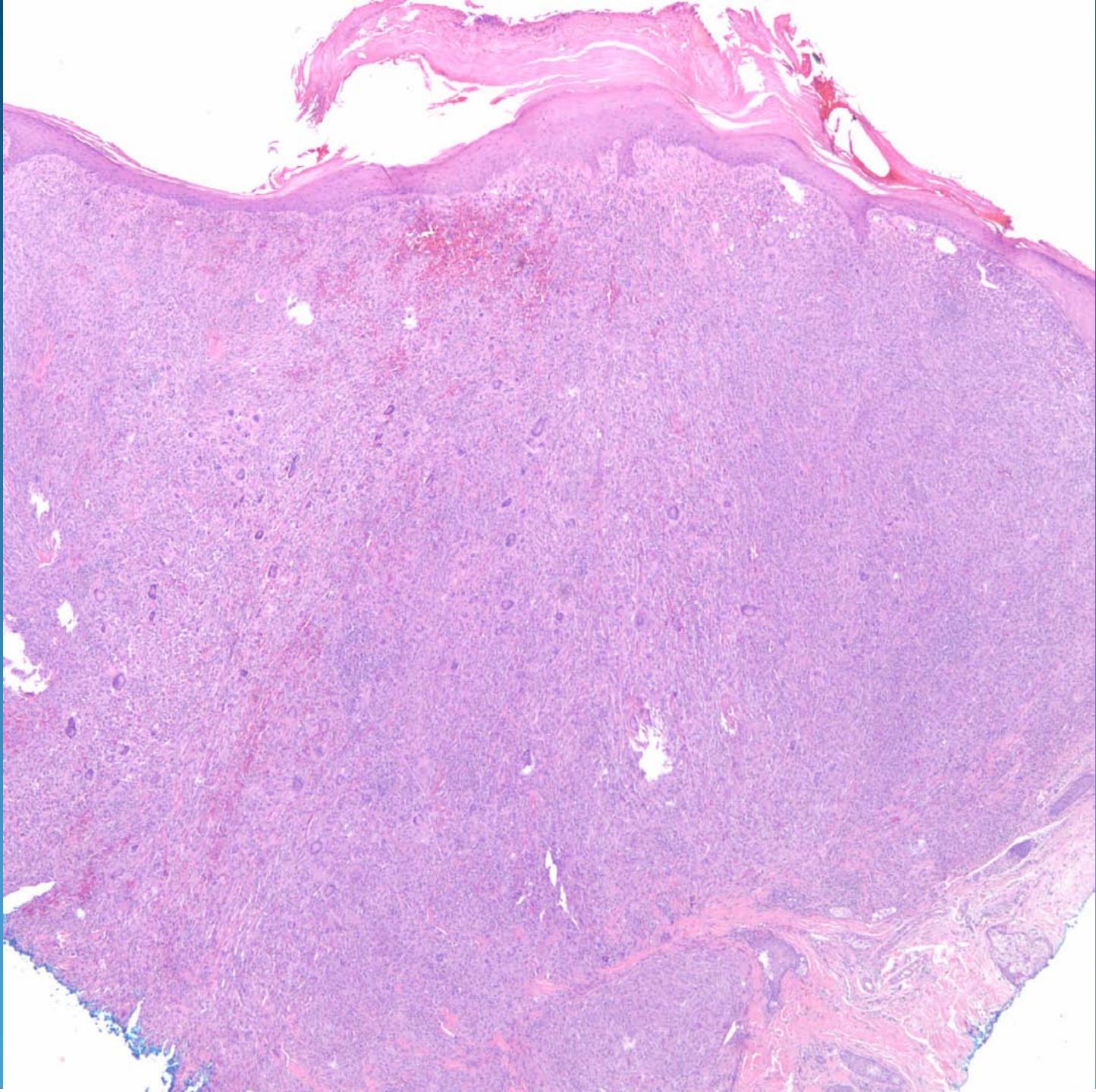
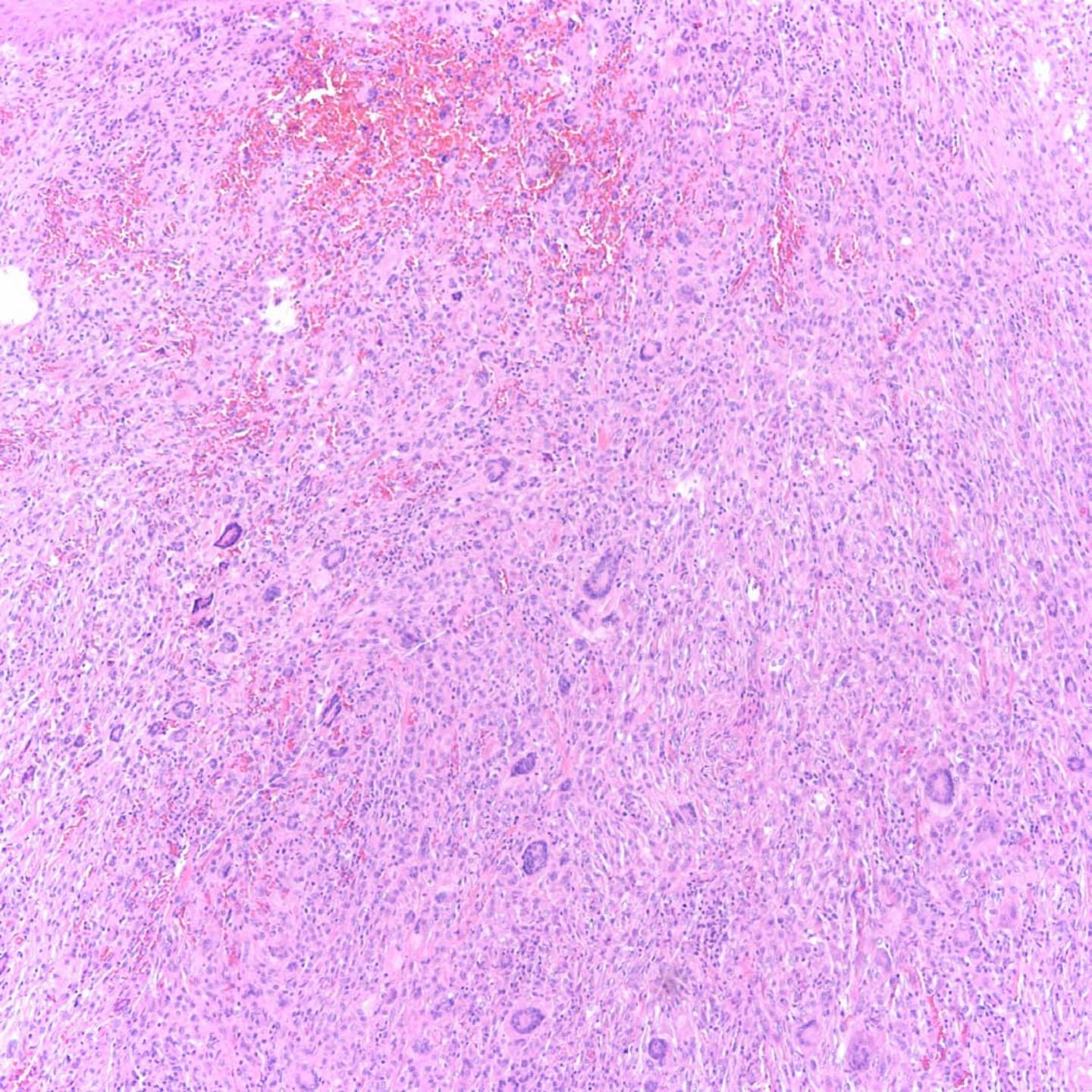


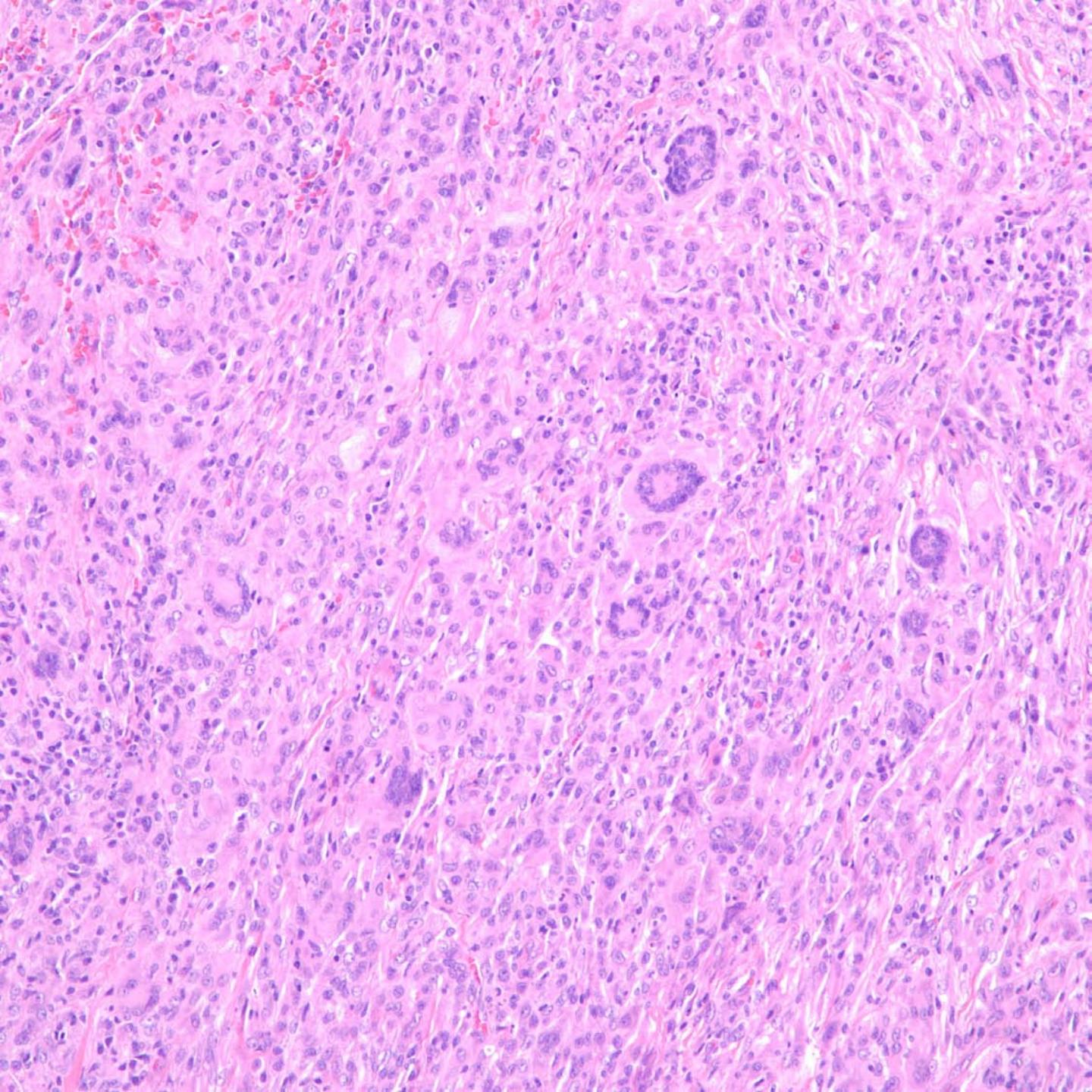
Dermatopathology Slide Review Part 57

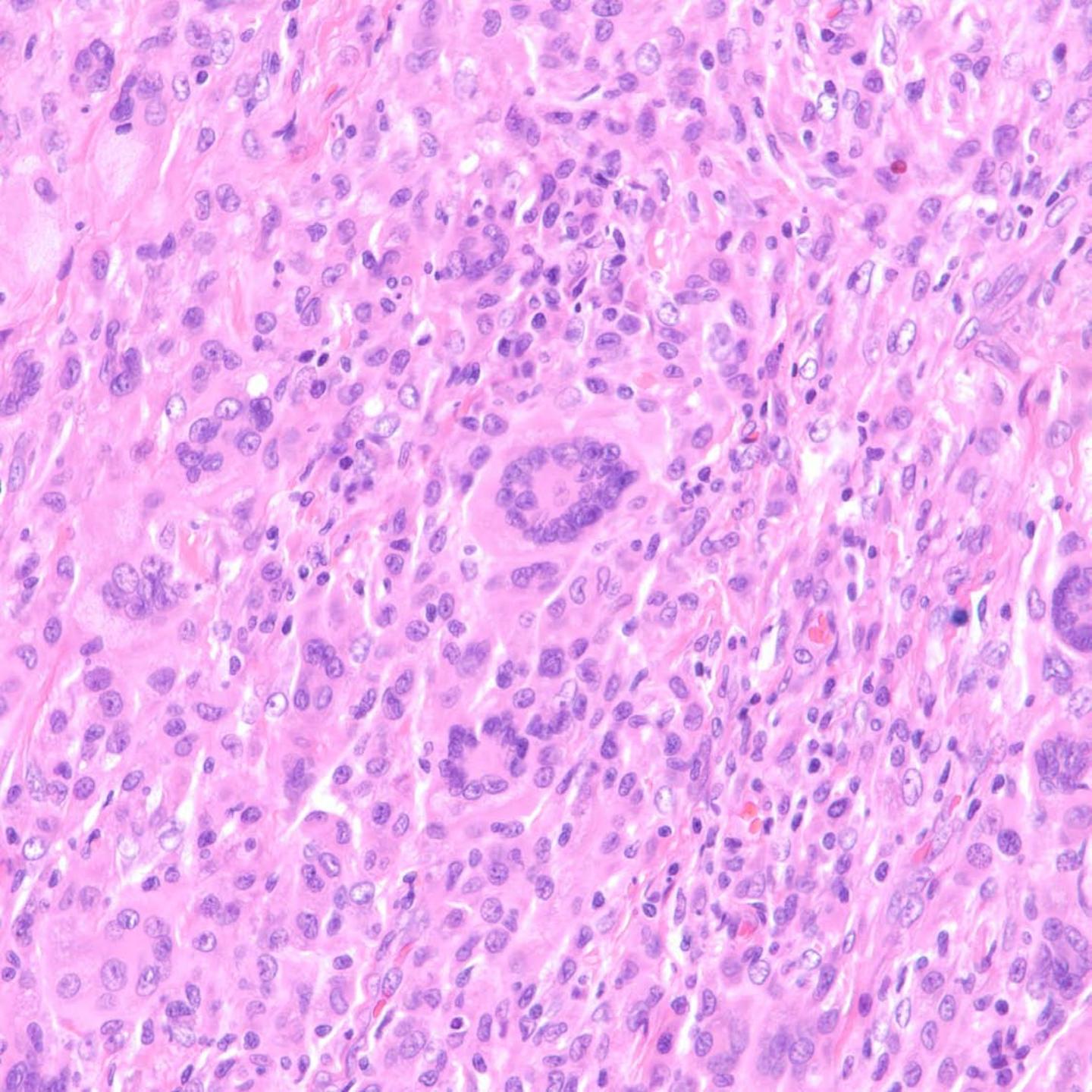
Paul K. Shitabata, M.D.

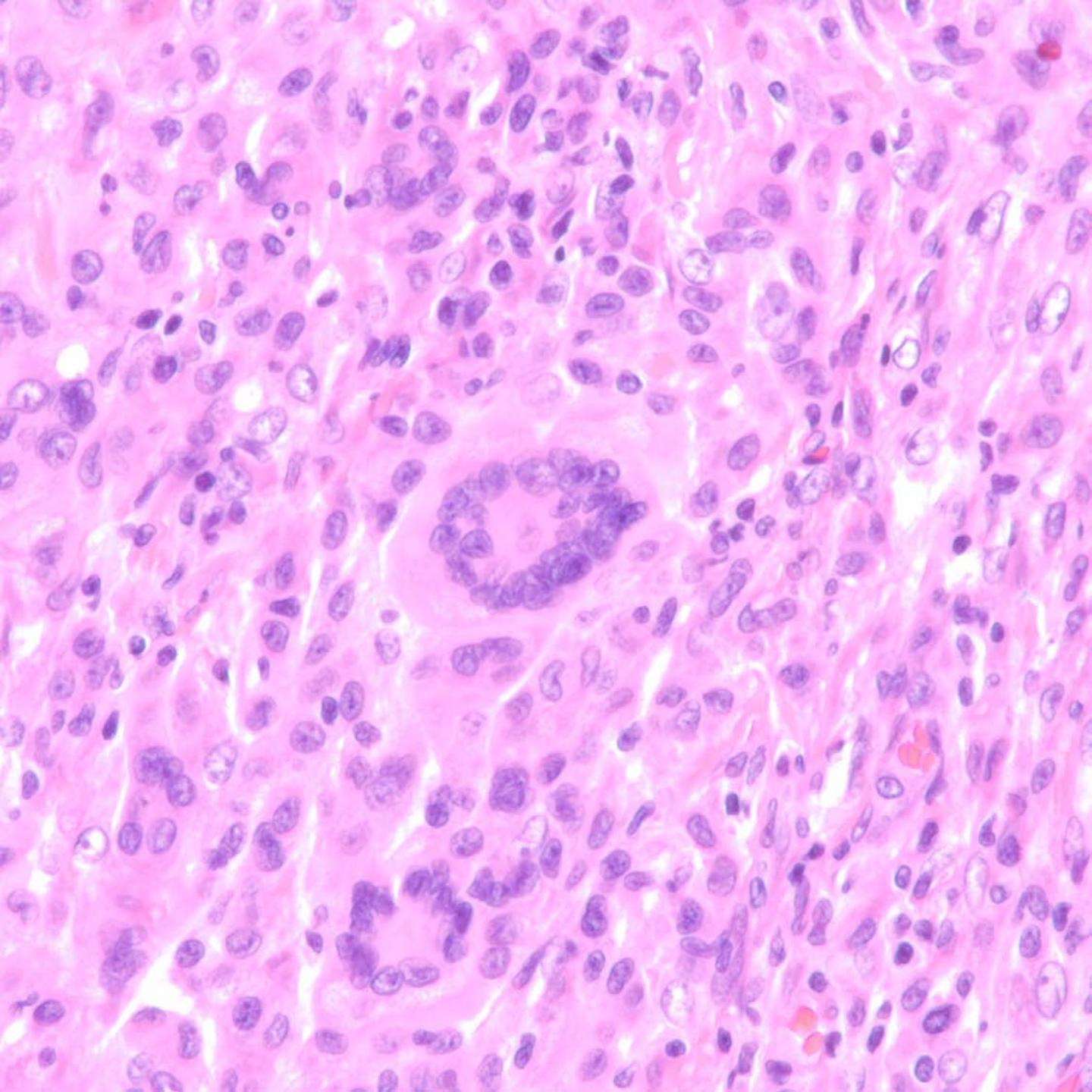
Dermatopathology Institute





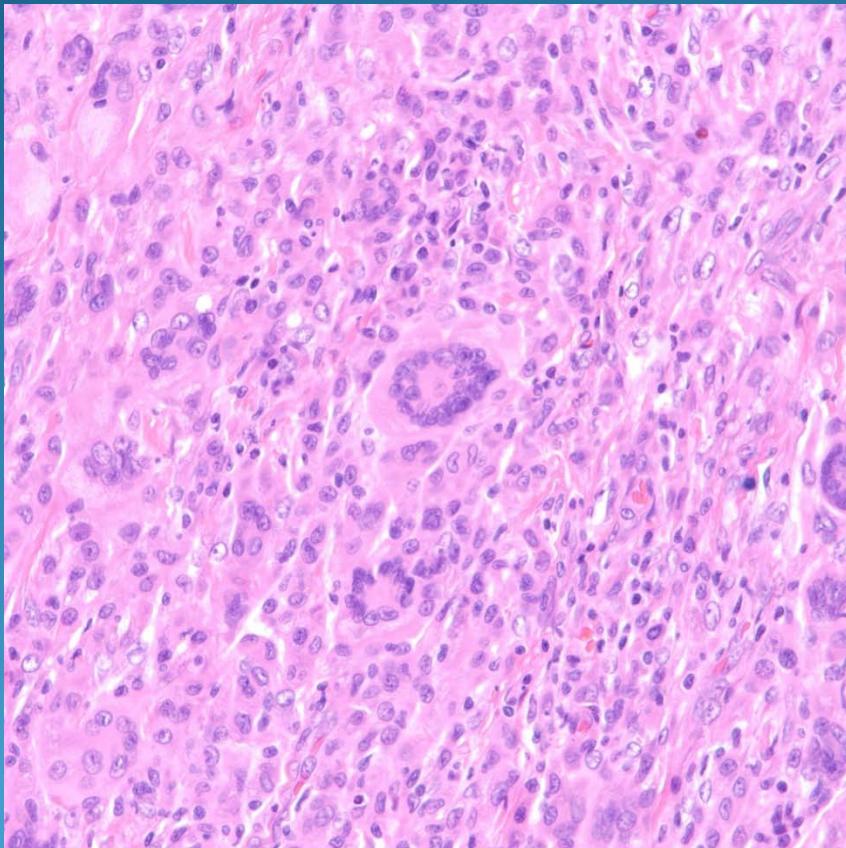




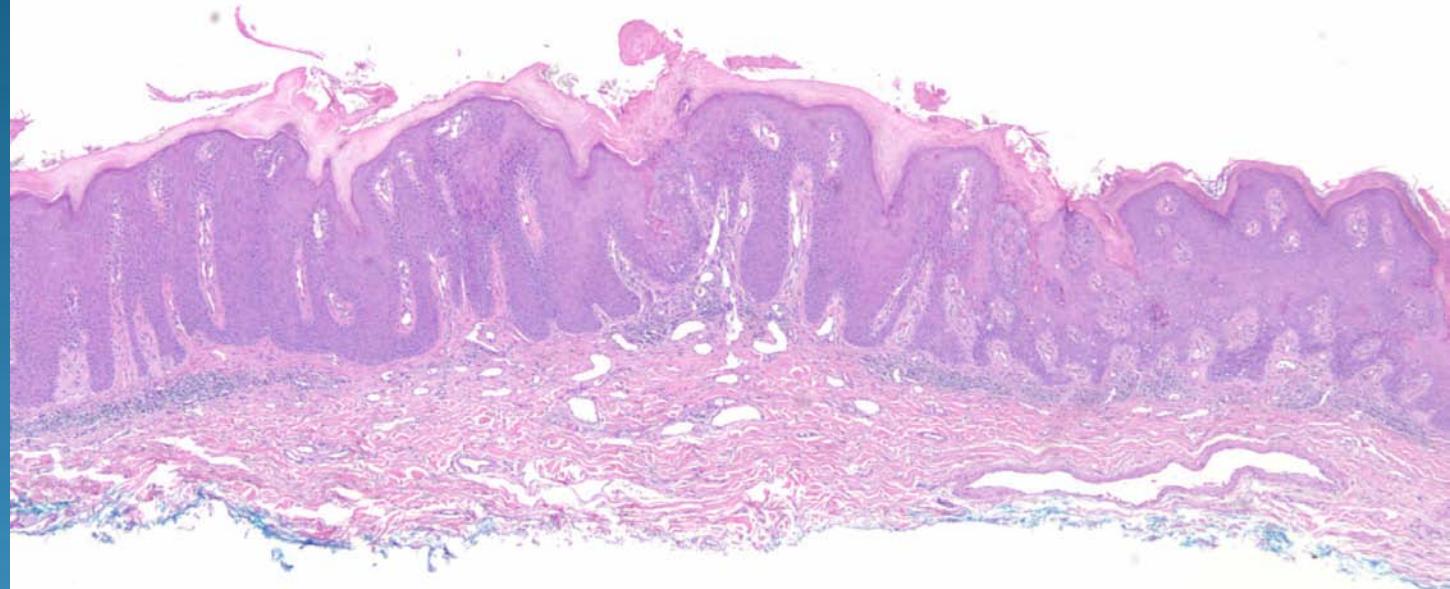


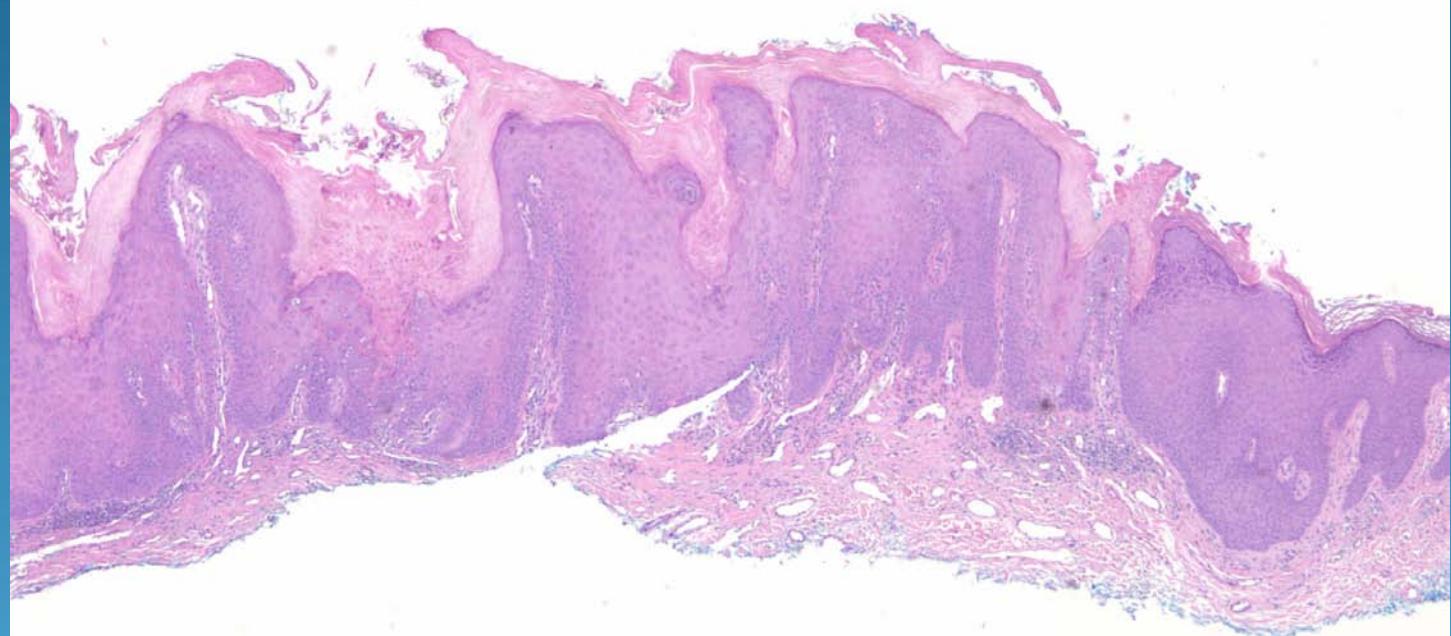
Juvenile Xanthogranuloma

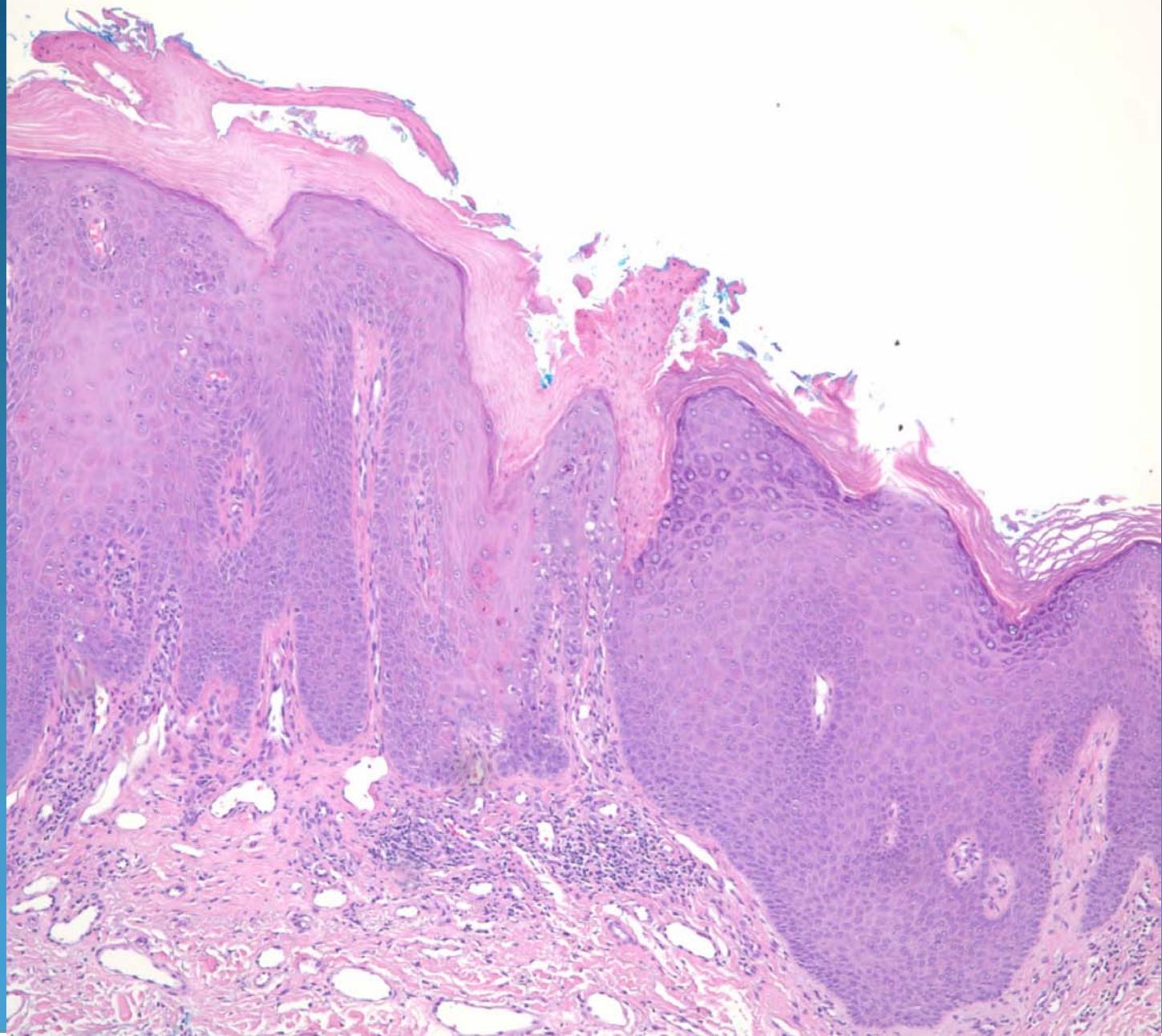
Pearls

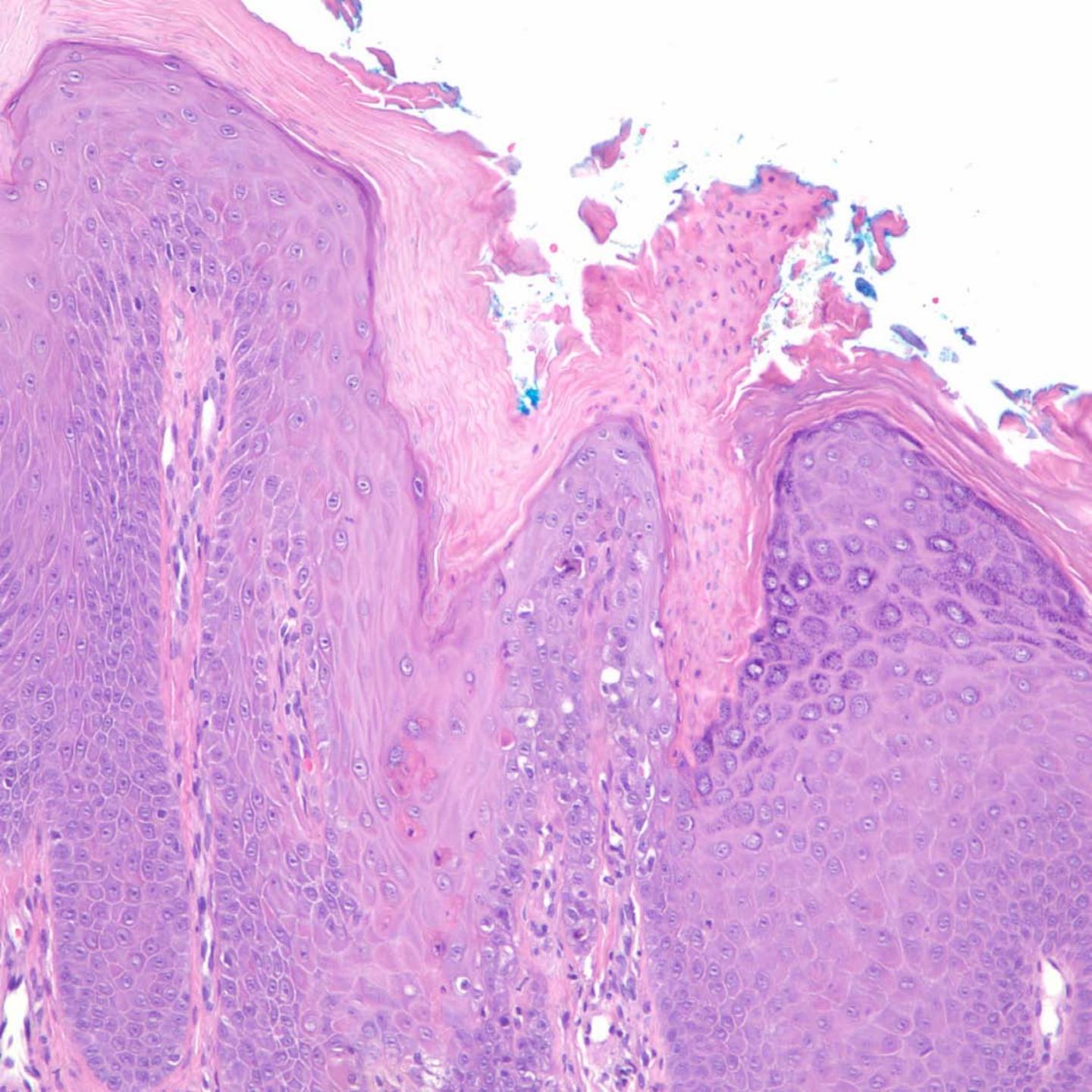


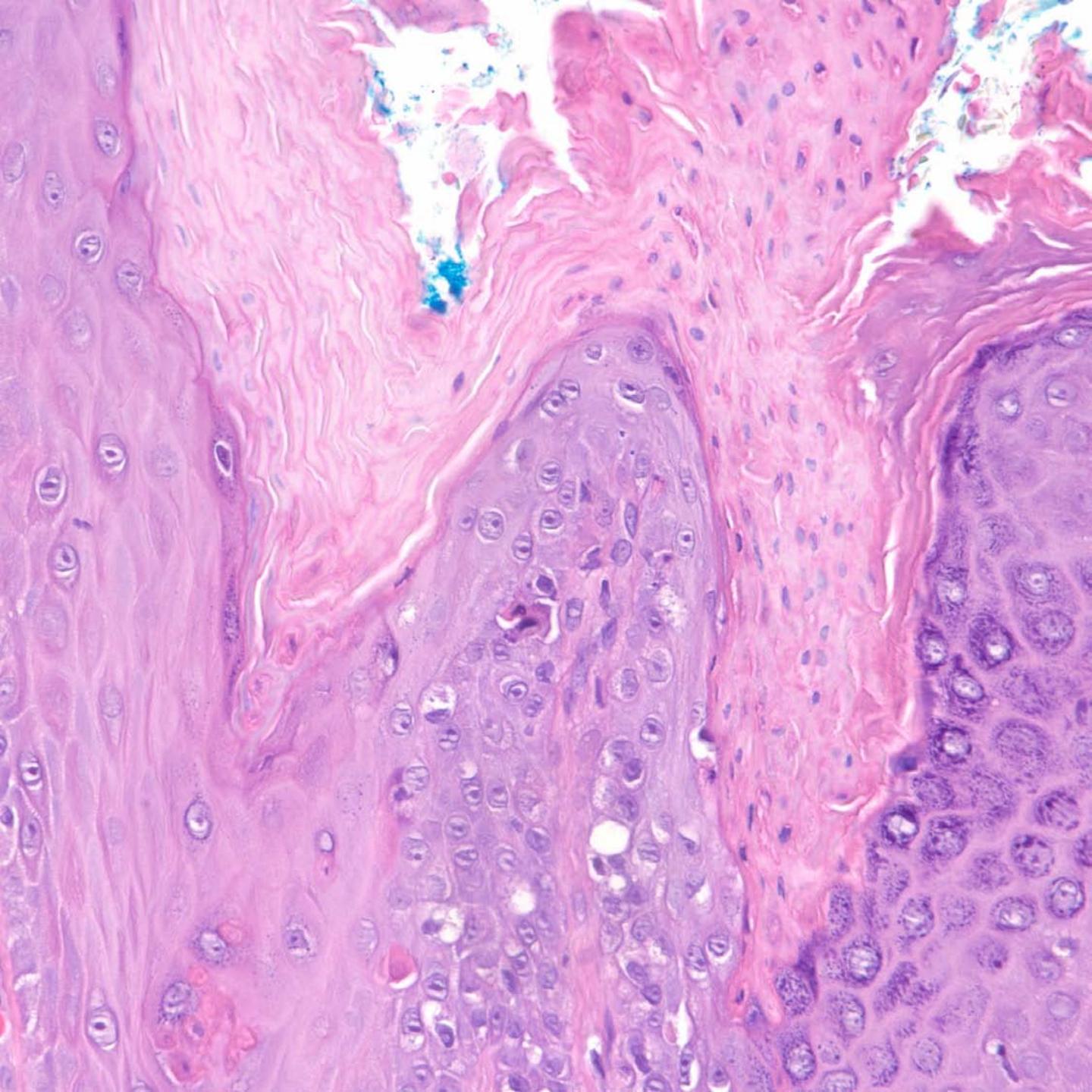
- Cellular mixed infiltrate which may be separated from epidermis by Grenz zone
- Touton-type giant cells
- Foamy histiocytes and chronic inflammatory cells





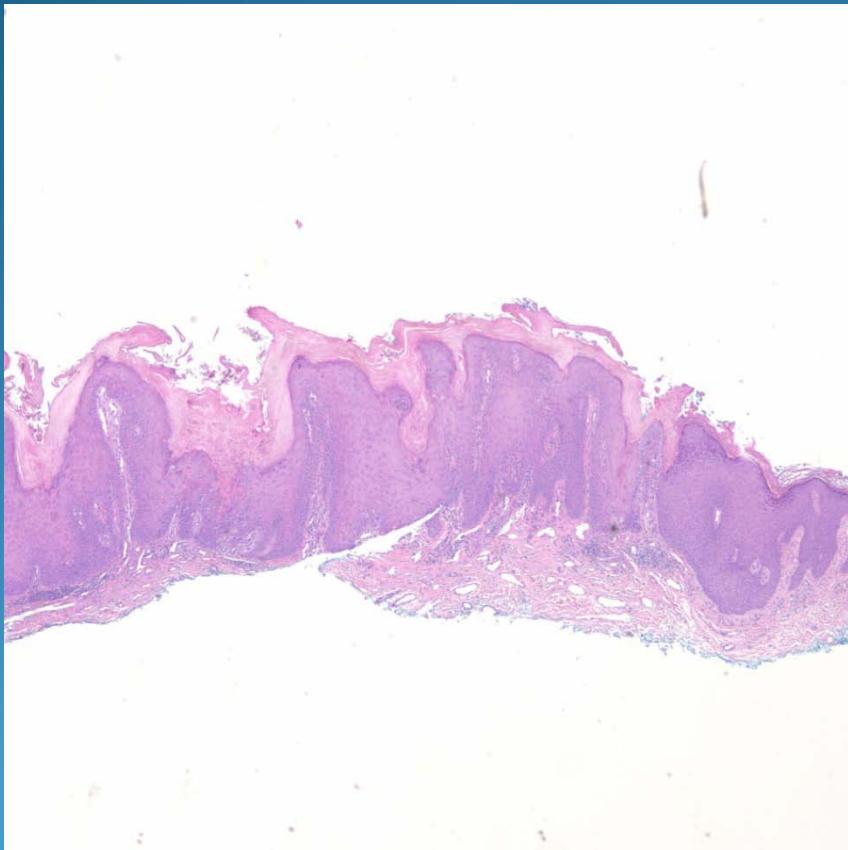




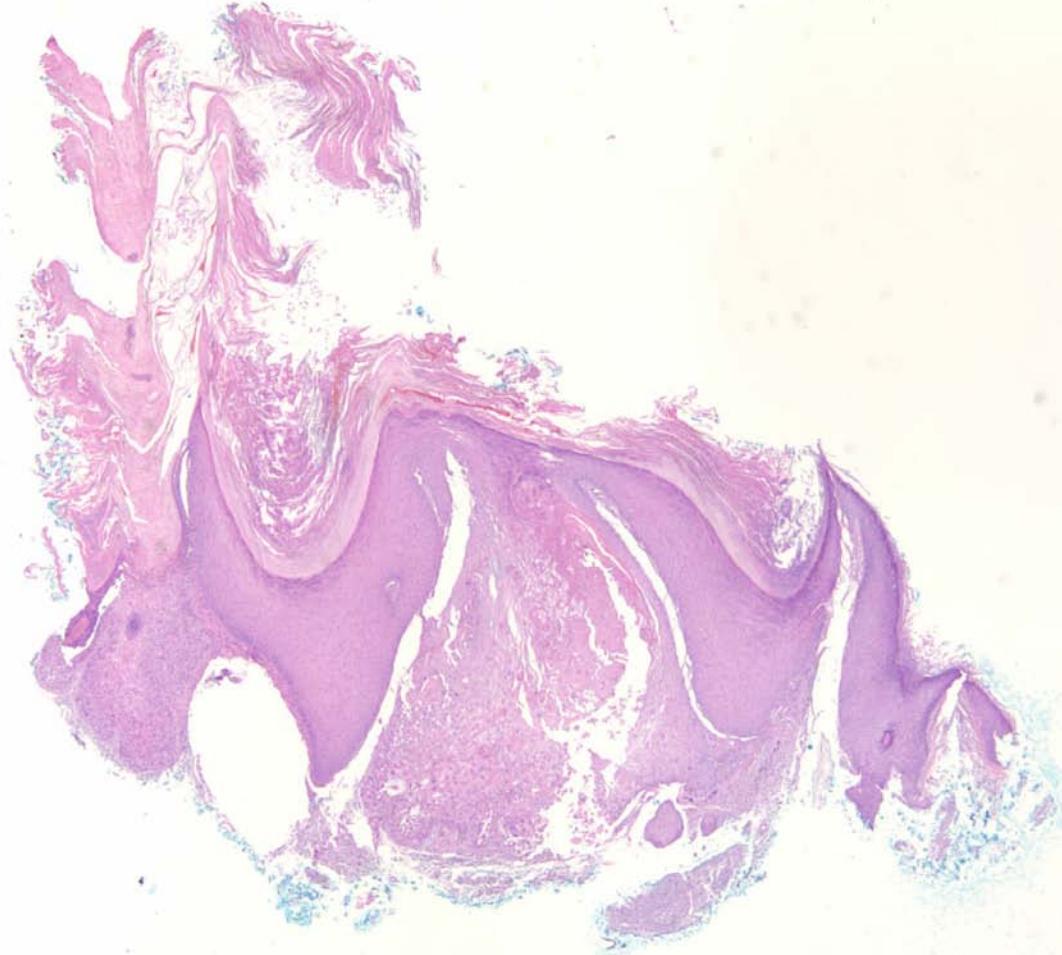


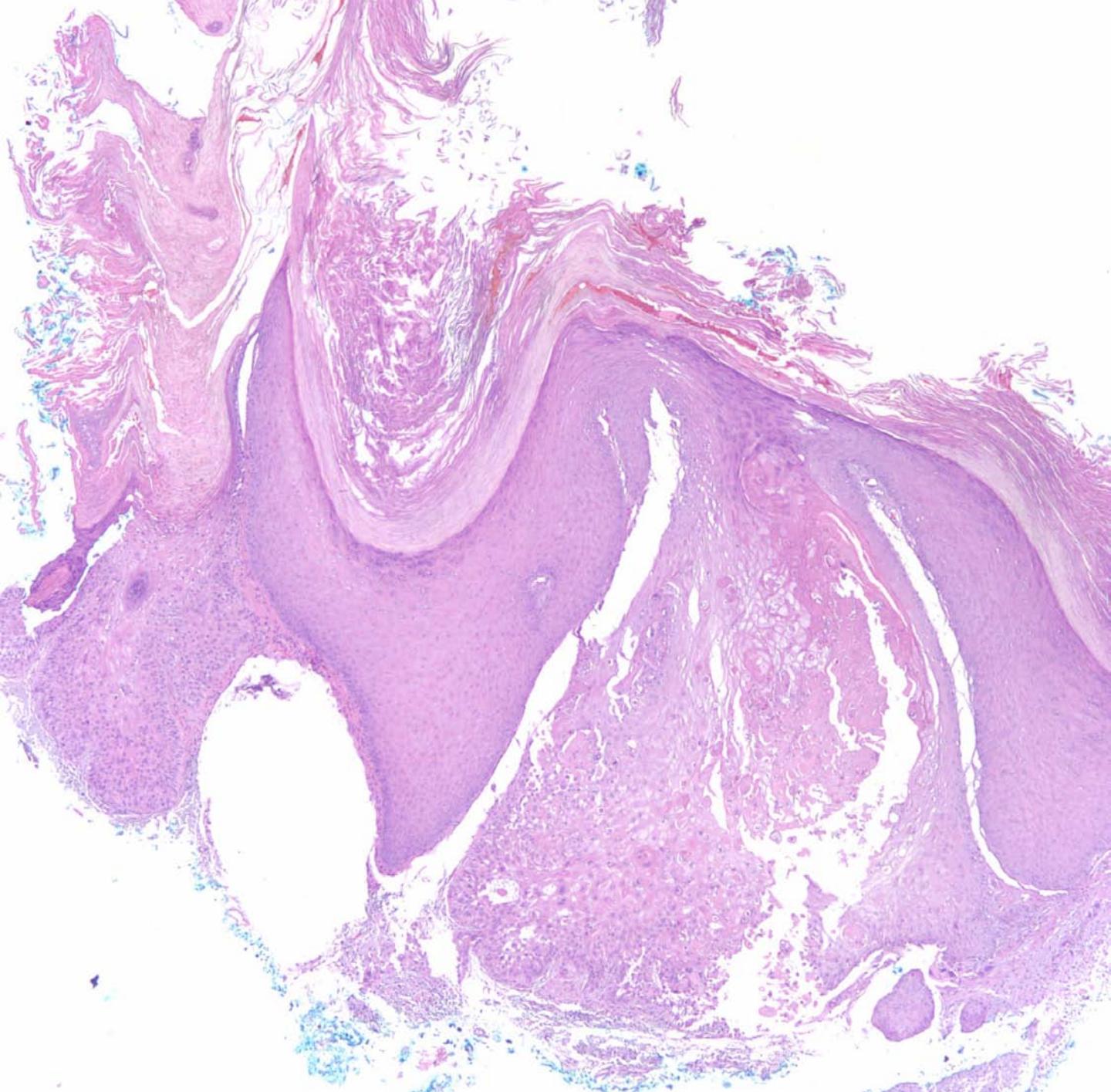
Porokeratosis of Mibelli

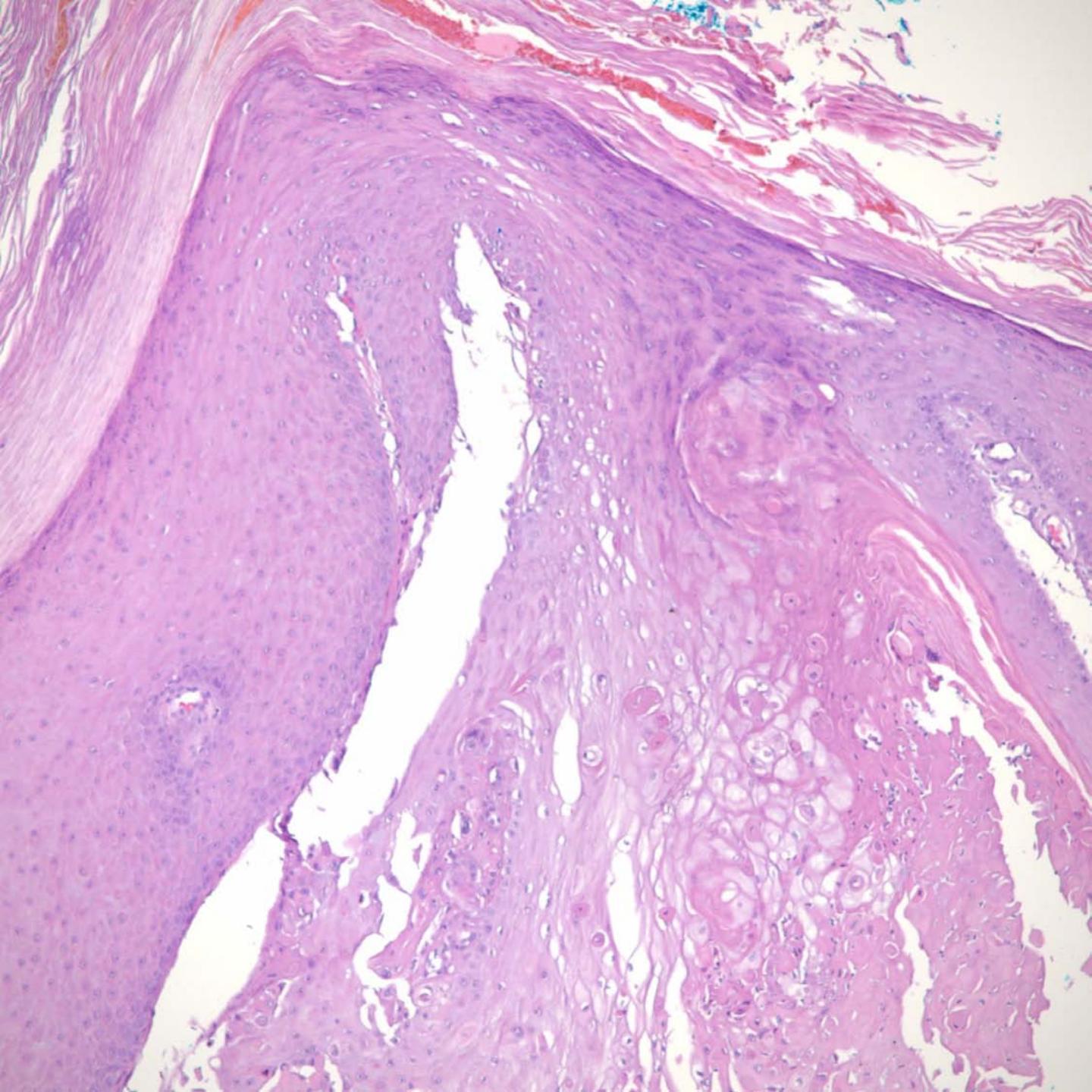
Pearls

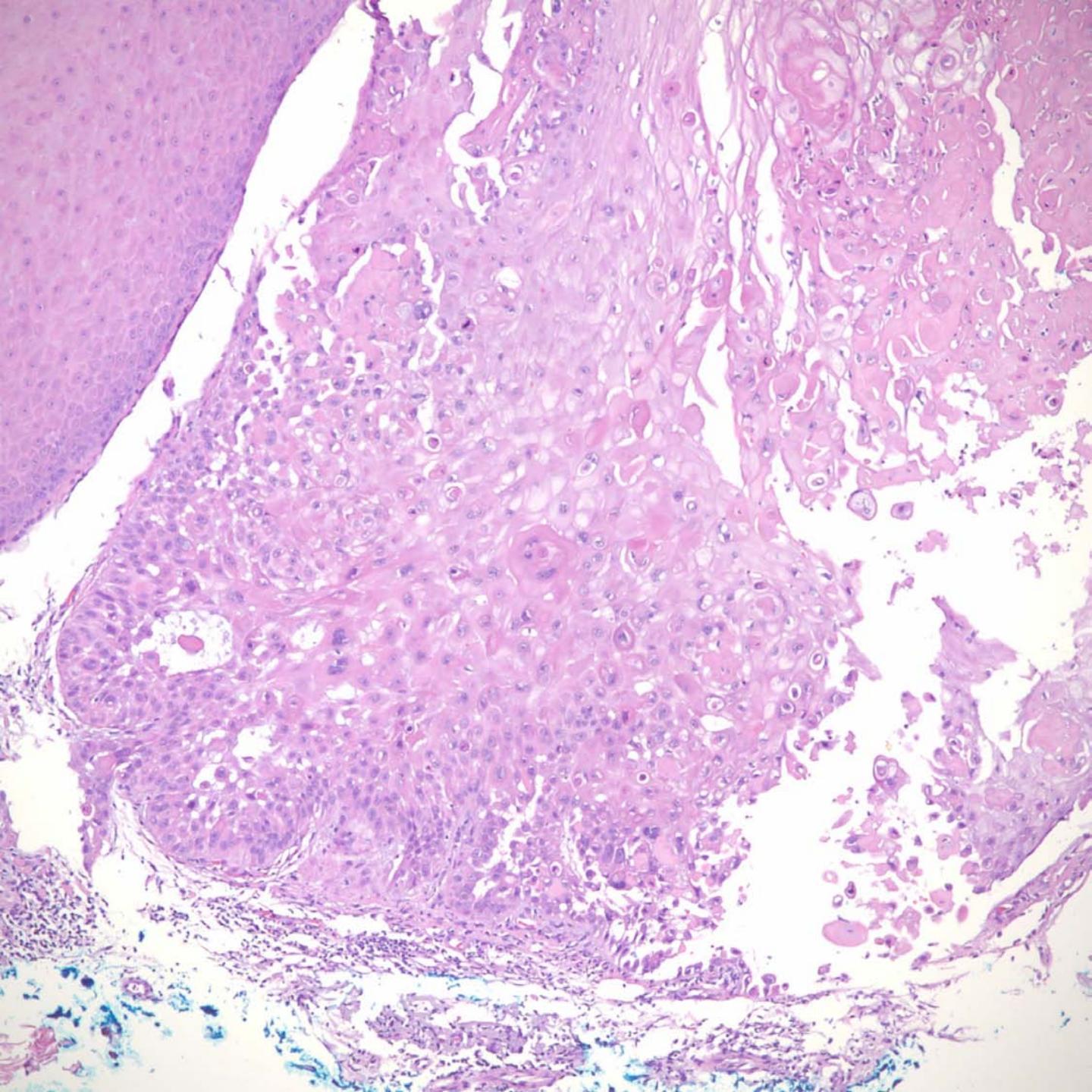


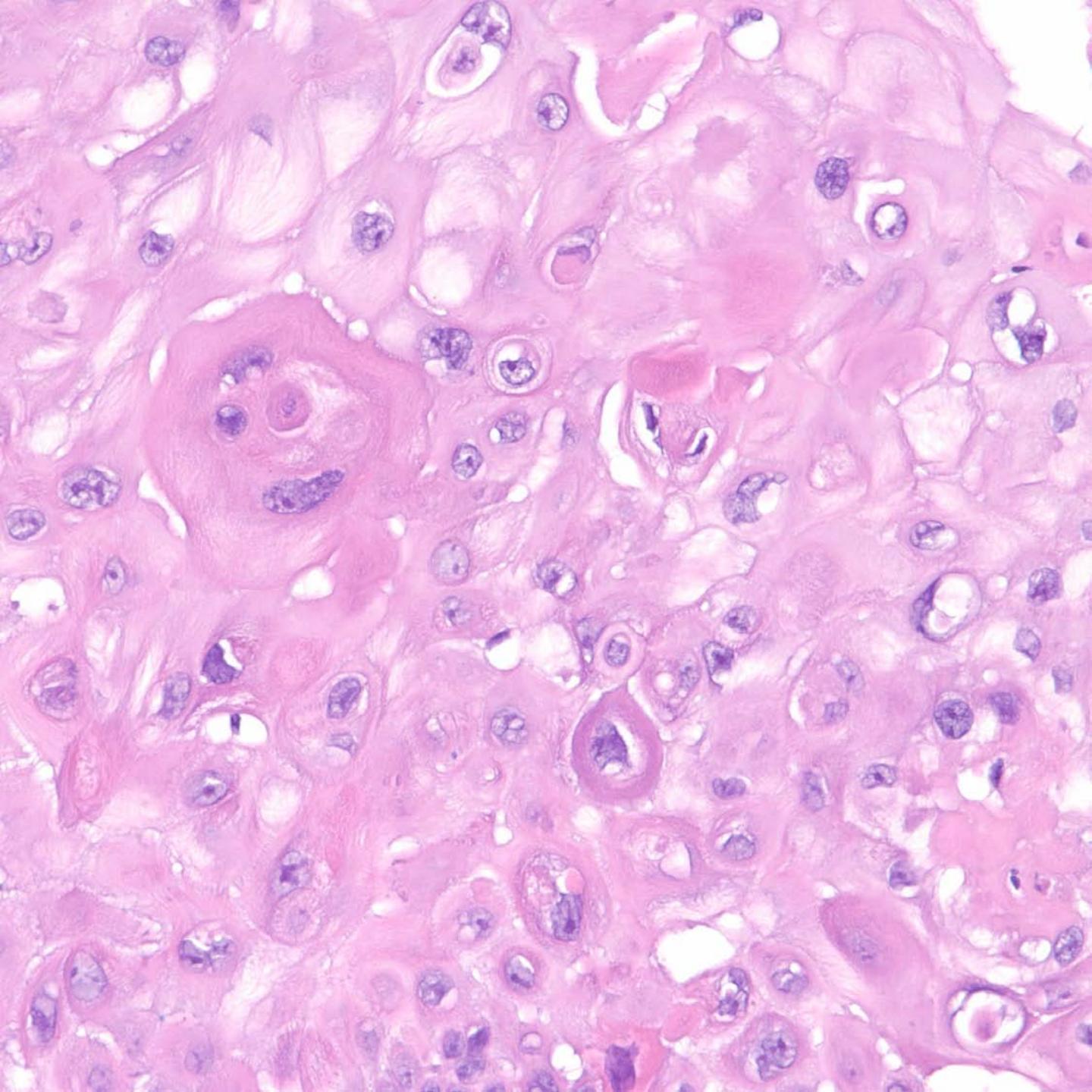
- Epidermal hyperplasia with seborrheic keratosis-like or verruciform appearance
- Look for cornoid lamella





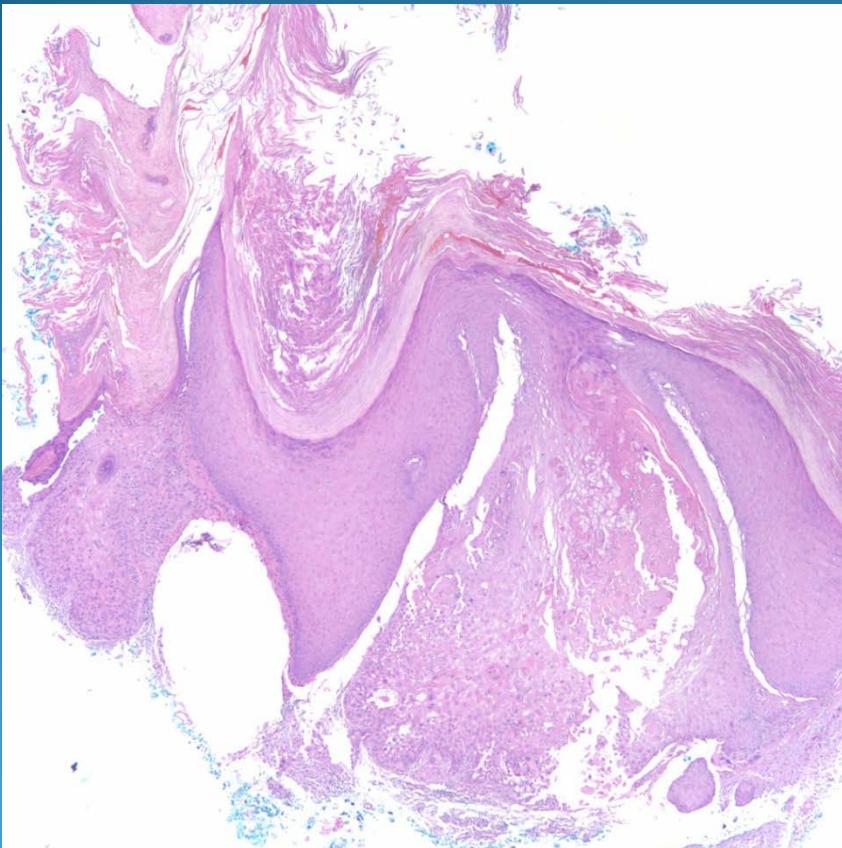




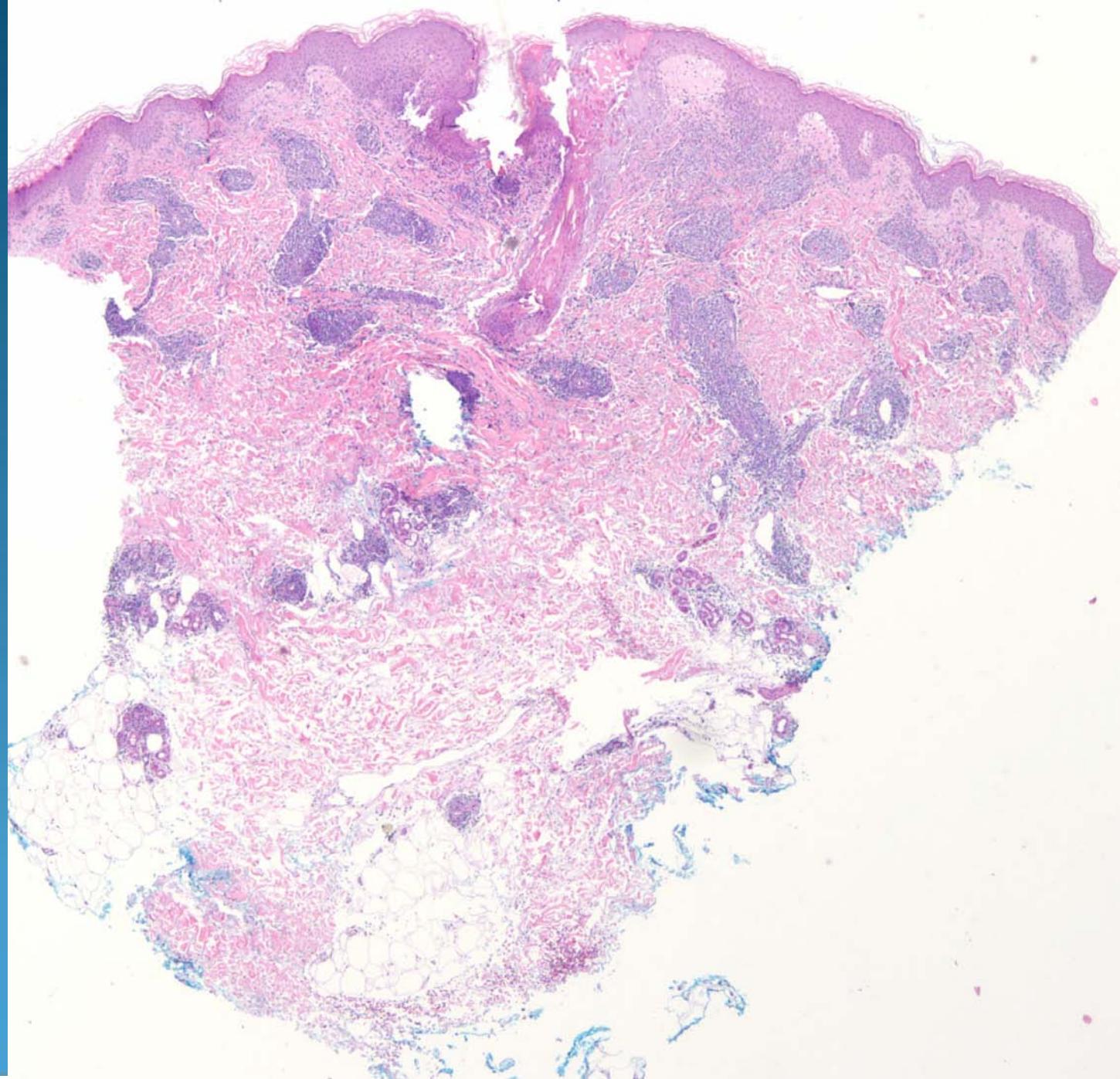


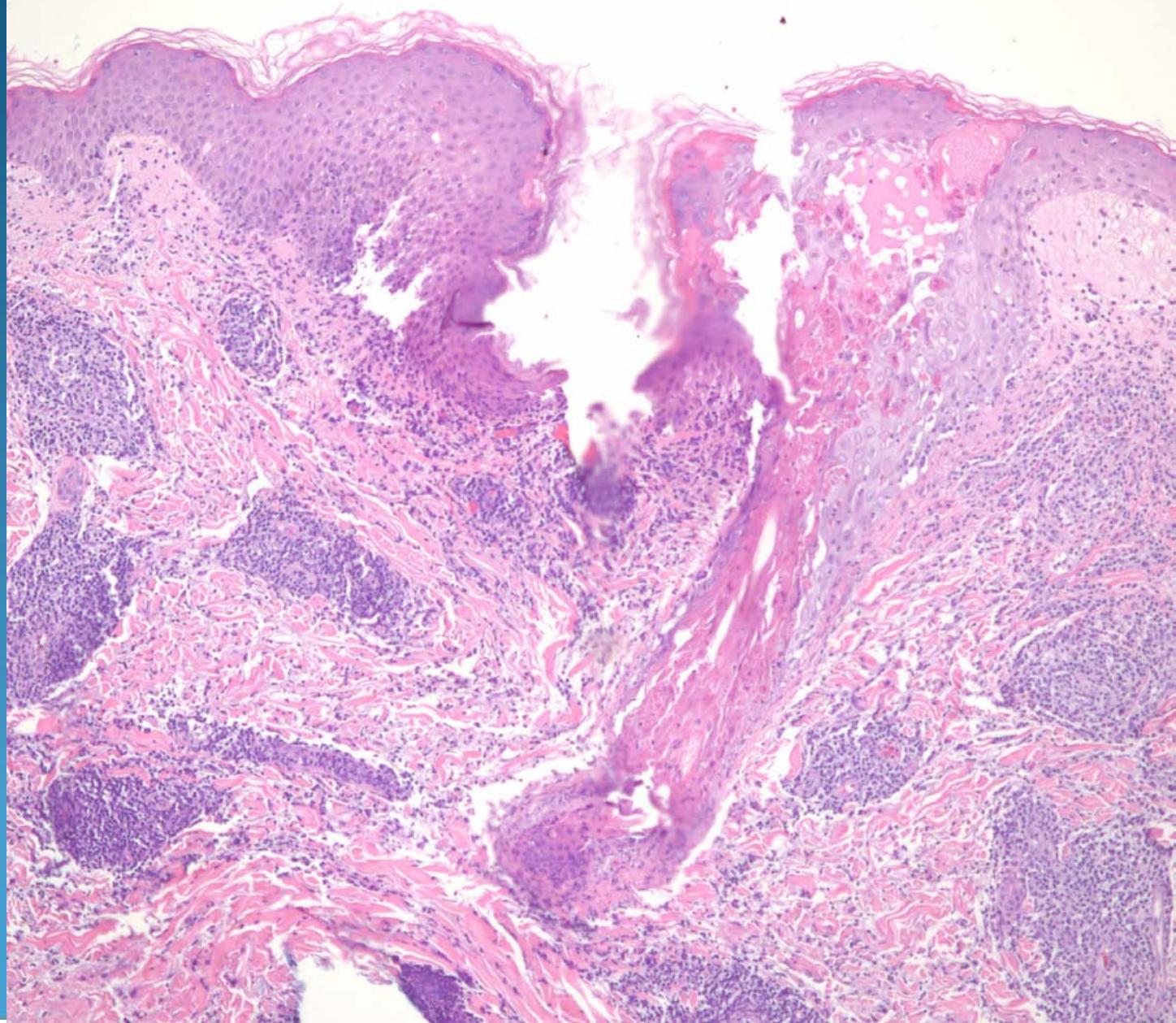
Invasive Squamous Cell Carcinoma
arising in association with a Verruca
Vulgaris

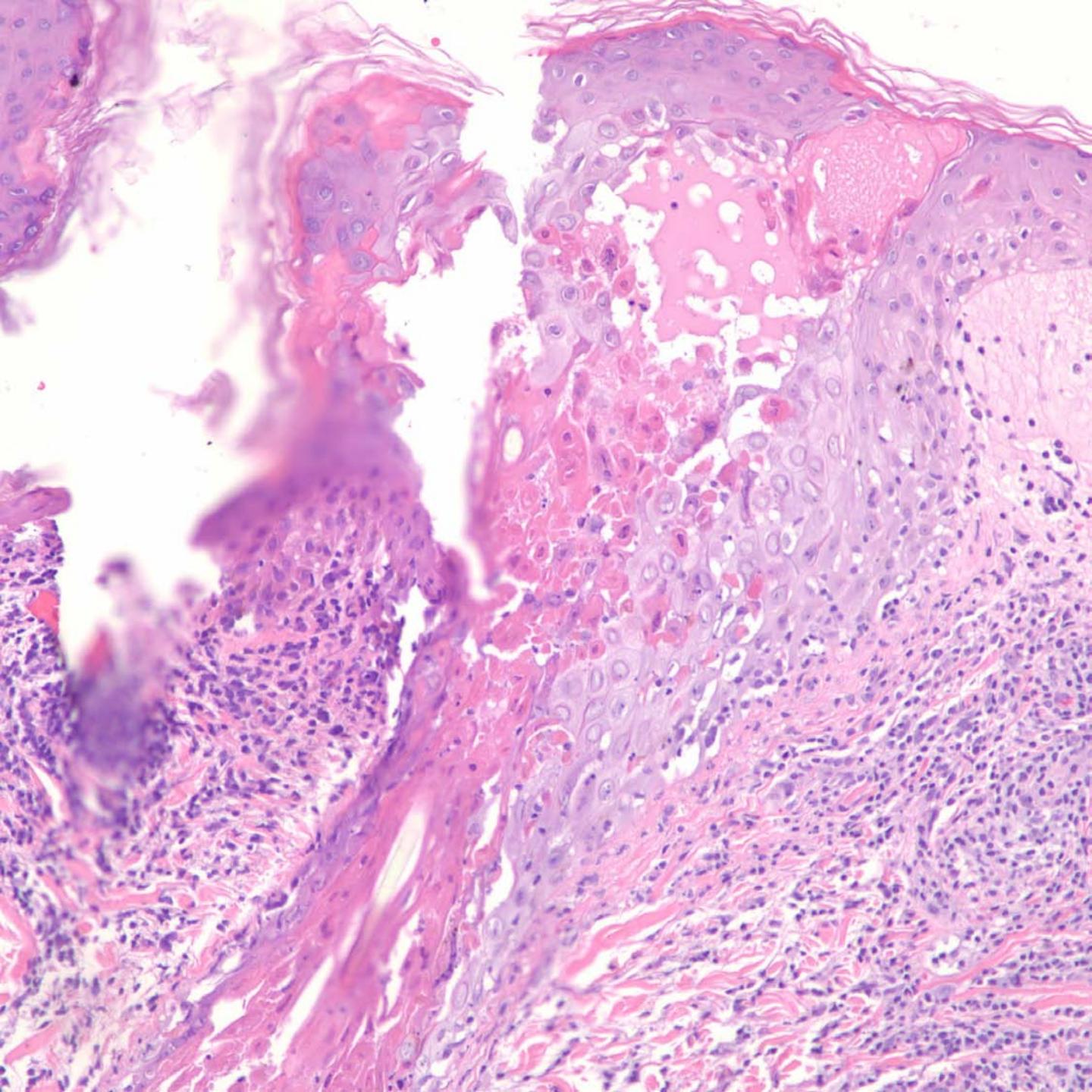
Pearls

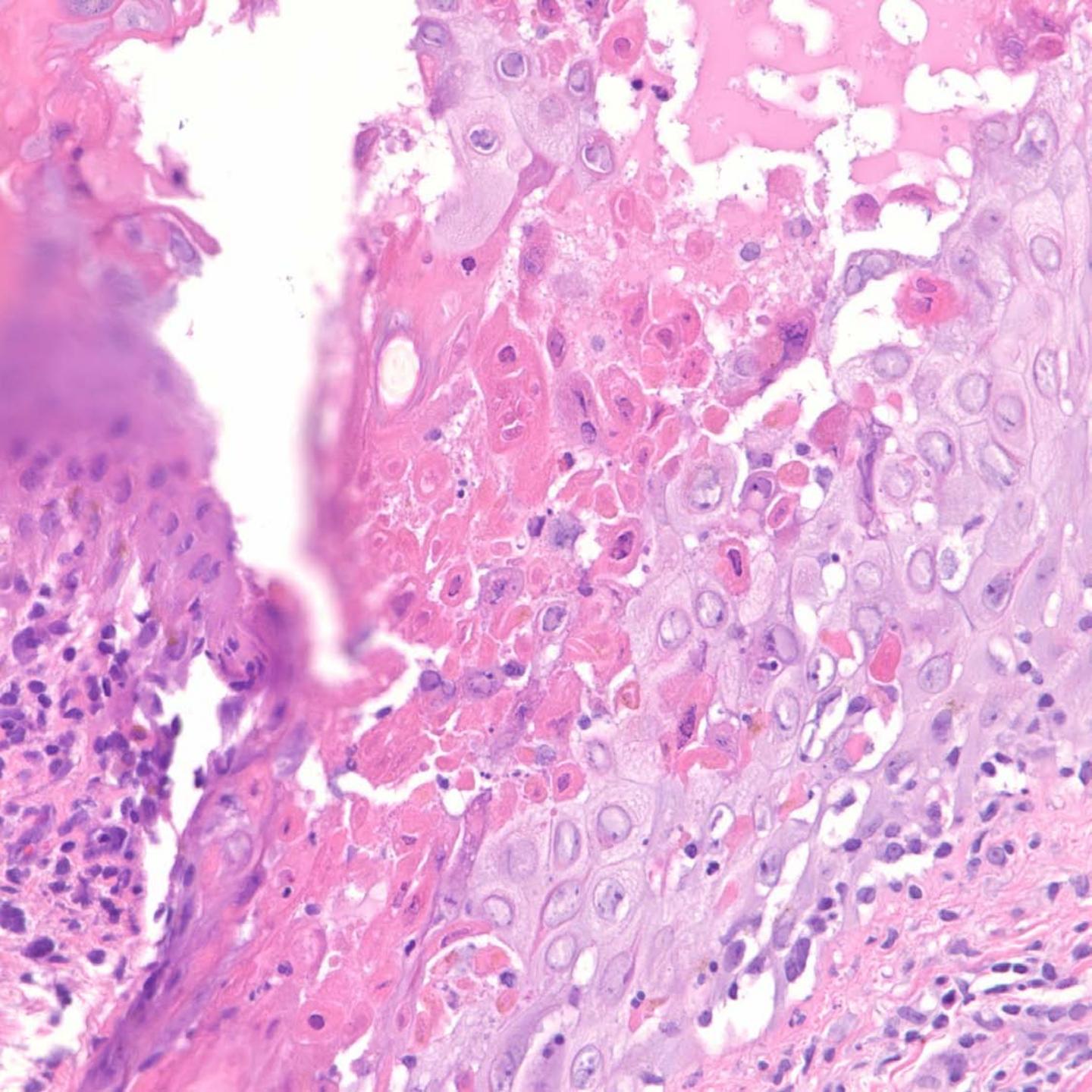


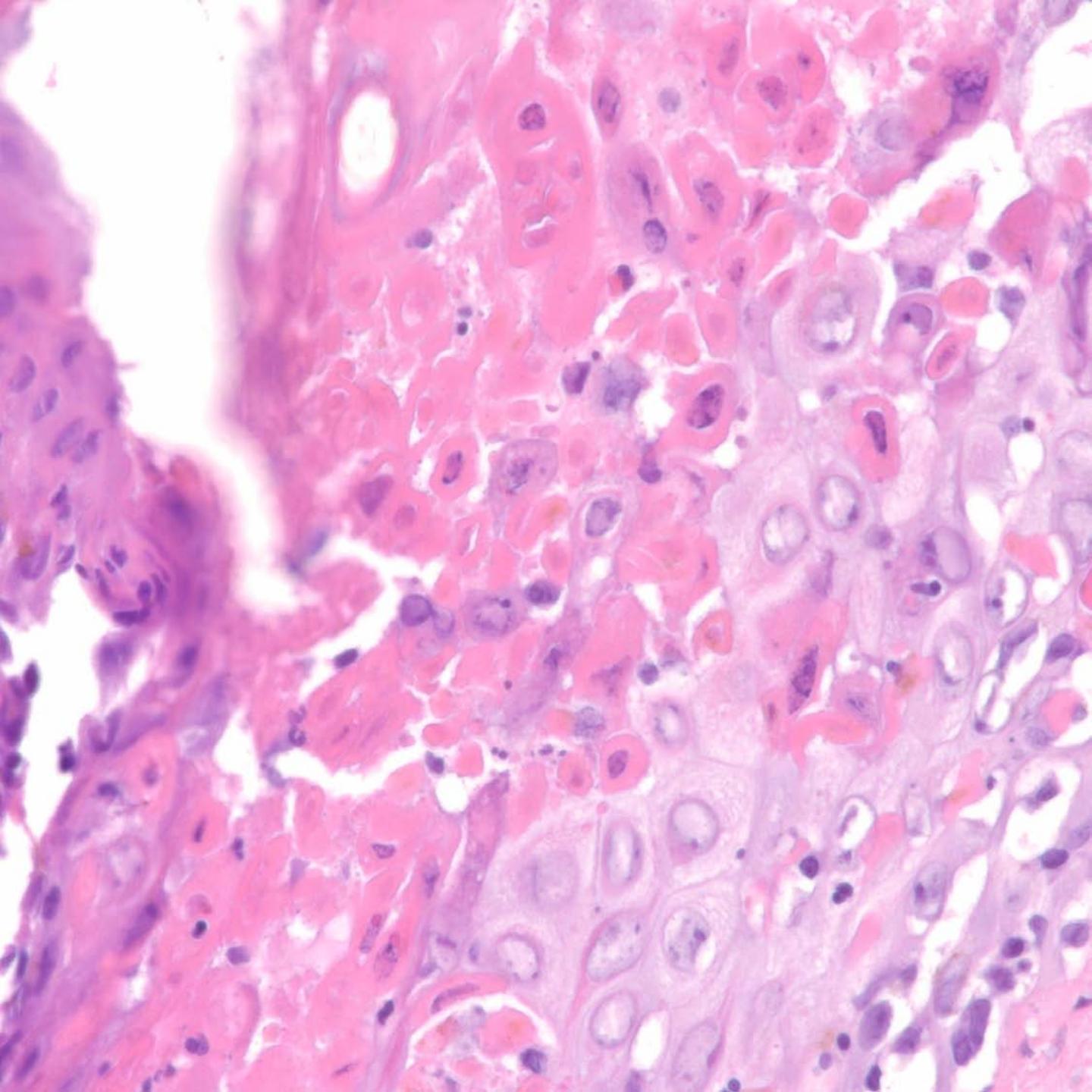
- Beware the diagnostic pitfall of superficial biopsies that only show verruciform changes.
- Section deeper to exclude an underlying invasive squamous cell carcinoma.





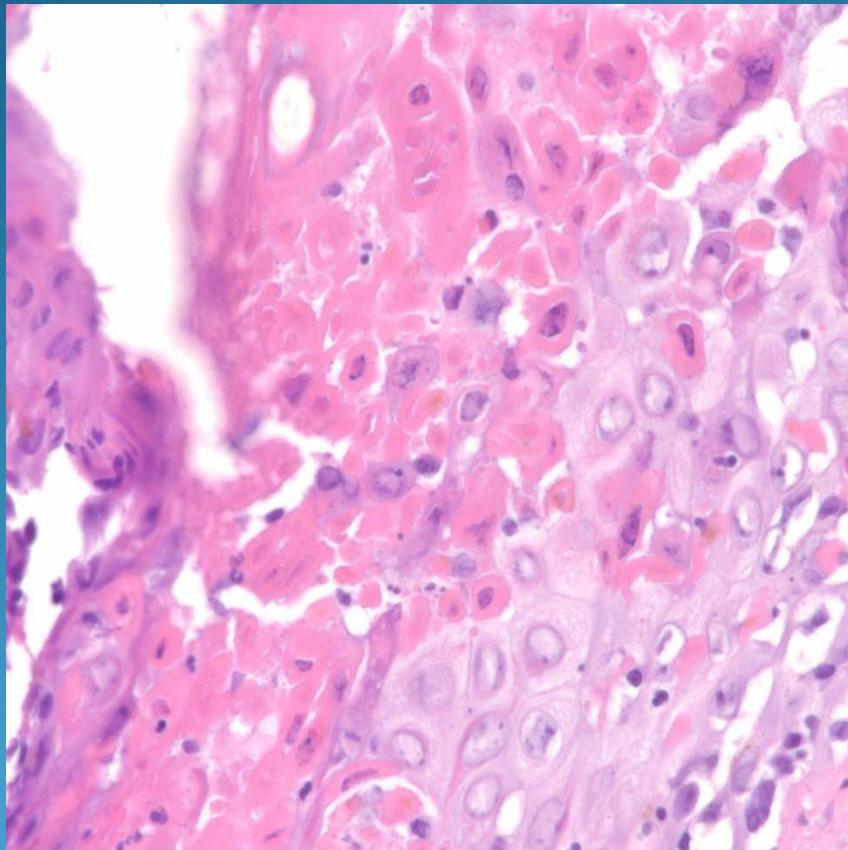




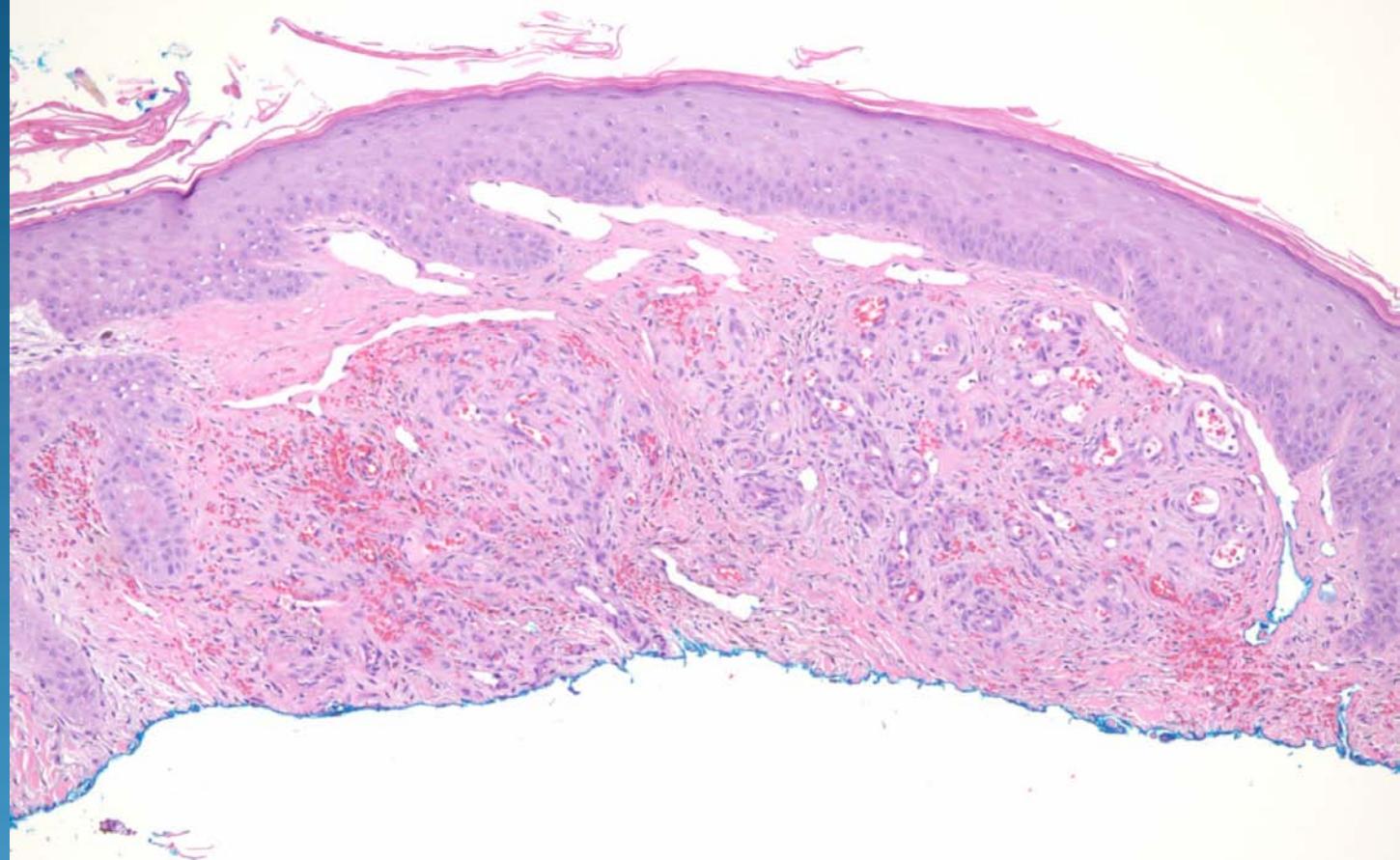


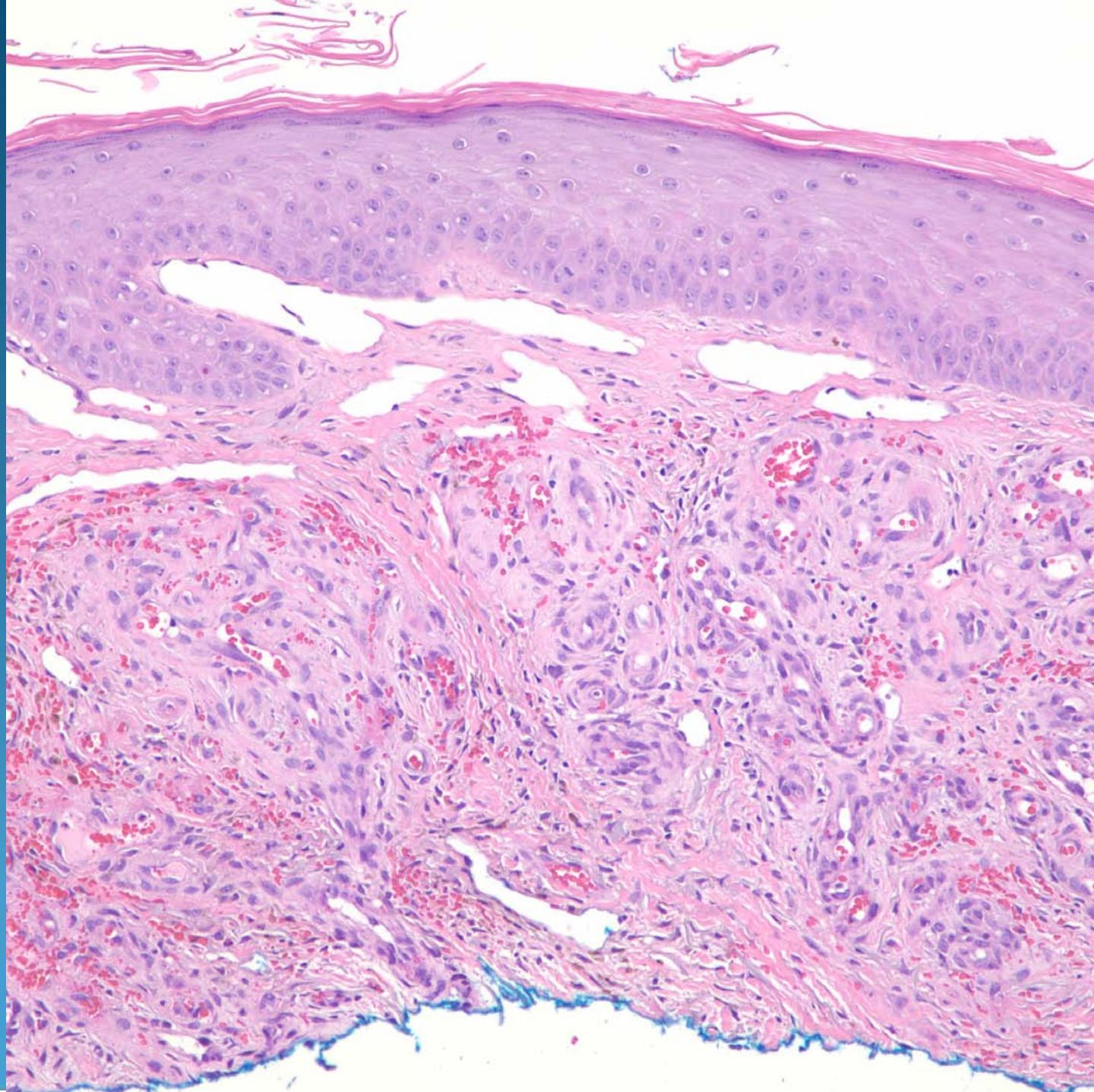
Varicella Zoster Infection (Shingles)

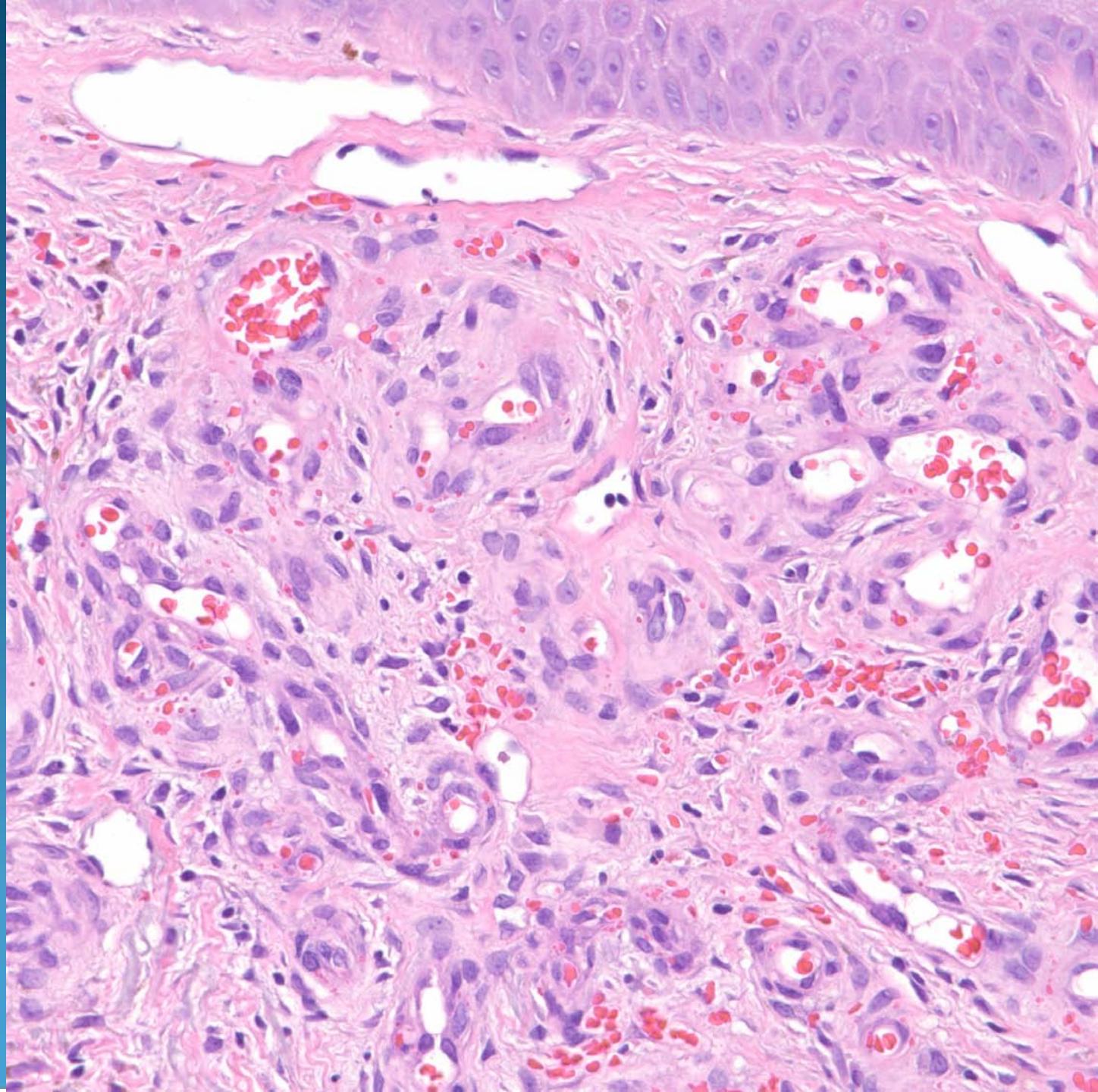
Pearls

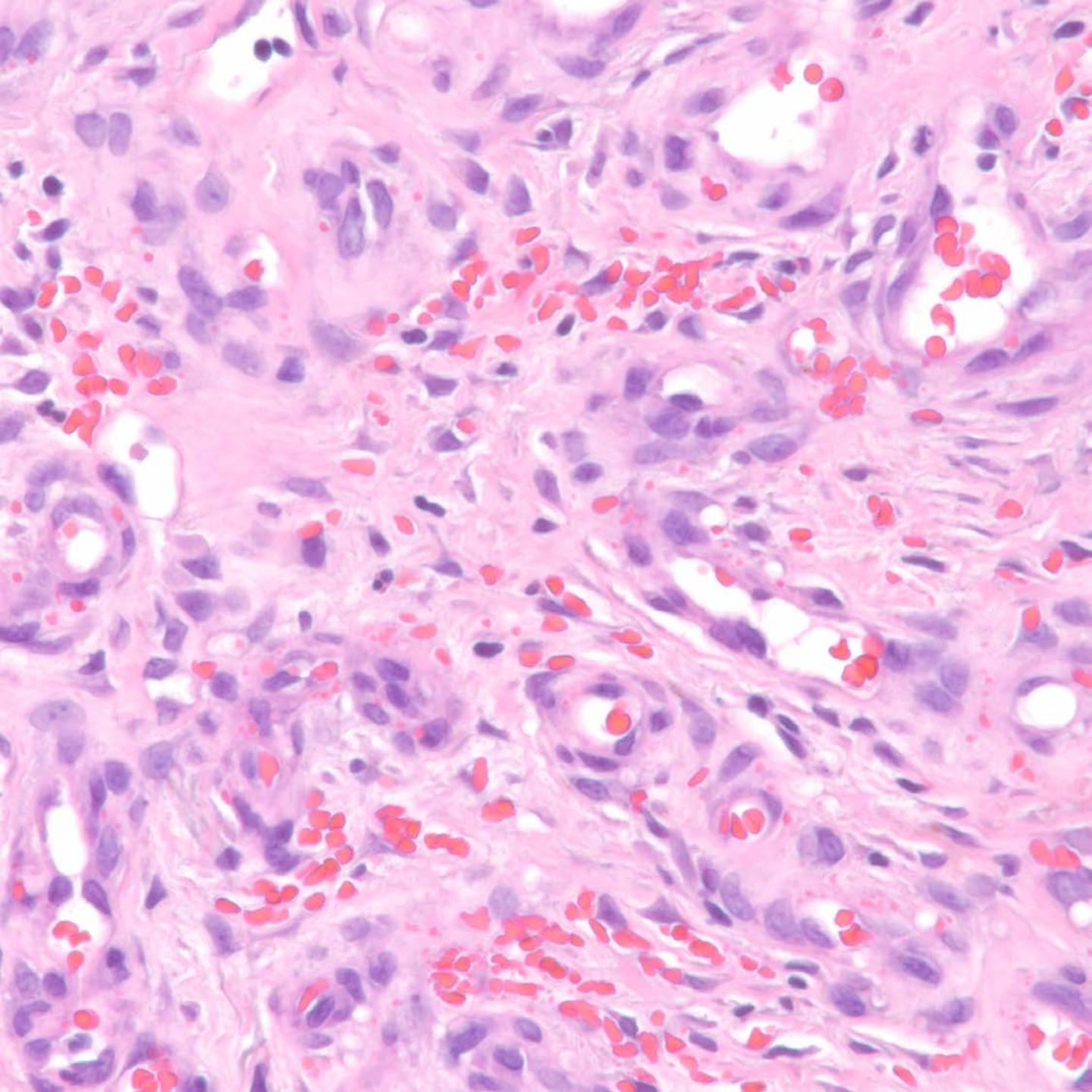


- Ulceration and intraepidermal blister with acantholytic cells
- Look for eosinophilia and nuclear chromatin clearing, margination, and multinucleation
- Rule out HSV infection by immunohistochemistry



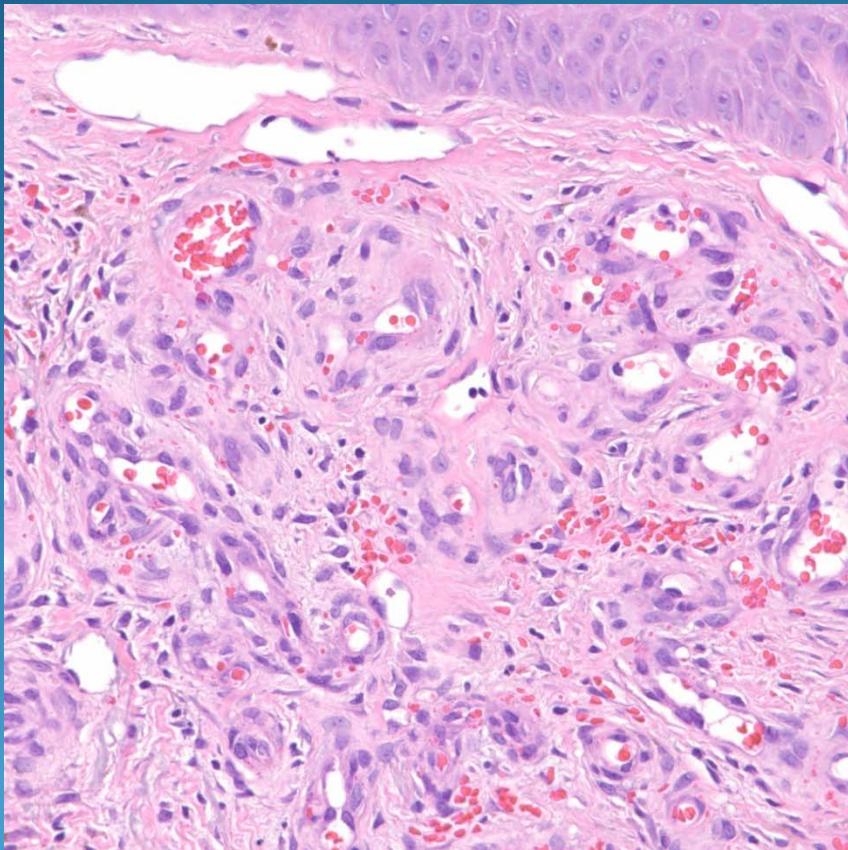






Stasis Dermatitis

Pearls



- Lobular configuration of capillary-sized vessels
- Extravasated red blood cells with hemosiderin-laden macrophages
- Later lesions may show fibroplasia
- R/O Kaposi's sarcoma