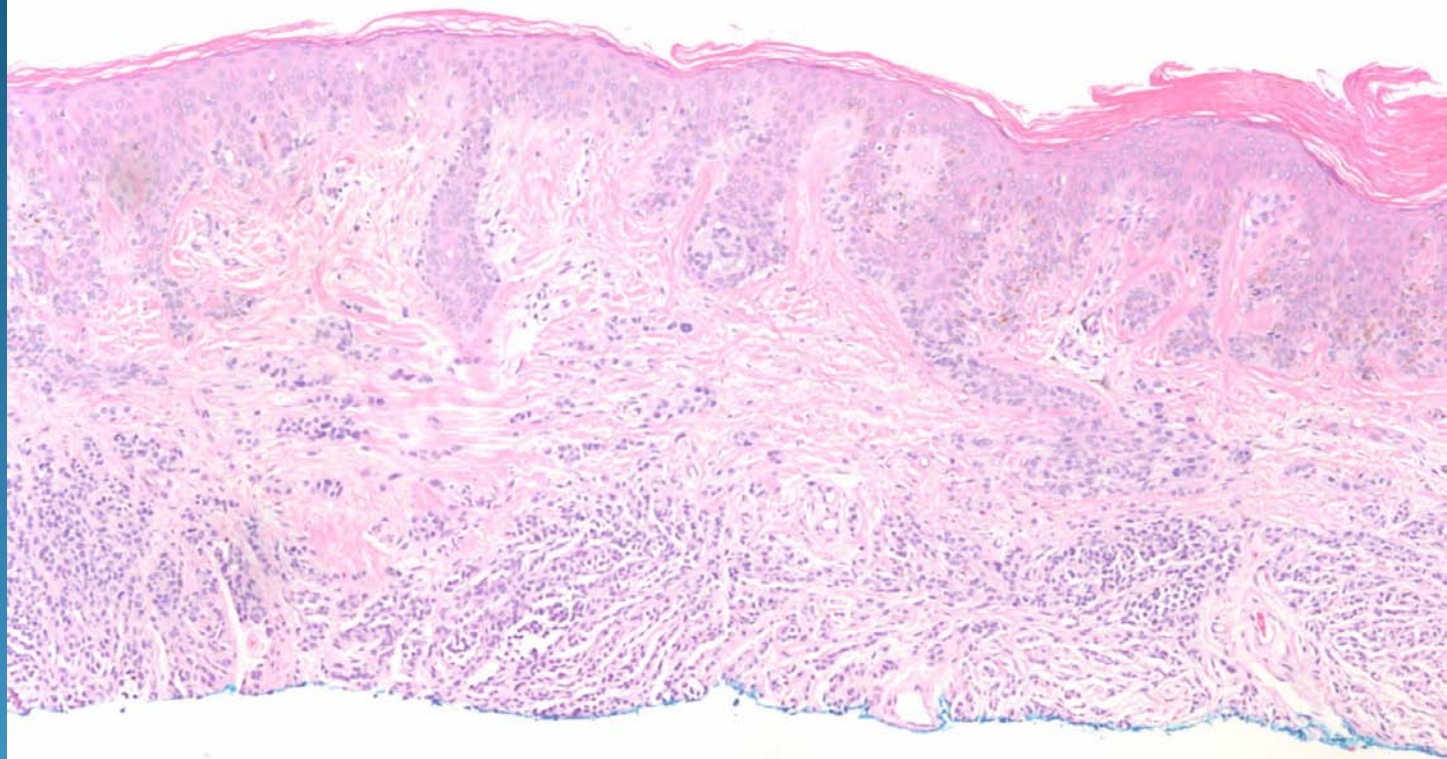
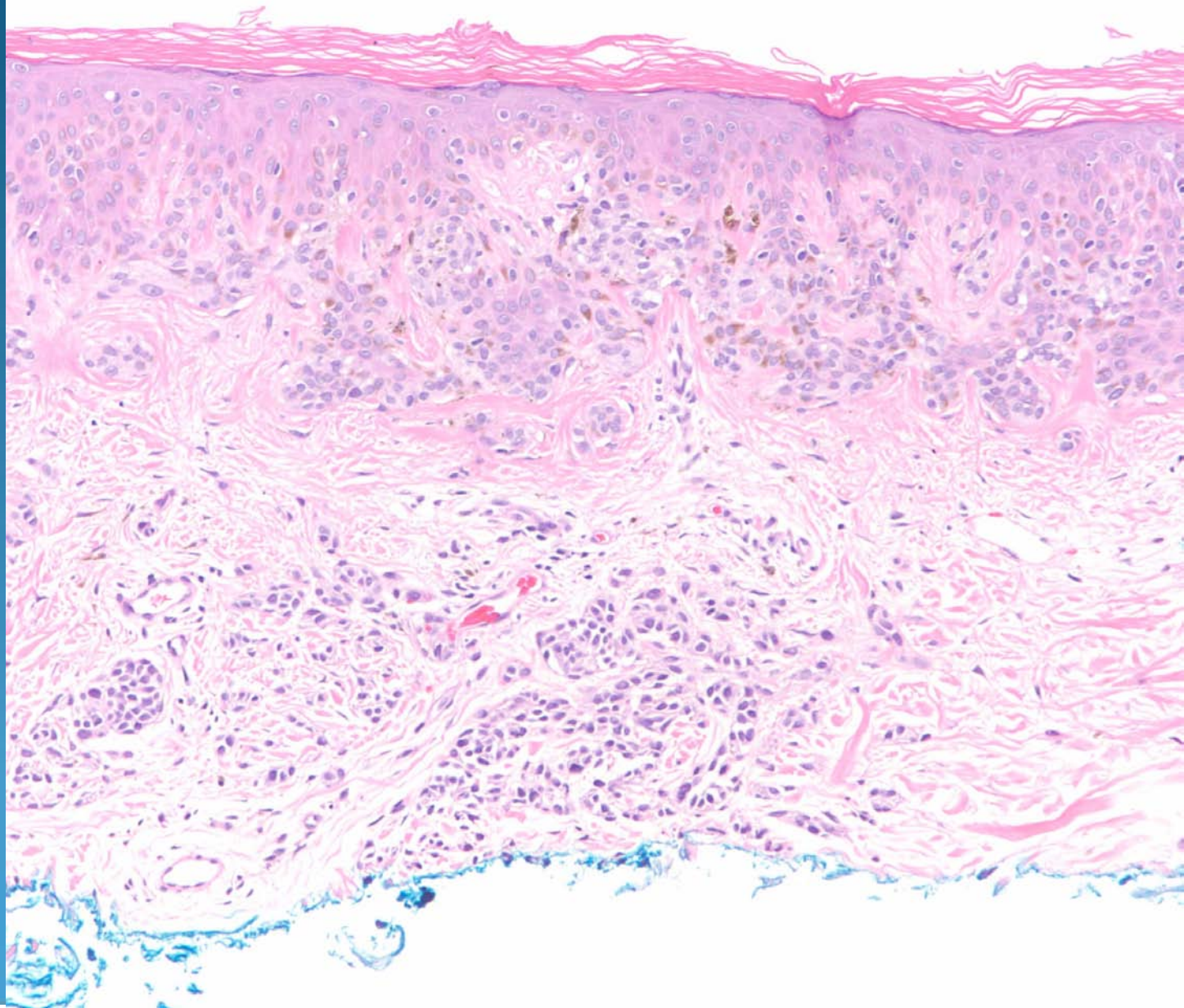


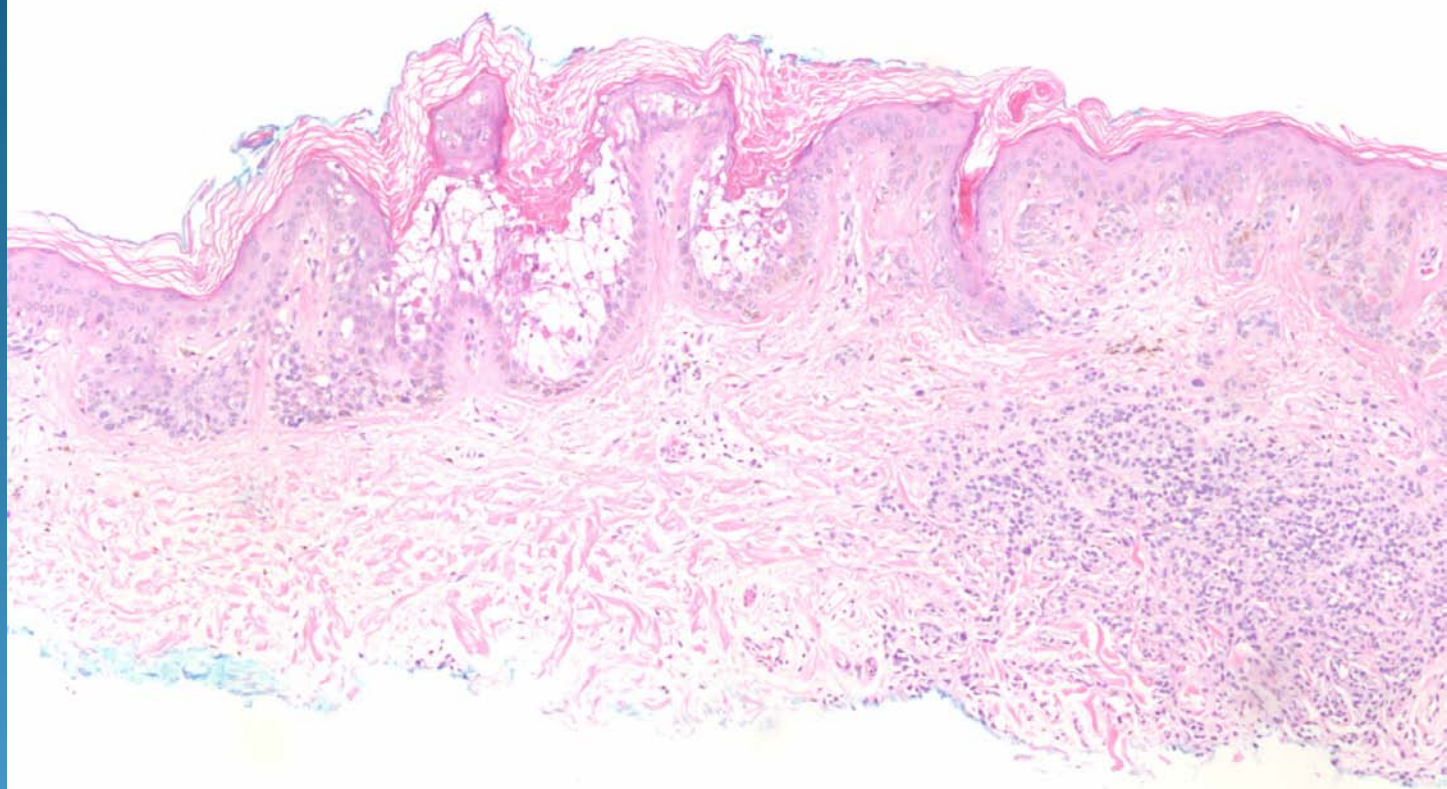
Dermatopathology

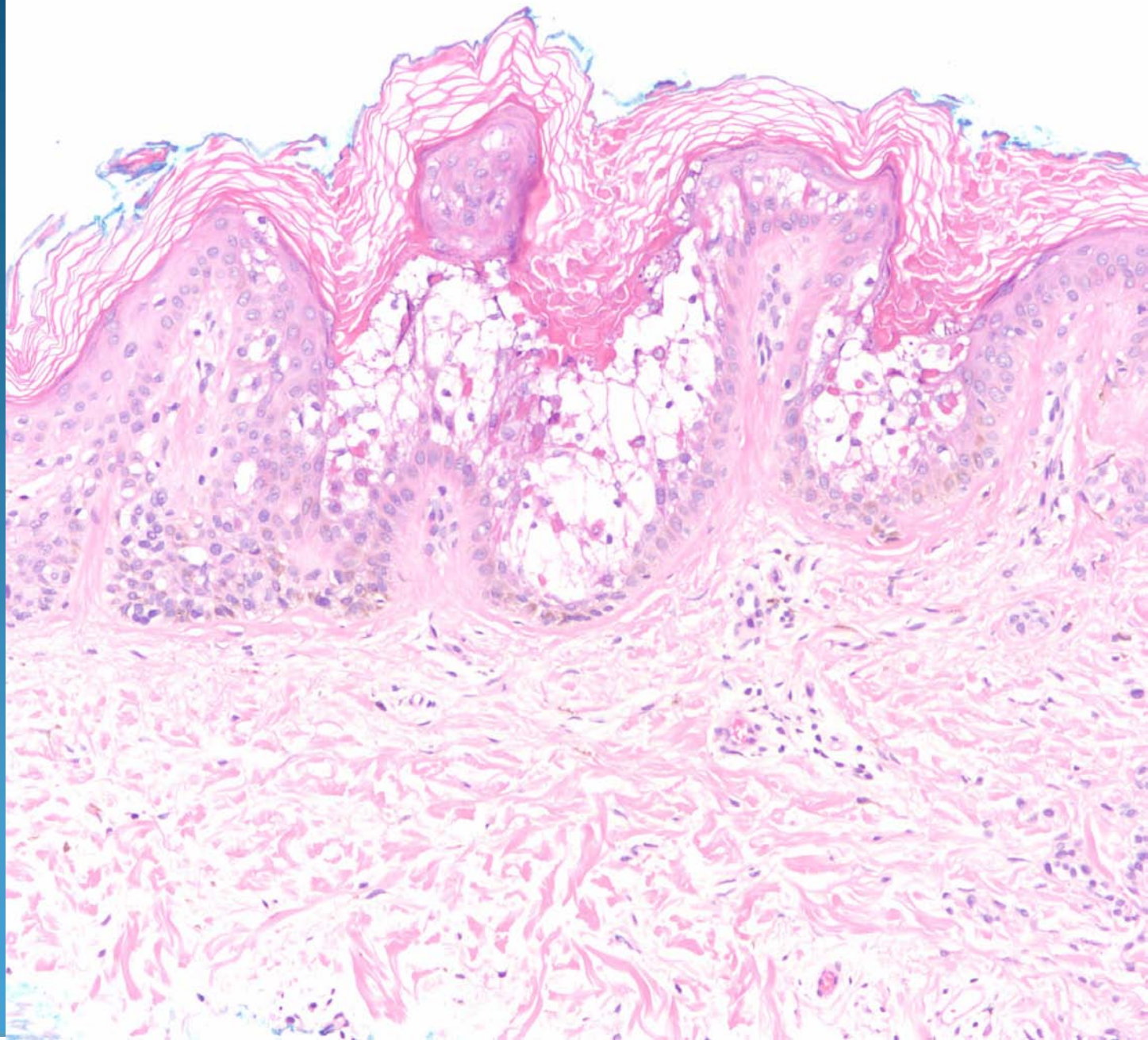
Slide Review Part 63

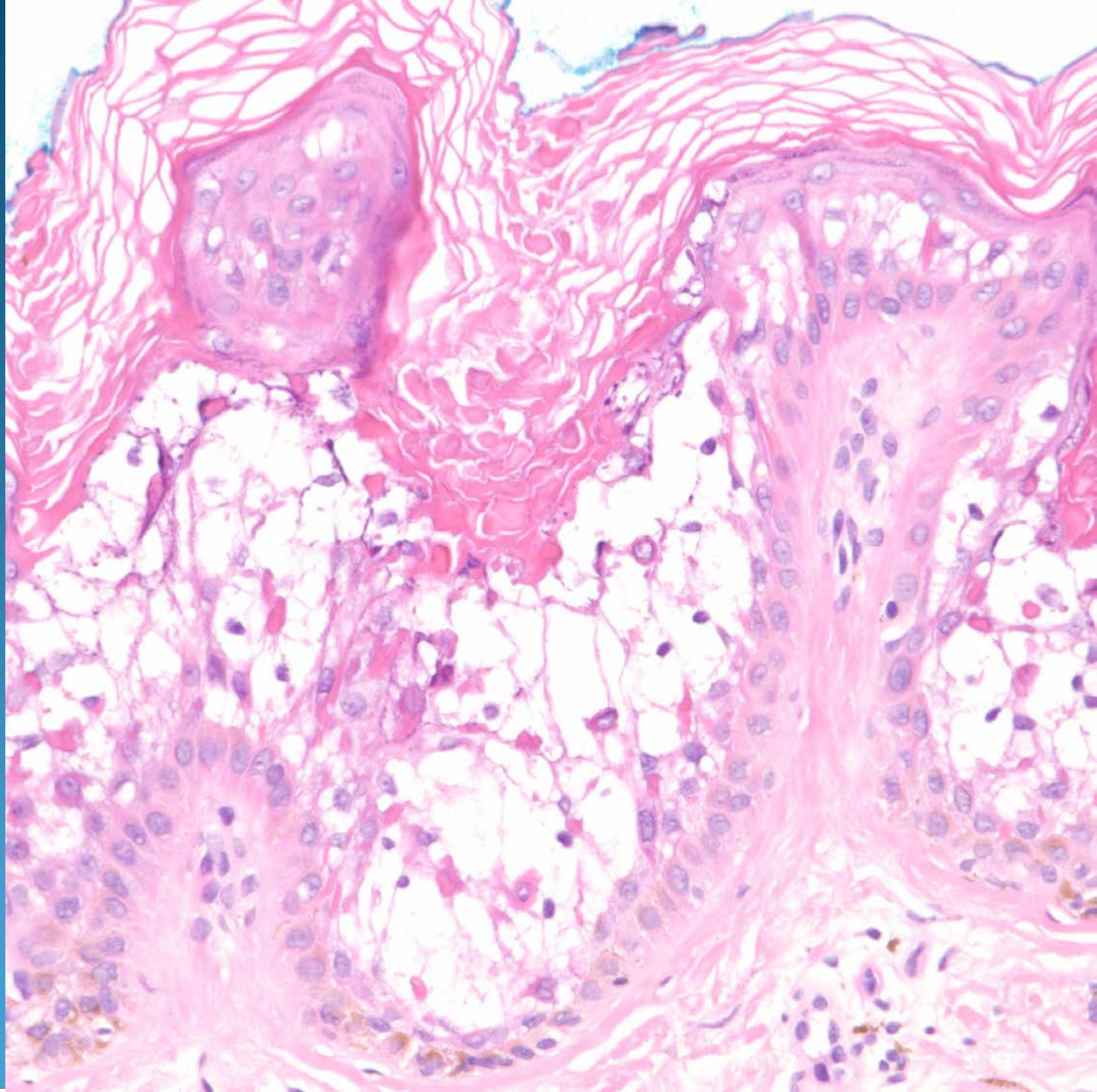
Paul K. Shitabata, M.D.
Dermatopathology Institute





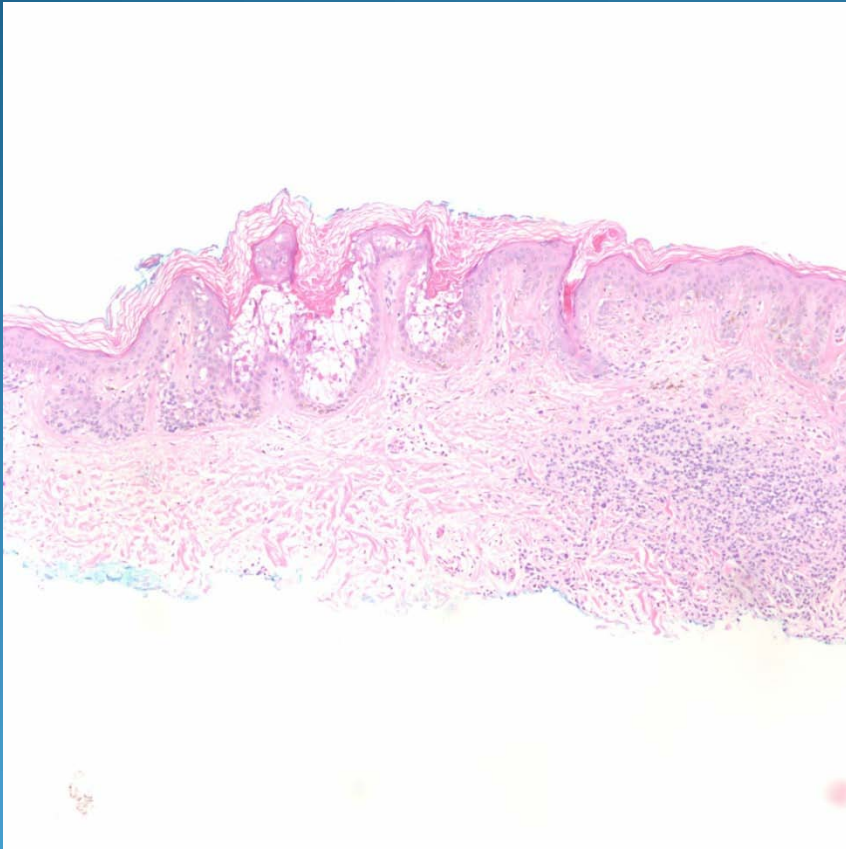




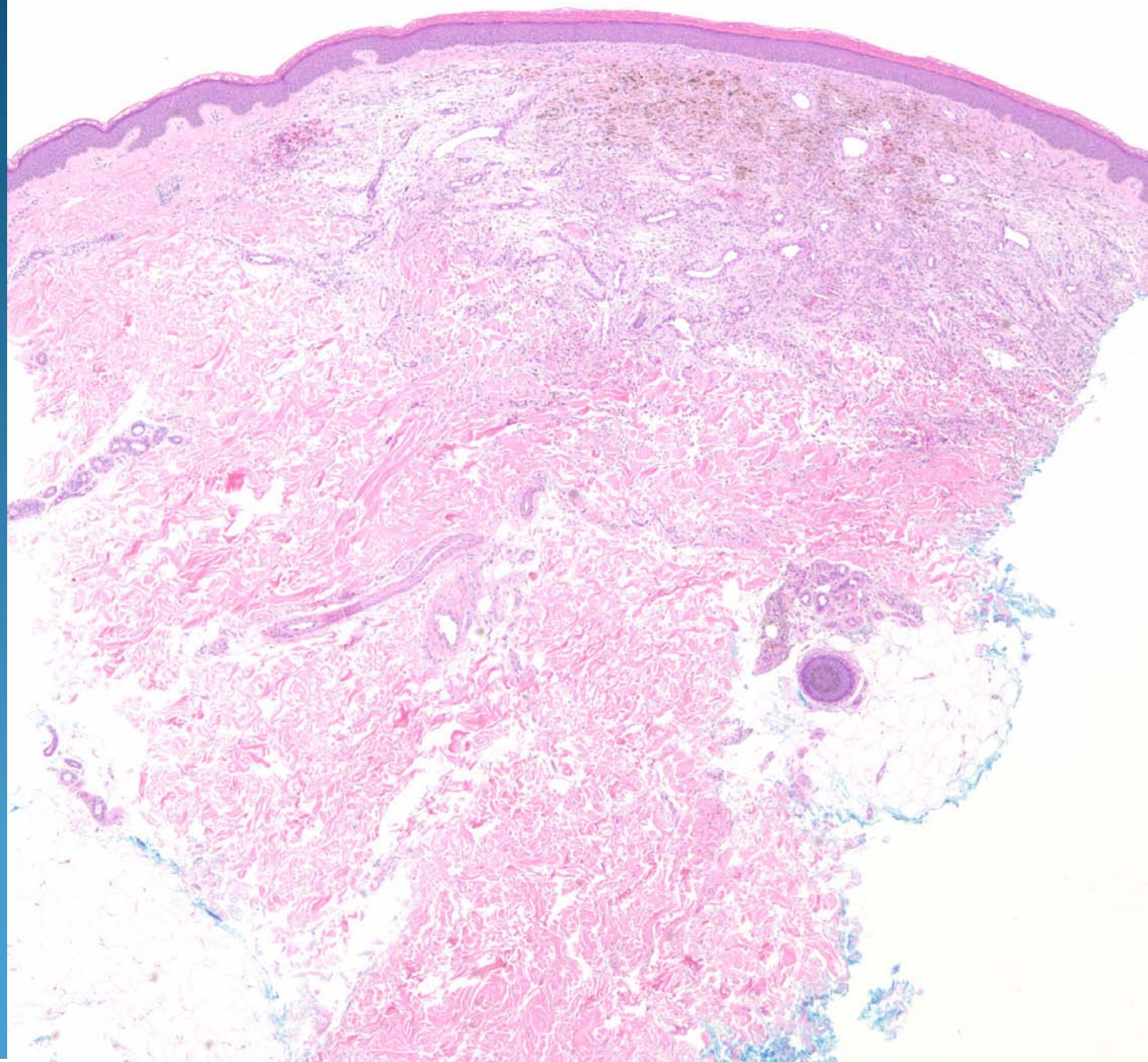


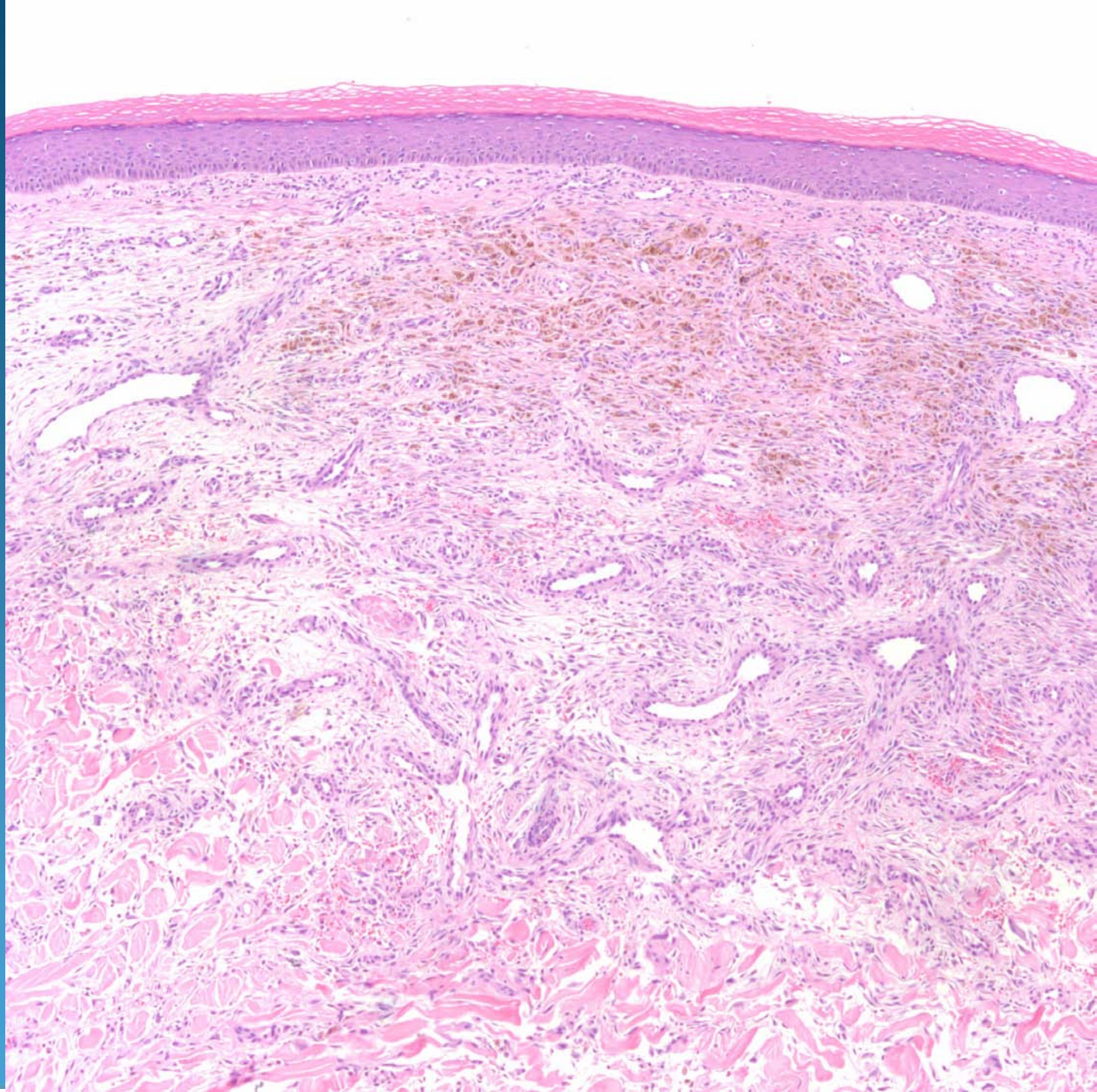
Dysplastic Nevus arising with Epidermolytic Hyperkeratosis

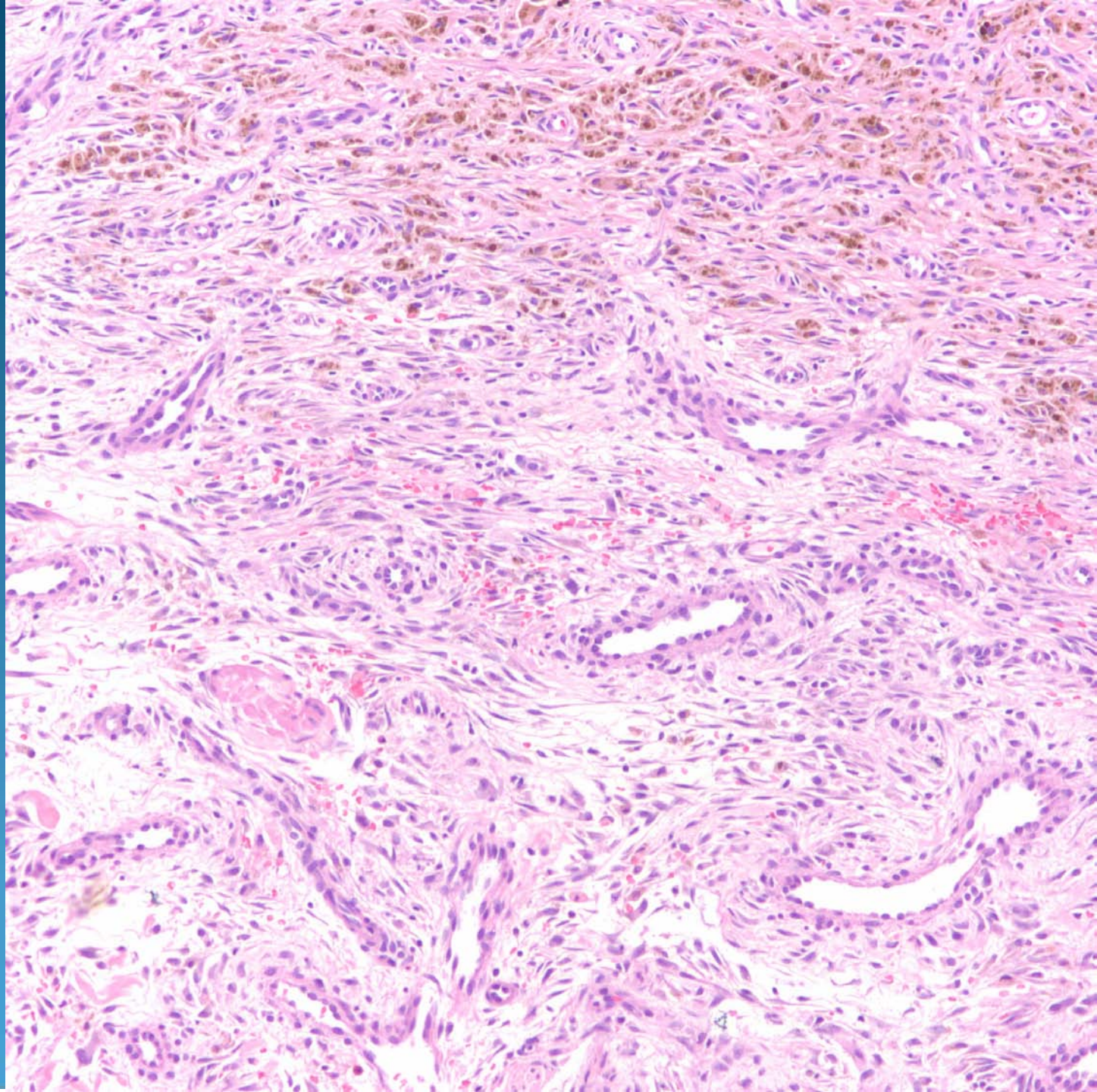
Pearls

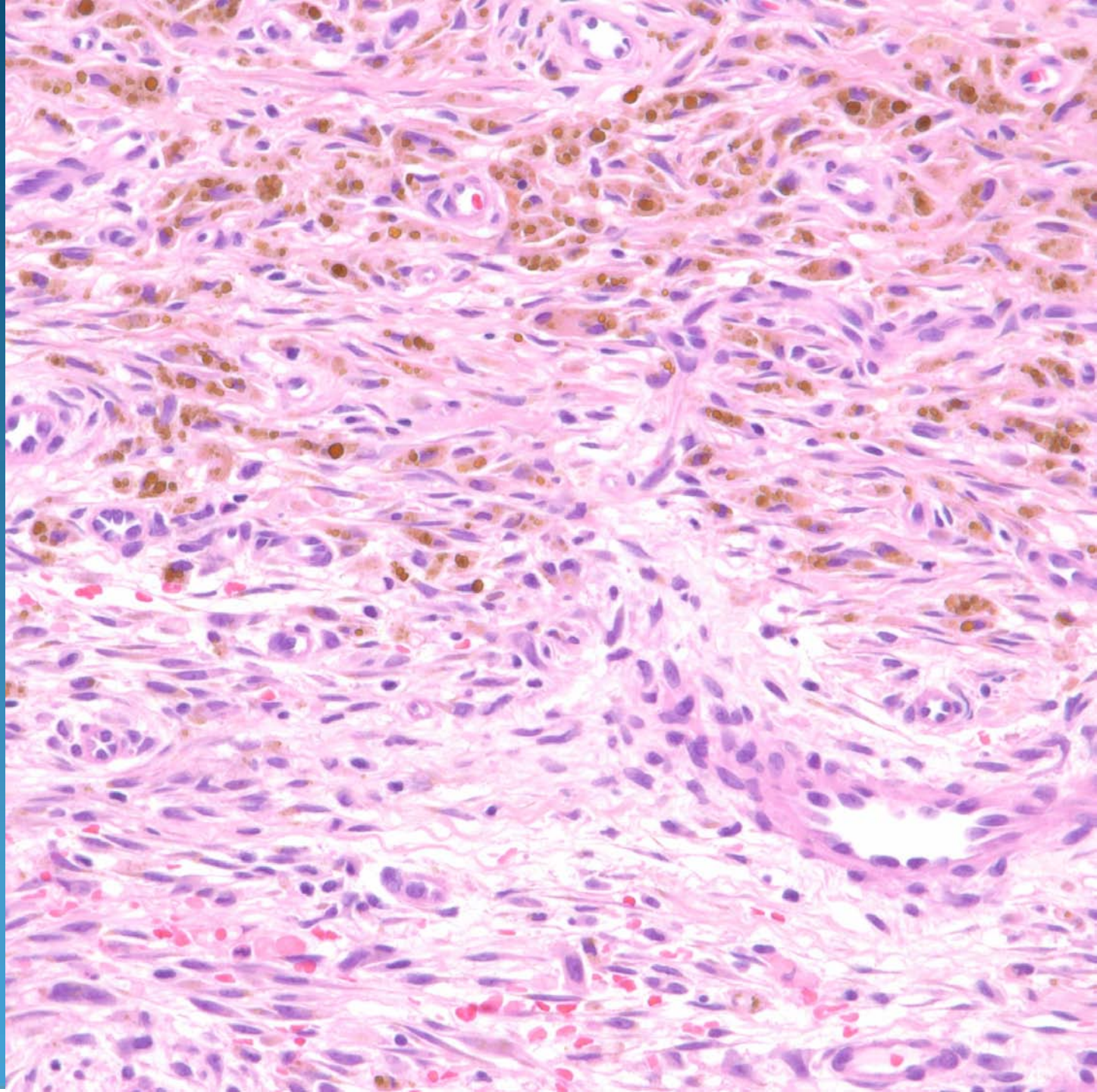


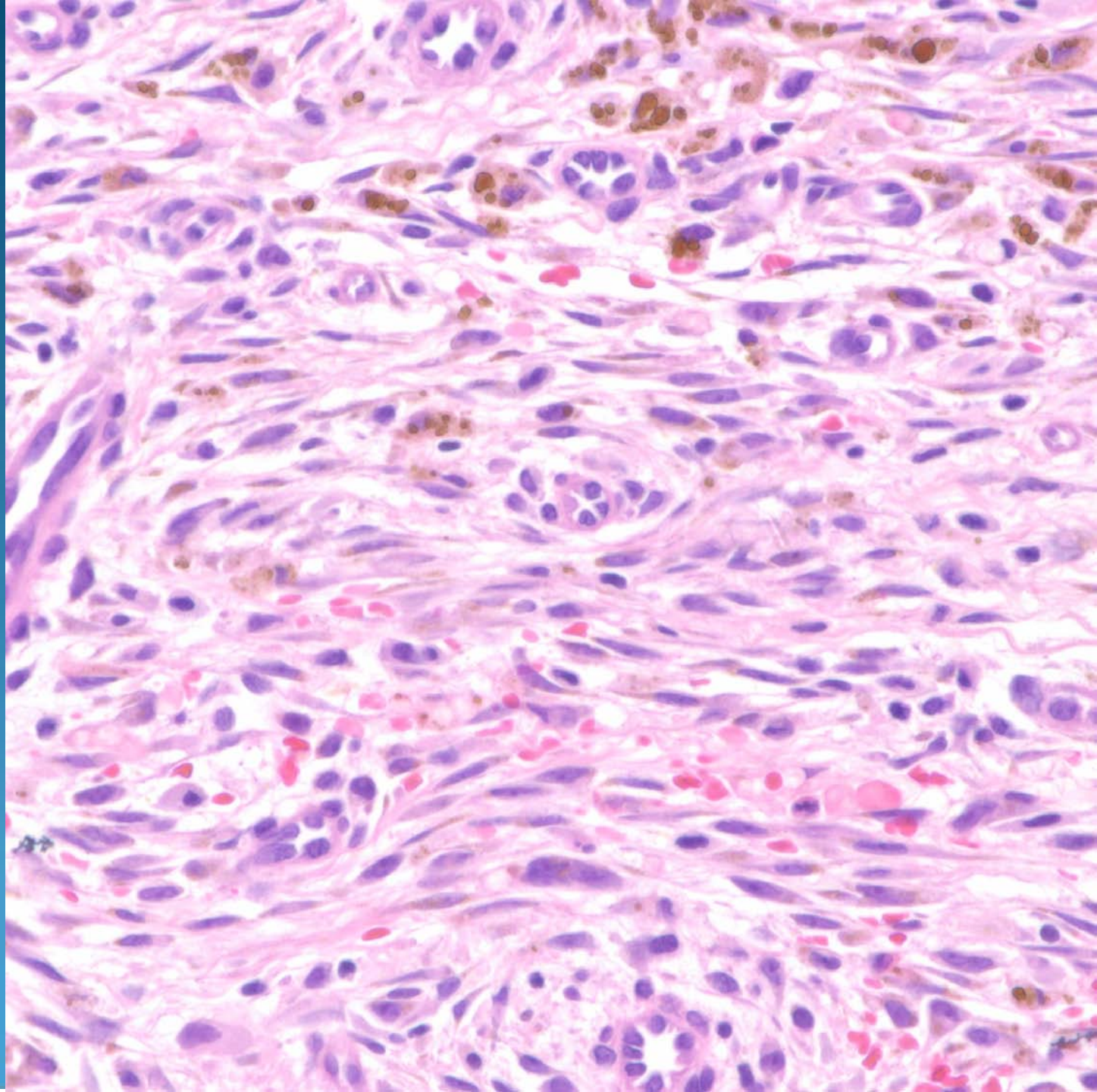
- Epidermolytic hyperkeratosis may be a marker for atypical melanocytic nevi
- If seen in an otherwise banal melanocytic nevus, cut deeper to rule out an atypical melanocytic nevus

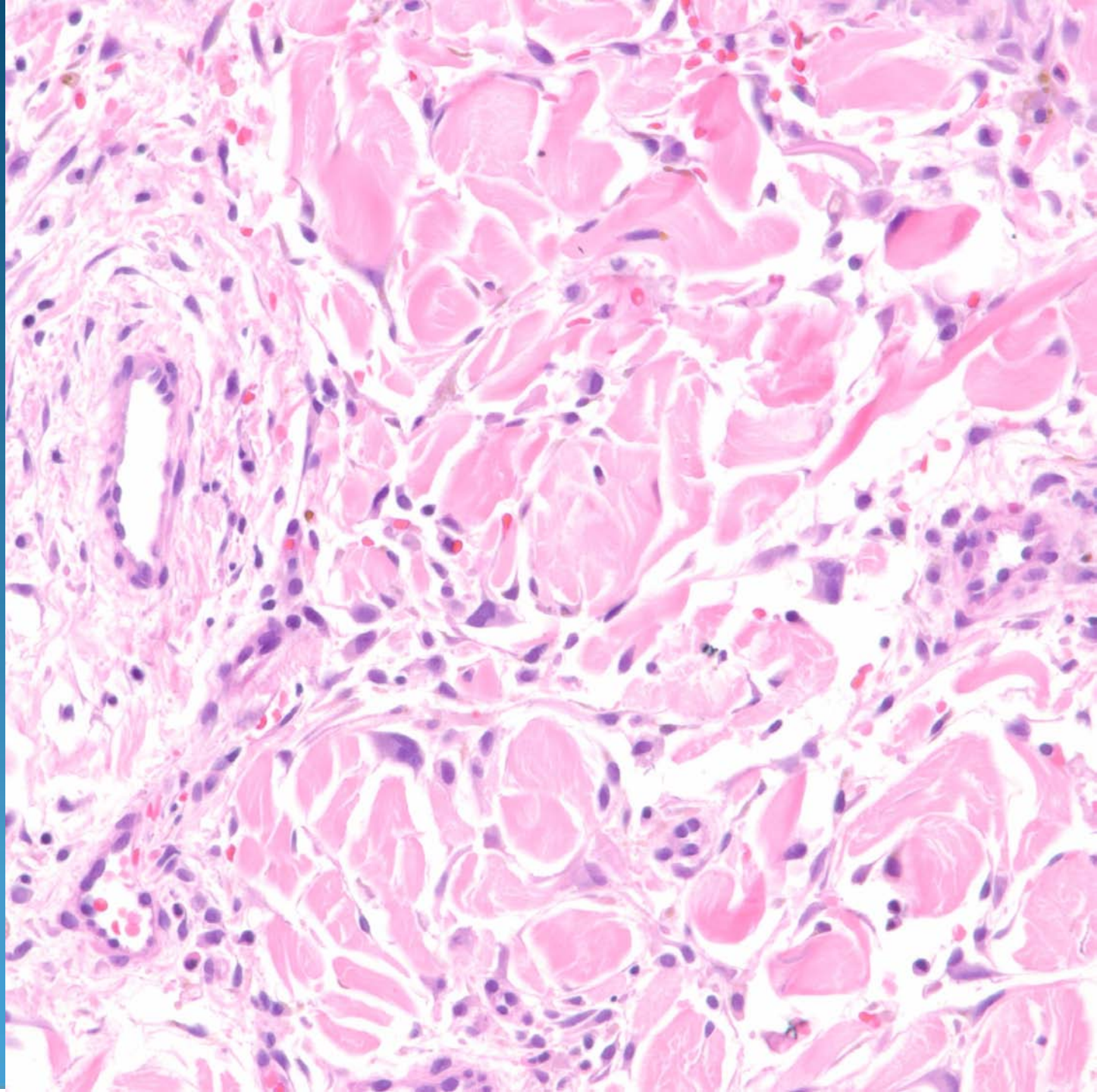


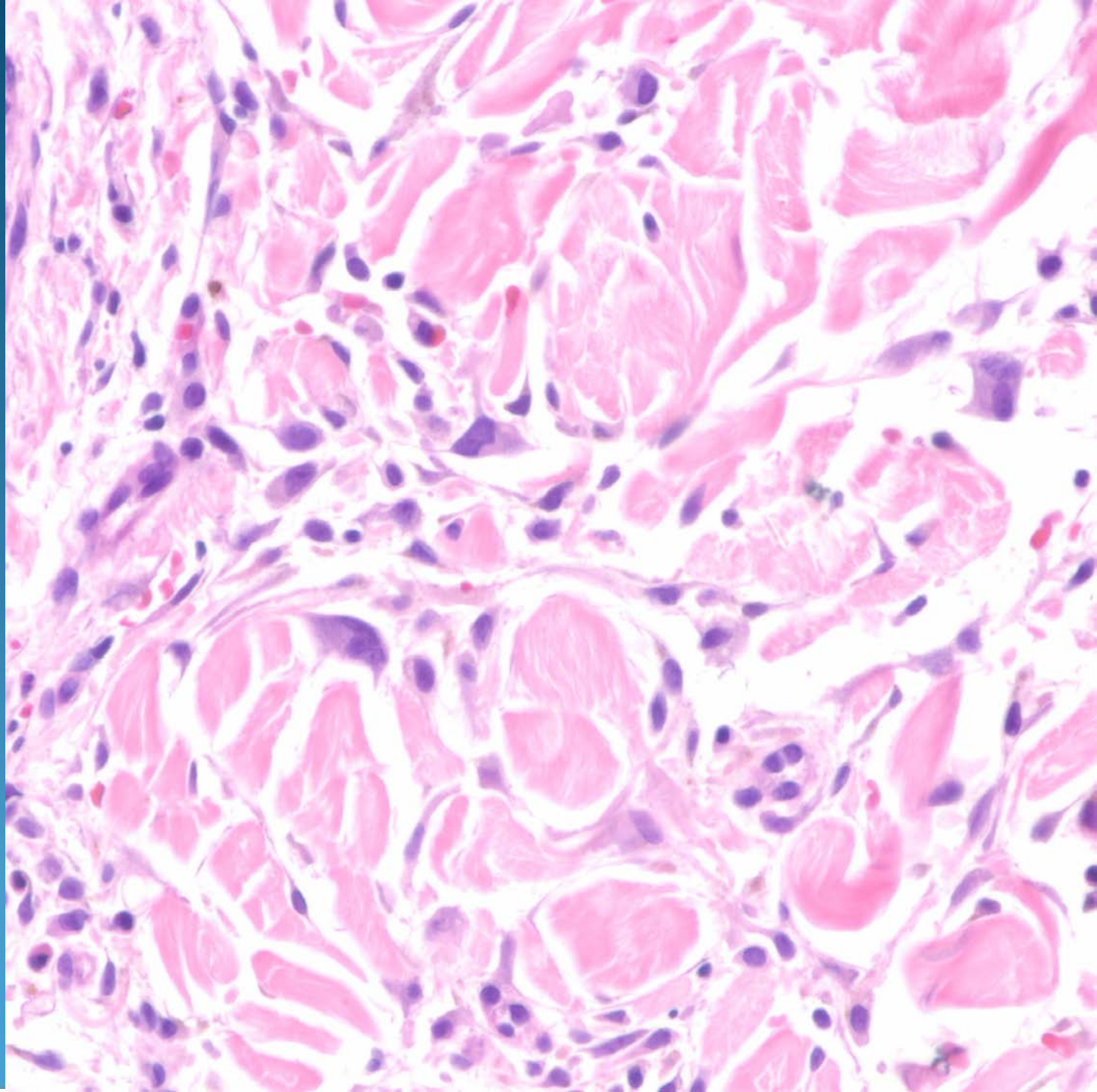






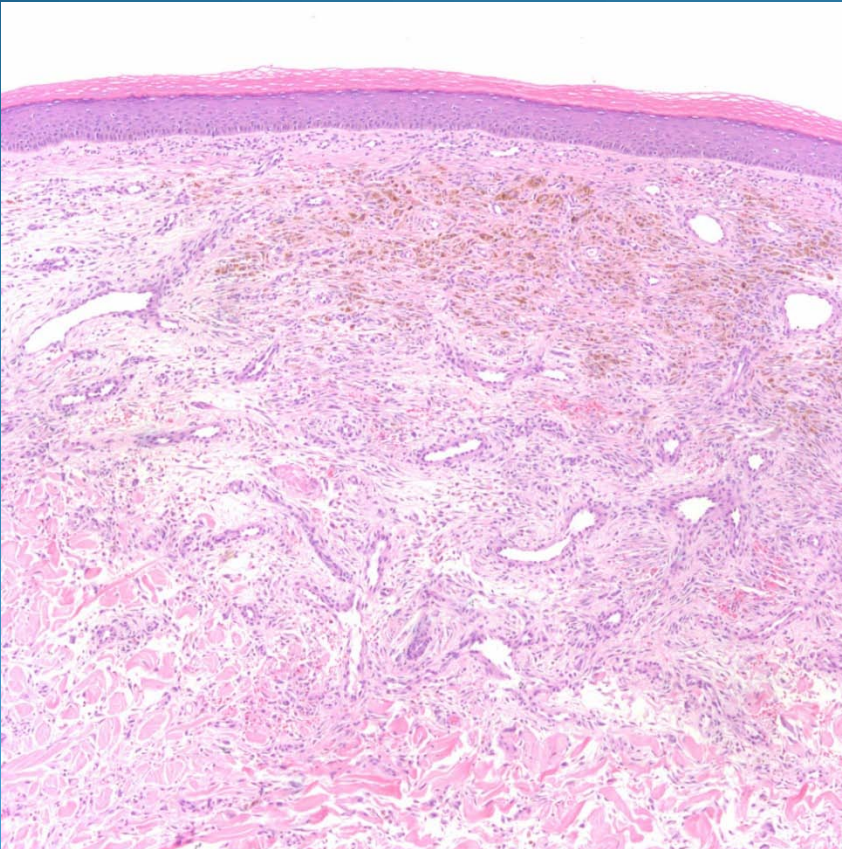




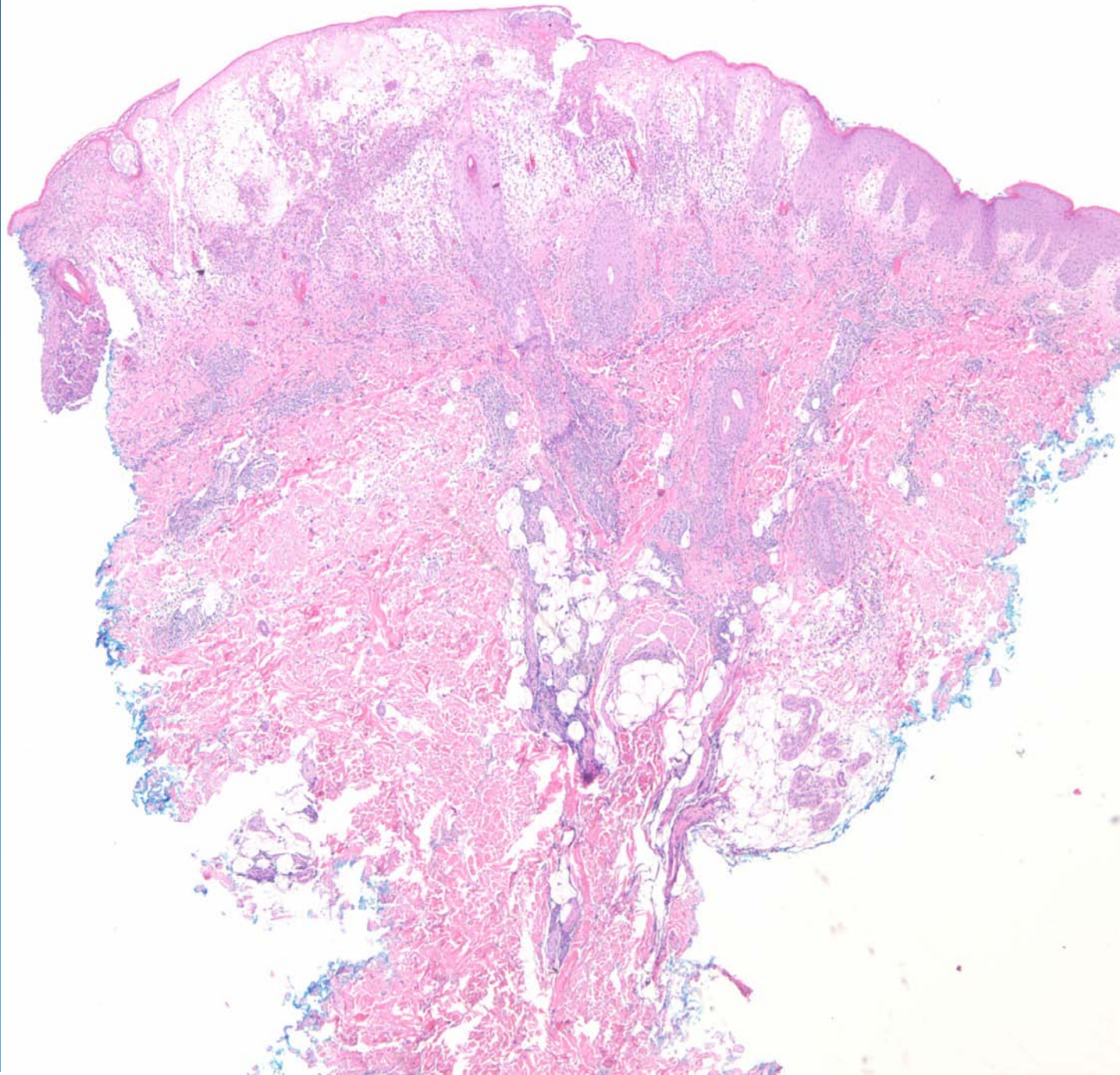


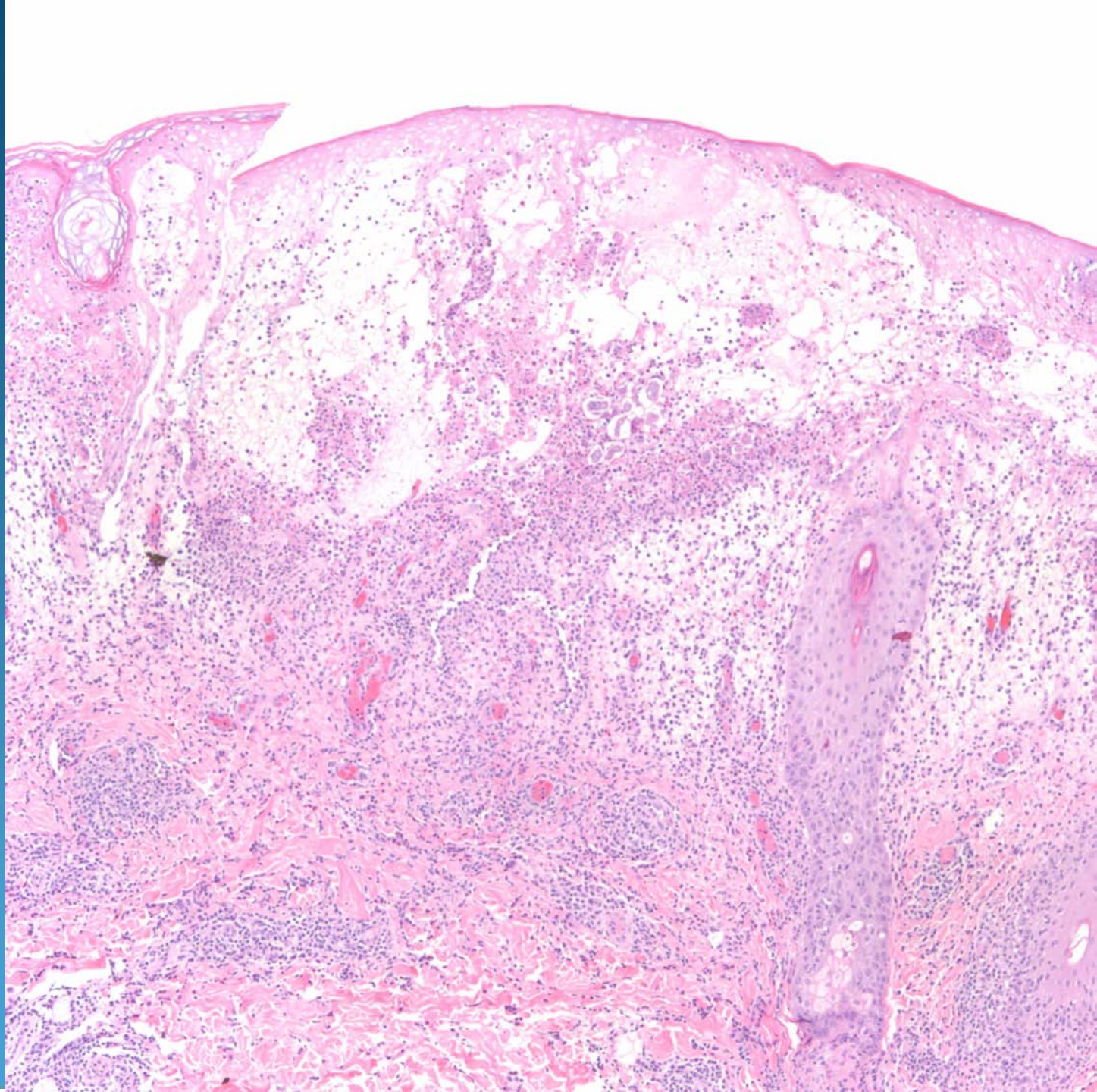
Sclerosing Hemangioma, Early

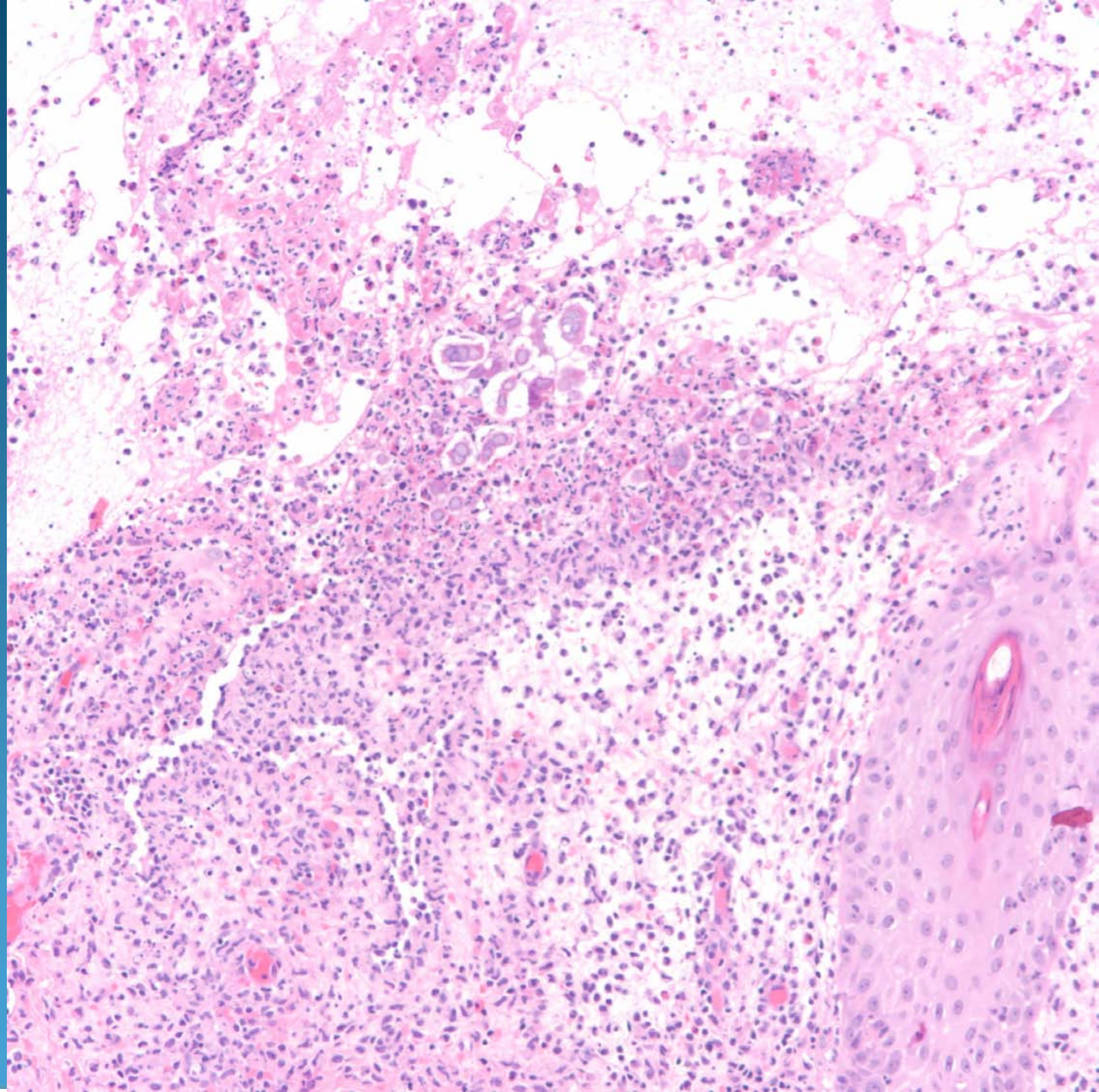
Pearls

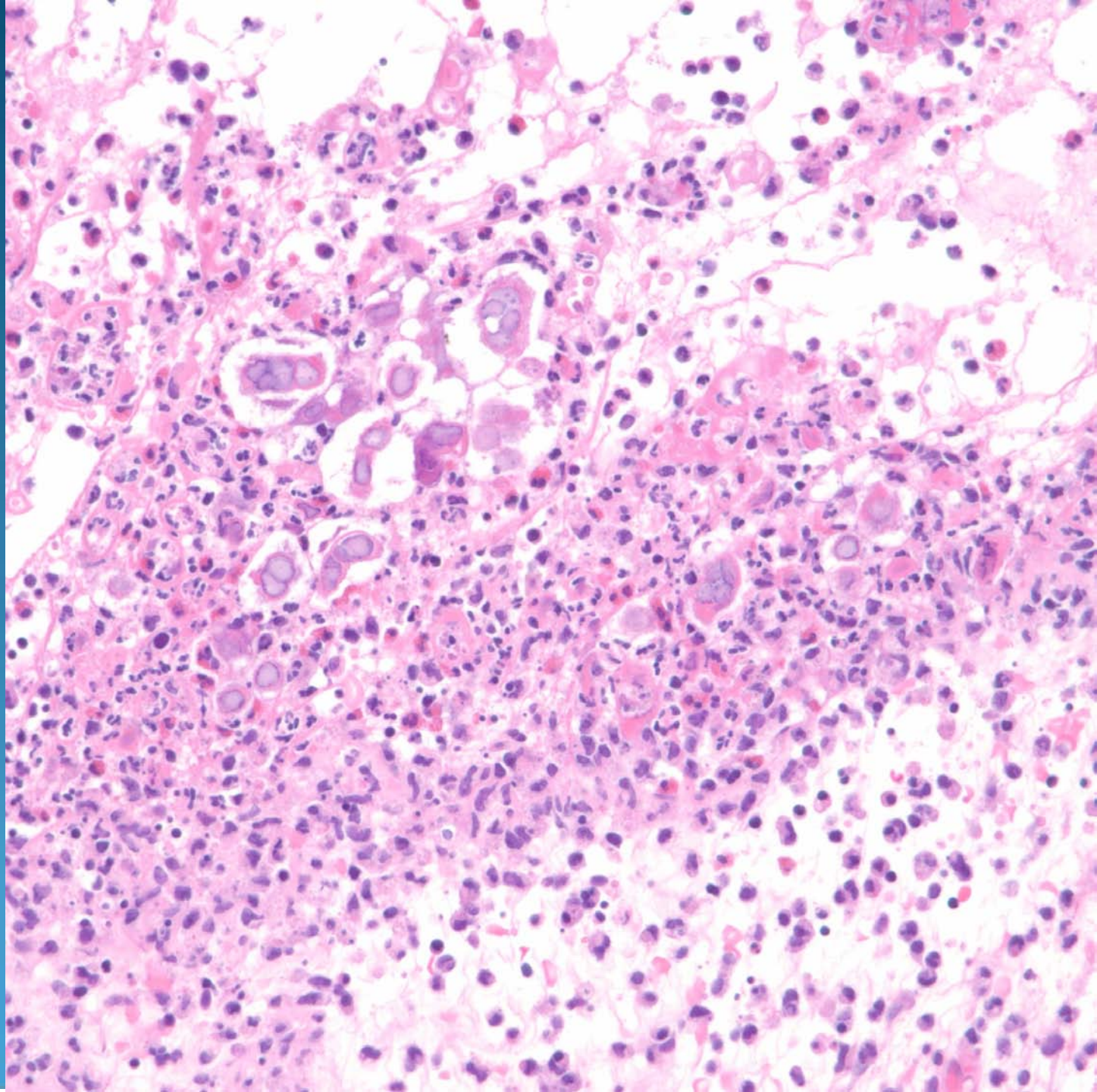


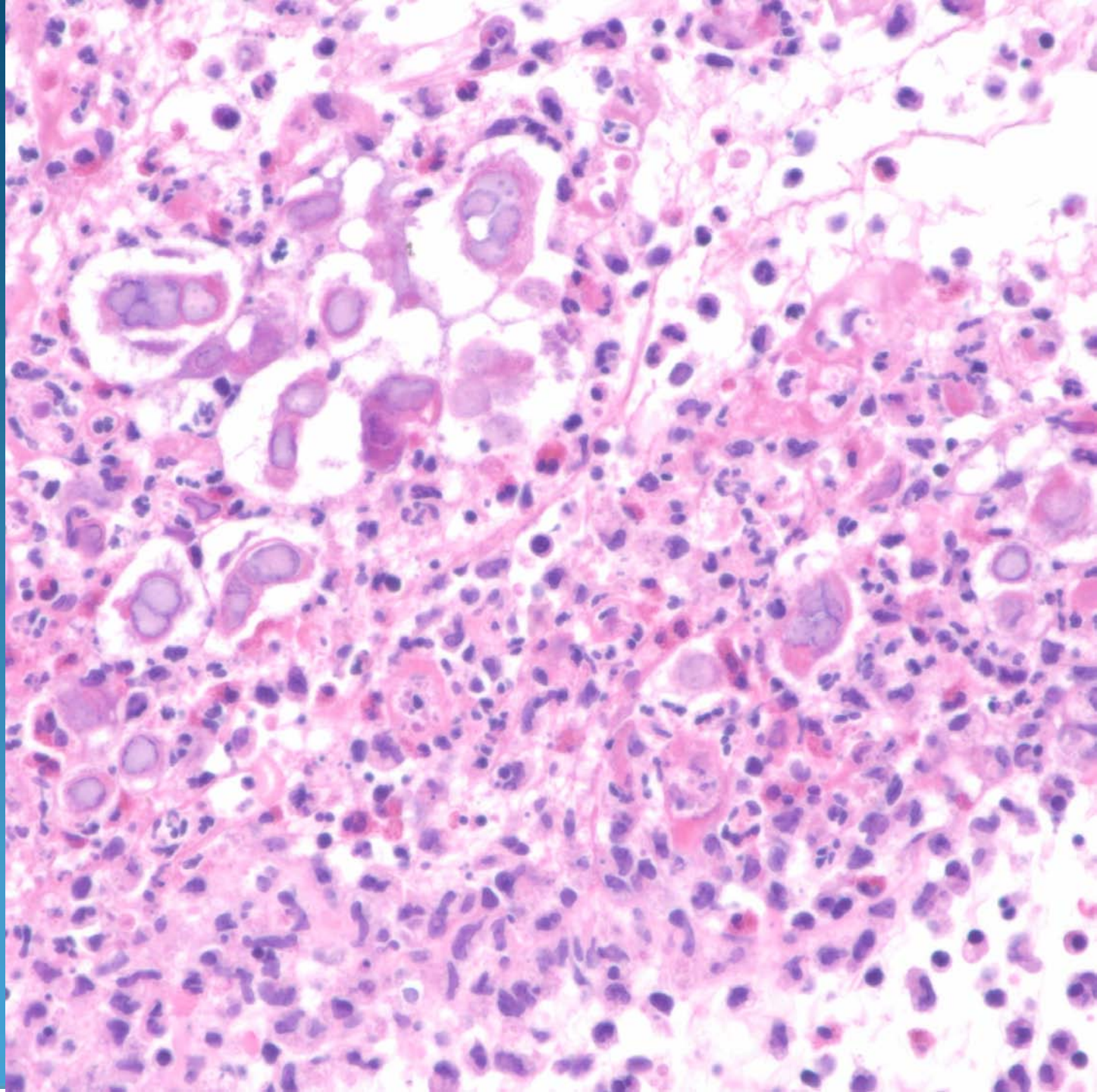
- Variable cellular spindle cell tumor
- Increased blood vessels, hemosiderin-laden macrophages, and hemorrhage
- Spindle cells with stellate fibroblasts
- May show transition to dermatofibroma



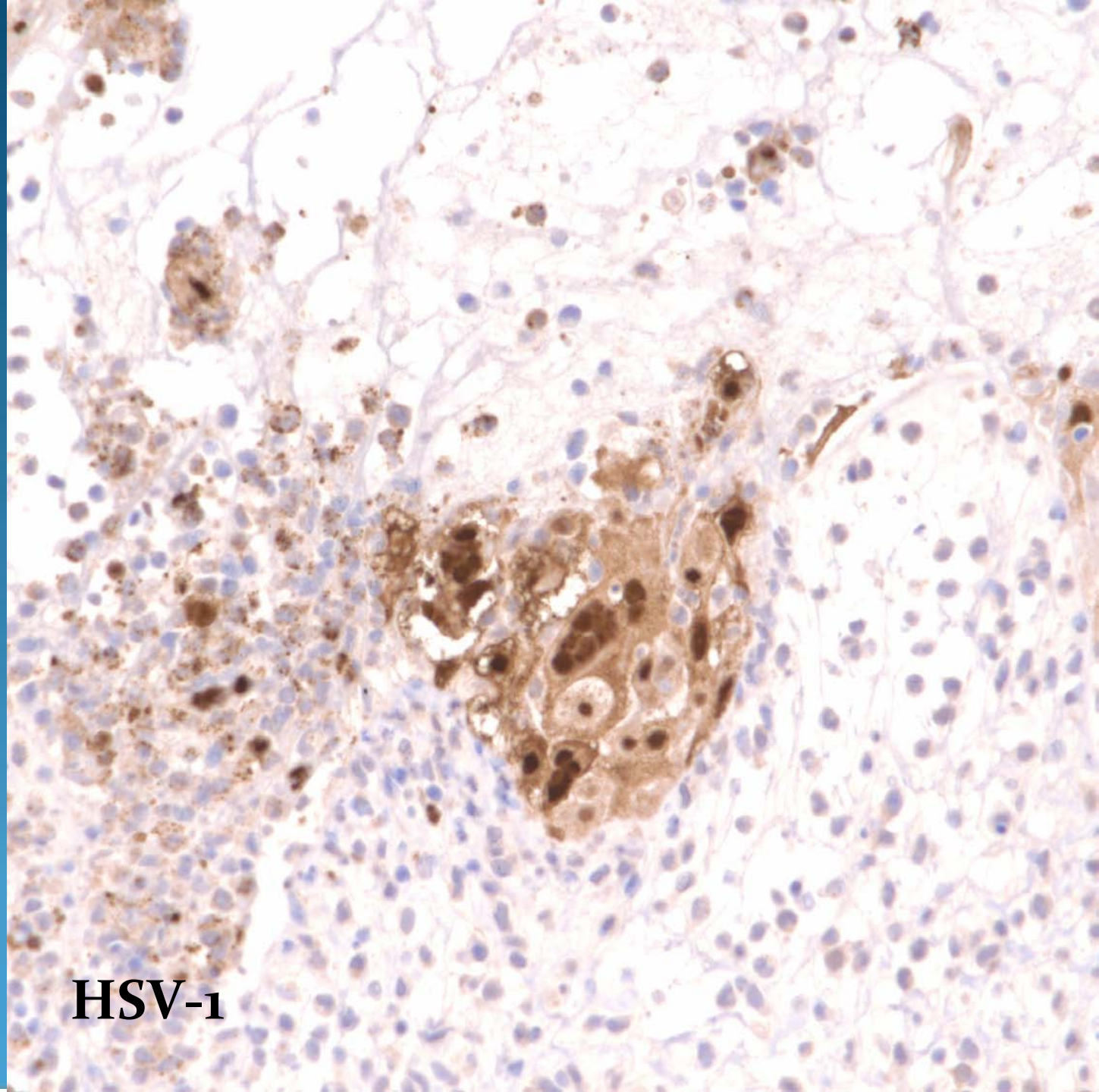






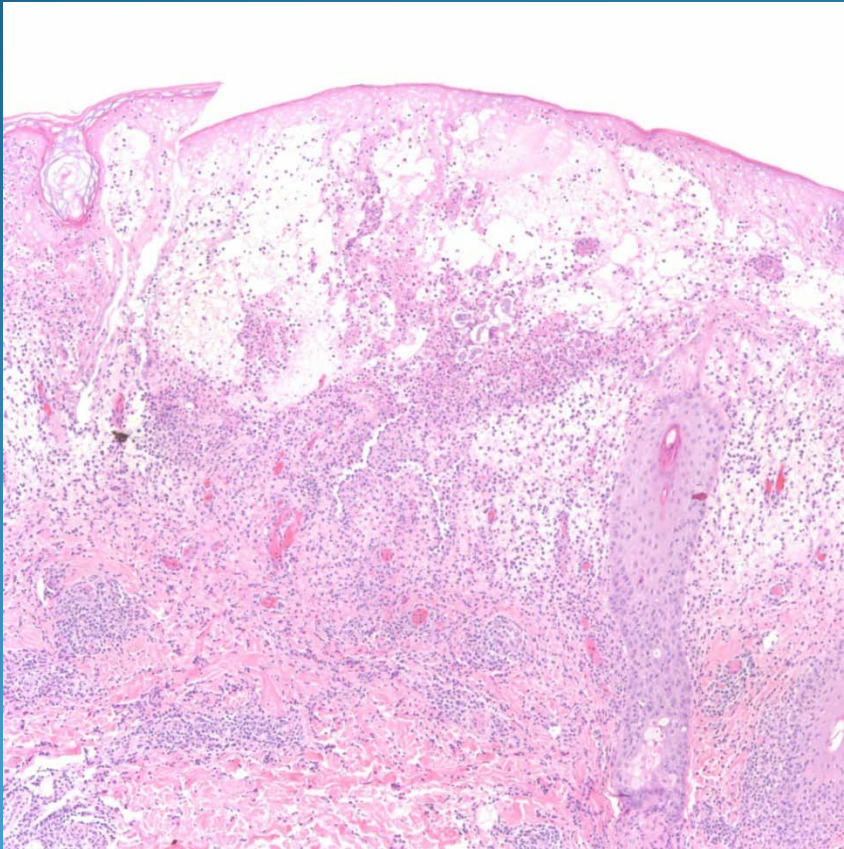


Herpes Simplex Virus Infection

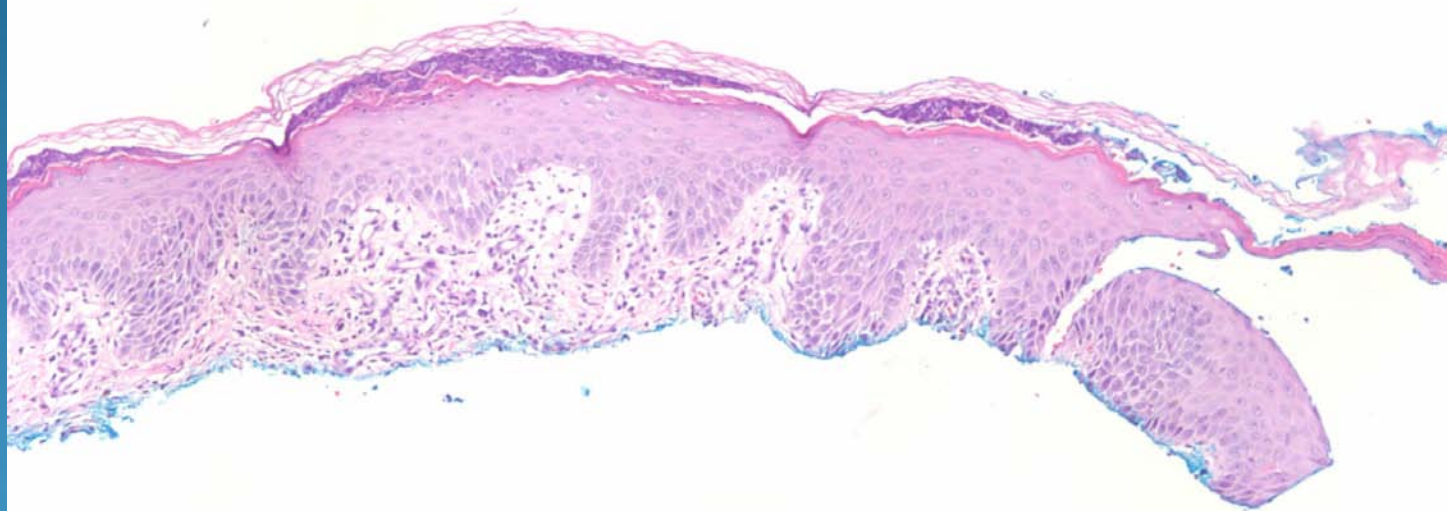


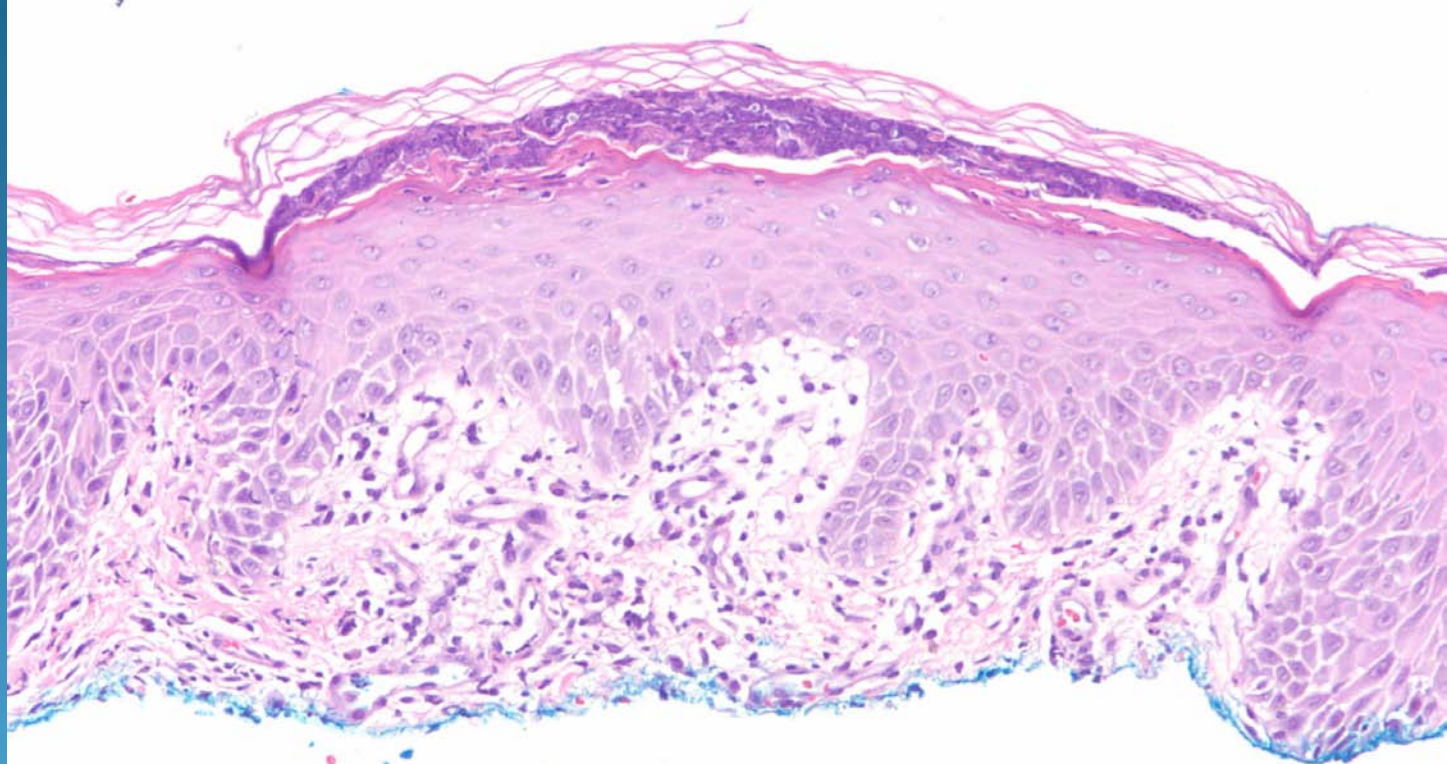
HSV-1

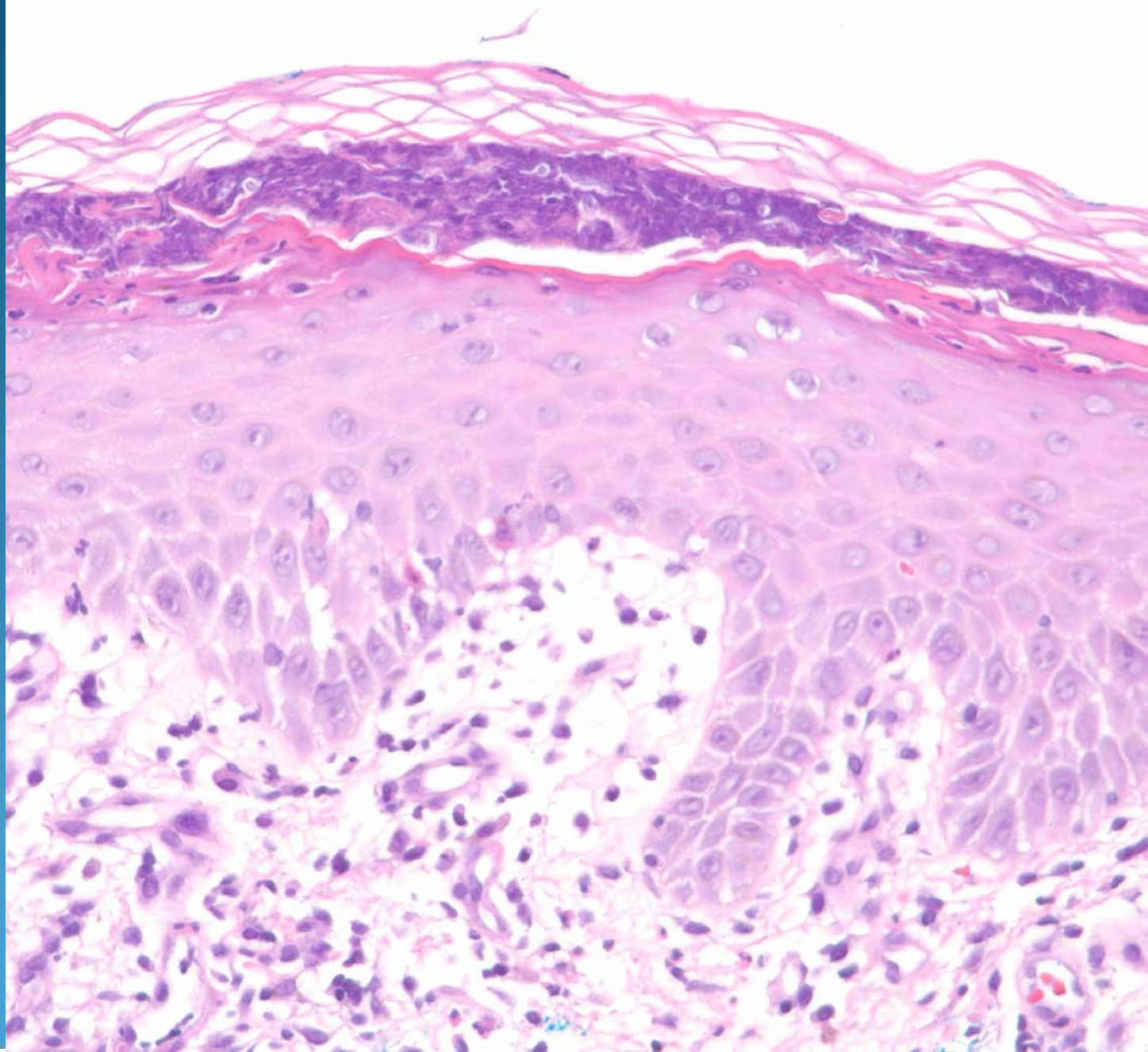
Pearls



- Acute intraepidermal pustule with extensive necrosis
- Look for acantholytic cells, esp. around hair follicles
- Multinucleated giant cells with nuclear chromatin margination or clearing
- May confirm with antibodies to HSV-1 or 2
- If negative, consider Varicella Zoster Virus/Shingles



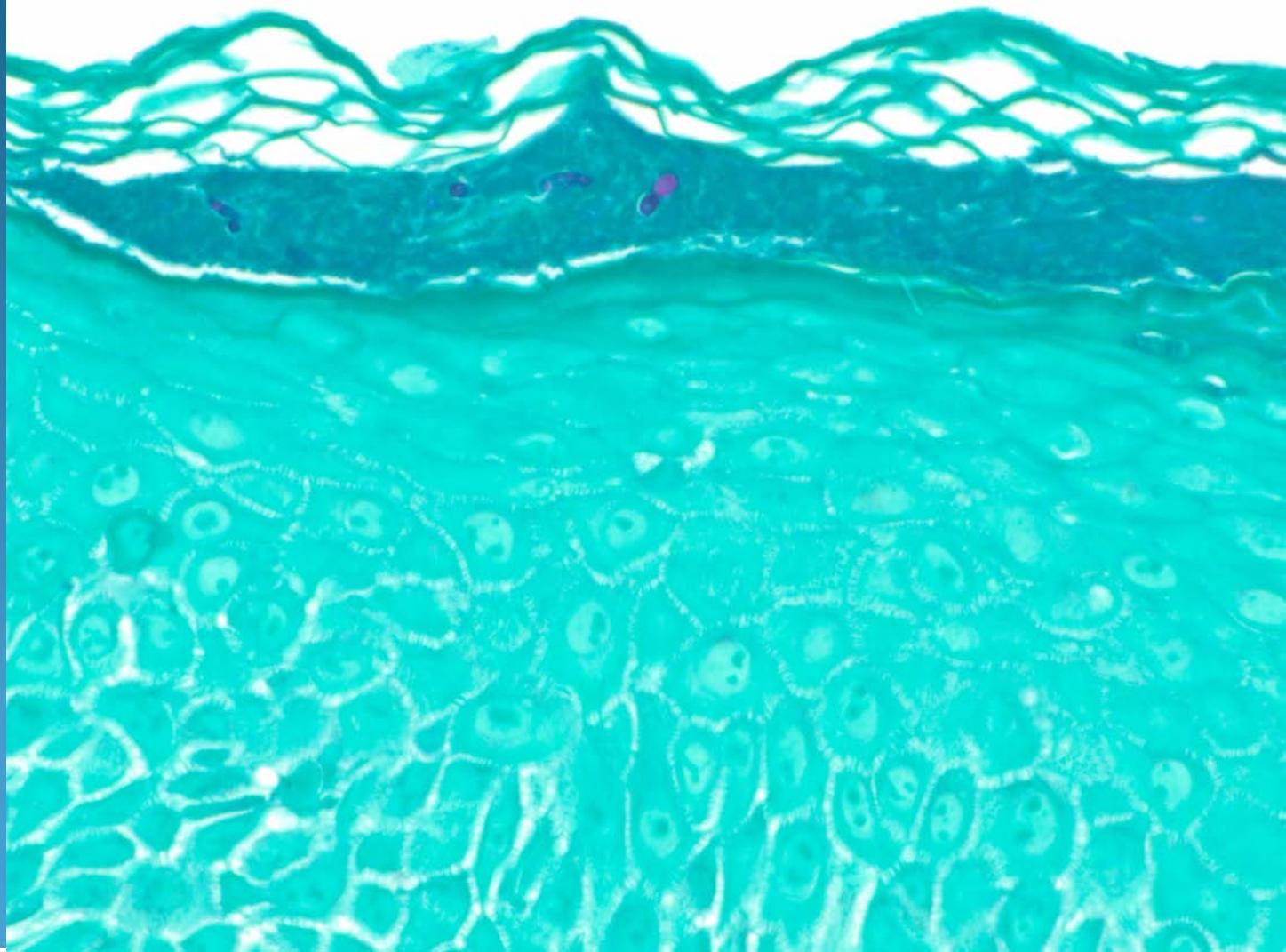




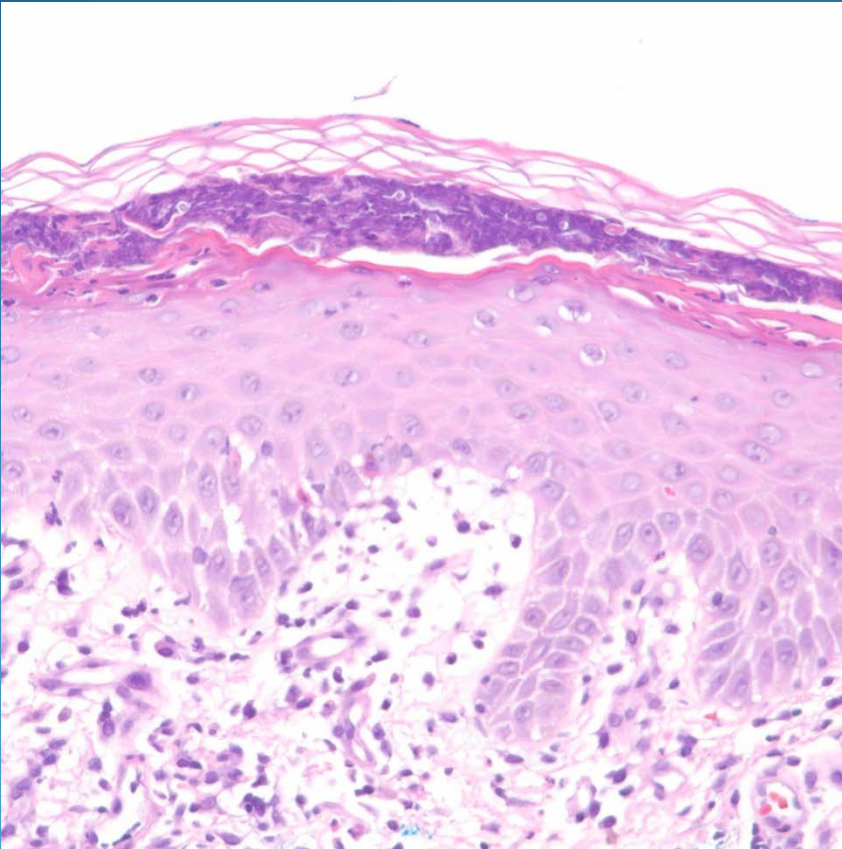
Dermatophytosis

“The Sandwich Sign”

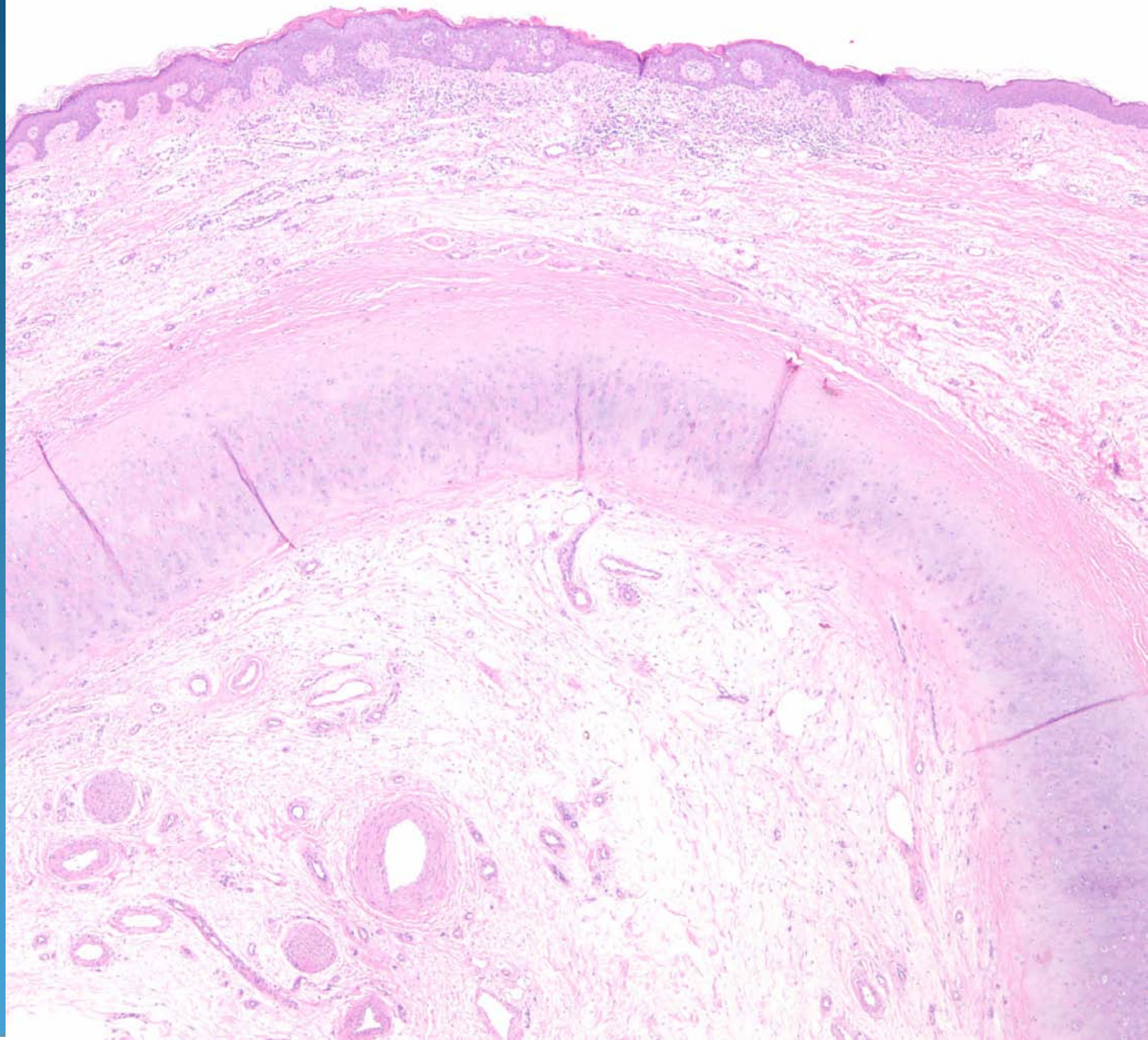
PAS stain

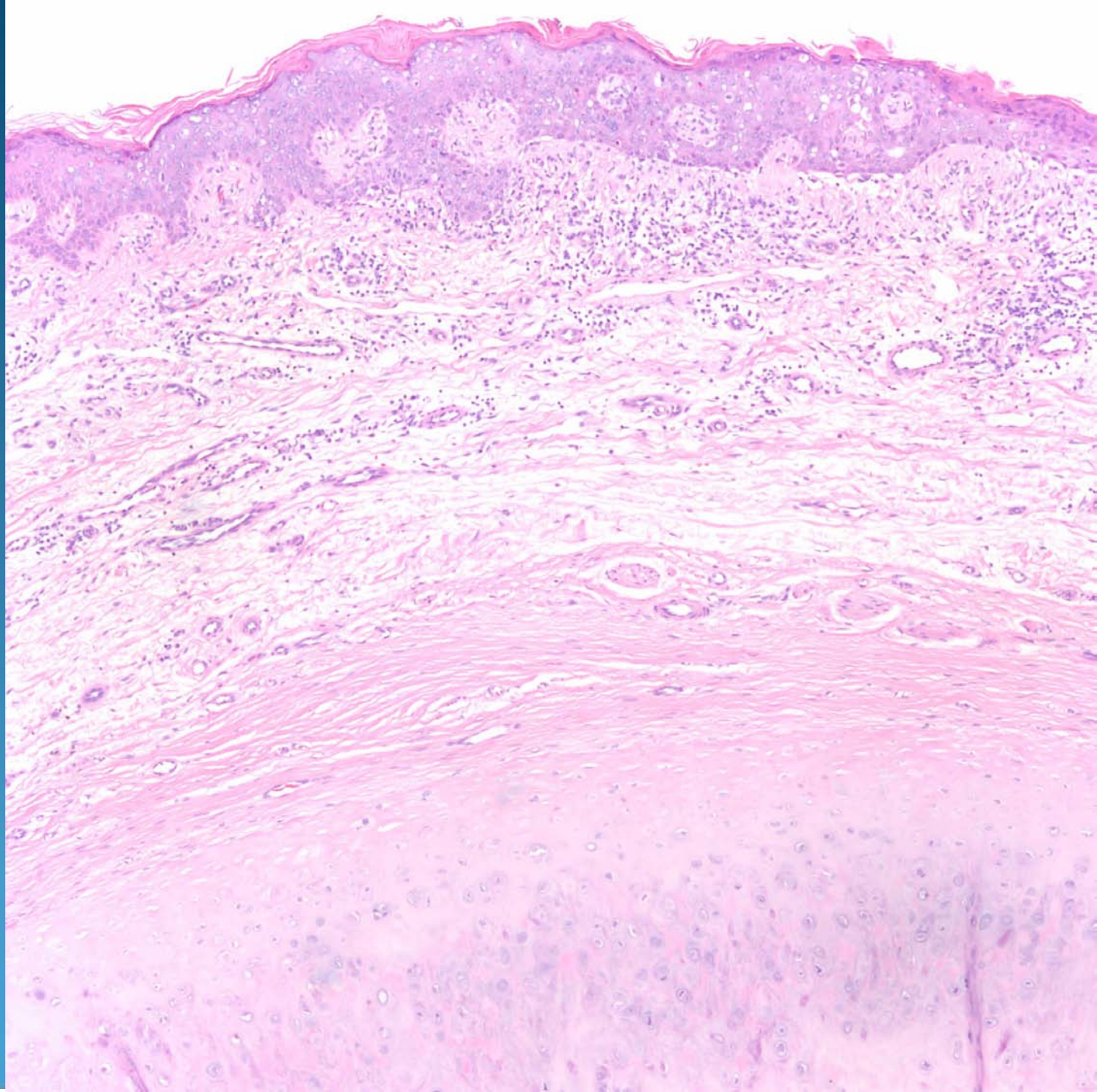


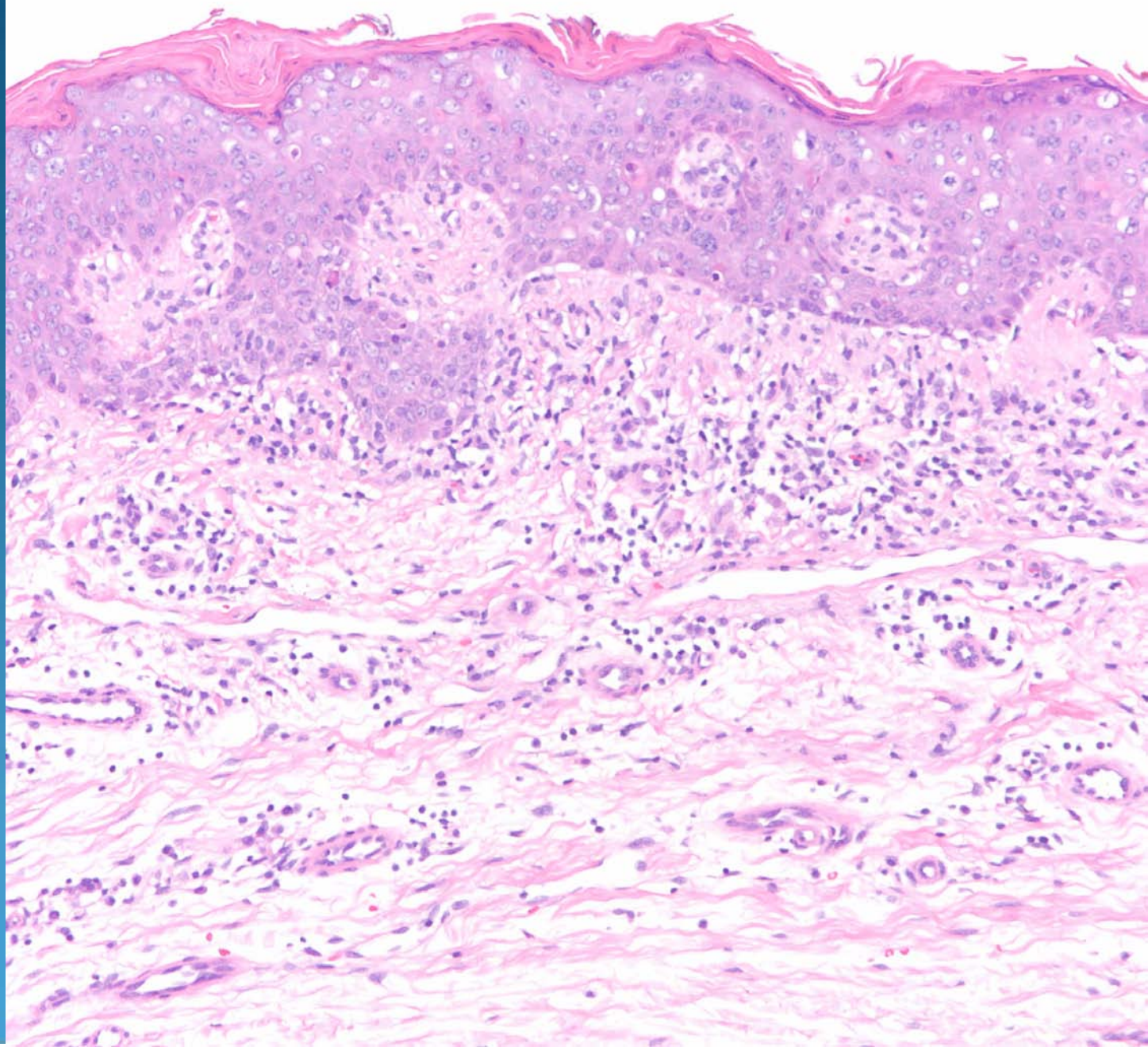
Pearls

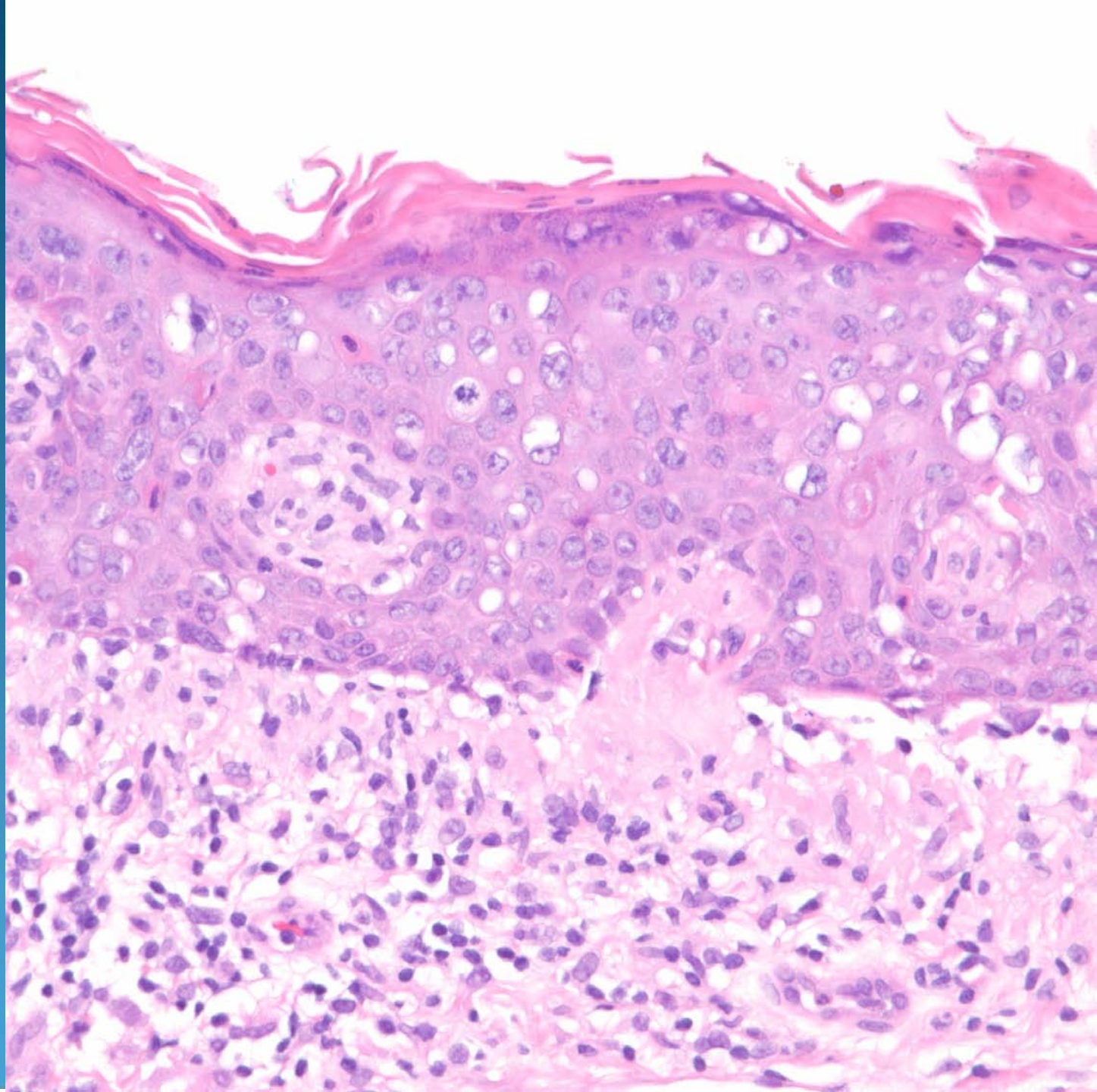


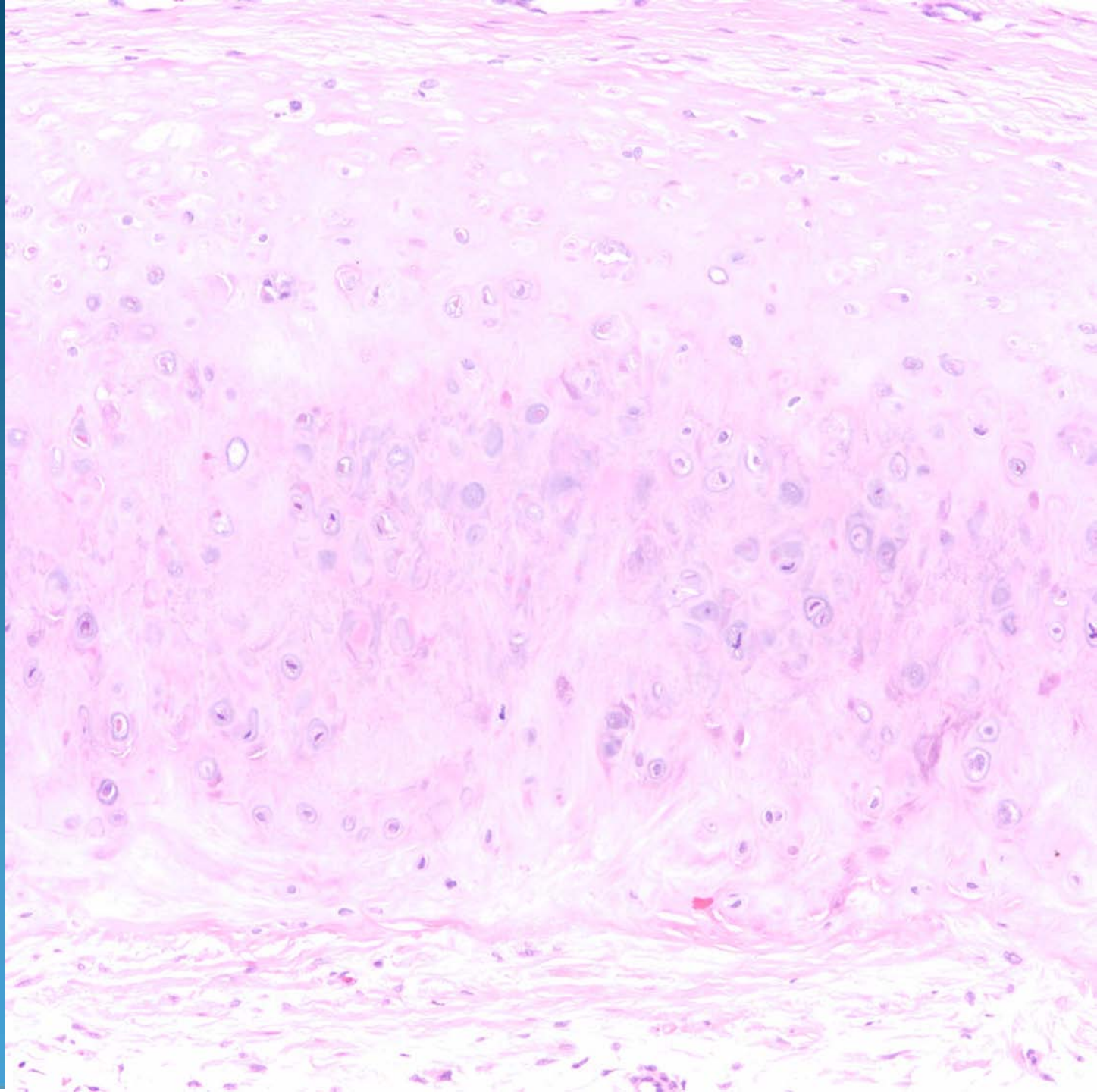
- Sandwich of layers of stratum corneum with basophilic debris “sandwiched” between
- Confirm with GMS or PAS for fungus

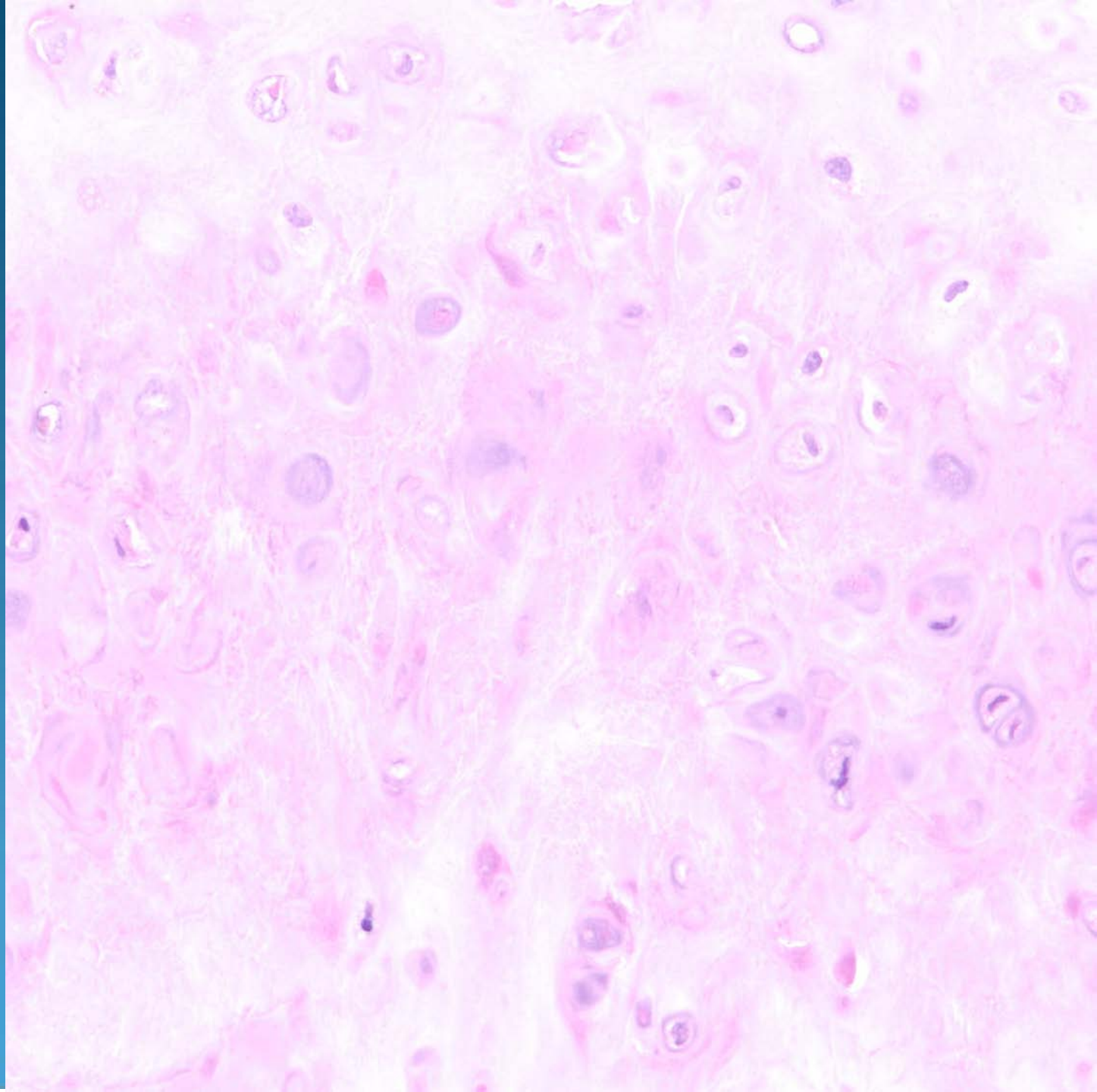






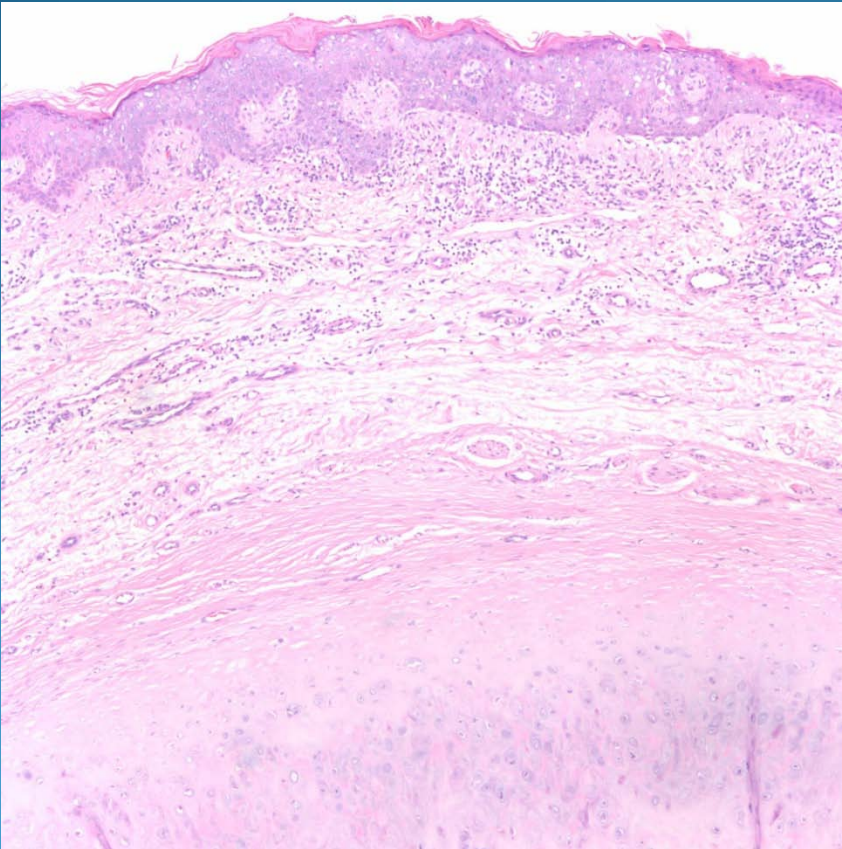






Squamous Cell Carcinoma in Situ, Excised from the Helix of the Ear

Pearls



- Conventional SCCIS but arising on ear
- Important to recognize cartilage to determine the site of the biopsy
- Learn normal cartilage to differentiate from neoplastic cartilage