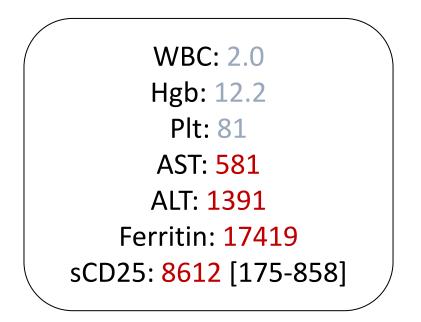
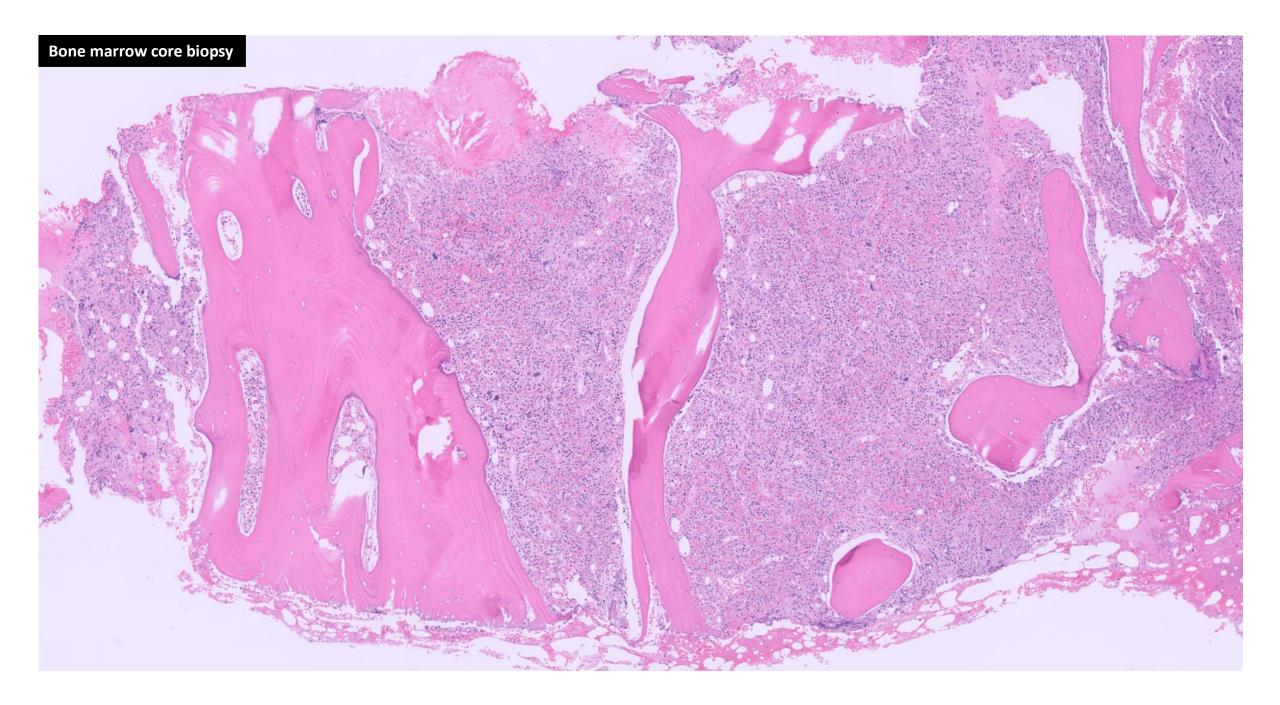
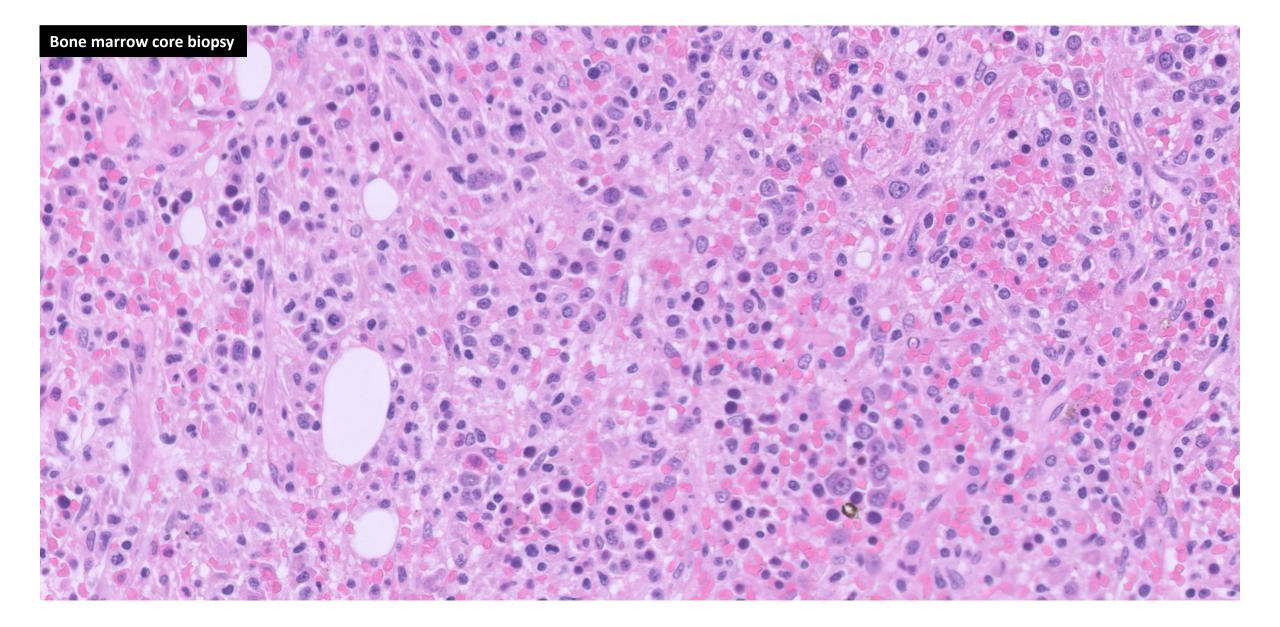
## South Bay Pathology Society April 2025 Web cases

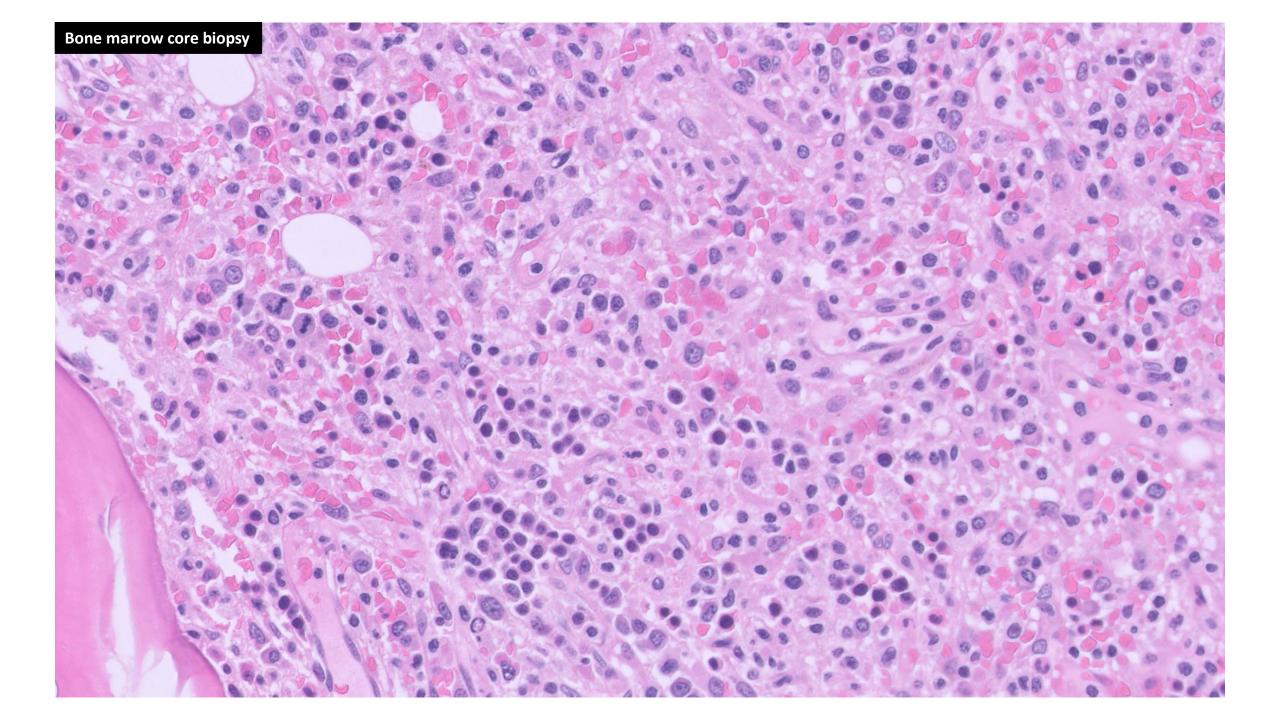
### Aaron Wilk, Oscar Silva; Stanford

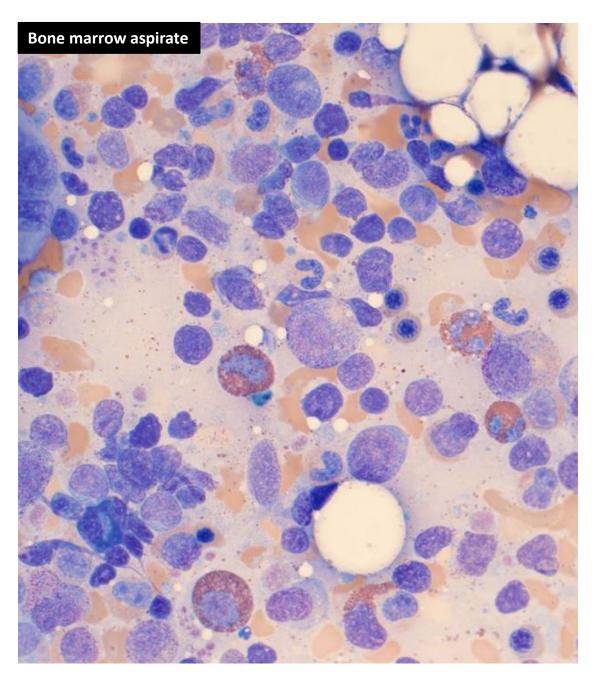
66 Y male with history of hyperlipidemia presents with 2 weeks of fevers, headaches, nausea/vomiting, found to be pancytopenic and have acute liver injury, concern for hemophagocytic lymphohistiocytosis

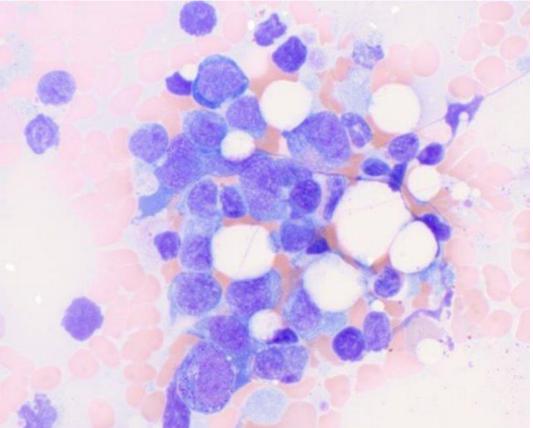


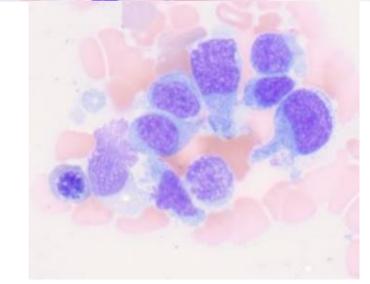


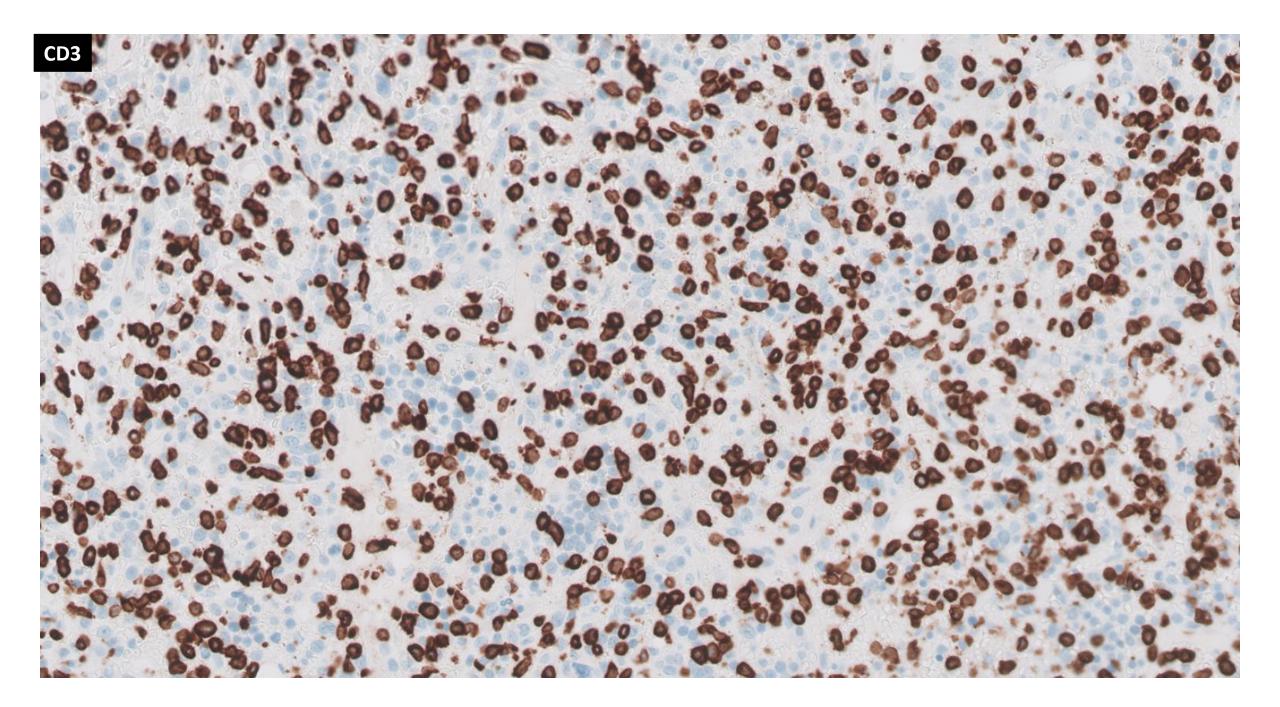


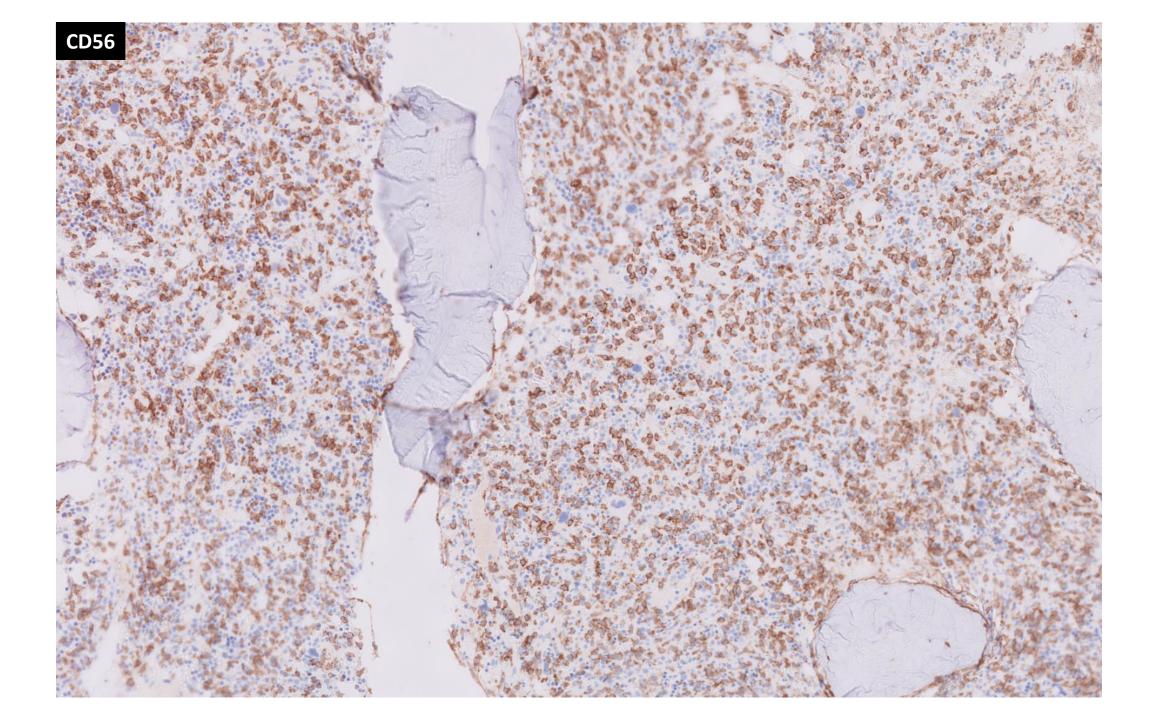


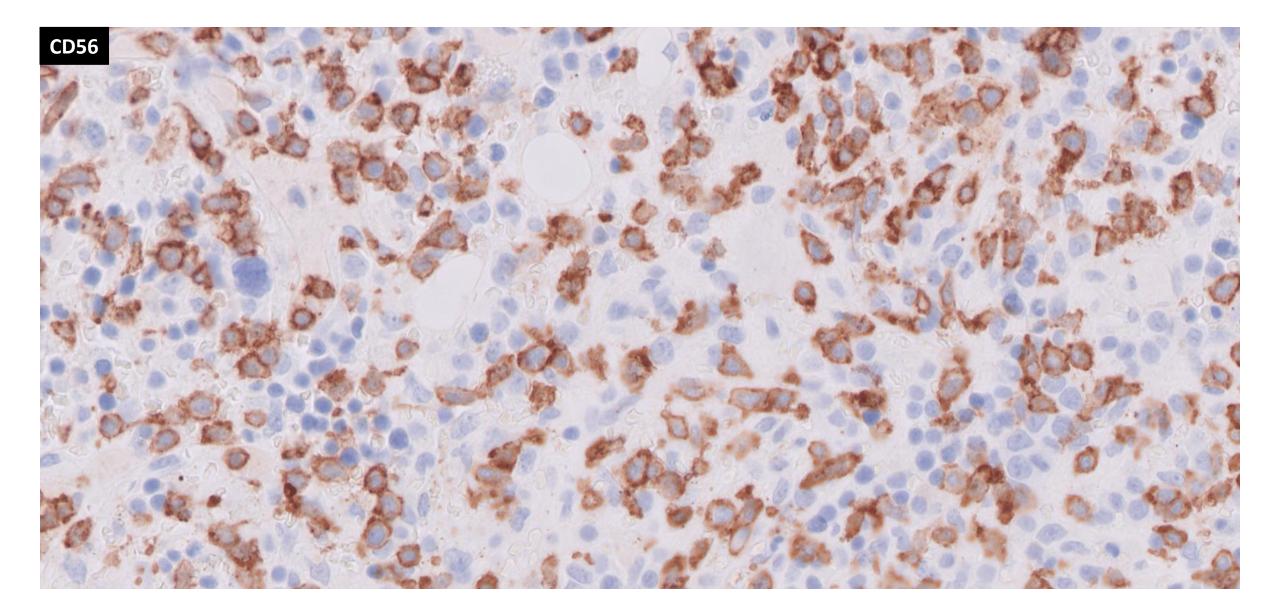


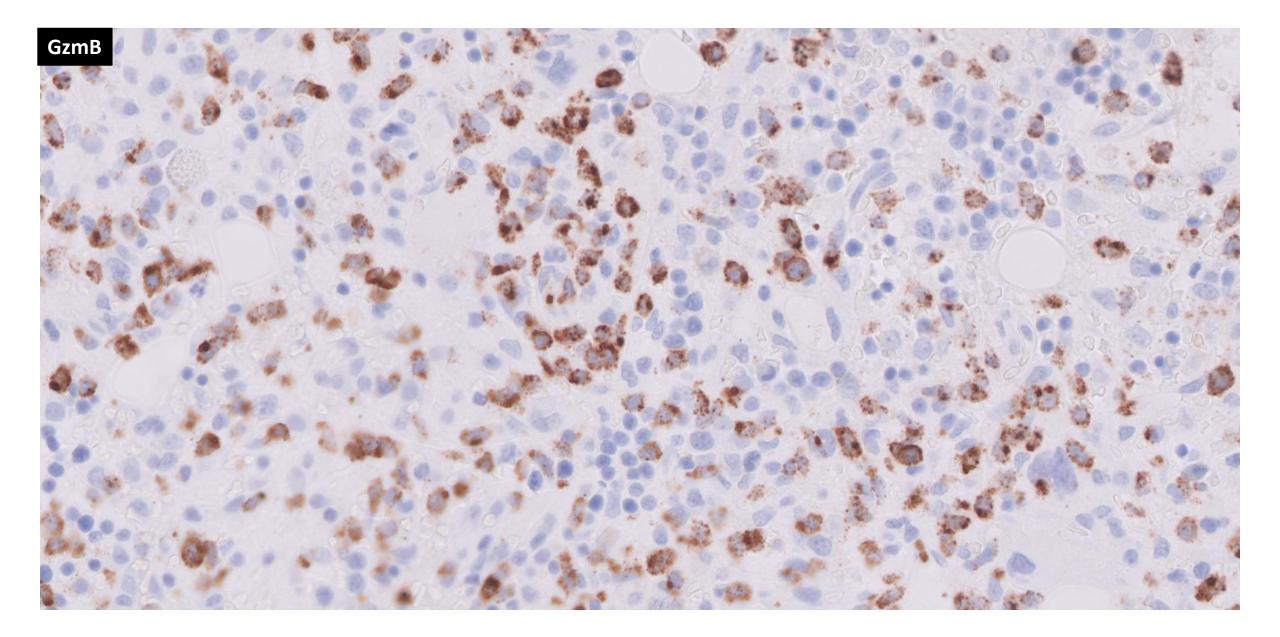


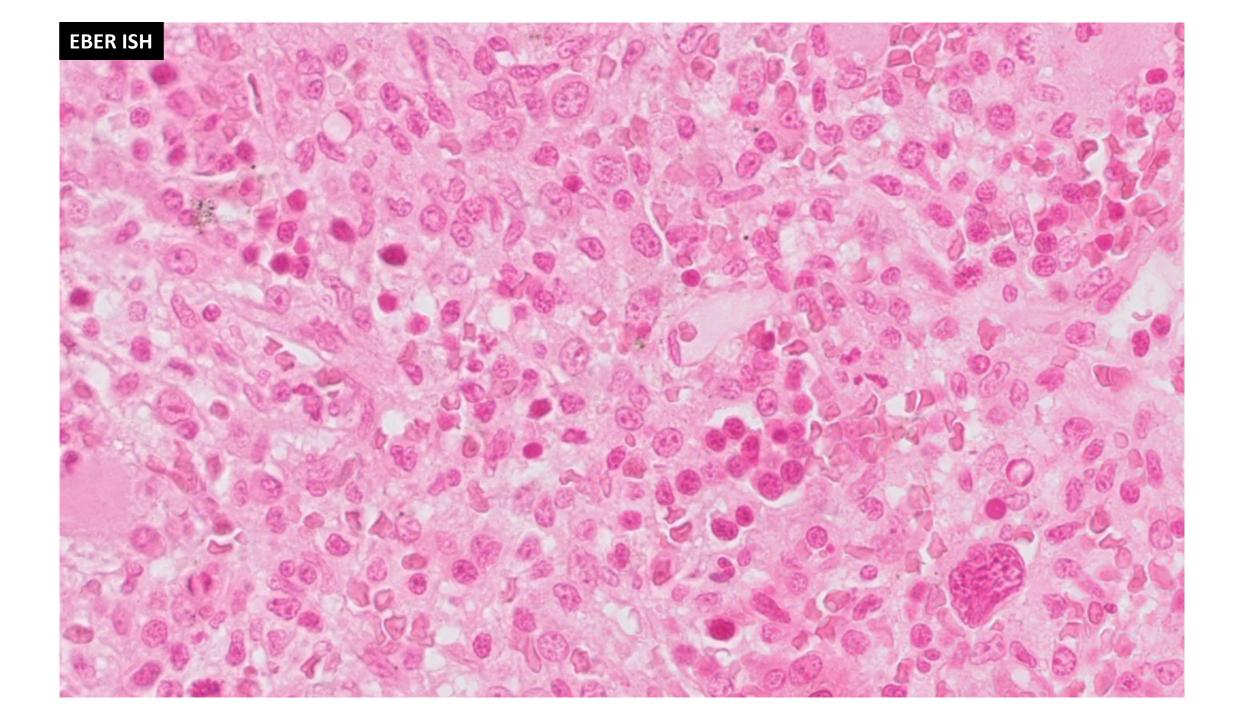




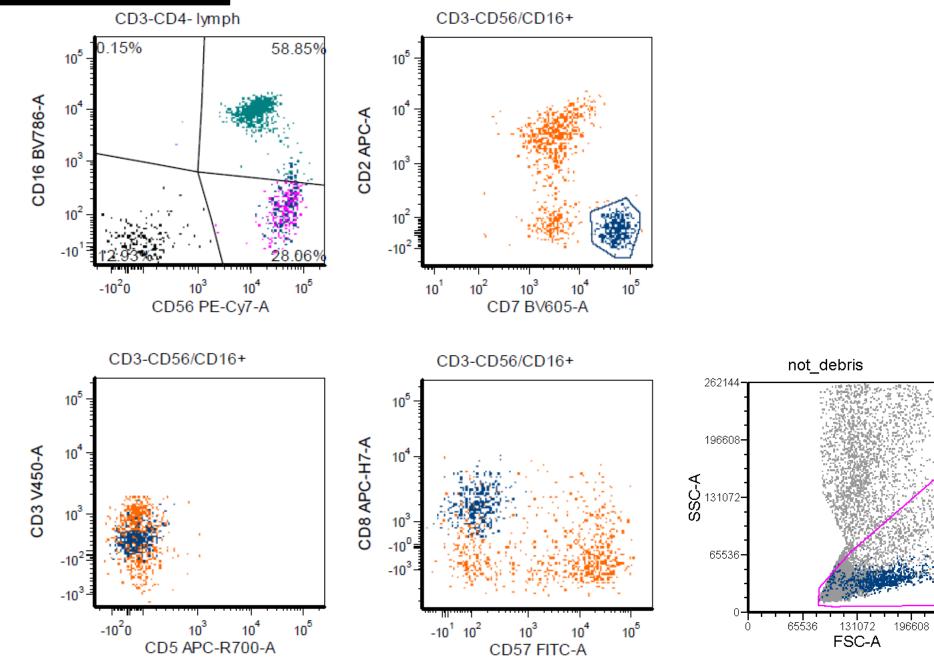








#### Bone marrow flow cytometry



2621

# DIAGNOSIS?

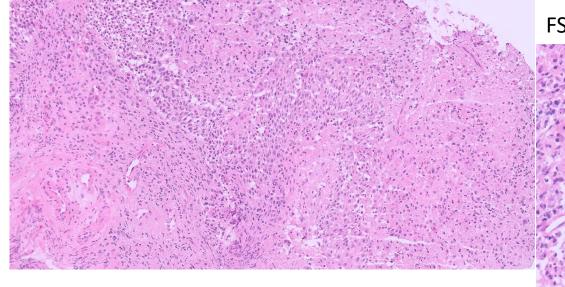


### Anne Cheng, Xiaoming Zhang; Stanford

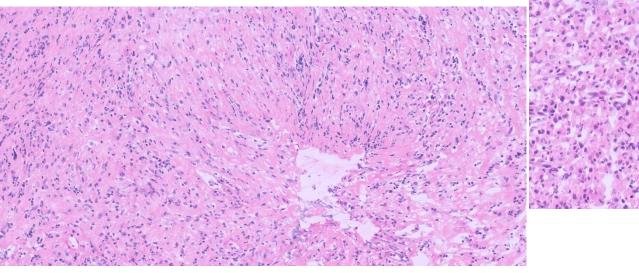
67-year-old woman with sepsis and hematuria. PET/CT findings showed a large complex cystic pelvic mass, concerning for primary malignancy. She has a prior path history of a vaginal mass diagnosed as smooth muscle neoplasm favored to be leiomyoma with degenerative changes vs STUMP, s/p excision. Op Note: 15 to 20 cm pelvic mass intimately involved with the bladder anteriorly, rectosigmoid posteriorly and encompassing the uterus and bilateral adnexa. Numerous small polypoid lesions on the bladder

### Three specimens were sent for frozen:

FSA. Bladder, biopsy



FSB. Pelvic mass, biopsy



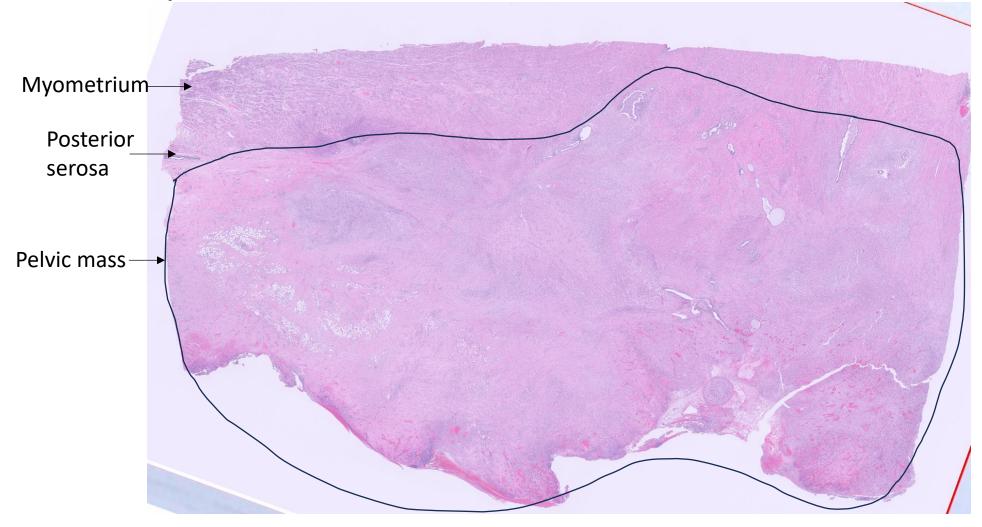
FSC. Bladder nodule, biopsy

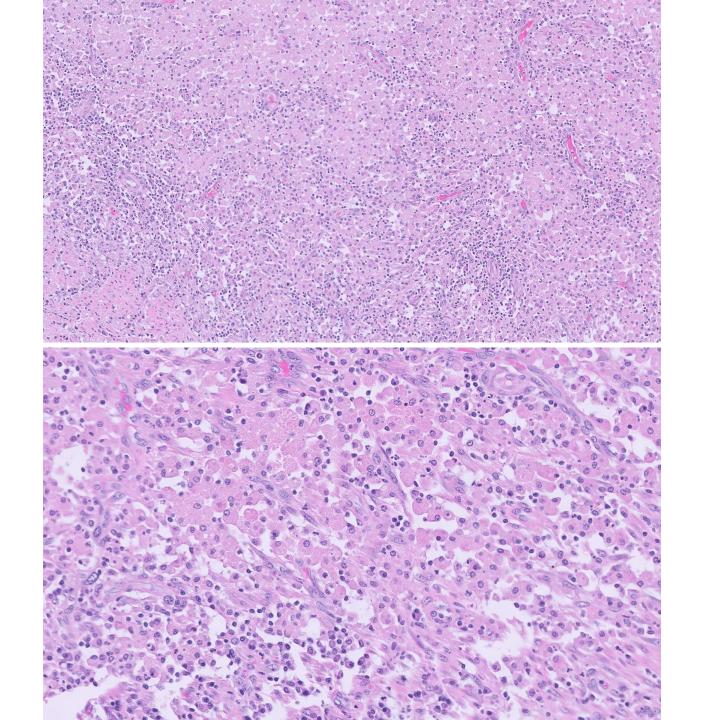
## The specimen

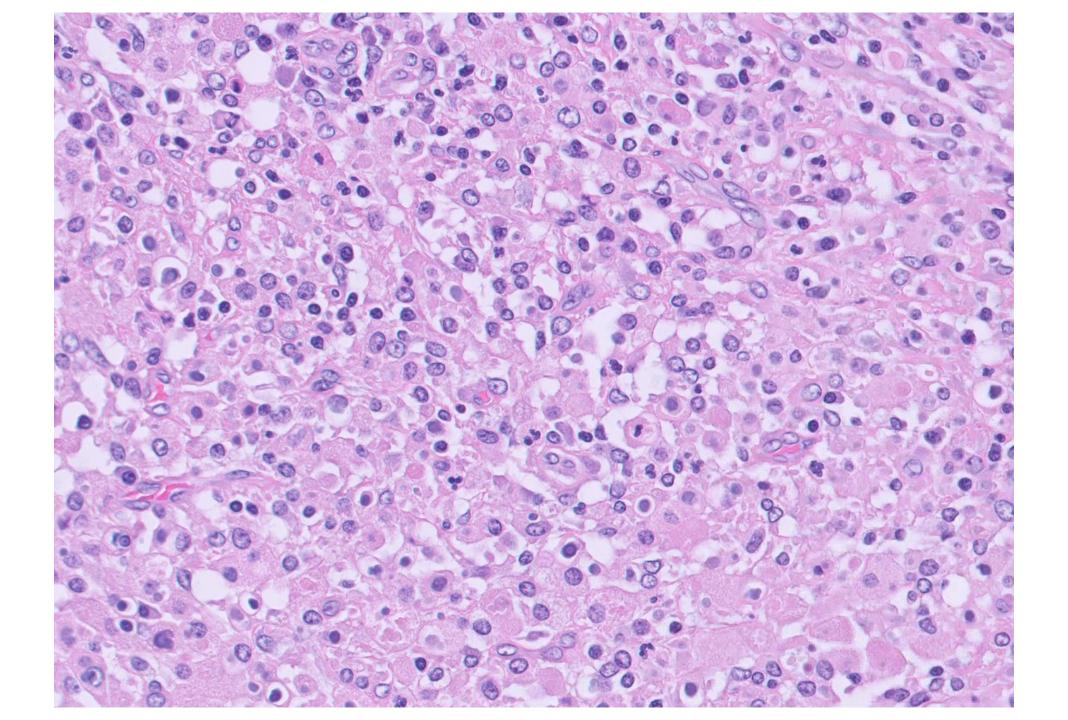
A pelvic exenteration was performed, resecting a portion of the left bladder, portion of vagina, uterus, cervix, fallopian tubes, ovaries, appendix, and rectosigmoid.



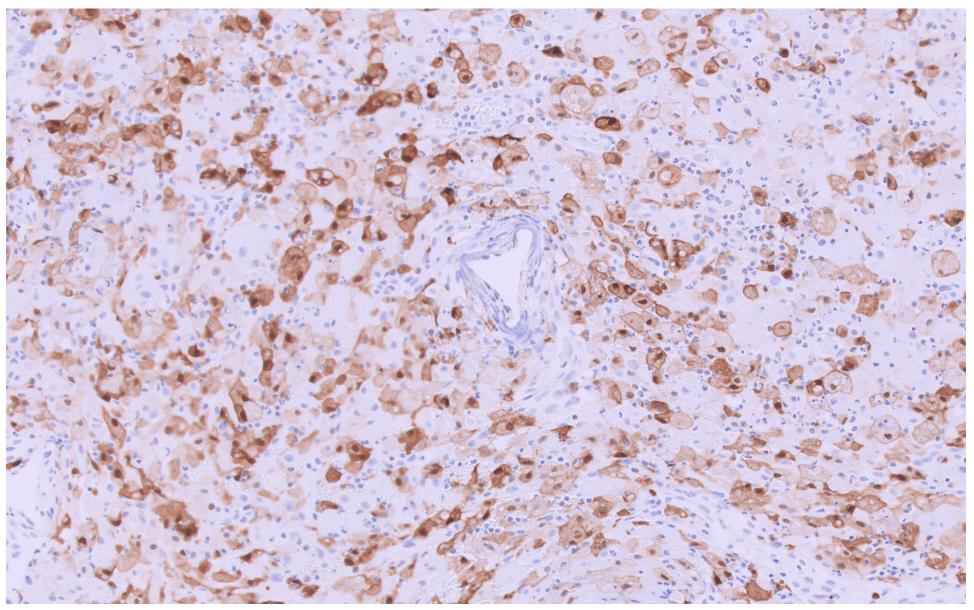
## Microscopic







S100



# DIAGNOSIS?

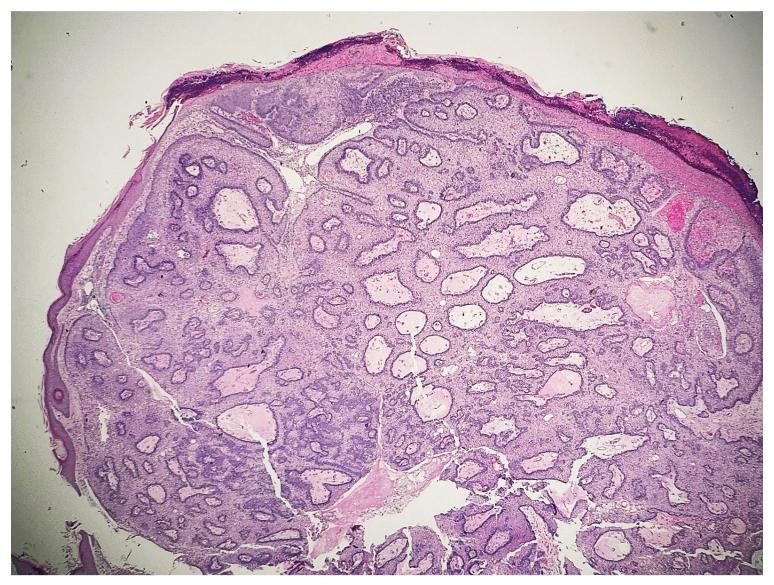


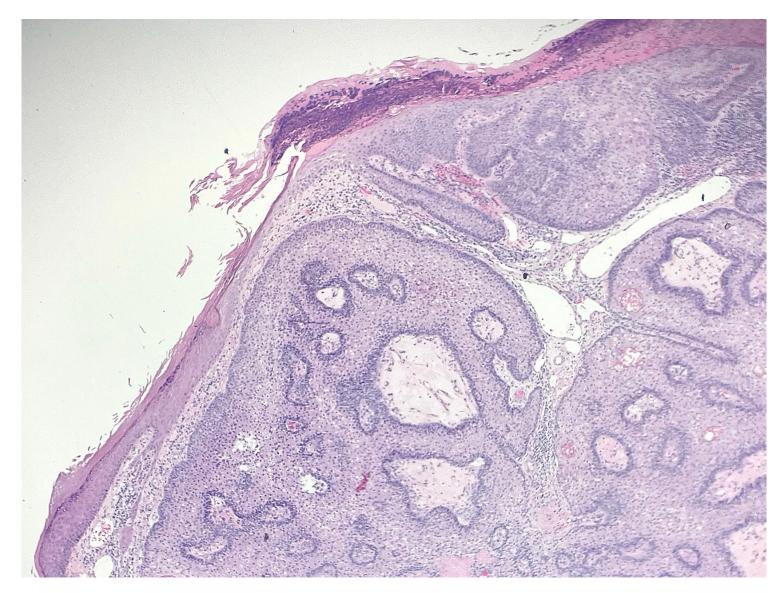
#### Harris Goodman; Alameda Health System

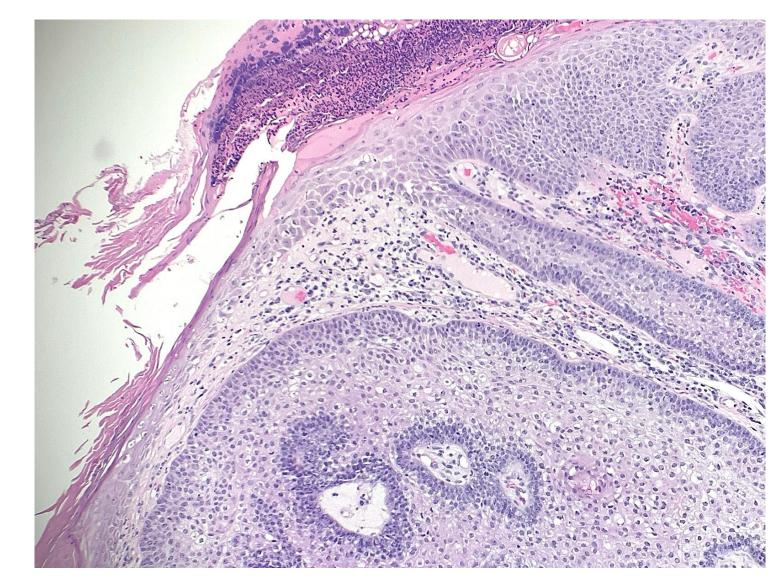
60-ish year old man with a complex medical history, including HTN, DMII, HLD and h/o renal transplant (6/2017) on prednisone, tacrolimus and MMF, presenting for consultation of growth on the left forehead for the last 3-4 months. He reports that it started as a small pimple and grew. It bled with manipulation. Exam reveals a 1.8 cm x 1.0 cm dome-shaped pink plaque on the left forehead x 4 months. Clinical differential diagnosis includes pyogenic granuloma, KA vs. other.

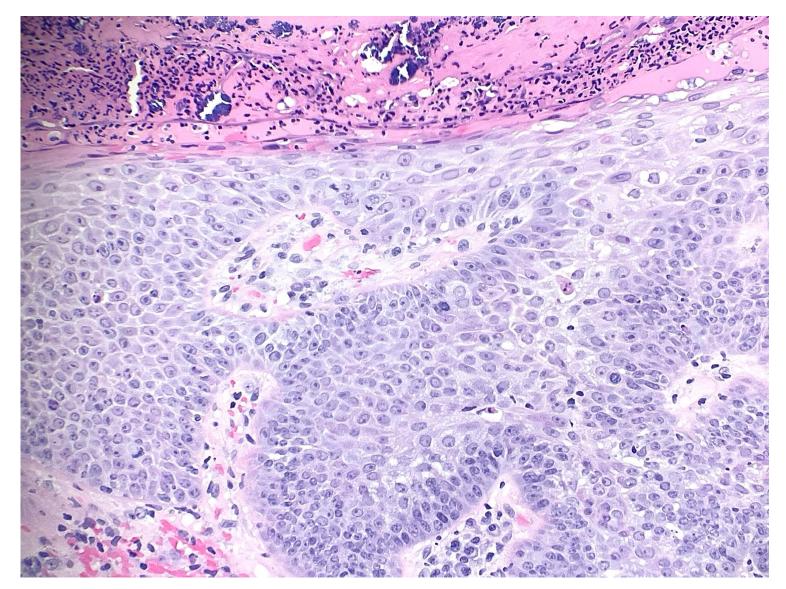
### **<u>Clinical Examination:</u>**

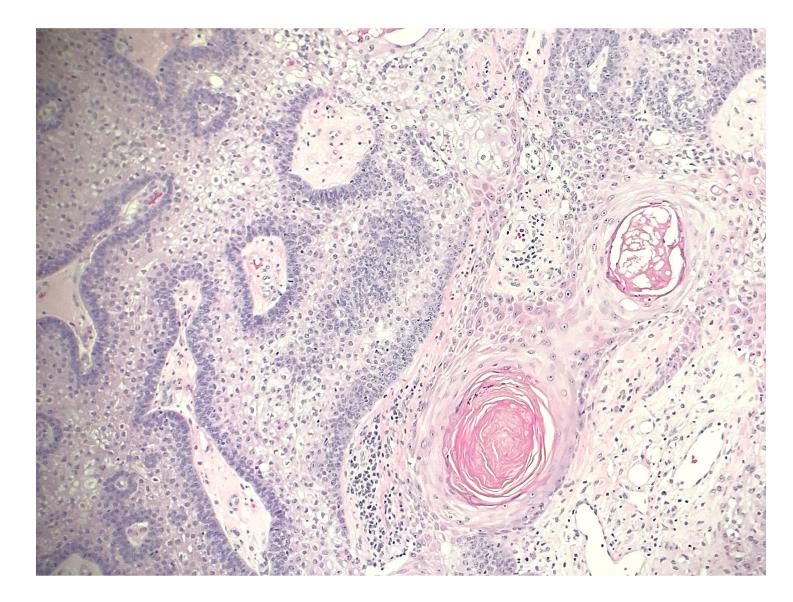


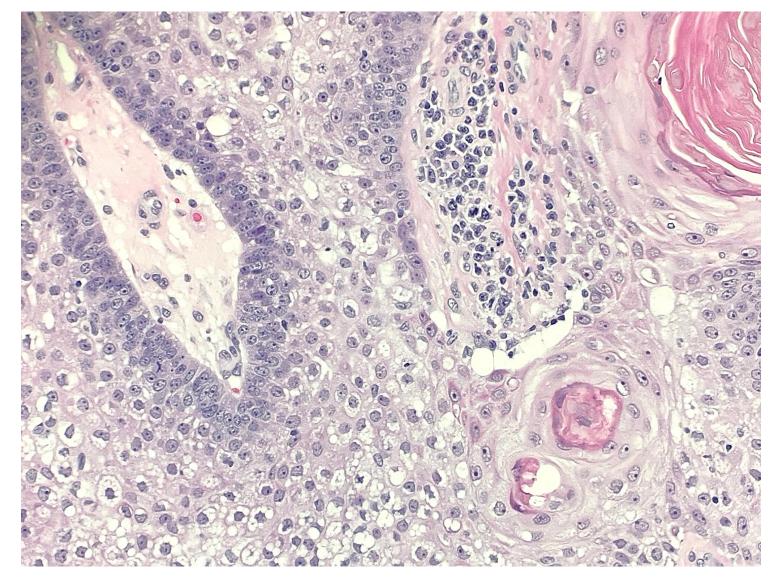


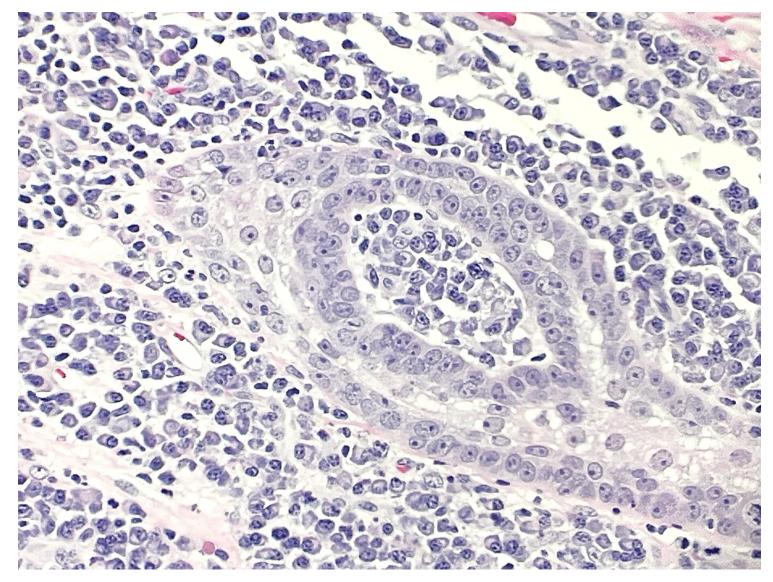


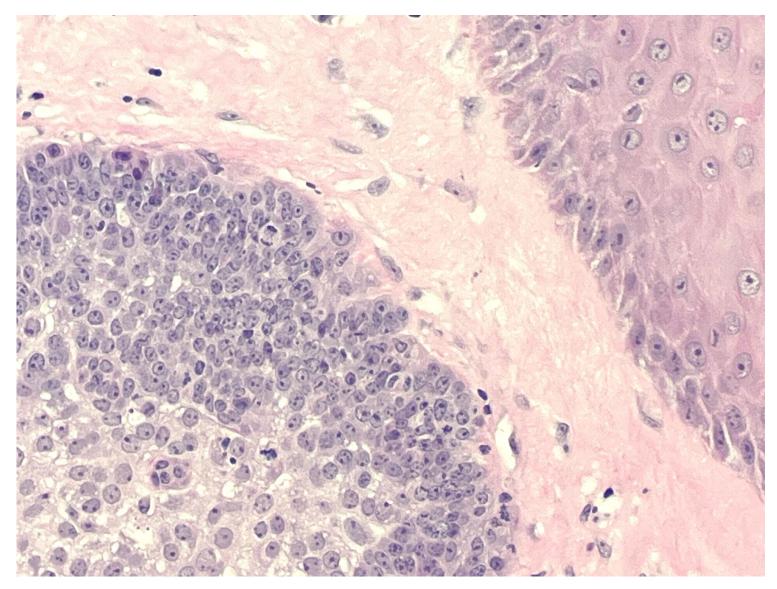












# DIAGNOSIS?

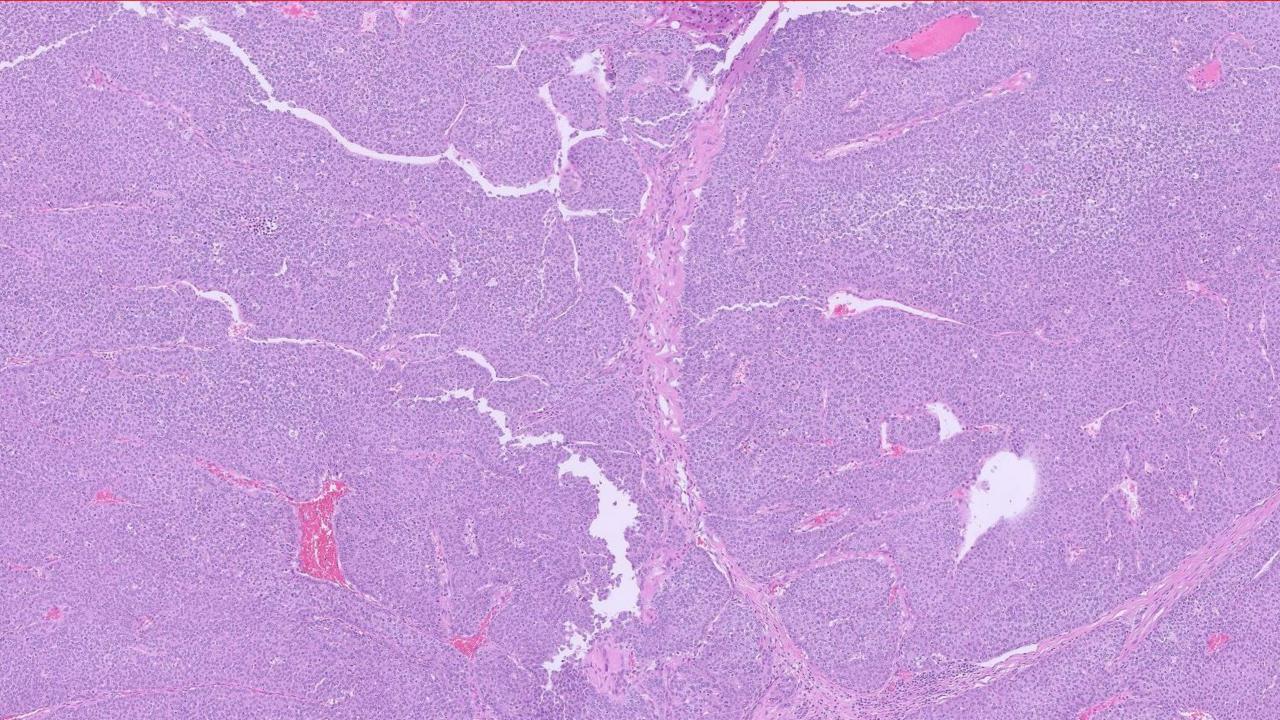


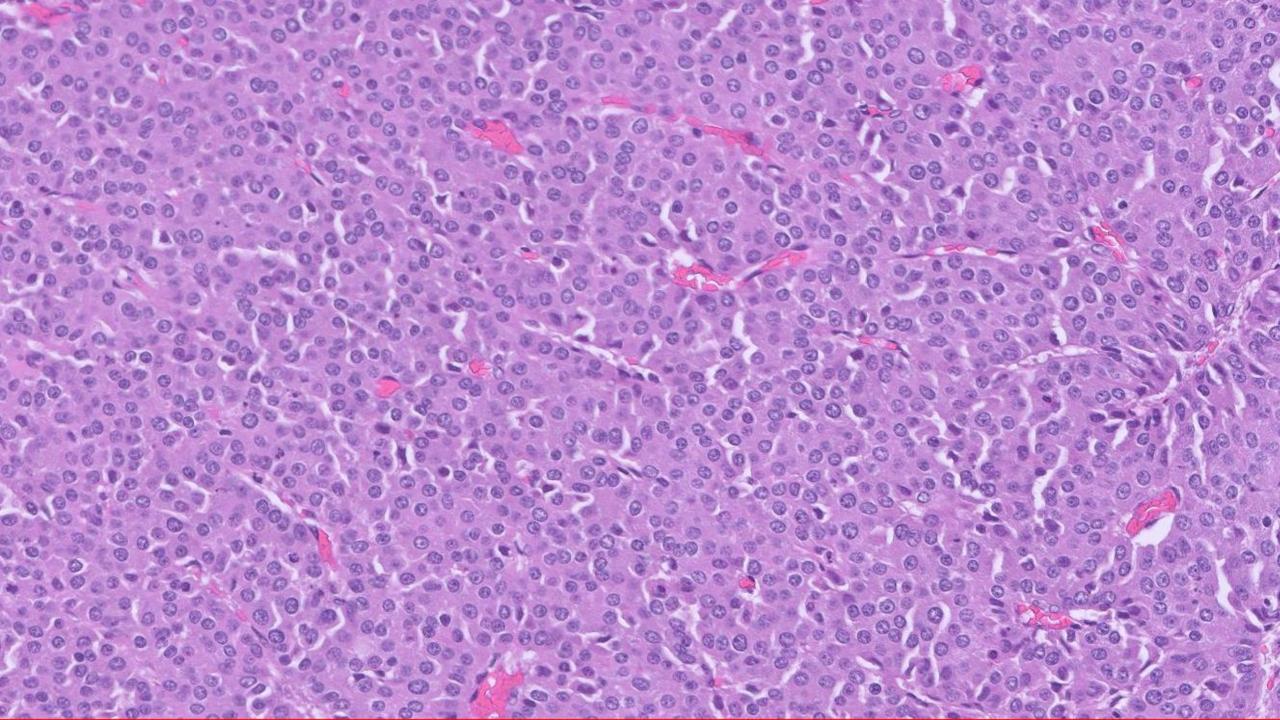
Iain Miller, David Bingham; Stanford

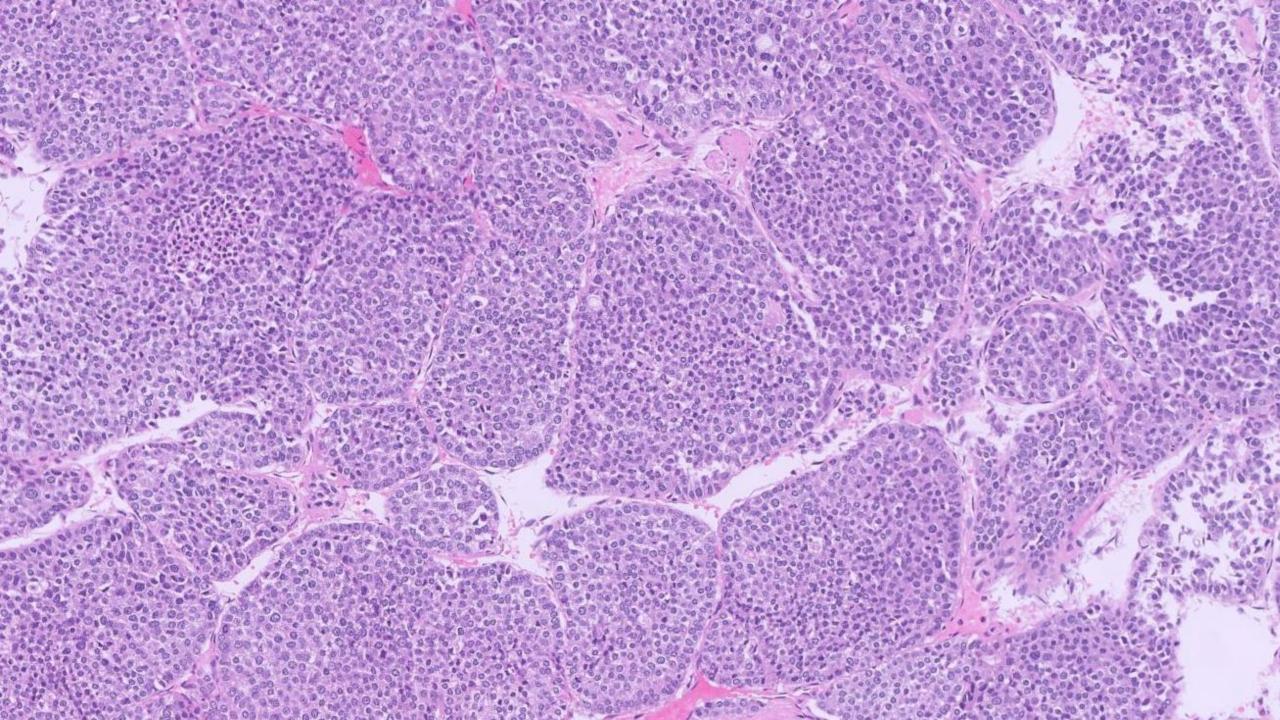
First case:

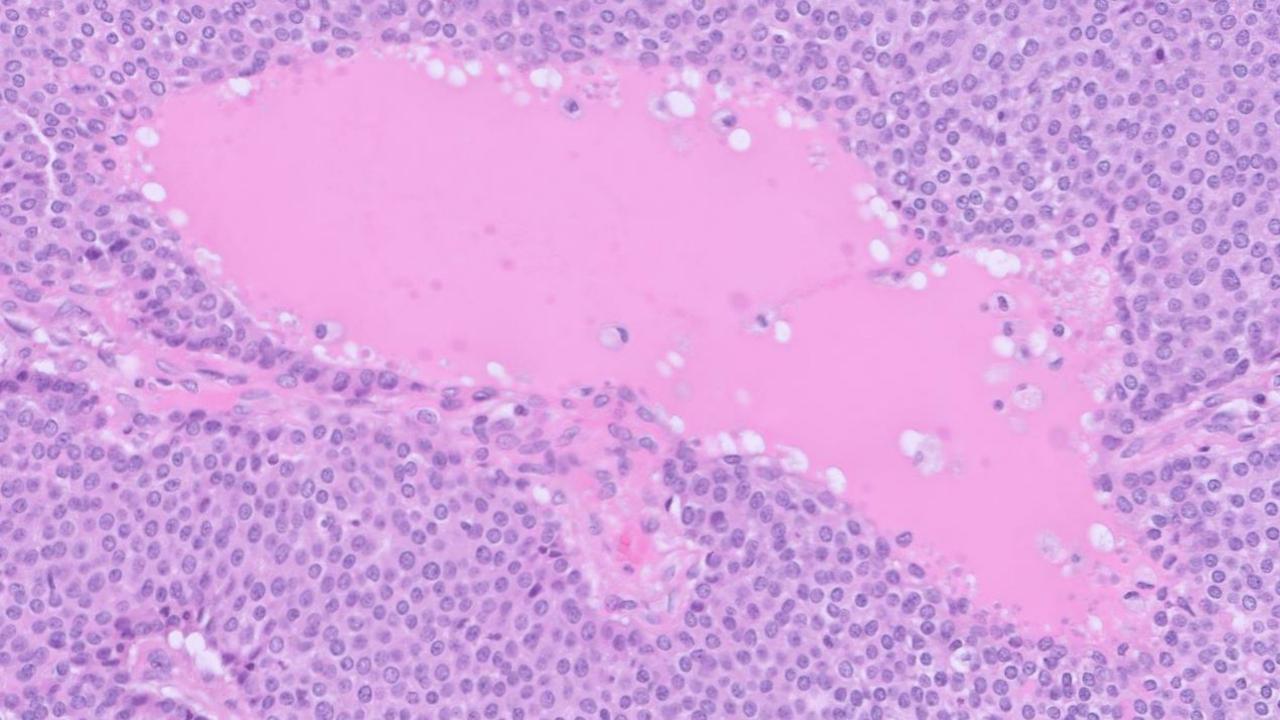
Early 30's female with history of pT2N1a papillary thyroid cancer status post thyroidectomy and bilateral neck dissection (2023) found to have left hepatic lobe lesion (17 cm) suspicious for solitary metastasis on CT-scan. Undergoes left-sided hepatectomy.

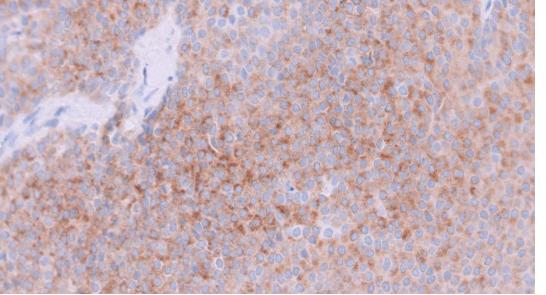






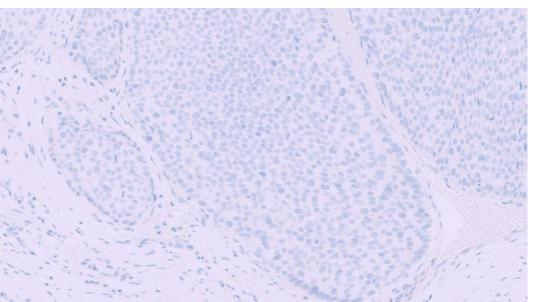


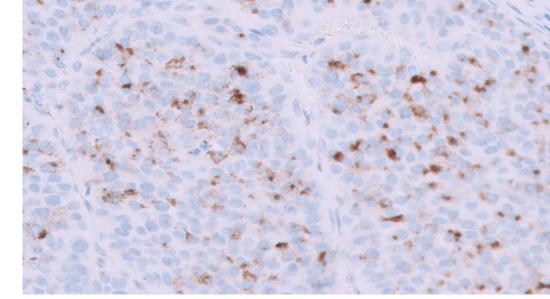




Synaptophysin

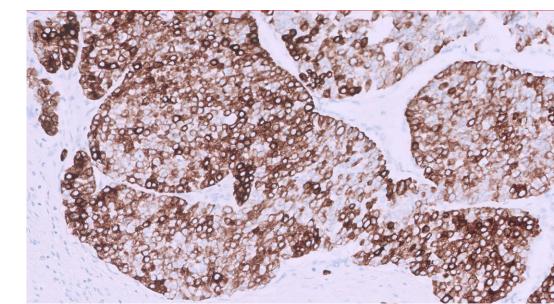
# TTF-1

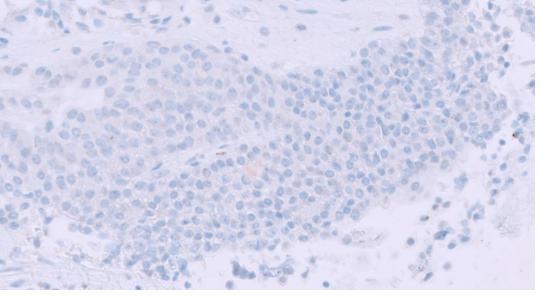




Chromogranin

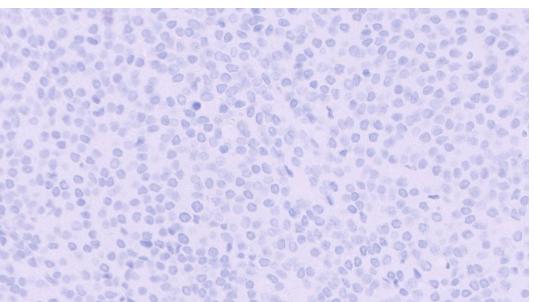
Pan-CK

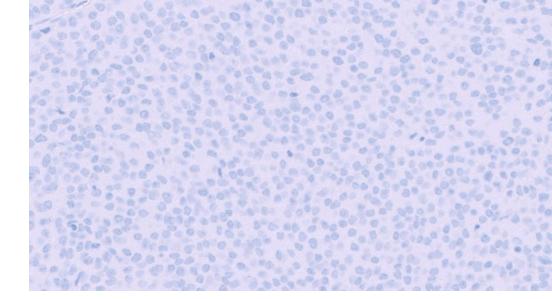




PAX8

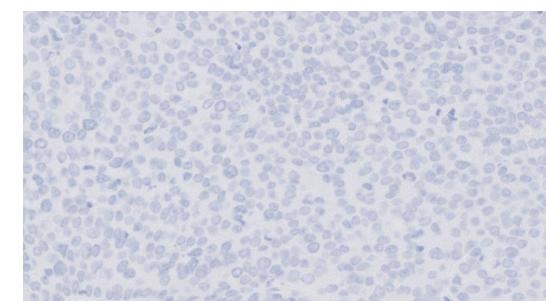
## Arginase1

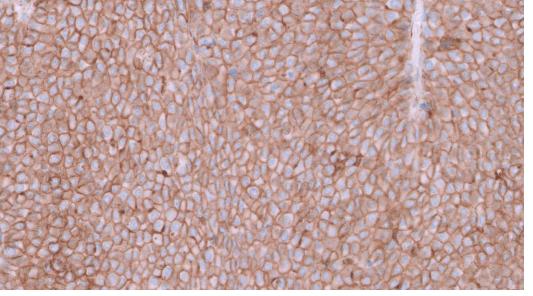




### HEPPAR1

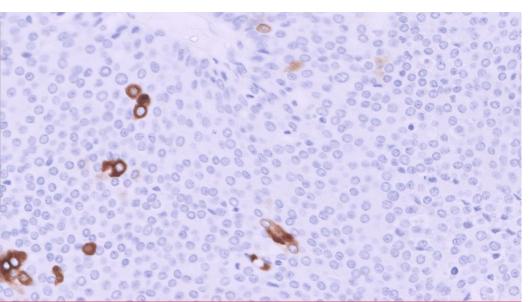
# Glypican3

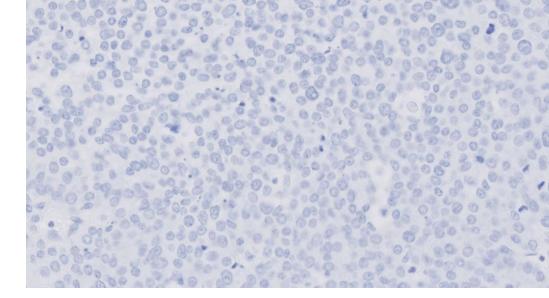




## Beta-Catenin

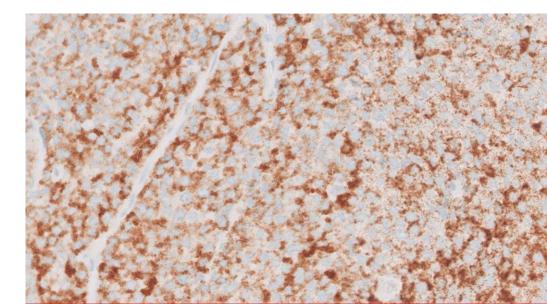
CK7





S100

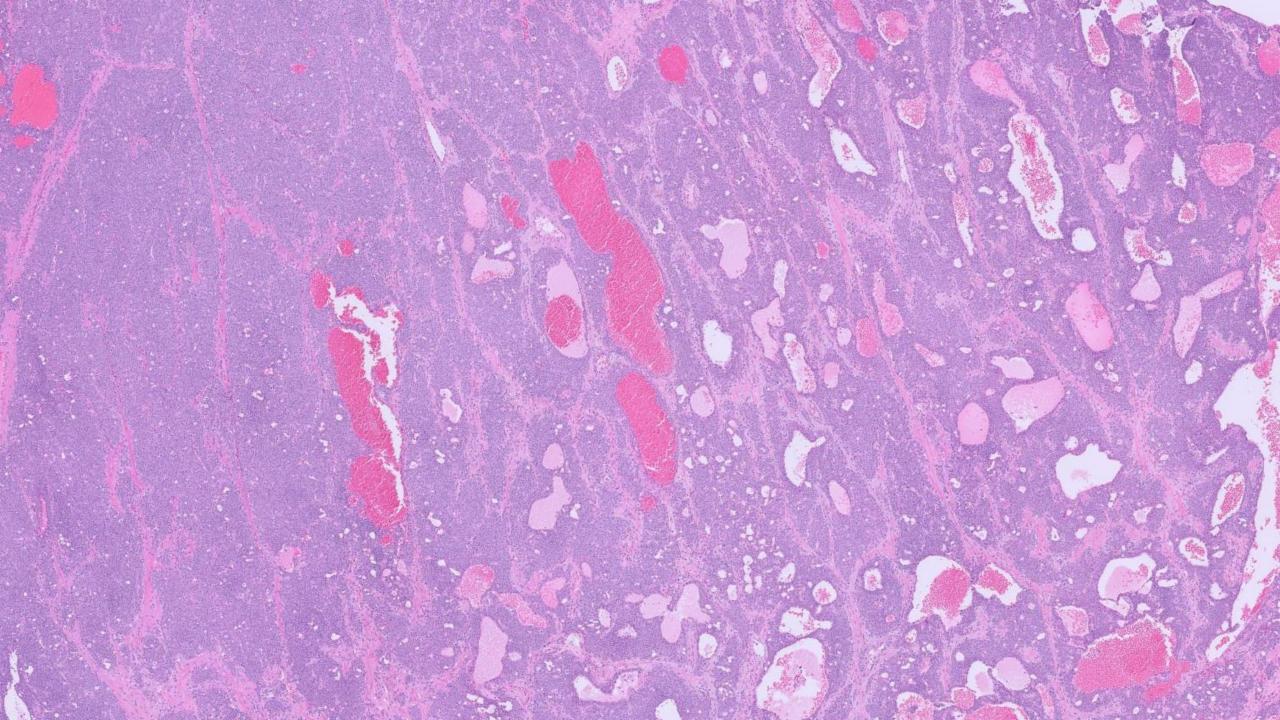
## Albumin ISH

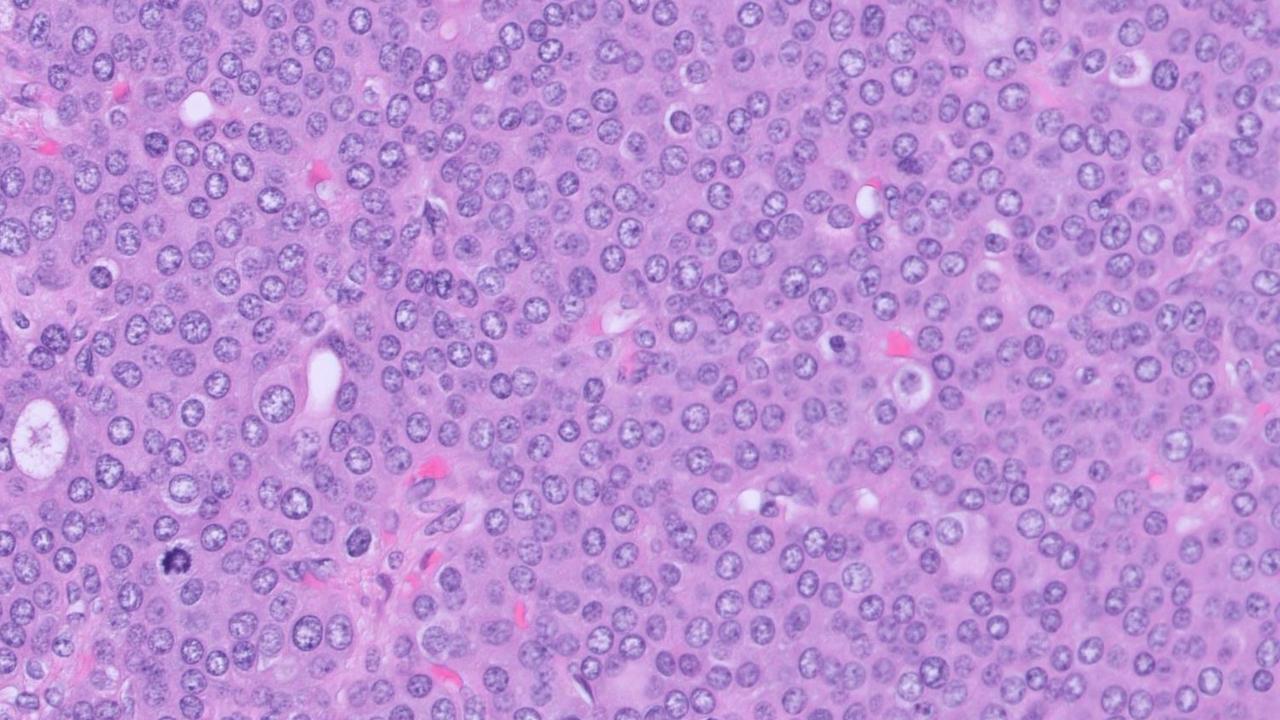


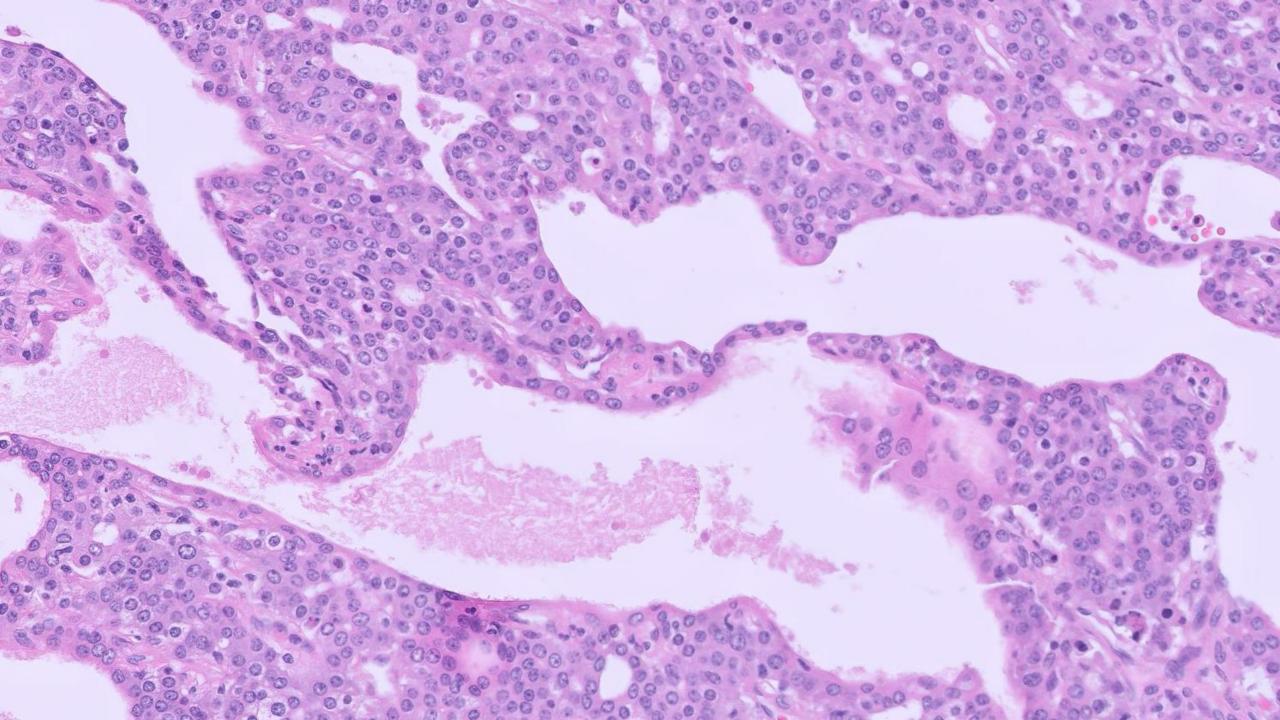
# Clinical History of second case

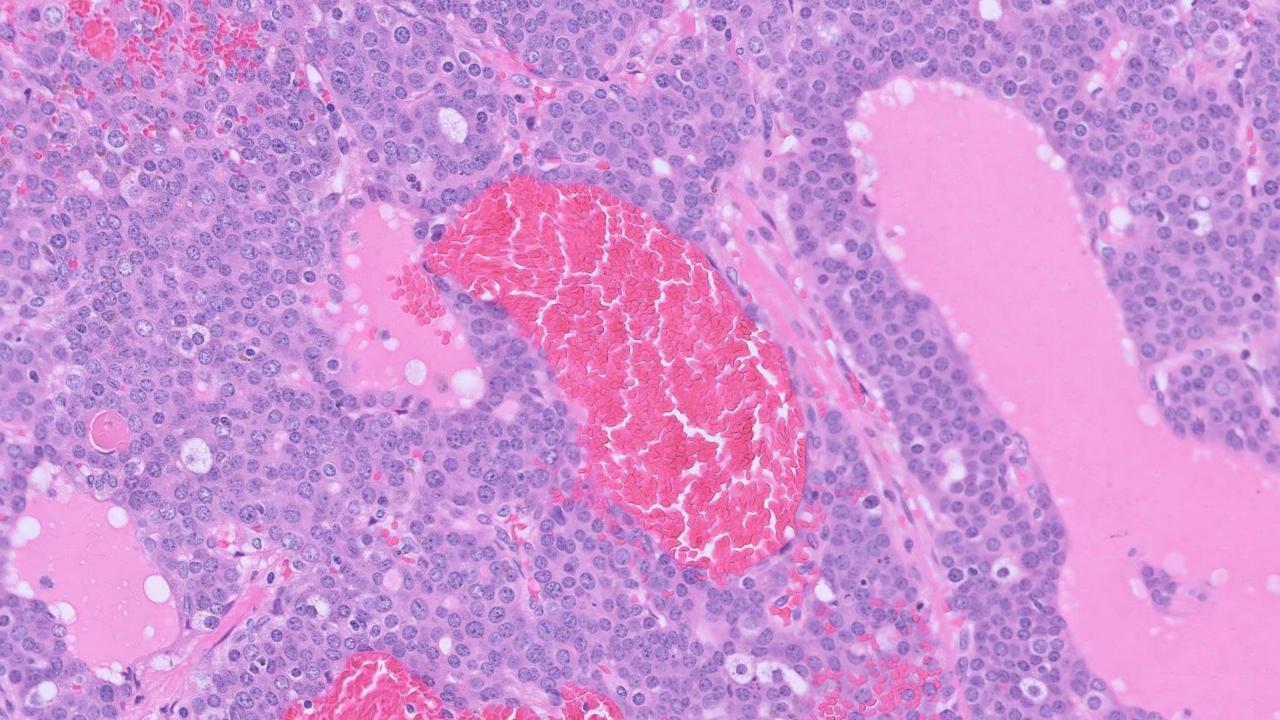
- Mid 20's female on oral contraceptives presenting with a large leftsided hepatic lesion. Lesion was 3.7 cm in 2021 with increase to 7.4 cm in 2024, probable hepatic adenoma by CT-scan.
- → Undergoes left-sided hepatectomy

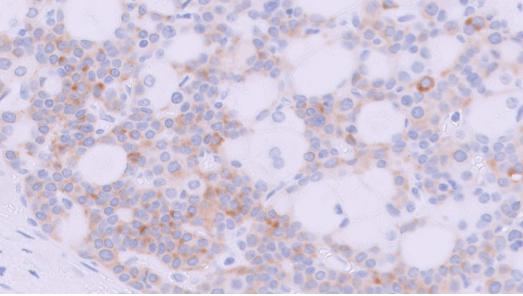






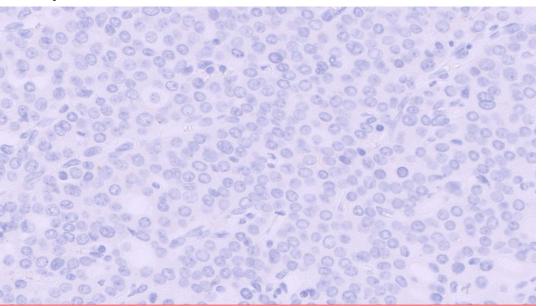


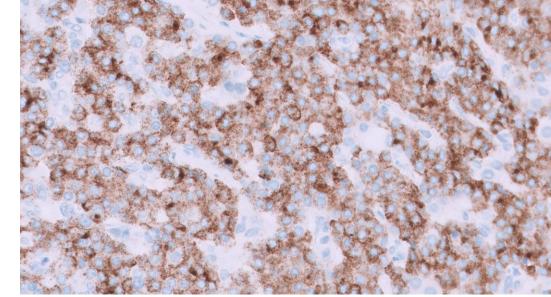




Synaptophysin

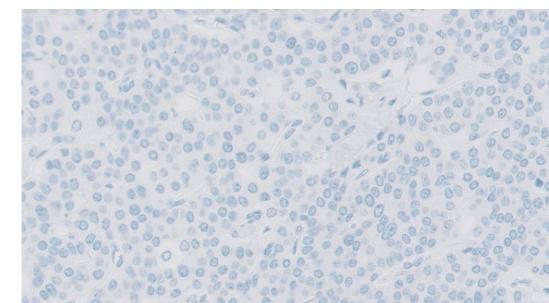
# Glipican-3

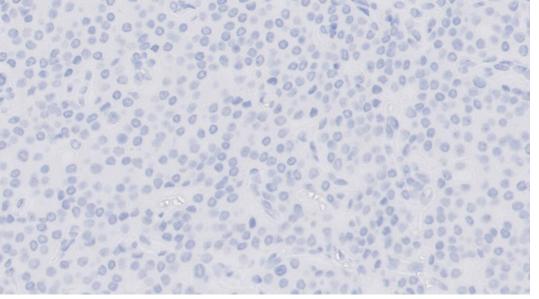




### Chromogranin

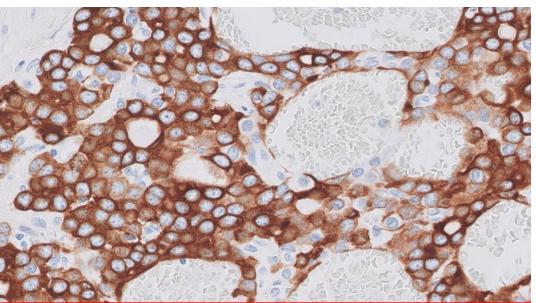
### HEPPAR1

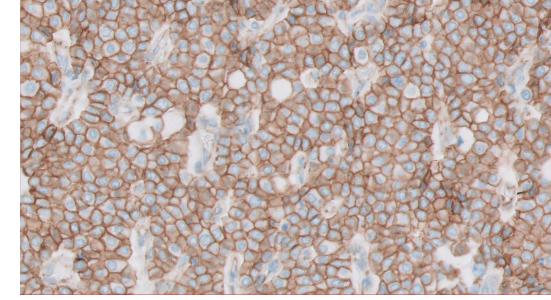




Arginase-1

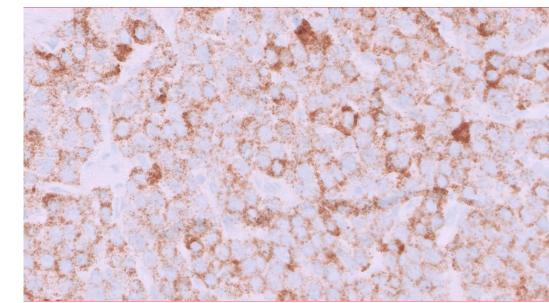
### CK7





Beta-Catenin

Albumin ISH



# DIAGNOSES?

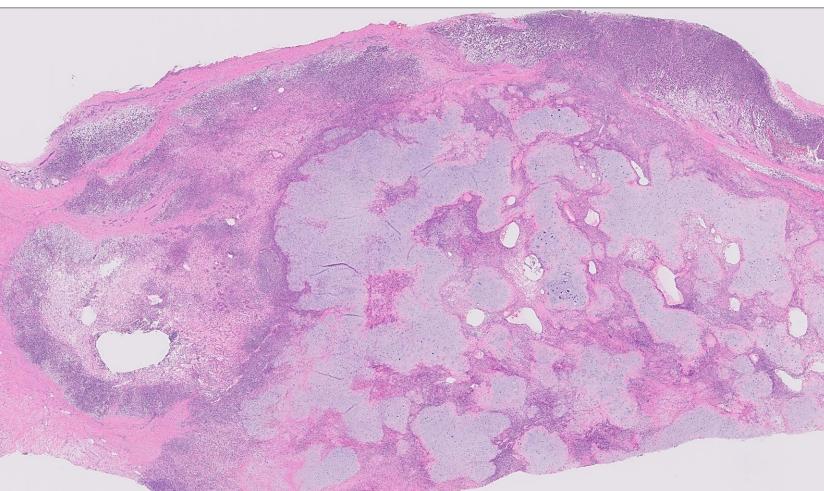


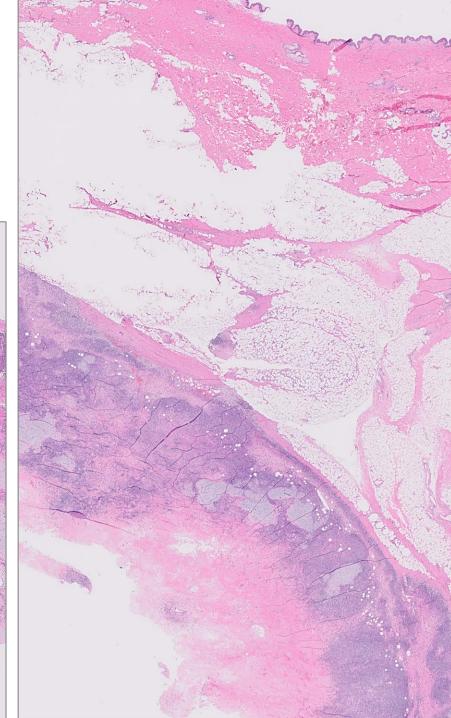
#### 25-0405

Joanna Solarewicz, Greg Bean; Stanford

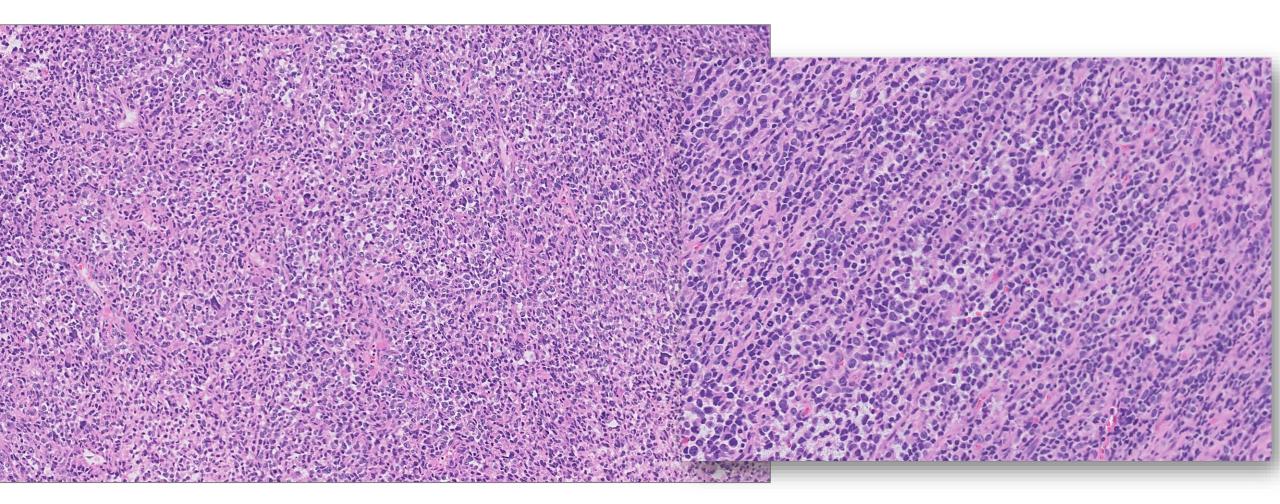
29-year-old postpartum female with right breast mass. Prior biopsy showed fibroadenoma in 2020 (not reviewed at Stanford or by referring pathologist). The mass has increased size and now measures 7 cm. She underwent a mastectomy in August of 2023.

# H&E Sections

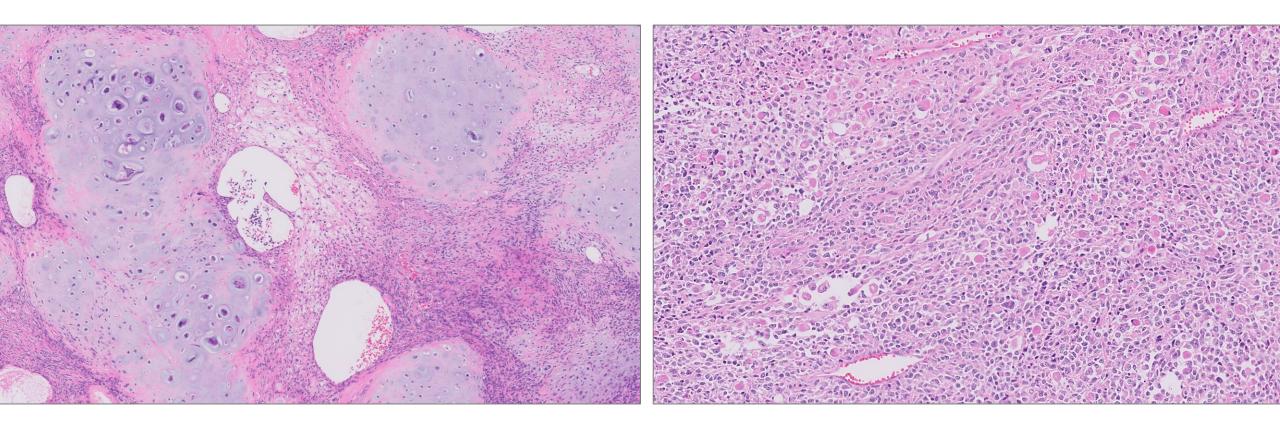






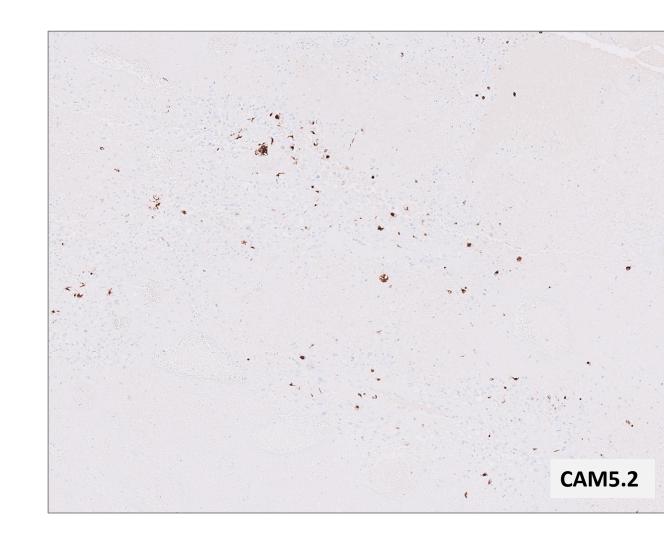


# H&E Sections

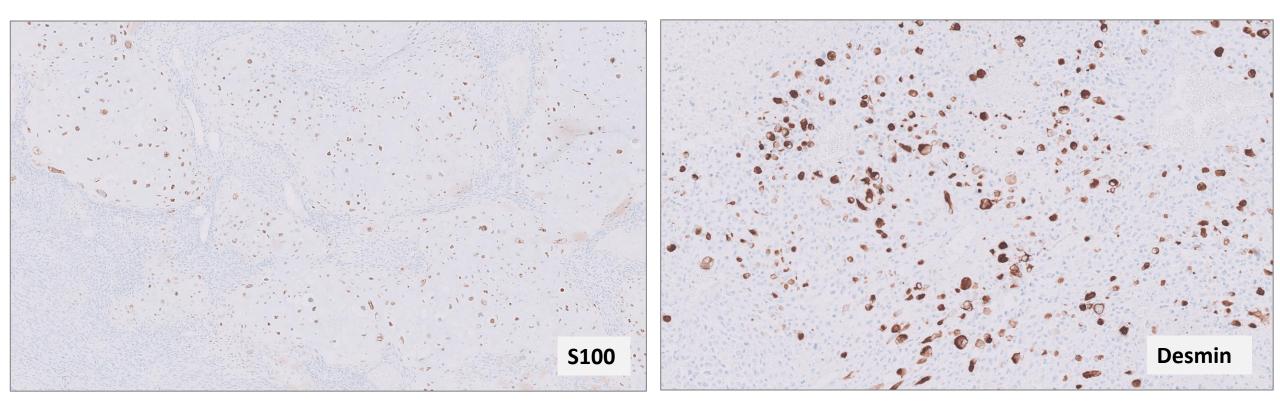


# IHC

- Pan-keratin Negative
- CAM5.2 and CK14 Focally Positive
- P63 Rare Positive
- CD34 Negative
- Desmin Focally Positive
- S100 Focally Positive



# IHC



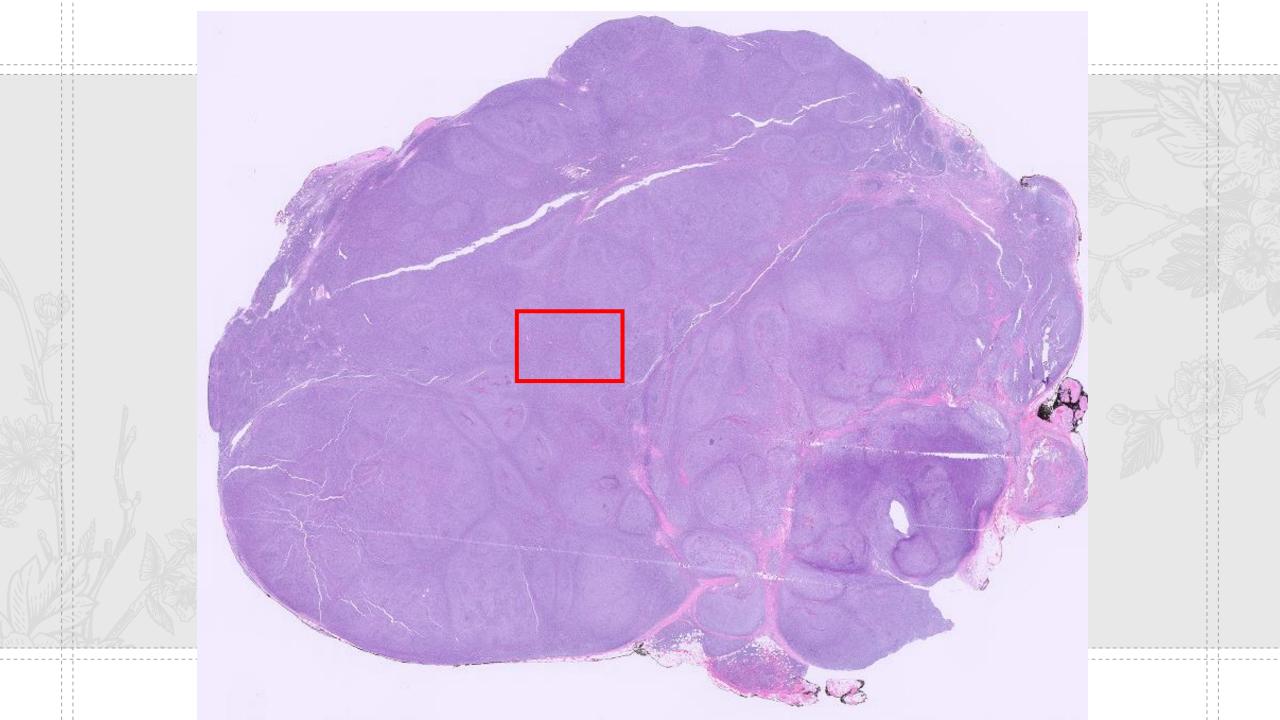
# DIAGNOSIS?

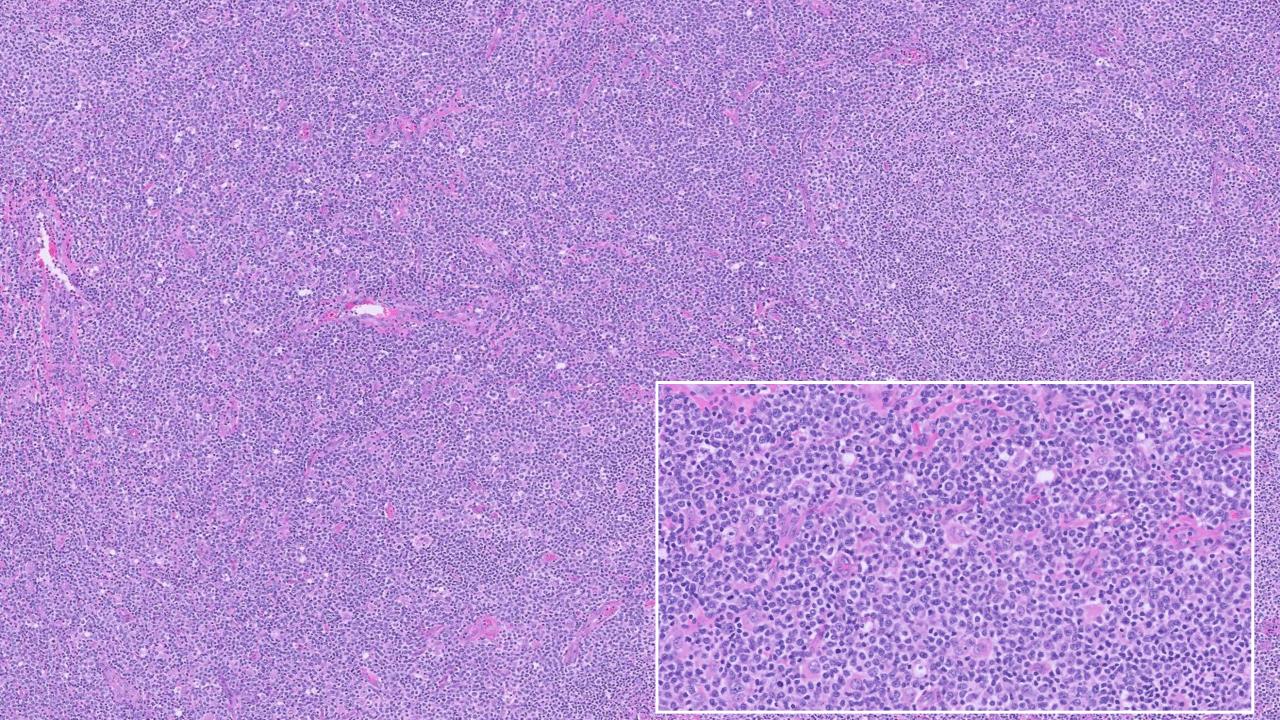


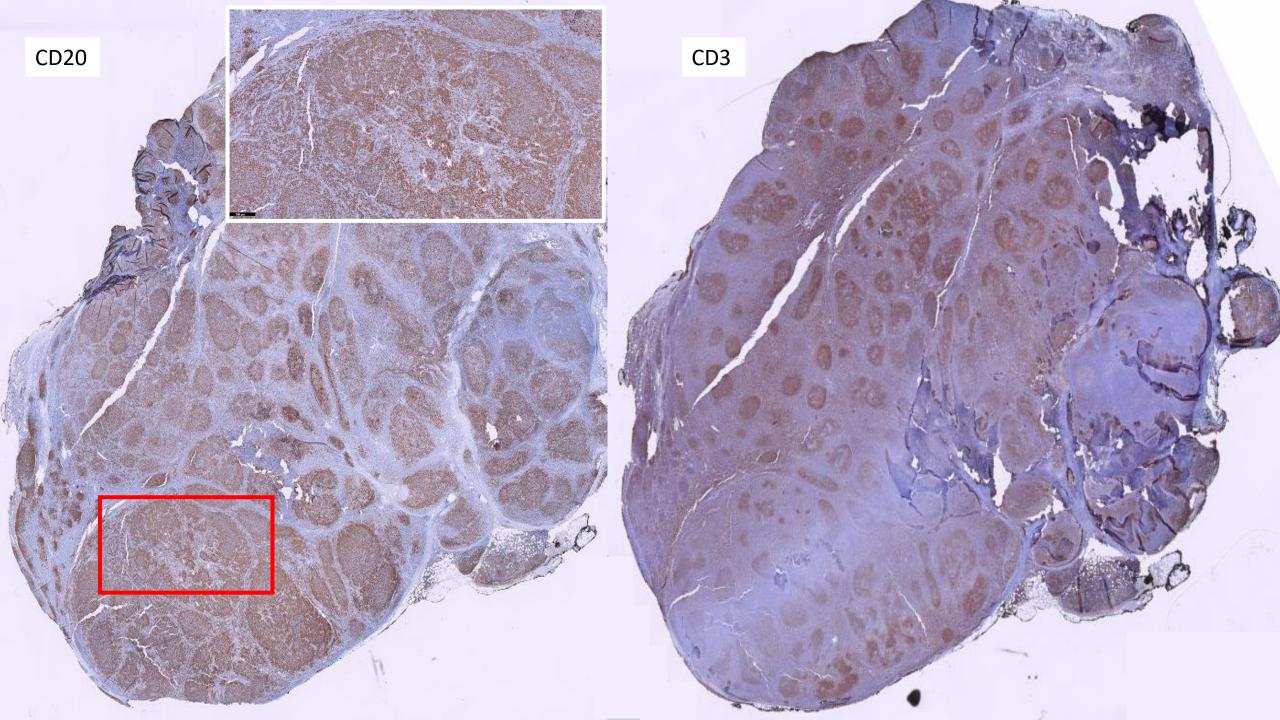
#### 25-0406

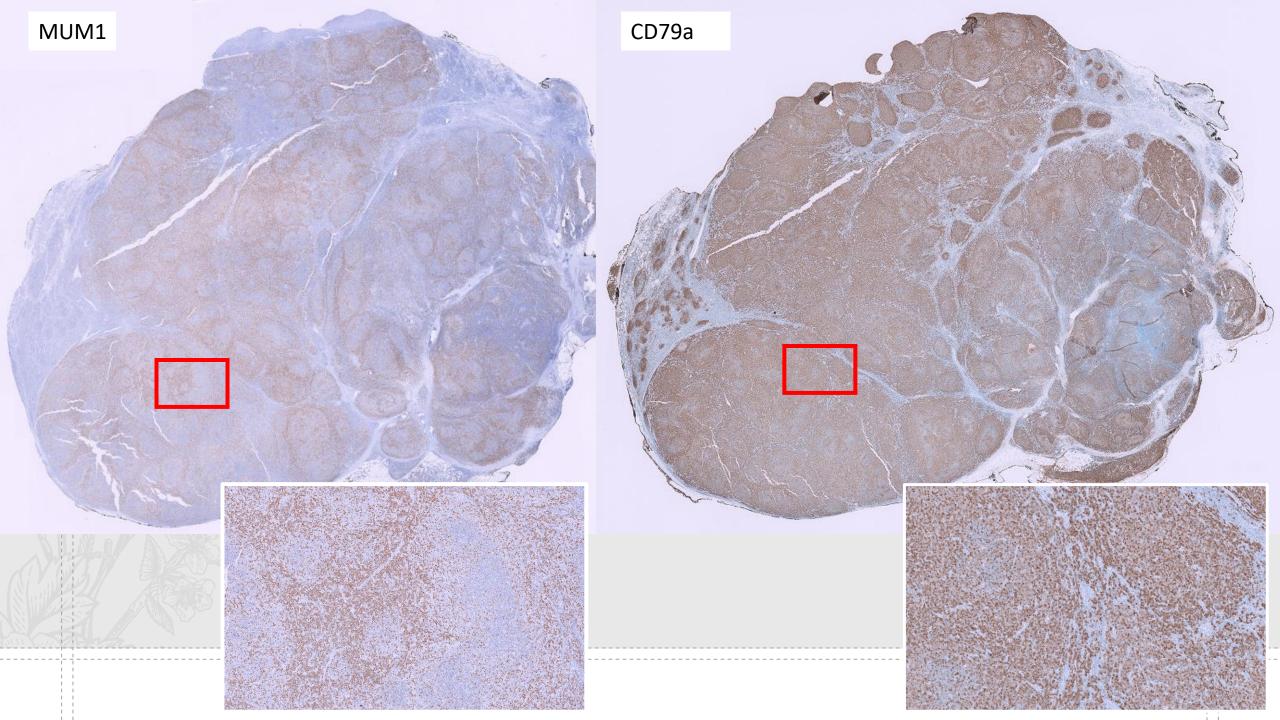
Parnaz Daneshpajouhnejad, Yaso Natkunam; Stanford

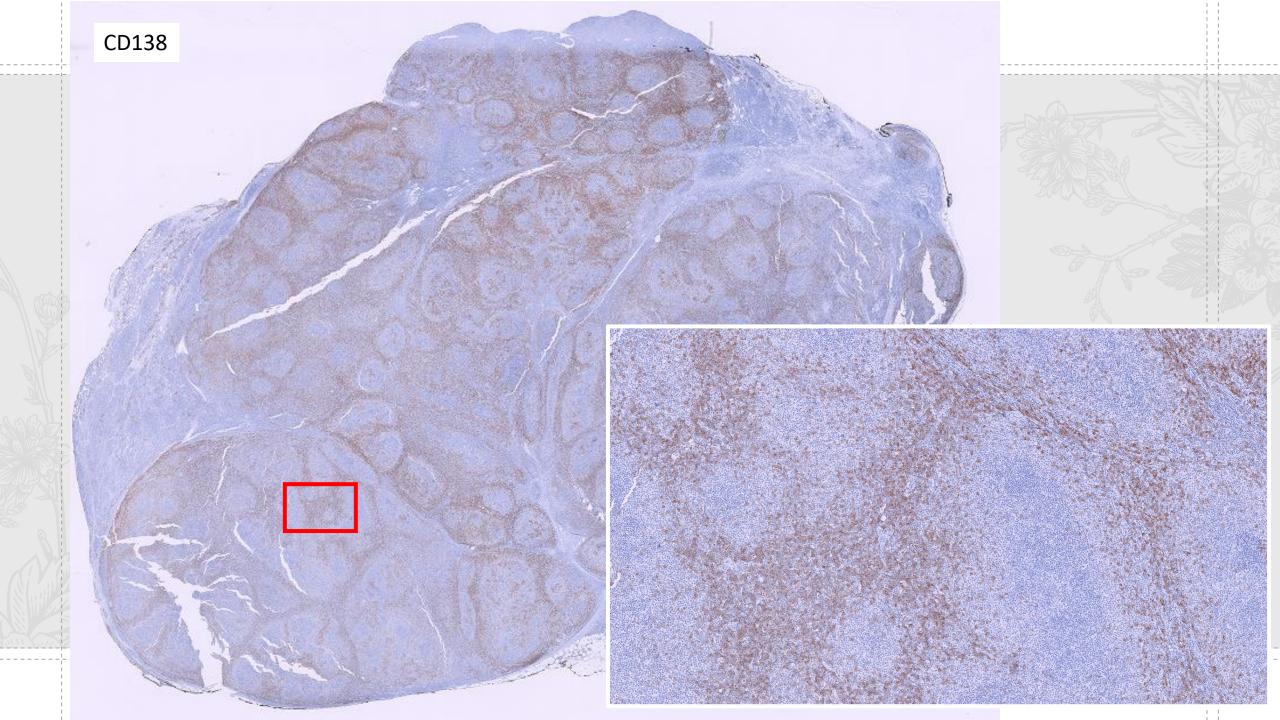
48 year old female with splenomegaly, lymphadenopathy, and IgM kappa M protein. Inguinal lymph node was excised.

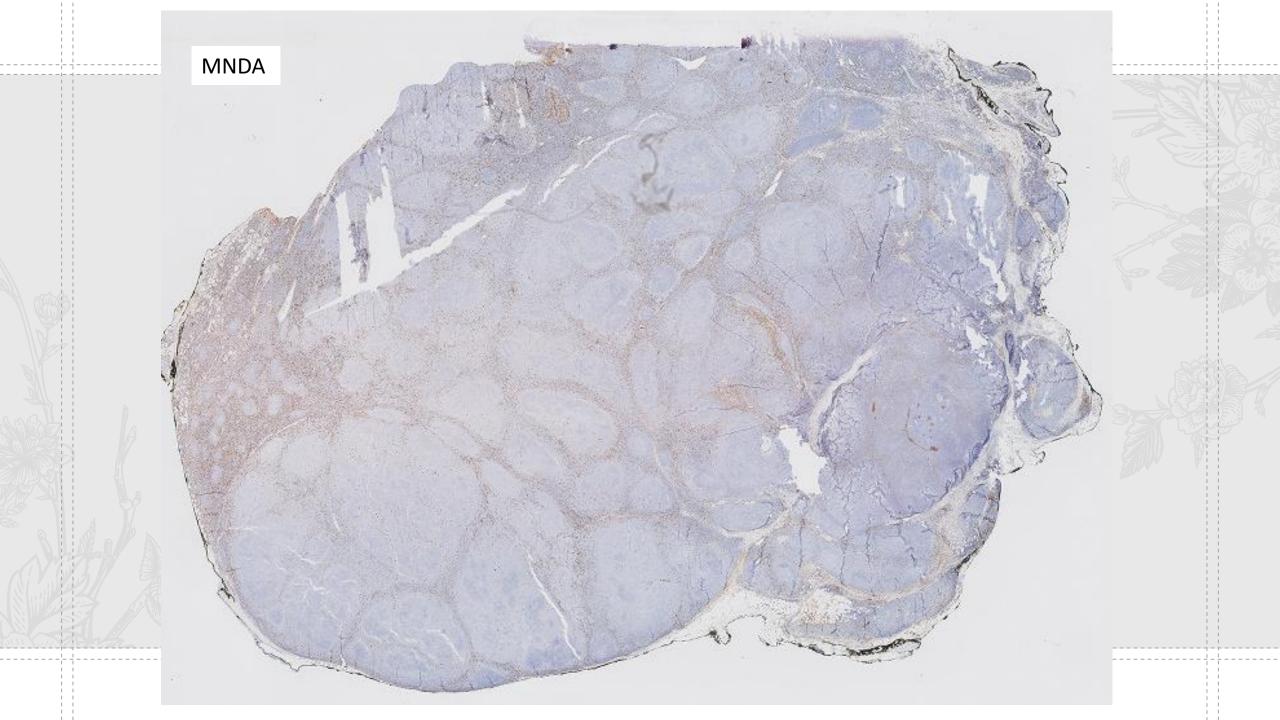


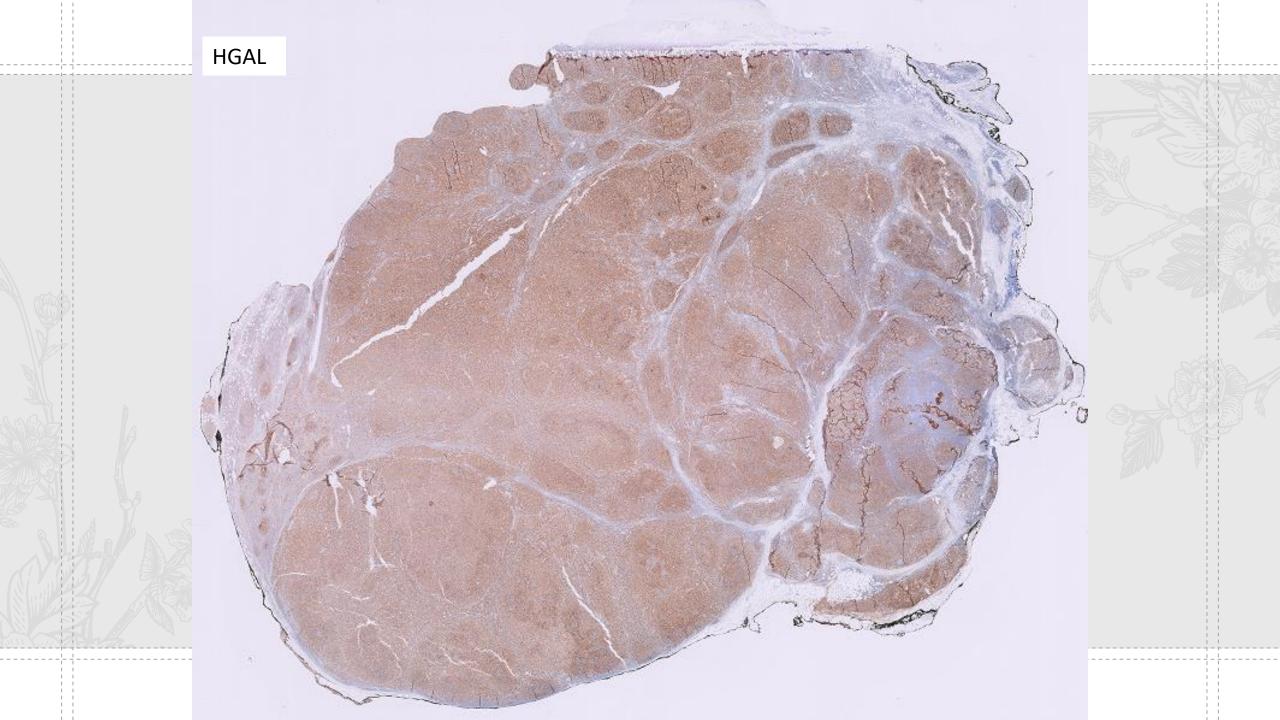


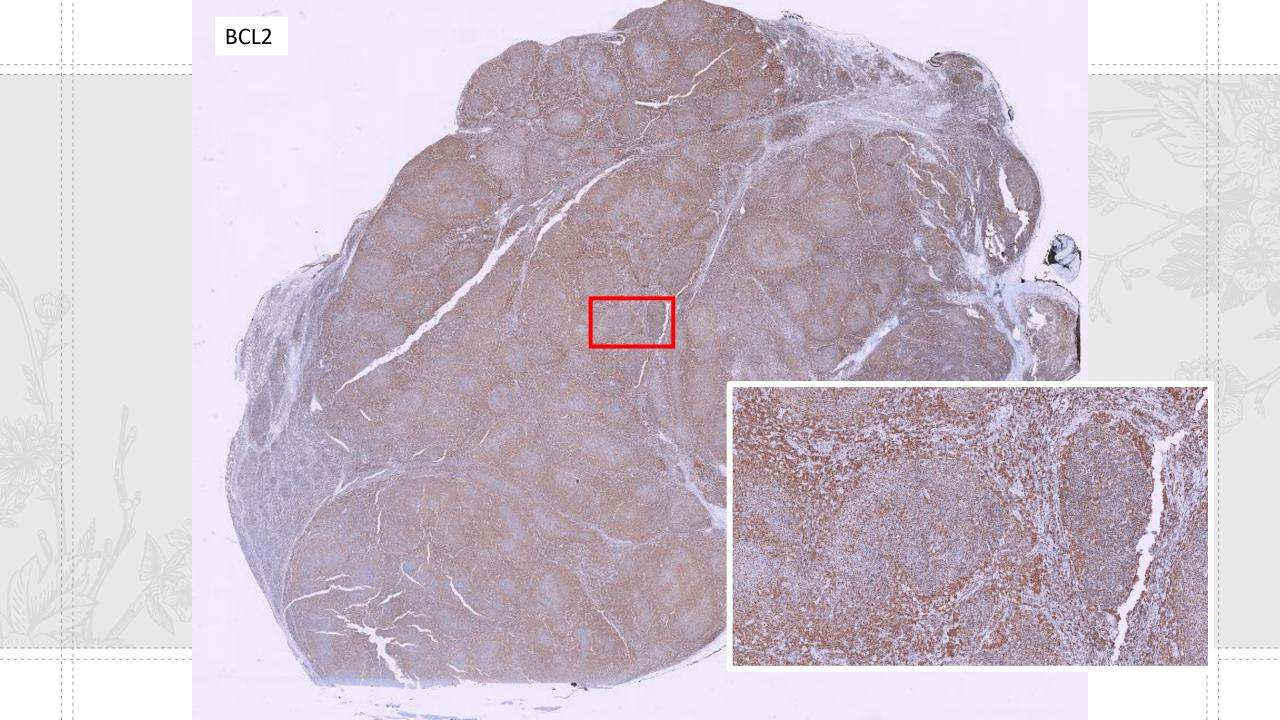












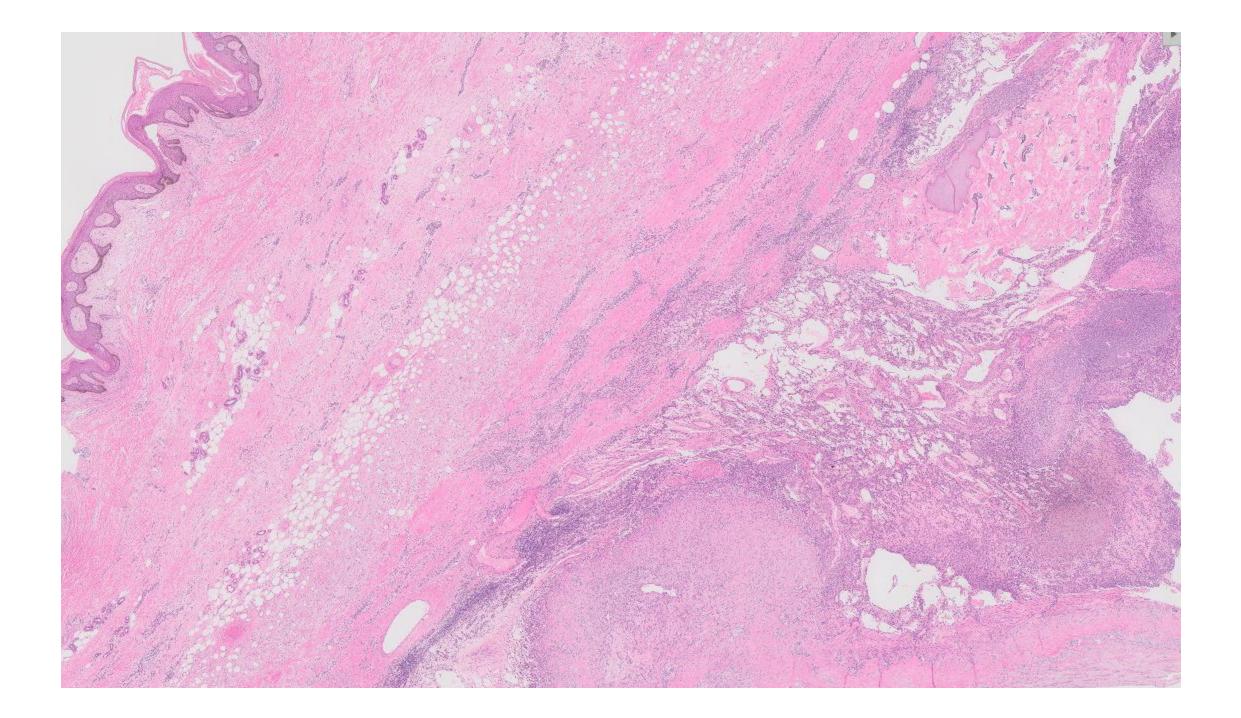
# DIAGNOSIS?

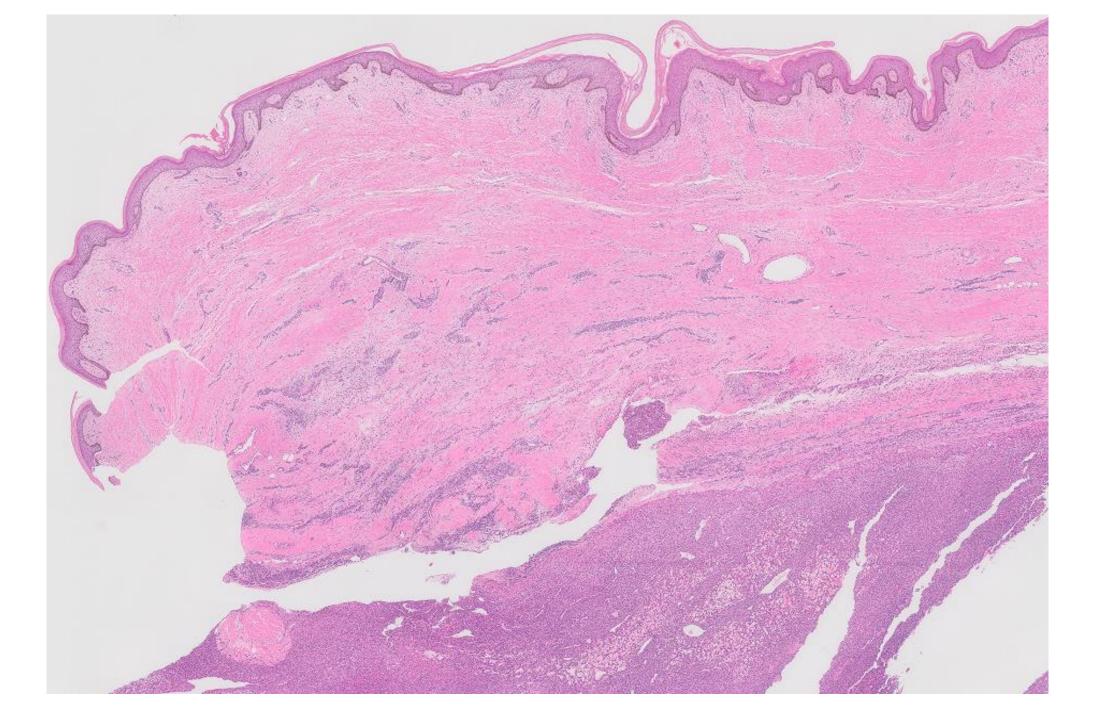


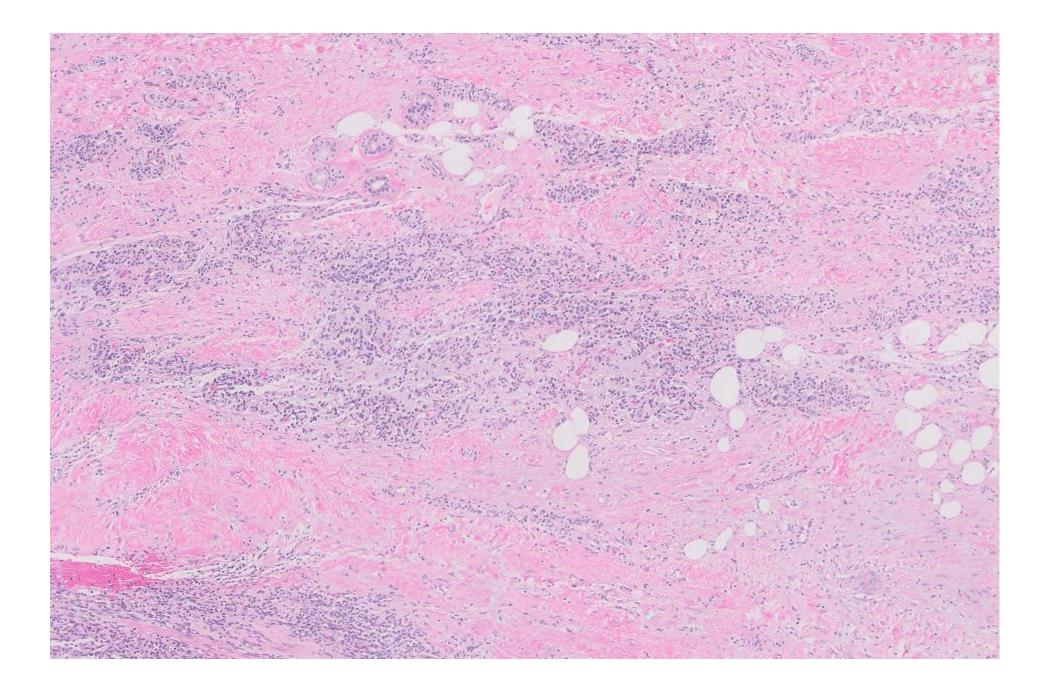
#### 25-0407

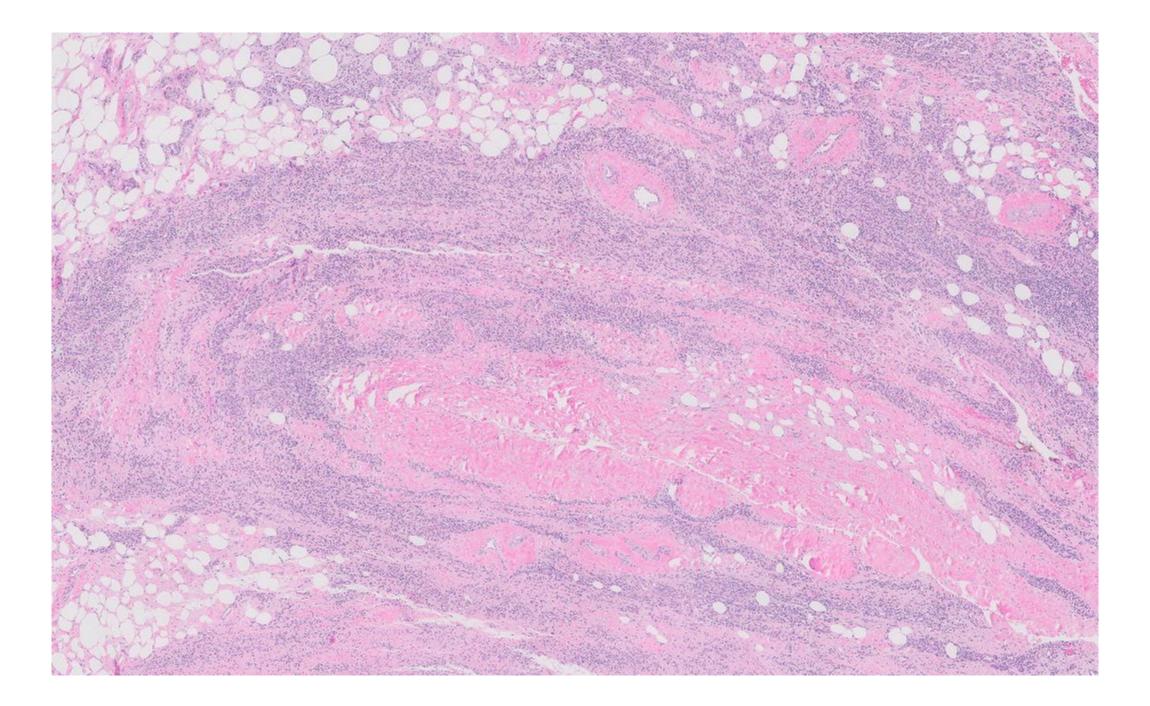
#### Sheren Younes; Xiaohua Qian; Stanford

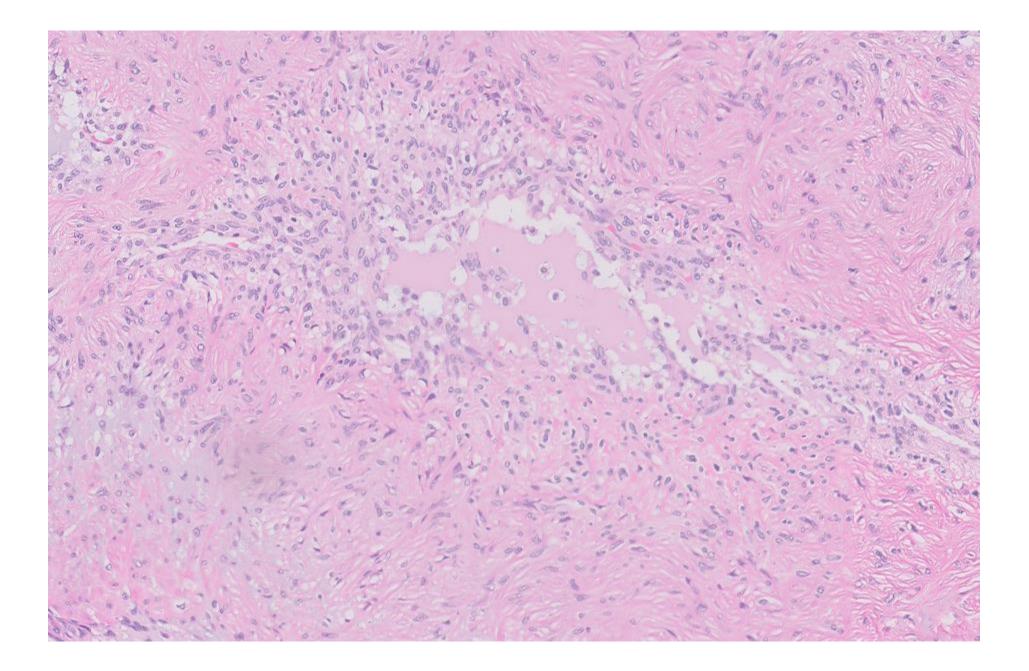
### 40 year-old female with left ankle mass

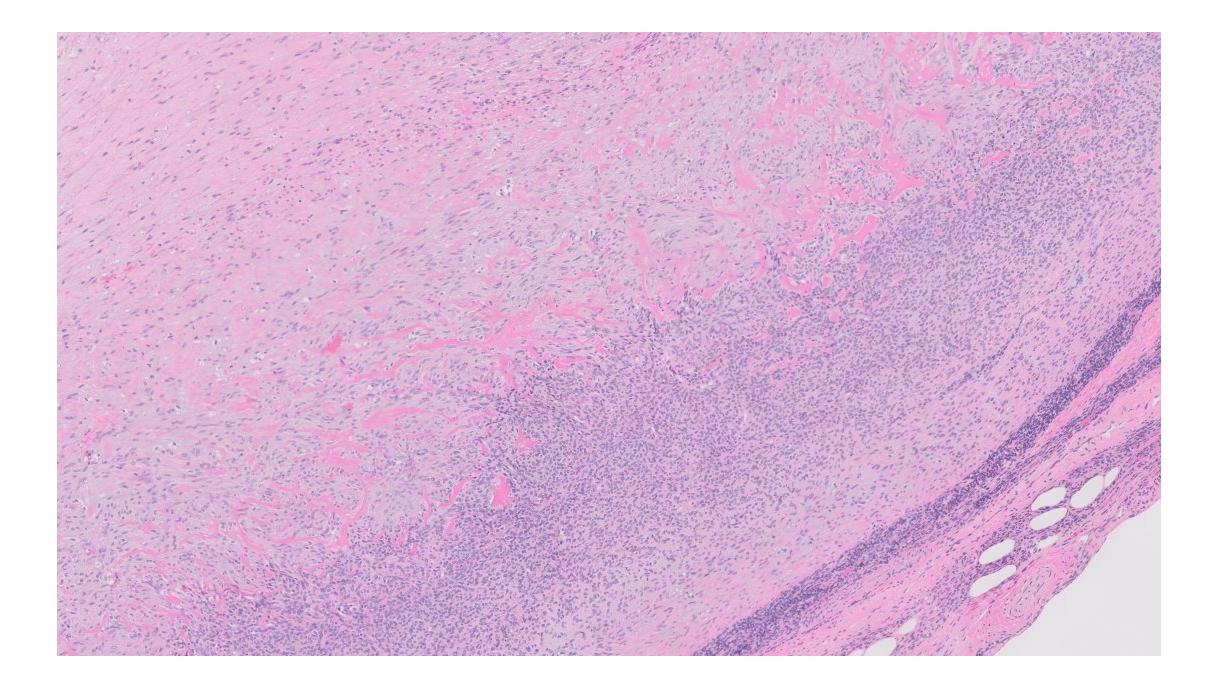


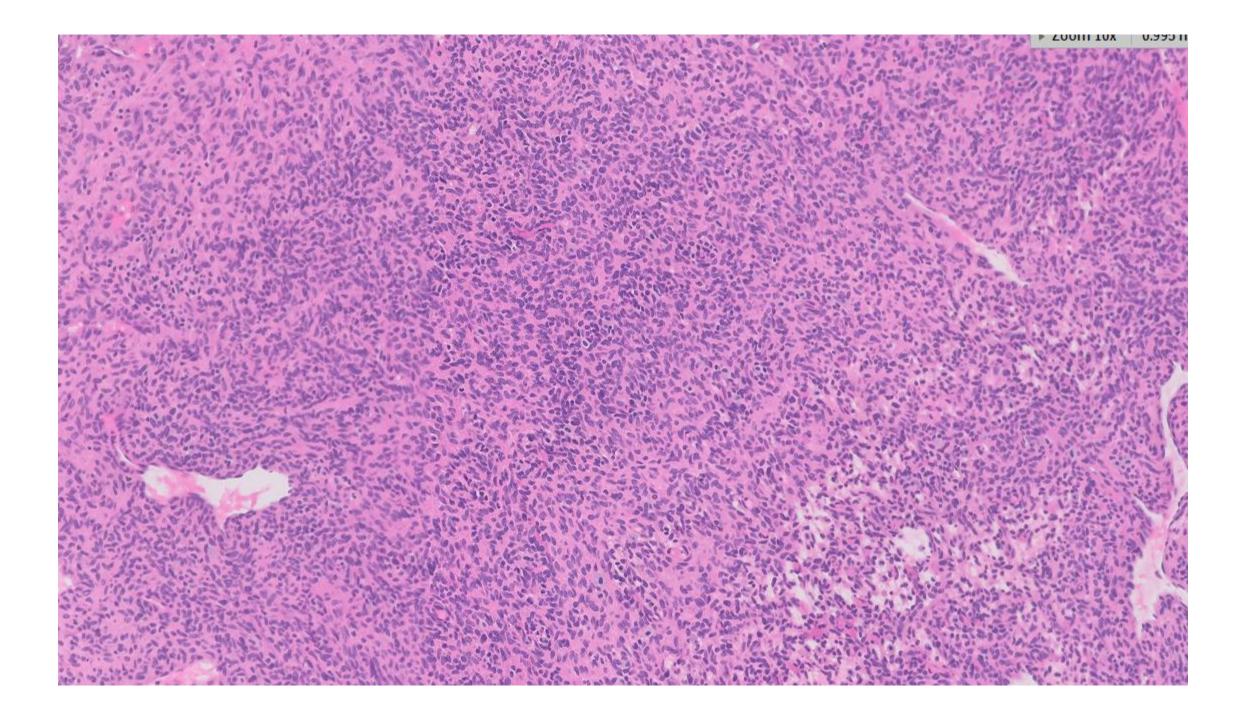


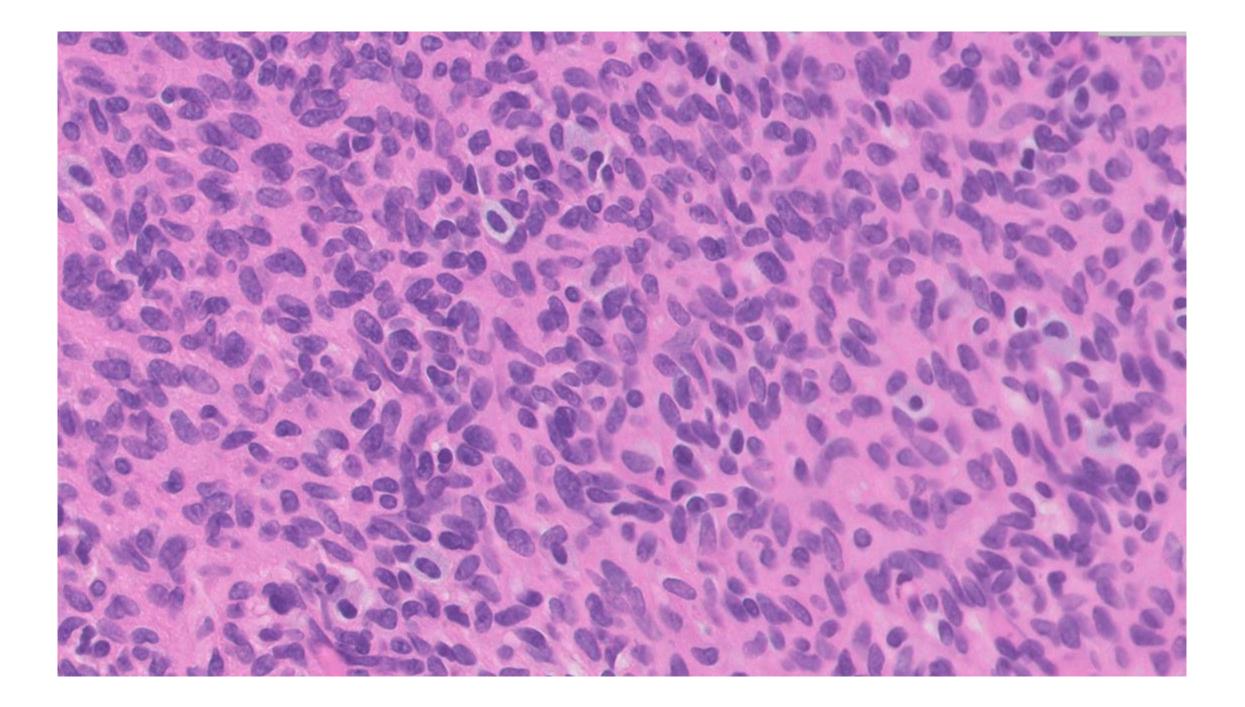


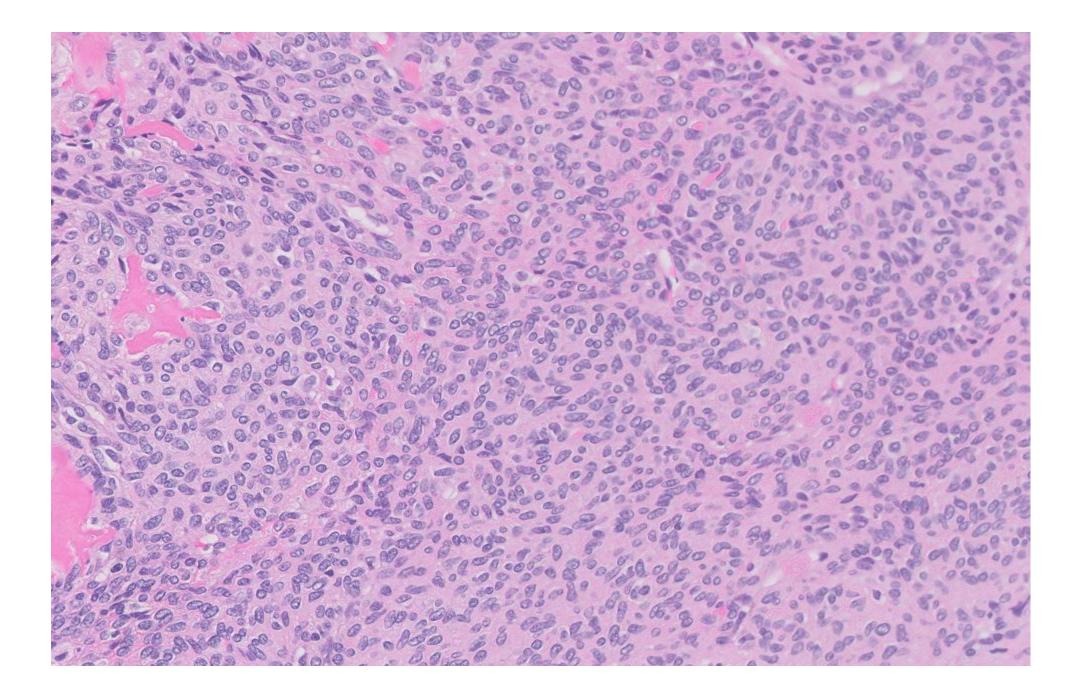


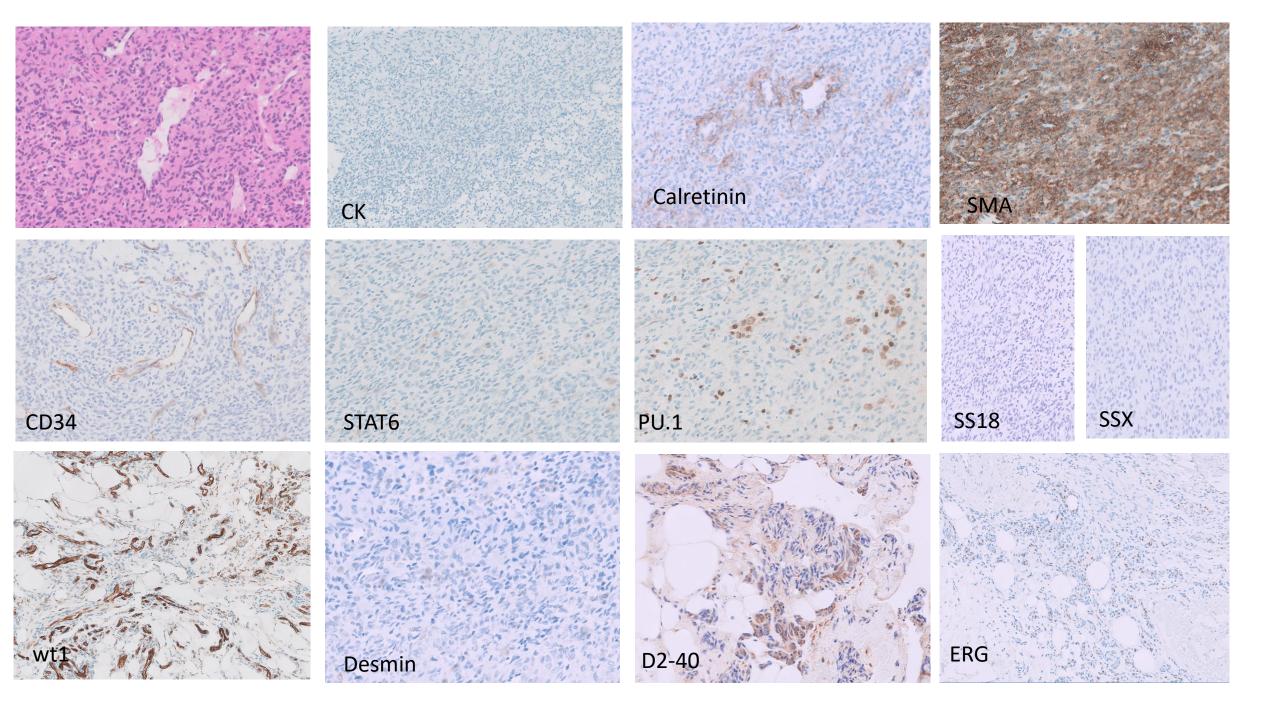












# DIAGNOSIS?

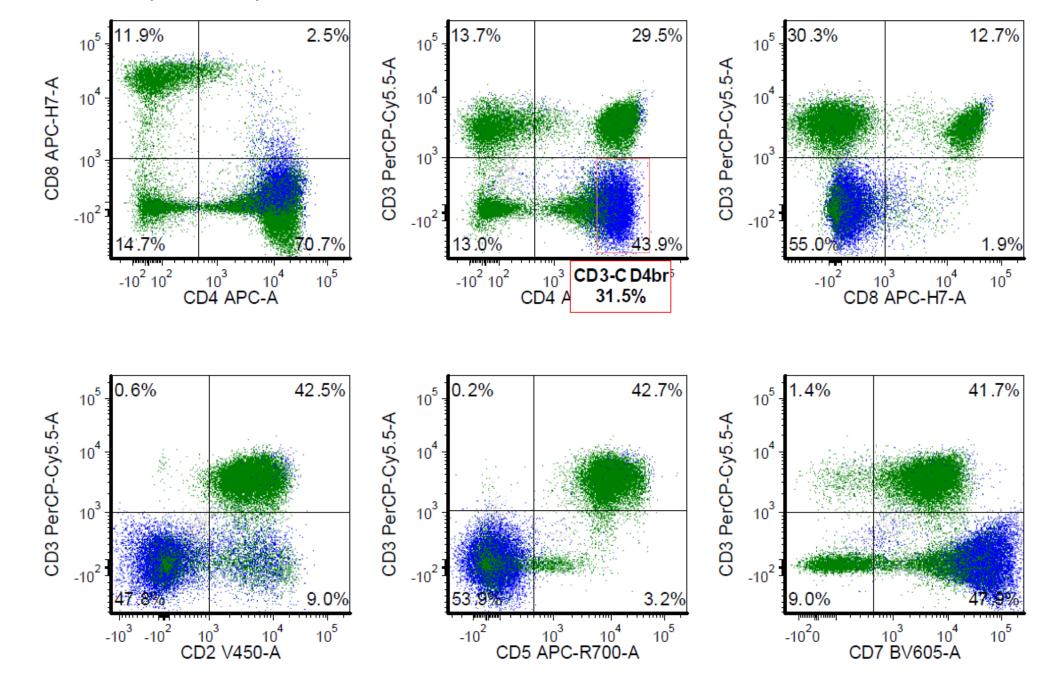


### 25-0408

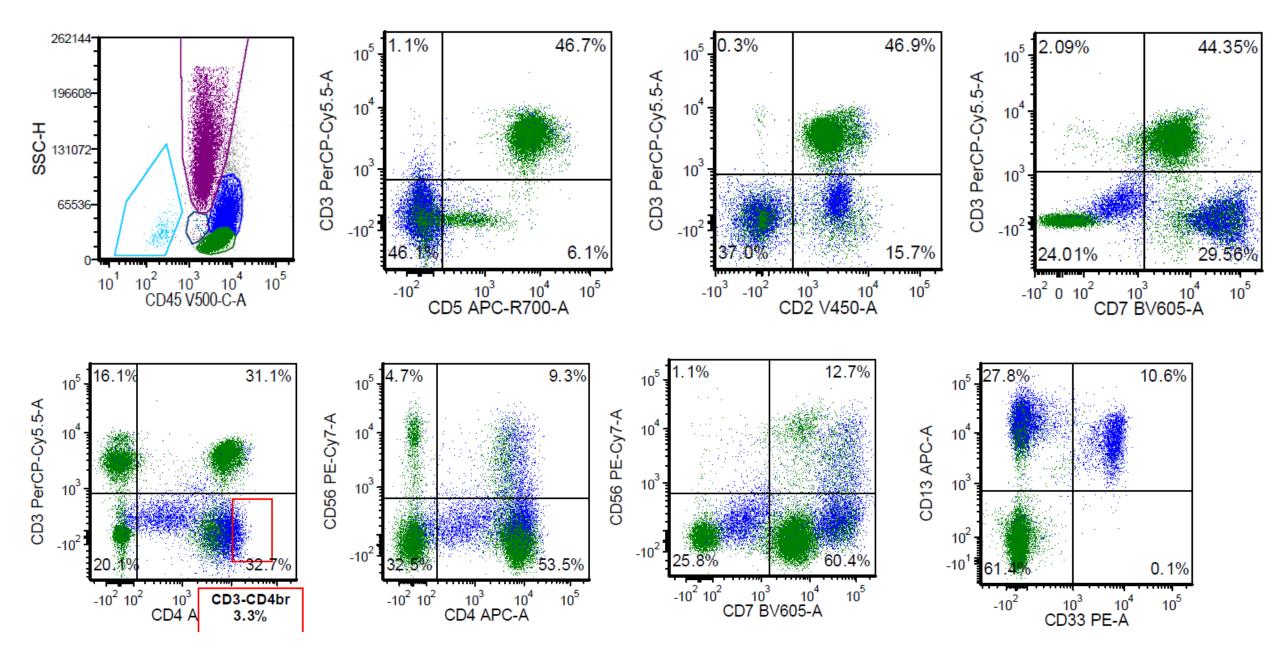
Sheren Younes; Sebastian Fernandez-Pol; Stanford

8 year old female with fever, respiratory failure, bilateral humerus lytic lesions

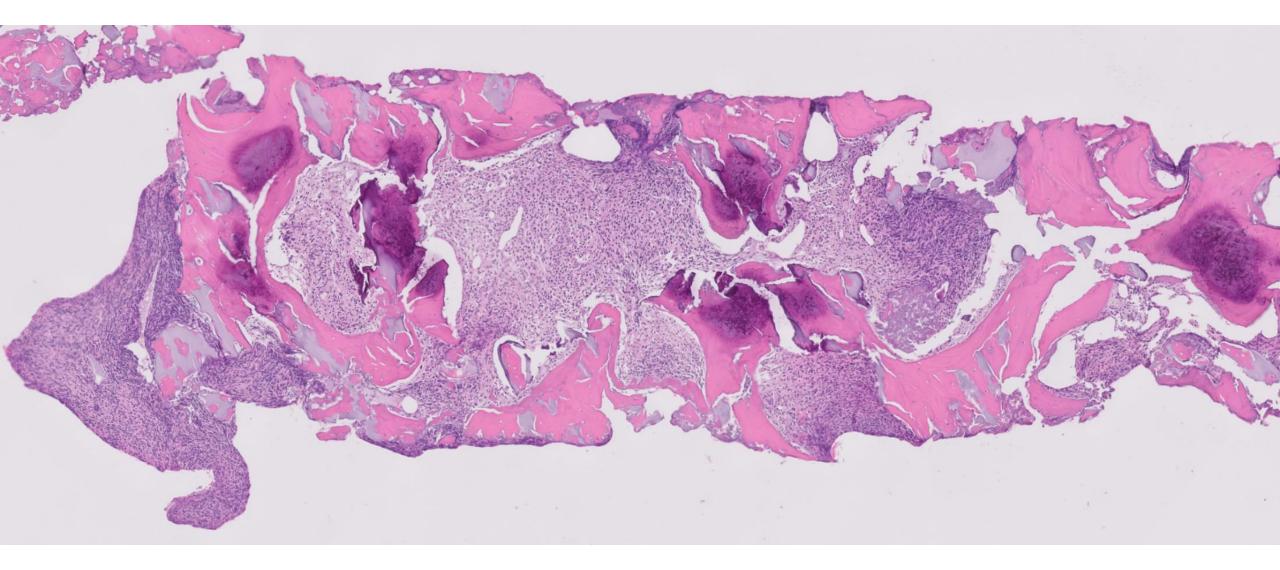
Pleural fluid flow cytometry



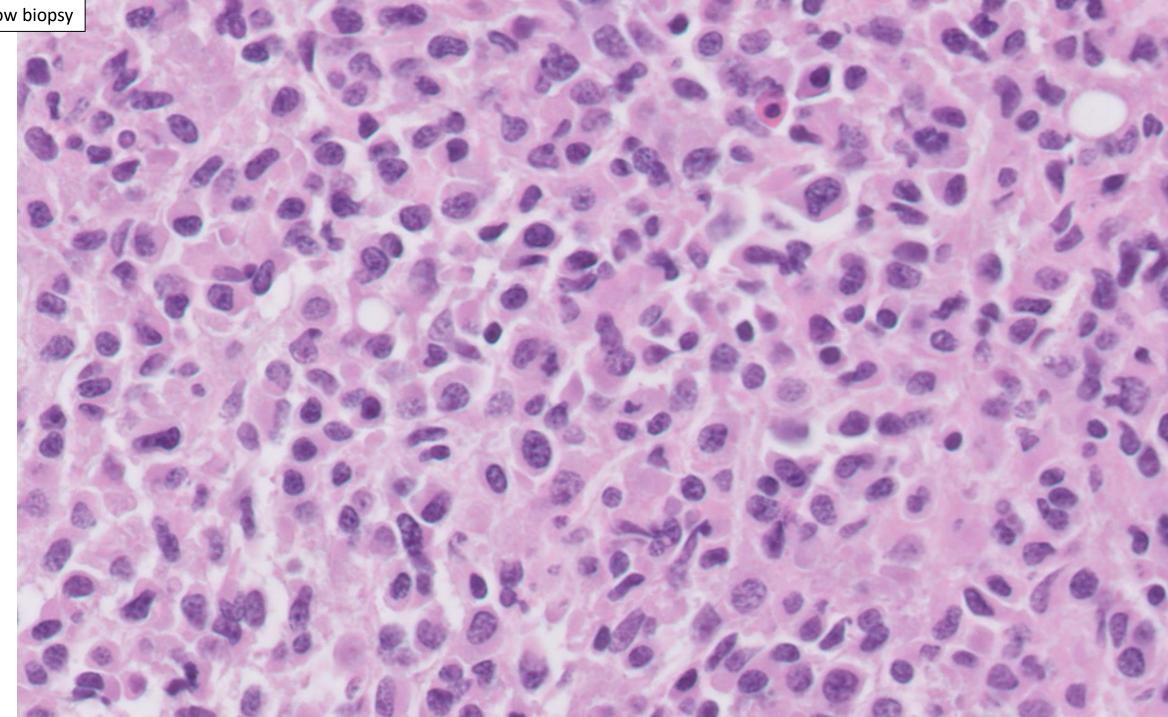
### Peripheral blood flow cytometry

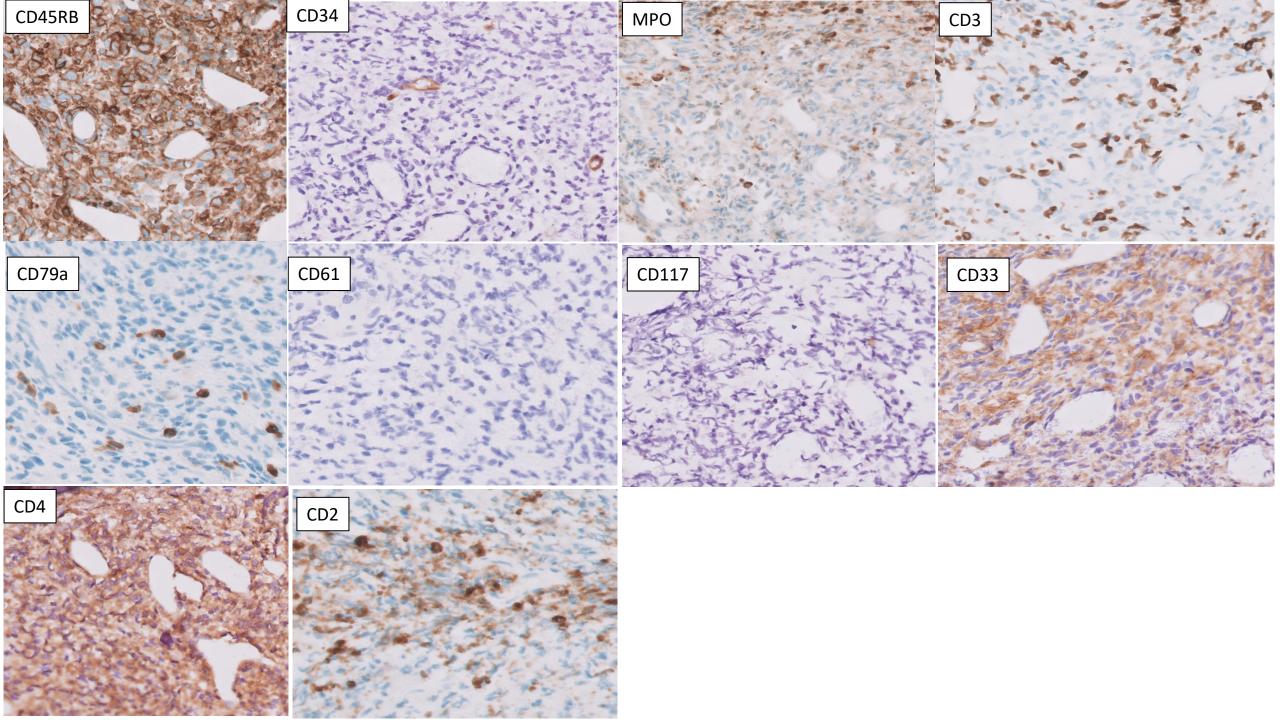


### Bone marrow biopsy









# DIAGNOSIS?



