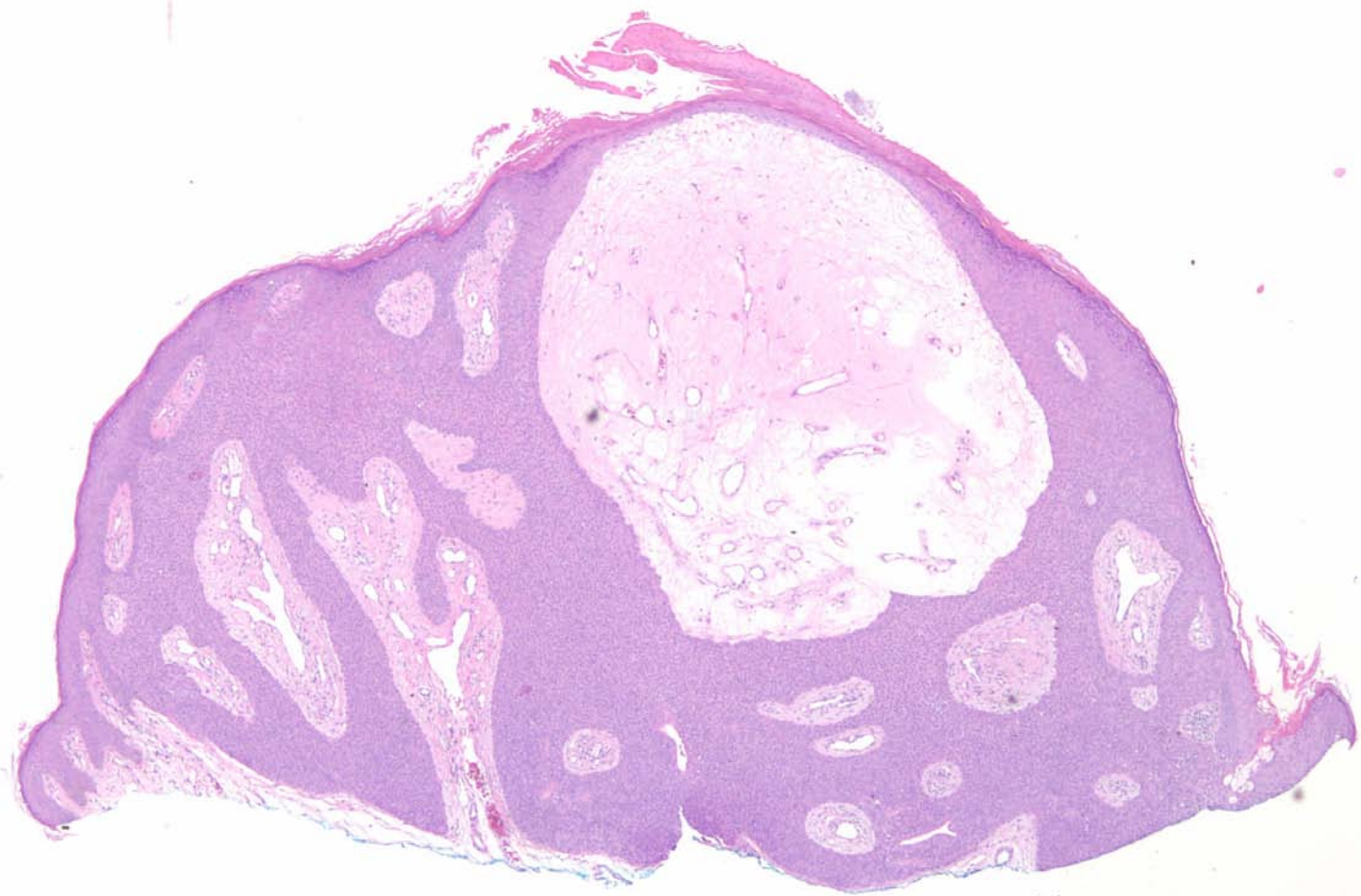
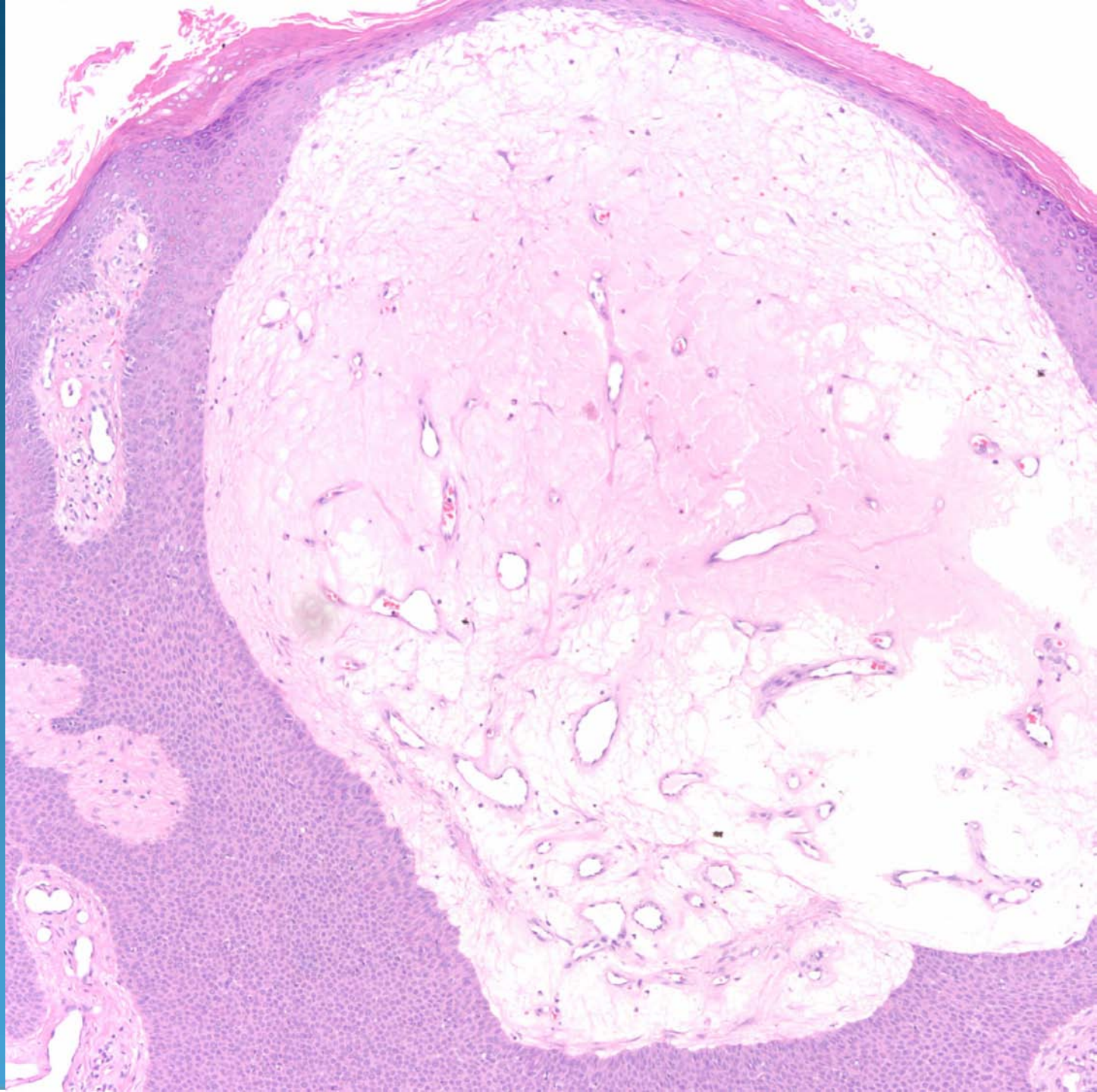


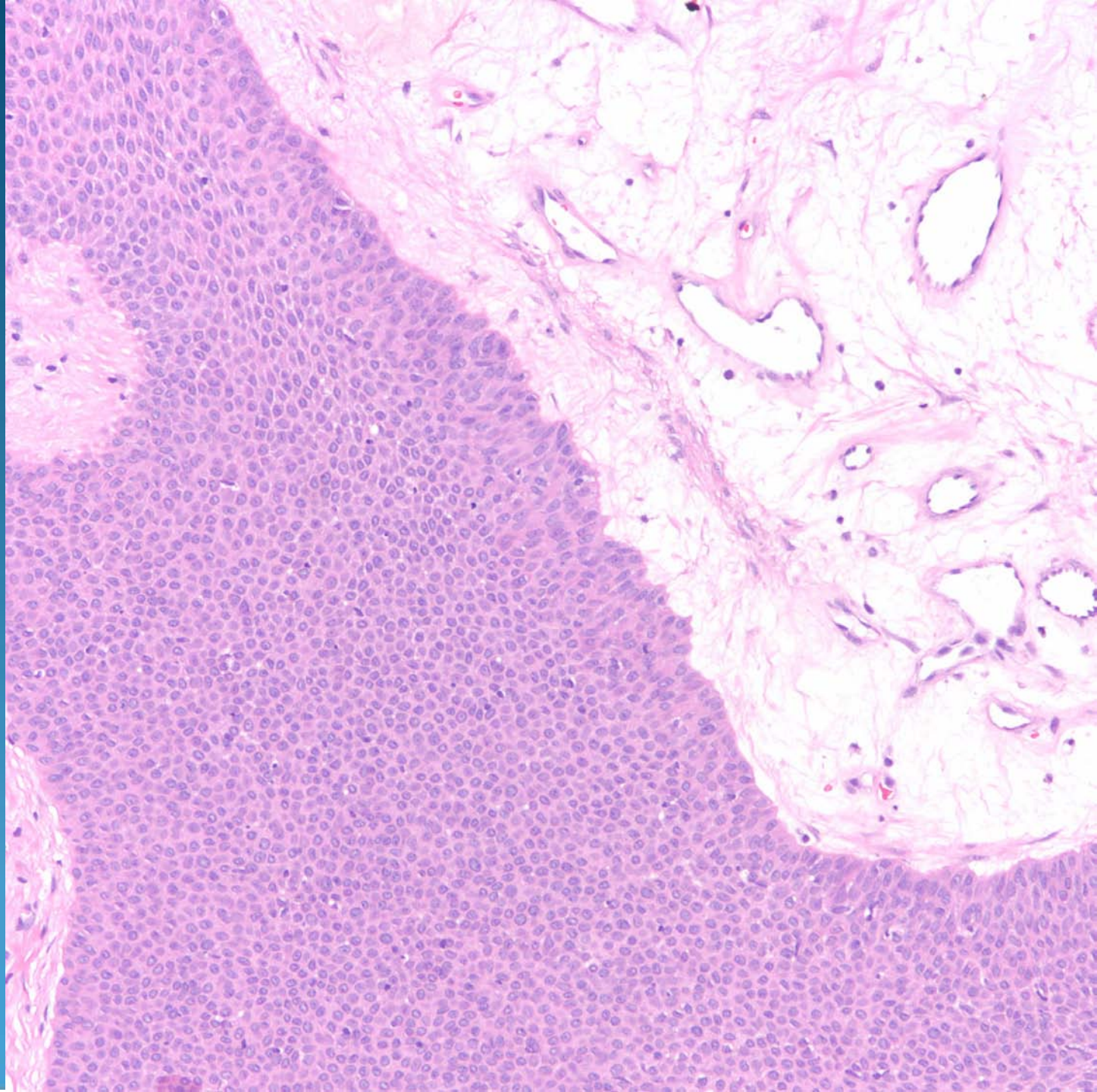
Dermatopathology

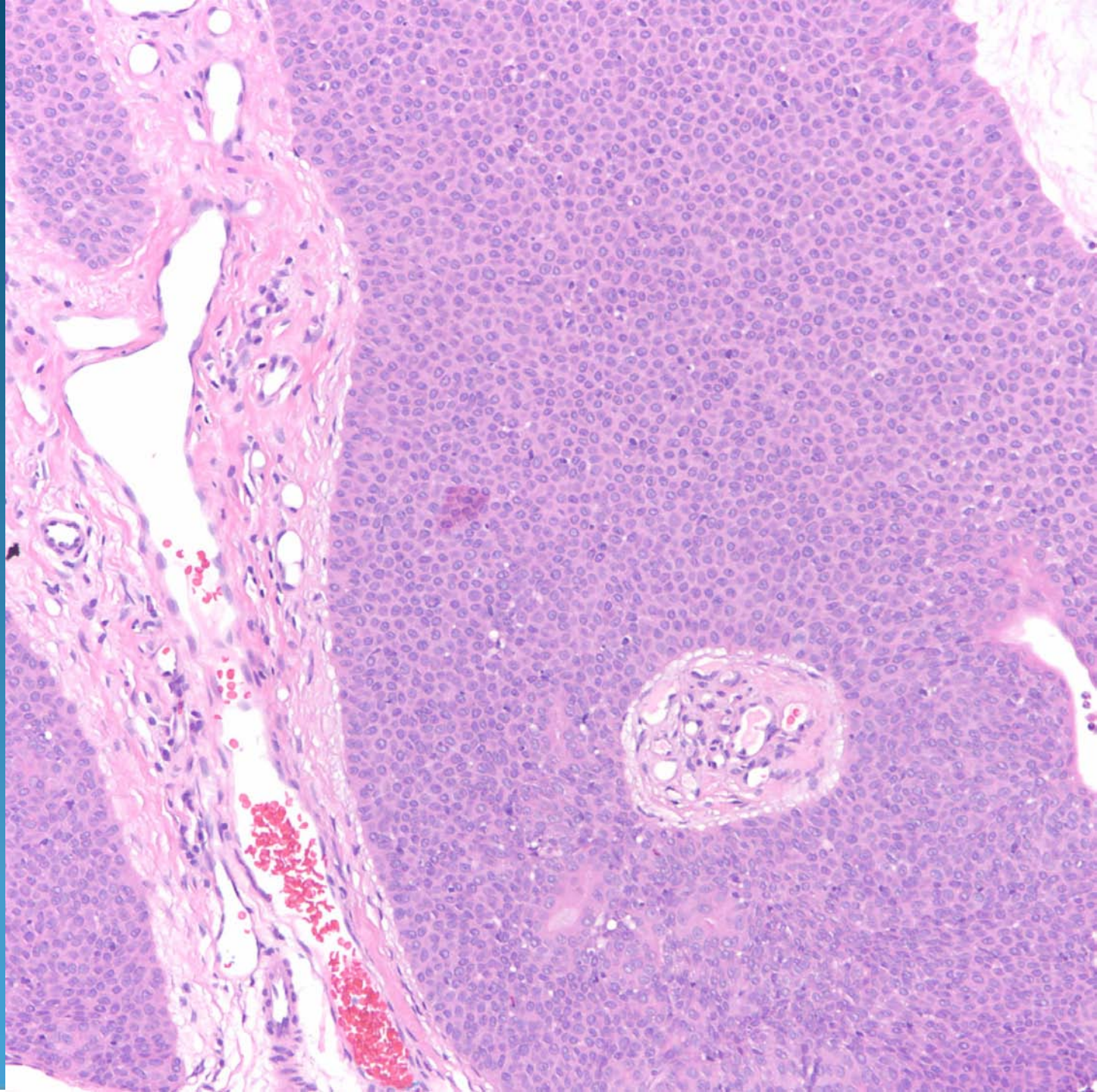
Slide Review Part 75

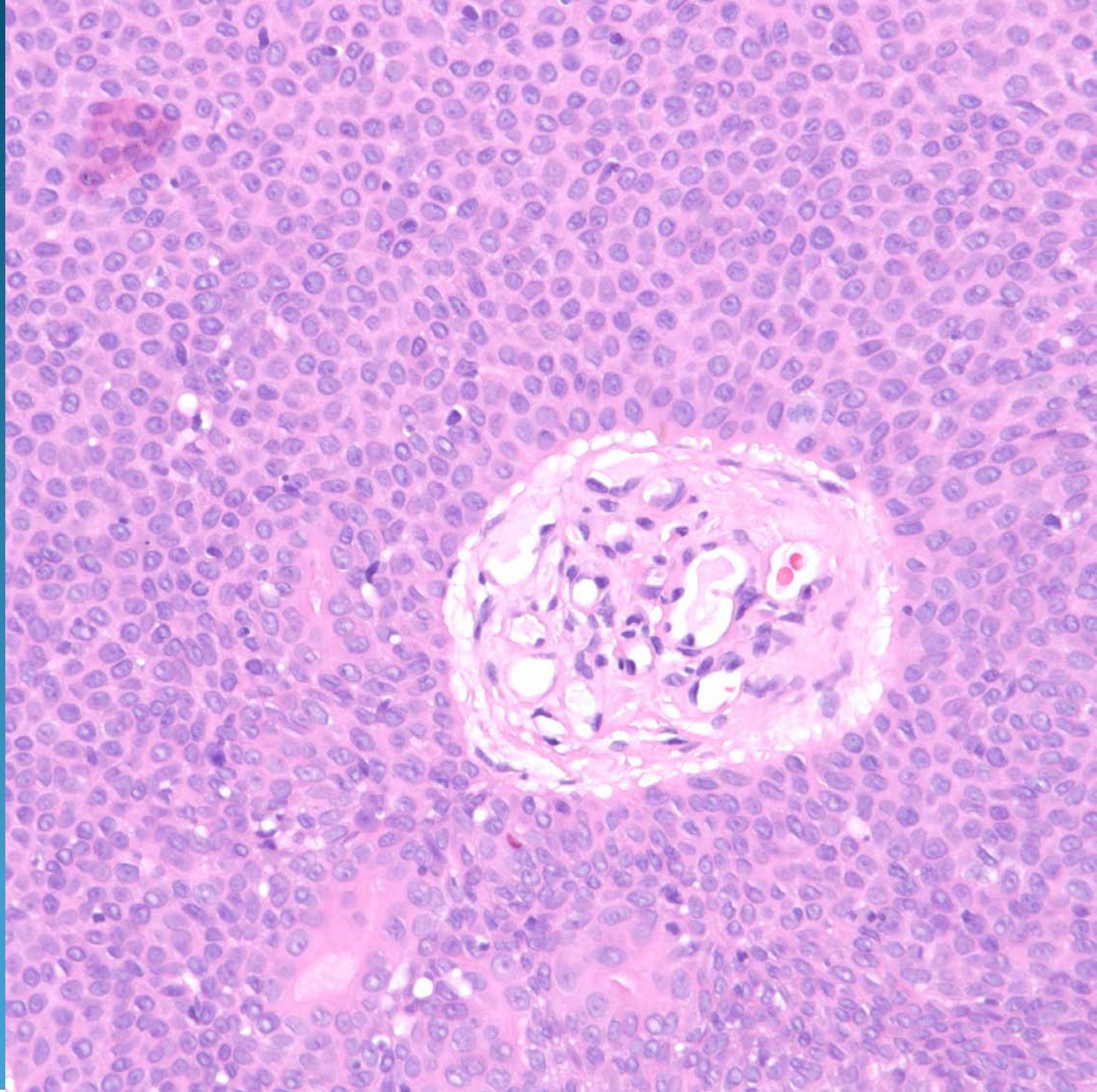
Paul K. Shitabata, M.D.
Dermatopathology Institute

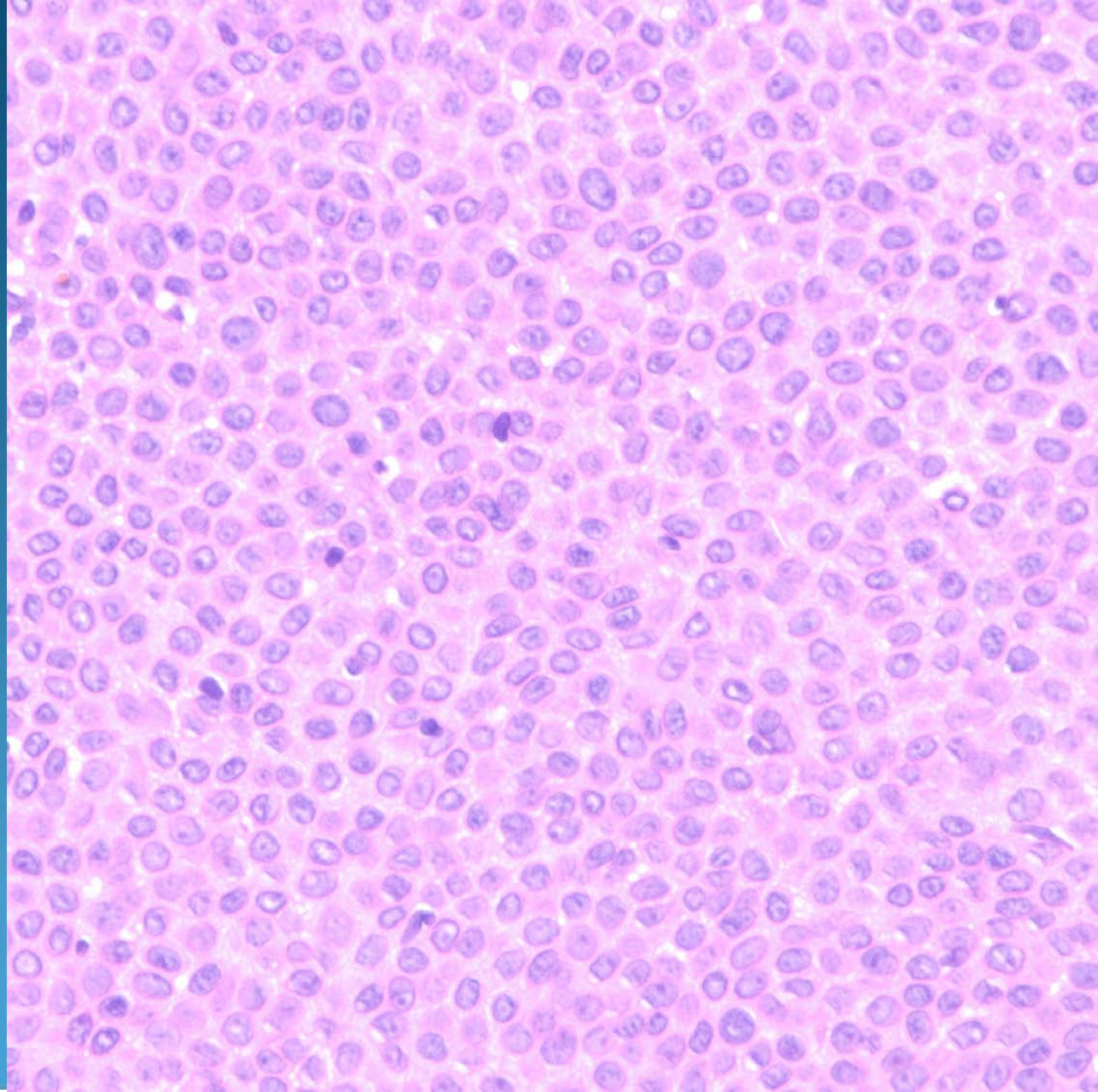










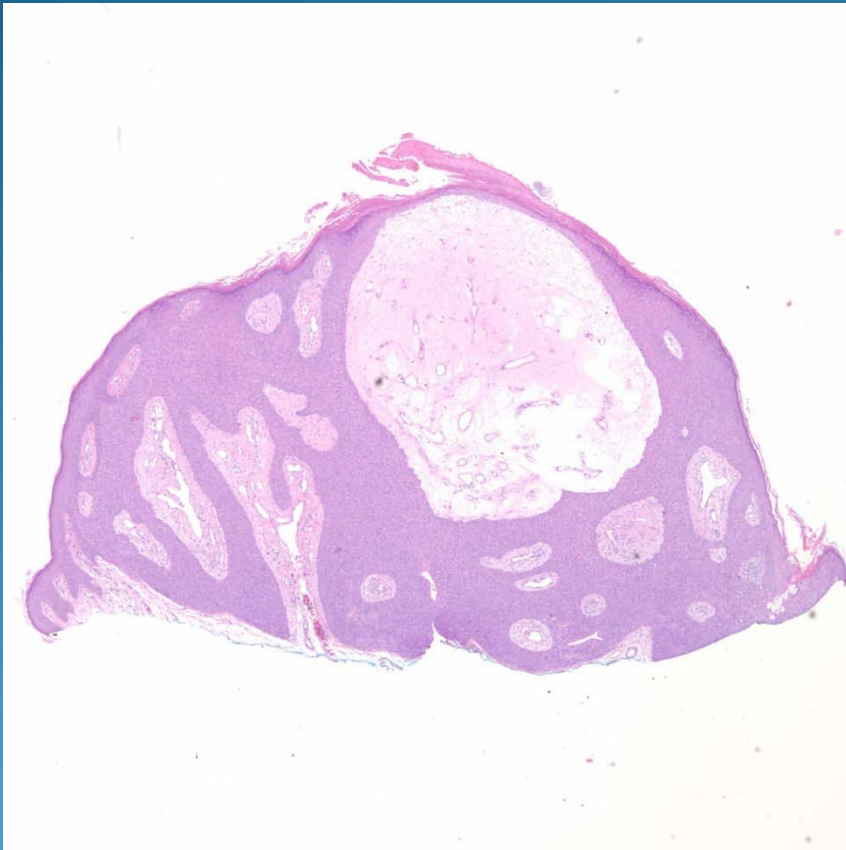


What is the best diagnosis?

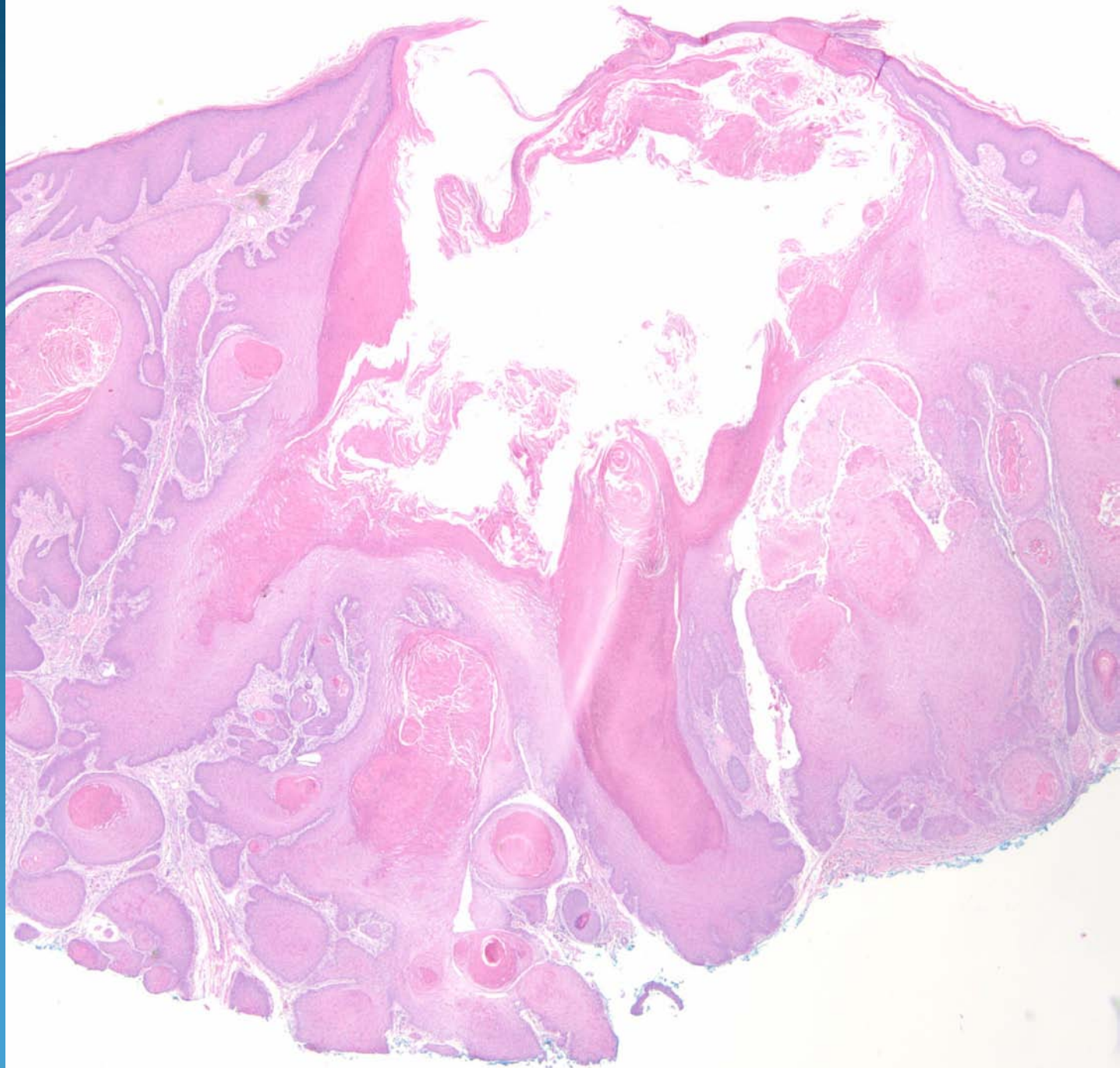
- A. Eccrine poroma
- B. Seborrheic keratosis
- C. Glomus tumor
- D. Dermal duct tumor
- E. Tumor of the follicular infundibulum

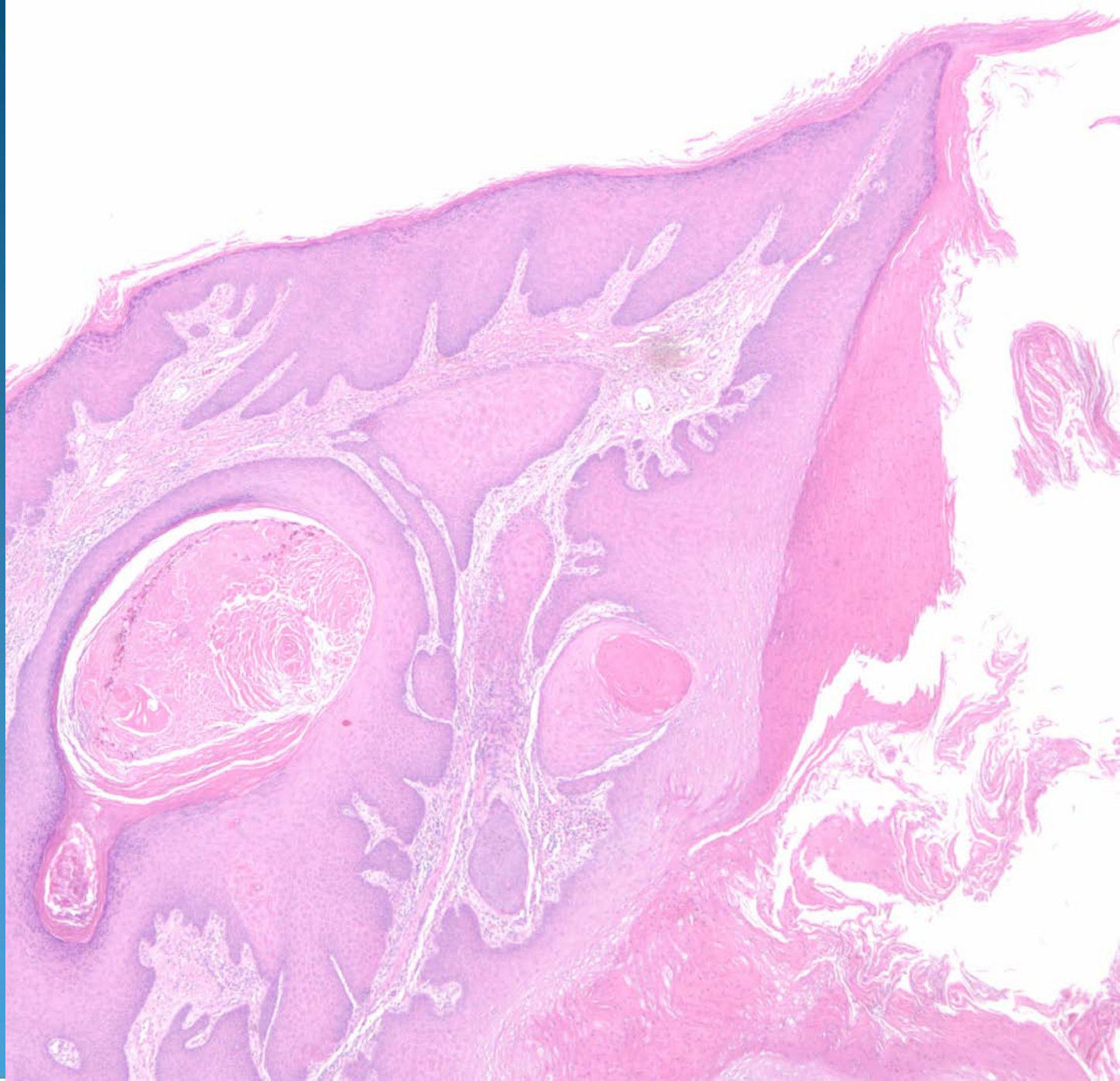
Eccrine Poroma

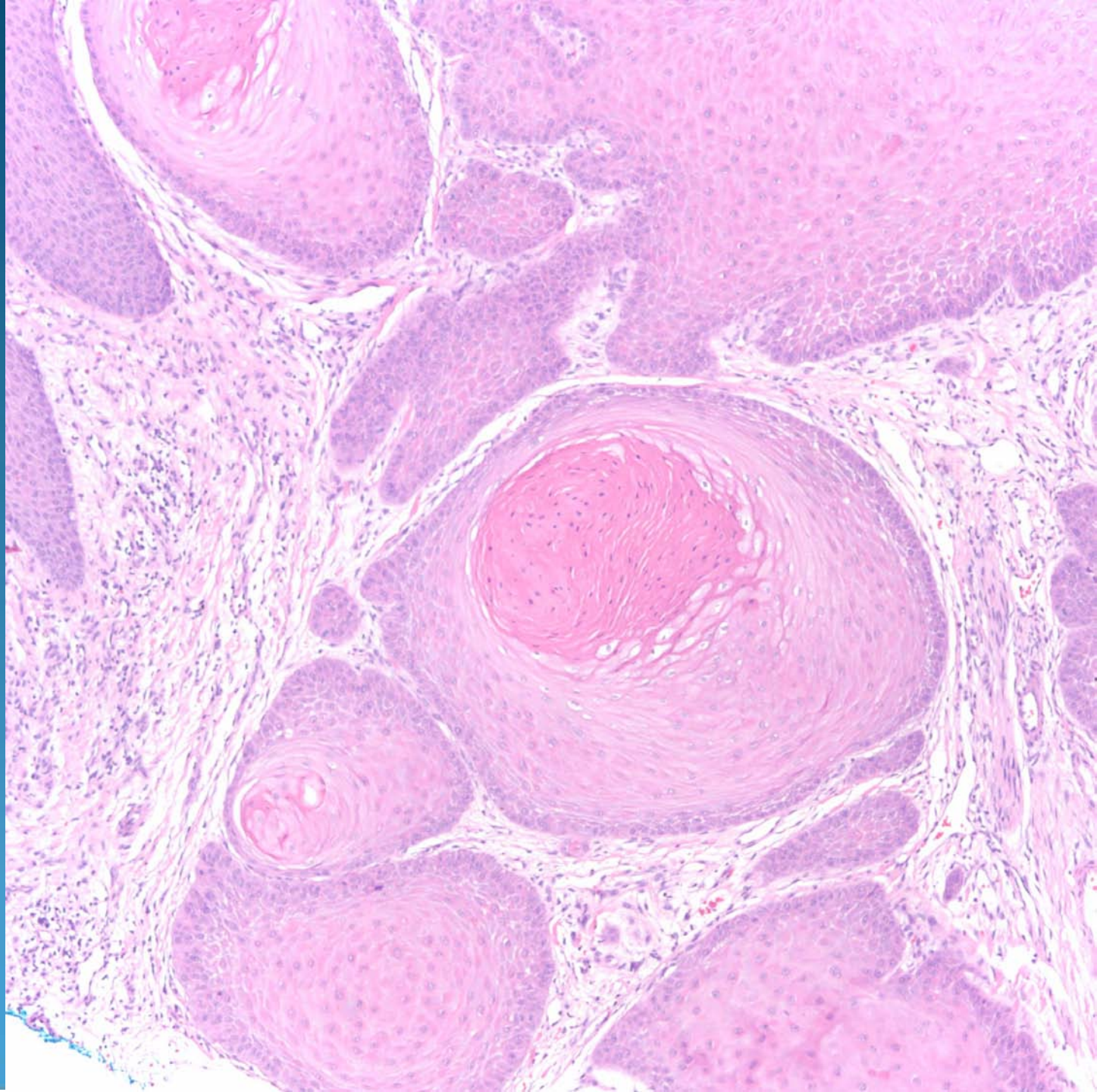
Pearls

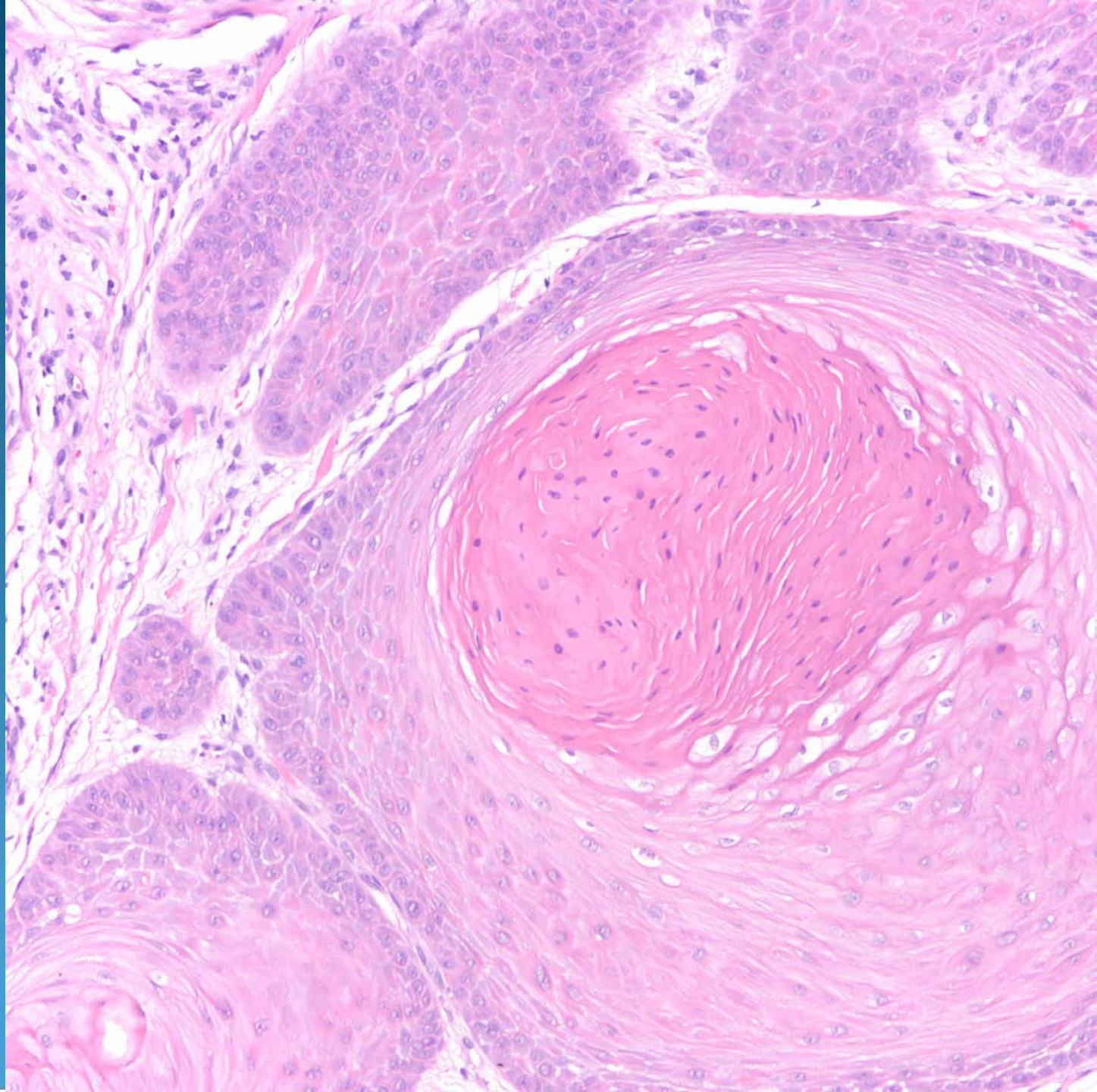


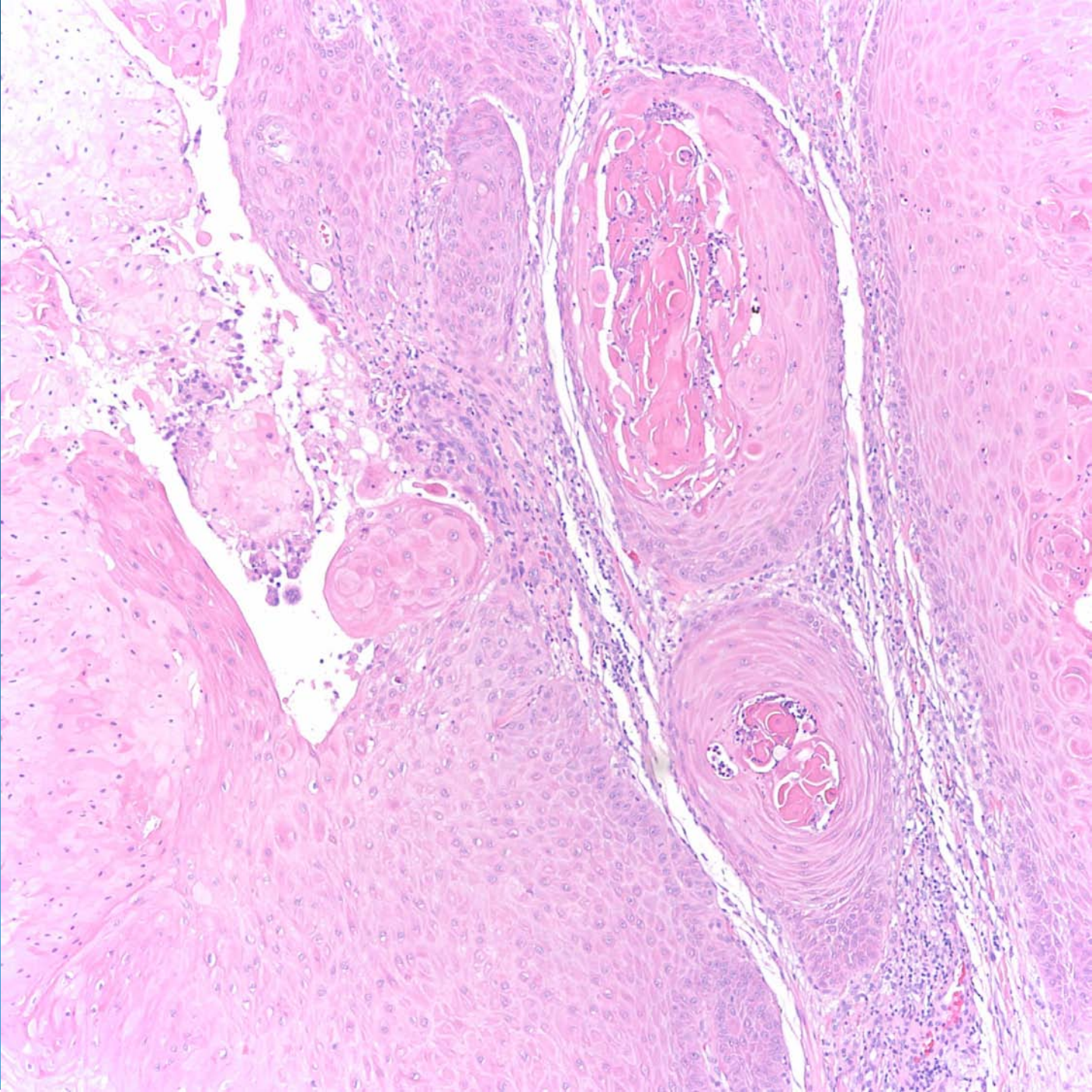
- Plate-like proliferation of cytologically bland keratinocytes
- Rounded pushing borders unlike seborrheic keratosis
- Hyalinized changes around vessels
- May have horn pseudocysts

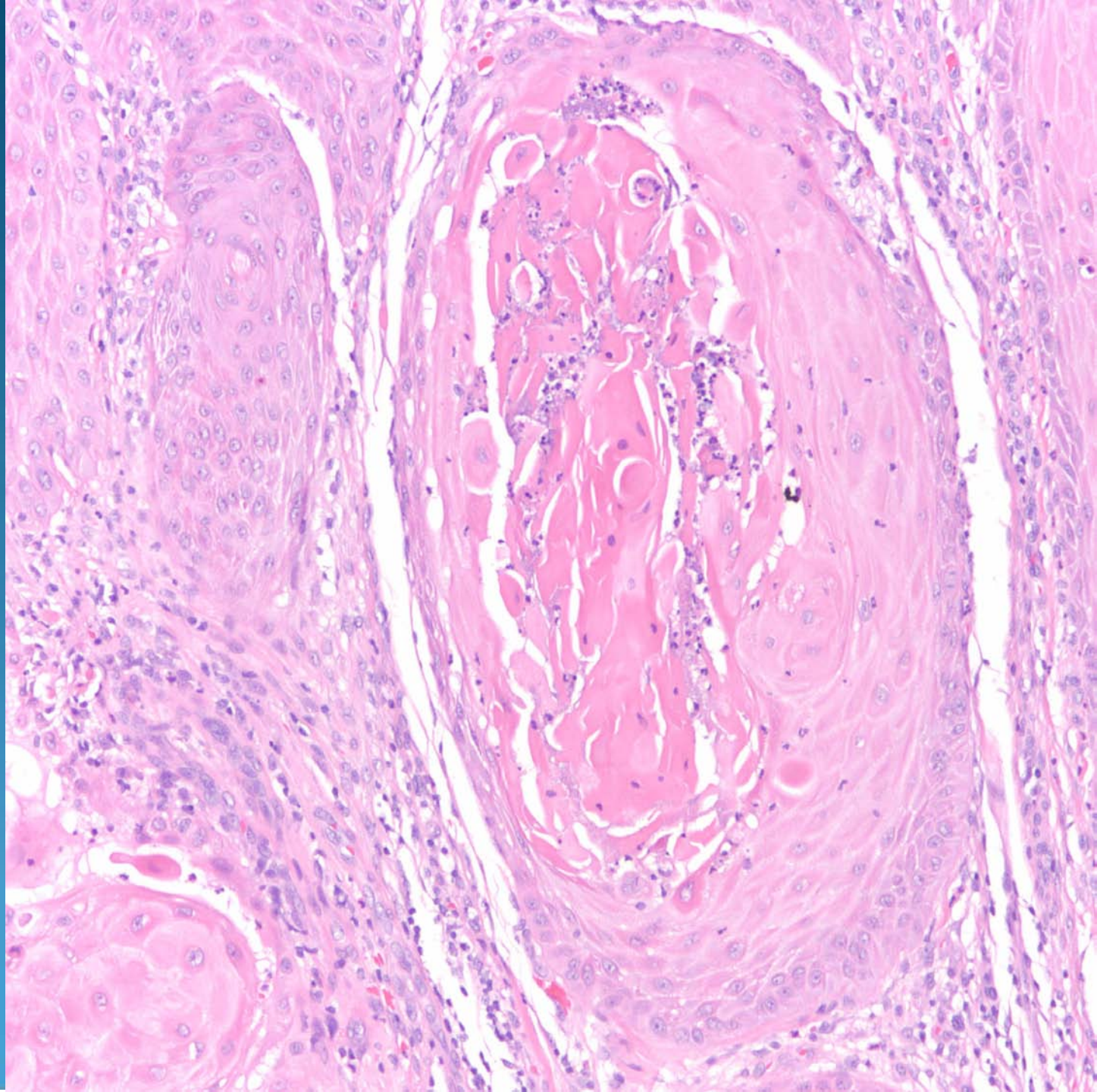


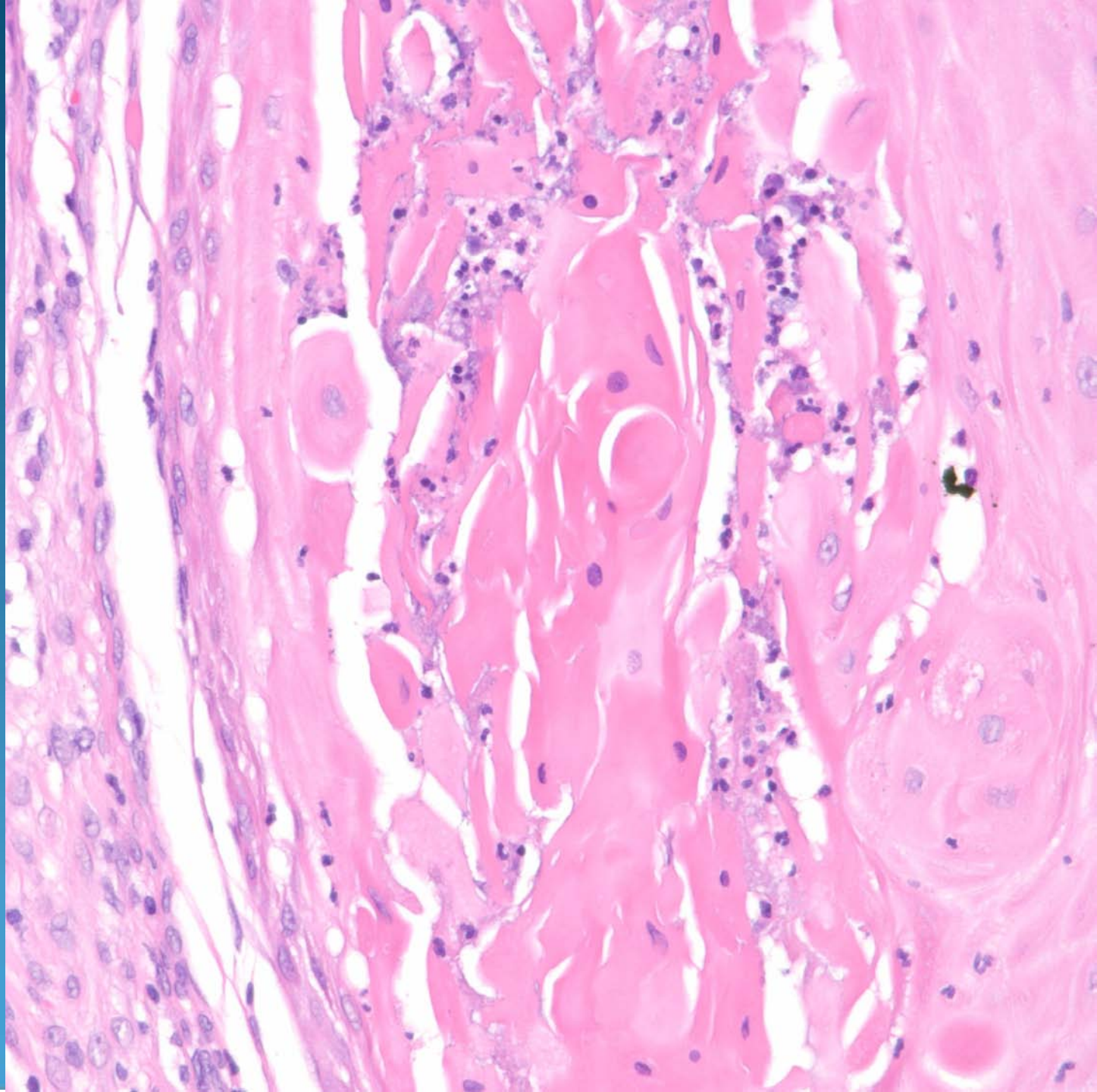










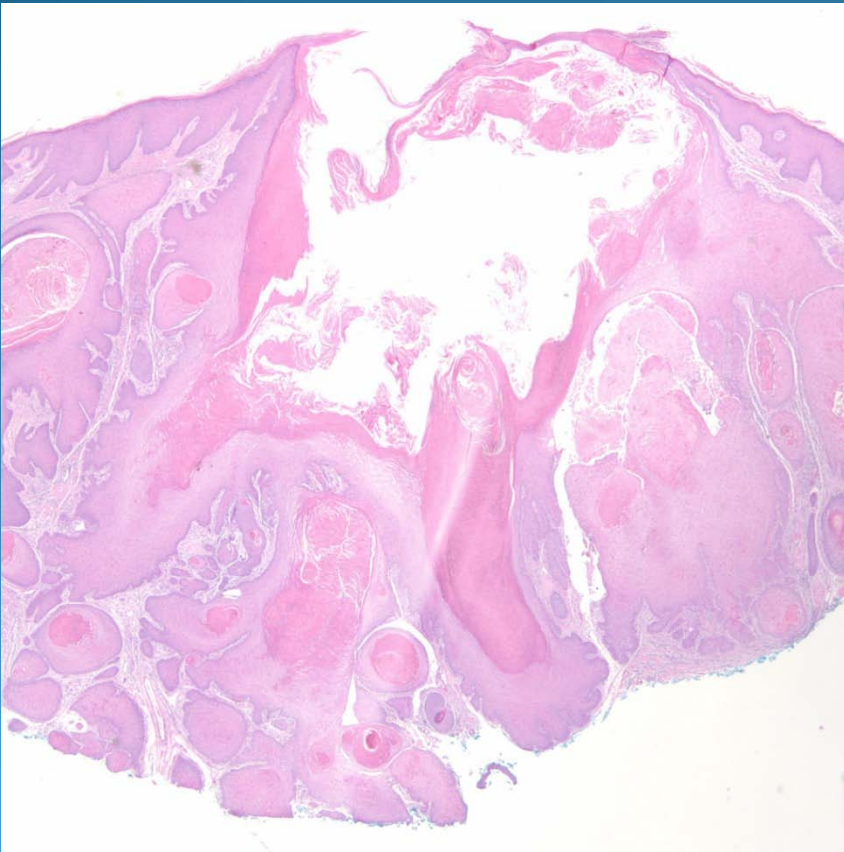


What is the best diagnosis?

- A. Basal cell carcinoma
- B. Tricholemmoma
- C. Tricholemmal carcinoma
- D. Keratoacanthoma
- E. Verruca vulgaris

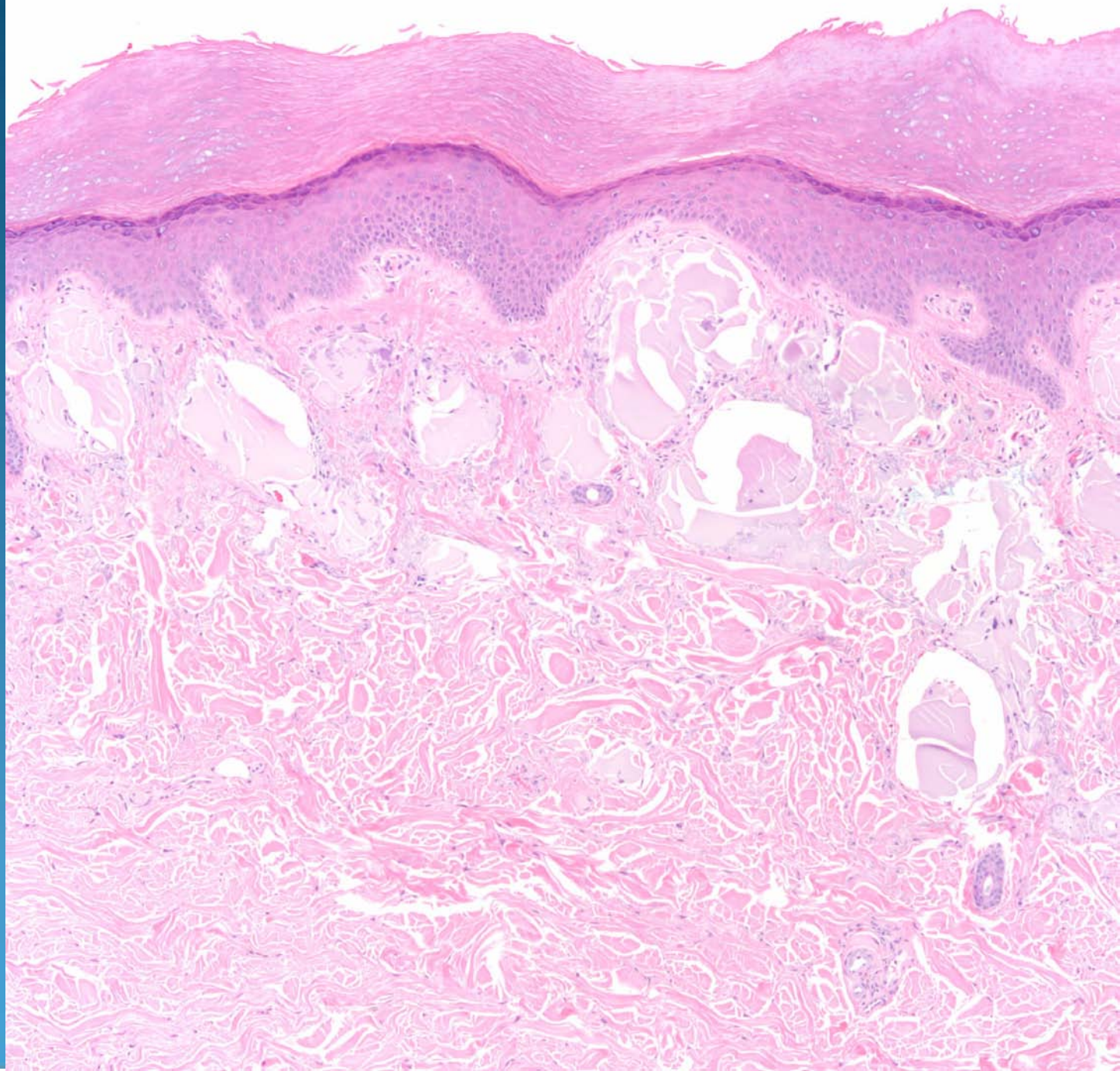
Keratoacanthoma

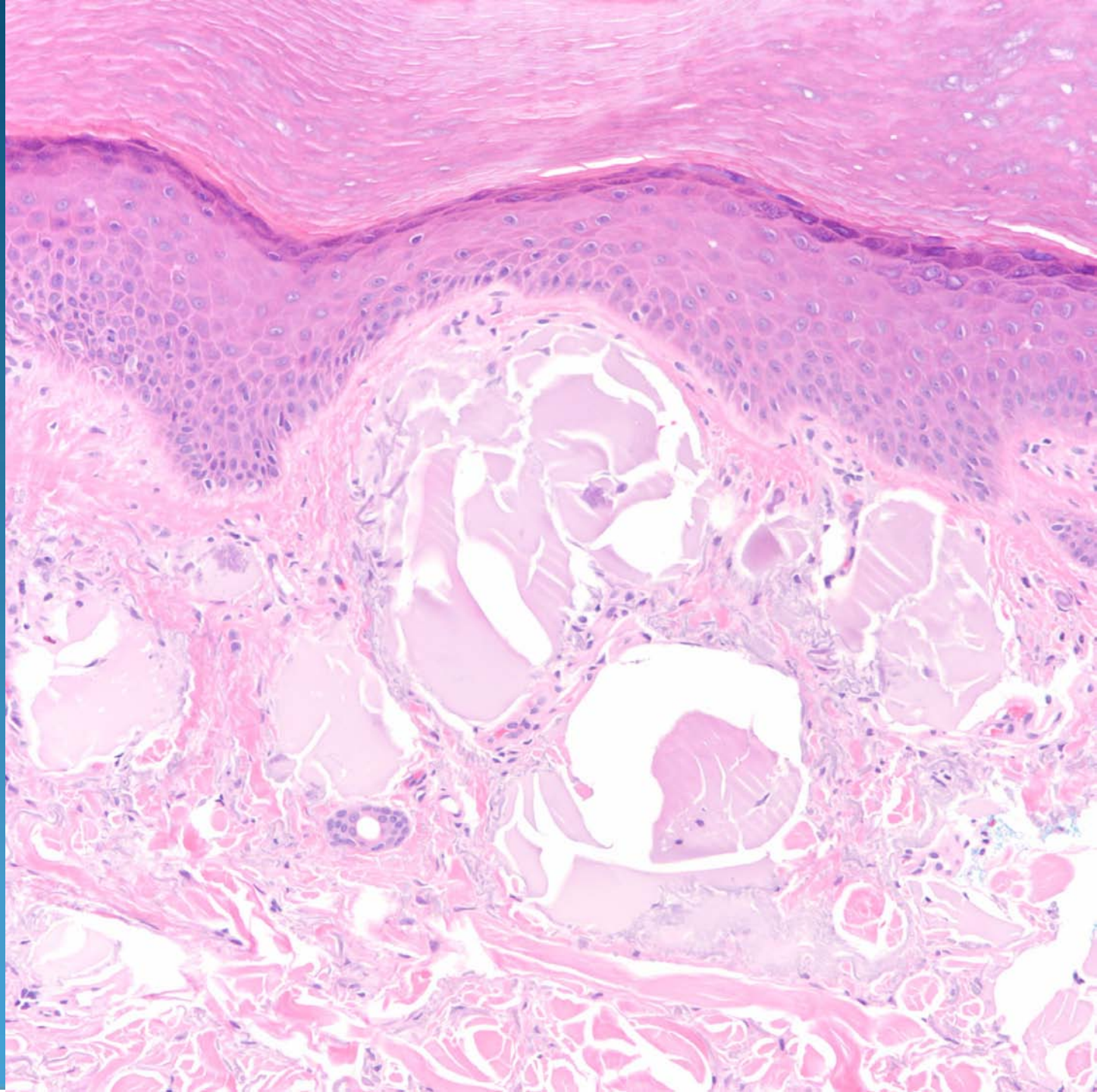
Pearls

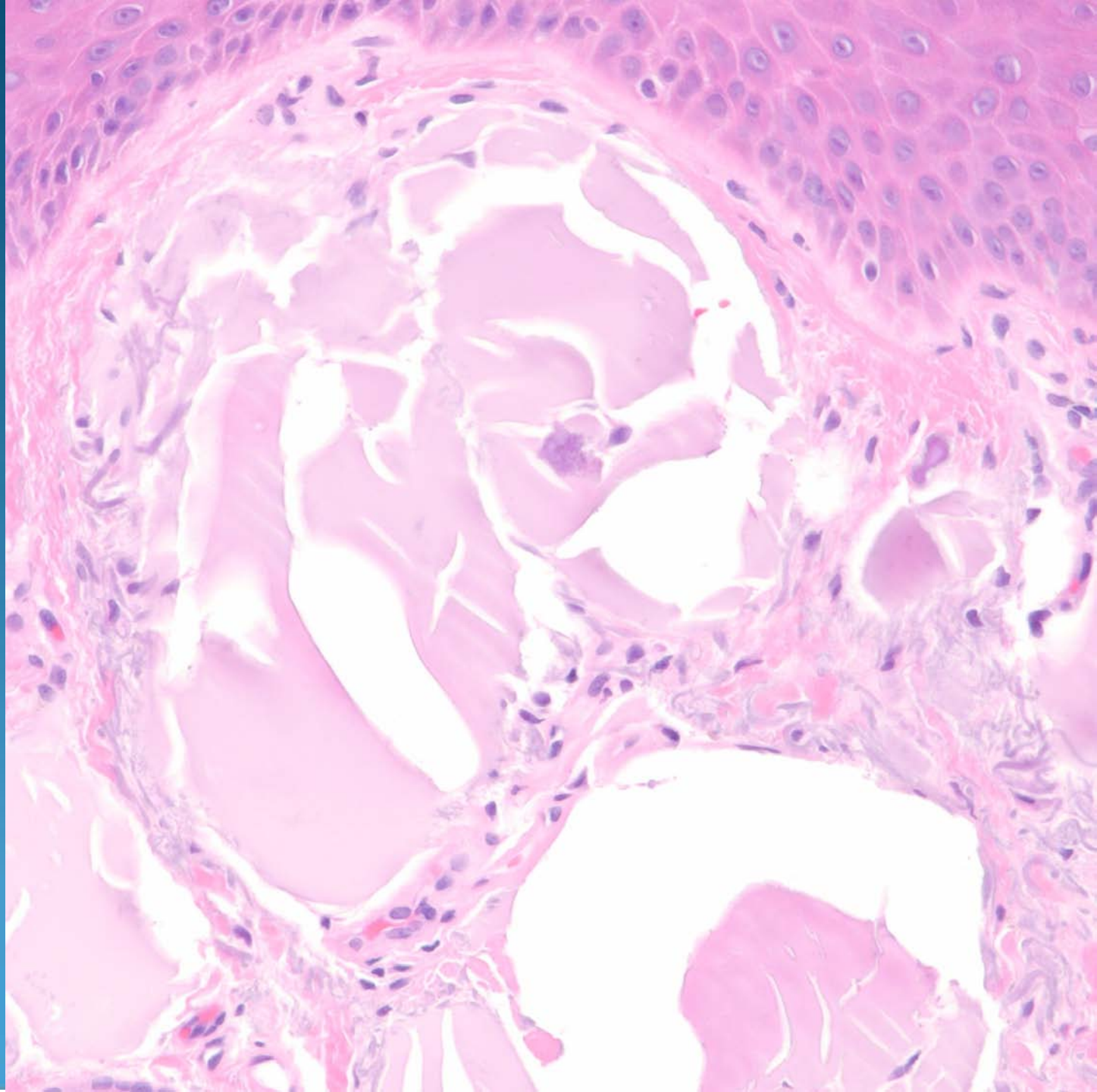


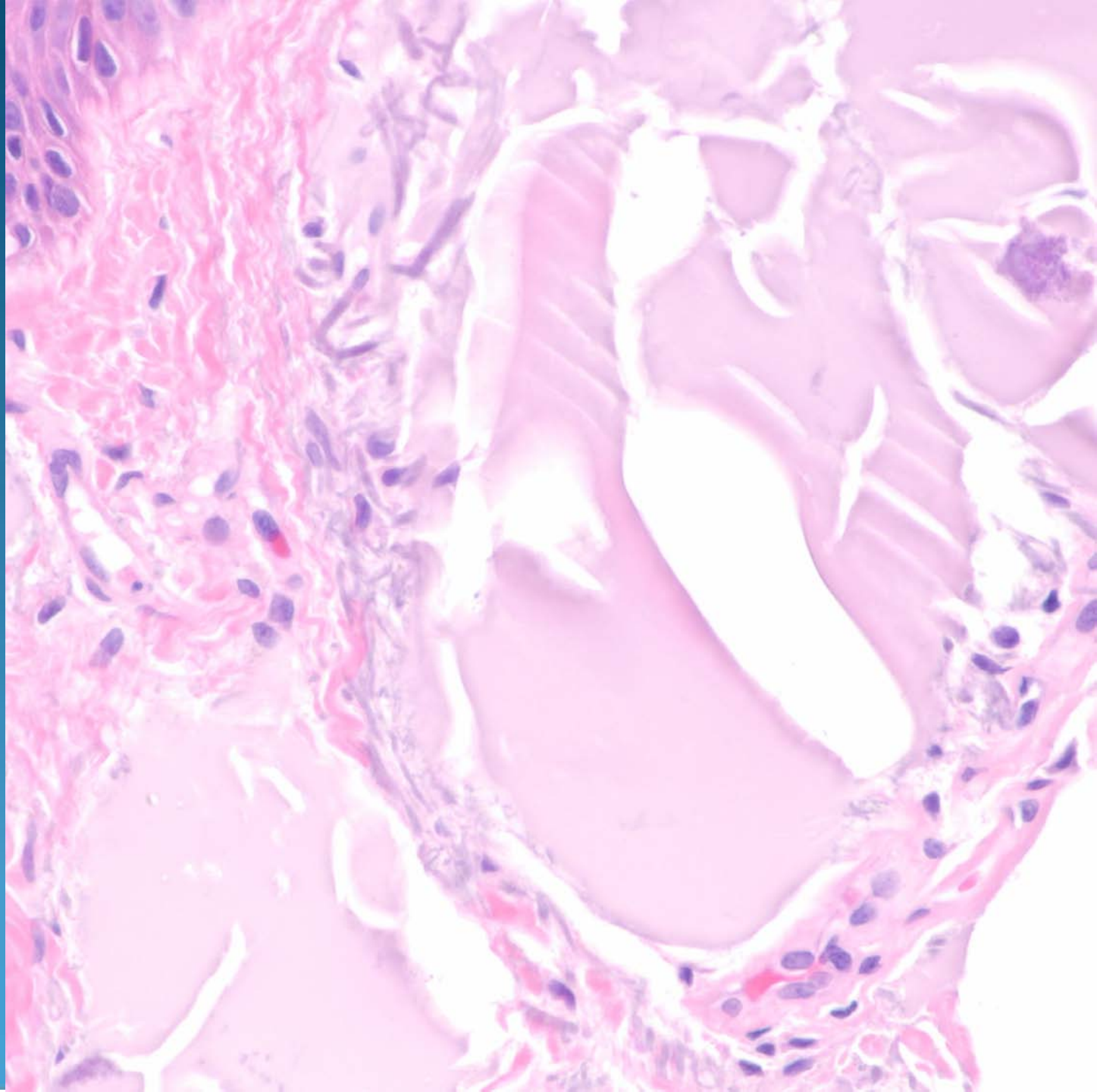
- Crateriform invagination of squamous cells with epidermal buttress
- Glassy keratinocytes with minimal pleomorphism
- May have intraepidermal neutrophils







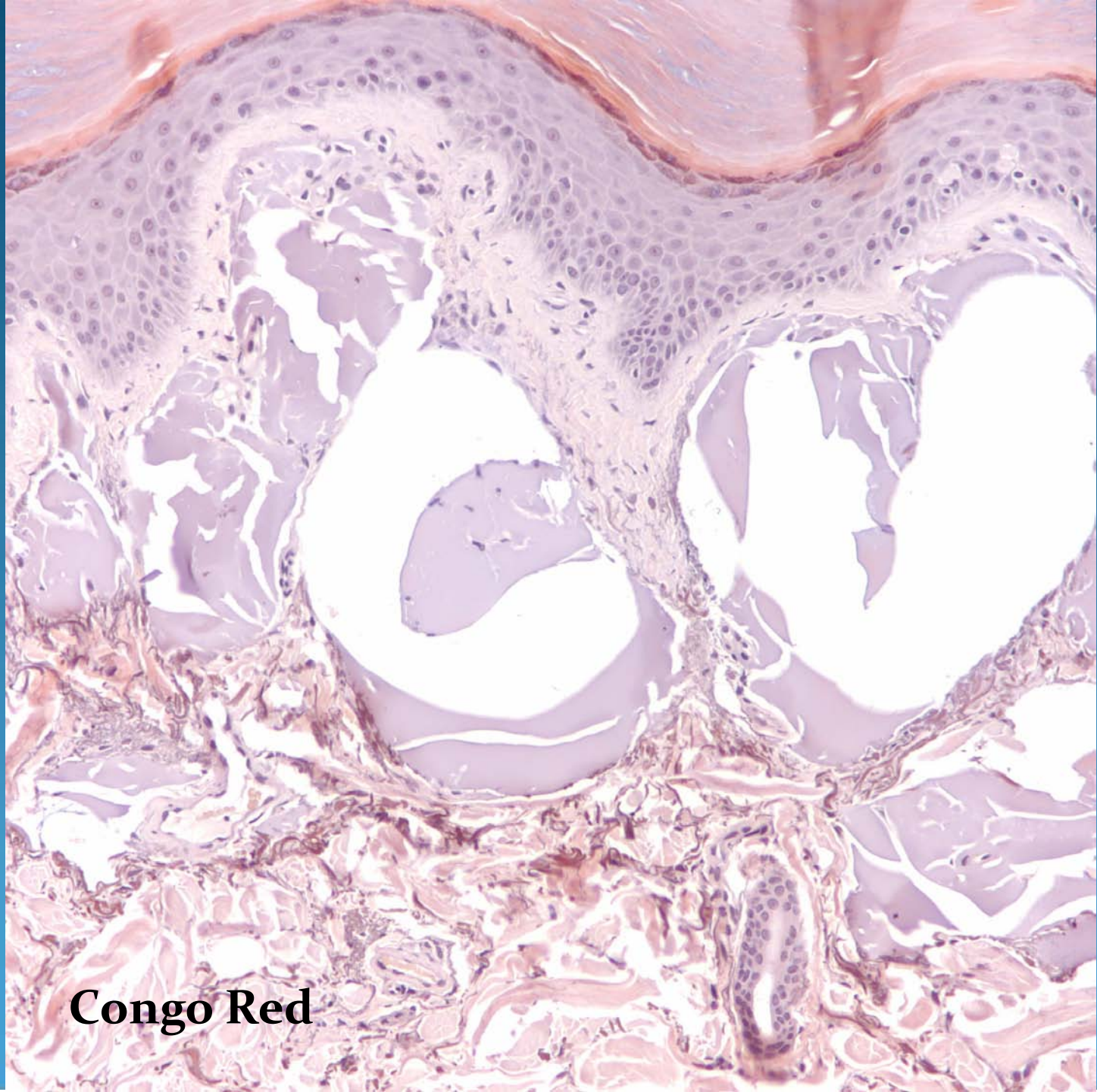




What is the best diagnosis?

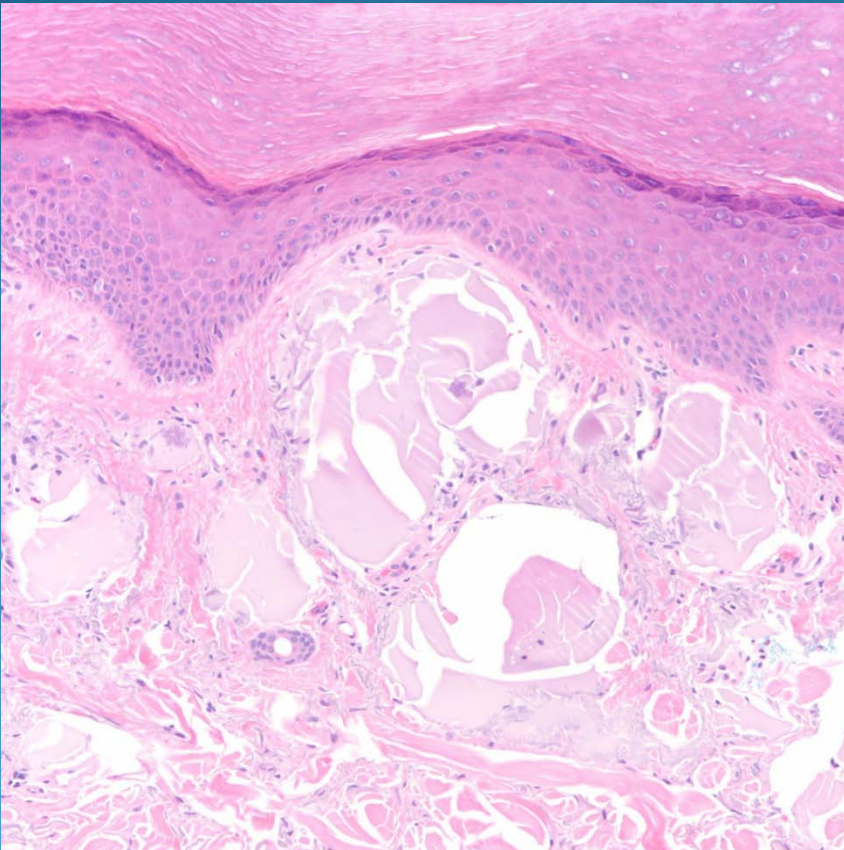
- A. Macular amyloidosis
- B. Lipoid proteinosis
- C. Keloid
- D. Colloid milium
- E. Gouty tophus

Colloid milium

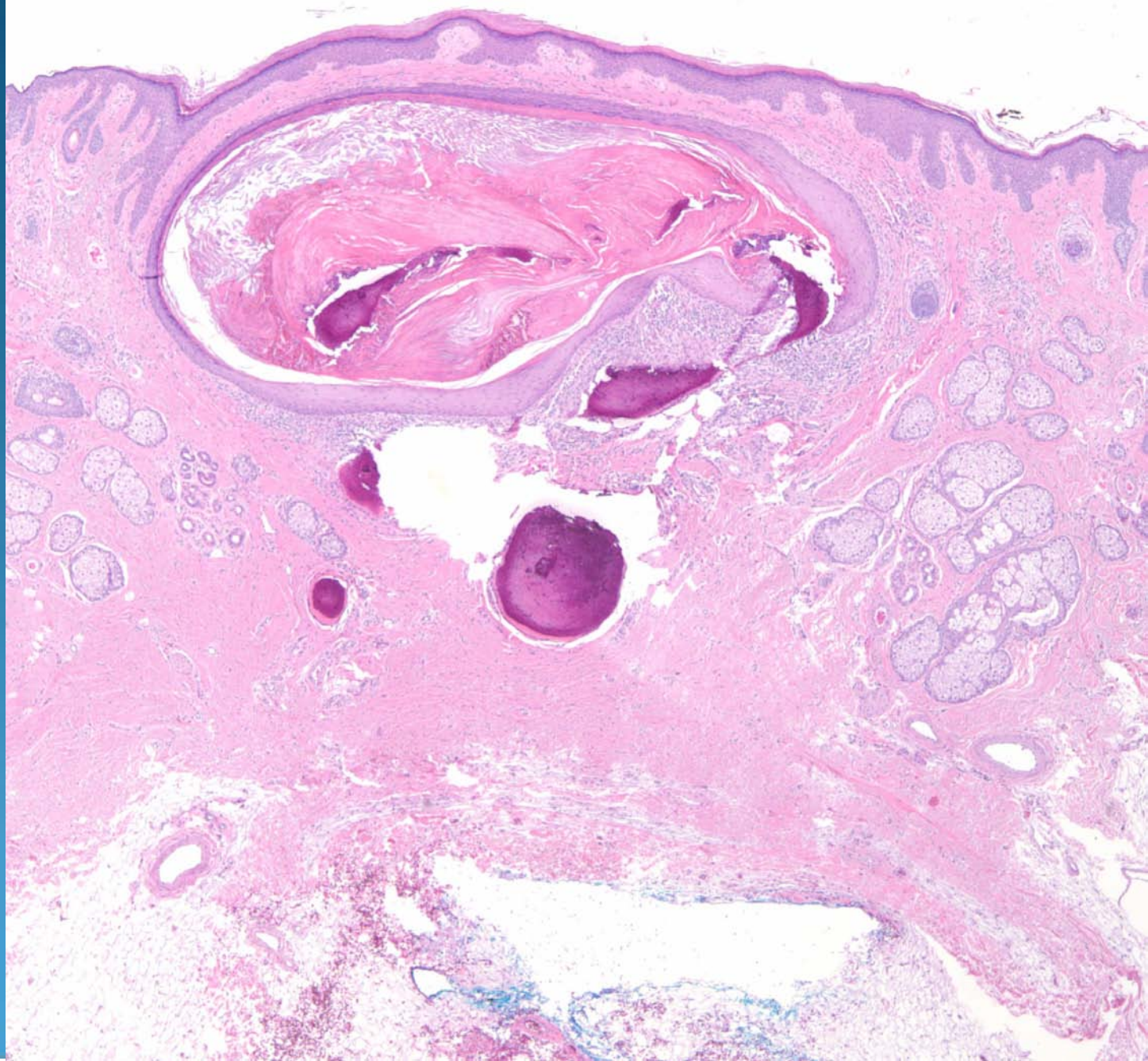


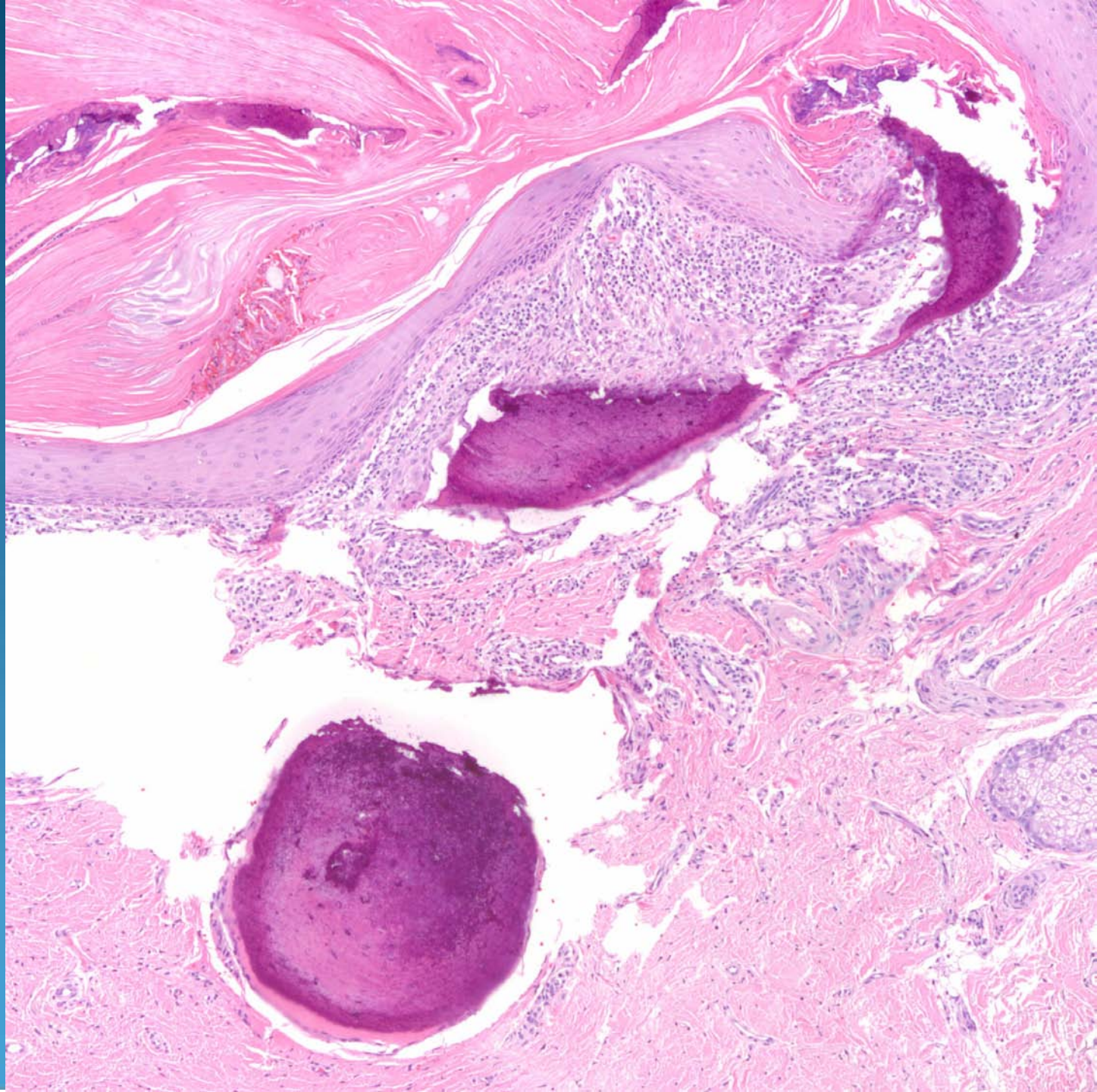
Congo Red

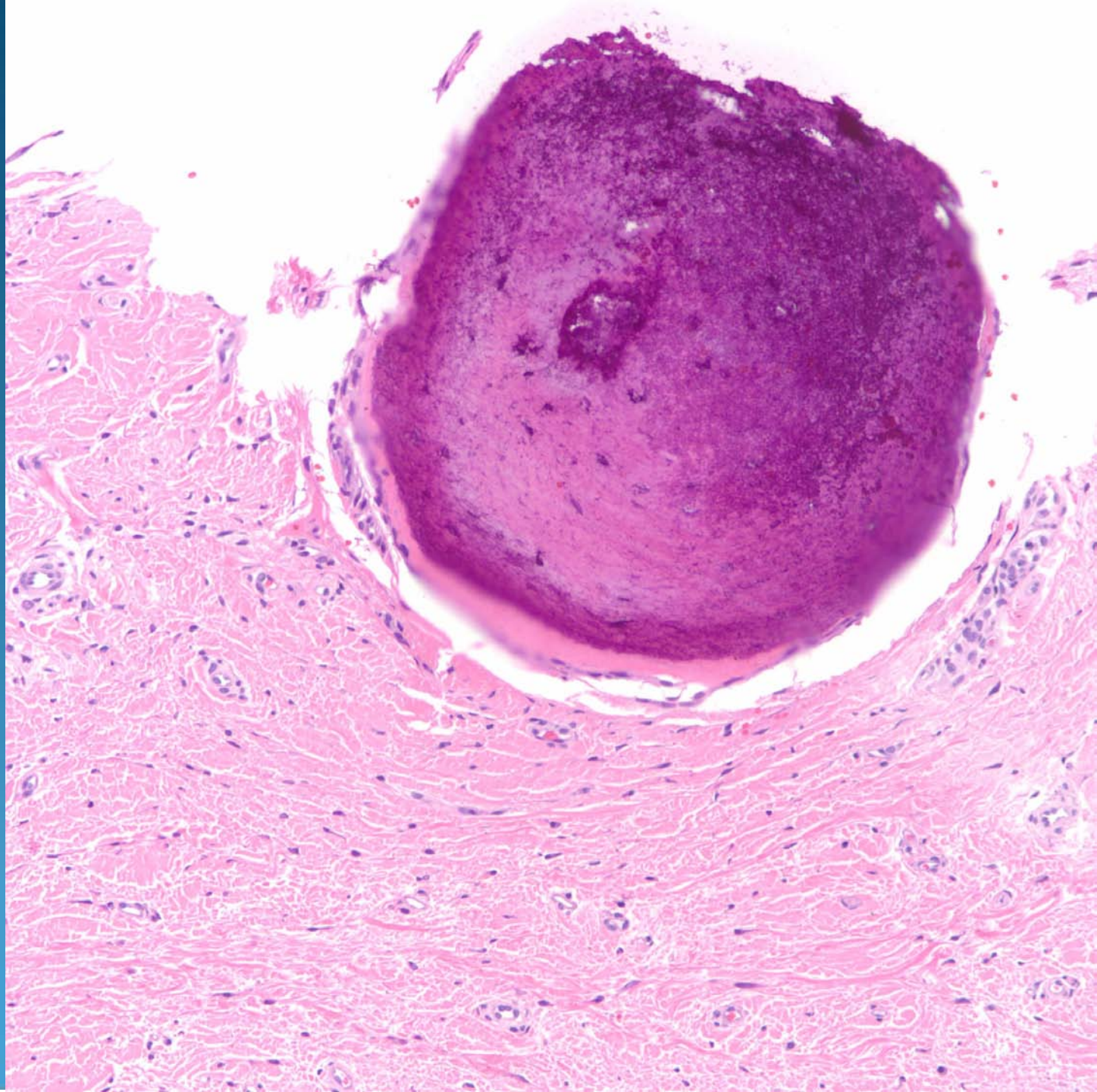
Pearls

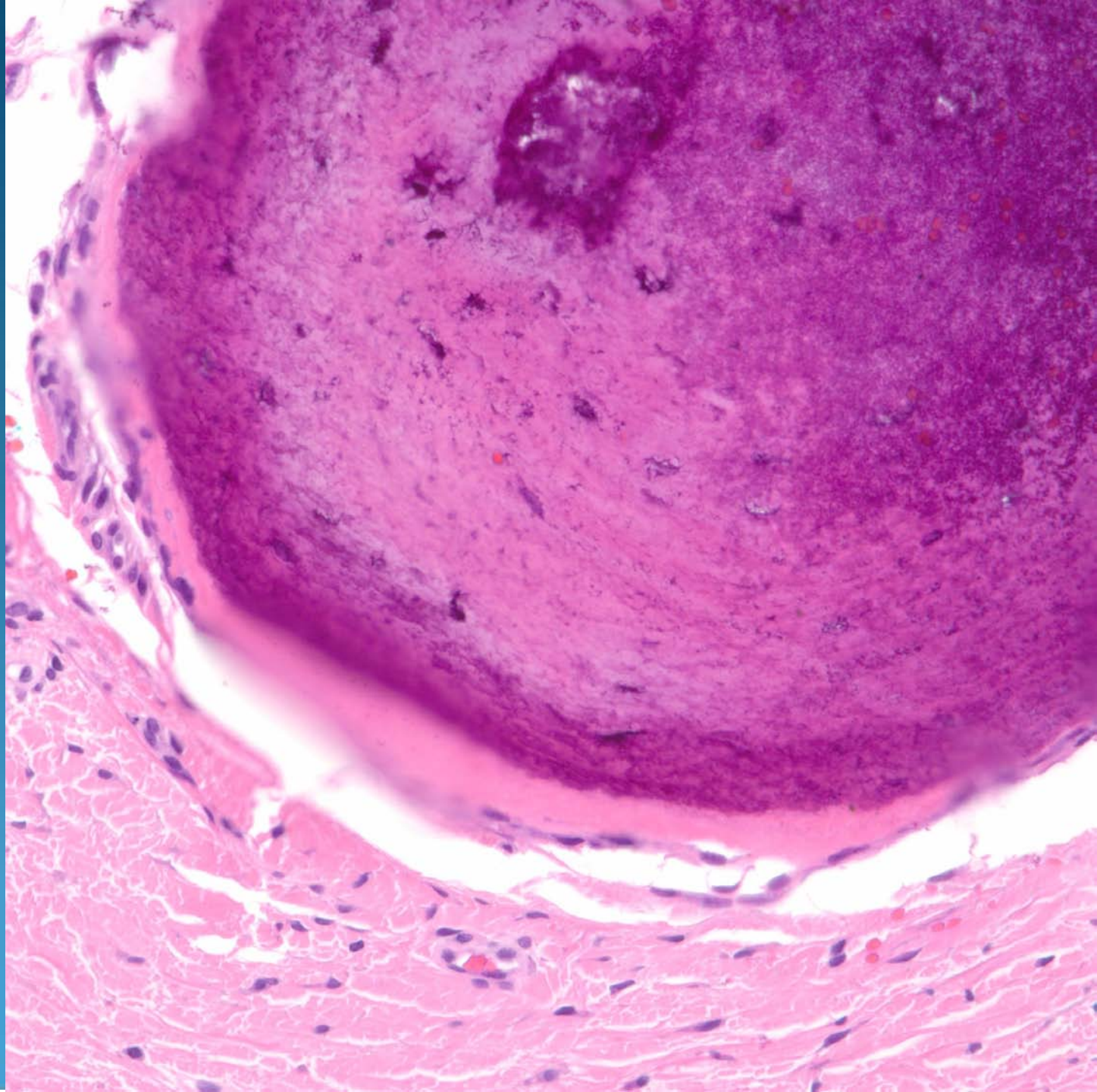


- Nodular collections of hyalinized material, may show cracking
- Localized to papillary dermis
- Congo red negative, May be PAS positive
- Elastic stain may show decreased elastic fibers







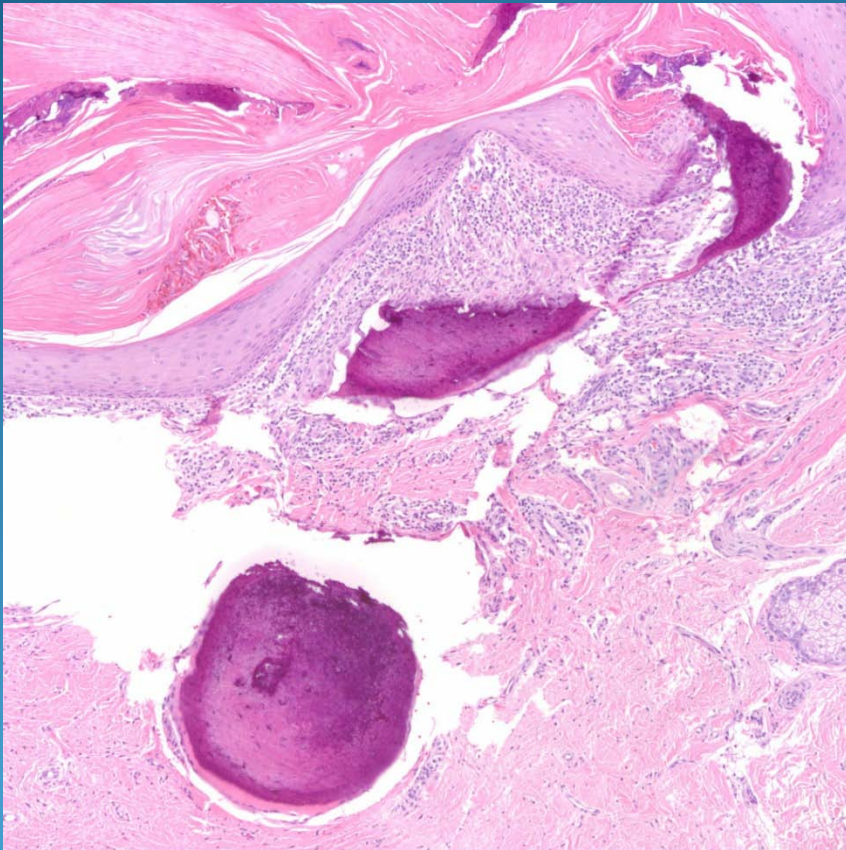


What is the best diagnosis?

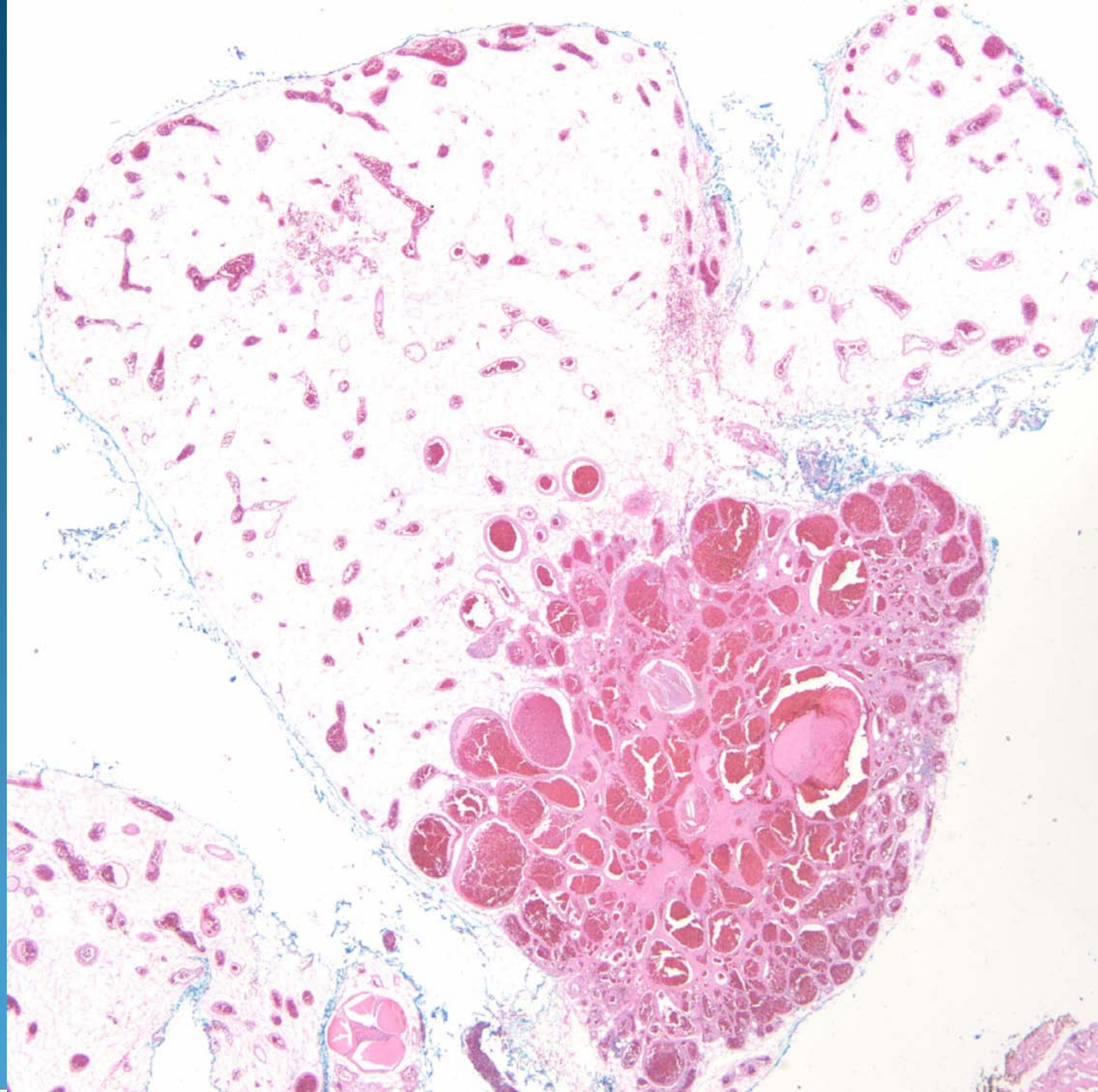
- A. Osteosarcoma
- B. Chondroid metaplasia
- C. Chondrodermatitis nodularis helices
- D. Osteoma cutis
- E. Gouty tophus

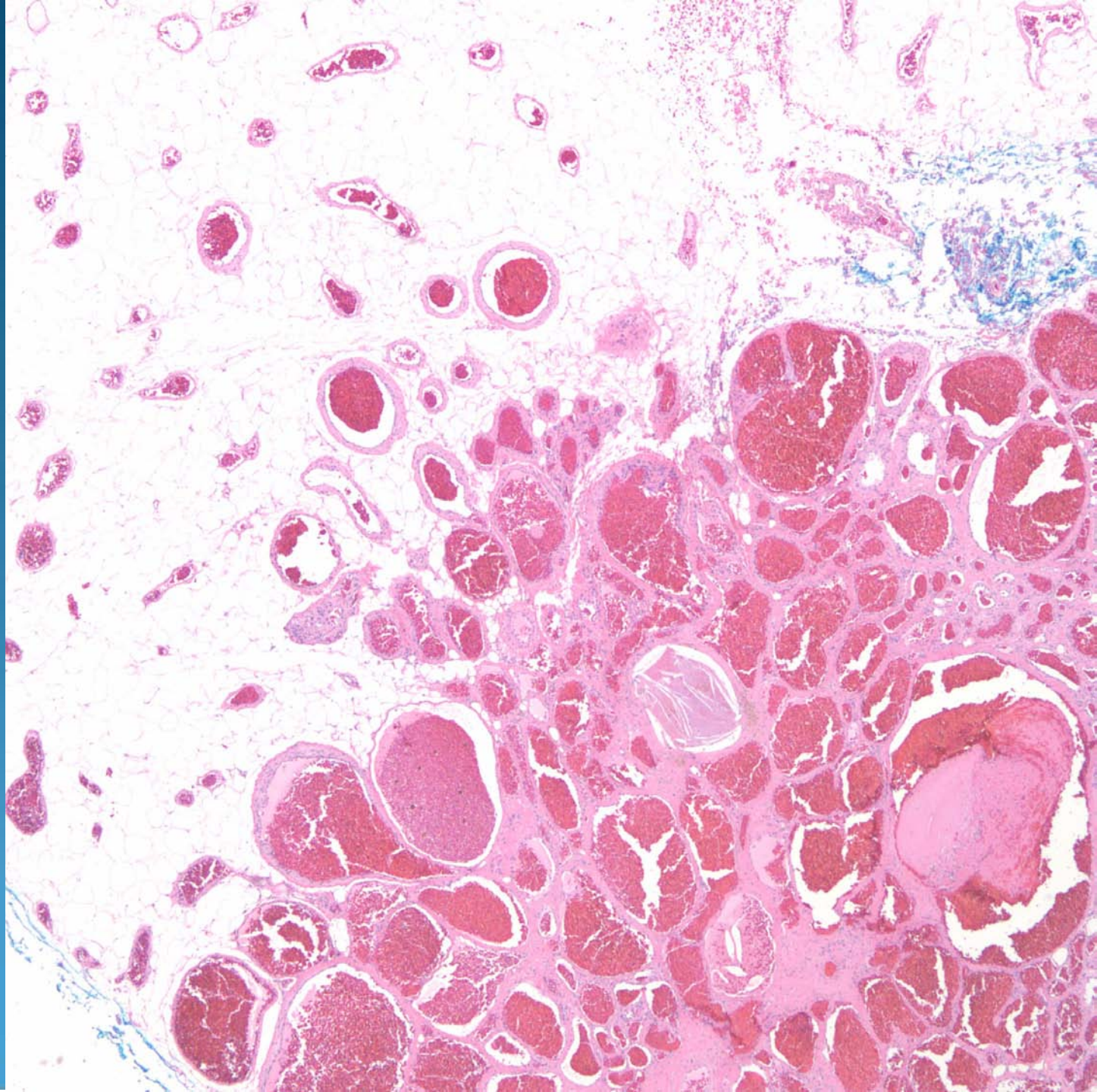
Osteoma cutis arising with an
epidermal inclusion cyst

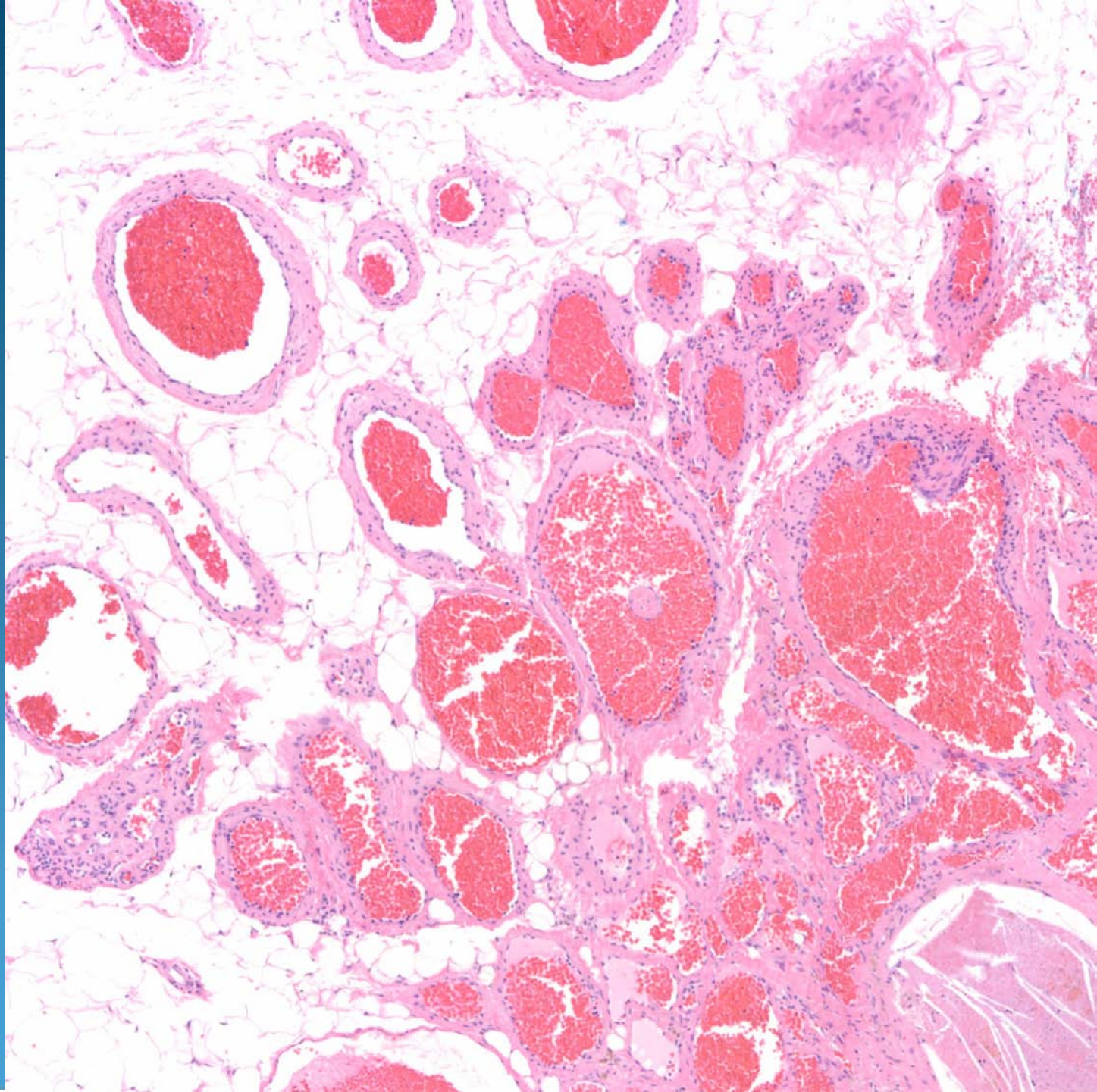
Pearls

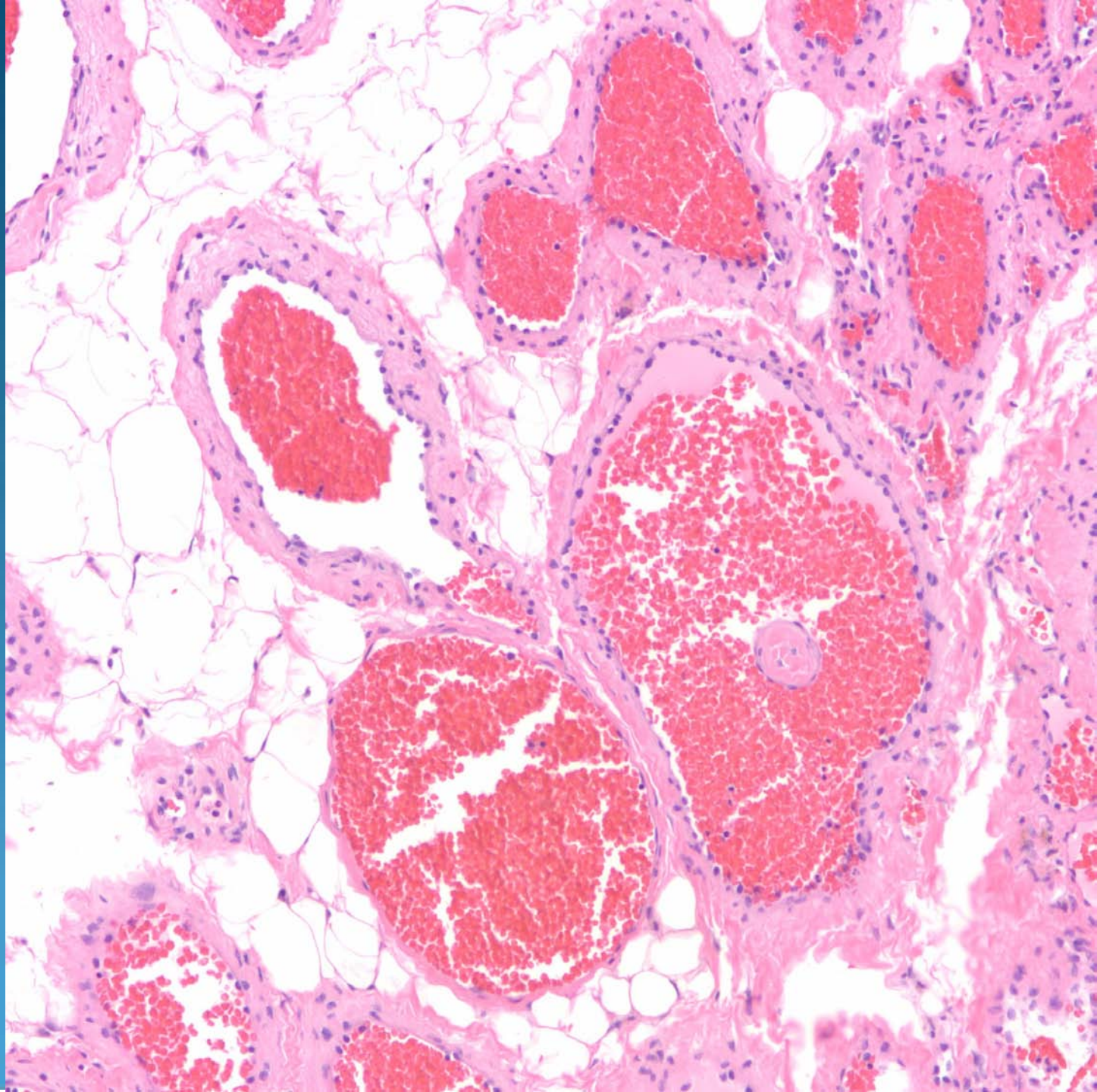


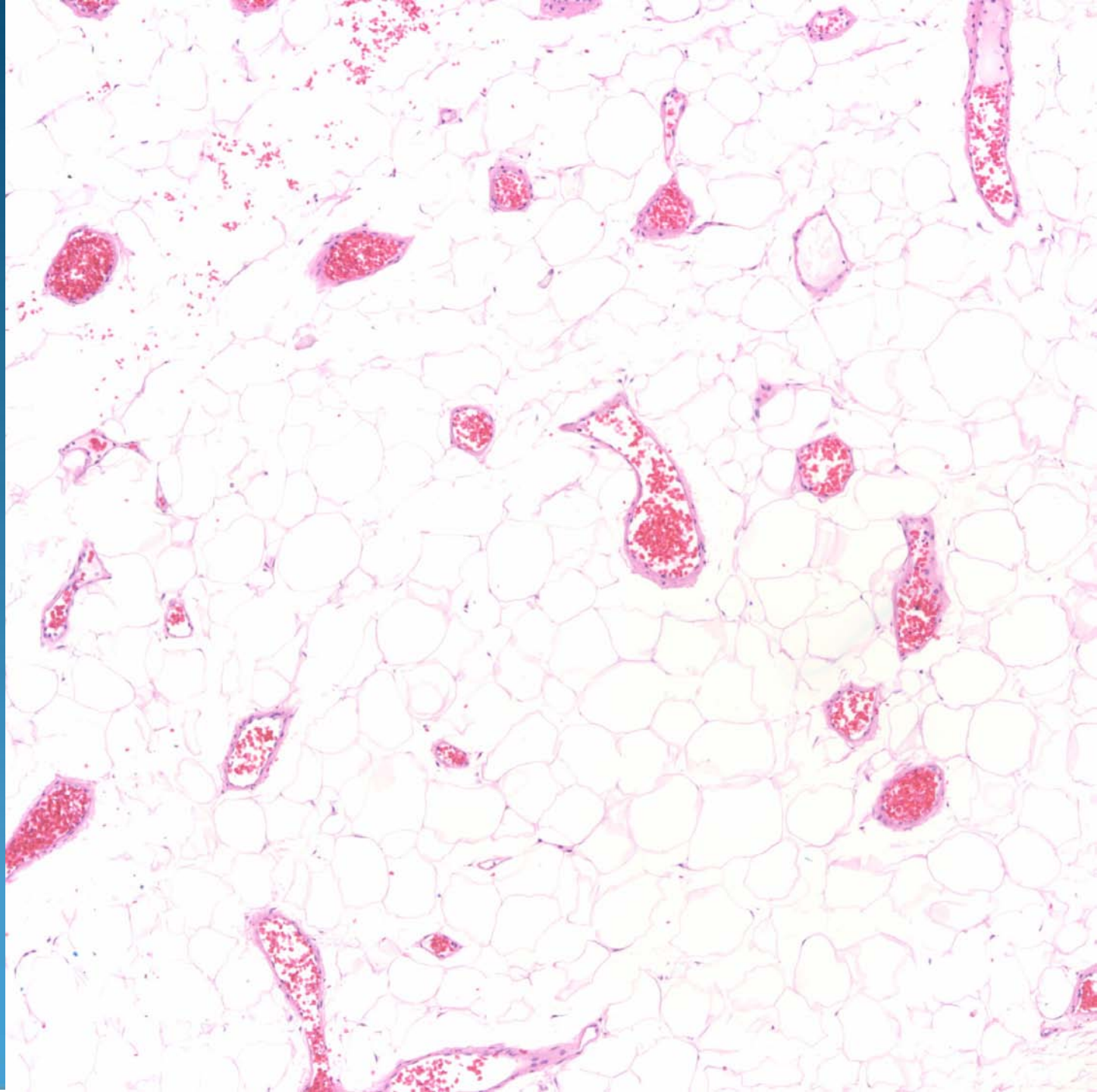
- Benign bone with variable calcification
- May show “chatter” artifact and tissue drop out around bone
- If secondary osteoma cutis, may see precursor lesion ie, epidermal cyst, granuloma, hemangioma, etc.

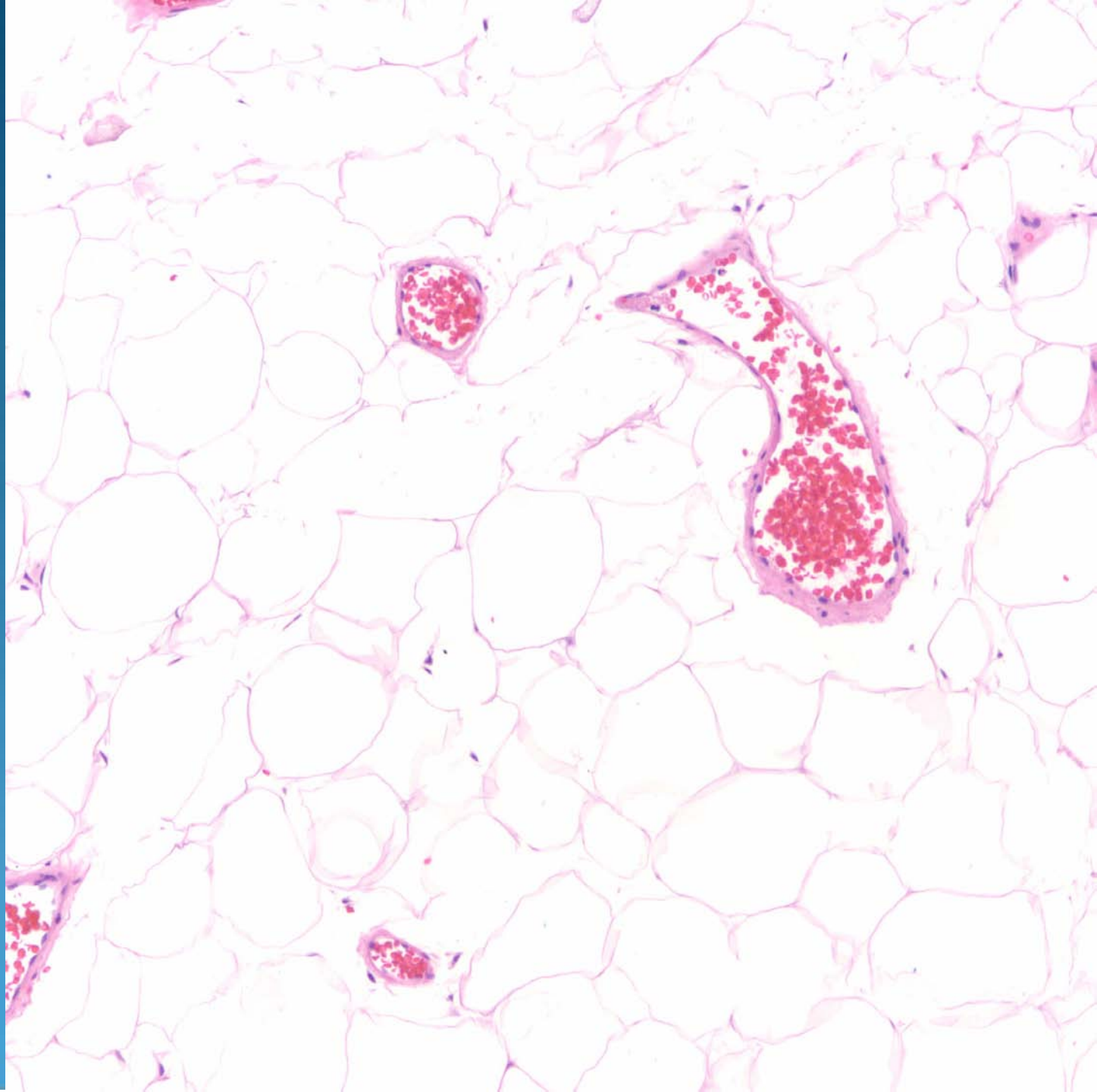










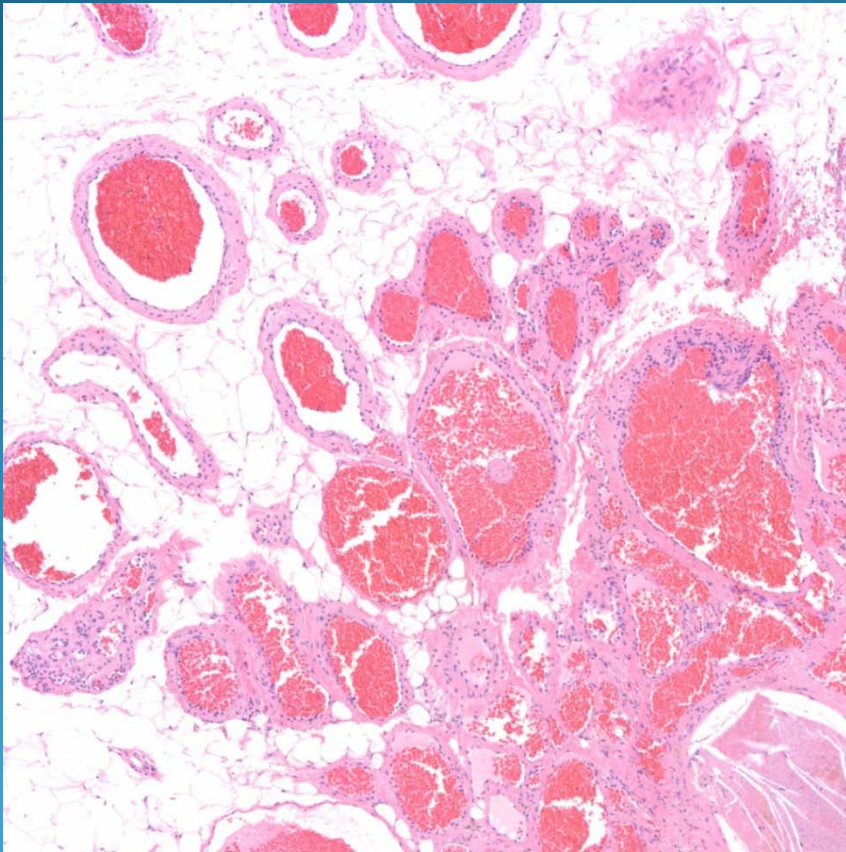


What is the best diagnosis?

- A. Angiolipoma
- B. Spindle cell lipoma
- C. Liposarcoma
- D. Lipoblastoma
- E. Angiosarcoma

Angiolipoma

Pearls



- Proliferation of bland vessels some of which contain intraluminal thrombi
- Admixed with mature adipose tissue
- This case illustrates the principle that angiolipomas are fundamentally hemangiomas with fat recruitment rather than lipomas with a vascular proliferation