



# South East England General Histopathology EQA Scheme

## Round 5 Final Case Analyses

Cases 853 to 864

Circulated  
May - June 2022

148 responses (84.57%)

Prepared July 2022

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

Authorised by:

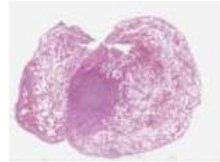
Prof J Schofield

Date: 27/7/22

With thanks to those who contributed to this round:

Trust	ISO accreditation number
<b>Guys and St Thomas's NHS Foundation Trust</b>	<b>9323</b>
<b>Mid and South Essex NHS Foundation Trust</b>	<b>7880</b>
<b>Swansea Bay University Health Board</b>	<b>8990</b>
<b>Maldstone and Tunbridge Wells NHS Trust</b>	<b>8062</b>
<b>University Hospitals Sussex NHS Foundation Trust</b>	
<b>Frimley Park Hospital NHS Foundation Trust</b>	<b>9727</b>
<b>Kingston Hospital NHS Foundation Trust</b>	<b>8132</b>
<b>Royal Surrey County Hospital NHS Foundation Trust</b>	<b>1242</b>

**Case Number:** 853



**Diagnostic category:** Respiratory

**Clinical** : M69. Left upper lobe mass.

**Specimen** : Lung

**Macro** : 10mm firm white nodule in lung parenchyma.

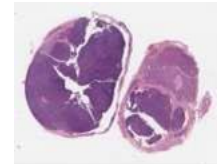
**Immuno** : Lesional Cells: CD20+, CD79a+, CD5+, CD23+, p53+, CD10-  
, cyclinD1-, CD38-, mib<2%

	<b>Final Merges</b>	<b>Score</b>
1	Pseudolymphoma / lymphomatoid granulosis	0.16
2	Lymphoid interstitial pneumonia	0.04
3	CLL/SLL and Granulomatous inflammation	9.01
4	Granulomatous inflammation (foreign body / mycobacterial)	0.18
5	Large / diffuse B cell lymphoma	0.21
6	Plasma cell granuloma	0.11
7	Lymphoid infiltrate with granulomatous component. Send for 2 <sup>nd</sup> opinion	0.07
8	NHL	0.21

**Most popular diagnosis:** CLL/SLL and Granulomatous inflammation

**Reported Diagnosis:** Nodular deposit of CLL

Case Number: 854



Diagnostic category: Endocrine

Clinical : M80. Left inferior parathyroid.

Specimen : Parathyroid

Macro : Nodule of soft brown tissue, weight 4gr, 30x15x10mm

Immuno : No details provided

**PLEASE NOTE THIS CASE WILL  
BE EXCLUDED FROM PERSONAL  
ANALYSES**

	Final Merges	Score
1	Parathyroid adenoma	4.34
2	Parathyroid carcinoma	3.90
3	Atypical parathyroid tumour	1.76
4	Parathyroid hyperplasia	0.01

Most popular diagnosis: Parathyroid adenoma

Reported Diagnosis: Parathyroid adenoma



Case Number: 855

Diagnostic category: Gynae

Clinical : F70. Tubo-ovarian mass involving sigmoid colon and fistulation into uterus.

Specimen : Resection - Left tubo-ovarian mass

Macro : Uterus 69 x 35 x 26mm. Endometrium appears atrophic, less than 1mm deep. Myometrium maximum 10mm deep. 4mm hole at left cornua patent through to serosa

Immuno : No details provided

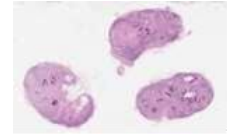
**PLEASE NOTE THIS CASE WILL HAVE ALL DIAGNOSES MERGED DUE TO TECHNICAL DIFFERENCES BETWEEN THE SLIDES. ALL PARTICIPANTS WILL RECEIVE A SCORE OF 1.0 IF THIS CASE WAS ANSWERED**

	Final Merges	Score
1	Stromal tumour / mesenchymal tumour / sarcoma / granulosa cell tumour	0.60
2	Myeloma / plasma cell dyscrasia	0.20
3	Chronic Endometritis	7.70
4	Inflammation NOS / pyometra uterus with perforation / chronic salpingitis	0.70
5	Endometriotic cyst / endometrioma / endometriosis	0.43
6	Unassessable	0.07
7	Chronic tubo-ovarian abscess	0.07
8	Chronic endometritis and cellular leiomyoma	0.06
9	Colon diverticulitis with fistula to ovary and uterus / colitis	0.10
10	Endometriosis and stromal proliferation ? neoplastic	0.07

Most popular diagnosis: na

Reported Diagnosis: Acute on chronic endometritis

**Case Number:** 856



**Diagnostic category:** Lymphoreticular

**Clinical** : M65. Right groin node. CT shows multiple lymph nodes in thoracic and abdominal region. IgM paraproteinaemia.

**Specimen** : Groin node

**Macro** : Lymph node 35 x15x10mm

**Immuno** : Lymphoid cells are kappa light chain restricted.  
MYD88/L265P fusion detected

	<b>Final Merges</b>	<b>Score</b>
1	<b>Lymphoplasmacytic lymphoma / Waldenstroms +/- AMYLOID</b>	<b>8.92</b>
2	<b>Amyloidosis</b>	<b>0.72</b>
3	<b>Multiple myeloma and amyloid</b>	<b>0.07</b>
4	<b>Marginal zone lymphoma with amyloid</b>	<b>0.07</b>
5	<b>Amyloid secondary to plasma cell neoplasm</b>	<b>0.22</b>

**Most popular diagnosis:**

**Lymphoplasmacytic lymphoma / Waldenstroms +/- AMYLOID**

**Reported Diagnosis: Amyloid, Lymphoplasmacytic lymphoma**

**Case Number: 857**



**Diagnostic category:** Breast

**Clinical** : M55. History of testicular cancer. M2, U2.

**Specimen** : Breast core biopsy

**Macro** : Two cores, largest measuring 15mm.

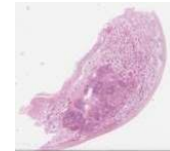
**Immuno** : No details provided

	<b>Final Merges</b>	<b>Score</b>
1	<b>Gynaecomastia +/- PASH</b>	<b>9.65</b>
2	<b>Ductal hyperplasia</b>	<b>0.14</b>
3	<b>PASH</b>	<b>0.14</b>
4	<b>Angiosarcoma</b>	<b>0.07</b>

**Most popular diagnosis: Gynaecomastia +/- PASH**

**Reported Diagnosis: Gynaecomastia, B2:Benign.**

Case Number: 858



Diagnostic category: GU

Clinical : M71. Orchidectomy for right testicular lesion

Specimen : Orchidectomy

Macro : Radical orchidectomy specimen. Slicing revealed a hydrocele. The testis was 35mm maximum with haemorrhagic parenchymal nodule 14mm diameter.

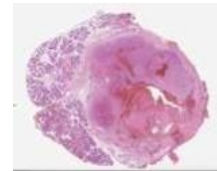
Immuno : No details provided

	Final Merges	Score
1	Angiosarcoma	0.22
2	Haemangioma	9.24
3	Angiomyolipoma	0.18
4	Sclerosing haemangiomatoid nodule	0.07
5	Haemangioendothelioma	0.19
6	Adenomatoid tumour	0.04
7	Haematoma and Leydig cell hyperplasia	0.07

Most popular diagnosis: Haemangioma

Reported Diagnosis: Lobular capillary haemangioma (and testicular atrophy)

**Case Number:** 859



**Diagnostic category:** Miscellaneous

**Clinical** : M83. Right submandibular lump. Previous renal tumour.

**Specimen** : Salivary gland

**Macro** : Salivary gland, 45x35x20 mm containing a cream and haemorrhagic nodule 22x20x18mm

**Immuno** : No details provided

	<b>Final Merges</b>	<b>Score</b>
1	<b>Metastatic renal cell carcinoma</b>	<b>9.99</b>
2	<b>Primary clear cell tumour of salivary gland</b>	<b>0.01</b>

**Most popular diagnosis:** Metastatic renal cell carcinoma

**Reported Diagnosis:** Metastatic clear cell renal cell carcinoma



**Case Number:** 860

**Diagnostic category:** GI



**Clinical** : M69. Altered bowel habits - loose stools

**Specimen** : Transverse biopsy

**Macro** : Biopsies from transverse - 2 light tan biopsies 2 & 6mm.

**Immuno** : No details provided

	<b>Final Merges</b>	<b>Score</b>
1	<b>Collagenous colitis</b>	<b>9.93</b>
2	<b>Mild chronic colitis. Likely parasitic</b>	<b>0.07</b>

**Most popular diagnosis:** Collagenous colitis

**Reported Diagnosis:** Collagenous colitis

**Case Number:** 861



**Diagnostic category:** Skin

**Clinical** : F30 pigmented cystic lesion upper natal cleft

**Specimen** : Skin lesion

**Macro** : EOS 11 x 6mm. slicing shows a brownish nodule 8mm on the deep aspect

**Immuno** : No details provided

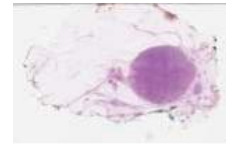
	<b>Final Merges</b>	<b>Score</b>
1	<b>Cellular blue naevus / Deep penetrating naevus</b>	<b>9.86</b>
3	<b>Atypical cellular blue naevus</b>	<b>0.07</b>
5	<b>Melanoma</b>	<b>0.03</b>
6	<b>Non-melanocytic spindle cell neoplasm</b>	<b>0.01</b>
7	<b>Dermatofibroma</b>	<b>0.03</b>

**Most popular diagnosis:**

**Cellular blue naevus / Deep penetrating naevus**

**Reported Diagnosis: Benign cellular blue naevus**

**Case Number:** 862



**Diagnostic category:** Breast

**Clinical** : F70. Ovoid mass, right breast. M3.U3

**Specimen** : Breast WLE

**Macro** : Fatty Tissue with a well-defined round tumour 12mm.

**Immuno** : Positive: BCL2, ER, CD34, Desmin, PgR.  
Negative: CD10, AE1/AE3

	<b>Final Merges</b>	<b>Score</b>
1	<b>Myofibroblastoma / stromal spindle cell tumour</b>	<b>9.58</b>
2	<b>Solitary fibrous tumour</b>	<b>0.42</b>

**Most popular diagnosis:**

**Myofibroblastoma / stromal spindle cell tumour**

**Reported Diagnosis: Mammary Myofibroblastoma**

## EDUCATIONAL CASE

**Case Number:** 863



**Diagnostic category:** Skin

**Clinical** : F75. Patient on humera and methotrexate for rheumatoid arthritis. After holiday? bites in June. Now curious lesions on left outer upper elbow / back and leg. ?aetiology ? pyogenic granuloma ?Other.

**Specimen** : Skin lesion elbow

**Macro** : A skin excision 27 x 17 x 4mm, bearing a central ulcerated and tan lesion, 15 x 10mm.

**Immuno** : Giemsa highlights intracellular organisms

<p>Leishmaniasis x 126 Exaggerated insect bite reaction Granulomatous dermatitis – rule out fungi, afb, leishmania etc Granulomatous inflammation ?parasites ?leishmaniasis Chronic inflammation with infection- ? leishmaniasis Drug induced granulomatous inflammation Granulomatous dermatitis Dermal granulomatous inflammation with leishmania Nodular lymphohistiocytic infiltrate, treatment complication vs infectious (Giemsa findings noted) Fish tank granuloma <b>GRANULOMATOUS DERMATITIS</b> <b>?Cutaneous microsporidiosis in an immunosuppressed patient</b> Atypical mycobacterium (MAC) Granulomatous inflammation ? atypical mycobacterium Granulomatous inflammation secondary to Leishmaniasis</p>	<p>Non-necrotising granulomatous inflammation Granulation tissue with ? leishmaniasis Granulomatous dermatitis, consistent with Leishmaniasis  Atypical mycobacterial infection Chronic inflammatory and granulomatous dermatitis. Some histological features are suggestive of cutaneous leishmaniasis</p>
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**Reported Diagnosis: Cutaneous Leishmaniasis**

## EDUCATIONAL CASE



**Case Number:** 864

**Diagnostic category:** Miscellaneous

**Clinical** : M43. Left thigh mass, vascular, aggressive on MRI.  
?Sarcoma. Intramuscular.

**Specimen** : Core biopsy thigh mass

**Macro** : Pale core 16mm

**Immuno** : Positive: TFE3, Focal CD68  
Negative: Desmin, S100, EMA, AE1/AE3, CAM5.2,  
HMB45, NSE & synaptophysin. ASPSCR1/TFE type 1  
detected by PCR

Alveolar soft part sarcoma x 137 PeComa with TFE3 mutation METASTATIC RENAL CELL CARCINOMA Translocation RCC MIT Renal Cell Carcinoma Clear cell sarcoma MIT FAMILY RENAL CELL CARCINOMA	
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**Reported Diagnosis: Alveolar soft part sarcoma**