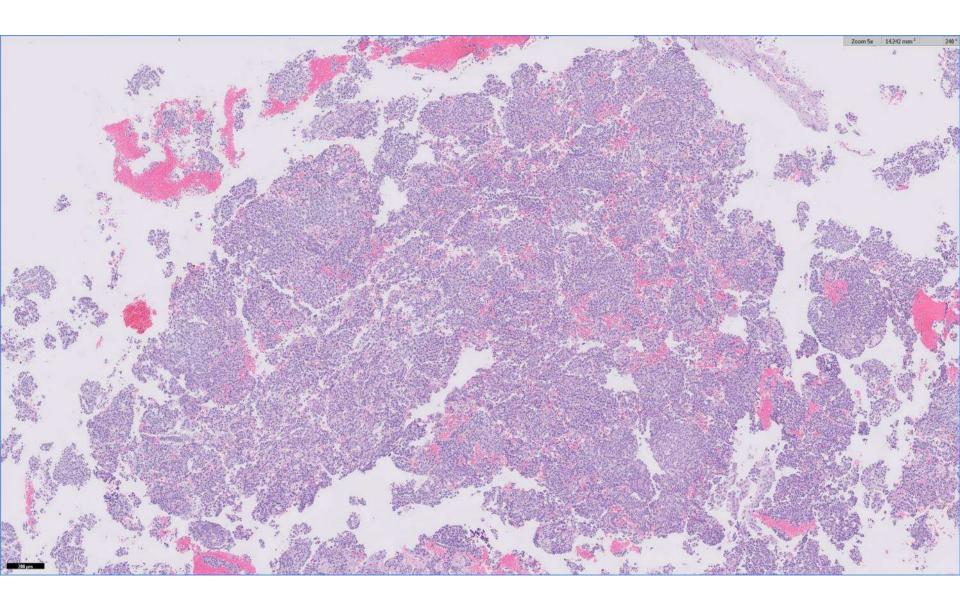
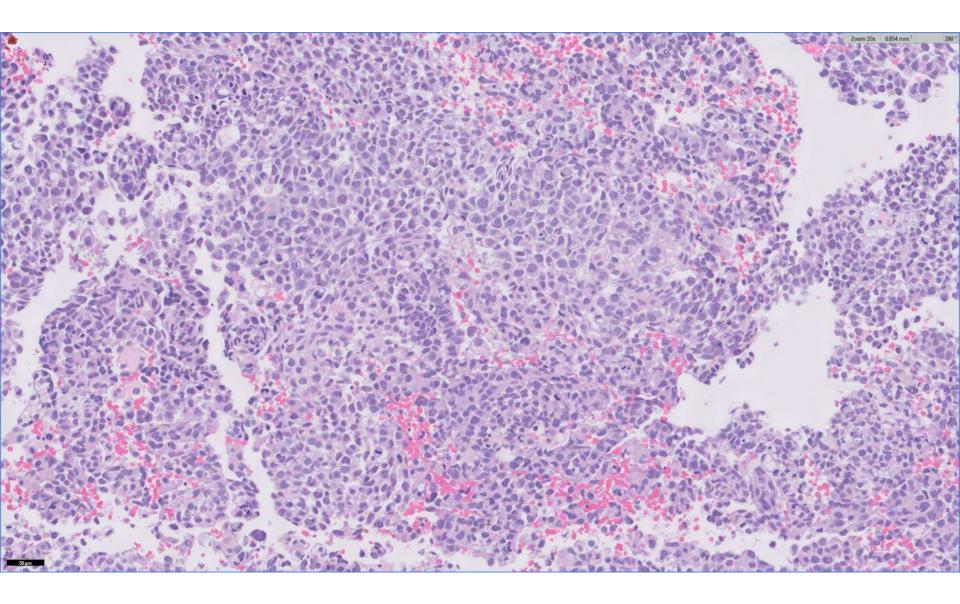
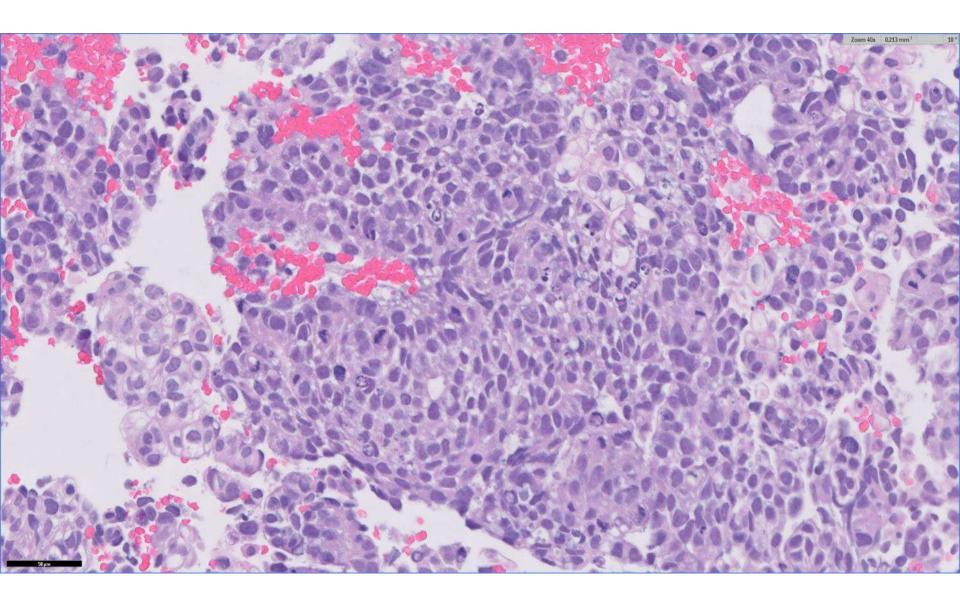
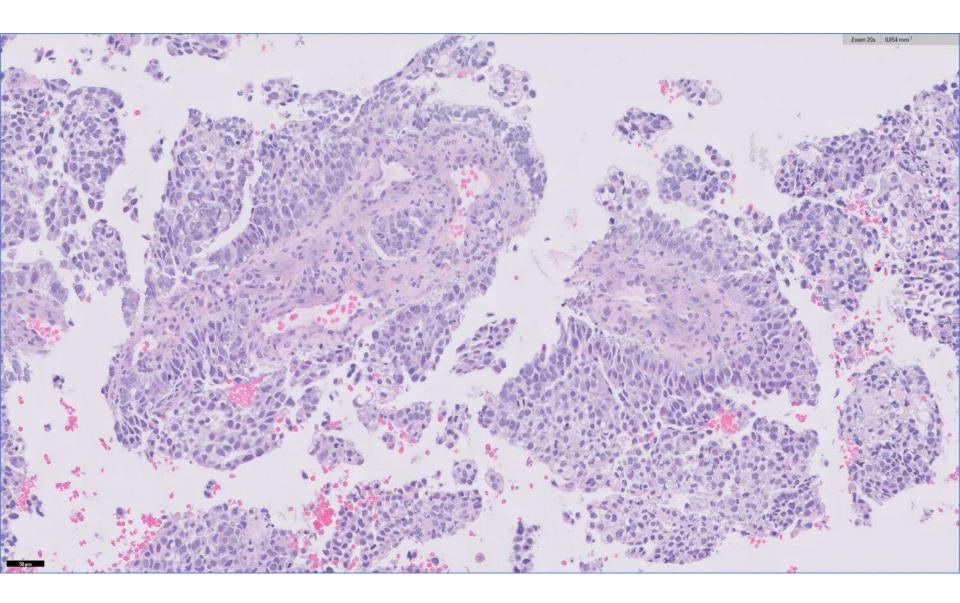
#### **Nicholas Ladwig; UCSF**

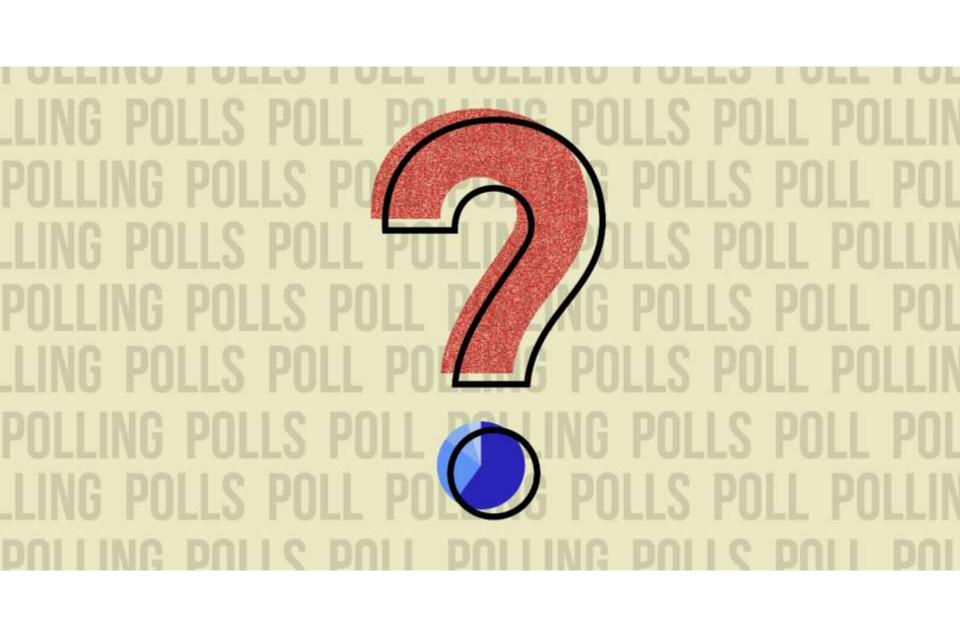
82-year-old F with post-menopausal bleeding and an enlarged uterus who underwent endometrial biopsy.





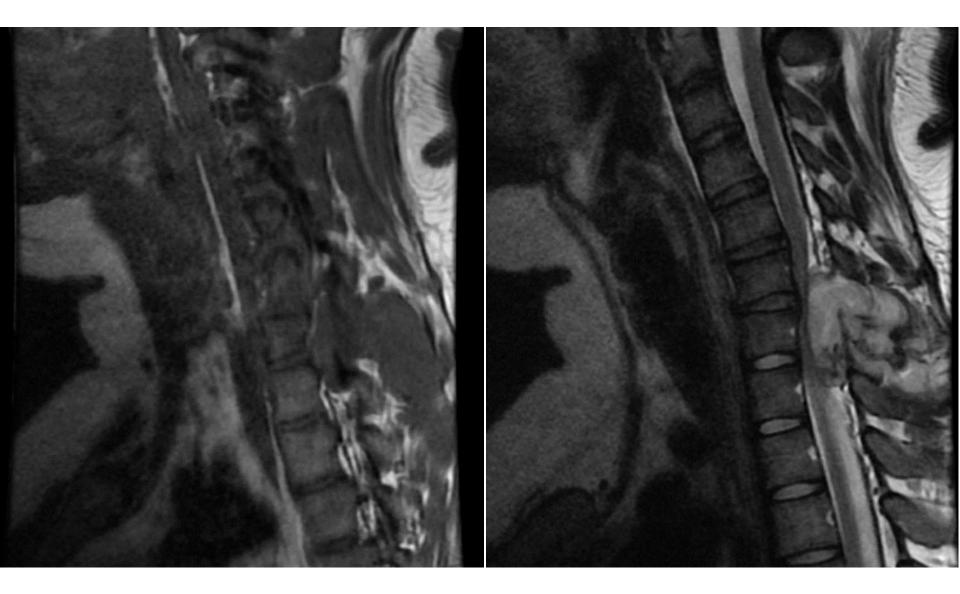


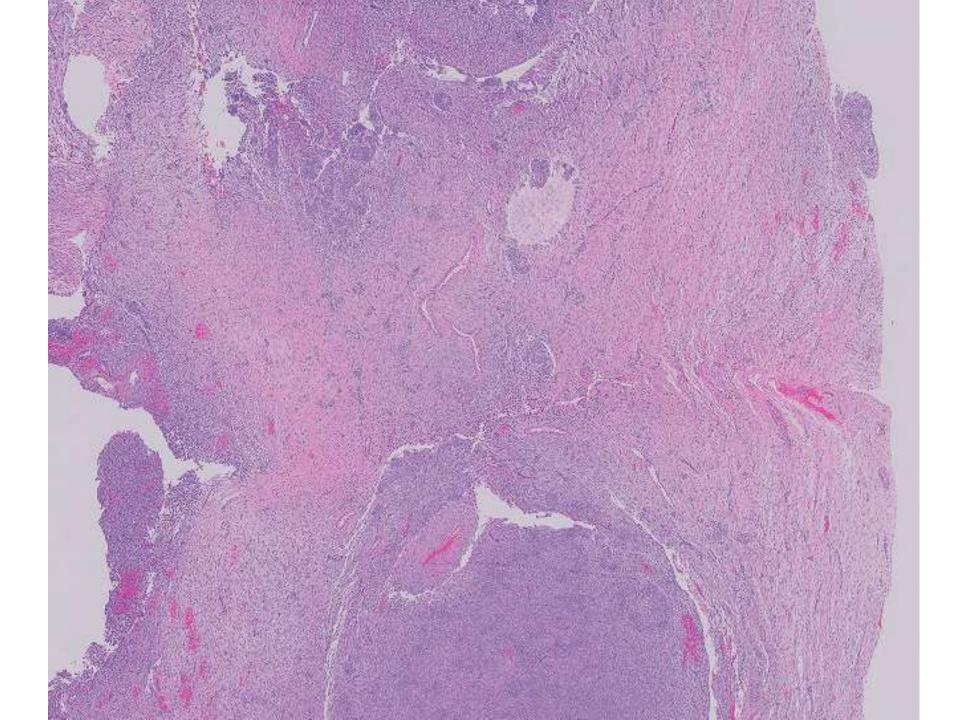


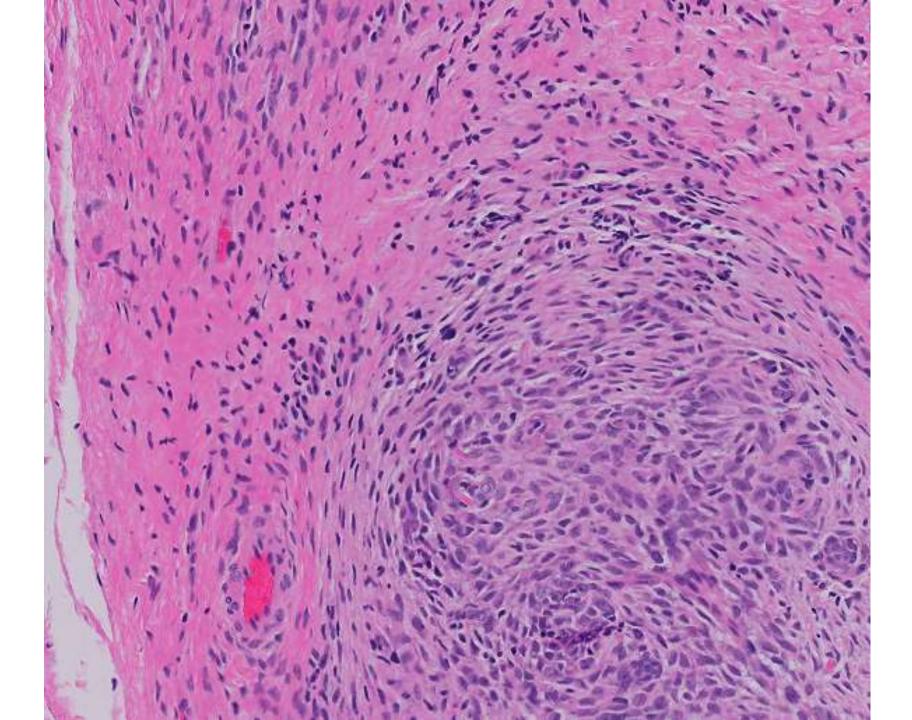


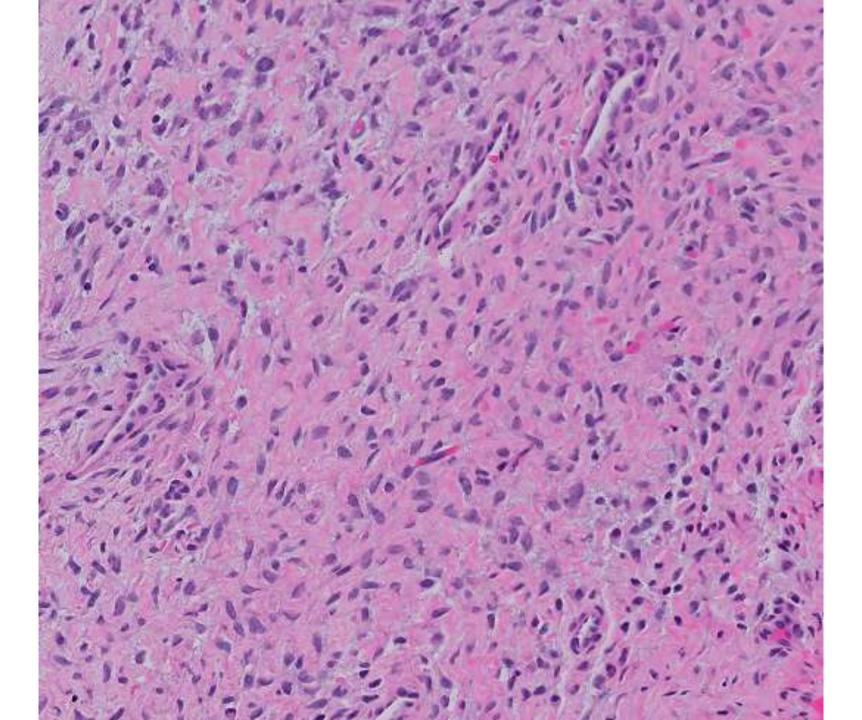
#### **Angus Toland/Hannes Vogel; Stanford**

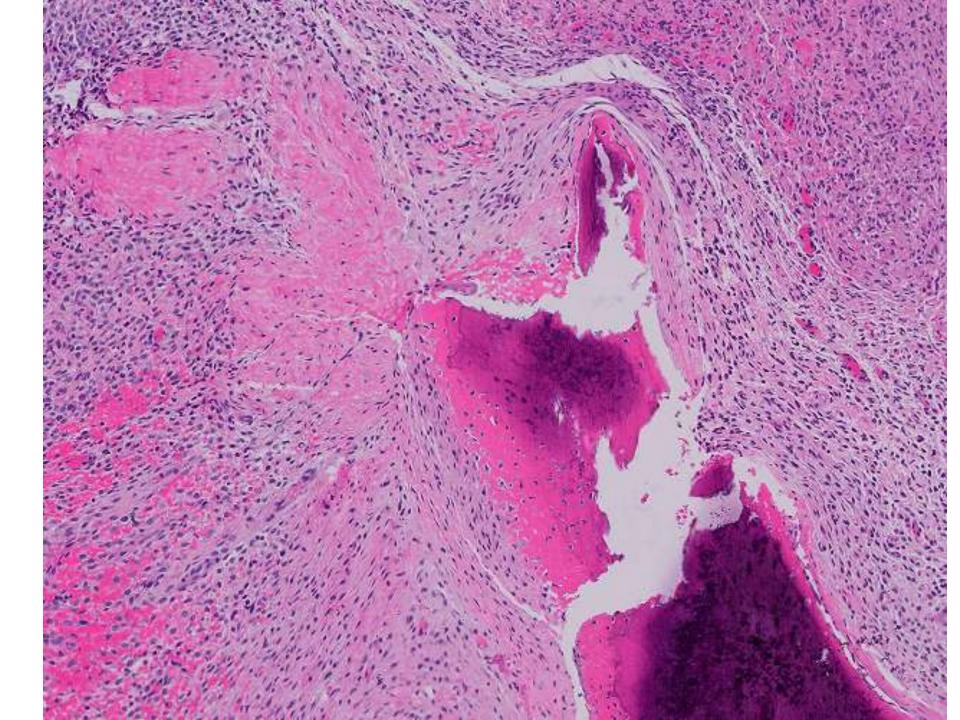
16-year-old girl presenting with rapidly progressive bilateral lower extremity numbness and tingling. MRI showed a large mass with vertebral body destruction from C6-T11 with cord compression.

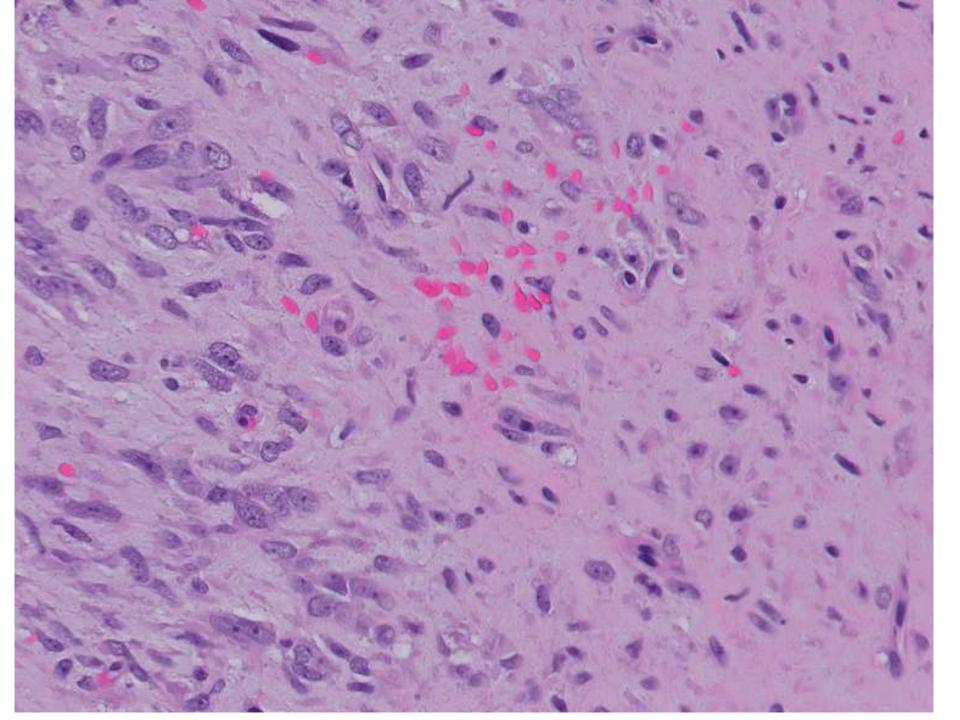


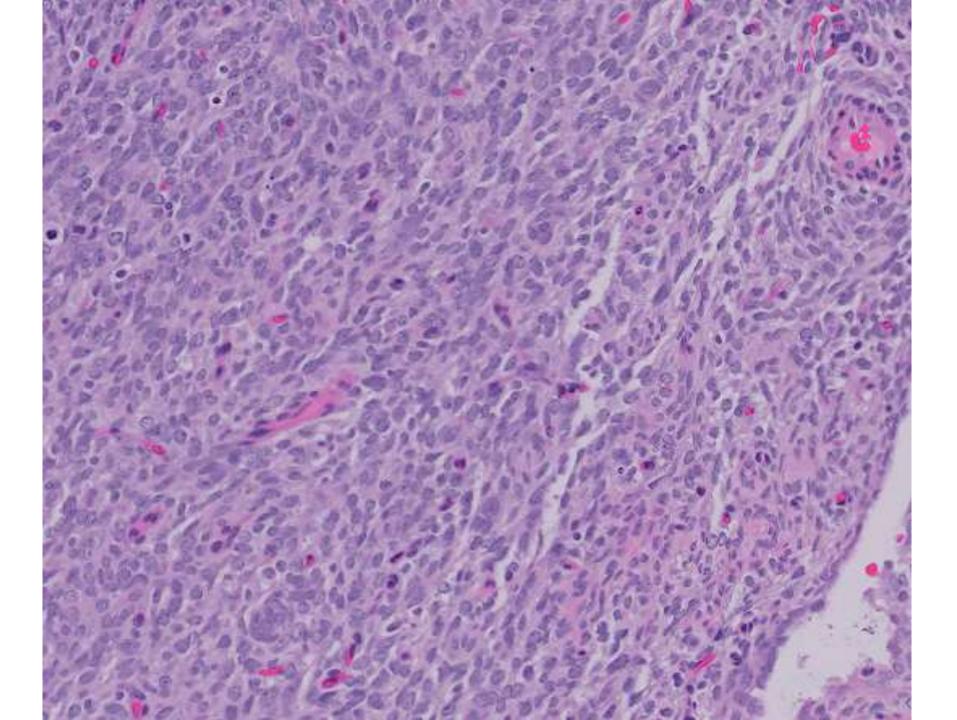


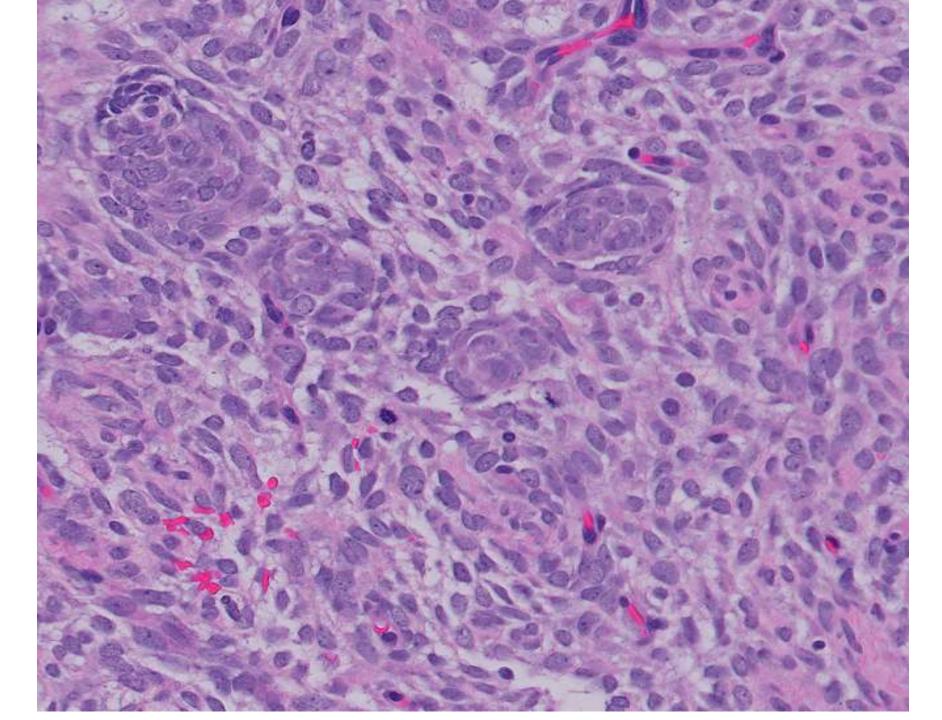


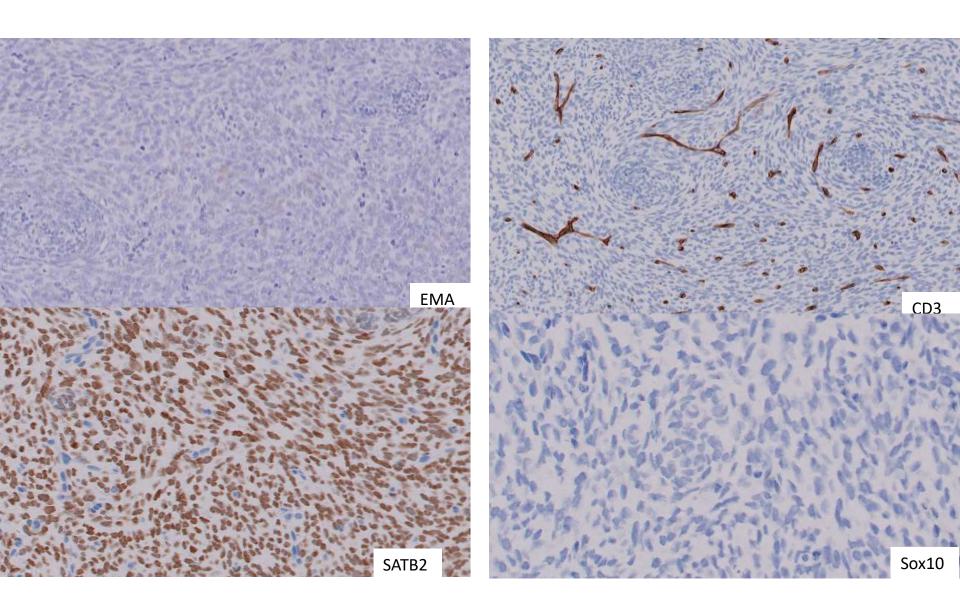


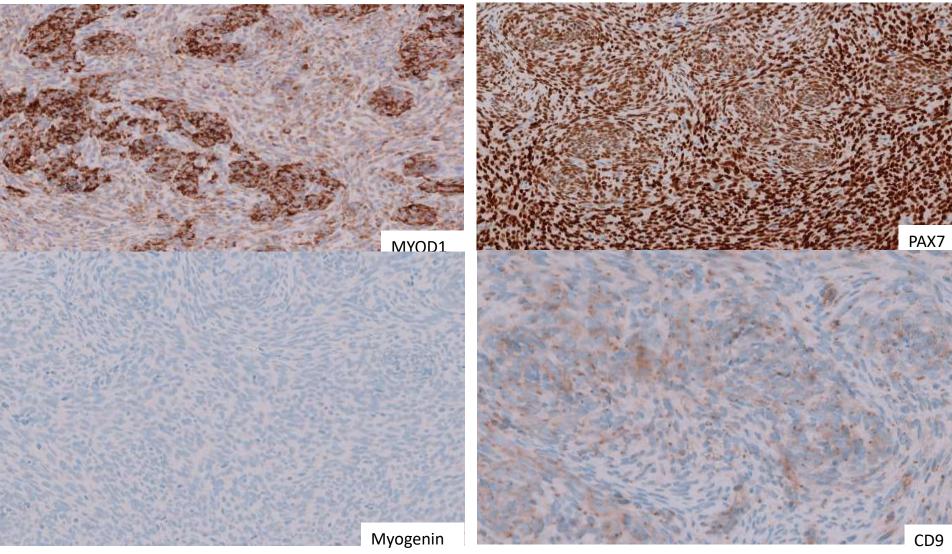




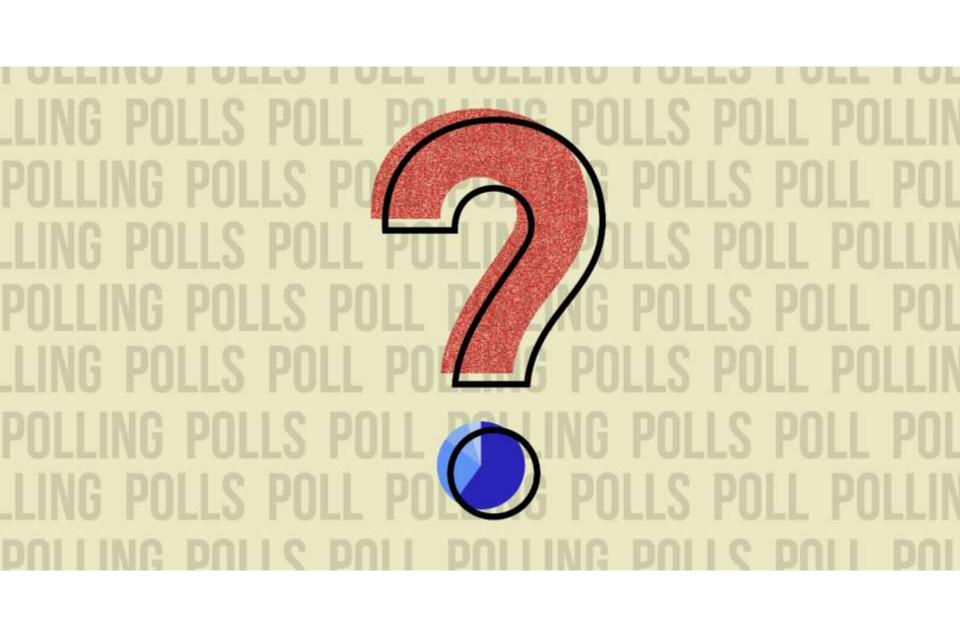






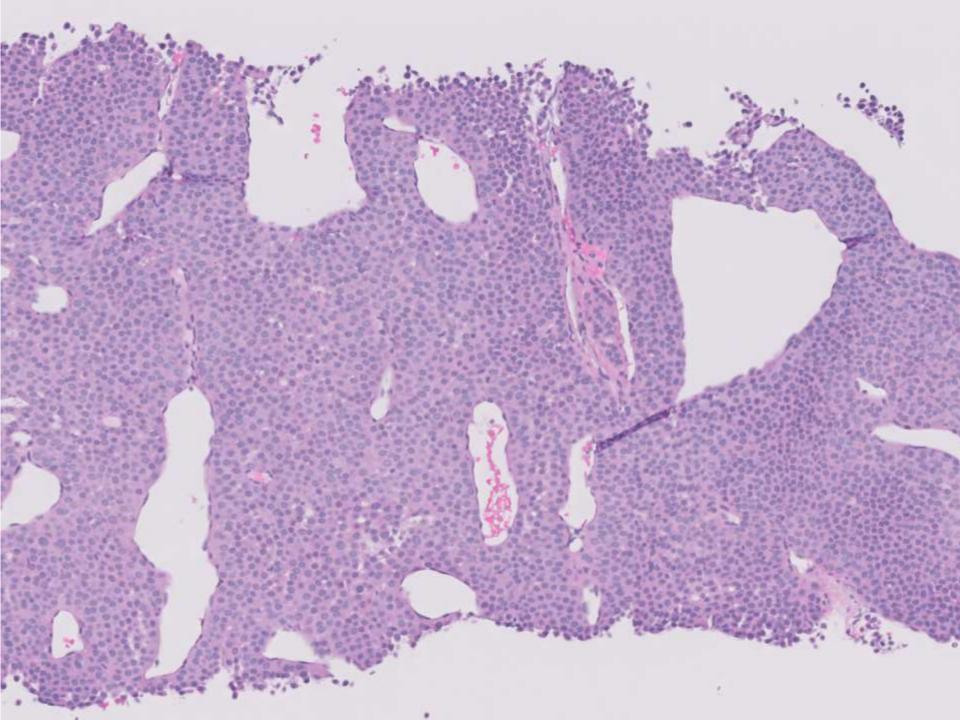


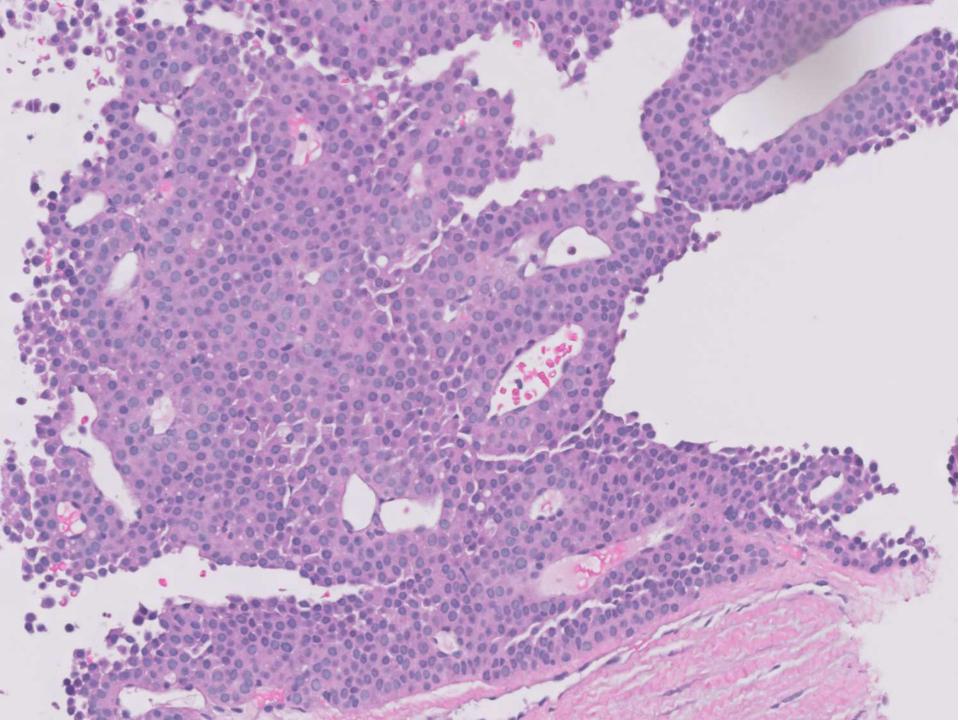
Positive	Negative
PAX7	CD99 (non-membranous)
SATB2	Desmin, SMA
INI1 (Intact expression)	Myogenin, MyoD1
	ERG, CD34, CD31
	EMA, SSTR2A
	CK mix
	WT-1 (N-terminal)
	S100, Sox10
	MPO
	ALK
	NUT

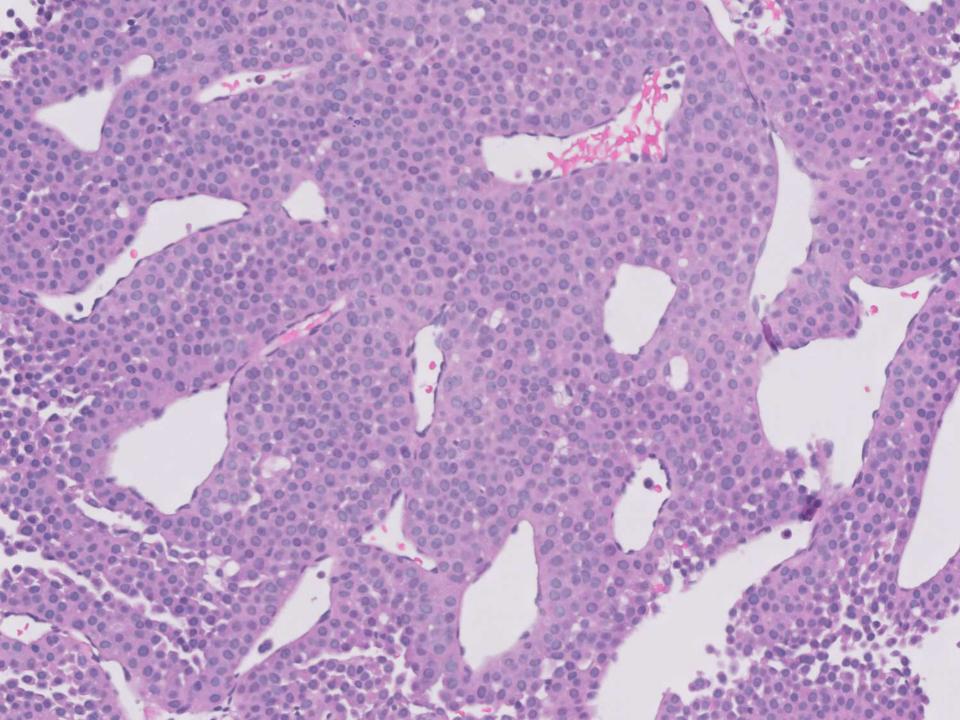


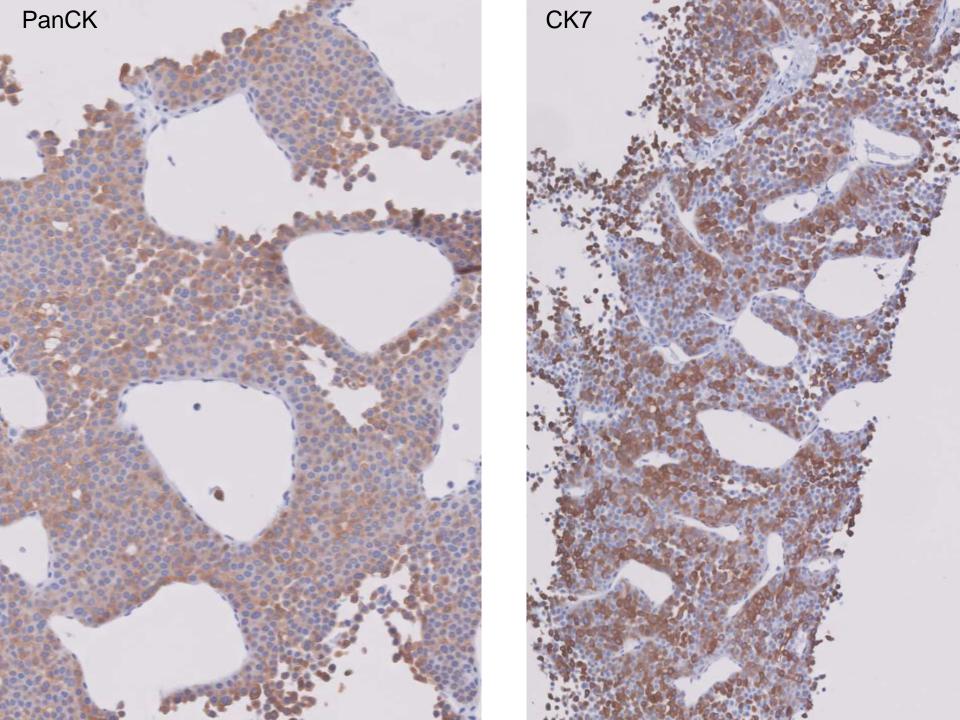
#### Sanjay Kakar; UCSF

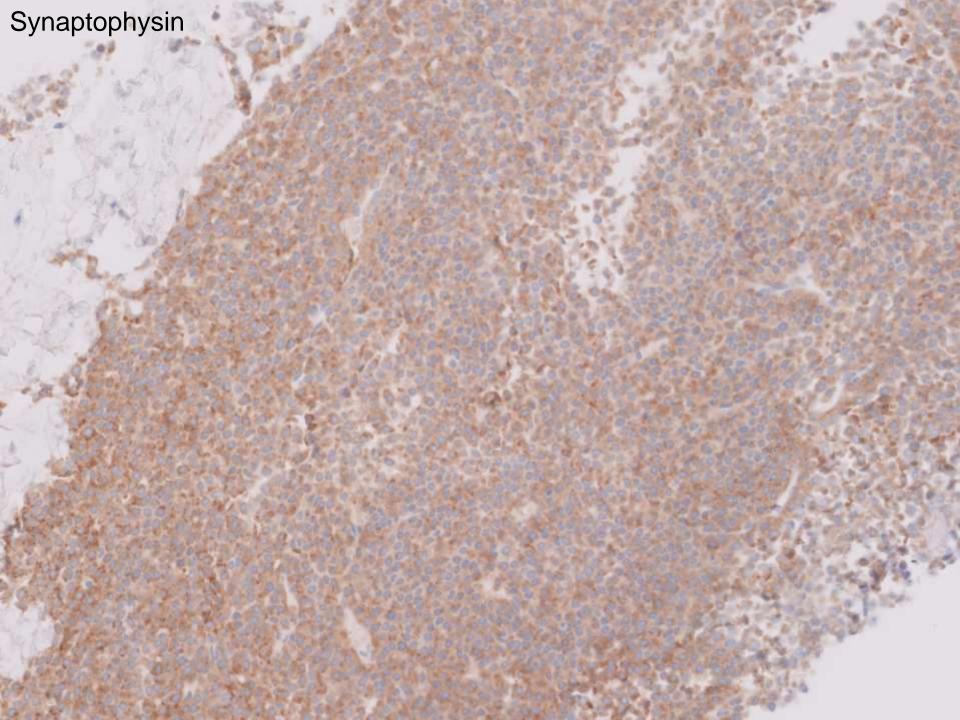
23-year-F with multiple liver masses in segments 7 and 8, largest measuring 23cm (others 4-5cm), without extrahepatic mass and no history of liver disease.



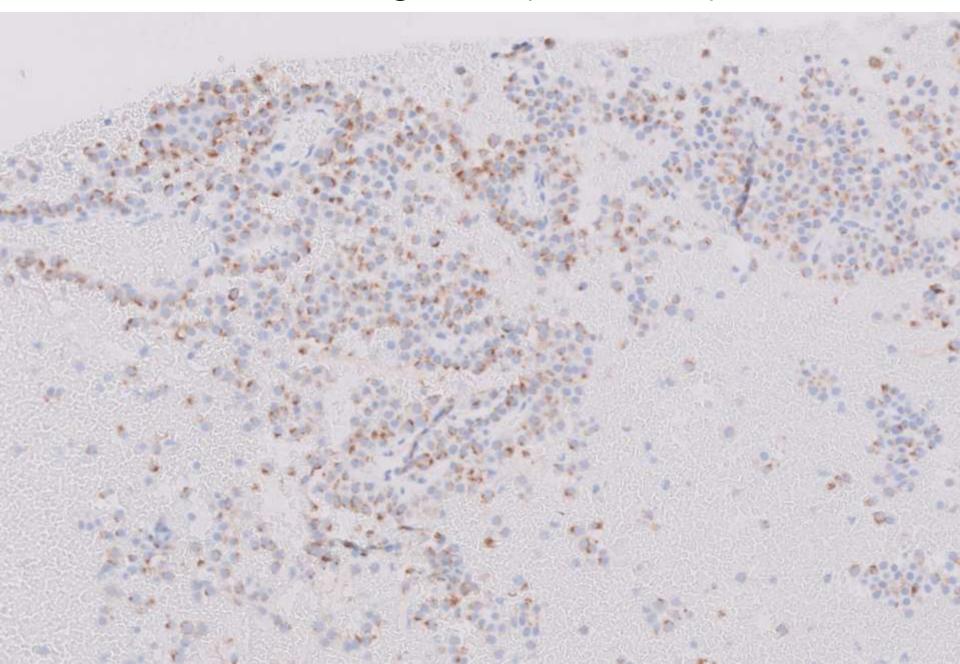




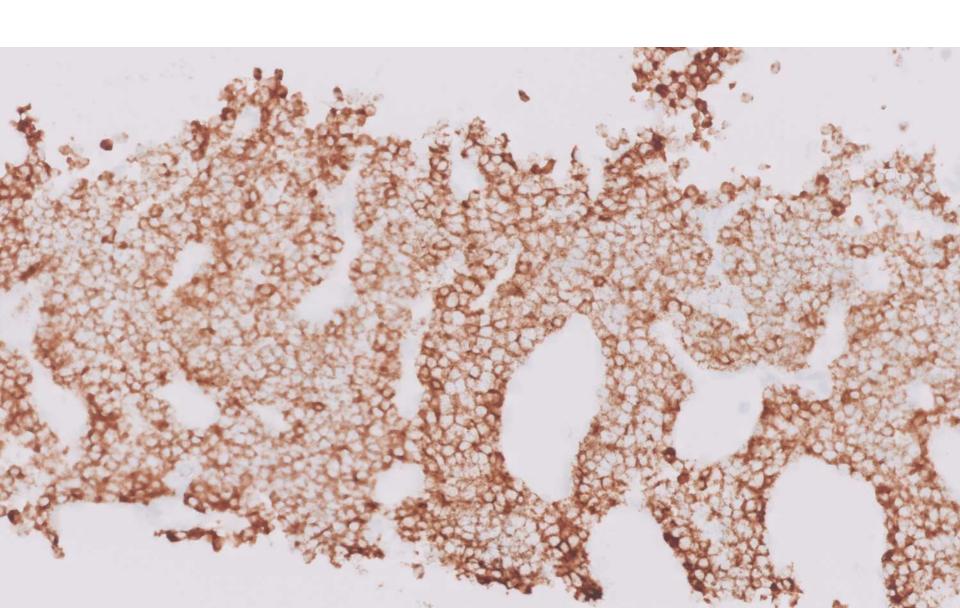


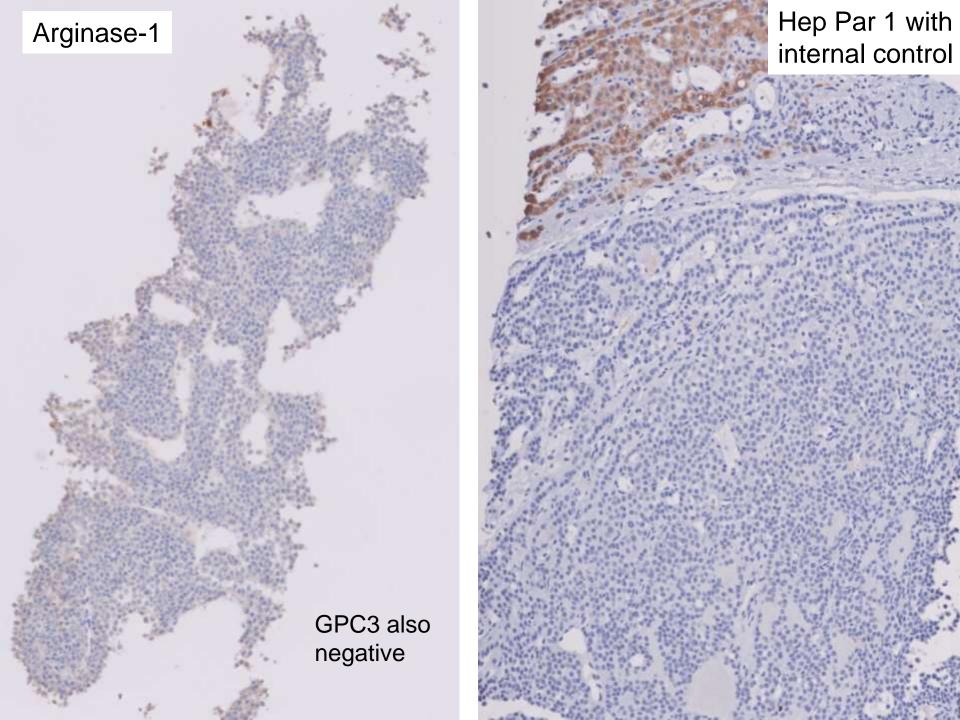


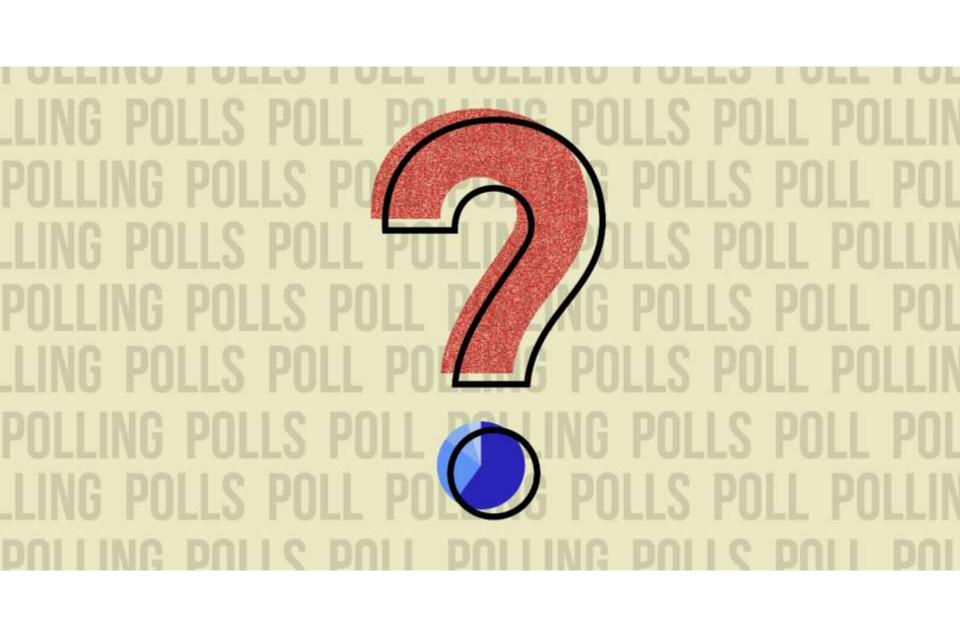
## Chromogranin (cell block)



# Albumin ISH

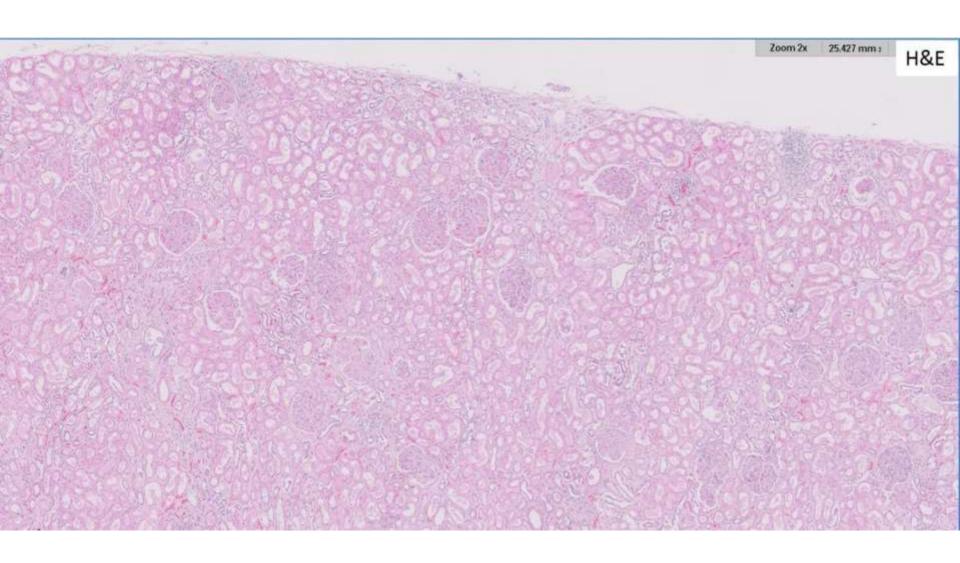


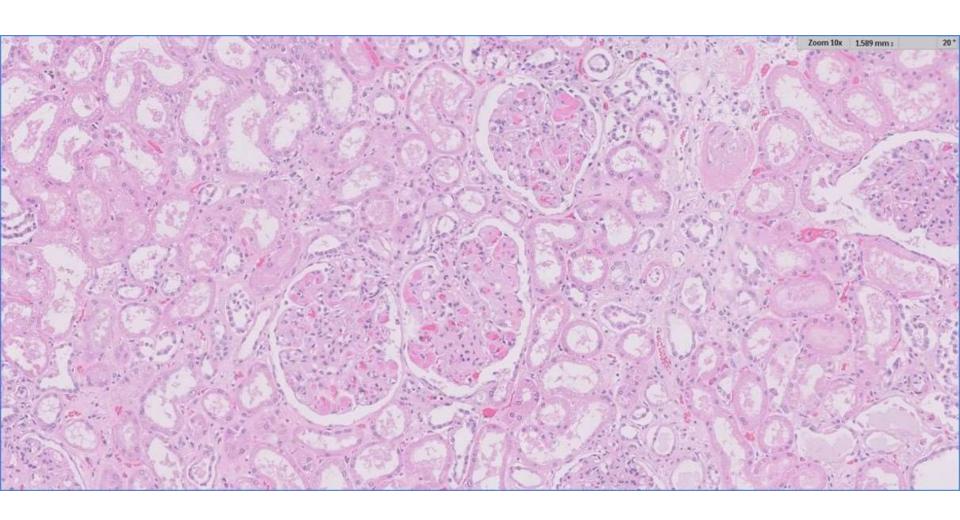


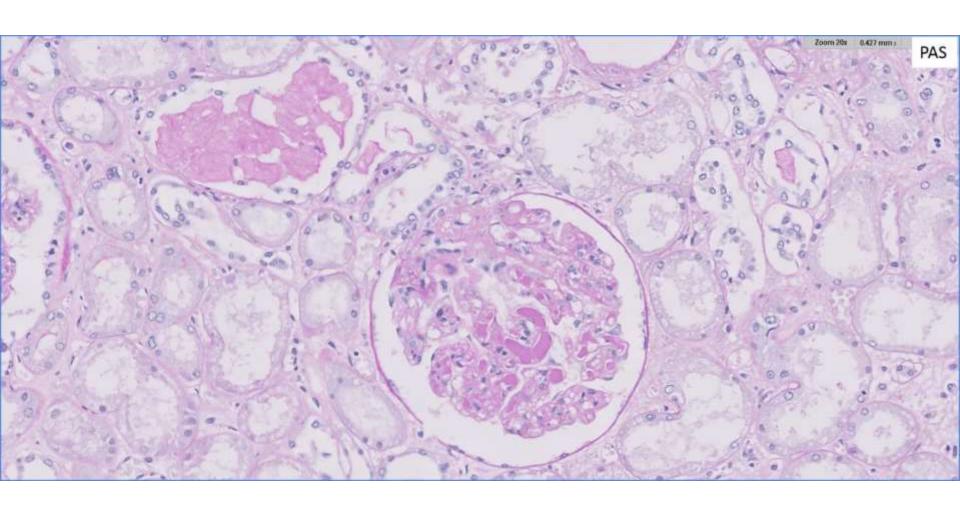


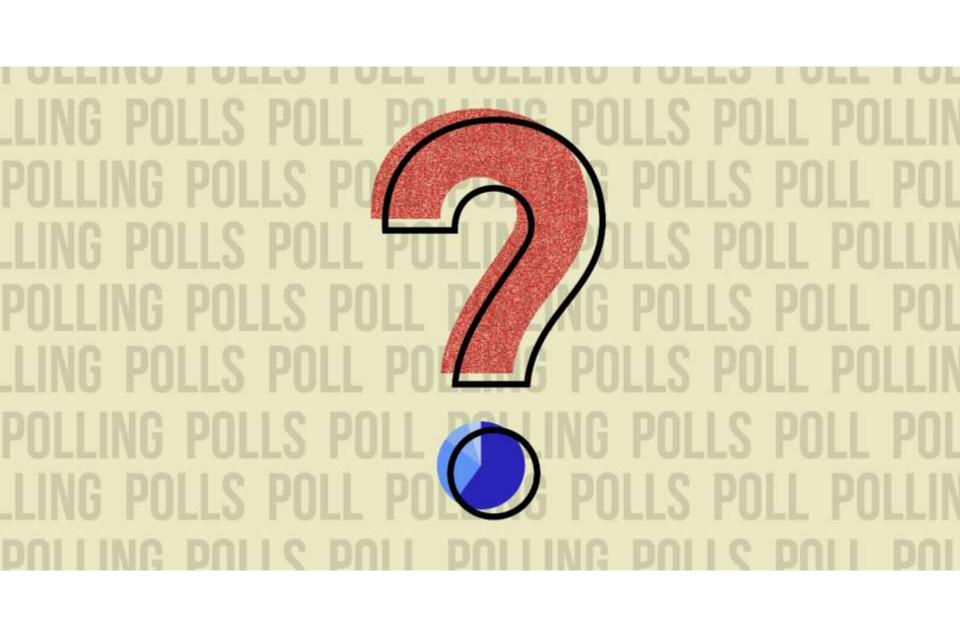
#### Alexandra Chang-Graham/Megan Troxell; Stanford

Elderly year-old woman with history of rheumatoid arthritis, on methotrexate, with months of abdominal pain. She developed a skin rash and presented to a hospital where she was determined to have new-onset acute renal failure requiring dialysis. She developed pancytopenia and acute hypoxic respiratory failure. Her status declined and she passed away.



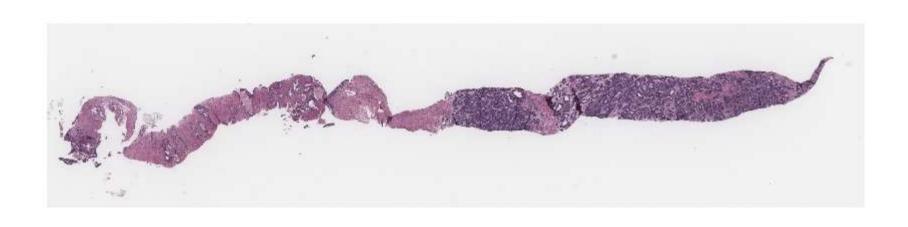




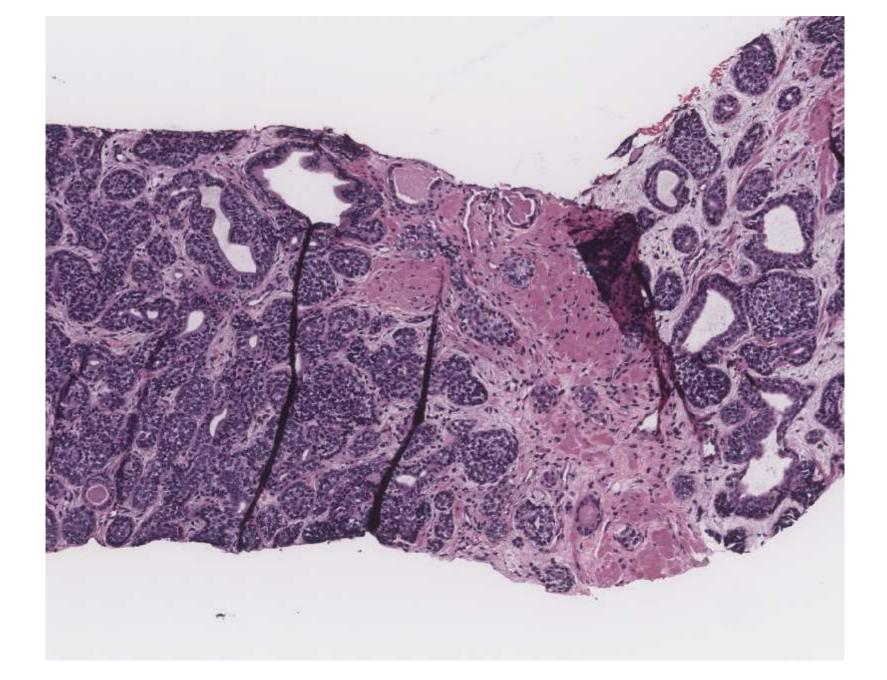


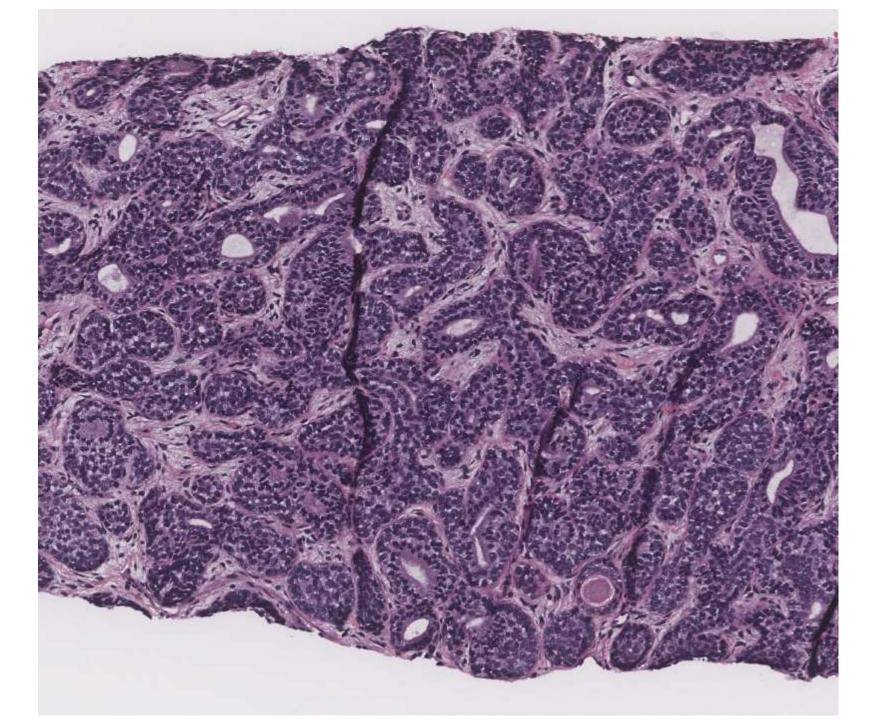
Chien-Kuang Ding/Zhen Yan/Emily Chan; UCSF

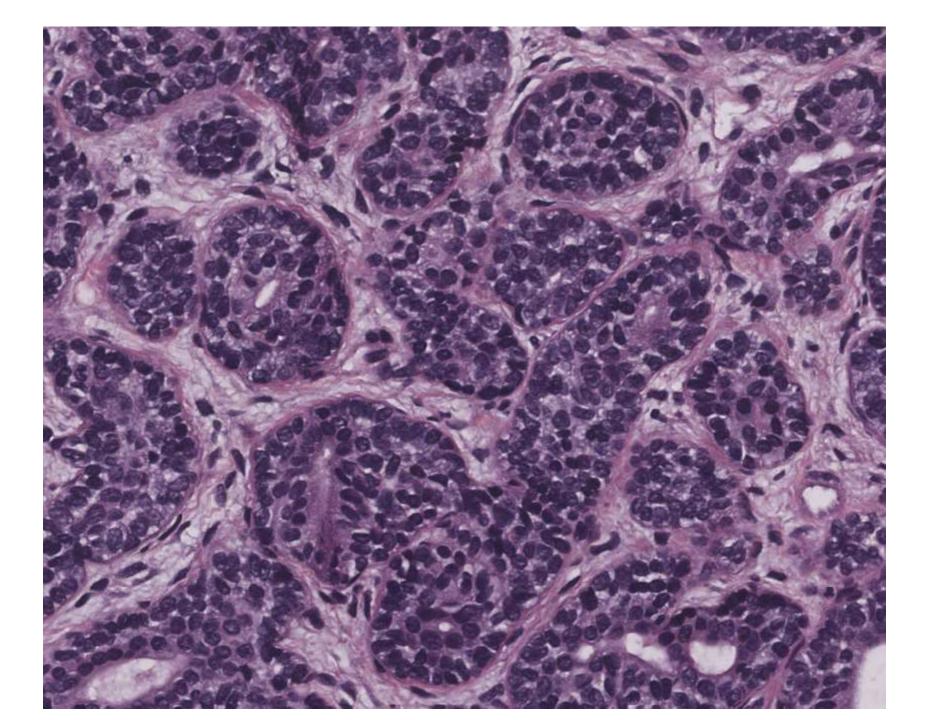
Adult M with elevated PSA, undergoes prostate biopsy.

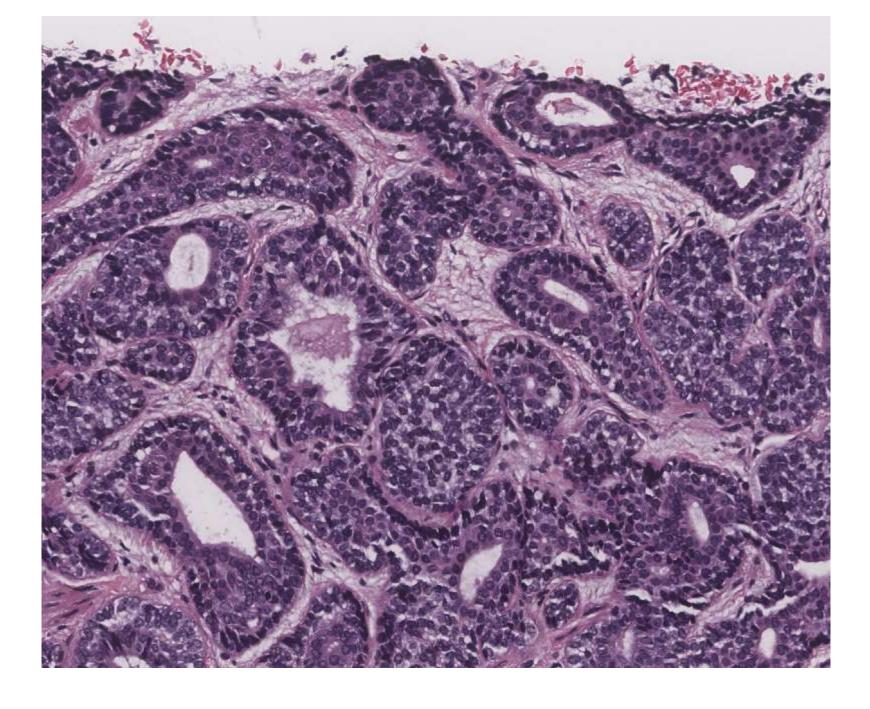


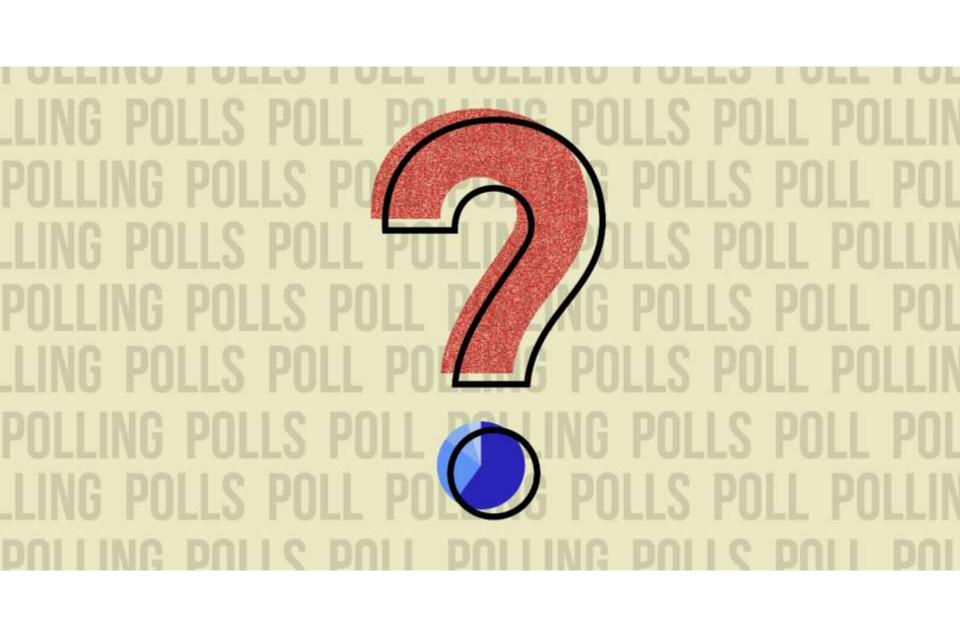












# 22-0106

### Jeffrey Nirschl/Hannes Vogel; Stanford

60-year-old M with hypertension and T2DM who presented with acute-onset left-sided right gaze palsy and lip smacking. Brain MRI showed extra-dural based mass measuring 3.1cm.

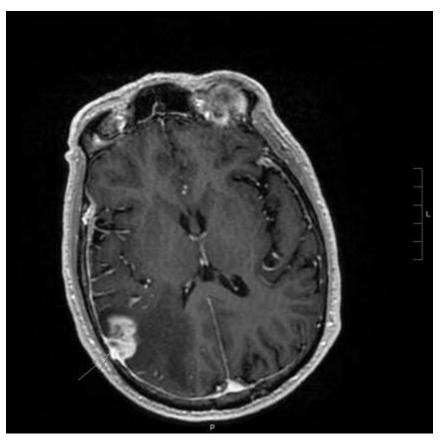
# **Case History**

~60-year-old male with hypertension and T2DM who presented with acute-onset left sided, right gaze palsy, and lip smacking

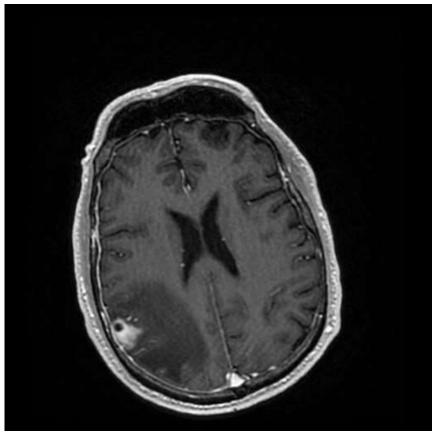
#### Imaging data:

- > Brain MRI:
  - Heterogeneously enhancing with irregular margins
  - Extra-axial dural-based mass with intraparenchymal extension versus a parenchymal intra-axial lesion invading the dura
  - > Located at the right parietal/parieto-occipital junction
  - Measuring 3.1 x 1.8 x 3.7 cm

# **Brain MRI**

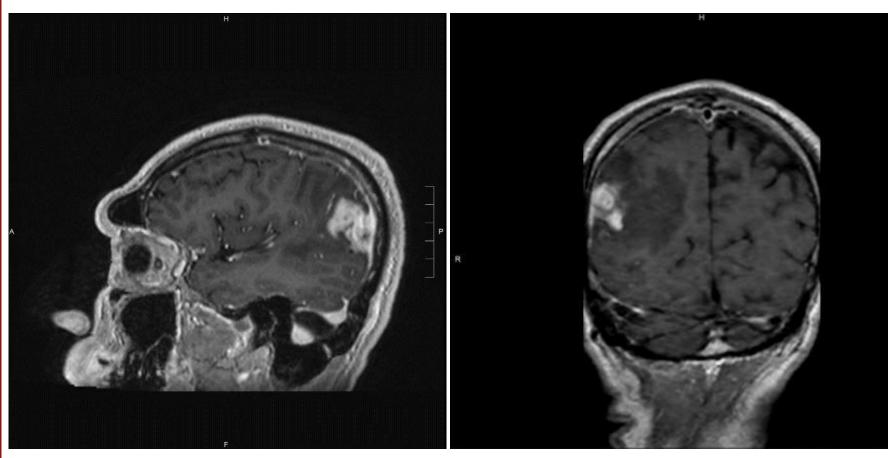


Axial T1 w/contrast



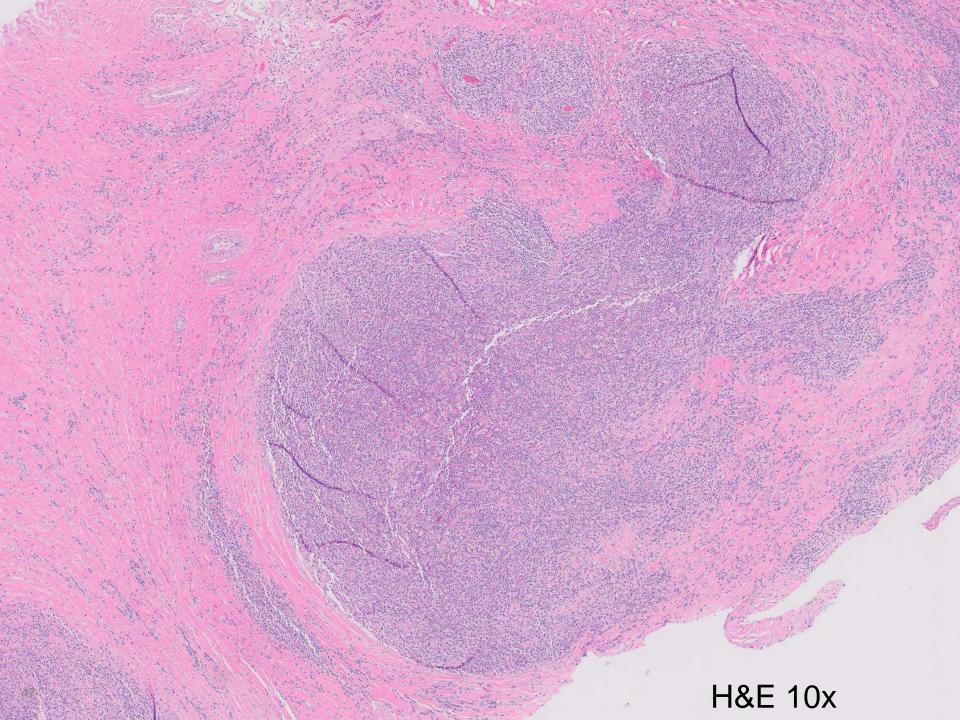
Axial T1 w/contrast
Stanford University

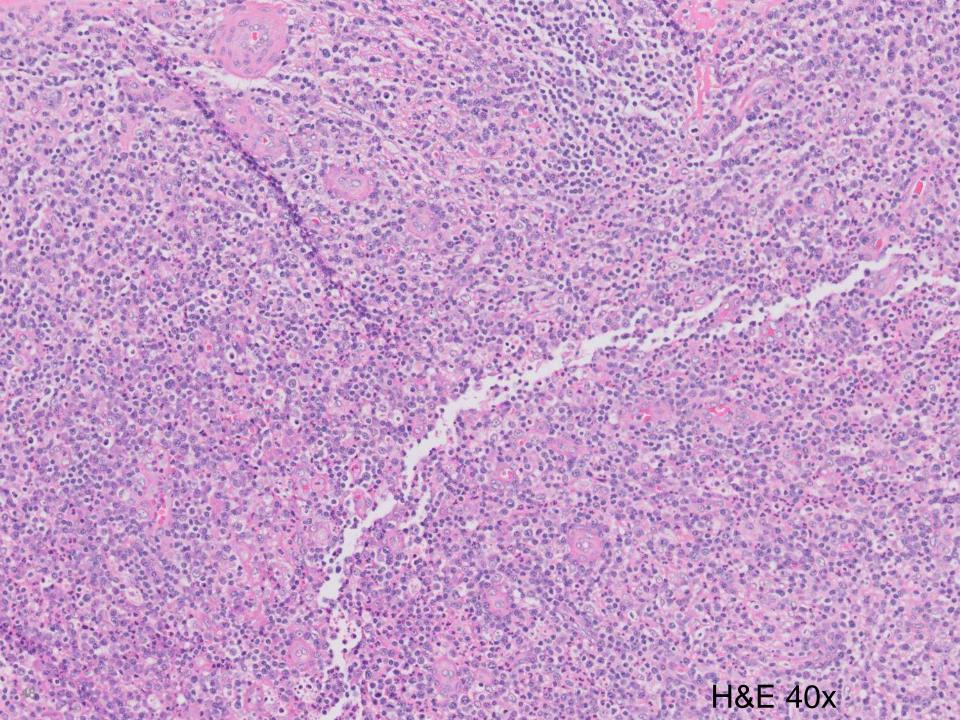
# **Brain MRI**

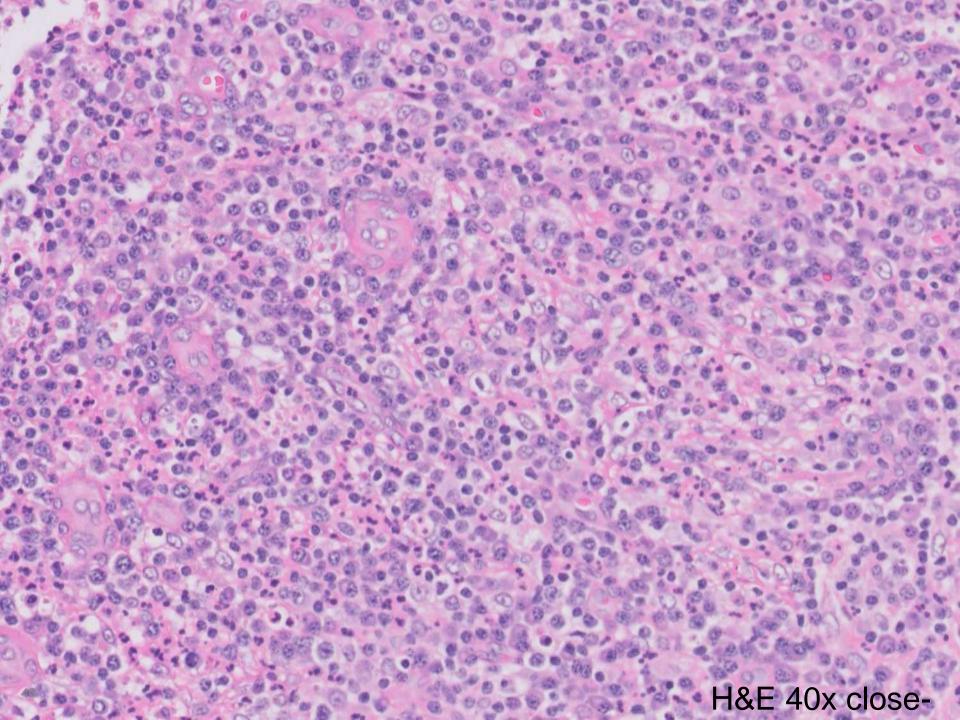


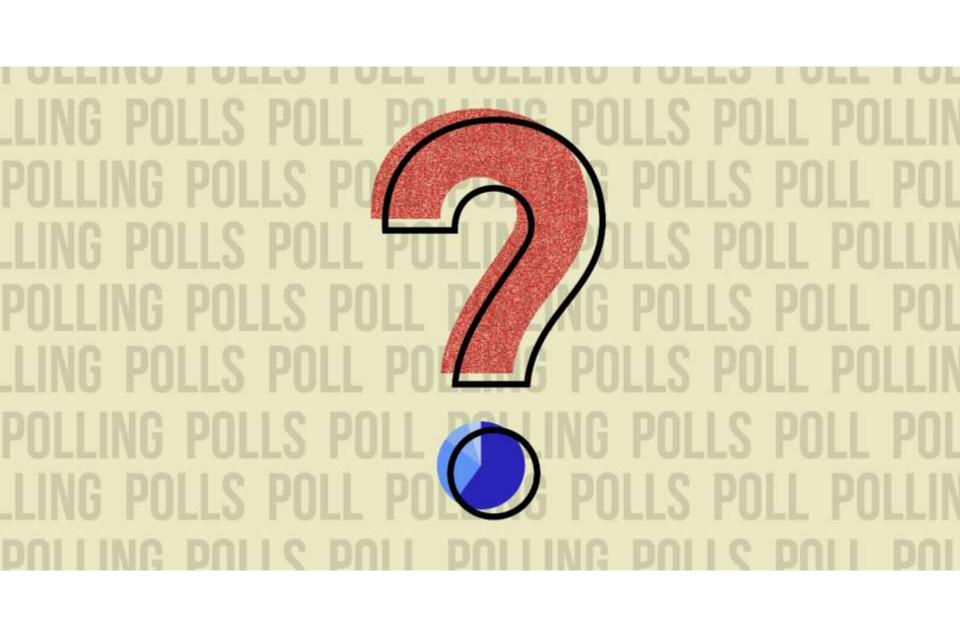
Sagittal T1 FLAIR

Coronal w/contrast
Stanford University









# 22-0107 scanned slide avail!

**Ankur Sangoi; El Camino Hospital** 

50-year-old M with renal mass, radical nephrectomy performed.

