

Picture Quiz

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Case 1, Question 1

- A 68 year old male has a 4.5 cm testicular mass. After appropriate work up, radical orchiectomy is performed. Grossly, the tumor is well-circumscribed and soft. For microscopic appearance, see the link. Which immunostain is typically expressed by the tumor?

- <https://pathpresenter.net/public/display?token=749d0f02>

1. Oct $\frac{3}{4}$
2. c-Kit
3. CD45
4. CD30
5. AFP

Case 1, Question 2

- Which molecular/cytogenetic finding is usually seen in this tumor?
 1. *CTNNB1* gene mutations
 2. *FOXL2* mutation
 3. X:17 translocation
 4. 3p deletion
 5. Frequent gains of chromosome 9

Case 2, question 3

- A testicular tumor in a 30 year old demonstrates a morphology as seen in the link.
<https://pathpresenter.net/public/display?token=919442b1>
- A preoperative lab work up shows elevated LDH, with AFP and HCG within normal limits. Limited IHC was performed highlighting positivity for SALL4. Which of the following statements are correct for this lesion?
 1. The tumor rarely metastasizes and has excellent prognosis without chemotherapy
 2. It is aggressive with early hematogenous spread, and is chemo-sensitive
 3. It is radiosensitive and is managed primarily with radiation
 4. It is benign and is treated with surveillance
 5. It carries i(12p) mutation) only when mixed with teratoma

Case 2, question 4

- Which immunoprofile most reliably distinguishes this tumor?
 1. SALL4+, Oct $\frac{3}{4}$, +, CD30+
 2. SALL4+, Oct $\frac{3}{4}$ +, c-Kit+
 3. SALL4+, Oct $\frac{3}{4}$ -, Glypican +
 4. SALL+, Oct $\frac{3}{4}$ +, Sox17+
 5. SALL+, p63 and GATA3+

Case 3, Question 5

- A 72 year old man with a history of high-grade prostatic adenocarcinoma (Gleason score 4+5=9) treated 18 months ago with radical prostatectomy followed by androgen deprivation therapy, presents with rapidly progressive pelvic pain and a bulky prostatic bed extending into bladder. Serum PSA is low and stable. A section from the cysto-prostatectomy specimen is scanned: Which one of the following is the most likely diagnosis?

<https://pathpresenter.net/public/display?token=195fba42>

1. High grade prostatic adenocarcinoma (treatment-naïve)
2. Prostatic stromal sarcoma
3. Diffuse large B cell lymphoma
4. Metastatic gastric carcinoma
5. Treatment related neuroendocrine prostatic carcinoma

Case 4, Question 6



Case 4, Question 6

- What is the nose horn made up of, in the individual in case 6?

