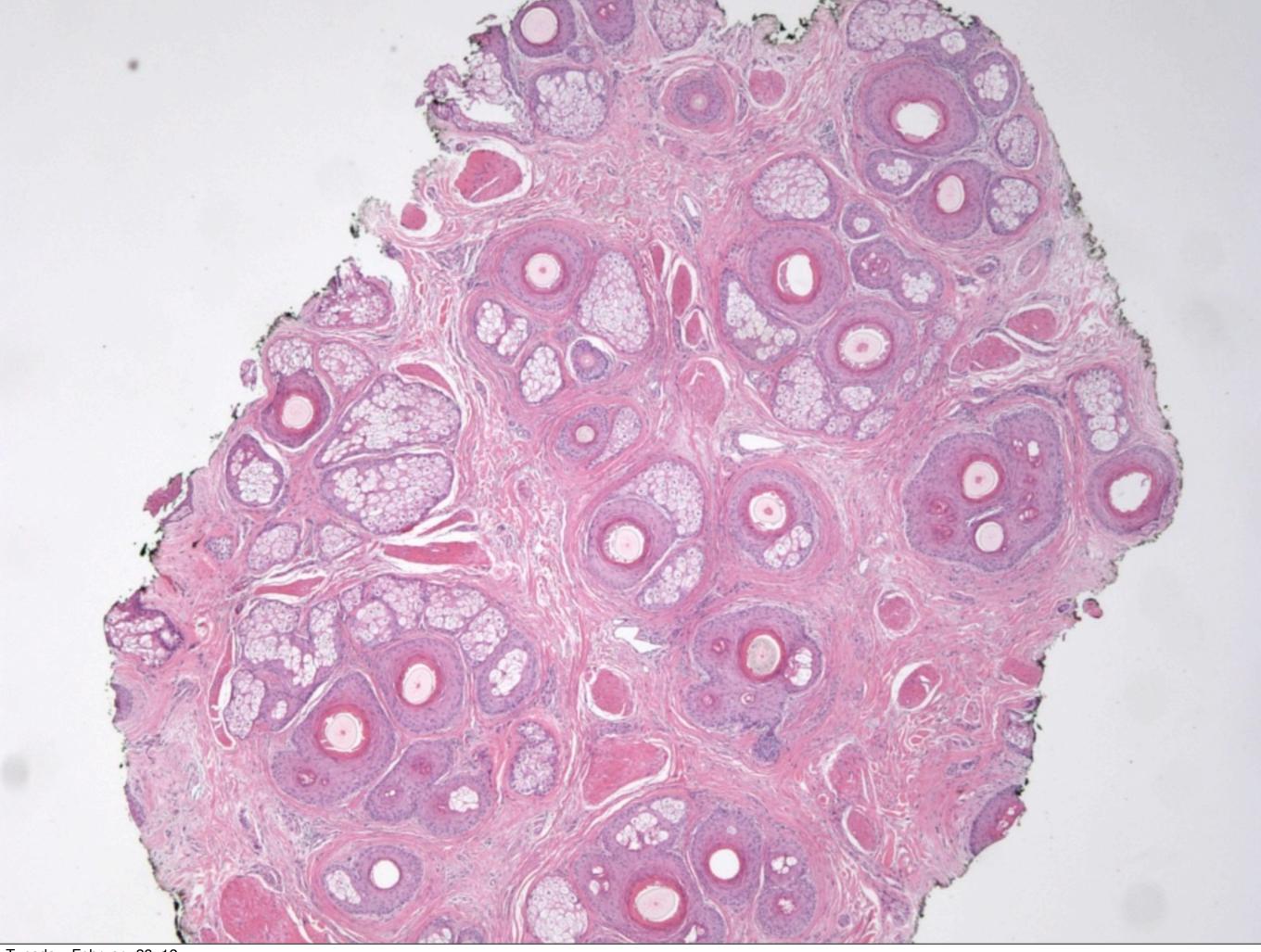
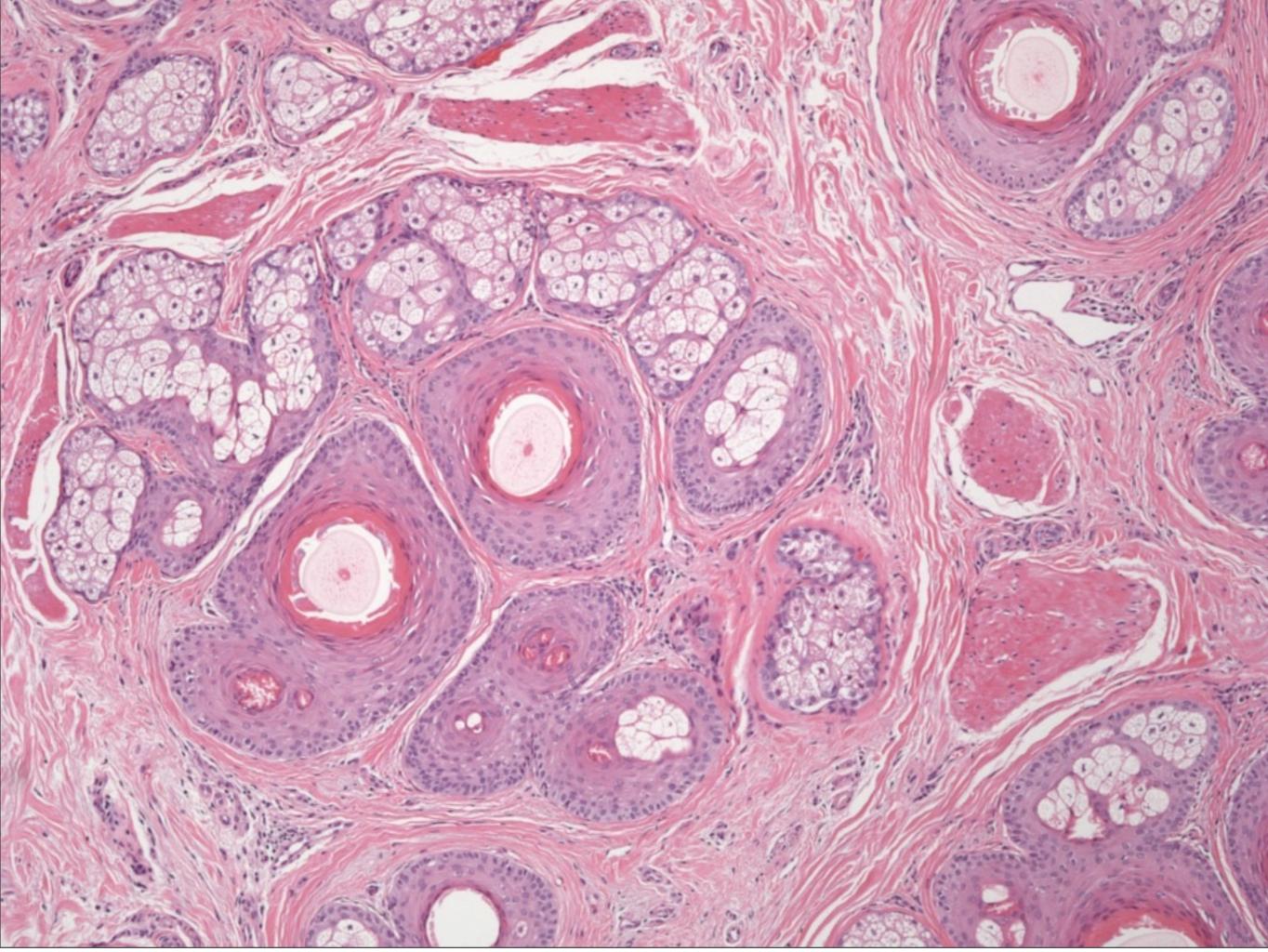
## Dermatopathology Slide Review Part 159

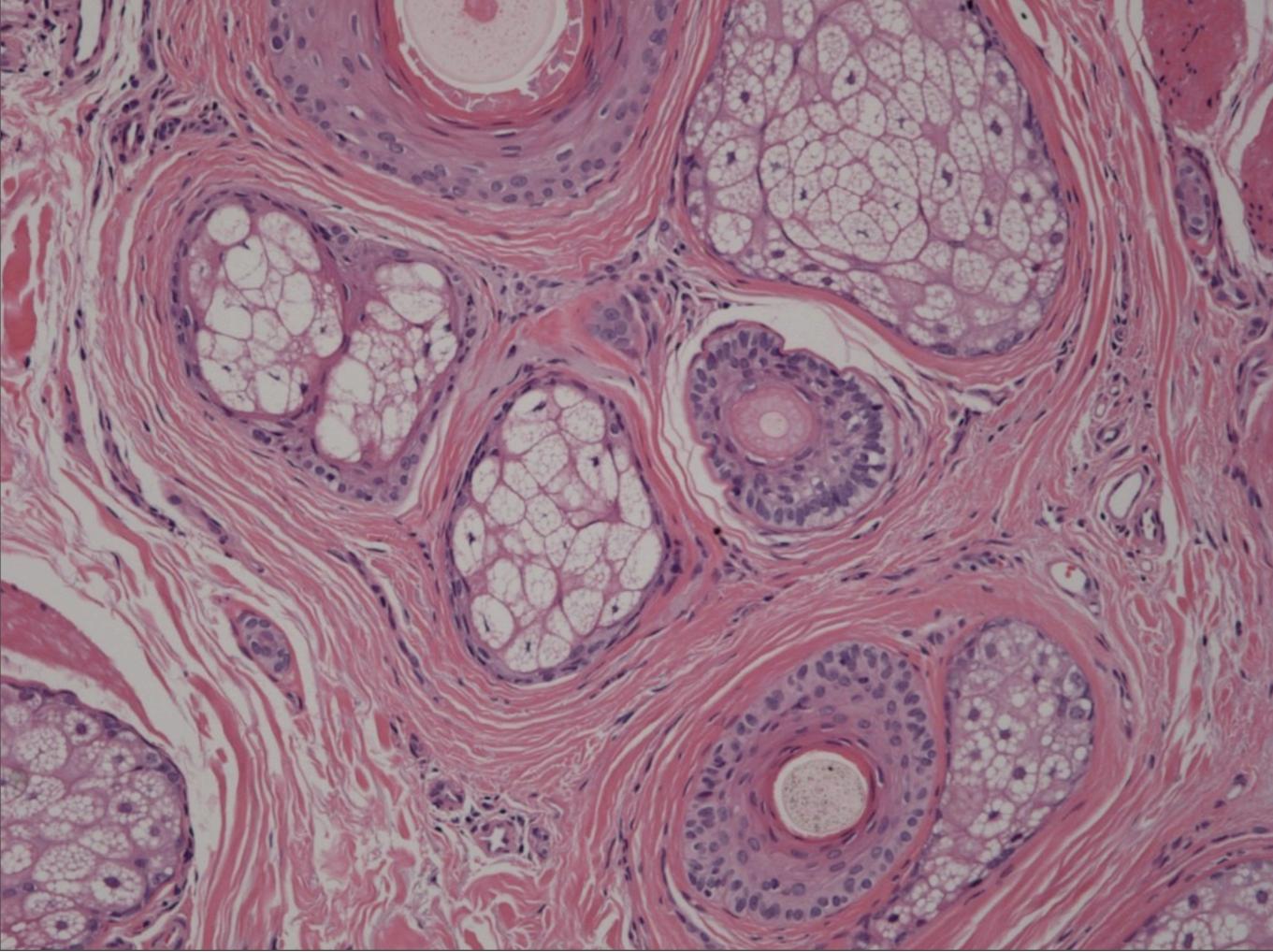
Paul K. Shitabata, M.D.

Dermatopathology Institute
Torrance, CA

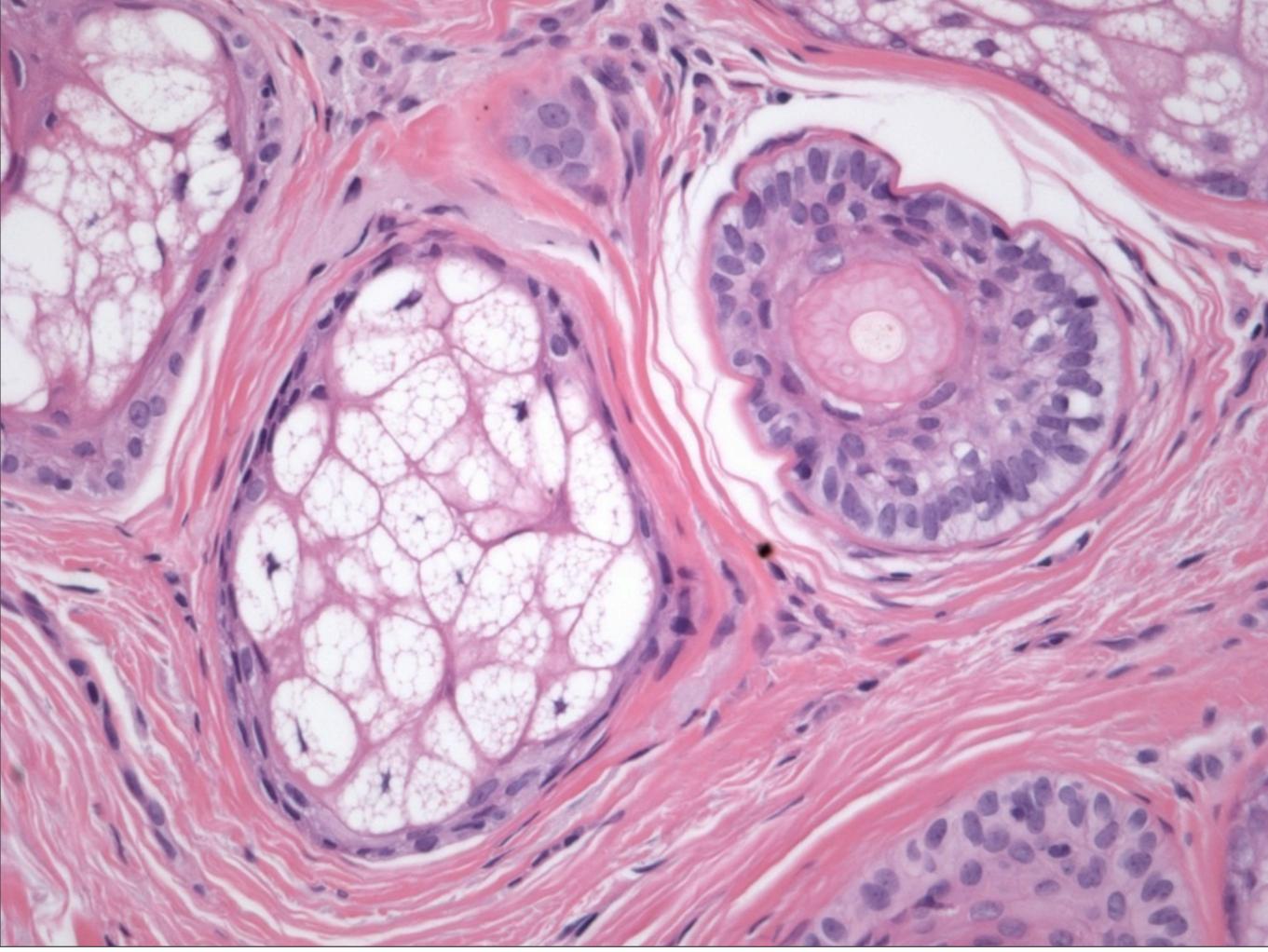




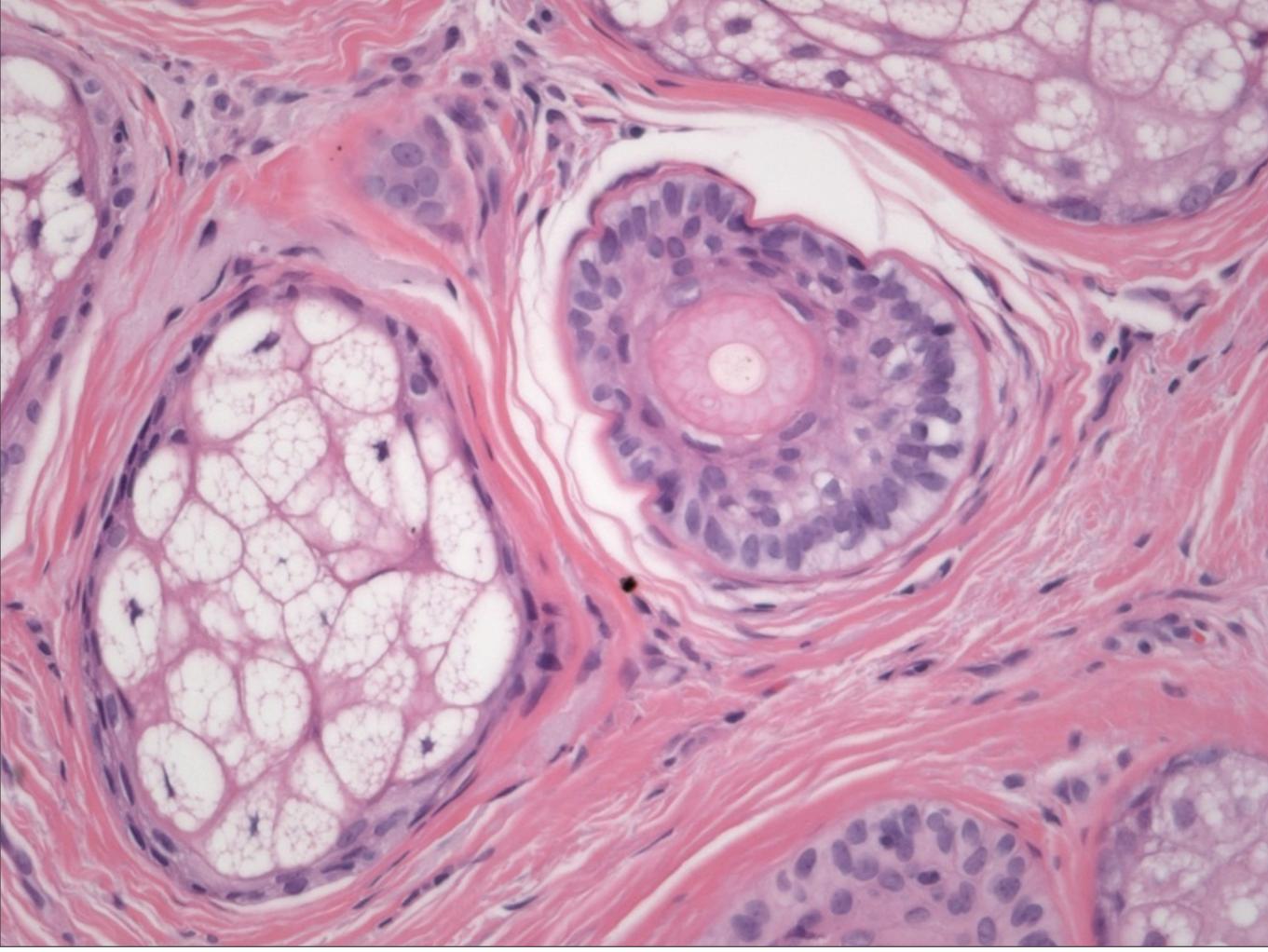
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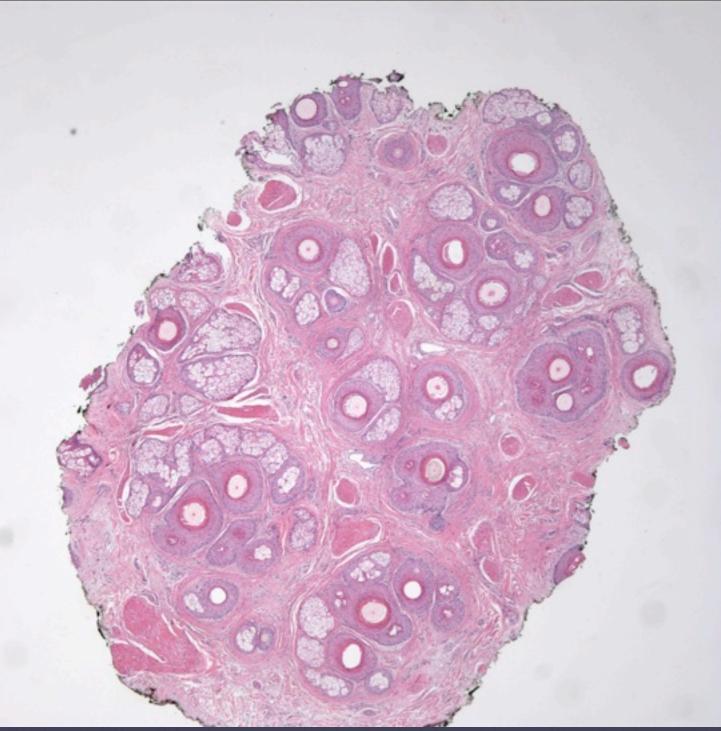


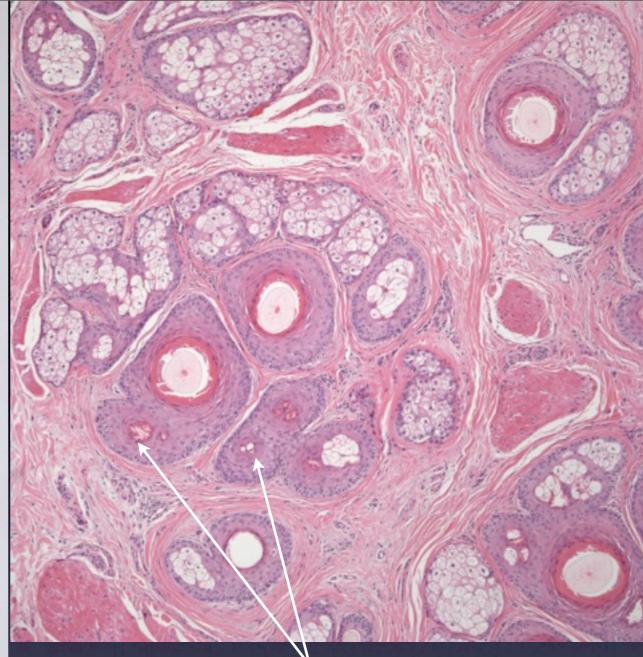
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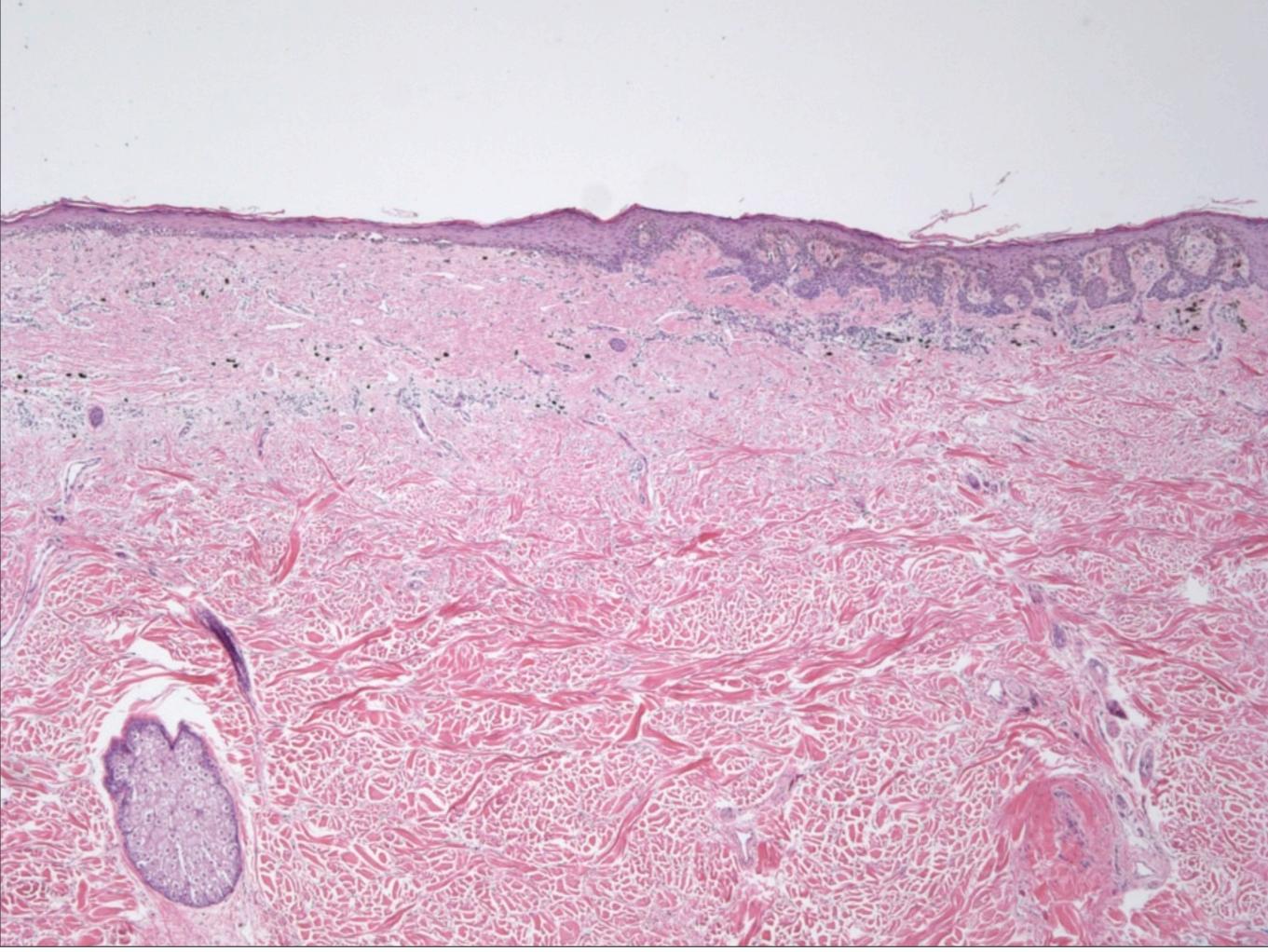




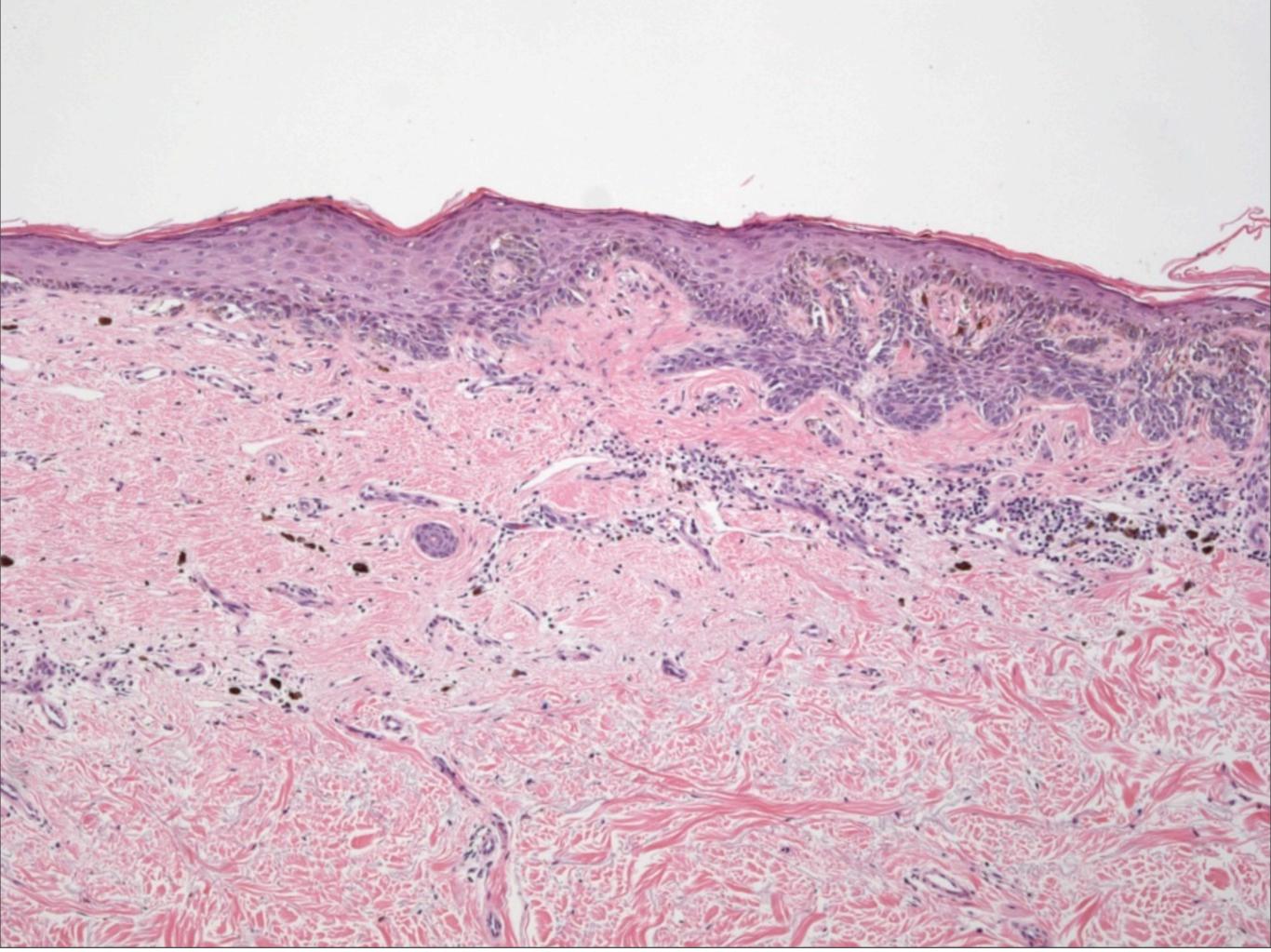
Vellus hairs

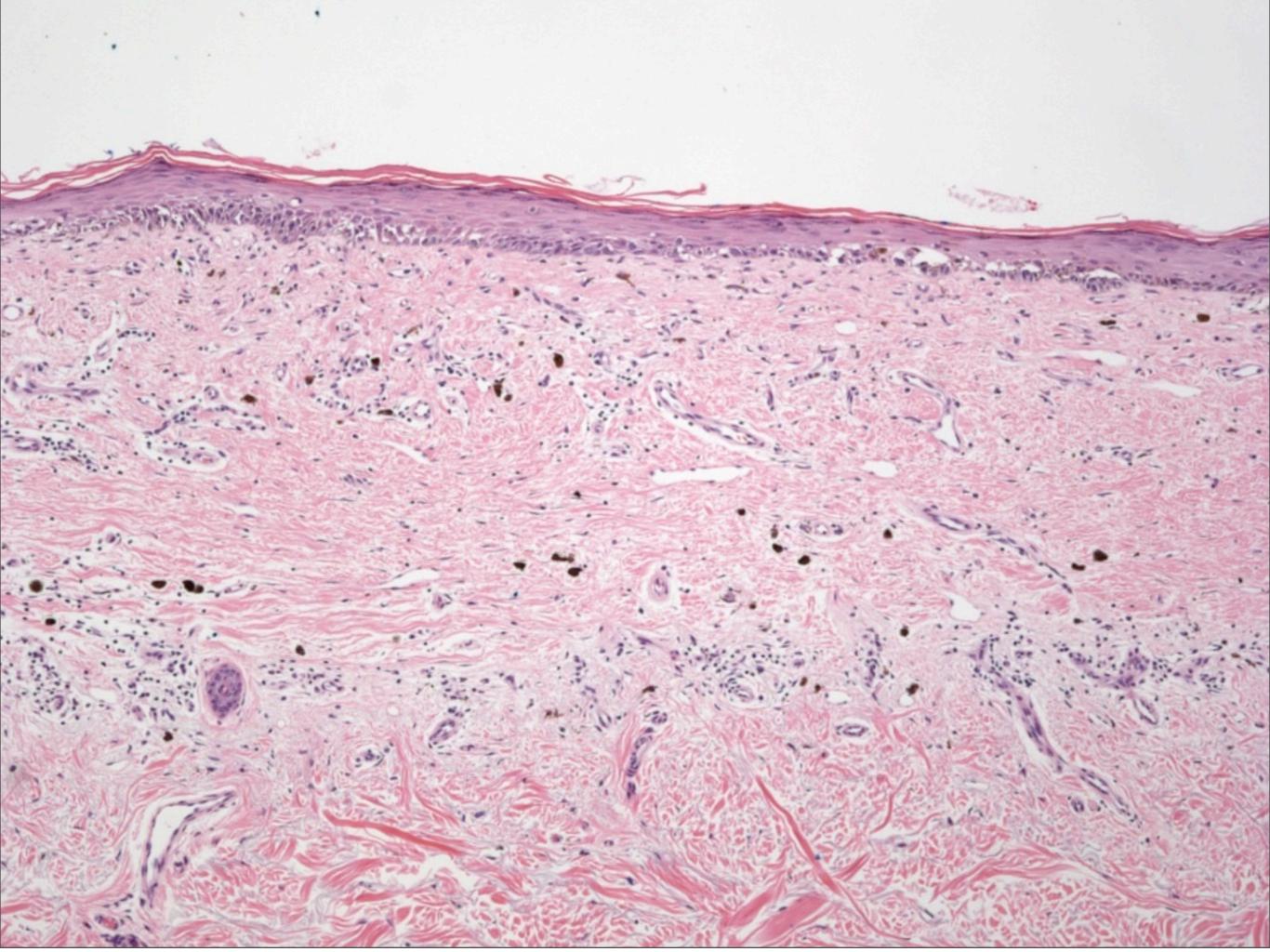
Normal total follicle numbers

Increased vellus hairs with relative sebaceous gland hyperplasia

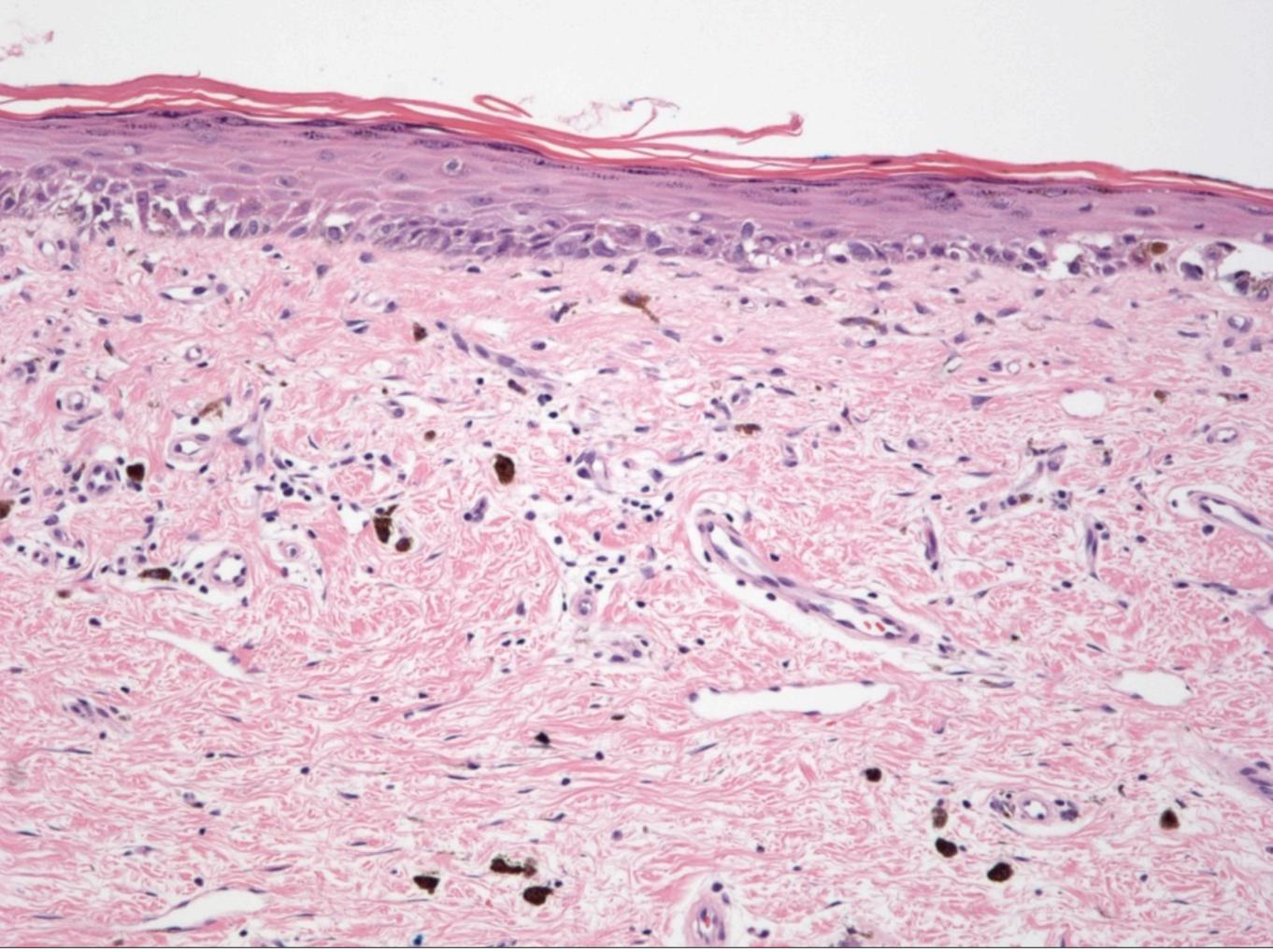


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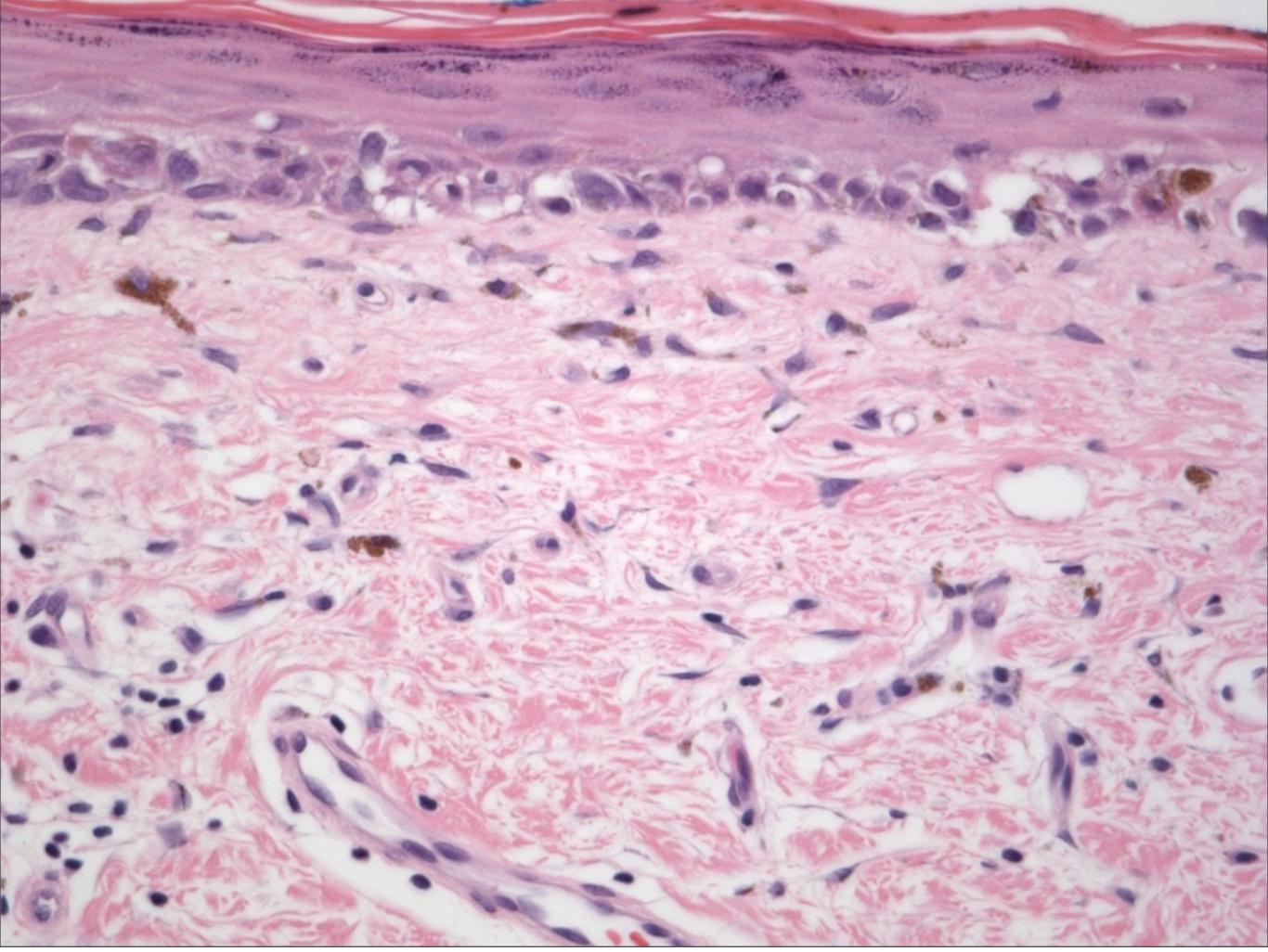




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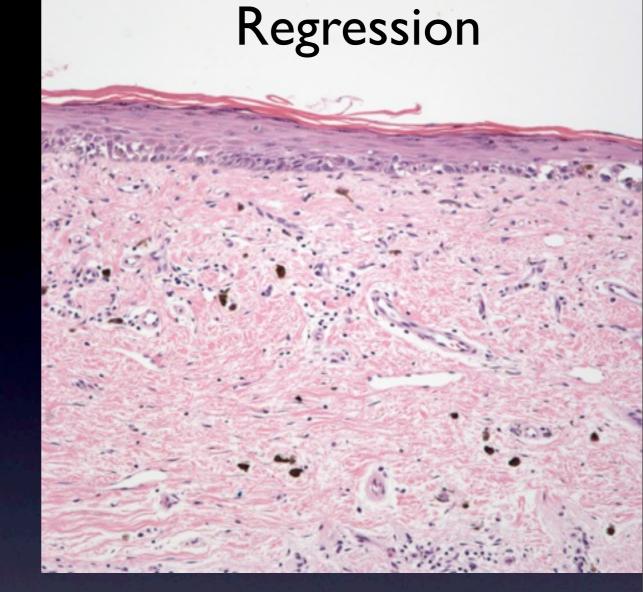
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## Melanoma with Regression

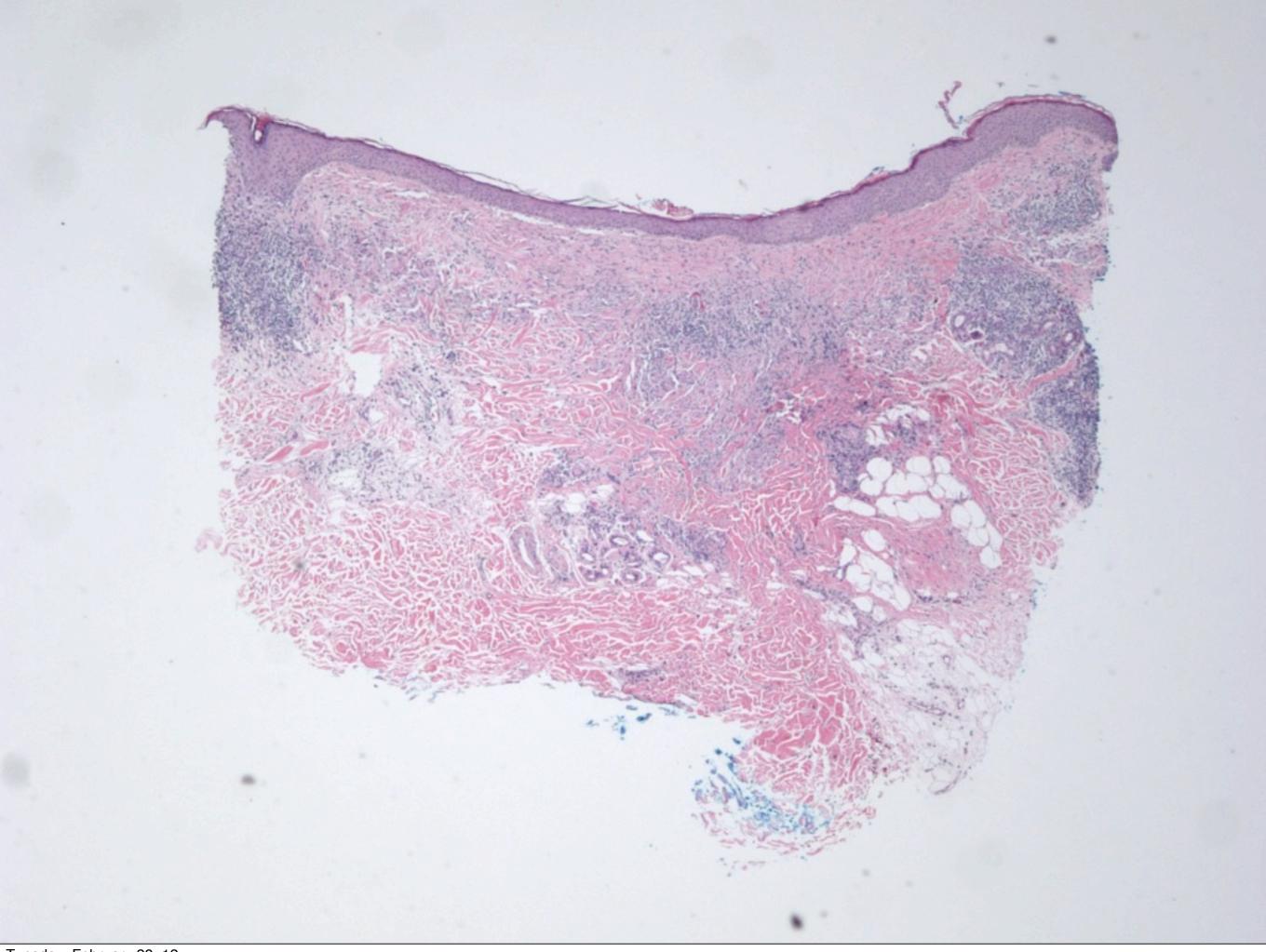
## Notes

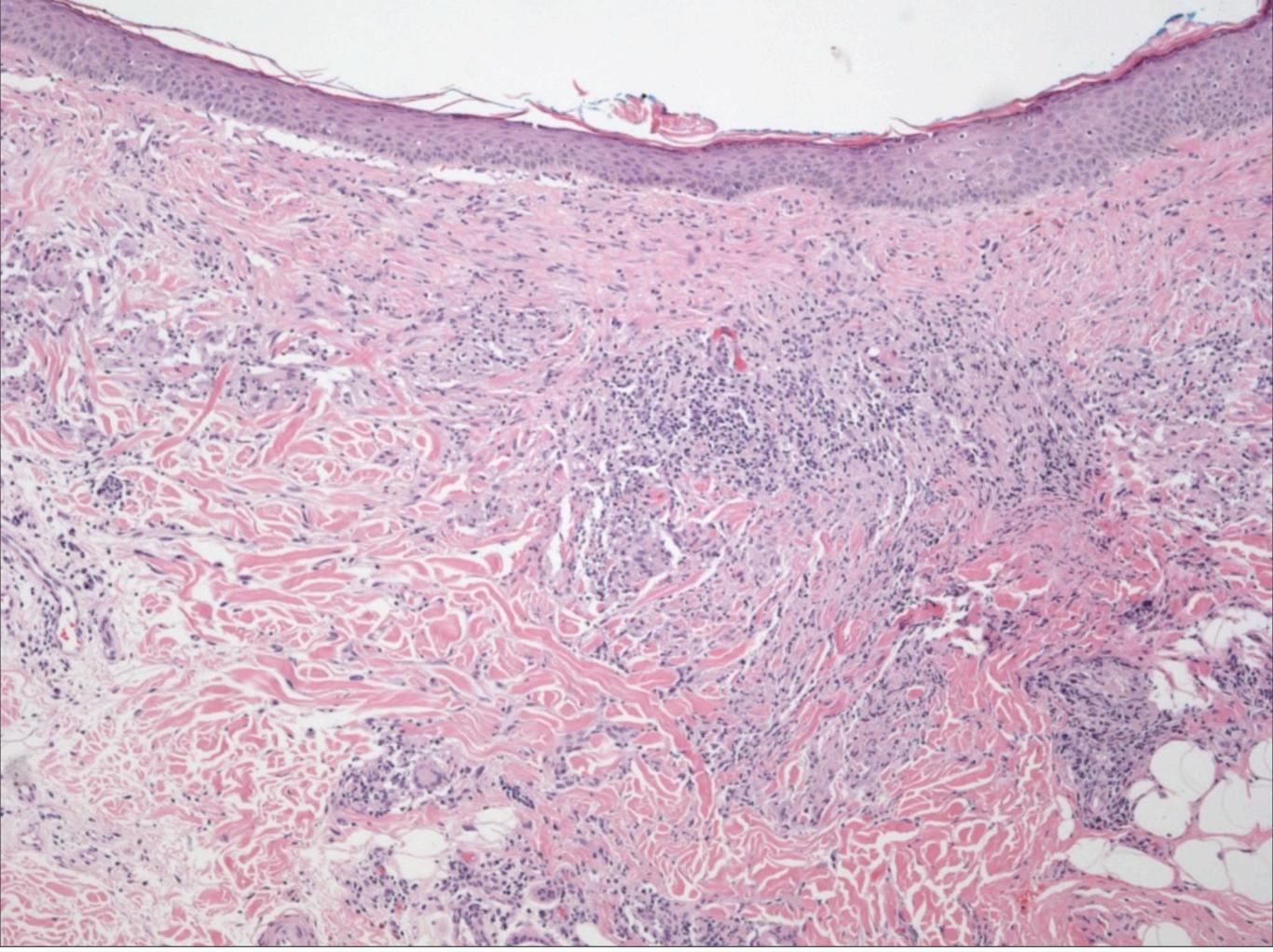
 Although this melanoma is limited to the dermal-epidermal junction, the diagnosis of melanoma in situ would be biologically inappropriate since in the presence of regression, the possibility of a prior invasive melanoma component cannot be excluded.

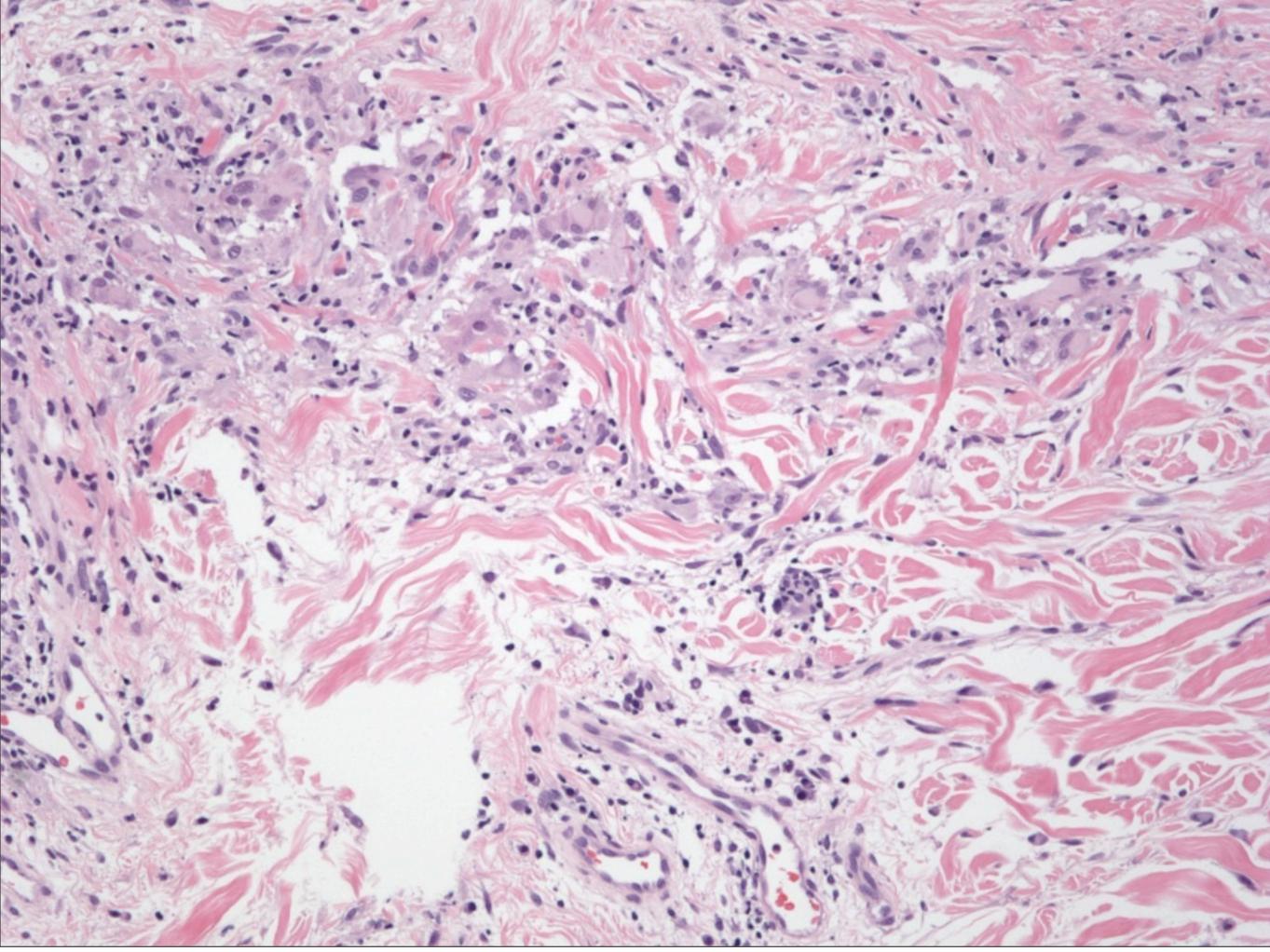




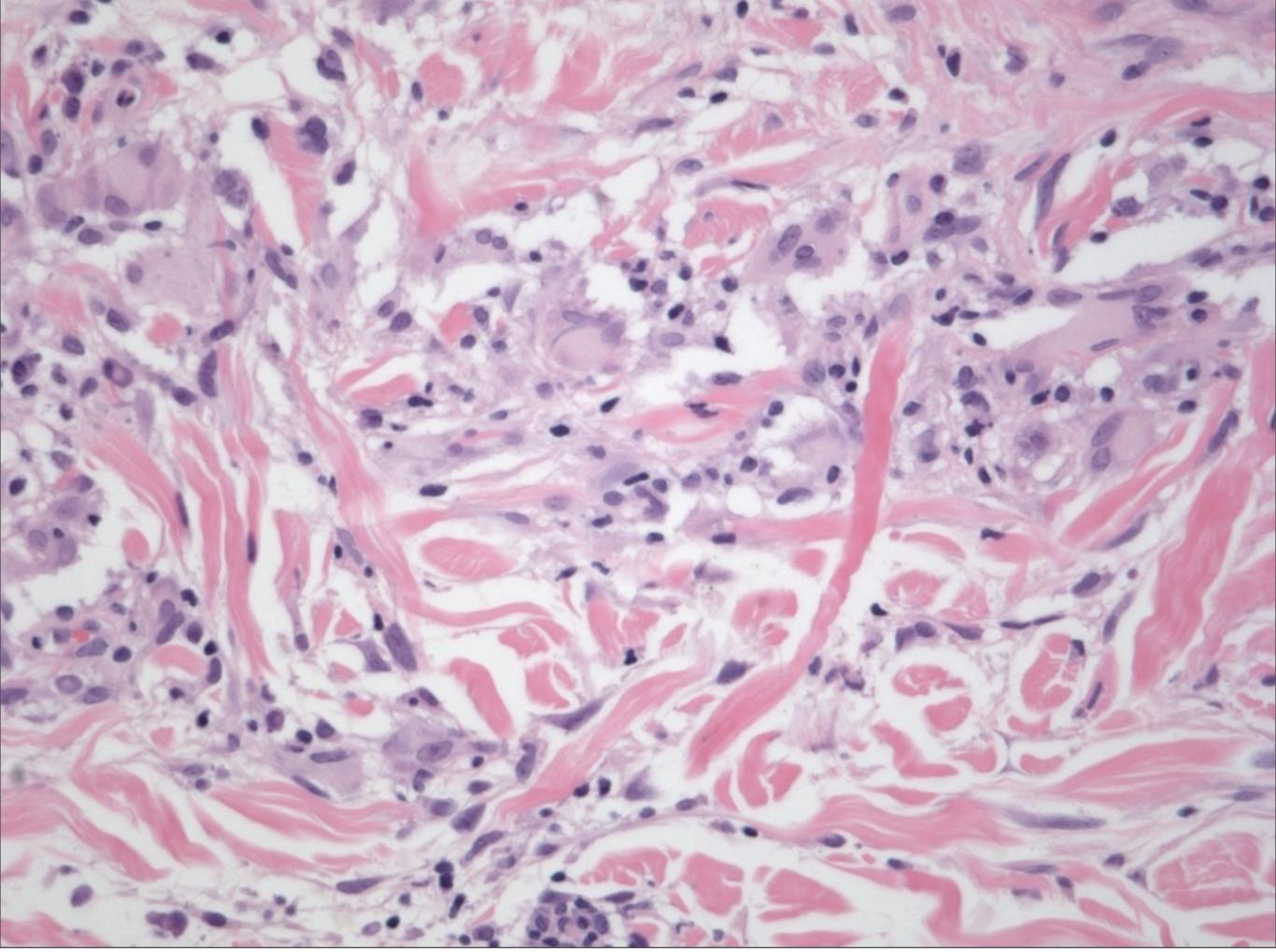
Fibroplasia, flattened rete ridge, telangiectasia, melanophages



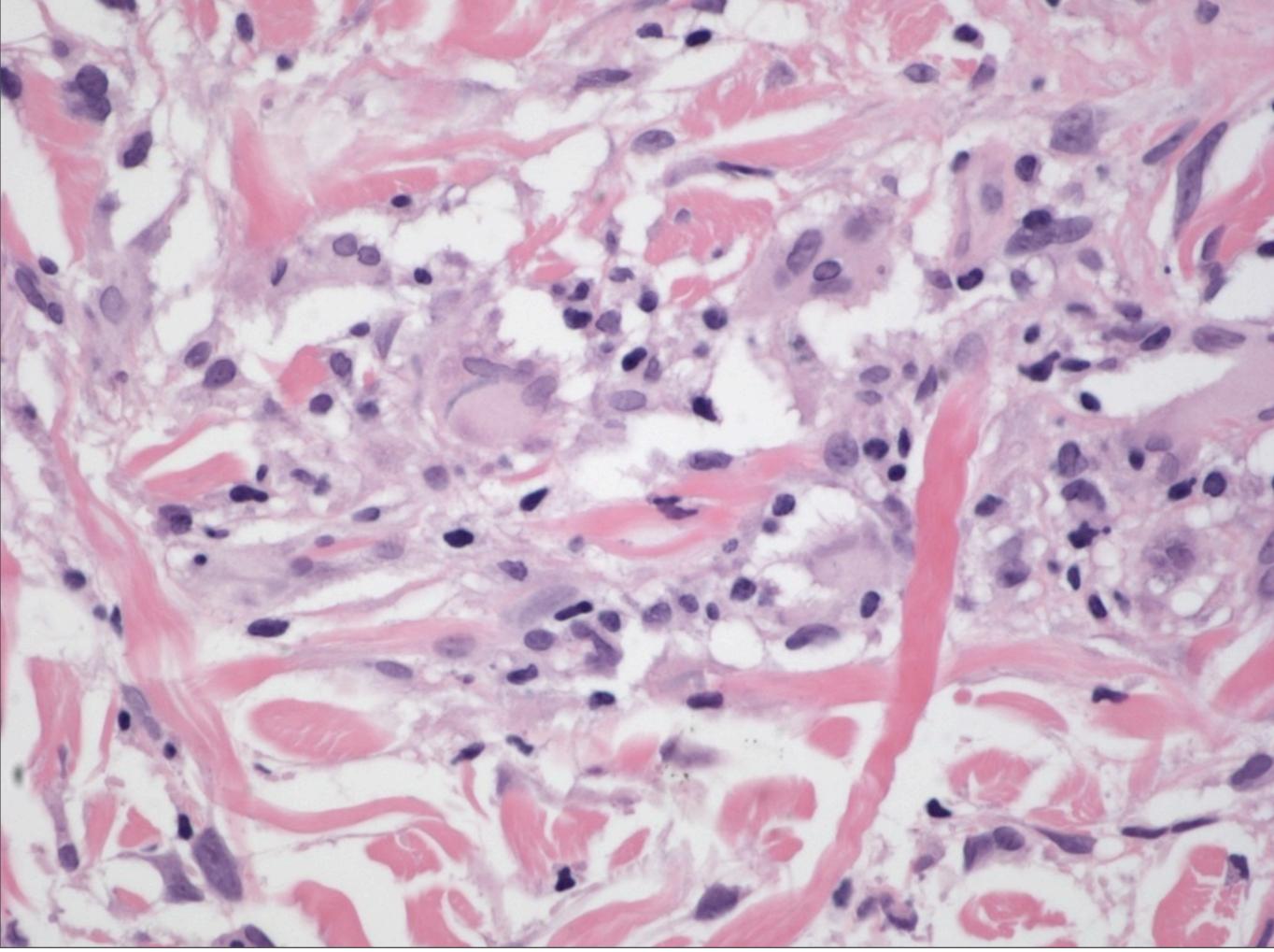




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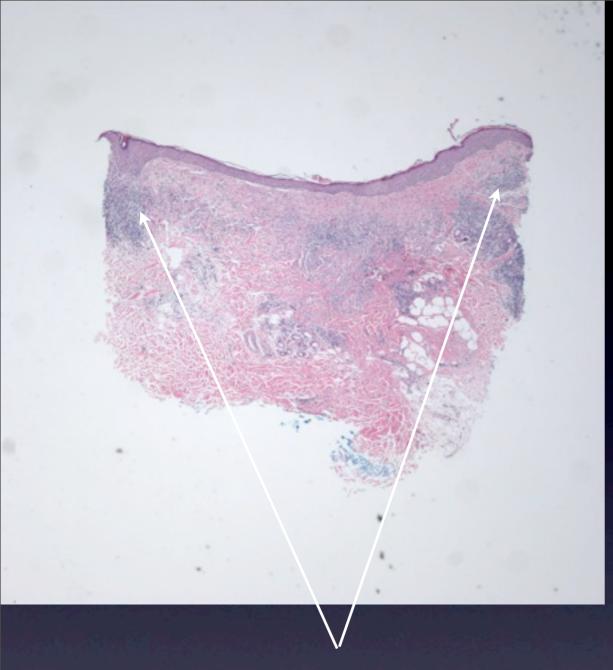


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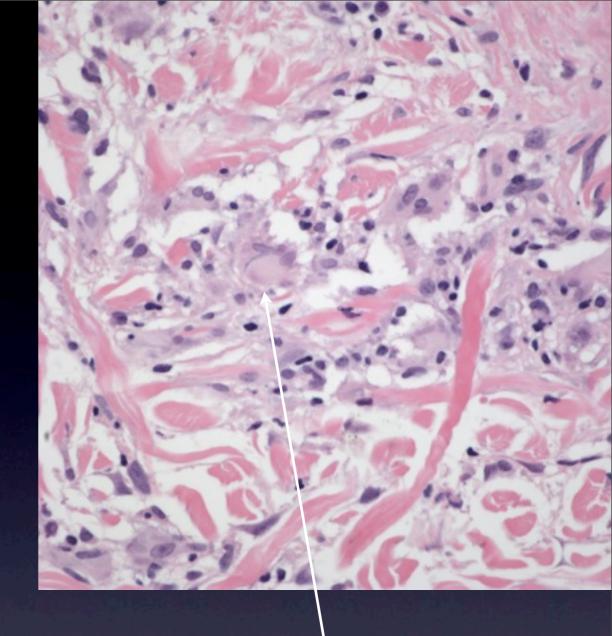
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## Annular Elastolytic Granuloma (Actinic Granuloma)

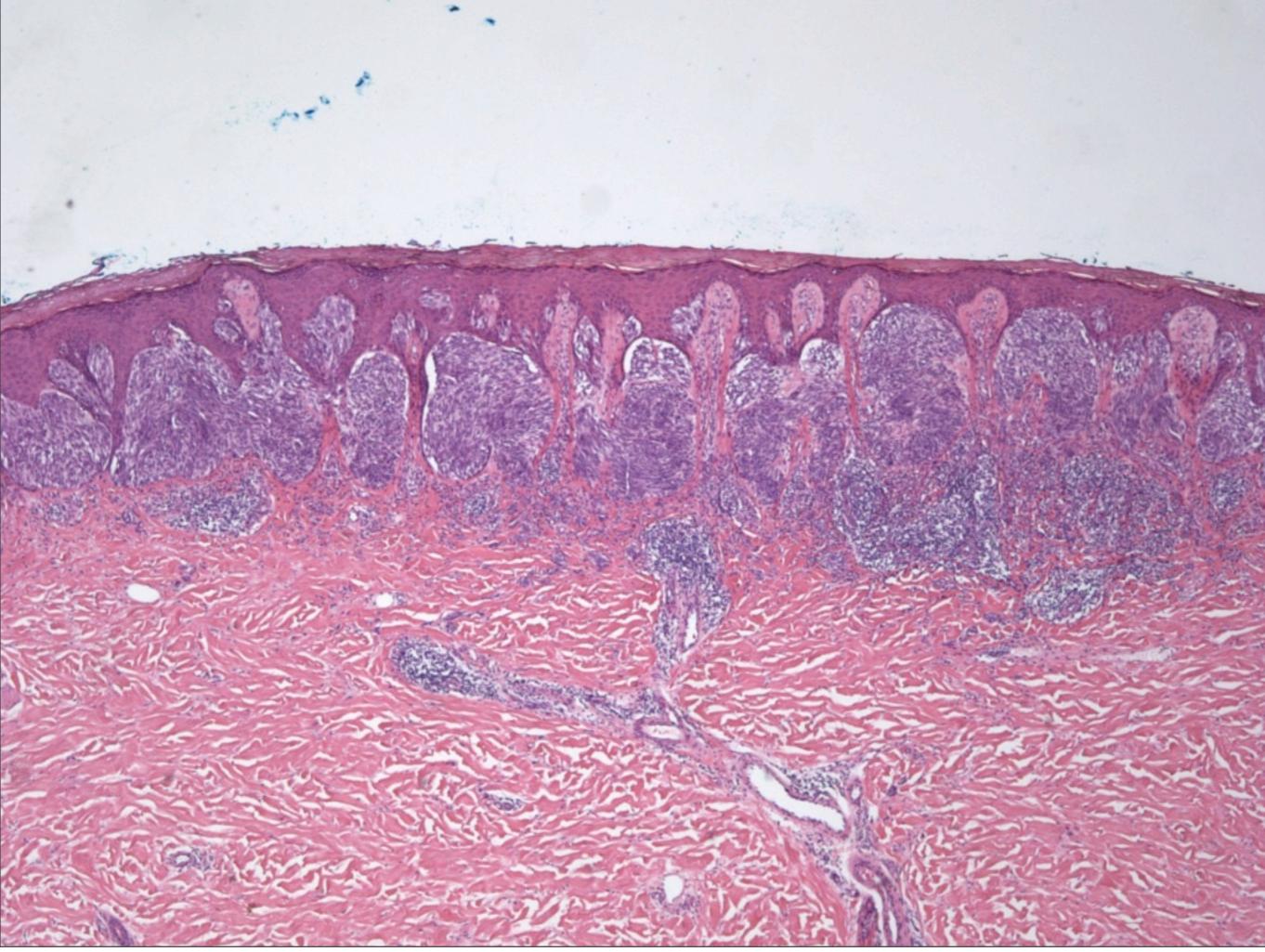


Dell-like depression

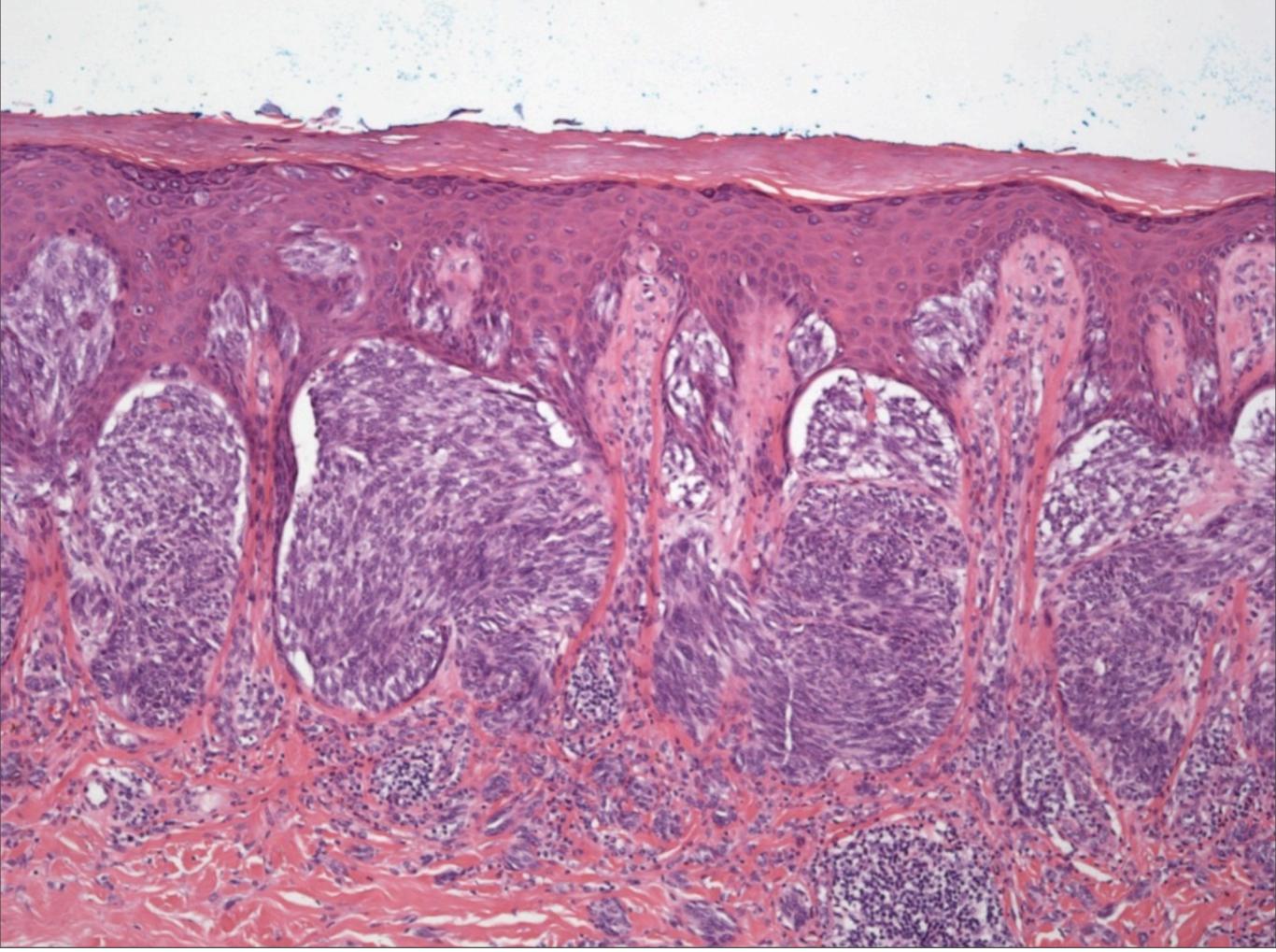
Cellular infiltrate of lymphocytes and histiocytes



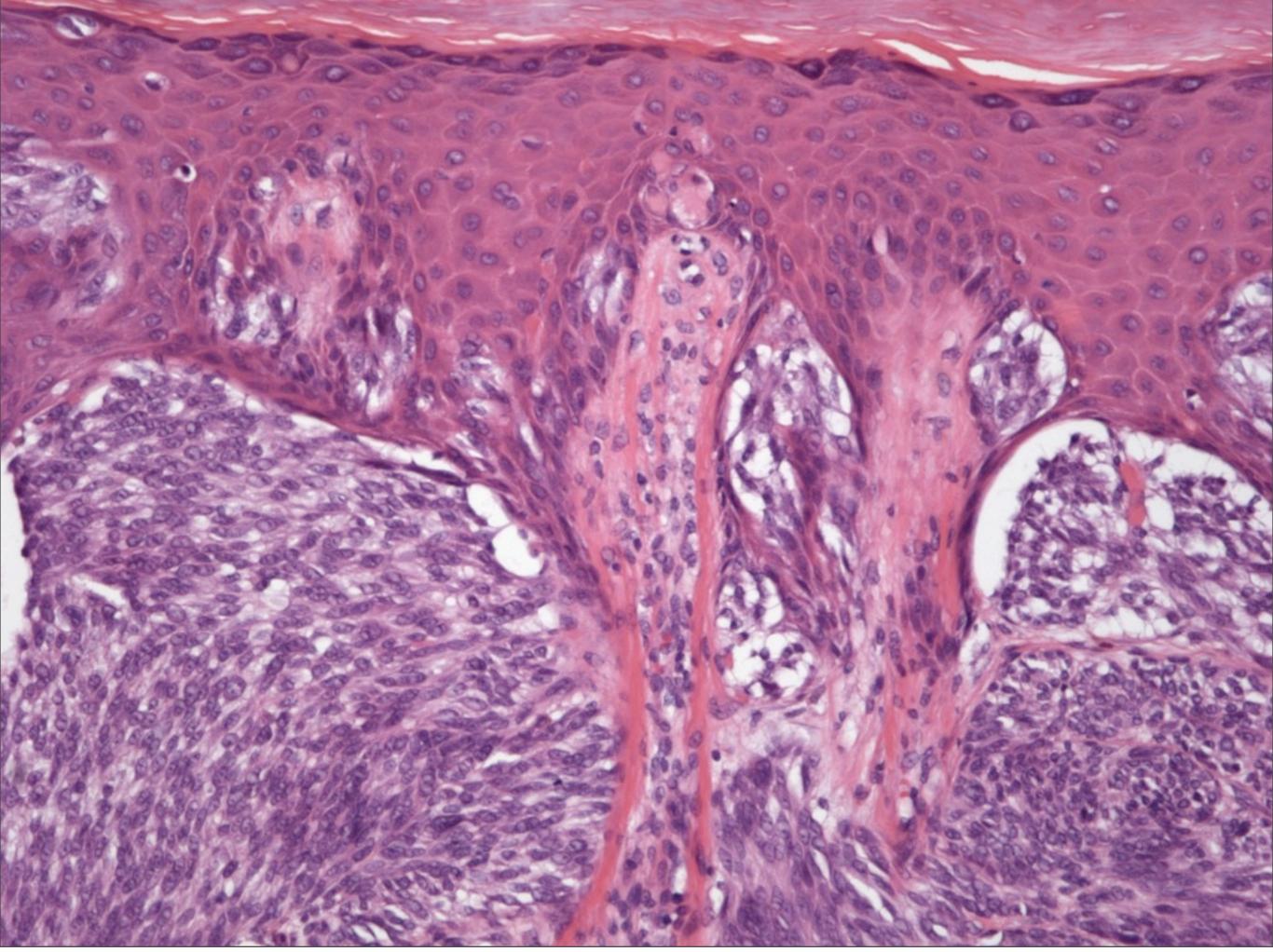
Giant cells engulfing elastic fibers



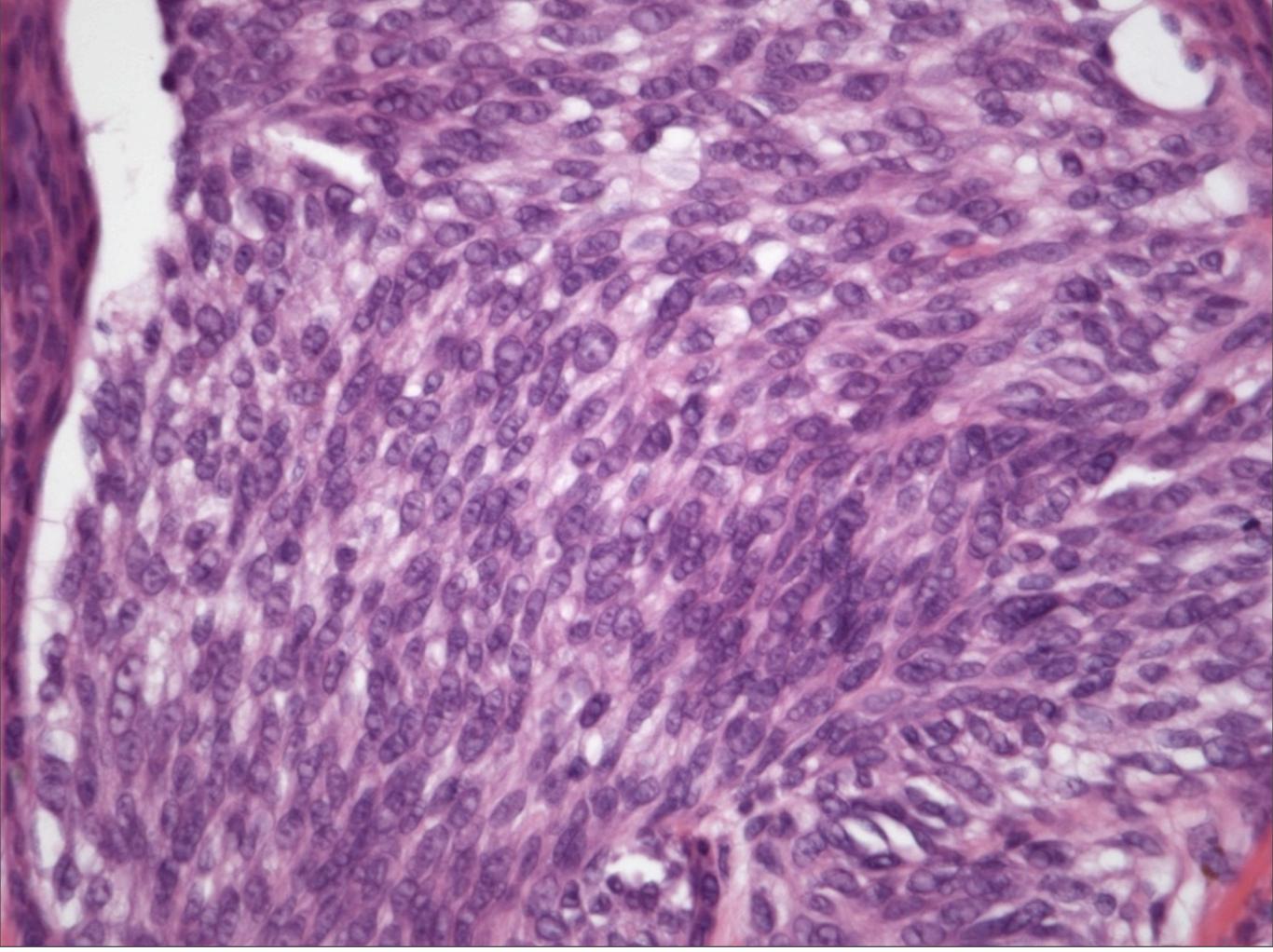
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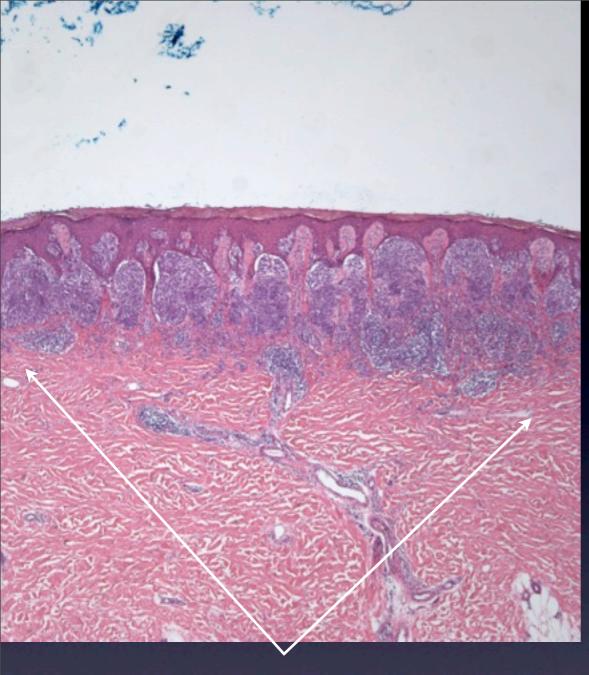


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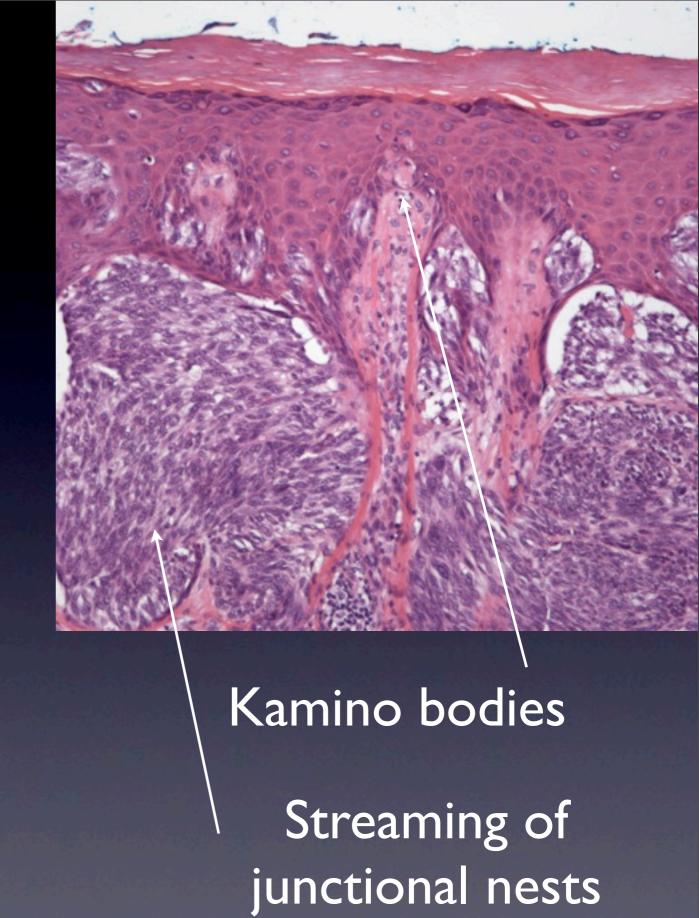
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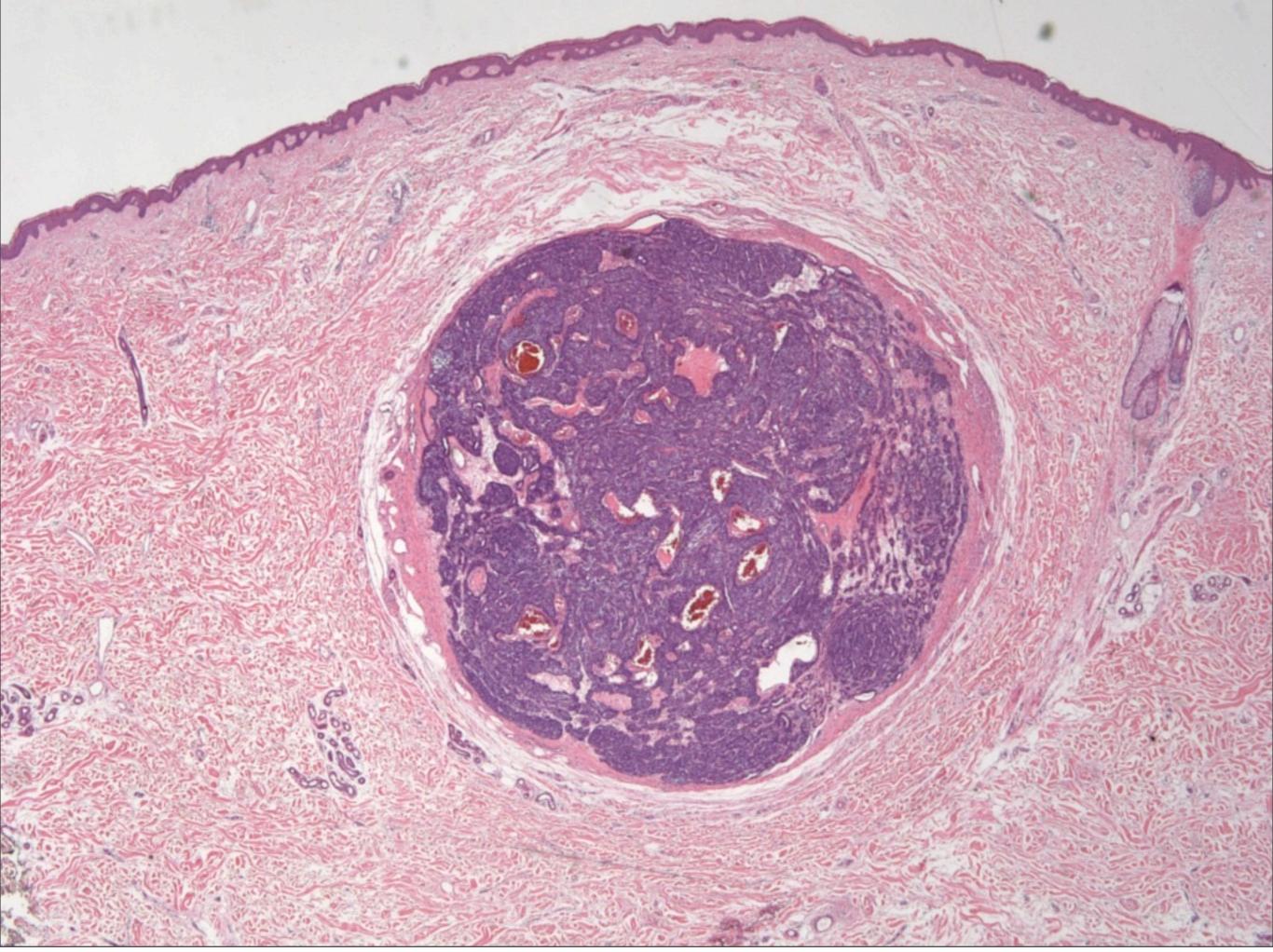




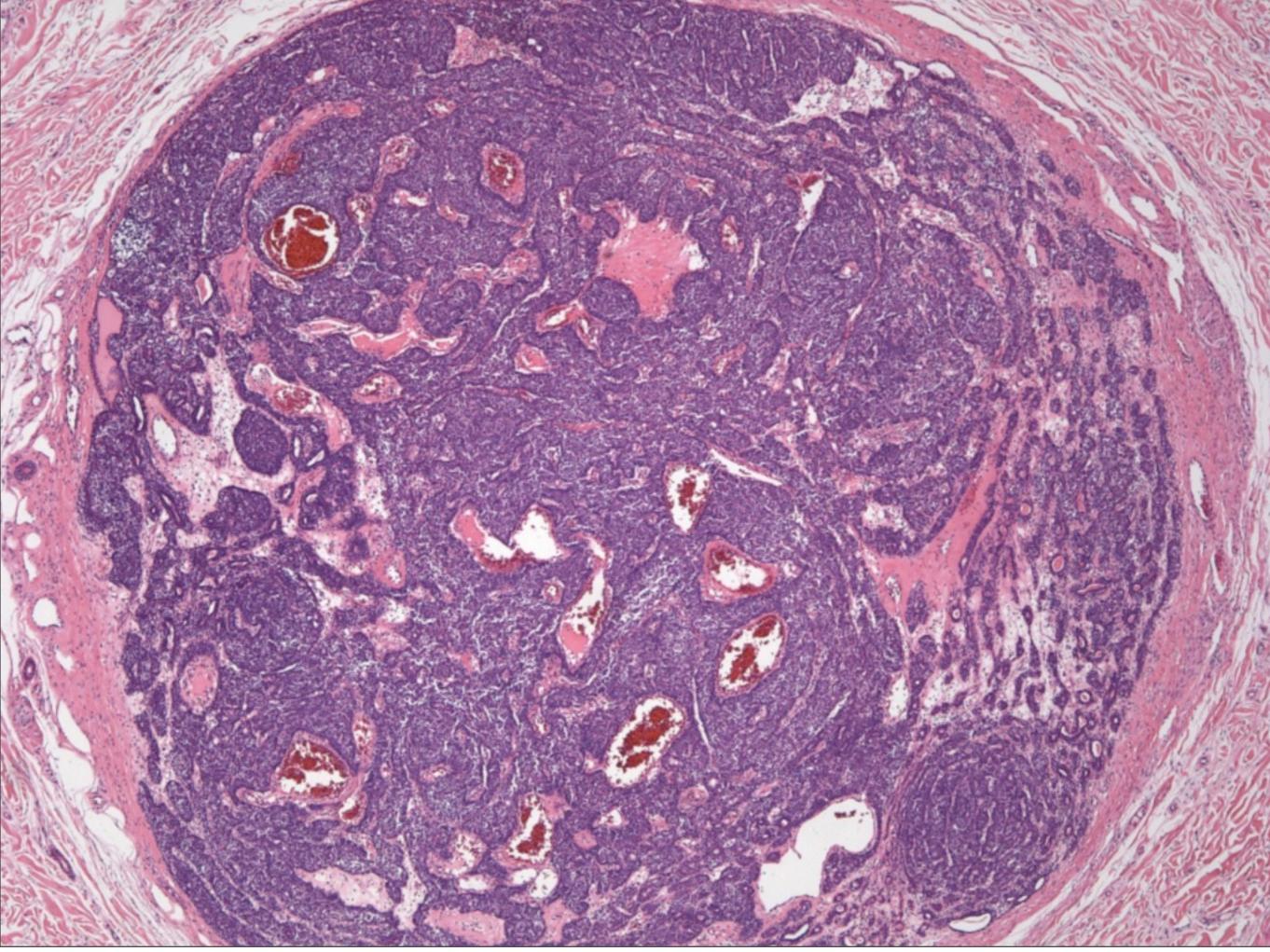
Sharp peripheral circumscription

Maturation of melanocytes

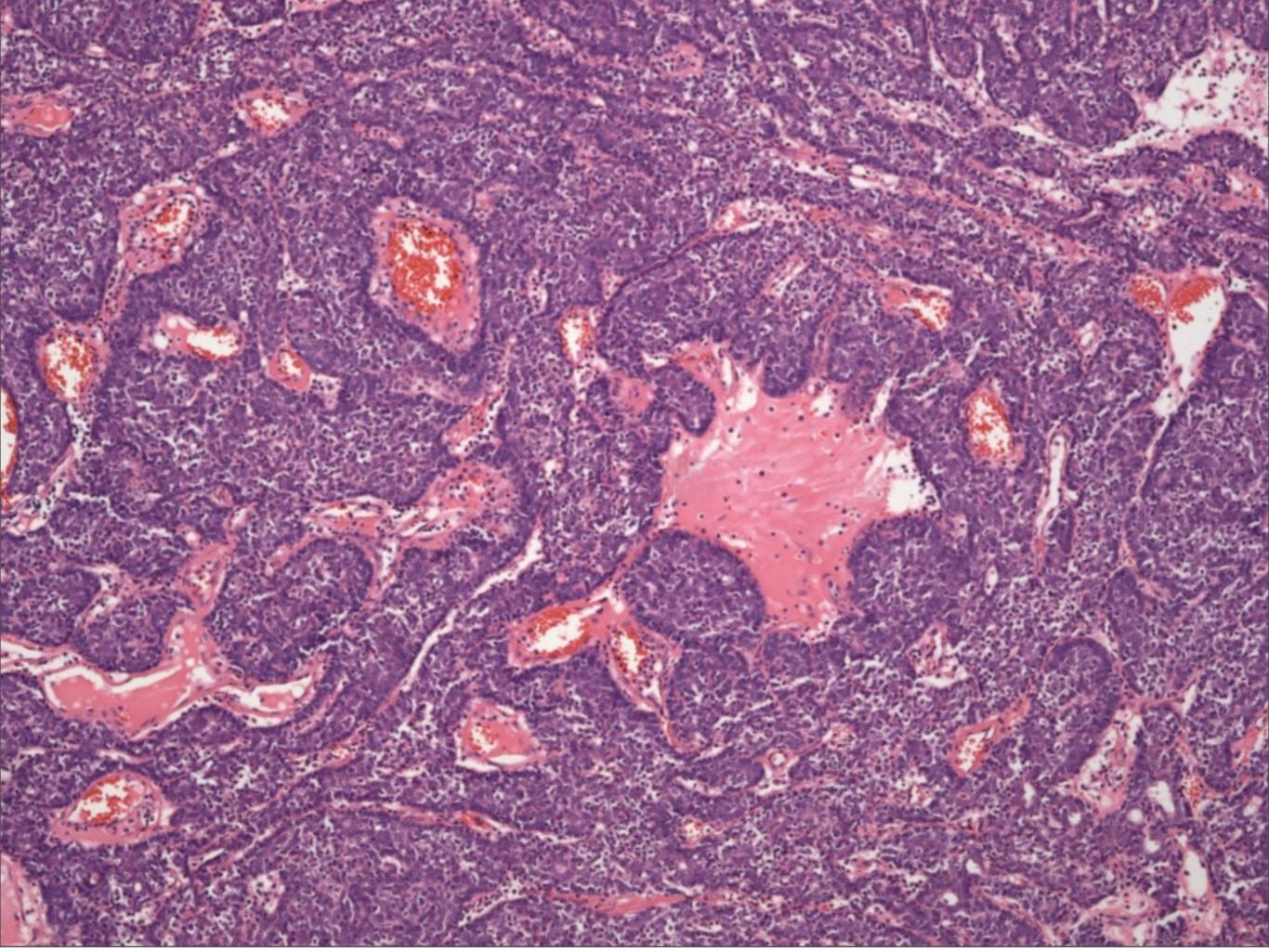




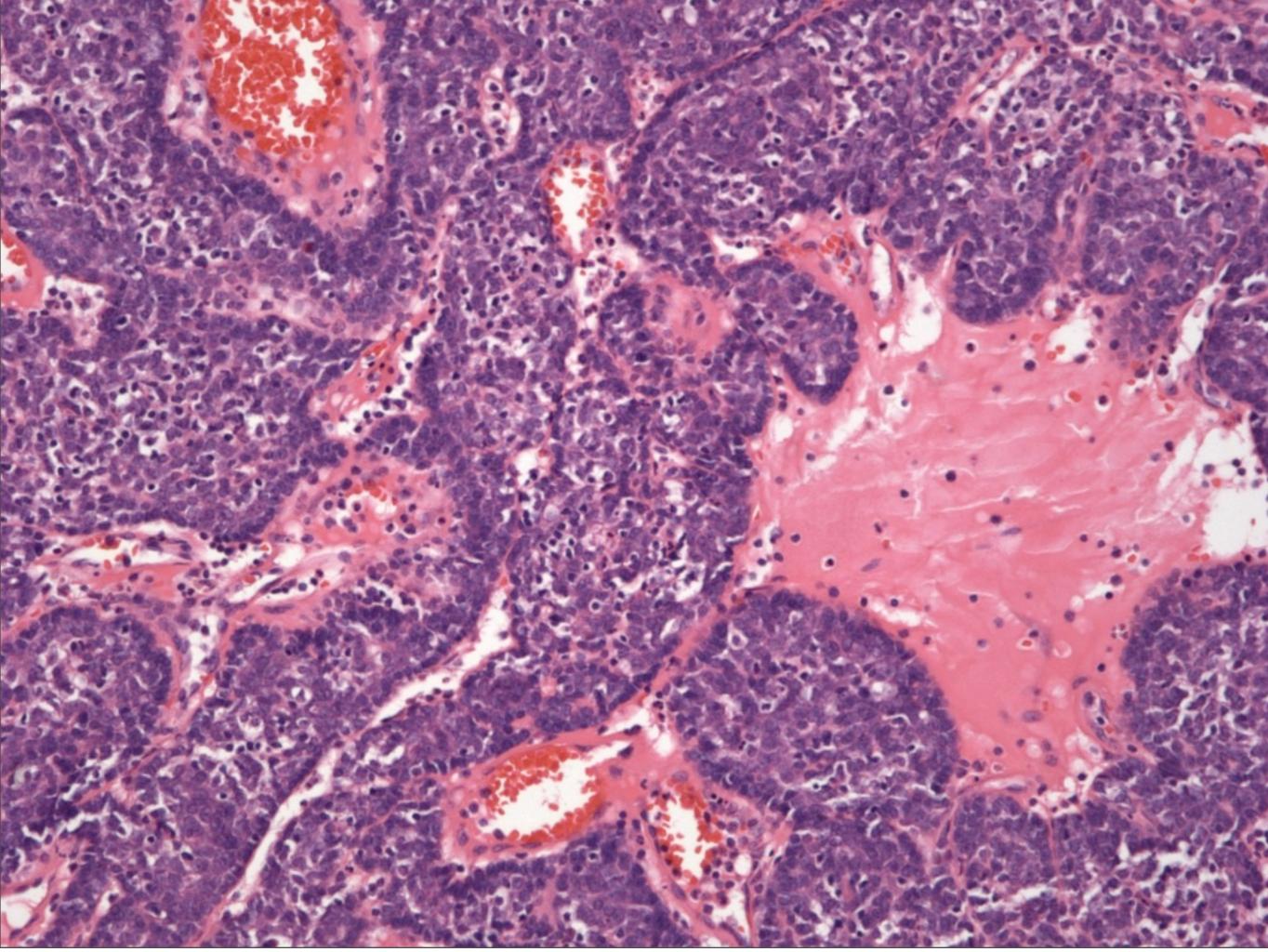
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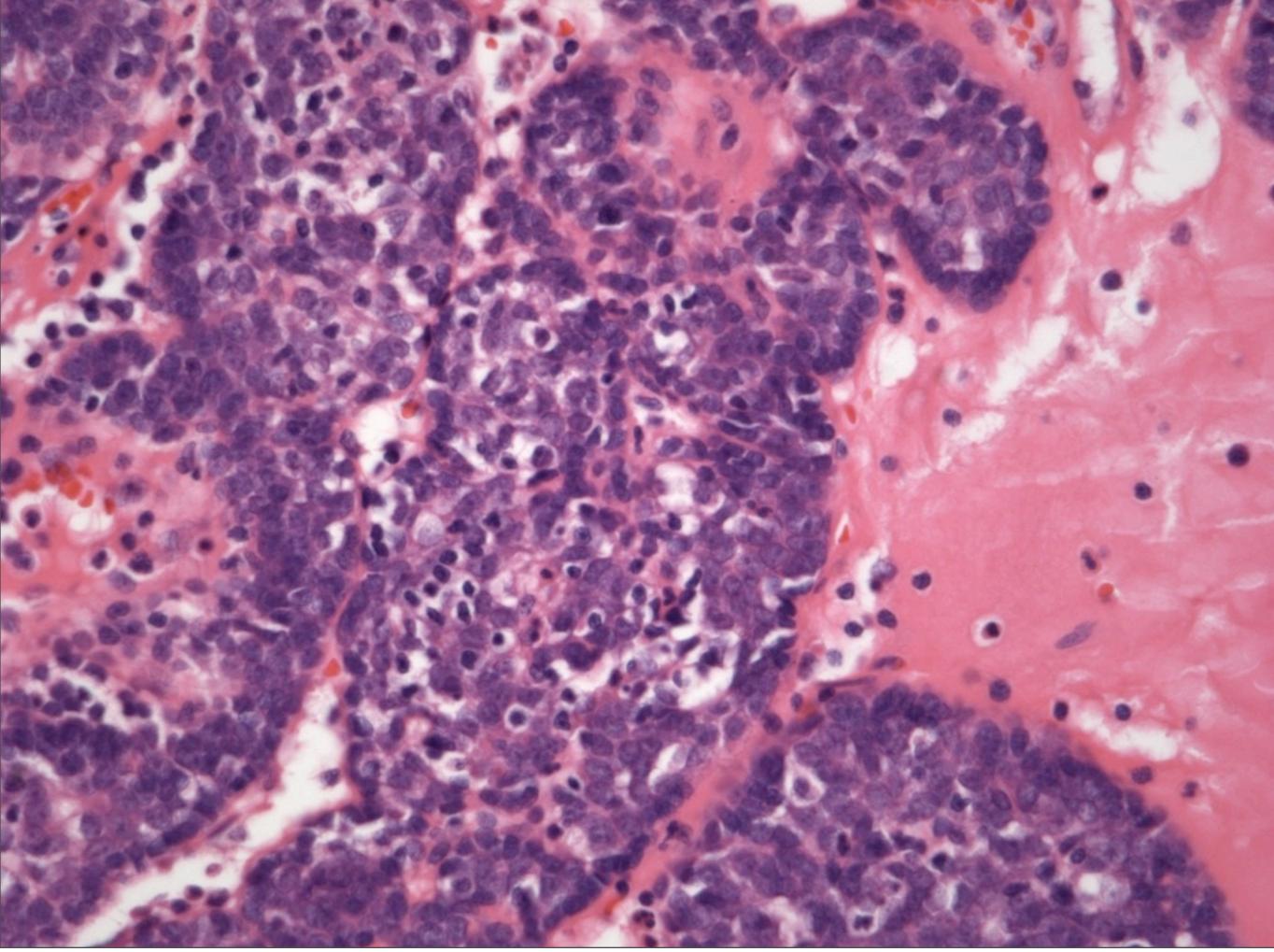
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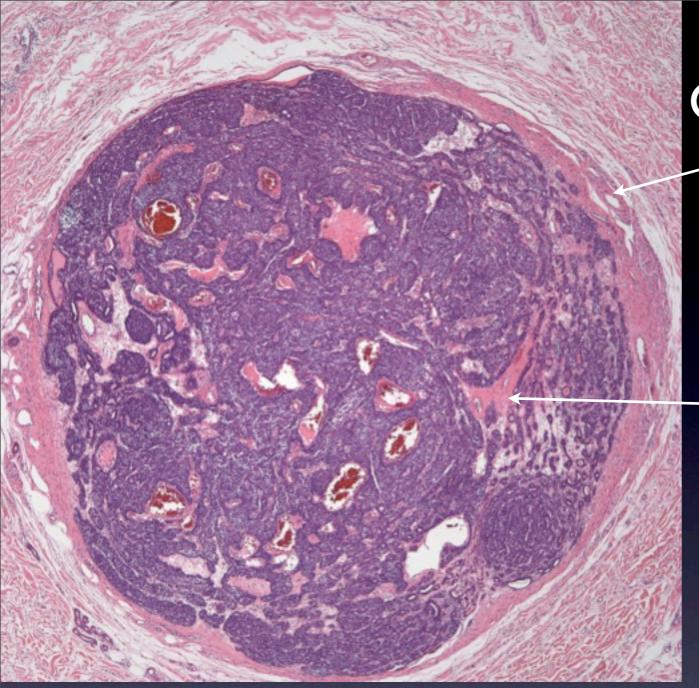


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Circumscribed dermal tumor

Increased hyalinzed basement membrane

Minimal cytologic atypia

Basaloid cells with increased thin-walled vessels