Dermatopathology Slide Review Part 67

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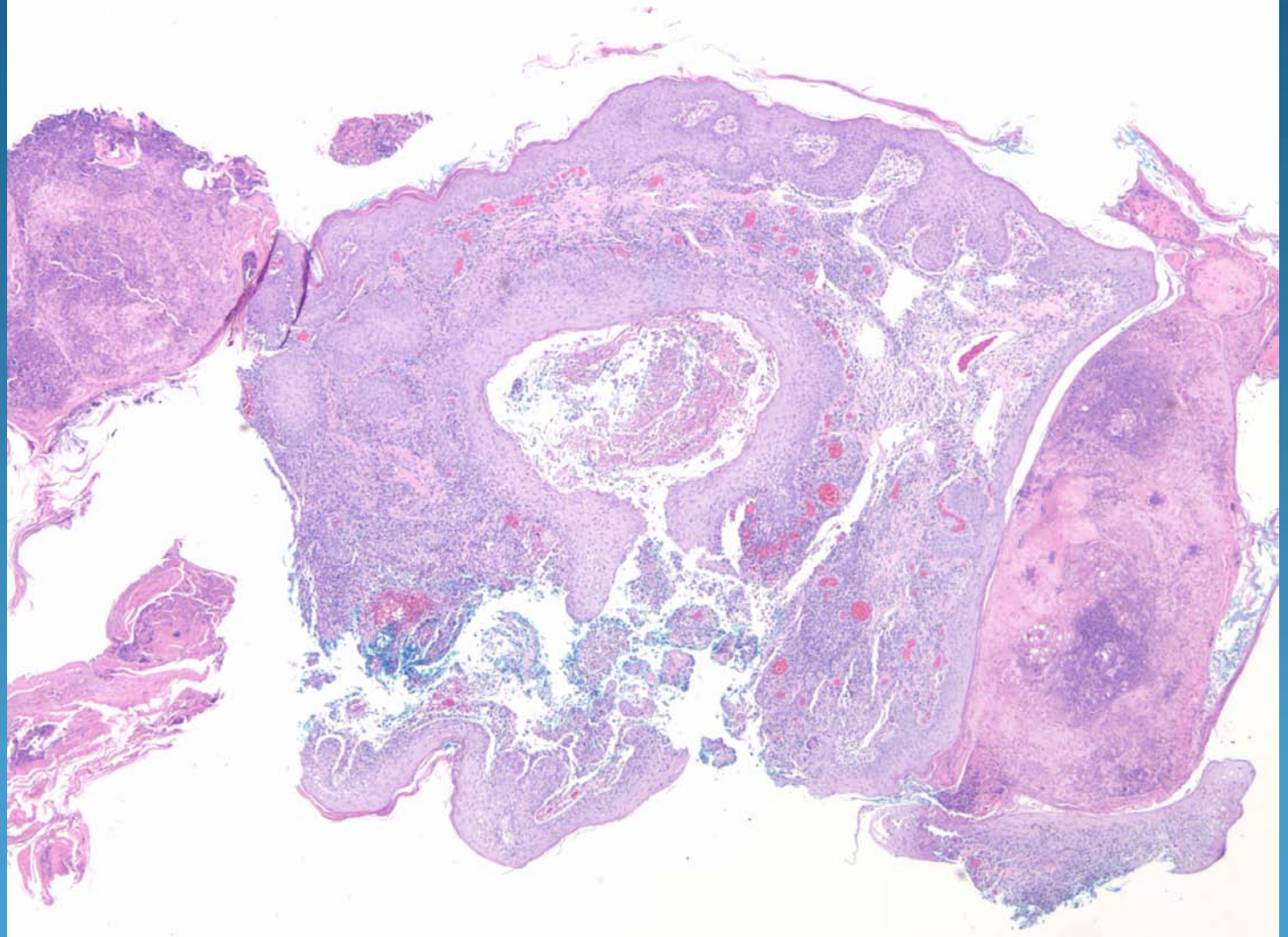
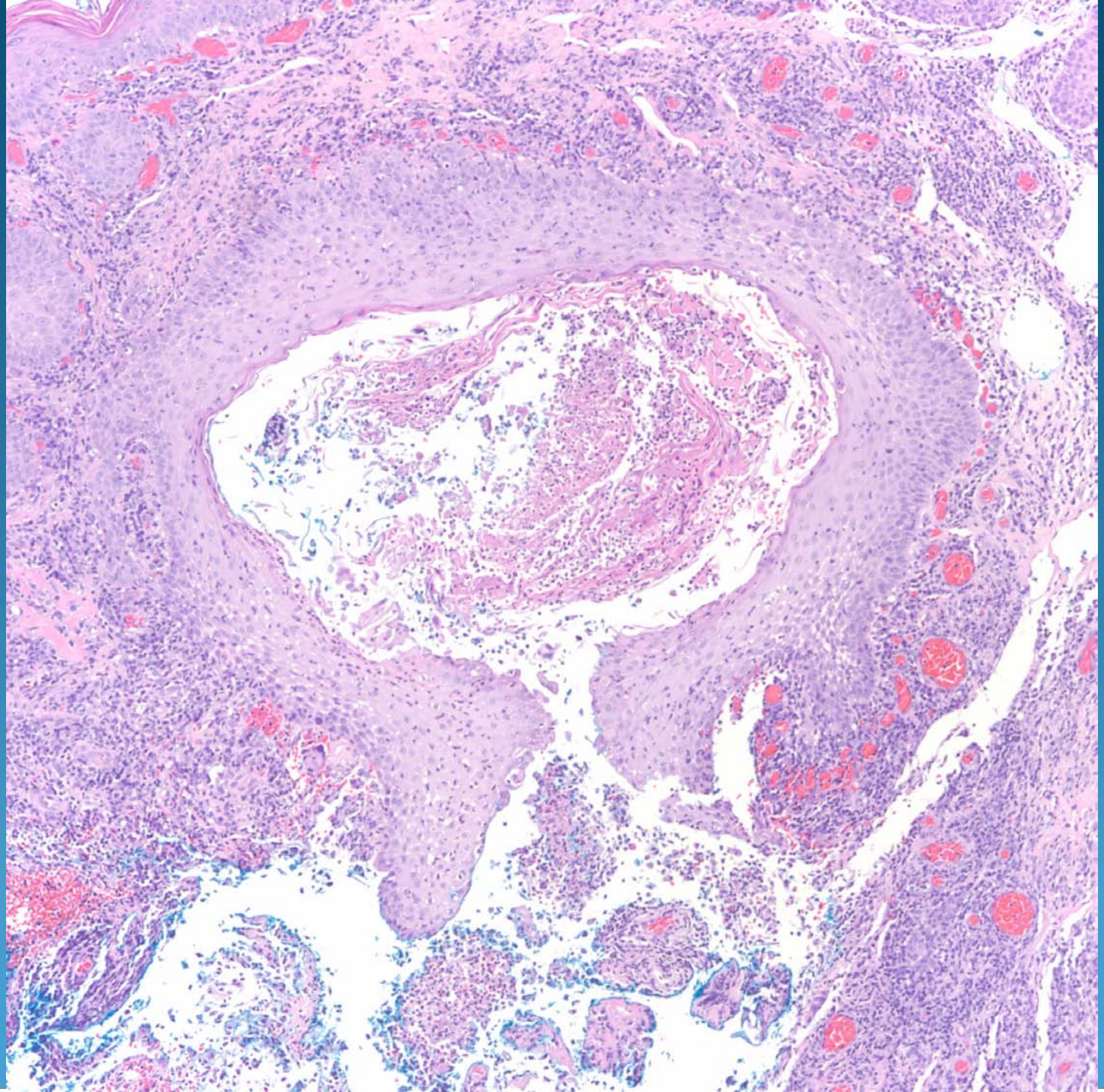
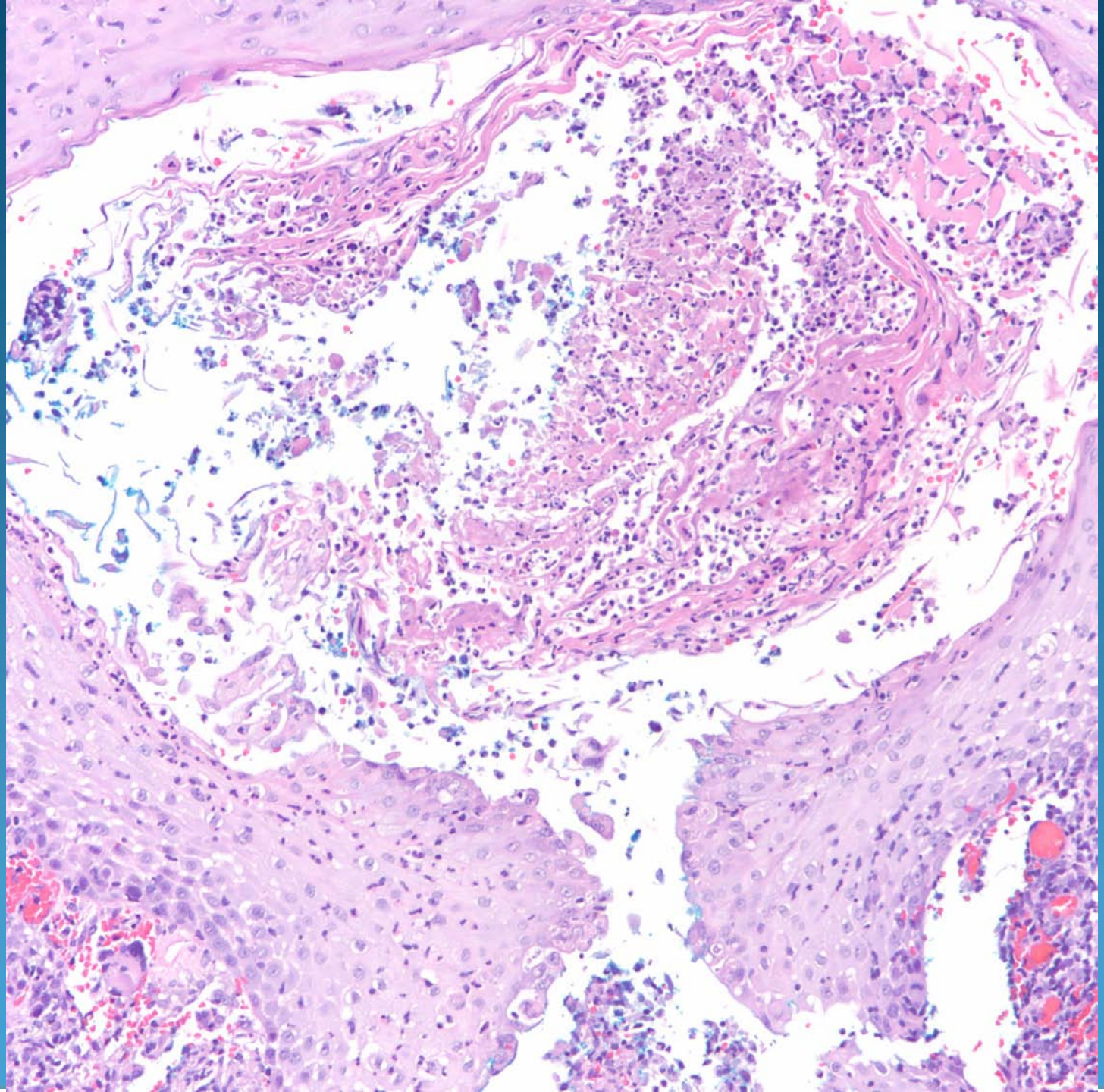
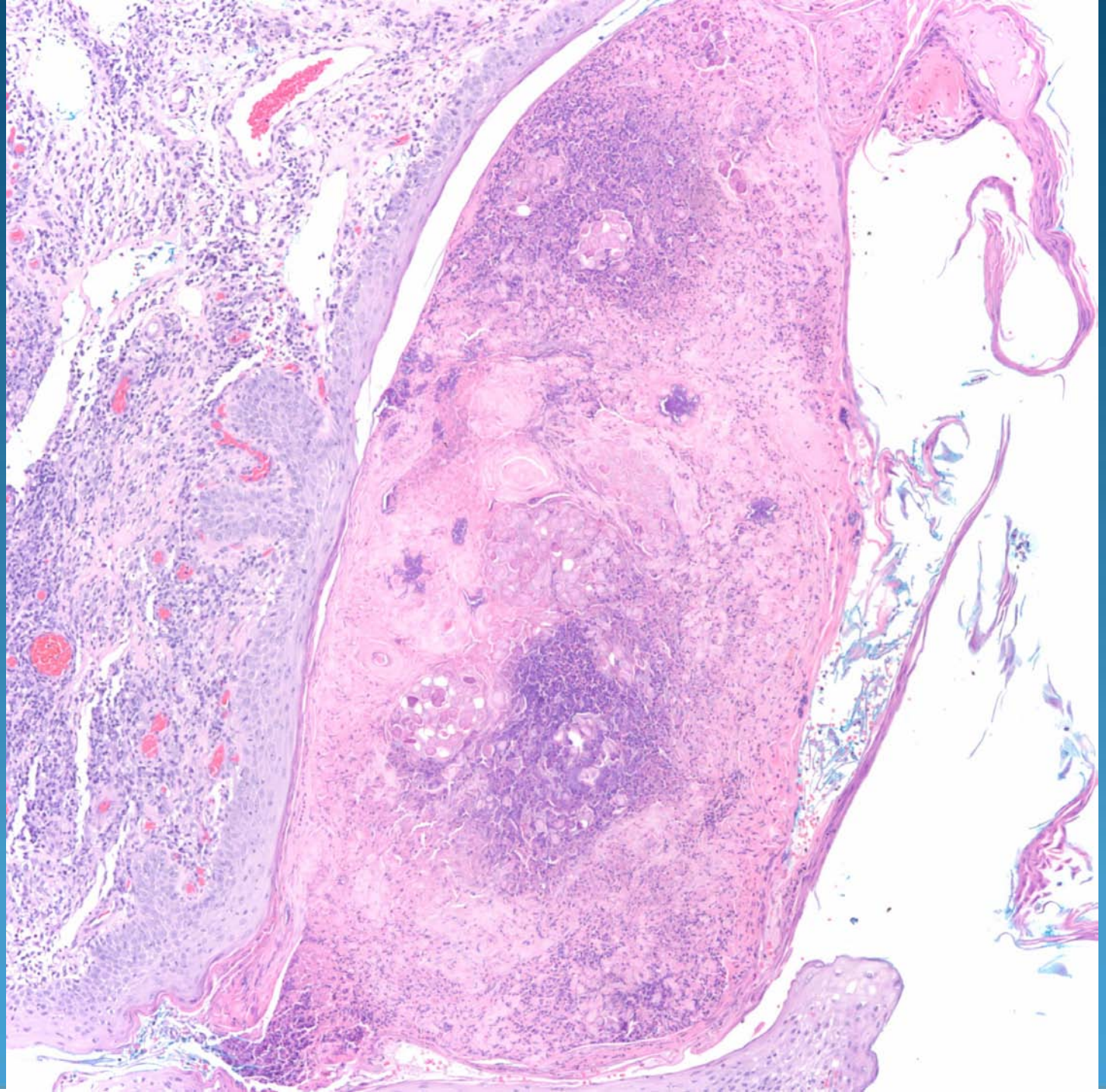
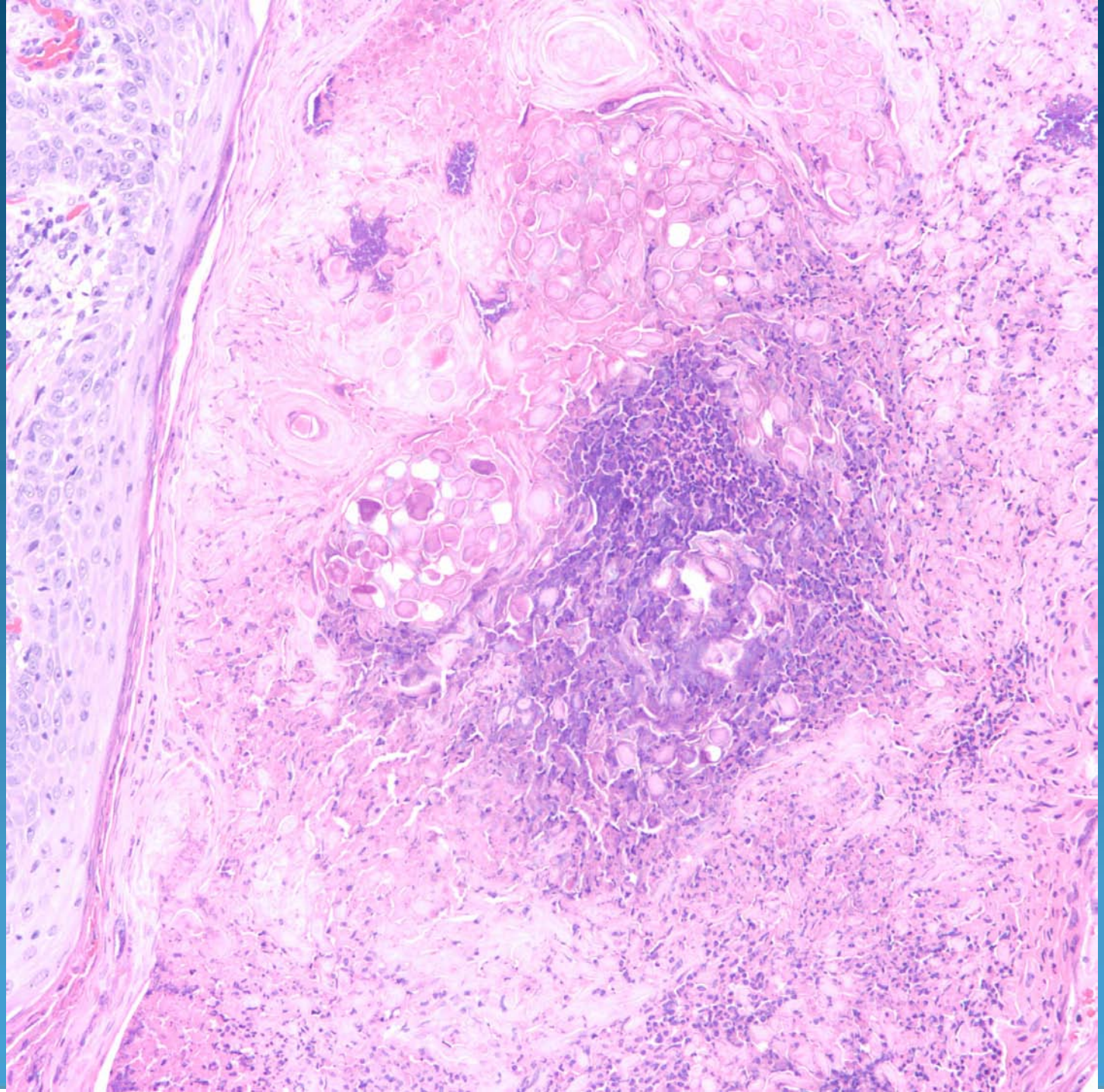
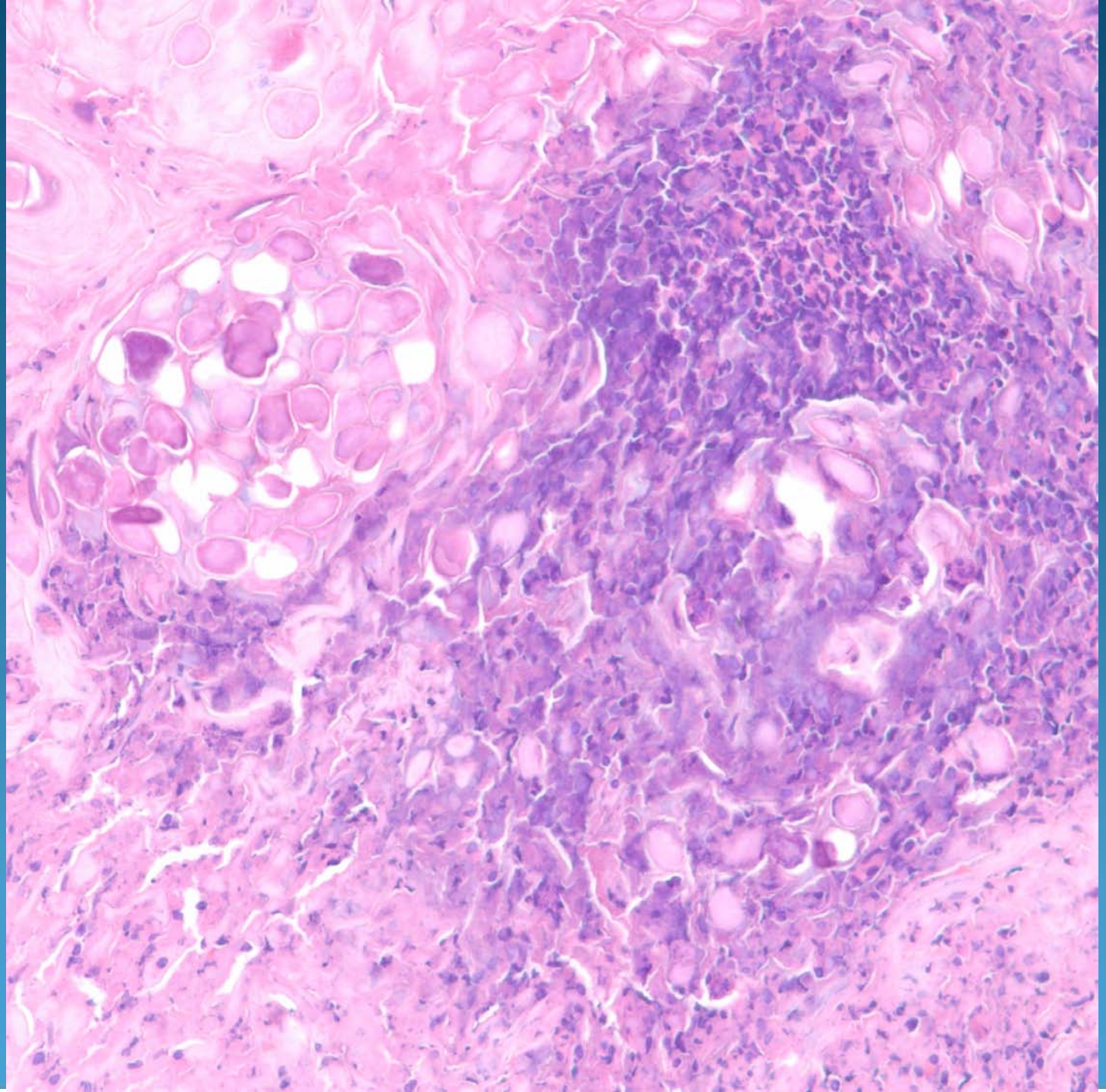


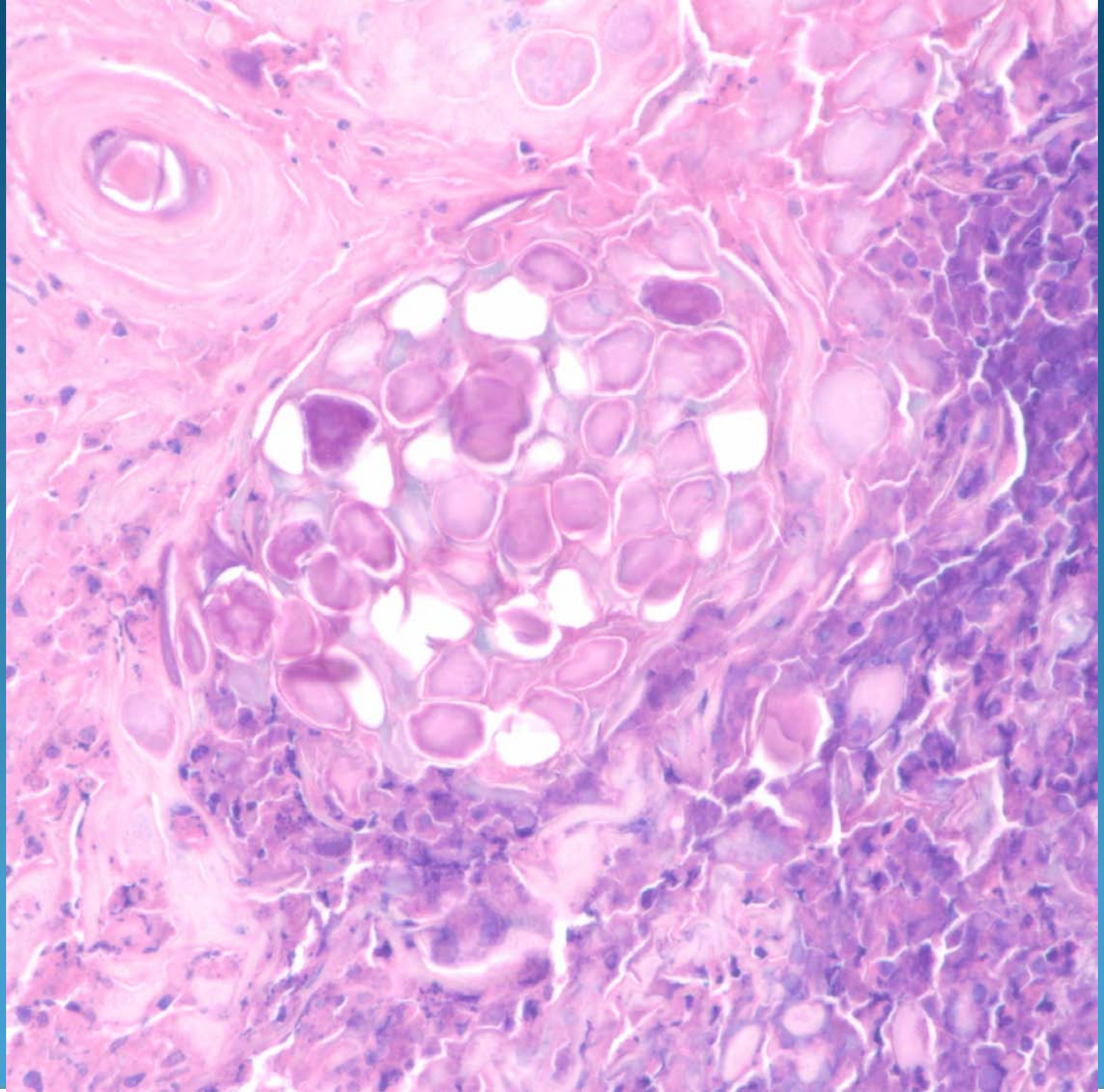






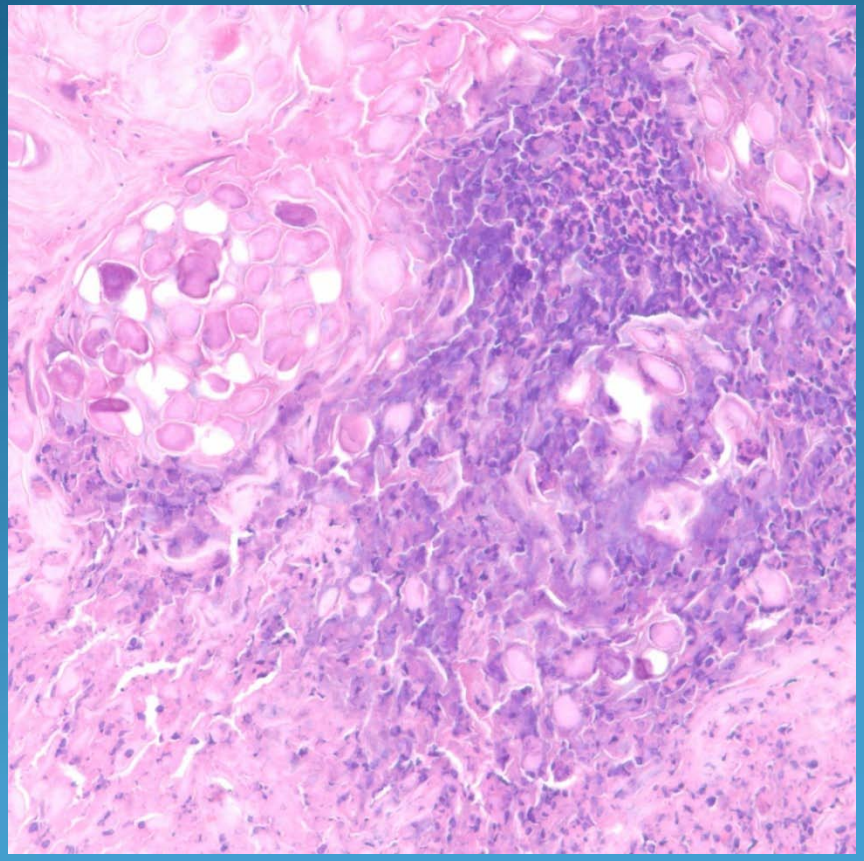




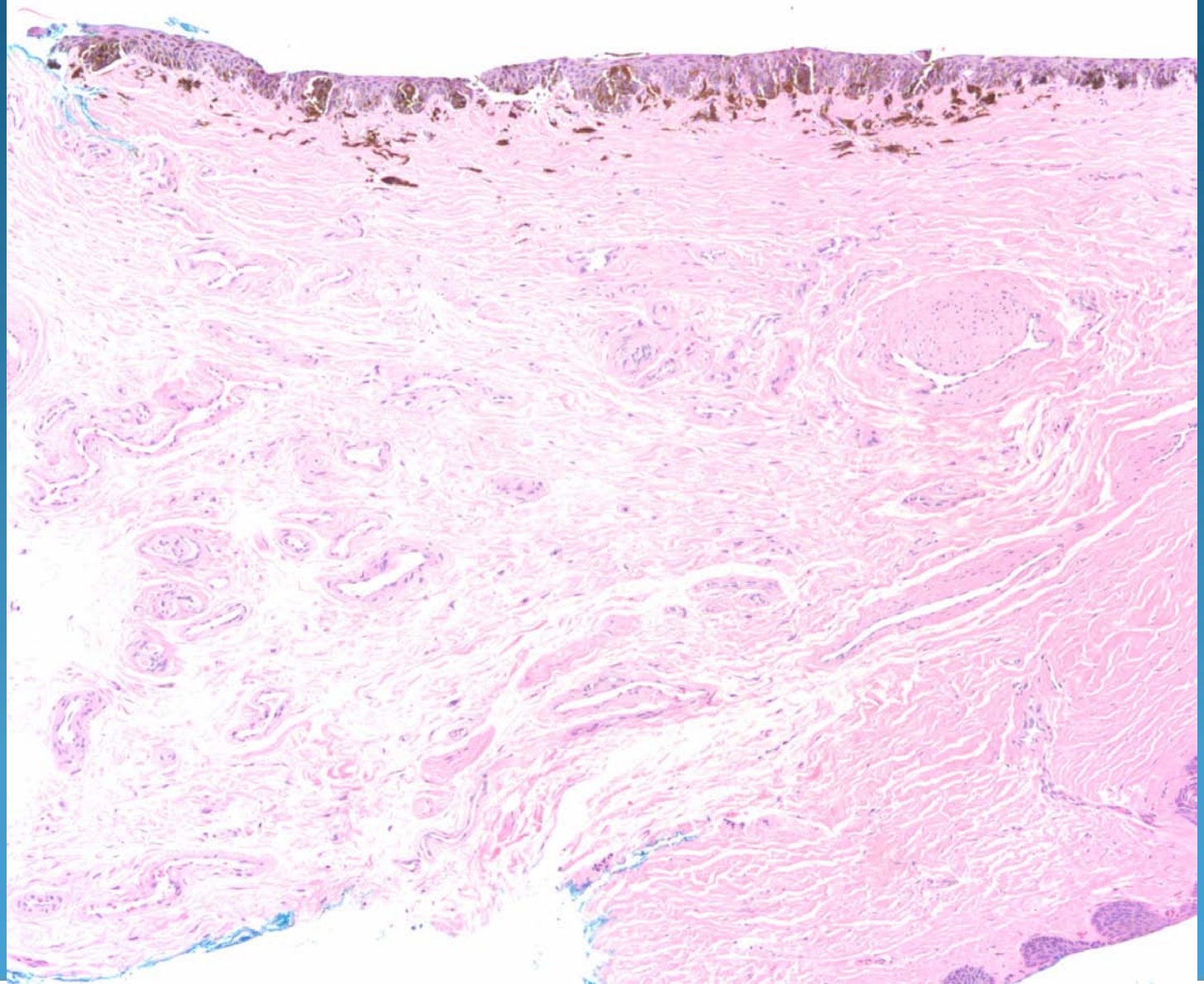


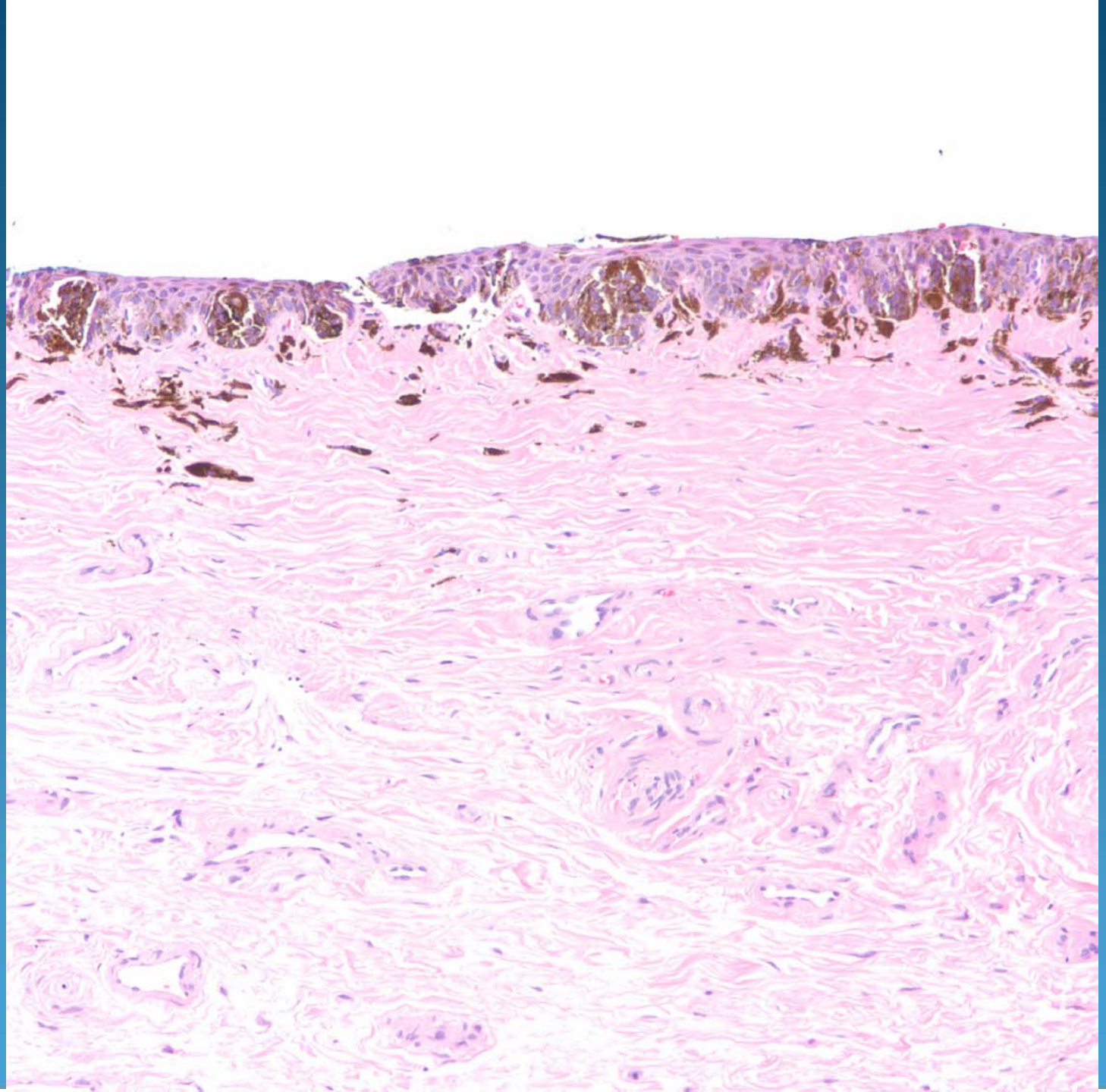
Molluscum contagiosum, inflamed (with ruptured folliculitis)

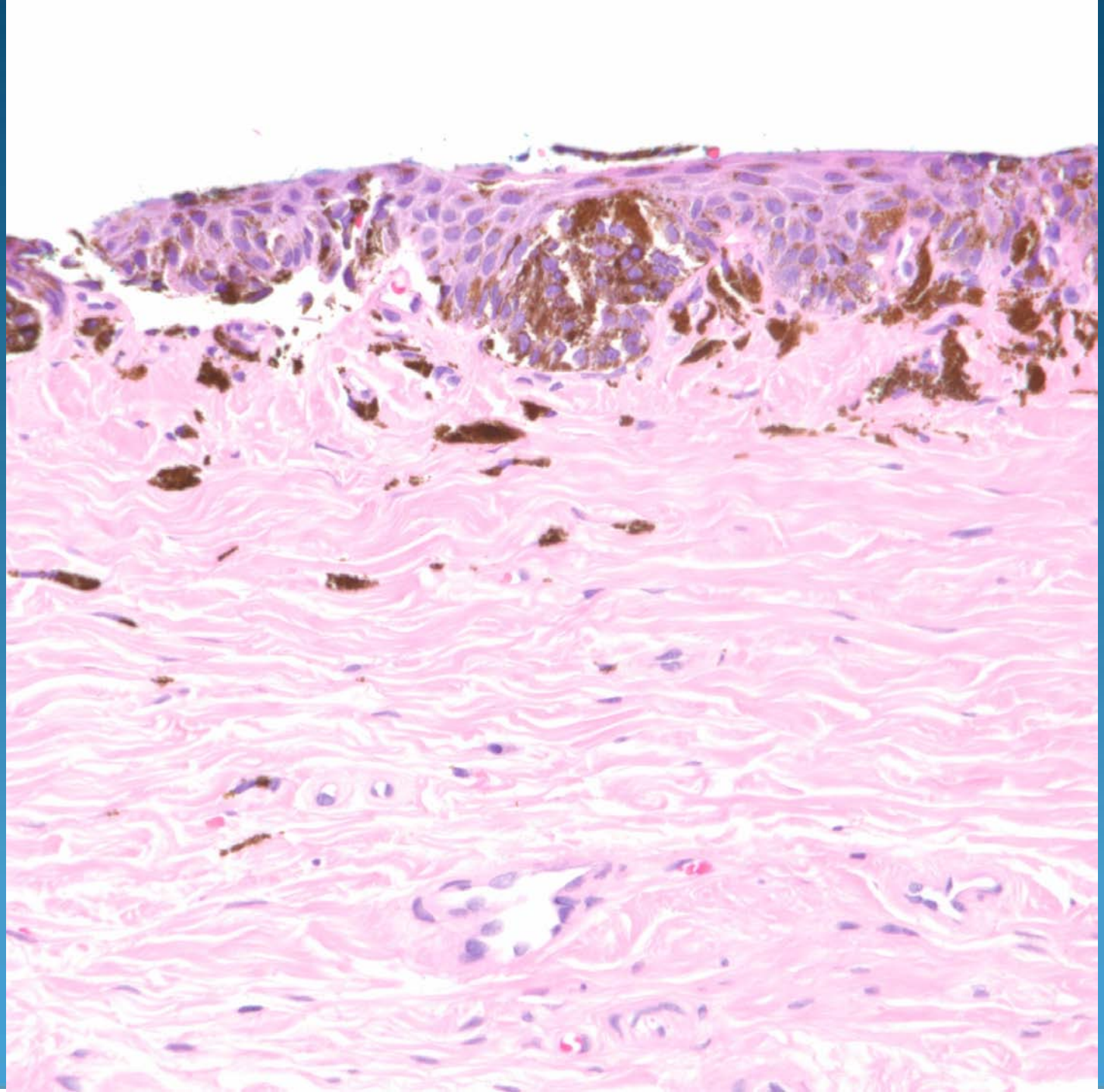
Pearls

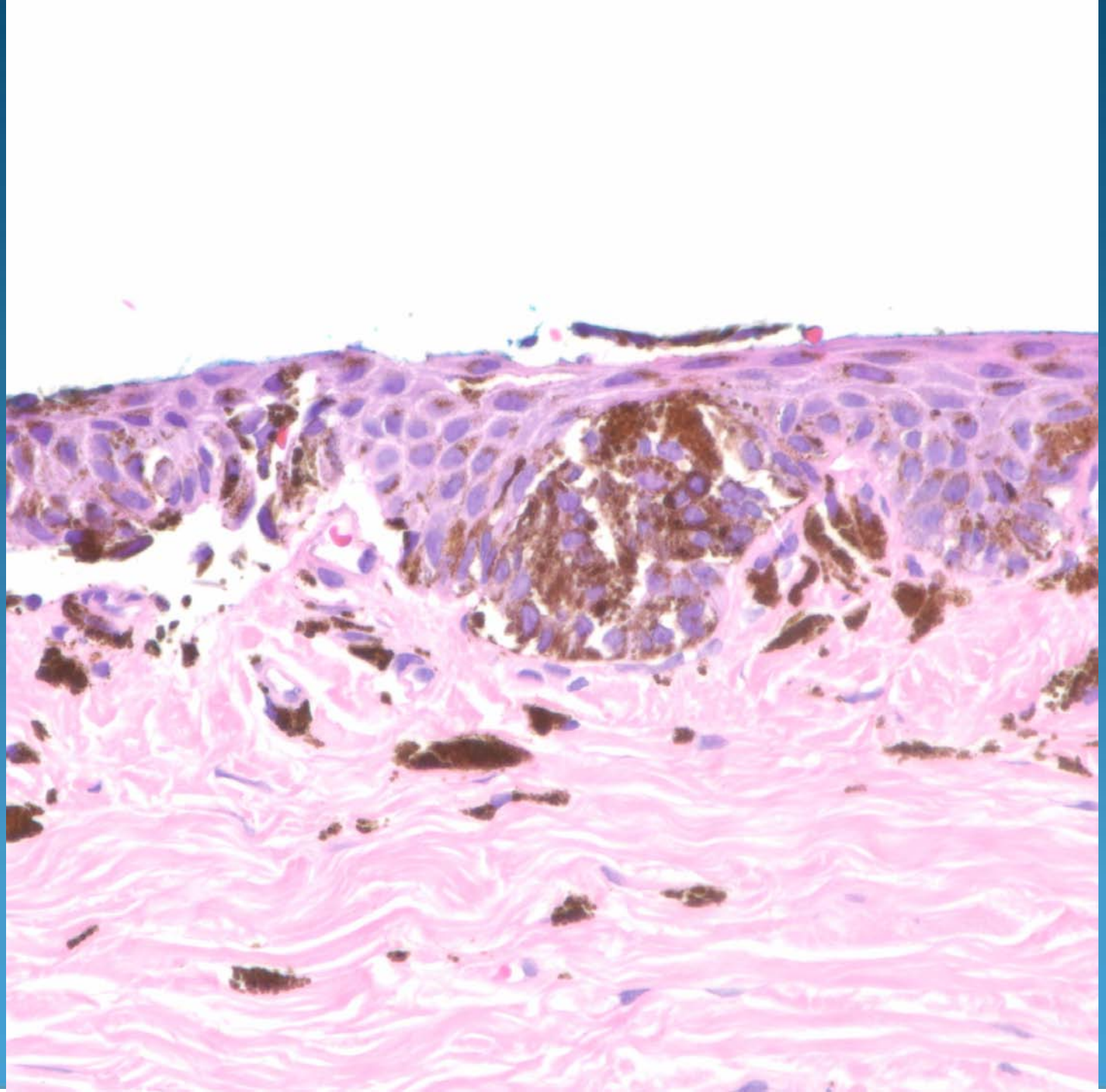


- Occasionally molluscum bodies (viral cytopathic changes) may be obscured by inflammation including granulomas or folliculitis
- Always examine hair follicles and inflammatory exudate, especially in a folliculitis in a younger person



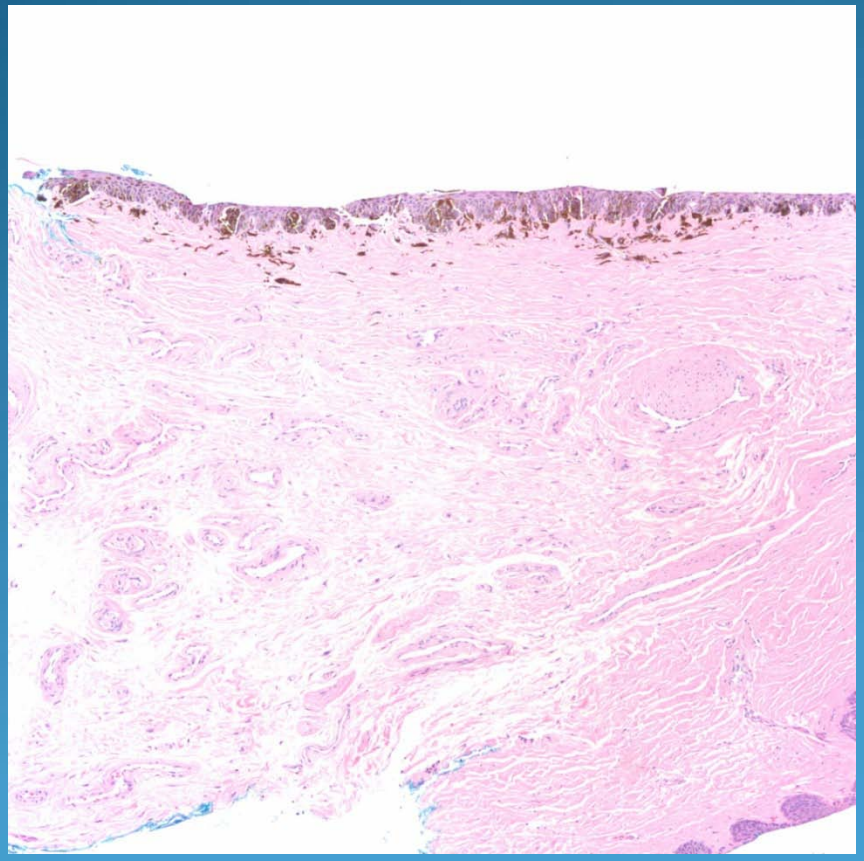




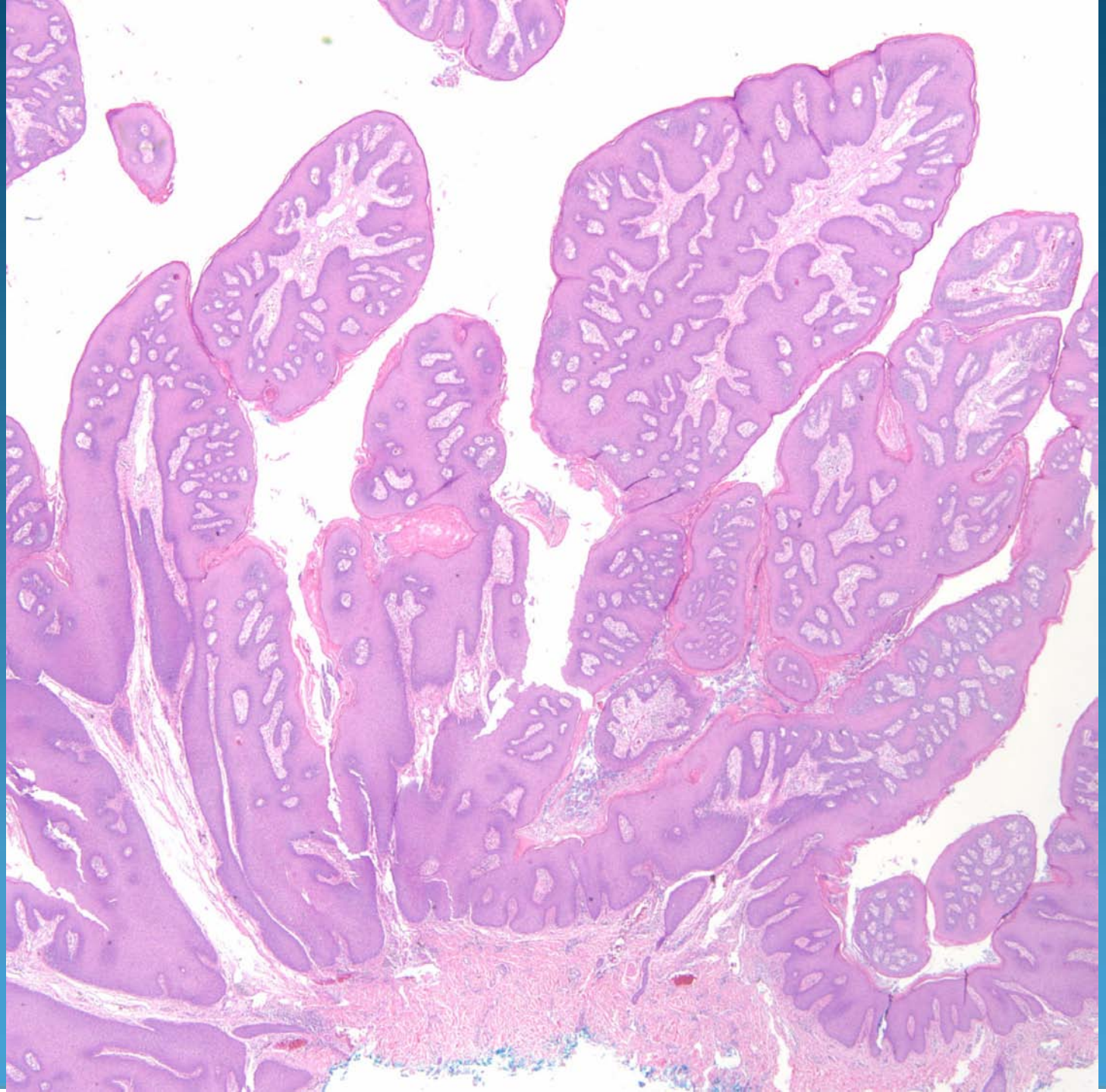


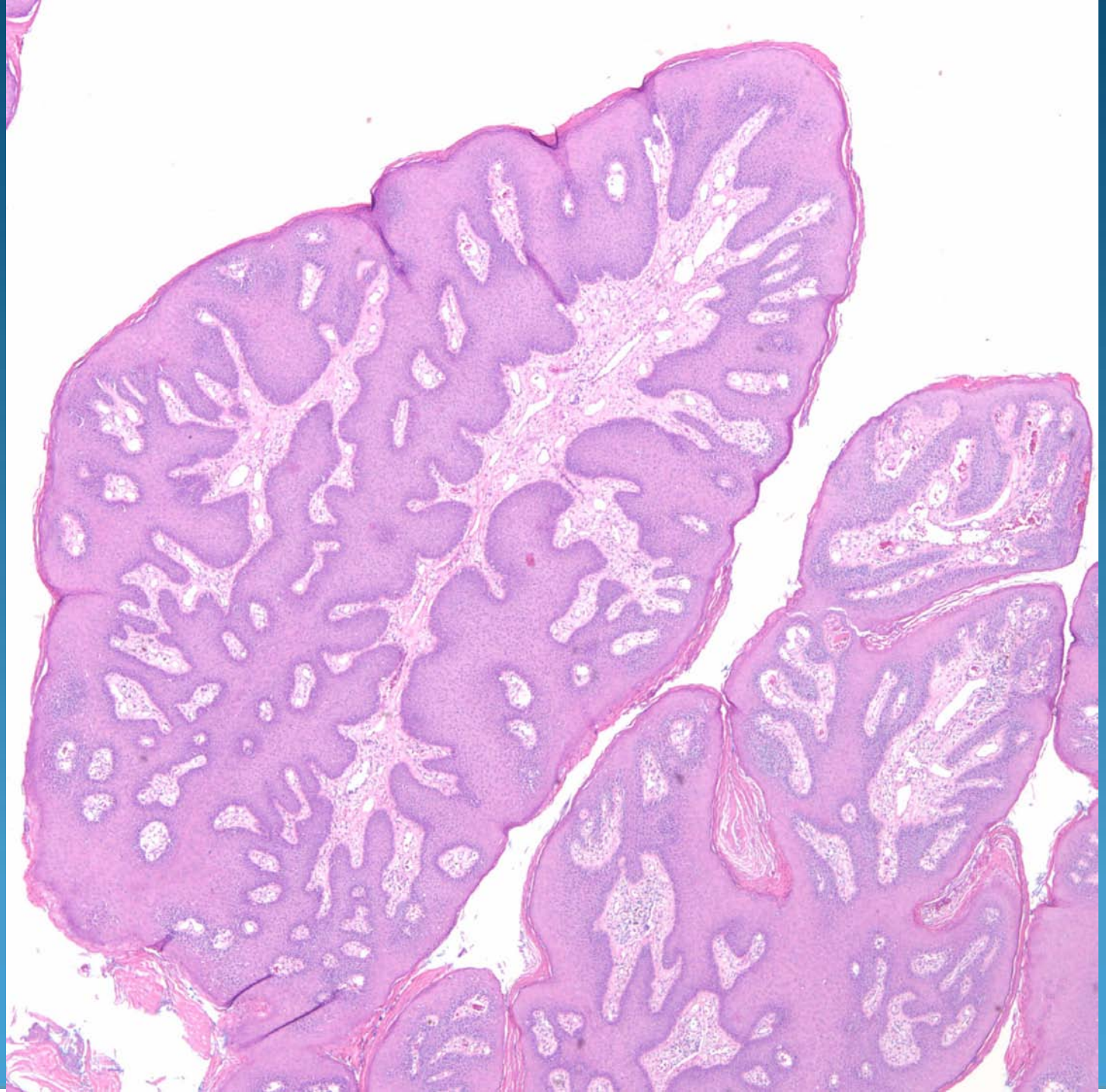
Melanocytic Nevus of Nail

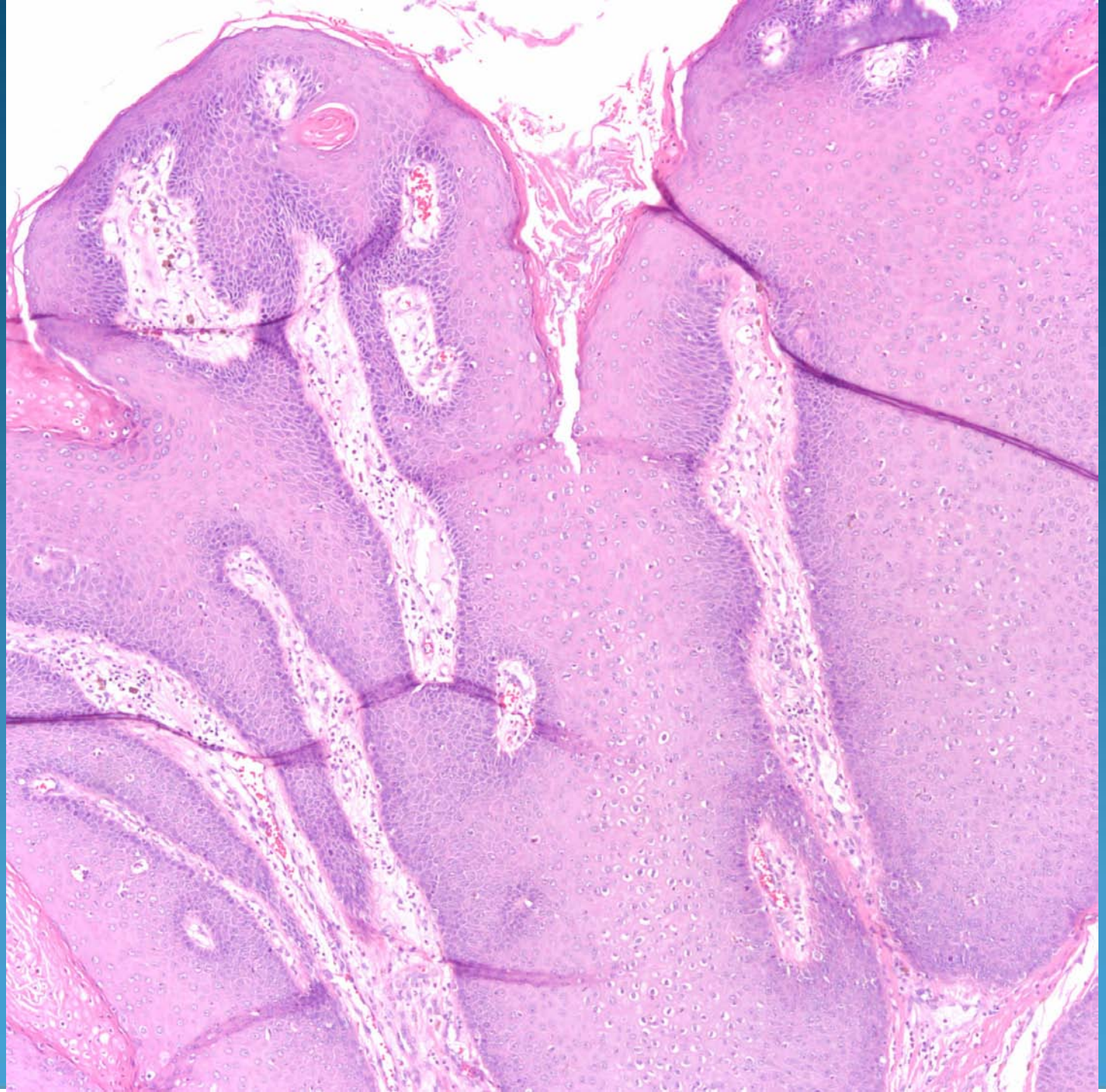
Pearls

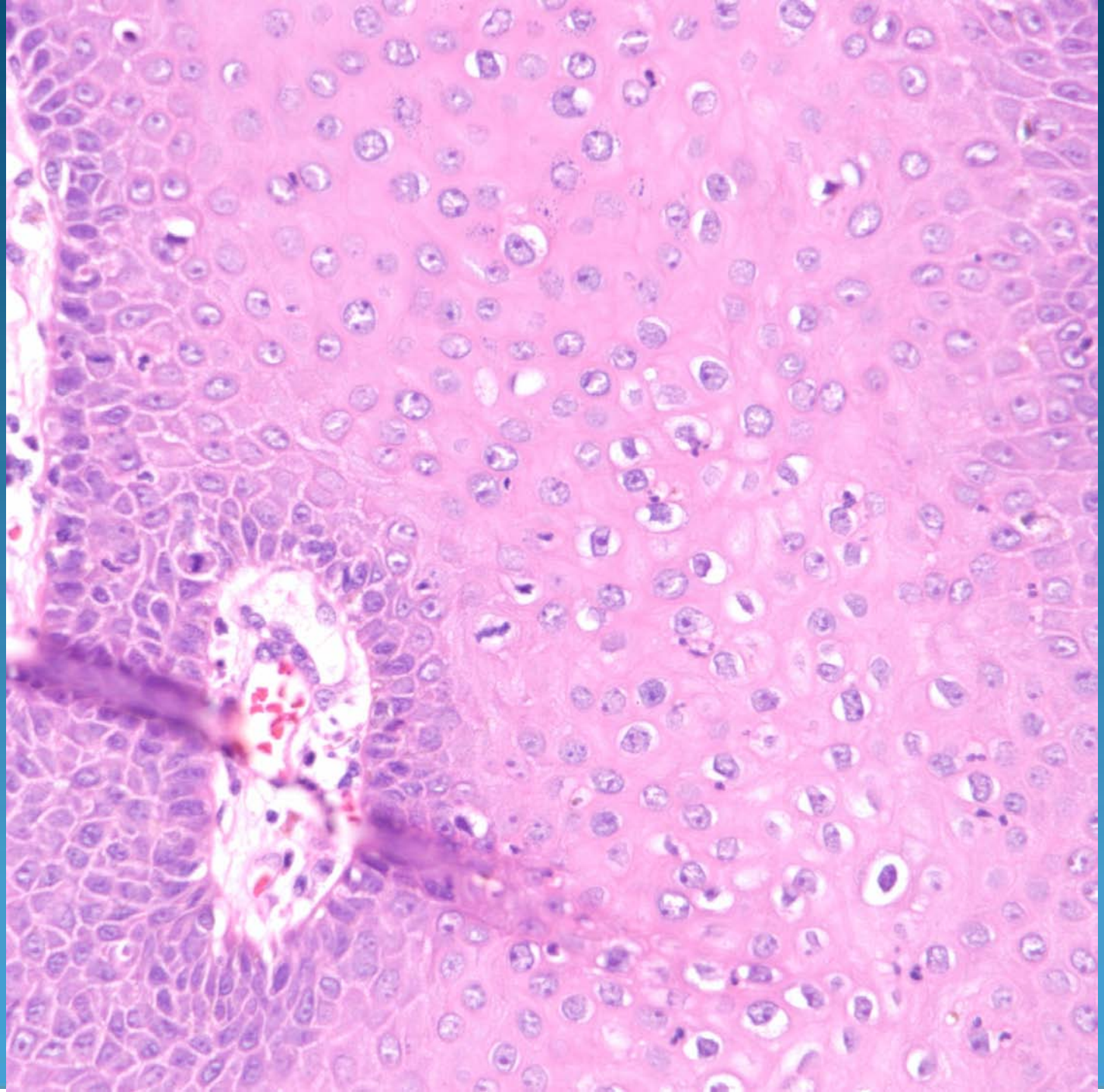


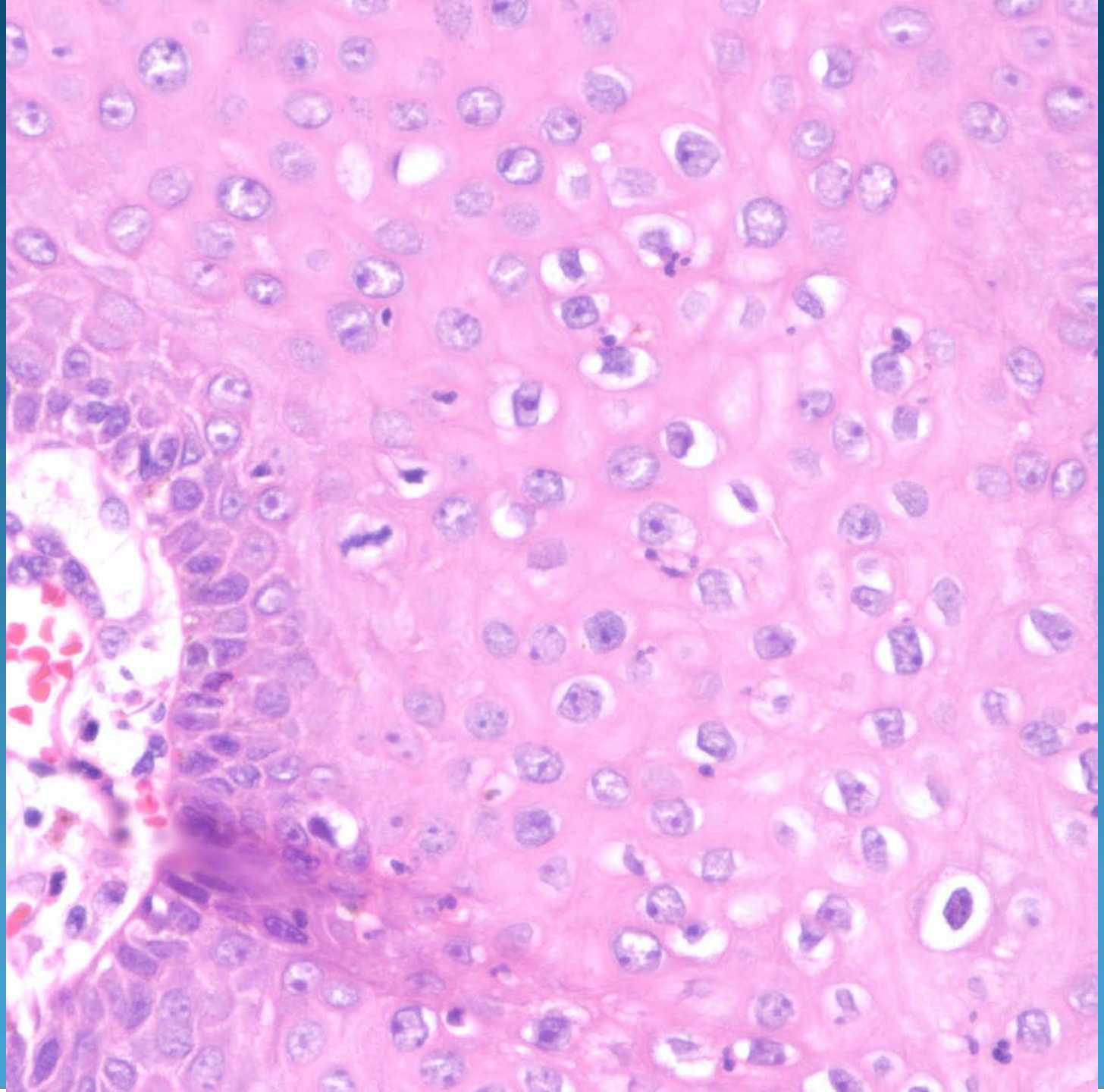
- Must recognize the squamous epithelium of nail fold/nail matrix
- Should have even pigmentation and minimal variation of size and shape of melanocytic nuclei
- Always cut deepers to rule out hidden atypia
- Correlate with clinical appearance.





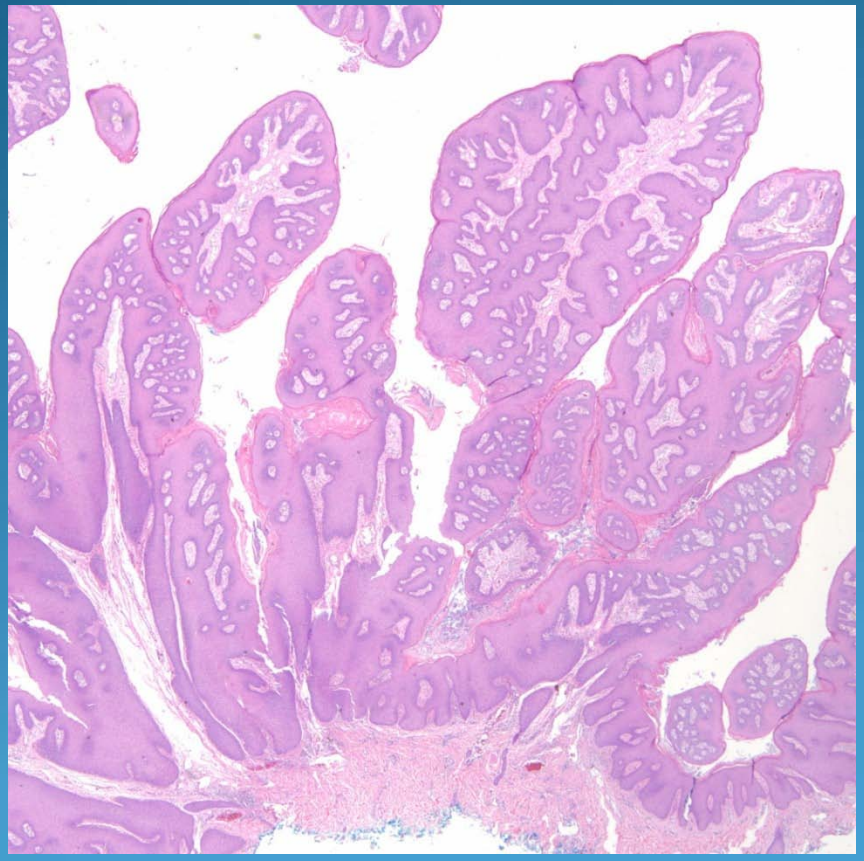




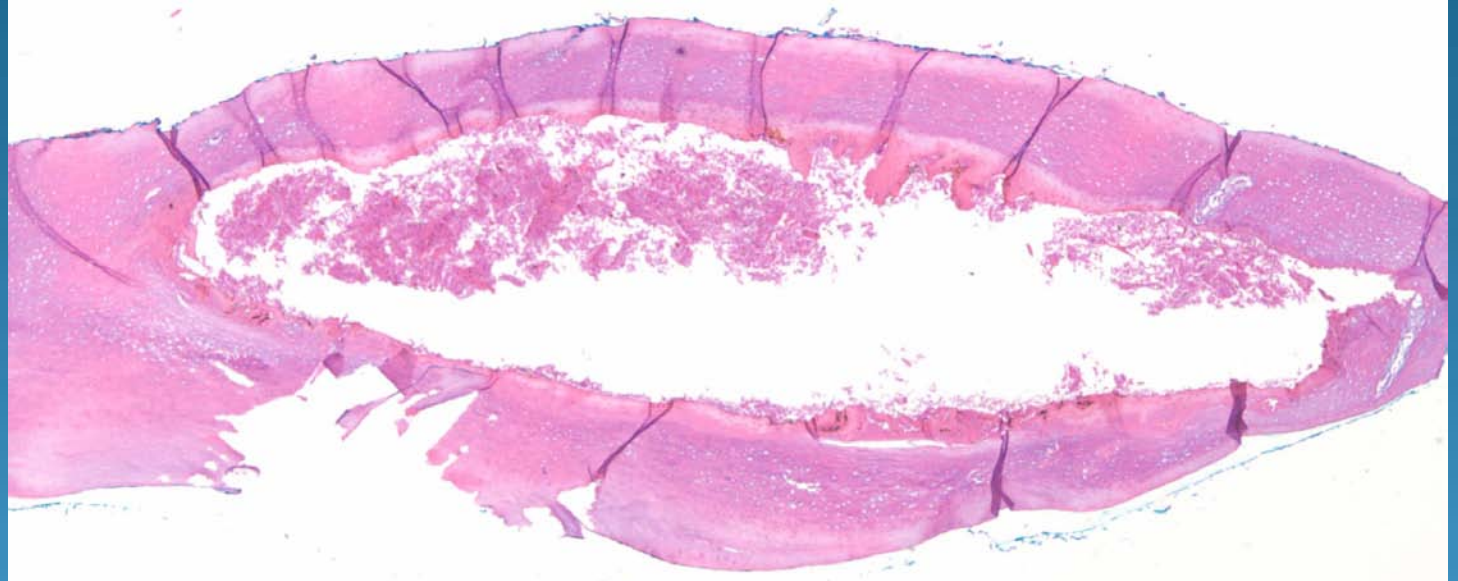


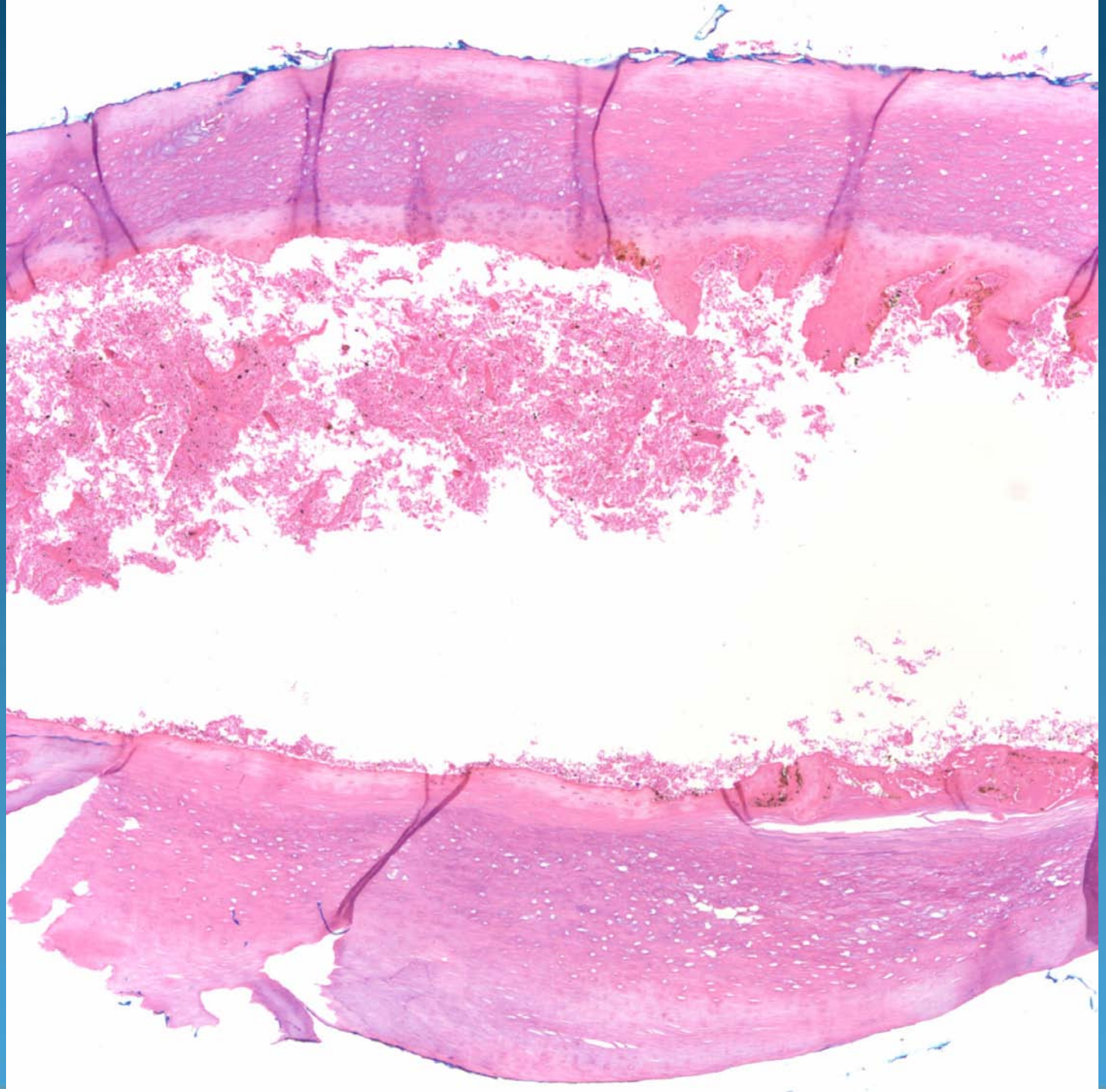
Condyloma accuminatum

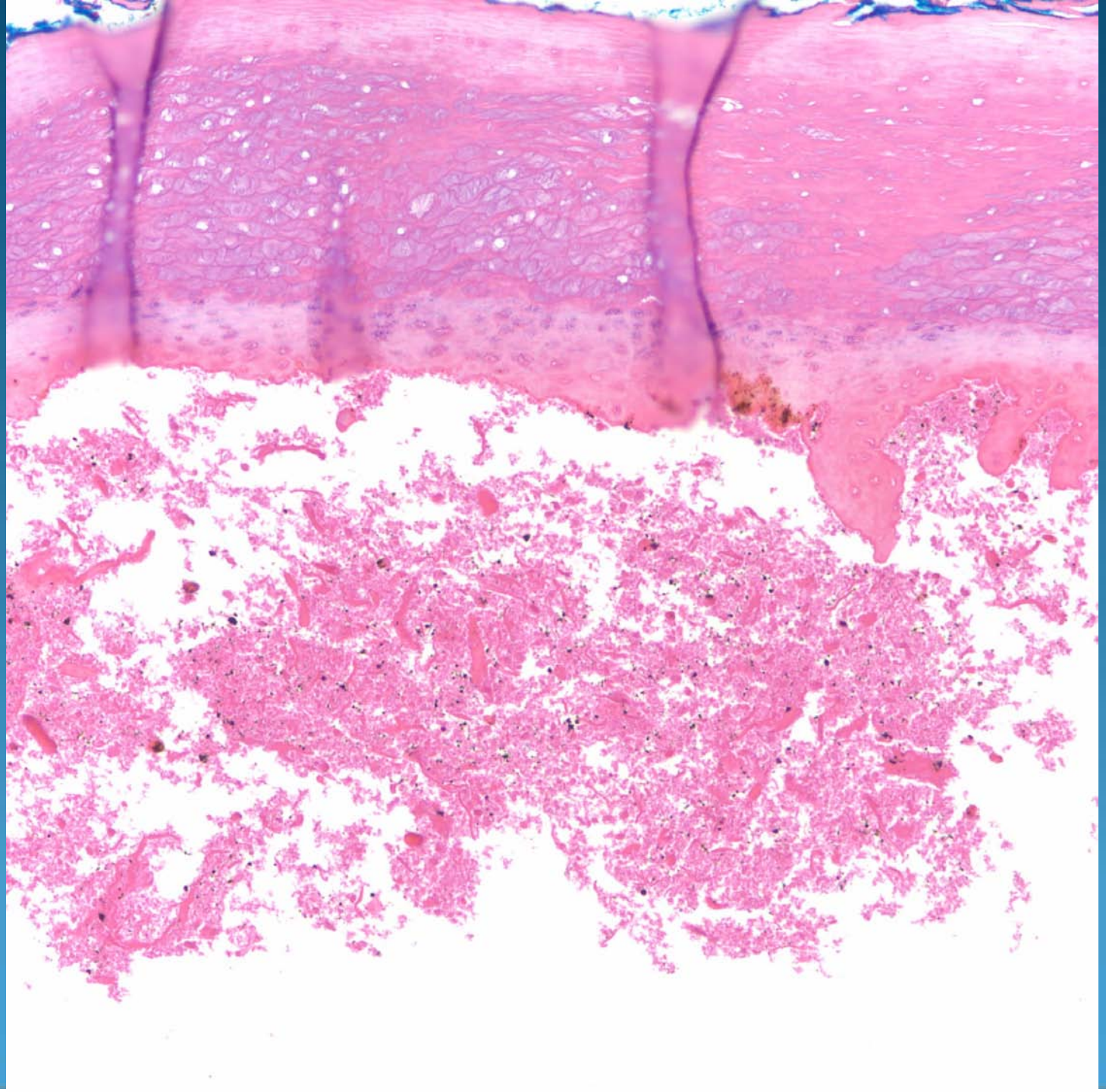
Pearls

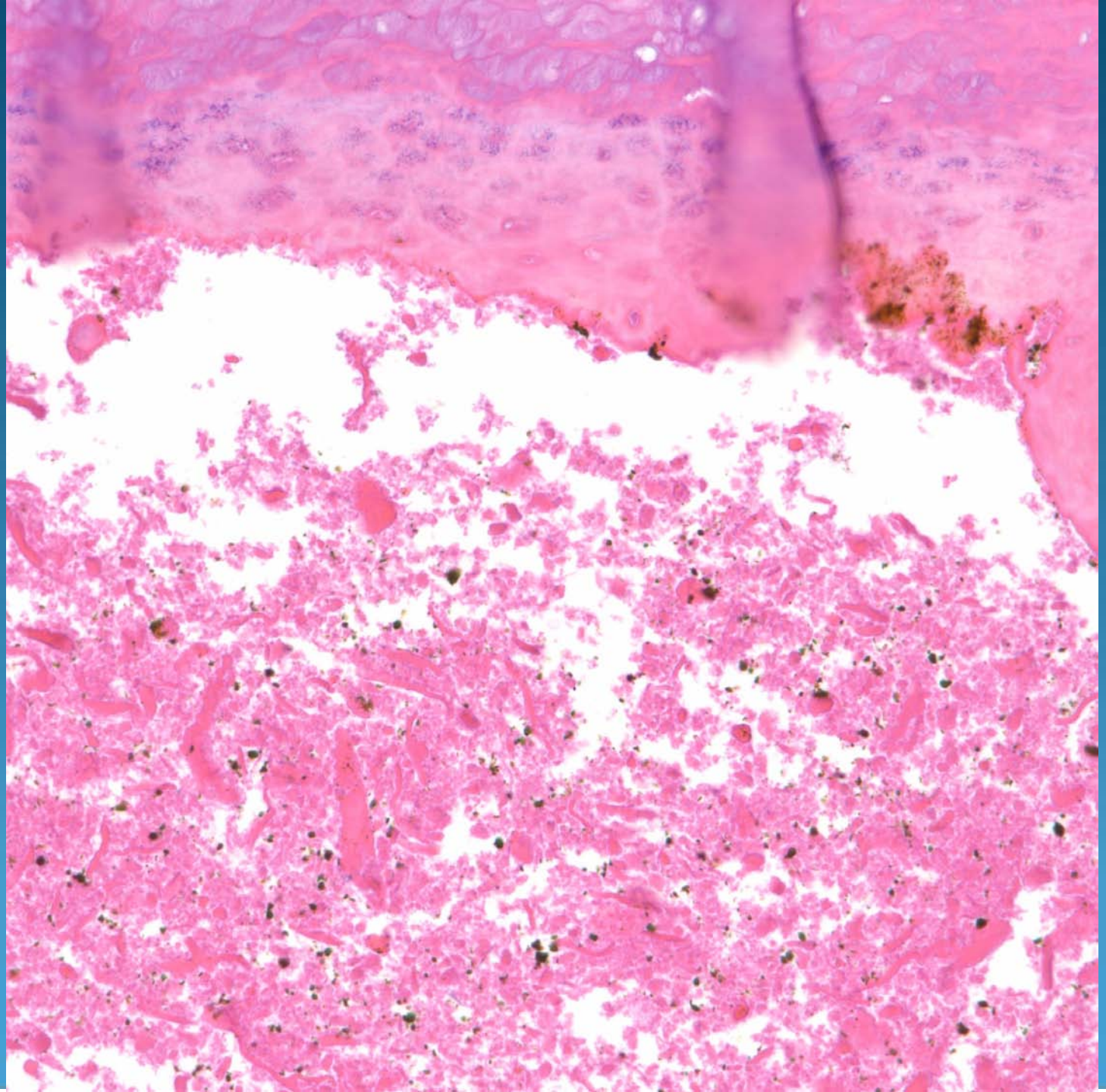


- Papillary fronds of squamous epithelium with fibrovascular core
- Superficial koilocytes
- Always examine base to exclude squamous dysplasia or invasive carcinoma



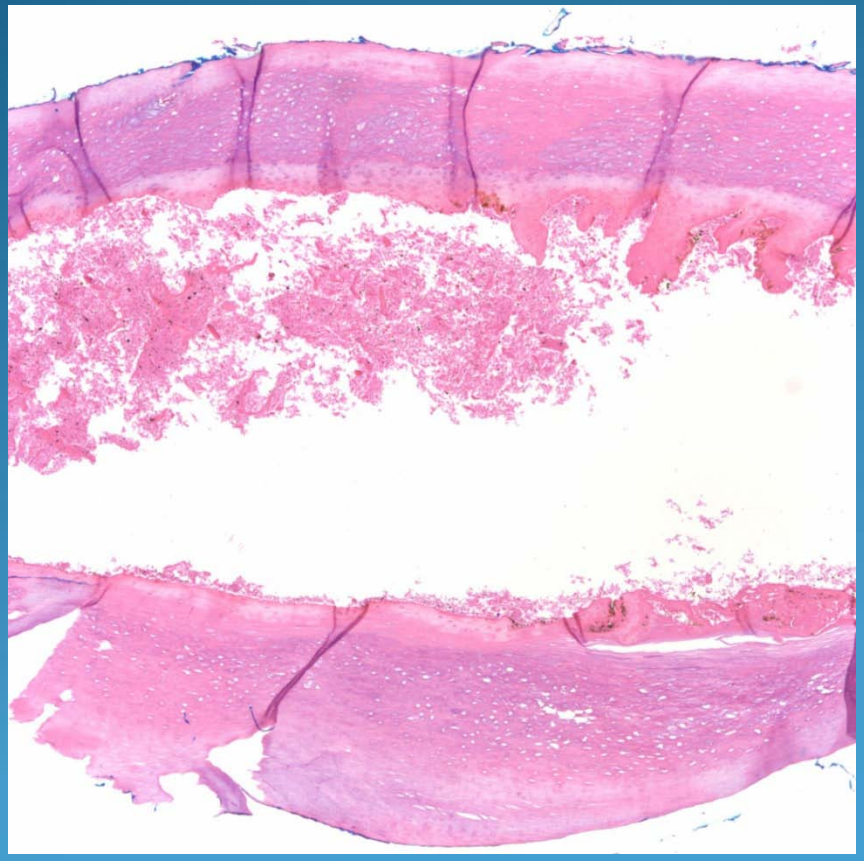




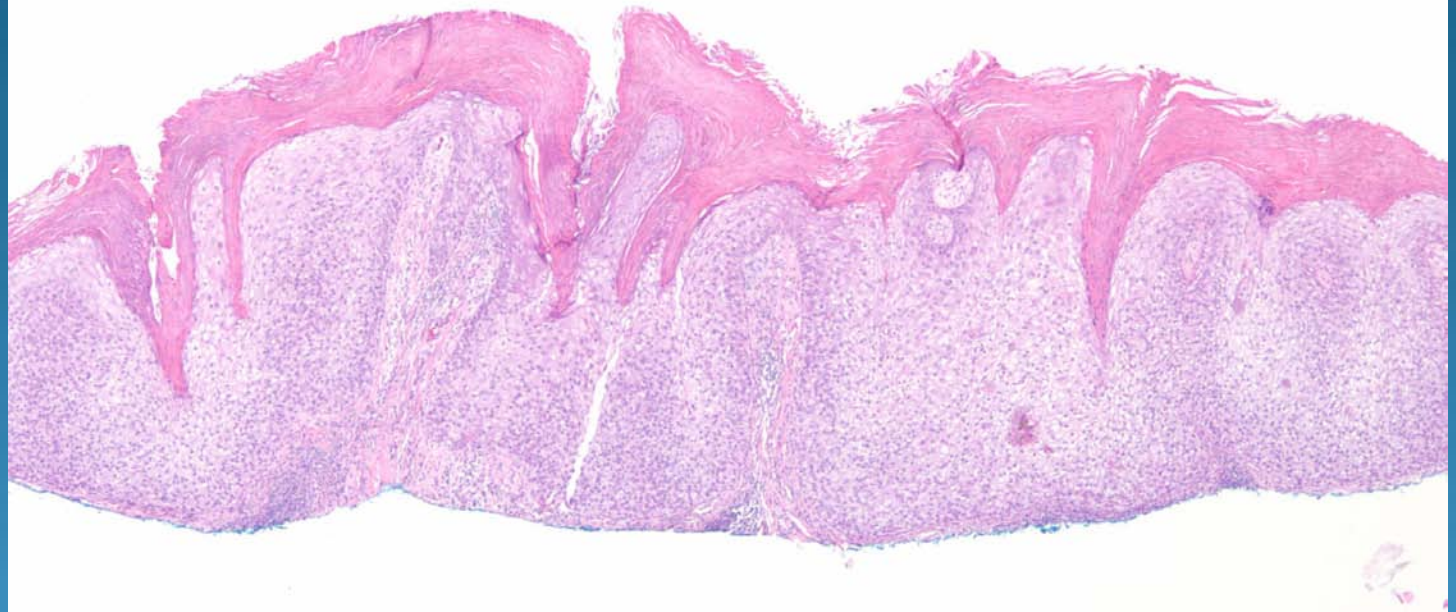


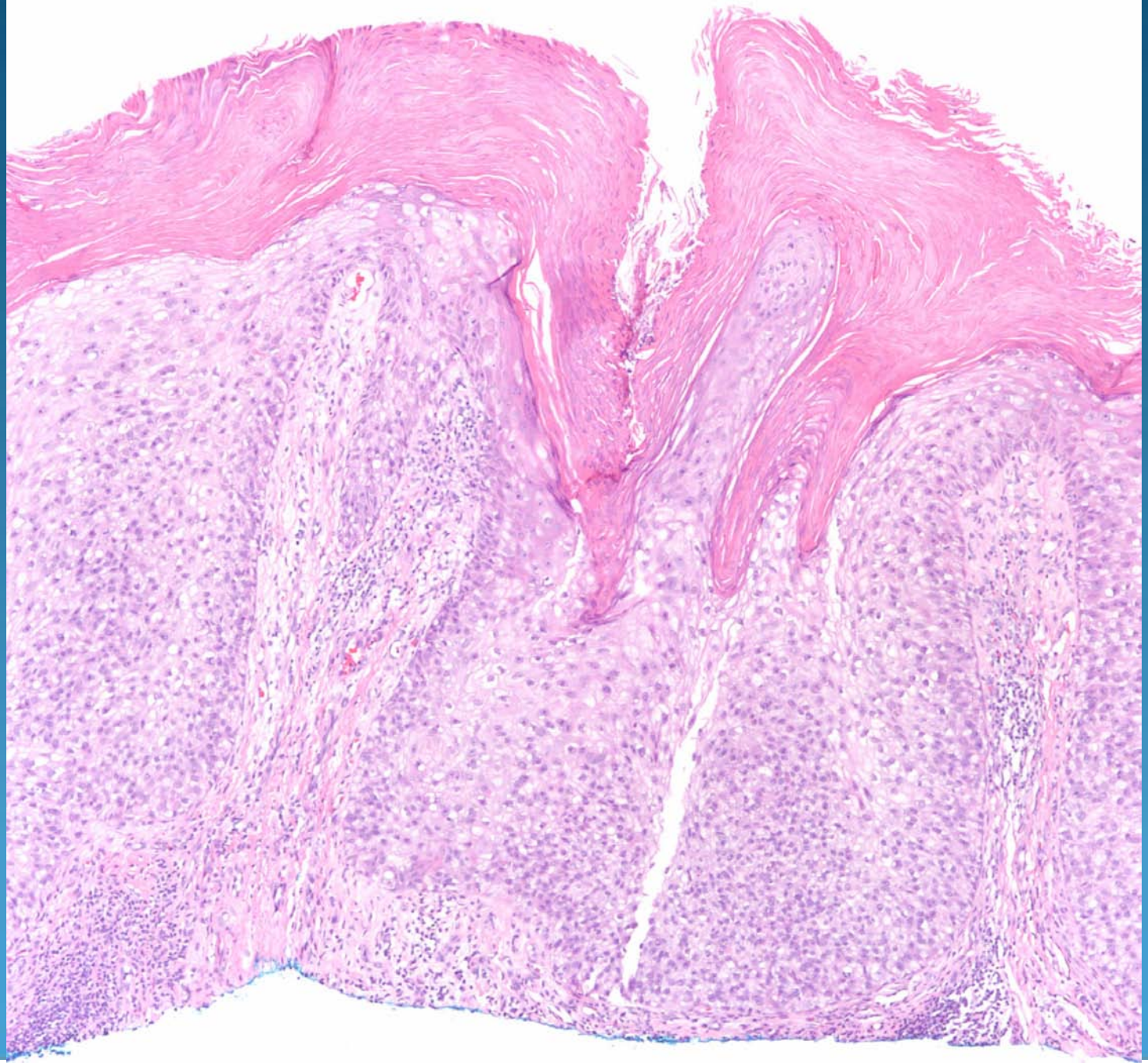
Calcaneal Petechiae (Talon noir)

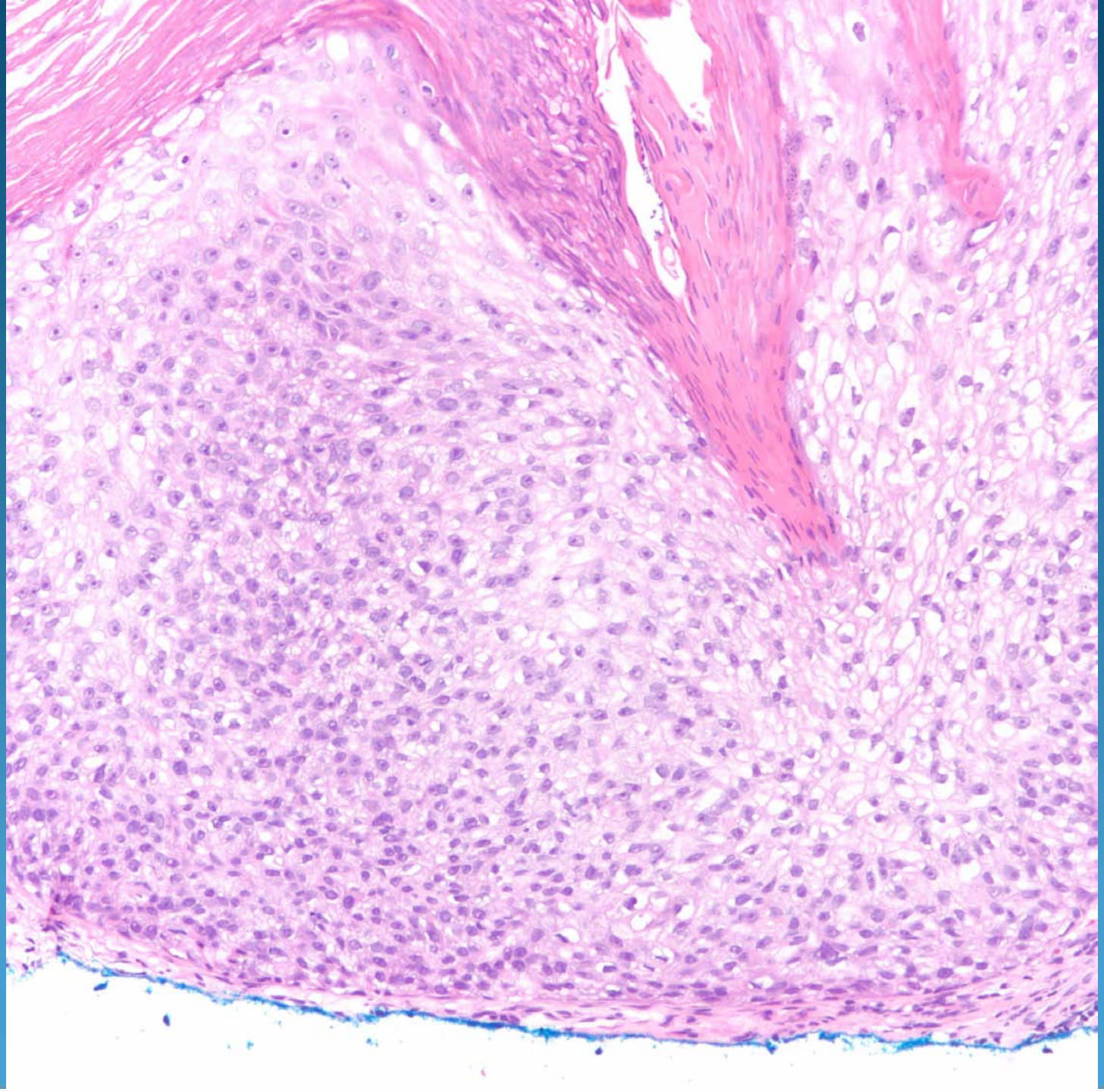
Pearls

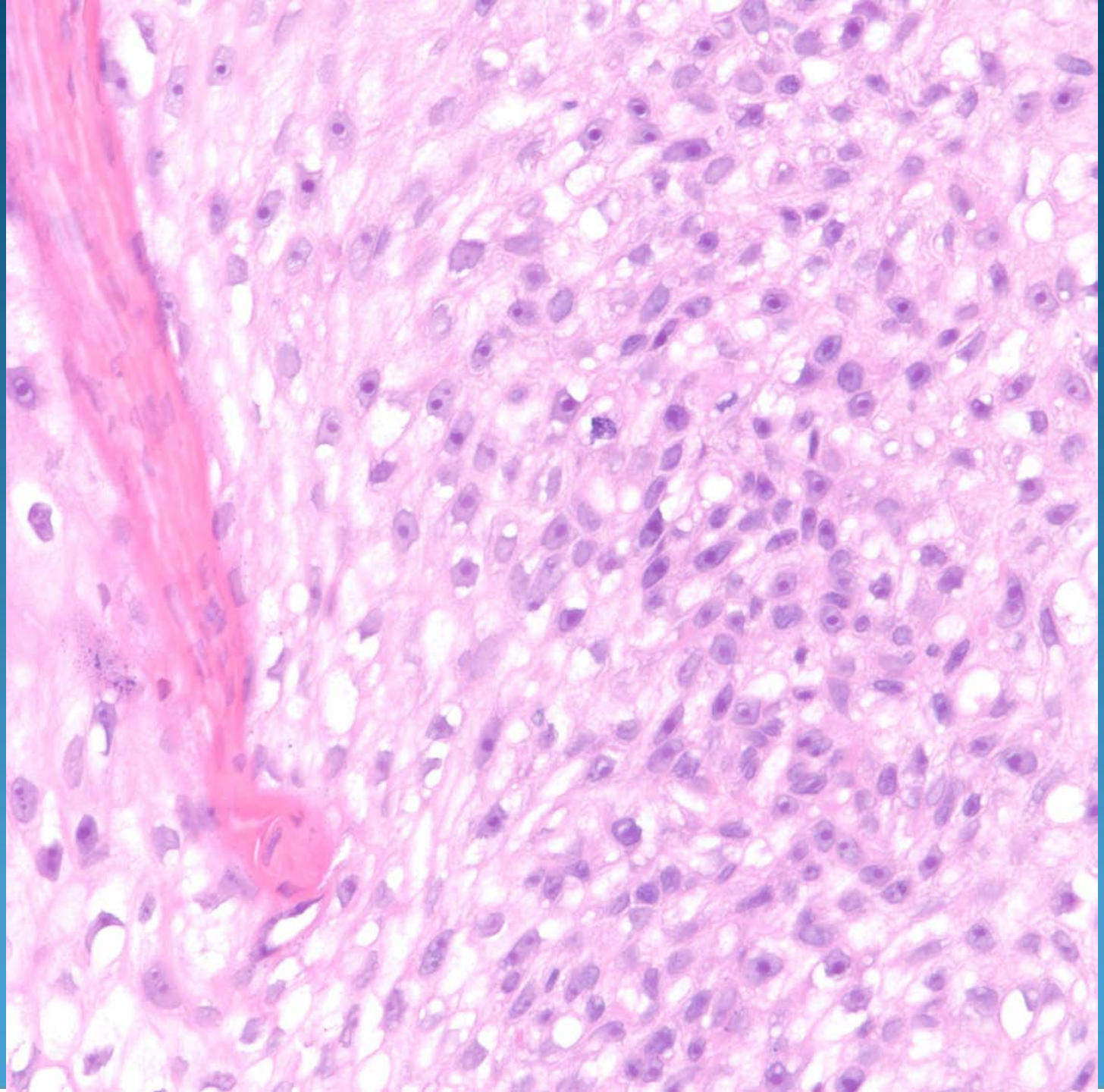


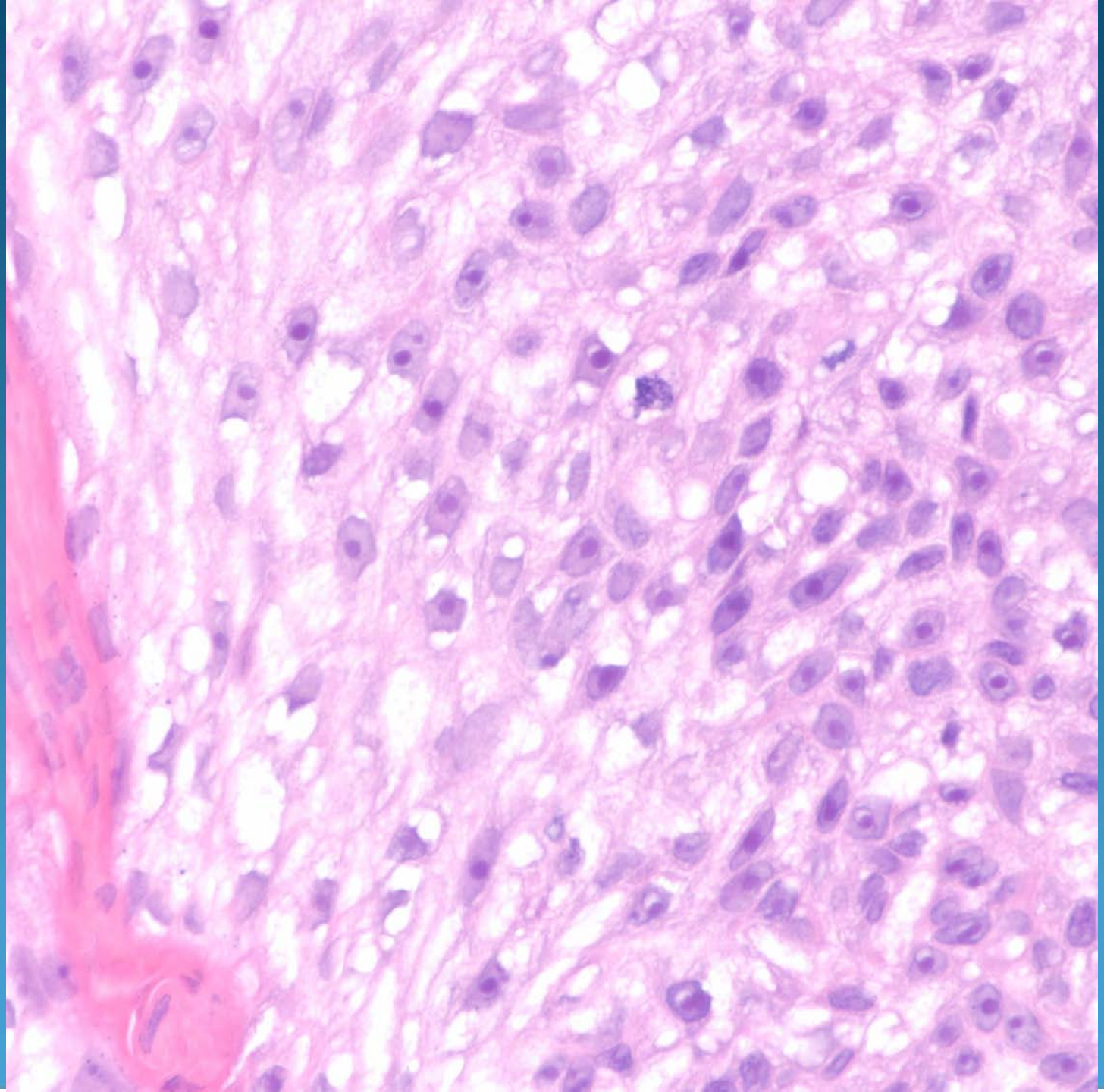
- Must recognize acral location
- Fresh and old hemorrhage within stratum corneum





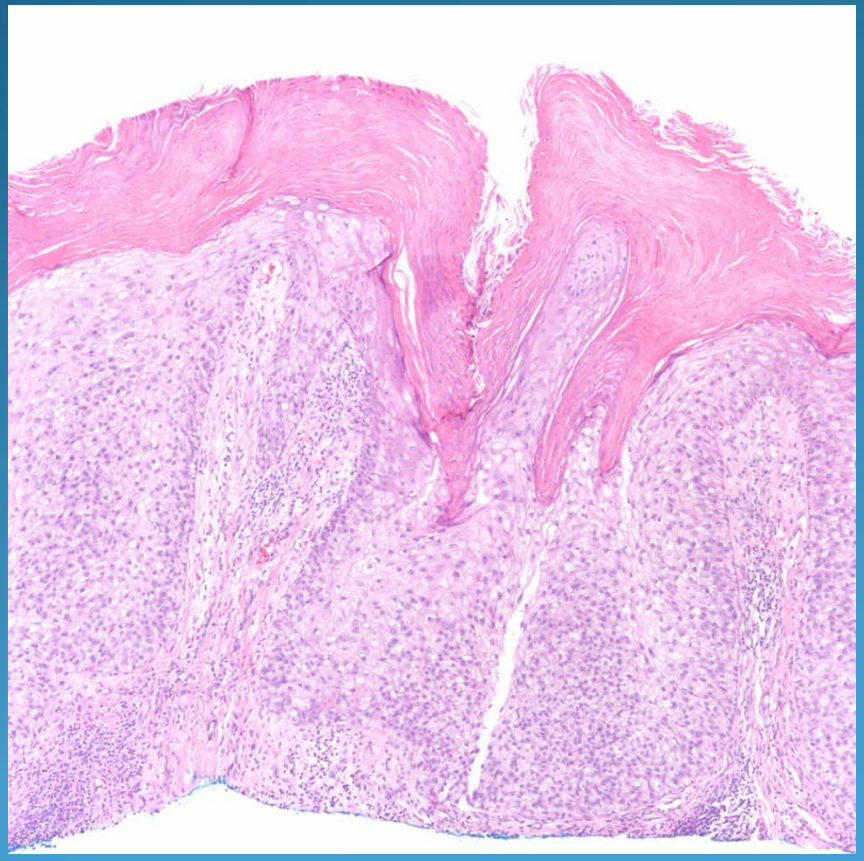






Bowen’s Disease-Clear Cell Type

Pearls



- Full thickness atypical keratinocytes replace epidermis
- Clear cytoplasmic changes
- Scattered atypical mitotic figures and loss of polarity
- DDX: Clear cell acanthoma, lacks cytologic atypia