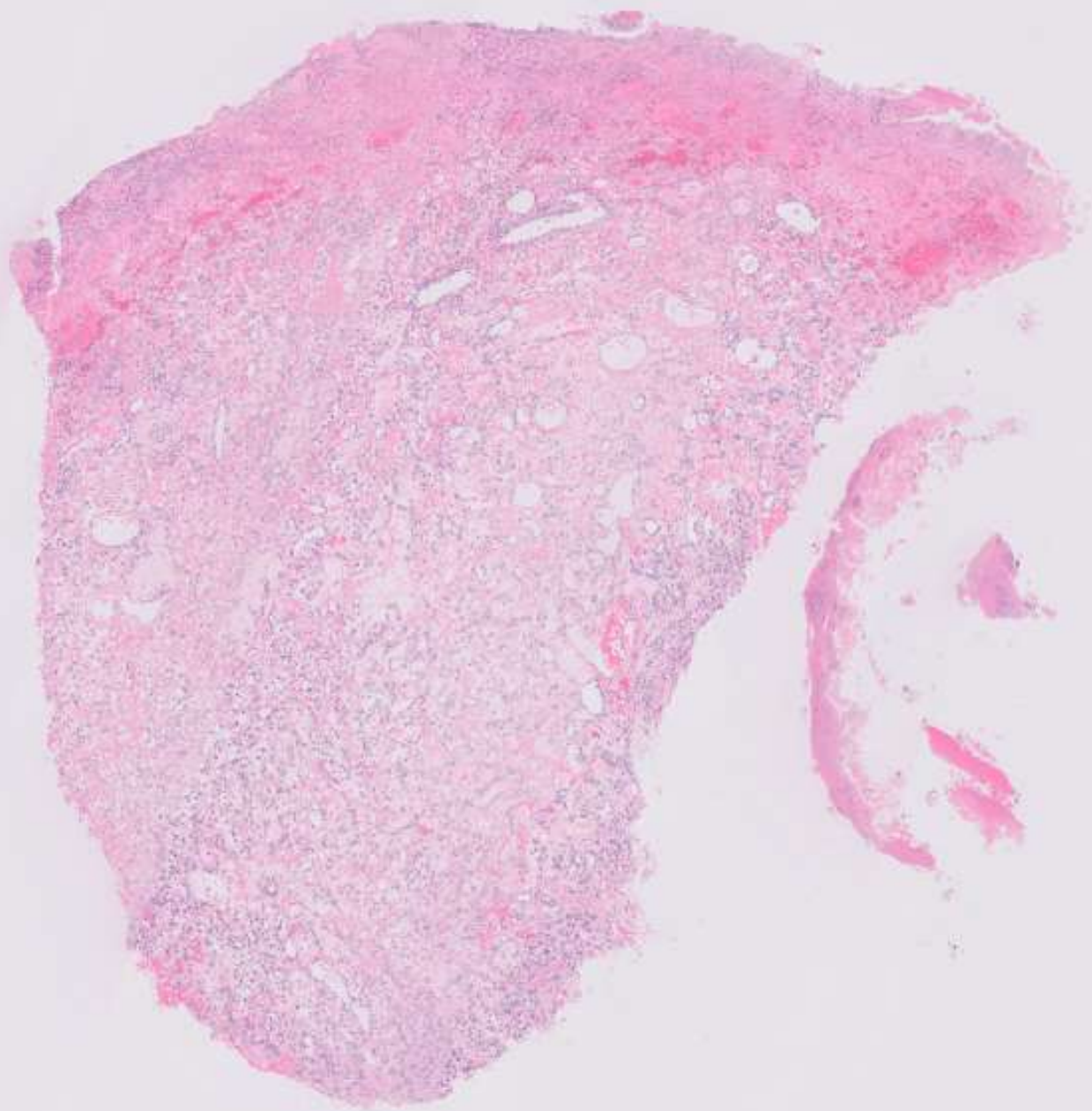
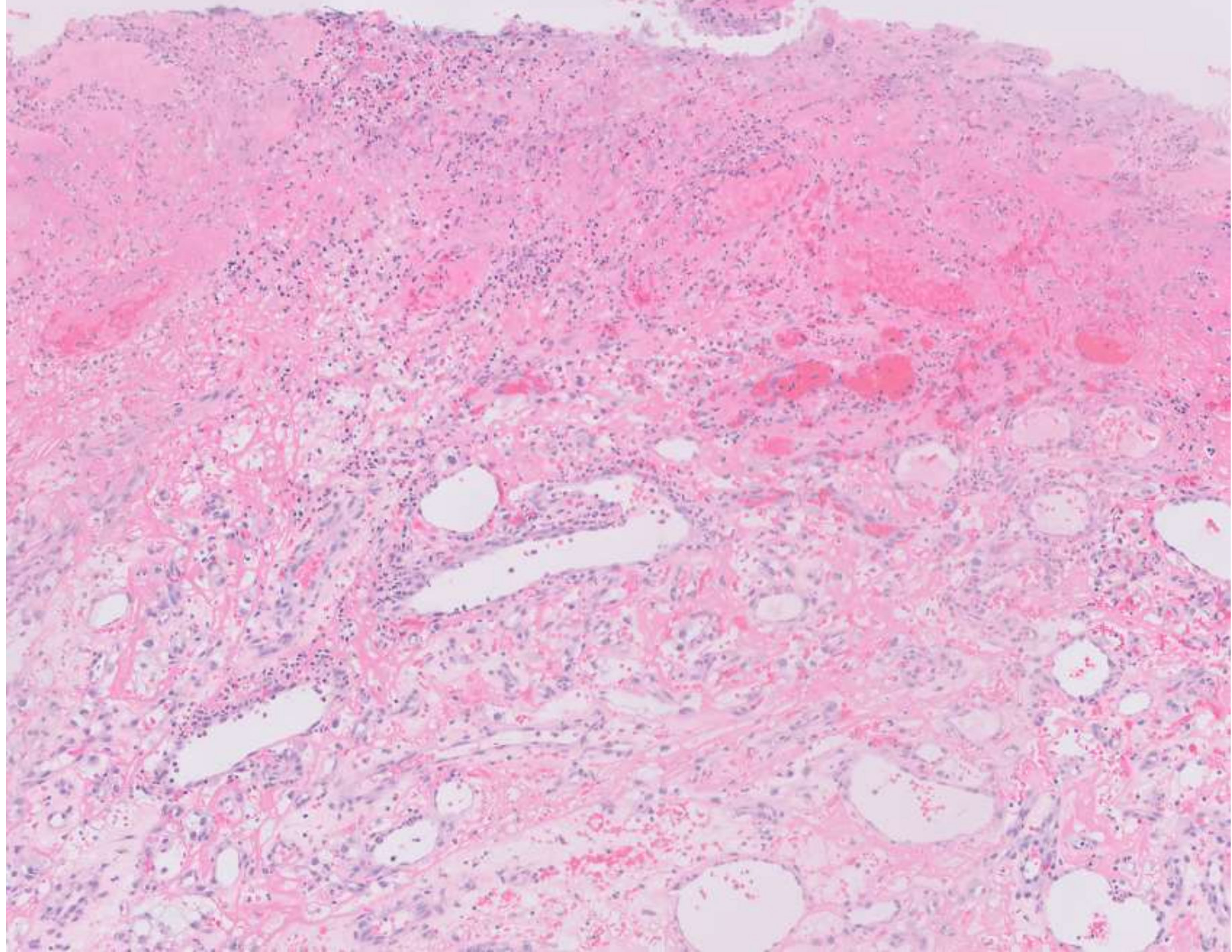


21-0901

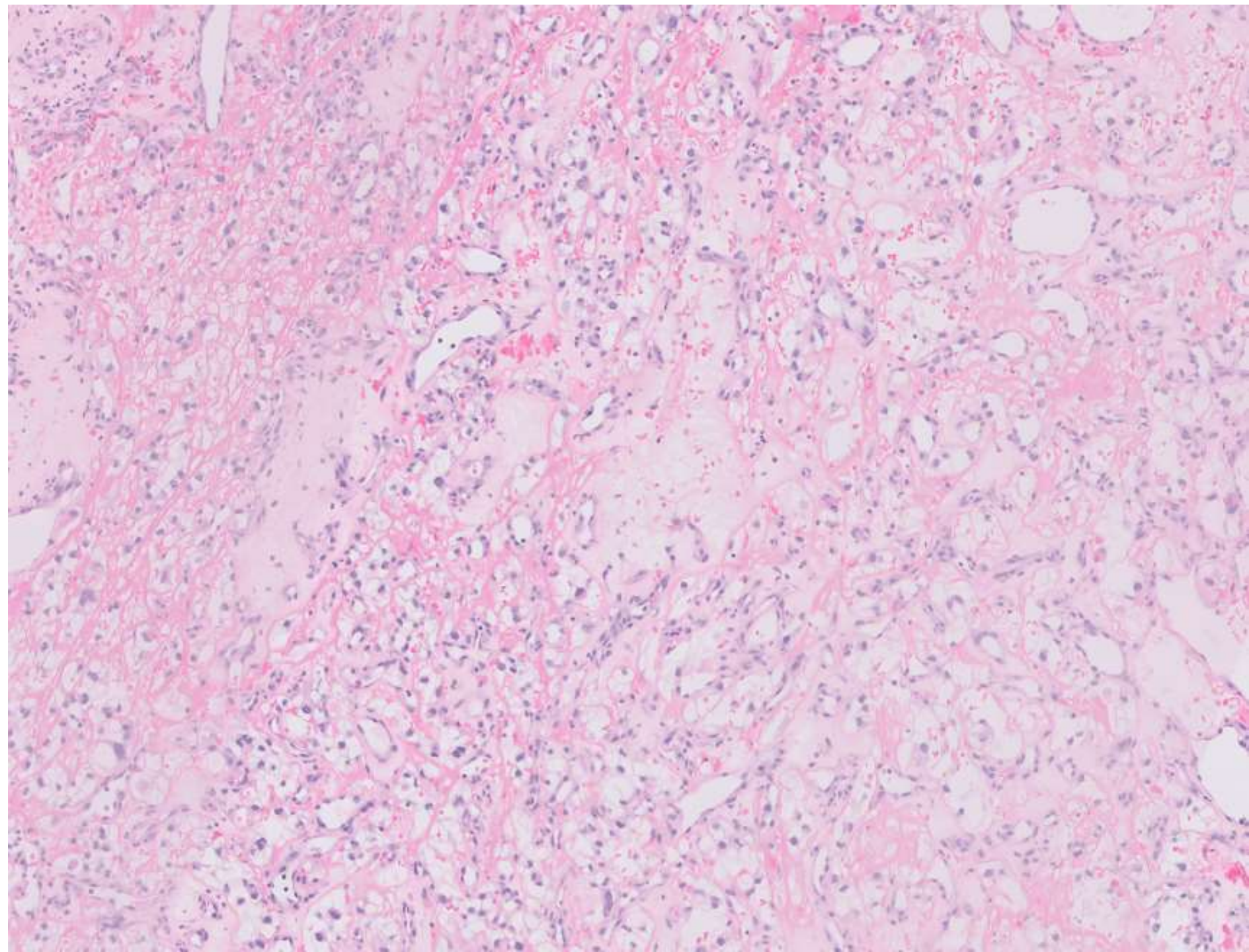
**Emily Chan; USCF**

75-year-old man with 2.5 cm right epididymal mass

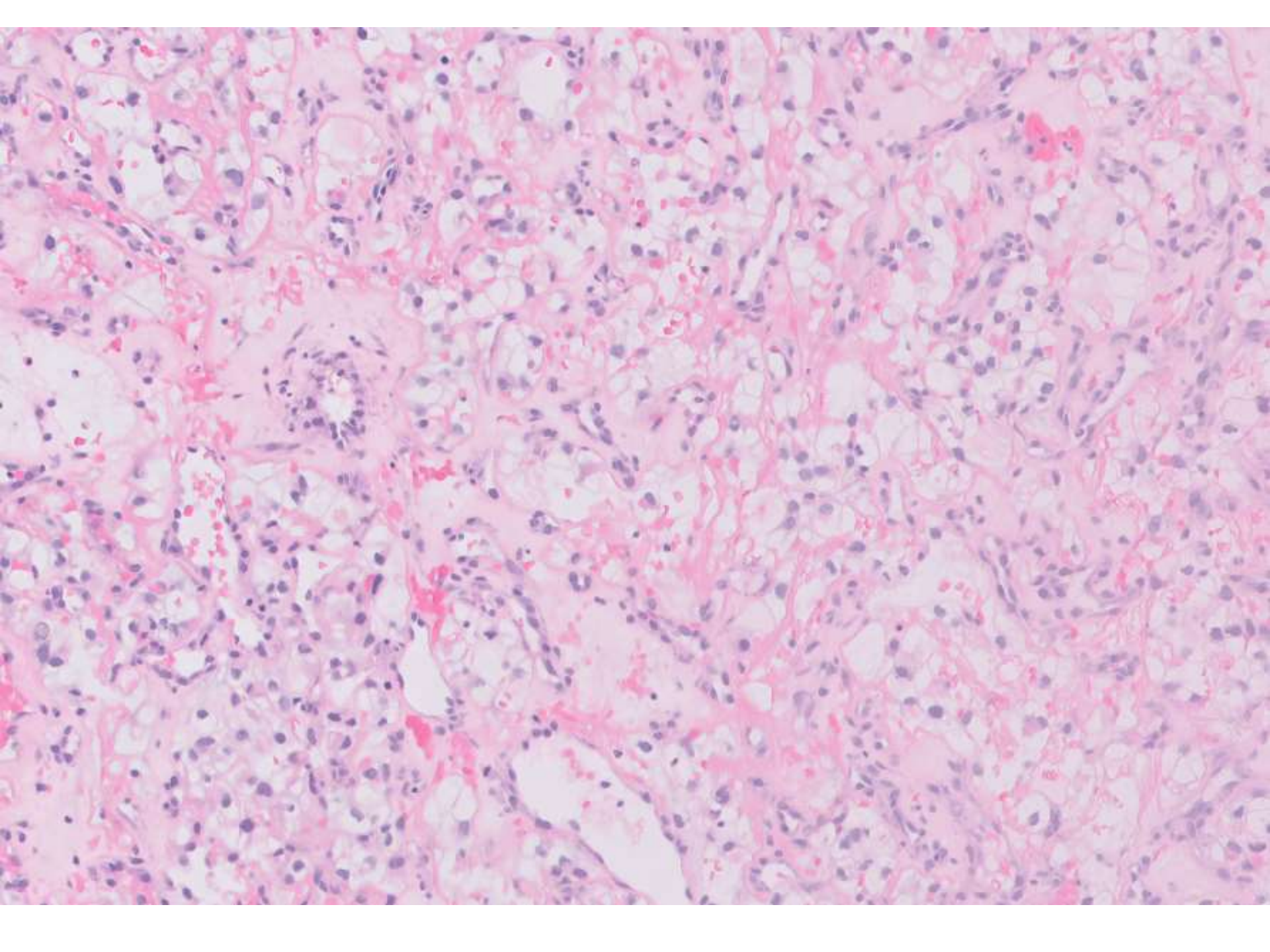




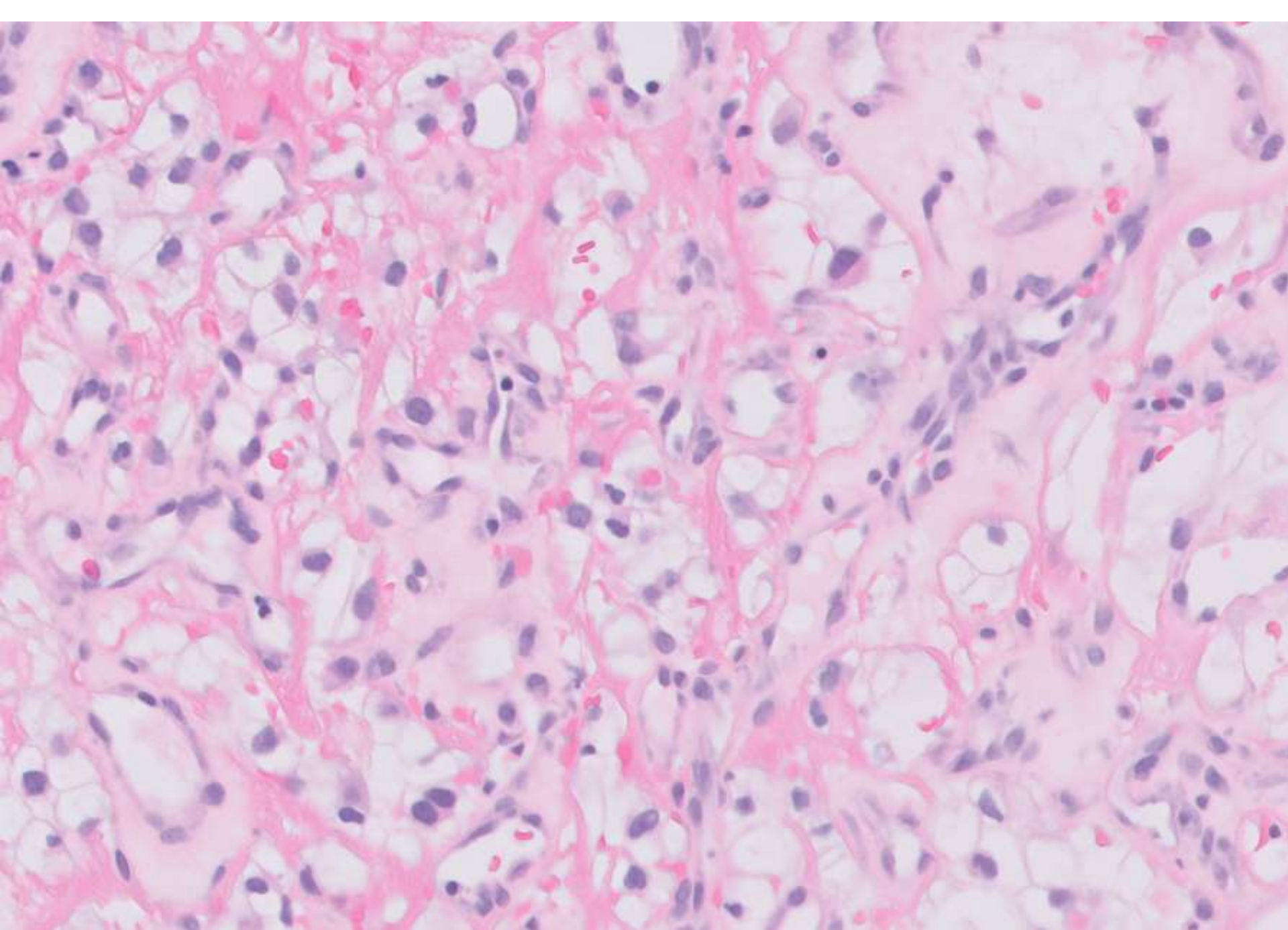












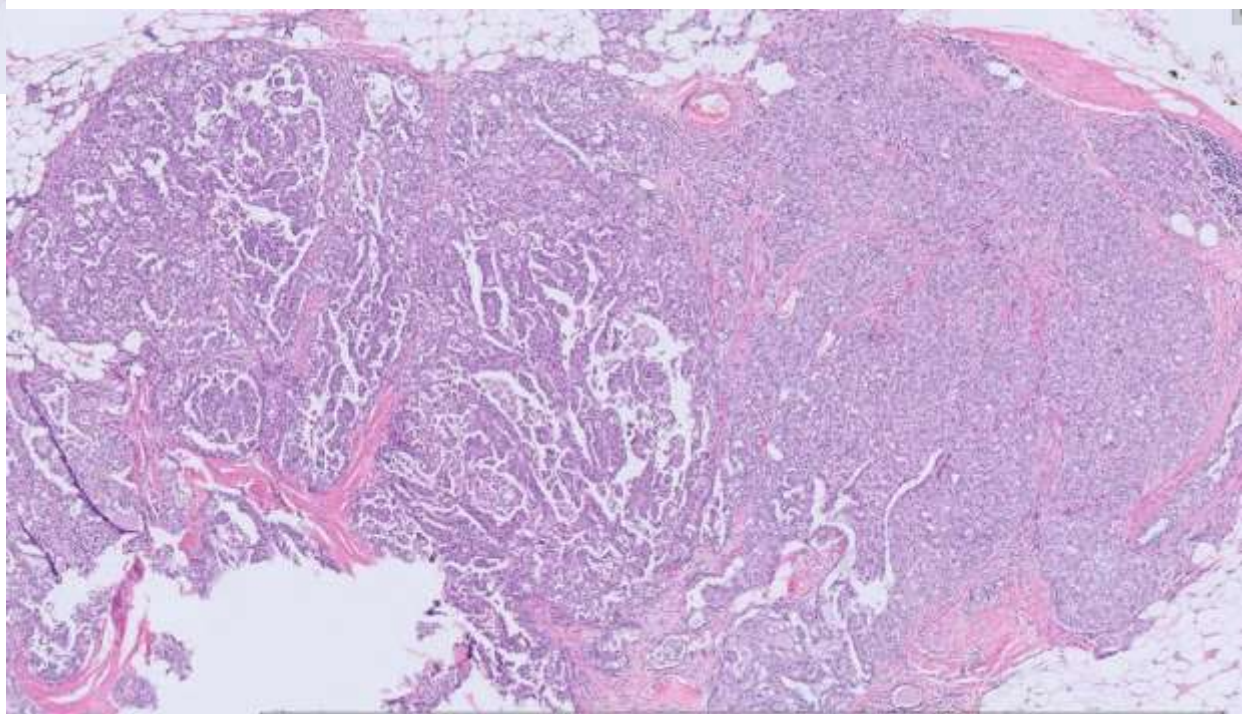
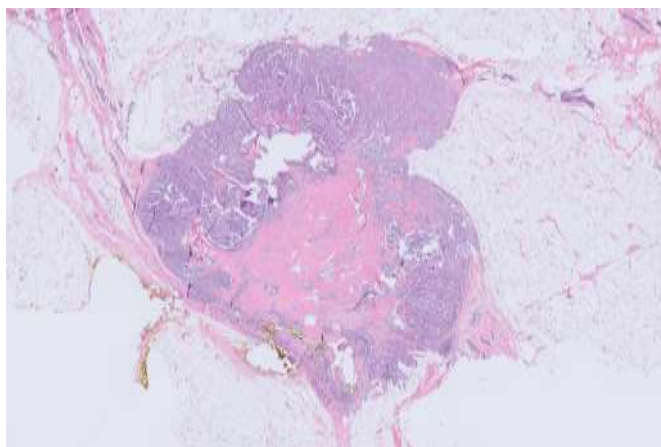


21-0902

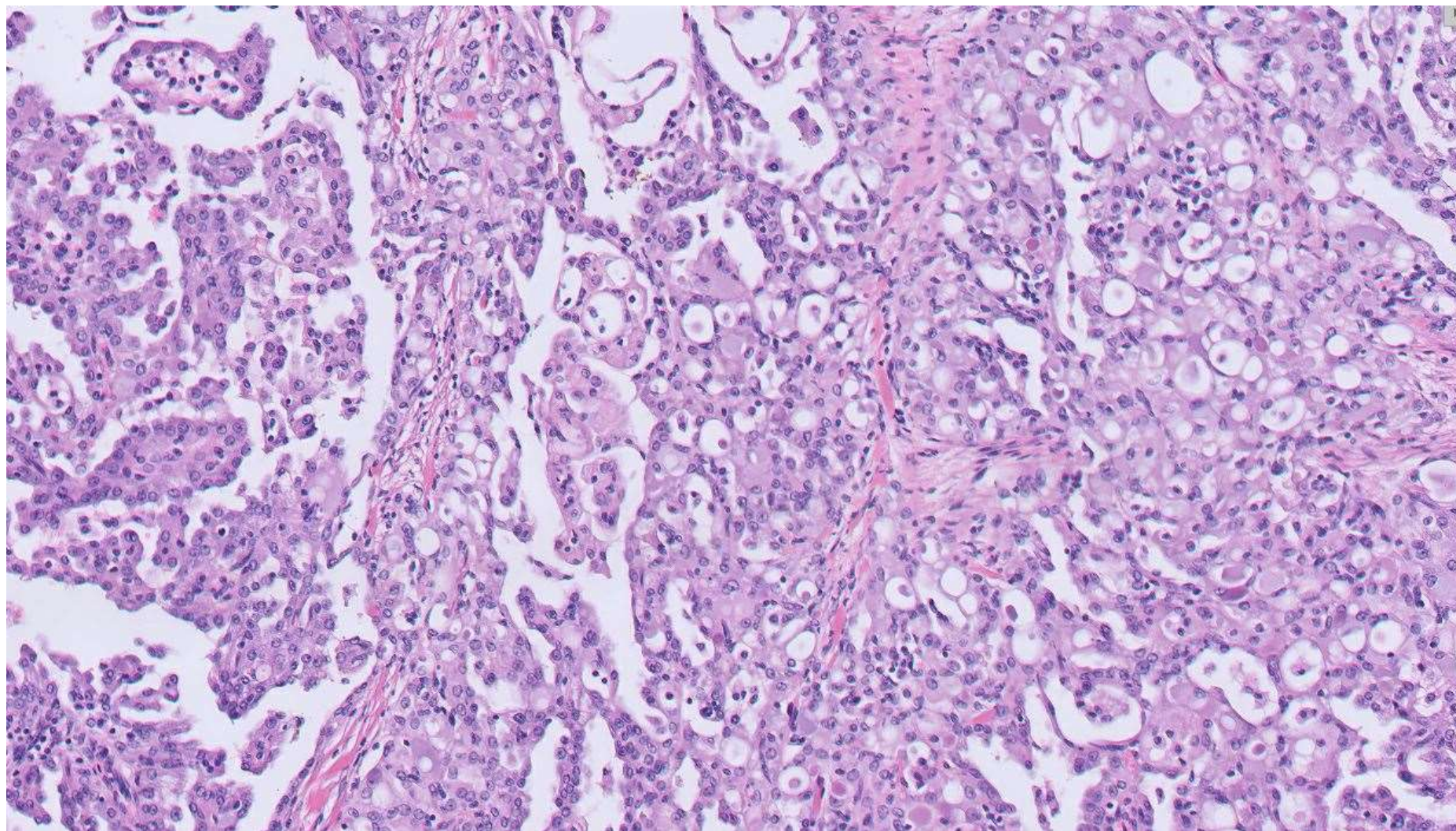
**Roshanak Derakhshandeh/Megan Troxell; Stanford**

68-year-old F with left breast lesion.

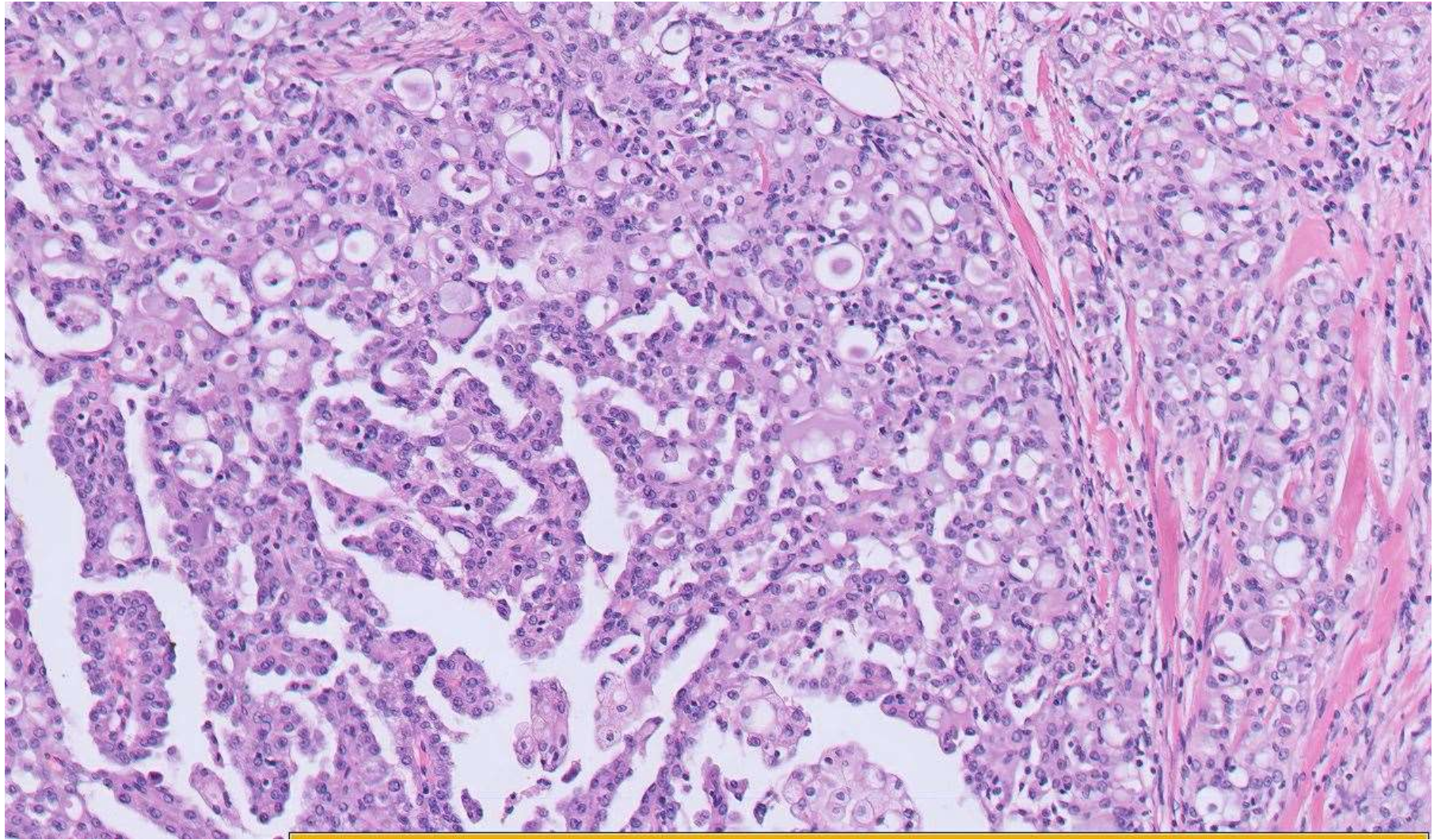




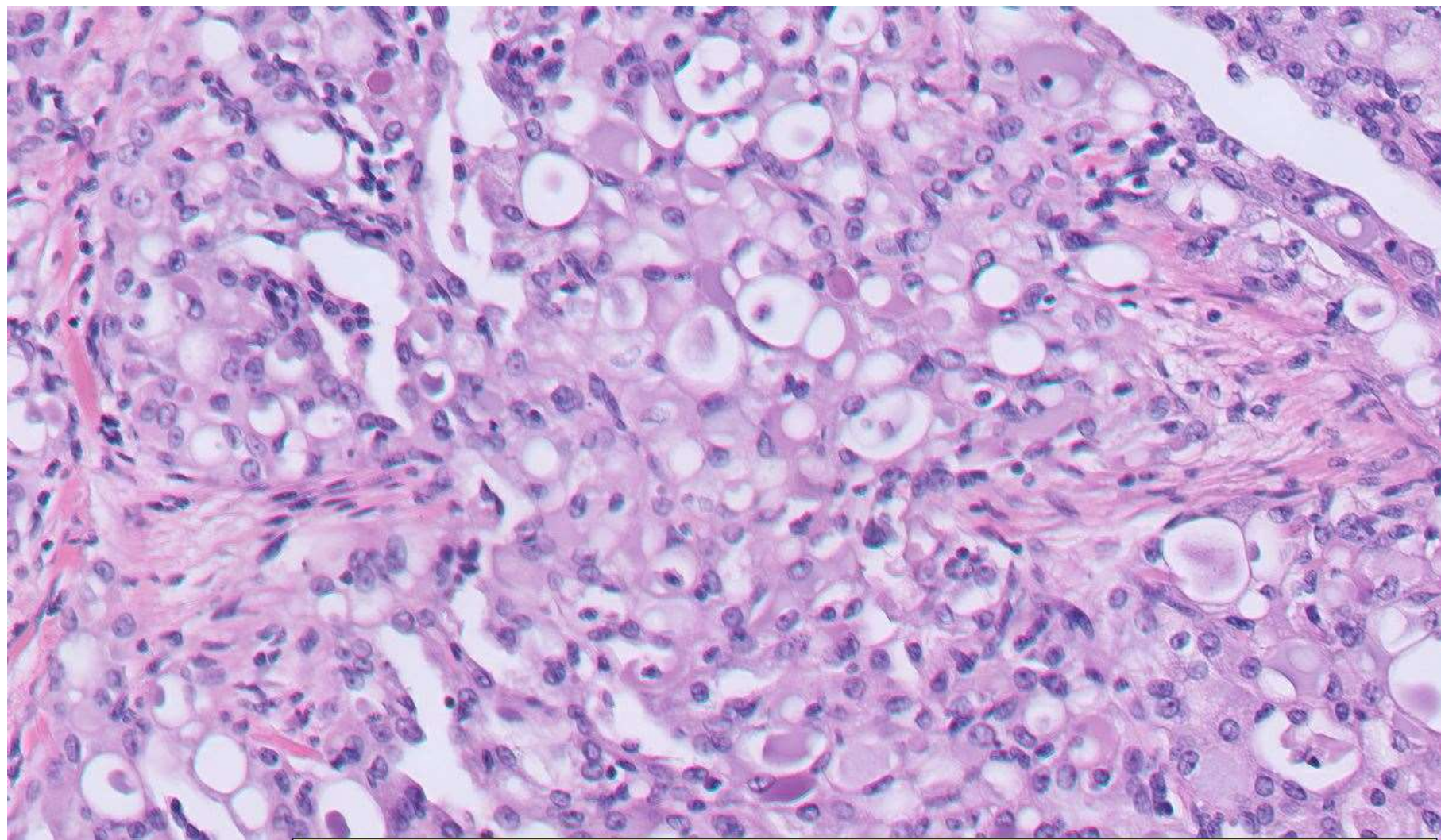














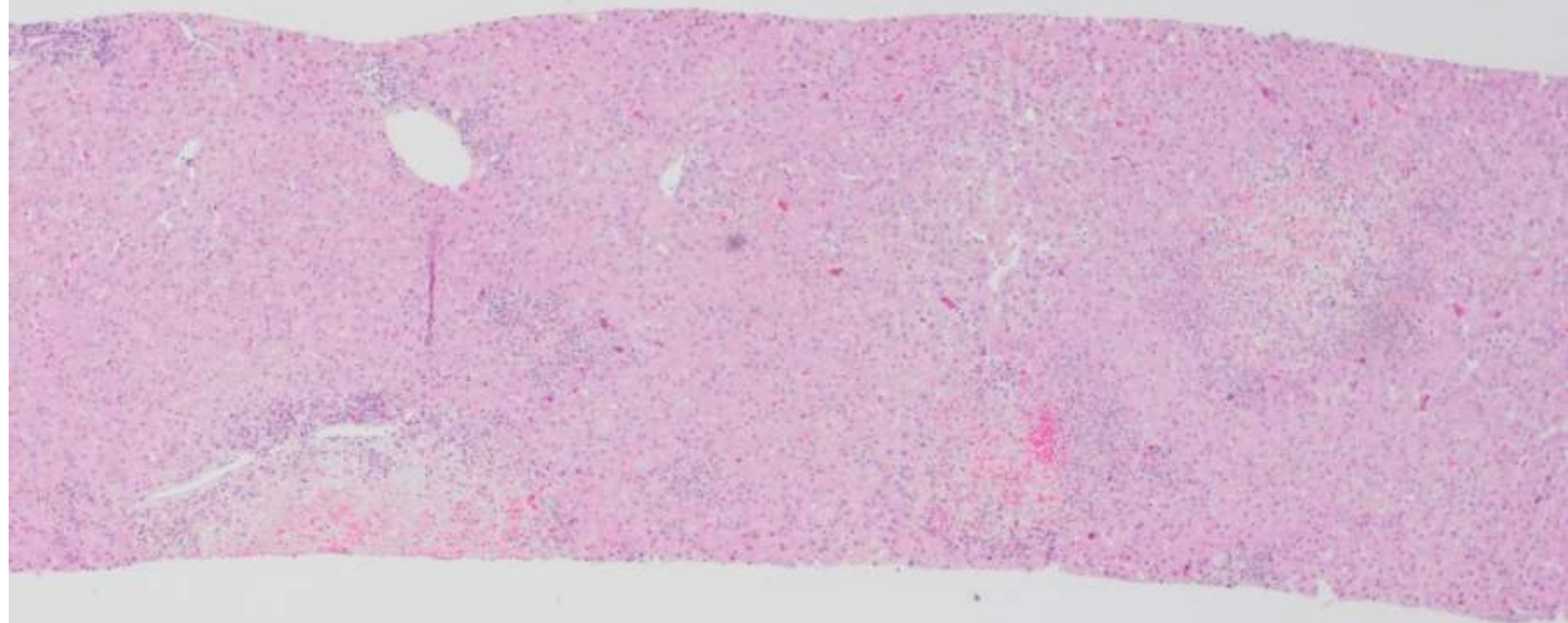


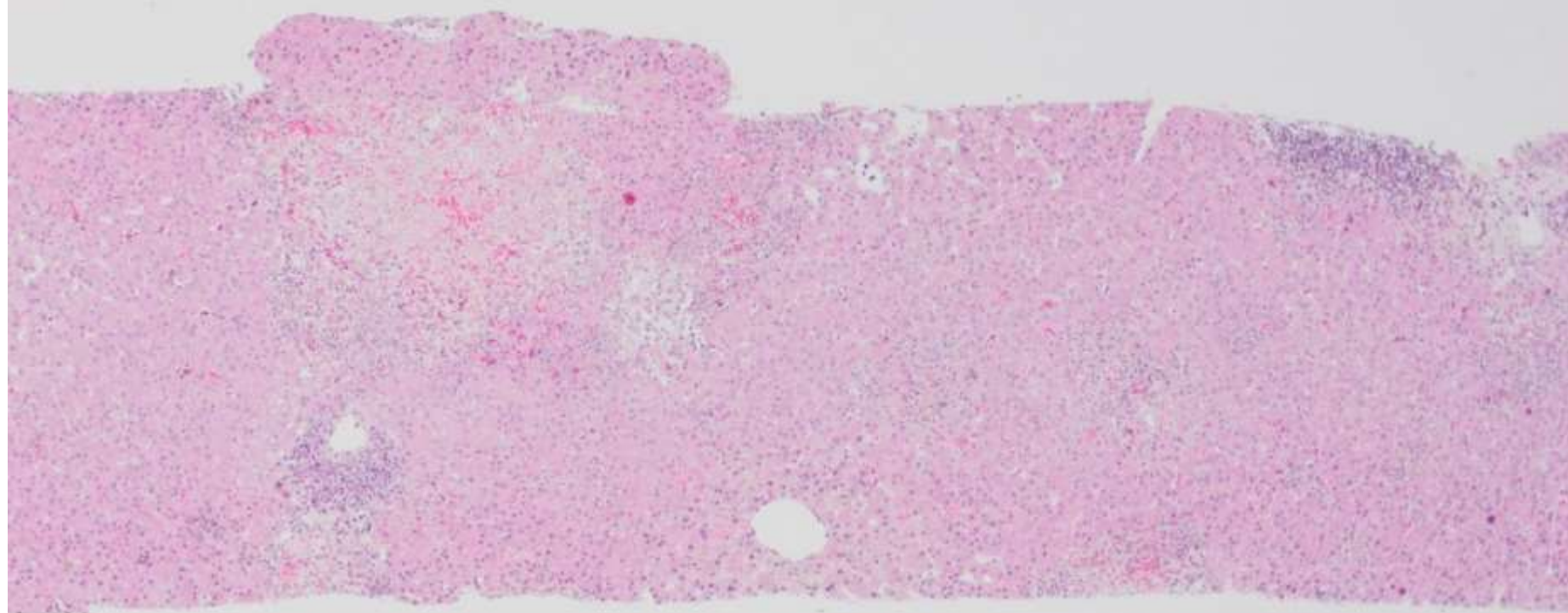
21-0903

**Richard Garcia-Kennedy; CPMC**

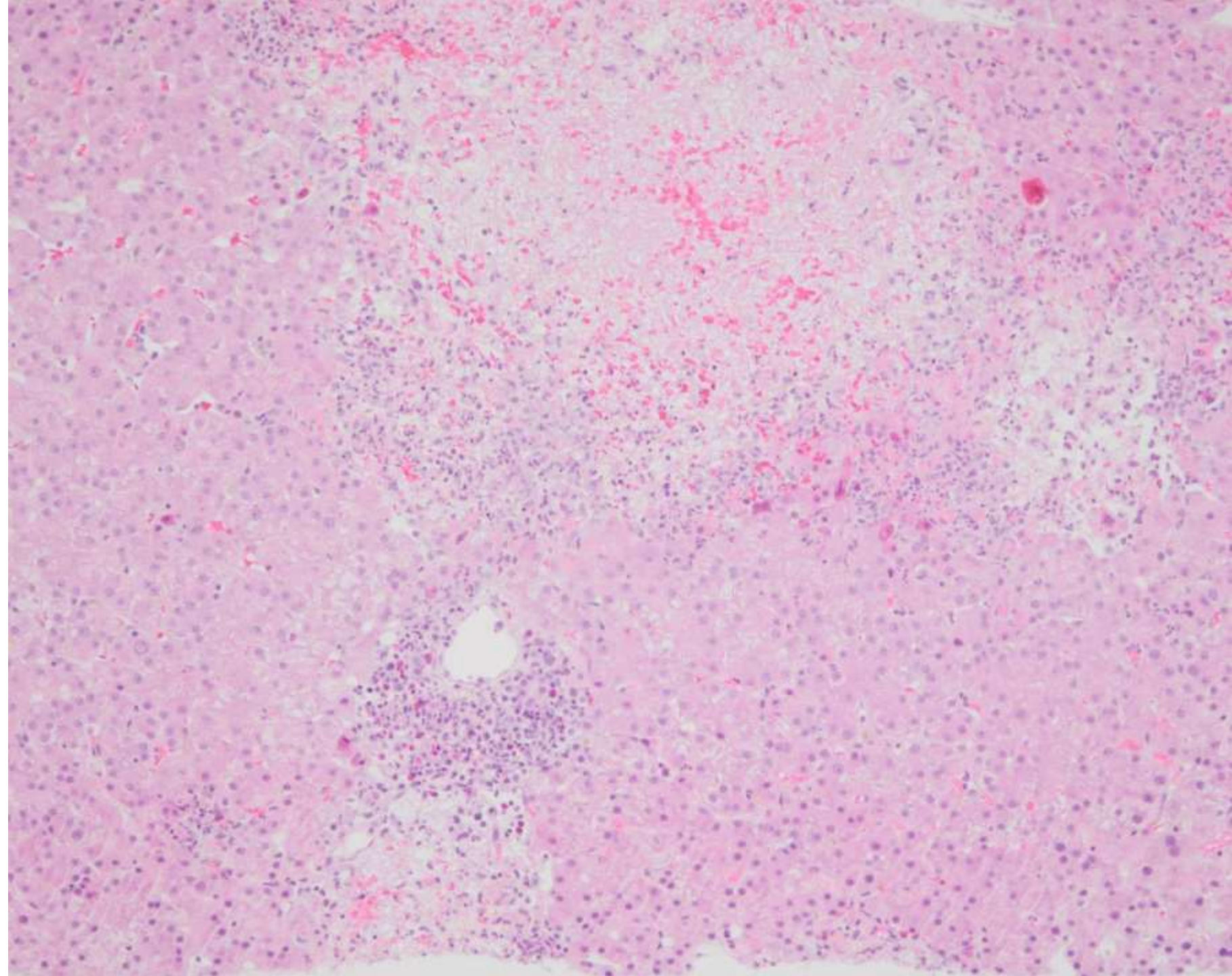
68-year-old F s/p liver transplant for HCV/HCC day 16 –  
elevated LFTs.



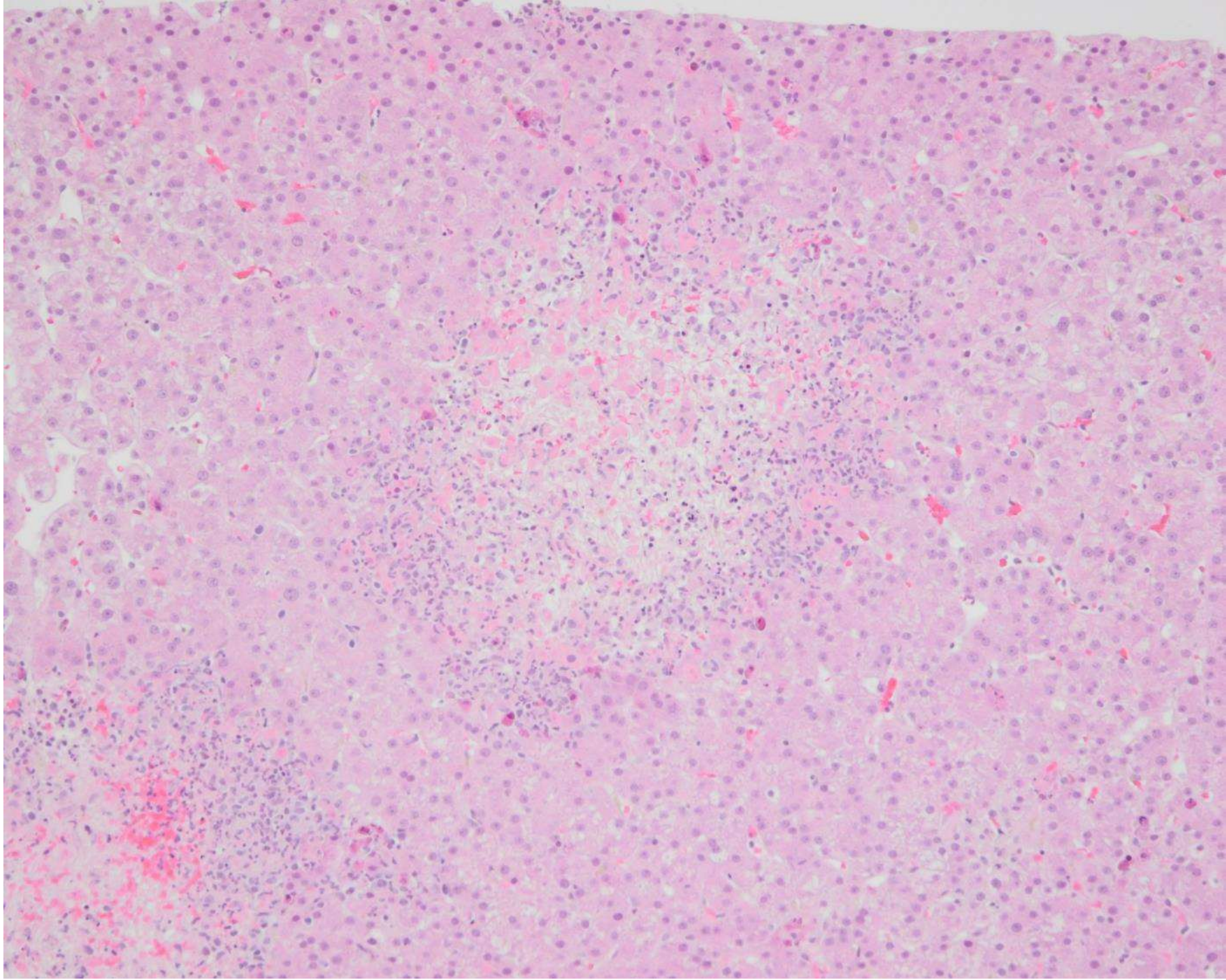




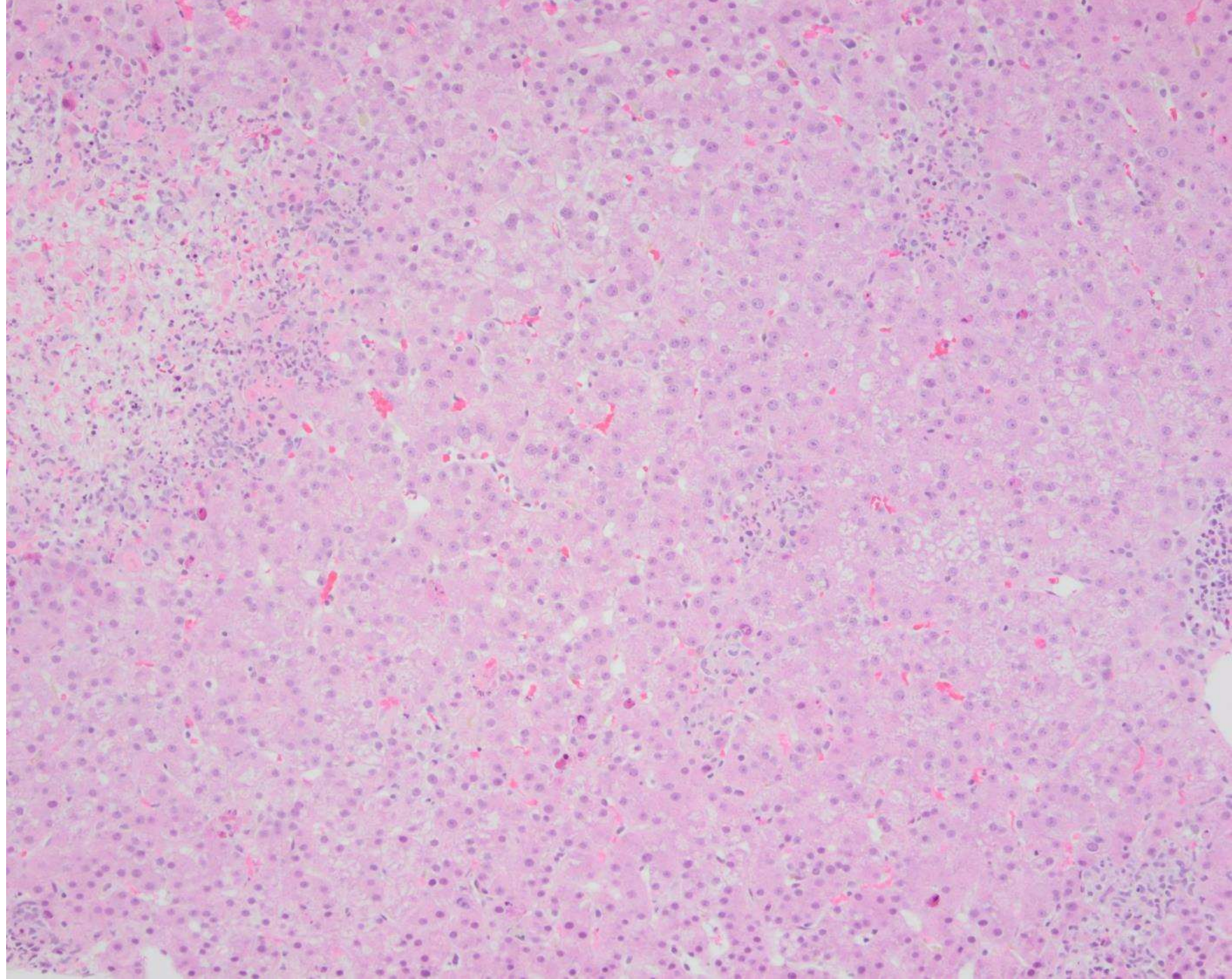
















21-0904

**Brent Tan; Stanford**

58-year-old M with leukocytosis. Peripheral blood smear.



# 58-year-old man with leukocytosis

**Brent Tan**

Stanford University

58-year-old man with no past medical history

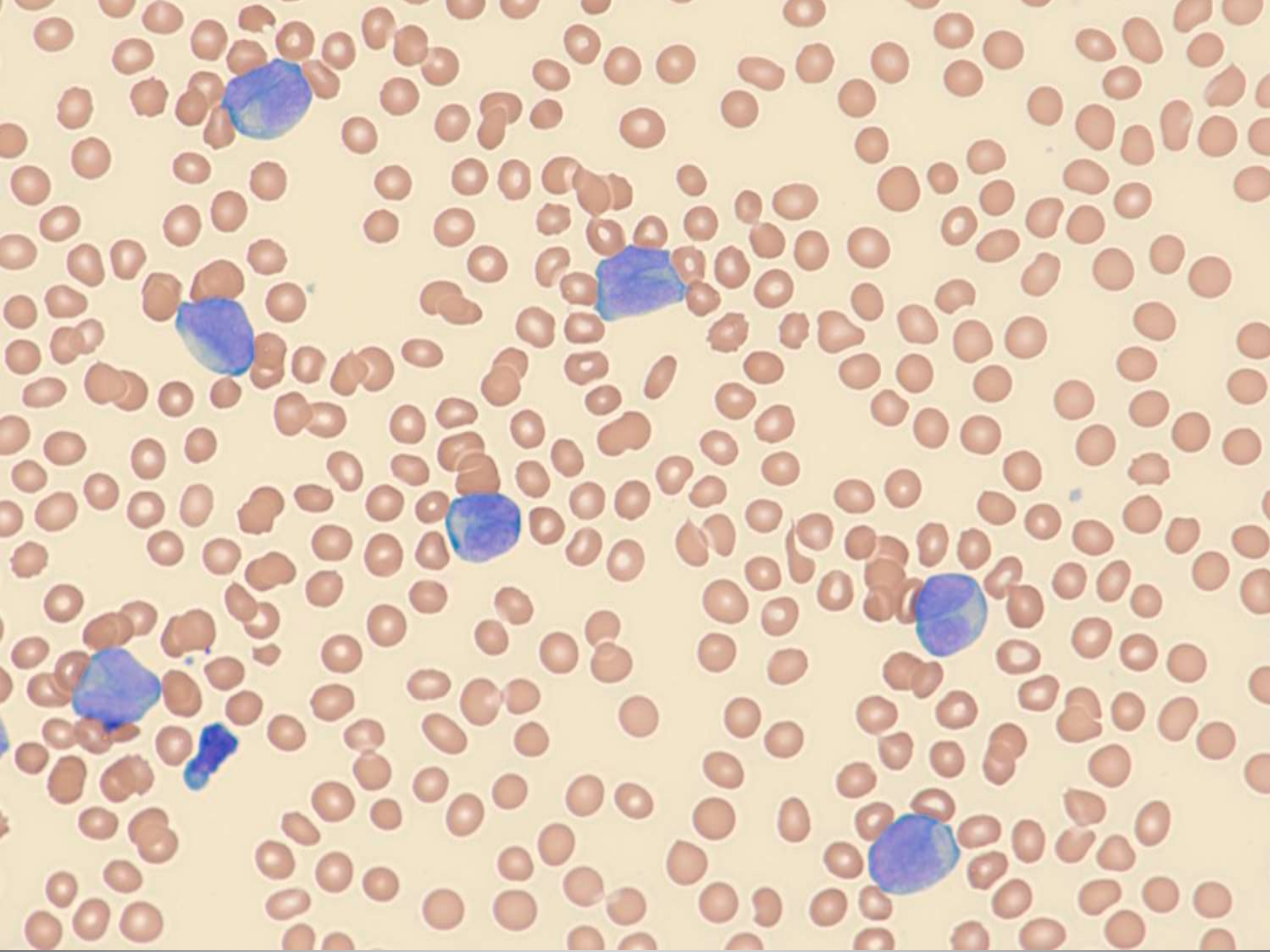
WBC: 126 K/mL (L)

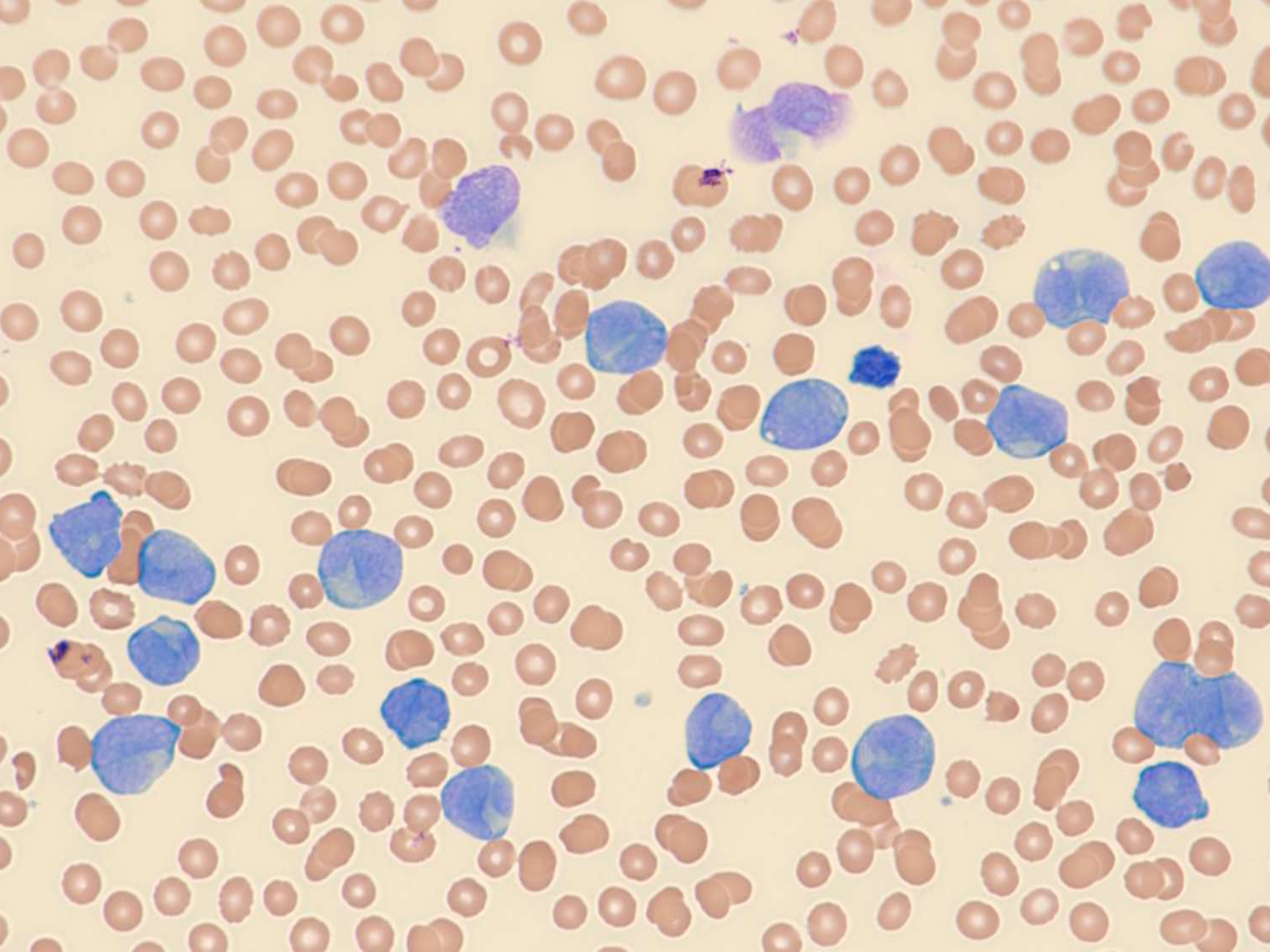
HGB: 10.7 g/dL (L)

PLT: 45 K/mL (L)

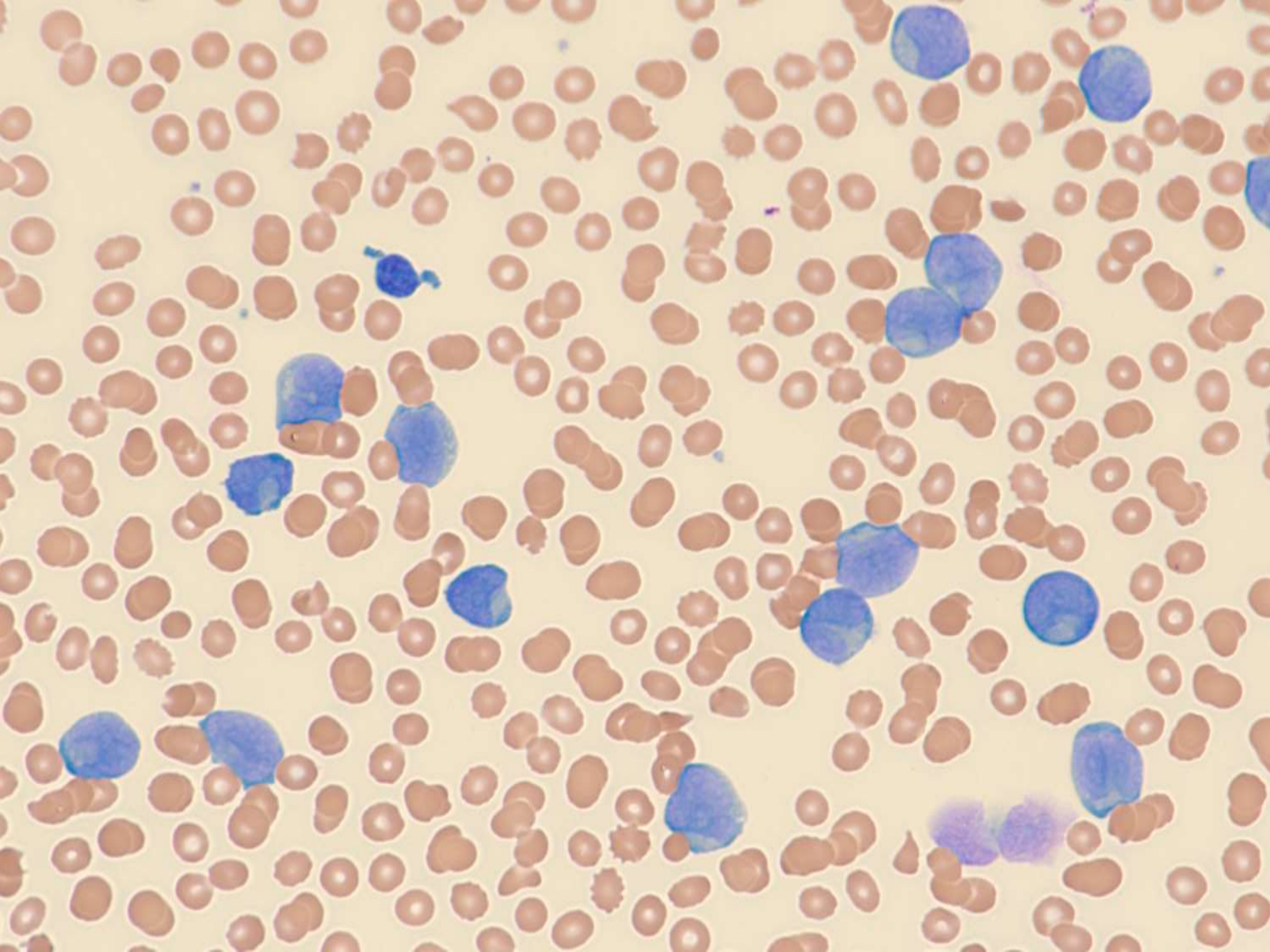
D-dimer 12.01 mg/nL FEU (HH)

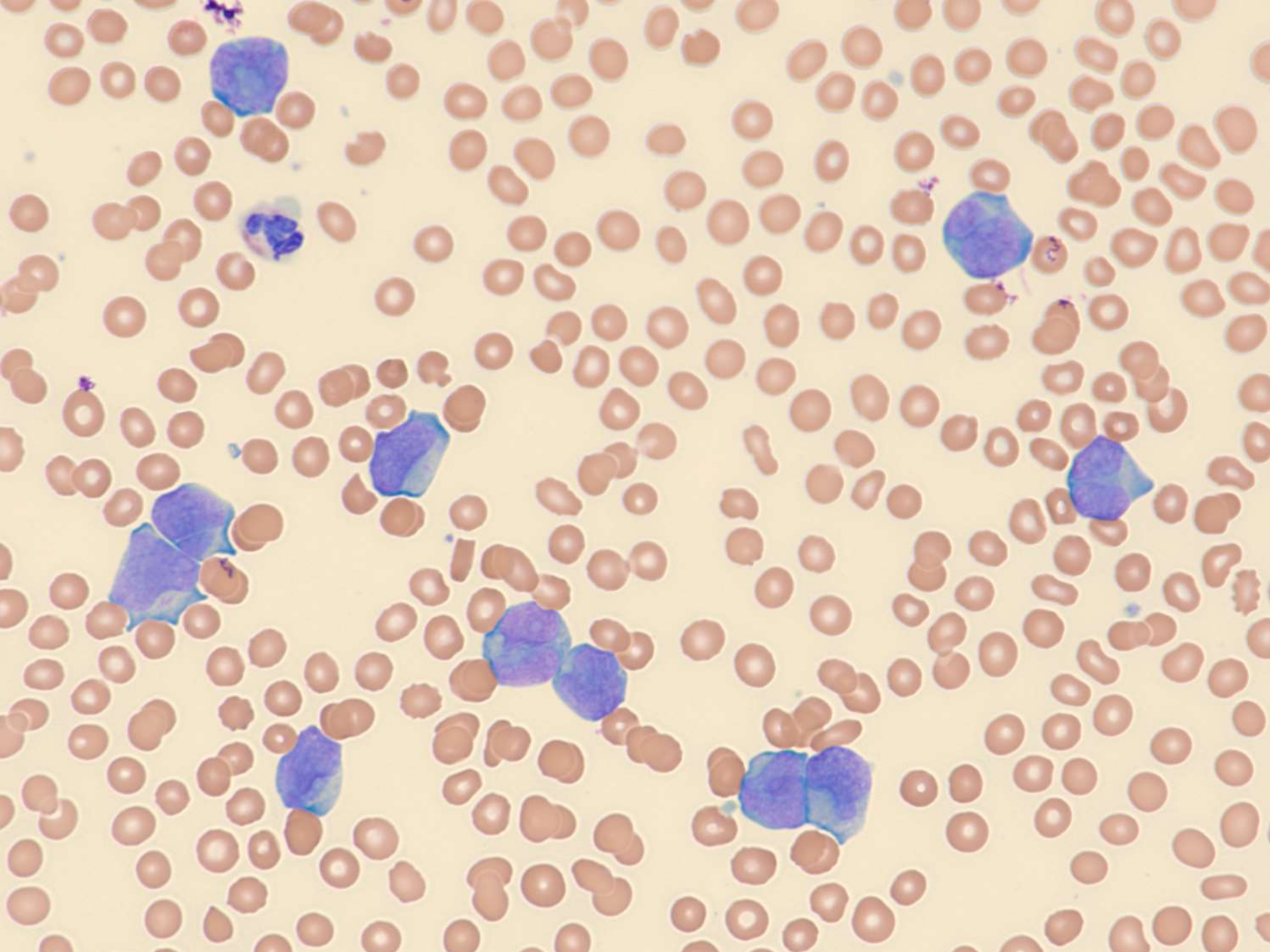




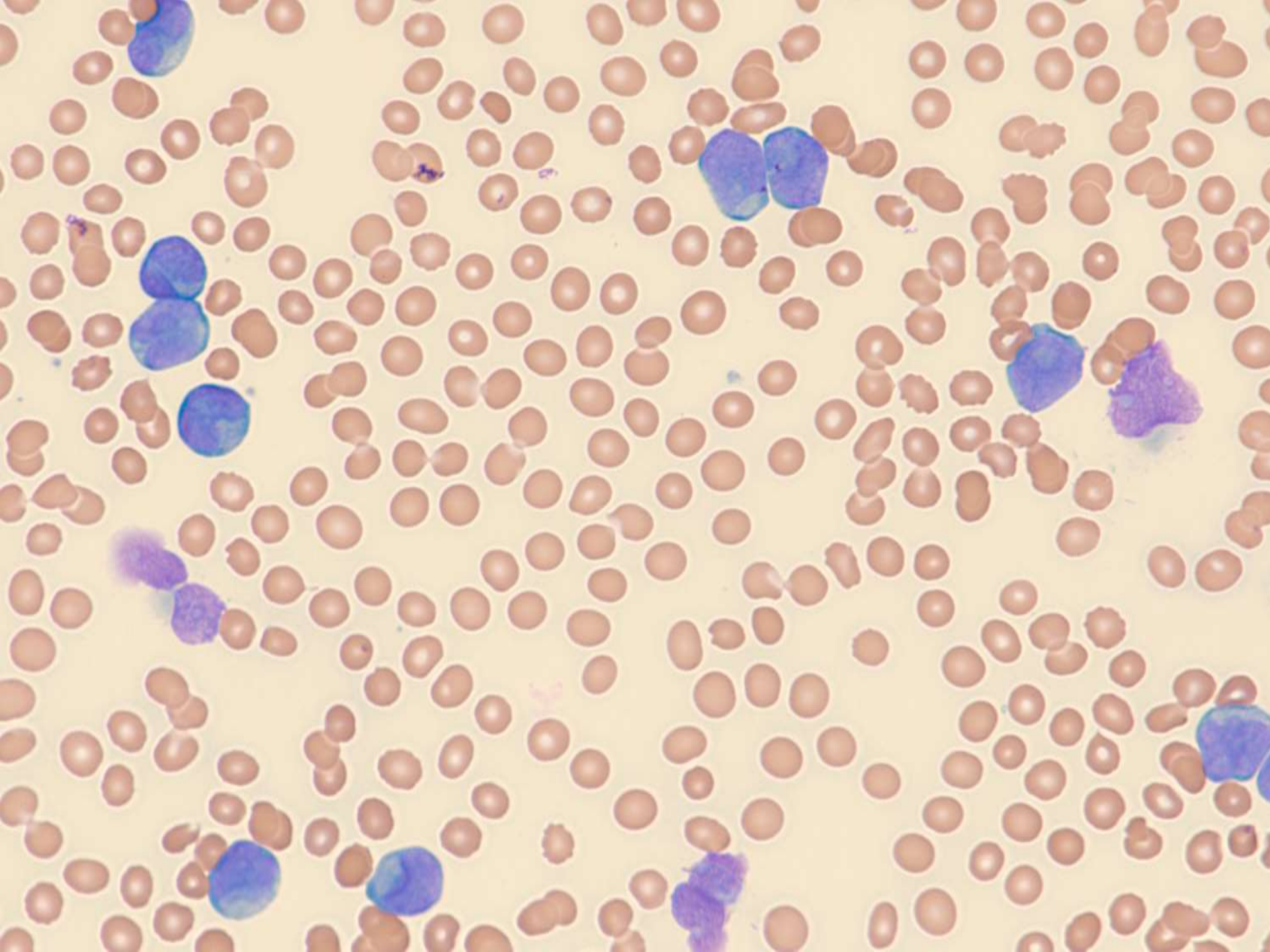




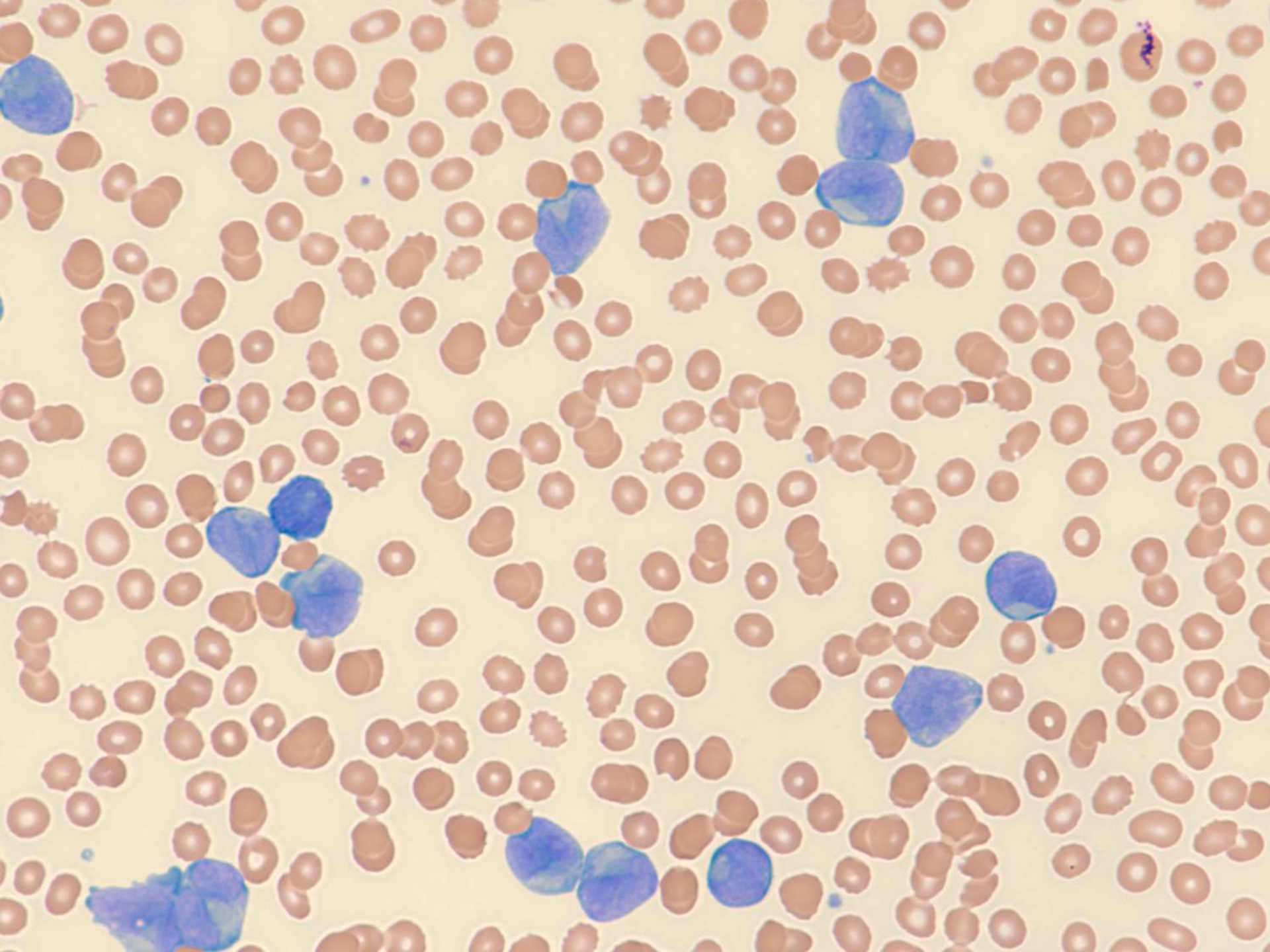












## Additional studies

- Flow cytometry revealed abnormal myeloid blasts expressing MPO, CD13, CD33, CD117, CD38, CD64, CD4, and lacking CD34, CD11B, and HLA-DR.





21-0905

**Jing Zhang/Brent Tan; Stanford**

30-year-old M with no prior medical history presenting for pancytopenia and weight loss (20 pound weight loss). Recent dietary change to pescatarian/plant based diet.



# Brief Clinical History

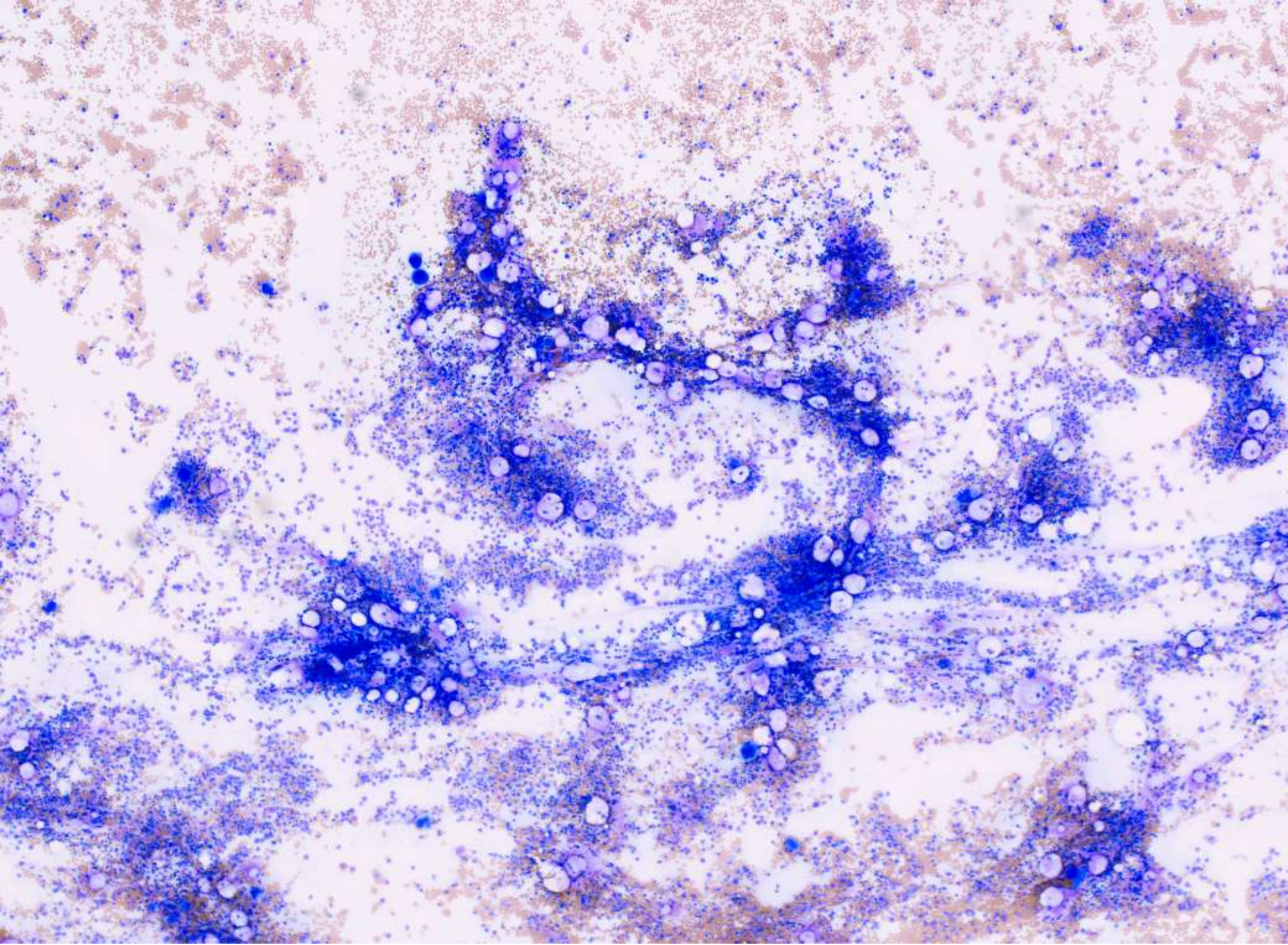
- 30 year old male previously healthy male. Experienced a recent 20-25 pound unintentional weight loss and recent exertional fatigue and exercise intolerance. Recent dietary change to more plant-based diet.

# Lab values

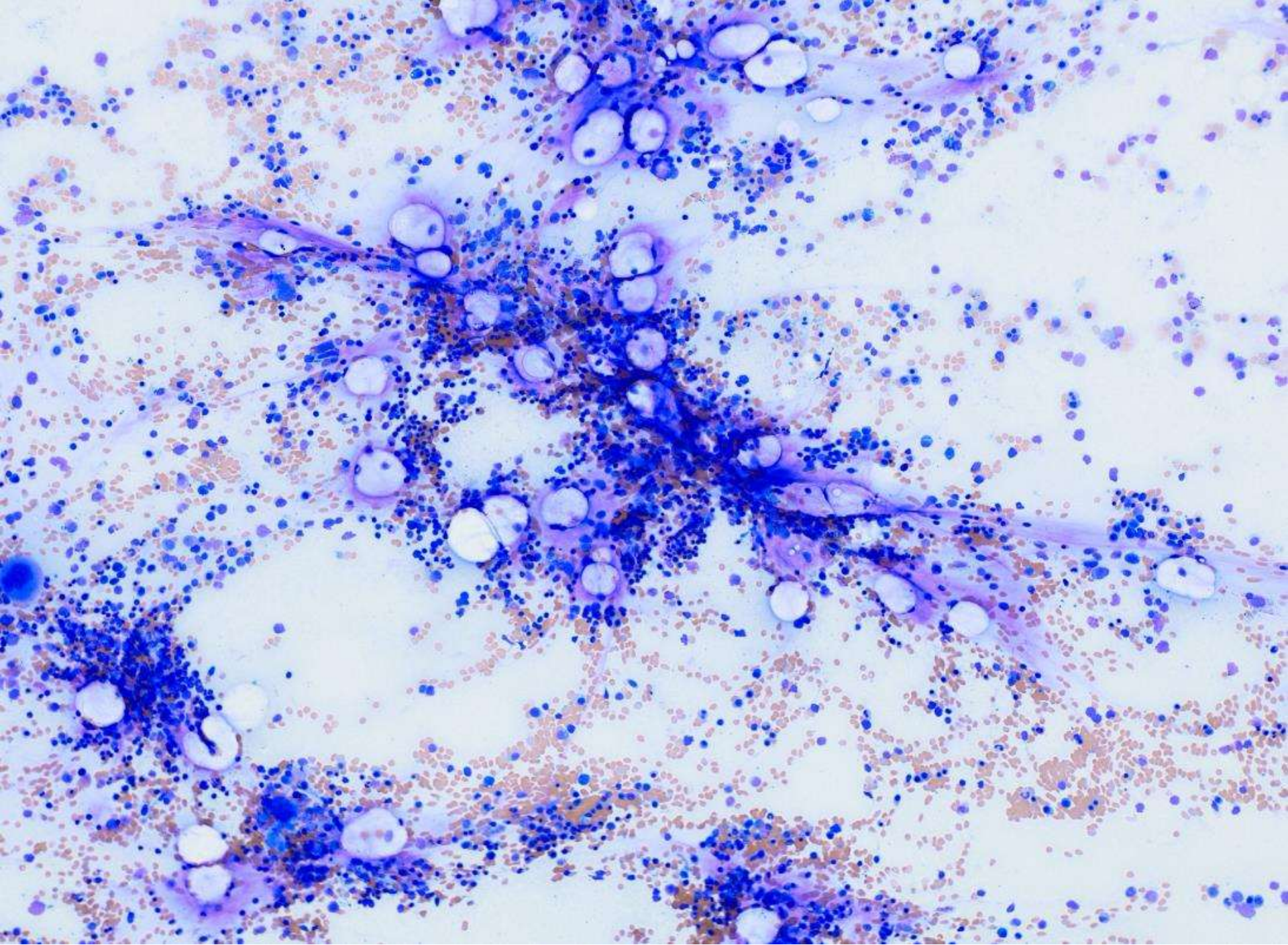
WBC	2.2 (L)
Hemoglobin	11.0 (L)
Hematocrit	31.7 (L)
Platelet count	93 (L)
MCV	106.0 (H)
RDW	11.8
RBC	2.99 (L)
MCH	36.8 (H)
MCHC	34.7

Pancytopenia with macrocytic anemia

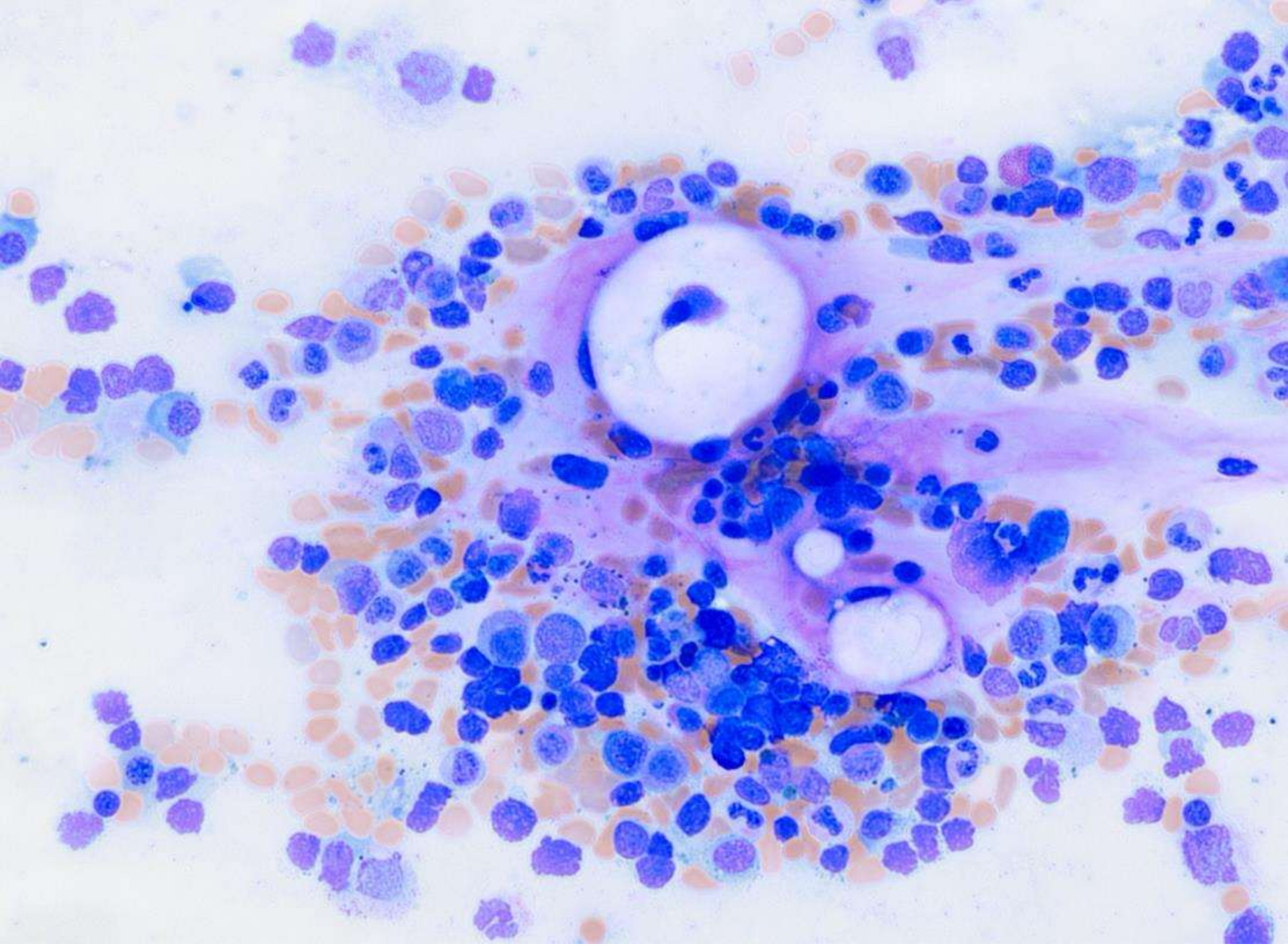




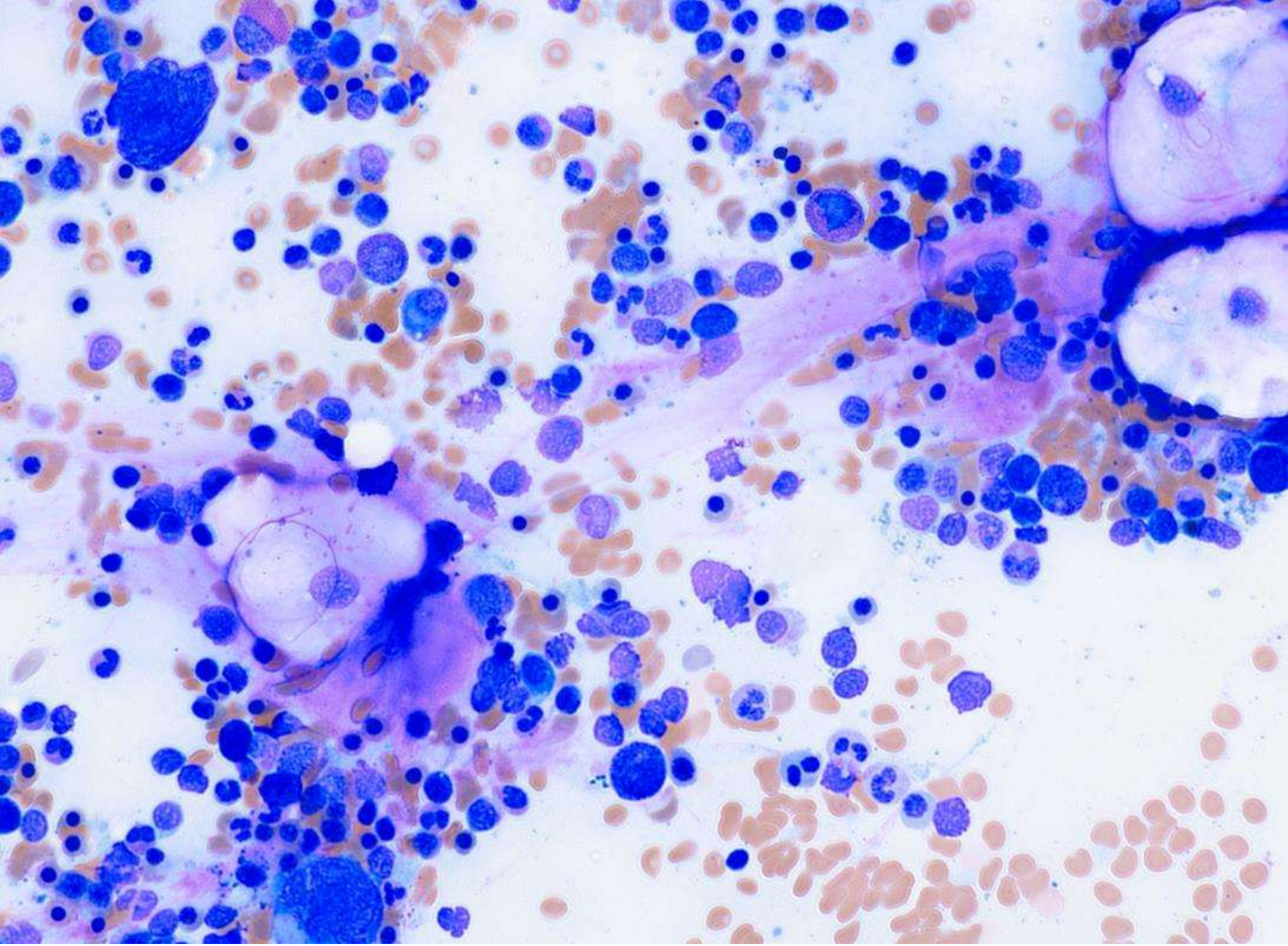




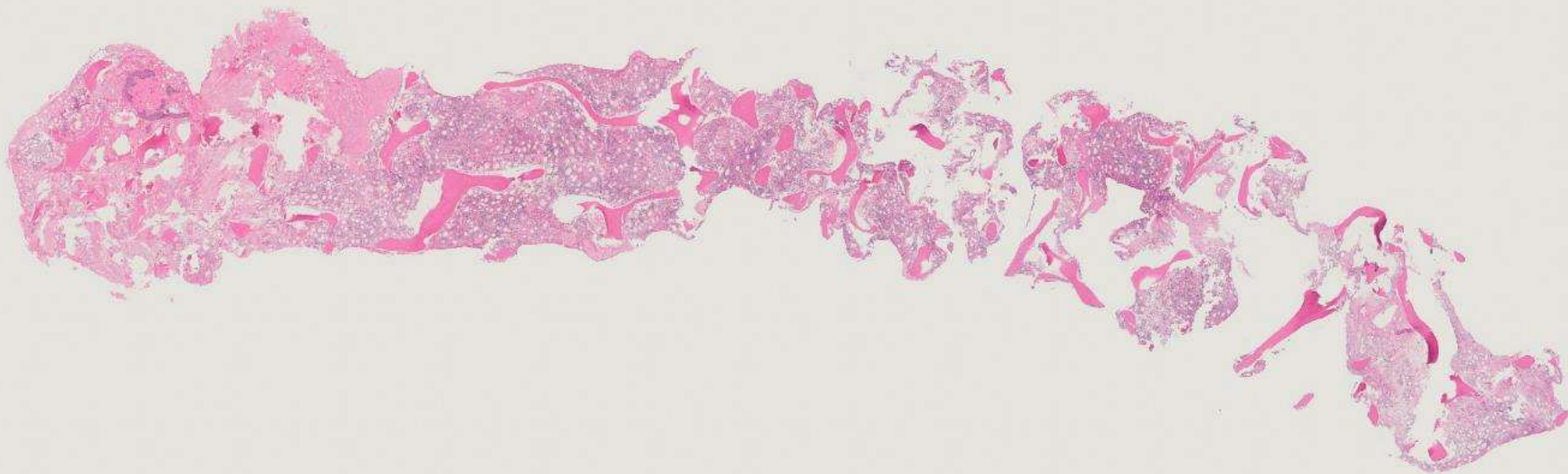


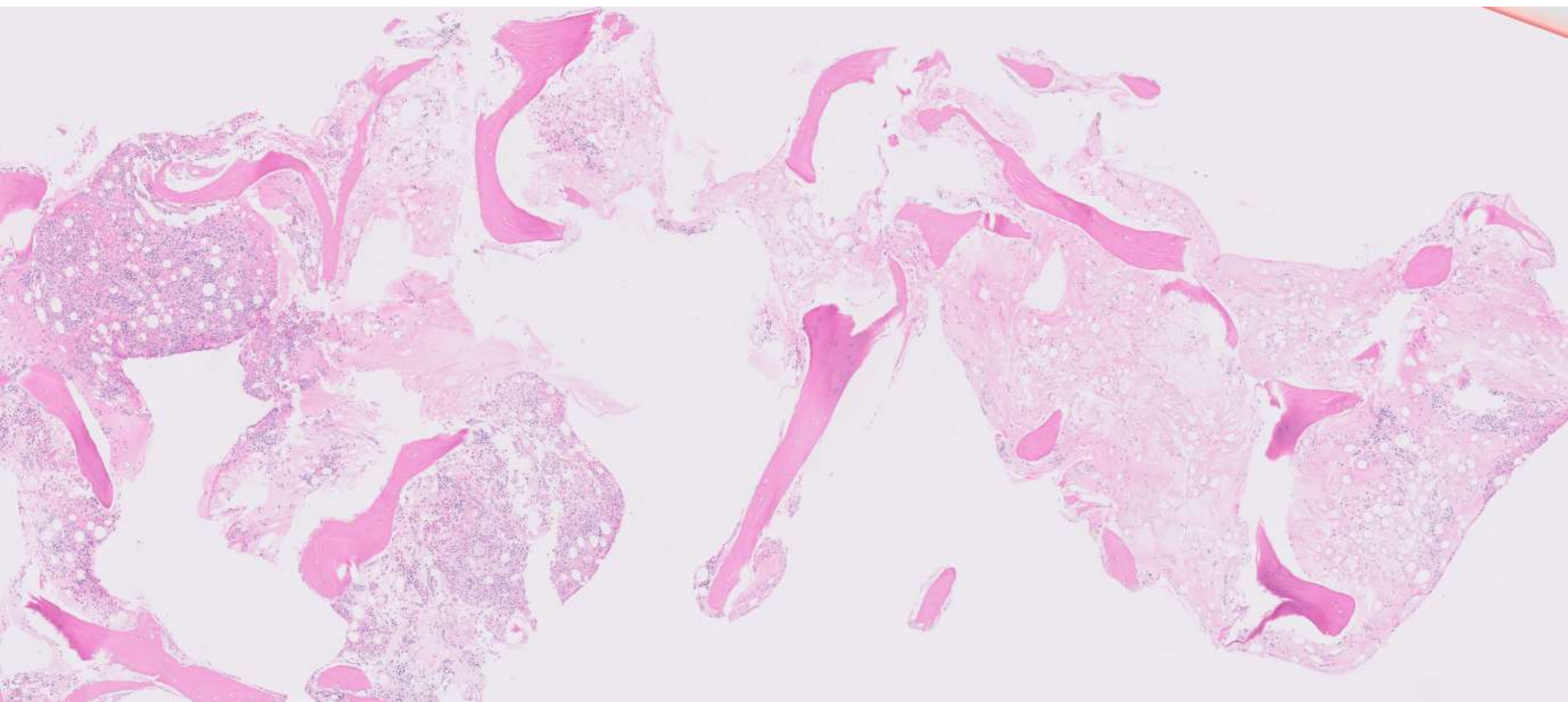




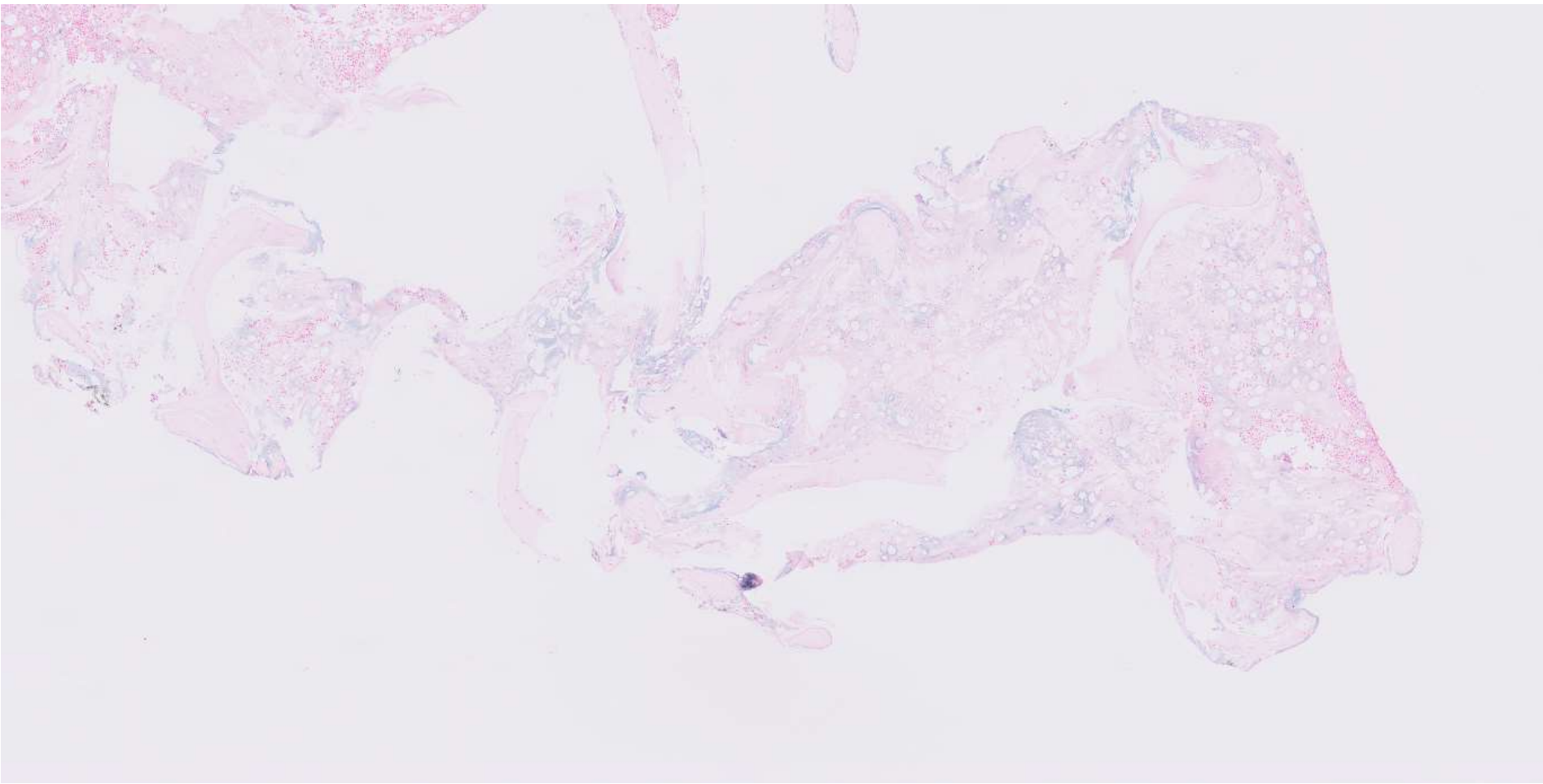


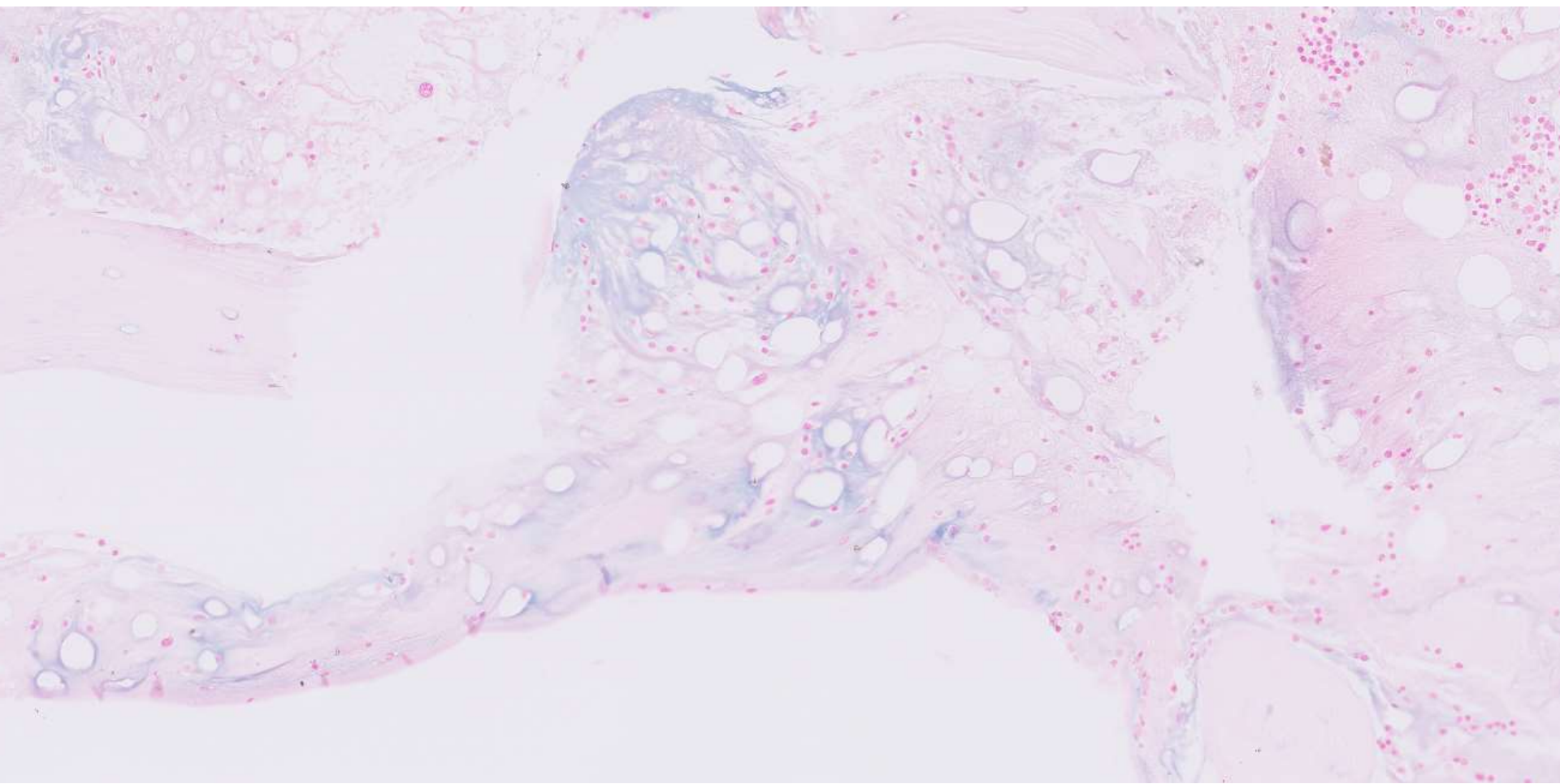
















# 21-0906

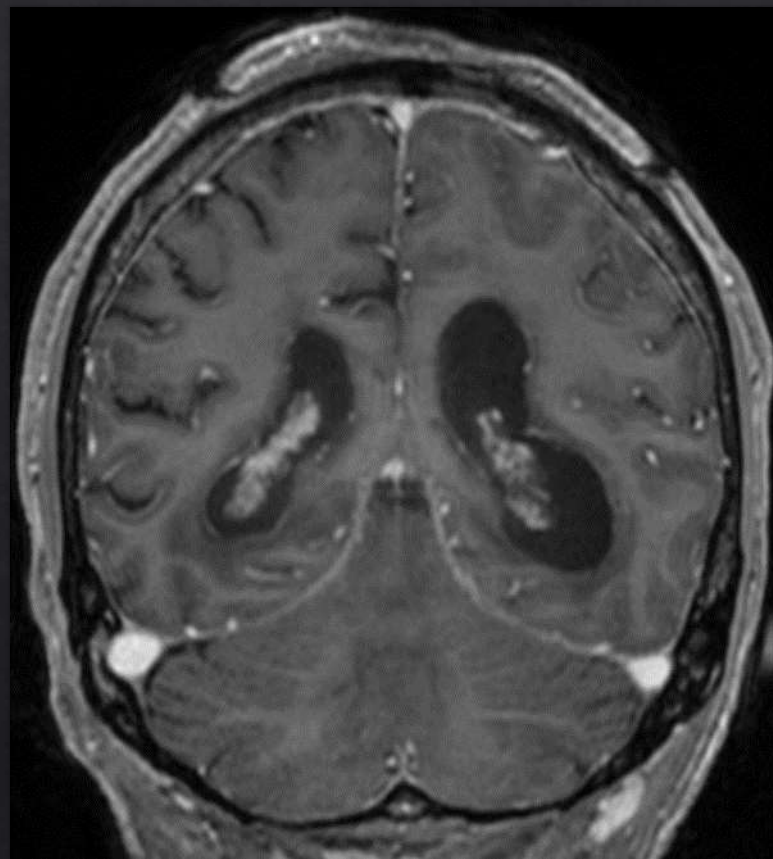
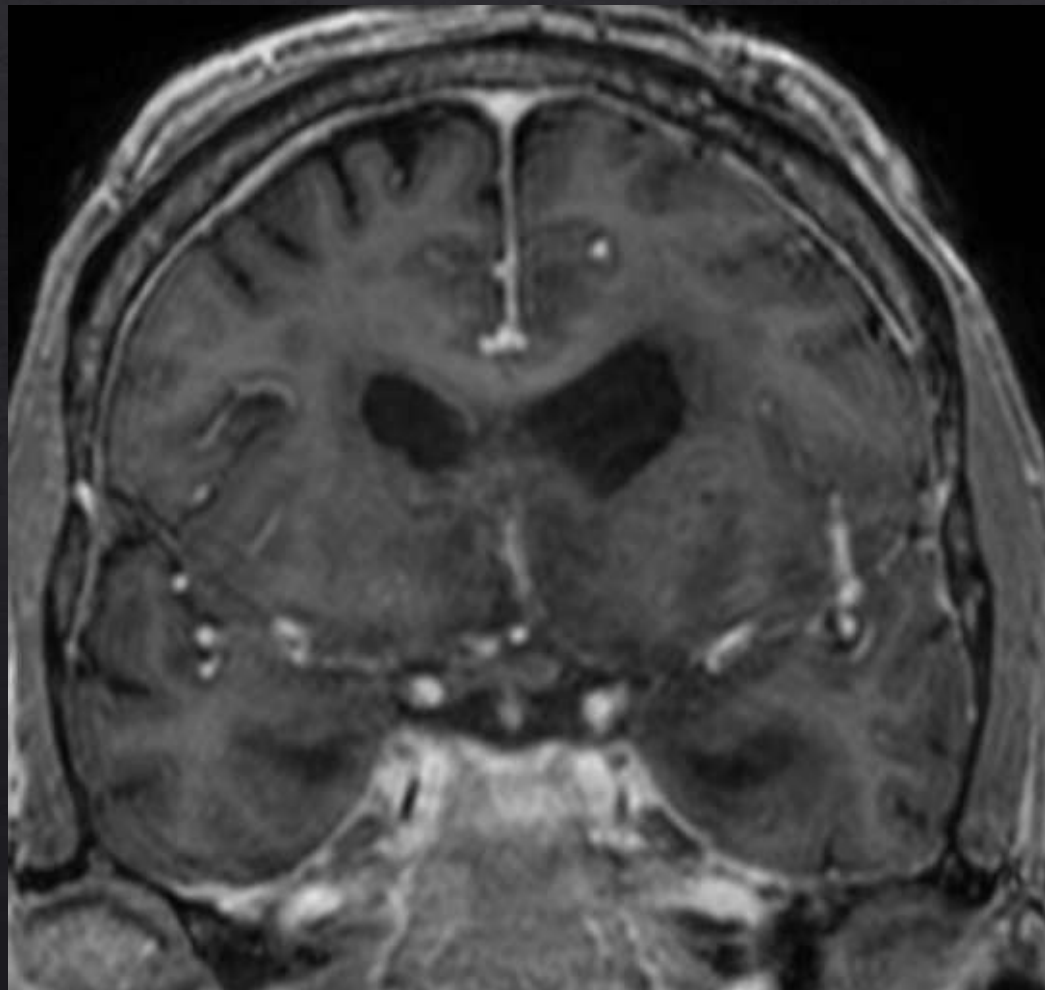
## **Angus Toland/Jeff Nirschl/Hannes Vogel; Stanford**

76-year-old M with presenting with fatigue, fever, and G-tube site erythema. History of laryngeal squamous cell carcinoma s/p resection and radiation therapy 2010. Soon after developed altered mental status which progressively worsened over ~10 days. LP showed red blood cells and mixed inflammation; no organisms. MRI showed hydrocephalus with multiple acute infarctions and meningitis. No response to broad spectrum antimicrobial therapy; transitioned to comfort care given dismal prognosis. CSF and blood cultures remained negative. Section of brain shown.



# Toland/Nirschl/Vogel

- ◇ 76-year-old man presenting with fatigue, fever, and G-tube site erythema
- ◇ History of laryngeal squamous cell carcinoma s/p resection and radiation therapy 2010
  - ◇ Tracheostomy tube in place
  - ◇ G-tube dependent due to esophageal stenosis since 02/2020
  - ◇ Chest CT concerning for pneumonia
    - ◇ AFB culture positive for Mycobacterium avium complex
  - ◇ Soon after developed altered mental status which progressively worsened over ~10 days
    - ◇ LP showed red blood cells and mixed inflammation; no organisms
    - ◇ MRI showed hydrocephalus with multiple acute infarctions and meningitis
    - ◇ No response to broad spectrum antimicrobial therapy; transitioned to comfort care given dismal prognosis
      - ◇ CSF and blood cultures remained negative





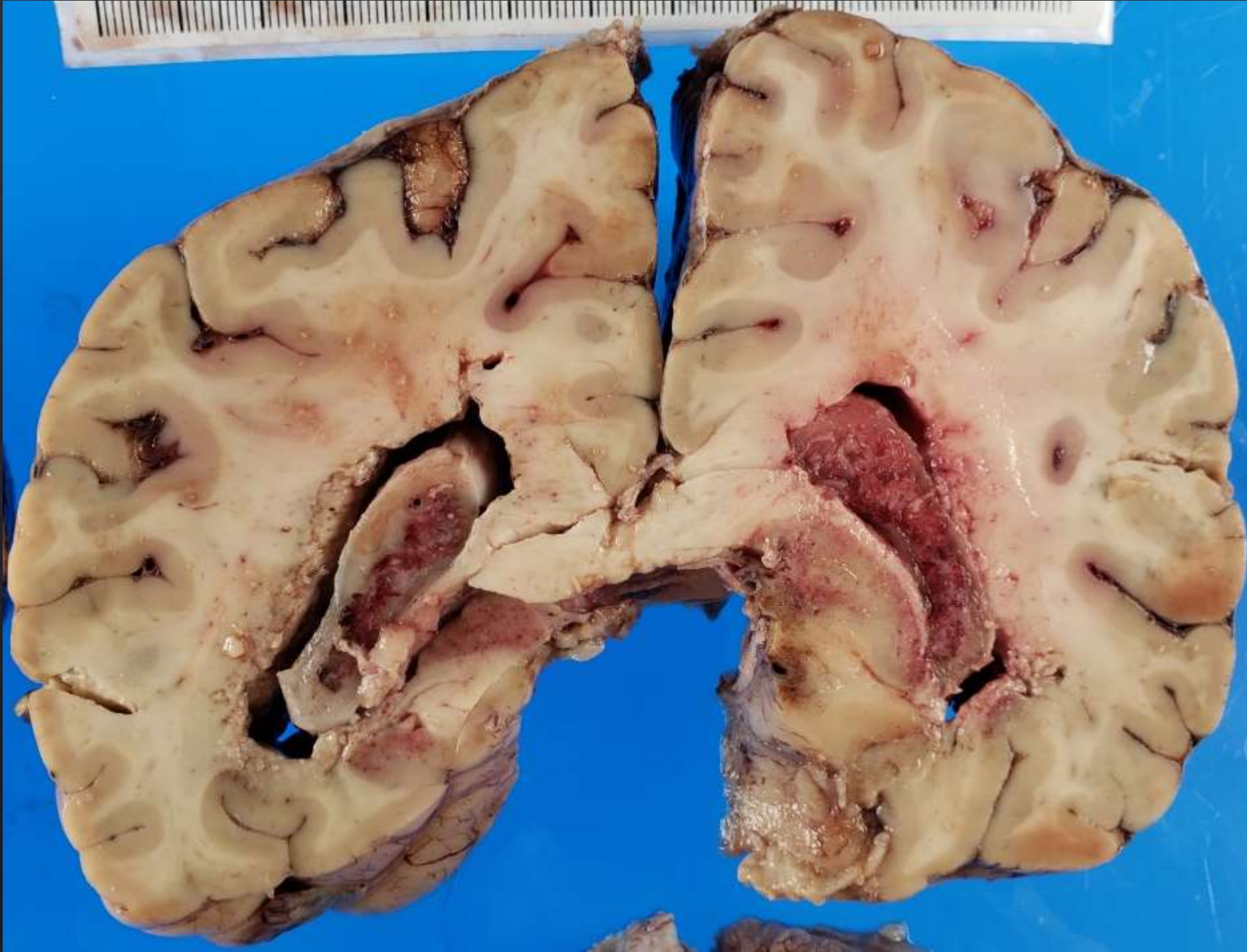
# General Autopsy

- ◆ Multifocal subacute pneumonia
  - ◆ No organisms identified; post-mortem cultures negative

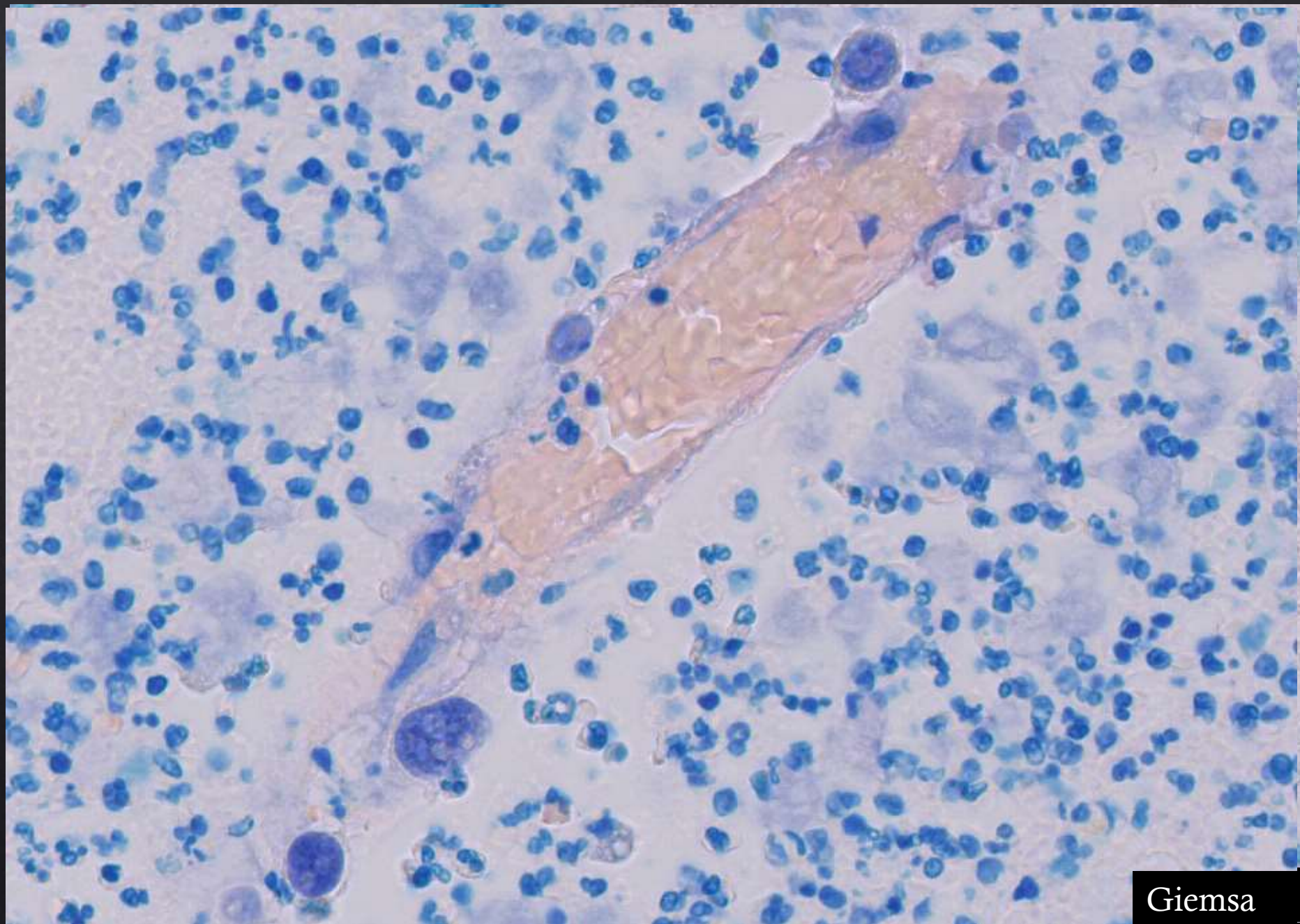
# Brain Cutting

- ◇ 1500 g brain with scattered foci of hemorrhage and dusky base
  - ◇ Thickened and fibrotic choroid plexi









Giemsa





21-0907

**Angus Toland/Don Born; Stanford**

46-year-old M with several years of low back and leg pain and recent development of leg weakness. Imaging demonstrated an intradural extramedullary mass in the L3-L4 region.



# Toland/Born

- ◆ 46-year-old man with several years of low back and leg pain and recent development of leg weakness. Imaging demonstrated an intradural extramedullary mass in the L3-L4 region.

