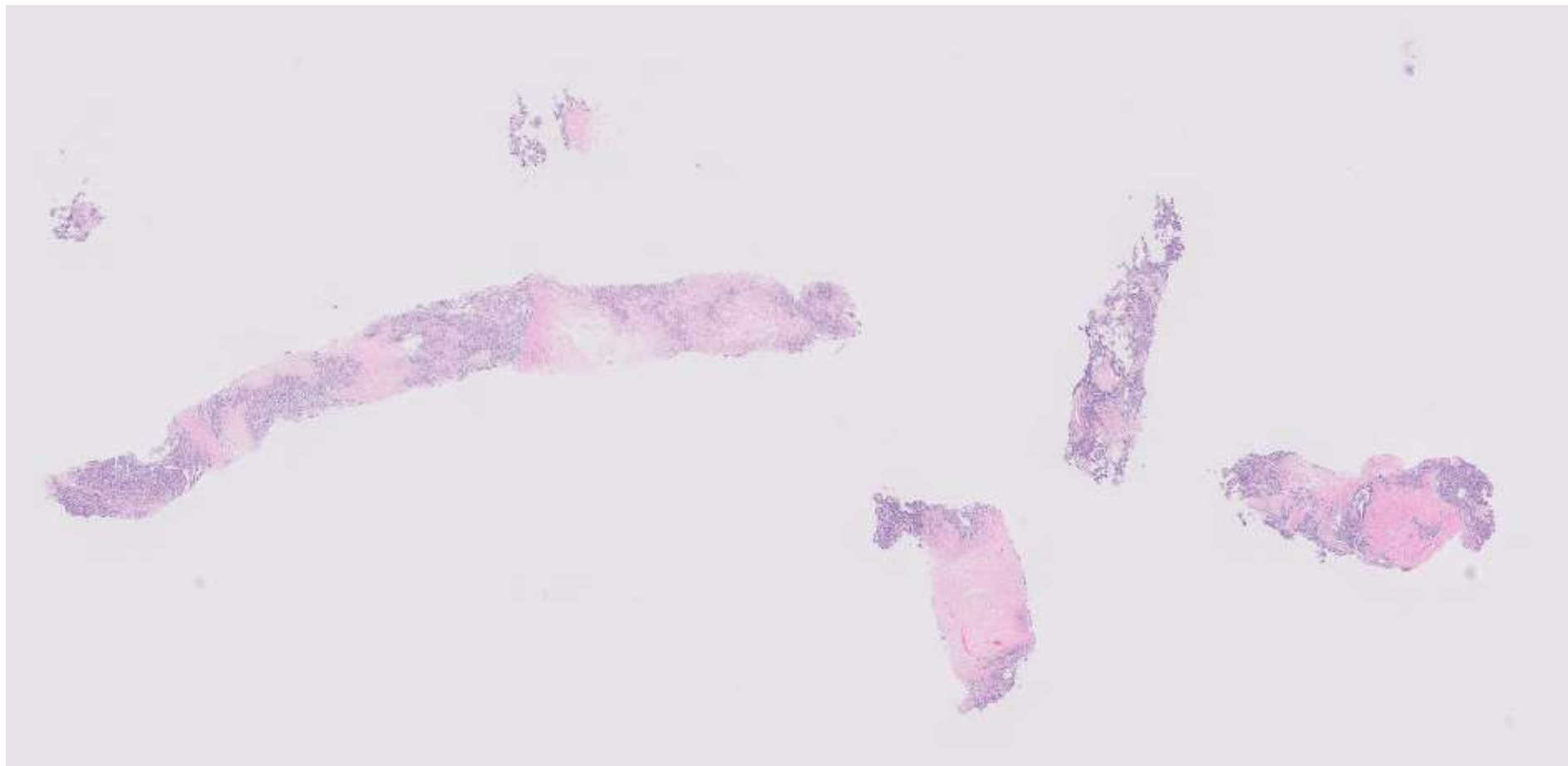
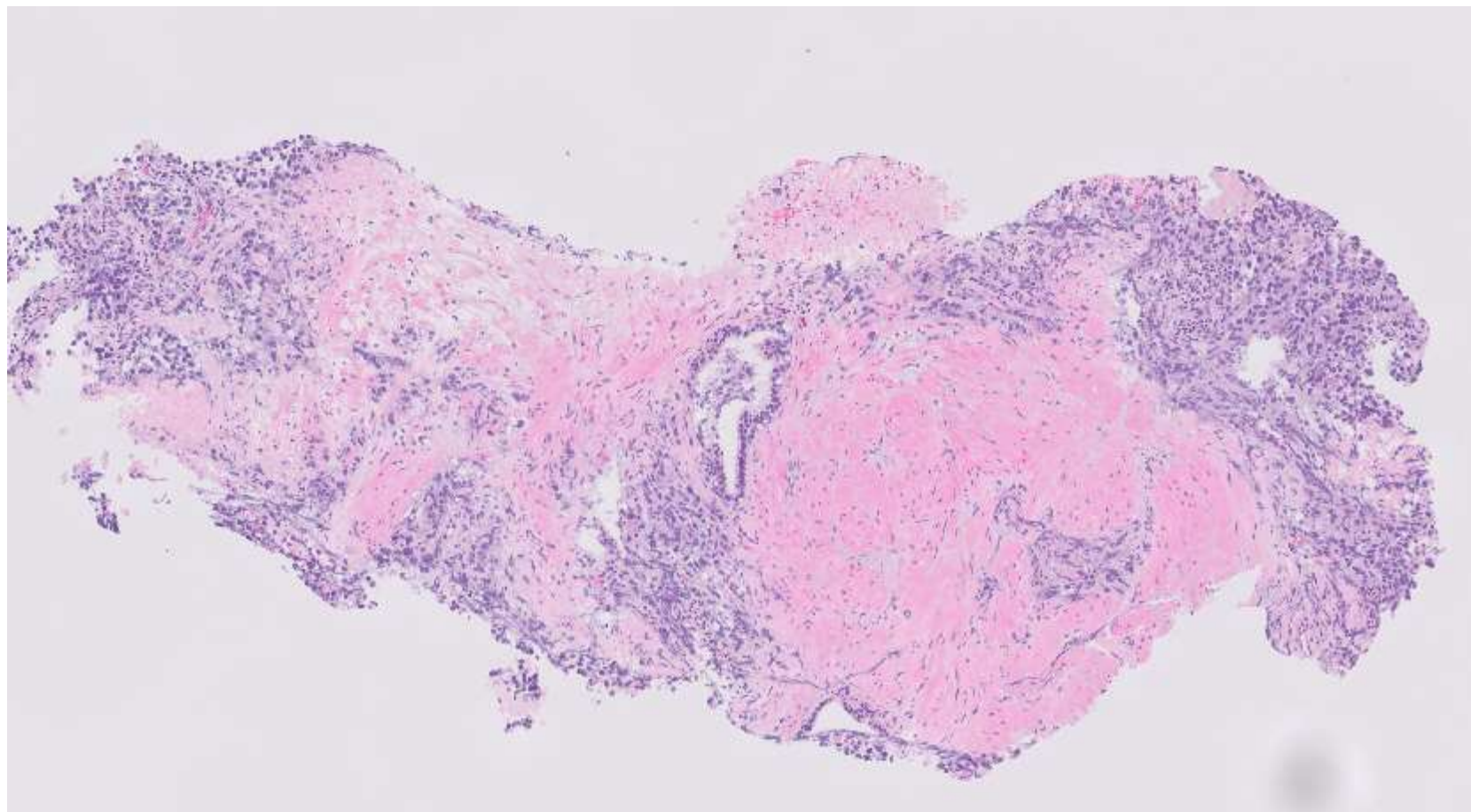


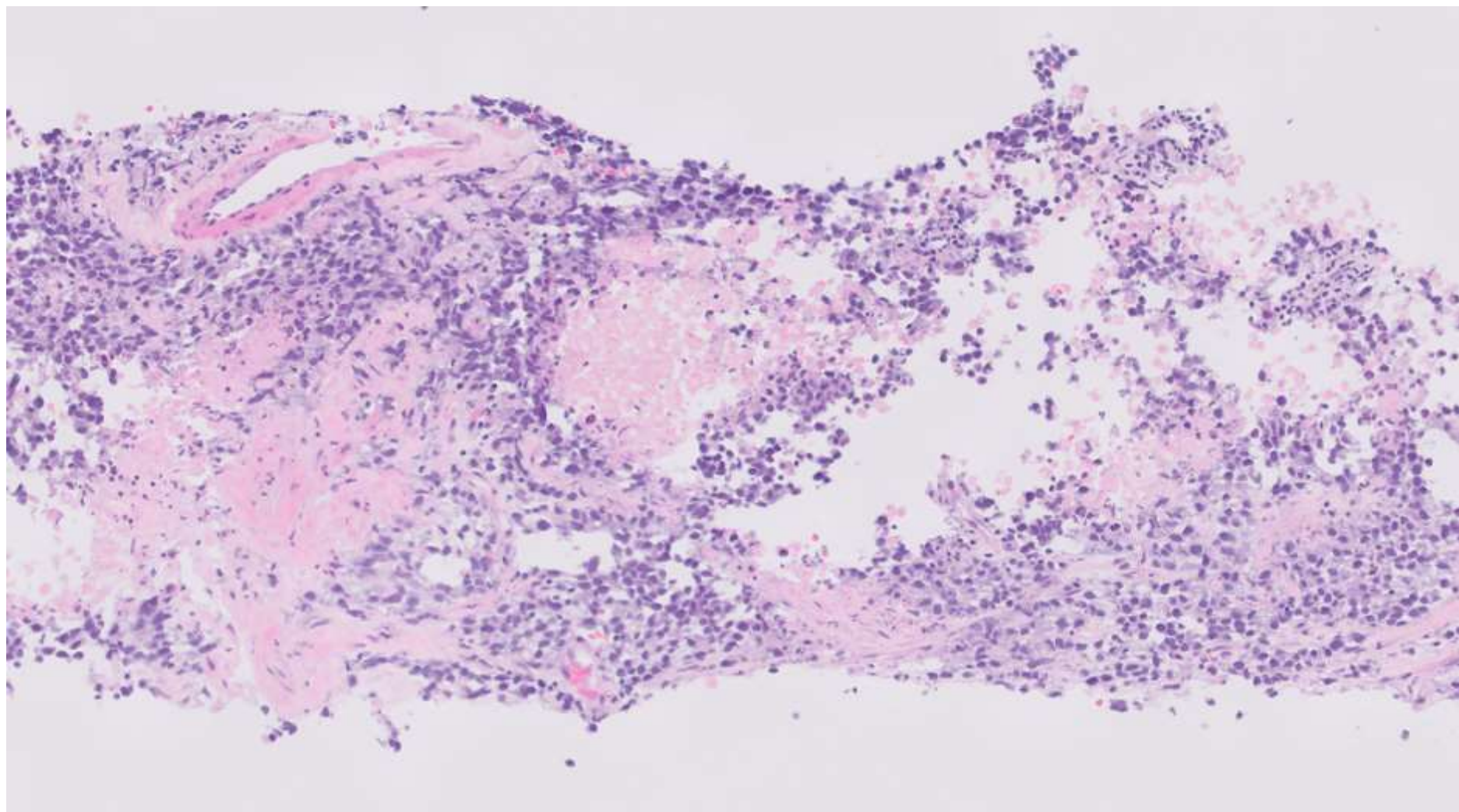
# 22-0601

**22-0401 – Emily Chan; UCSF**

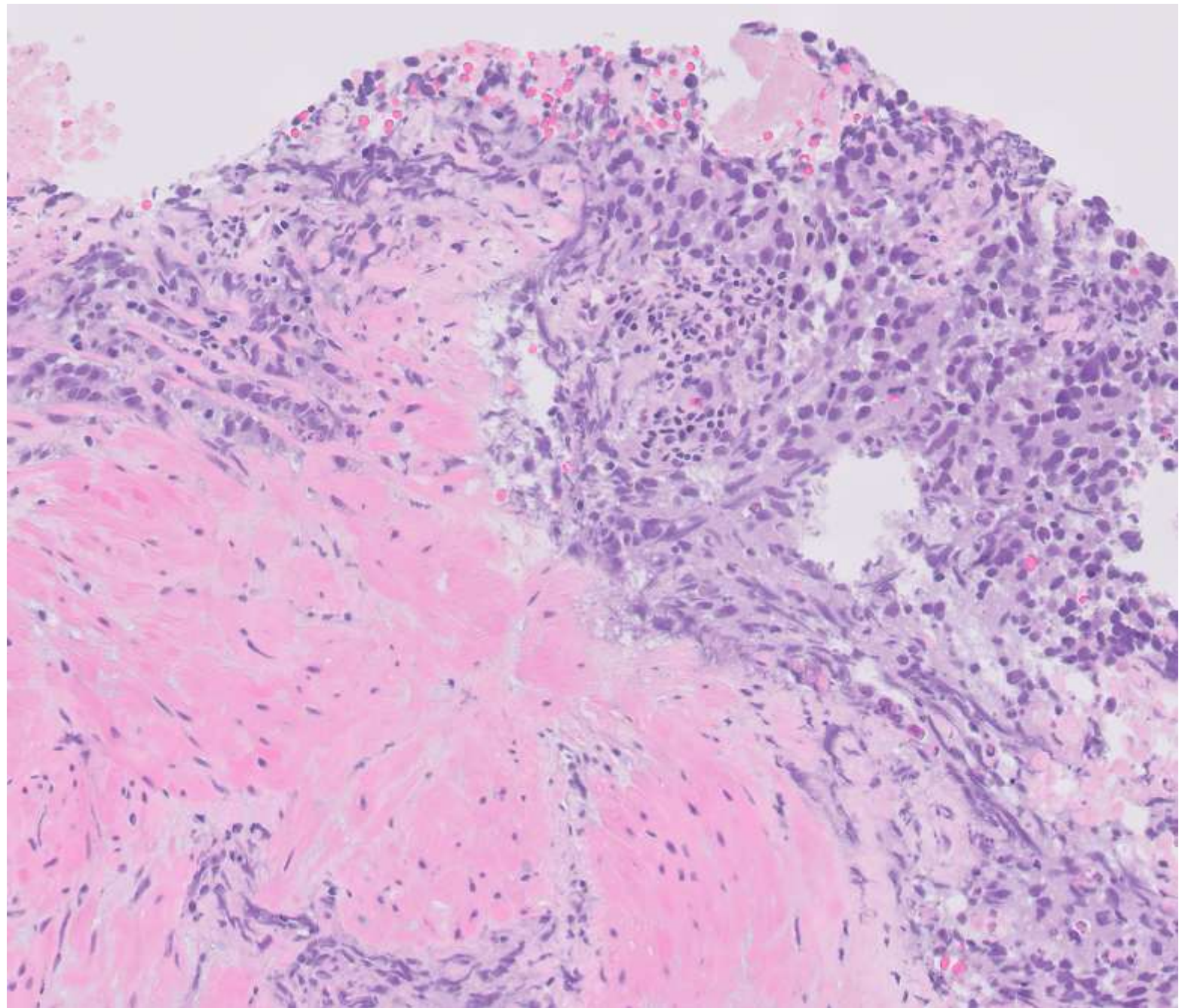
40ish M with urinary retention and enlarged prostate, PSA=2. Standard 12-cor prostate biopsies all showed similar findings.

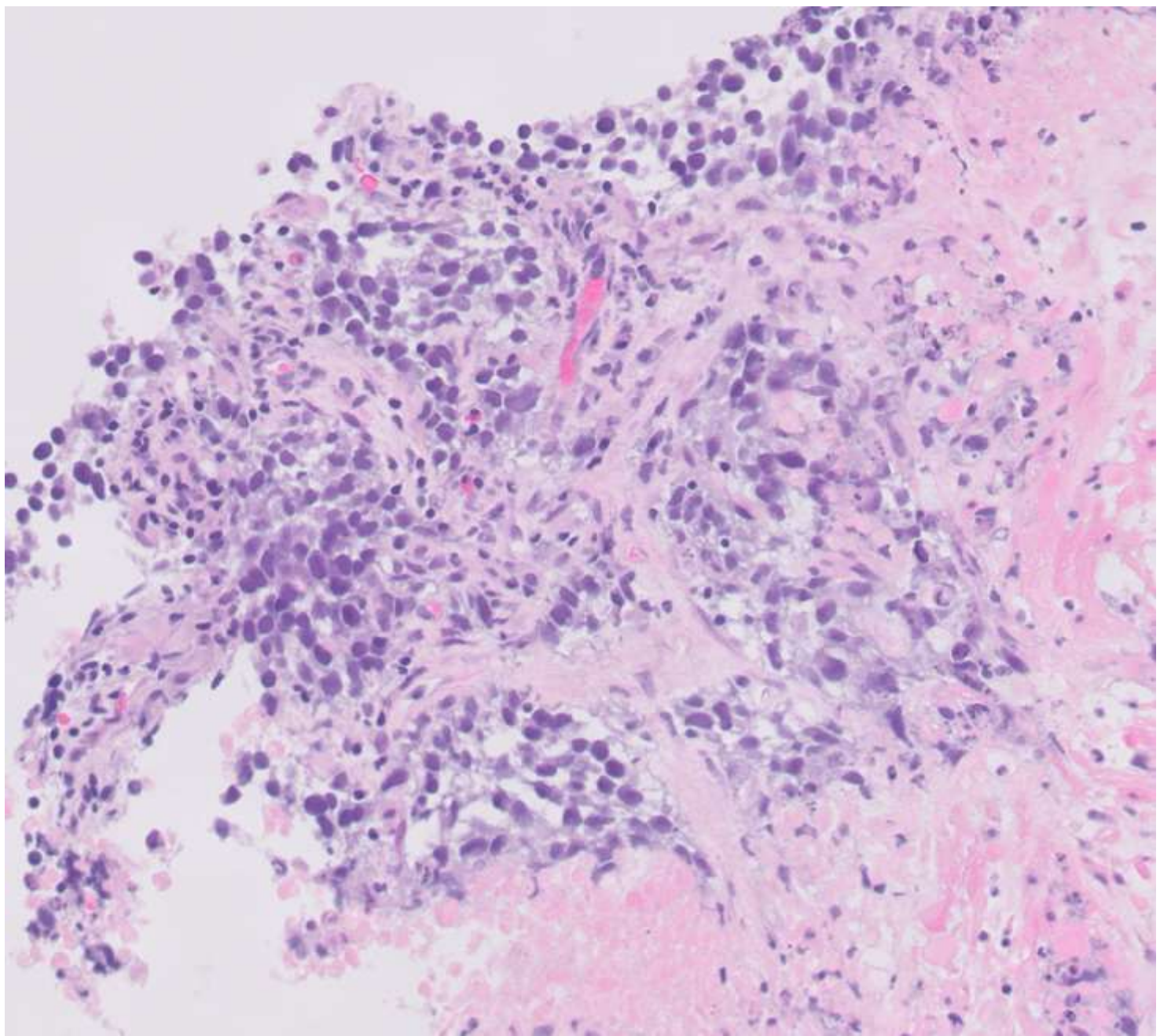




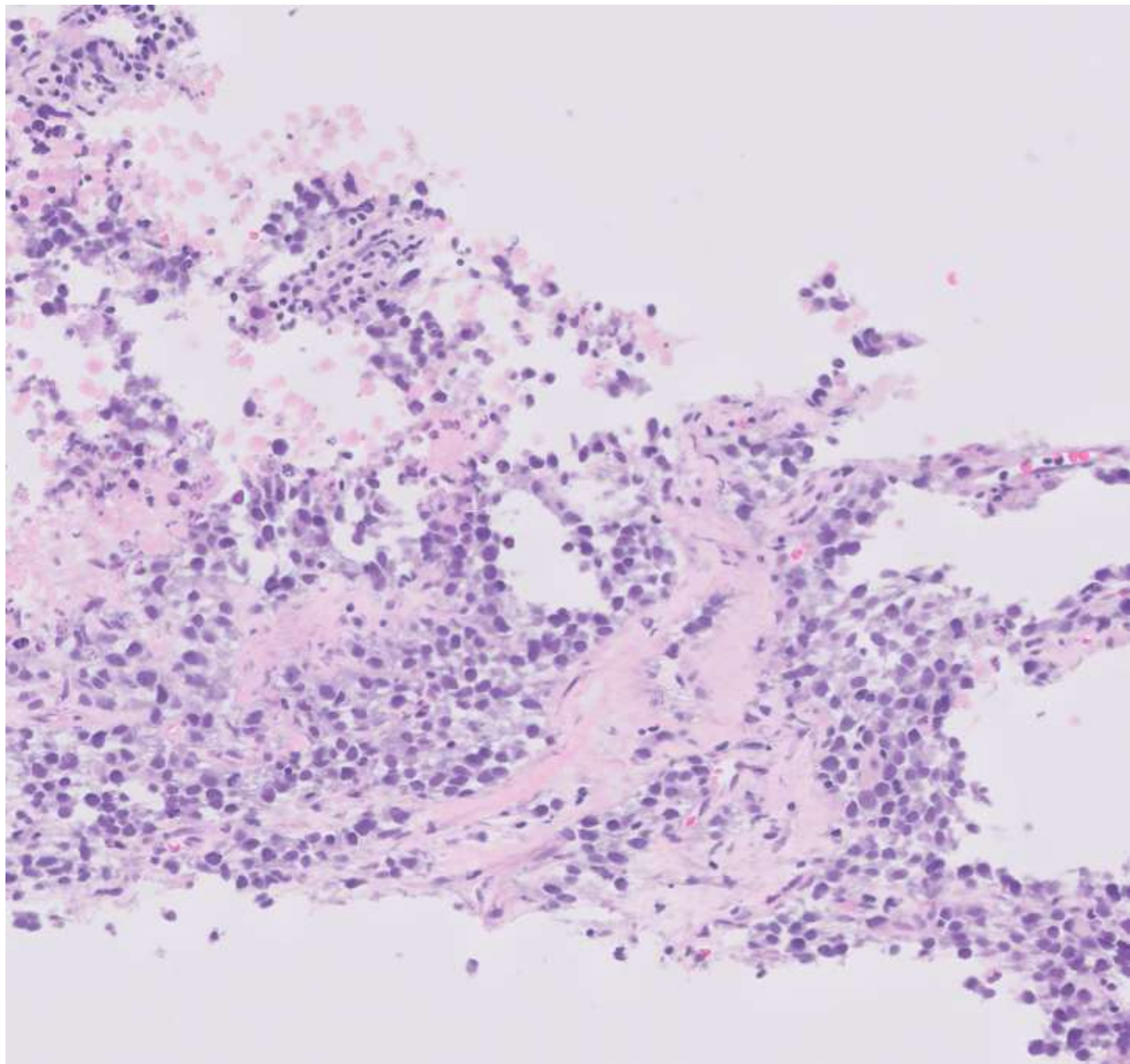


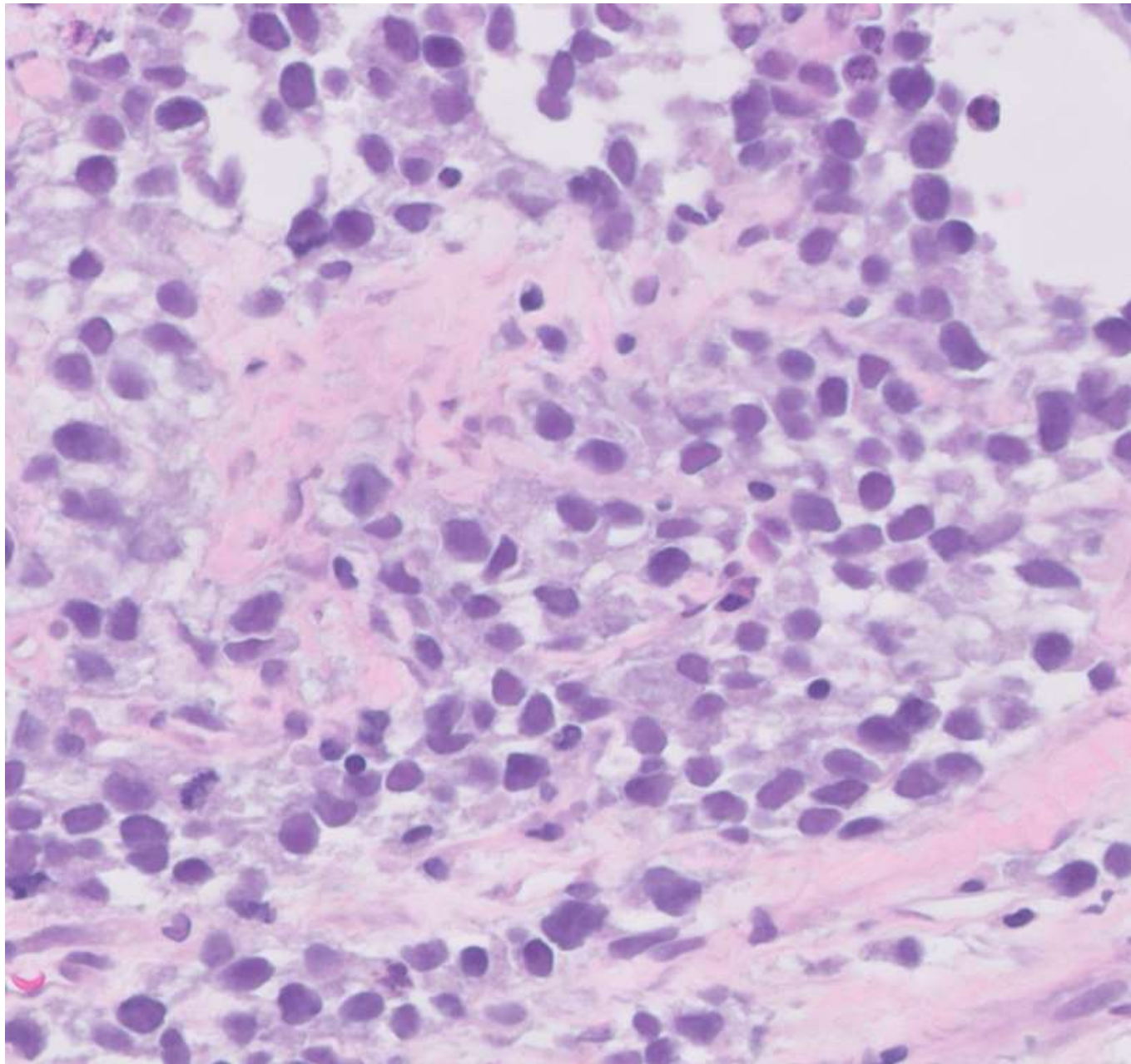




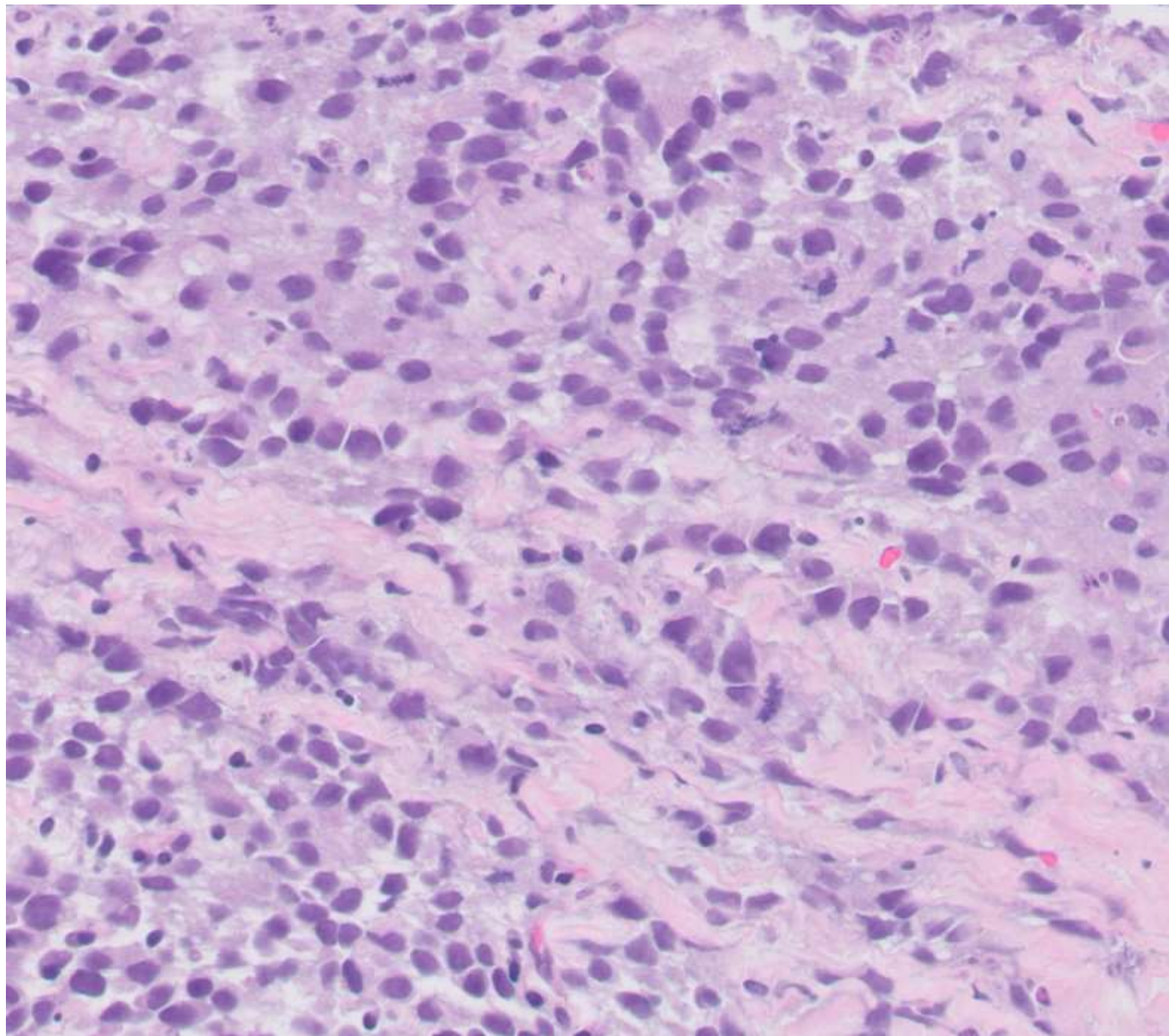












# DIAGNOSIS?



22-0602

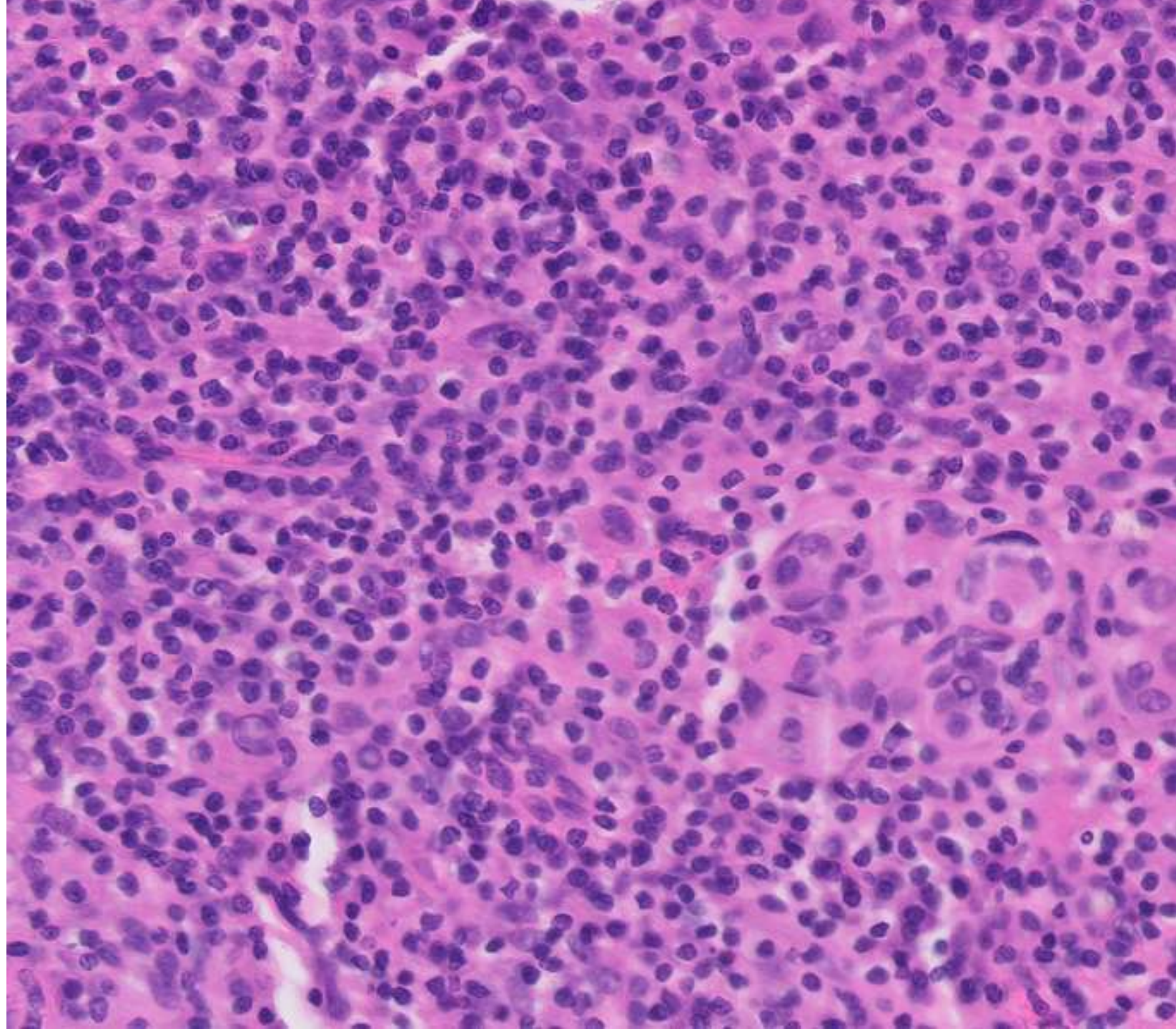
**Angus Toland/Inma Cobos; Stanford**

40ish F with right parieto-occipital dural-based mass.  
Resection submitted.

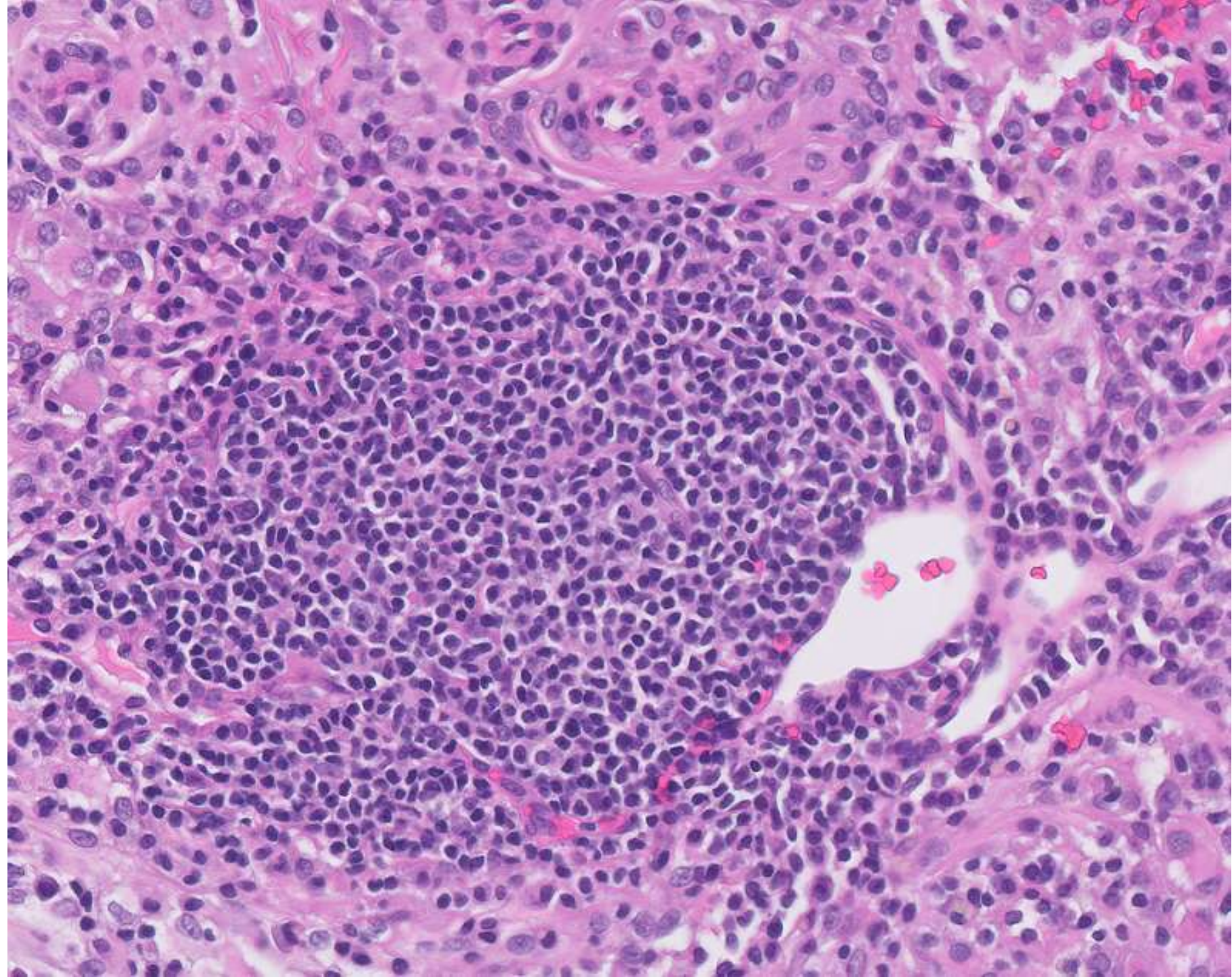
# History

- 45-year-old woman with a right parieto-occipital dural-based mass (consult case; no imaging)

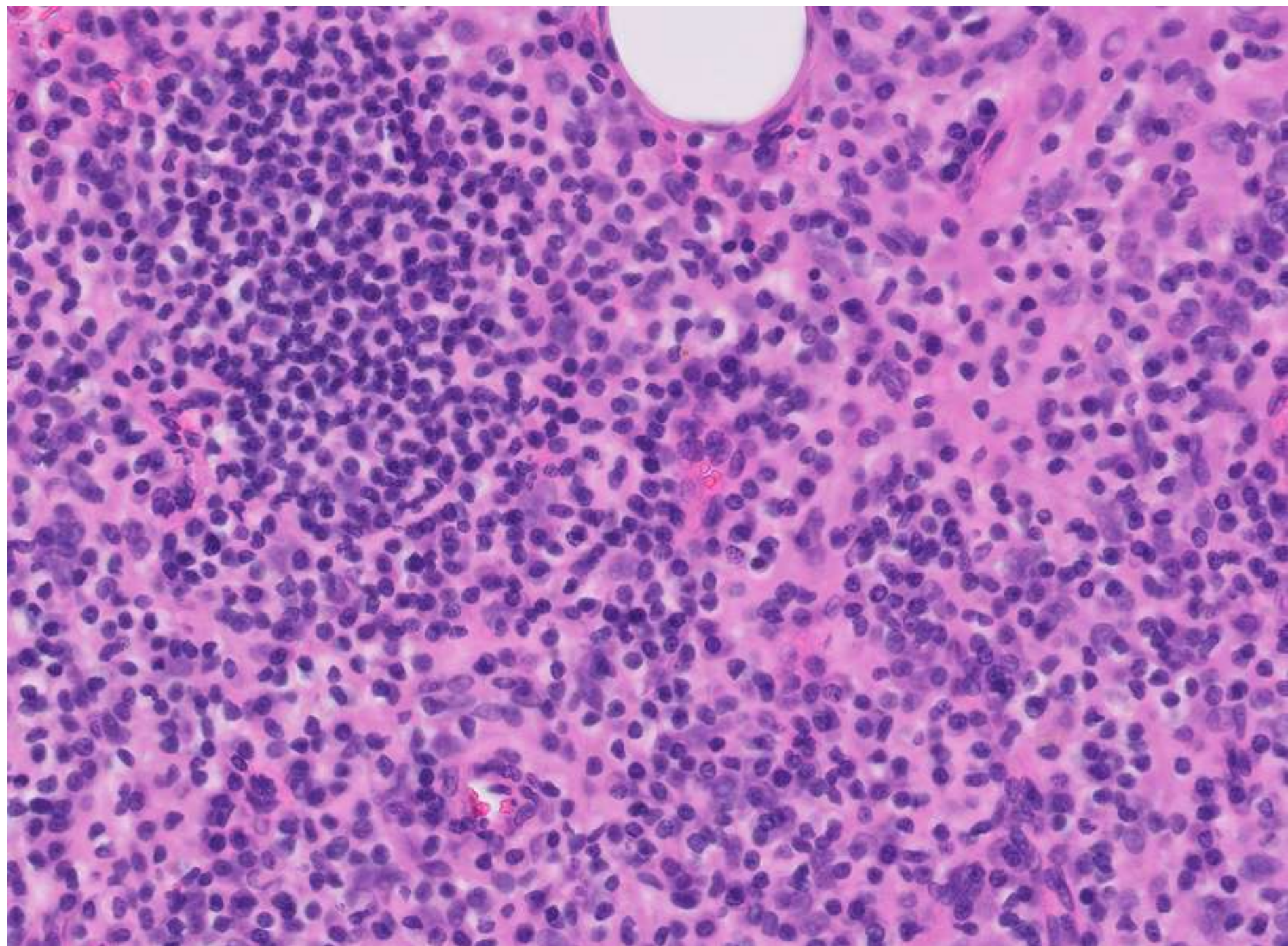




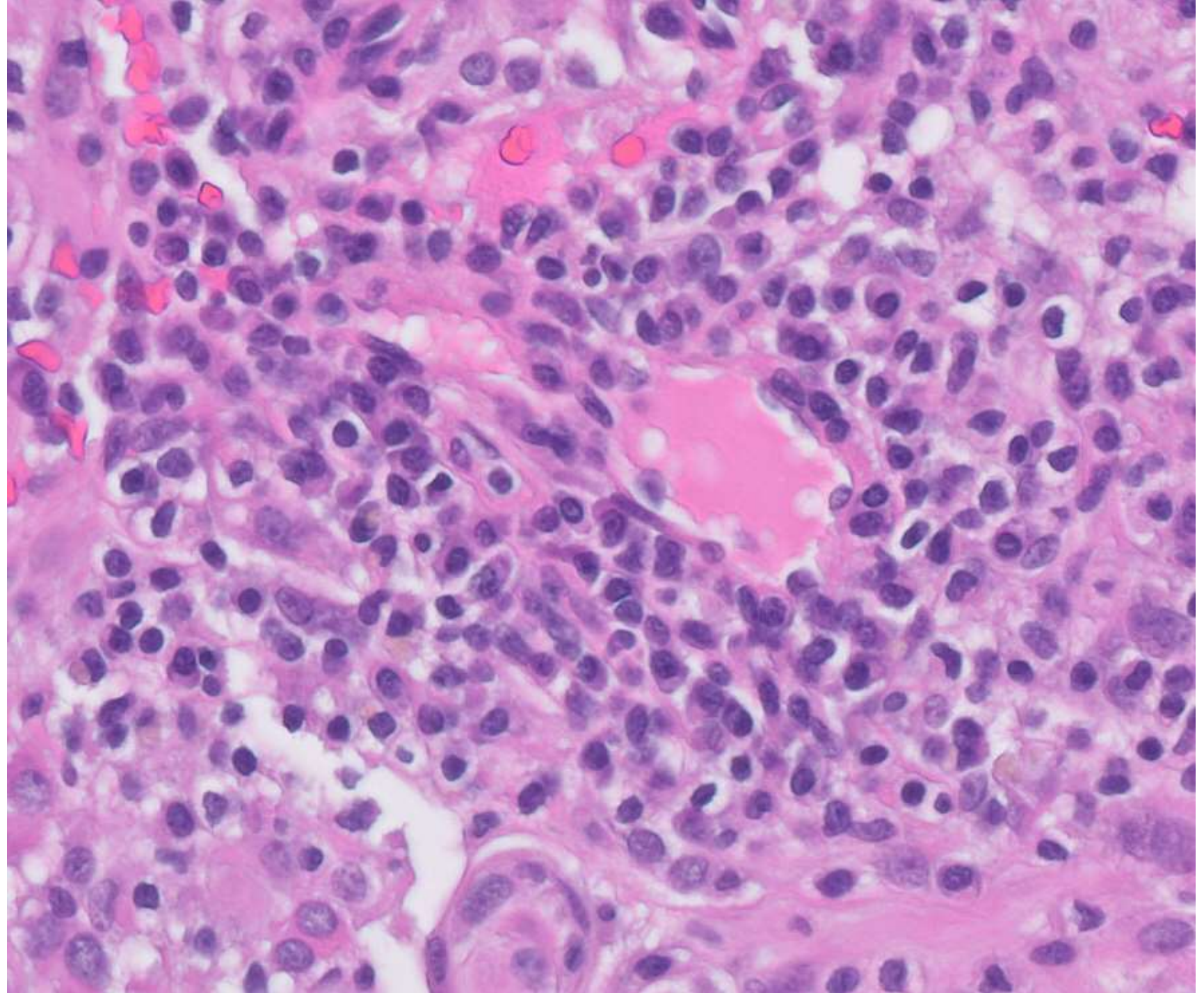




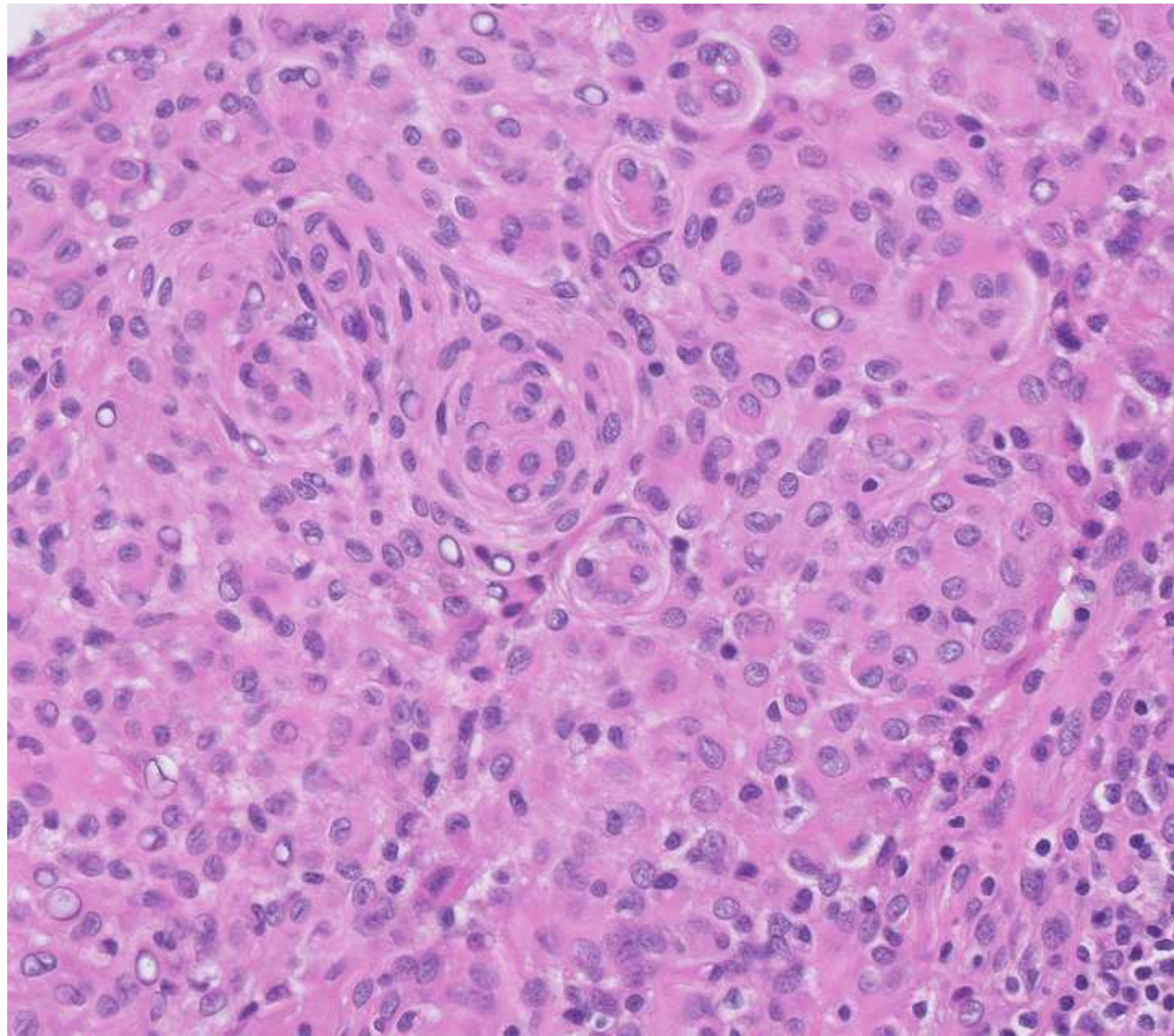




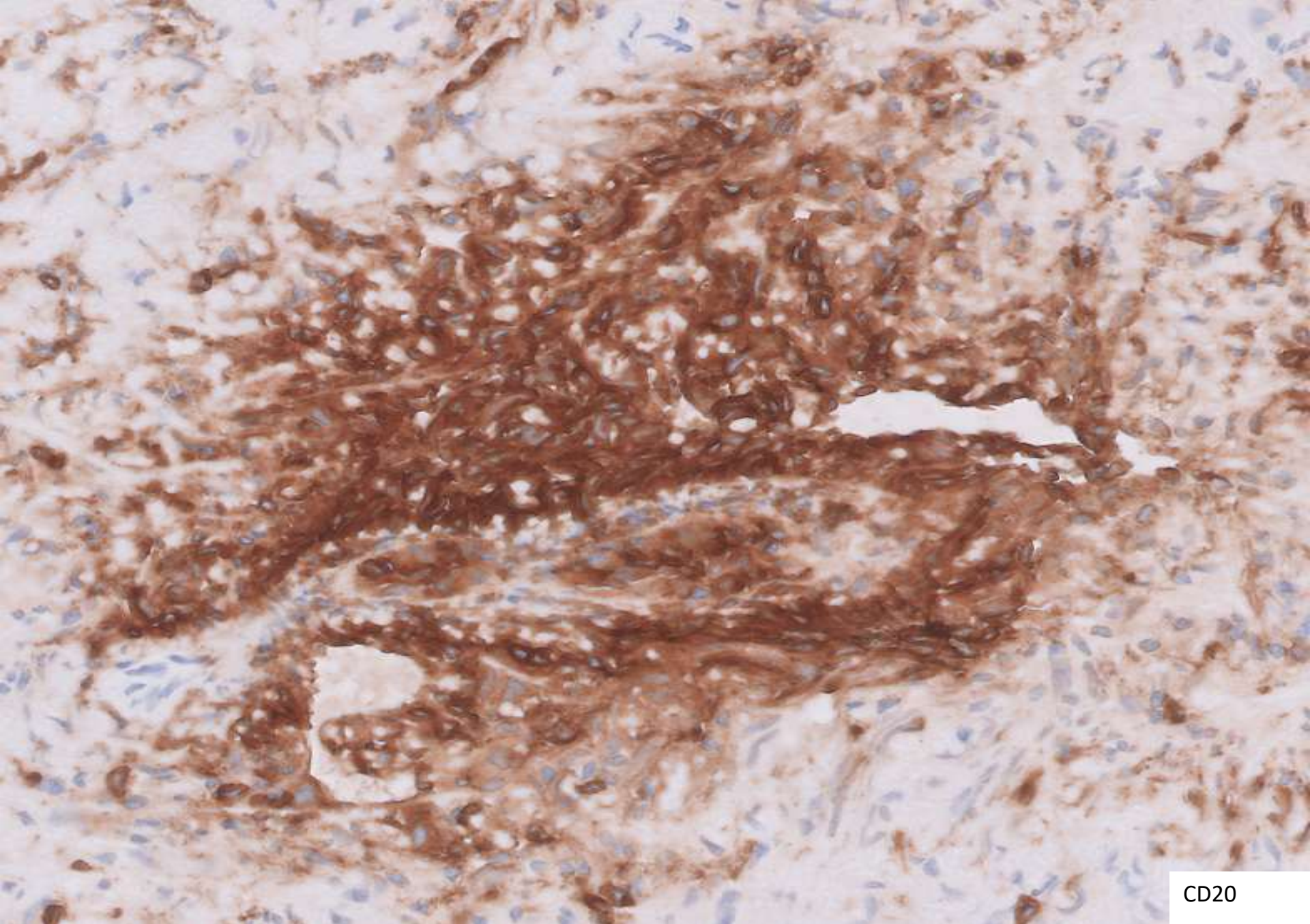






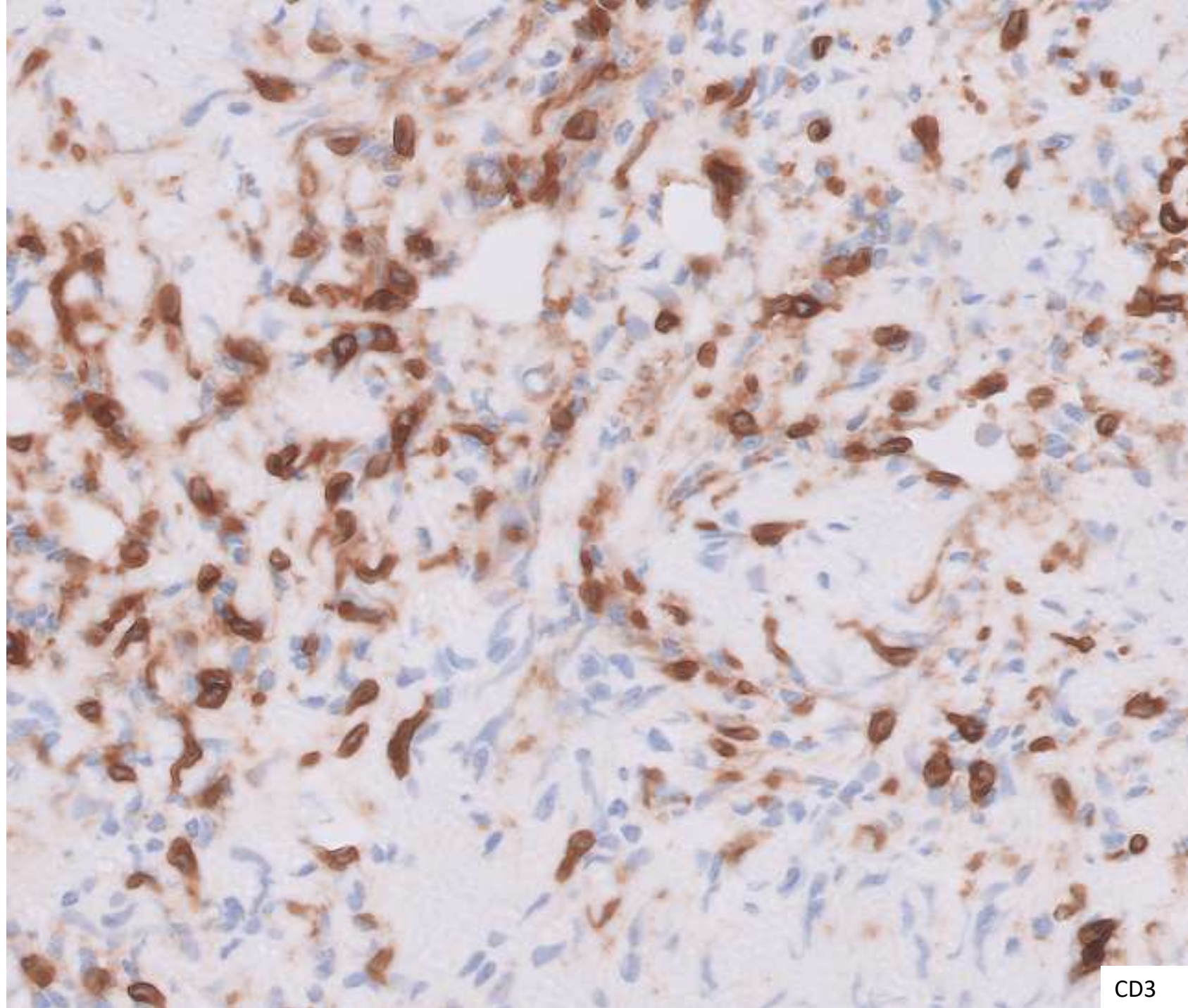




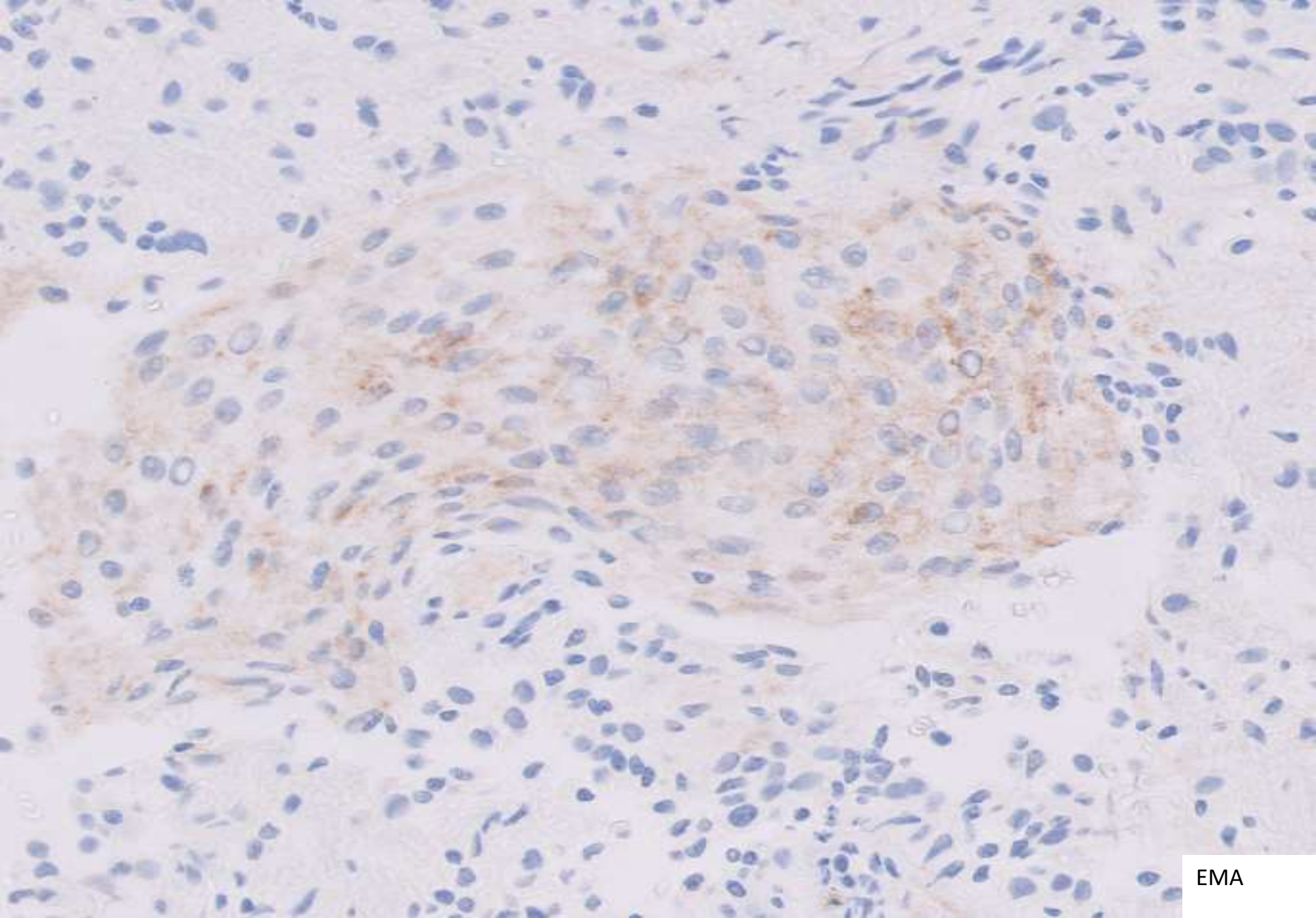


CD20





CD3



EMA



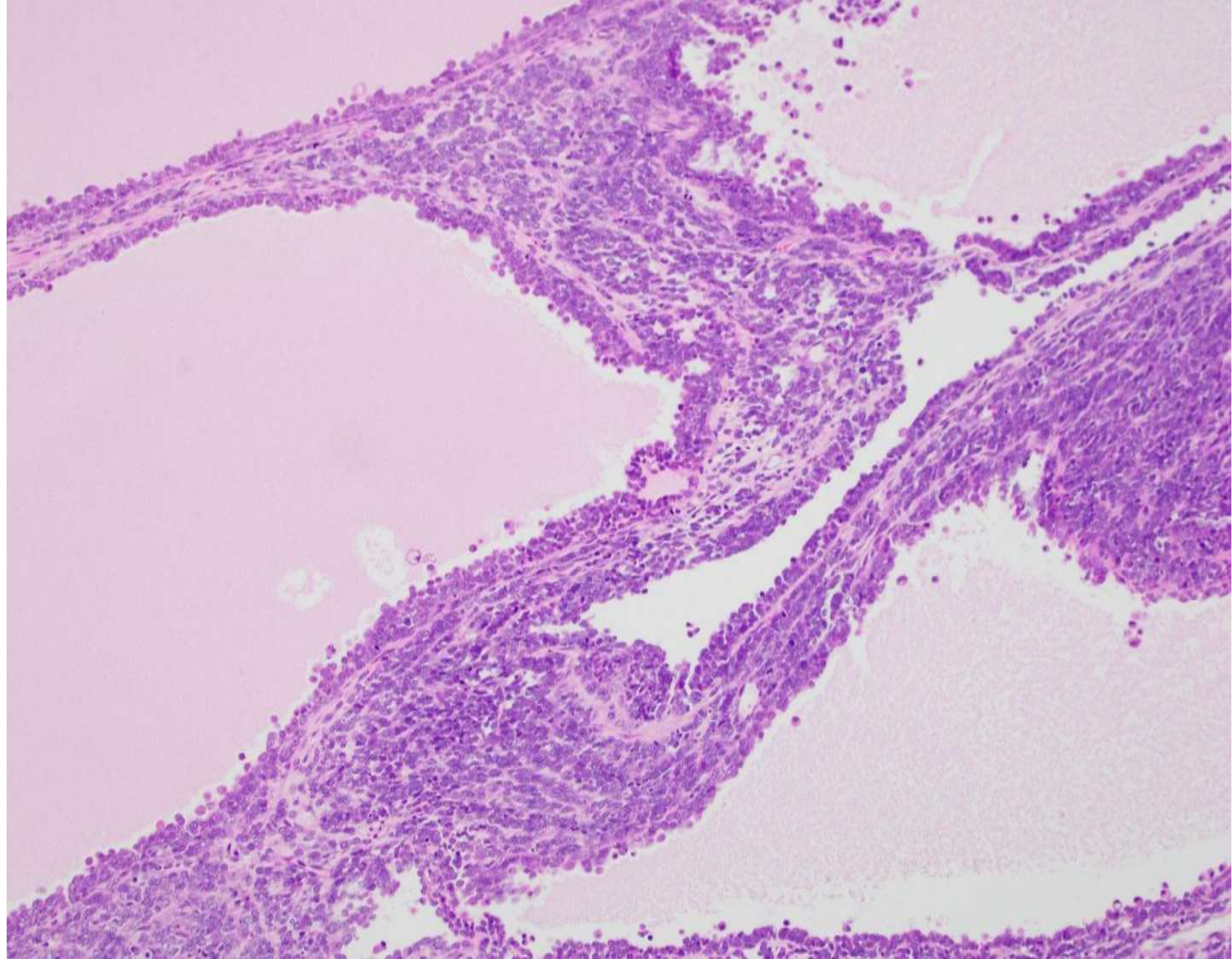
# DIAGNOSIS?



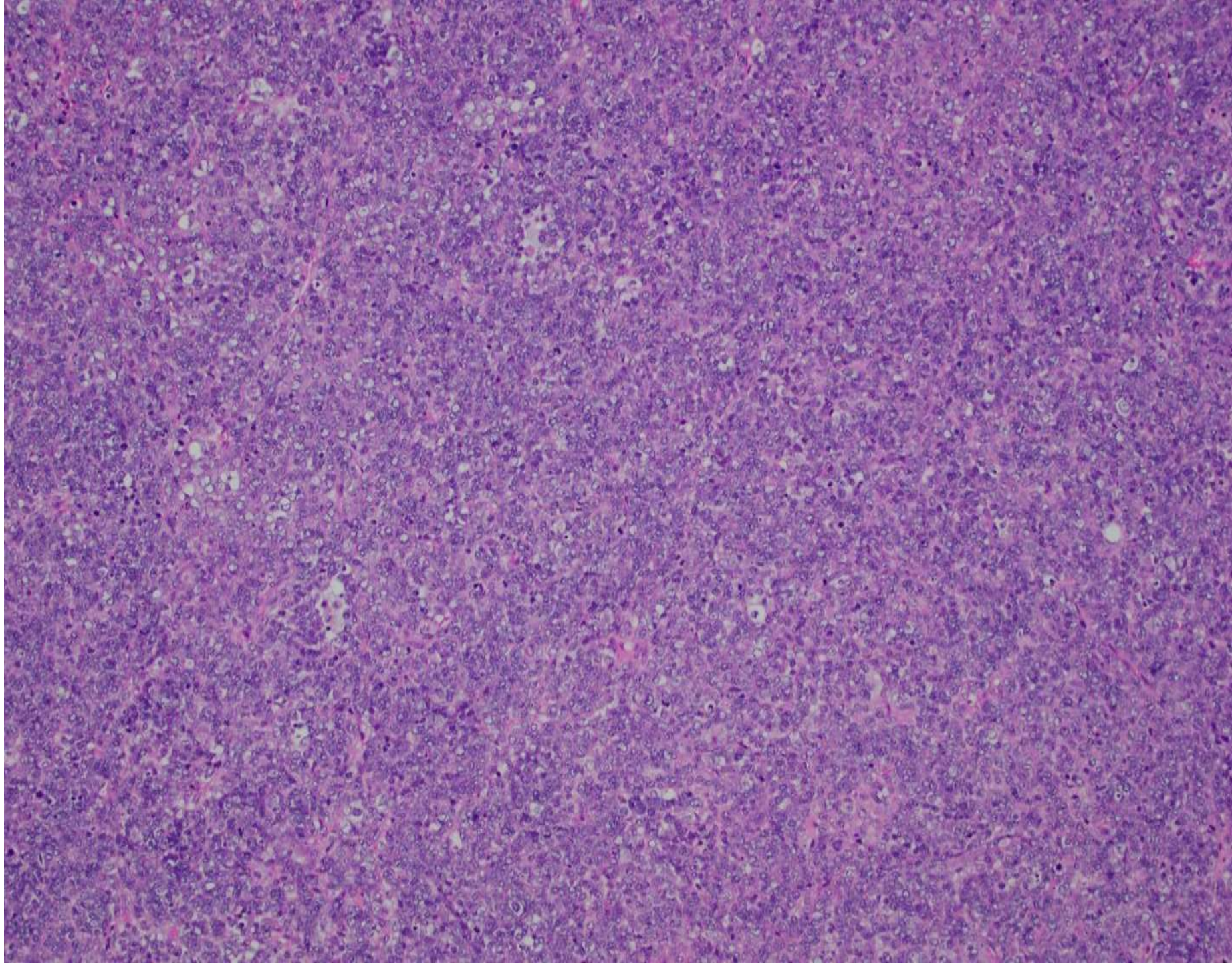
22-0603

**Caroline Temmins; Santa Clara Valley Medical Center**

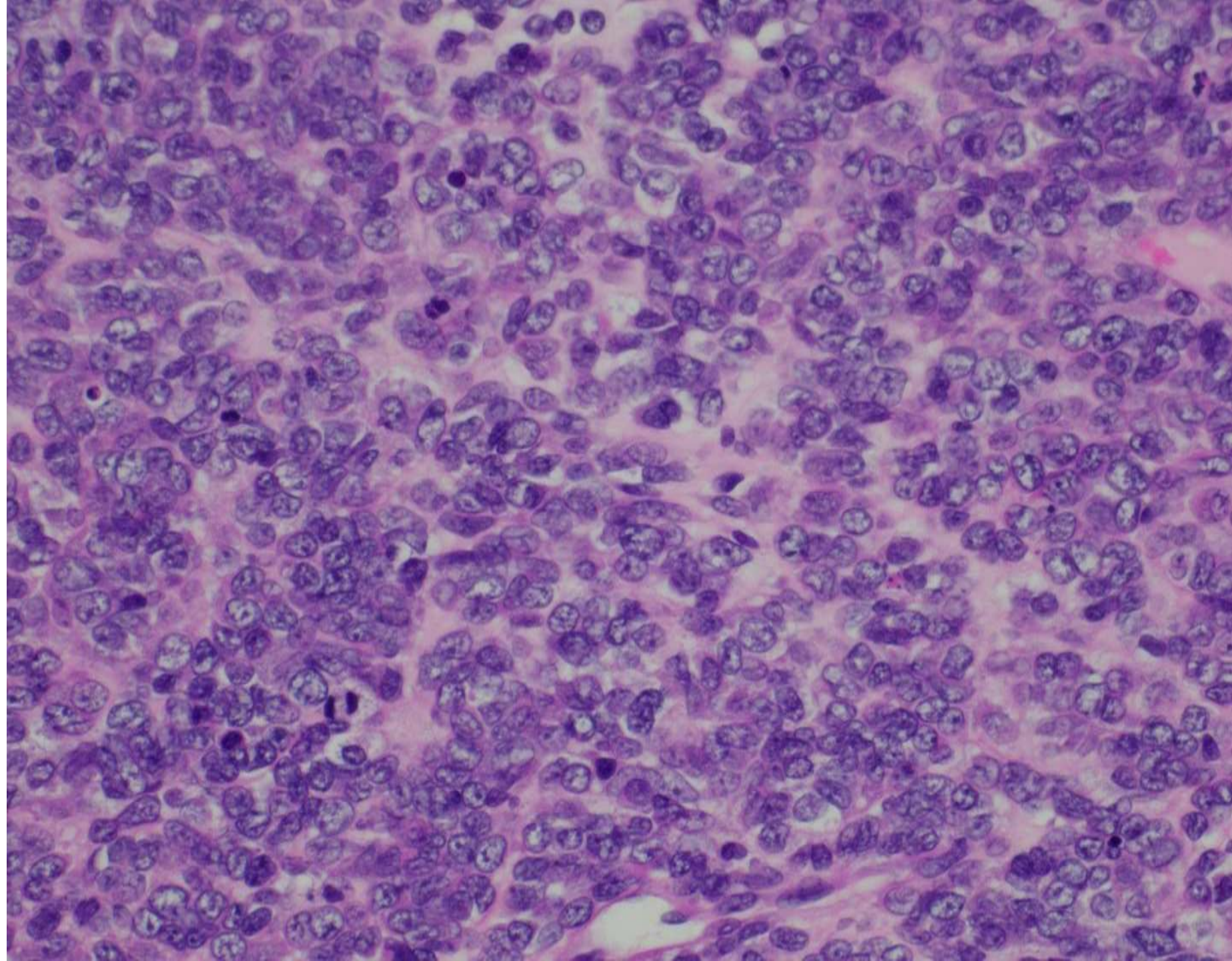
30ish G0P000 who presented with abdominal pain, nausea, vomiting and poor PO intake was found to have 13cm heterogenous adnexal mass. Right ovary submitted.















WT1

This image is a high-magnification micrograph of a tissue section stained for WT1. The brown color indicates a positive reaction, showing that the WT1 protein is expressed in the majority of the cells. The cells are densely packed, and the staining is consistent across the field of view. The text 'WT1' is centered over the image.



# DIAGNOSIS?

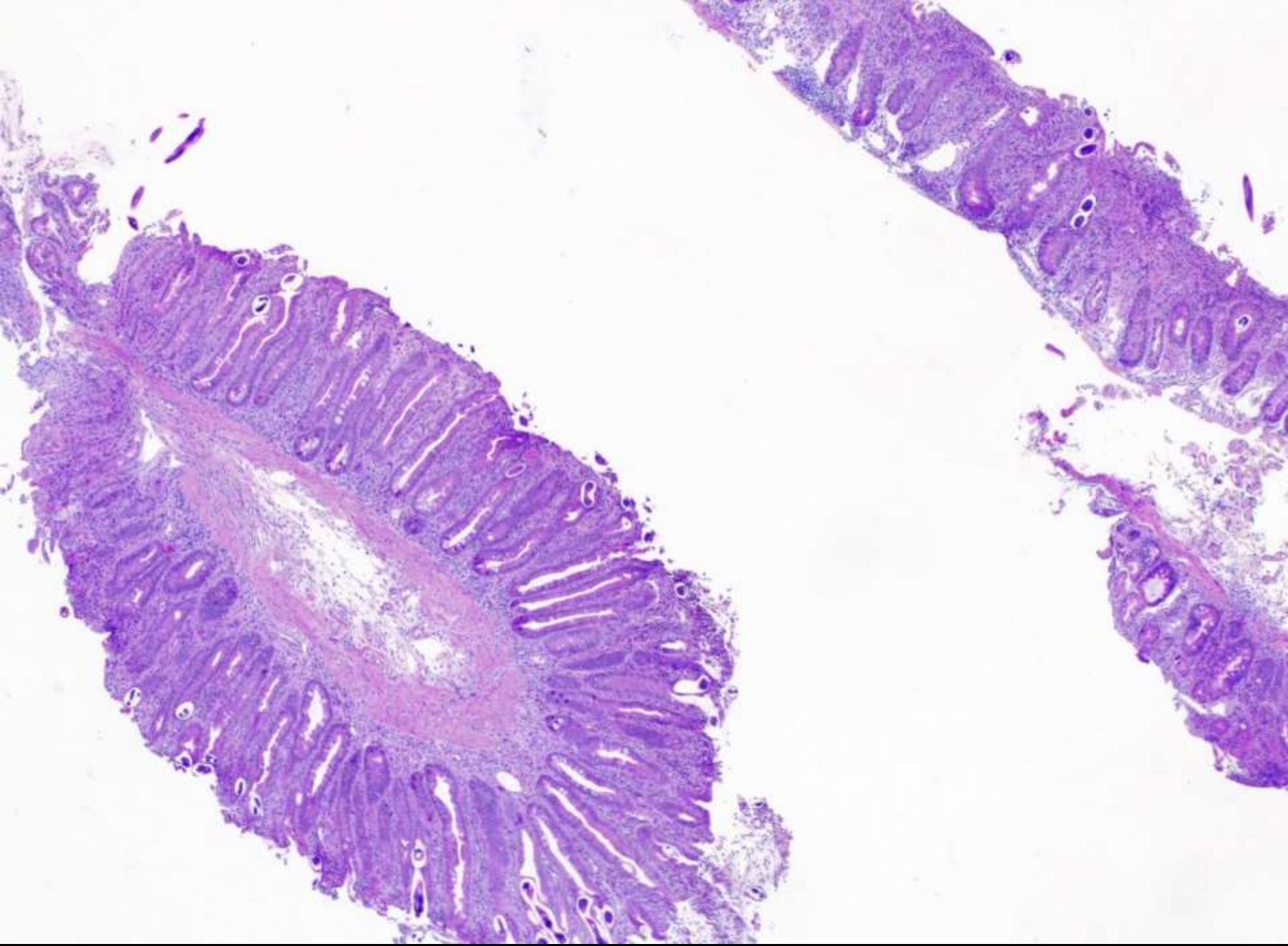


22-0604

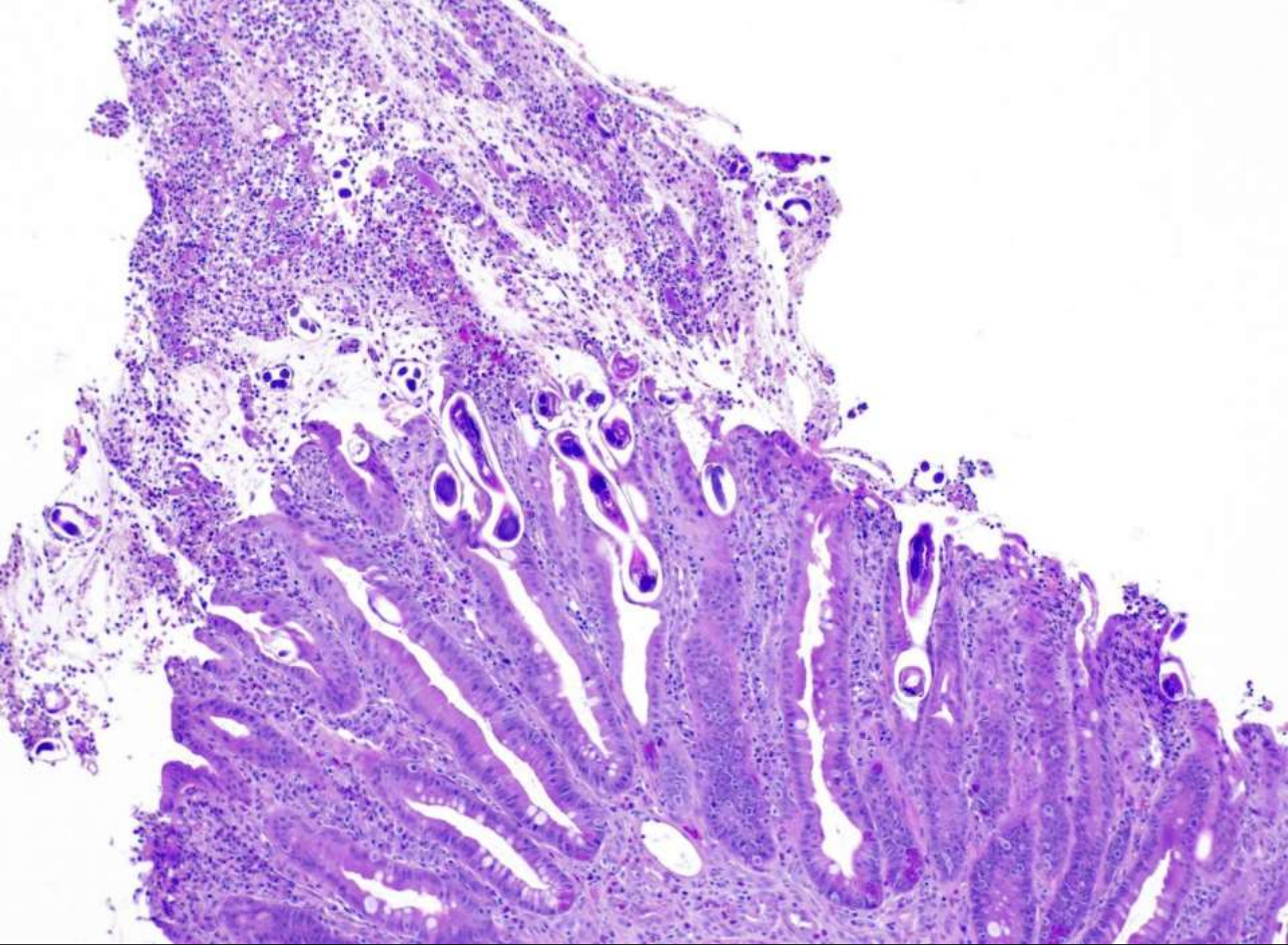
**John Higgins; Stanford**

60ish M who underwent liver transplant 1 year ago. He now presents with dysphagia and abdominal pain. He was found to have duodenitis. Duodenal bx submitted.

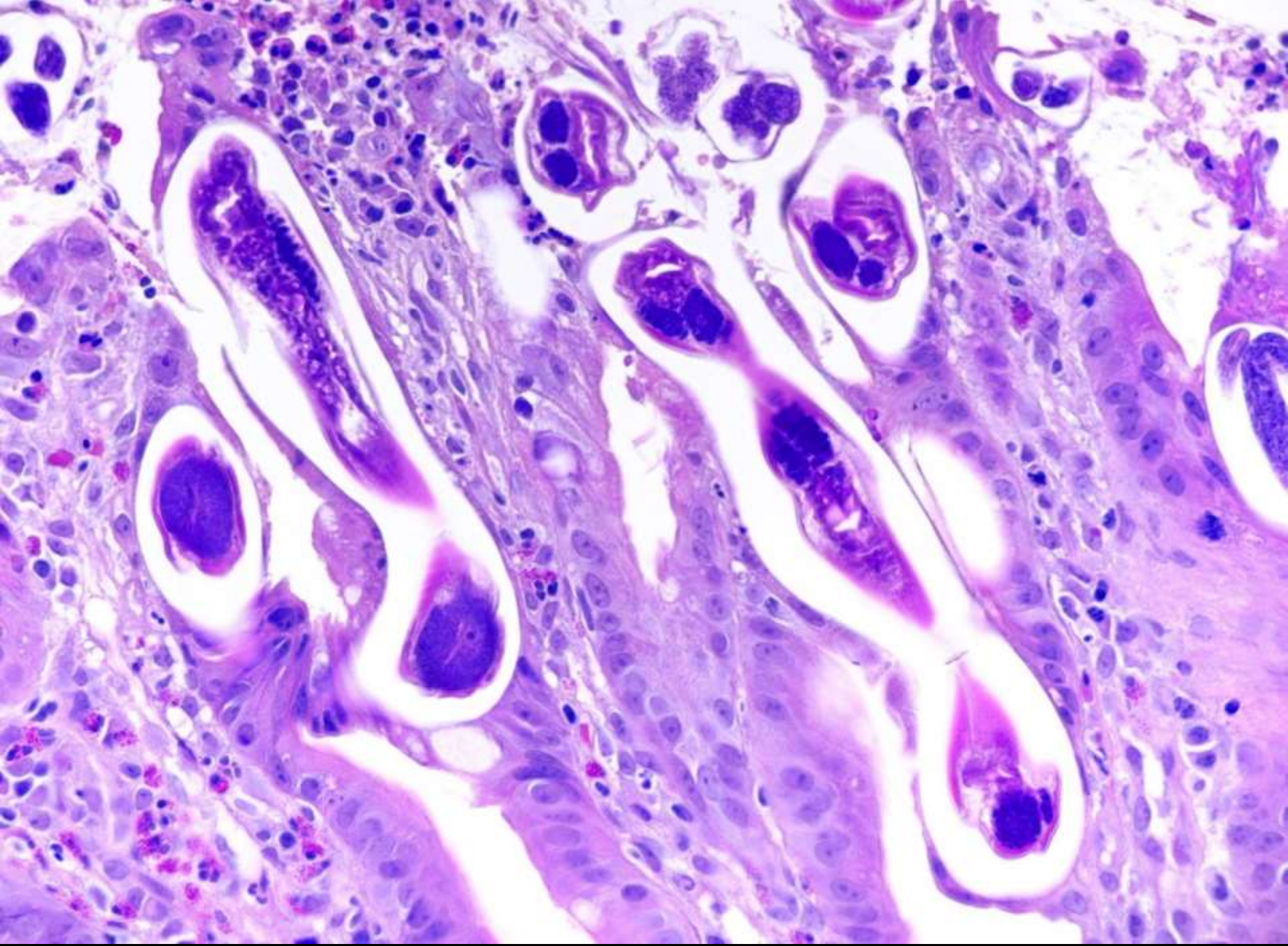




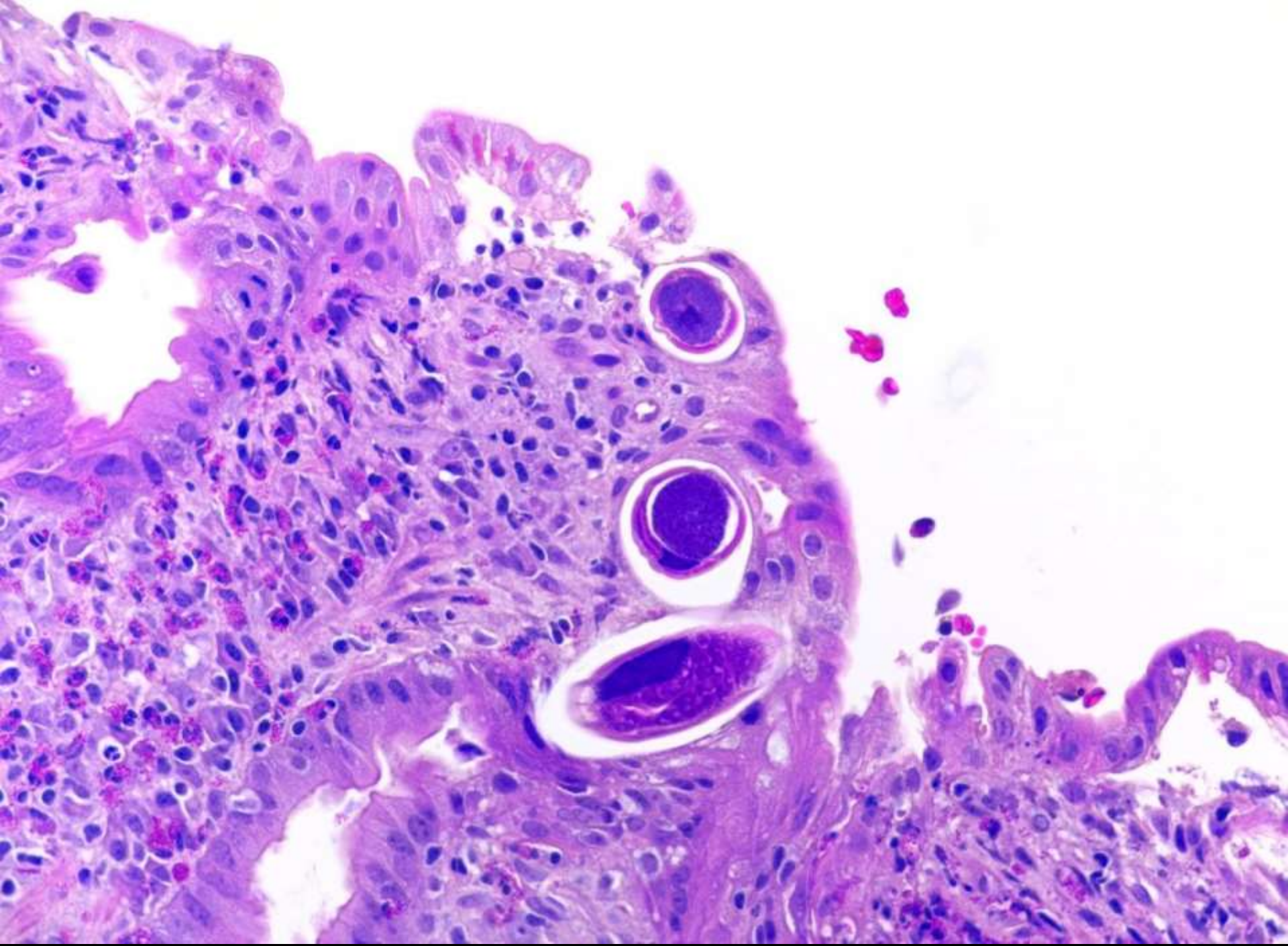




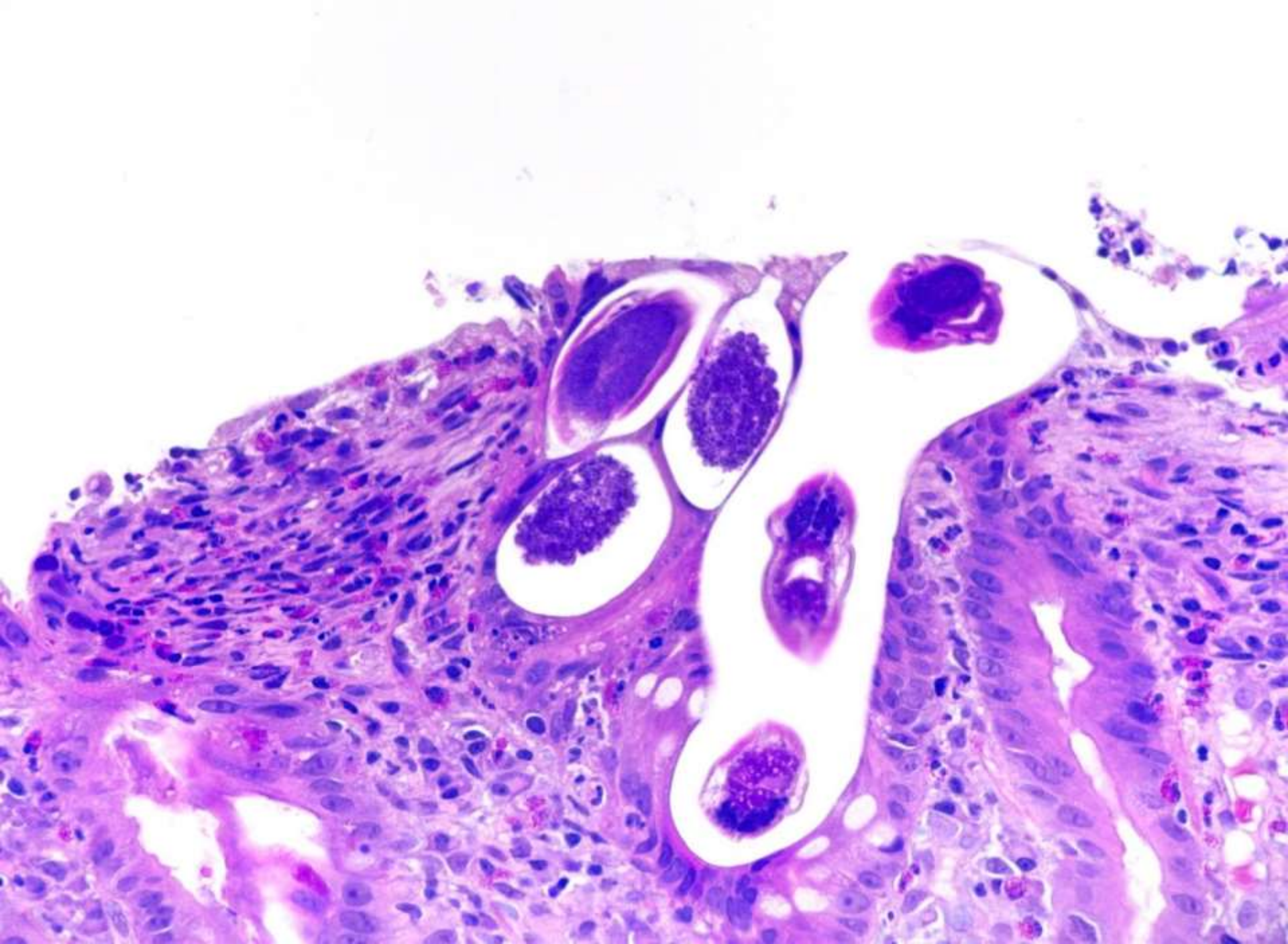




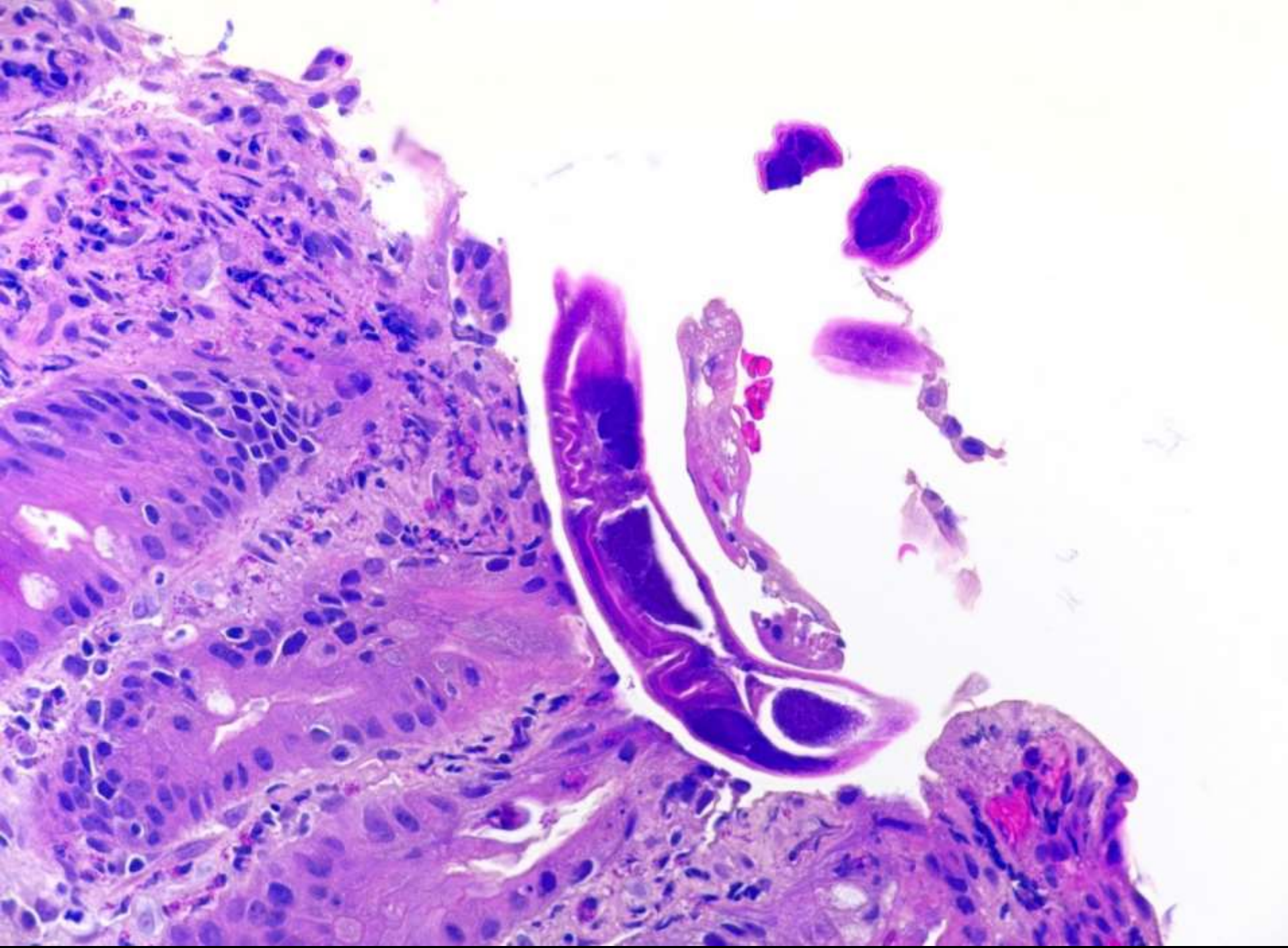














# DIAGNOSIS?

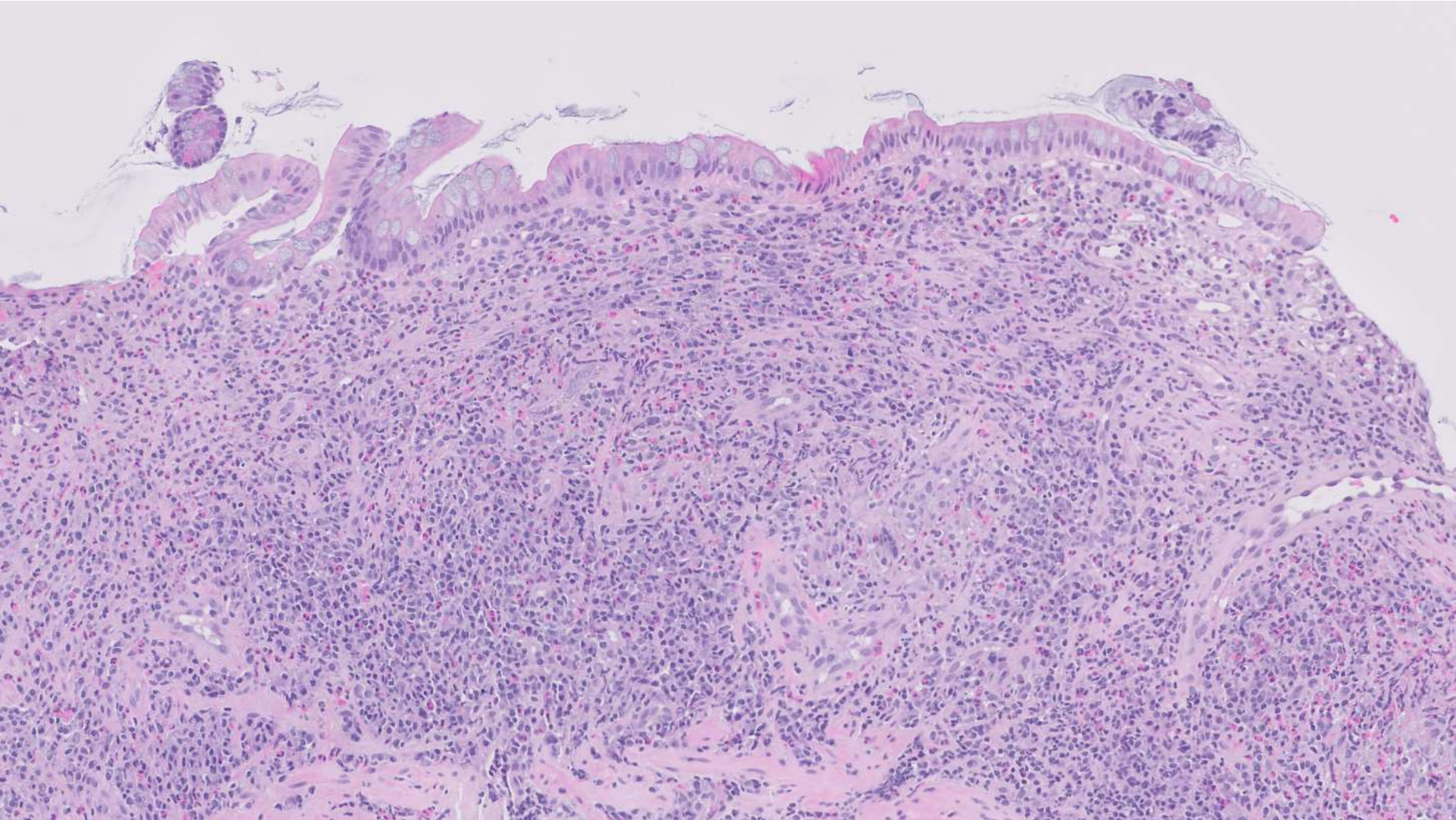


22-0605

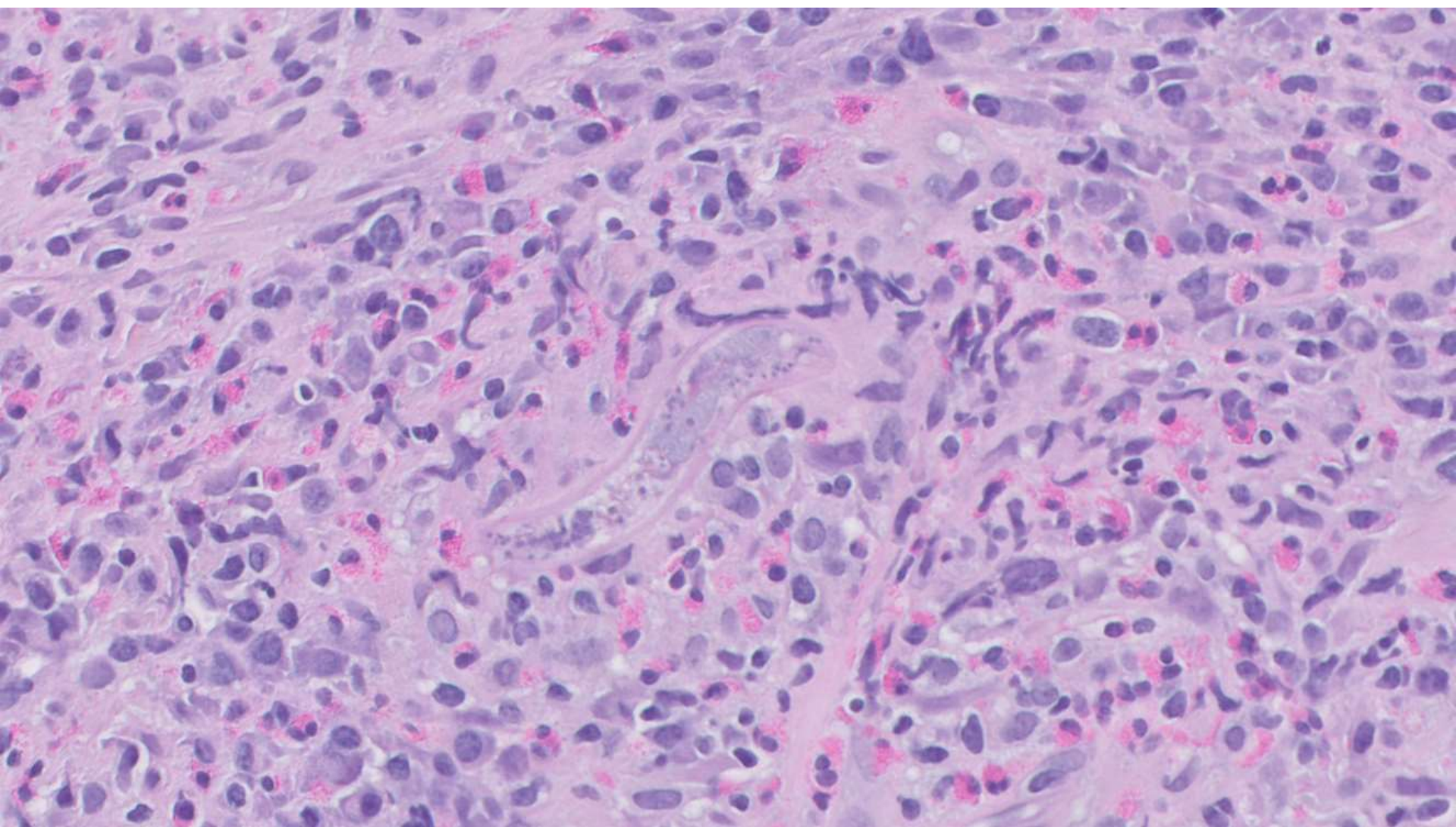
**Cindy Wang/John Higgins; Stanford**

70ish M with anemia. Colon bx submitted.

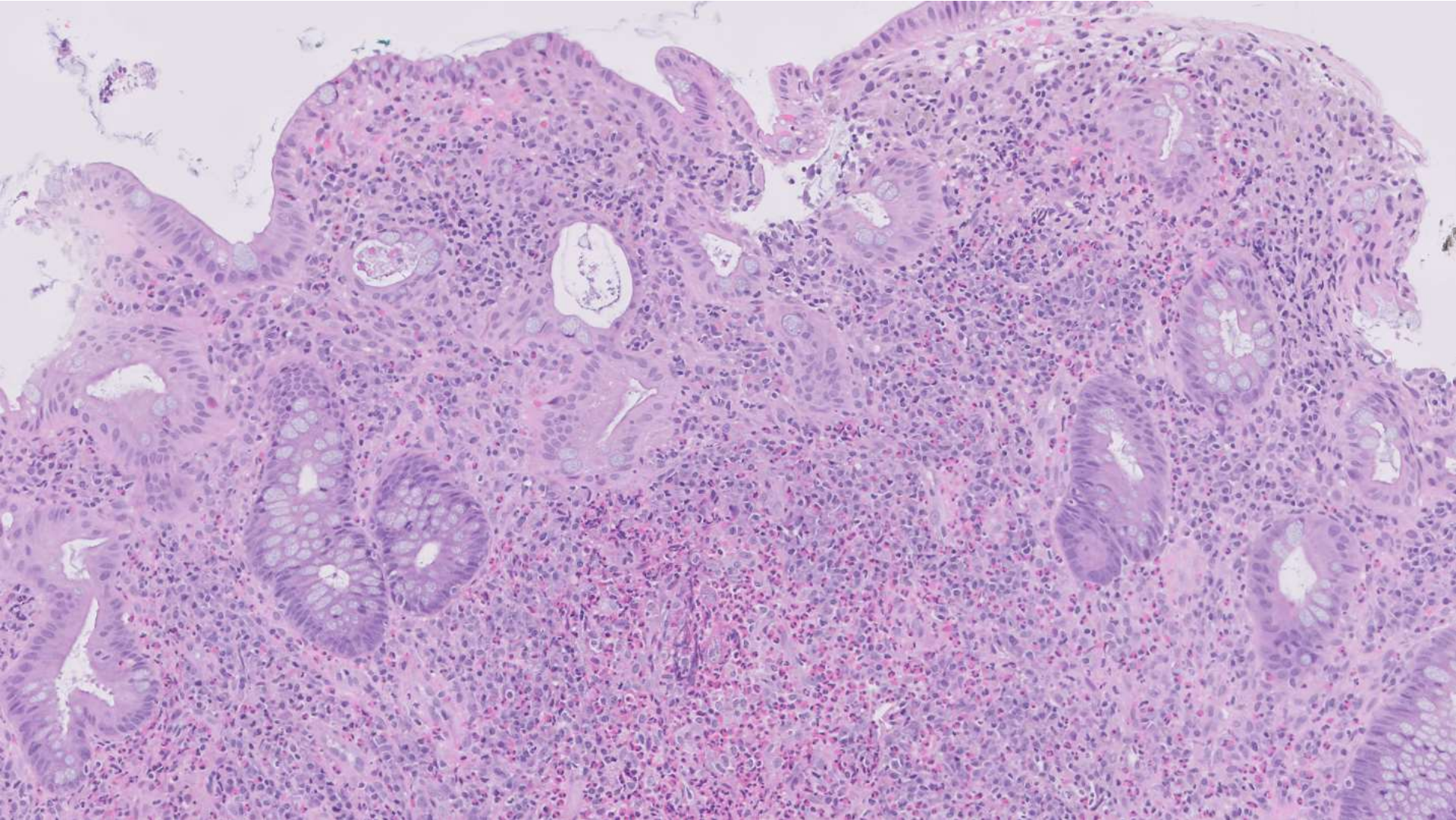




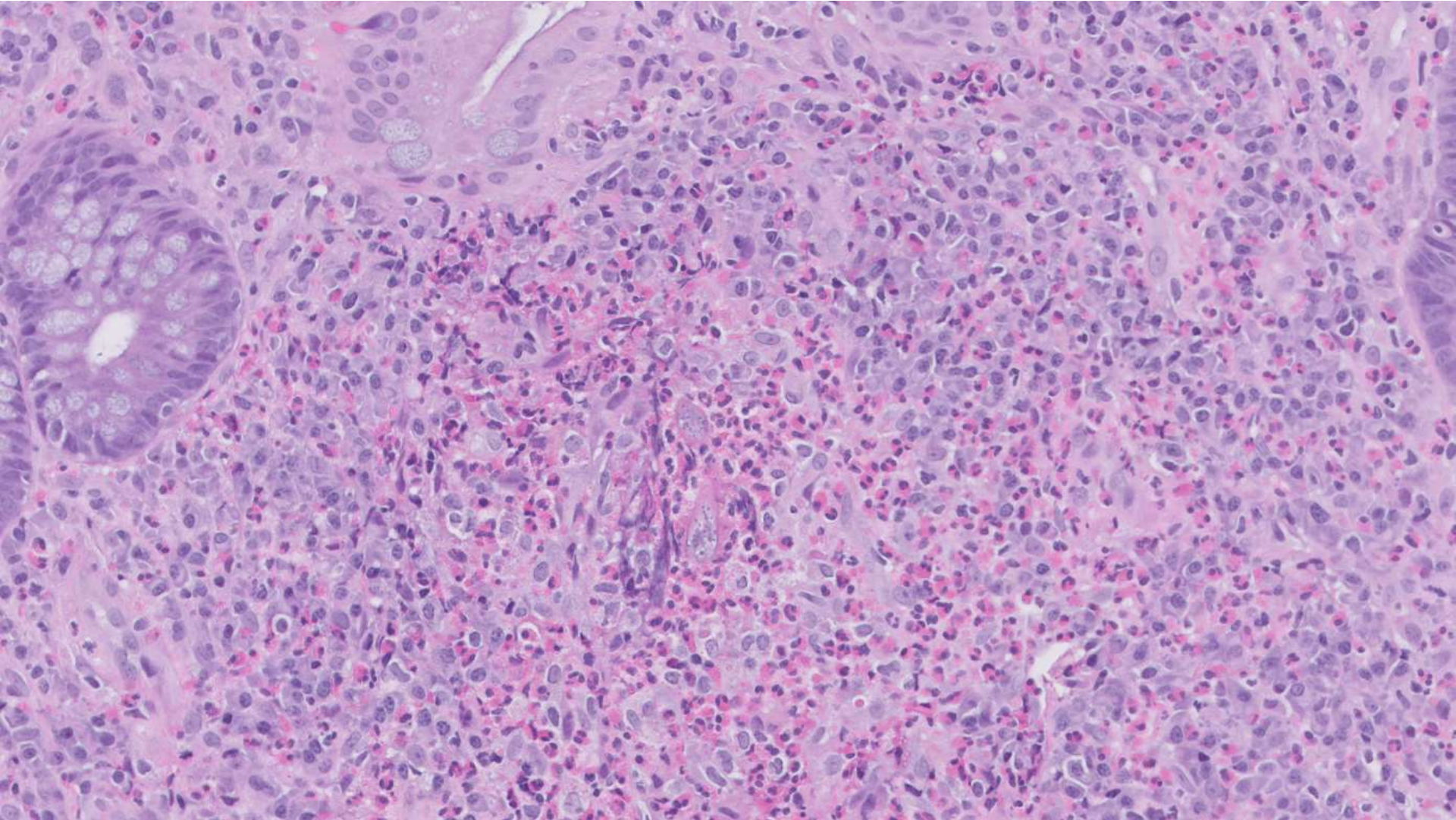














# DIAGNOSIS?



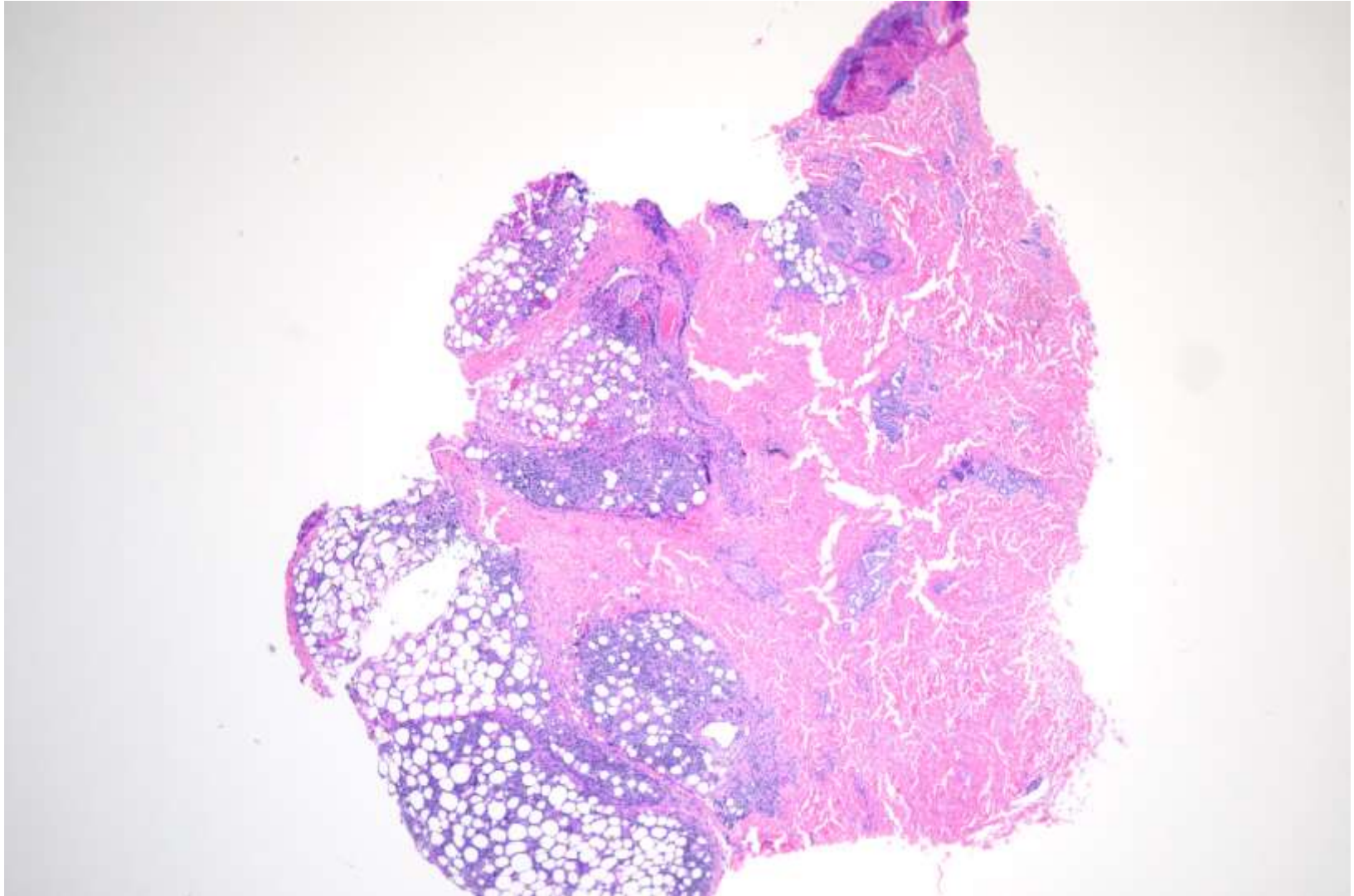
22-0606

**Ruobin Wu/Linlin Wang; UCSF**

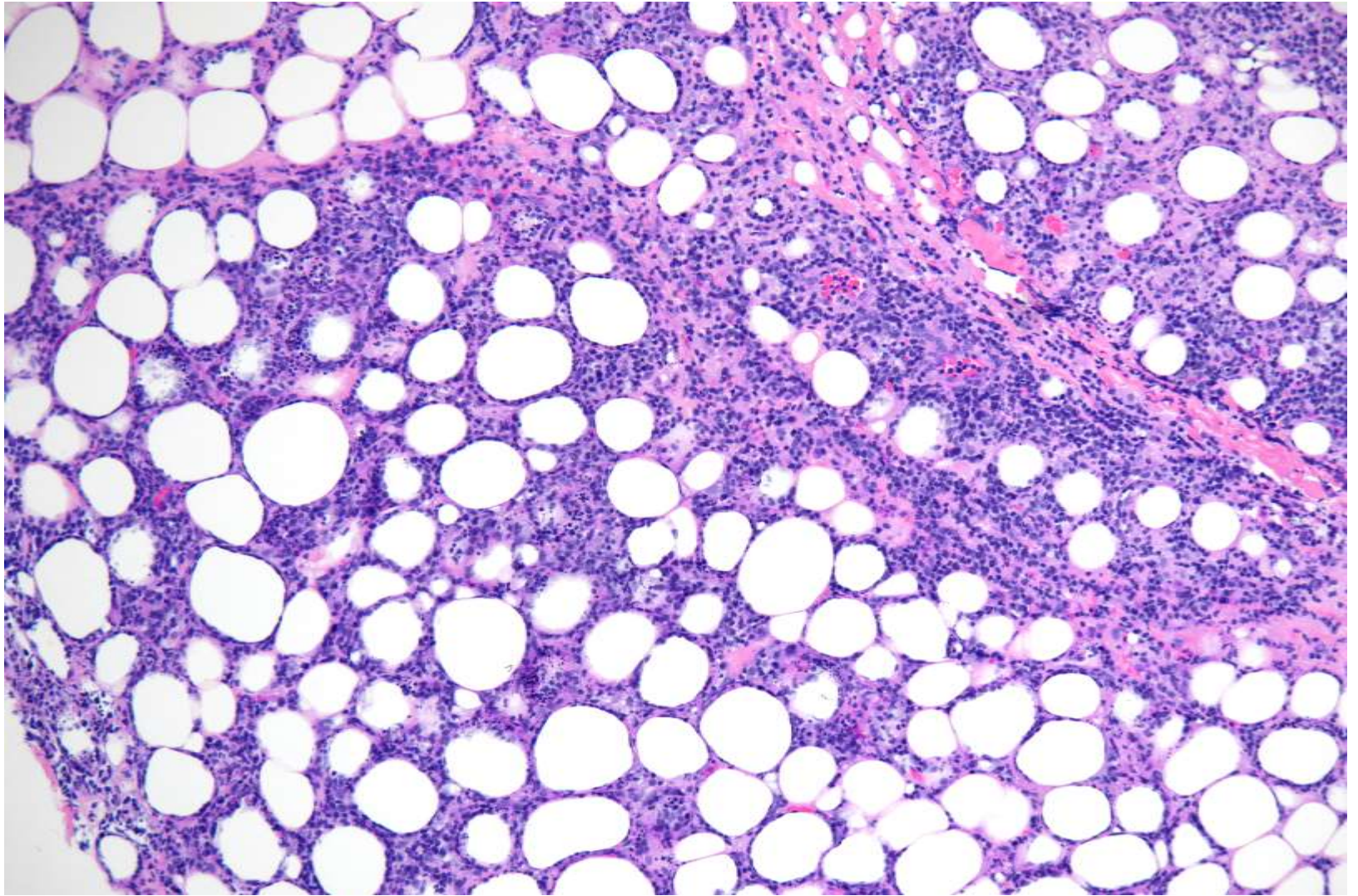
Previously-healthy young girl presents with firm subcutaneous nodules on neck, torso and legs. During workup, found to have pancytopenia (WBC 3.5/Hgb 9.8/Plt 68).



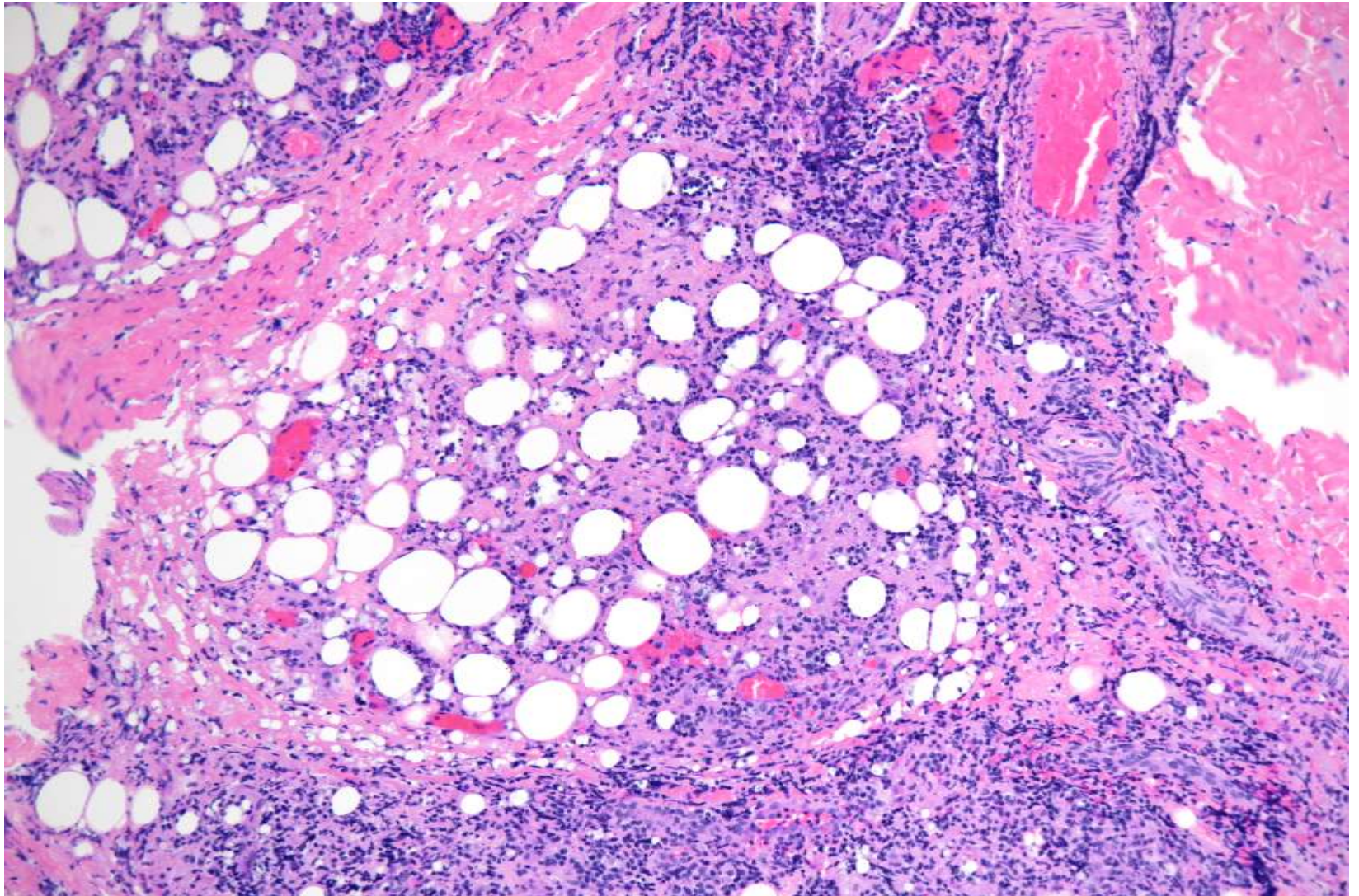




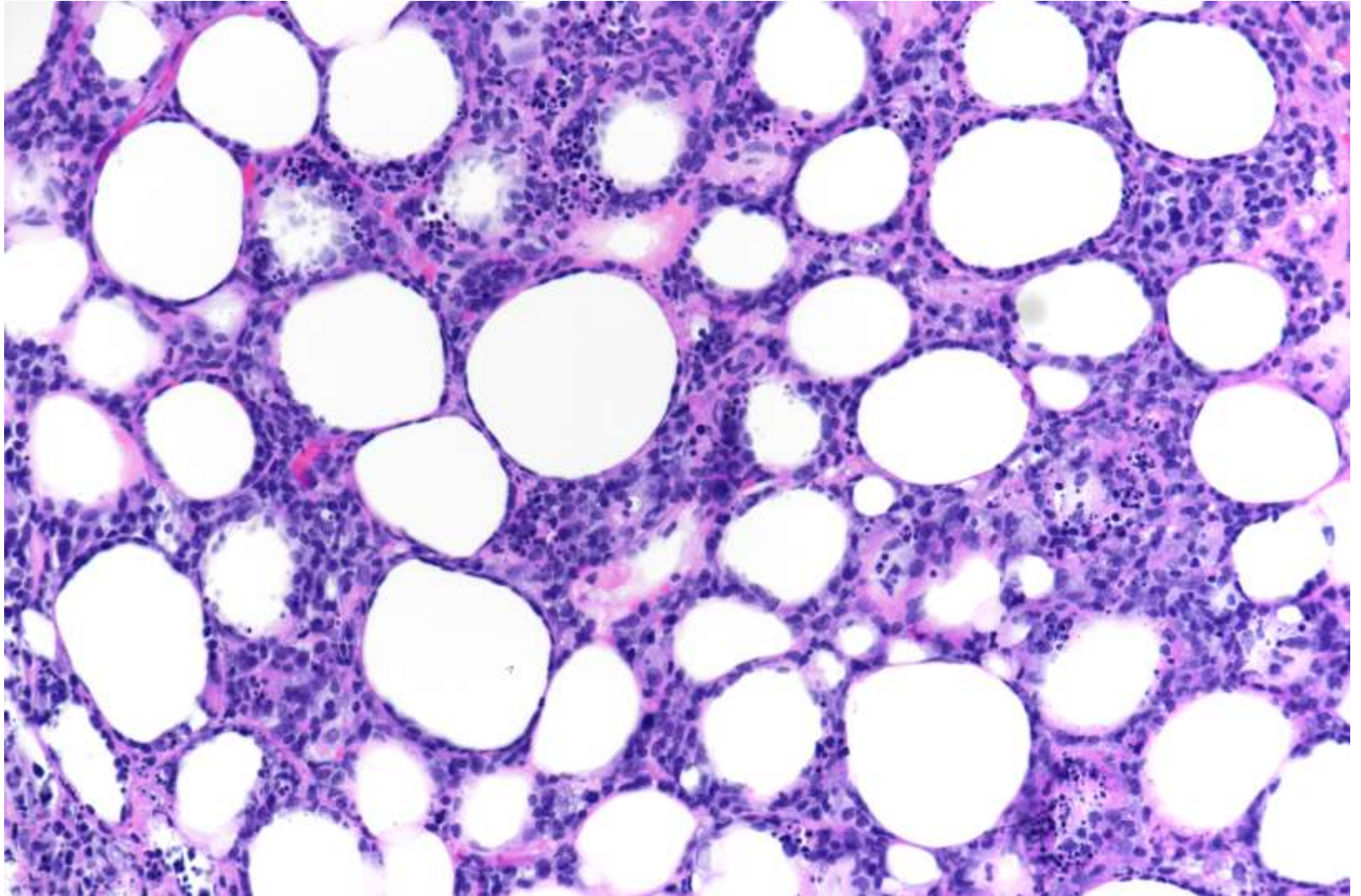


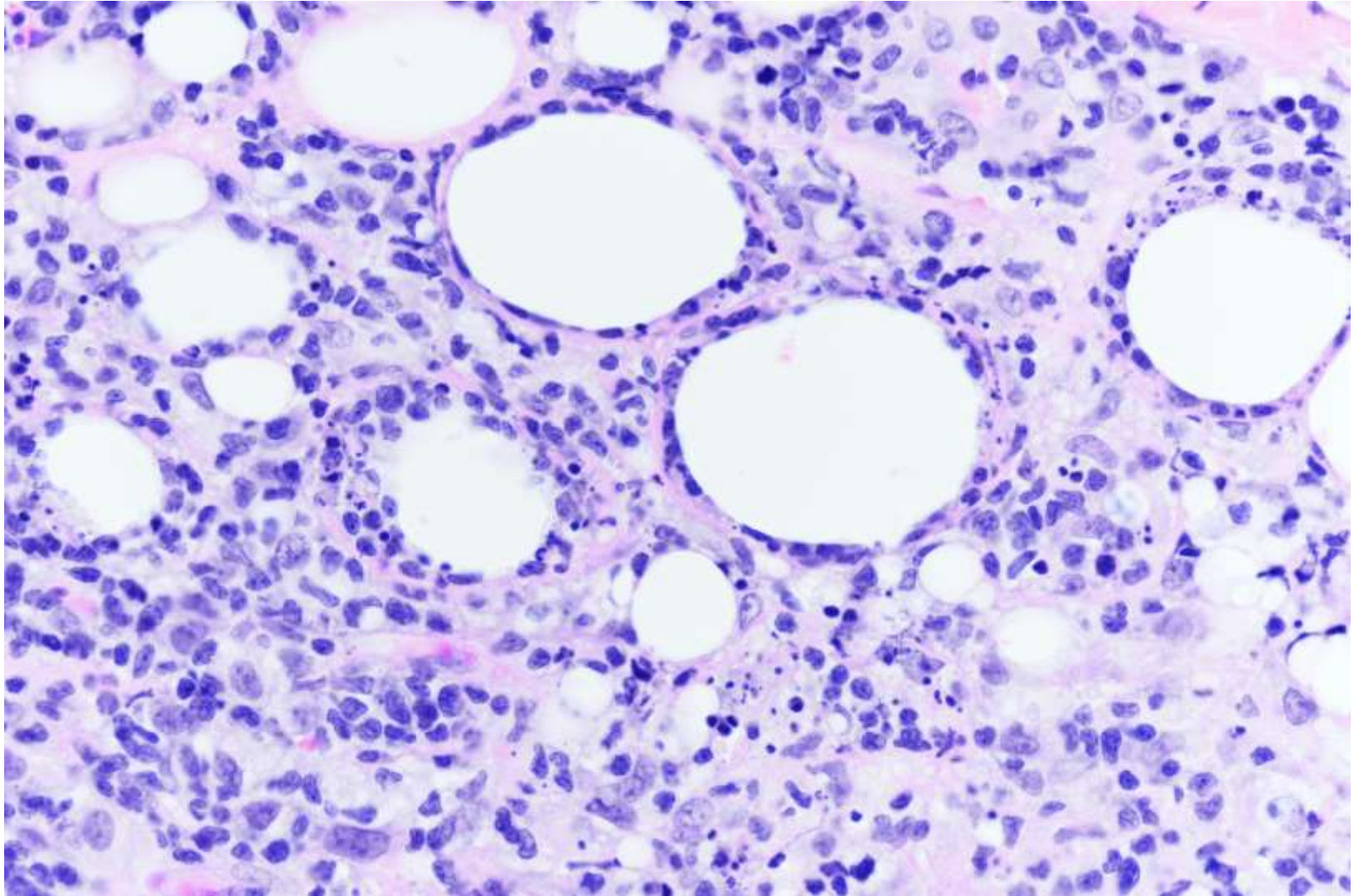






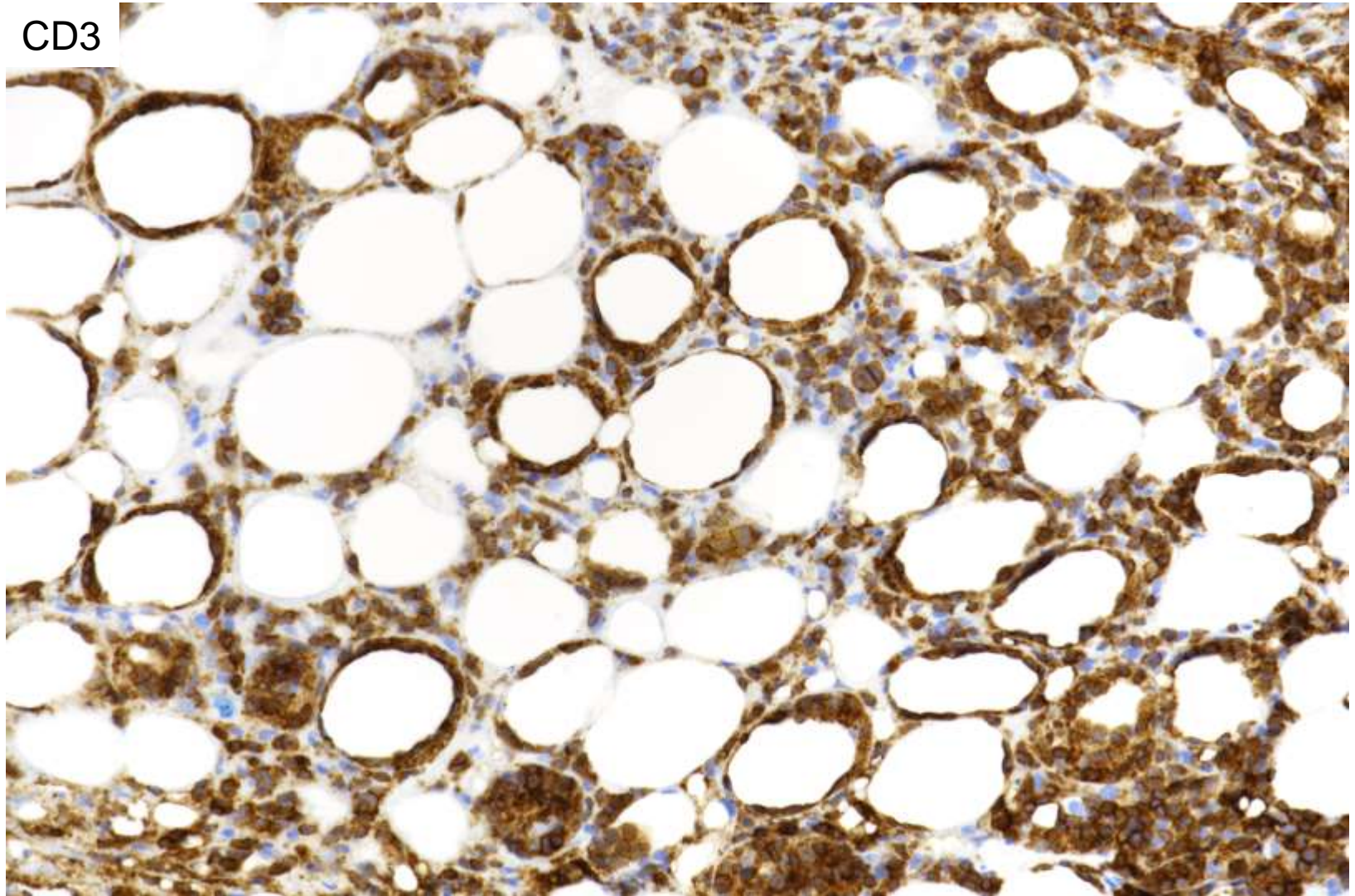




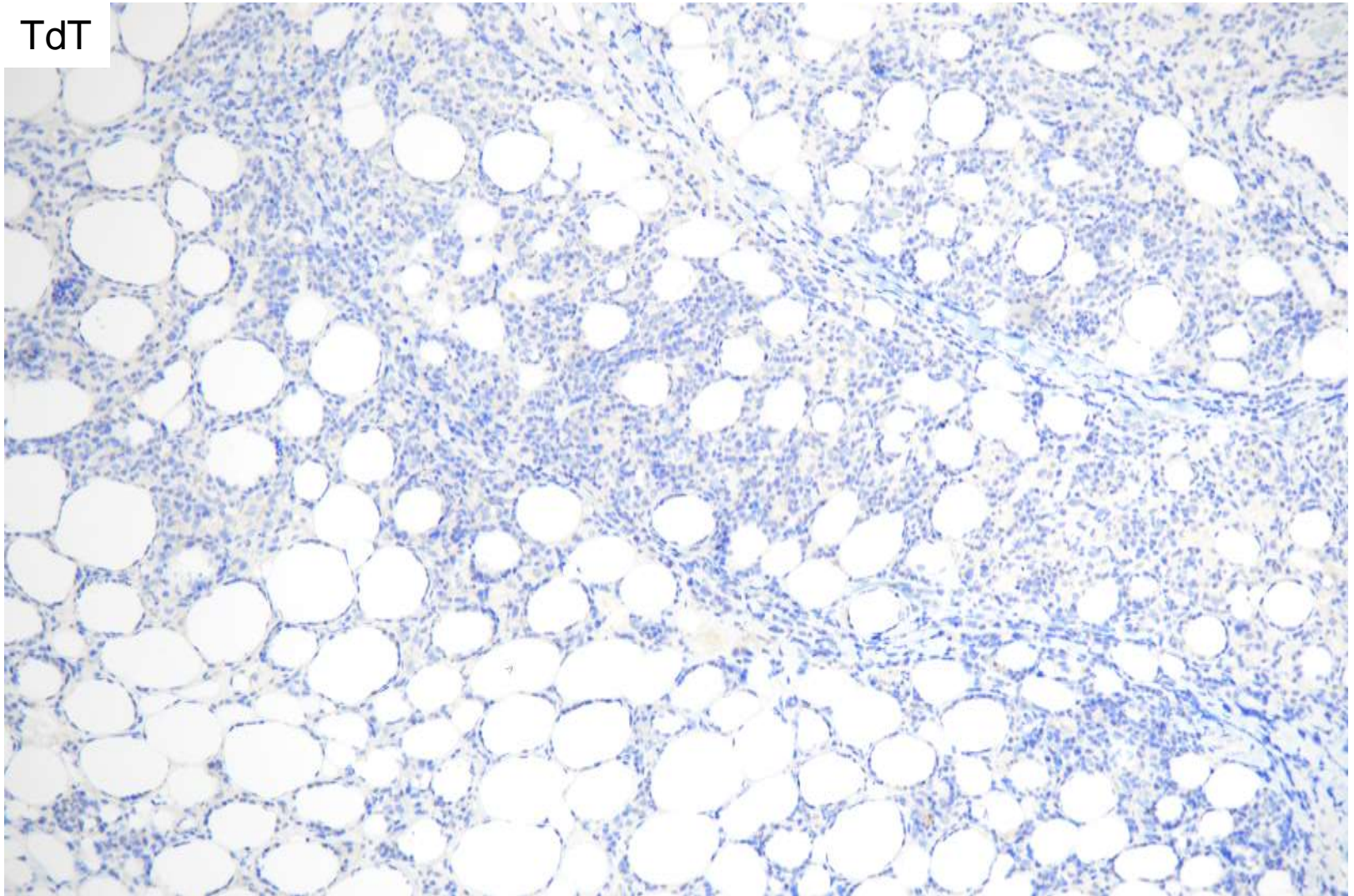




CD3

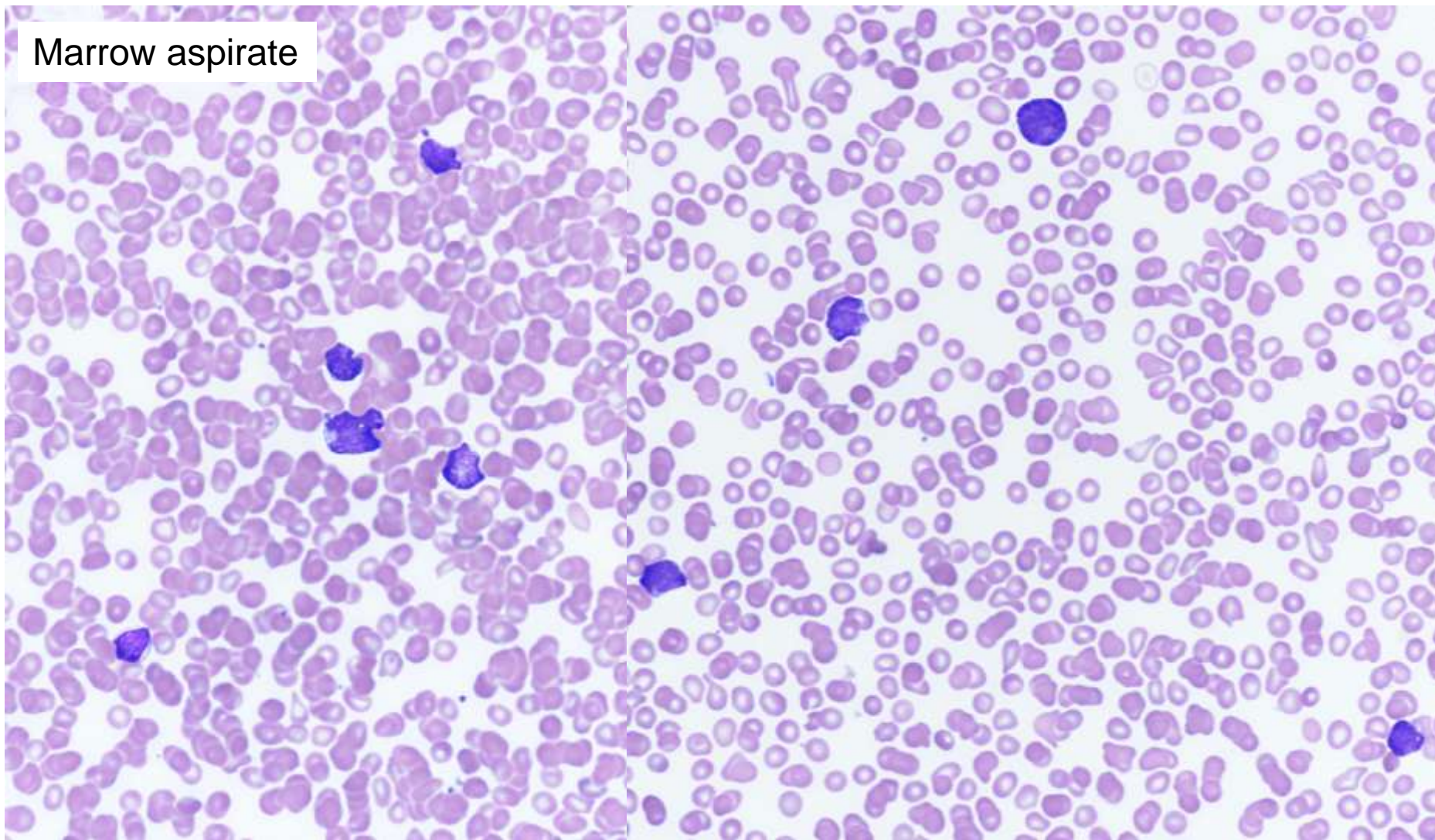


TdT

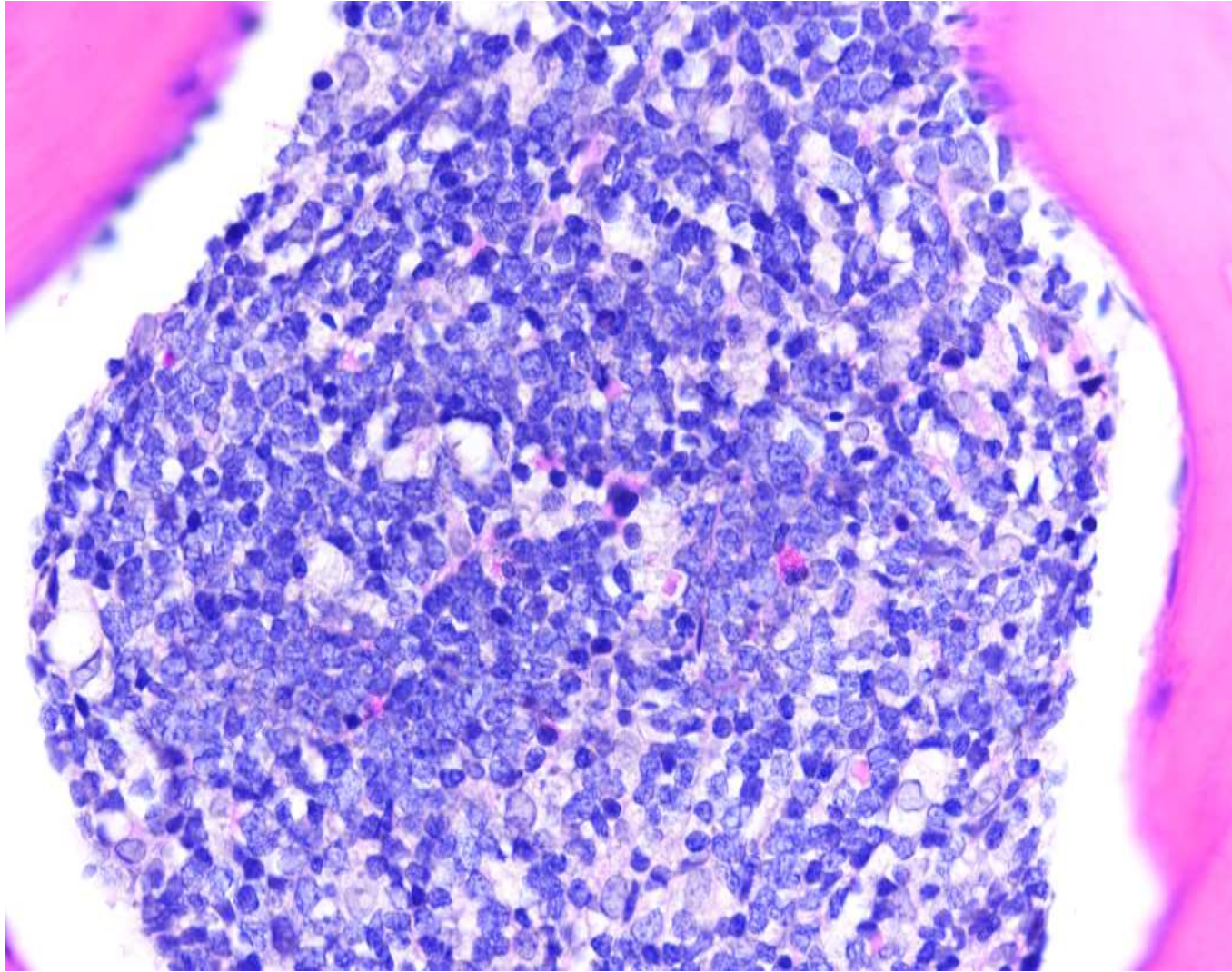




Marrow aspirate









# DIAGNOSIS?

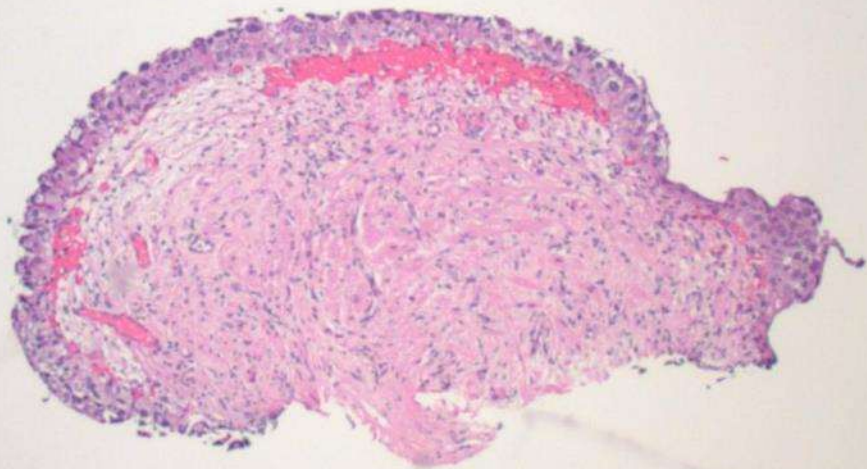


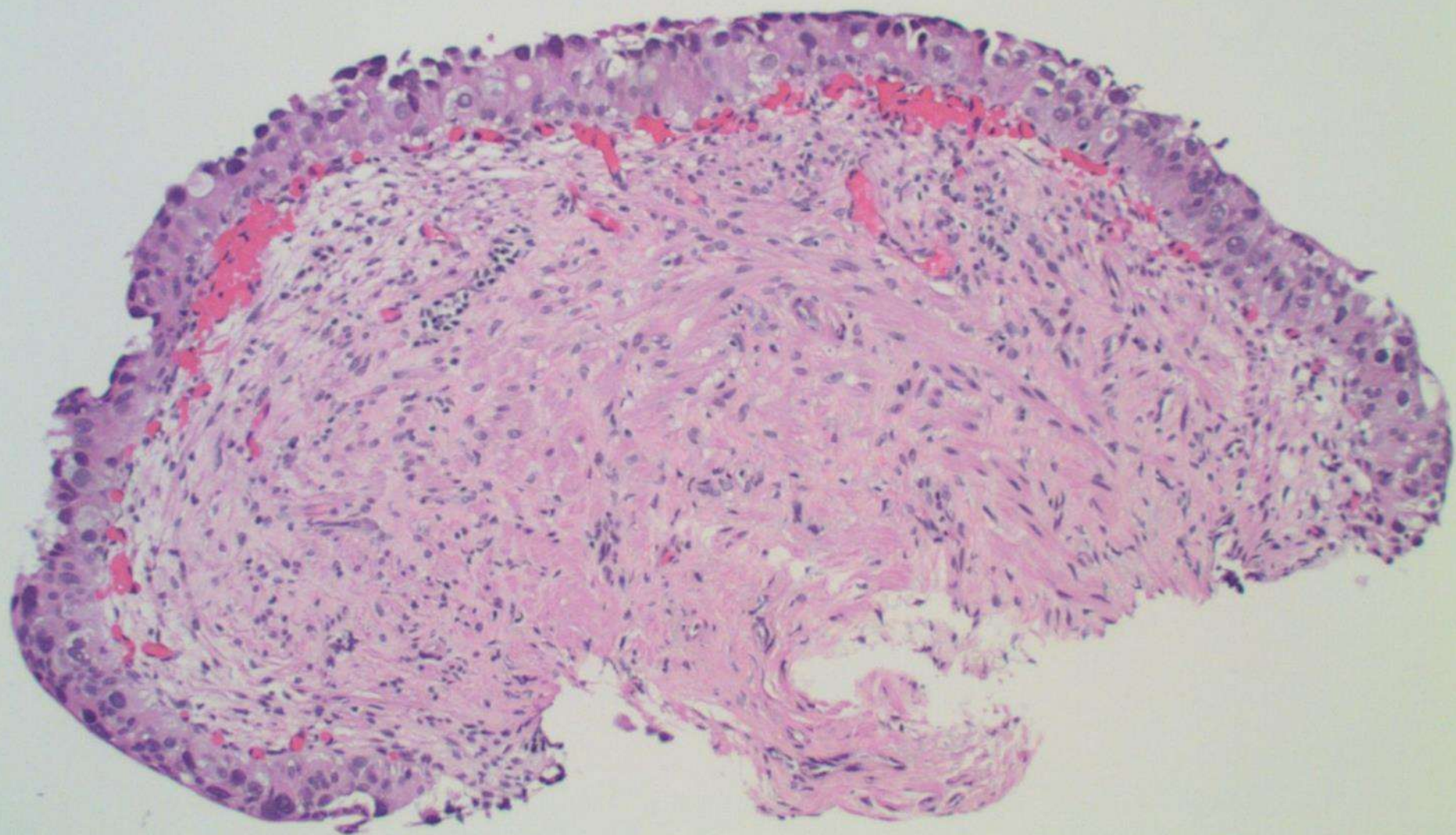
22-0607

**Ankur Sangoi; El Camino Hospital**

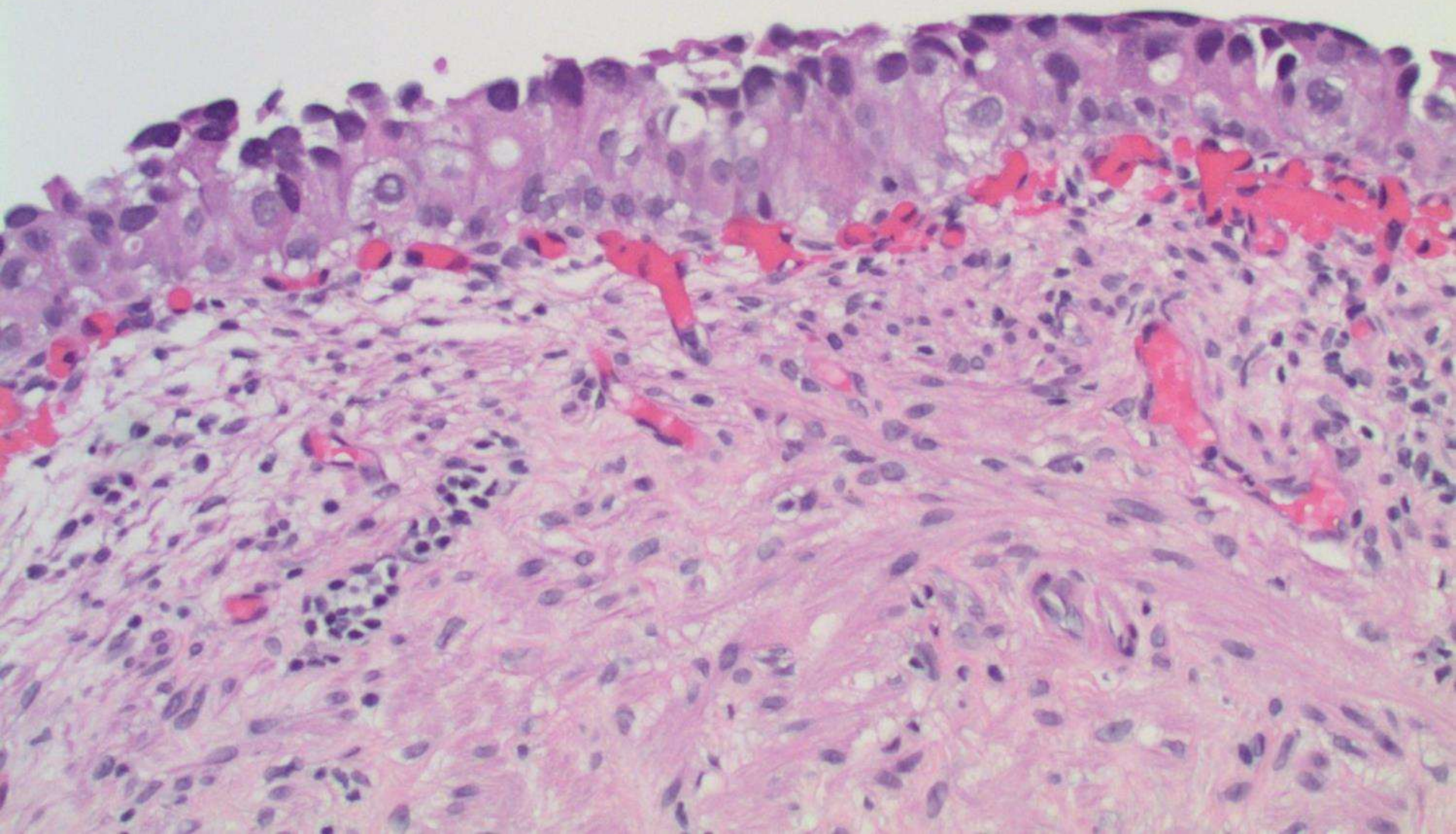
Middle-aged M presents with hematuria. Cystoscopy showed blue light positive bladder lesions, bx submitted.



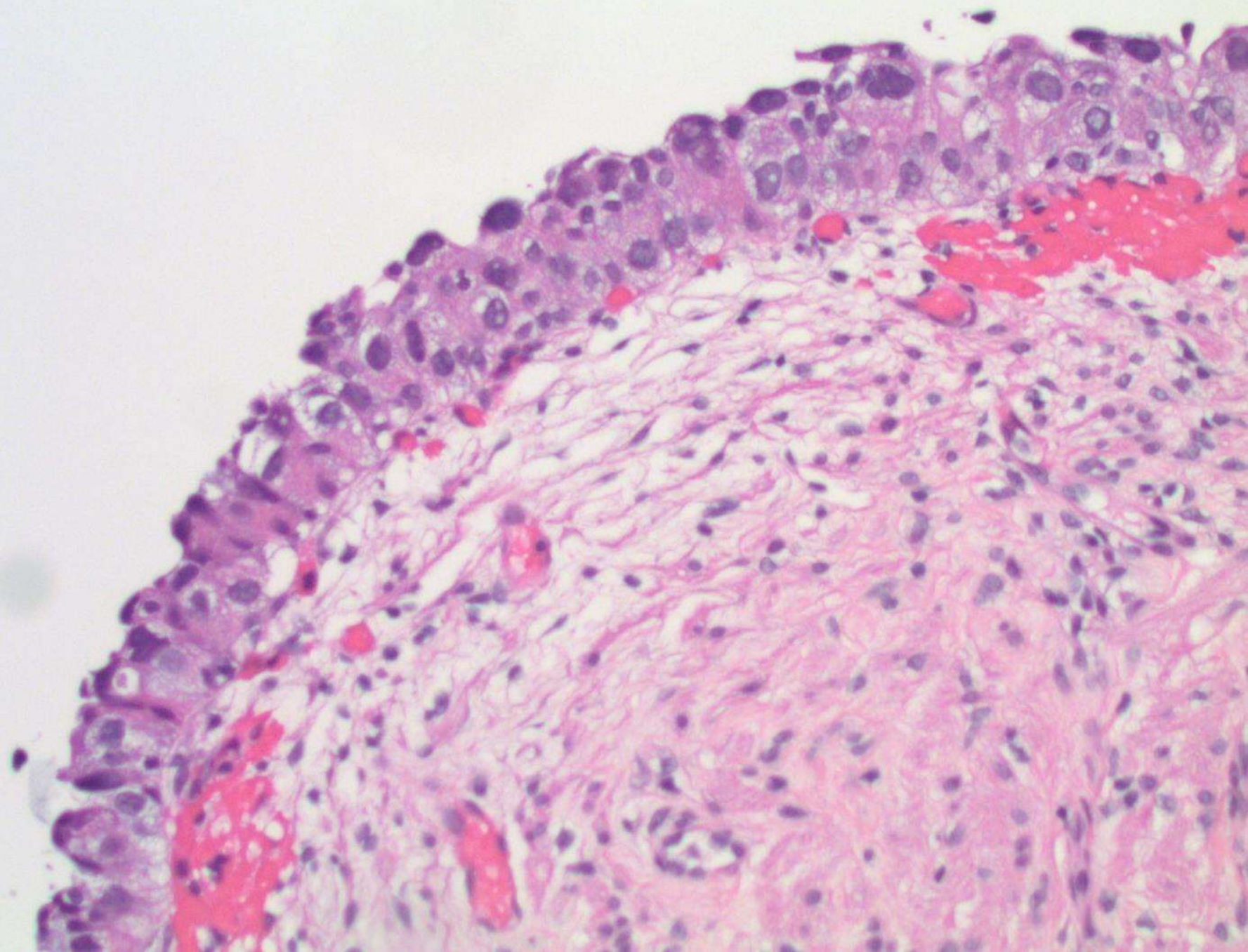






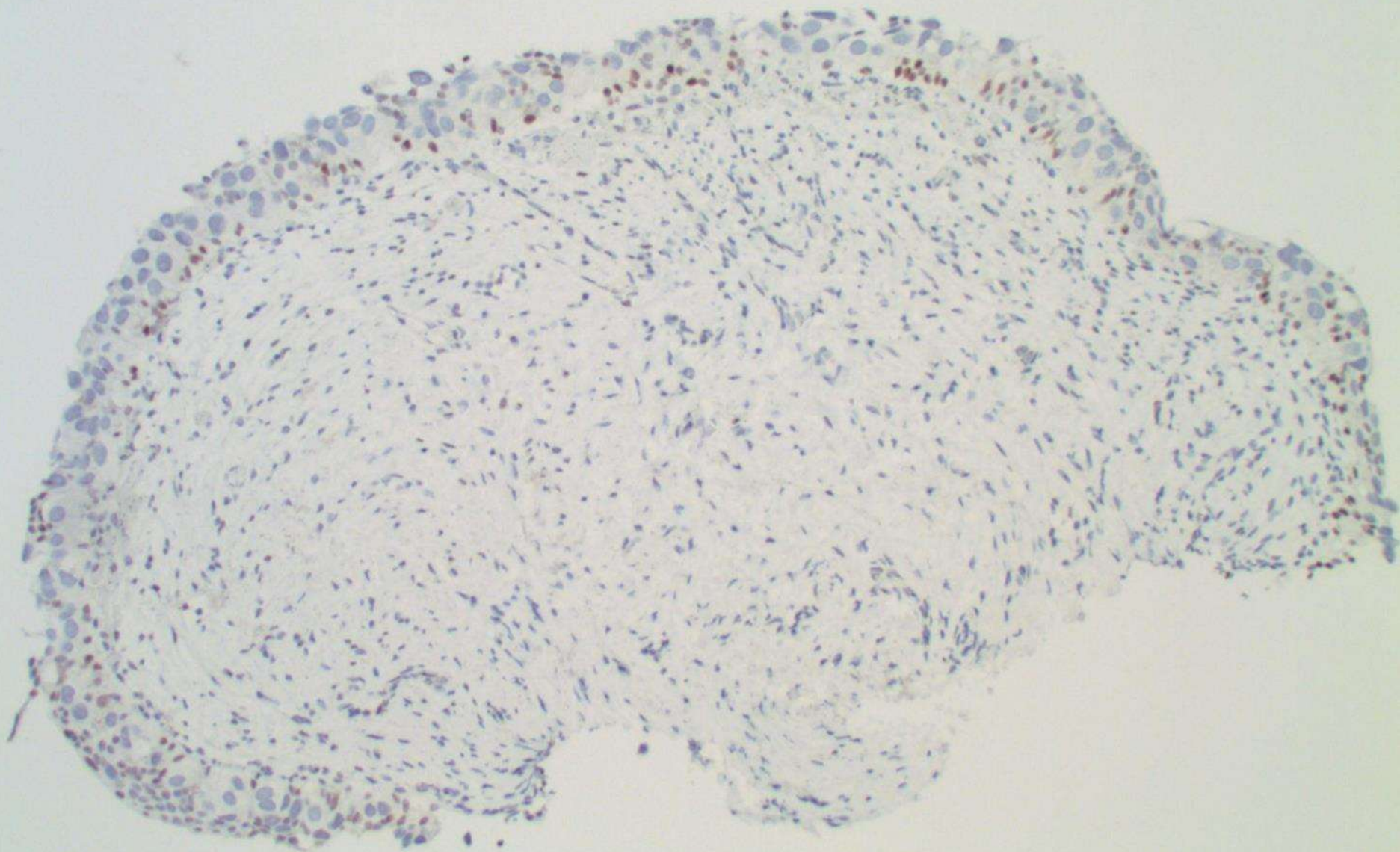








p53



# DIAGNOSIS?

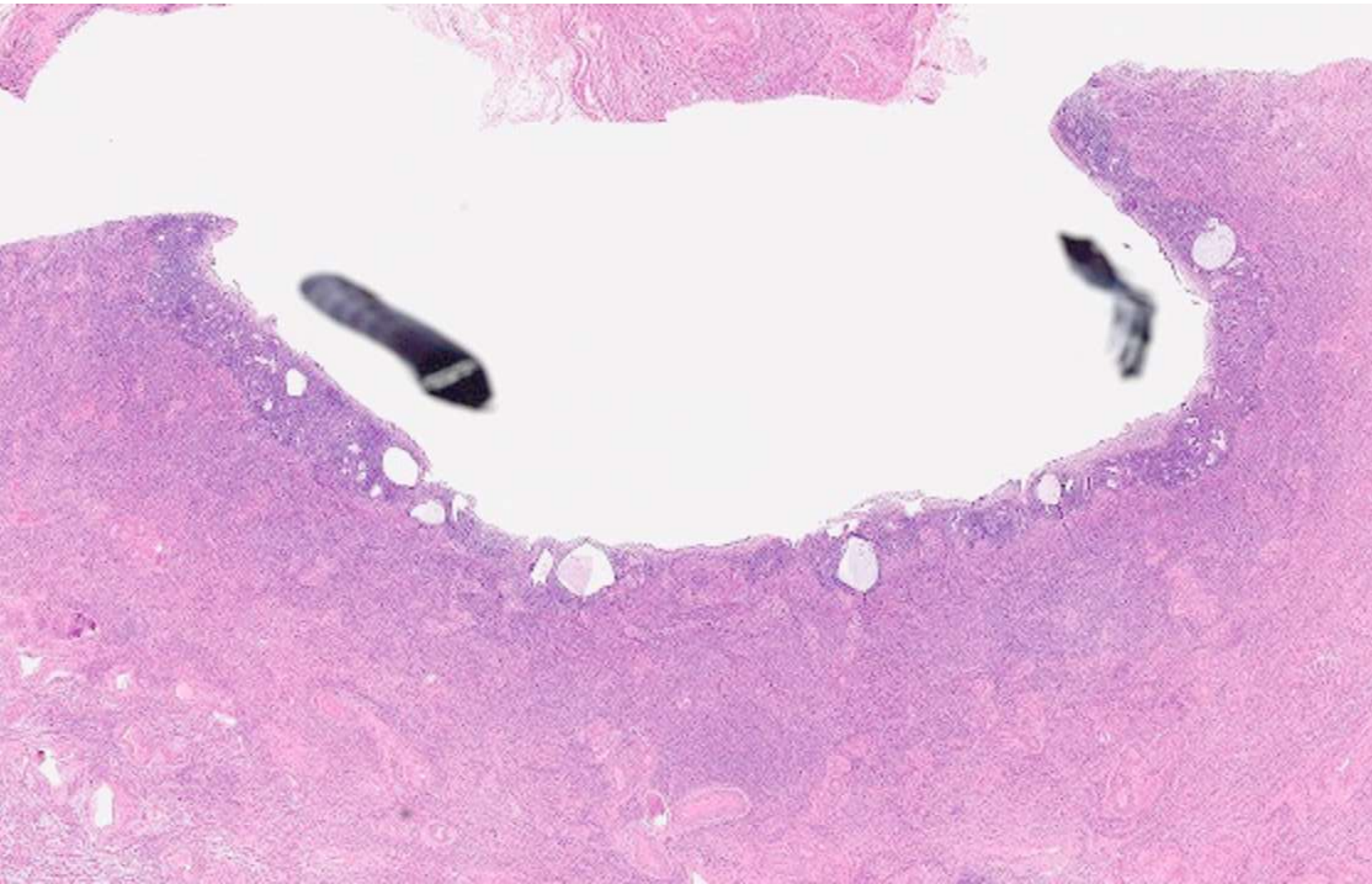




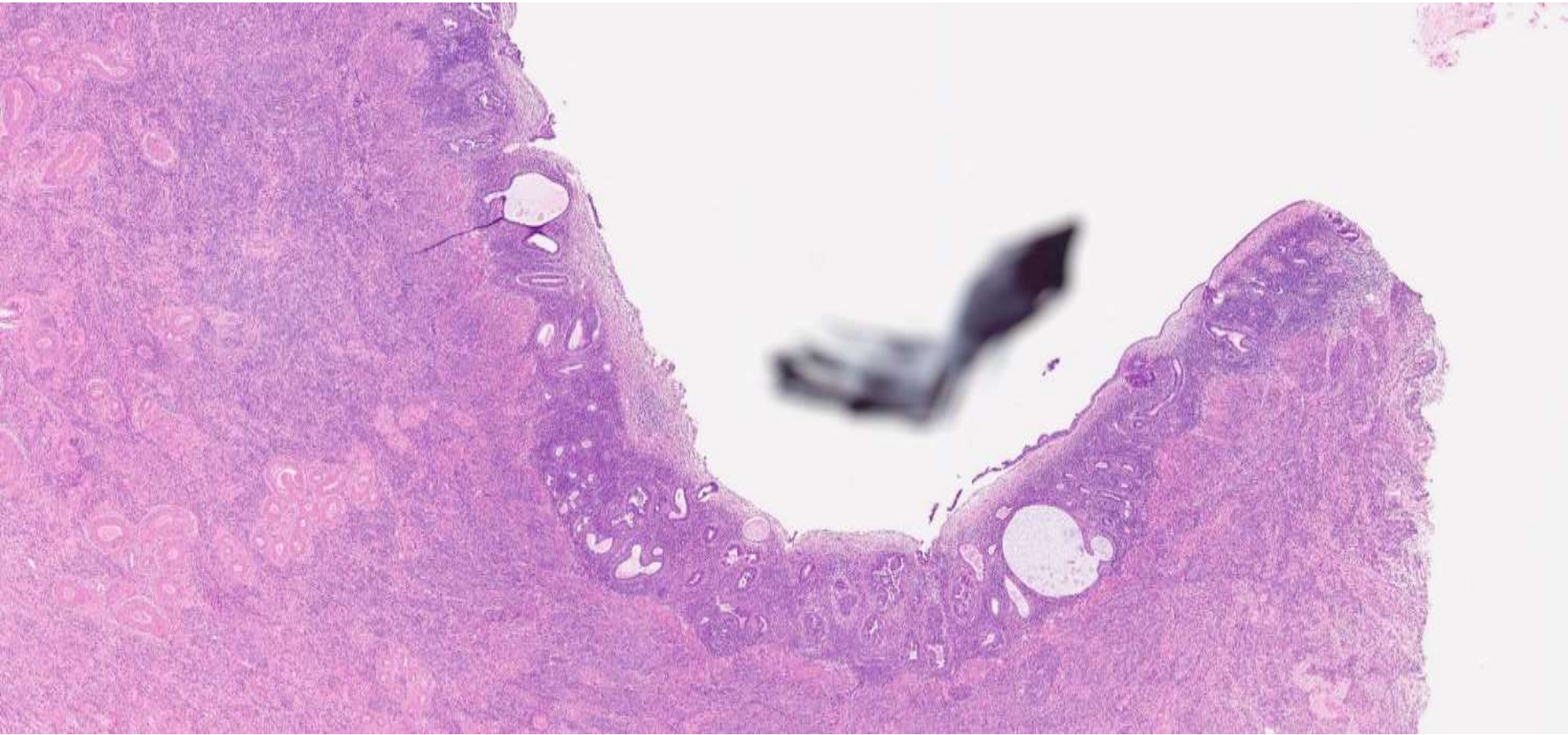
22-0608

**Ankur Sangoi; El Camino Hospital**

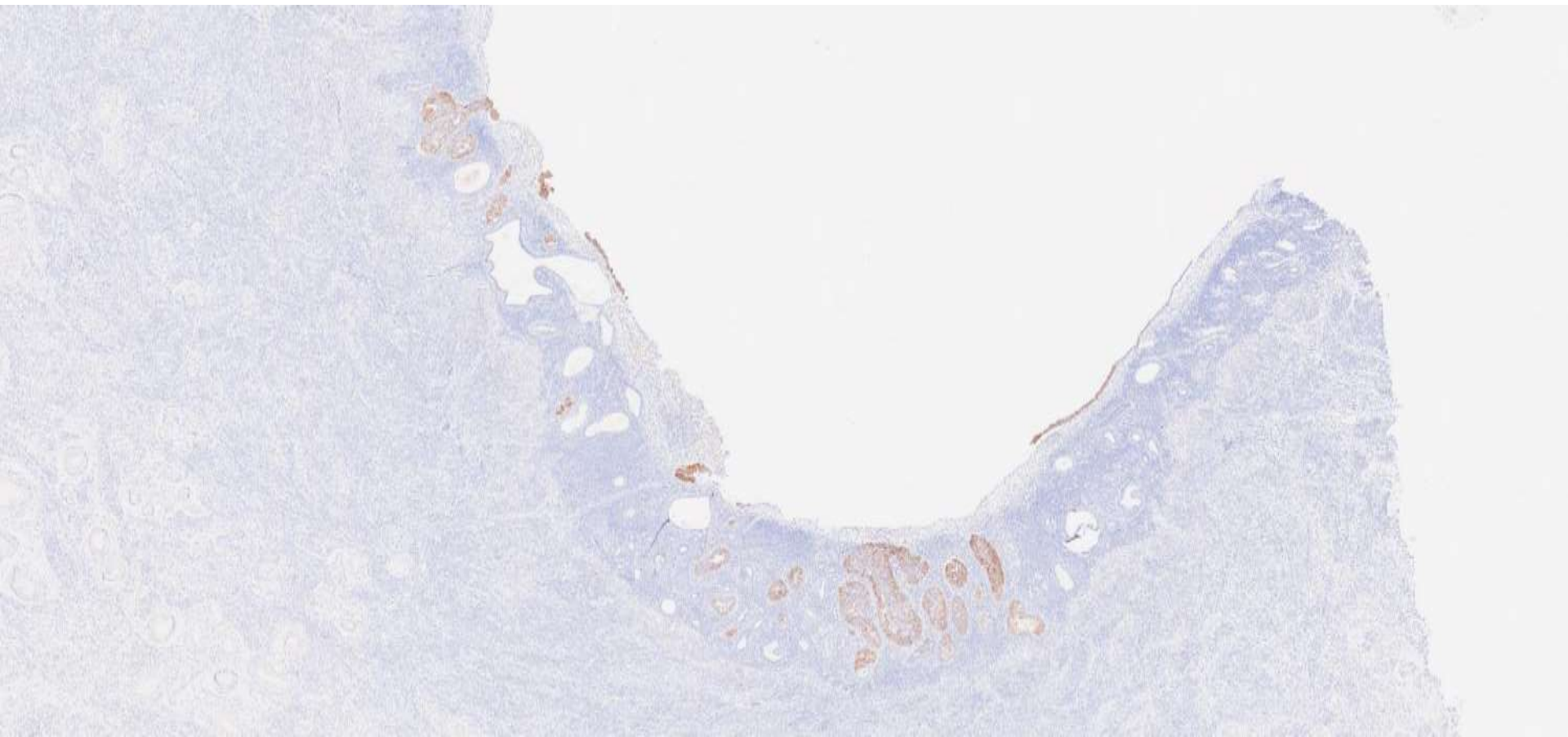
Older F presents with bleeding. Endometrial bx showed rare atypical cells. TAH/BSO performed. Section of endometrial polyp submitted.



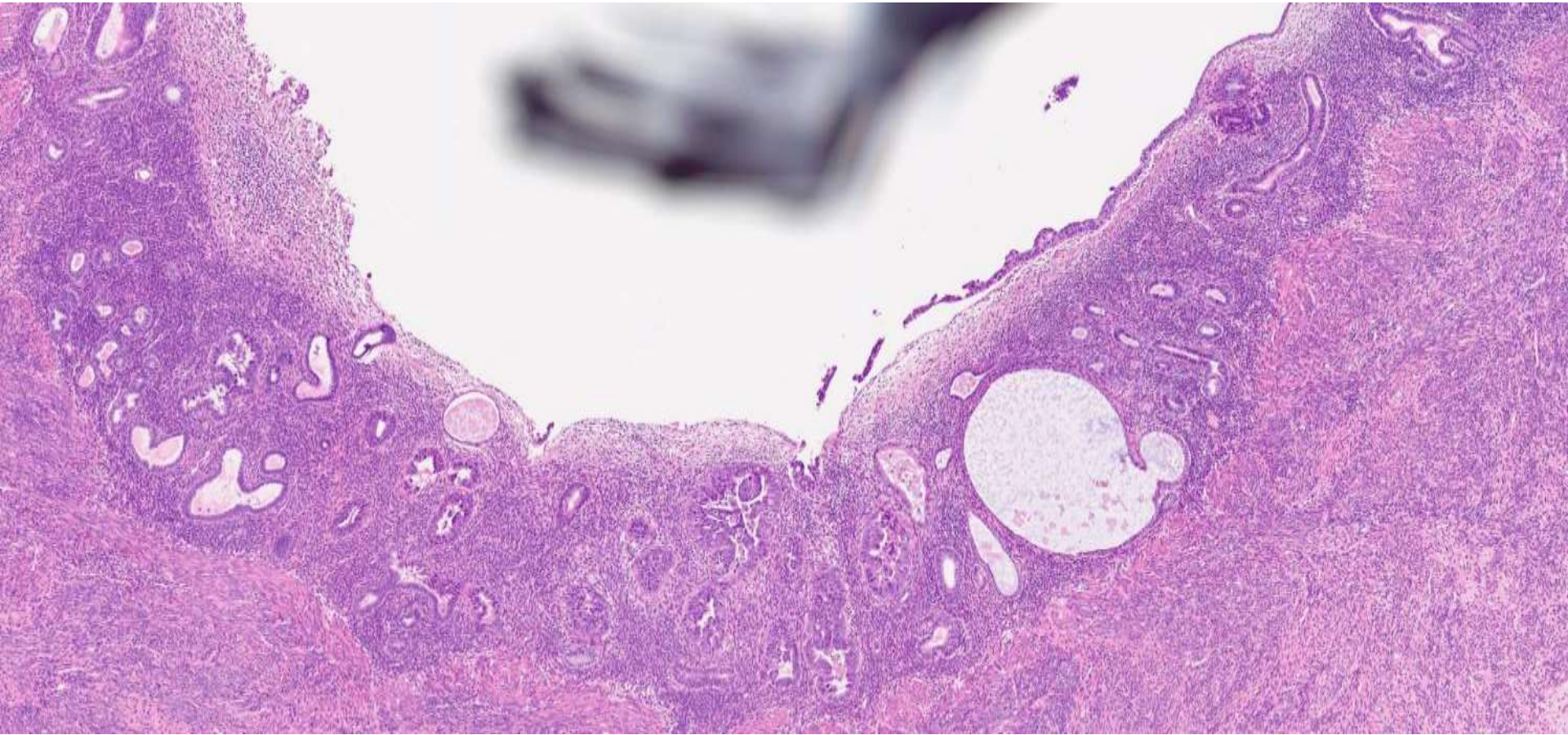




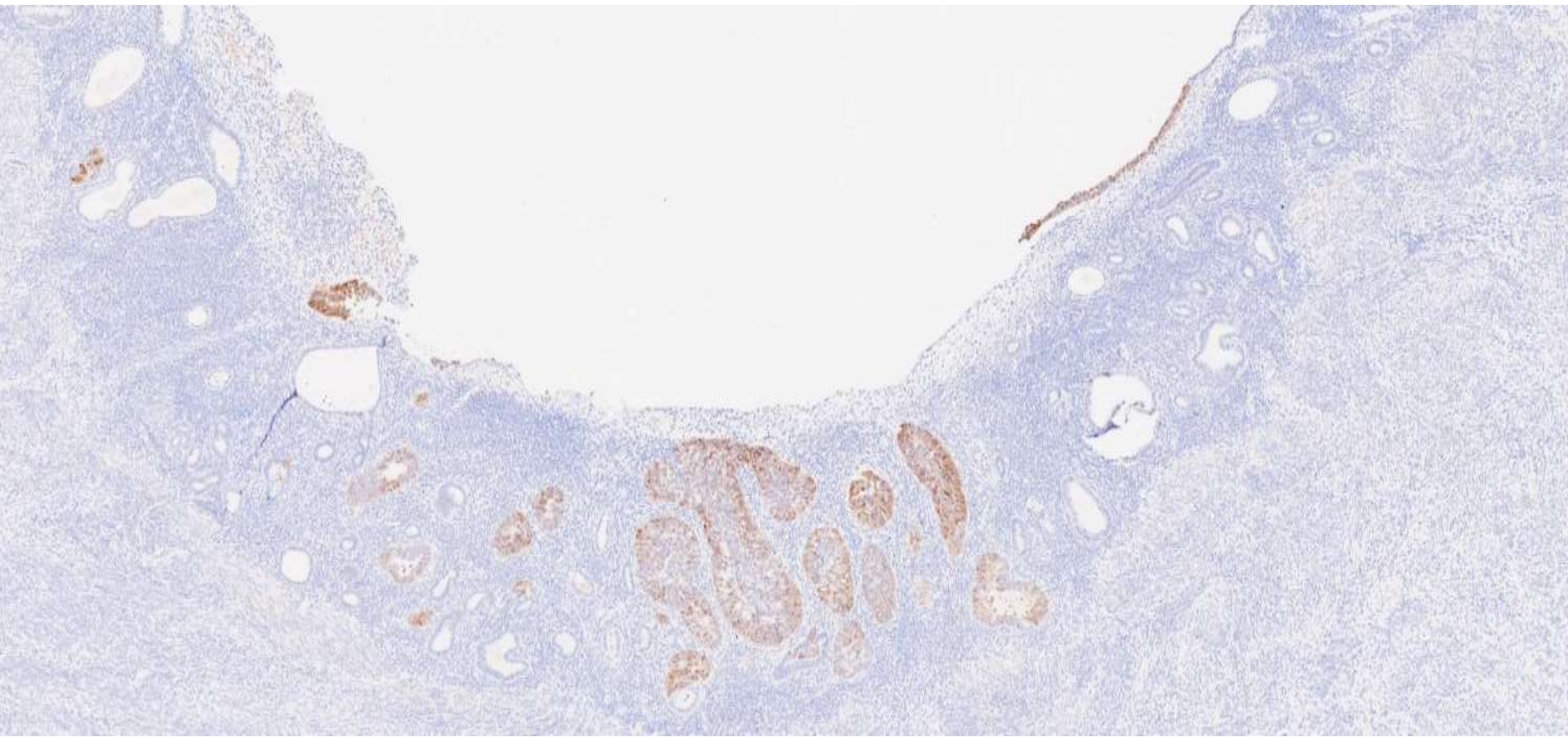
p53



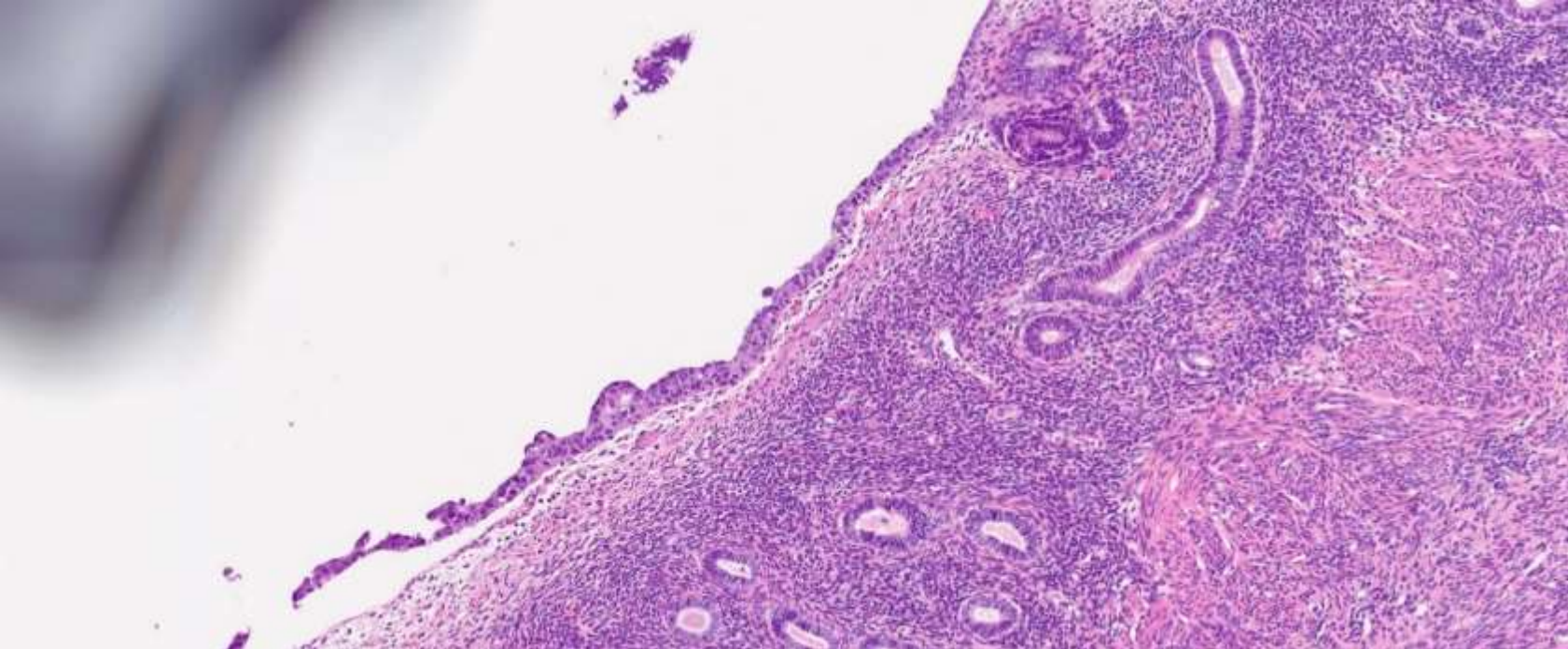




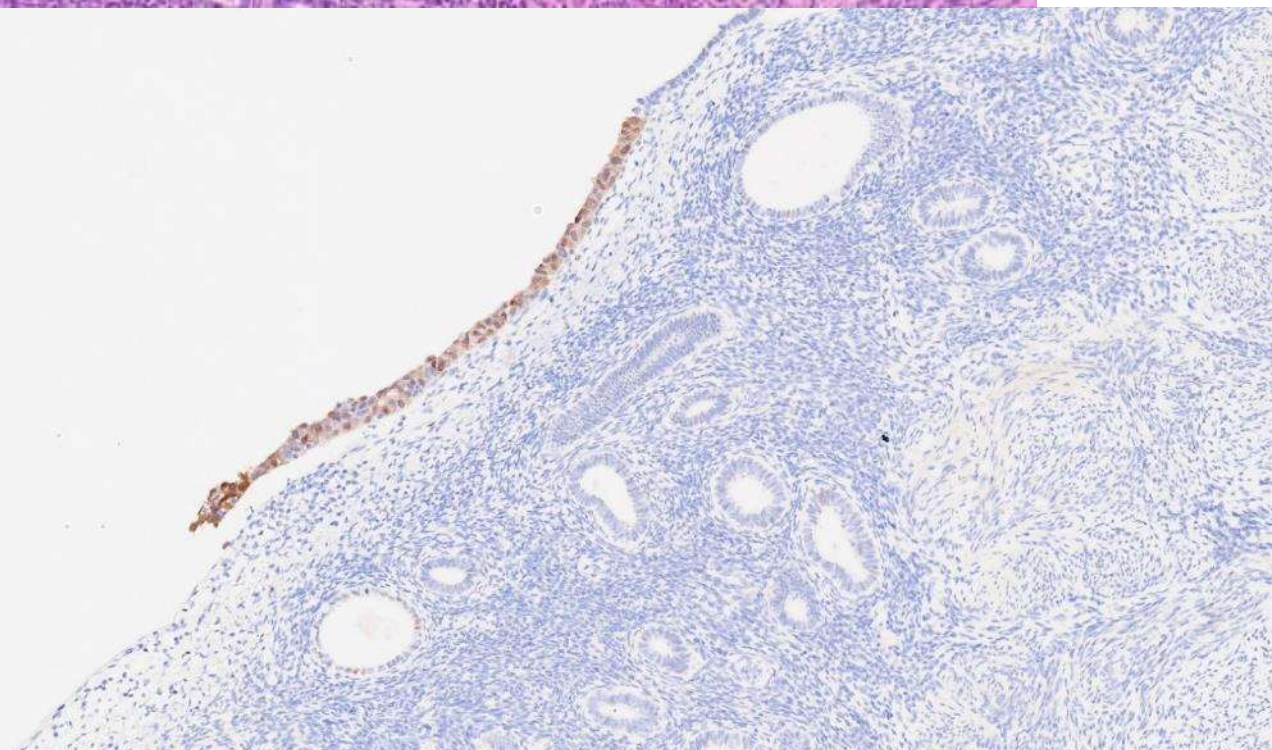
p53



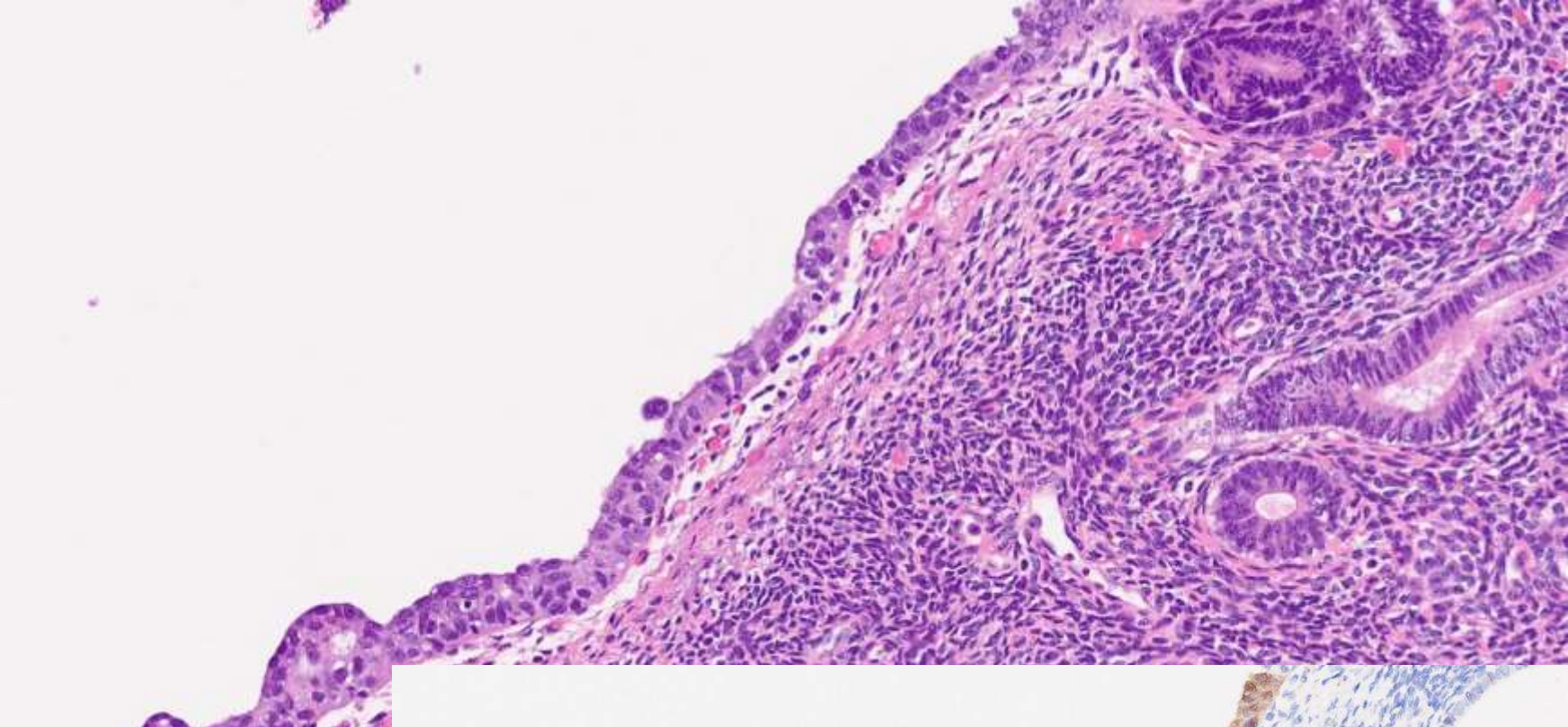




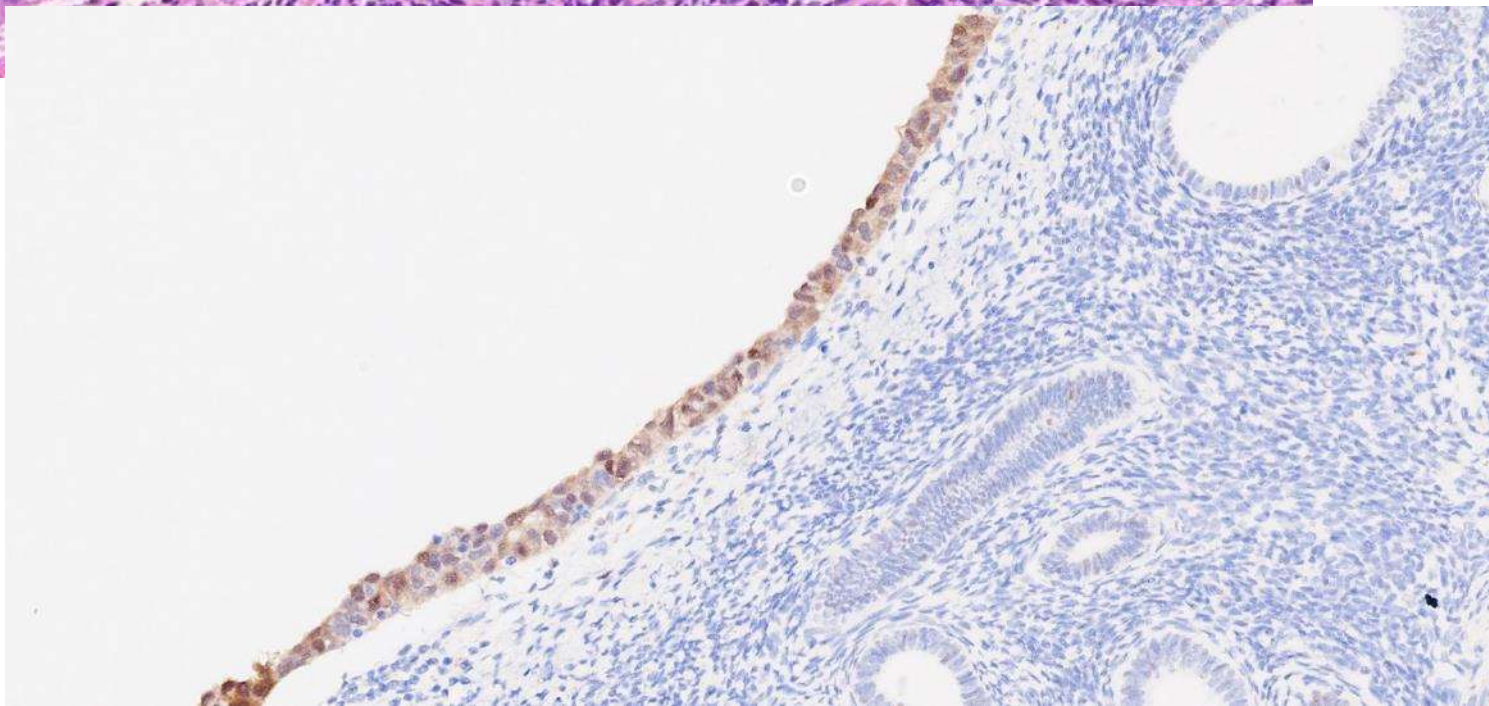
p53



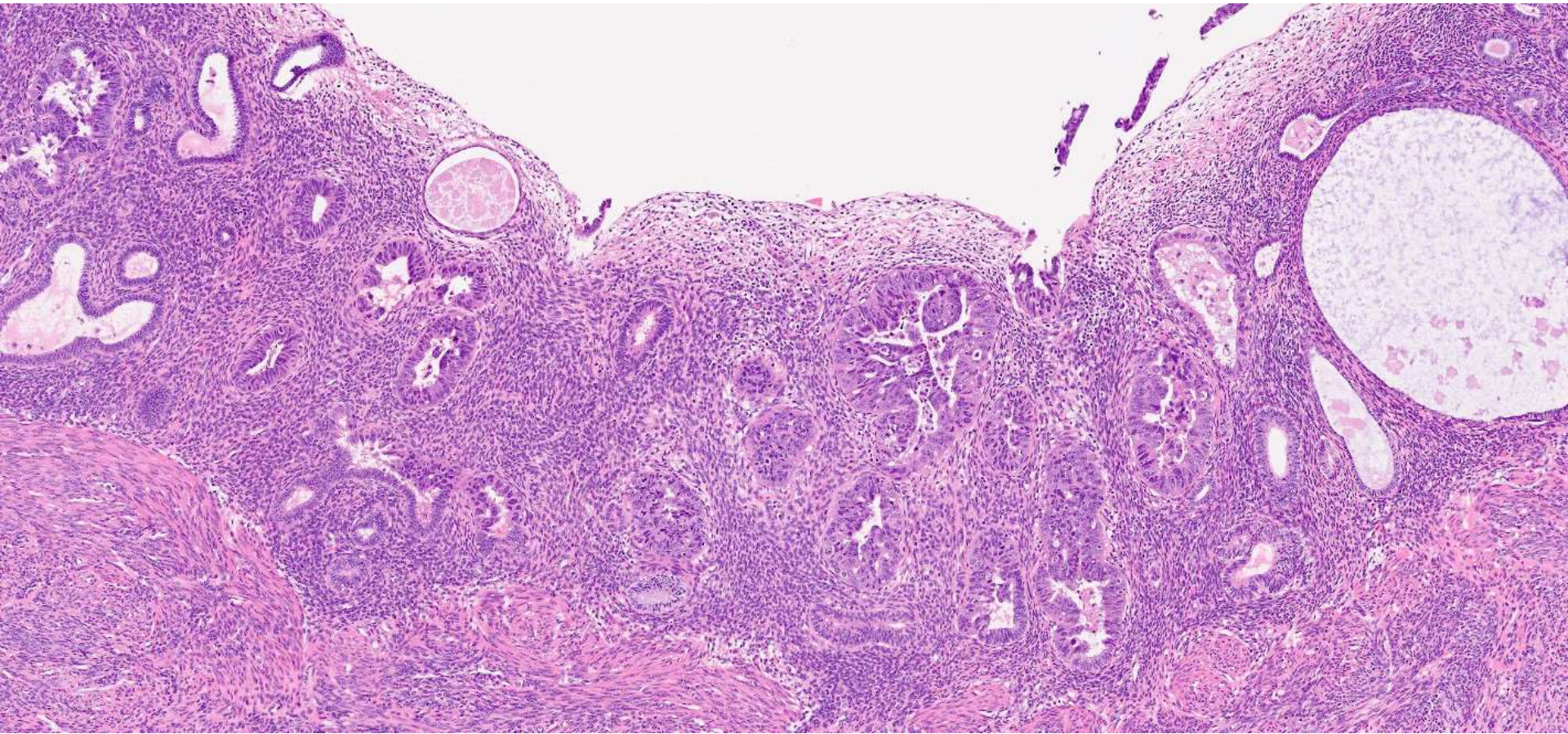




p53

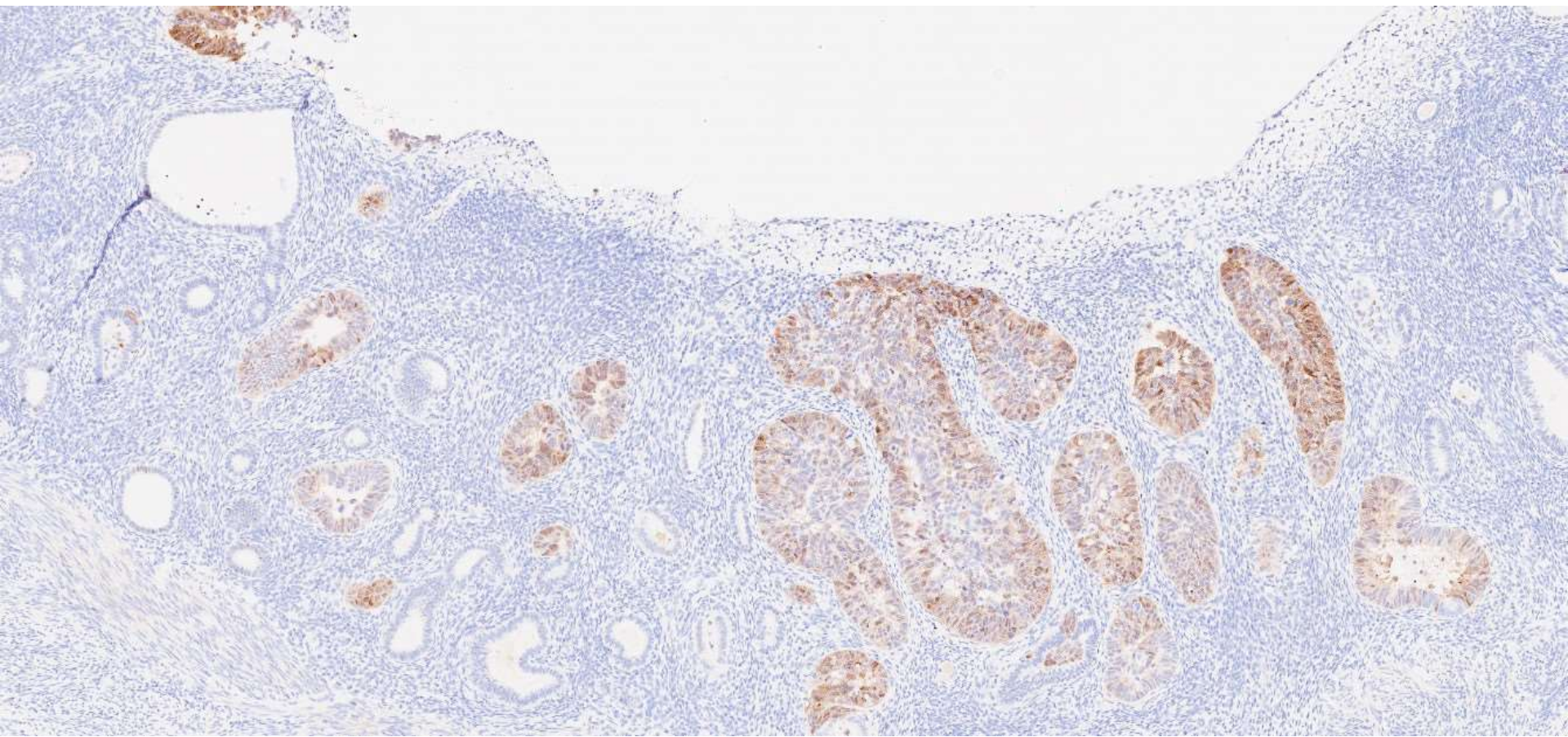




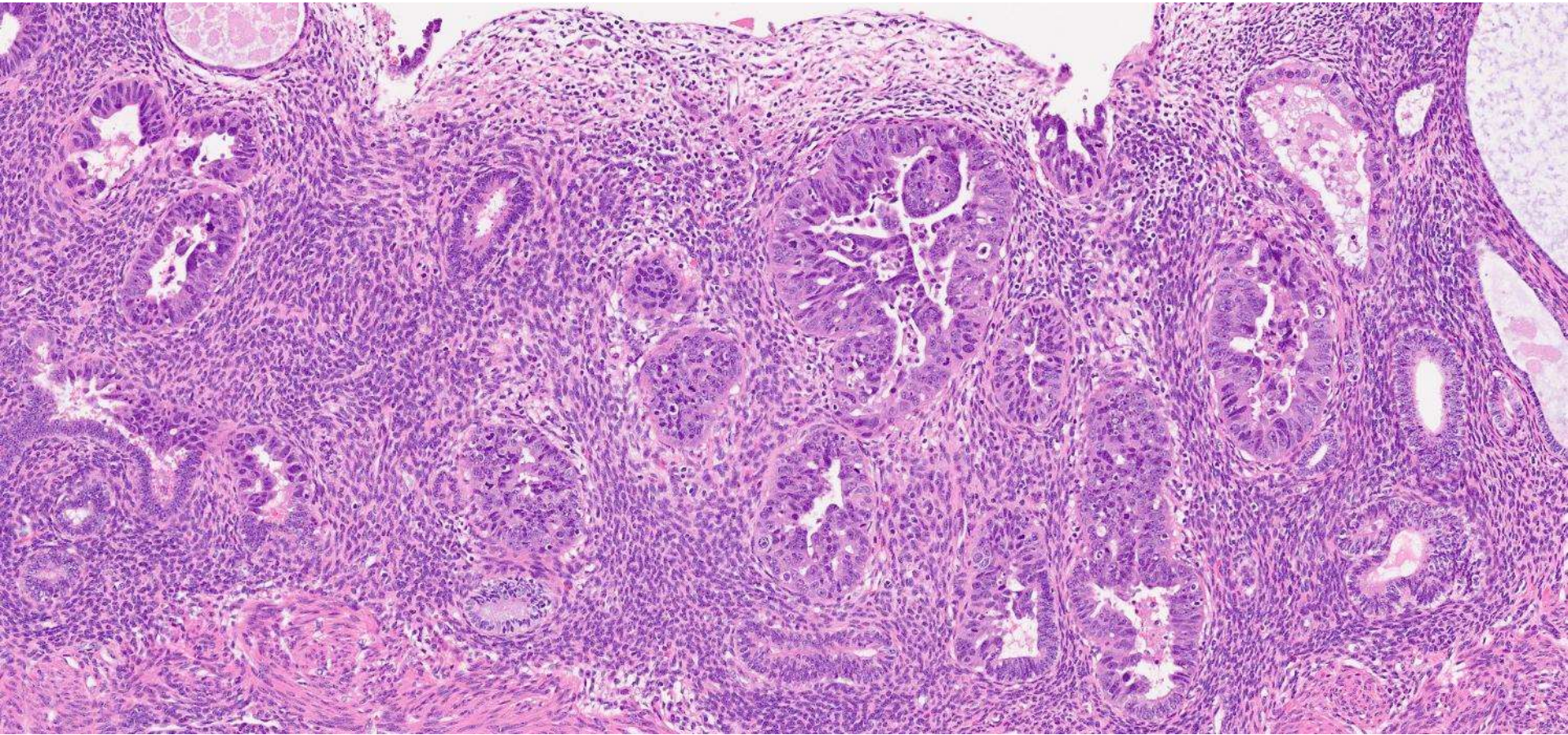




p53

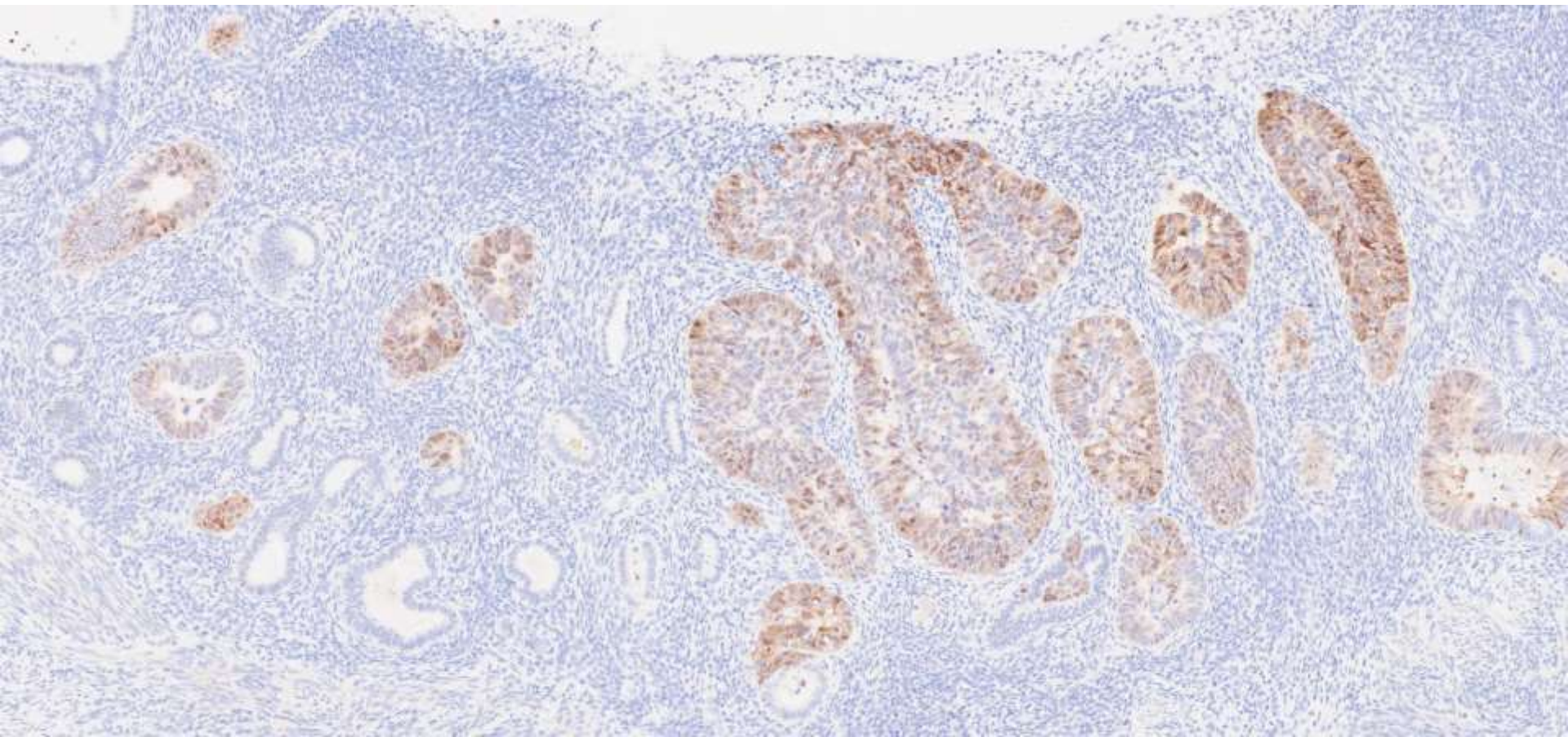




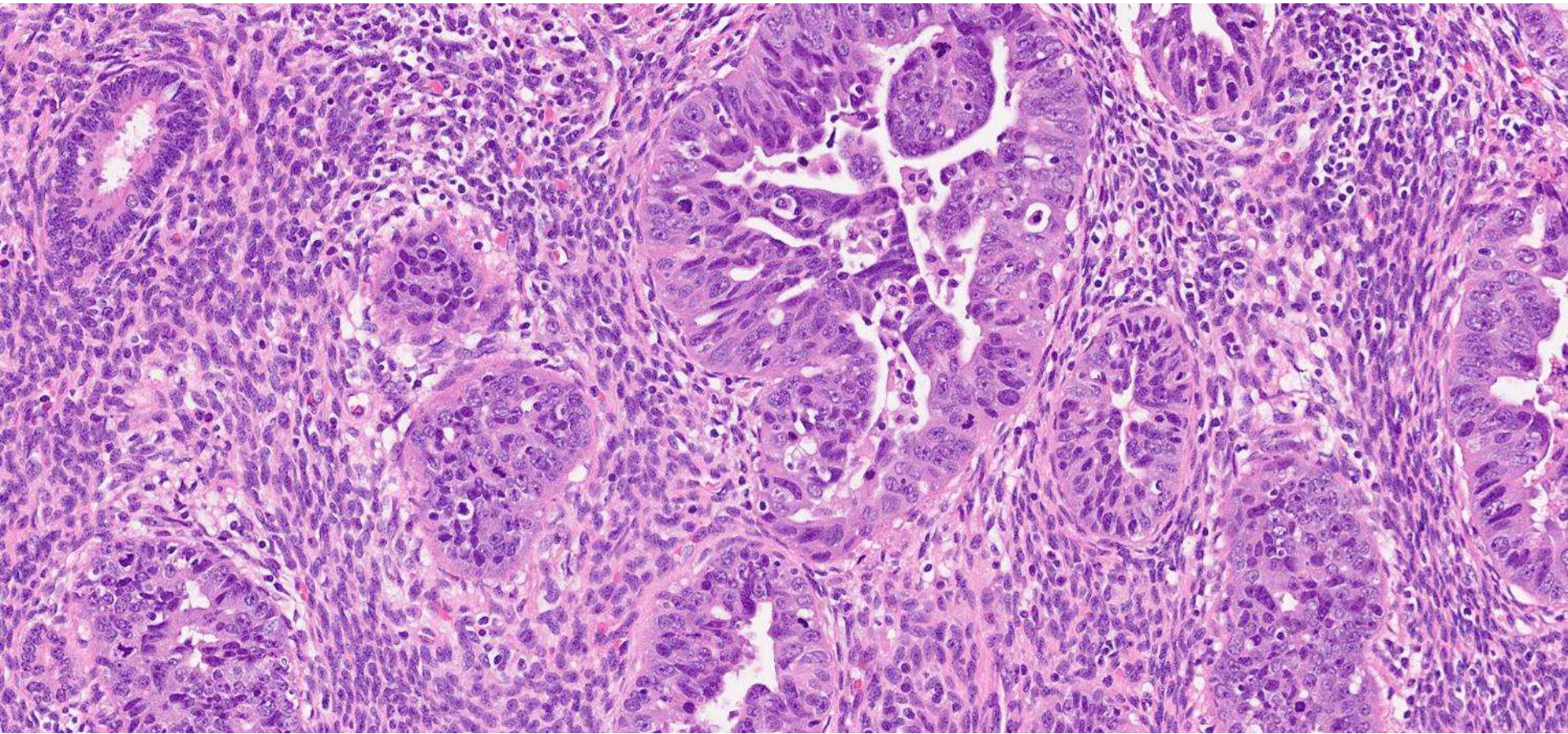




p53

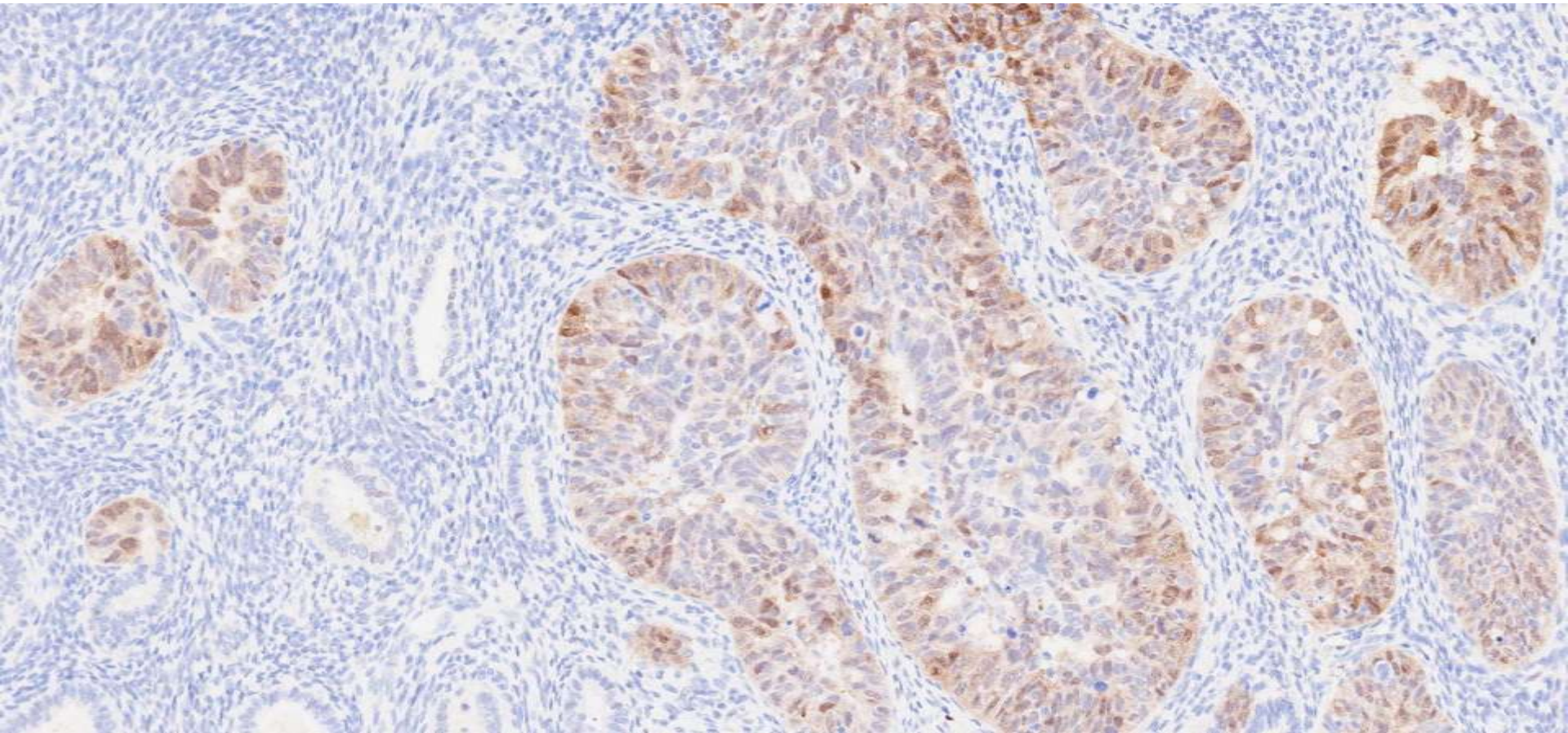








p53





# DIAGNOSIS?



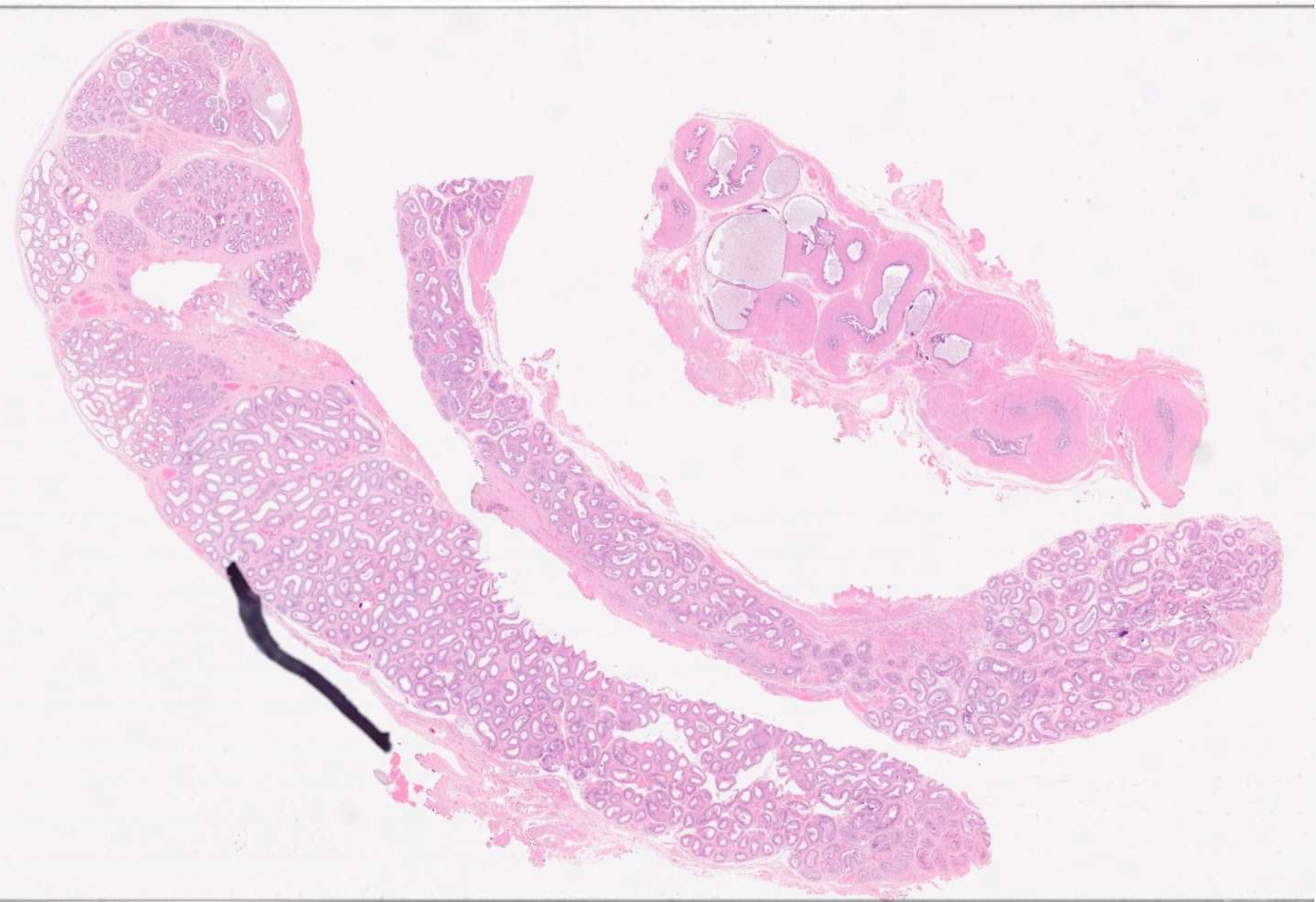
22-0609

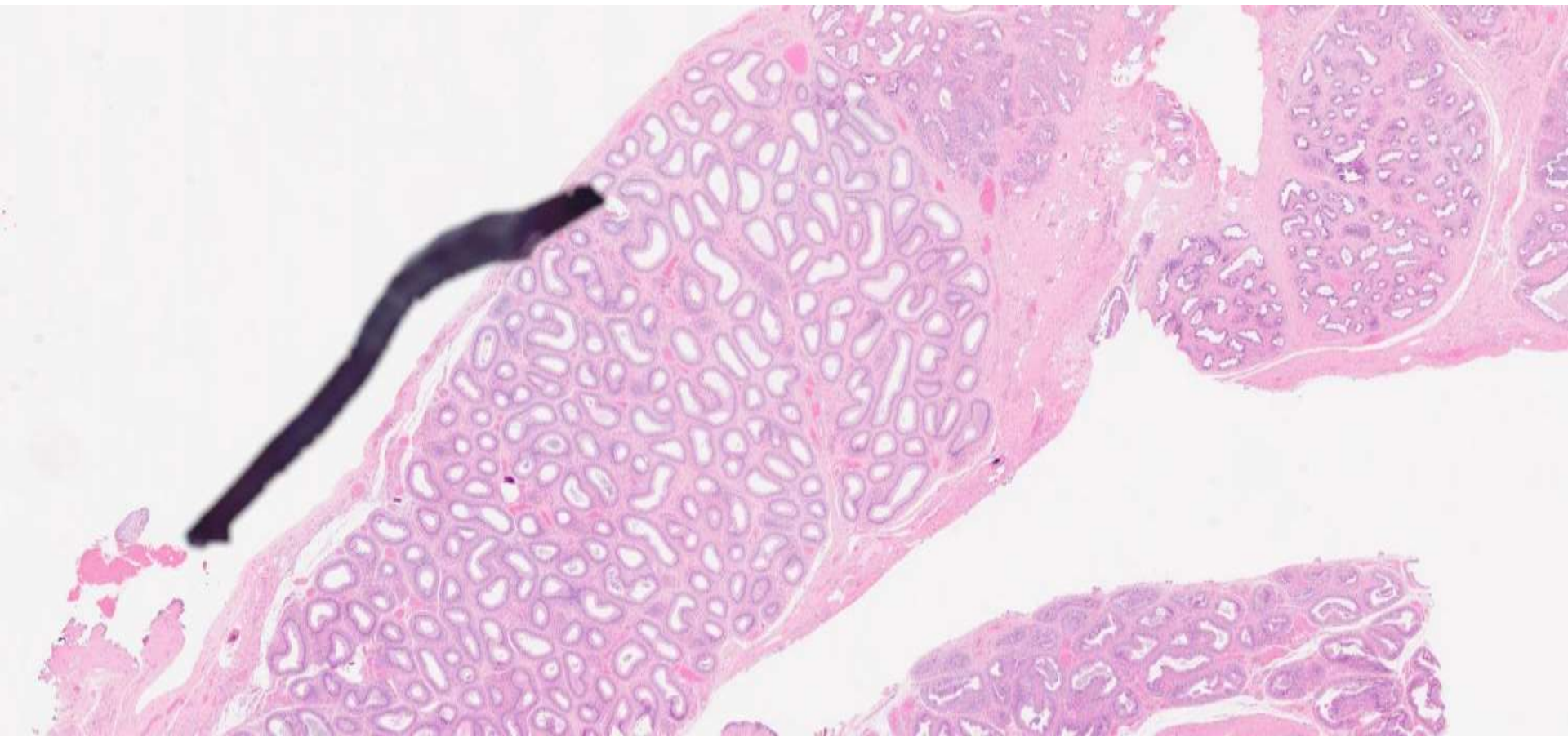
Direct links to scanned slides:

**Ankur Sangoi; El Camino Hospital**

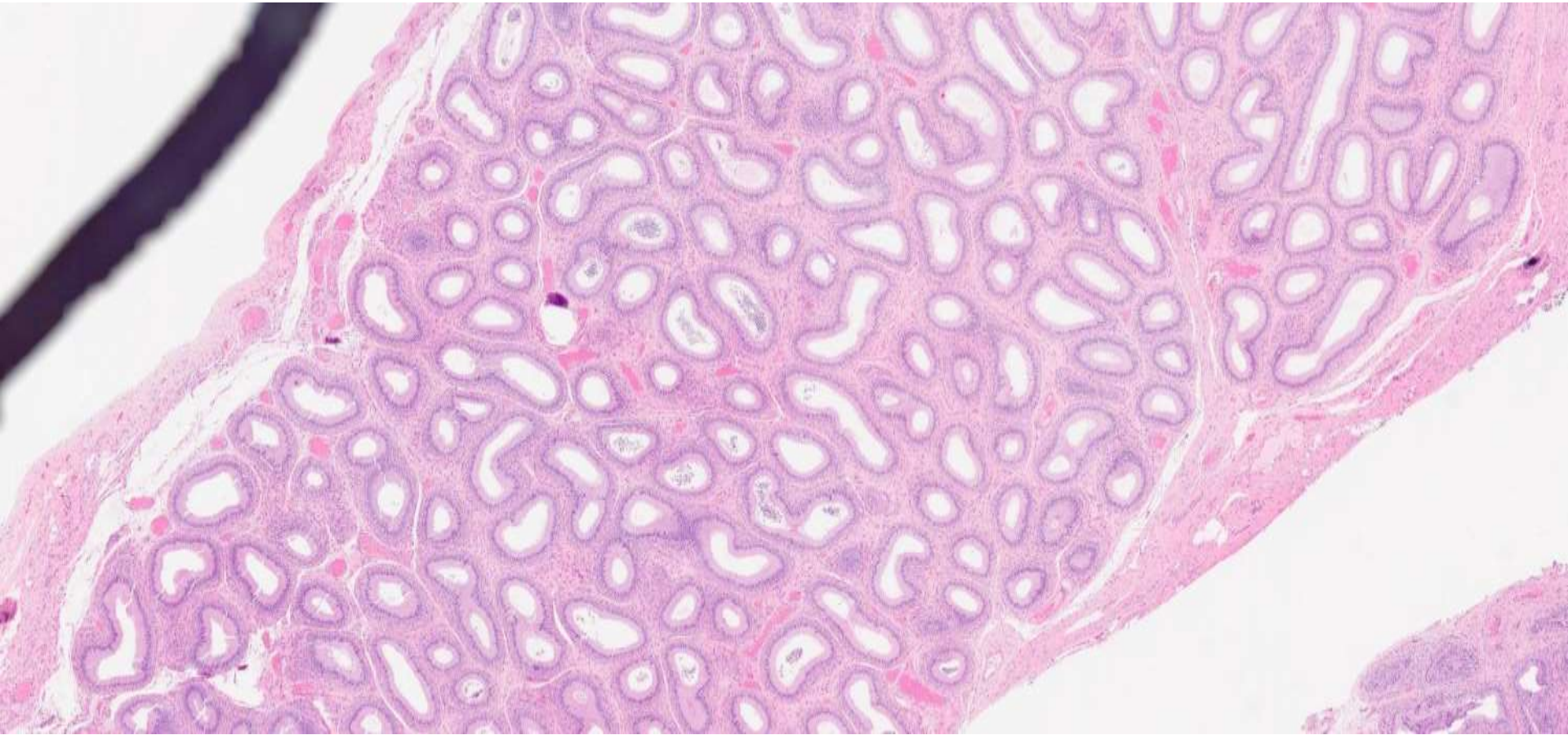
Middle aged F presents with 2.5cm right middle lobe lung mass. Prior attempted FNA non-diagnostic. Lobectomy performed. Sections of grossly found 1cm tubular structure near pleural somewhat away from tumor.



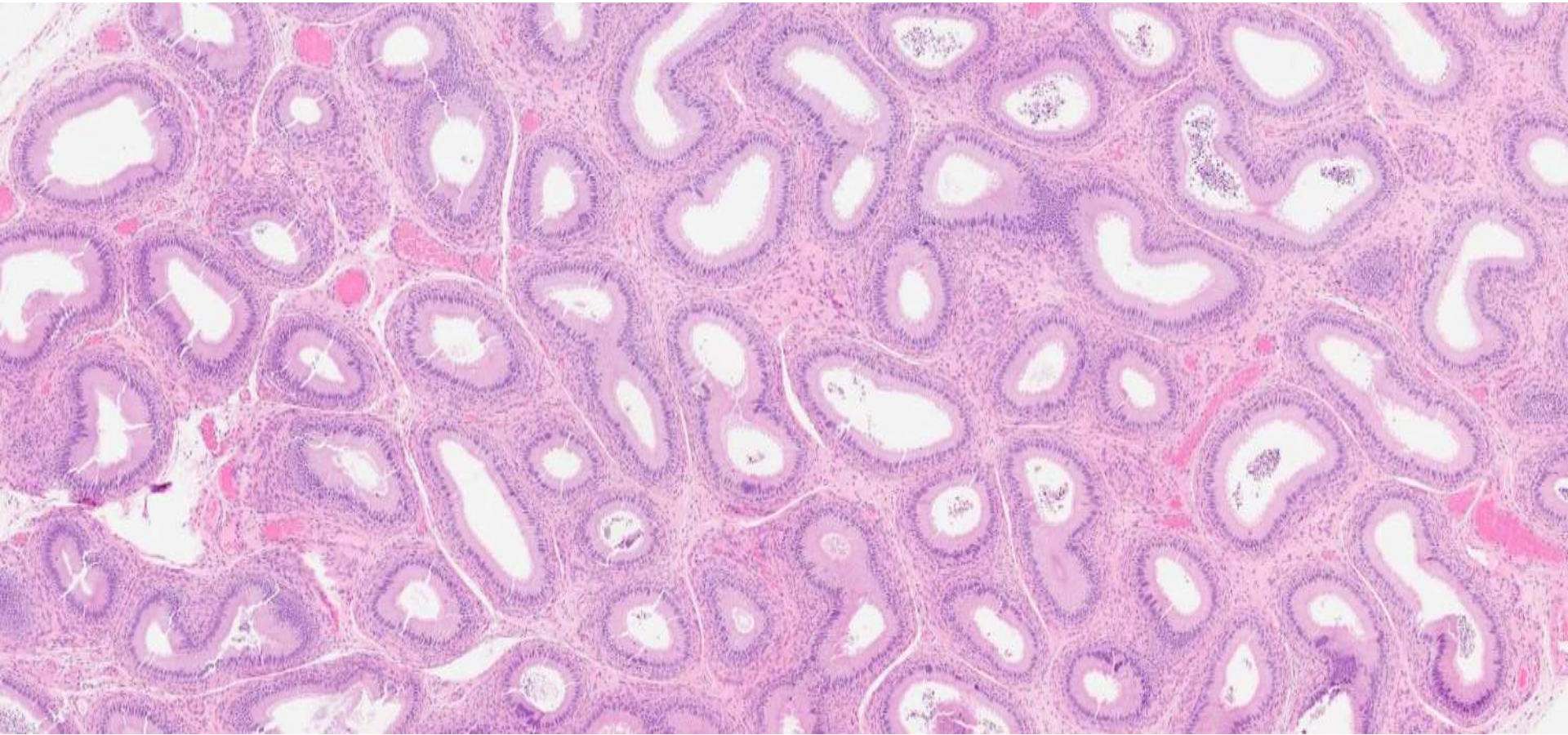




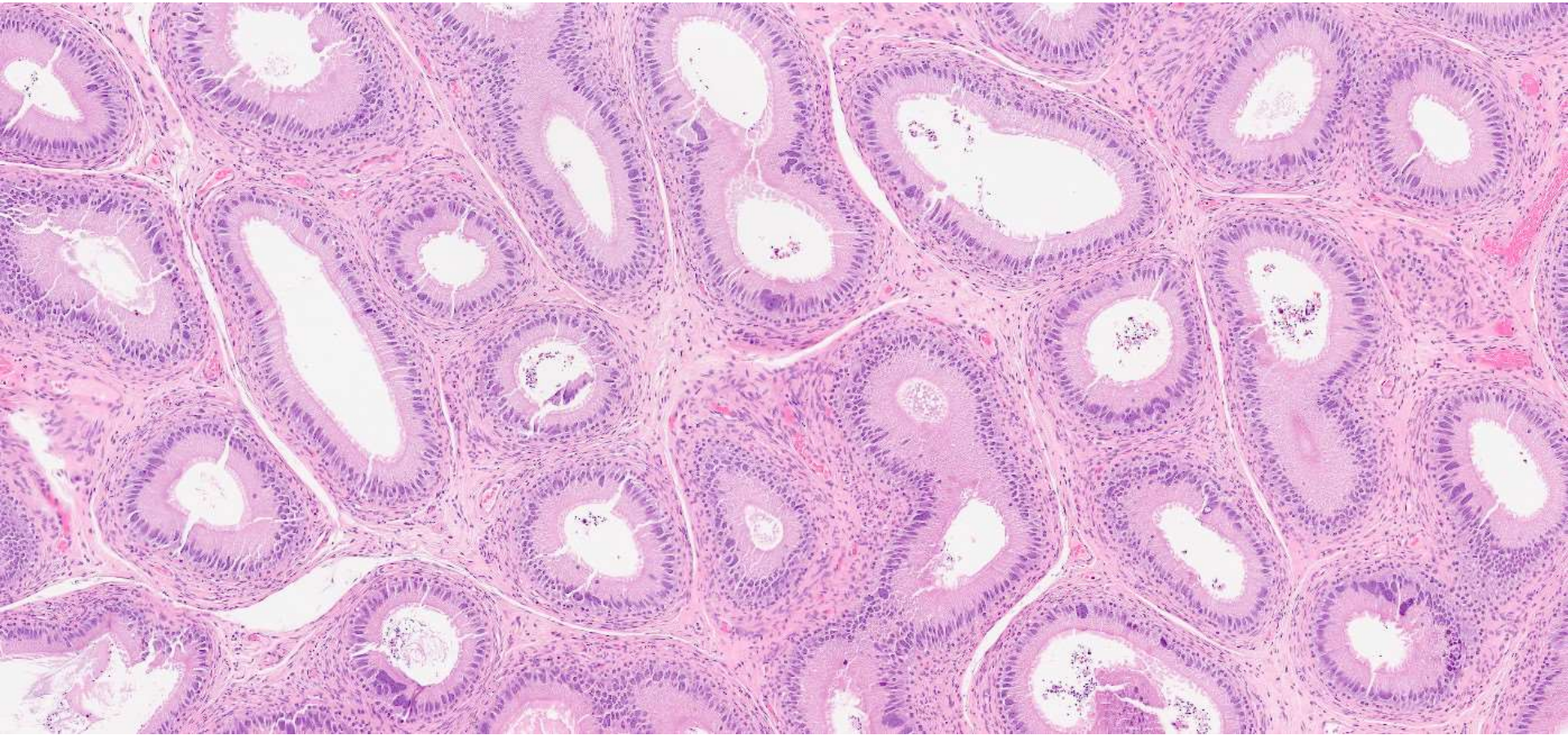




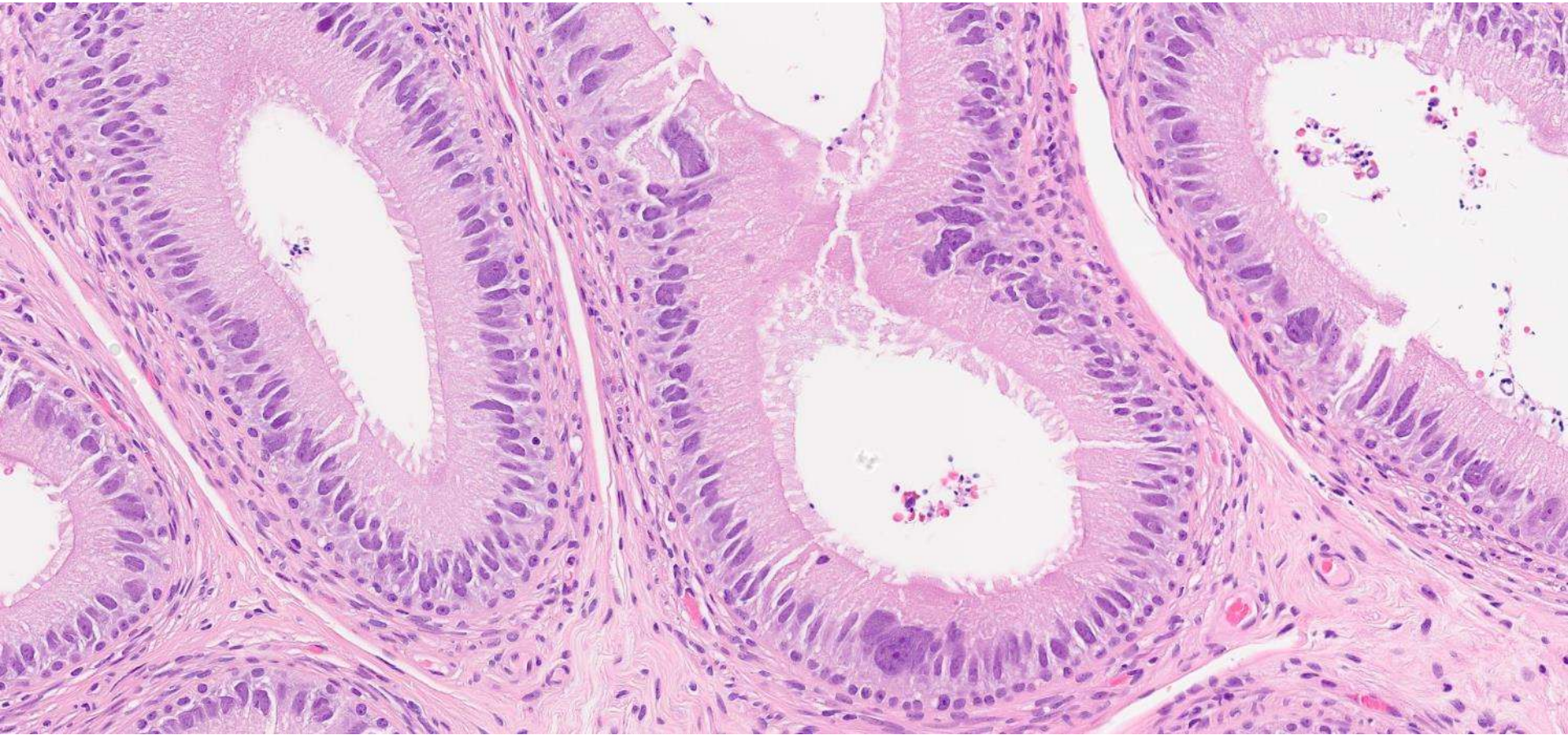




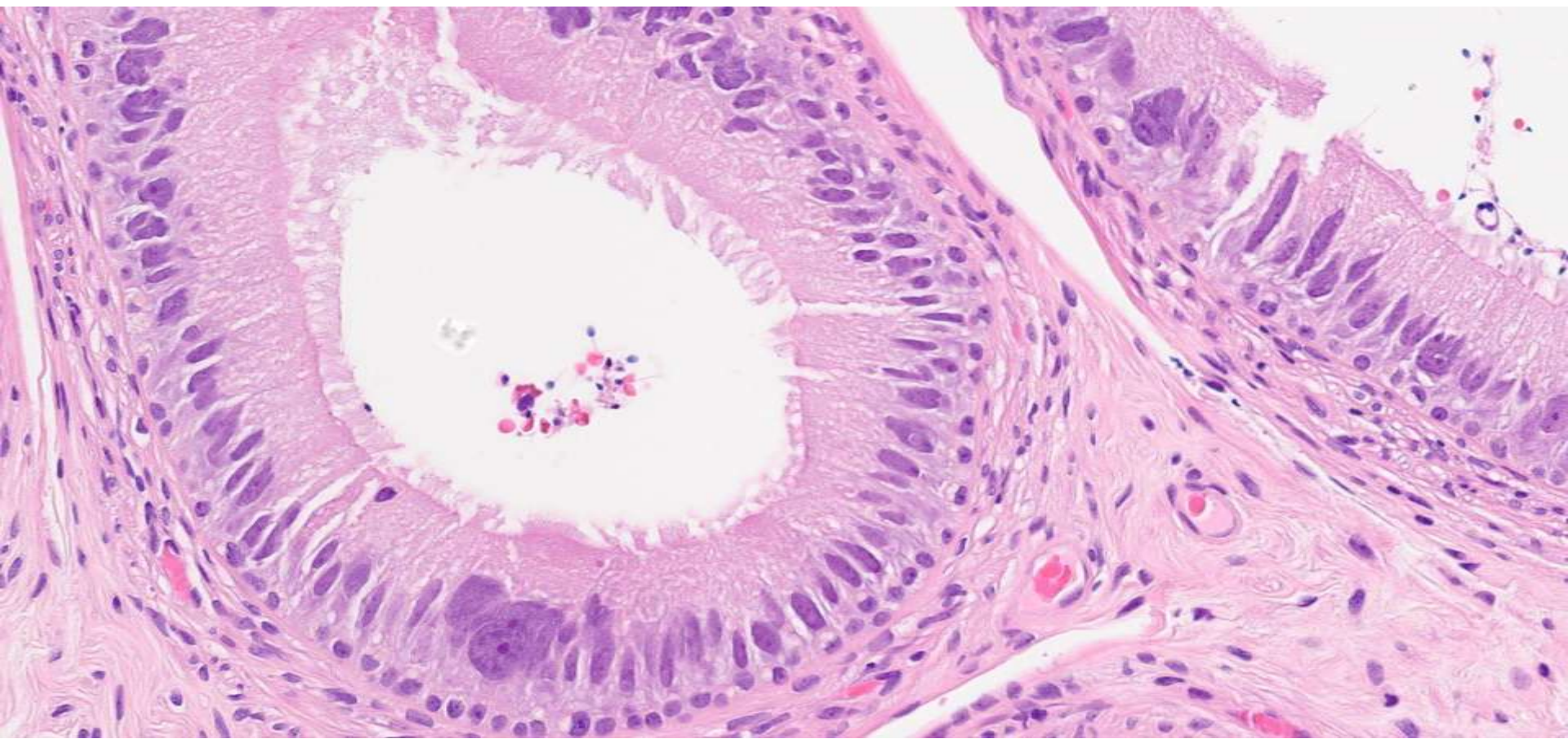




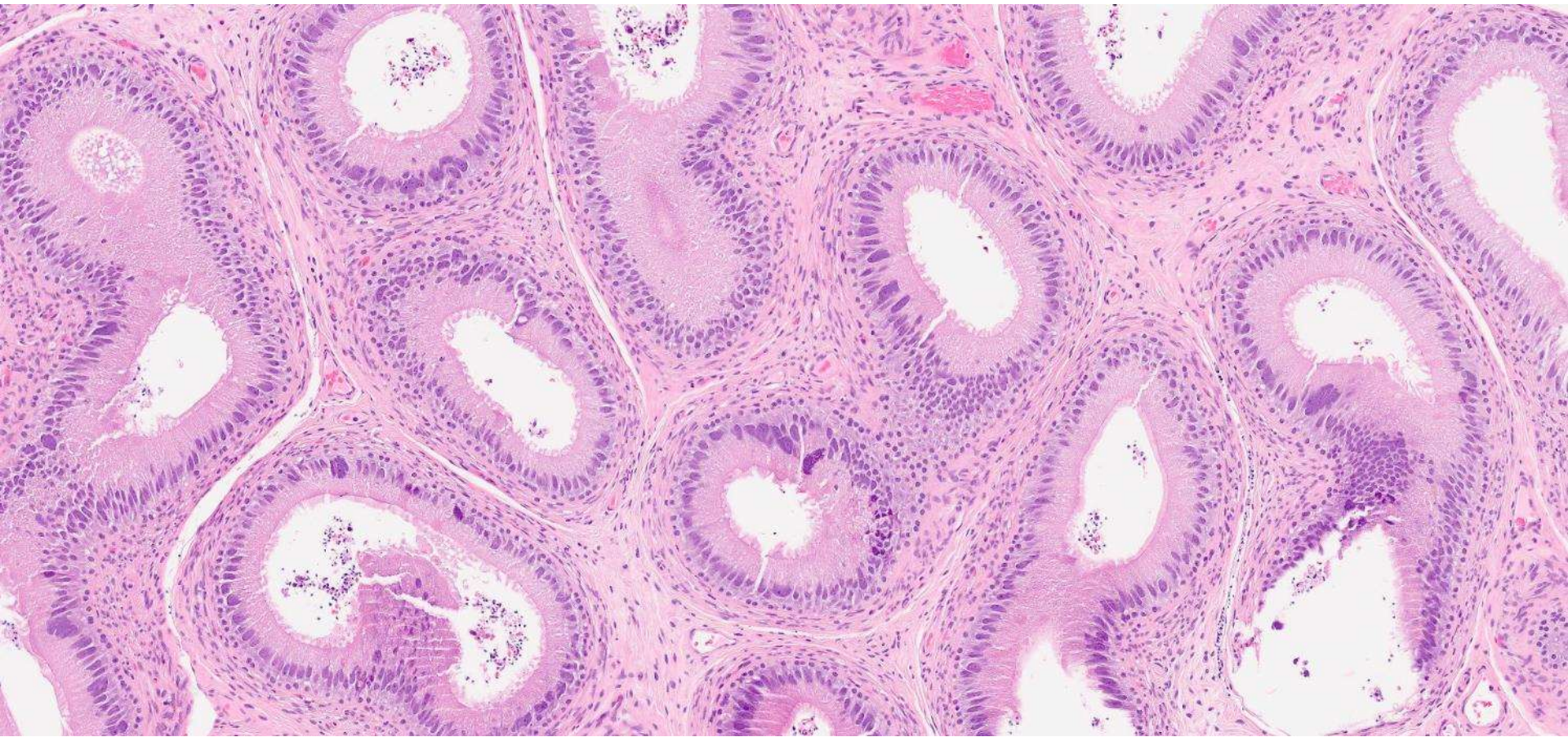




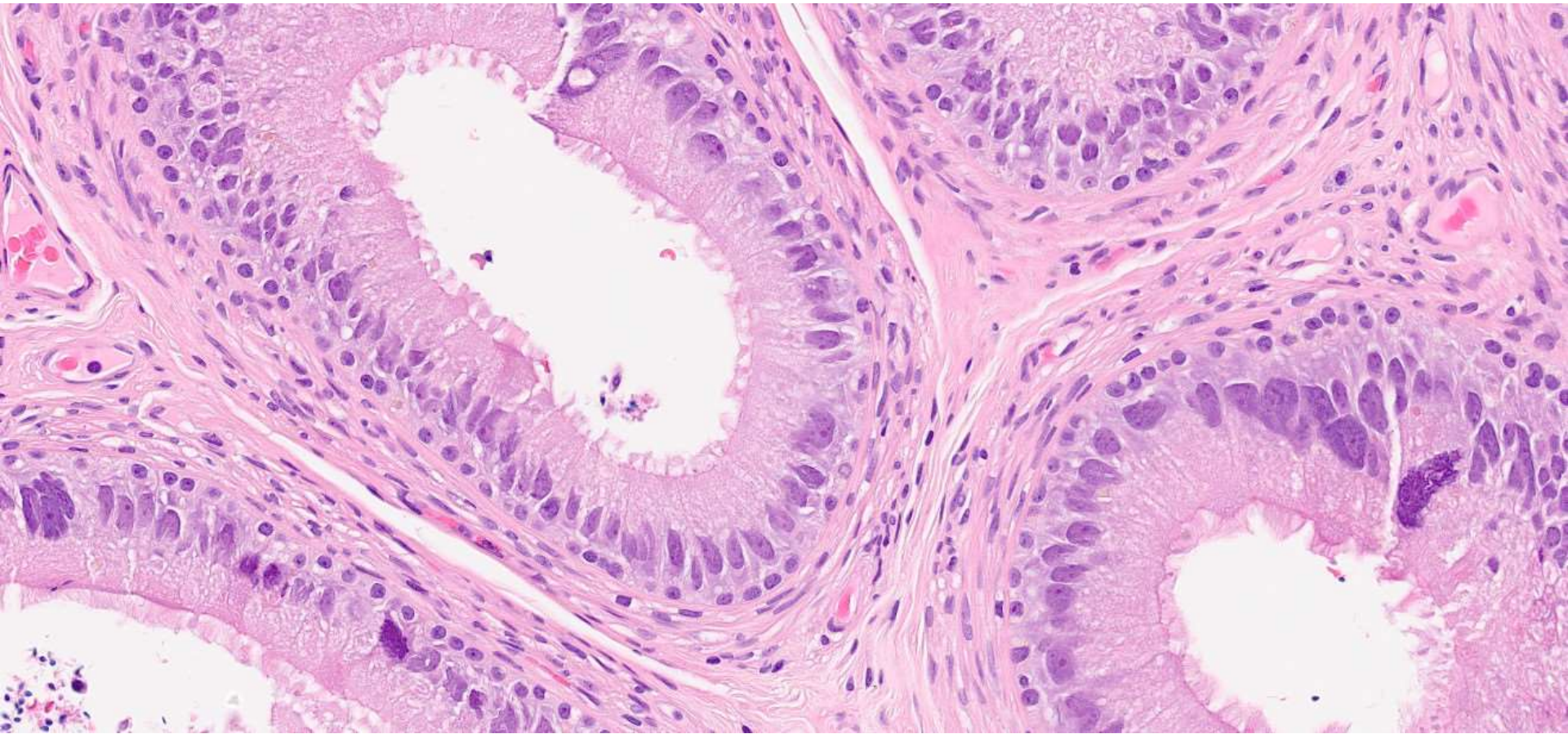




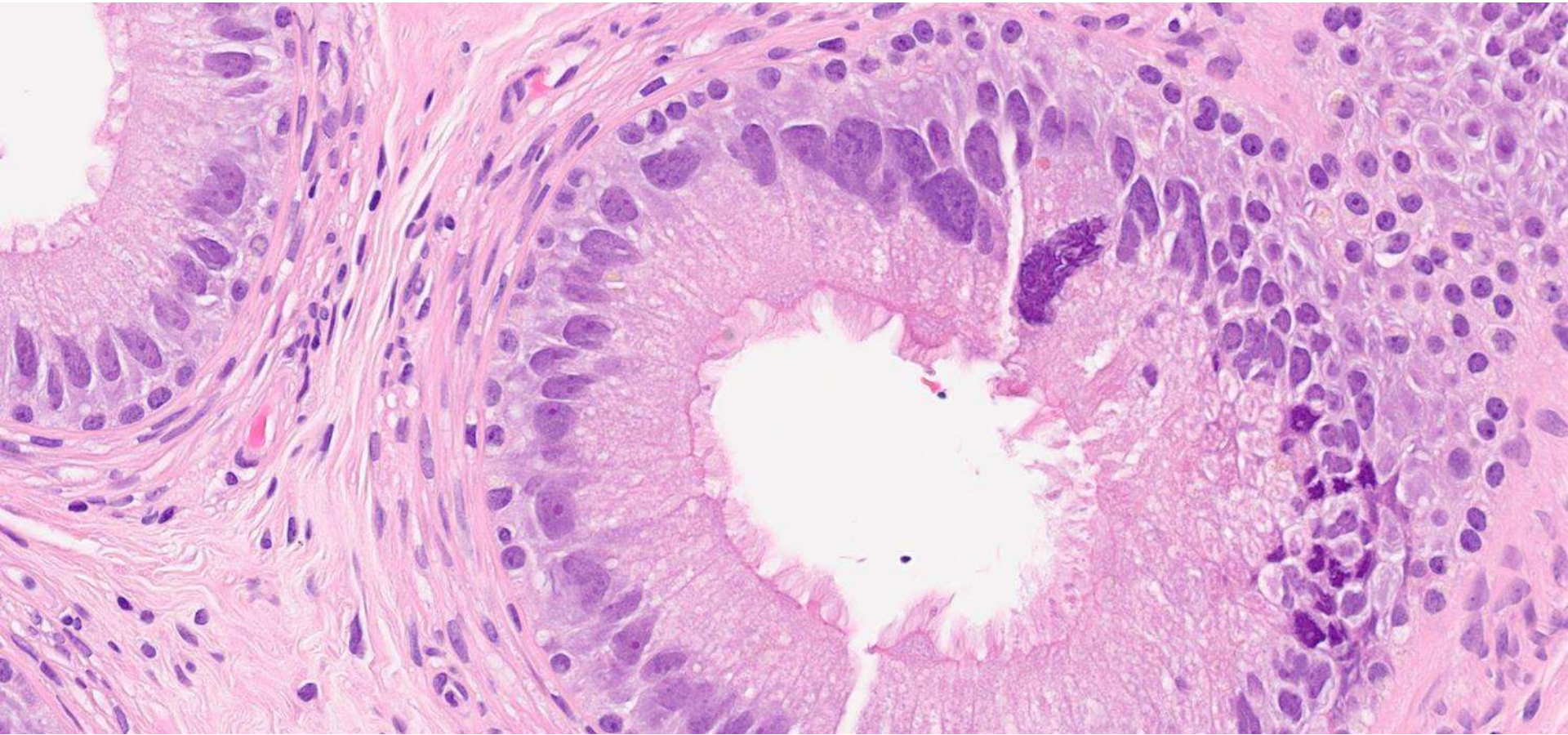














# DIAGNOSIS?



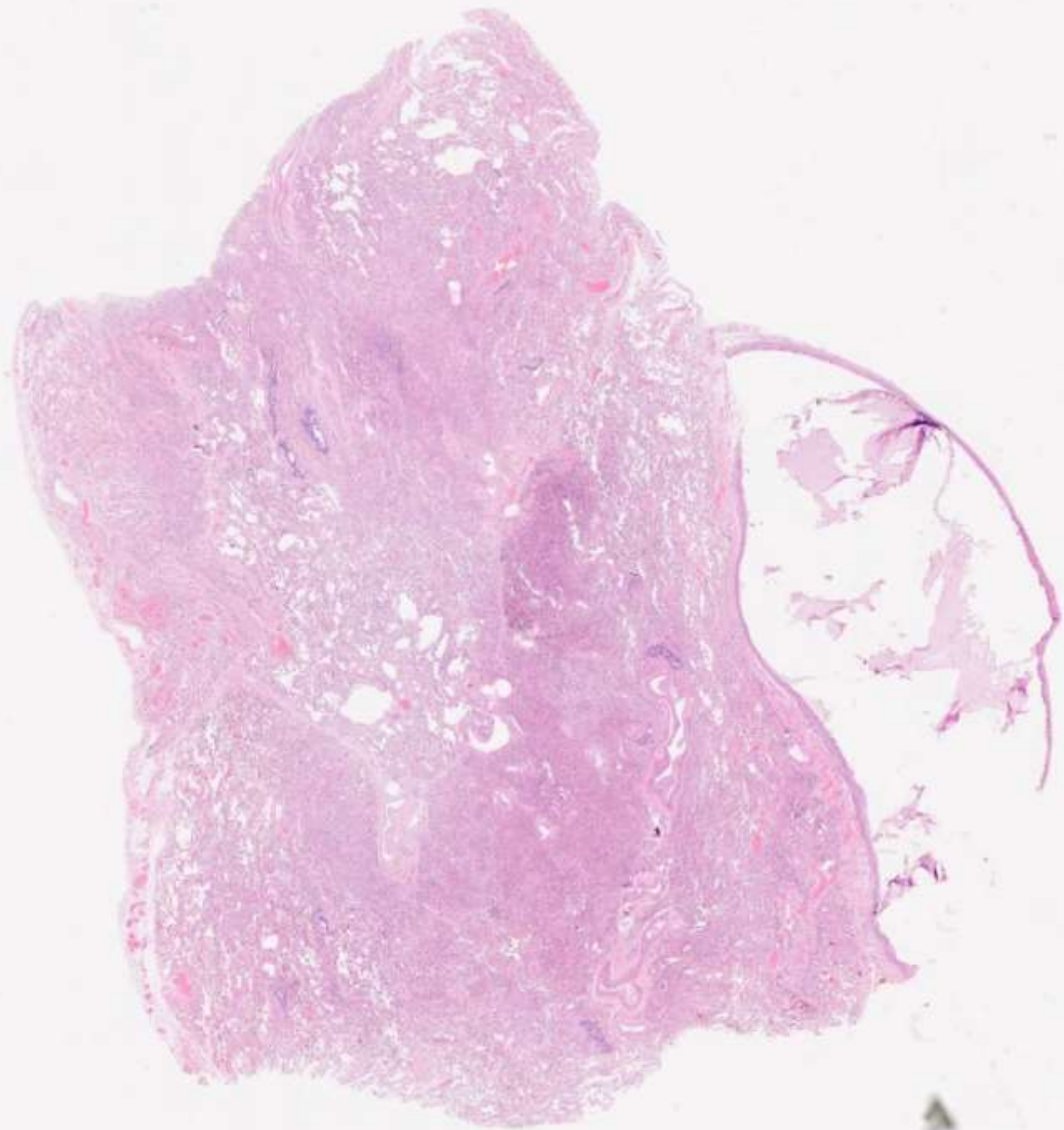
22-0610

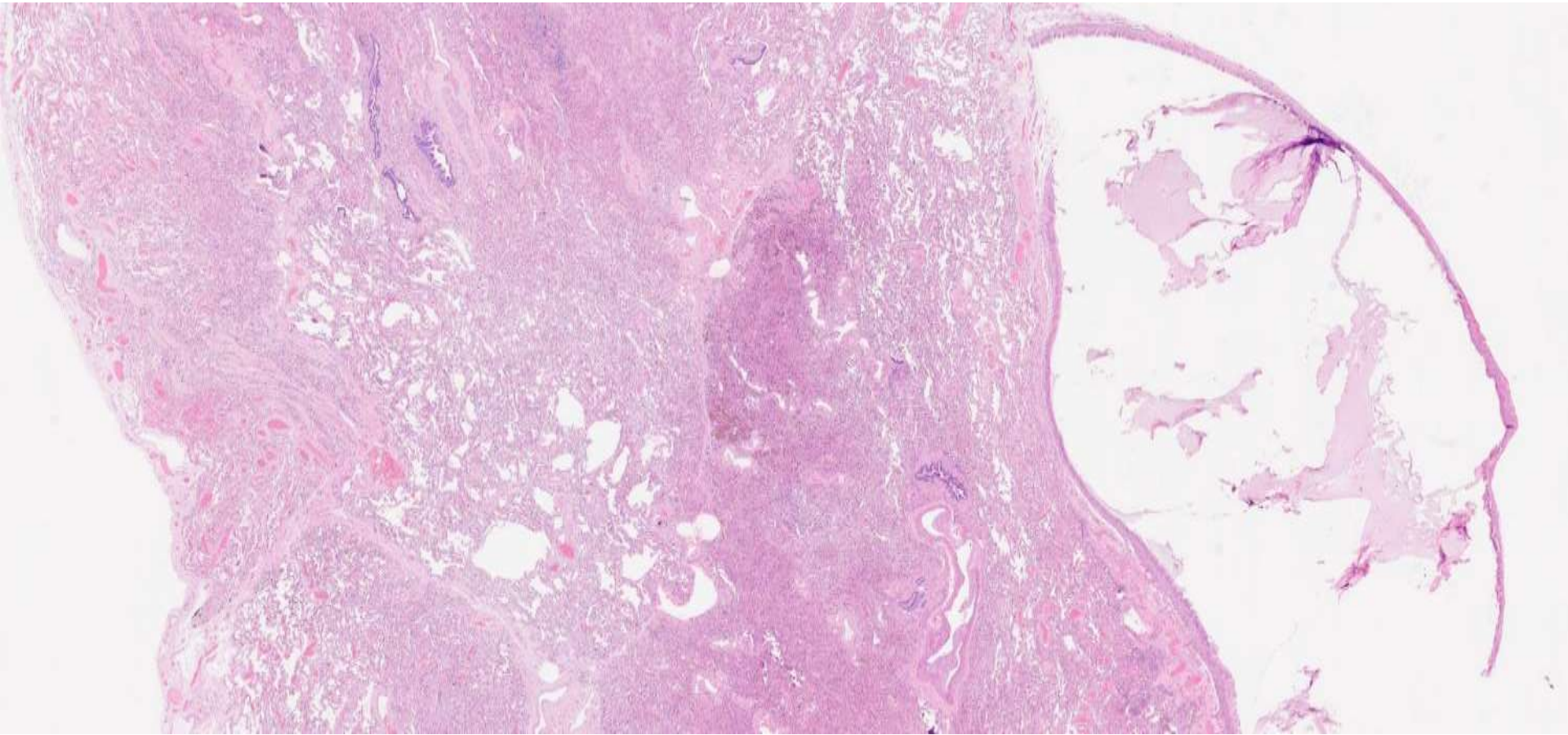
Direct links to scanned slides:

**Ankur Sangoi; El Camino Hospital**

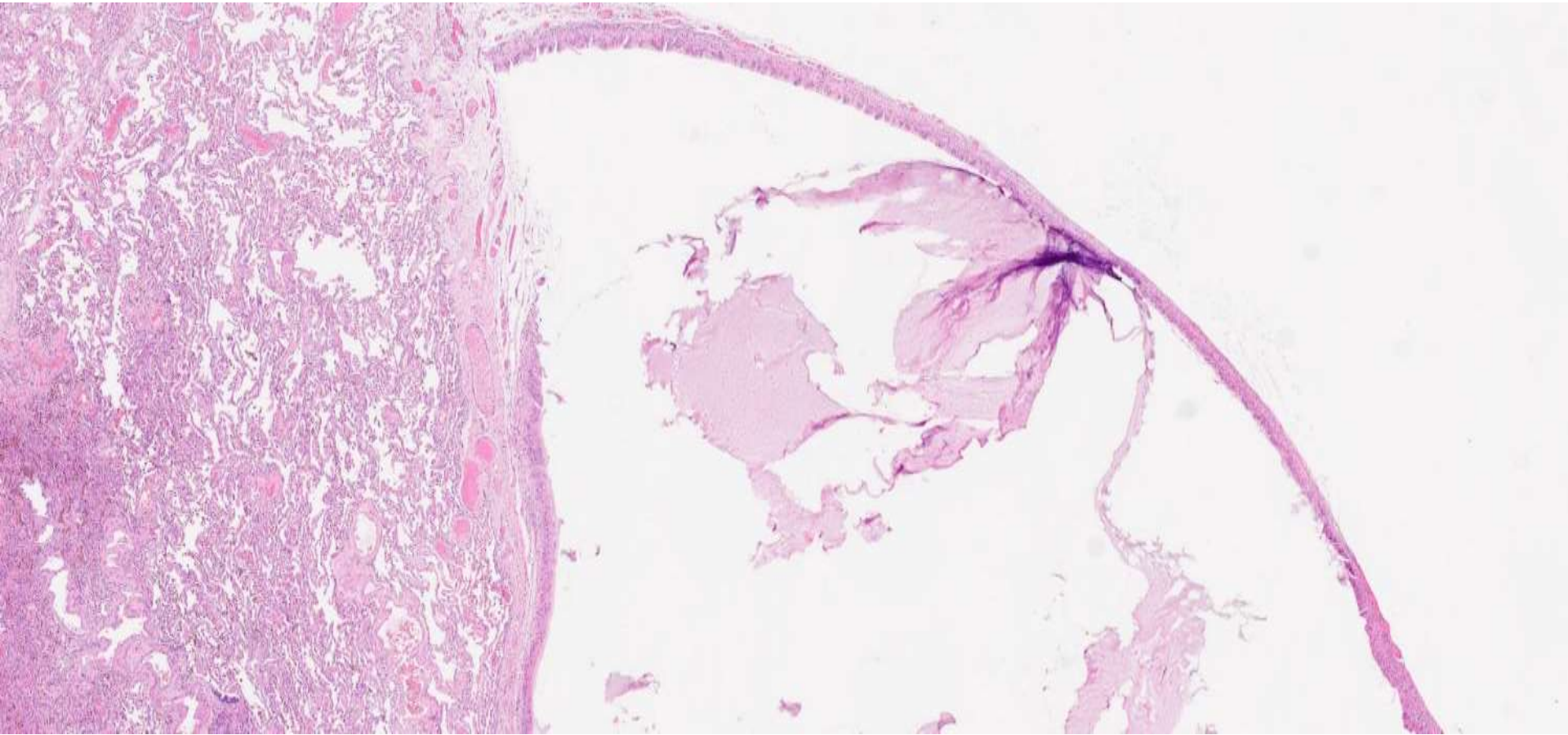
Middle aged M presents with epididymitis. Epididymis excision submitted.

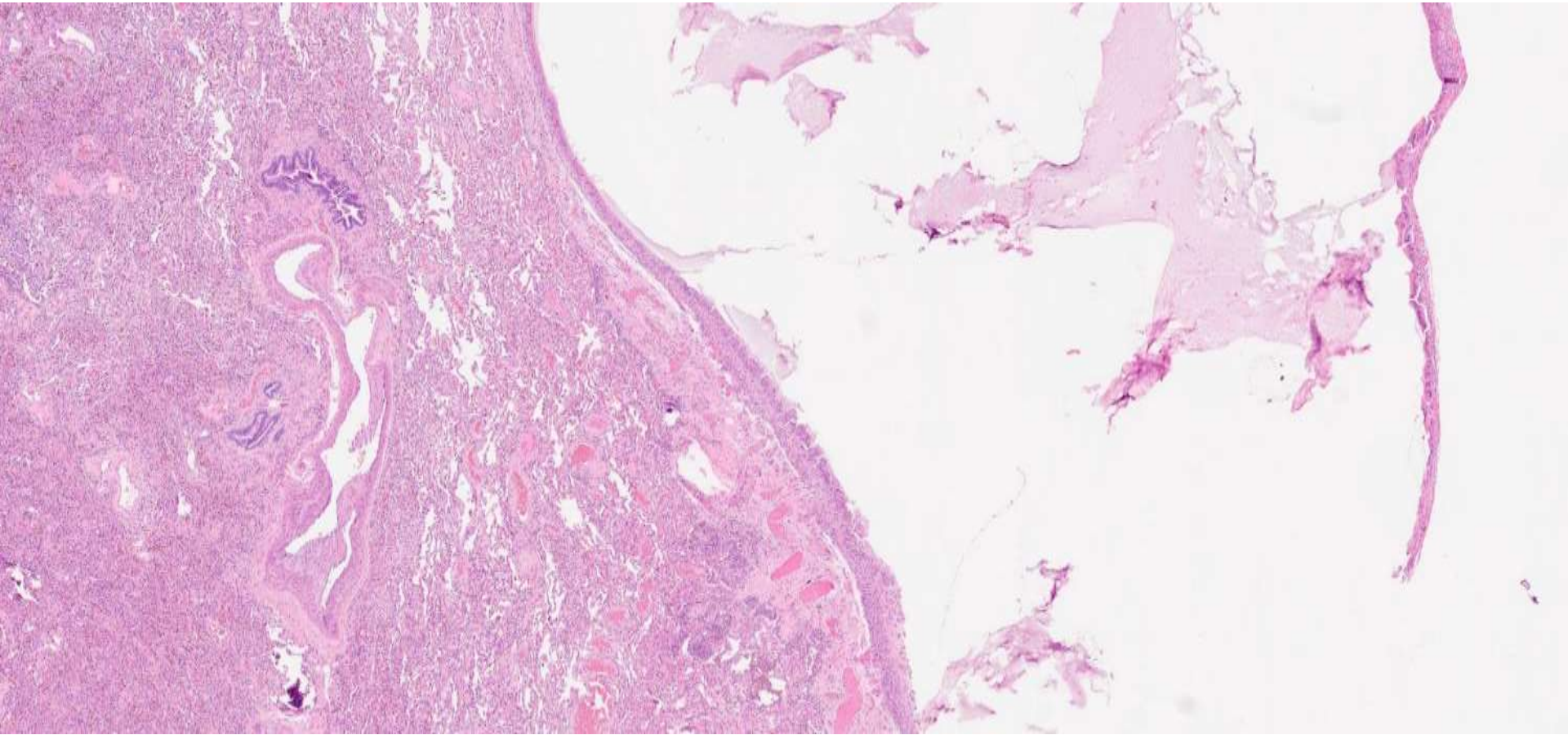




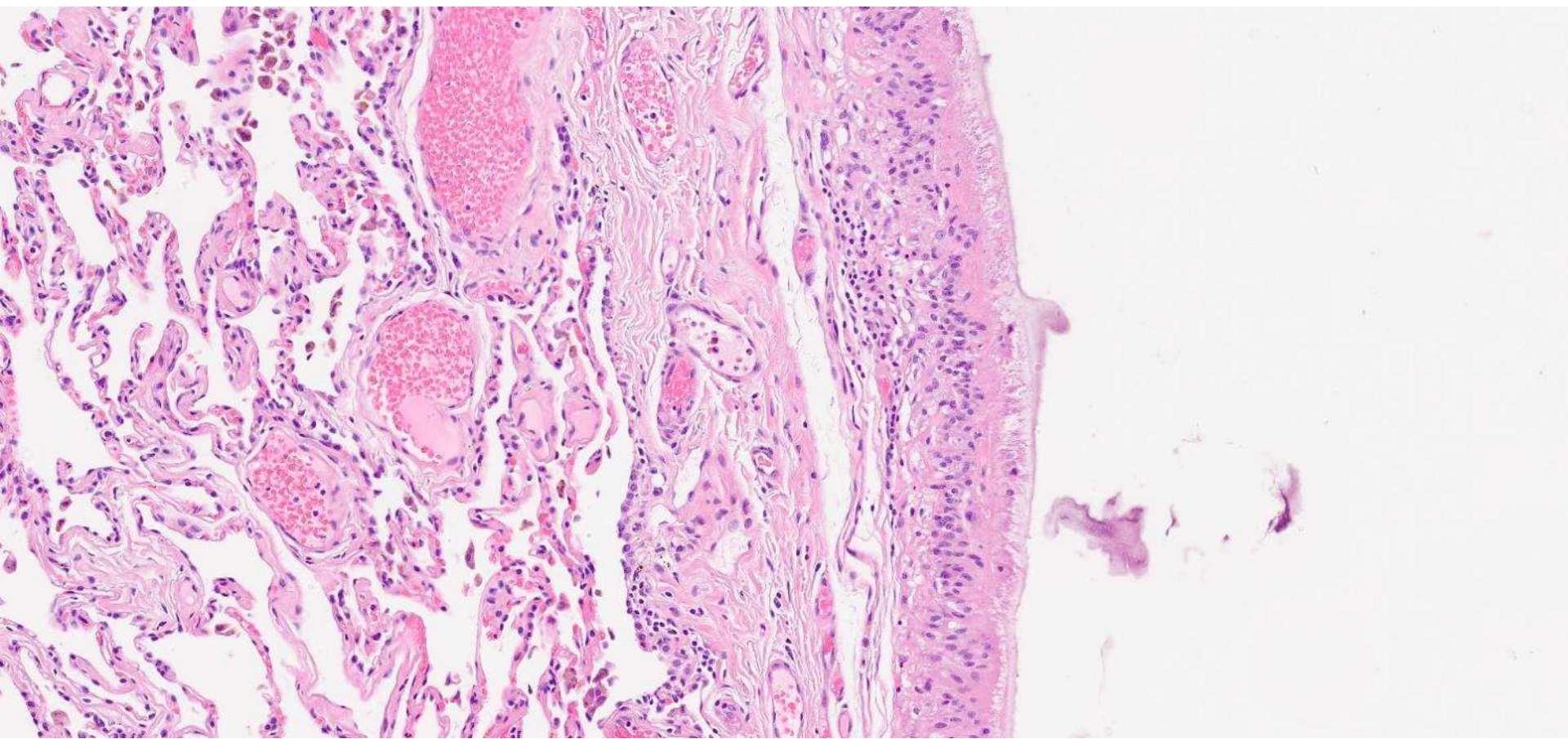


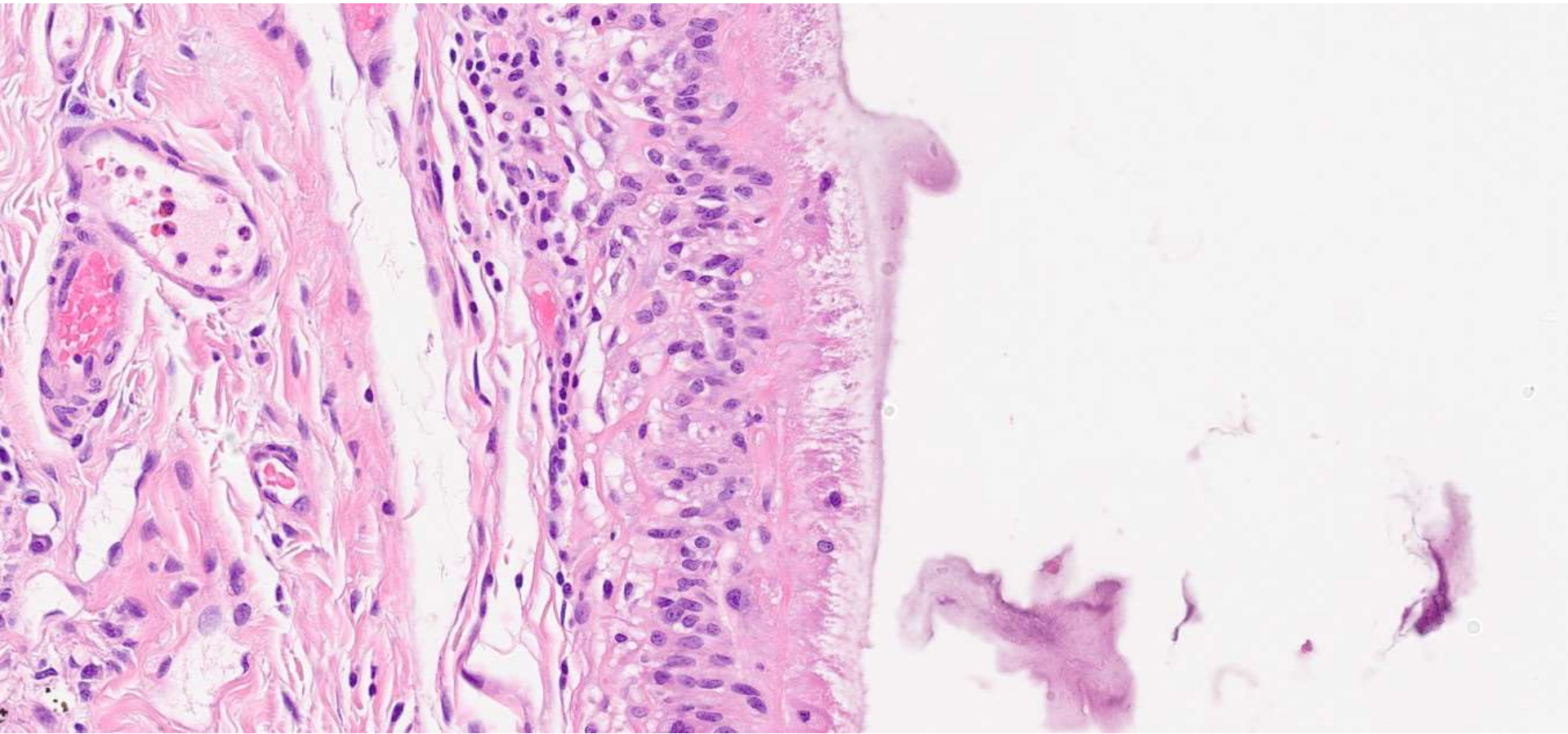




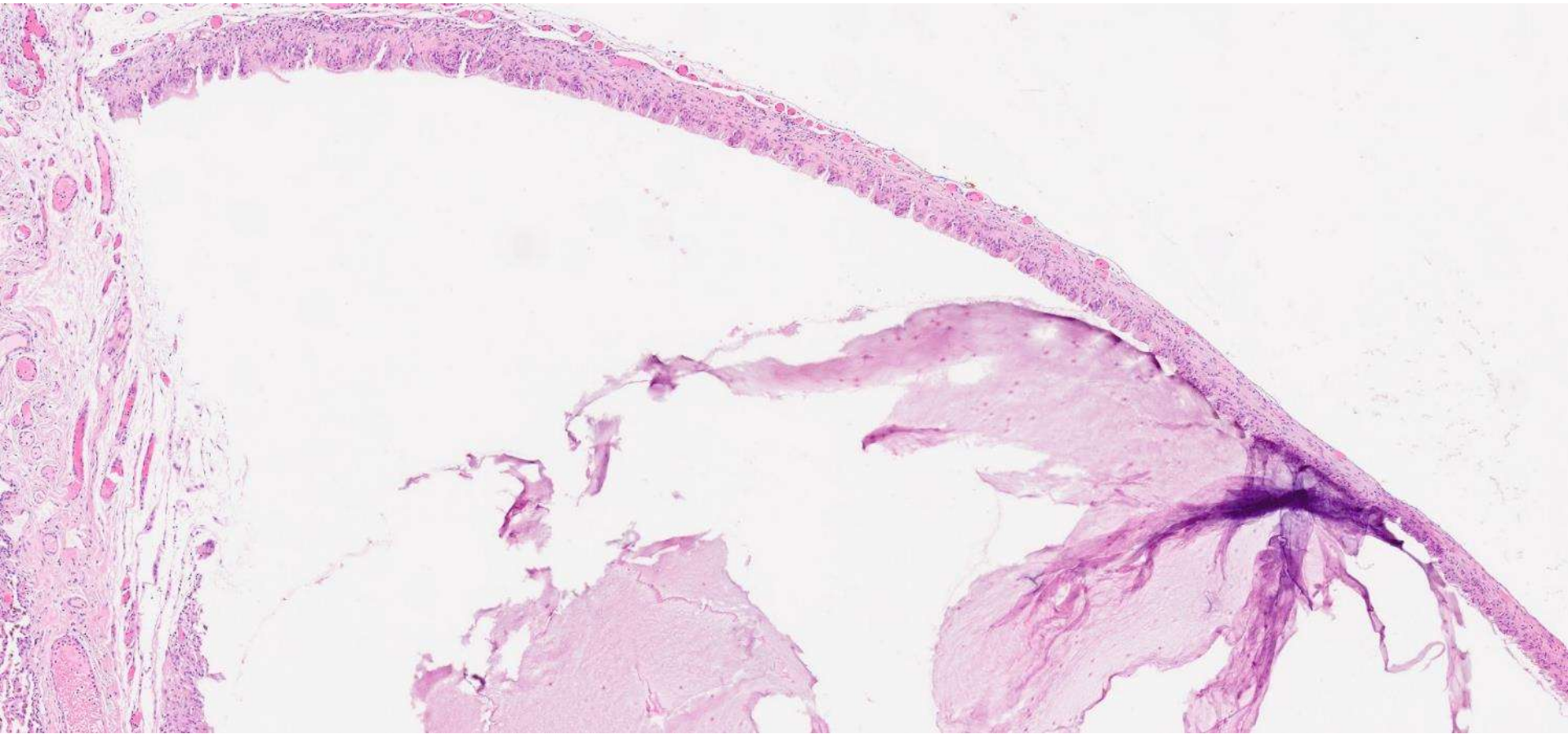


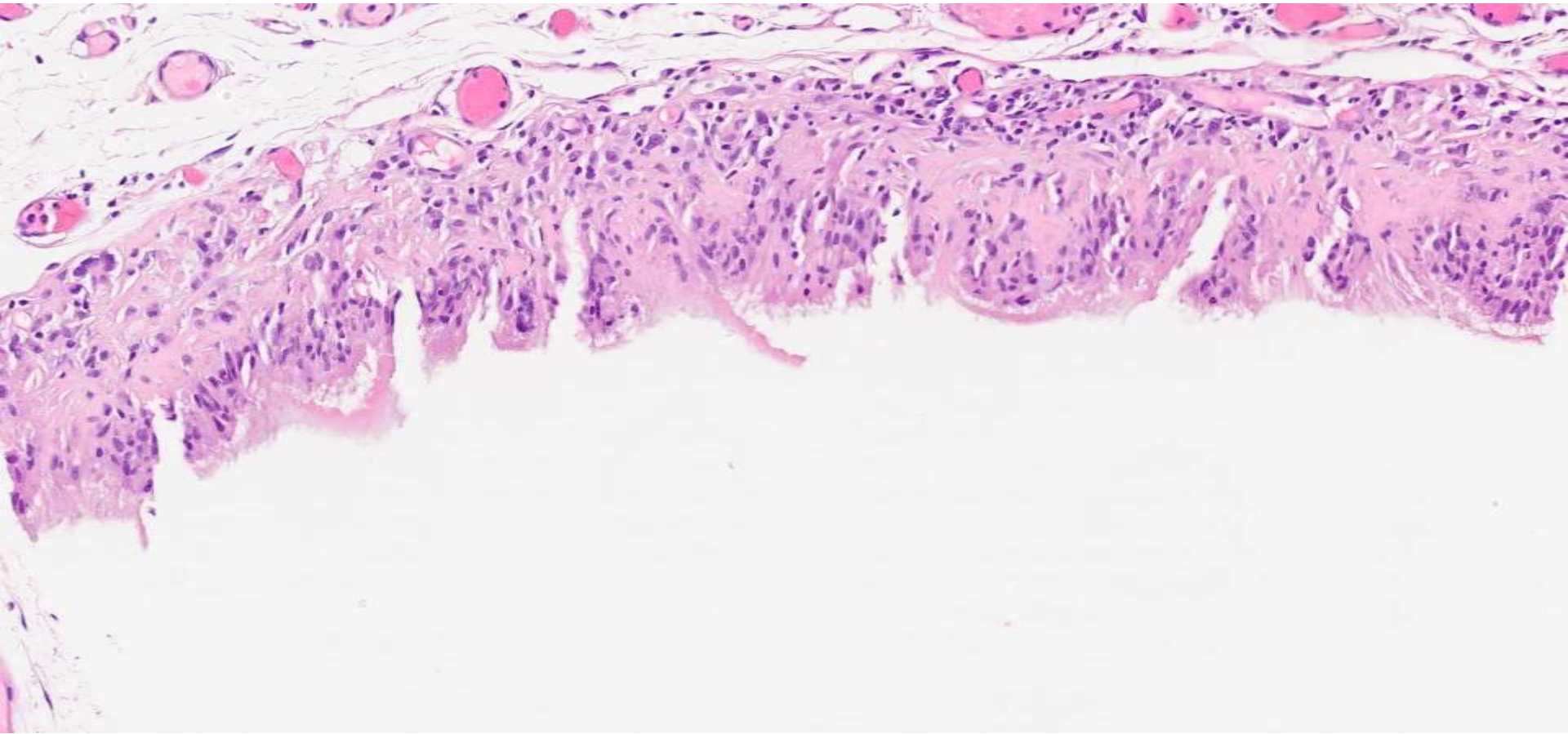




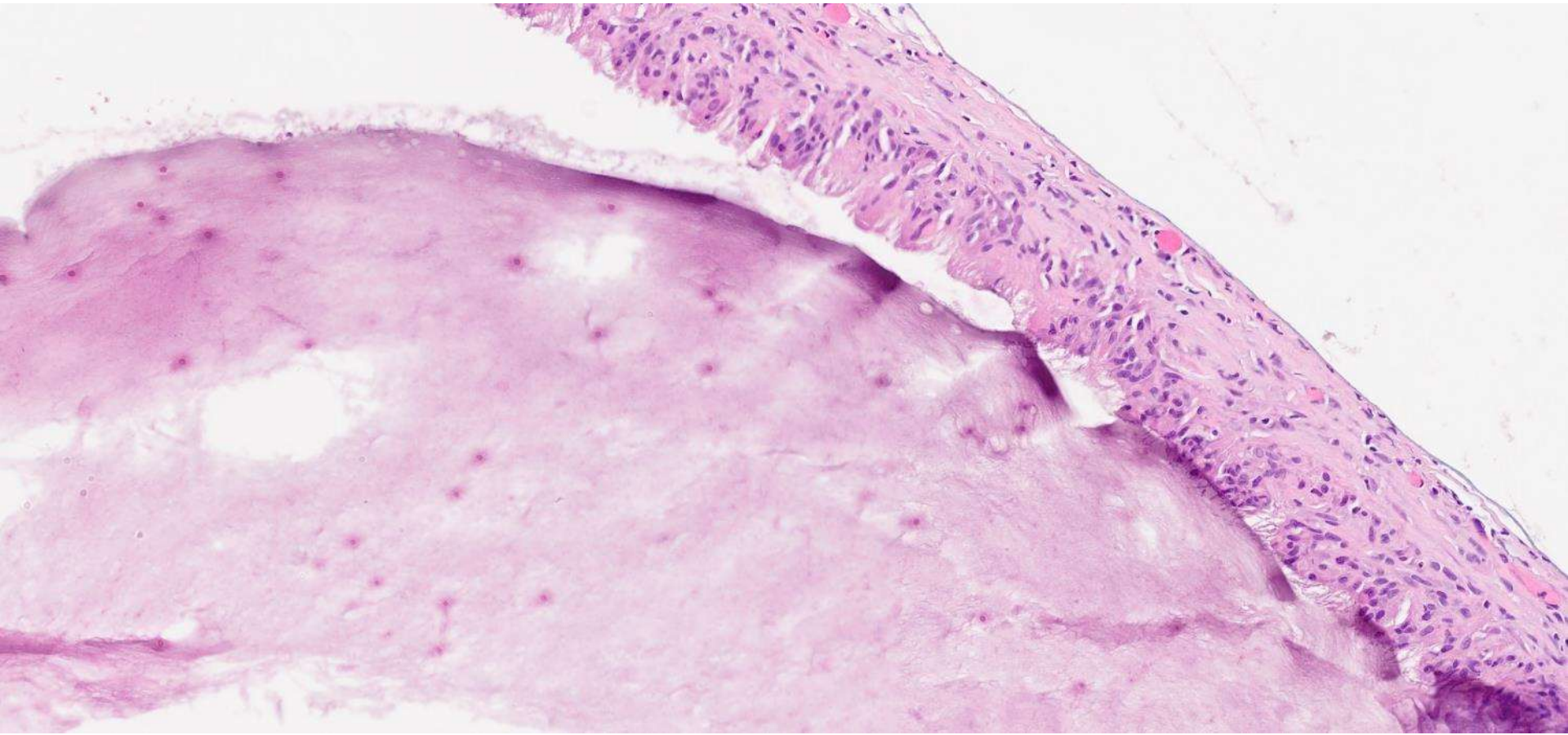












# DIAGNOSIS?

