

# South East England General Histopathology EQA Scheme



7808

## Round m Final Case Analyses

Cases 780 to 791

Circulated  
January- February 2020  
143 responses (91.08%)

Prepared April 2020

For information on scoring and statistical analysis, please see explanation on our website under section "How the scoring works".

Authorised by:

Prof J Schofield

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With thanks to those who contributed to this round:

Trust	ISO accreditation number
<b>Maidstone and Tunbridge Wells NHS Trust</b>	<b>8062</b>
<b>East Sussex Healthcare NHS Trust</b>	<b>8790</b>
<b>Western Sussex Hospitals NHS Foundation Trust</b>	<b>/</b>
<b>Kingston Hospital NHS Foundation Trust</b>	<b>8132</b>
<b>King's College Hospital NHS Foundation Trust</b>	<b>9705</b>
<b>Surrey and Sussex Healthcare NHS Trust</b>	<b>/</b>
<b>Lewisham &amp; Greenwich NHS Trust</b>	<b>9330</b>
<b>Colchester Hospital University NHS Foundation Trust</b>	<b>9316</b>
<b>Frimley Park Hospital NHS Foundation Trust</b>	<b>9727</b>
<b>Guys and St Thomas' NHS Foundation Trust</b>	<b>9323</b>

**Case Number:** m780

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**Diagnostic category:** GI

**Clinical** : F65. Laparoscopic cholecystectomy - previous cholecystitis and obstructive jaundice. White spots all over liver - biopsy of one taken.

**Specimen** : Liver

**Macro** : Tan piece of tissue measuring 7 x 5 x 2 mm maximum.

	<b>Final Merges</b>	<b>Score</b>
1	Bile Duct Microhamartoma / Von Meyenburg Complex	<b>8.03</b>
2	Bile duct adenoma	<b>1.51</b>
3	Acute hepatitis	<b>0.14</b>
4	Sepsis	<b>0.07</b>
5	Reactive ductular proliferation & acute inflammation	<b>0.07</b>
6	Capsular fibrous plaque with reactive ductal proliferation	<b>0.07</b>
7	Multiple hepatic microabscesses	<b>0.07</b>
8	Bile duct adenoma	<b>0.03</b>

**Most popular diagnosis:** Bile Duct Microhamartoma / Von Meyenburg Complex

**Reported Diagnosis:** Von Meyenburg Complex

**Case Number:** m781

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**Diagnostic category:** Gynae

**Clinical** : F55. Subtotal hysterectomy + cervix

**Specimen** : Endomyometrium/ hysterectomy

**Macro** : Endometrium: Numerous papillary structures along the anterior endometrial component. Myometrium: markedly thickened, maximum width is 3.8cm.

	<b>Final Merges</b>	<b>Score</b>
1	Adenomyosis	<b>9.57</b>
2	Polypoid pseudodecidual reaction / progesterone effect	<b>0.29</b>
3	Endometrial polyp with hormonal pseudodecidualisation	<b>0.07</b>
4	Endometrial polyp with adenomyosis	<b>0.07</b>

**Most popular diagnosis:** Adenomyosis

**Reported Diagnosis:** Endometrium: atrophic pseudodecidualised benign endometrium. Myometrium: Adenomyosis

**Case Number:** m782

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**Diagnostic category:** Endocrine

**Clinical** : M74. Right nephrectomy for cancer. Also adrenal lesion

**Specimen** : Right adrenal

**Macro** : 27 mm adrenal tumour

	<b>Final Merges</b>	<b>Score</b>
1	Myelolipoma	<b>9.64</b>
2	Myolipoma	<b>0.22</b>
3	Myeloid metaplasia (bone marrow)	<b>0.07</b>
4	Extramedullary haematopoiesis	<b>0.07</b>

**Most popular diagnosis:** Myelolipoma

**Reported Diagnosis:** Myelolipoma

**Case Number:** m783

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**Diagnostic category:** GU

**Clinical** : M60. Sebaceous cyst excised from scrotum

**Specimen** : Scrotal cyst

**Macro** : An irregular piece (12 x 10mm) with cyst (3mm) containing white material.

	<b>Final Merges</b>	<b>Score</b>
1	Calcinosis Cutis	9.91
2	Ruptured epidermal inclusion cyst	0.09

**Most popular diagnosis:** Calcinosis Cutis

**Reported Diagnosis:** Idiopathic calcinosis cutis, calcified cyst with FB giant cell reaction

**Case Number:** m784

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**Diagnostic category:** Lymphoreticular

**Clinical** : F70. Enlarged left parotid gland

**Specimen** : Salivary gland

**Macro** : A piece of firm tan tissue 25 x 15 x 10mm. Slicing reveals a cyst measuring 20mm, no contents noted inside.

	<b>Final Merges</b>	<b>Score</b>
1	Lymphoepithelial cyst	<b>6.73</b>
2	Warthin Tumour / cyst	<b>3.04</b>
3	Branchial cleft cyst	<b>0.15</b>
4	Lymphadenoma	<b>0.08</b>
	<b>THIS CASE HAS BEEN EXCLUDED FROM PERSONAL SCORES</b>	

**Most popular diagnosis:** Lymphoepithelial cyst

**Reported Diagnosis:** Lymphoepithelial cyst

**Case Number:** m785

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**Diagnostic category:** Respiratory

**Clinical** : F76. Previous breast cancer. Previous talc pleurodesis. Large left sided effusion? malignancy.

**Specimen** : Lung

**Macro** : Multiple pieces of tissue, the largest measuring 10 x 8 x 3mm and the smallest 6 x 3 x 2mm.

**Relevant information on special stains / immunohistochemistry:**

Immunohistochemistry shows variably-disrupted mesothelium (pancytokeratin, WT1 and calretinin), but no staining with TTF-1, CEA, Ber-EP4, CD56, ER or HER2. CD20 and CD79a shows B-cell follicles. The germinal centres are CD10+/BCL6+/BCL2-. CD23 follicular dendritic cell meshworks and noted. There is mixed kappa and lambda light chain immunostaining. CD3 and CD5 show scattered reactive T-cells. There is no cyclin D1 immunostaining. The Ki67 proliferation index is low.

	<b>Final Merges</b>	<b>Score</b>
1	Foreign body reaction to talc	<b>8.85</b>
2	Reactive lymphoid reaction	<b>0.56</b>
3	Non-diagnostic. Tests req to rule out lymphoprol process	<b>0.15</b>
4	Reactive fibrosing pleuritis	<b>0.14</b>
5	Talc reaction and follicular lymphoma	<b>0.07</b>
6	NHL B cell lymphoma	<b>0.07</b>
7	Should not report without discussion with Lympho path	<b>0.07</b>
8	Sub-optimal due to crush artefact	<b>0.07</b>
9	Reactive mesothelial hyperplasia	<b>0.01</b>

**Most popular diagnosis:** Foreign body reaction to talc

**Reported Diagnosis:** Chronic inflammation in a follicular pattern and foreign-body-type reaction to crystalline material, consistent with previous talc pleurodesis.

**Case Number:** m786 [Click here to view digital image](#)

**Diagnostic category:** Breast

**Clinical** : M69. Right chest wall mass M4 U3

**Specimen** : Two fibrofatty tissue cores measuring 6mm and 8mm

**Macro** : M69. Right chest wall mass M4 U3

**Relevant information on special stains / immunohistochemistry:**

CD34/desmin positive/ SMA focal positive. MNF116, S100 negative

	<b>Final Merges</b>	<b>Score</b>
1	Myofibroblastoma	<b>7.92</b>
2	Solitary fibrous tumour	<b>1.01</b>
3	Pseudoangiomatous stromal hyperplasia (PASH)	<b>0.65</b>
4	Myoepithelioma	<b>0.07</b>
5	Angiomyofibroblastoma	<b>0.07</b>
6	Glomus Tumour	<b>0.07</b>
7	Leiomyoma	<b>0.07</b>
8	Angioleiomyoma	<b>0.07</b>
9	Dermatofibrosarcoma protuberance (DFSP)	<b>0.04</b>

**Most popular diagnosis:** Myofibroblastoma

**Reported Diagnosis:** Mammary myofibroblastoma





**Case Number:** m788

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**Diagnostic category:** Skin

**Clinical** : M54. Lesion on back. 17/12 ?hypertrophic scar

**Specimen** : Skin

**Macro** : ellipse of skin 47 x 20 x 13mm with scar 35 x 13, TS x 2.

	<b>Final Merges</b>	<b>Score</b>
1	Keloid scar and ulcerated cyst	<b>9.92</b>
2	Ruptured epidermal cyst with FB reaction and scarring	<b>0.07</b>
3	Elastofibroma	<b>0.01</b>

**Most popular diagnosis:** Keloid scar and ulcerated cyst

**Reported Diagnosis:** Benign keloid over an inflamed ruptured epidermal cyst

**Case Number:** m789 [Click here to view digital image](#)

**Diagnostic category:** Miscellaneous

**Clinical** : F70. Large lump on infero-medial border of scapula deep to muscle

**Specimen** : Lump from right scapula

**Macro** : Nodule of fibrofatty tissue (8 x 5 x 3cm)

	<b>Final Merges</b>	<b>Score</b>
1	Elastofibroma	<b>8.80</b>
2	Spindle cell lipoma	<b>0.64</b>
3	Fibrolipoma	<b>0.16</b>
4	Intramuscular lipoma	<b>0.14</b>
5	Nuchal type fibroma	<b>0.07</b>
6	Nodular panniculitis	<b>0.07</b>
7	Angiomyolipoma	<b>0.07</b>
8	Atypical lipomatoid tumour	<b>0.05</b>

**Most popular diagnosis:** Elastofibroma

**Reported Diagnosis:** Elastofibroma

## EDUCATIONAL CASE

**Case Number:** m790 [Click here to view digital image](#)

**Diagnostic category:** Miscellaneous

**Clinical** : M82. Left lower eyelid: ? Pyogenic granuloma

**Specimen** : Eyelid

**Macro** : Skin ellipse measuring 10 x 6 x 2 mm, bearing a nodular lesion of 4mm

**Relevant information on special stains / immunohistochemistry:**

IHC: Ber-EP4, EMA, CK7 and p63: positive. Ki-67: high proliferation index.

**Suggested diagnoses:**

<p>Sebaceous carcinoma x 95 Sebaceous gland carcinoma x 6 Intra-epidermal sebaceous carcinoma Sebaceous carcinoma in situ Ocular sebaceous carcinoma Poorly differentiated sebaceous carcinoma Poorly differentiated sebaceous/Meibomian gland carcinoma Poorly differentiated sebaceous cell carcinoma Poorly differentiated carcinoma, ?Sebaceous (versus squamous) Poorly differentiated squamous cell carcinoma Malignant epithelial tumour-poorly diff Squamous cell carcinoma – although looks like melanoma! Porocarcinoma x 5 Basosquamous carcinoma x 4 Basosquamous cell carcinoma x 2 Basaloid squamous cell carcinoma x 5 Basaloid squamous cell carcinoma of the eyelid Early Squamous cell Carcinoma Squamous cell ca Poorly differentiated squamous cell carcinoma</p>	<p>Basal cell carcinoma with sebaceous differentiation x 2 Basal-cell carcinoma x 2 Basal cell carcinoma with sebaceous differentiation x 2 Basaloid SCC x 4 Basaloid type poorly differentiated squamous cell carcinoma BCC with sebaceous differentiation x 2 Basaloid SCC with Bowen's disease x 2 Bowen disease and early invasive squamous cell carcinoma Adnexal carcinoma Skin adnexal carcinoma Adnexal carcinoma/ sebaceous carcinoma Meibomian gland carcinoma x 2 Apocrine carcinoma carcinoma Cryptococcus Extra mammary Paget's disease with possible invasion (adenocarcinoma) No S100?</p>
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**Reported Diagnosis:** Sebaceous carcinoma.

## EDUCATIONAL CASE

**Case Number:** m791

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**Diagnostic category:** GI

**Clinical** : F26. Appendix

**Specimen** : Appendix

**Macro** : Appendix showing fibro-obliterative change at tip but otherwise macroscopically unremarkable.

### Suggested diagnoses:

<p>Cryptosporidiosis x 56 Ganglioneuroma x 8 Fibrosis obliteration at tip of appendix x 8 Lymphangioma x 5 Microsporidiosis x 5 No significant abnormalities x 5 Lymphangiectasia x 4 Normal x 5 Normal appendix x 3 Minimal changes Normal histologic features in appendix Dilated lymphatics, unremarkable Diverticulosis x 3 Fungal infection x 3 Fungal organisms x 3 Fungal spores in lumen Parasite Parasitic (protozoan) infestation seen on surface of luminal cells Spores like organisms on the epithelial surface Microorganisms noted on the surface epithelium. Some form of infection Basophilic organisms on luminal surface Nothing obvious. ??vascular abnormality Serosal adhesions indicating previous inflammatory episodes Neurofibroma x 2 Leiomyoma x 2 Smooth muscle hyperplasia/leiomyoma x 2</p>	<p>Fibrous obliteration x 2 Fibrous obliteration of Appendix with adipose tissue within submucosa Adipose and fibrous obliteration of the tip Not sure fibro-obliterative change Appendiceal neuroma Mucosal neuroma Neuroma Granular cell tumour Sebaceous carcinoma Amoebic enteritis Fibrolipomatous hamartoma Angiomyolipoma Lipoblastoma Benign vascular malformation Vascular malformation Chronic appendicitis Lymphocytic appendicitis Appendiceal neuroma/neurogenic appendicitis Granulomatous appendicitis? Crohn's Histoplasma Histiocytic collection Absence of plasma cells, in keeping with common variable immune deficiency (CVID). Dots along surface of epithelium Benign; mural inflammation at neck – eosinophils and foamy macrophages Focal ulceration with eosinophils</p>
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**Reported Diagnosis:** Cryptosporidiosis.