



CALIFORNIA
TUMOR TISSUE REGISTRY

“PATHOLOGY of BONE & CARTILAGE”

Study Cases, Subscription B

January 2013



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
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: William L. Wigmore, M.D.
Los Angeles, CA**

Case No. 1 - January 2013 B

Tissue from: Left femoral head

Accession #18768

Clinical Abstract:

A 22 year-old woman had pain in her left hip with decreased motion. She had had a splenectomy three years earlier following an automobile accident. Physical examination showed no organomegaly. Radiographs of the hip were interpreted as consistent with avascular necrosis.

Gross Pathology:

The articular surface of the femoral head was slightly roughened. On the edges of the femur was soft yellow-tan gelatinous material and similar material was submitted separately.

**Contributor: Julio A. Ibarra, M.D.
Long Beach, CA**

Case No. 2 - January 2013 B

Tissue from: Ethmoid bone

Accession #25678

Clinical Abstract:

A 24 year old man complained of mild protrusion of his right eye and diplopia. CT scan showed a dense smooth bony tumor arising in the ethmoid bone.

Gross Pathology:

The 3 x 2 x 1.5 cm diameter specimen consisted of bone with intermixed fibrous tissue.

**Contributor: A. I. Rajala, M.D.
Santa Barbara, CA**

Case No. 3 - January 2013 B

Tissue from: Left fifth finger

Accession #25395

Clinical Abstract:

This 14 year-old boy had a mass on his left fifth finger.

Gross Pathology:

The distal finger was 3.2 x 2.2 x 1.8 cm and contained a multicystic hemorrhagic mass.

**Contributor: J. D. Kirshbaum, M.D.
Encino, CA**

Case No. 4 - January 2013 B

Tissue from: Distal radius

Accession #13112

Clinical Abstract:

This 24 year-old woman presented with her second recurrence of a mass in the distal radius. Radiographically, each occurrence showed a lytic lesion.

Gross Pathology:

The curetted specimen consisted of many fragments forming a 3 cm aggregate of soft tan tissue.

**Contributor: Arnold Channing, M.D.
Canoga Park, CA**

Case No. 5 - January 2013 B

Tissue from: Floor of mouth

Accession #26303

Clinical Abstract:

This 65 year-old woman noted an enlarging mass in her mouth for several months.

Gross Pathology:

The resection specimen was submitted as multiple rubbery gray fragments forming a 10 gram aggregate.

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

Case No. 6 - January 2013 B

Tissue from: Left ankle

Accession #31572

Clinical Abstract:

This 33 year-old man noticed impaired motion in his left ankle, clinically interpreted as a tumor involving the ankle joint.

Gross Pathology:

The specimen was submitted in multiple fragments weighing together more than 10 grams. The fragments were nodular, glistening white-tan.

Contributor: Gary N. Pontrelli, M.D.
Ventura, CA

Case No. 7 - January 2013 B

Tissue from: Left proximal tibia

Accession #31496

Clinical Abstract:

This 18 year-old man was found to have a left tibial mass.

Gross Pathology:

The 30 gram curetted specimen consisted of nodular glistening gray to pink-tan fragments

Contributor: D. R. Dickson, M.D.
Santa Barbara, CA

Case No. 8 - January 2013 B

Tissue from: Right patella

Accession #25897

Clinical Abstract:

This 37 year-old man first noted pain in his right patella while running in a basketball game. Radiographs showed a fracture through a lytic lesion

Gross Pathology:

The curetted specimen formed a 3 x 1.5 x 1 cm aggregate of firm rubbery glistening pink-white fragments.

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

Case No. 9 - January 2013 B

Tissue from: Right fibula

Accession #31476

Clinical Abstract:

A 36 year-old man had a mass in his right leg.

Gross Pathology:

The composite resection specimen included a 10 x 8 x 6.5 cm soft gray-white lobular mass arising from the proximal fibula.

Contributor: Robert L. Berggren, M.D.
Orange, CA

Case No. 10 - January 2013 B

Tissue from: Left index finger

Accession #25689

Clinical Abstract:

A 93 year-old woman had an eleven year history of a mass in her left index finger. It have been partially resected twice before and recurred sometime later. She underwent a ray amputation of her index finger.

Gross Pathology:

The resected finger showed marked distortion by a 3.7 cm bosselated mass involving the proximal phalanx and extending to the proximal portion of the middle phalanx.