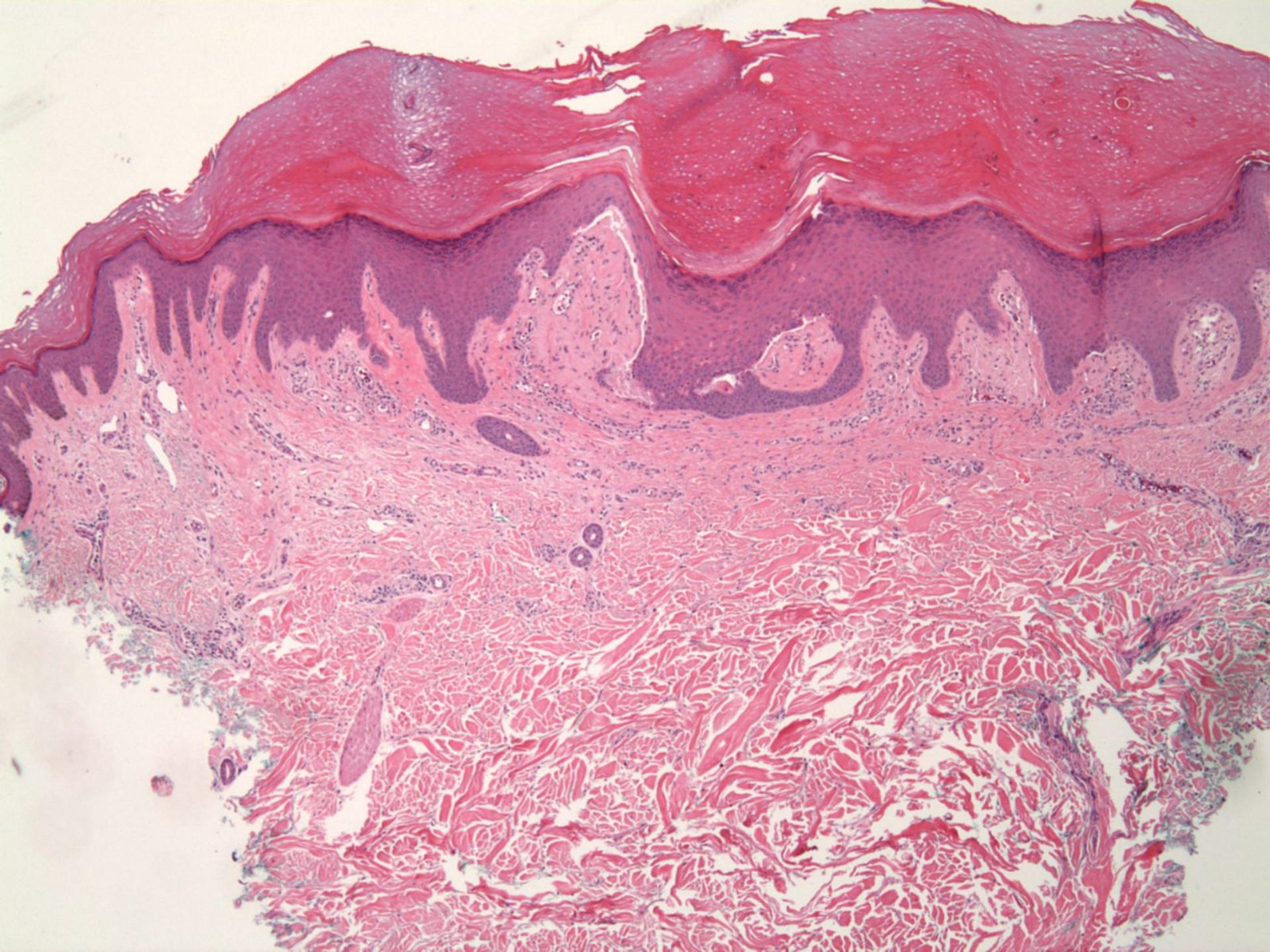
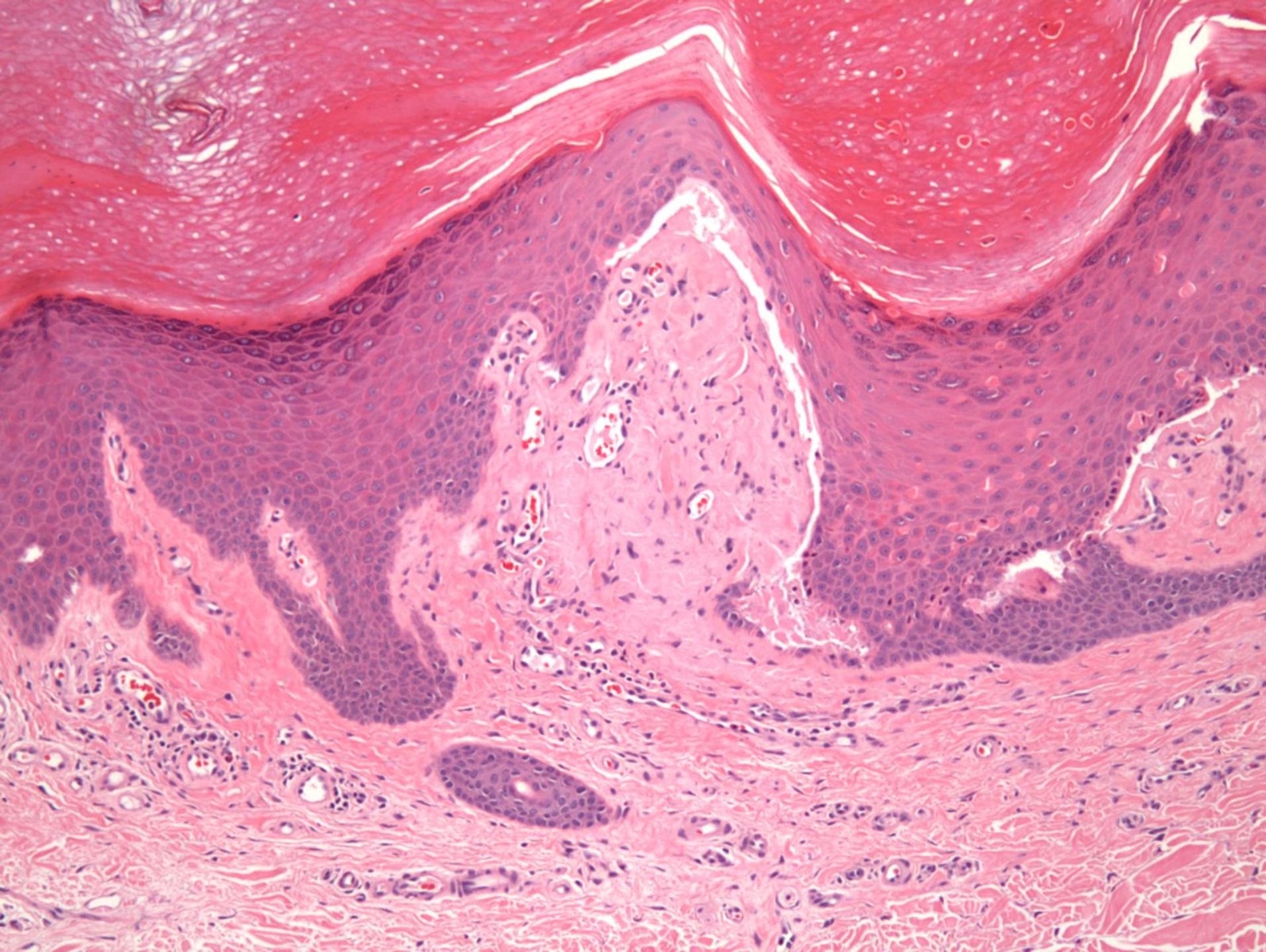


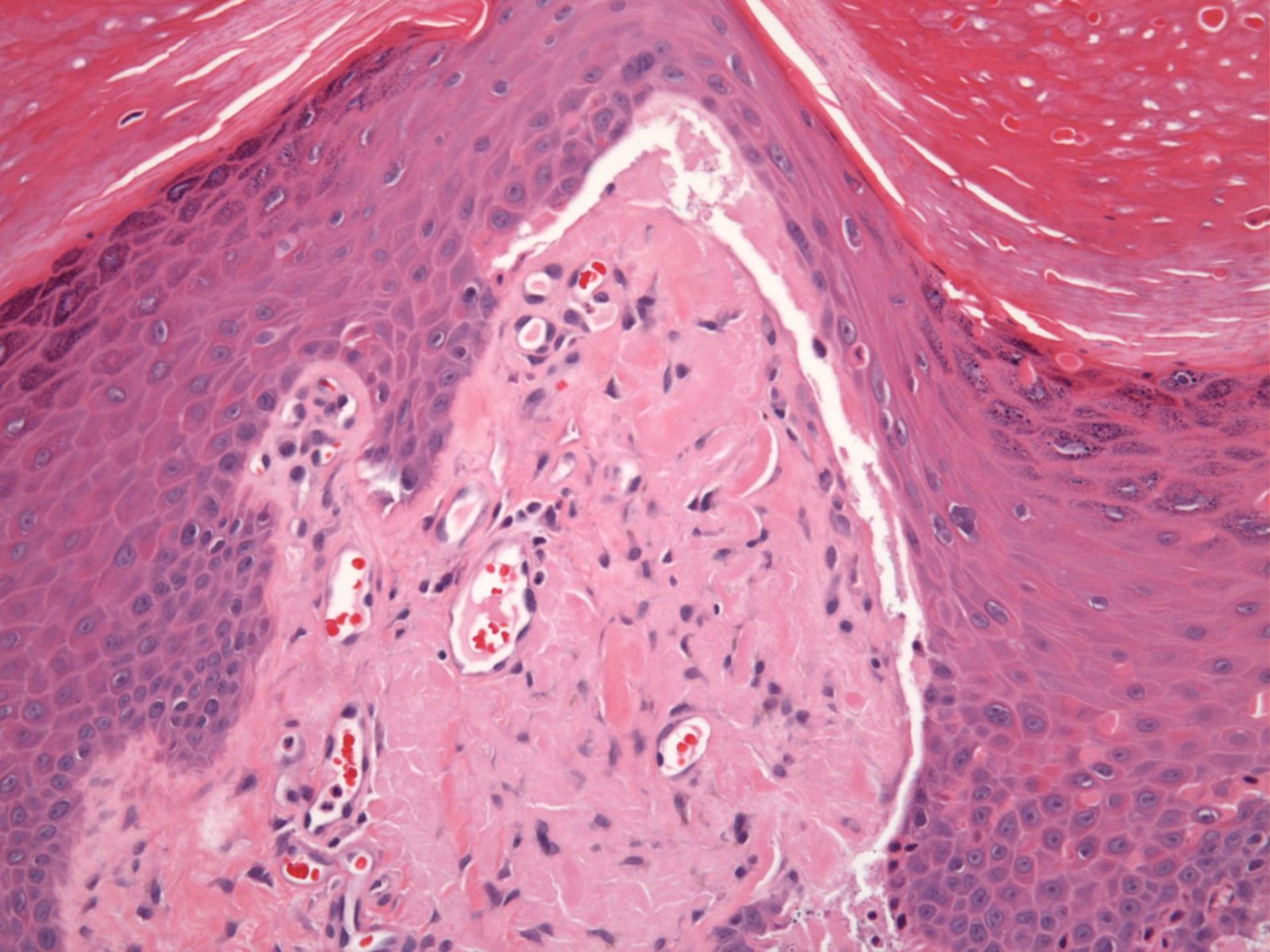
Dermatopathology Slide Review-Part 16

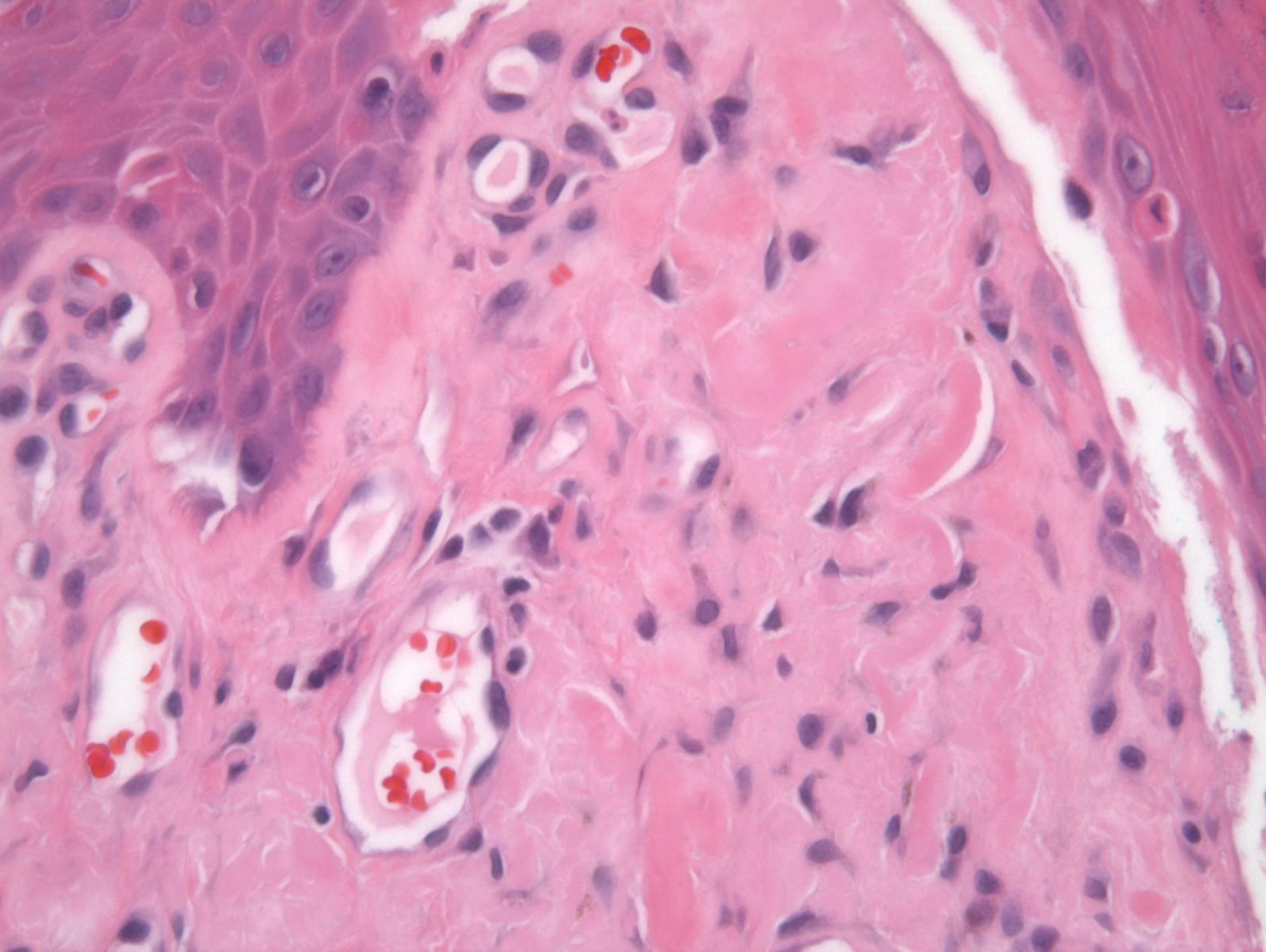
Paul K. Shitabata, M.D.

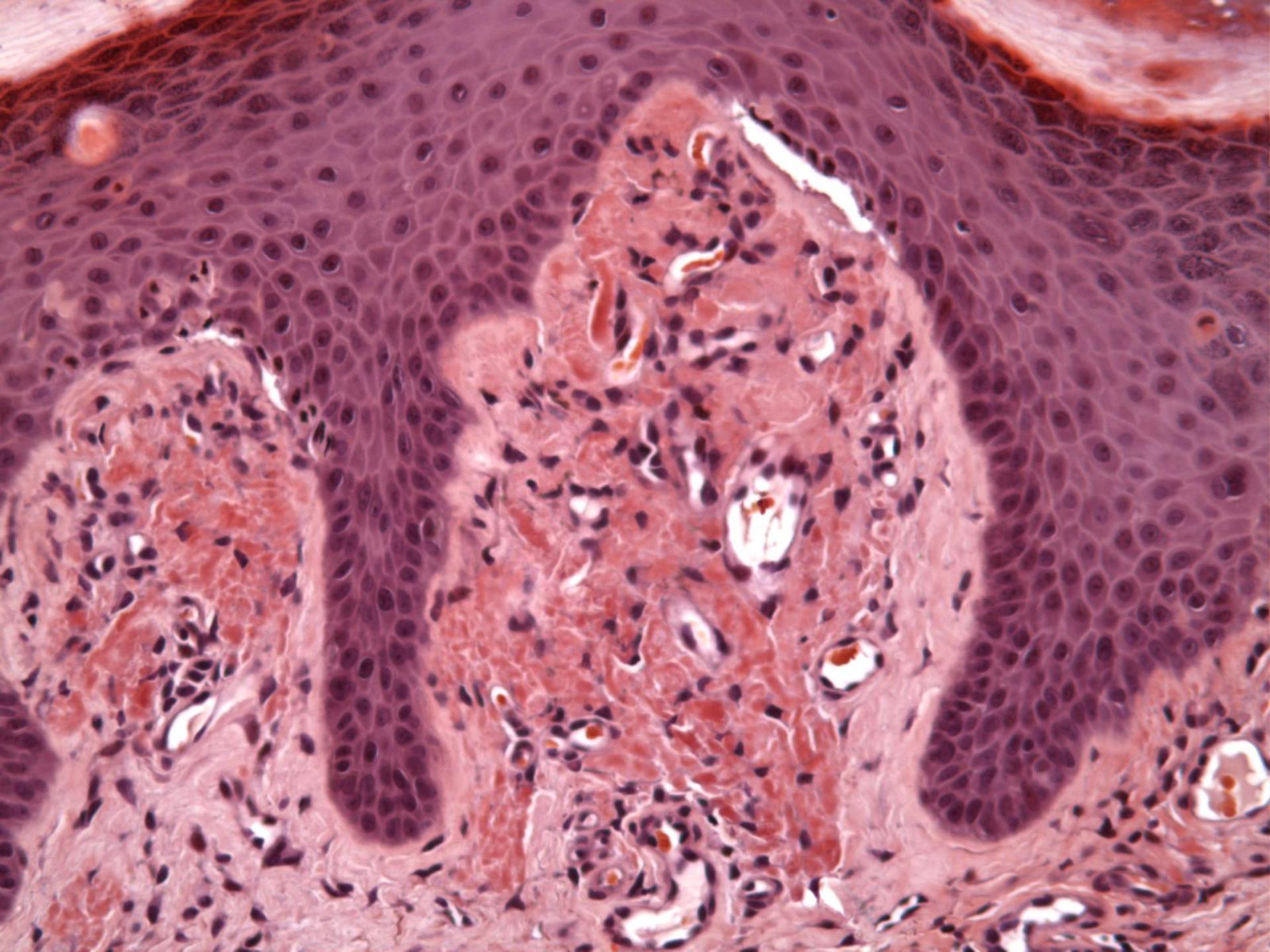
Dermatopathology Institute

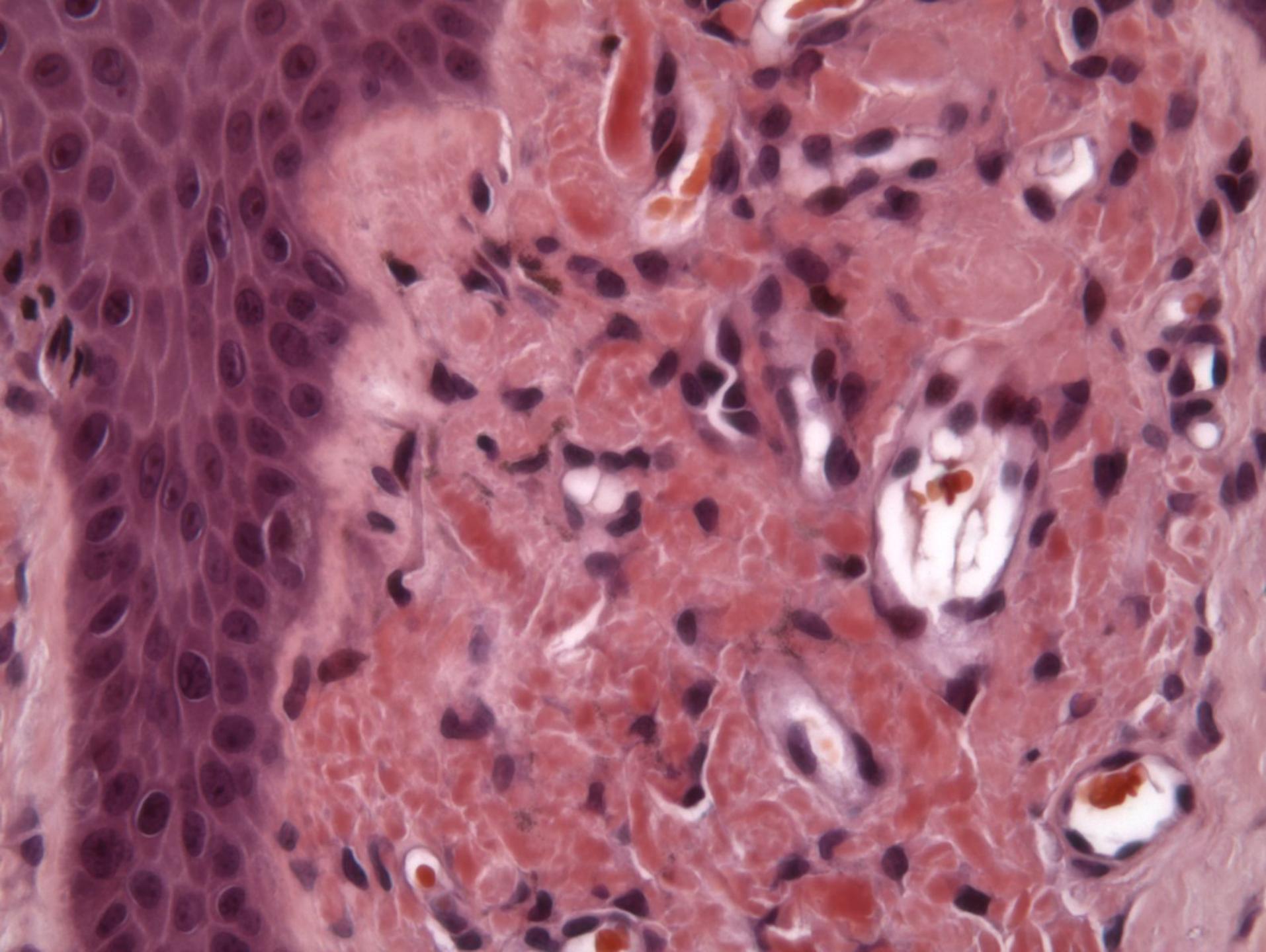






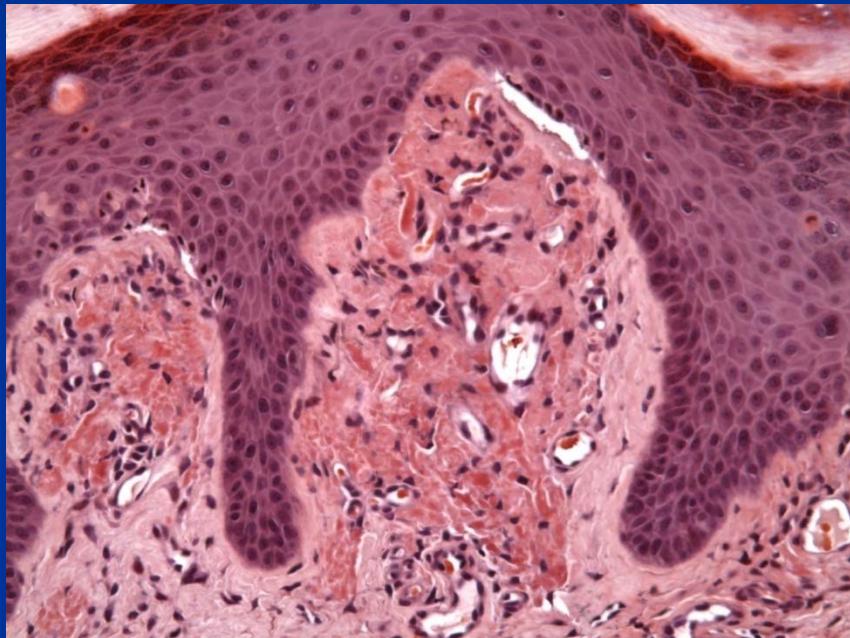




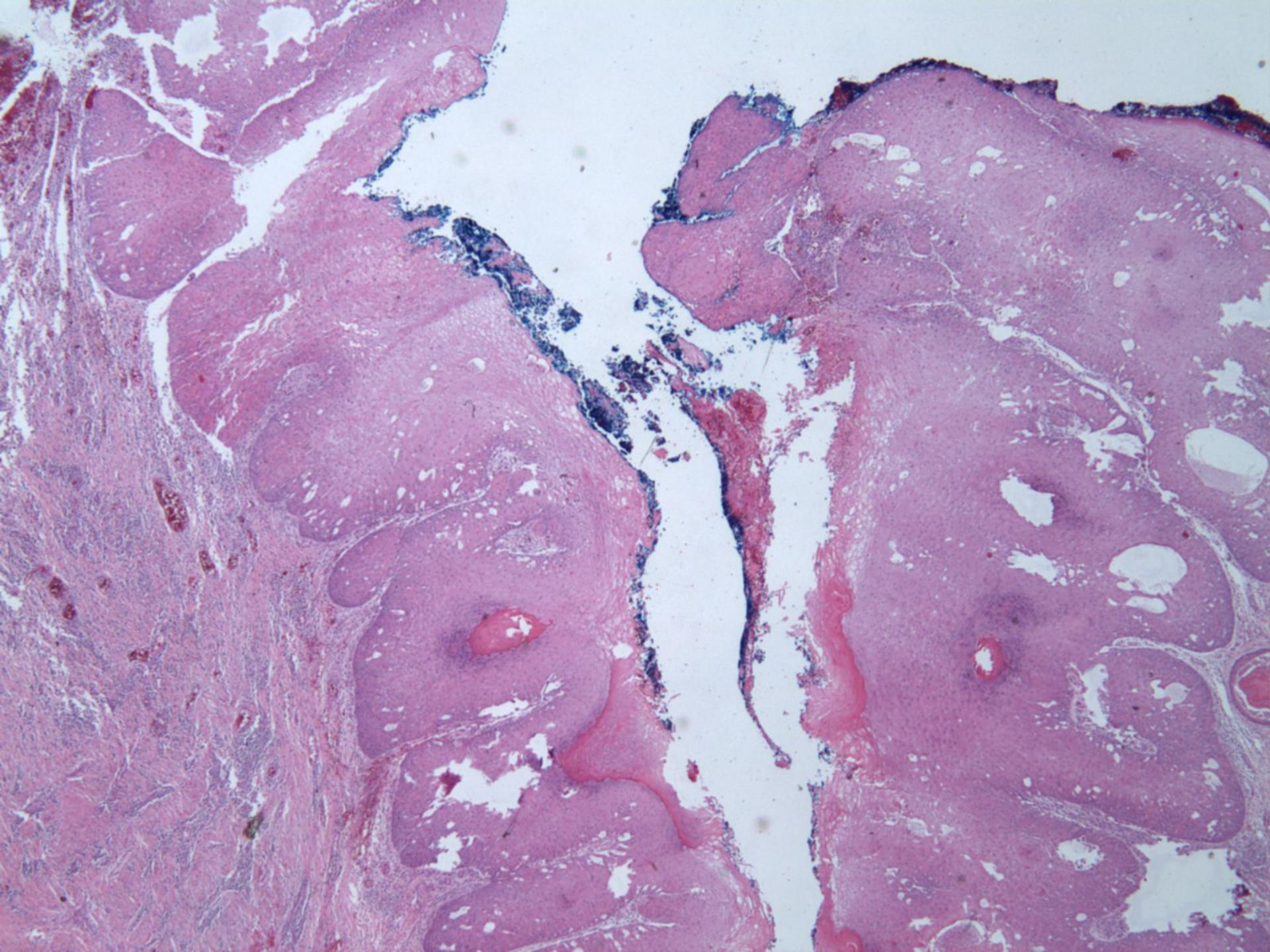


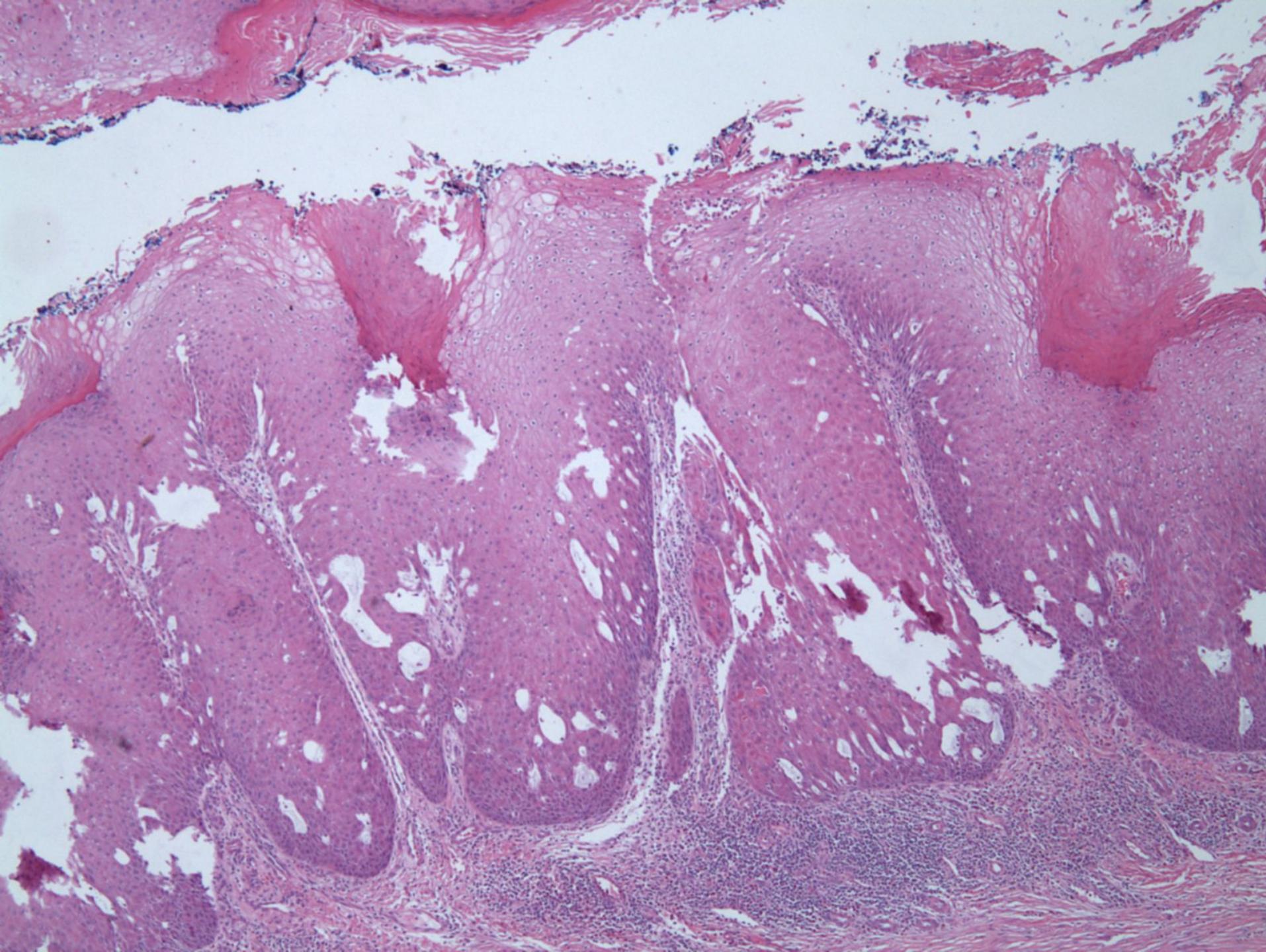
Lichen Amyloidosis

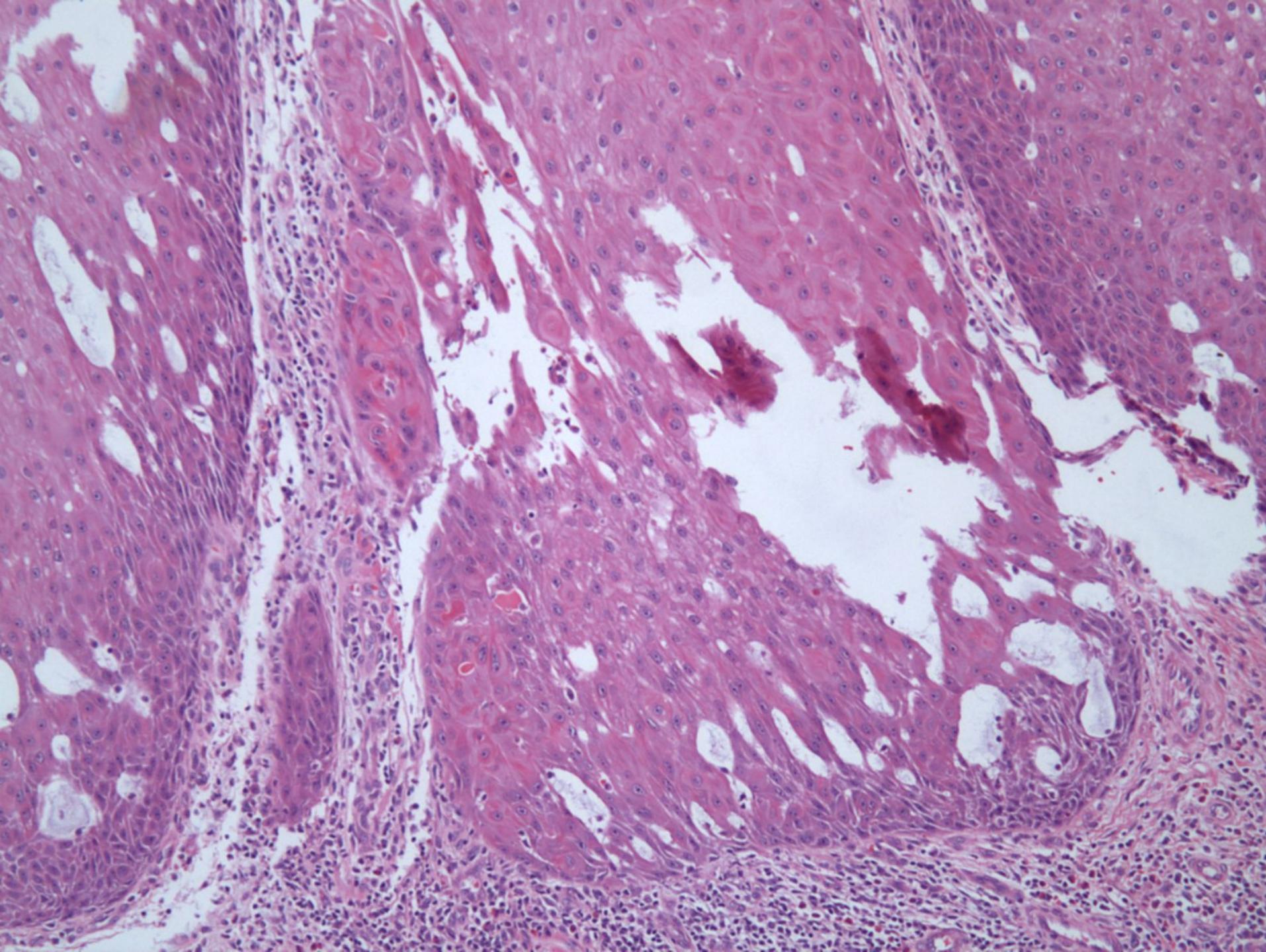
Pearls

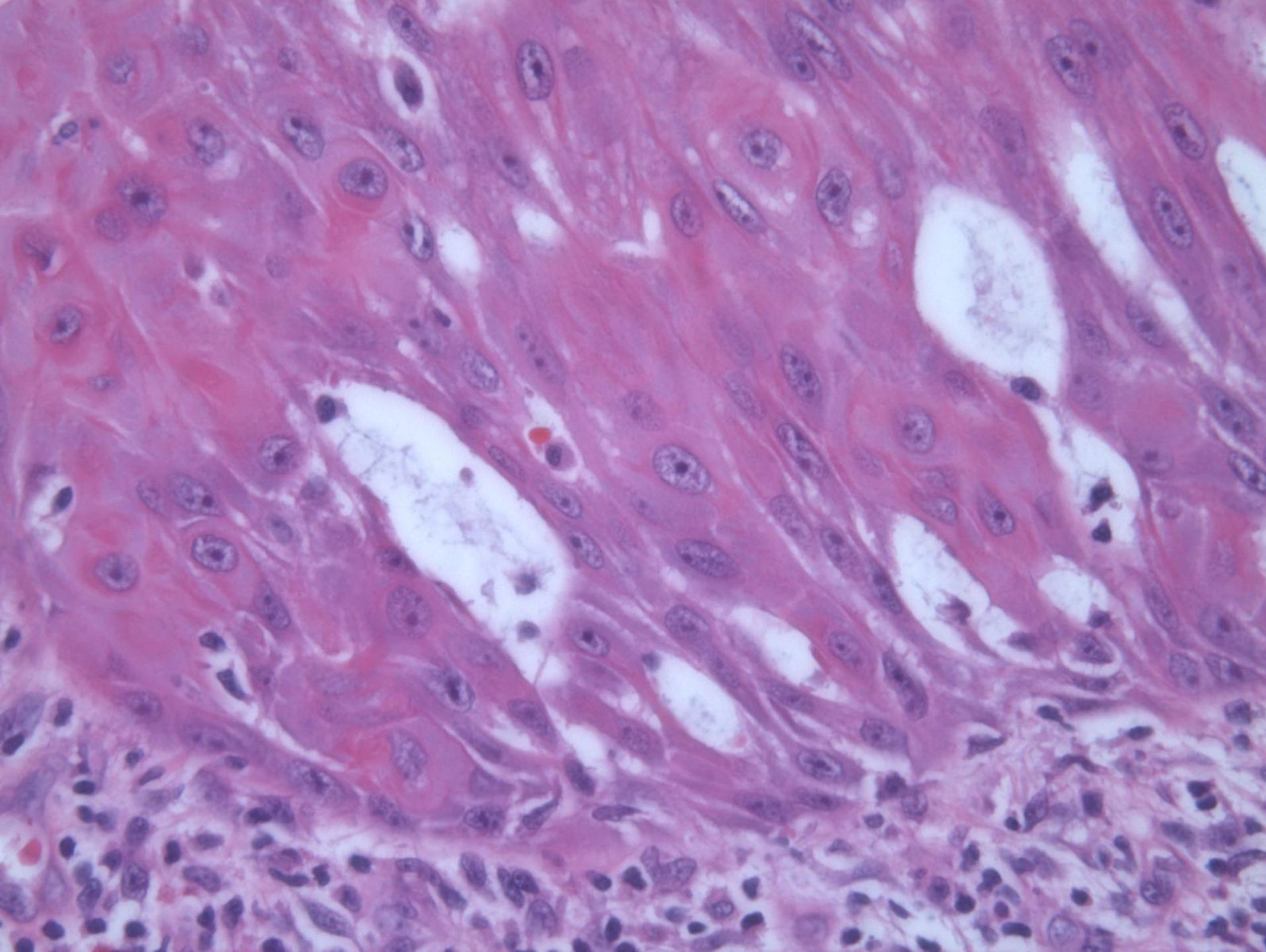


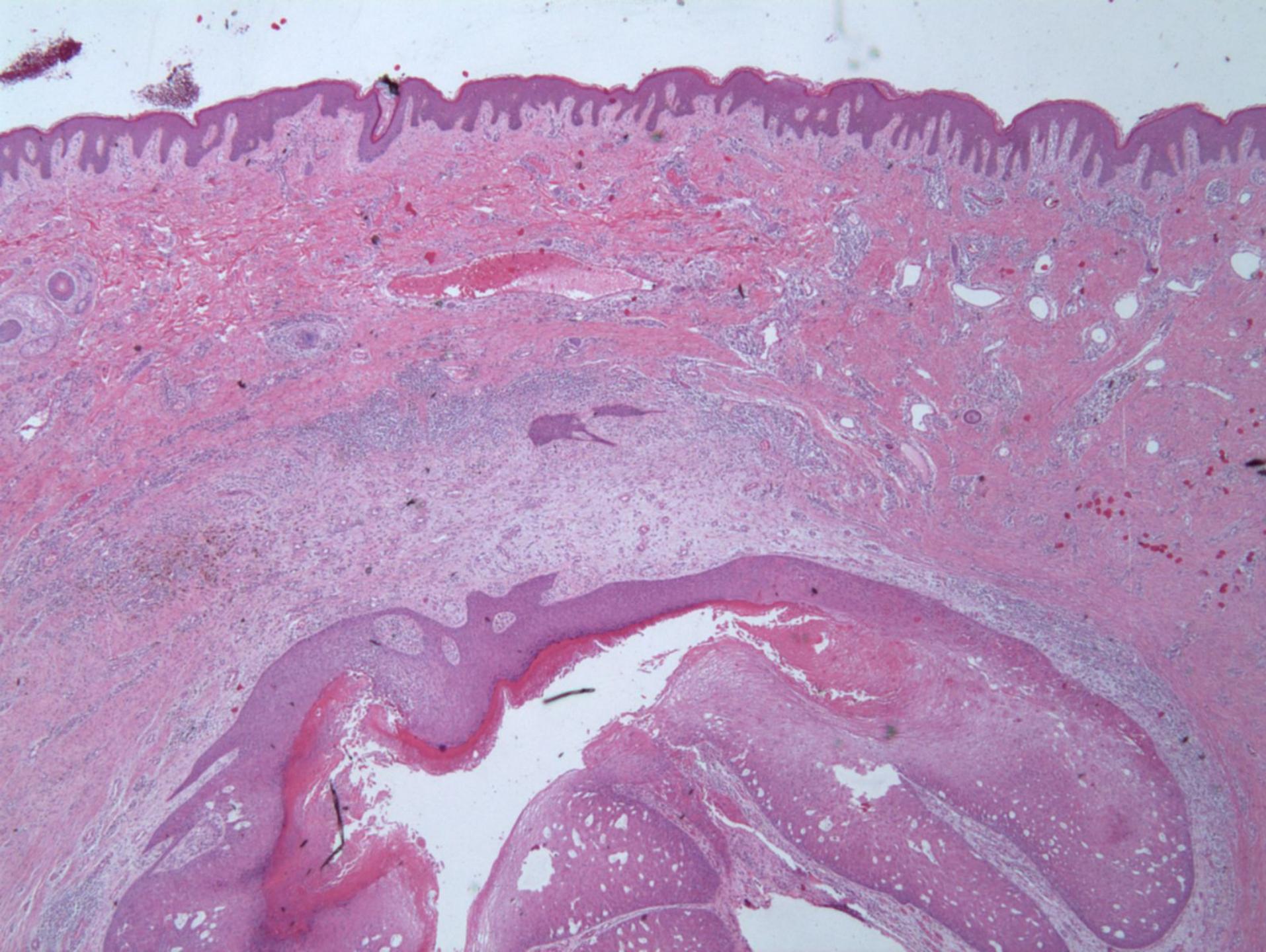
- Hyalin deposits at dermal-epidermal junction
- Evidence of resolving interface dermatitis
- Variable staining for Congo Red

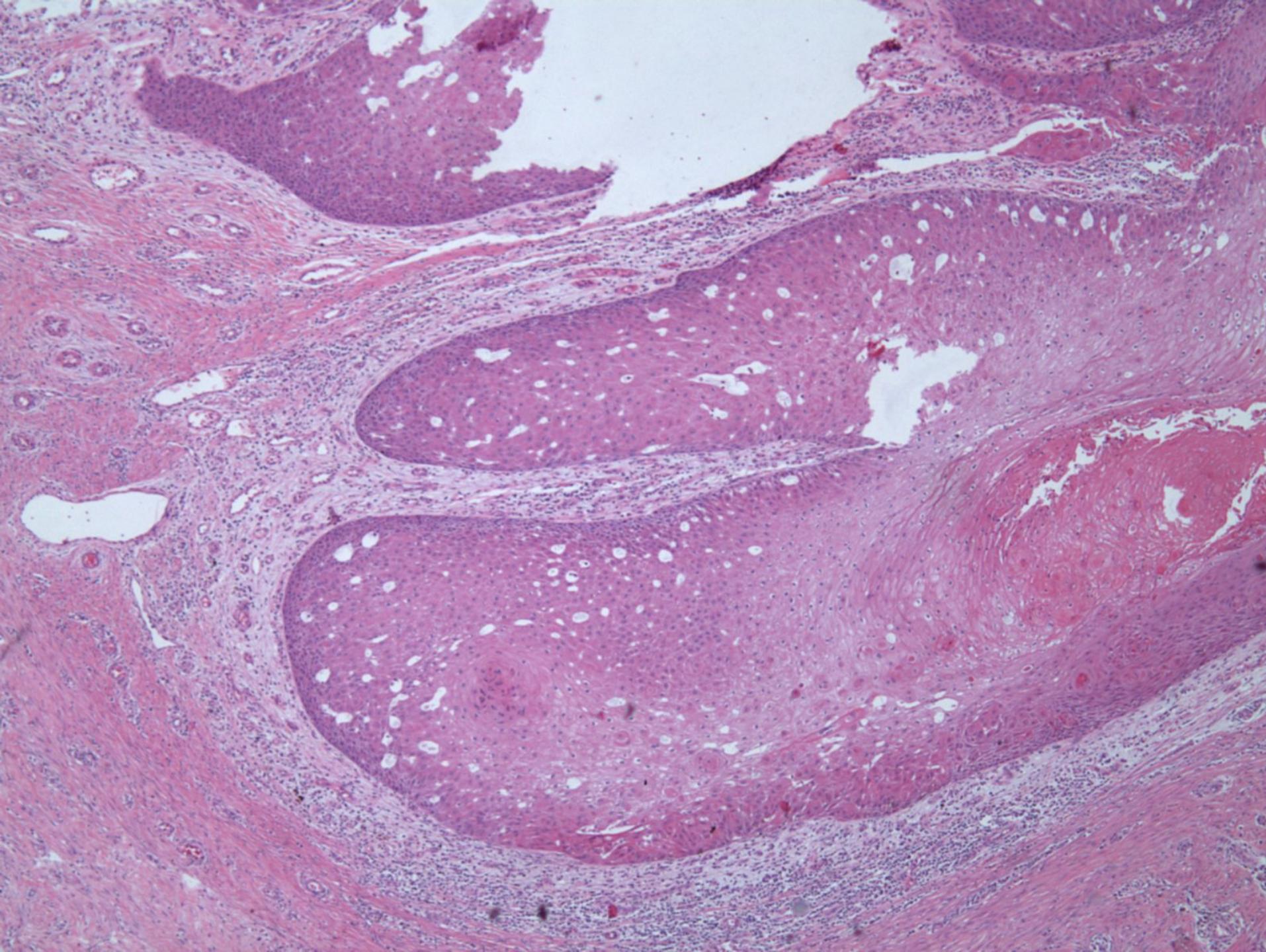






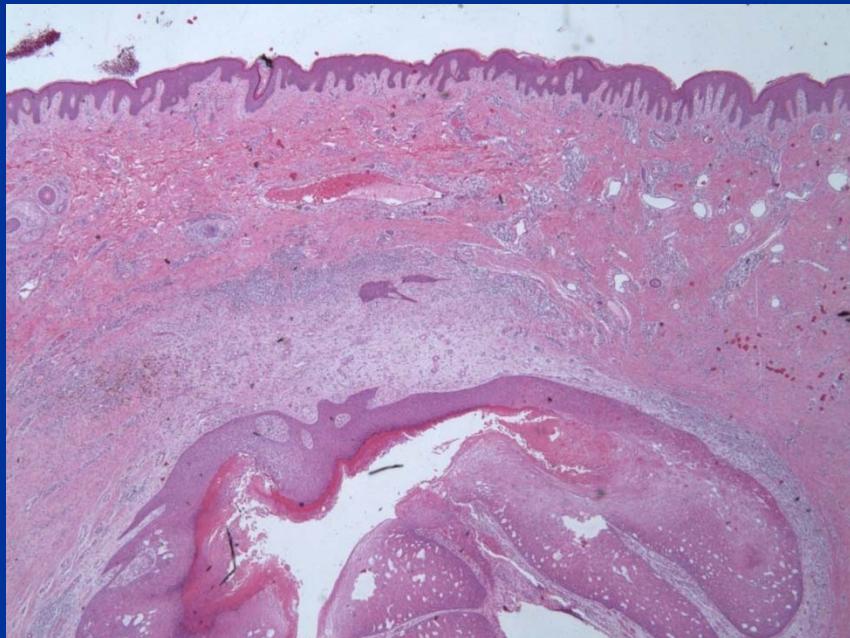




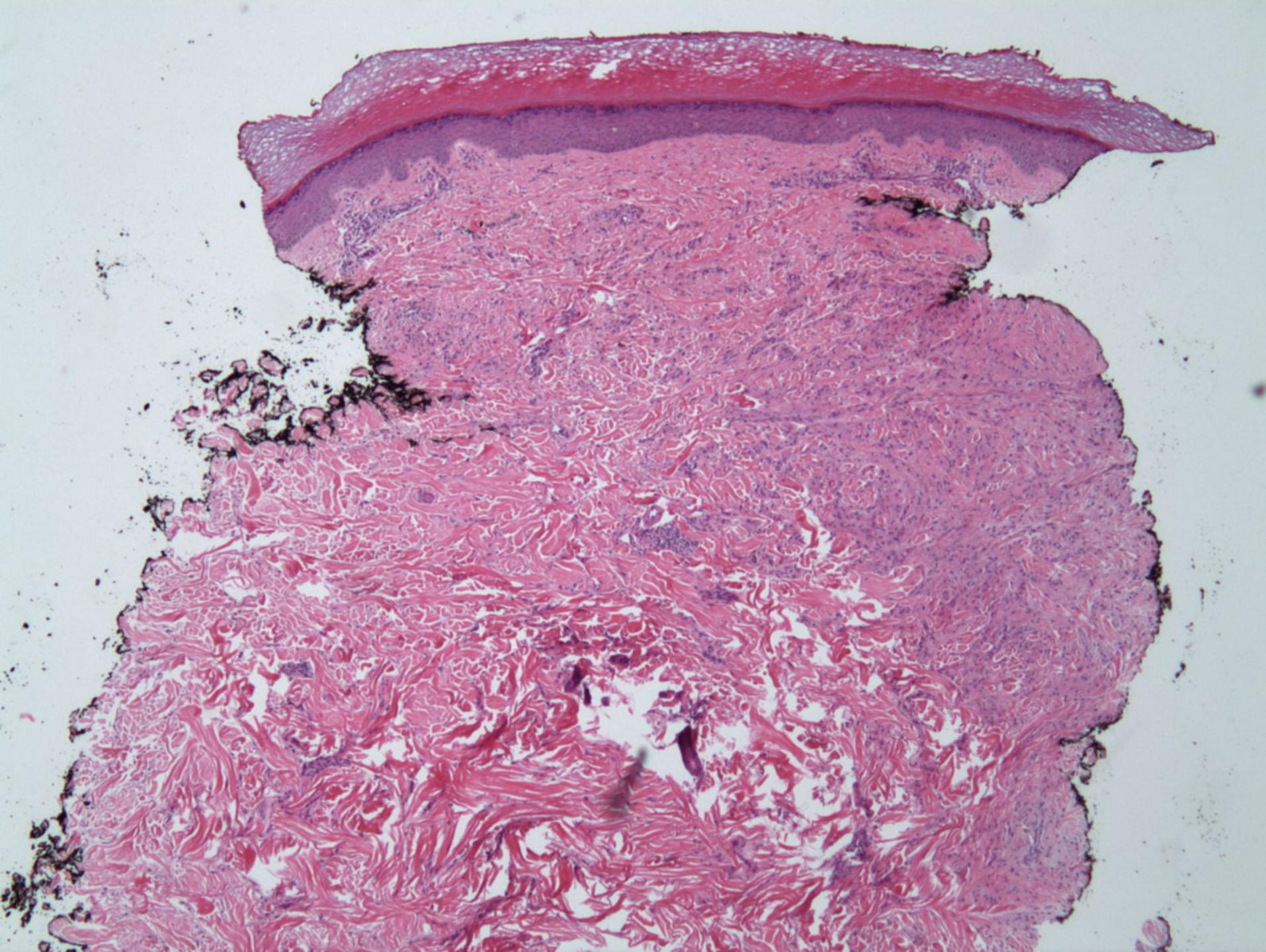


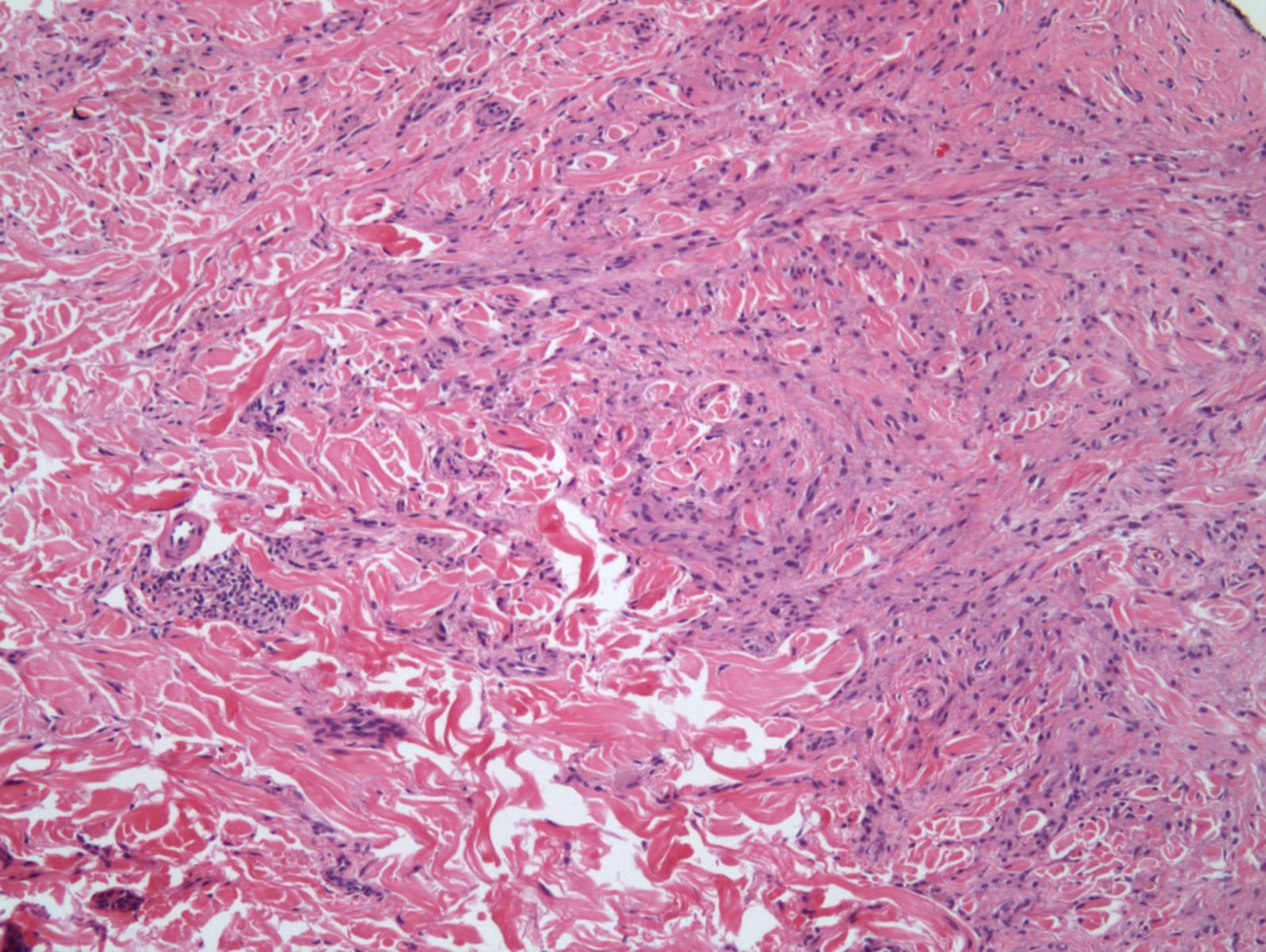
Pilar Sheath Acanthoma

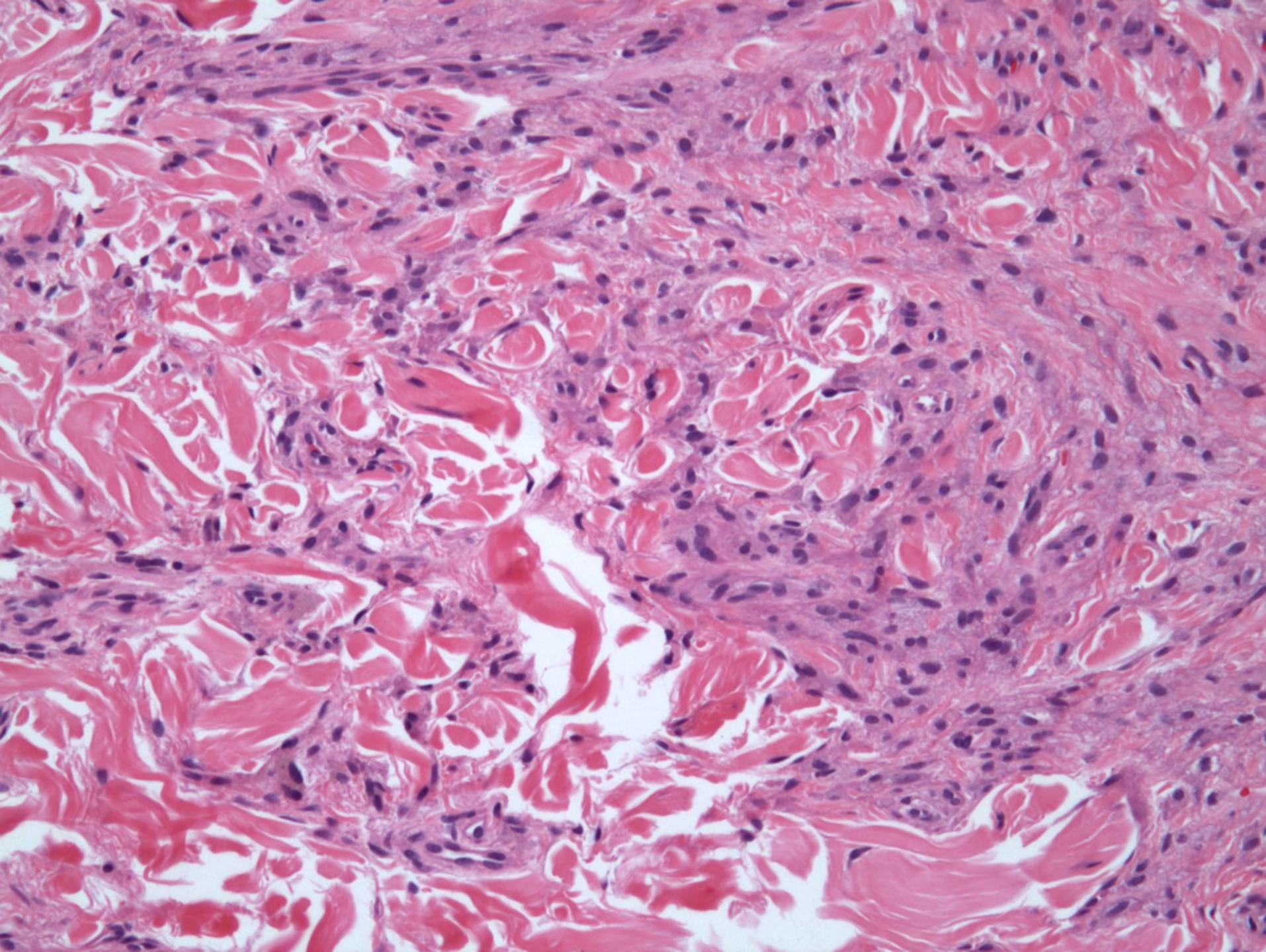
Pearls

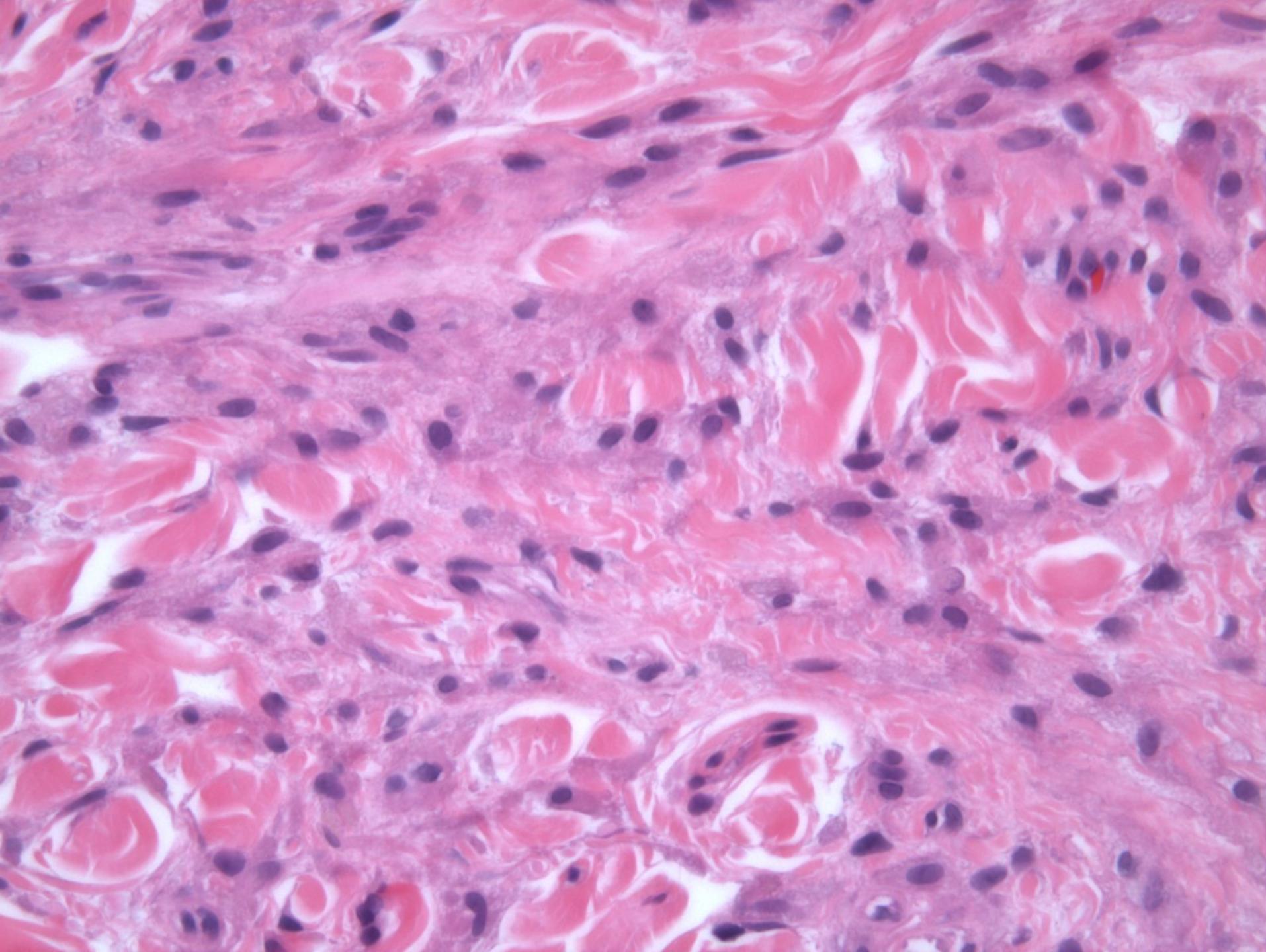


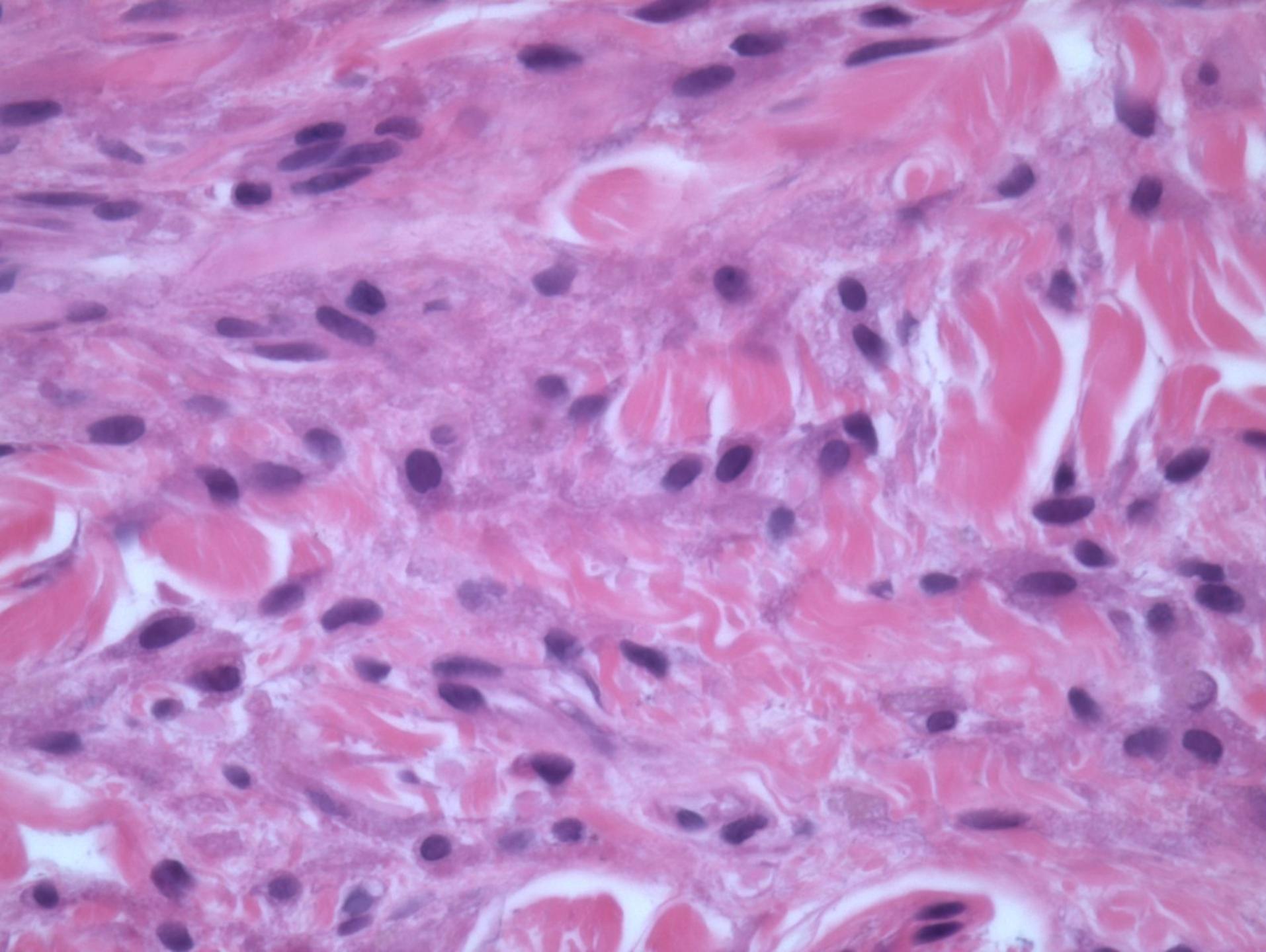
- Epidermal cyst with exuberant epithelial proliferation
- No atypia
- Deep invagination into dermis
- DDX
 - EIC
 - Dilated Pore of Winer

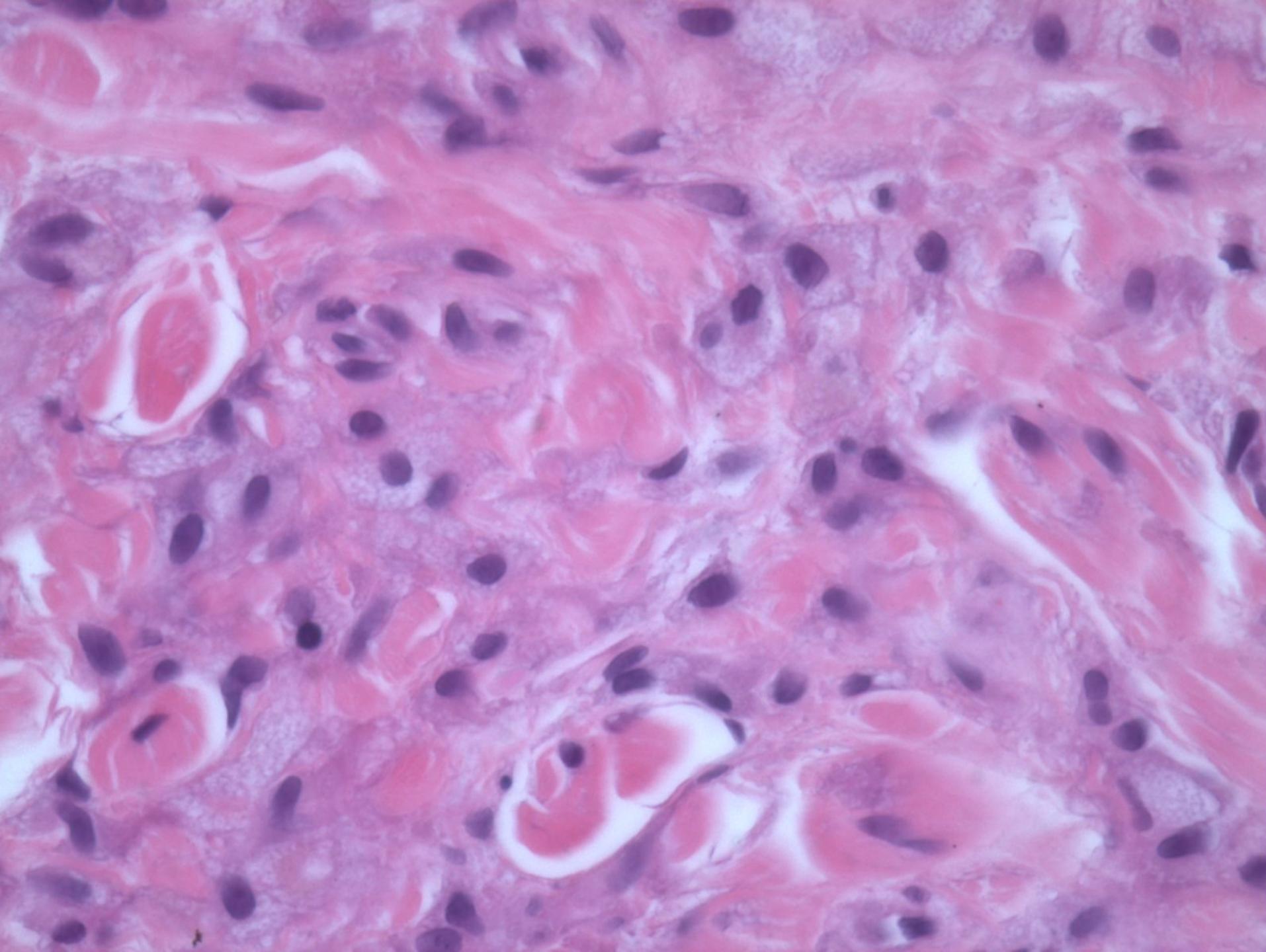






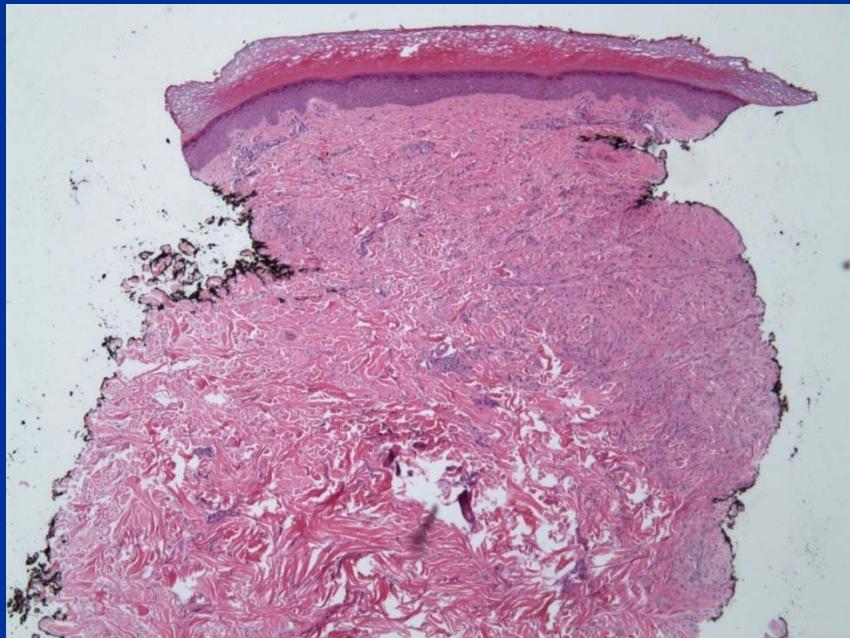




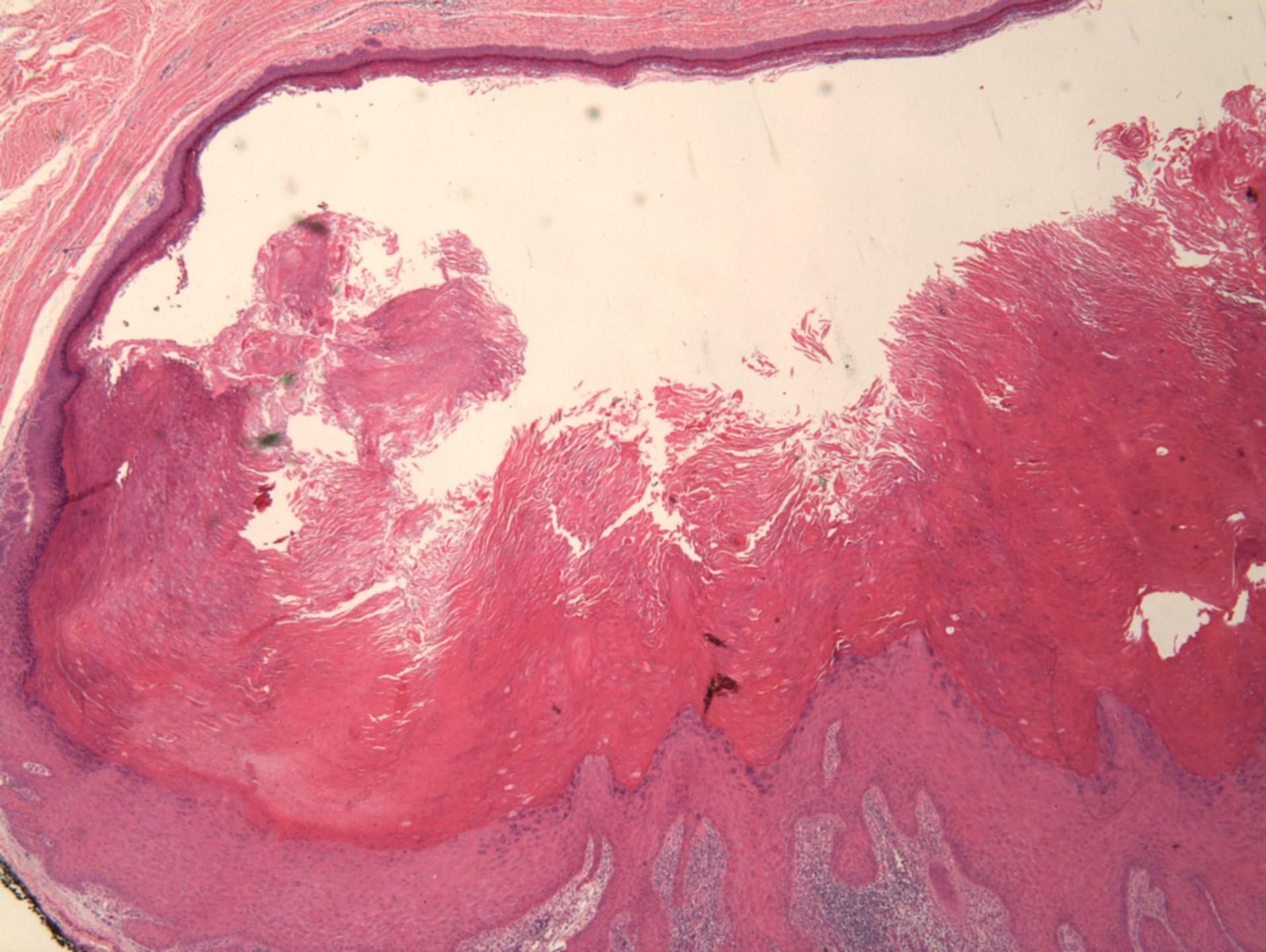


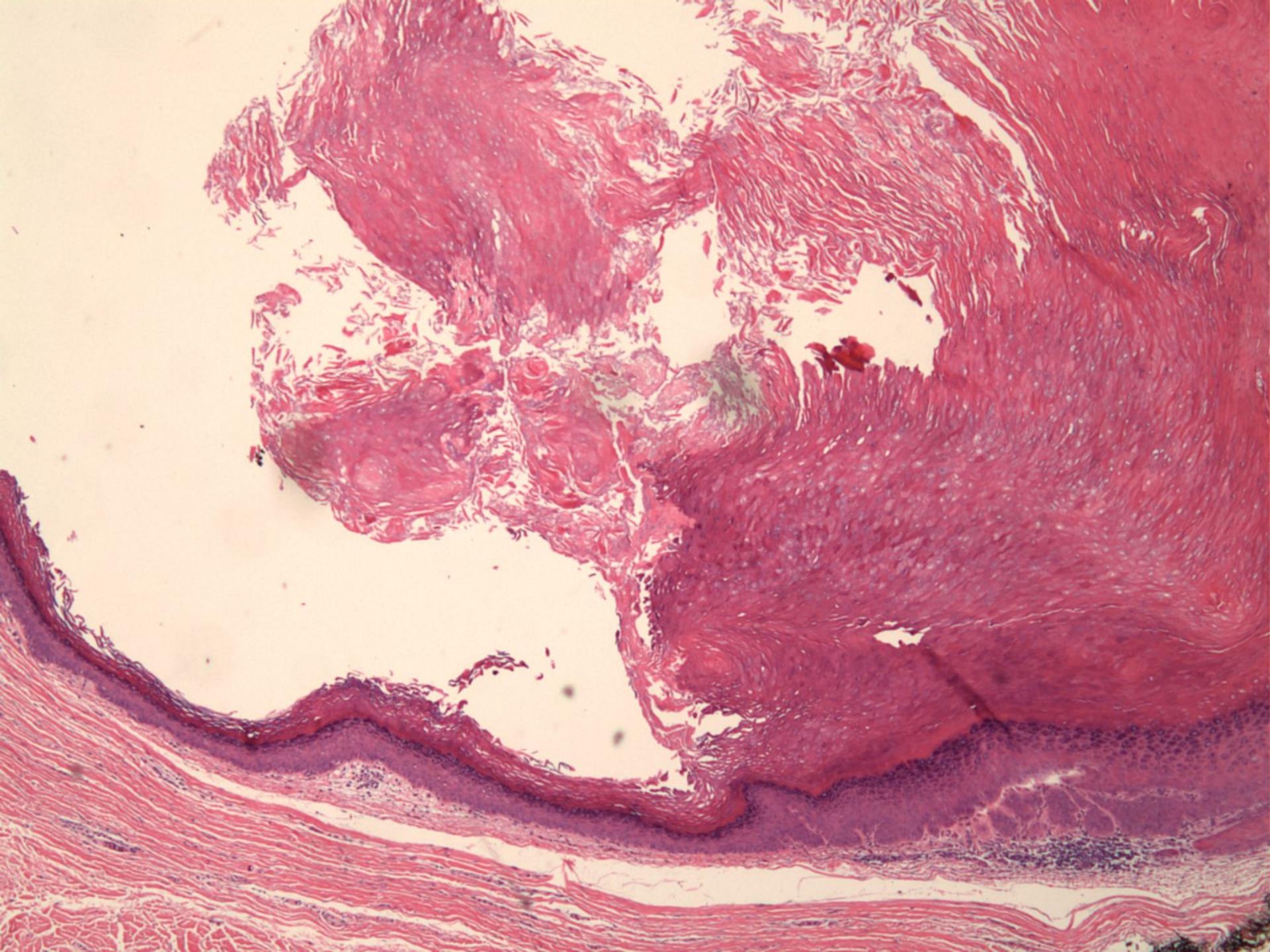
Eruptive Xanthoma

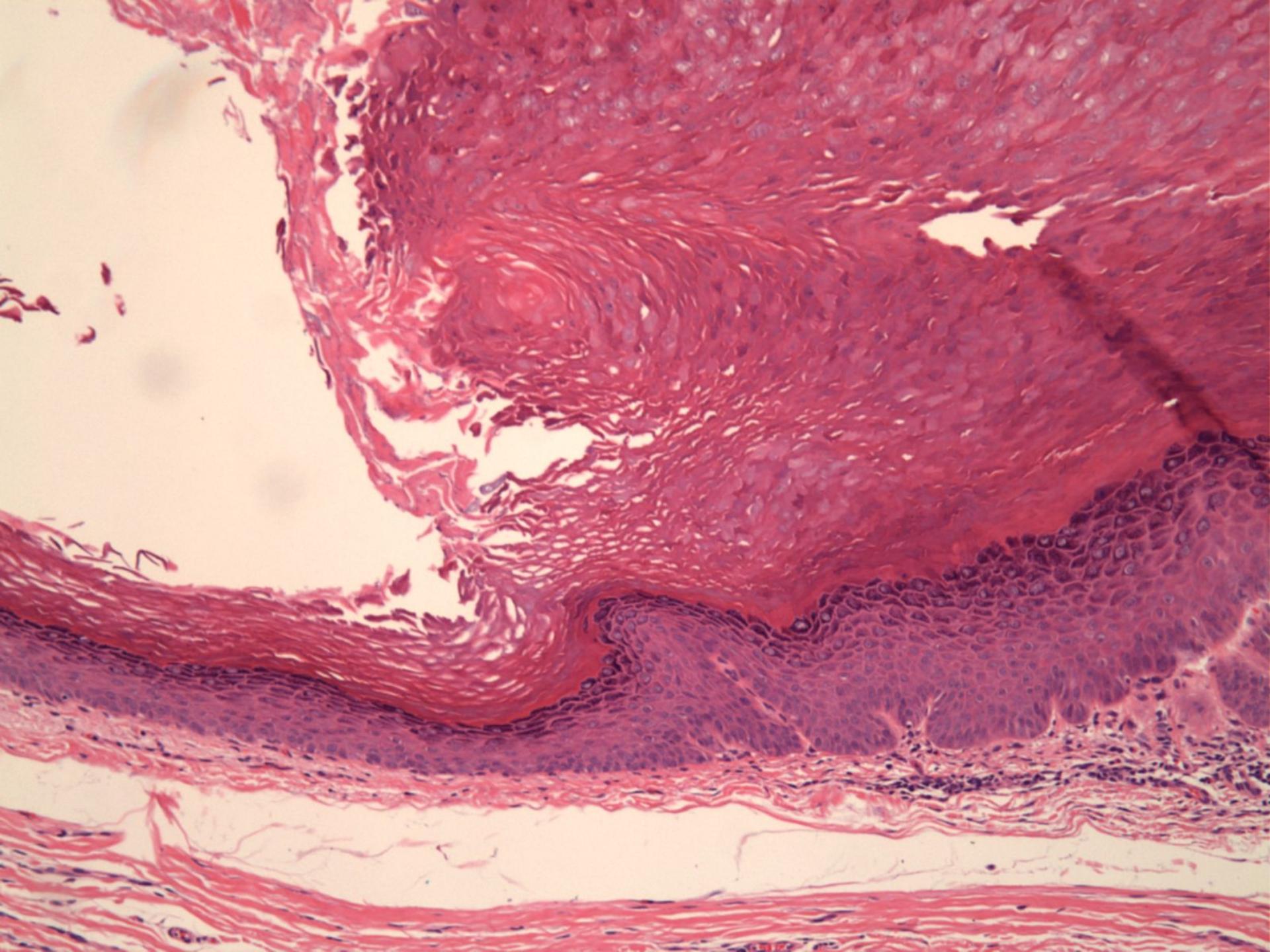
Pearls

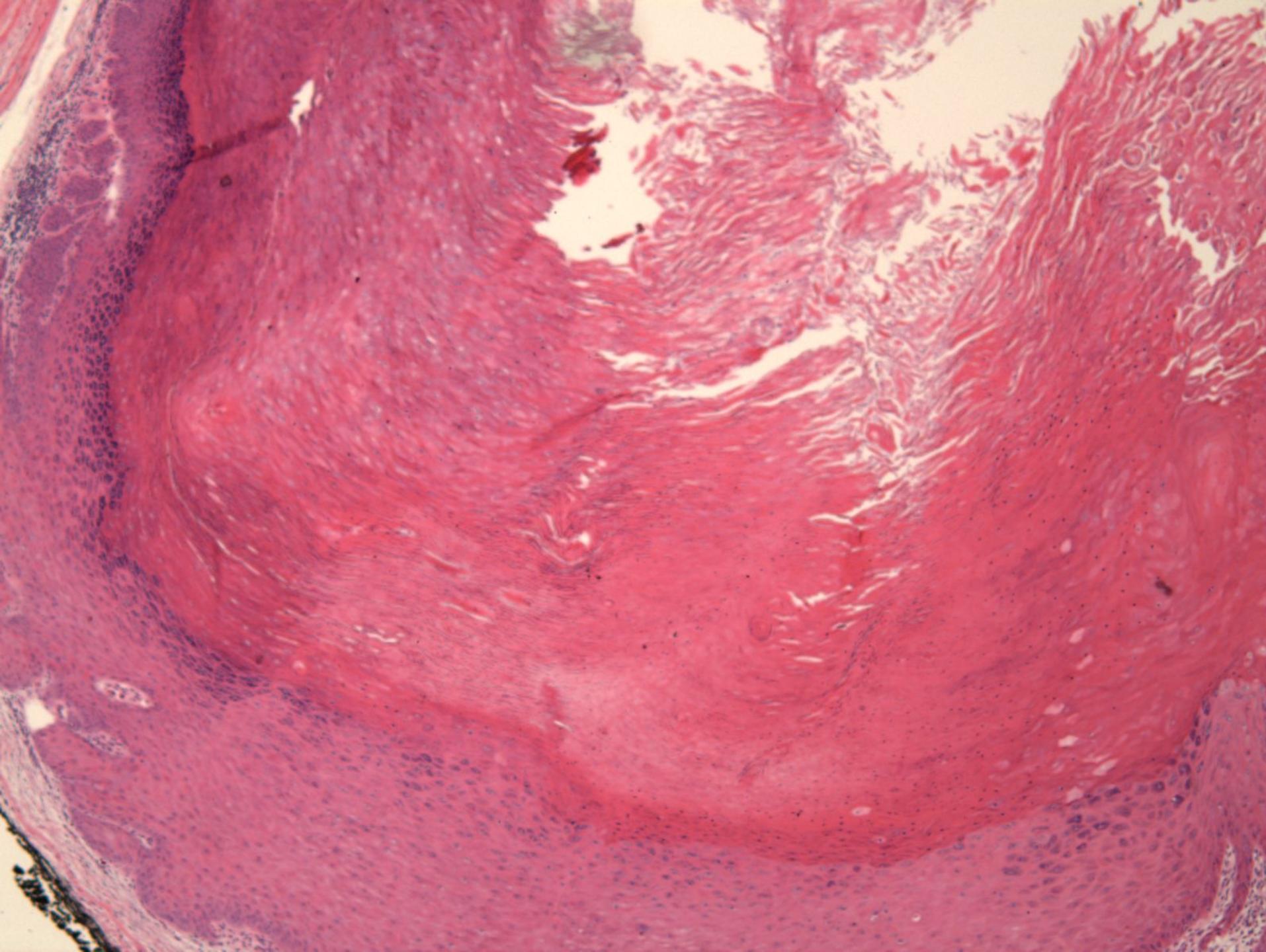


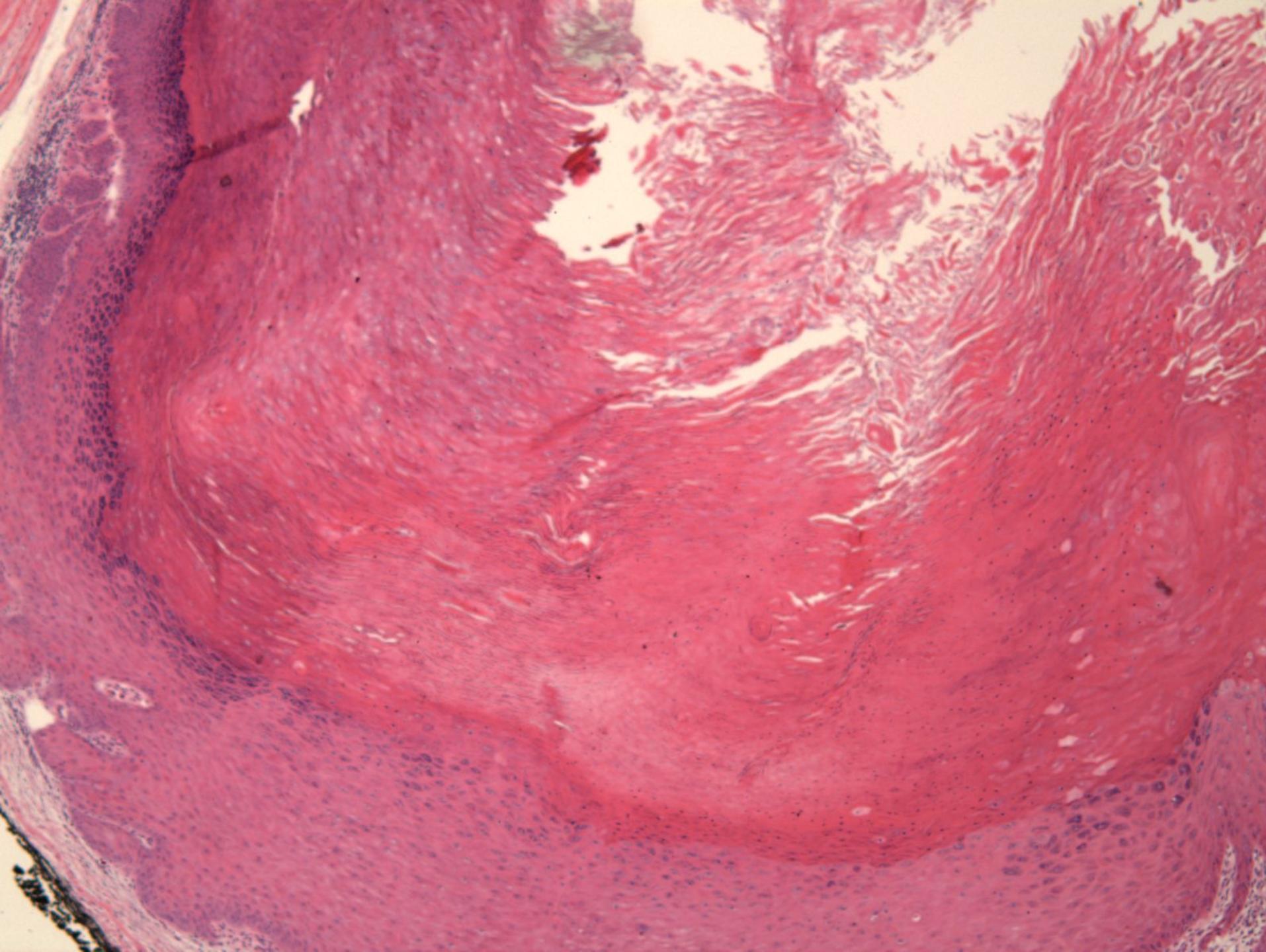
- Nodular and diffuse proliferation of histiocytes
- Foamy vacuolated cytoplasm
- No cytologic atypia

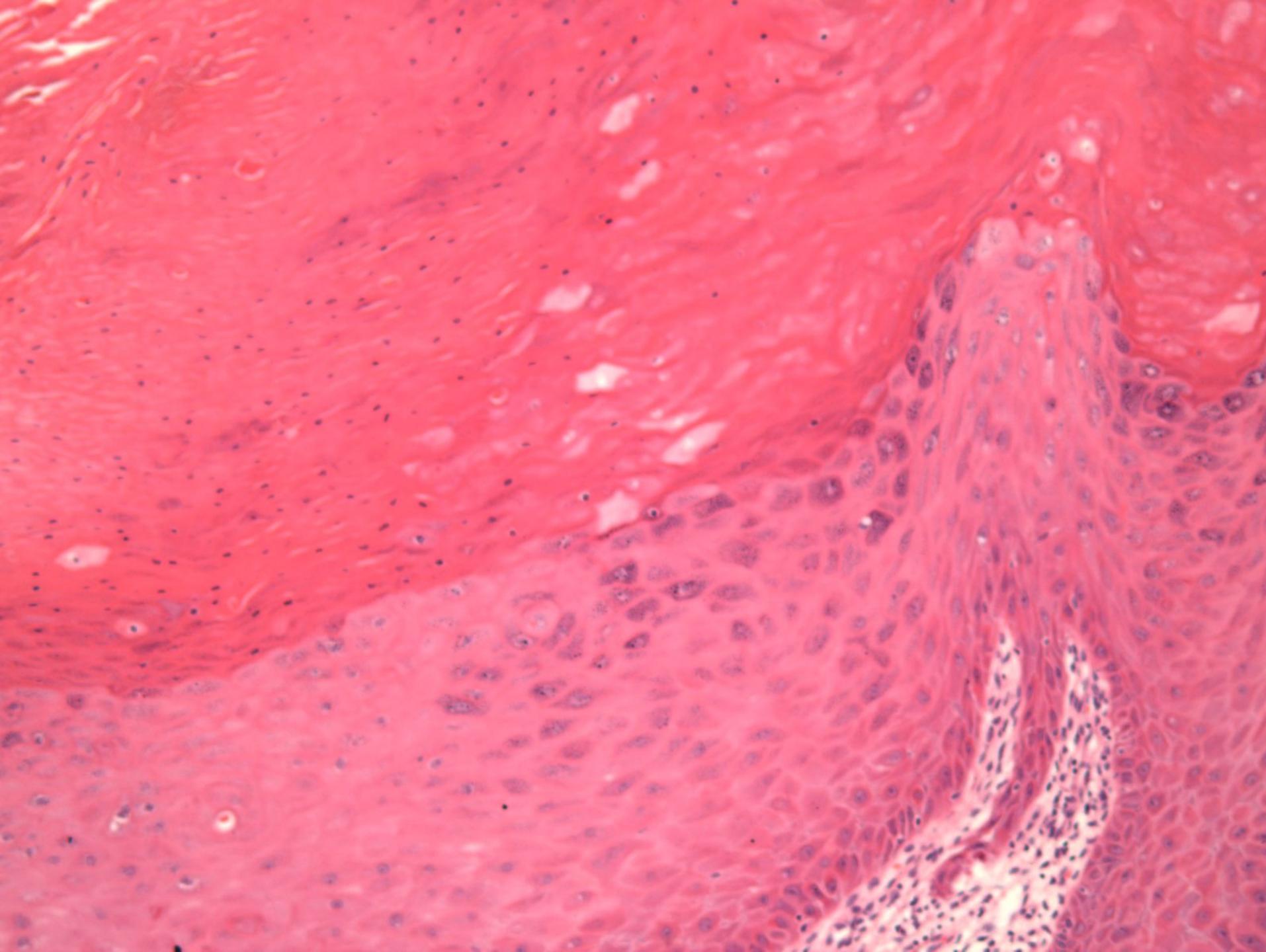


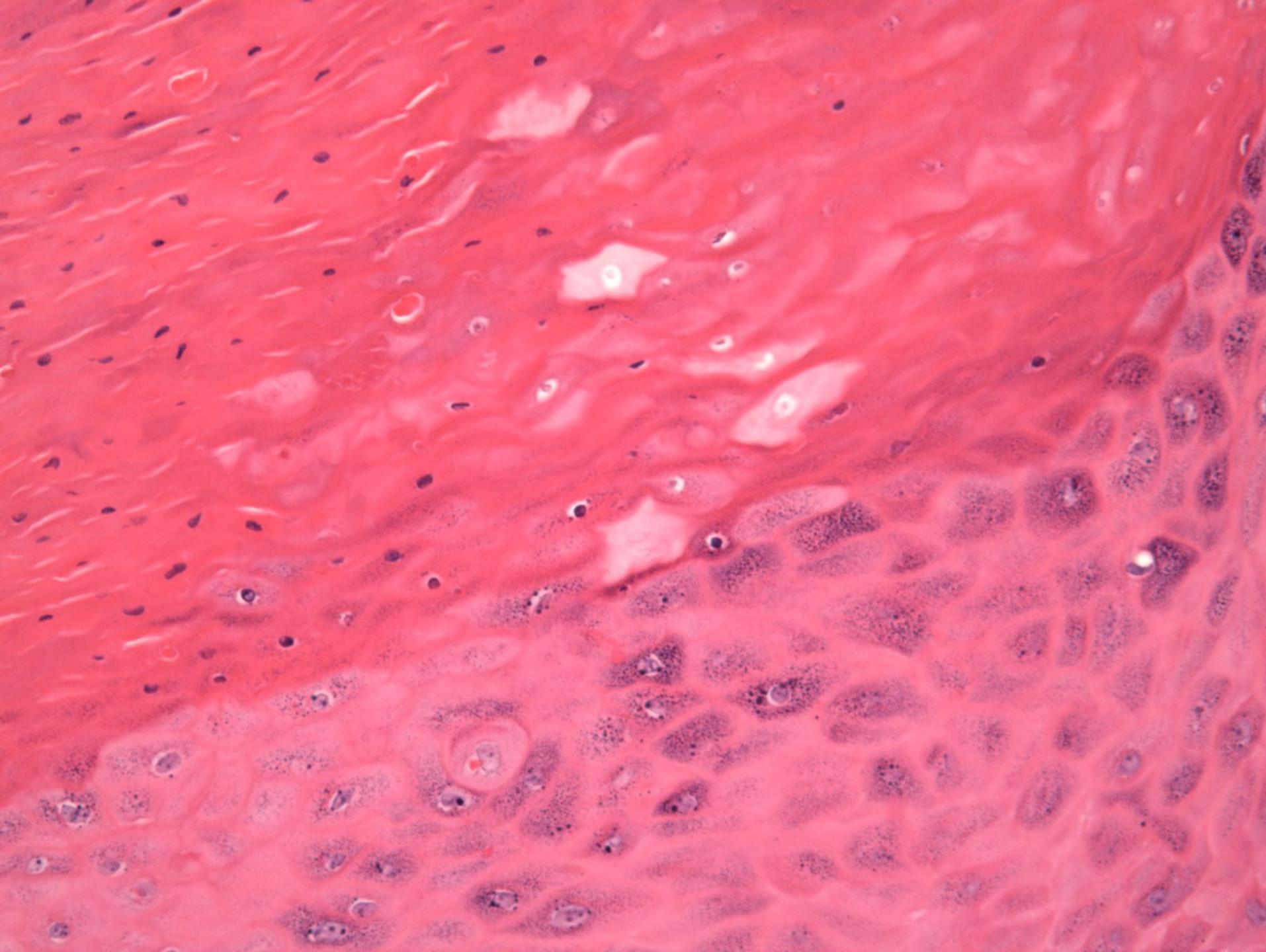


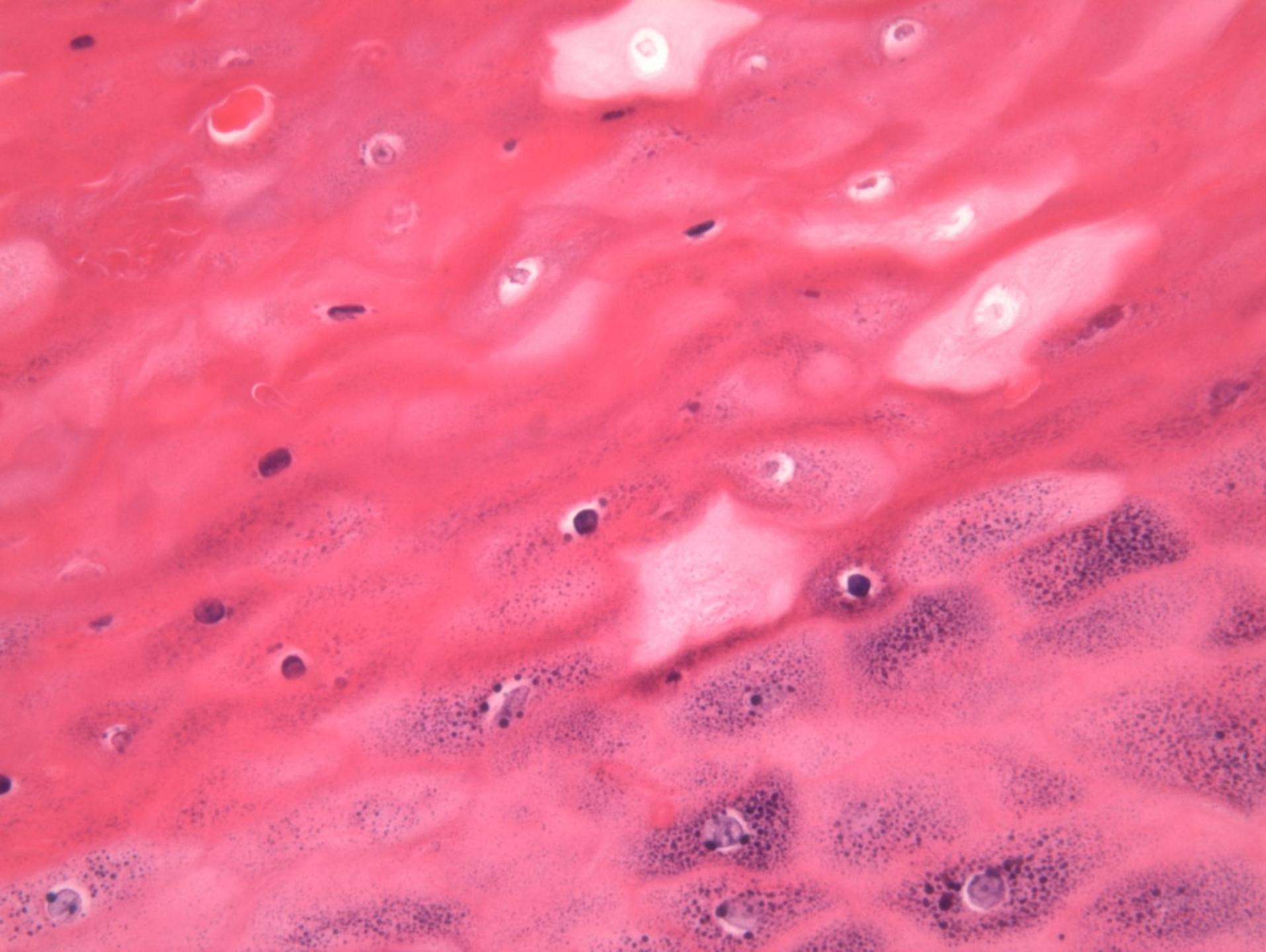






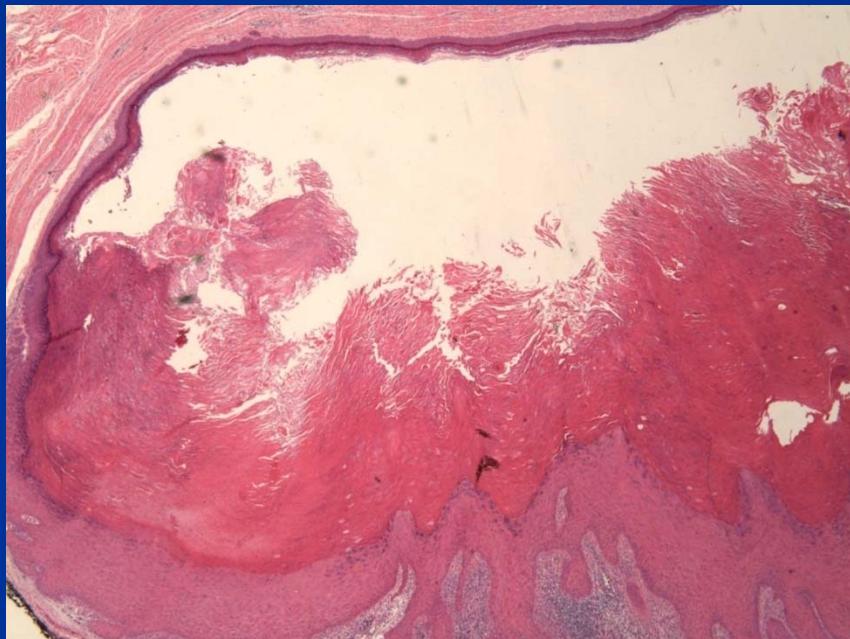




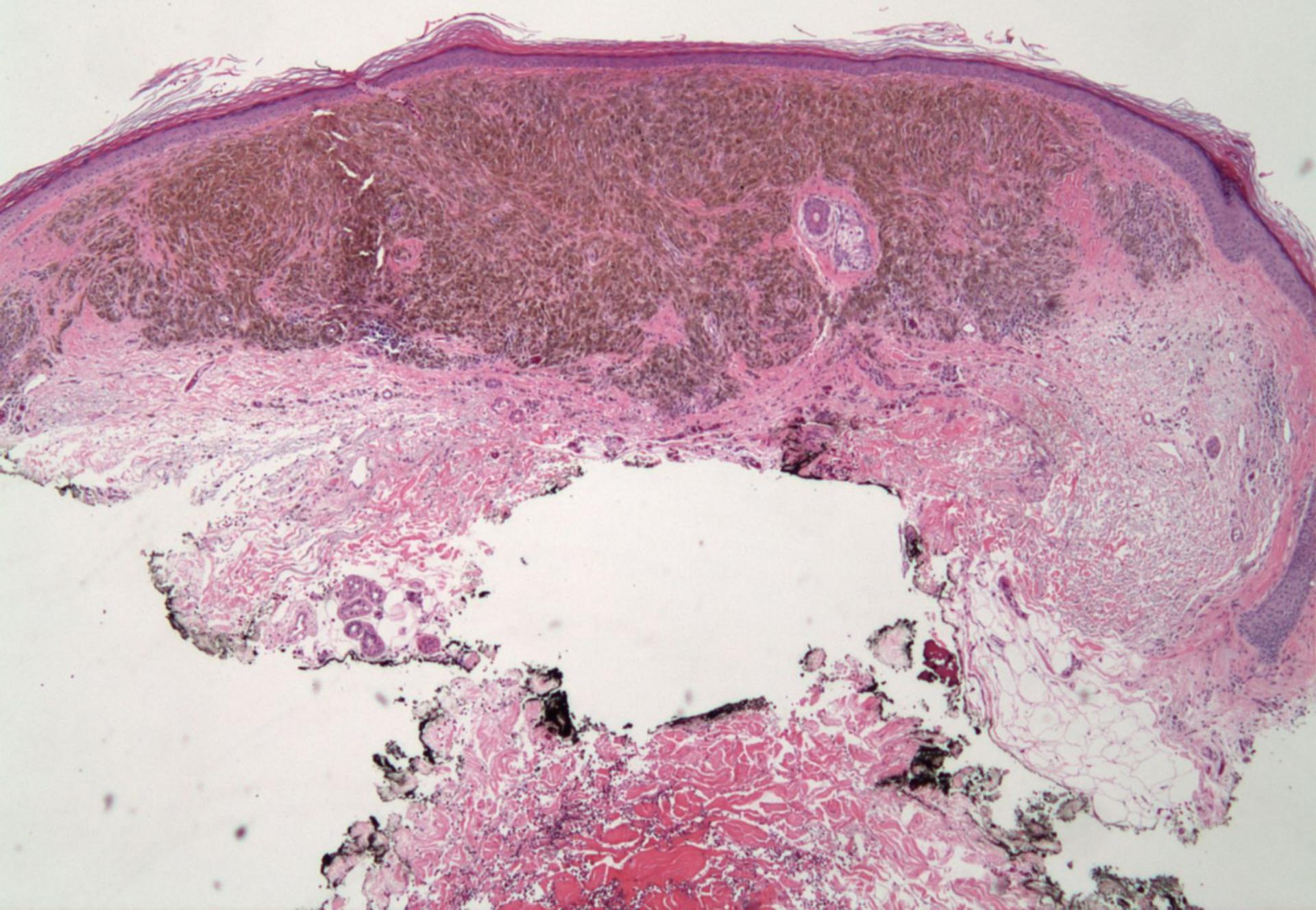


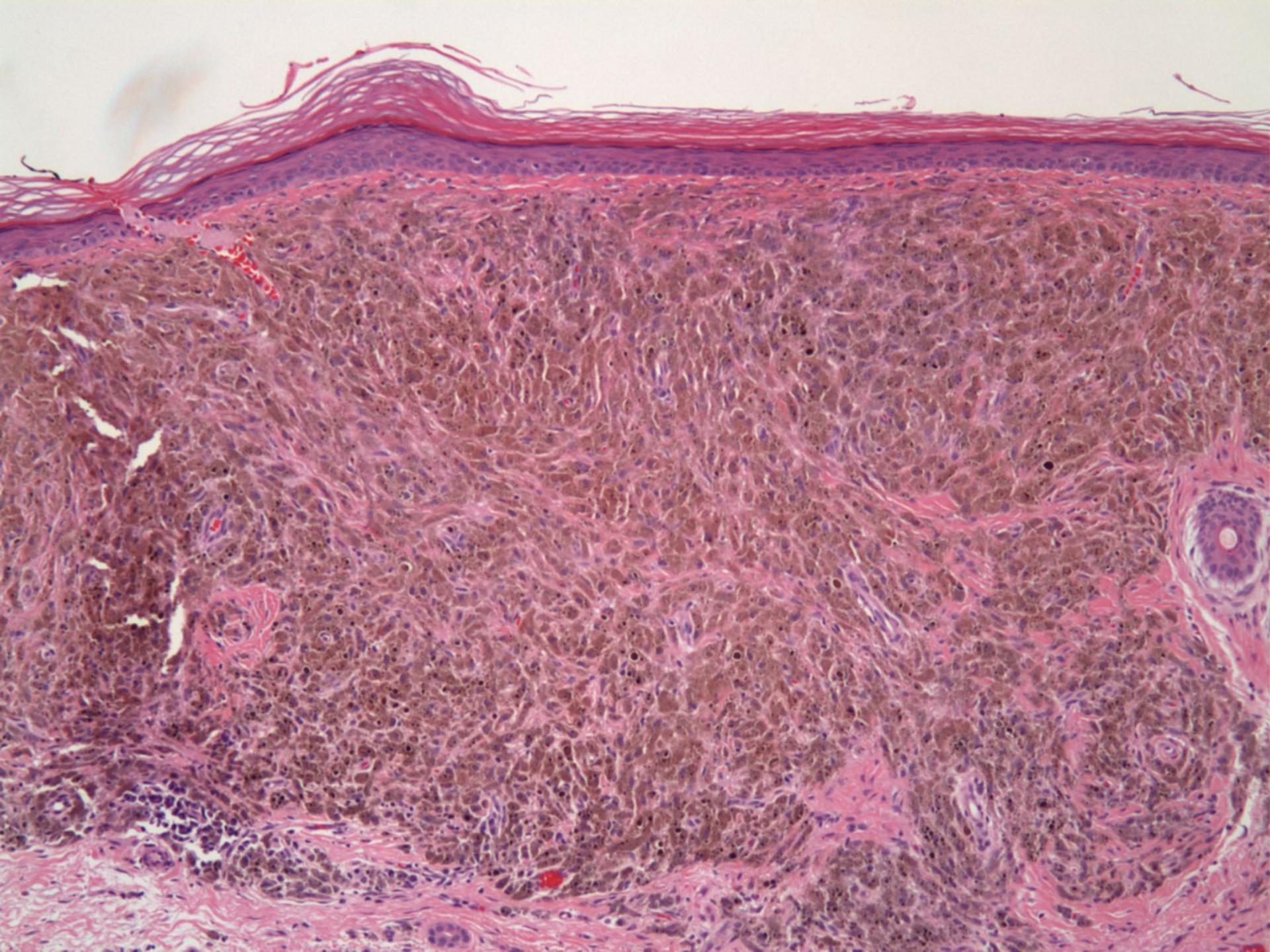
Verrucous Epidermal Cyst

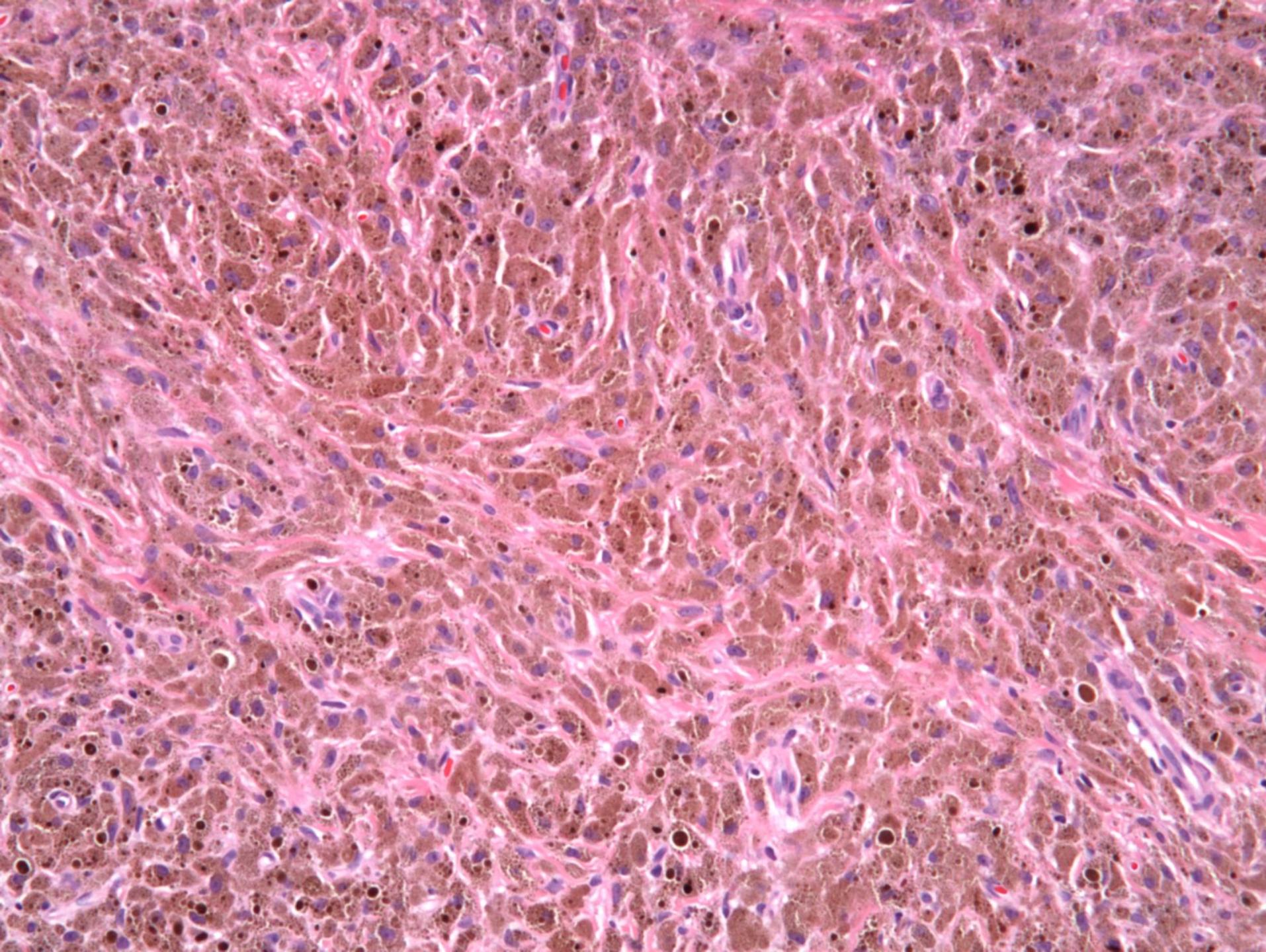
Pearls

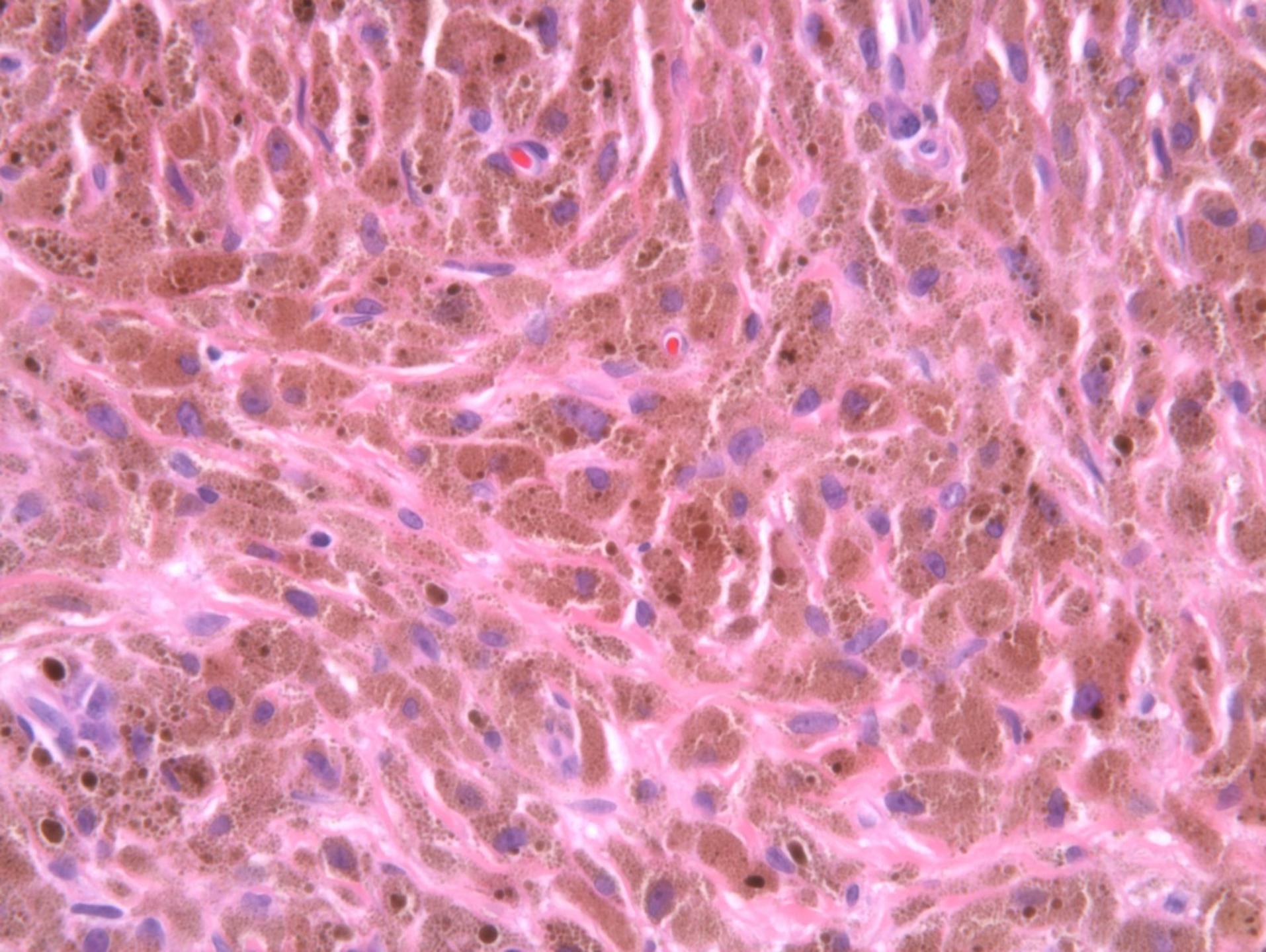


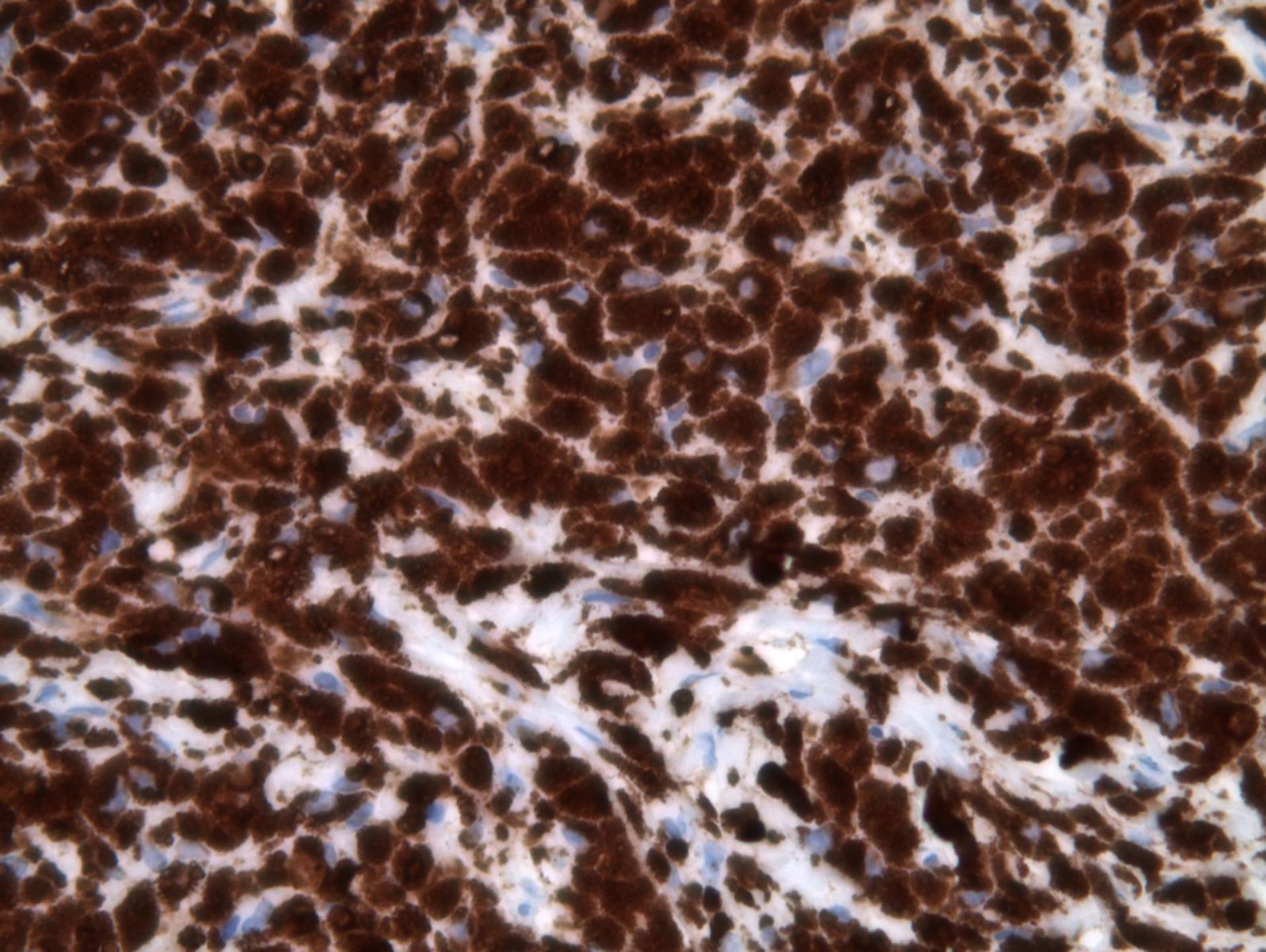
- Epithelial cyst lined by verruciform changes
- Typical verruca vulgaris cytology
- Compact laminated keratin within cyst





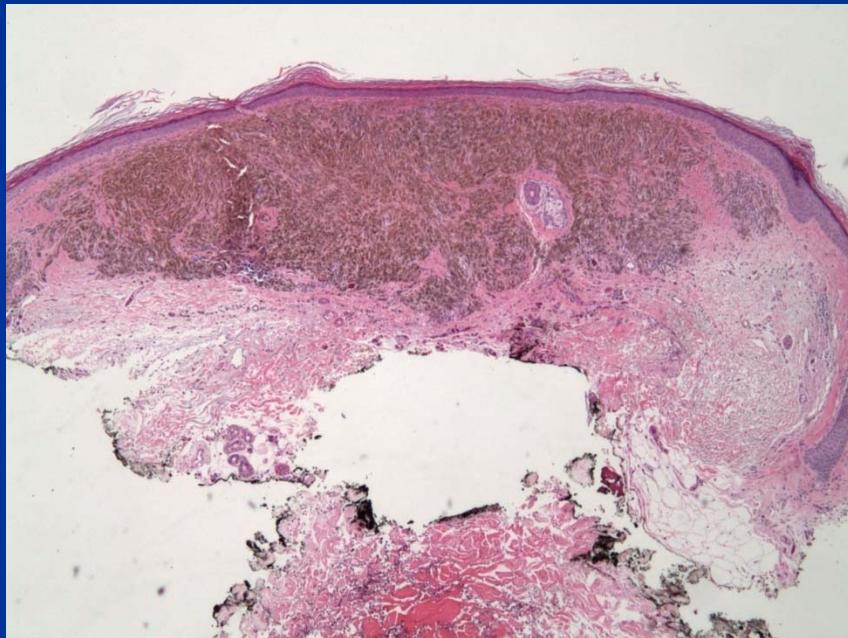




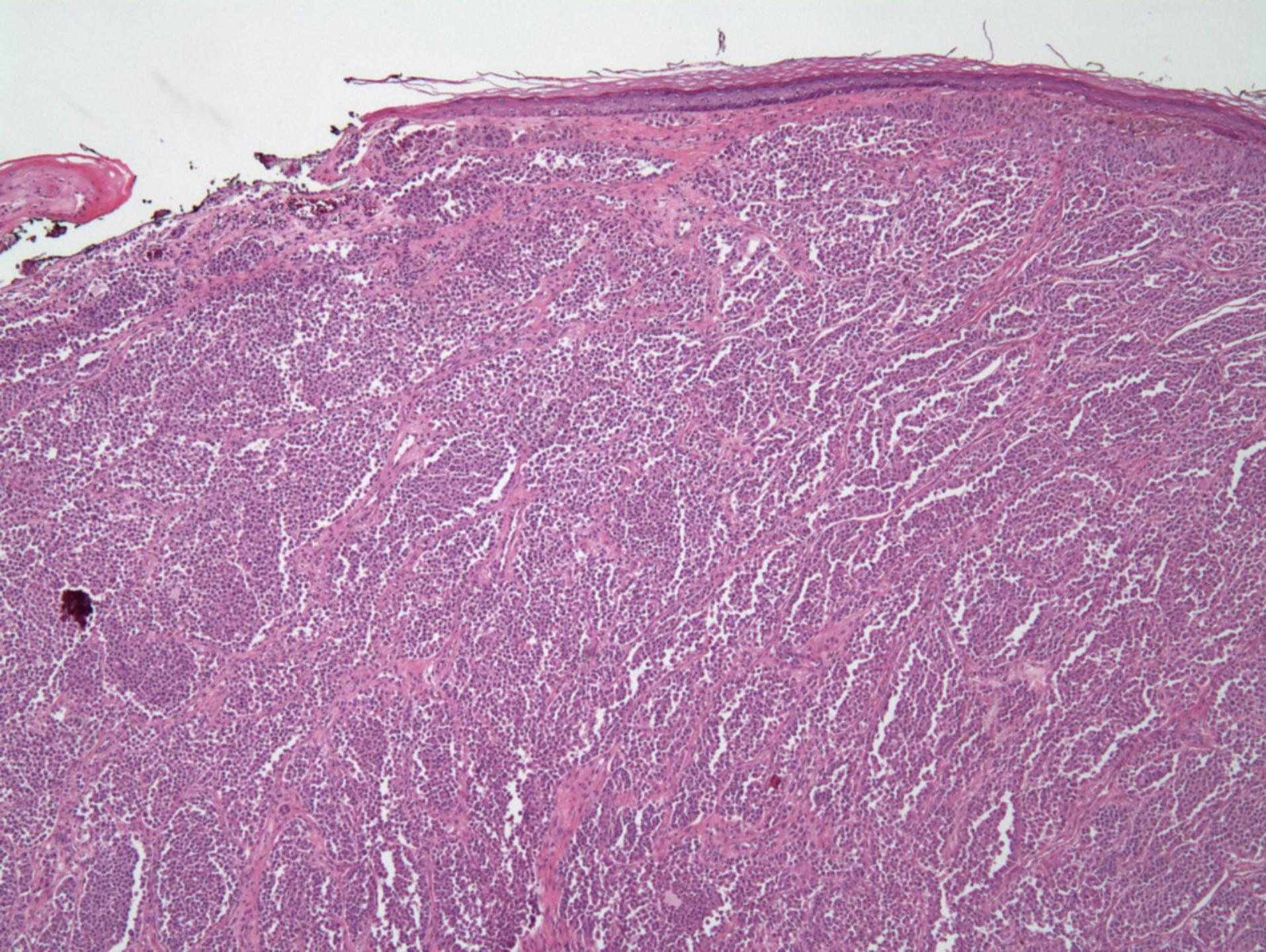


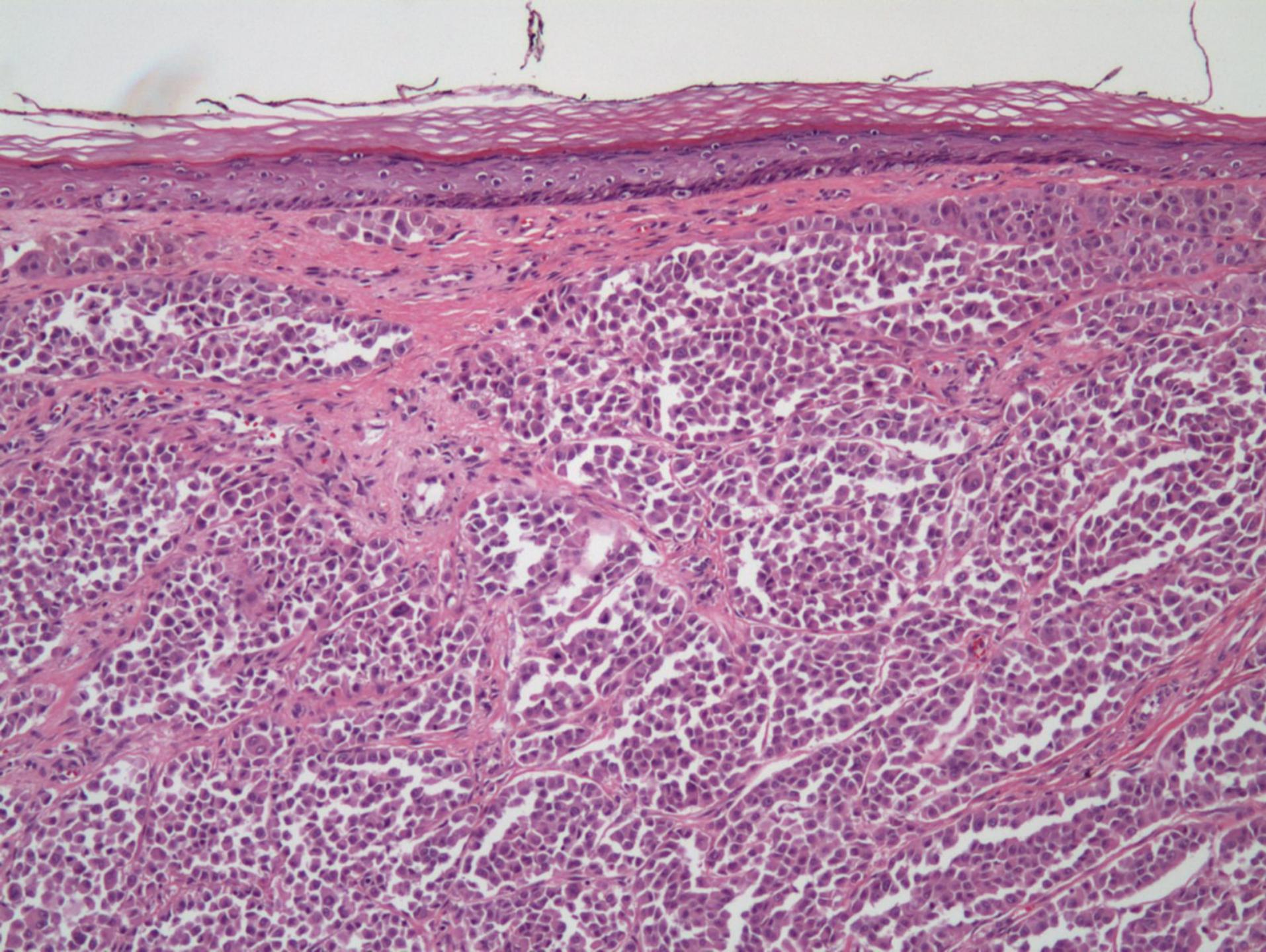
Tumoral Melanosis

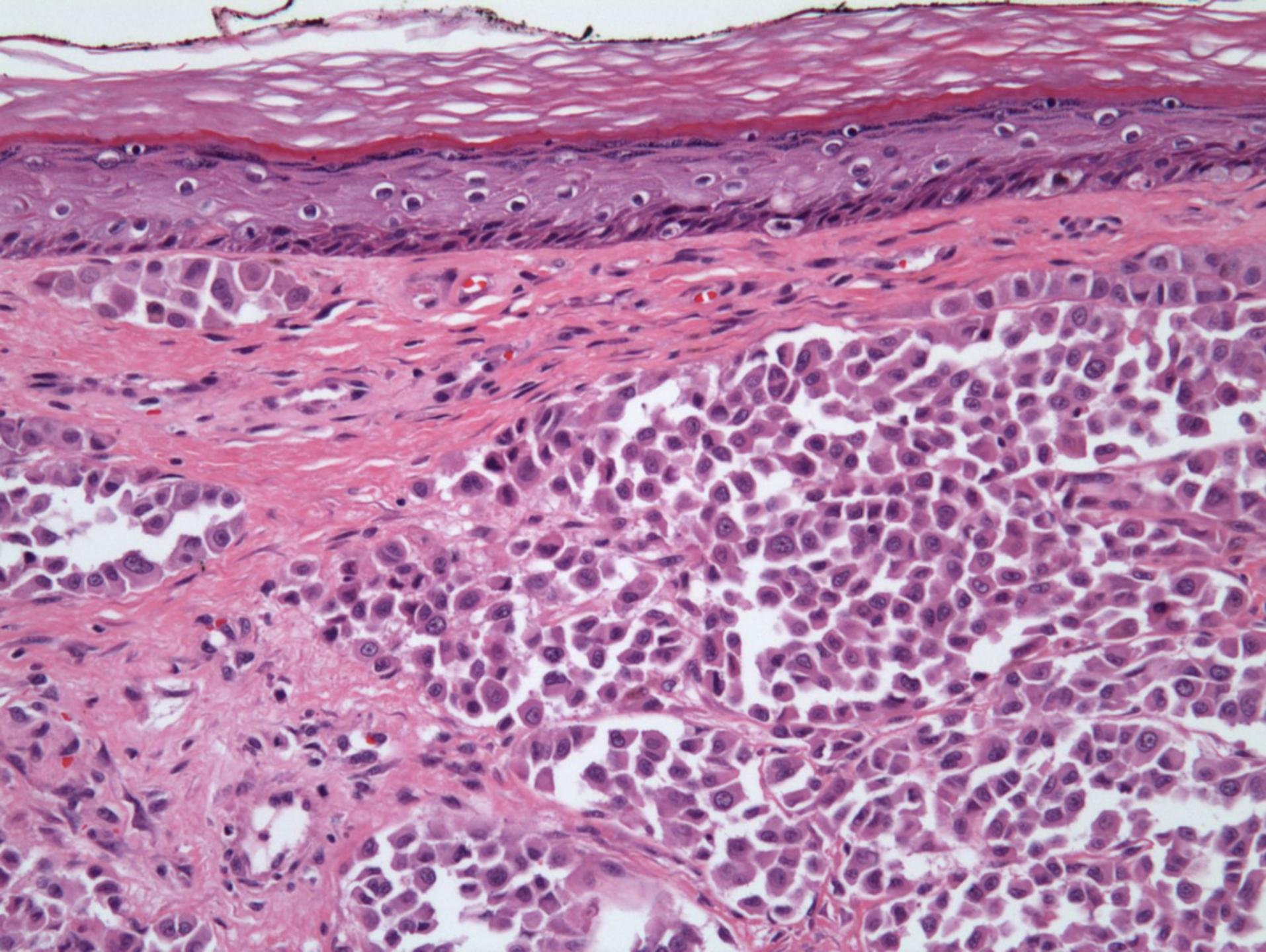
Histopathology

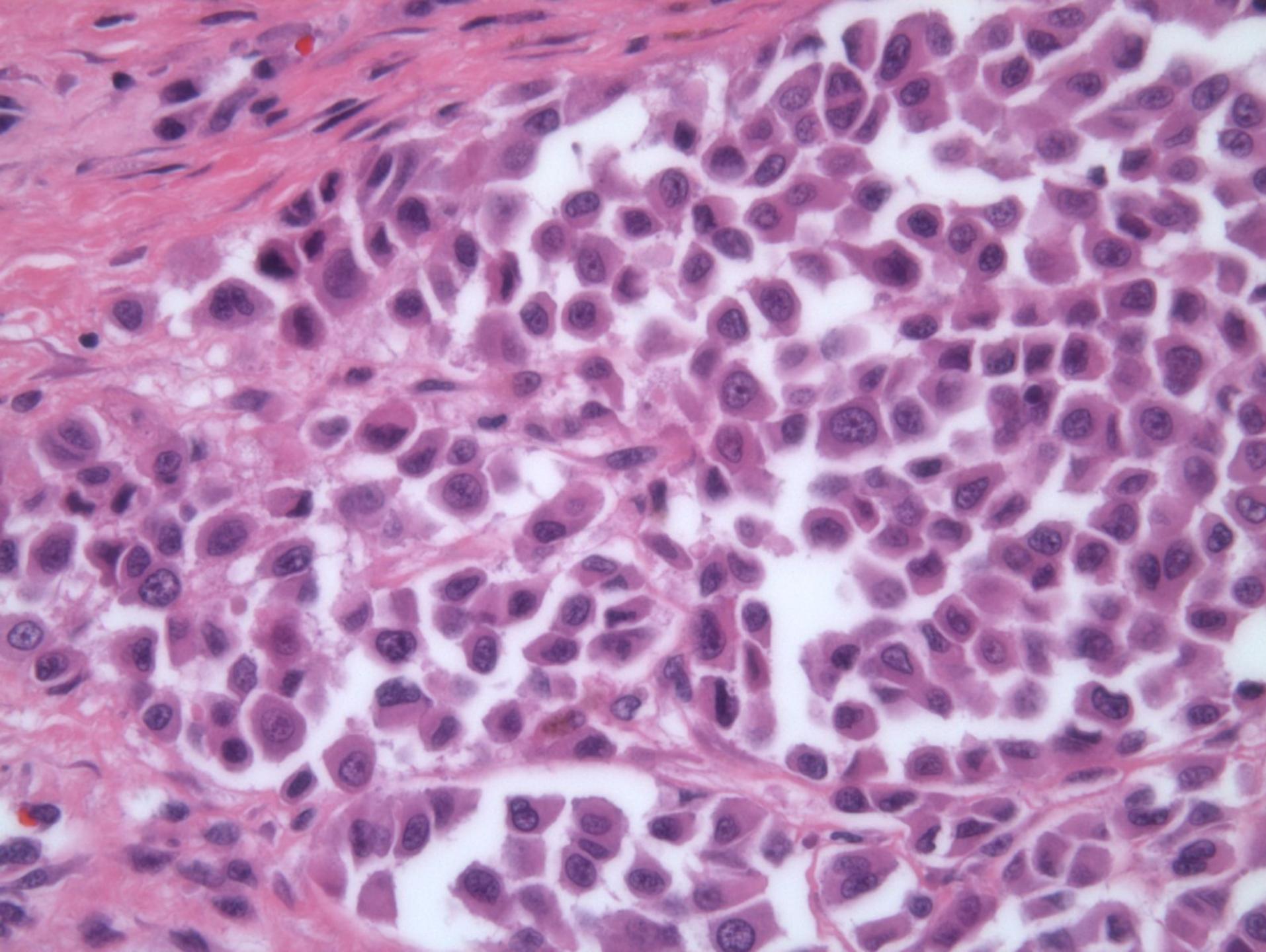


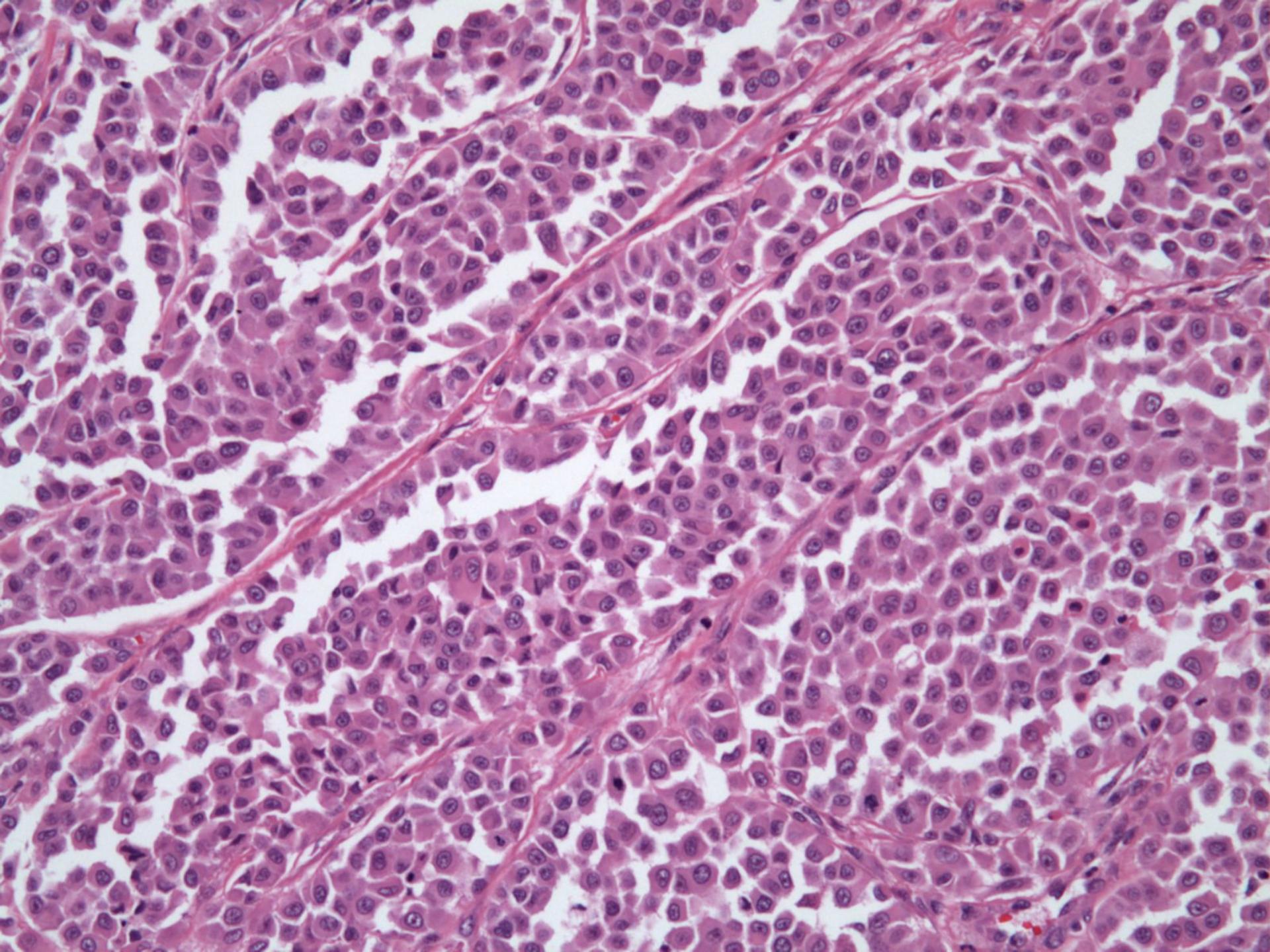
- Nodular collection of melanophages
- Bland cytological appearance
- May need to bleach sections to differentiate from malignant melanoma

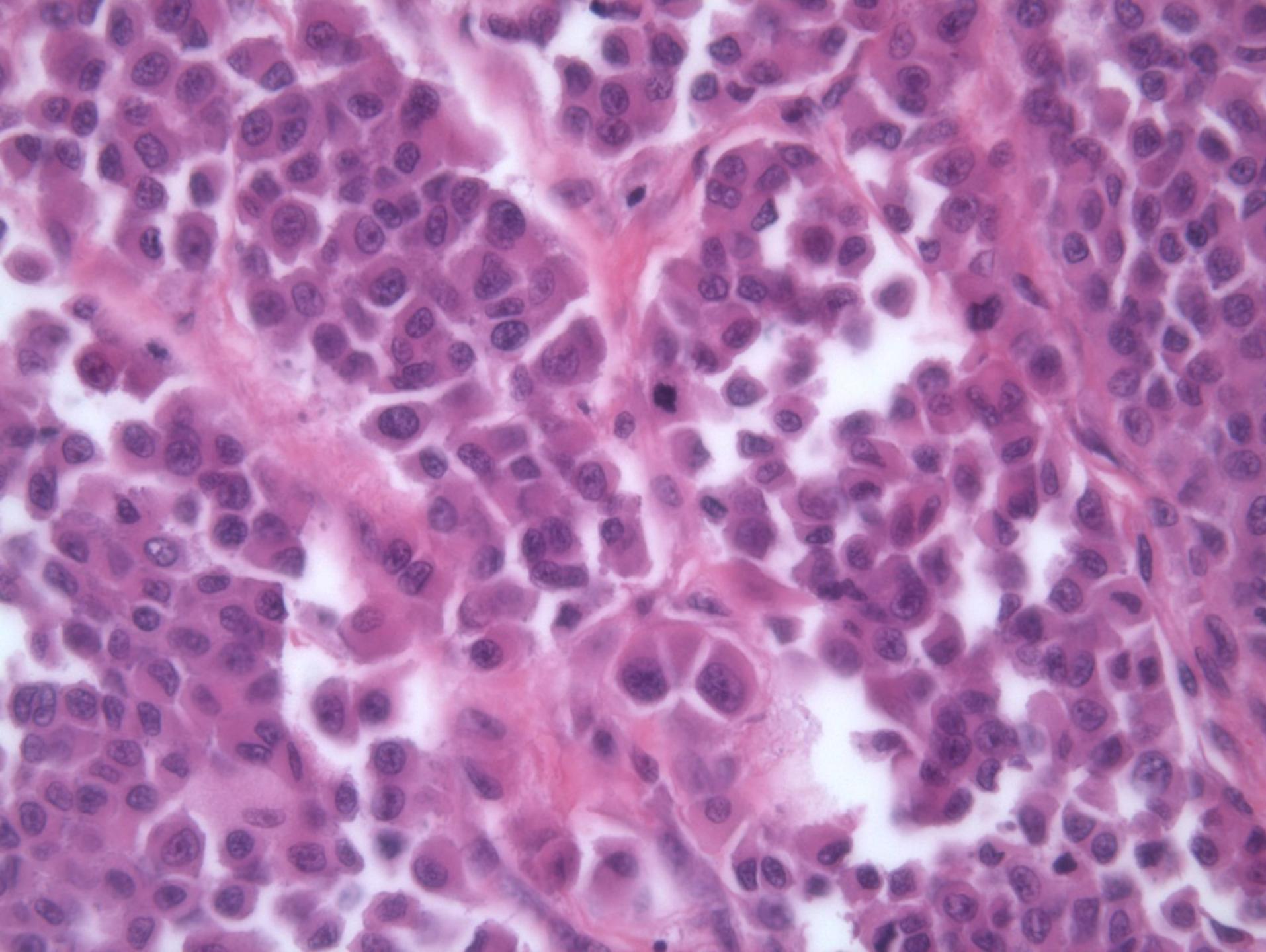






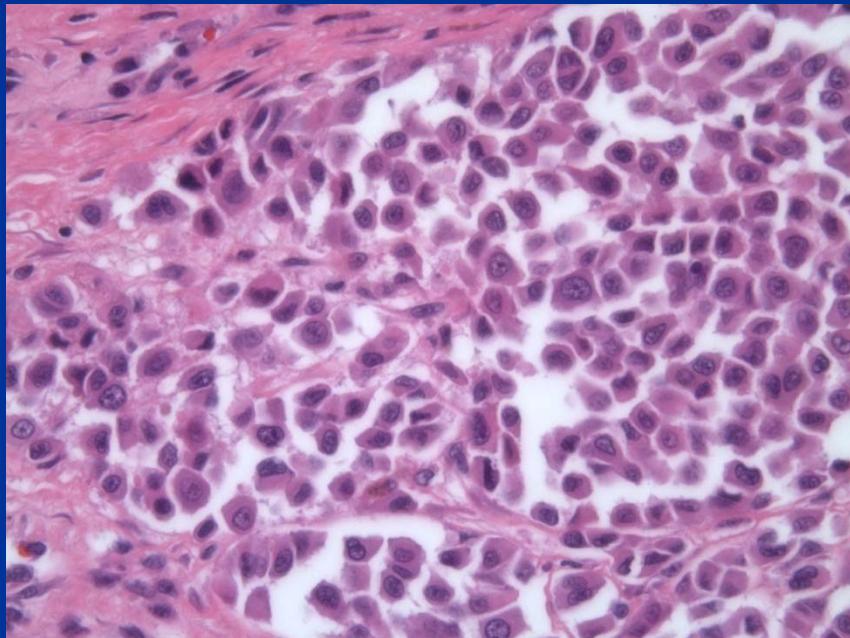




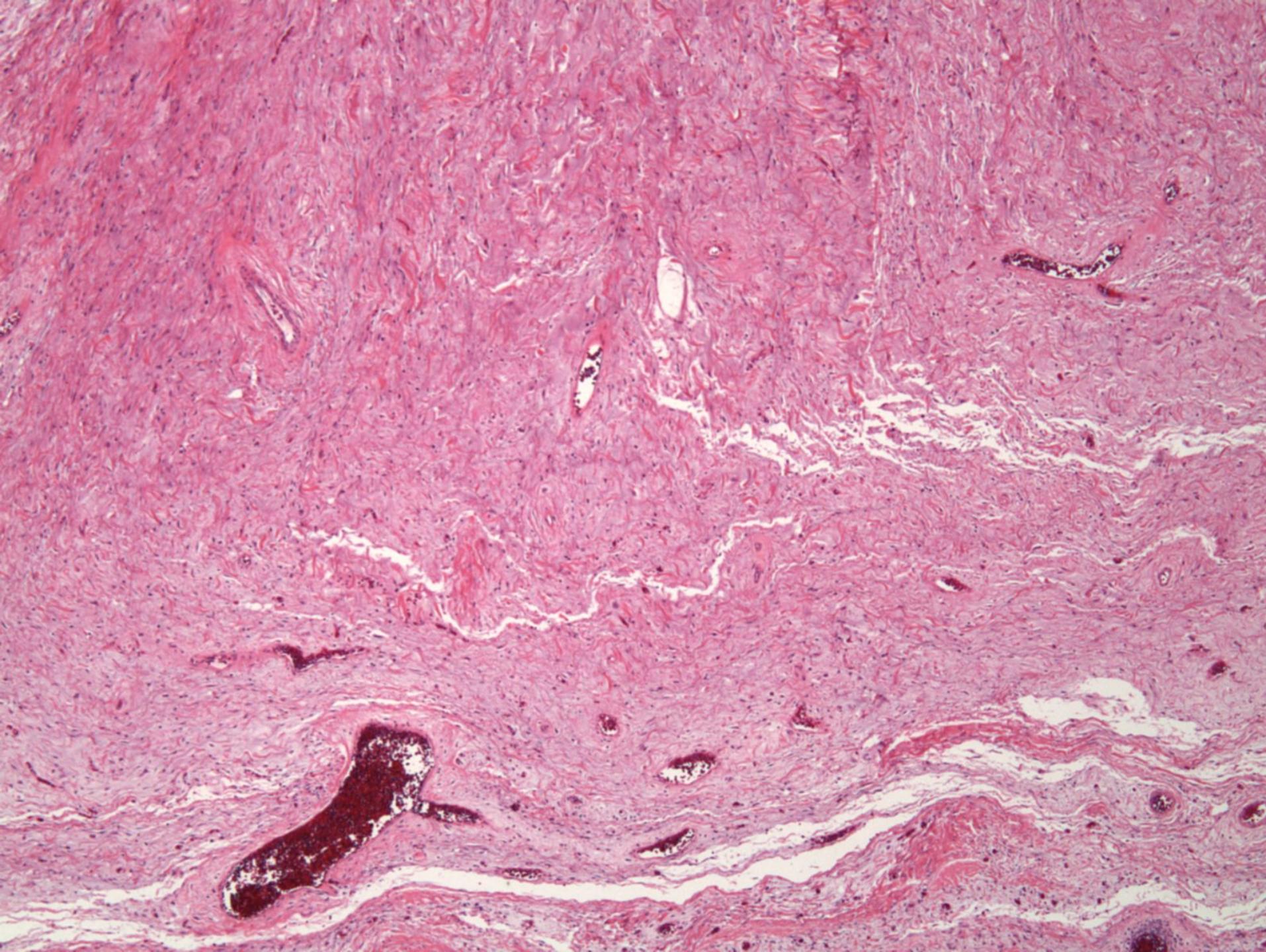


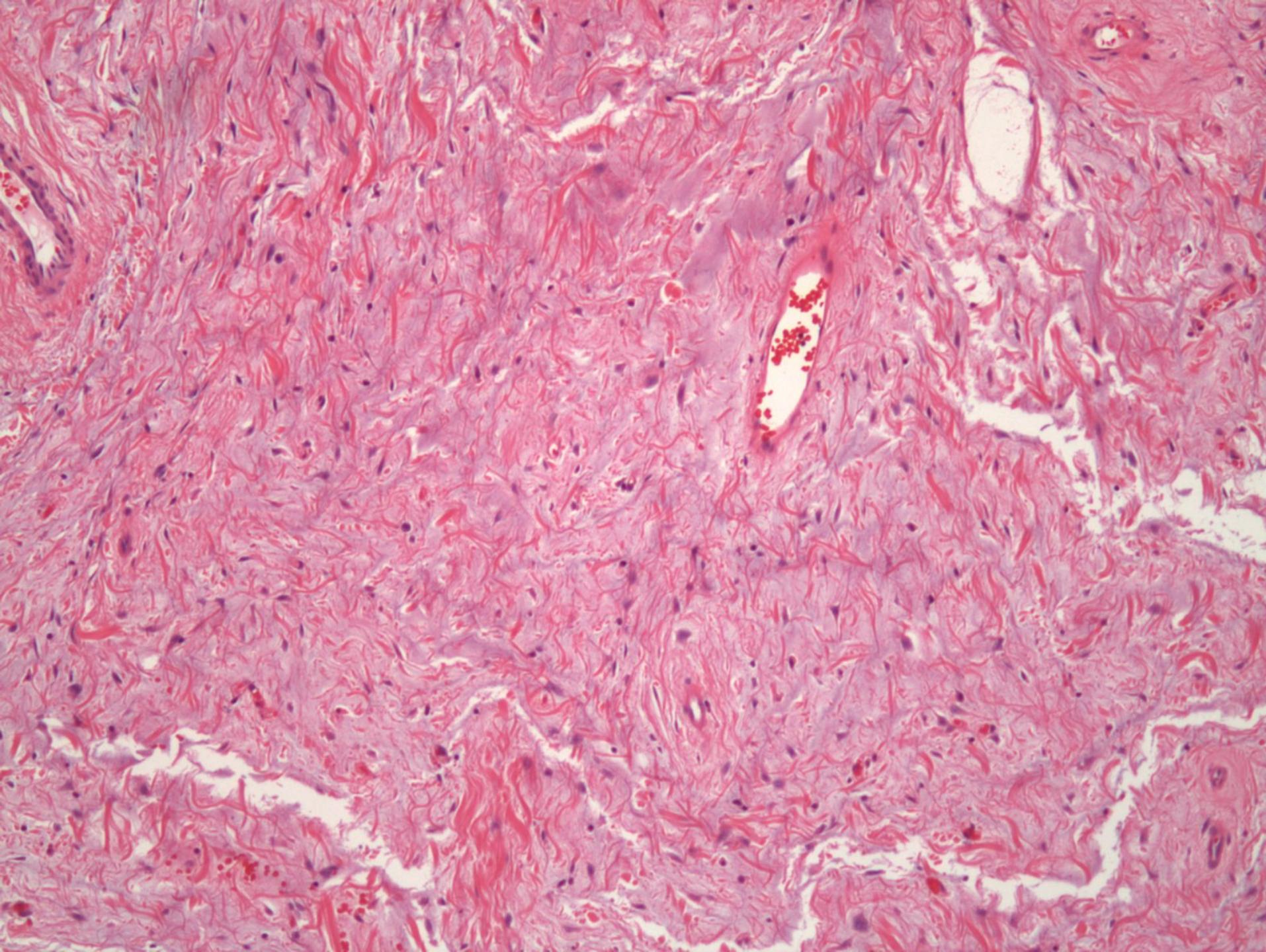
Metastatic Melanoma to the Skin

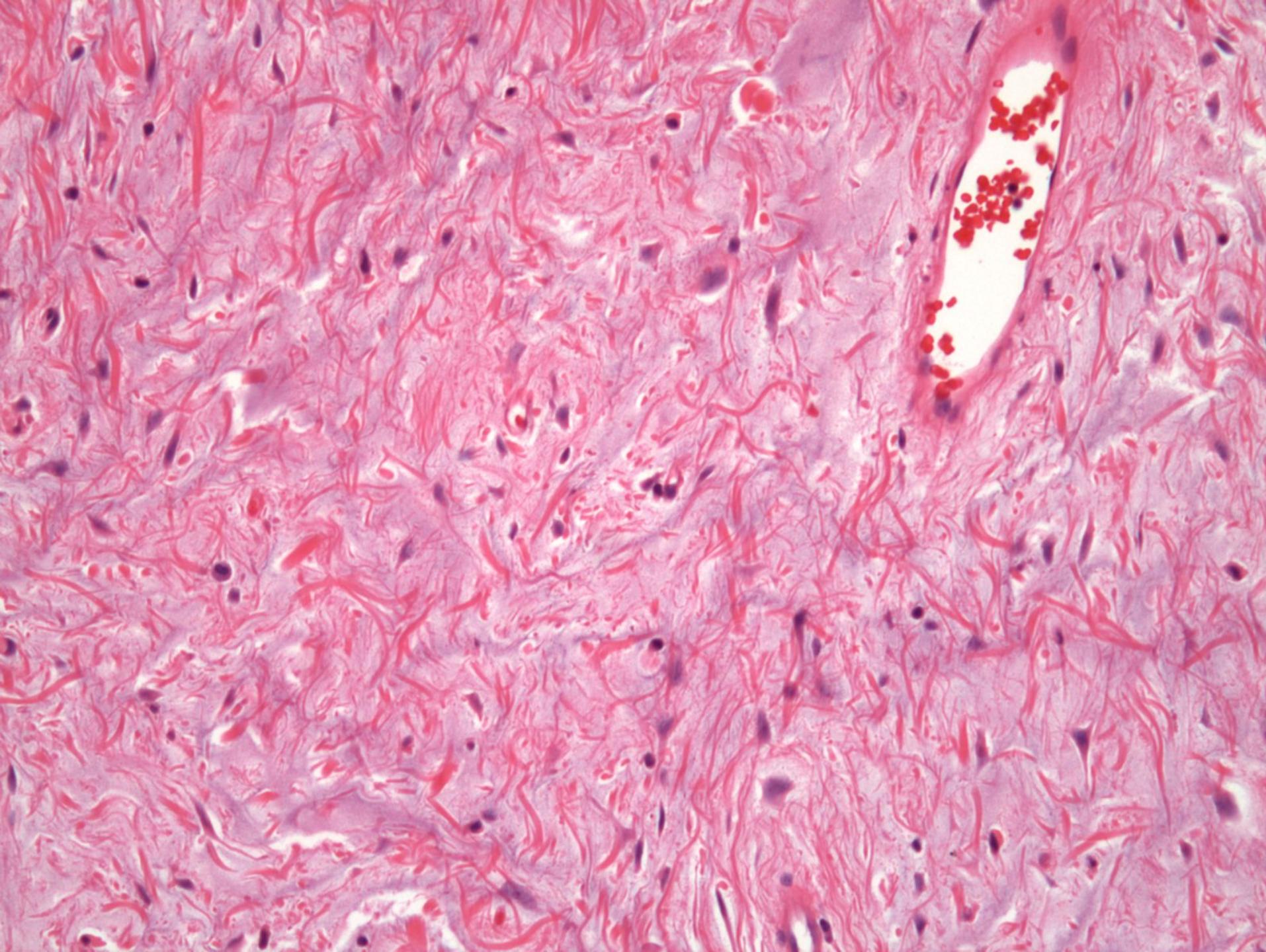
Histopathology

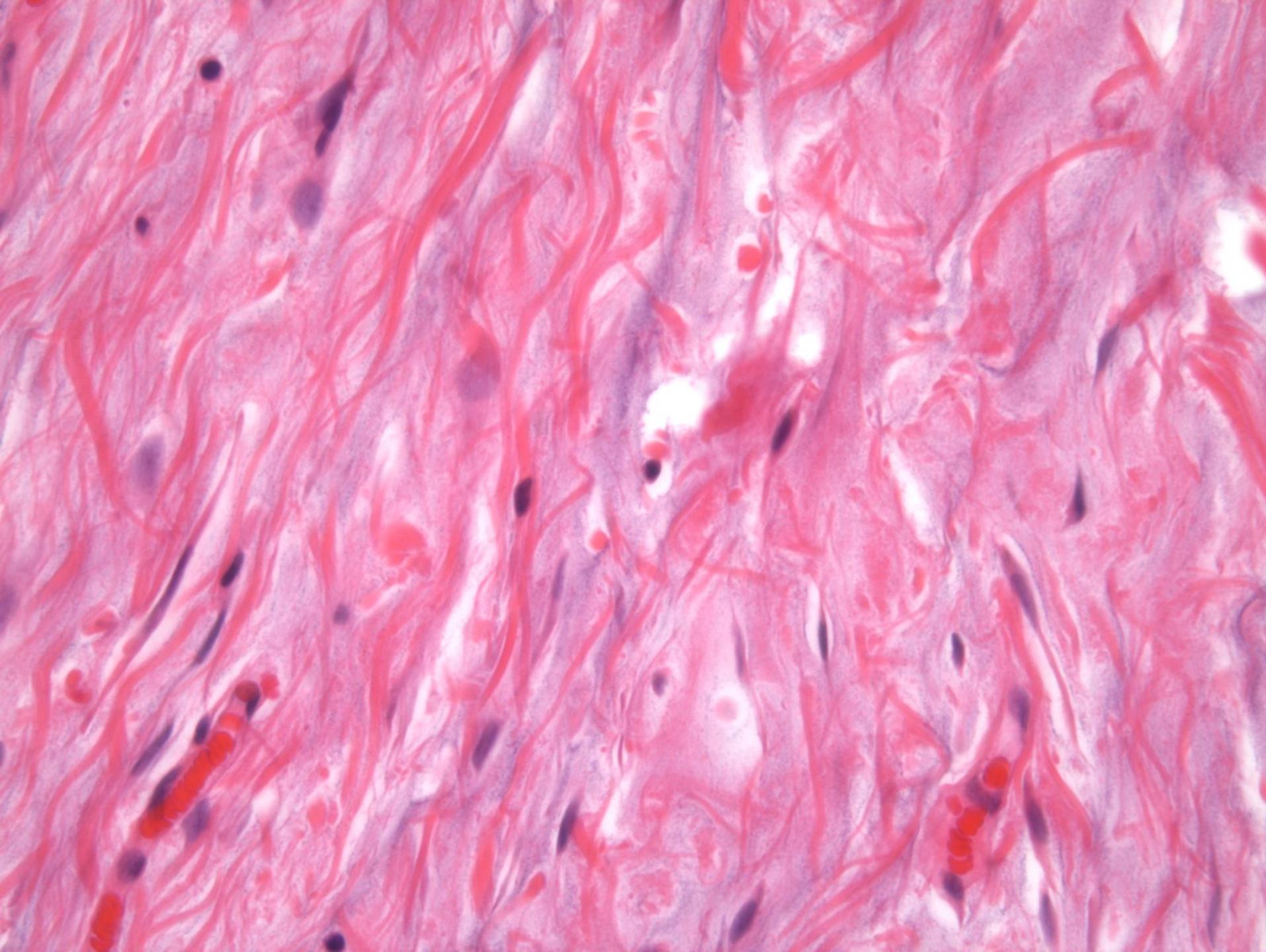


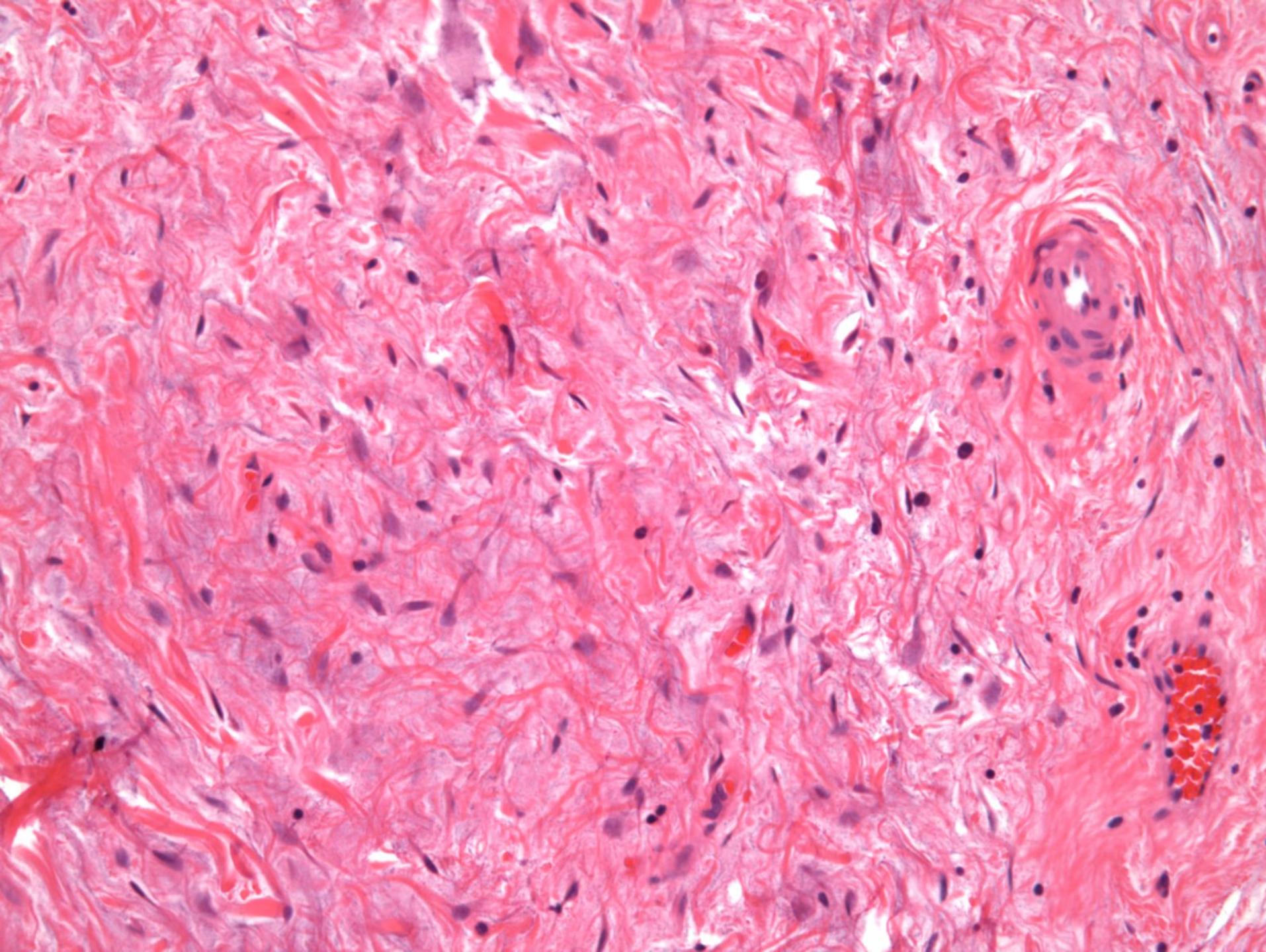
- Bottom heavy distribution of malignant melanocytes with minimal to absent epidermal or junctional involvement (Opposite of primary cutaneous melanomas)

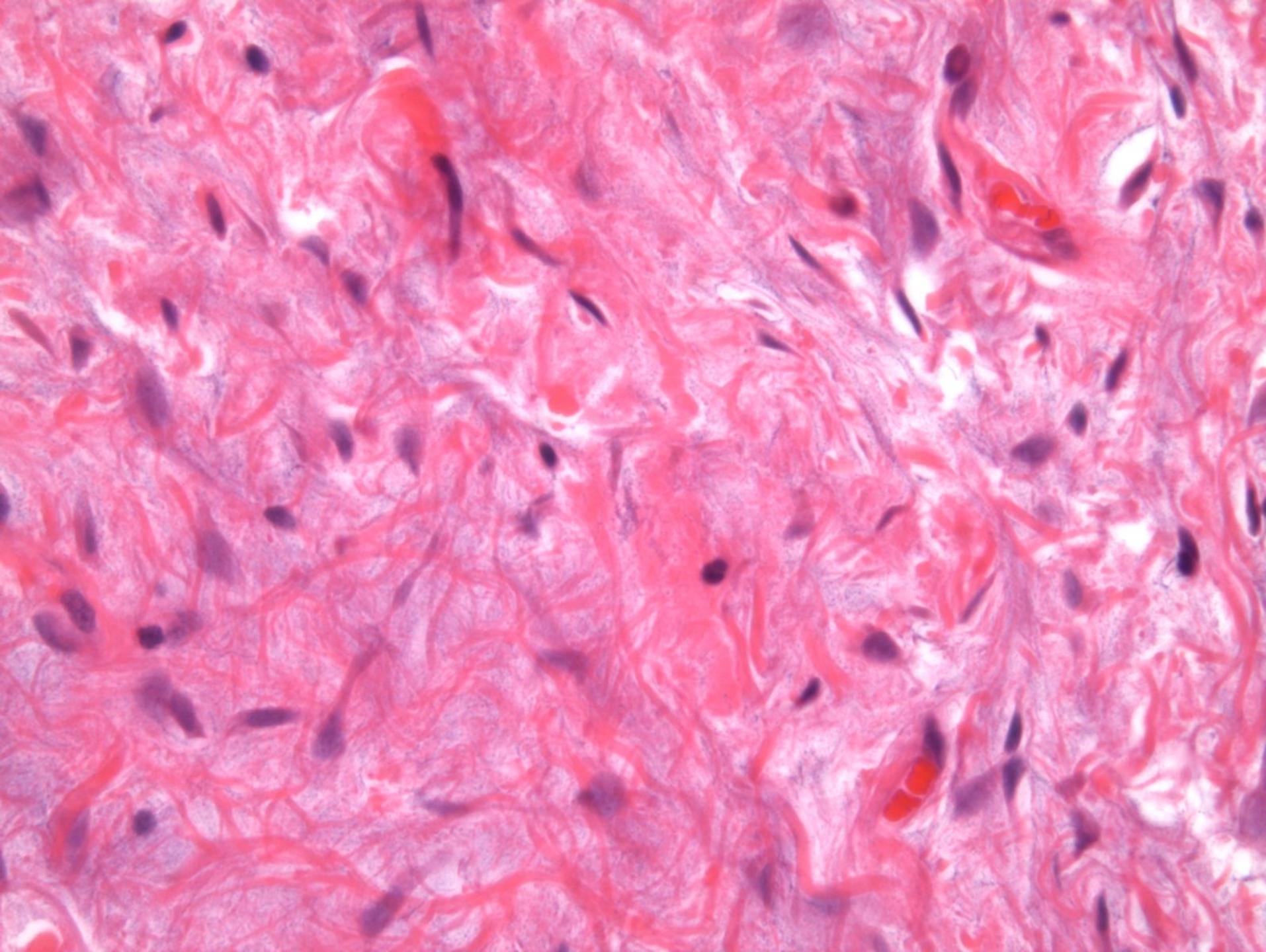






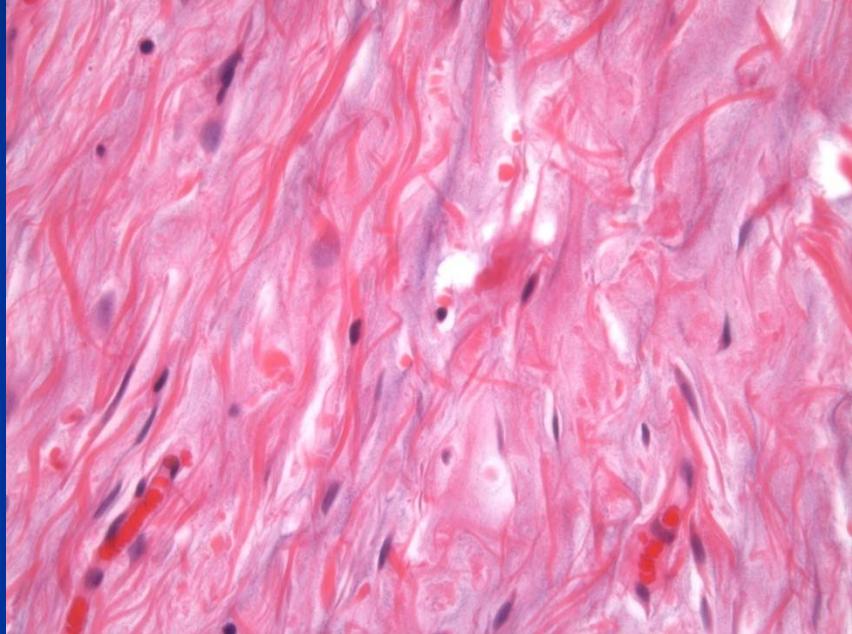




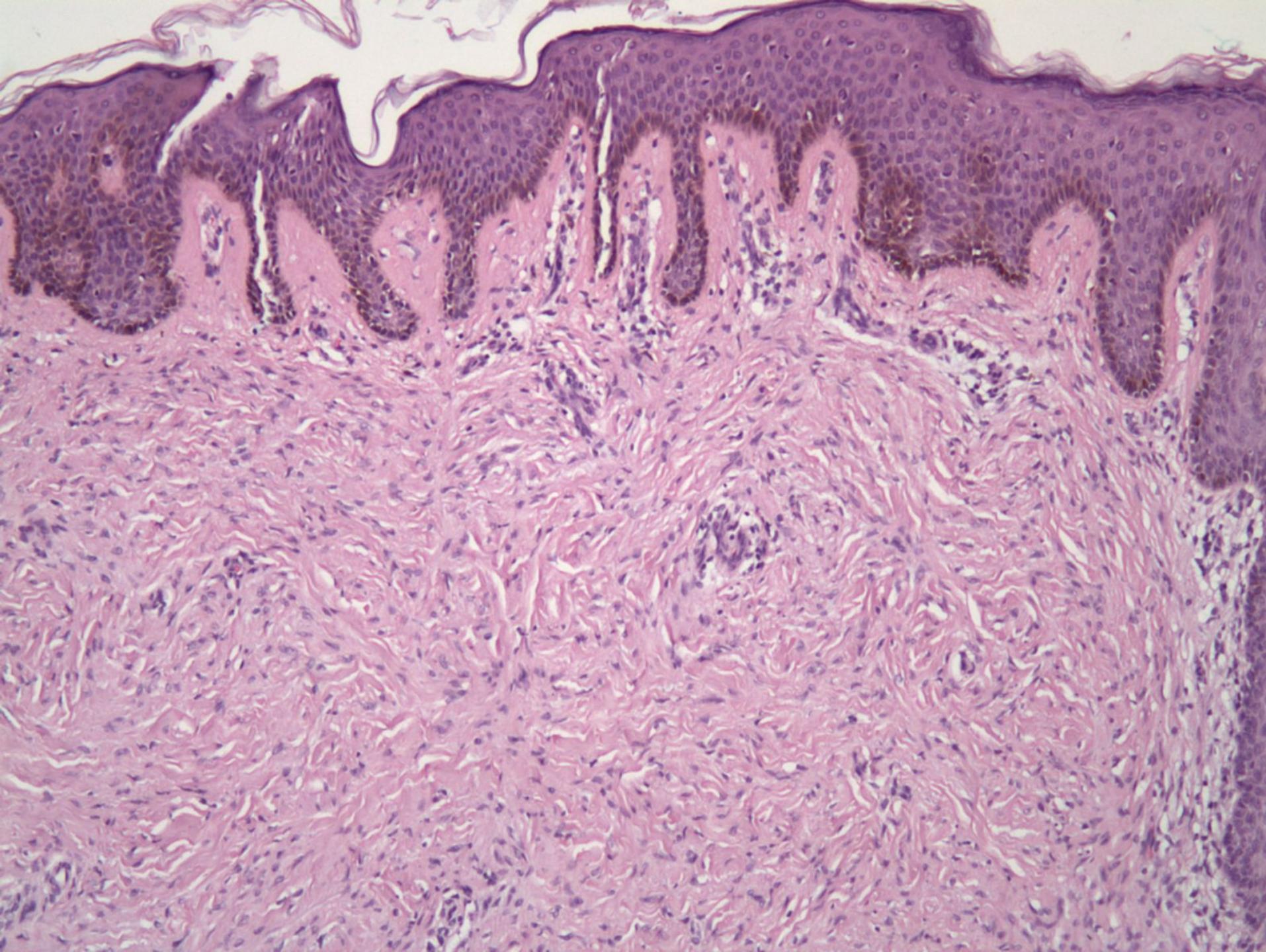


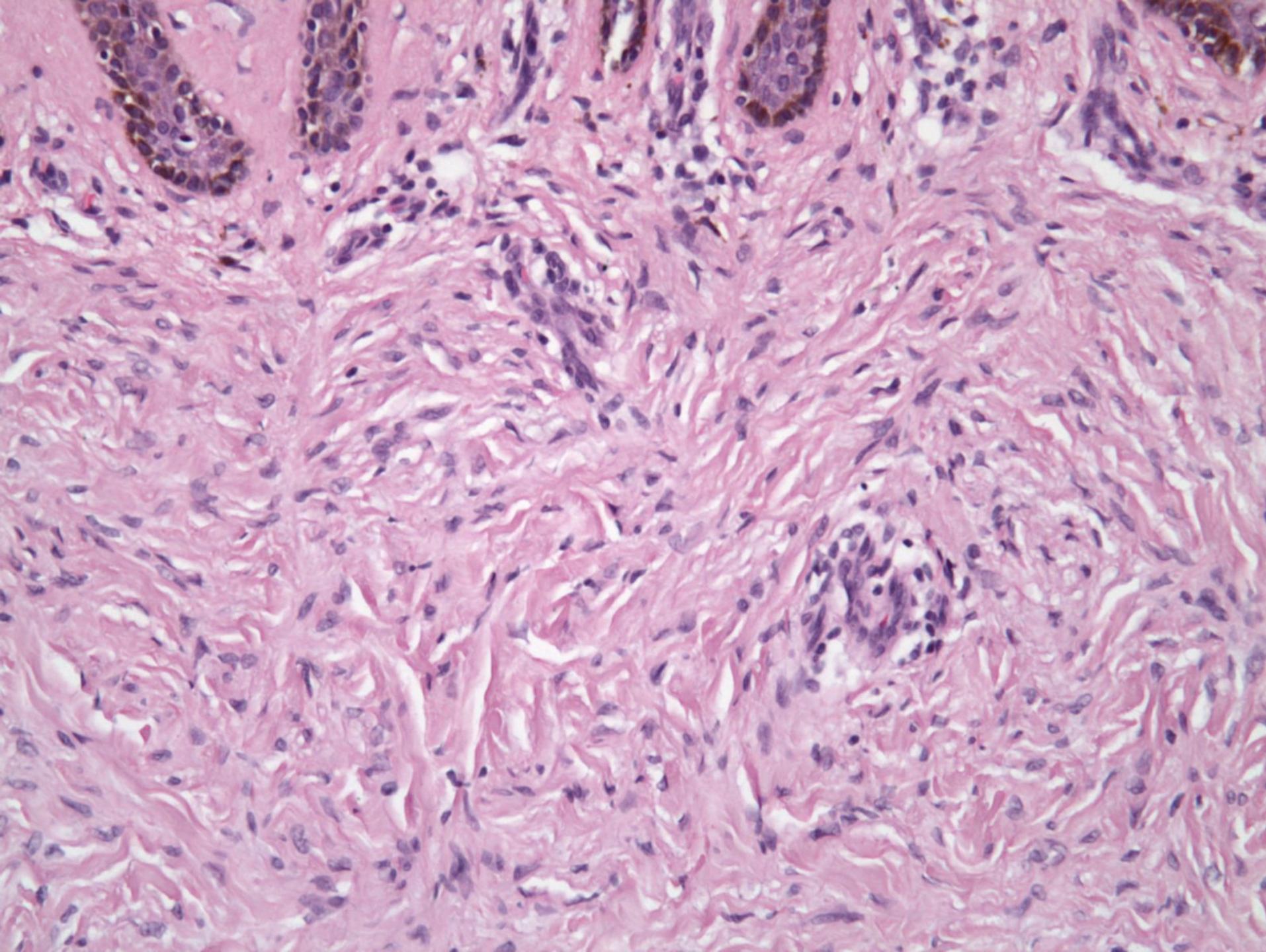
Collagenous Fibroma (Desmoplastic Fibroblastoma)

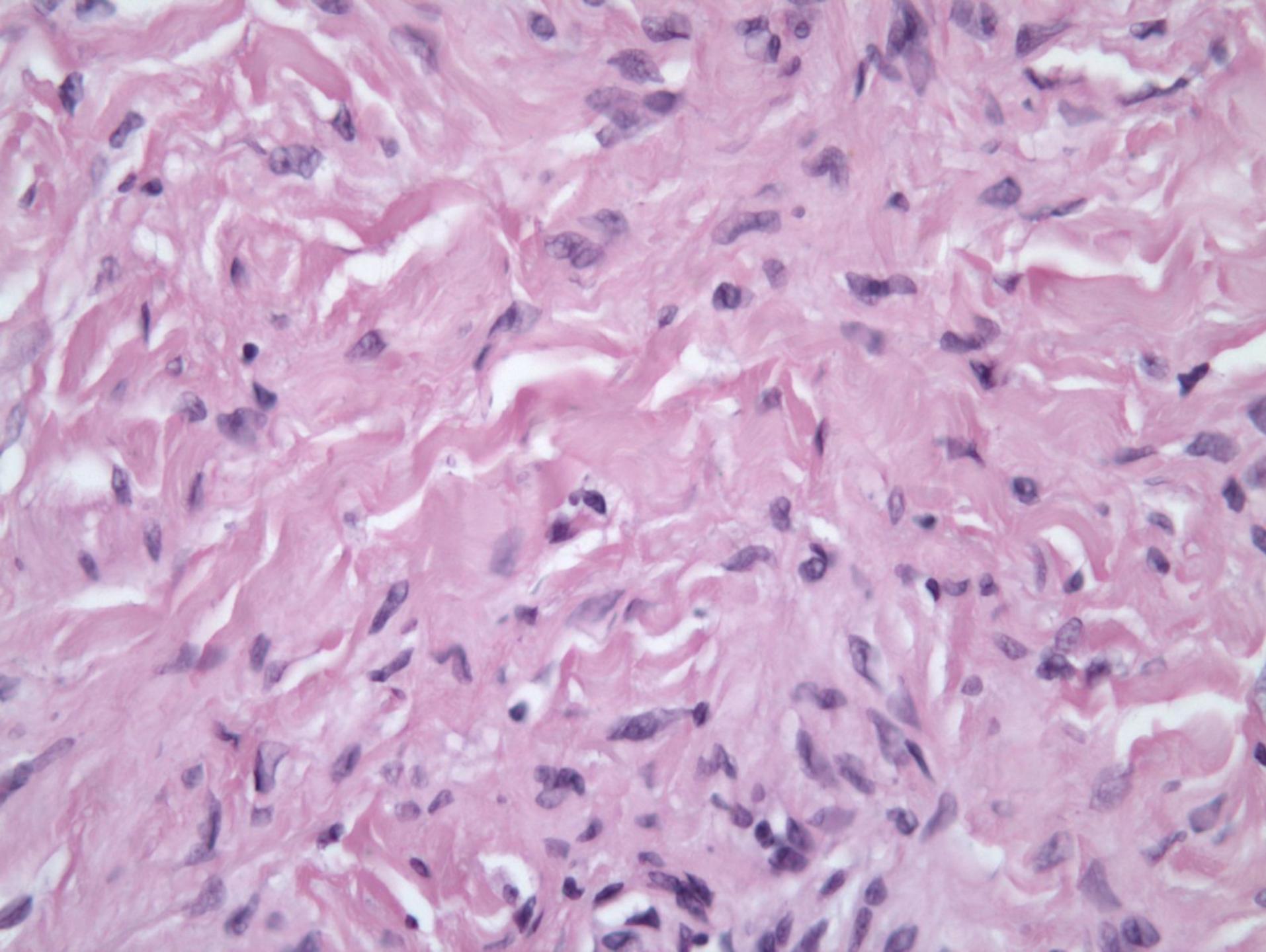
Pearls

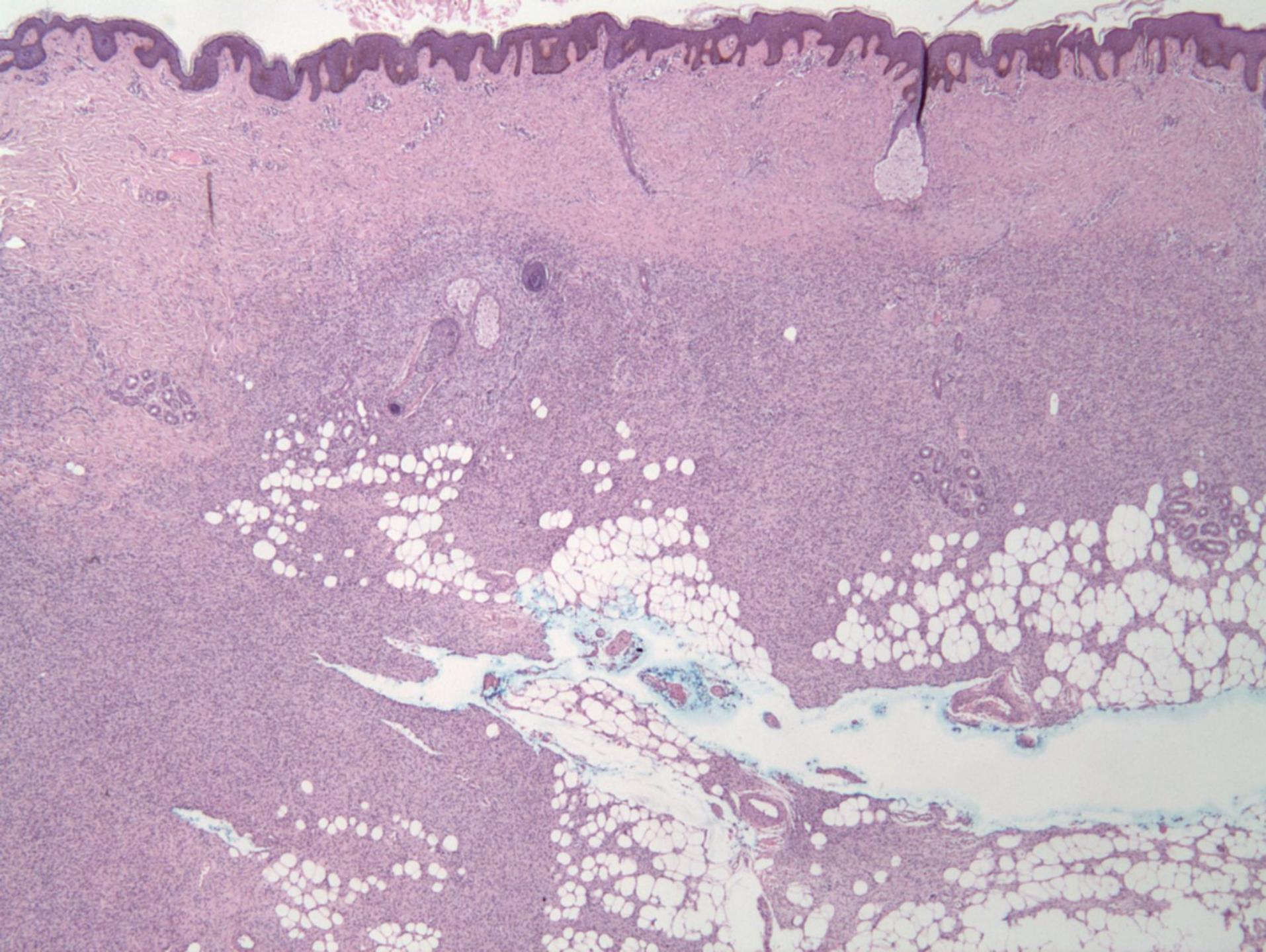


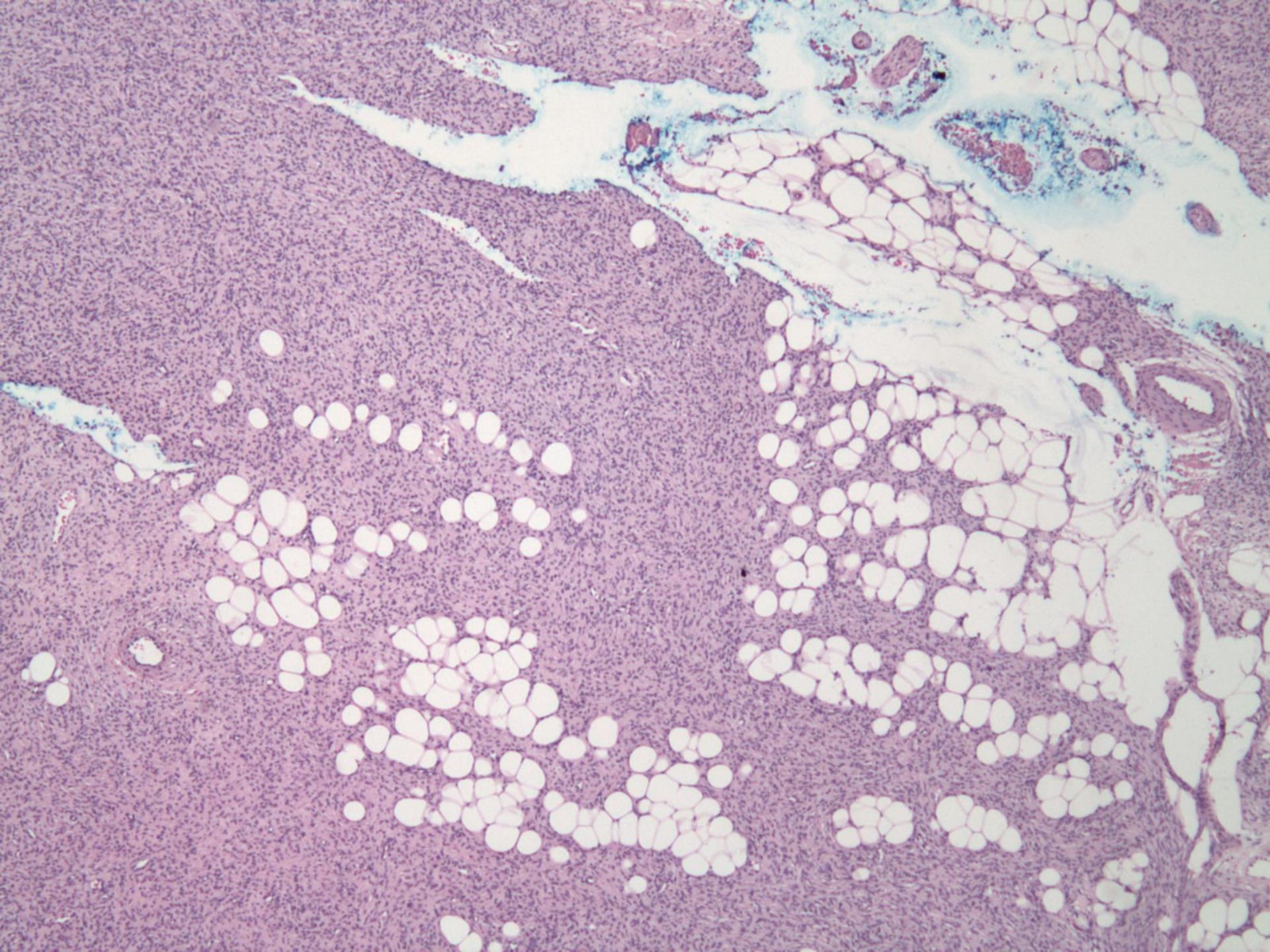
- Nodular proliferation of bland spindle cells in a hypocellular background
- Stroma may have increased mucin
- DDX: Fibromatosis

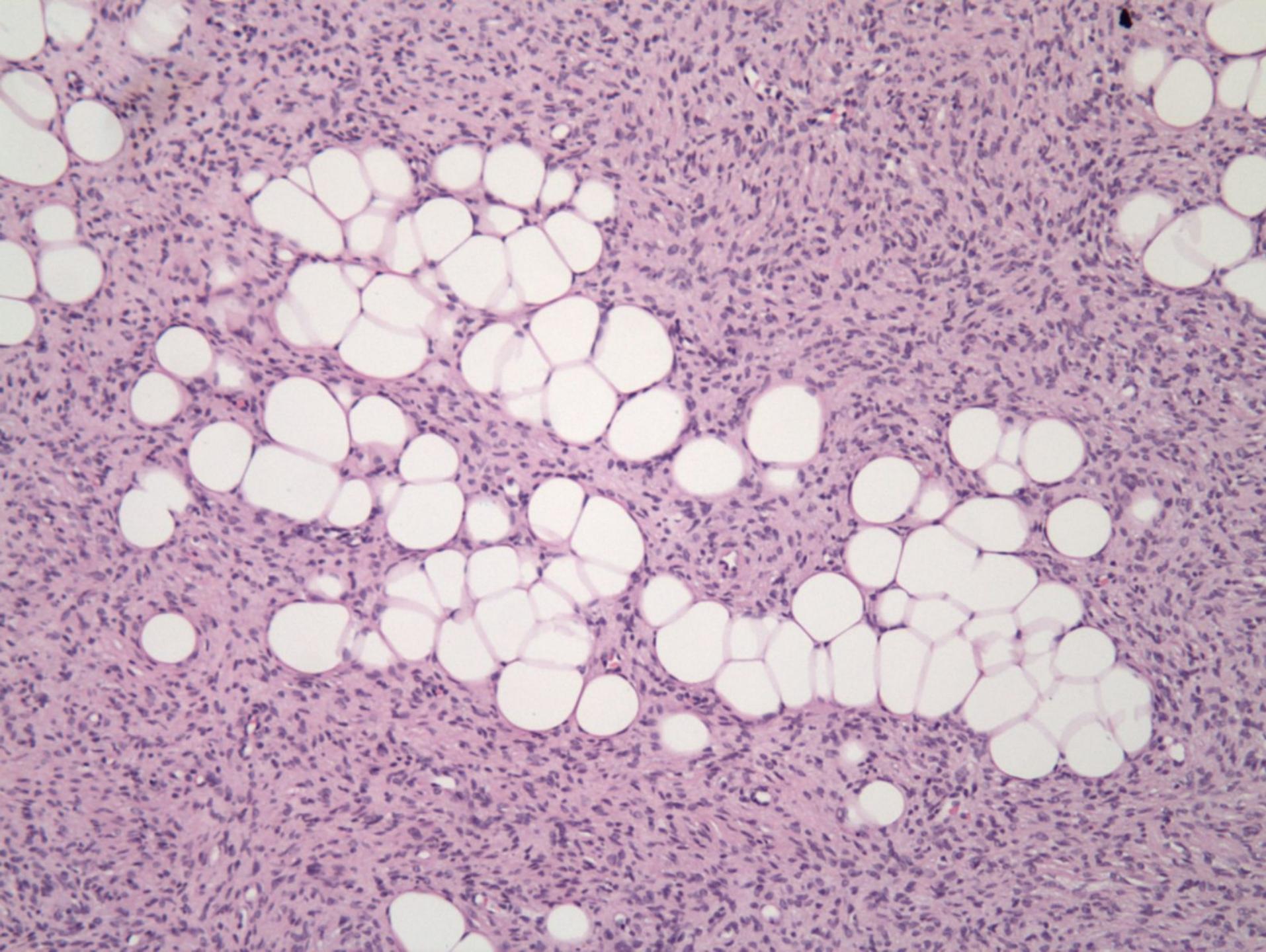


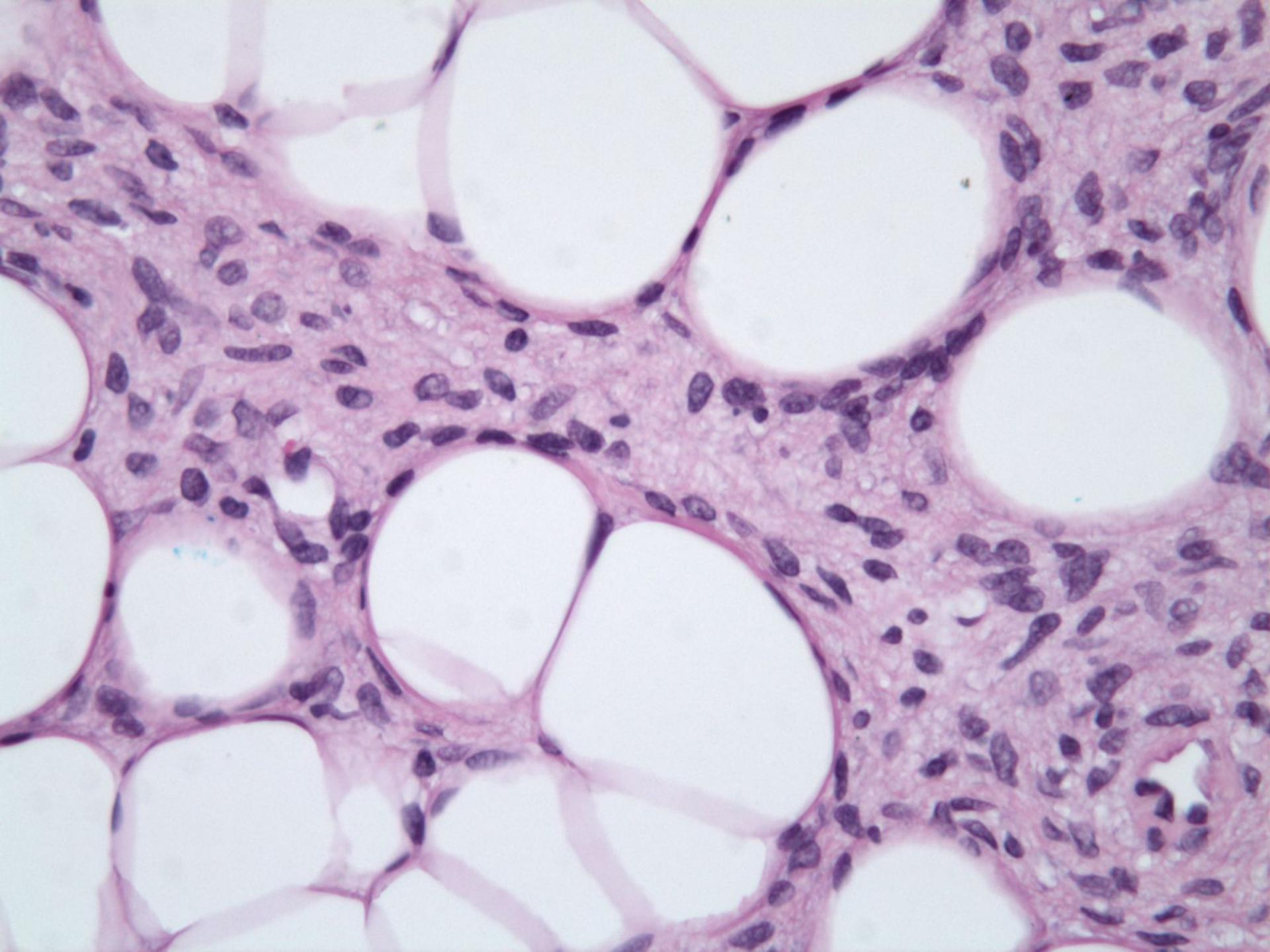






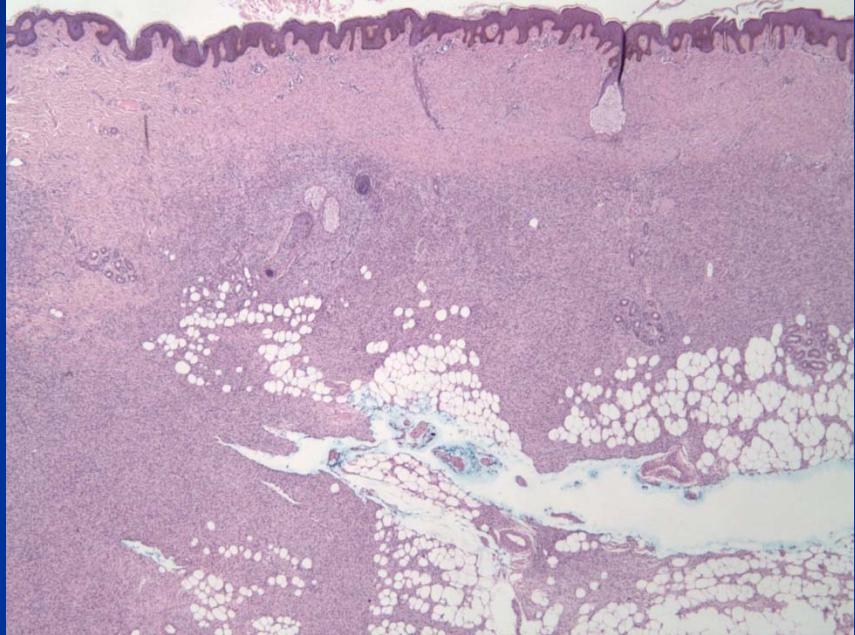






DFSP with DF Features

Pearls



- Low power architecture shows characteristic “honey-comb” entrapment of adipose tissue by spindle cells
- Beware superficial mimics with epidermal hyperplasia and sparse cellularity
- Consider Factor 13a and CD34 to distinguish