



South East England General Histopathology EQA Scheme

Round u Final Case Analyses

Cases 877 to 888

Circulated
January - February 2023

153 responses (88.95%)

Prepared: March 2023

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

Authorised by:



Dr Nipin Bagla

Date: 29/03/23

With thanks to those who contributed to this round:

Trust	ISO accreditation number
Royal Sussex County Hospital	9337
Maidstone Hospital	8062
East Surrey Hospital	N/A
Epsom and St Helier Hospital	8626
Guys and St Thomas' Hospital	9323
Southend University Hospital	7880
Kings College Hospital	9705
Frimley Park Hospital	9727
University Hospital Lewisham	9330
Kingston Hospital	8132
Eastbourne District General Hospital	8790
Maidstone Hospital	8062

Case Number: 877



Diagnostic category: Miscellaneous

Clinical : M35. Synovial Mass right knee

Specimen : Knee Tissue

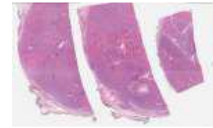
Macro : Nodule 20x15x8mm

	Final Merges	Score
1	Synovial Chondromatosis	9.64
2	Synovial Cyst (Baker's cyst)	0.07
3	Loose bodies in osteoarthritis ? hx of trauma	0.01
4	Chondrosarcoma	0.22
5	Juxtacortical chondroma	0.07

Most popular diagnosis: Synovial Chondromatosis

Reported Diagnosis: Chondromatosis

Case Number: 879



Diagnostic category: Endocrine

Clinical : M19. Left 4cm U4 Thy3F thyroid nodule. Left hemithyroidectomy.

Specimen : Thyroid

Macro : There is a lobe of thyroid measuring 57 x 42 x 43 mm which has been inked black and serially sliced. This reveals an expansile nodule measuring 38mm in maximum dimension which is encapsulated. The edge of the nodule has been extensively sampled.

	Final Merges	Score
1	Minimally invasive follicular carcinoma	9.73
2	Thyroid follicular carcinoma widely invasive	0.07
3	Follicular neoplasm of uncertain malignant potential	0.10
4	Invasive encapsulated follicular variant of papillary Ca	0.11

Most popular diagnosis: Minimally invasive follicular carcinoma

Reported Diagnosis: Follicular carcinoma (encapsulated angioinvasive).
Vascular invasion is present in the slides. Obvious capsular invasion is seen elsewhere. The diagnosis was confirmed by a tertiary specialist centre.

Case Number: 880



Diagnostic category: Gynae

Clinical : F82. ? Sarcoma of uterus. (PET pos; known lung adenocarcinoma)

Specimen : Uterus

Macro : A uterus measuring 45mm (medial to lateral) x 40mm (anterior to posterior) x 70mm in length. The cervix measures 25 x 25 x 25mm. The cut surface of the uterus shows a firm, well-defined mass lesion showing a regular margin and a smooth tan cut surface, 30mm in maximum diameter.

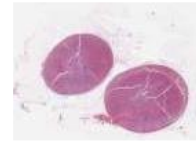
Immuno : The immuno stains show that the tumour cells are positive for Desmin, SMA, and caldesmon. They are negative for CD34, CD117, CD10 and factor VIII. The Ki67 level index is less than 2% in the tumour cells.

	Final Merges	Score
1	Leiomyosarcoma	0.14
2	Symplastic Leiomyoma	8.76
3	Smooth muscle tumour of uncertain malignant potential	0.53
4	Atypical leiomyoma	0.30
5	FH Deficient leiomyoma	0.24
6	PECOMA	0.01

Most popular diagnosis: Symplastic Leiomyoma

Reported Diagnosis: **Pleomorphic leiomyoma**

Case Number: 881



Diagnostic category: Lymphoreticular

Clinical : M59. Subtotal gastrectomy for distal adenocarcinoma post-neoadjuvant treatment.

Specimen : Nodule from gastrectomy specimen

Macro : Nodule found within fibroadipose tissue submitted separately to main stomach specimen.

	Final Merges	Score
1	Benign Splenunculus	9.68
2	Reactive node	0.11
3	Reactive - Kimura's disease	0.07
4	Benign LN with vascular transformation of sinuses	0.14

Most popular diagnosis: Benign Splenunculus

Reported Diagnosis: [Splenunculus](#)

Case Number: 883



Diagnostic category: GU

Clinical : M69. Undescended testis.

Specimen : Testis

Macro : Testis measuring 60x35x20mm with short stump spermatic cord, 20x15mm in cross section. On slicing a cystic lesion is present measuring 45x20x20mm.

Immuno : Positive for MNF116, CAM 5.2, CK20, CDX2 and neuroendocrine markers (chromogranin, synaptophysin and patchy CD56). Negative for CK7. Beta-catenin shows membranous staining.

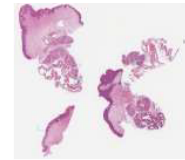
	Final Merges	Score
1	Metastatic goblet cell carcinoid / adenocarcinoma	9.25
2	Spermatocele	0.07
3	Mucinous cystadenoma	0.07
4	Mature cystic teratoma	0.07
5	Benign epididymal cyst	0.14
6	Cystic dilation of rete testis secondary to obstruction	0.07
7	Teratoma with well differentiated neuroendocrine tumour	0.17
8	Poorly differentiated sertoli cell tumour	0.03
9	sertoli-leydig cell tumour	0.14

Most popular diagnosis: Metastatic goblet cell carcinoid / adenocarcinoma

Reported Diagnosis: **Metastatic adenocarcinoma with neuroendocrine differentiation (likely carcinoma ex goblet cell carcinoid from appendix or colorectum).**

Case Number: 884

Diagnostic category: GI



Clinical : M69. Mucocele and overlying polyp. R buccal mucosa.

Specimen : Salivary Gland

Macro : Mucosa 12x8x8mm with 8mm pale nodule.

	Final Merges	Score
1	Benign salivary duct cyst +/- oncocytic changes	9.21
2	Oncocytoma	0.39
3	Apocrine Hidrocystoma	0.13
4	Warthin tumour	0.13
5	Intraductal papilloma	0.07
6	Mucoepidermoid carcinoma	0.07

Most popular diagnosis: Benign salivary duct cyst +/- oncocytic changes

Reported Diagnosis: Benign oncocytic salivary duct cyst.

Case Number: 885



Diagnostic category: Skin

Clinical : F52 ? Tyloma or verruca

Specimen : Skin

Macro : Ellipse of rubbery pale skin 27 x 9 x 7mm.

Immuno : Positive: Factor 13a. Negative: CD31, CD34, S100. Equivocal: SMA.

	Final Merges	Score
1	Callus / Corn / ? reactive changes	0.20
2	Dermatofibroma	9.64
3	Aponeurotic fibroma (calcifying)	0.07
4	Neurofibroma	0.07
5	Verruca	0.03

Most popular diagnosis: Dermatofibroma

Reported Diagnosis: **Fibrous histiocytoma - fibro collagenous variant.**

EDUCATIONAL CASE

Case Number: 887

Diagnostic category: Skin

Clinical : M53. Nodular lesion, 2 years? Aetiology, ?? BCC

Specimen : Lesion

Macro : Cream punch biopsy 8mm in diameter to a depth of 9mm.

Immuno : IHC: SMA, DESMIN AND H-CALDESMON: POSITIVE.
S-100, CD10, CD117 AND CD34:NEGATIVE.



Suggested diagnoses:

<p>Leiomyosarcoma x 32 CUTANEOUS LEIOMYOSARCOMA x 29 Leiomyoma x 26 Atypical intradermal smooth muscle neoplasm x 11 Pilar leiomyoma x 9 Cutaneous leiomyoma x 8 Atypical leiomyoma x 5 Atypical smooth muscle tumour x 4 Atypical smooth muscle neoplasm x 4 Atypical intradermal smooth muscle tumour/Cutaneous leiomyosarcoma x 3 Dermal leiomyosarcoma x 3 Benign leiomyoma x 2 SYMPLASTIC LEIOMYOMA x 2 Leiomyoma skin Leiomyoma symplastic with increased mitosis (stump) Leiomyoma with bizarre nuclei/ symplastic leiomyoma of skin/ arrector pili Dermal leiomyoma Atypical leiomyoma (symplastic pilar leiomyoma) Atypical leiomyoma/Leiomyosarcoma Cutaneous leiomyoma – uncertain malignant potential Erector pili leiomyoma Leiomyosarcoma skin</p>	<p>Leiomyosarcoma, probably metastatic. Cutaneous leiomyosarcoma (atypical smooth muscle tumour Atypical cutaneous smooth muscle tumour Intermediate grade Smooth muscle tumour. Smooth muscle tumour. Some bizarre nuclei, no mitoses, no necrosis and small. Favour benign but criteria not well established. Smooth muscle neoplasm Smooth muscle tumour of uncertain malignant potential Primary cutaneous or metastatic to skin from a primary site elsewhere. CPC is needed. Smooth muscle tumour with ill-defined margins, atypia and mitotic figures highly suggestive of Leiomyosarcoma. Refer this case to the Sarcoma Panel group. LeiomyoSA Atypical piloleiomyoma/ leiomyosarcoma</p>
---	--

Reported Diagnosis: **Dermal leiomyosarcoma (atypical dermal smooth muscle tumour).**

EDUCATIONAL CASE

Case Number: 888



Diagnostic category: GU

Clinical : M85. Left orchidectomy. Emergency repair of obstructed recurrent left inguinal hernia. Removal of ischaemic omentum left orchidectomy.

Specimen : Spermatic Cord

Macro : Left testicle with spermatic cord 53g. Cord with adherent fibrous fatty tissue measures approximately 100 x 20mm. Tunica vaginalis translucent and mobile. Testicle measures 62 x 34 x 20mm. Epididymis measures 22 x 7 x 6mm. On opening the testicle has a light yellow, slightly congested cut surface. No obvious lesions are identified. Epididymis has a tan/brown appearance. Tunica vaginalis is slightly oedematous.

Immuno : Congo Red Positive

<p>Amyloidosis x 111 Amyloid x 41 Amyloidosis in the blood vessels. Angiolipomatous tissue</p>	
--	--

Reported Diagnosis: Proximal obstruction. Amyloid angiopathy