. She underwent an unspecified procedure for her urinary retention problems. An IVP perform for work-up of her groin hernia showed right hydroureter and obstruction in the region of the ureterovesicular valve and several calcifications in the renal pelvis. At the time of her herniorrhaphy a right pelvic mass involving the right ureter was removed.

Gross Pathology:

The 5 x 3 x 3 cm mass encased the ureter and consisted of irregular nodular dense fibrous tissue with areas of hemorrhage.

Special Studies:

Trichrome stain showed predominantly blue/green staining surrounding the red-stained ureteral wall.

Contributor: Kenneth A. Frankel, M.D.
Covina, CA

Case No. 5 - February 2013 B

Tissue from: Ureter

Accession #25194

Clinical Abstract:

This 76 year-old woman presented with lower abdominal pain. Work-up showed a mass just superior to the bladder on the left side. Six years previously she had had cervical adenosquamous carcinoma treated with surgery and radiotherapy.

Gross Pathology:

The left ureter was submitted in multiple fragments up to 4.6 cm in diameter. The lumina of the ureteral segments were distended by soft, purple-tan tissue.

Contributor: Paul Thompson, M.D.
Pasadena, CA

Case No. 6 - February 2013 B

Tissue from: Right ureter

Accession #14959

Clinical Abstract:

This 74 year-old man noted painless gross hematuria. Cystoscopy showed a polypoid mass on the posterior wall of the urinary bladder, which was removed. In follow-up, a non-functioning right kidney was discovered with radiographic studies showing a filling defect in the lower end of the lower end of the right ureter. A right nephro-ureterectomy was performed.

Gross Pathology:

The resected kidney was a hydronephrotic shell with only 2-3 mm of remaining parenchyma. The lower portion of the ureter was 4.5 cm in cross-sectional diameter. A villous growth filled the ureter and appeared to invade into, but not through, the ureteral wall.

Contributor: Aaron A. Dubrow, M.D.
Lake View Terrace, CA

Case No. 7 - February 2013 B

Tissue from: Left testicle

Accession #23261

Clinical Abstract:

This 19 year-old man presented with an asymptomatic left testicular mass of reportedly recent onset.

Gross Pathology:

The 60 gram testicular resection specimen showed a 4.2 cm diameter gray-white mass replacing much of the testis. The tumor was gray-white, spongy and mucoid.

Contributor: Louis Sarbeck, M.D.
Tallahassee, FL

Case No. 8 - February 2013 B

Tissue from: Testis

Accession #31504

Clinical Abstract:

This 23 year-old man with congenital adrenal hyperplasia presented with a testicular mass.

Gross Pathology:

The 38 gram testicle contained a 4.2 x 2.2 cm tan tumor.

Contributor: Harlan F. Fulmer, M.D.
Fresno, CA

Case No. 9 - February 2013 B

Tissue from: Right testis

Accession #13109

Clinical Abstract:

A 53 year-old man complained of a painful swollen right testicle. He had a history of prior bouts of bilateral epididymo-orchitis. He also reported a testicular injury 30 years previously and stated that since that time, the right testis had been slightly larger and more firm than the left.

Gross Pathology:

The right testis was 5.5 x 3.5 cm and contained a sharply circumscribed 4.2 x 3.2 cm mass in the inferior pole. The cut surface of the mass was variegated granular, pink-tan and dark red hemorrhagic with cystic areas.

Contributor: John H. Manwaring, M.D.
San Rafael, CA

Case No. 10 - February 2013 B

Tissue from: Left testis

Accession #20197

Clinical Abstract:

A 55 year-old man complained of scrotal enlargement. He had a history of prior hydrocele but this enlargement did not transilluminate. An orchiectomy was performed.

Gross Pathology:

Not available.