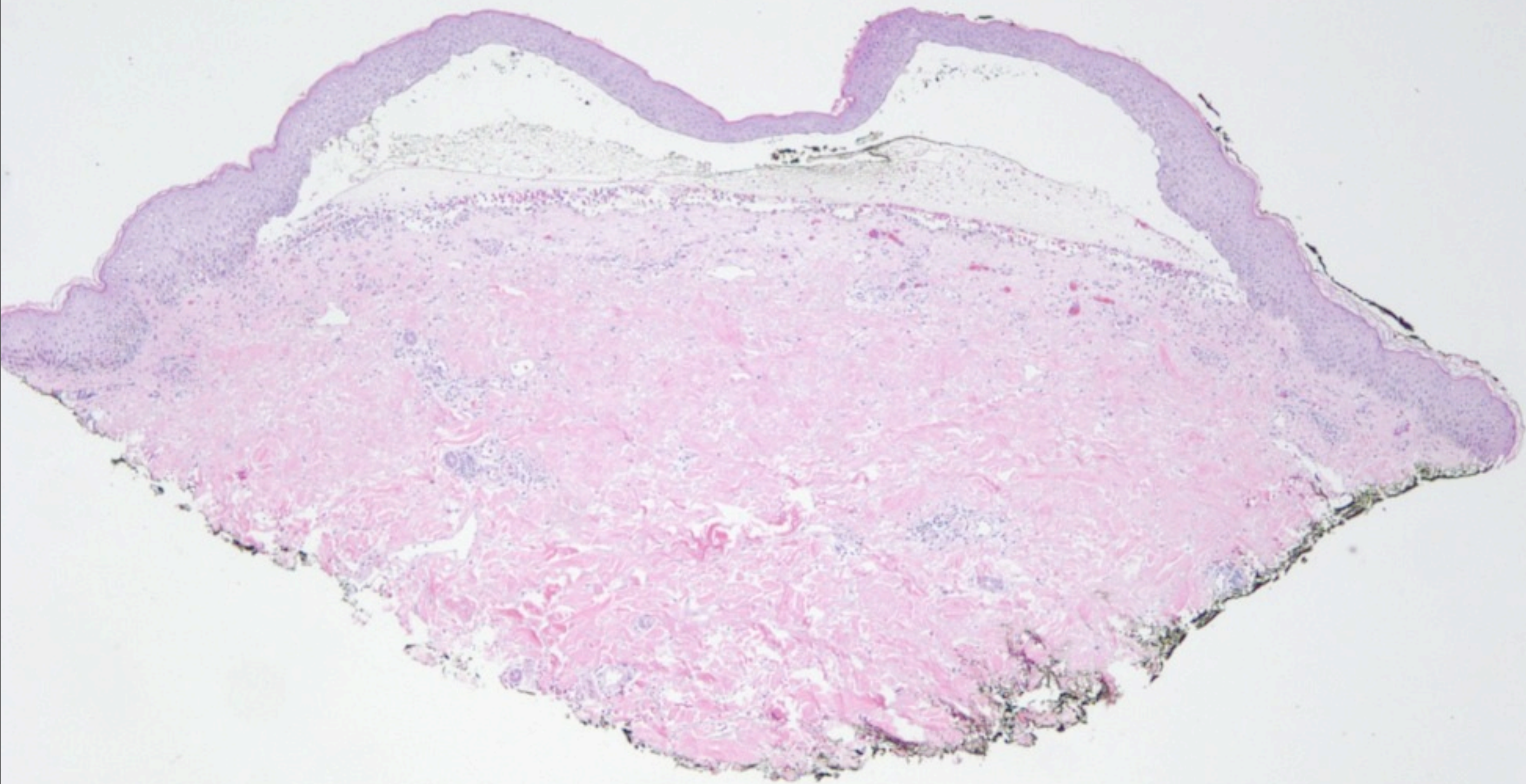


# Dermatopathology

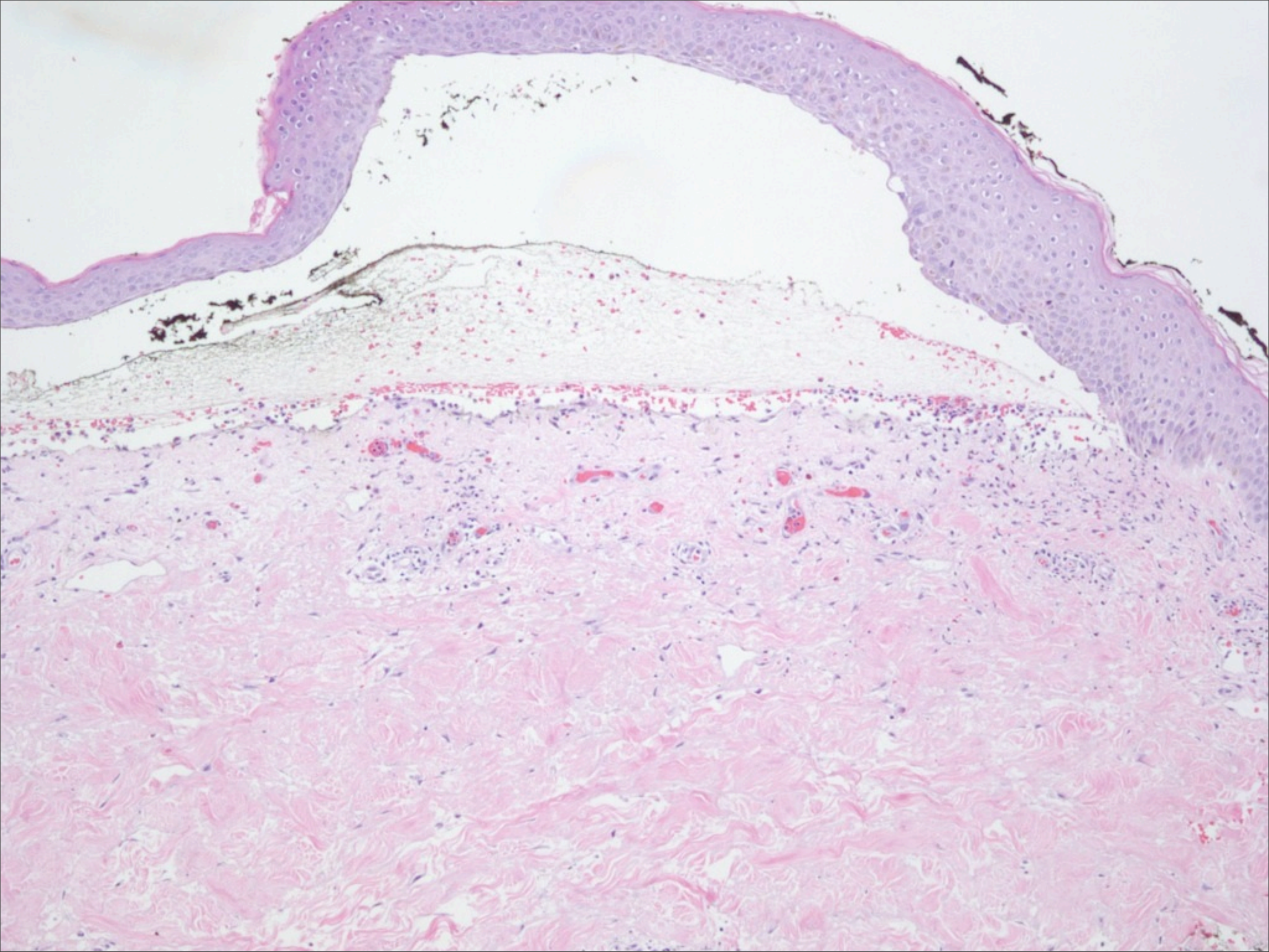
## Slide Review Part 149

Paul K. Shitabata, M.D.  
Dermatopathology Institute  
Torrance, CA

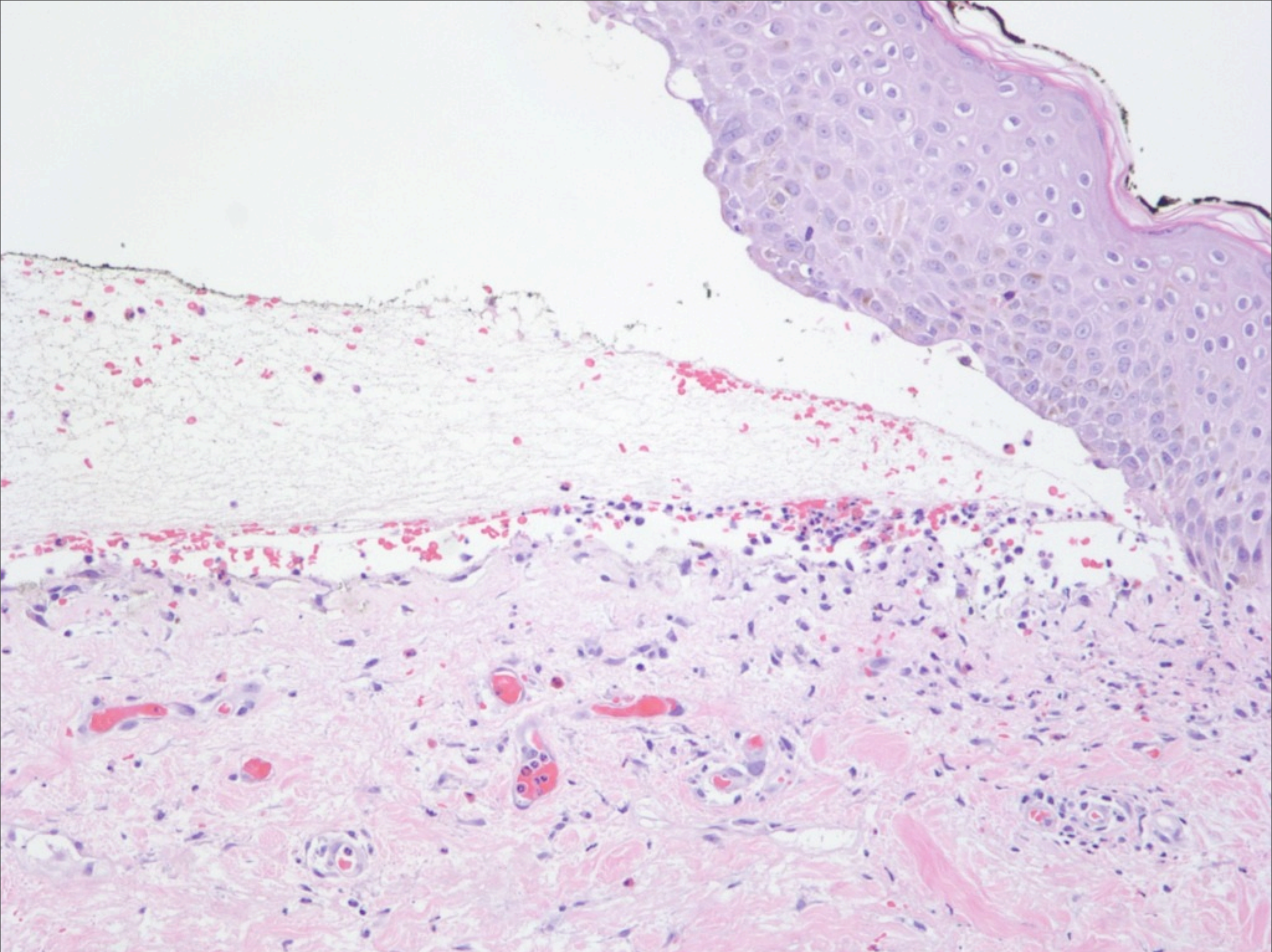




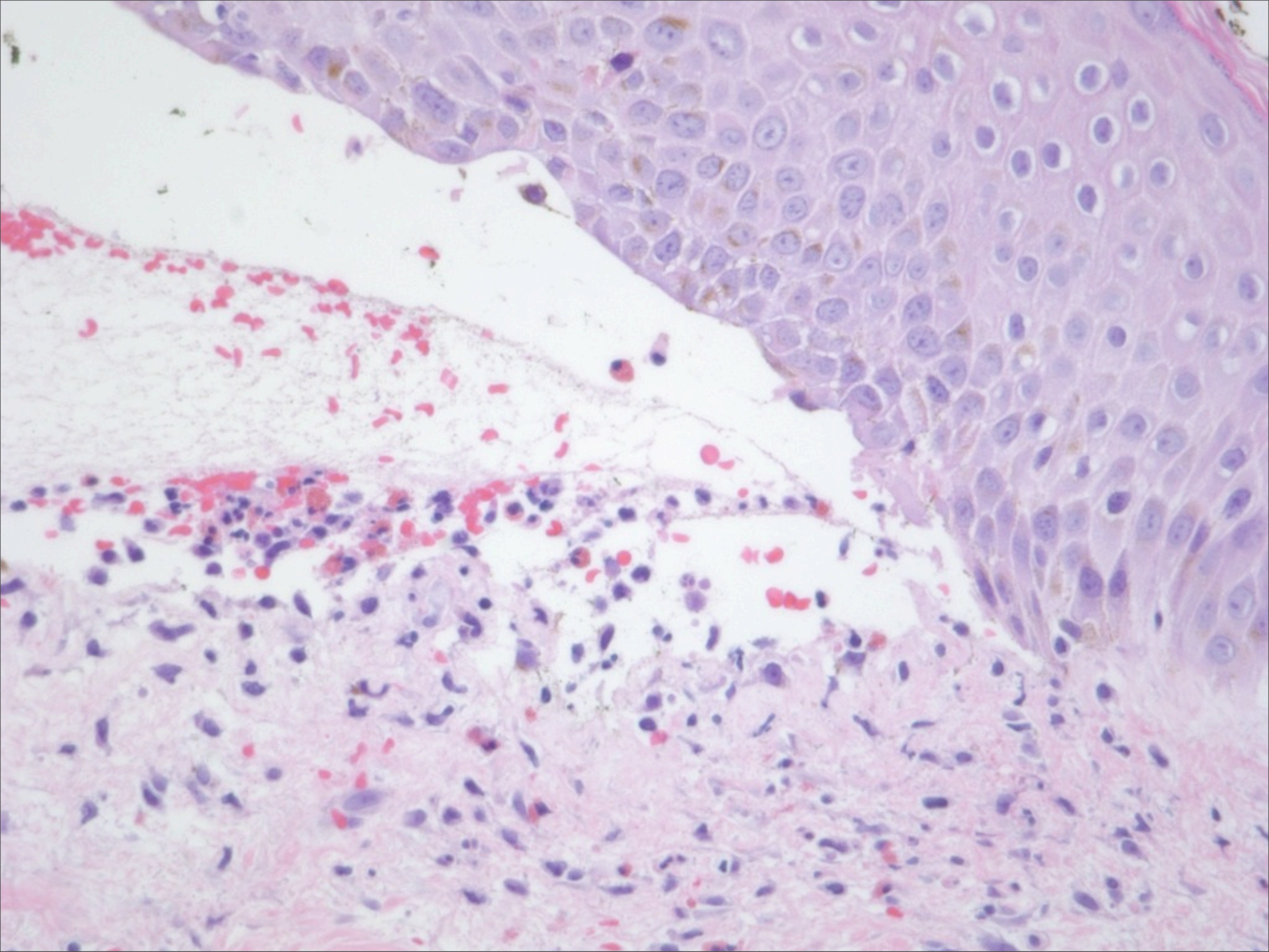








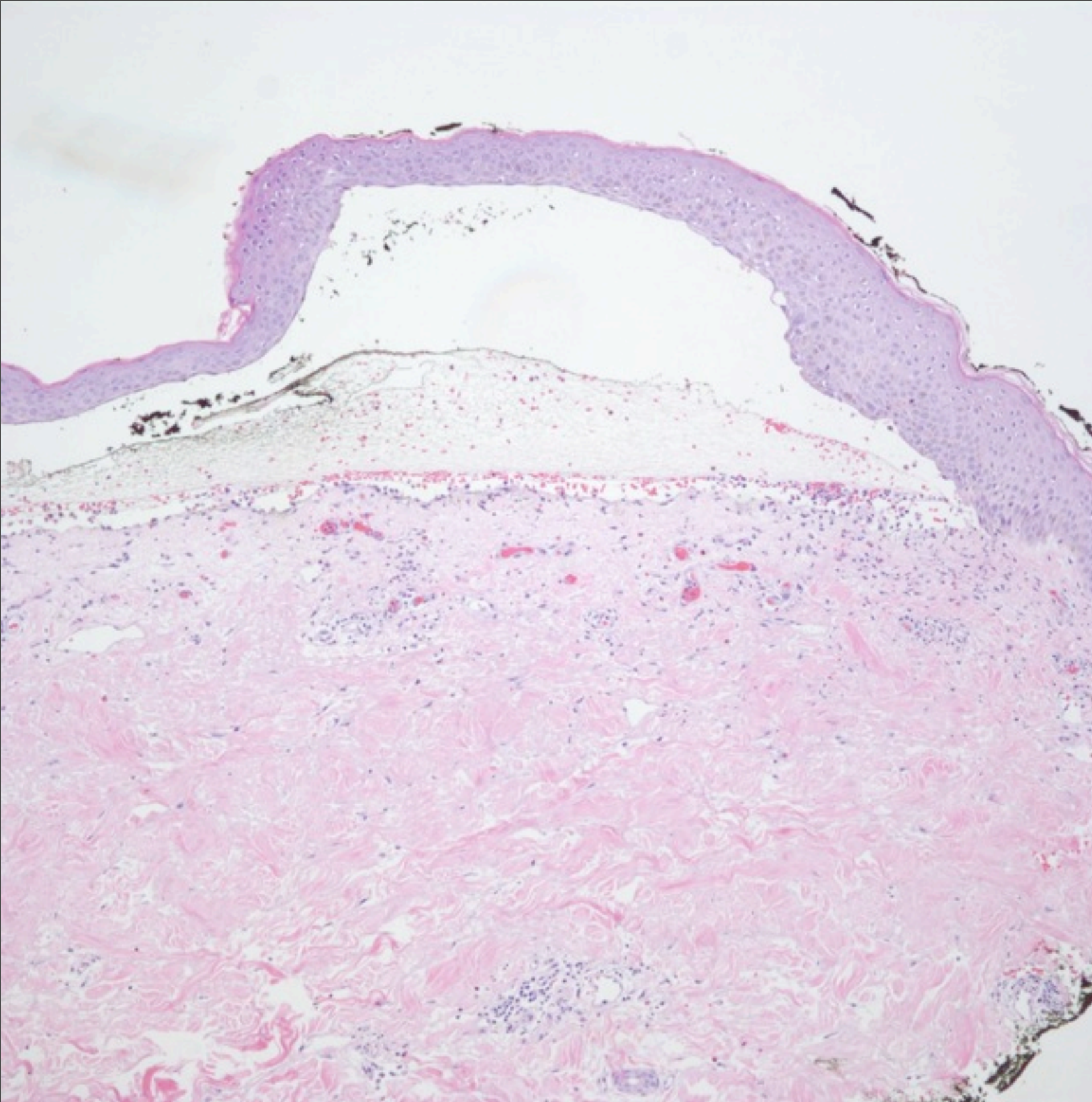






# Bullous Pemphigoid



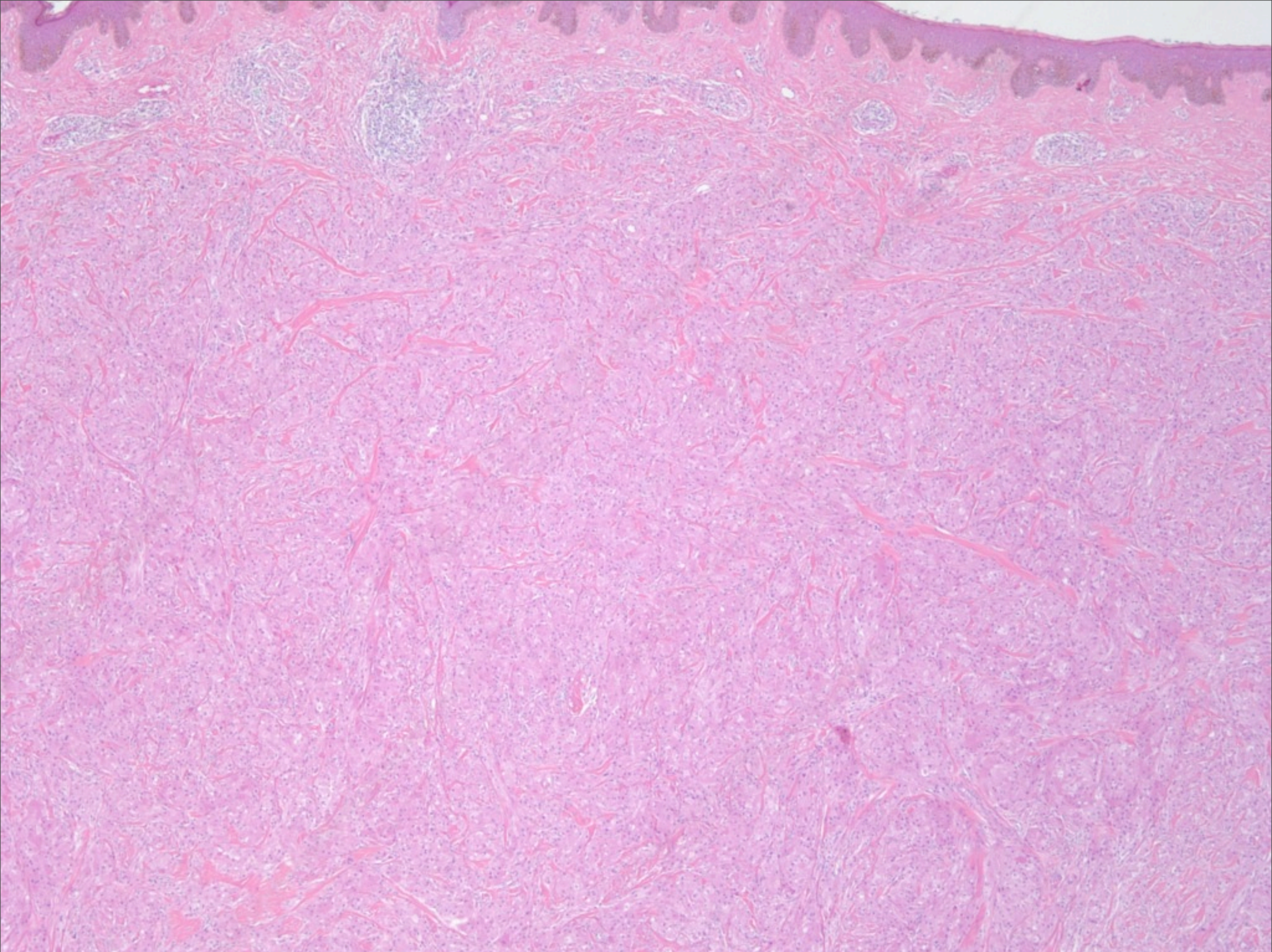


No acantholysis

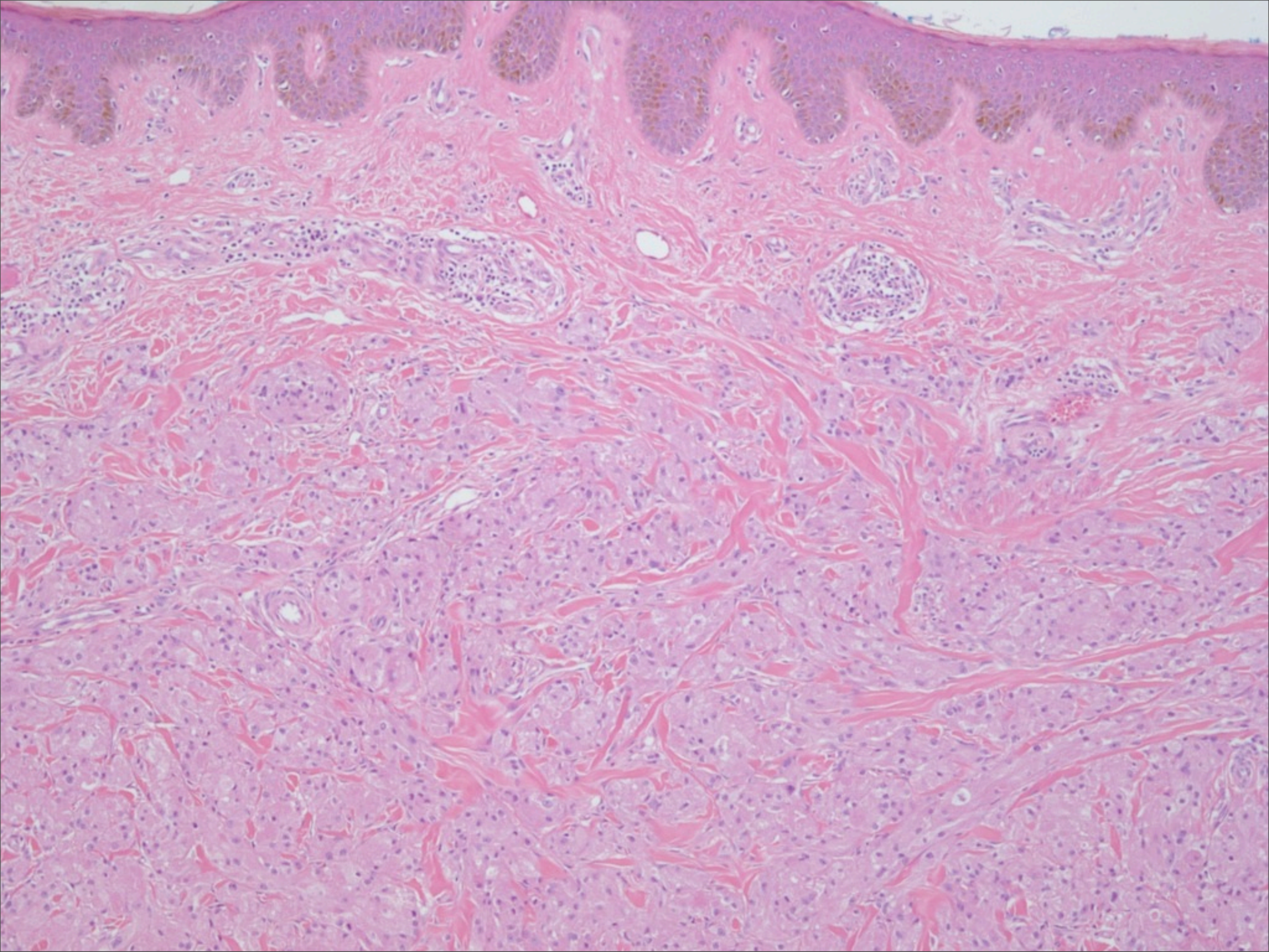
Eosinophils  
Predominate  
over PMNs

Subepidermal bullae

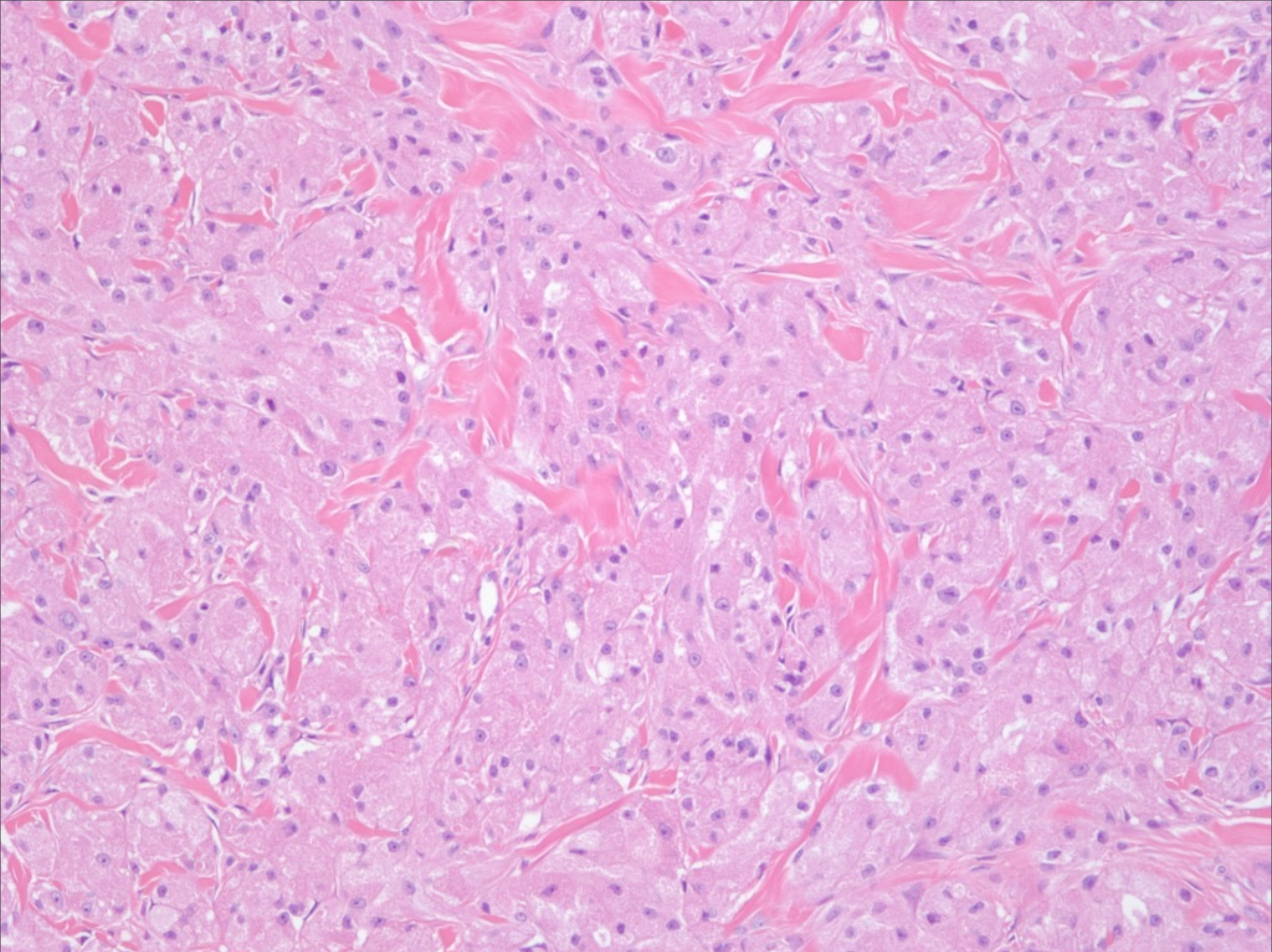




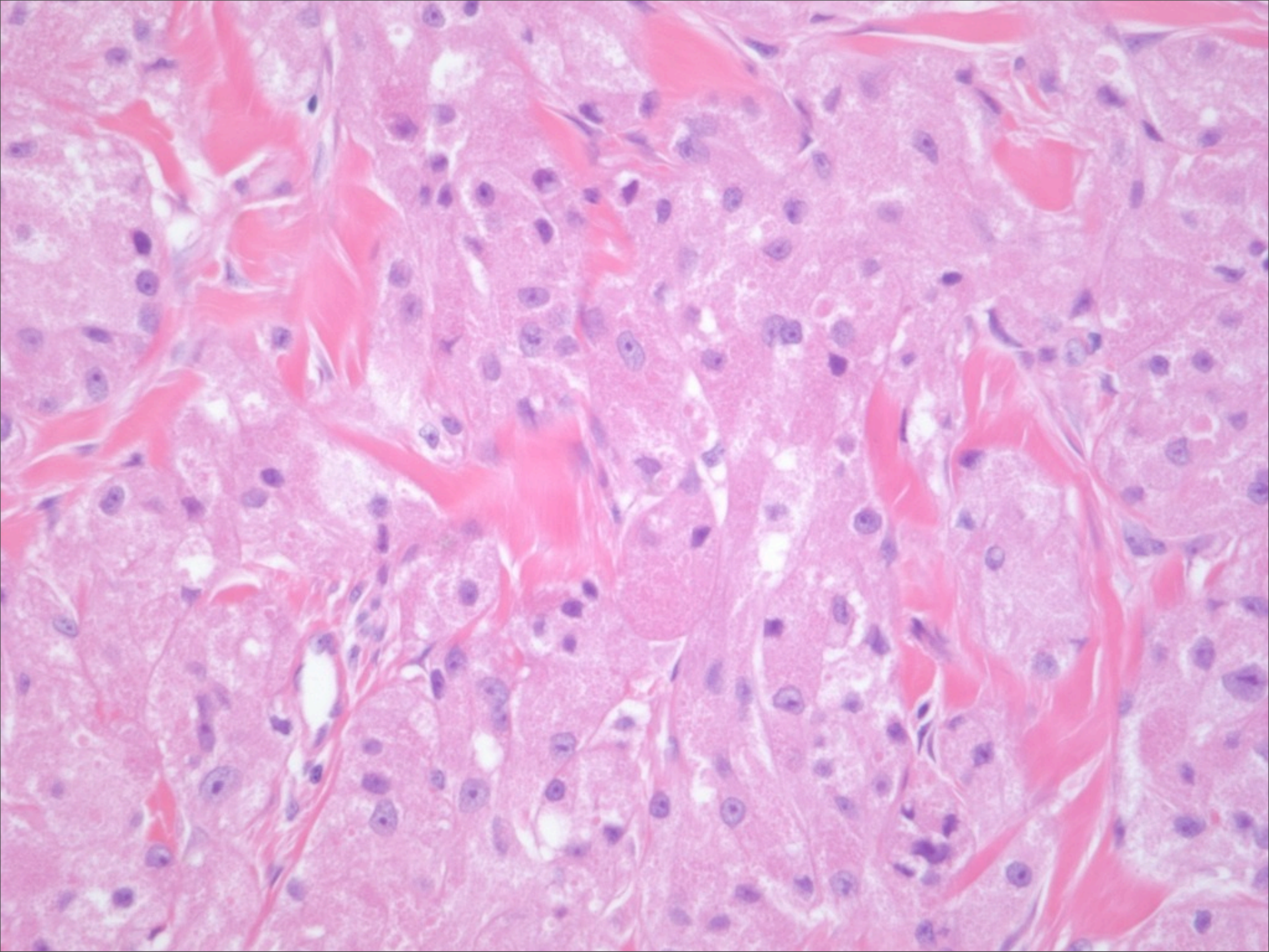






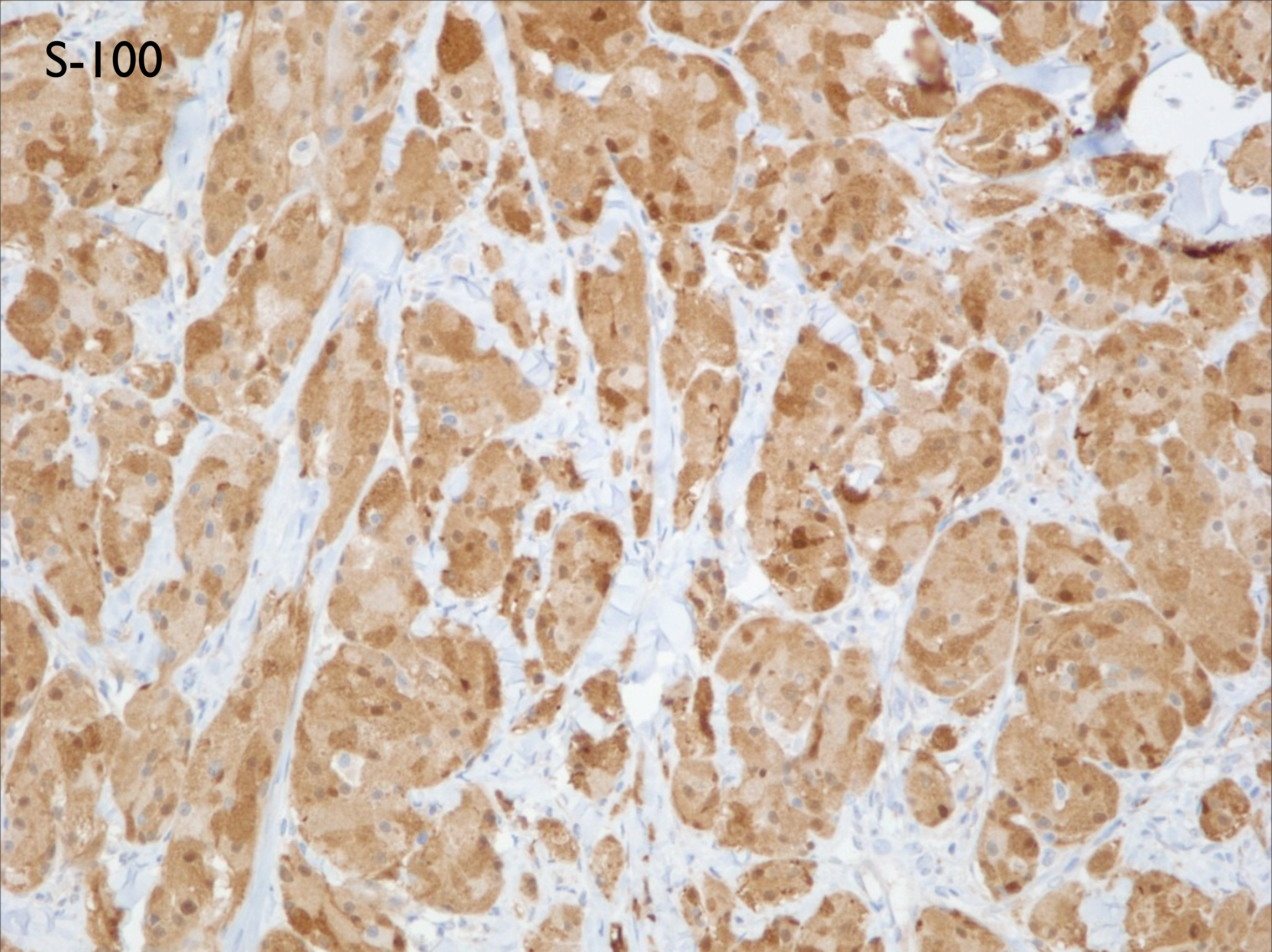








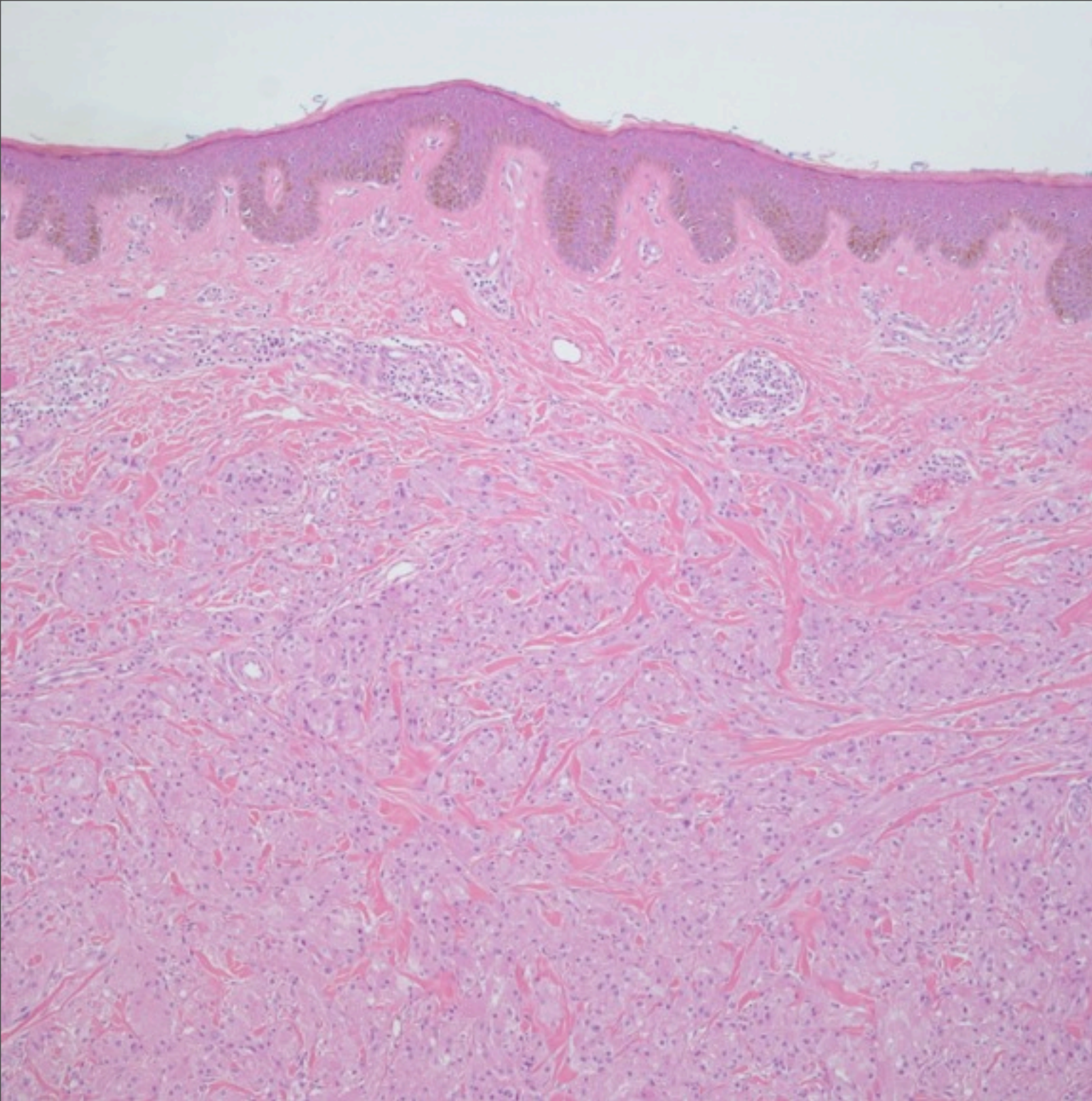
S-I 00





# Granular Cell Tumor





Variable Epidermal  
Hyperplasia

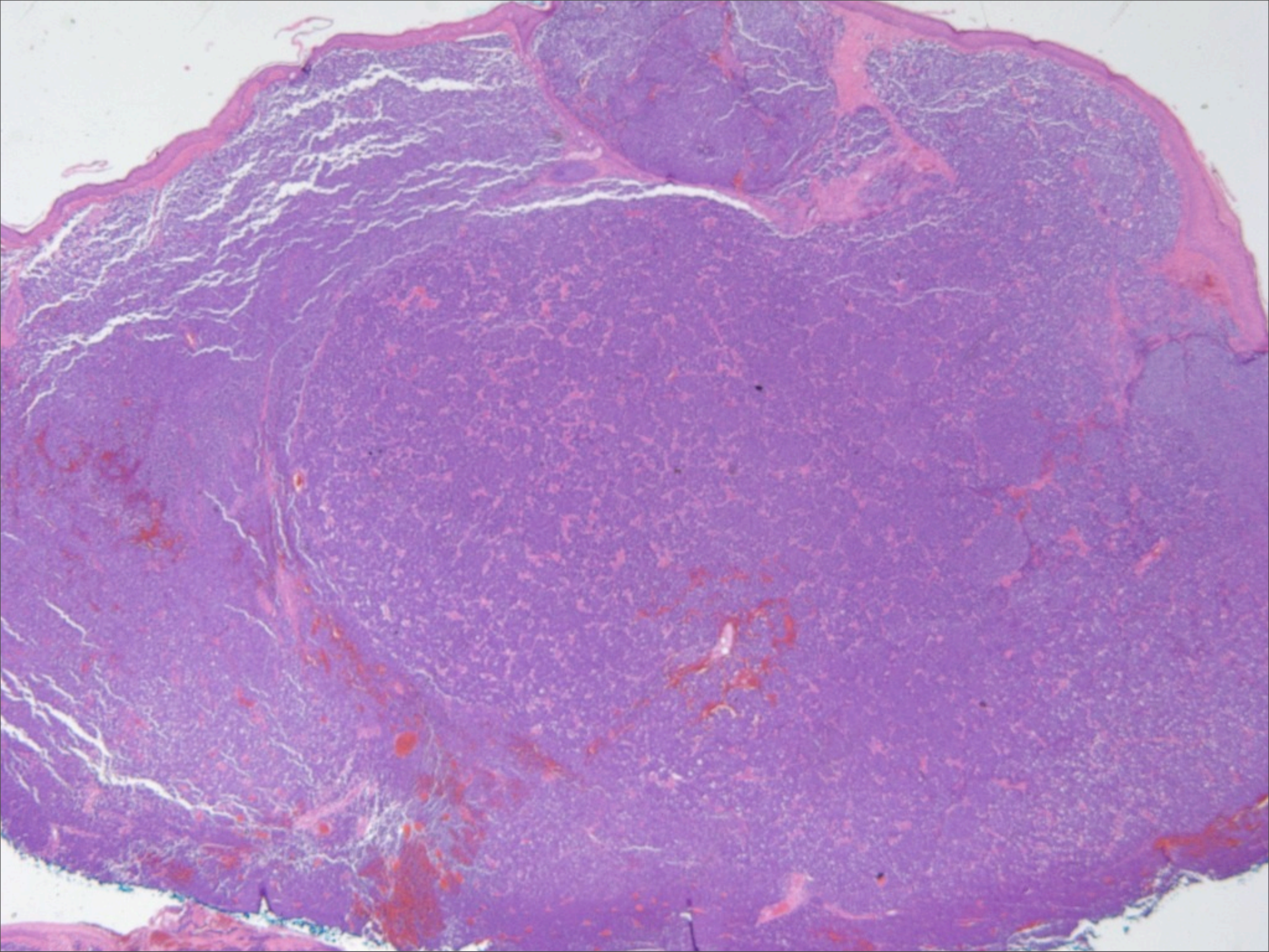
Diffuse infiltrate of  
Granular Cells

Minimal Cytologic Atypia

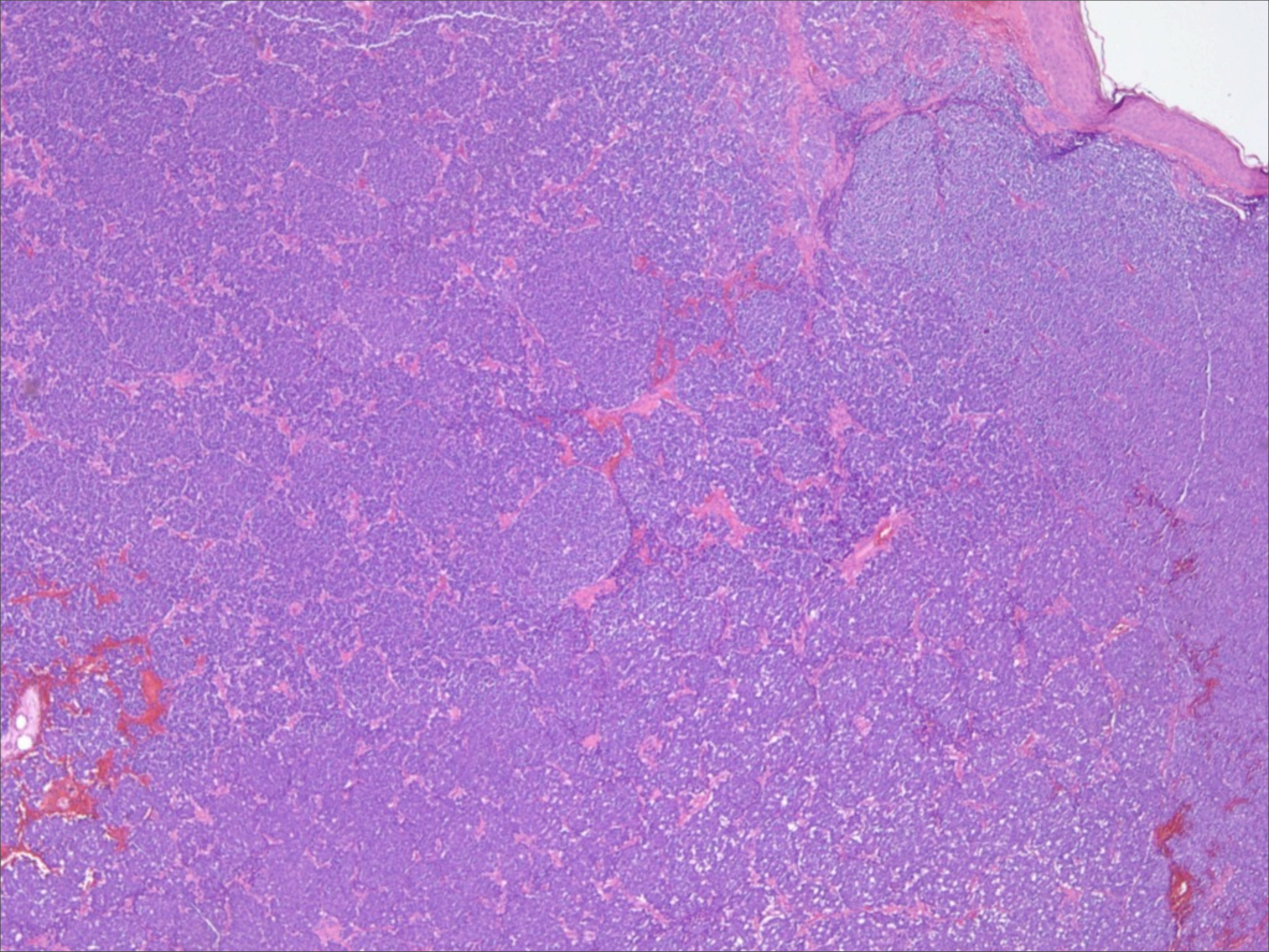
Low Mitotic Rate

Confirm with immunohistochemistry-S100 positive

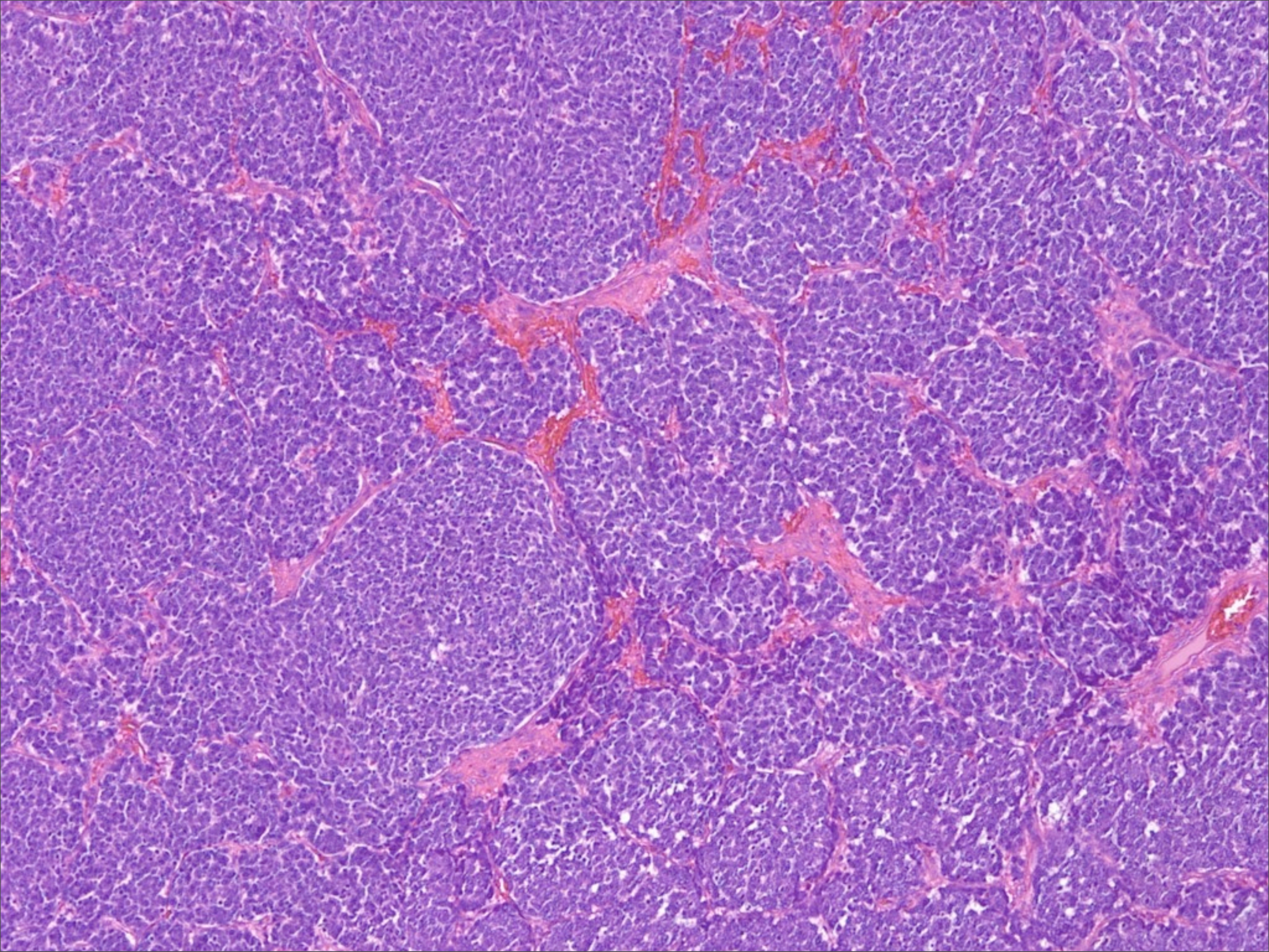




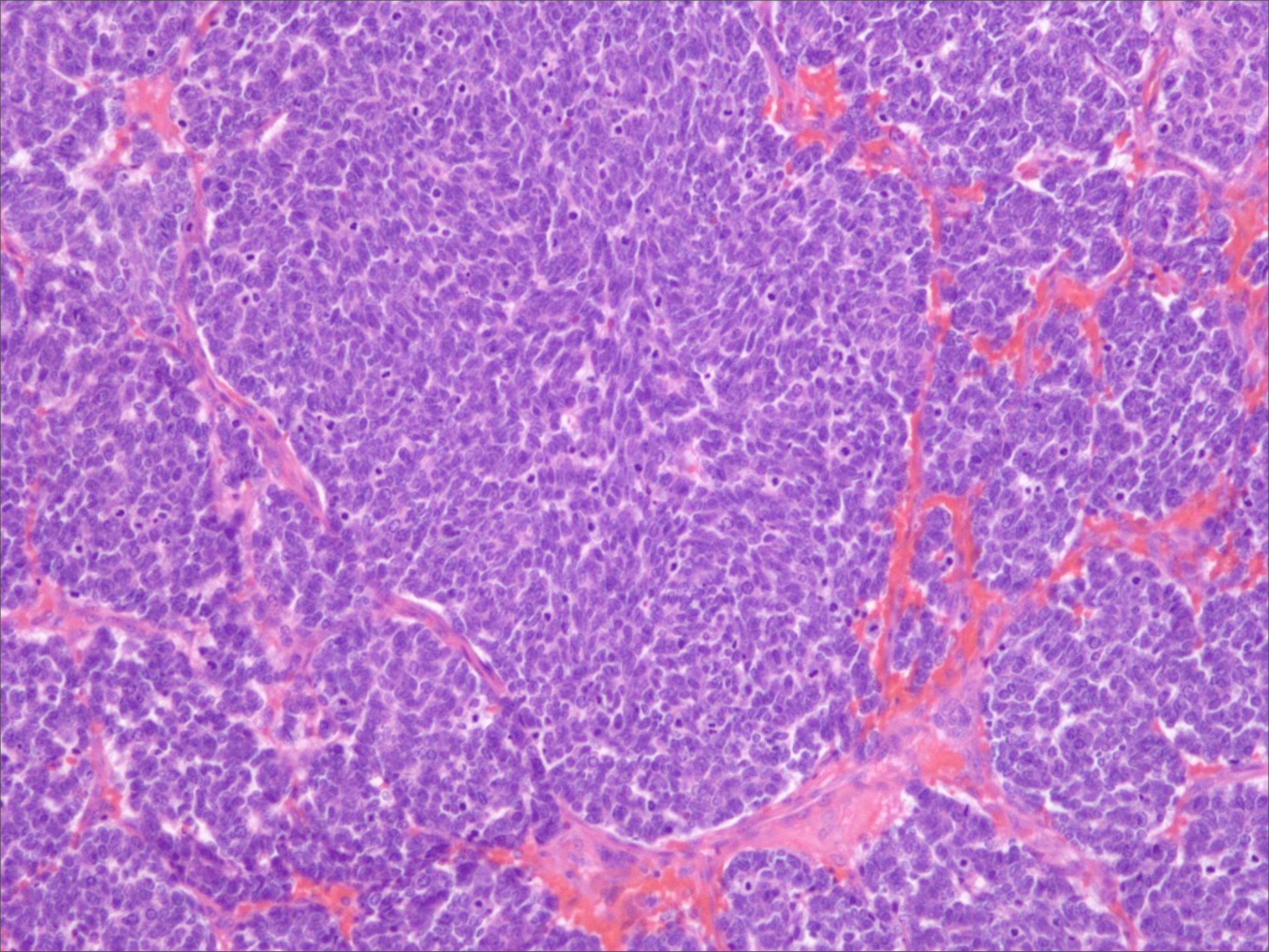




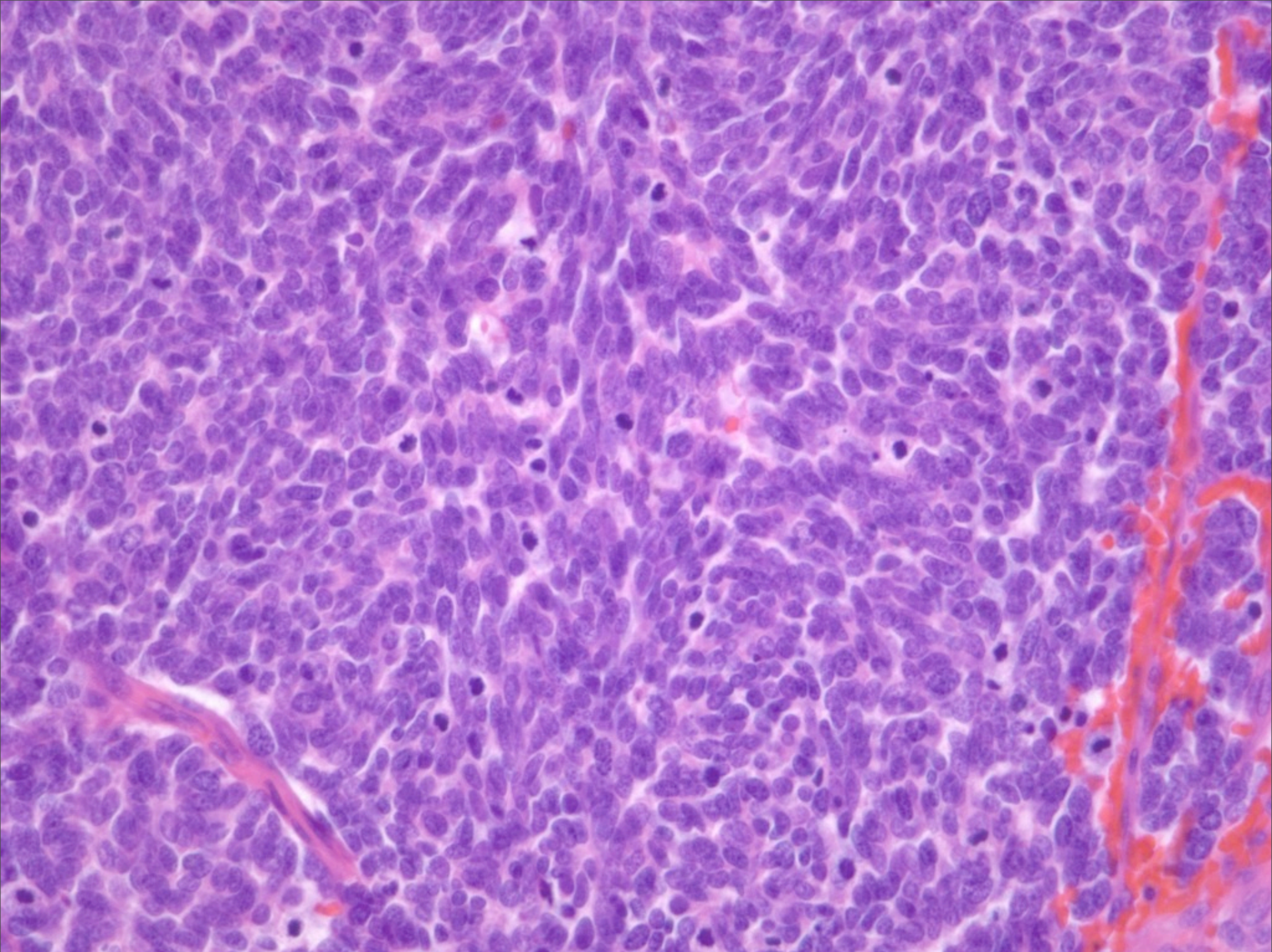




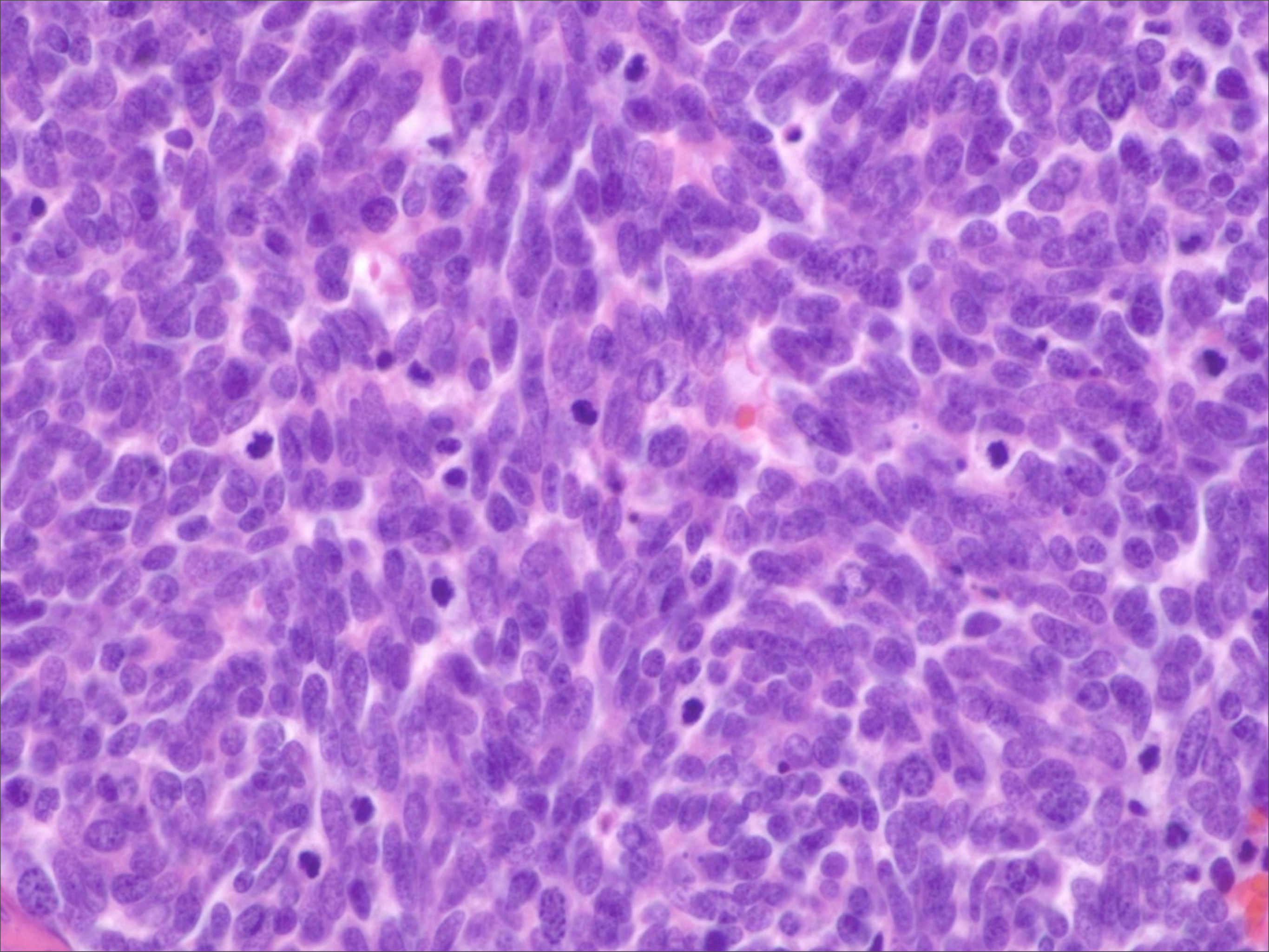






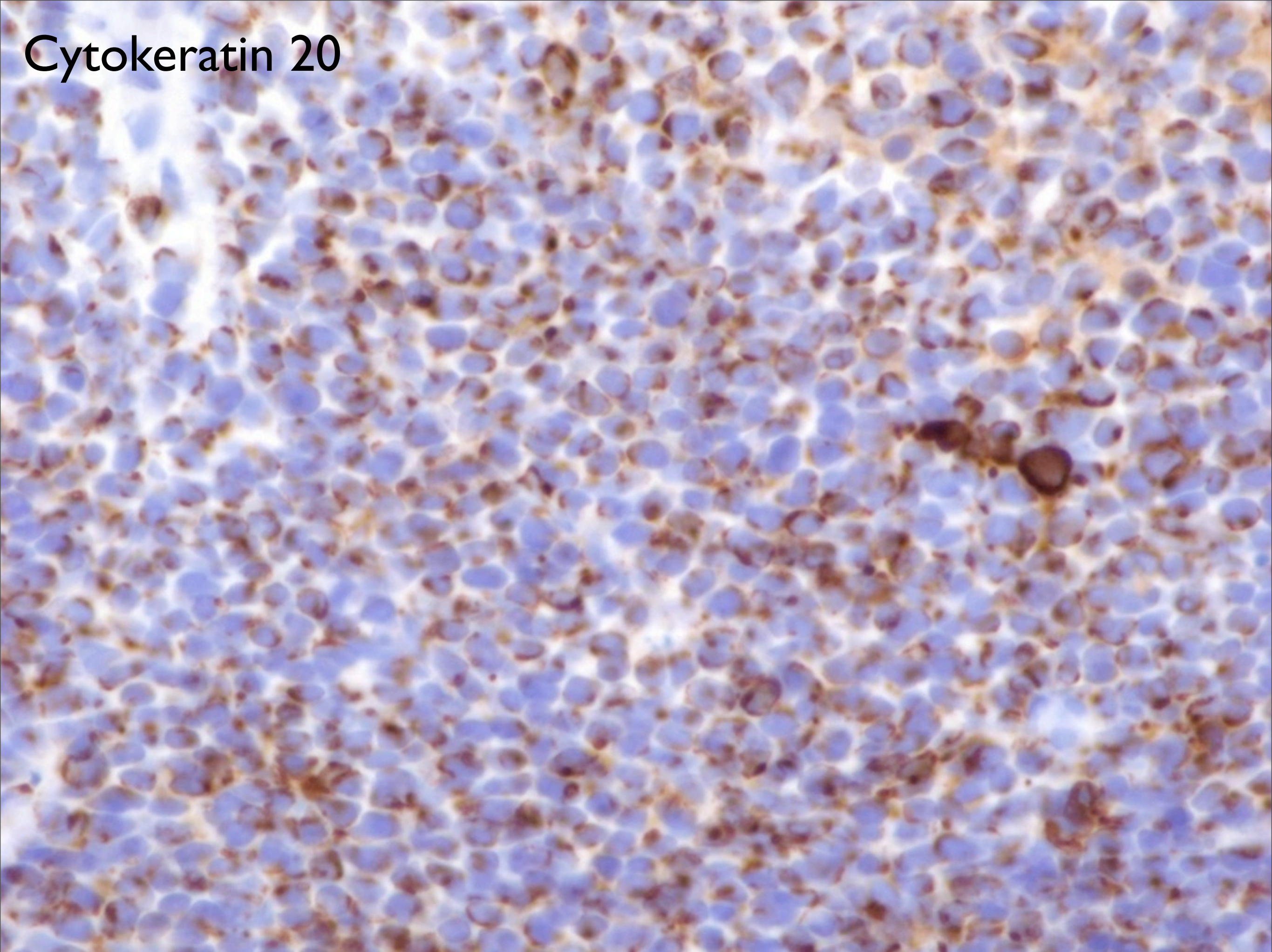






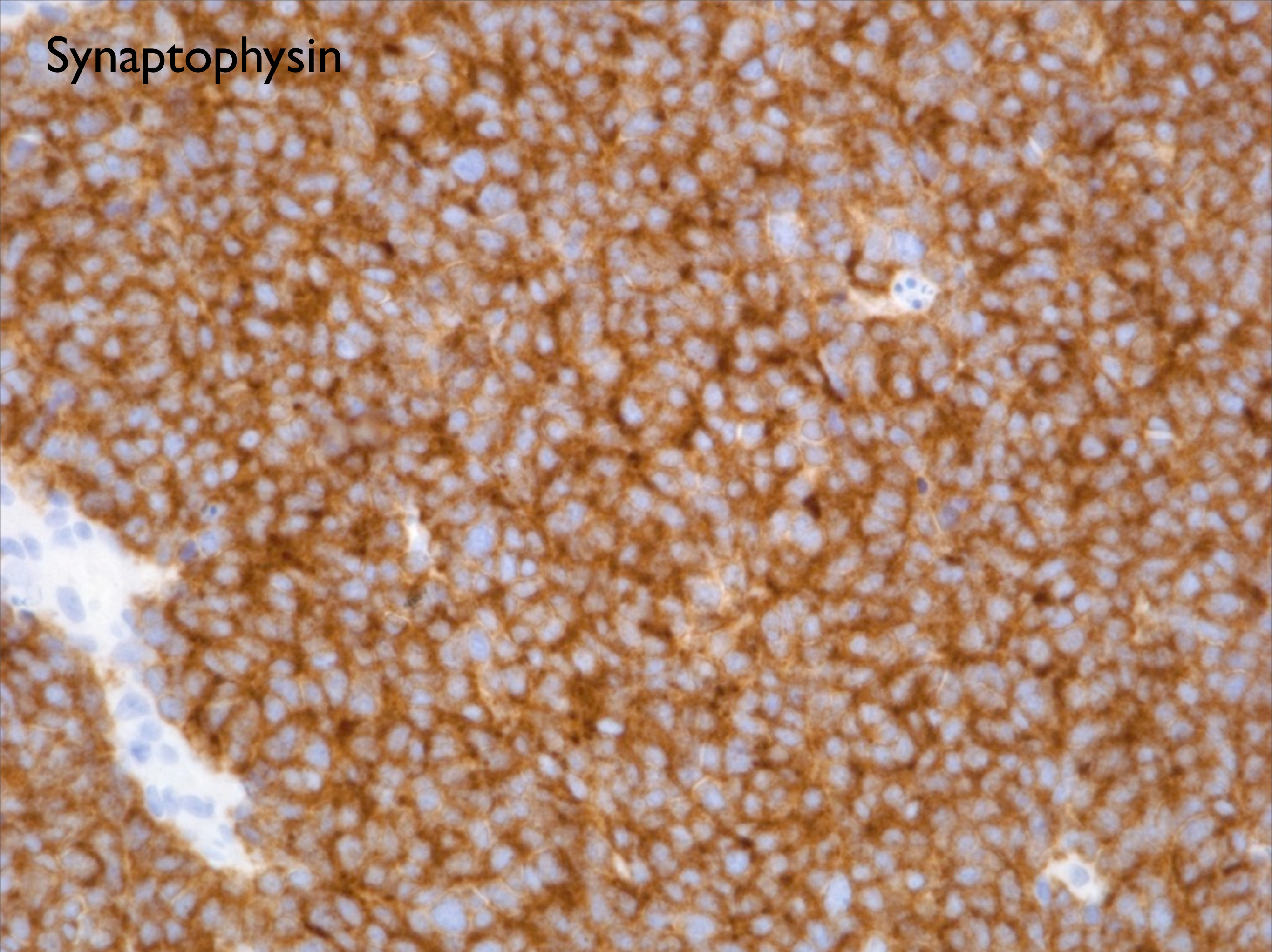


# Cytokeratin 20





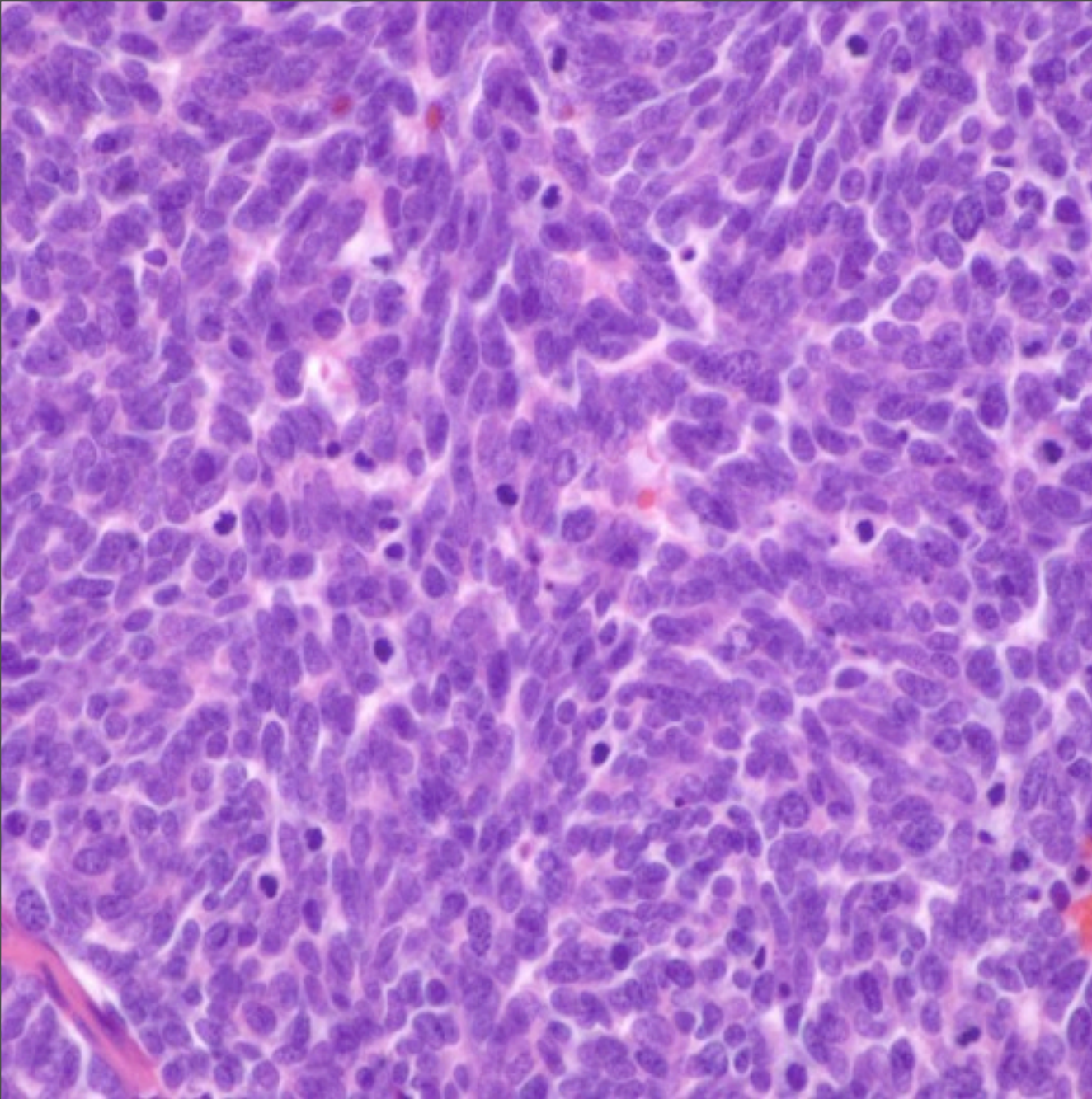
# Synaptophysin





# Merkel Cell Carcinoma





Stippled nuclear chromatin

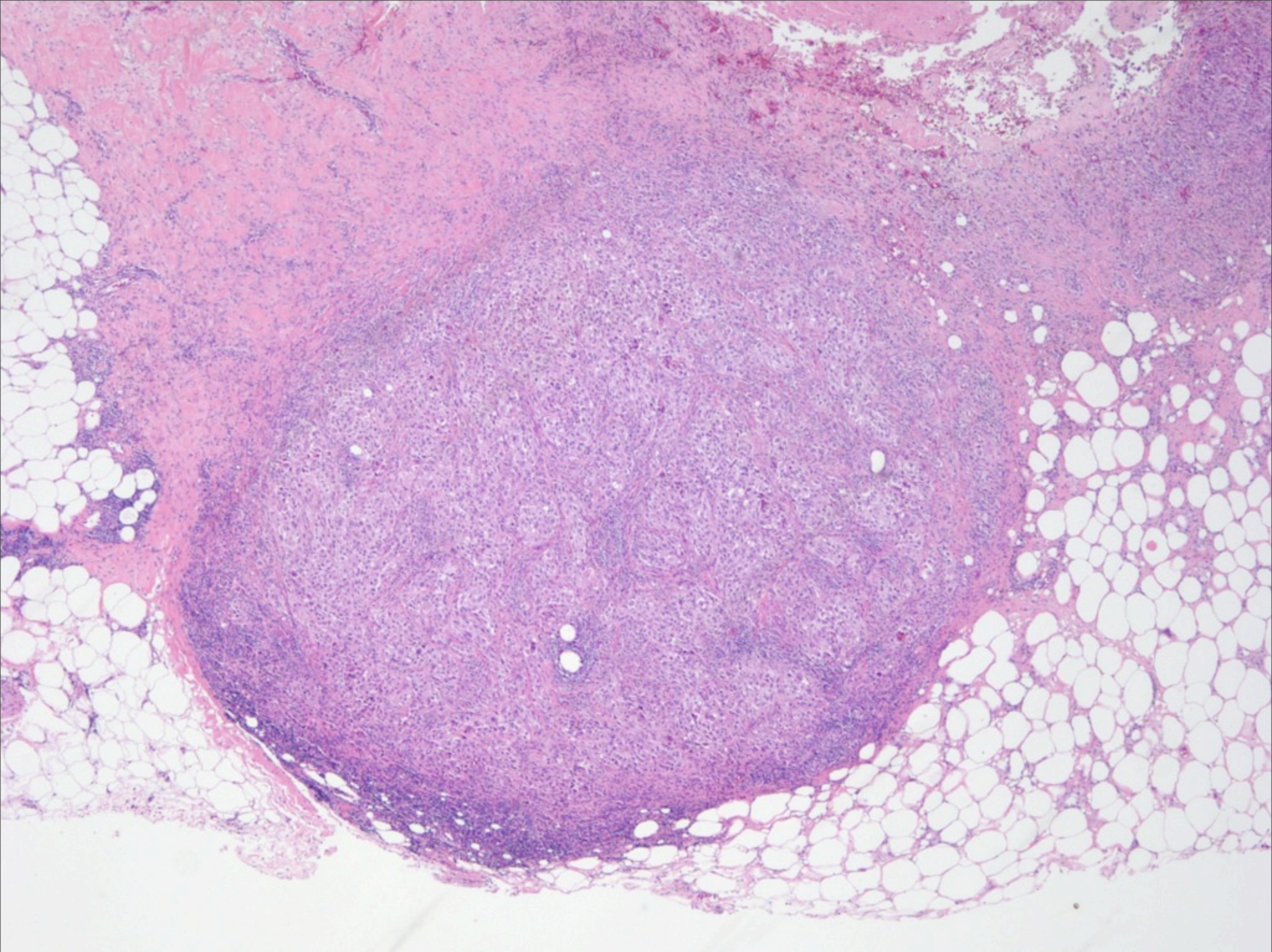
Nuclear Molding

Numerous Mitotic Figures

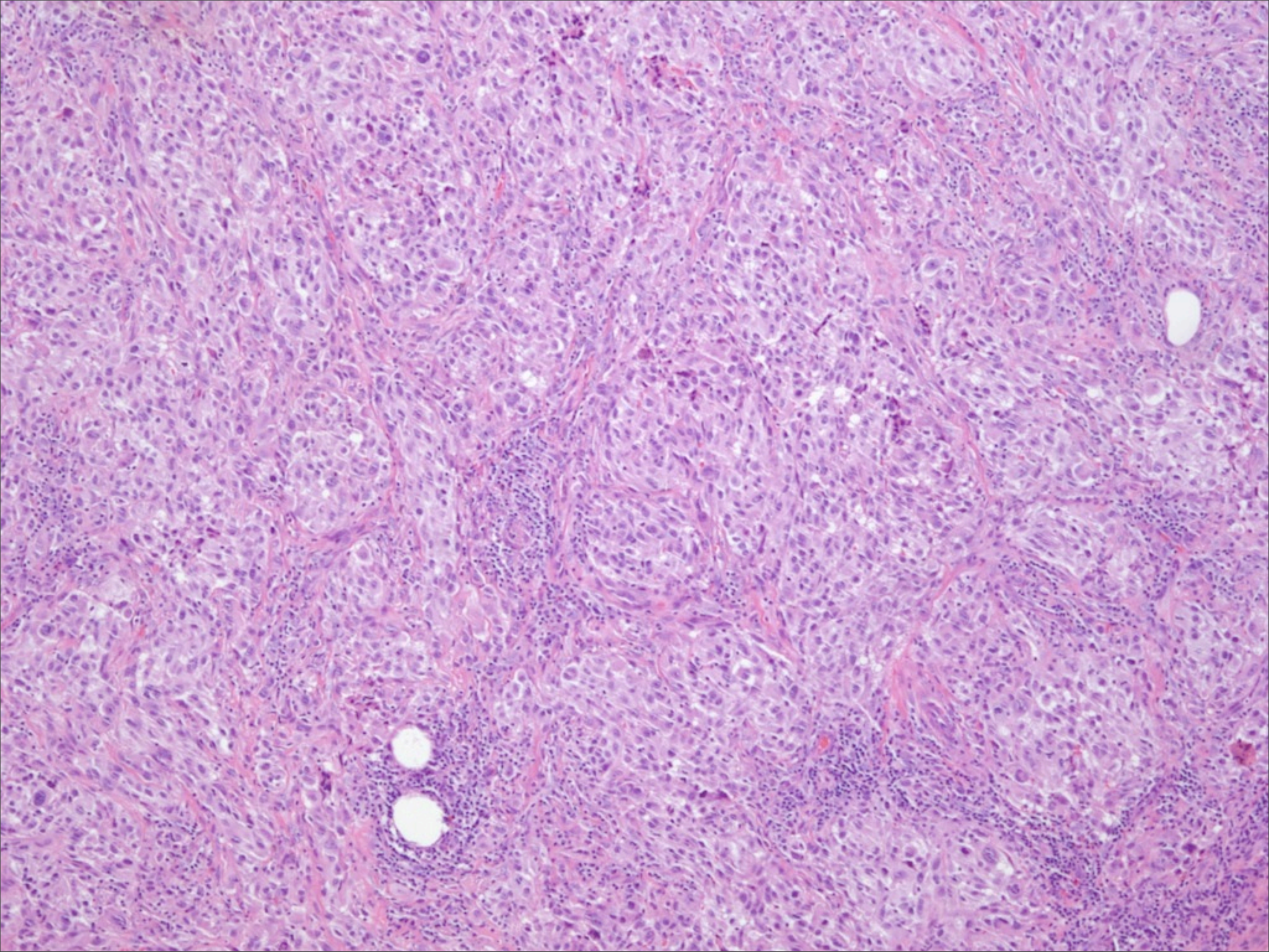
Rule out metastatic  
neuroendocrine  
carcinomas from  
other visceral organs

Cellular Infiltrate of  
Hyperchromatic Cells

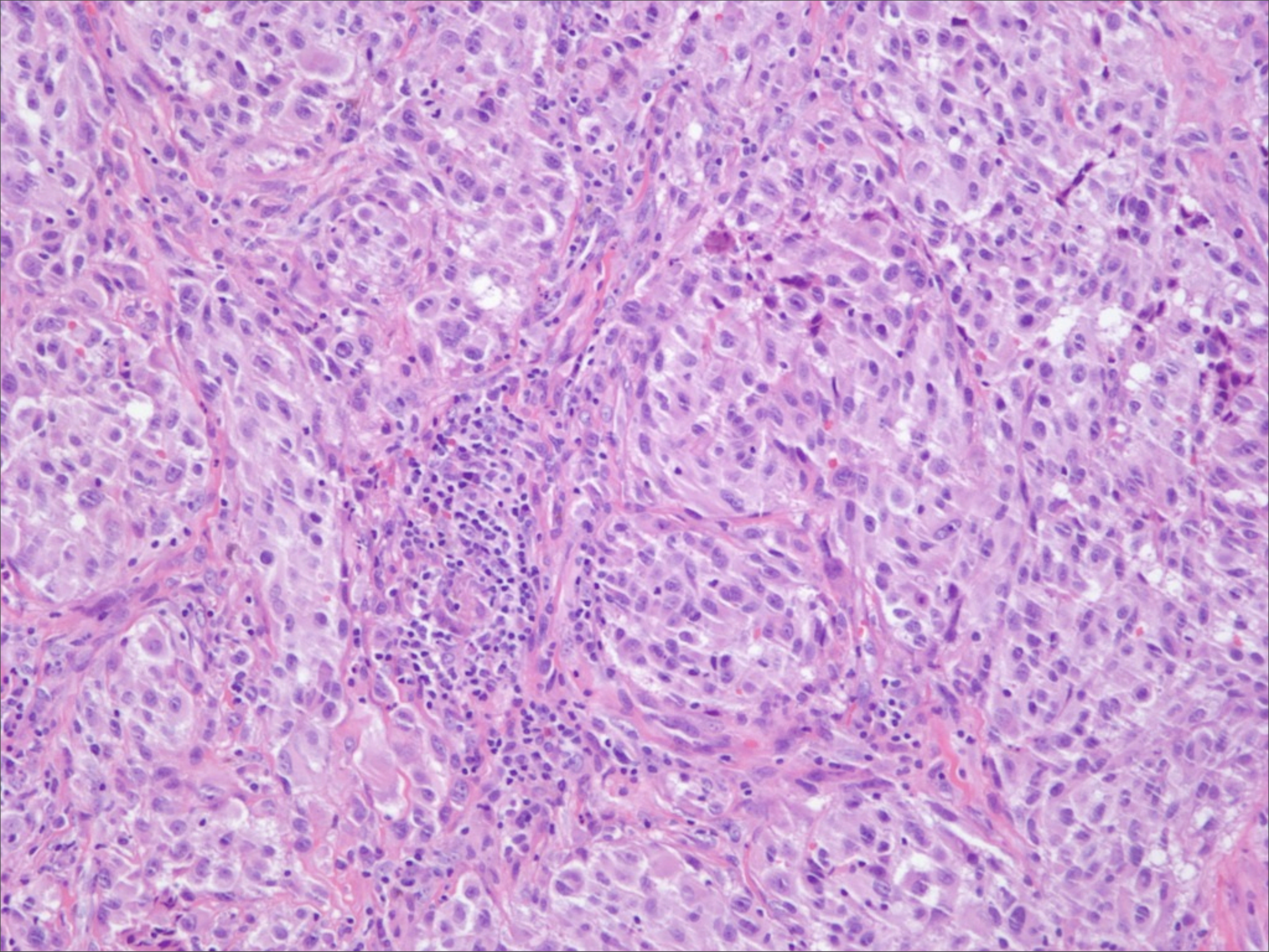




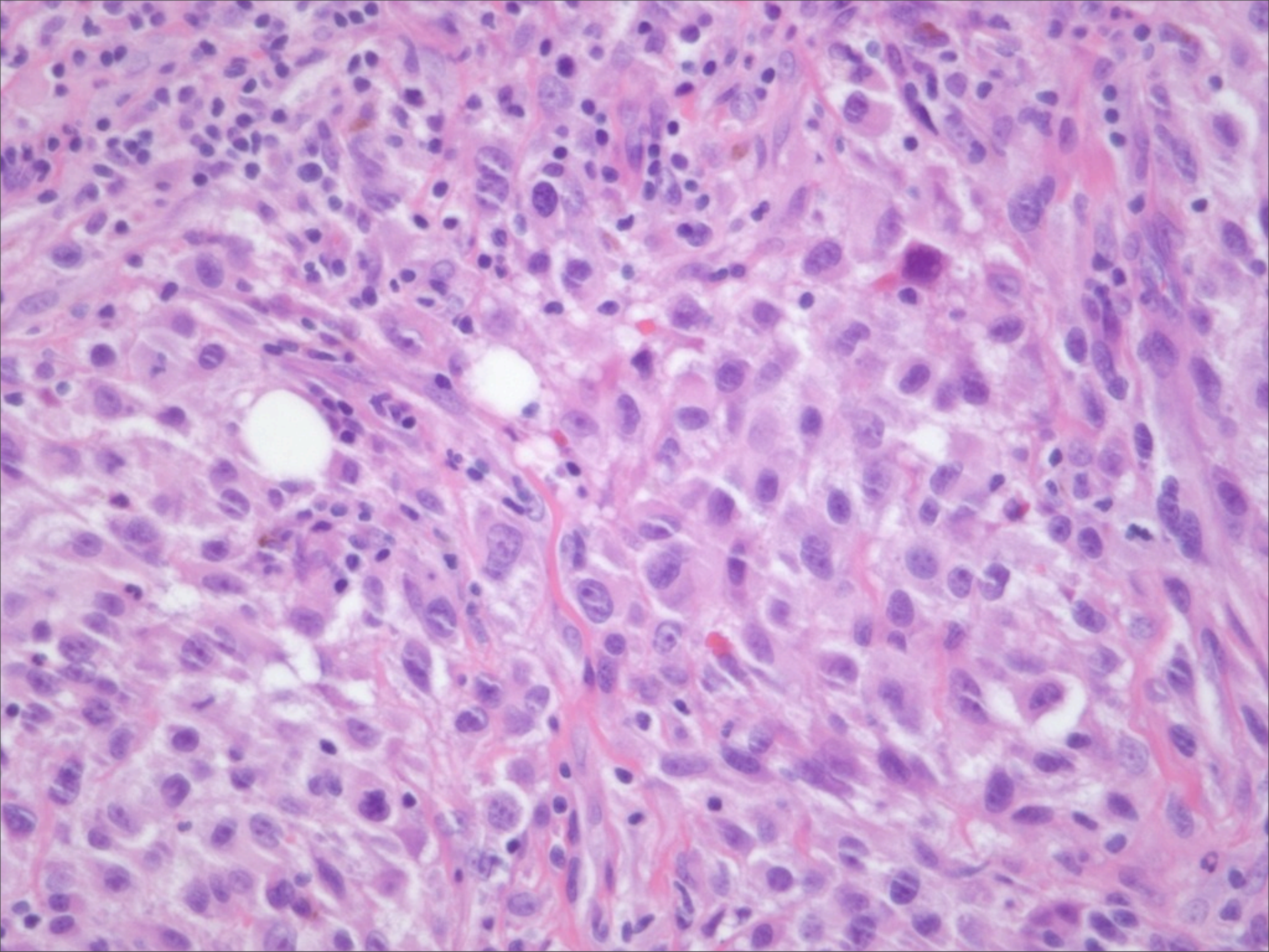










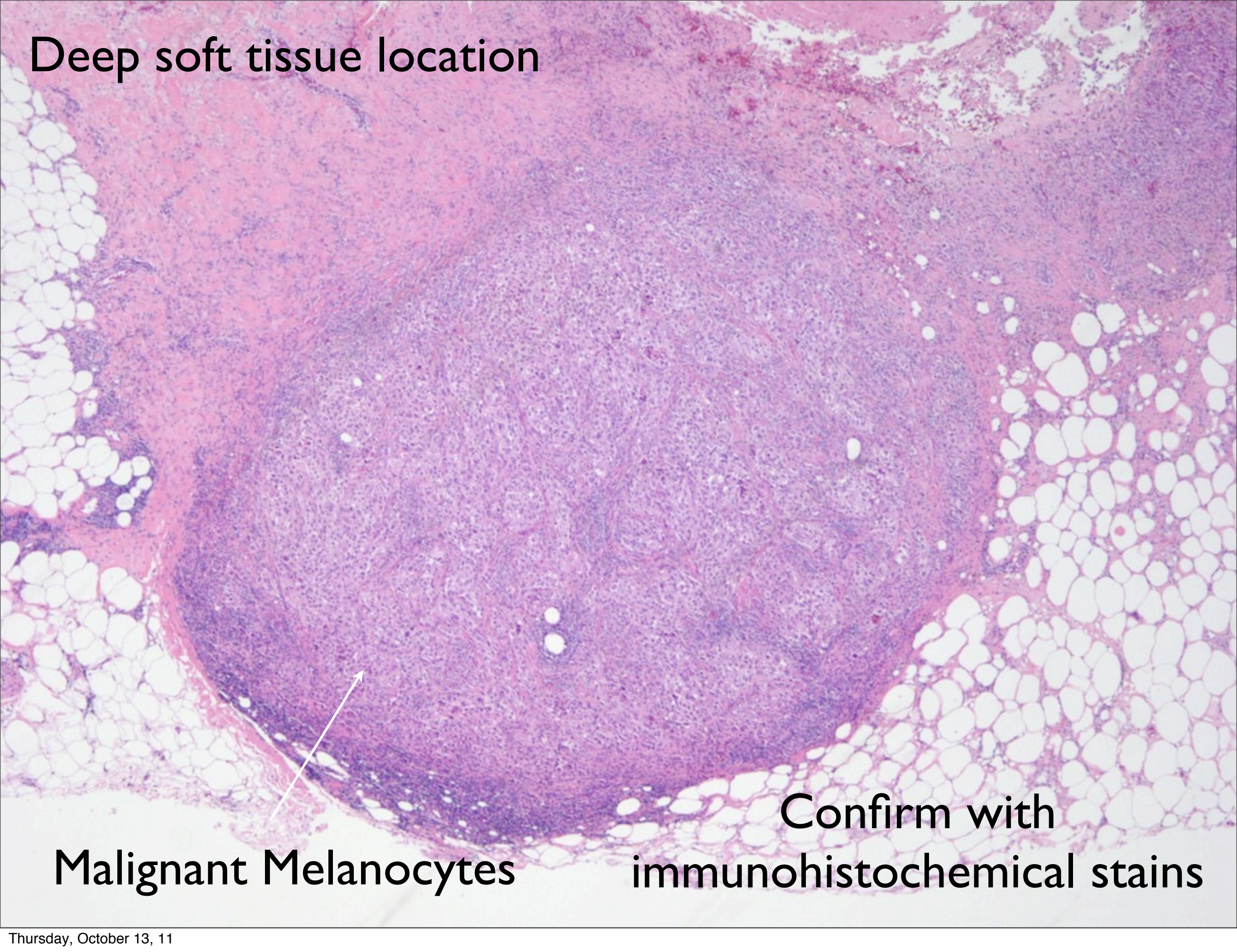




# Malignant Melanoma Metastatic to Soft Tissue



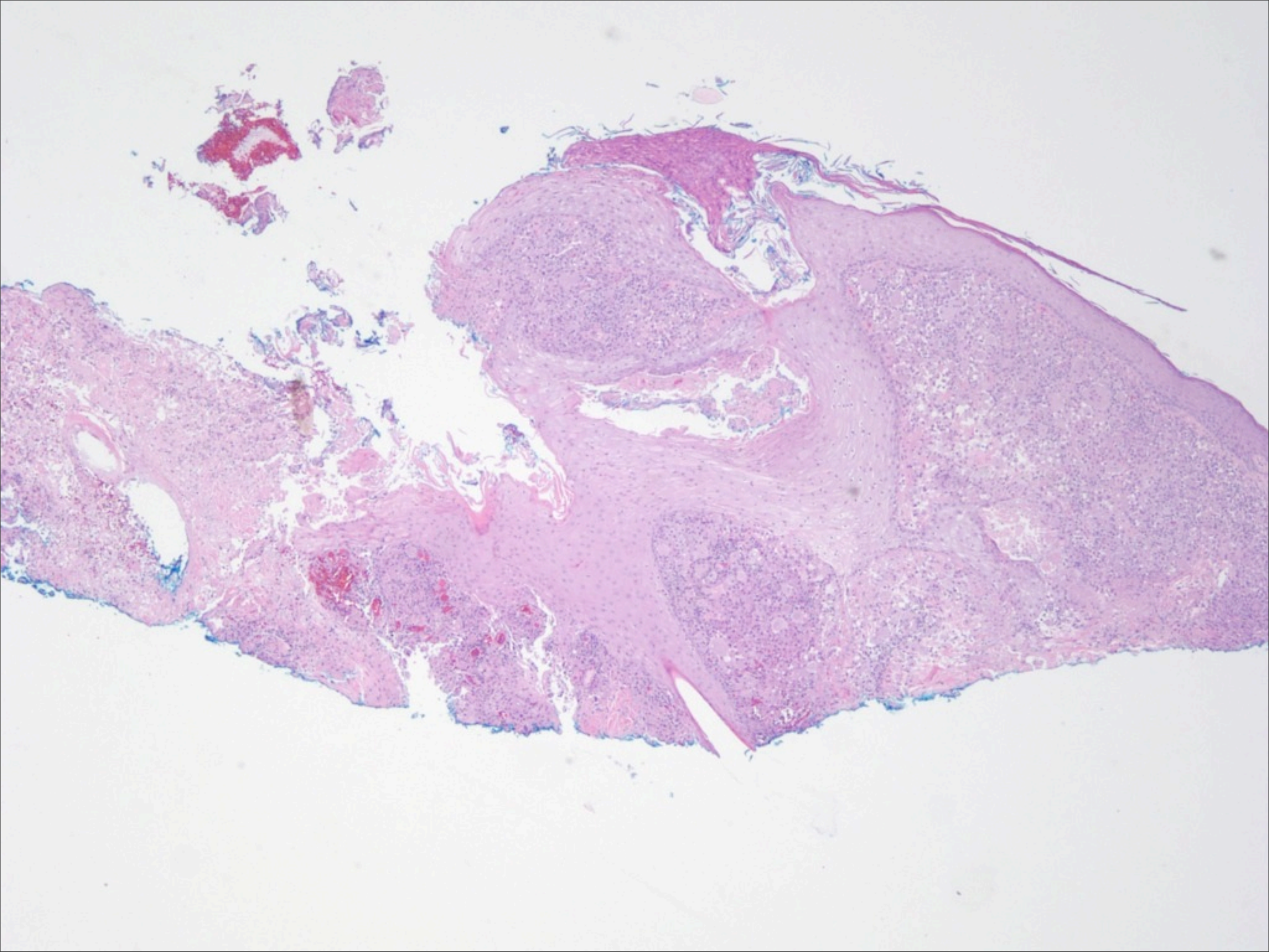
**Deep soft tissue location**



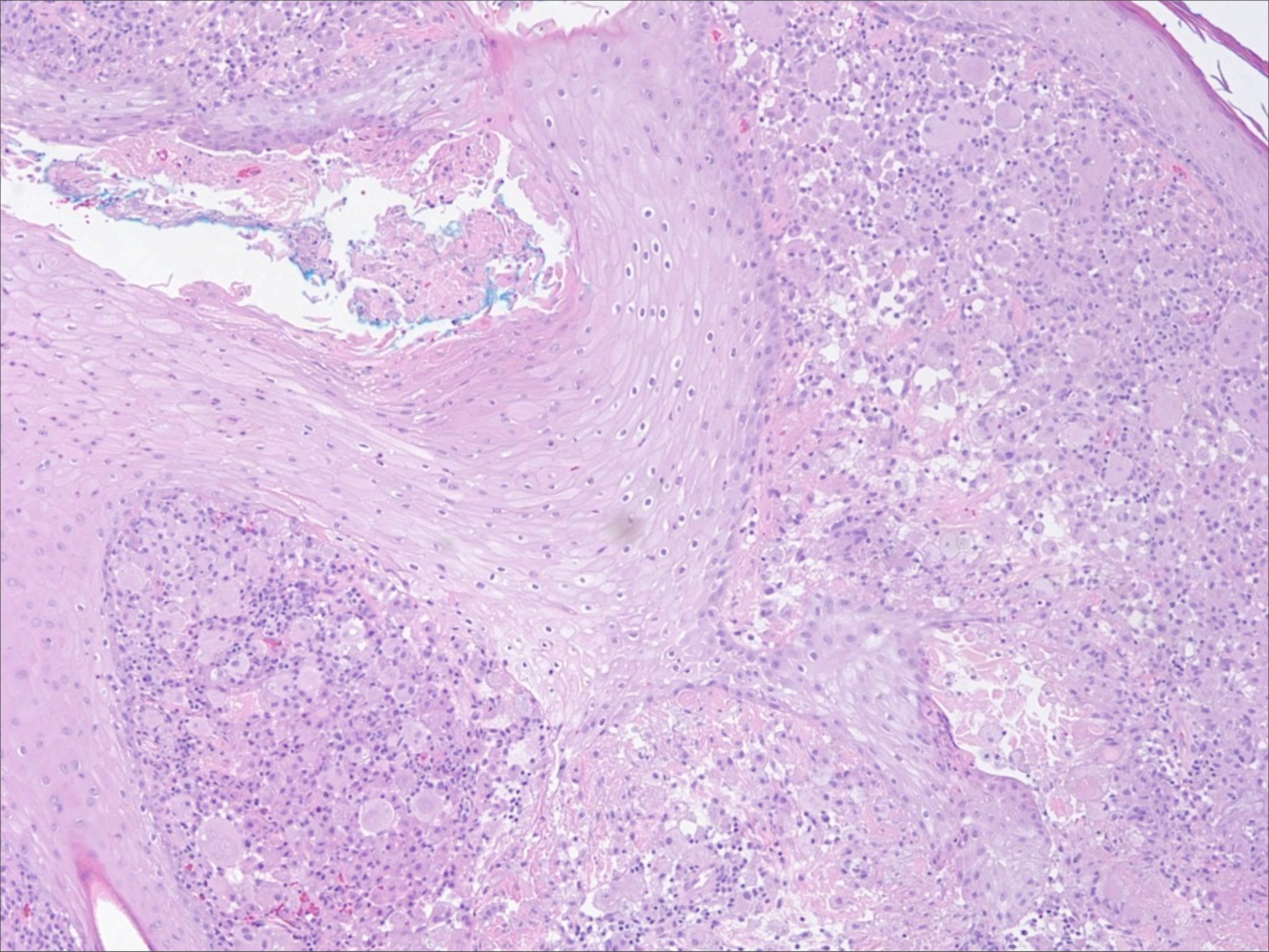
**Malignant Melanocytes**

**Confirm with  
immunohistochemical stains**

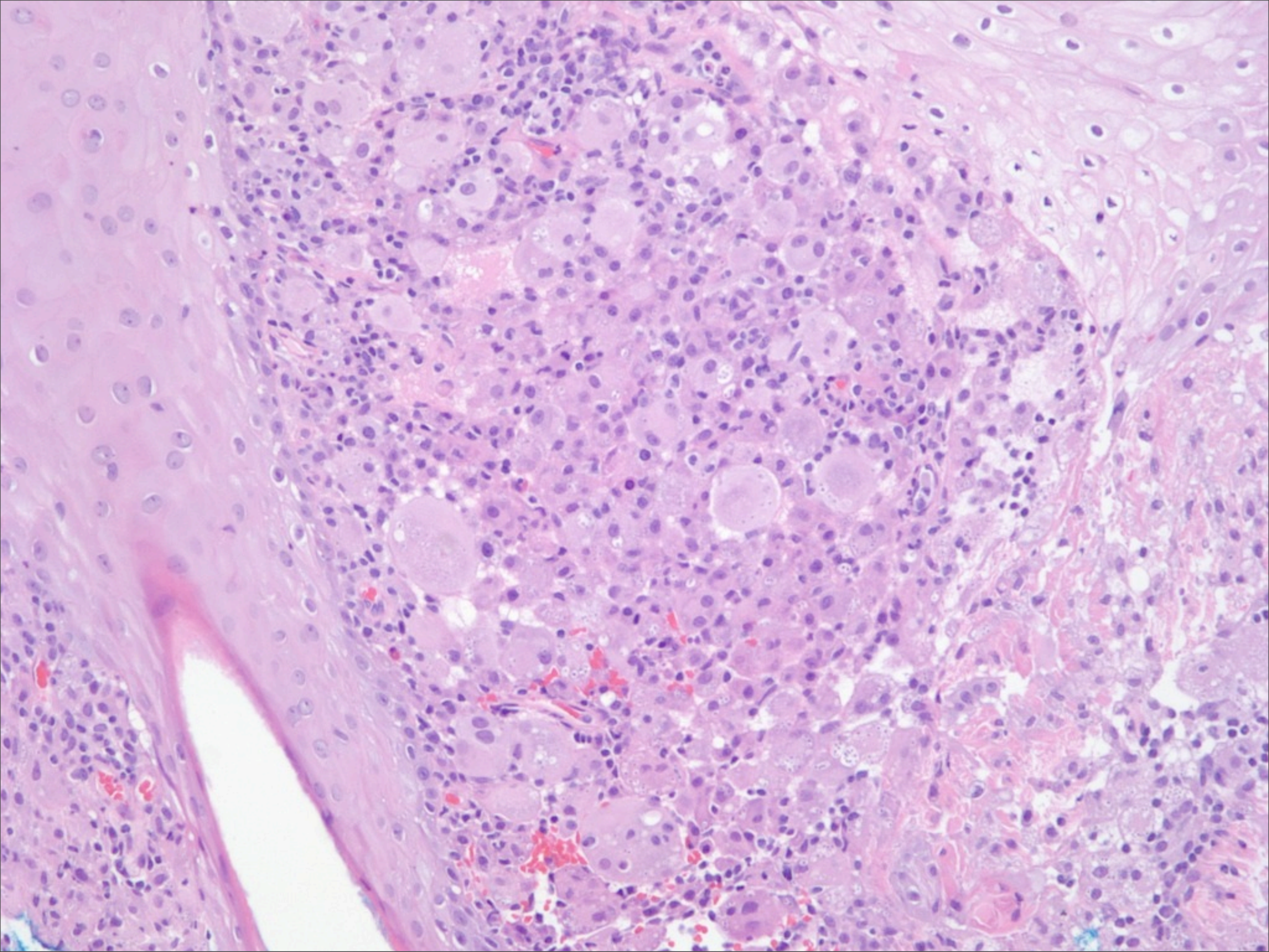




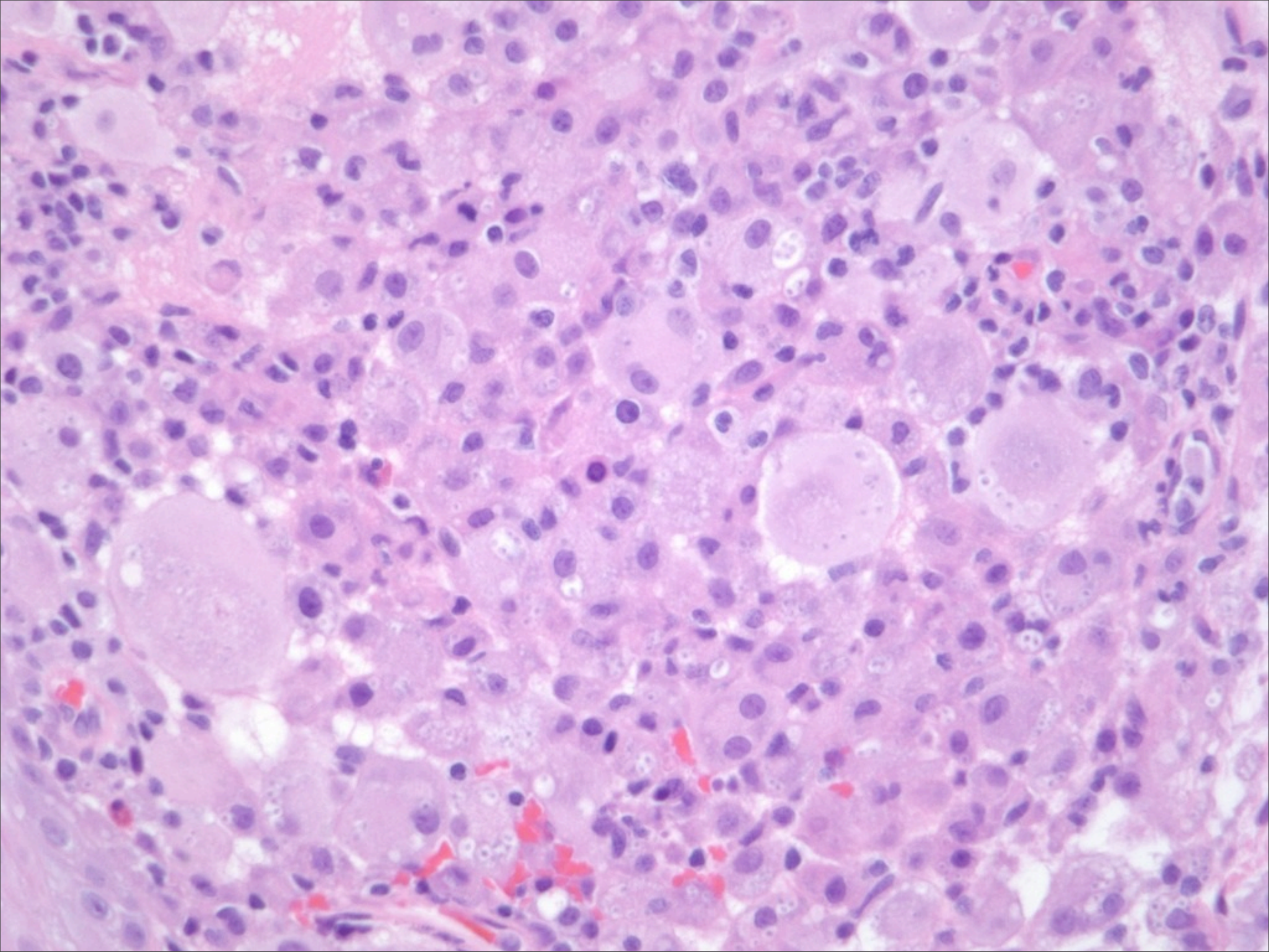




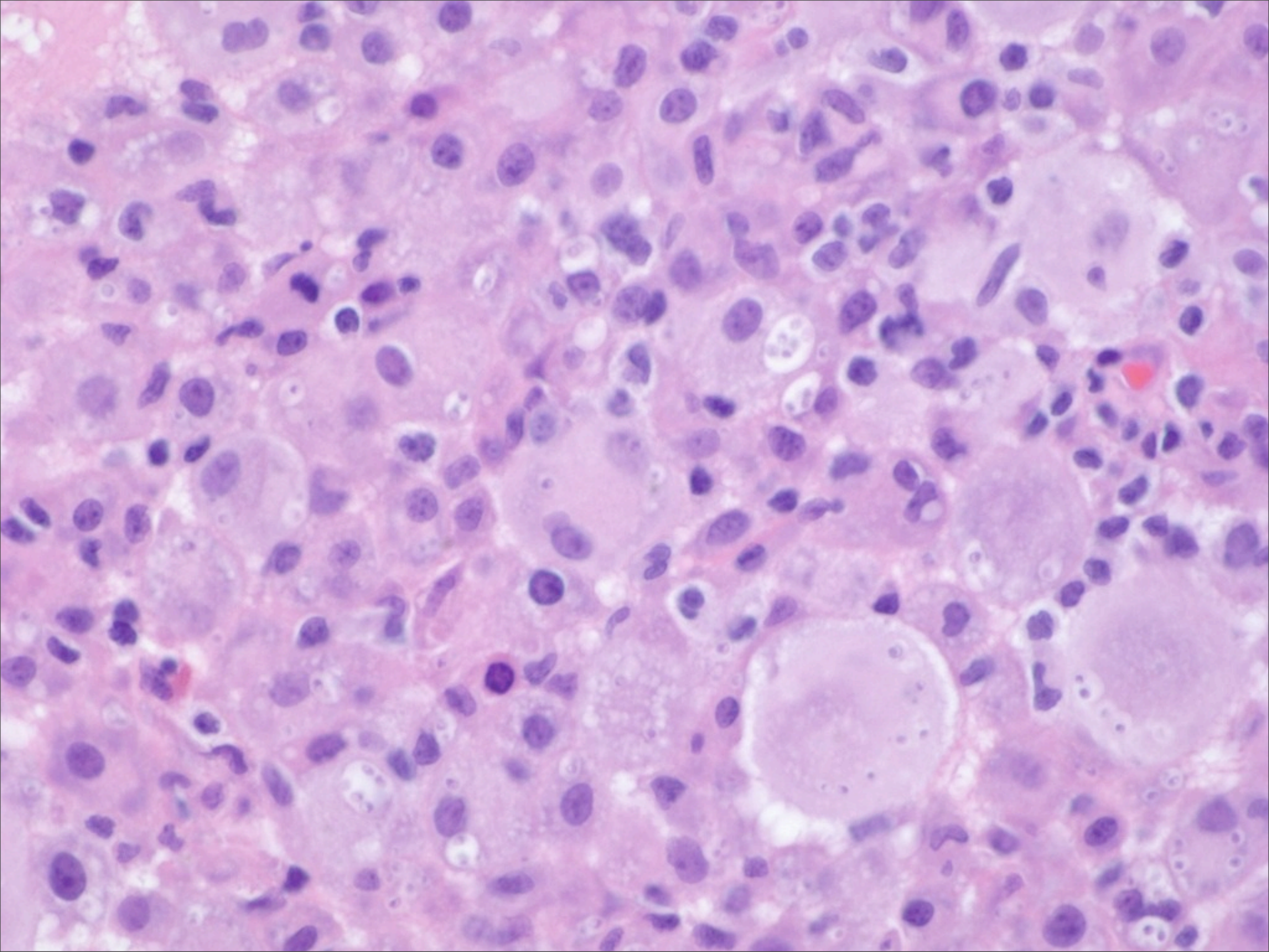




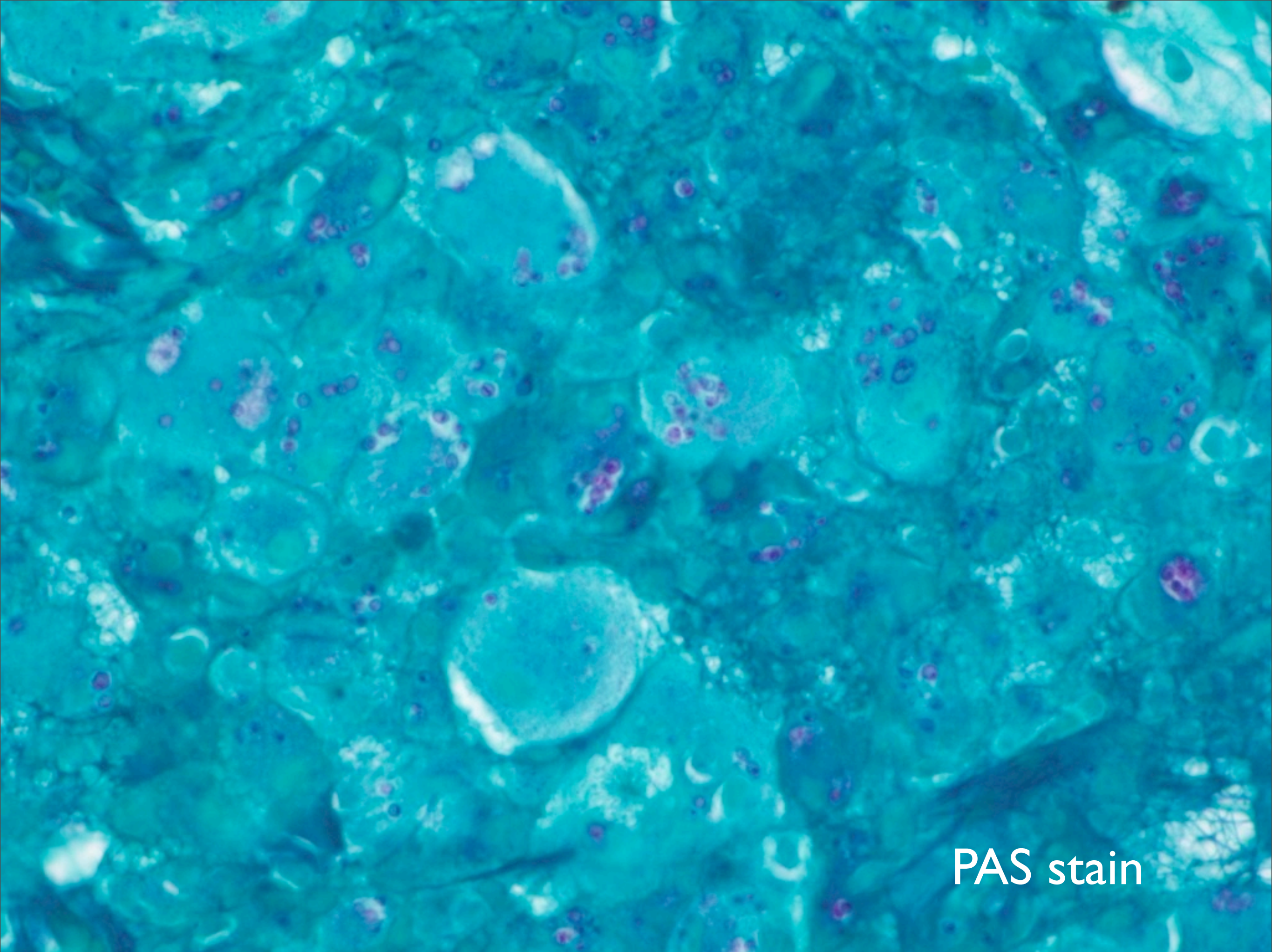










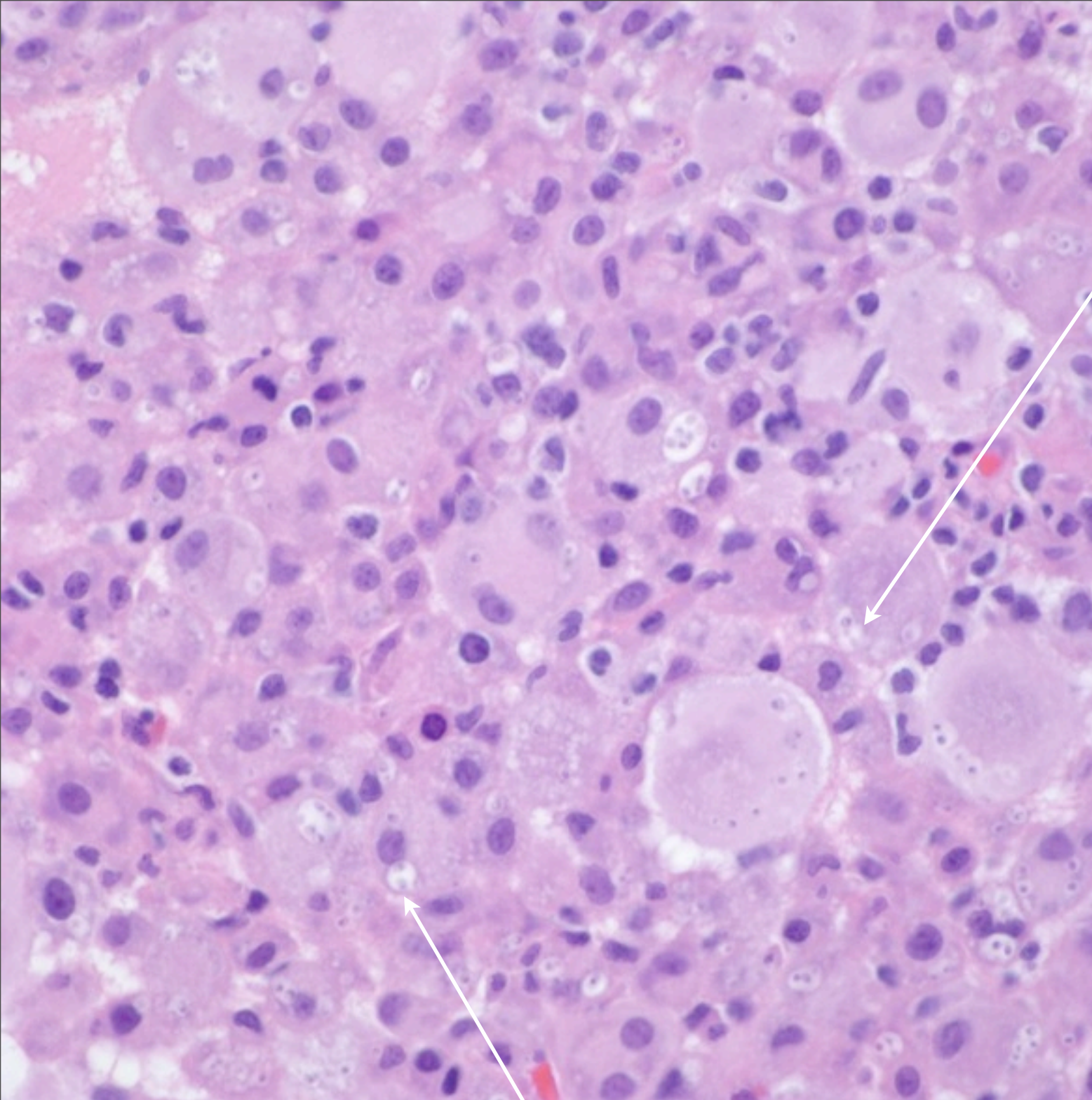


PAS stain



# Histoplasmosis





Small organisms with clearing

Numerous histiocytes with organisms

Confirm with PAS or GMS stains