Yorkshire general Histopathology EQA

Case Response Analysis: Circulation M

Case number: 300  Number of responses: 66  Date: 10 NOV 06

Clinical: FNA thyroid suspicious, Female – age 44 yrs

Specimen: Left lobe thyroid

Macro: A piece of thyroid weighing 5gms and measuring 3.3 x 2 x 1.5cm. There is a pale nodule 0.8cm across which appears to be just under the capsule of the thyroid.

Diagnostic categories:  
1 Papillary carcinoma (of thyroid)  
2 Papillary ca (follicular variant)  

Score:  
9.70  
0.30

Highest scoring diagnosis: 1 with 9.70 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any):

Original report and further information (if any): Papillary carcinoma of thyroid – classical

Case number: 301  Number of responses: 71  Date: 10 NOV 06

Clinical: Previously excised sebaceous cyst from area. Non-healing wound since then, ?recurrence ?carcinoma. Punch bx left scalp post auricular region. CD31 + CD34 positive. Male – age 66yrs

Specimen: Skin

Macro: Punch bx

Diagnostic categories:  
1 Angiosarcoma  
2 Haemangiosarcoma  
3 Kaposi’s sarcoma ?other vascular neoplasm  
4 malignant vascular tumour  

Score:  
9.58  
0.14  
0.14  
0.14

Highest scoring diagnosis: 1 with 9.58 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): would seek second opinion, do immunos, review prev histology

Original report and further information (if any): Epithelioid angiosarcoma
Clinical: Right parotid lump ?pleomorphic adenoma, Female – age 41yrs

Specimen: Parotid swelling

Macro: Parotid gland 70mm max with solid grey nodule 26mm max dimension.

Diagnostic categories:  
1 Acinic cell tumour  
2 Acinic cell carcinoma  
3 Acinic cell tumour/carcinoma  
4 Oncocytoma  

Score:  
1.52  
7.73  
0.61  
0.15

Highest scoring diagnosis: 2 with 7.73 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): amylase, PAS+/D, more blocks

Original report and further information (if any): Acinic cell carcinoma

Clinical: Testicular tumour, Male – age 22yrs

Specimen: Testis

Macro: "Right testis" 70mm maximal dimension. Replaced by solid and cystic tumour measuring 55mm of variable colour with haemorrhage.

Diagnostic categories:  
1 Malignant teratoma undiff+yolk sac tum  
2 Malignant teratoma intermed  
3 Mixed germ cell tumour/embryonal ca  
4 Malig terratoma with yolk sac tum  
5 Malig terrat--emb ca, yolk sac,some glands  
6 MTU + seminoma  
7 MTI with yolk sac elements  
8 MTU with ITGCN  
9 embryonal ca, yolksac tum  
10 Malig terratoma(MTU+YS+ITGN)  

Score:  
0.88  
1.23  
2.28  
0.35  
0.18  
0.35  
0.35  
0.88  
1.58  
1.93

Highest scoring diagnosis: 3 with 2.28 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): Seek second opinion, Is this MTI or MTU? do spl stains AFP HCG, possible yolk-sac component, not ideal EQA slide

Original report and further information (if any): Malignant teratoma intermediate.
**Case number: 304**  
**Number of responses: 71**  
**Date: 10 Nov 06**

**Clinical:** Lesion right lower limb above shin. ?origin from muscle, Male – age 34yrs

**Specimen:** Soft tissue

**Macro:** Three pieces of adipose tissue 40mm, 31mm and 26mm each enclosing encapsulated nodule.

**Diagnostic categories:**
- 1 Schwannoma/neurilemmoma: Score 9.86
- 2 Angioleiomyoma: Score 0.14
- 3 PECOMA: Score 0.00

**Highest scoring diagnosis:** 1 with 9.86 Asterisks (if any) indicate dangerous diagnoses.

**Secondary diagnoses and comments (if any):** do S100

**Original report and further information (if any):** Neurilemmoma (Schwannoma)

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**Case number: 305**  
**Number of responses: 72**  
**Date: 10 Nov 06**

**Clinical:** Excision of sebaceous cyst, Female – age 62yrs

**Specimen:** Skin of vulva

**Macro:** Cystic tissue 7 x 5 x 4mm

**Diagnostic categories:**
- 1 Hidradenoma papilliferum: Score 9.72
- 2 Syringocystadenoma papilliferum: Score 0.14
- 3 ben skin appendage tum?hidradenoma: Score 0.14

**Highest scoring diagnosis:** 1 with 9.72 Asterisks (if any) indicate dangerous diagnoses.

**Secondary diagnoses and comments (if any):**

**Original report and further information (if any):** Hidradenoma Papilliferum
Case number: 306 Number of responses: 64 Date: 10 NOV 06

Clinical: Ulcerated nipple. Female – age 74 yrs
Specimen: Mastectomy
Macro: Mastectomy specimen 17 x 8 x 4cm weighing 215gm. The nipple is ulcerated.

Diagnostic categories:
1 Paget’s disease of nipple with DCIS
2 Paget’s disease of nipple
3 Ca in situ (?paget’s/squamous ca in situ)
4 Intraepidermal SCC
5 Intraepidermal ca+Paget’s+DCIS
6 Bowen’s disease
7 Bowen’s disease and DCIS
8 Intraductal ca with Pagetoid spread
9 Insitu neoplasm not typical of Pagets

Score:
6.28
1.83
0.47
0.58
0.16
0.20
0.17
0.16
0.16

Highest scoring diagnosis: 1 with 6.28 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): needs IHC to help distinguish X2 , appropriate case without immunos

Original report and further information (if any): Paget’s disease of the nipple.

Case number: 307 Number of responses: 66 Date: 10 NOV 06

Clinical: APER for carcinoma of rectum. Short course radiotherapy given. Male – age 75yrs
Specimen: APER – 2 SLIDES
Macro: 2 cm long tumour in rectum below peritoneal reflection (A) with multiple nodes in mesorectum (B)

Diagnostic categories:
1 Adenoca of colon but node mets?prostatic
2 Adenoca of colon ?neuroendoc in nodes
3 adenoca of colon pT2
4 (rectal)Adenoca with nodal mets
5 Adenoca of rectum
6 Rectal adenoca ??mets from another prim

Score:
4.09
0.15
0.45
2.88
0.45
1.97

Highest scoring diagnosis: 1 with 4.09 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): lym nodes look bland ? from another tumour, would do immunos , exclude prostatic origin, radiation changes, adenoca with venous invasion nodules , unusual pigment in RBCs?haematological disorder

Original report and further information (if any): Primary rectal adenocarcinoma with metastatic prostatic adenocarcinoma in lymph node (also radiation proctitis)
Case number: 308  Number of responses: 70  Date: 10 NOV 06

Clinical: Skin lesion, Male – age 35yrs

Specimen: Skin biopsy

Macro: Elliptical piece of skin 16 x 8 x 5mm with no visible lesion.

Diagnostic categories:  Score:
1 Ben fibrous histiocytoma/dermatofibroma 8.40
2 Cellular dermatofibroma 1.14
3 Dermatofibroma with "monster cells" 0.29
4 Dermatofibrosare protuberans 0.17

Highest scoring diagnosis: 1 with 8.40 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): some pigment?iron?melanin--spl stains to confirm X3 mitotic and pleomorphic

Original report and further information (if any): Dermatofibroma

Case number: 309  Number of responses: 65  Date: 10 NOV 06

Clinical: PMB inc. mass in uterus. Thick polypoid endometrium. Female – age 65yrs

Specimen: Endometrial currettings

Macro: Multiple fragments together approx. 1ml

Diagnostic categories:  Score:
1 Adenoca of endometrium 0.31
2 Endometroid adenoca with squam diff 2.92
3 Endometroid adenoca with squam metapl 1.08
4 Endometroid adenoca (mod differentiated) 5.38
5 Adenoacanthoma 0.15
6 Endocervical adenocarcinoma 0.15

Highest scoring diagnosis: 4 with 5.38 Asterisks (if any) indicate dangerous diagnoses.

Secondary diagnoses and comments (if any): bad section, serous papillary component

Original report and further information (if any): Grade 2 endometrial adenocarcinoma