## September 23 Quiz

## Answers

1. Endocervical adenocarcinoma

Both answers of Adenocarcinoma in situ and Invasive Adenocarcinoma, Pattern A, HPV associated, would be correct. The case was given a differential of both, favoring invasive adenocarcinoma, Pattern A Invasive adenocarcinoma: <u>https://tumourclassification.iarc.who.int/chaptercontent/34/305</u> AIS:

https://tumourclassification.iarc.who.int/chaptercontent/34/496

2. Papillary carcinoma, classical type

https://tumourclassification.iarc.who.int/chaptercontent/53/44

Diffuse sclerosing subtype was a consideration: Although extensive sclerotic stroma was present in this case, but there was a lack of abundant psammoma bodies, extensive LVI and florid squamous metaplasia, as seen in the diffuse sclerosing subtype.

Another consideration was invasive follicular variant, however due to presence of both follicular (in dominance in this case) and papillary patterns, this tumor would be better classified as classical variant. Invasive follicular is exclusively made of small tight follicles.

- 3. Metastatic low grade serous carcinoma. The neoplasm expressed PAX8, p16, WT1, ER and p53 (wild pattern) <u>https://tumourclassification.iarc.who.int/chaptercontent/34/12</u>
- 4. Desmoid type fibromatosis <u>https://tumourclassification.iarc.who.int/chaptercontent/33/40</u>
- 5. Type AB thymoma https://tumourclassification.iarc.who.int/chaptercontent/35/220
- 6. Dr. Fu's office