

# Yorkshire general Histopathology EQA

## Case Response Analysis

**Circulation:** N

**Case number:** 400

**Number of responses:** 68

**Date:** 23 MAY 07

**Clinical:** Routine hysterectomy and bilateral salpingo-oophorectomy for menorrhagia Female aged 46

**Specimen:** Left ovary and tube

**Macro:** Left ovary measures 3 x 2 x 2cm and within it is a circumscribed creamy nodule 1cm diameter. Fallopian tube normal.

**Diagnostic categories:**

	<b>Score:</b>
1 Brenner tumour	5.59
2 Brenner tumour ,benign	4.26
3 Transitional cell adenofibroma	0.15

**Highest scoring diagnosis was** 1 **with** 5.59

*Asterisks (if any) indicate dangerous diagnoses.*

**Secondary diagnoses and comments (if any):**  
section of tumour is incomplete

**Original report and further information (if any):**  
Brenner tumour left ovary

**Circulation:** N

**Case number:** 401

**Number of responses:** 61

**Date:** 23 MAY 07

**Clinical:** Male 18 years

**Specimen:** undescended testis

**Macro:** testis measuring 3.5 x 2.0 x 2.0 cm, weighing 15 gms, no obvious gross abnormality

**Diagnostic categories:**

	<b>Score:</b>
1 Sertoli only with Sertoli nodule/hyperplasia	0.82
2 Germ cell aplasia (arrest) +/- atrophy	0.49
3 Cryptorchid testis / atrophy with Sertoli cell hyperplasia	3.11
4 Sex cord stromal tumourlet +/- atrophy	0.16
5 Sertoli cell nodules +/- atrophy/undesc testis	1.64
6 Undescended testis/atrophic/ cryptorchid testis	1.80
7 Sertoli only syndrome (+undescended testis)	0.82
8 Sertoli cell hyperplasia	0.82
9 sertoli cell hyper with sex cord ST	0.16
10 Intratubular germ cell neoplasia	0.16

**Highest scoring diagnosis was** 3 **with** 3.11

*Asterisks (if any) indicate dangerous diagnoses.*

**Secondary diagnoses and comments (if any):**  
tiny focus of sex-cord tumour with annular tubules is presentX2

**Original report and further information (if any):**  
azoospermia with sertolicell nodules/hyperplasia

# Yorkshire general Histopathology EQA

## Case Response Analysis

**Circulation:** N

**Case number:** 402

*Number of responses:* 68

*Date:* 23 MAY 07

*Clinical:* Developed acute abdomen one week after admission for exacerbation of COPD. Male aged 70

*Specimen:* colon

*Macro:* Total colectomy - dilated colon with small perforation

**Diagnostic categories:**

**Score:**

1	Pseudomembranous colitis	9.31
2	Ischaemic colitis	0.25
3	Most probably pseudomembranous colitis	0.15
4	Ischaemic or pseudomemb colitis(indistinguishable)	0.29

*Highest scoring diagnosis was* 1 *with* 9.31 *Asterisks (if any) indicate dangerous diagnoses.*

*Secondary diagnoses and comments (if any):*

culture/toxin for C.diff, MDT discussion to exclude ischaemia, diff diagnosis is ischaemic colitis

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

Pseudomenbrandous colitis

**Circulation:** N

**Case number:** 403

*Number of responses:* 67

*Date:* 23 MAY 07

*Clinical:* Molar pregnancy Female aged 21

*Specimen:* contents of suction evacuation

*Macro:* large quantity of haemorrhagic and tan tissue. Multiple vesicles present measuring up to 8mm. No foetal parts identified.

**Diagnostic categories:**

**Score:**

1	Complete hydatidiform mole	7.90
2	Partial mole	0.91
3	Hydatidiform mole	0.75
4	Hydatidiform mole prob partial	0.30
5	gestational trophoblastic dis ?early complete mole	0.15

*Highest scoring diagnosis was* 1 *with* 7.90 *Asterisks (if any) indicate dangerous diagnoses.*

*Secondary diagnoses and comments (if any):*

further blocks, immuno for P57

histological distinction betn partial and complete mole unreliable--ref for flow cyt X2 ploidy studies

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

complete hydatidiform mole

# Yorkshire general Histopathology EQA

## Case Response Analysis

**Circulation:** N

**Case number:** 404

*Number of responses:* 71

*Date:* 23 MAY 07

*Clinical:* Excision of lesion from left knee Female aged 59

*Specimen:* Skin

*Macro:* Triangle of skin measuring 0.6 x 0.5 x 0.4 cm

### **Diagnostic categories:**

	<b>Score:</b>
1 Leiomyoma	1.62
2 Angioleiomyoma	5.92
3 Cutaneous (pilar) leiomyoma	1.41
4 Vascular leiomyoma	0.99
5 neuroma	0.07

*Highest scoring diagnosis was* 2 *with* 5.92

*Asterisks (if any) indicate dangerous diagnoses.*

*Secondary diagnoses and comments (if any):*

immunos to confirm

chk with soft tissue colleague

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

Angioleiomyoma

**Circulation:** N

**Case number:** 405

*Number of responses:* 67

*Date:* 23 MAY 07

*Clinical:* Subtotal hysterectomy for fibroid uterus. Had Zoladex six weeks ago. Female aged 48

*Specimen:* Uterus

*Macro:* subtotal hysterectomy 9 x 7.5 x 4.5 cms. Ill defined whorled areas in myometrium? adenomyosis. Also small fibroids

### **Diagnostic categories:**

	<b>Score:</b>
1 Adenomyosis and foreign body reaction to ?what ?gel	5.82
2 FB granuloma to injected material	0.07
3 (benign) adenomyosis -- with comments	2.24
4 endometriosis with coagulative necrosis sec to Zoladex	0.15
5 Giant cell reaction to foreign material?rel to Zoladex	0.15
6 Post treatment infarction and FB reaction	0.15
7 Adenomyosis +evidence of embolisation	1.04
8 Zoladex induced inclusions in adenomyosis	0.15
9 embolisation	0.07
10 adenomyosis and vessel changes	0.15

*Highest scoring diagnosis was* 1 *with* 5.82

*Asterisks (if any) indicate dangerous diagnoses.*

*Secondary diagnoses and comments (if any):*

?odd fungal infection/not seen it in books , never seen it ? helminths

2 diagnoses present,

FBgiant cells adj to vessels?cause, exclude met breast ca

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

Adenomyosis, with evidence of previous embolisation attempt

# Yorkshire general Histopathology EQA

## Case Response Analysis

**Circulation:** N

**Case number:** 406

**Number of responses:** 70

**Date:** 23 MAY 07

**Clinical:** Small bowel intussusception and obstruction secondary to proximal jejunal tumour. Immunohistochemistry - positive for CD117 and CD34 Female aged 36

**Specimen:** Jejunal resection

**Macro:** 19 cm of small bowel with polypoidal tumour 6 x 5 x 2 cm with ulcerated surface. Well circumscribed at its base.

**Diagnostic categories:**

**Score:**

- |   |  |      |
|---|--|------|
| 1 | GIST   | 9.43 |
| 2 | GIST intermediate risk of malignant behavior | 0.57 |

**Highest scoring diagnosis was** 1 **with** 9.43

*Asterisks (if any) indicate dangerous diagnoses.*

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

CD117 to confirm, CD34

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

Gastrointestinal stromal tumour (intermediate category)

**Circulation:** N

**Case number:** 407

**Number of responses:** 70

**Date:** 23 MAY 07

**Clinical:** Slow growing nodule on left side. No special stains performed. Female aged 61

**Specimen:** skin biopsy from leg

**Macro:** skin ellipse 20 x 10 x 7 mm with an irregular indurated centre. The dermis contains a pale tumour

**Diagnostic categories:**

**Score:**

- |    |  |      |
|----|--|------|
| 1  | Hidradenoma/skin appendage tumour                  | 1.96 |
| 2  | Malignant sweat gland tumour/eccrine porocarcinoma | 2.00 |
| 3  | Inverted follicular keratosis/follicular poroma    | 0.07 |
| 4  | Proliferating epidermal cyst/ trichilemmal cyst    | 1.03 |
| 5  | Nodular (eccrine) hidradenoma                      | 2.13 |
| 6  | Eccrine poroma (benign)                            | 1.01 |
| 7  | Eccrine poroma/adnexal tumour                      | 0.86 |
| 8  | Squamous cell carcinoma?metastatic , glomus tumour | 0.30 |
| 9  | Sweat gland carcinoma arising in hidradenoma       | 0.14 |
| 10 | Very complex adnexal tuomour , pilar tumour        | 0.50 |

**Highest scoring diagnosis was** 5 **with** 2.13

*Asterisks (if any) indicate dangerous diagnoses.*

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

infiltrative/worrying/refer fro second opinion

not suitable for EQA X 2, immunos

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

Benign nodular and tubular hidradenoma

# Yorkshire general Histopathology EQA

## Case Response Analysis

**Circulation: N**

**Case number: 408**

Number of responses: 71

Date: 23 MAY 07

**Clinical:** Painful lump on DIPJ, increasing in size Female - aged 86

**Specimen:** Toe

**Macro:** Distal toe 2.5cm in length

	<b>Diagnostic categories:</b>	<b>Score:</b>
1	Gout	4.49
2	Gouty tophus	5.35
3	Tophus (crystals not needle shaped)	0.14
4	rheumatoid nodule	0.01

Highest scoring diagnosis was 2 with 5.35

Asterisks (if any) indicate dangerous diagnoses.

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

crystals not needle shaped --consider pseudogout

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

Gout

**Circulation: N**

**Case number: 409**

Number of responses: 69

Date: 23 MAY 07

**Clinical:** Anaemia, ODG showed gastric polyps Male aged 80

**Specimen:** Gastric biopsies

**Macro:** Three mucosal biopsies up to 0.3cm

	<b>Diagnostic categories:</b>	<b>Score:</b>
1	Inflamed metaplastic/hyperplastic polyp	1.01
2	Regenerative (hyperplastic ) polyp	1.48
3	Hyperplastic polyp	5.80
4	Foveolar hyperplasia, intestinal metaplasia, acute infl	0.29
5	Benign inflammatory polyp	0.58
6	Hyperplastic polyp?CMV type inclusions	0.14
7	metaplastic atrophic gastritis , eosinophilic gastritis	0.26
8	Inflamed gastric mucosa?hyperplastic polyp	0.14
9	hyperplastic/inflammatory polyp	0.14
10	hyperplastic polyp with lowgrade dysplasia	0.14

Highest scoring diagnosis was 3 with 5.80

Asterisks (if any) indicate dangerous diagnoses.

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

worrying features, needs levels , need further info, chromogranin for endocrine hyperplasia , ask for rpt biopsy, need further opinion

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

Hyperplastic polyps (gastric)

