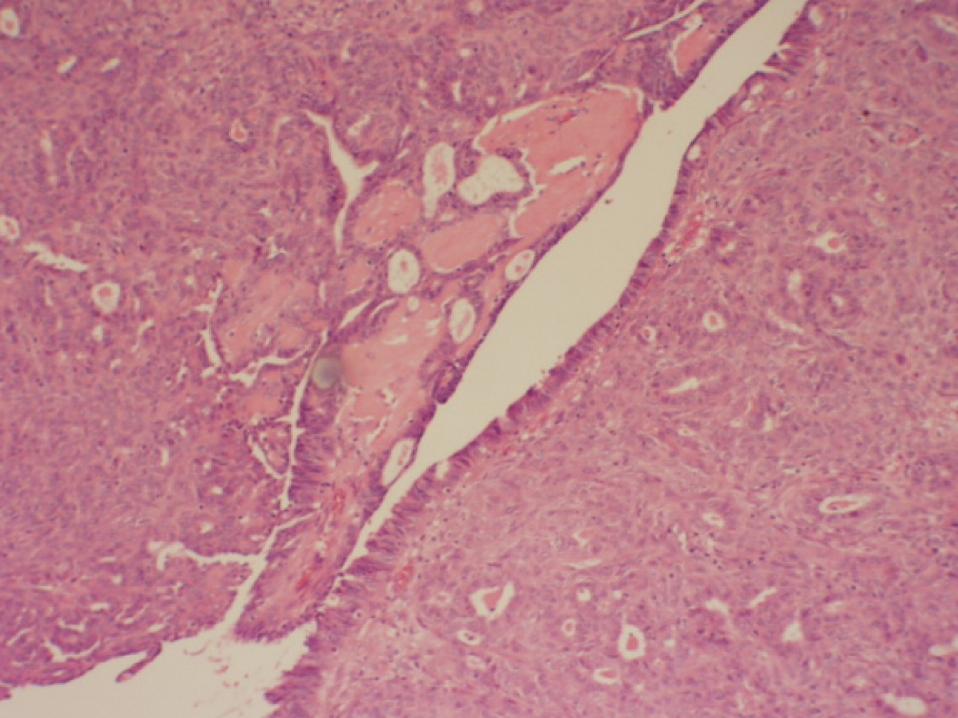
### 2003 PIP-A Cases

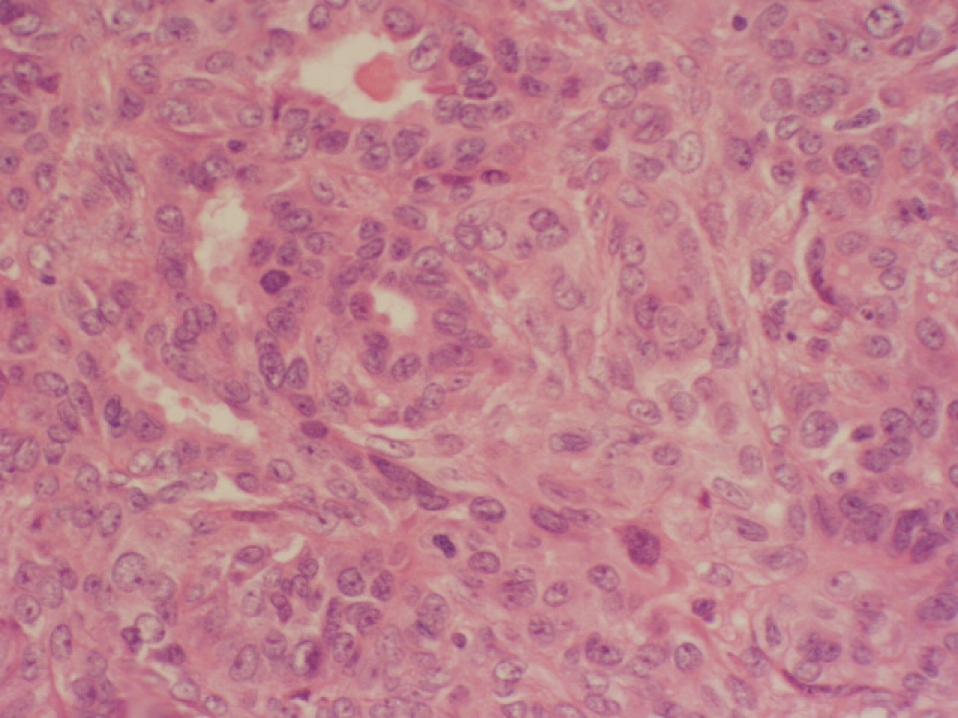
Paul K. Shitabata, M.D.

APMG

May 21, 2003

- 47F pelvic mass involving the right fallopian tube
- 5.5 cm intraluminal mass

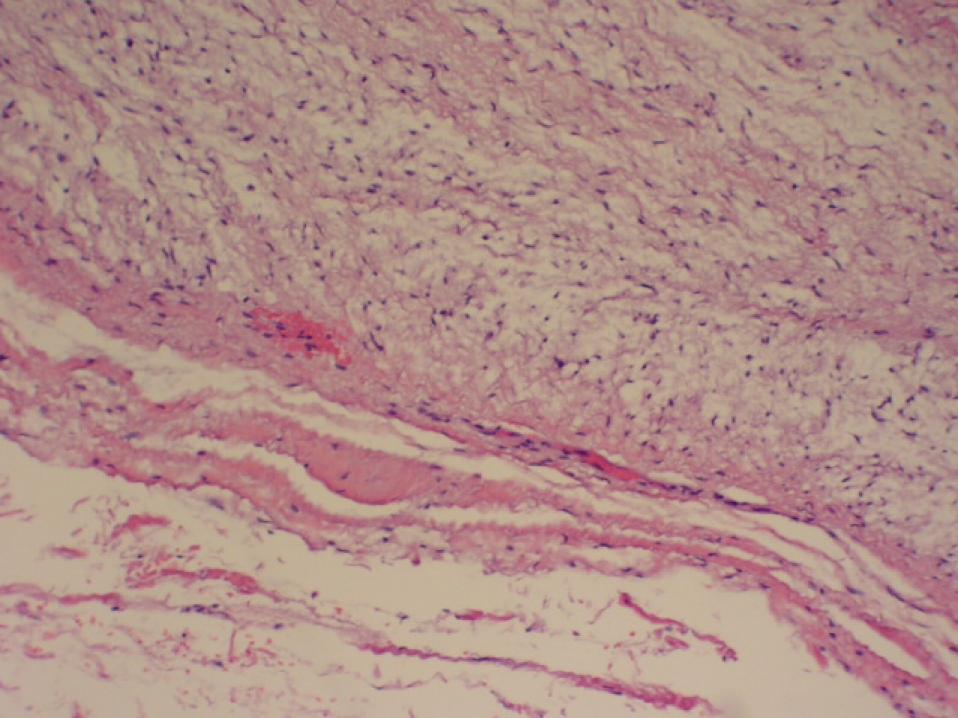


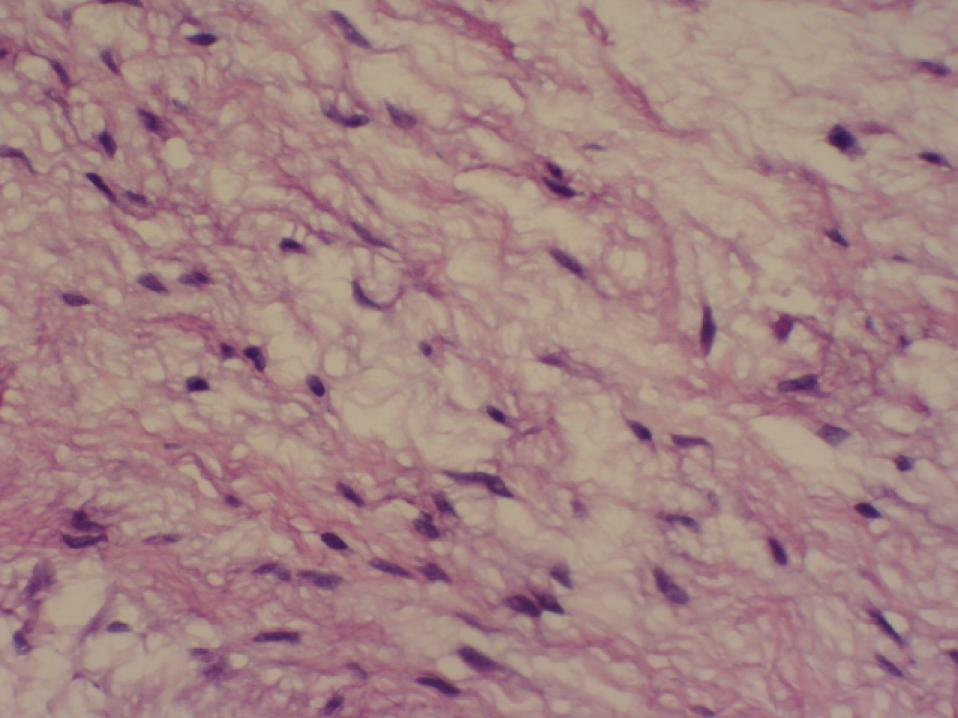


## Fallopian Tube Adenocarcinoma

- Risk factors
  - Breast, endometrial, and ovarian CA
  - Nulliparity
- 3q DNA gain
- DDX:
  - Metastatic carcinoma

- 43F slowly enlarging mass in soft tissue of left hip
- Well demarcated mass 7.5 x 5.0 x 5.0 cm
- Granular gray white mucoid cut surface attached to skeletal muscle



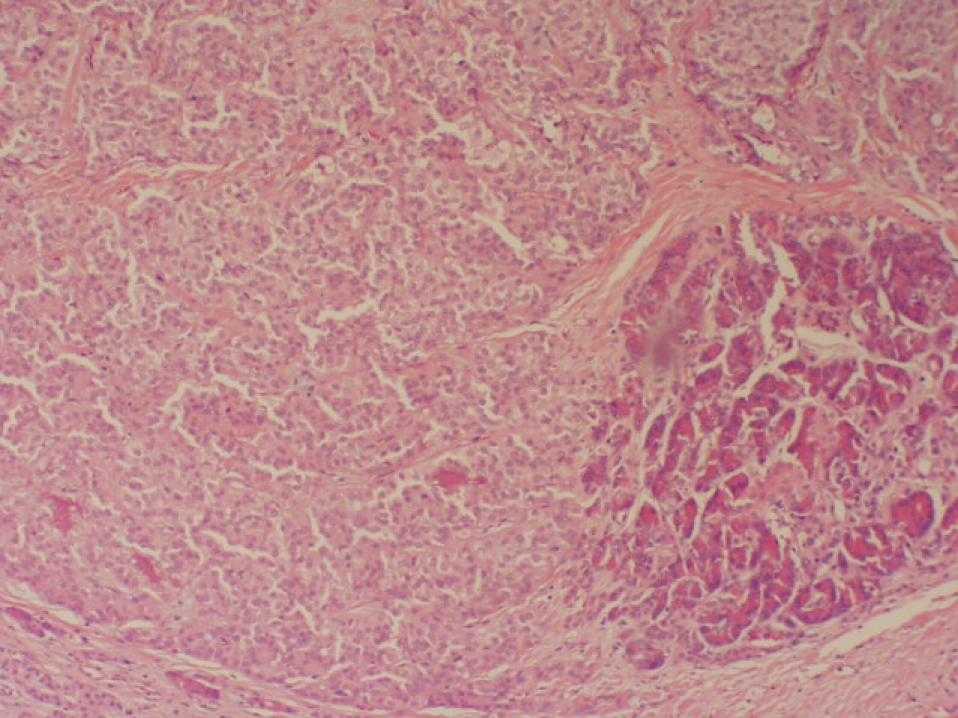


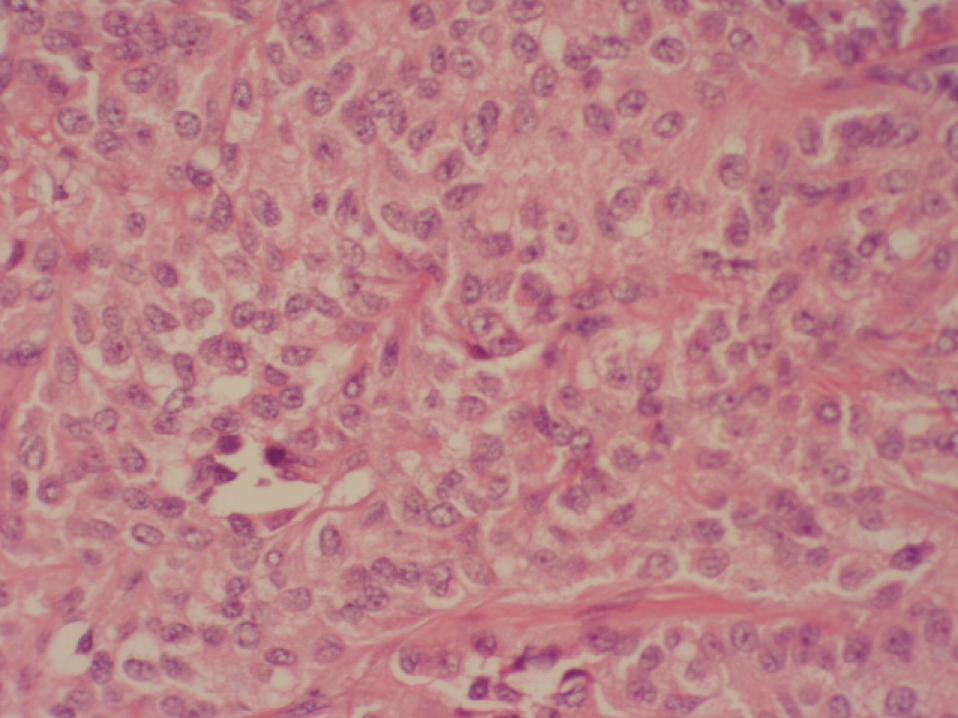
# Juxta-Articular Myxoma

#### DDX:

- Aggressive angiomyxoma
  - Location, clinical history
  - Alternating myxoid hypocellular areas
  - Variable sized vessels, perivascular lymphoid aggregates
- Low grade fibromyxoid sarcoma
  - Young to middle age
  - Absent to minimal atypa
  - Myxoid and fibrous stroma alternating
  - Mets in 50%
- Myxofibrosarcoma, low-grade
  - Continuum with MFH
  - Elderly
  - >50% myxoid and low nuclear grade
  - Mets rare
- Myxoid liposarcoma
- Nodular fasciitis, myxoid variant
  - Lack nuclear hyperchromasia
  - Slit-like spaces

- 27M with mass in head of pancreas
- Whipple performed with 7x5x3 cm poorly circumscribed tumor
- IPOX positive for chromogranin A and negative for trypsin and A1AT

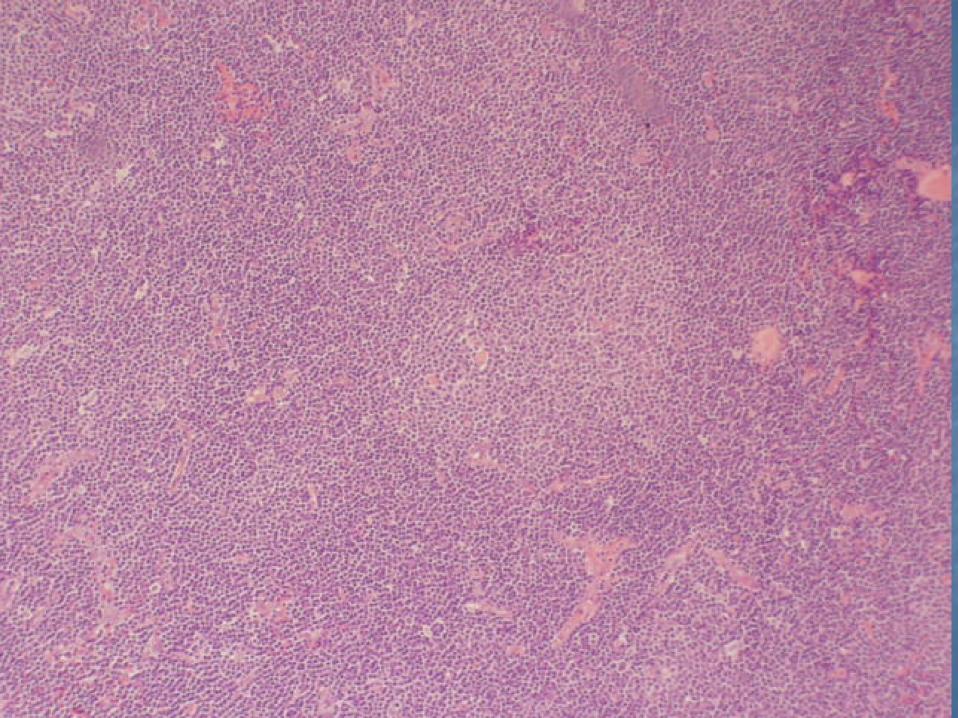


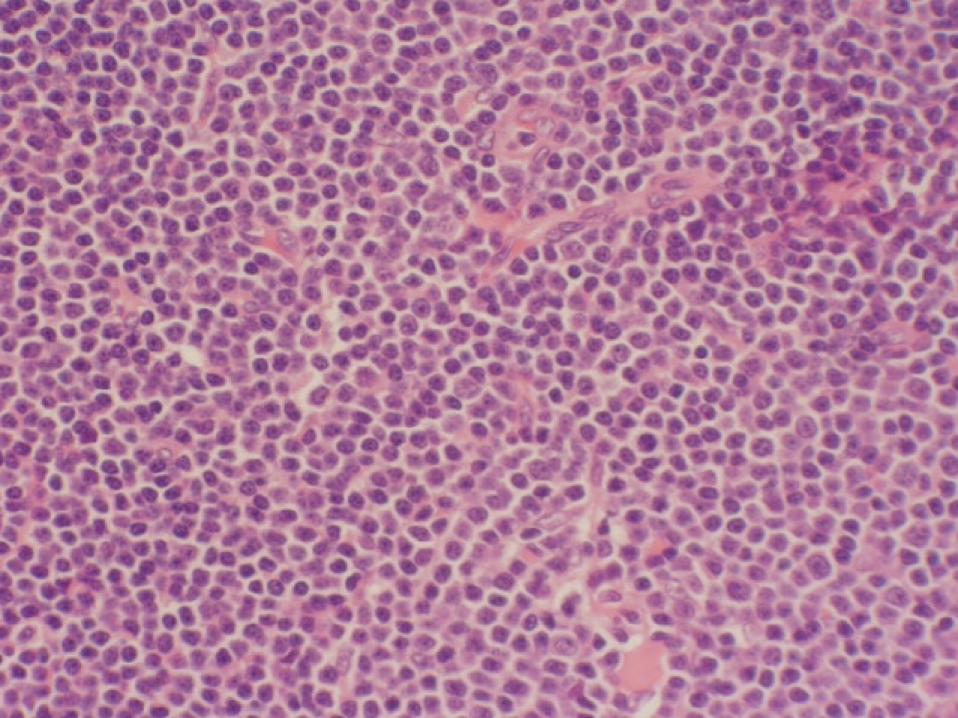


# Pancreatic Endocrine Neoplasm (Islet cell tumor)

- Positive for chromogranin A and negative for trypsin and A1AT
- DDX:
  - Acinar cell carcinoma
    - Positive for trypsin and chymotrypsin
  - Solid-pseudopapillary tumor
    - Positive for vimentin, A1AT, A1CT
  - Nesidioblastosis
    - Most common cause of persistent neonatal hyperinsulinemic hypoglycemia

- 69M with generalized lymphadenopathy
- 3 cm lymph node
- Flow with kappa light chain restriction
  - CD19, CD20, CD5, CD23 positive
  - CD10 negative

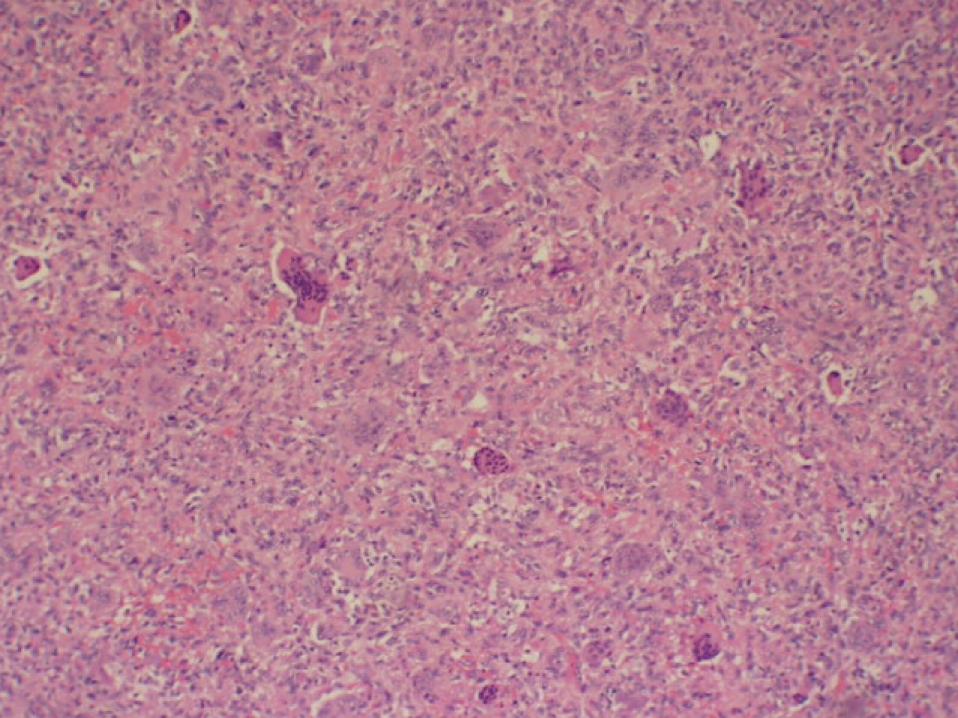


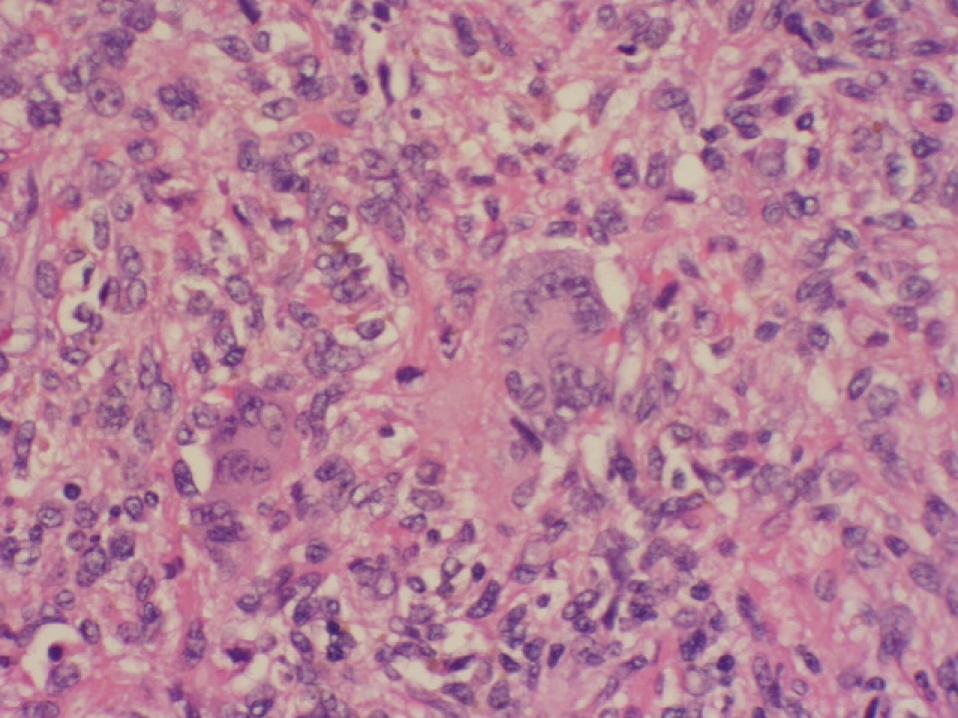


# Small Lymphocytic Lymphoma

- CD19, CD20, CD5, CD23 positive, CD10 negative
- DDX:
  - Mantle cell lymphoma
    - Cyclin D1 positive
  - Nodal marginal zone lymphoma
    - Negative for CD5, CD10, CD234, cyclin D1
  - Lymphoplasmacytic lymphoma
    - Dutcher bodies (PAS positive intranuclear inclusions)

- 25F swelling and pain in right knee
- Radiographs with lytic, well defined lesion in epiphysis of distal femur, extending into metaphysis
  - No perilesional sclerosis or periostal calcifications
- 4x3x3 cm soft fleshy brown red tumor



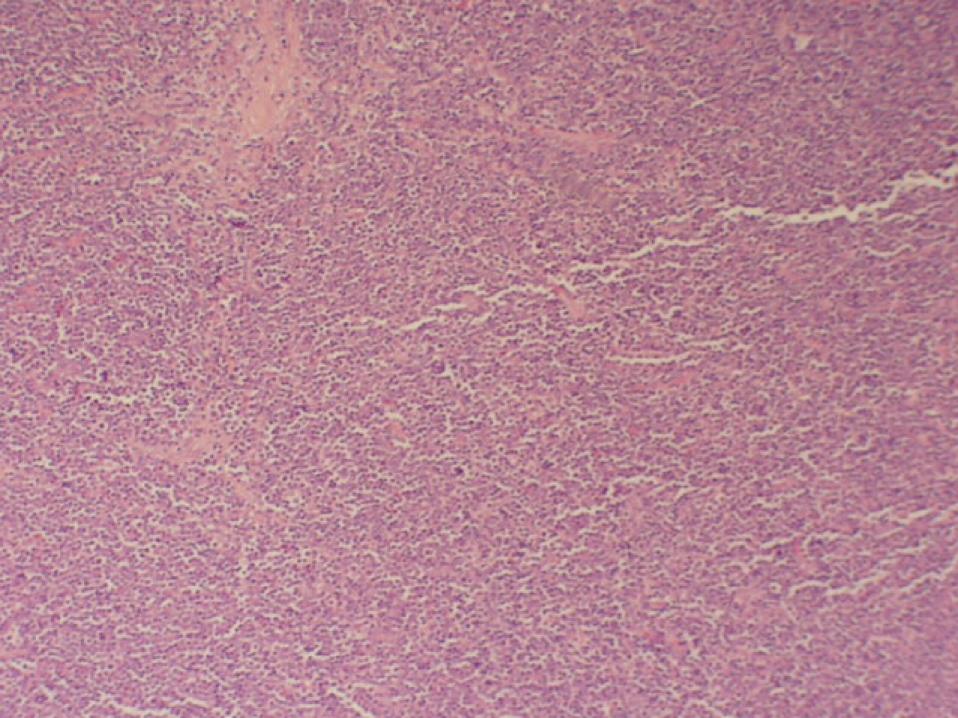


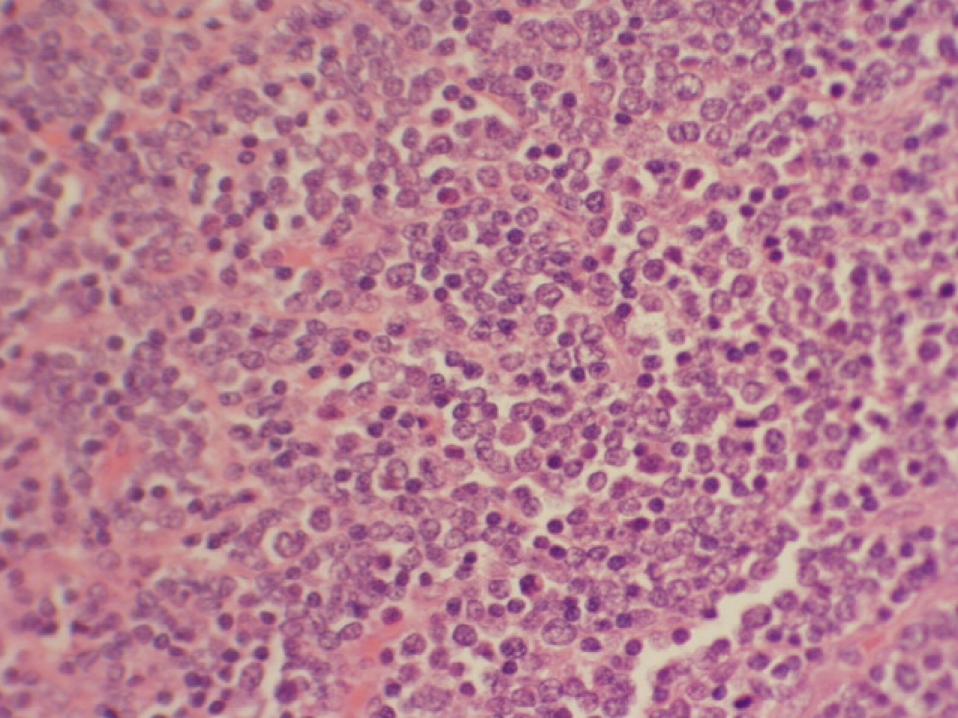
### Giant Cell Tumor of Bone

#### DDX:

- Giant cell reparative granuloma
  - Jaw
- Chondroblastoma
  - Epiphysis
  - Chicken-wire pattern of calcification
- Osteoblastoma
- Osteosarcoma
- Aneurysmal bone cyst

- 29F with enlarging thyroid mass
- Partial thyroidectomy
- Flow cytometry:
  - CD1a, CD2, CD4, CD7, CD8, cytoplasmic CD3, CD34, and Tdt positive
  - CD19, CD20, immunoglobin light chain, MPO and surface CD3 negative

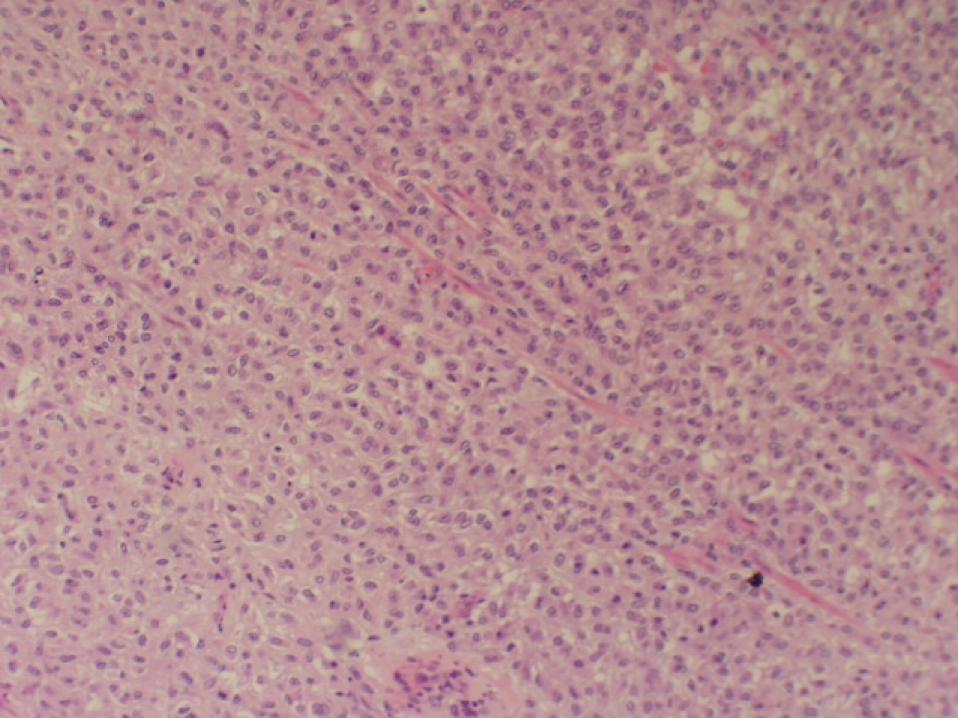


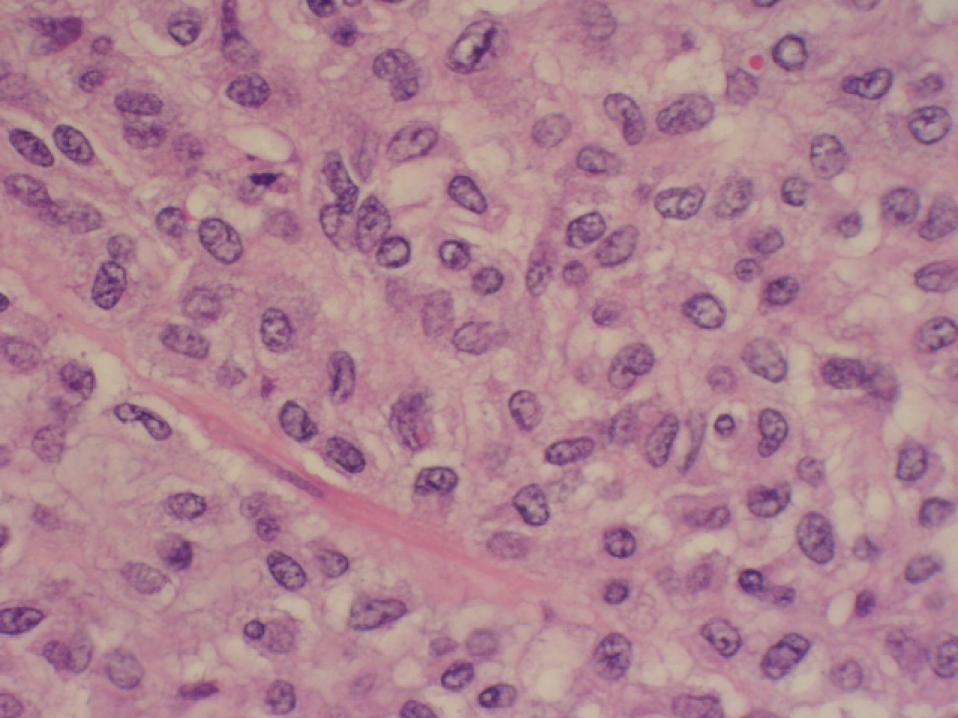


# Precursor T-cell Acute Lymphoblastic Lymphoma

- CD1a, CD2, CD4, CD7, CD8, cytoplasmic CD3, CD34, and Tdt positive
  - CD19, CD20, immunoglobin light chain, MPO and surface CD3 negative
- DDX:
  - Small lymphocytic lymphoma
    - CD19, CD20 (dim), CD5, CD23, and monoclonal surface light chains
  - Mycosis fungoides
    - CD4 with cerebriform nuclei
  - Follicular lymphoma

- 46M dyspepsia and abdominal mass in posterior gastric wall
- 27x16x10 cm mural mass
- IPOX:
  - Positive for CD117, CD34
  - Negative for CK, MSA, SMA, S100

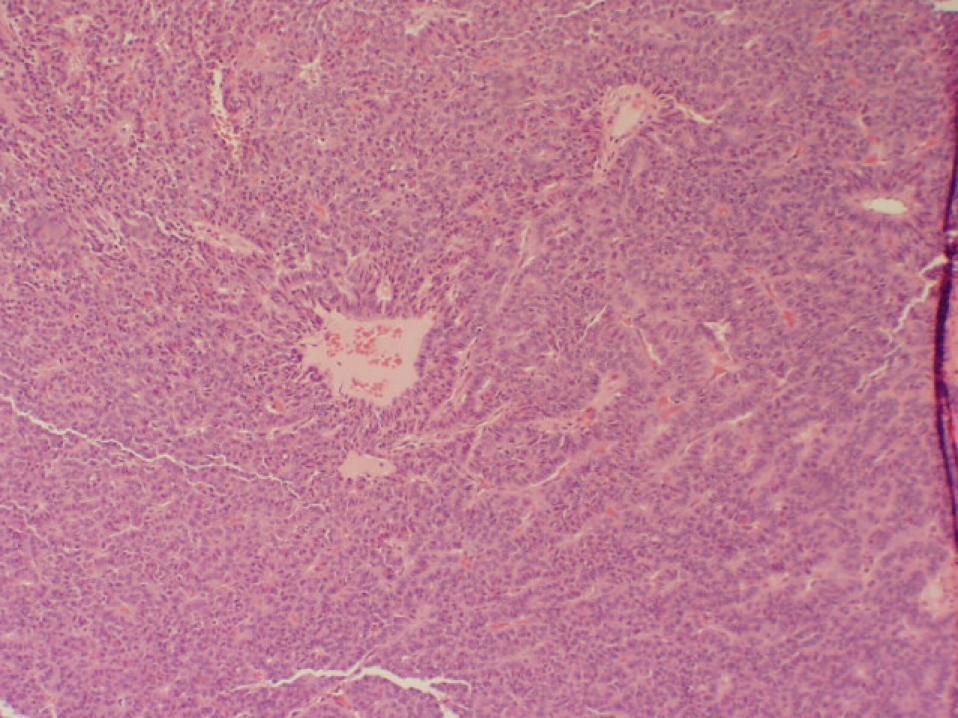


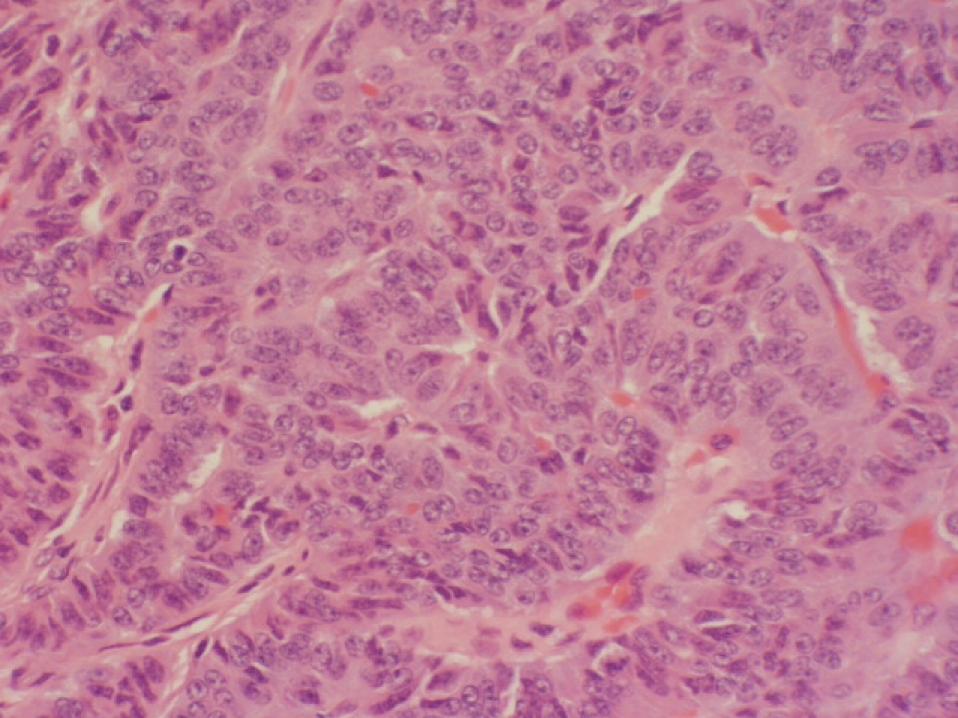


### Gastrointestinal Stromal Tumor

- Positive for CD117, CD34
  - Negative for CK, MSA, SMA, S100
- DDX:
  - Fibromatosis
    - Dense collagenous stroma with only rare epithelioid cells
  - Leiomyoma/leiomyosarcoma
- Treatment
  - Gleevac for recurrence or mets

- 55M smoking history with cough and hemoptysis
- Central right lung mass with lower lobectomy
- Circumscribed 4.7 cm peribronchial mass



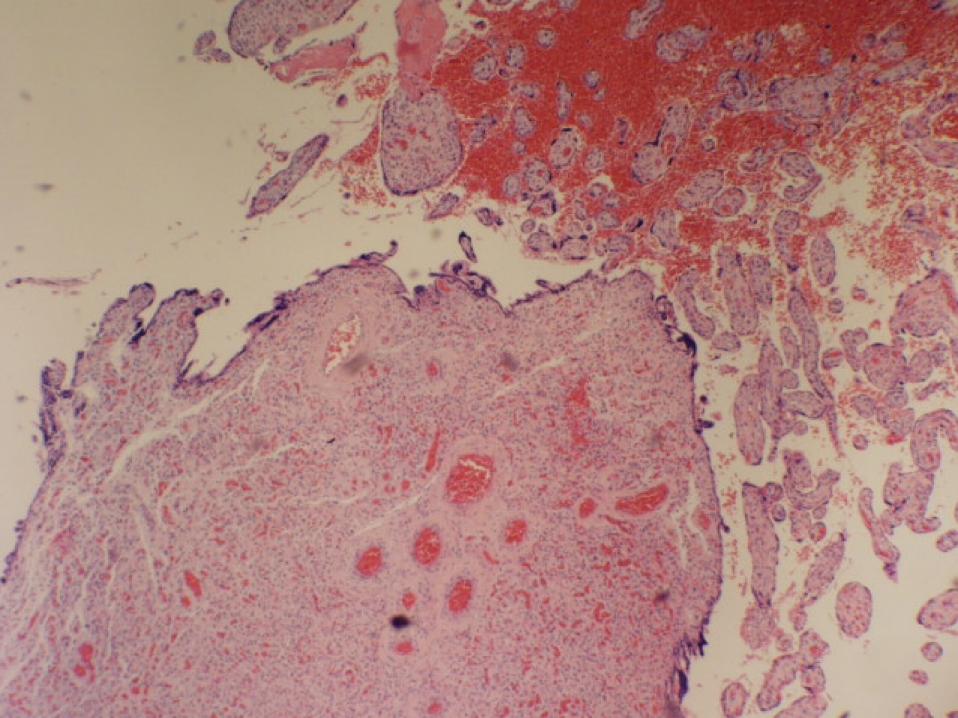


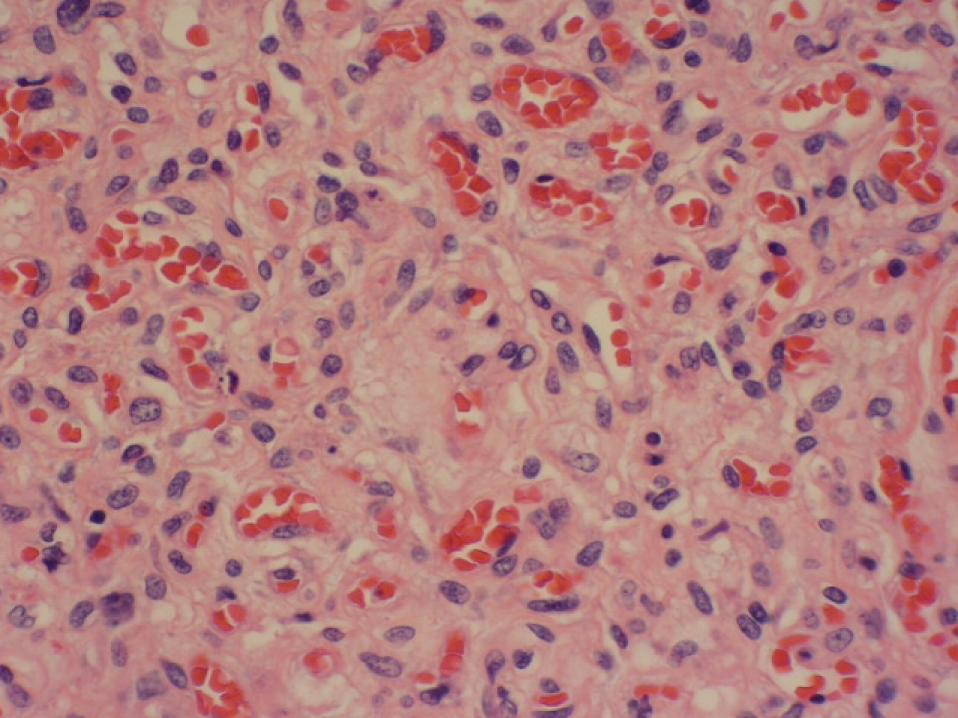
## Typical Carcinoid

#### DDX:

- Small cell carcinoma
  - >10 MF/10hpf
  - Infarct like zones of necrosis
  - Fusiform cells 2-3 x size of small lymphocyte
- Atypical carcinoid
  - **2-10 MF/10hpf**
  - Punctate foci of necrosis
- Pulmonary meningioma
  - Bland spindle cells, lacking mitotic activity
  - EMA and vimentin +
  - Negative for neuroendocrine markers

- 35F, multiparous, hx premature deliveries
- Birth to 1250 gm male fetes at 30 wks
  - No congenital anomalies
  - Apgars 6/7
- 427 gm placenta (18x16.5x2.7)
  - 45 cm umbilical cord
  - Small infarct <5%

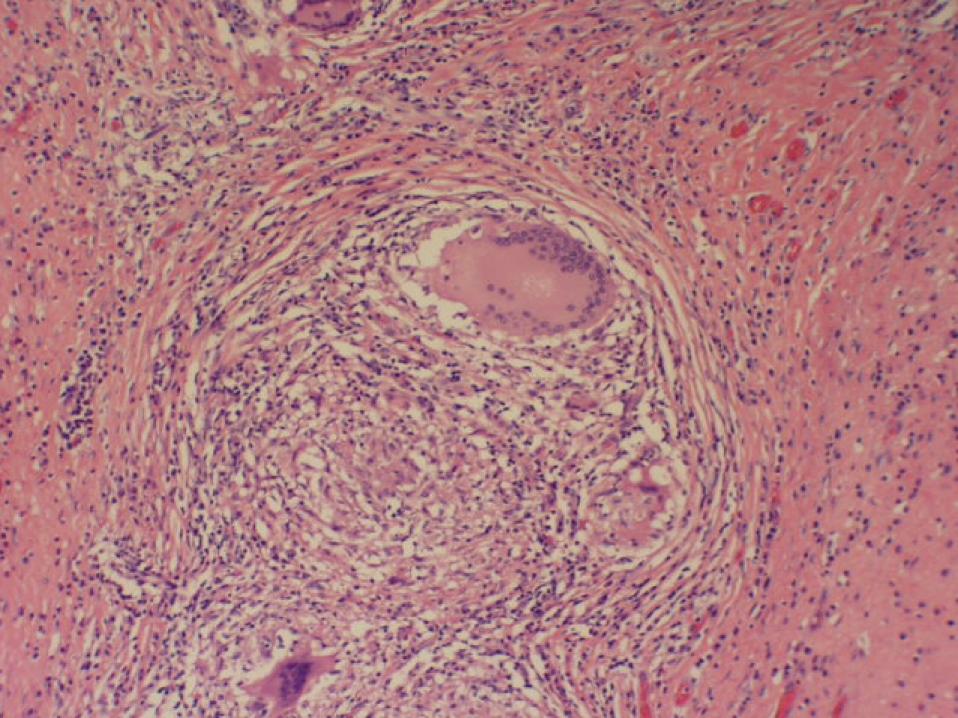


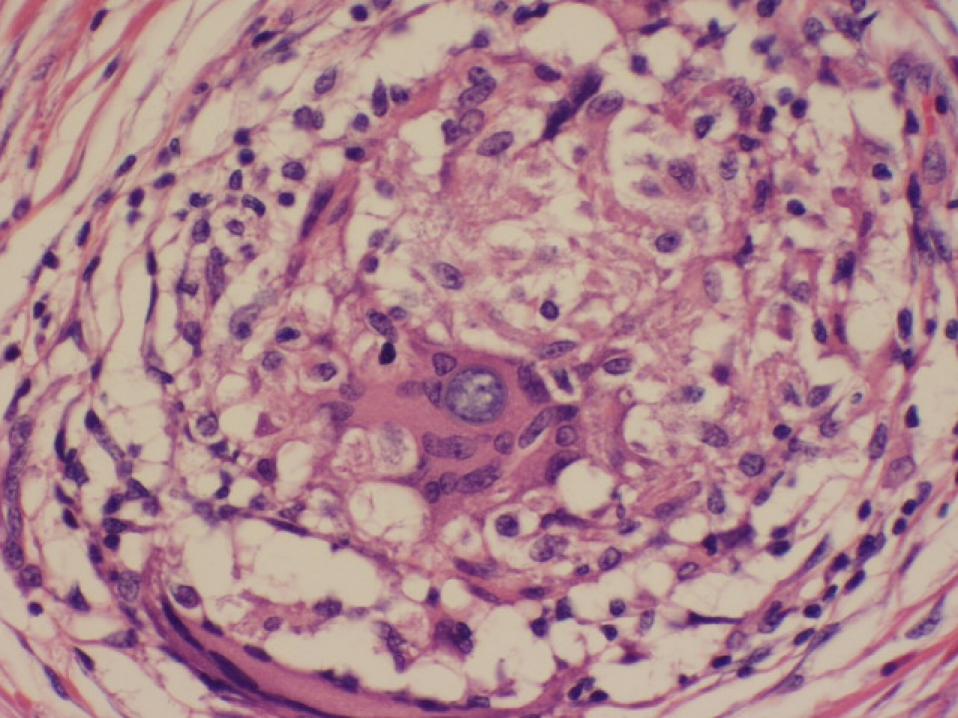


# Chorangiomatosis

- Chorangiomatosis
  - Villous capillary proliferative lesion, commonly multifocal, affecting stem villi
  - Associated with IUGR and congenital malformations
- DDX
  - Chorangiosis
    - Increased numbers of villous capillaries in the terminal villi
    - 10 villi each with 10 or more vascular channels in 10 or more noninfarcted and nonischemic zones of at least 3 different placental areas
  - Chorangioma
    - Solitary or multiple, usually grossly visible
  - Villous congestion

- 17F increasing abdominal girth
- Soft tissue mass and abscess of anterior abdominal wall and omentum
- 5x3.5x0.3 cm irregular white firm mass





### Cocciodomycosis

#### Coccidioidomycosis

30-100um with double walled capsule within which are numerous endospores

#### DDX:

- Histoplasmosis
  - Dimorphic oval-shaped yeast 3-5um in size
  - Narrow base budding with surrounding clear space
- Blastomycosis
  - 6-15um with thick capsule
  - Broad based budding creating dumbbell shape
  - Mucosal infection with pseudoepitheliomatous hyperplasia