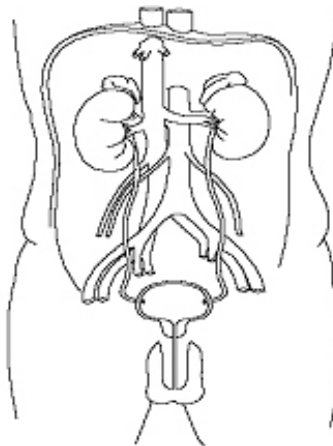


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“GENITOURINARY PATHOLOGY”**

**Study Cases, Subscription B**

**April 2016**



**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@llu.edu](mailto:cttr@llu.edu)**  
**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  
Anwar Raza, MD  
Darryl Heustis, MD

**CME/SAM 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. It also qualifies for up to 2 hours of SAM credit by the American Board of Pathology.  
CME/SAM 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.

**Case No. 1 - April 2016 B**

**Accession # 14776**

**Tissue from: Prepuce**

**Clinical Abstract:** This 67 year old male patient noted increased amount of white material under his uncircumcised prepuce about 3 – 4 years earlier; this was associated with progressive burning and irritation of the glans penis. A year prior to admission the head of the penis became red. The area had been treated with local antibiotic ointment.

**Gross Pathology:** The uncircumcised distal end of the penis was 5.5 cm long. The mucosa over the prepuce and glans contained numerous scattered velvety white discrete plaques up to 0.8 cm in diameter.

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**Case No. 2 - April 2016 B**

**Accession # 8222**

**Tissue from: Prostate**

**Clinical Abstract:** 78 year old male with symmetrically enlarged prostate, progressive difficulty in voiding, dysuria, nocturia and occasional incontinence.

**Gross Pathology:** 50 gram prostate gland with nodular enlargement of both lateral lobes by grey-white nodules averaging 1 cm in diameter. In the posterior lobe there was a firm, irregular nodule which was lighter in color than the rest of the gland.

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**Case No. 3 - April 2016 B**

**Accession # 19684**

**Tissue from: Prostate**

**Clinical Abstract:** 69 year old Caucasian male complaining of dysuria.

**Gross Pathology:** The specimen consists of 35 gram of pink to grey transurethral resected fragments of prostatic tissue.

**Case No. 4 - April 2016 B**

**Accession # 8624**

**Tissue from: Prostate**

**Clinical Abstract:** This 61 year old man presented with urinary obstruction and perineal pain.

**Gross Pathology:** The specimen appeared stony hard with a homogeneous cut surface that grossly suggested ordinary carcinoma of the prostate.

Special studies:

Desmin                      Positive

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**Case No. 5 - April 2016 B**

**Accession # 31736**

**Tissue from: Left radical orchiectomy**

**Clinical Abstract:** 74 year old male presented with a left testicular mass. He is 7 years status post hydrocoelectomy for progressive scrotal enlargement after trauma.

**Gross Pathology:** 4.5 x 3.7 x 3.7 cm homogeneous pale tan mass was present occupying approximately 80% of the testis.

Special studies:

Tumor positive for:

CK  
Pan CK  
EMA  
Calretinin  
CD 10

Tumor negative for:

AFP  
CD 30  
Beta HCG  
D2-40  
CD 117  
OCT4  
PLAP

**Case No. 6 - April 2016 B**

**Accession # 31907**

**Tissue from:** Right kidney

**Clinical Abstract:** 85 year old female

**Gross Pathology:** 9.5 x 6.5 x 5.0 cm brown mass was present in the lower pole of the kidney with multiple scattered irregular white areas. Tumor was seen to abut the renal capsule and renal pelvis, but did not appear to grossly invade either. The remainder of the kidney was unremarkable.

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**Case No. 7 - April 2016 B**

**Accession # 23026**

**Tissue from:** Left kidney

**Clinical Abstract:** 5 week old male infant was found to have a renal mass

**Gross Pathology:** A pale grey-white fleshy 5.2 cm mass with focal areas of hemorrhage, degeneration and semi-cystic change showed no distinct encapsulation, though the margin was very sharp. The remaining kidney was distorted. The entire mass and kidney weighed 74 gram.

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**Case No. 8 - April 2016 B**

**Accession # 28922**

**Tissue from:** Left kidney

**Clinical Abstract:** 18 year old male with abrupt onset of gross hematuria with a large left renal mass found on CT.

**Gross Pathology:** A 9.0 x 7.5 x 6.0 cm ovoid white-pink mass with necrosis and a whorled cut surface caused bulging of the kidney.

Special studies:

Tumor was negative for the following stains:

PAS

CK, EMA

Desmin, Actin

NSE, MPO

HMB 45, CD 45

**Case No. 9 - April 2016 B**

**Accession # 20377**

**Tissue from: Right kidney**

**Clinical Abstract:** This 26 year old male had recently been discharged from the hospital with a diagnosis of duodenal ulcer. He developed sudden epigastric pain, localizing to the upper right quadrant, abdominal tenderness and guarding.

**Gross Pathology:** 3.5 x 3.5 x 2.6 cm hemorrhagic, necrotic mass was present involving the lower pole of the right kidney.

Special studies:

None available for this case from the CTTR archives, which was diagnosed based on morphology alone.

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**Case No. 10 - April 2016 B**

**Accession # 19042**

**Tissue from: Right kidney**

**Clinical Abstract:** This 68 year old male was admitted for further evaluation and treatment of stage IV Hodgkin Lymphoma.

**Gross Pathology:** Specimen consists of an irregular, nodular, firm, tan-brown hemorrhagic mass measuring 30 x 23 x 17 mm. Cut surface presents a nodular pale yellow appearance with nodules varying from 1 – 3 mm in diameter.

Special studies:

None available for this case from the CTTR archives, which was diagnosed based on morphology alone.