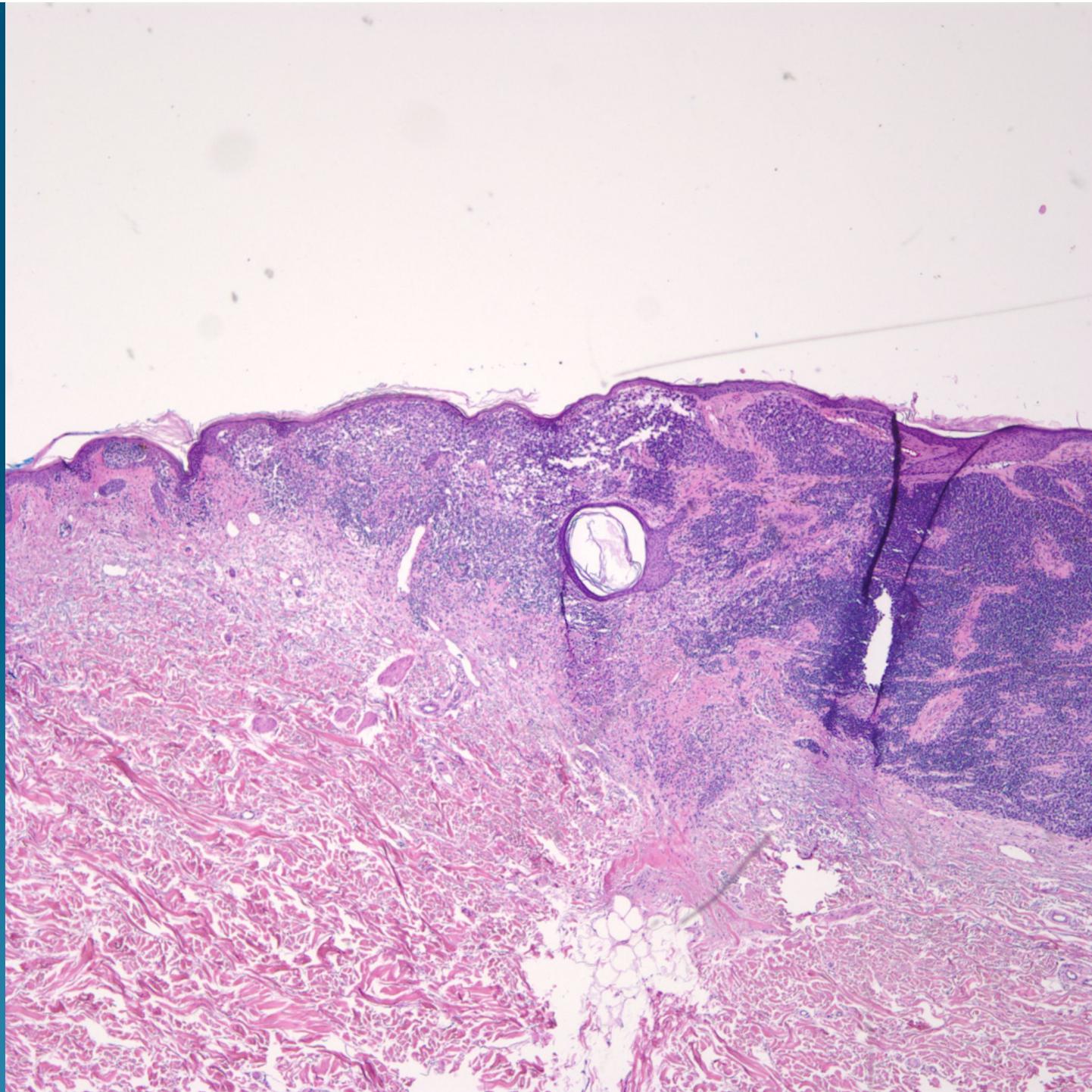
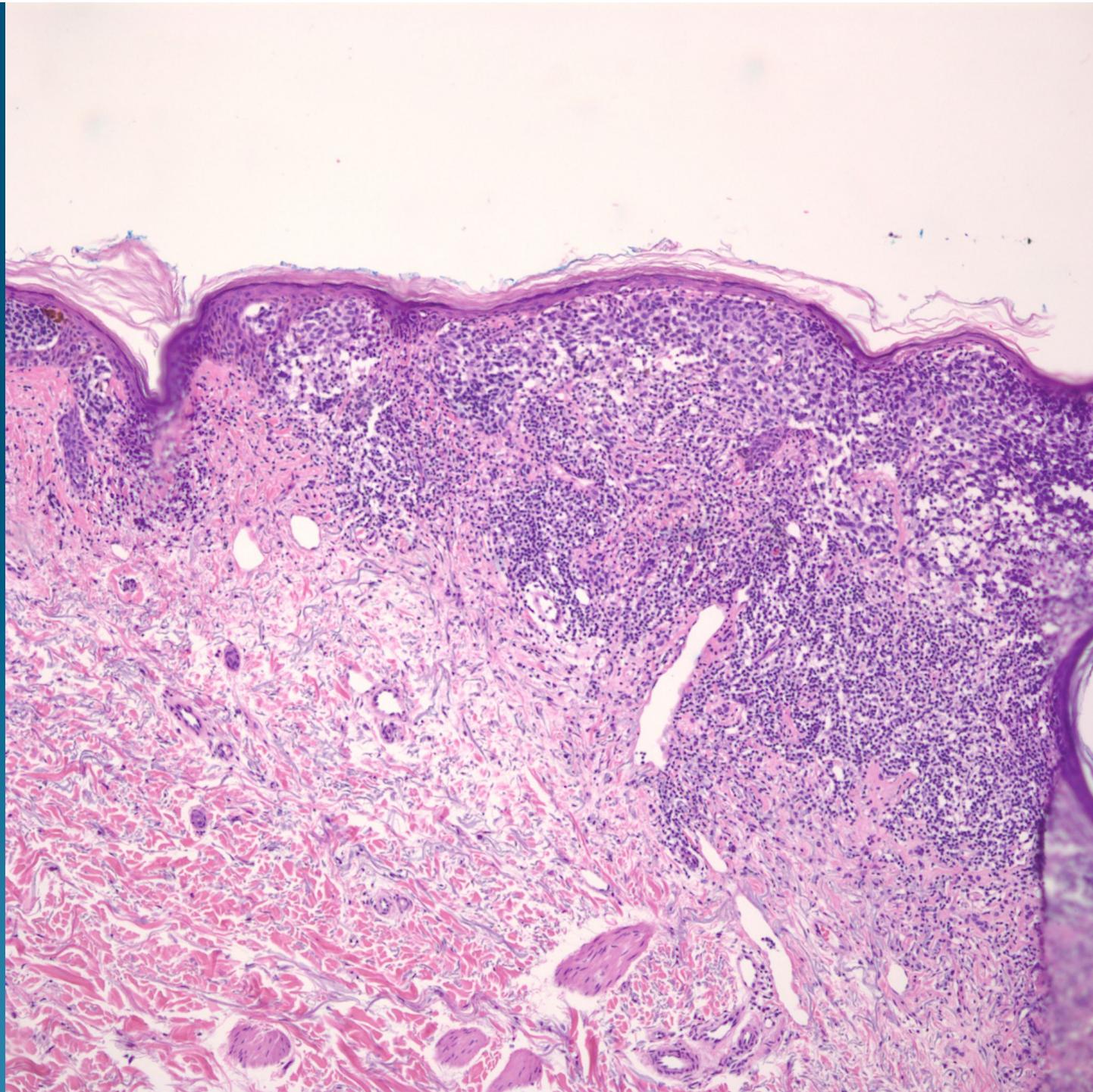
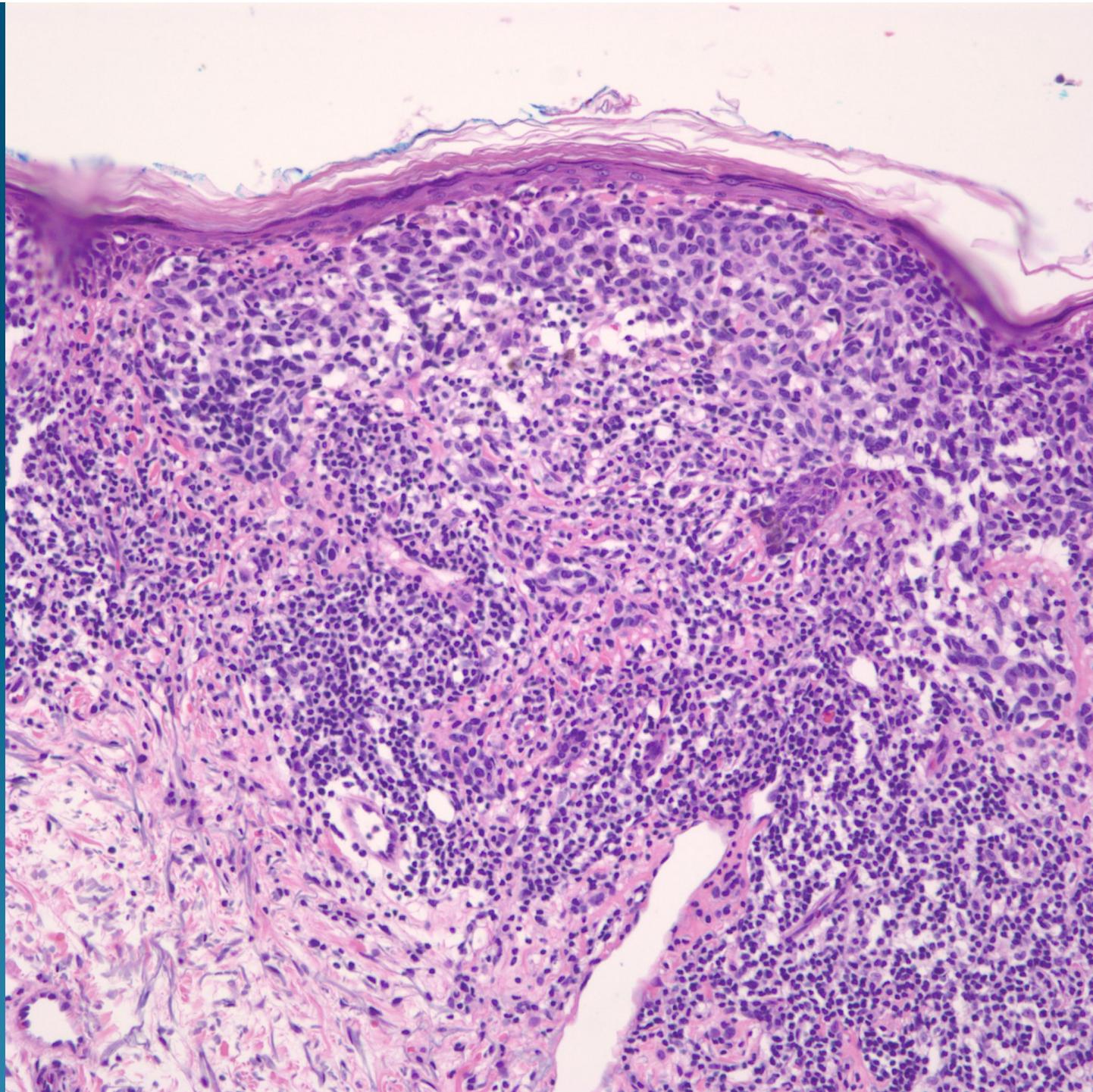


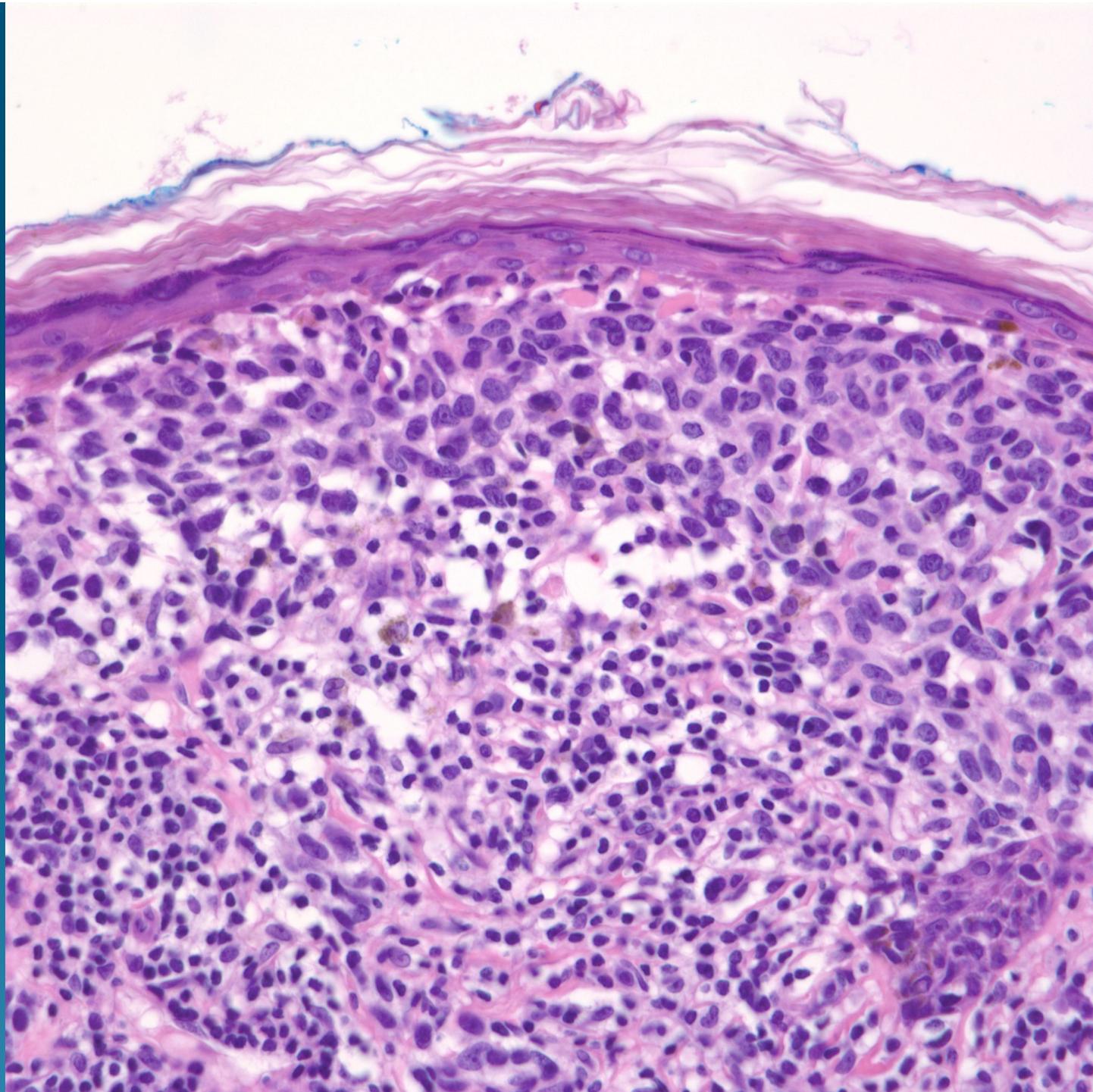
Dermatopathology Slide Review Part 79

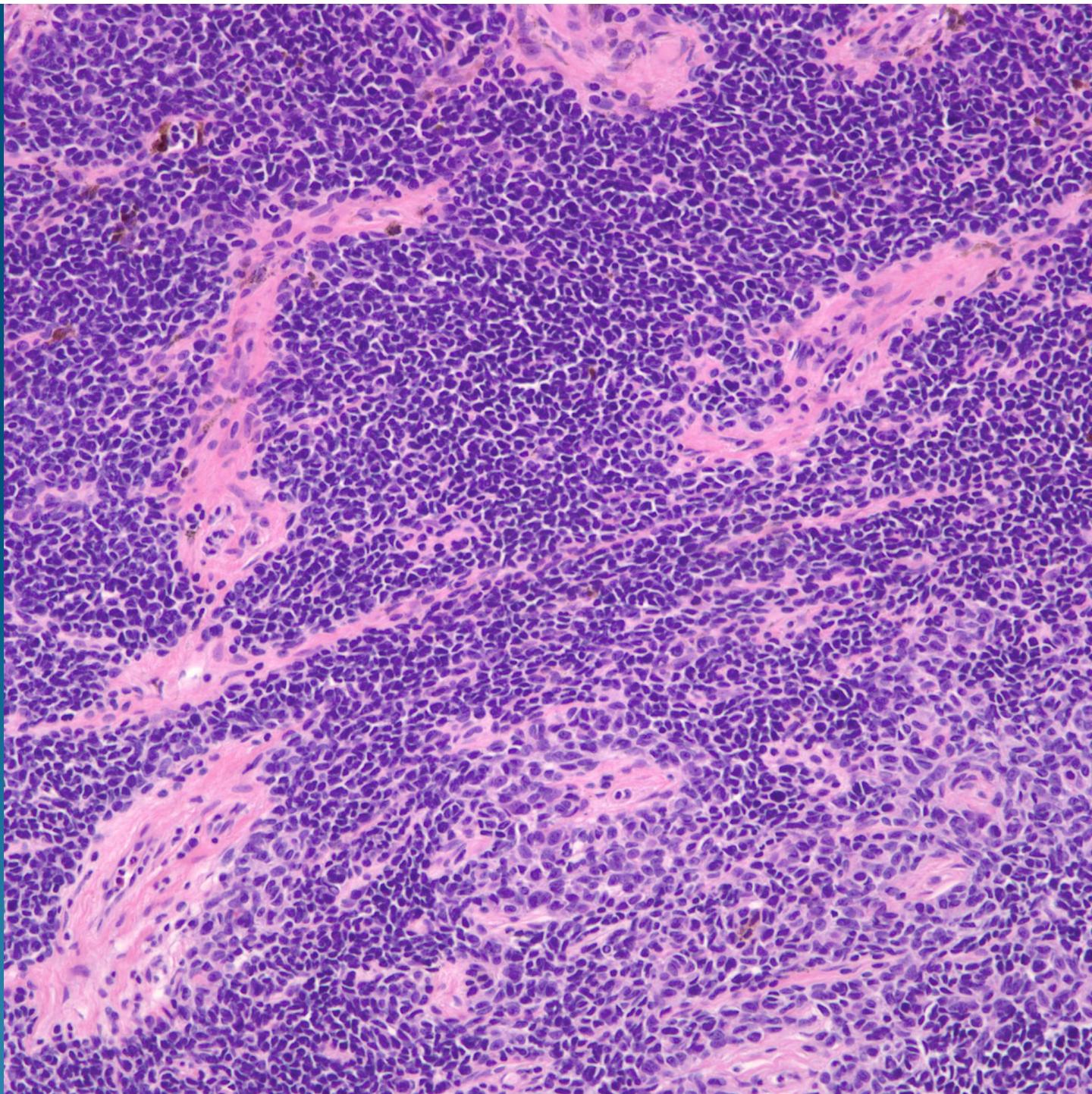
Paul K. Shitabata, M.D.
Dermatopathology Institute

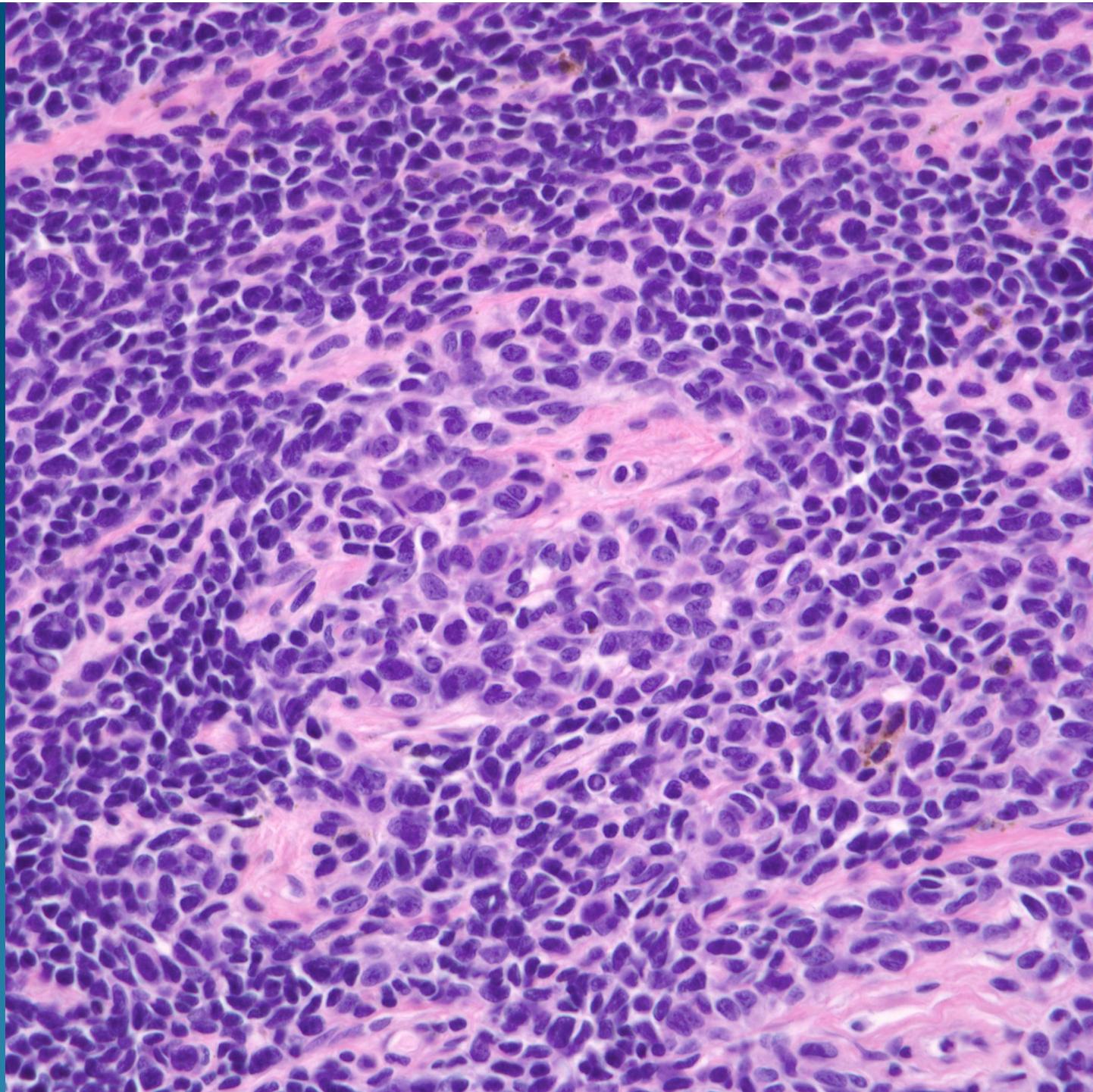








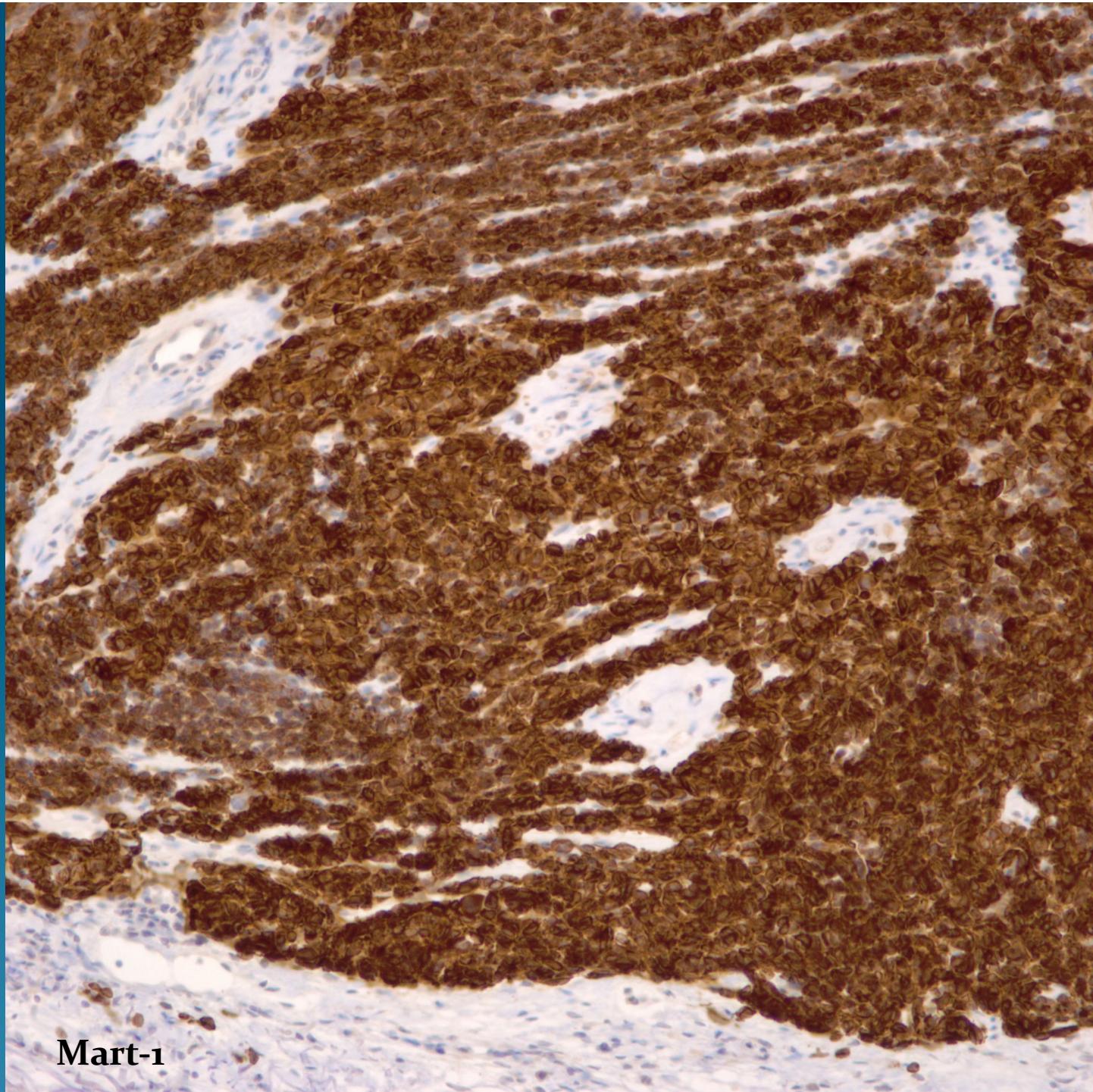




What is the best diagnosis?

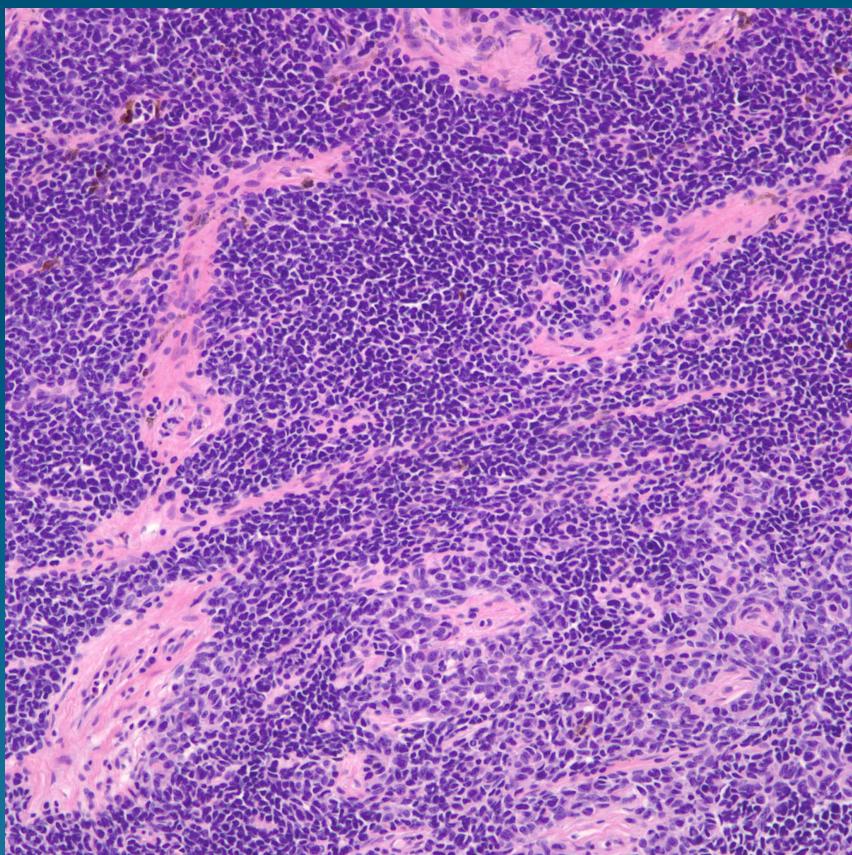
- A. Malignant melanoma
- B. Merkel cell carcinoma
- C. Poorly differentiated squamous cell carcinoma
- D. Nodular basal cell carcinoma
- E. Metastatic renal cell carcinoma

Malignant Melanoma

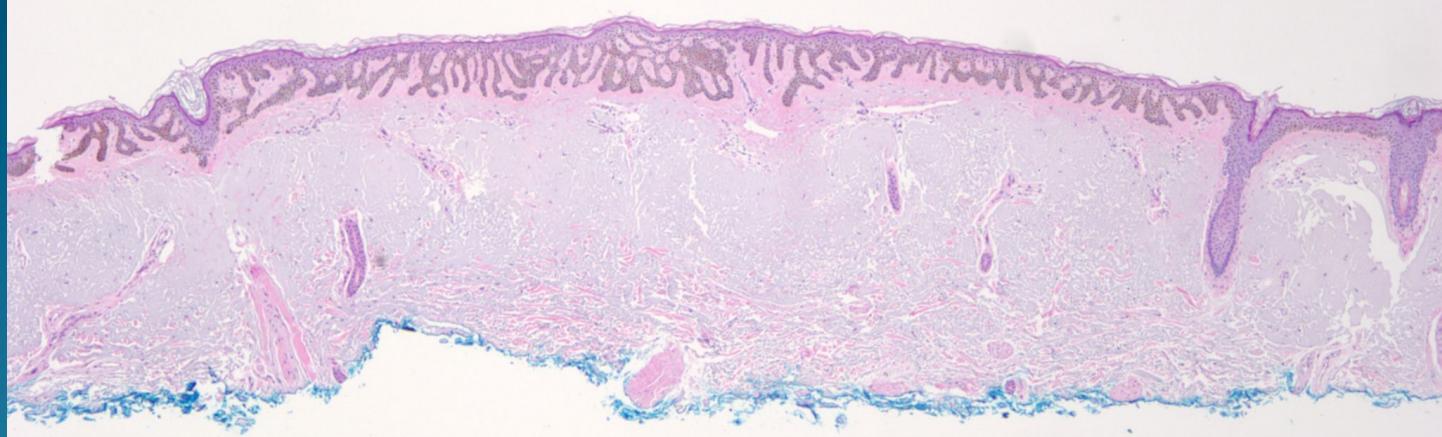


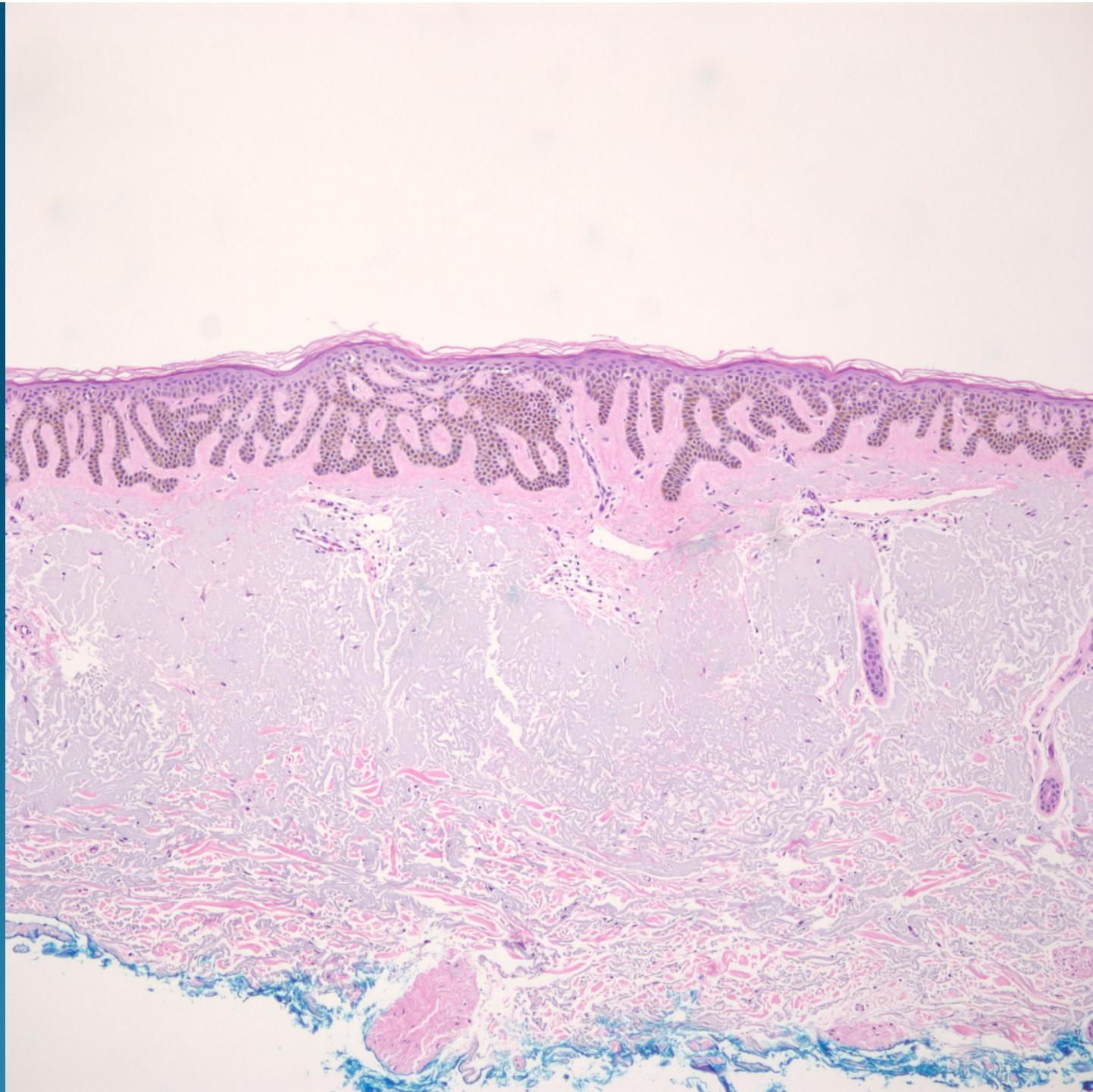
Mart-1

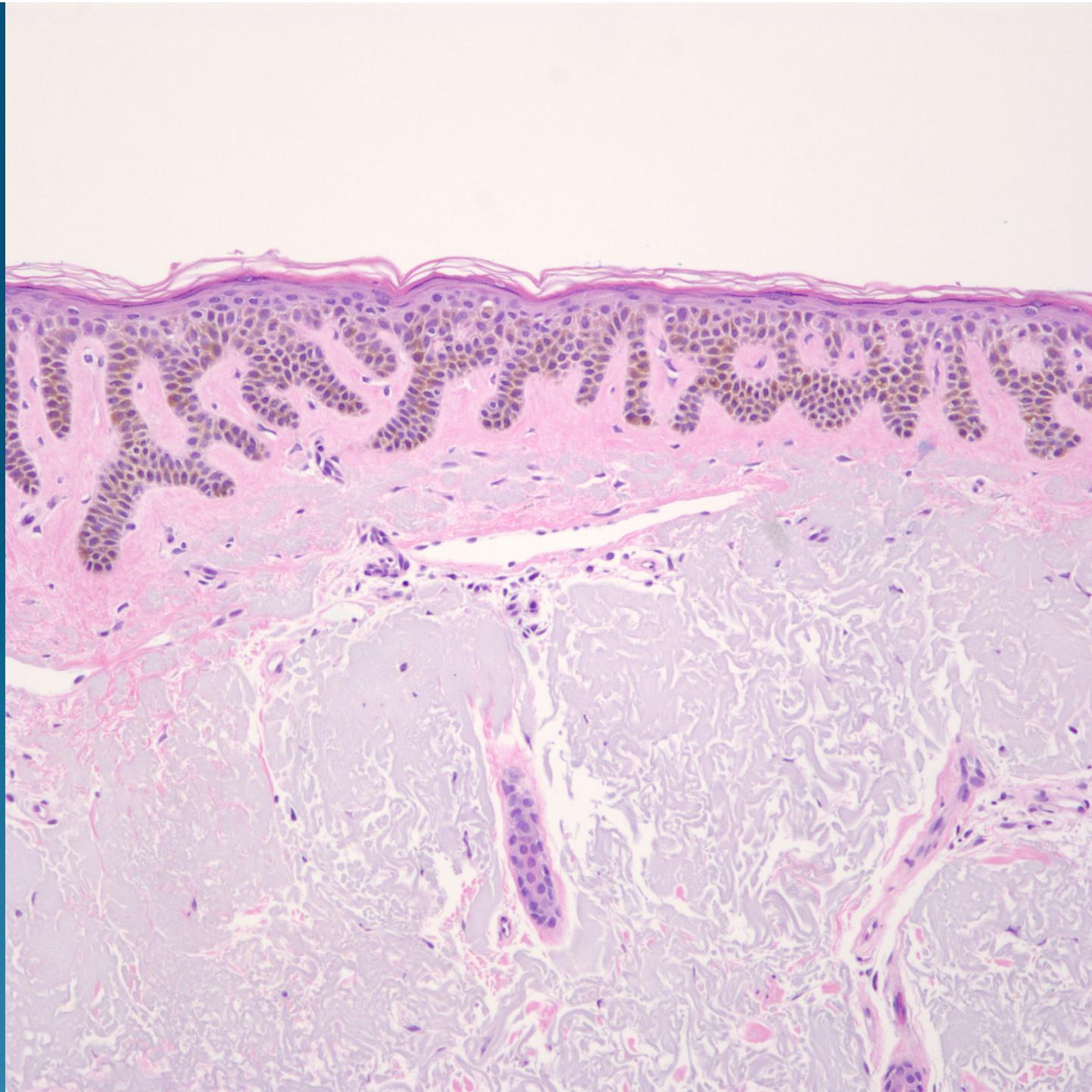
Pearls

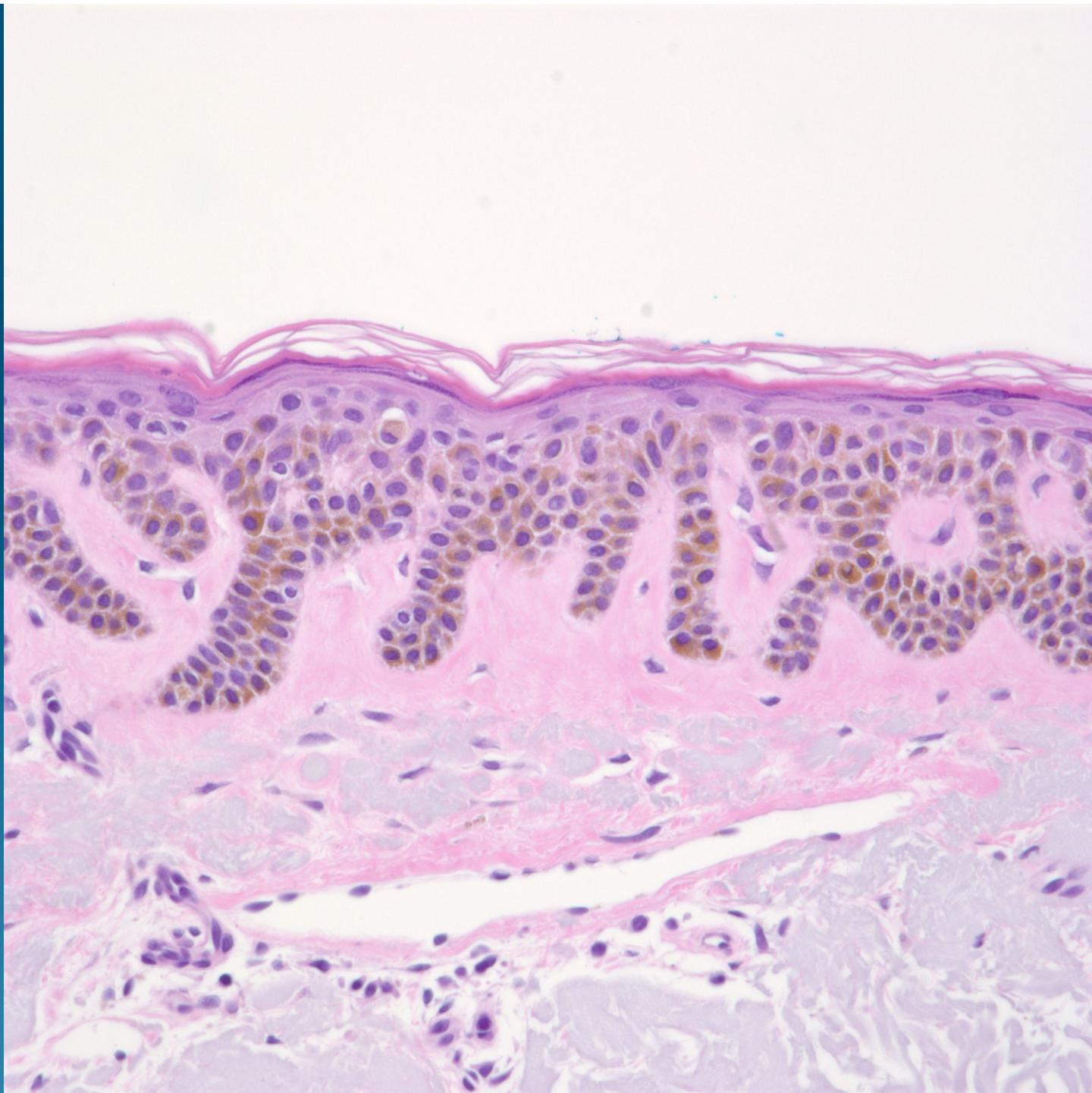


- Asymmetric proliferation of pleomorphic melanocytes with focal junctional activity
- Look for cytoplasmic melanin pigment, loss of maturation, and mitotic figures
- Variable histopathology including areas of amelanotic melanoma, may need confirmation with melanoma specific antibodies







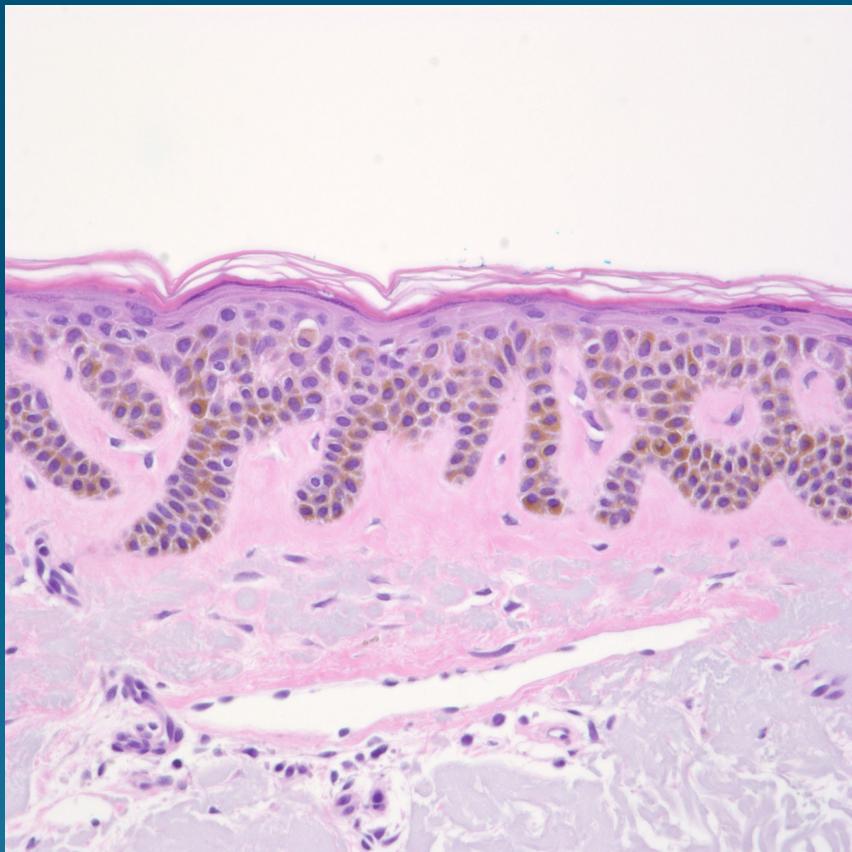


What is the best diagnosis?

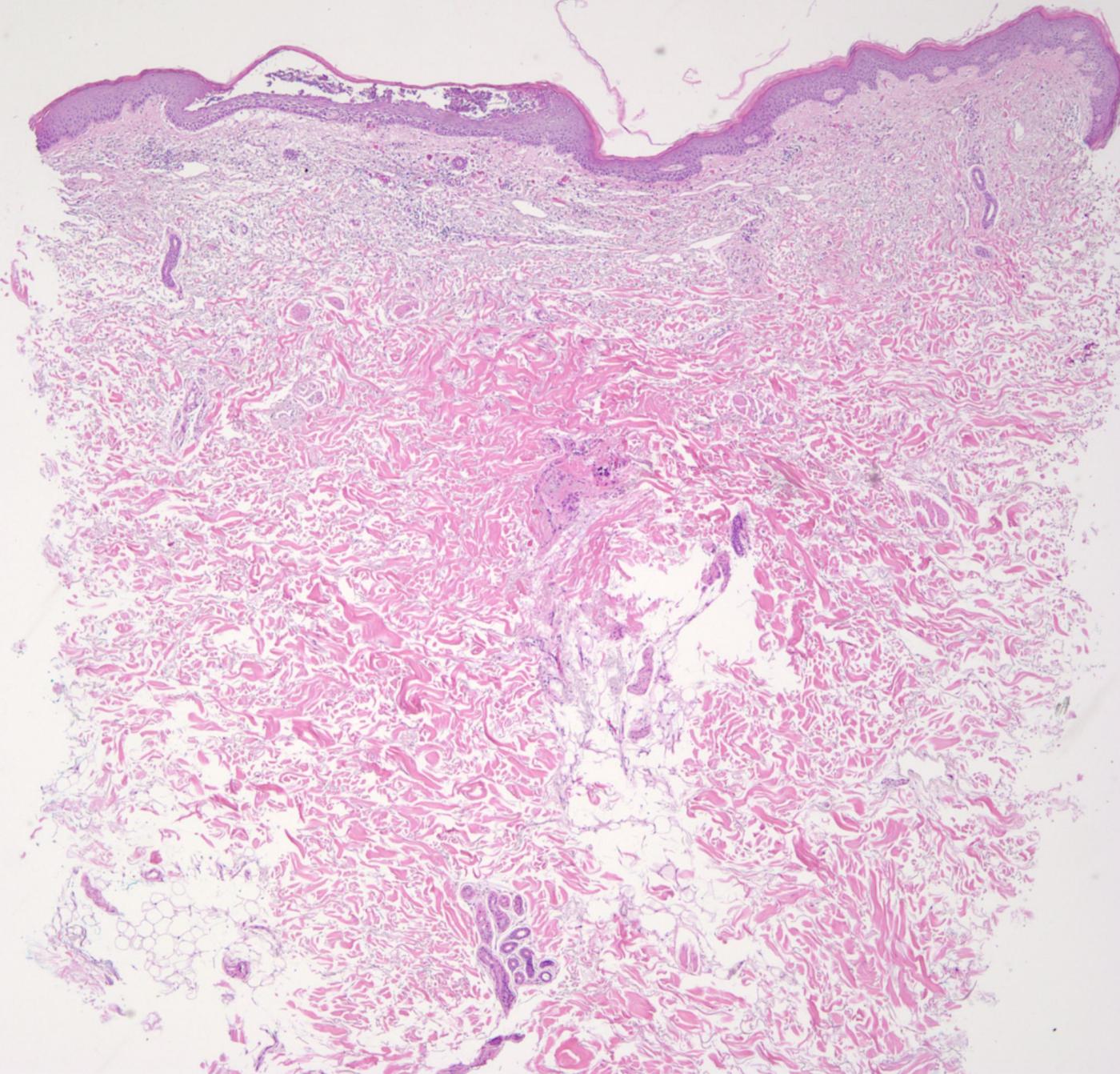
- A. Solar Lentigo
- B. Lentiginous junctional nevus
- C. Melanoma in situ, lentigo maligna type
- D. Pigmented actinic keratosis
- E. Superficial basal cell carcinoma, pigmented type

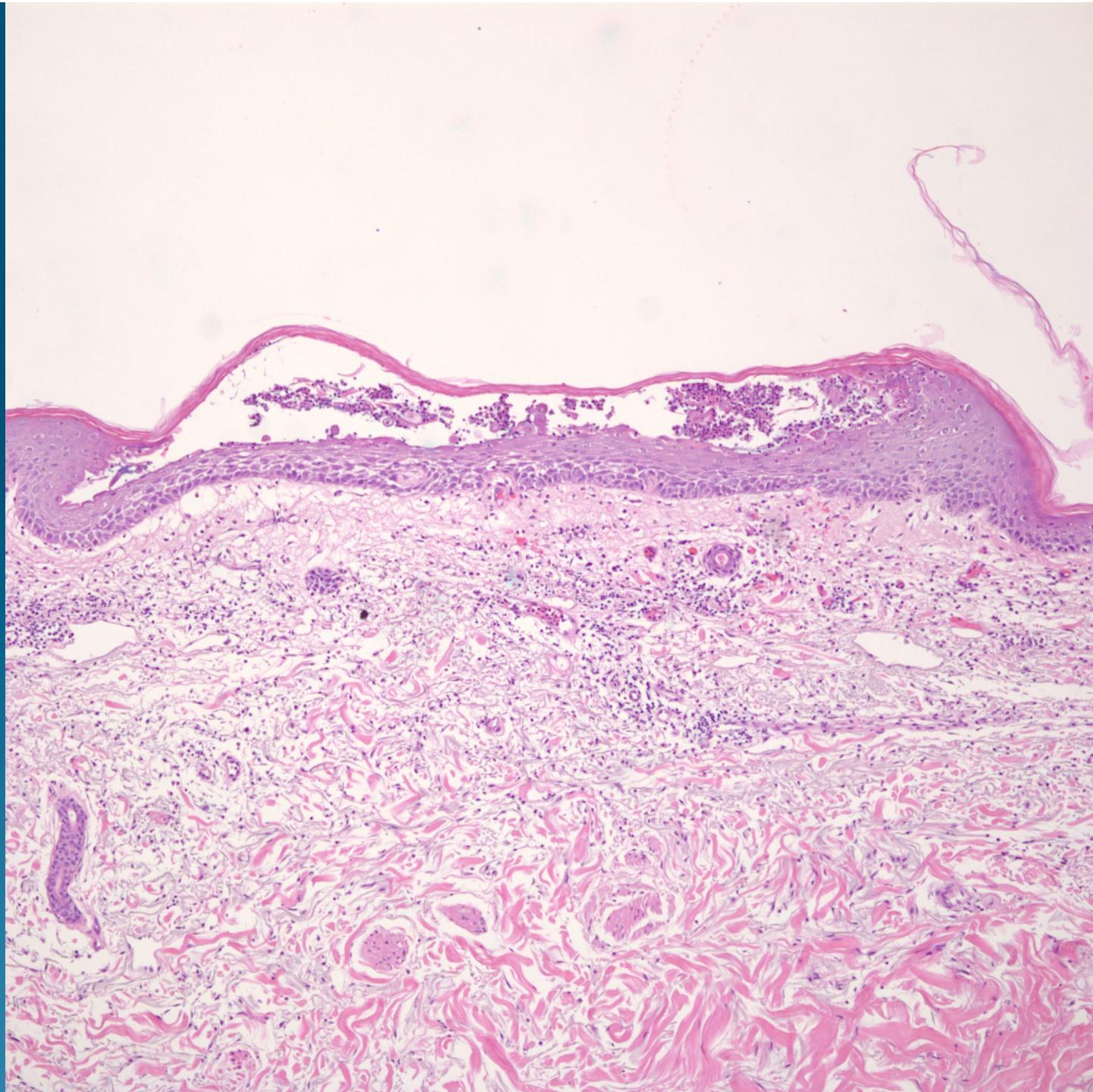
Solar Lentigo

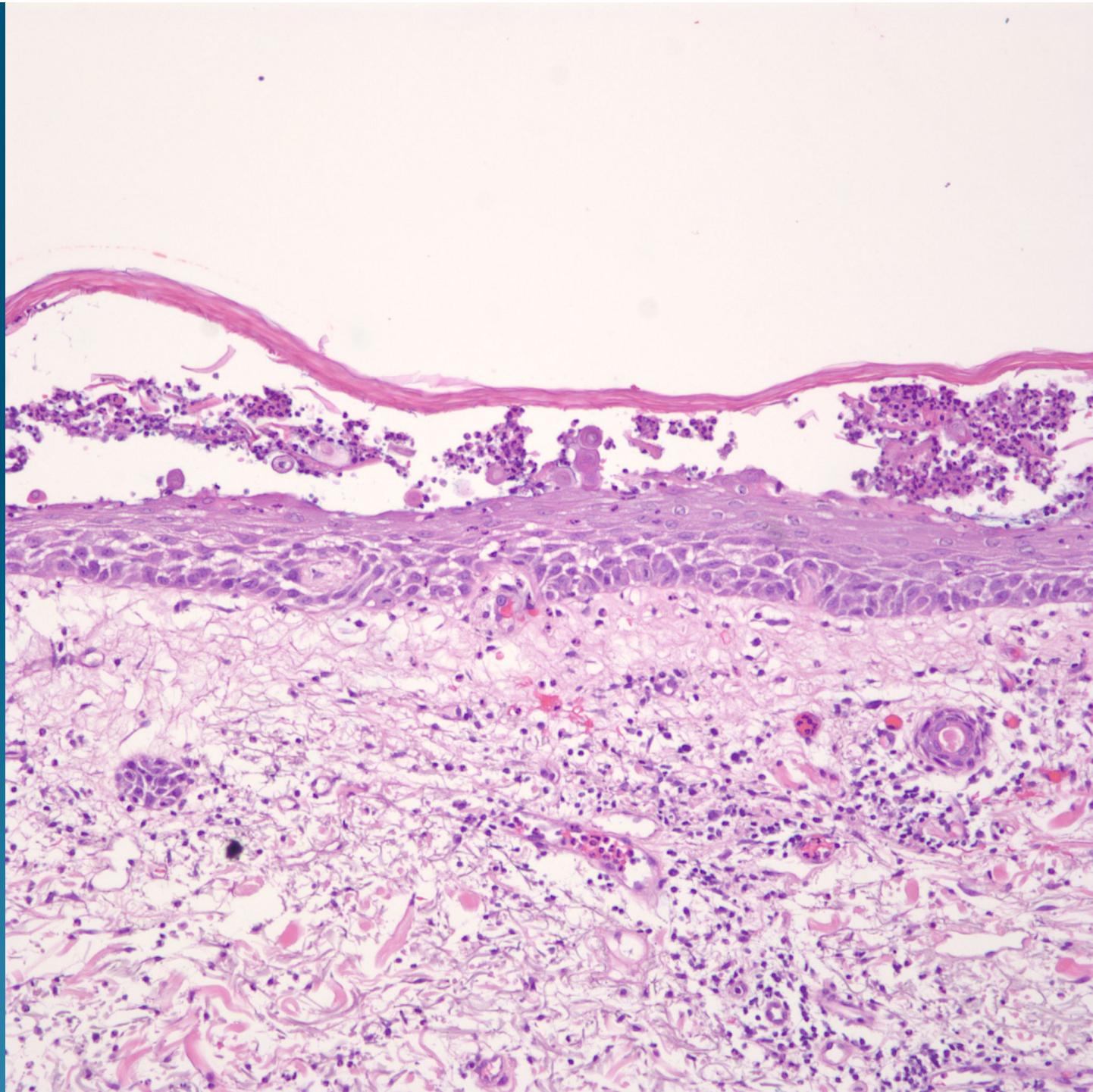
Pearls

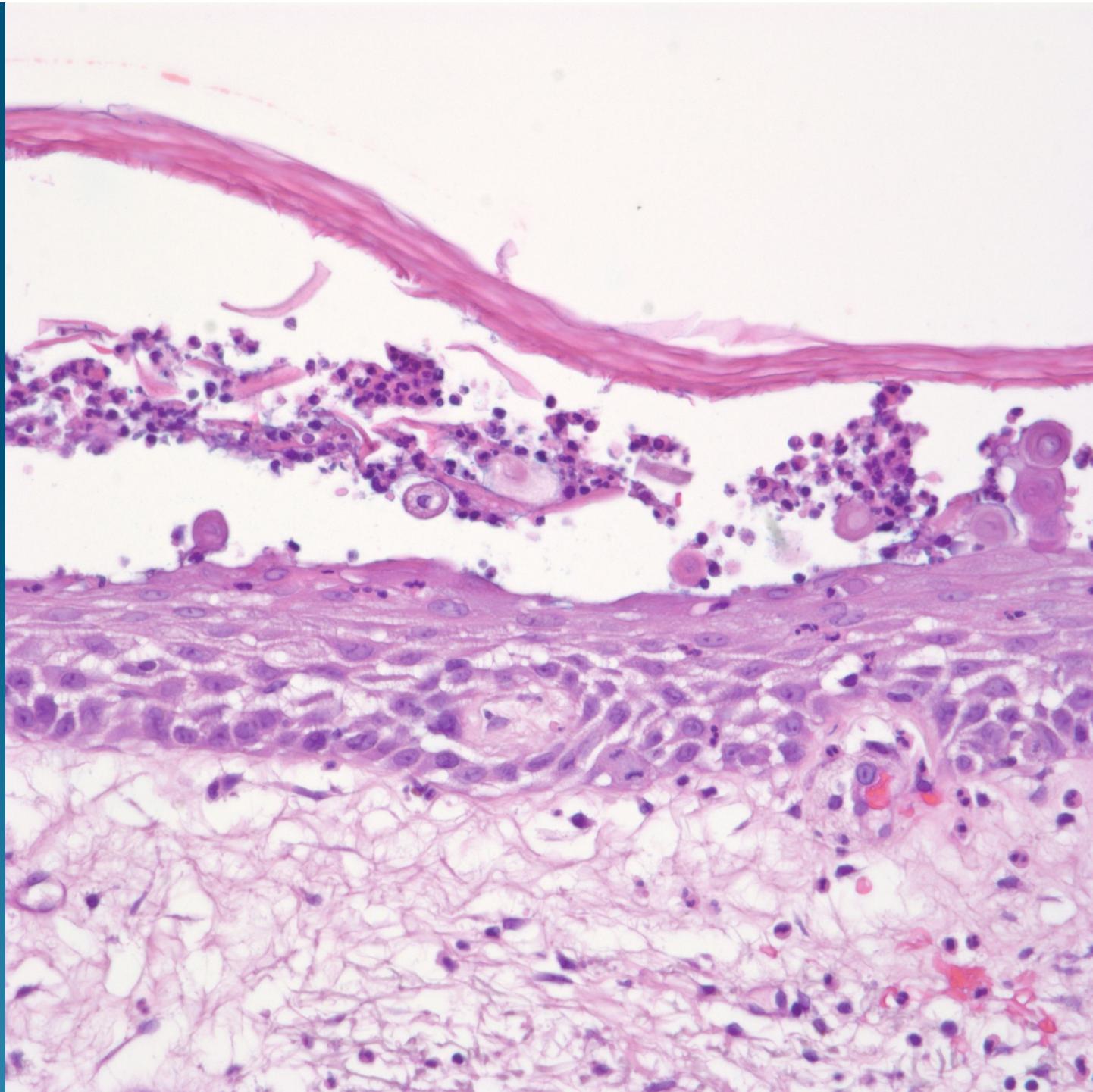


- Delicate projections of rete ridges with even melanin pigmentation
- Resembles “puppy feet”
- No cytologic atypia of keratinocytes or melanocytes
- If hyperplasia of melanocytes increases to nests, may merge with lentiginous junctional nevus (jentigo)







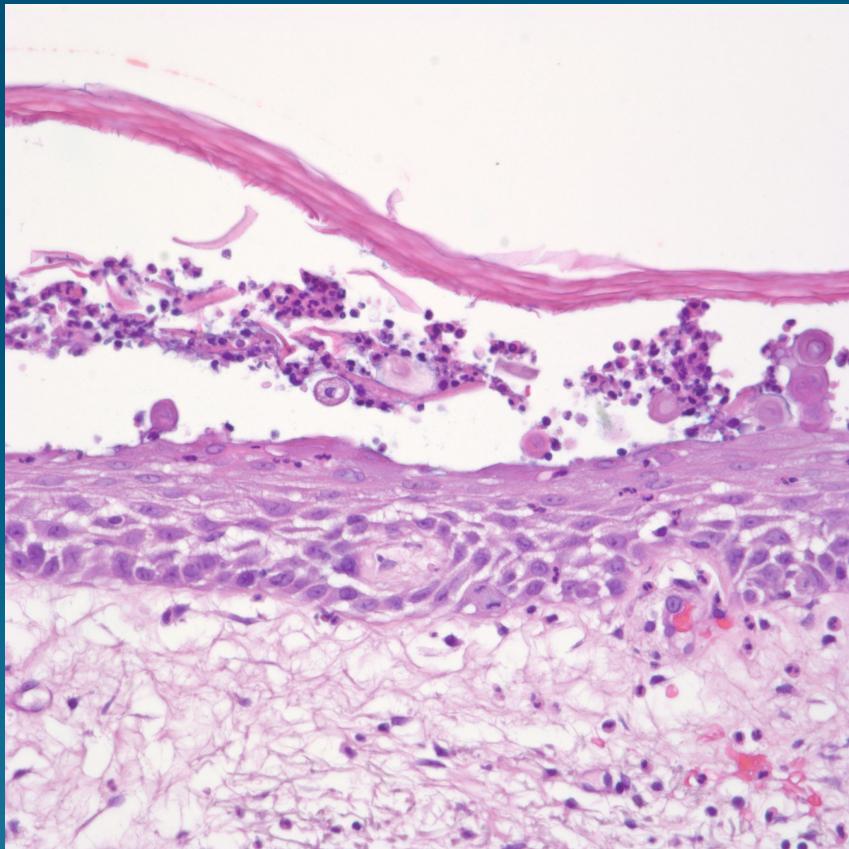


What is the best diagnosis?

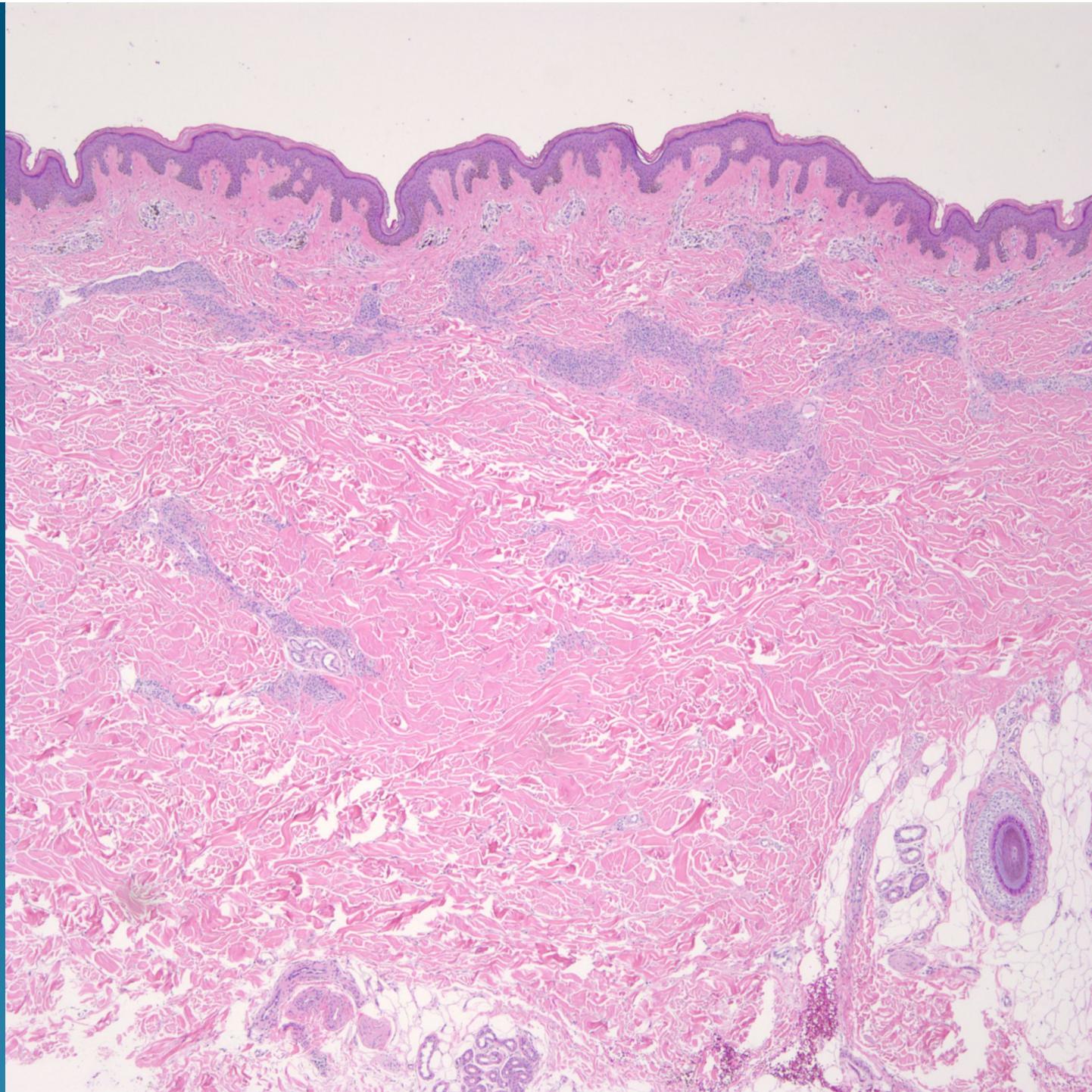
- A. Hailey-Hailey Disease
- B. Pemphigus vulgaris
- C. Pemphigus foliaceus
- D. Darier's disease
- E. Pemphigus vegetans

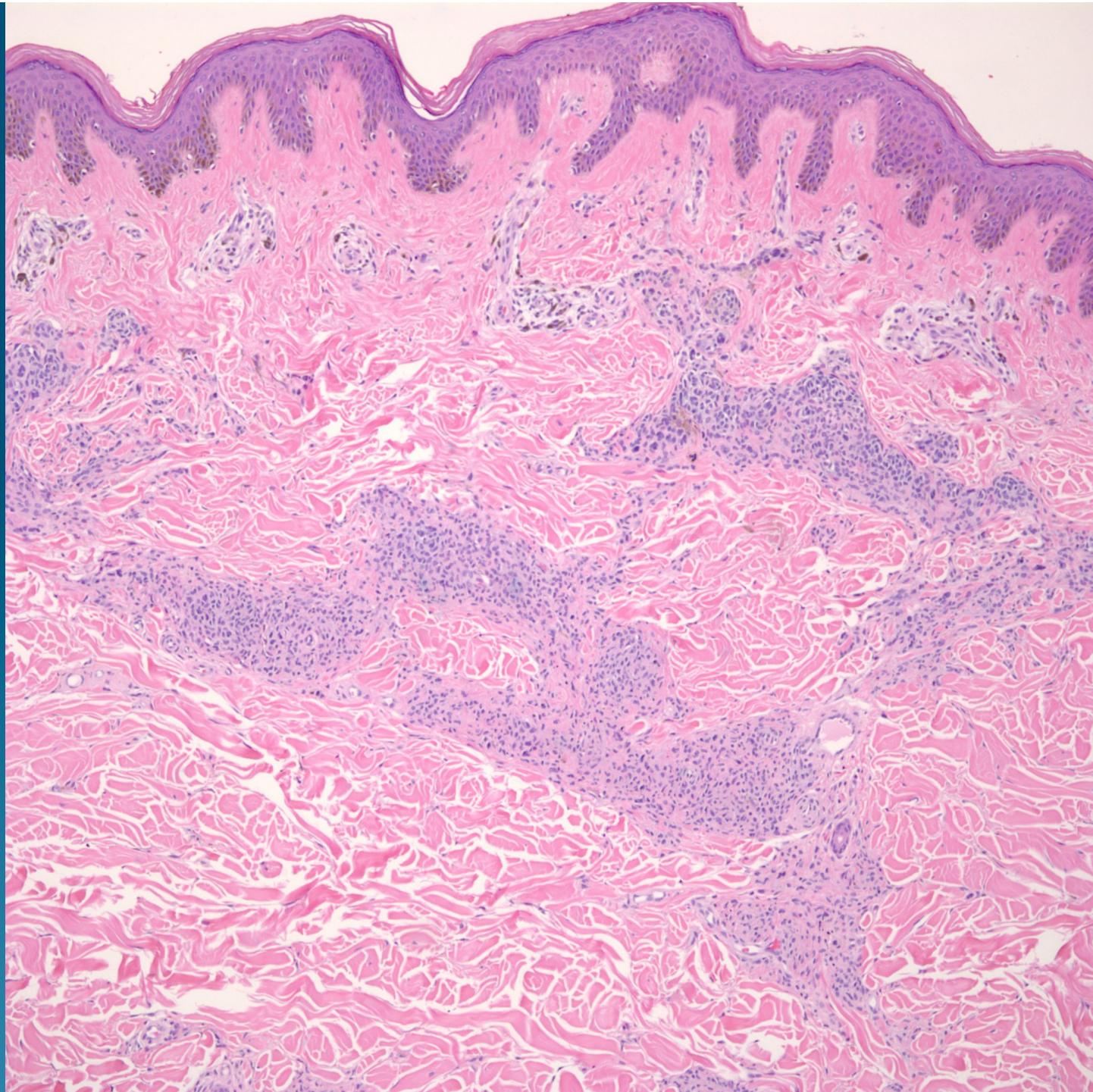
Pemphigus foliaceus

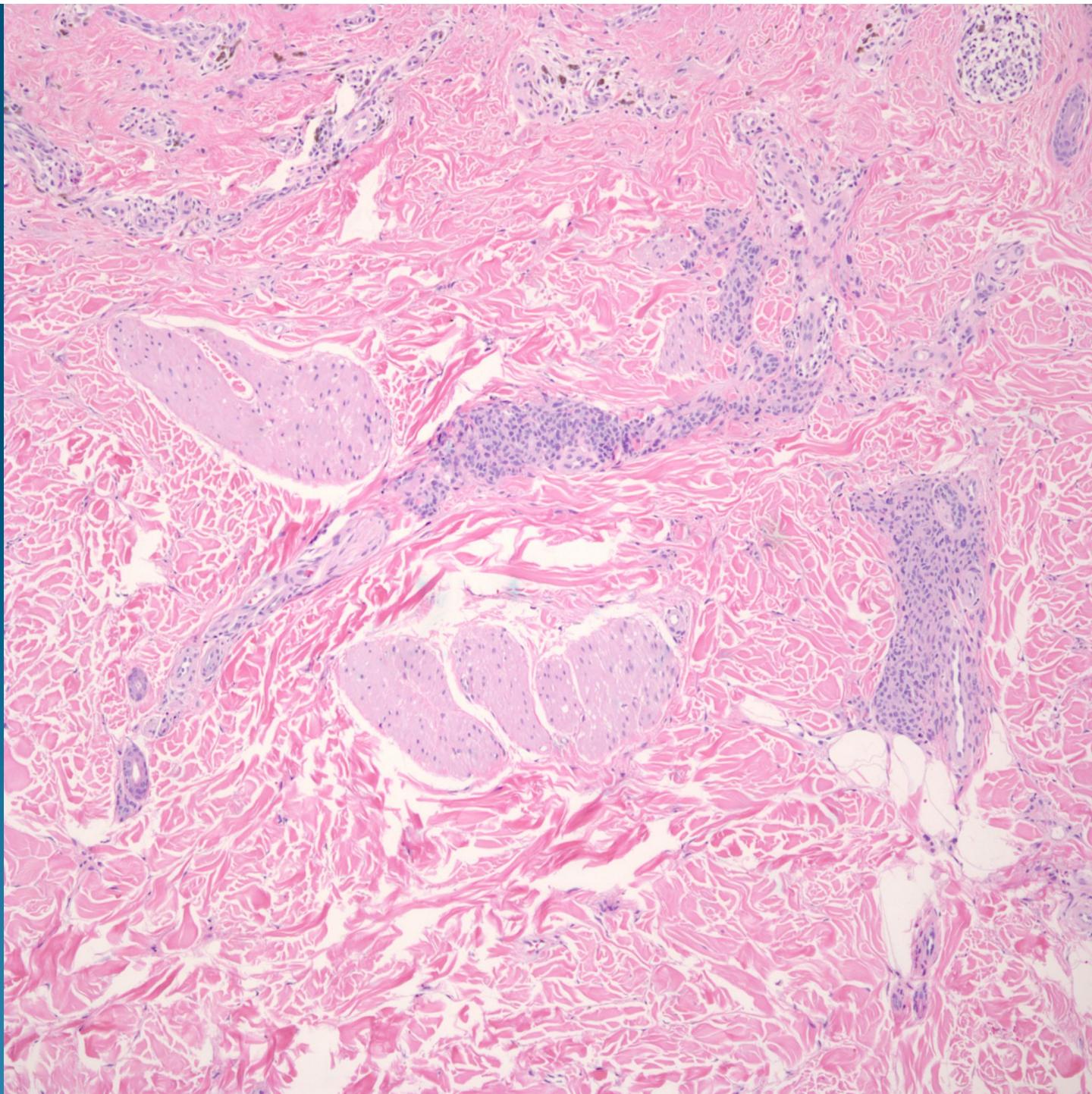
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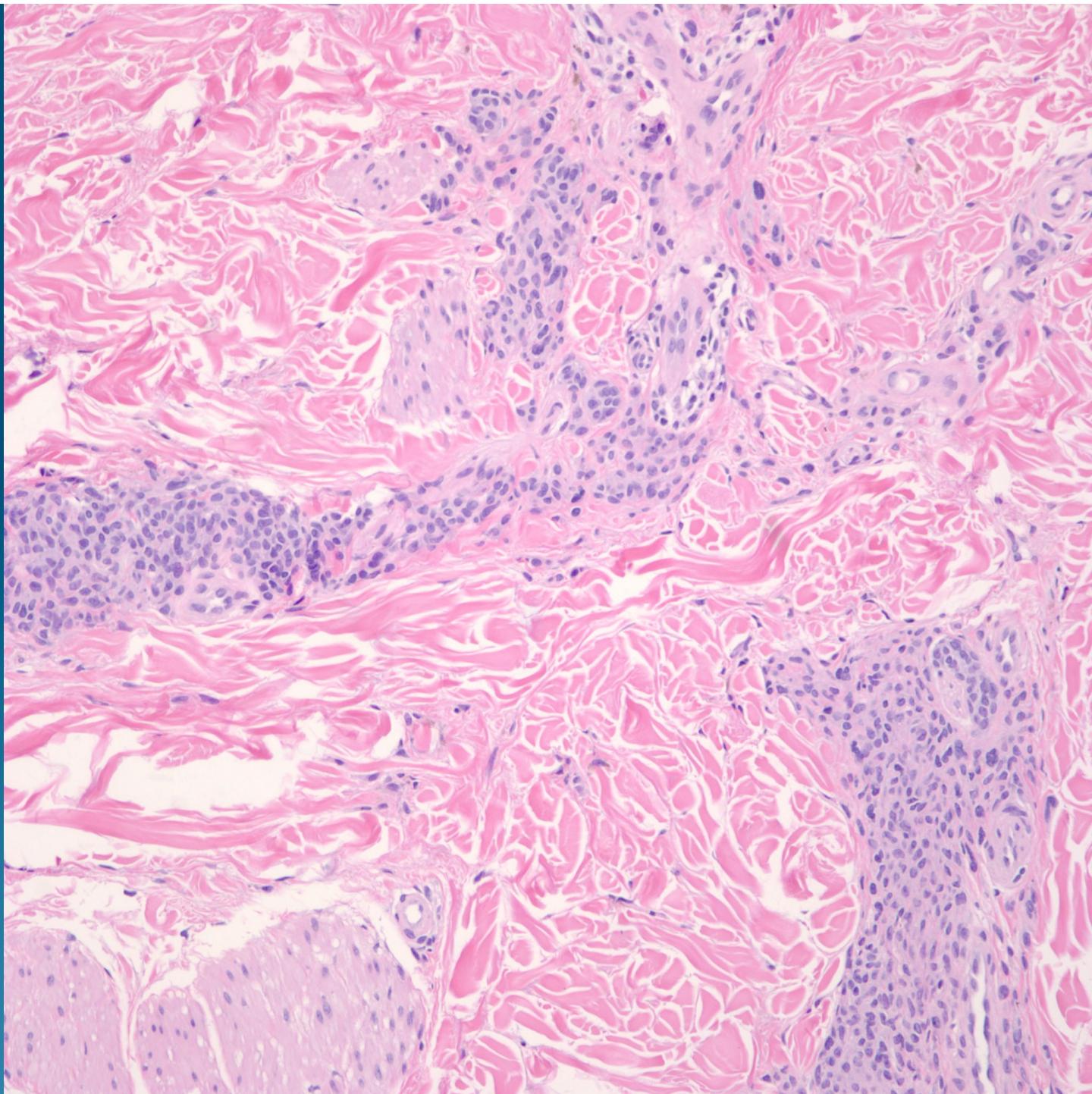


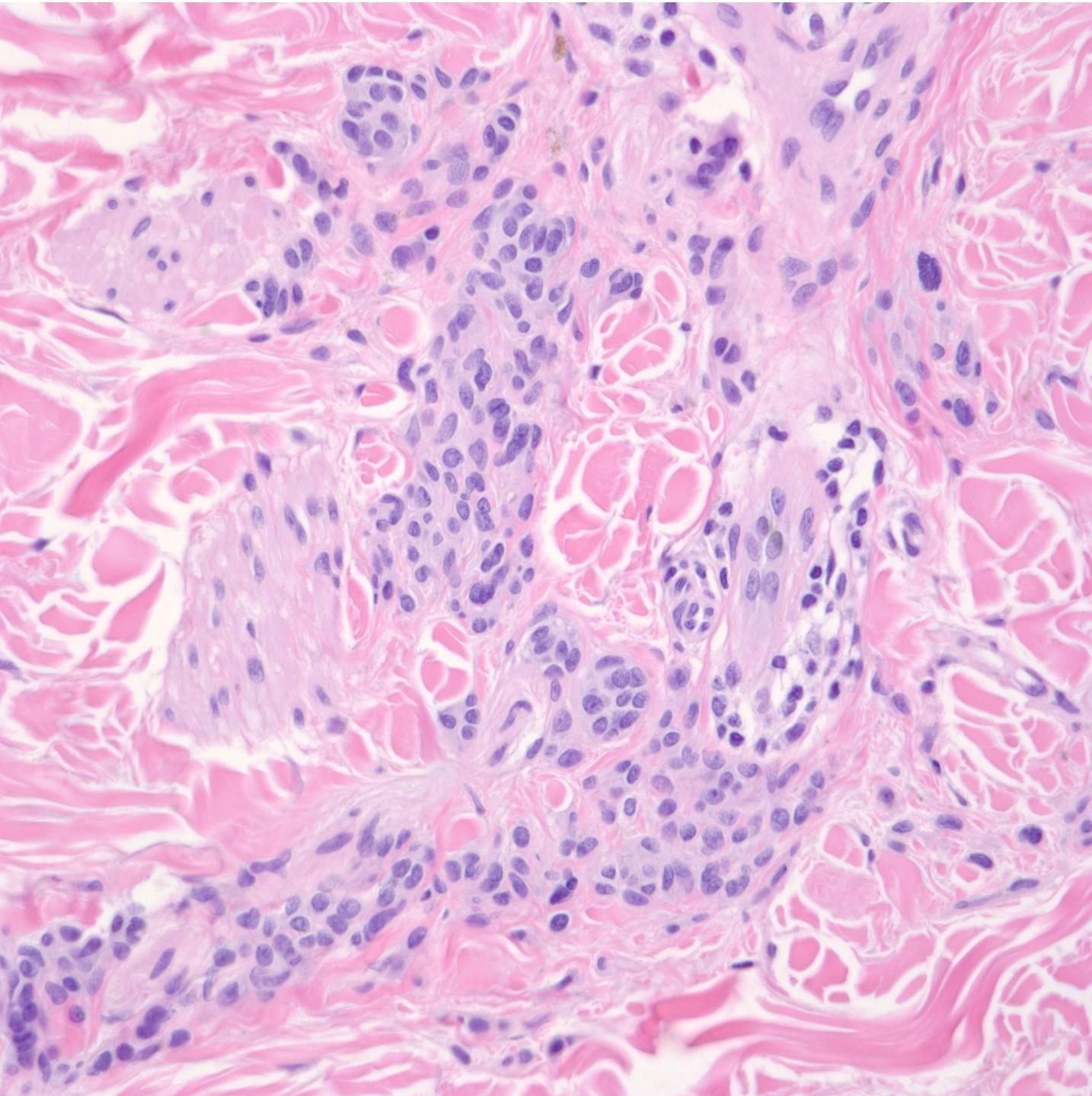
- Intracorneal bulla with acantholysis
- Occasional acantholytic cells cling to the undersurface of the stratum corneum
“Klingons”
- Variable inflammation but usually eosinophils predominate









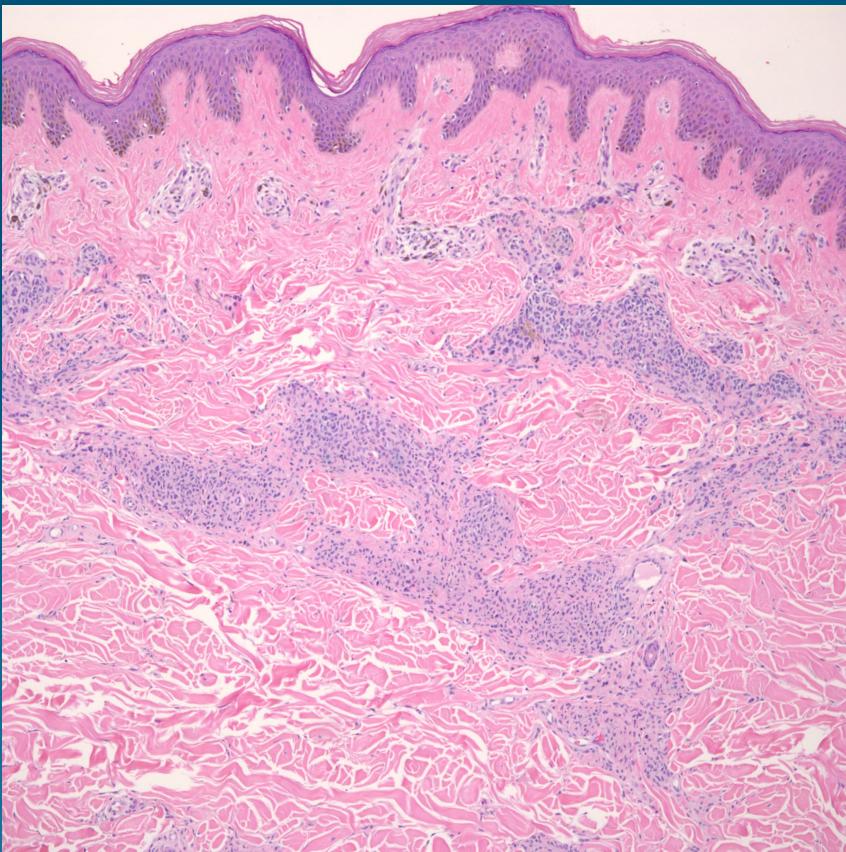


What is the best diagnosis?

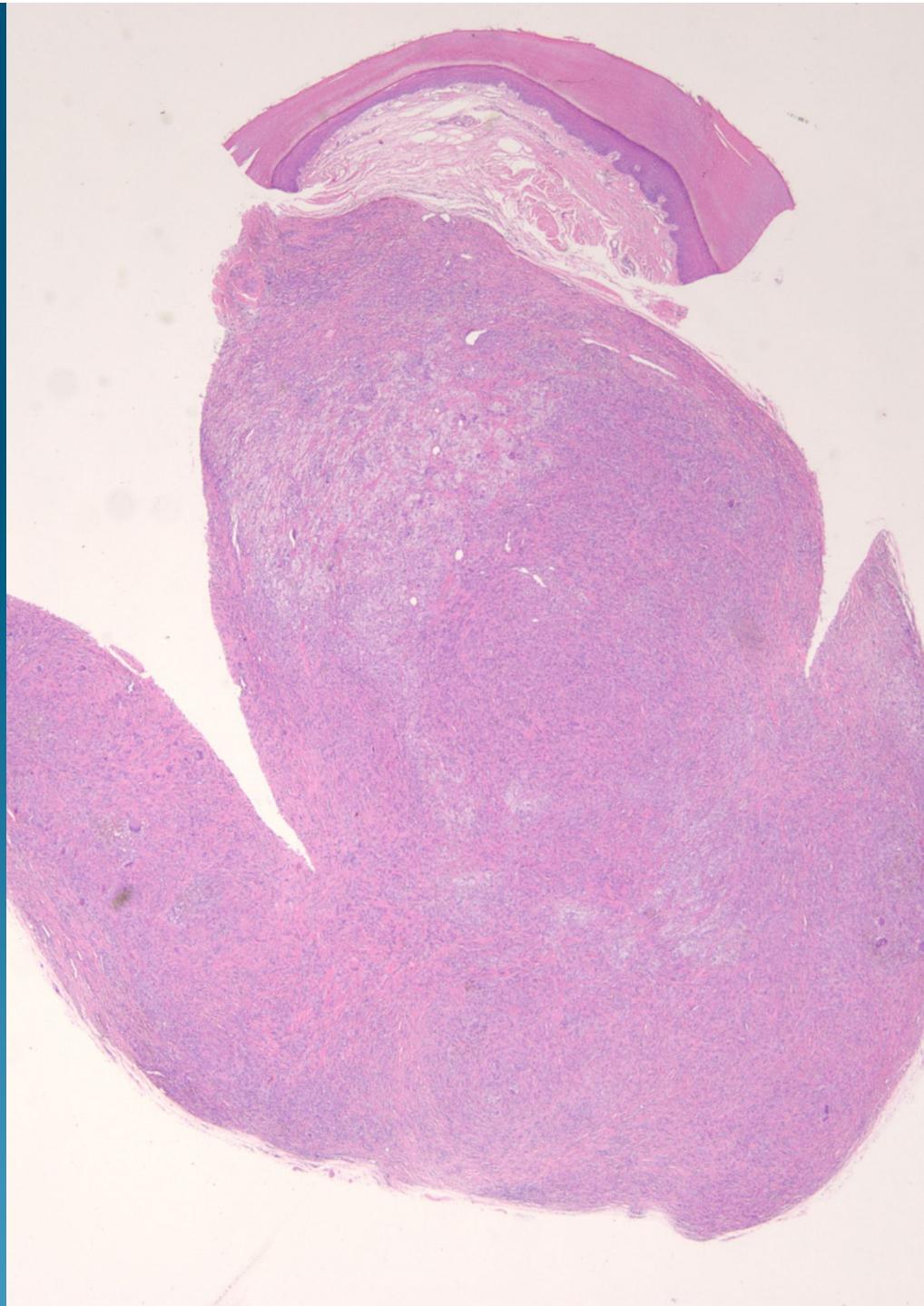
- A. Blue nevus
- B. Erythema chronicum migrans
- C. Spitz nevus
- D. Granuloma annulare
- E. Congenital nevus

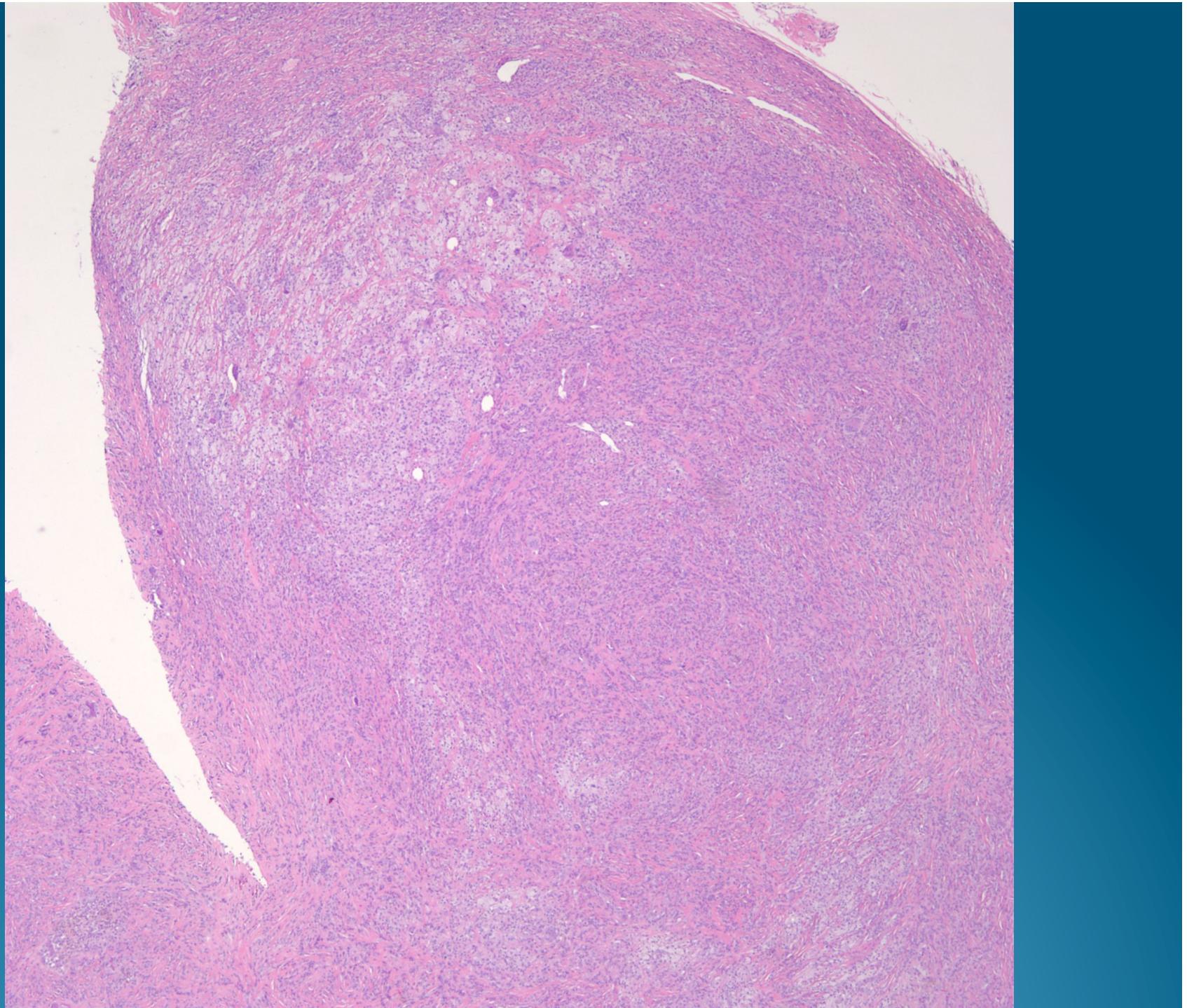
Congenital Nevus

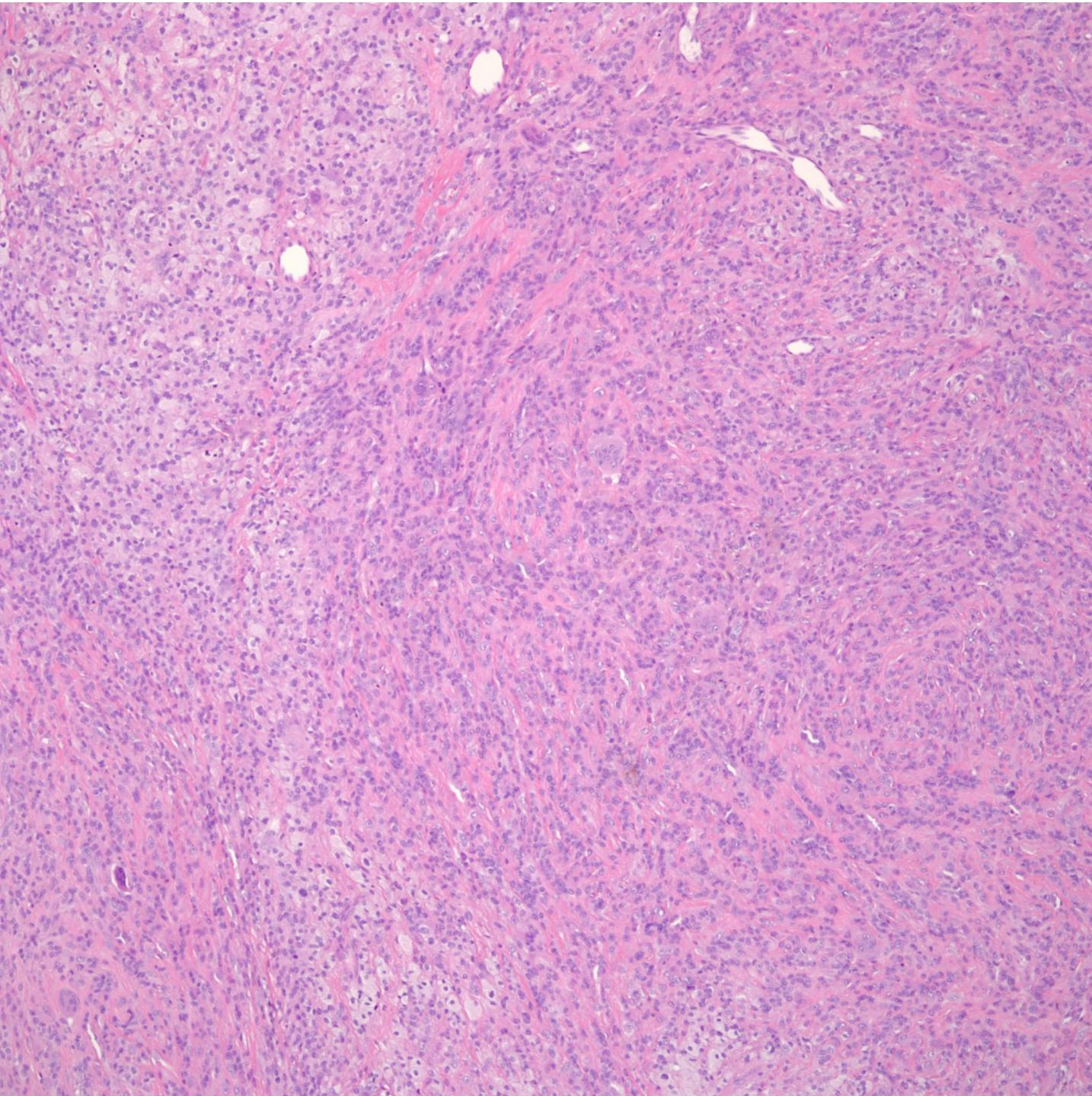
Pearls

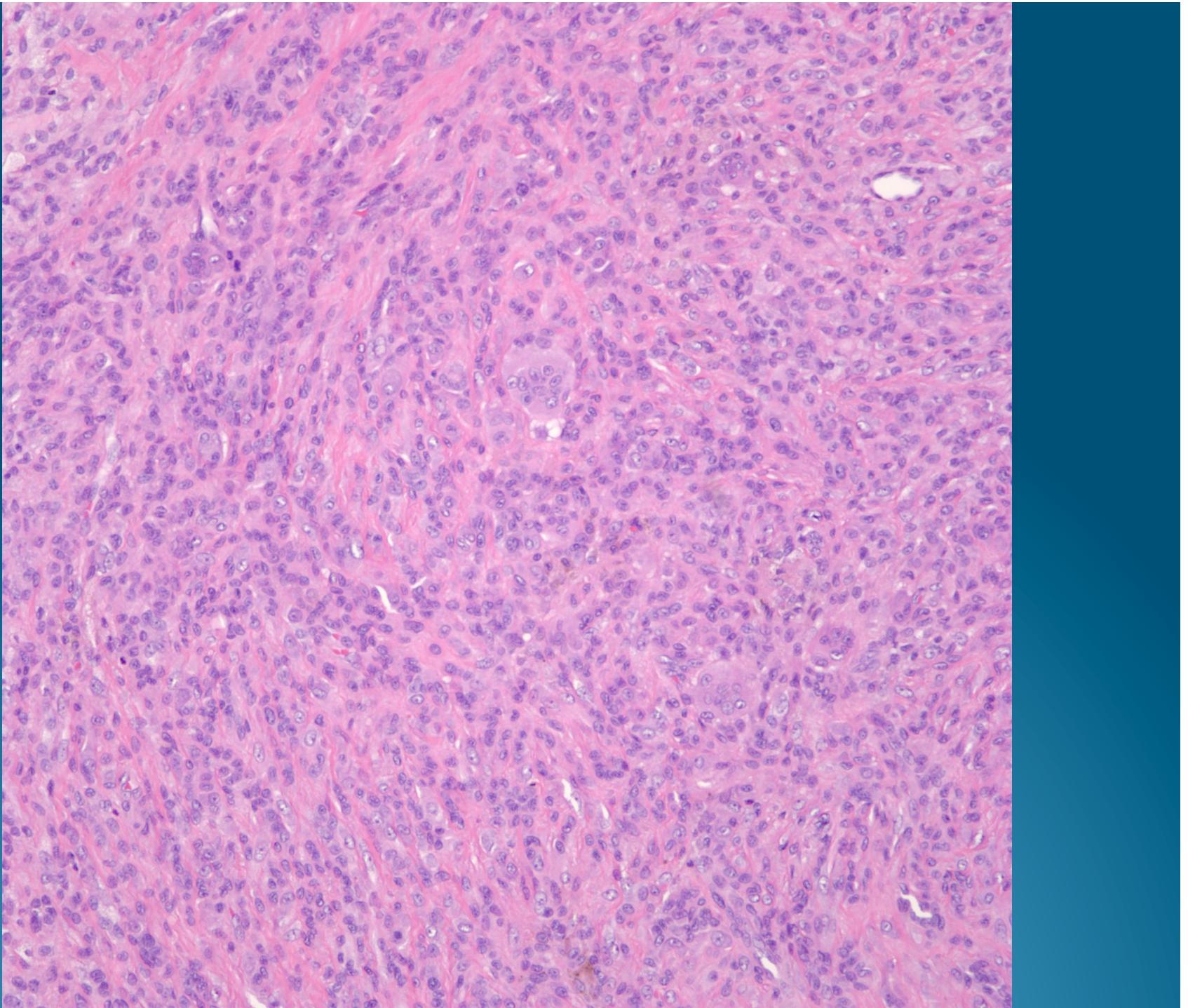


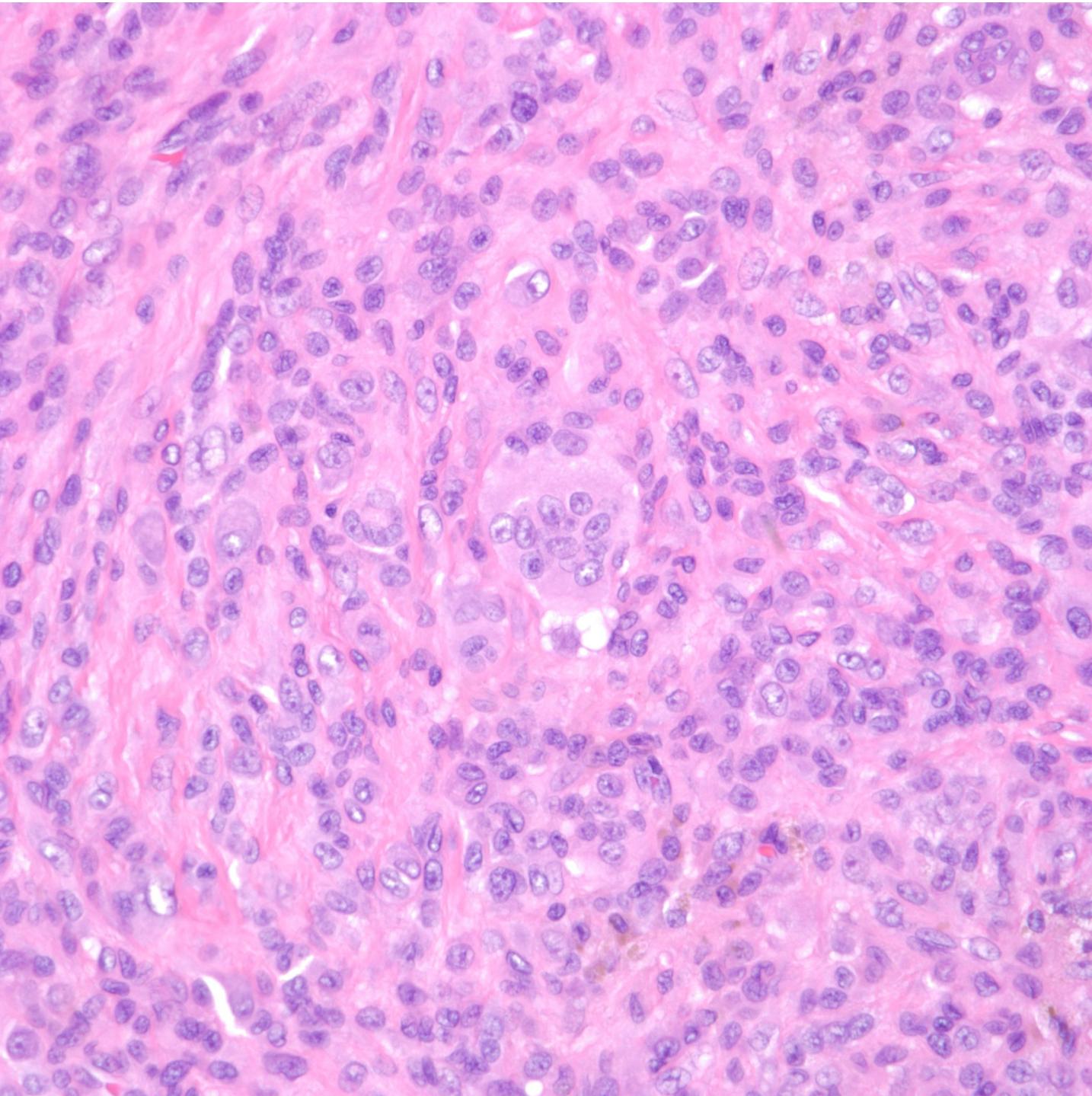
- Asymmetric proliferation of bland melanocytes
- Infiltration into pilosebaceous cases and eccrine ducts
- Variable melanin pigmentation









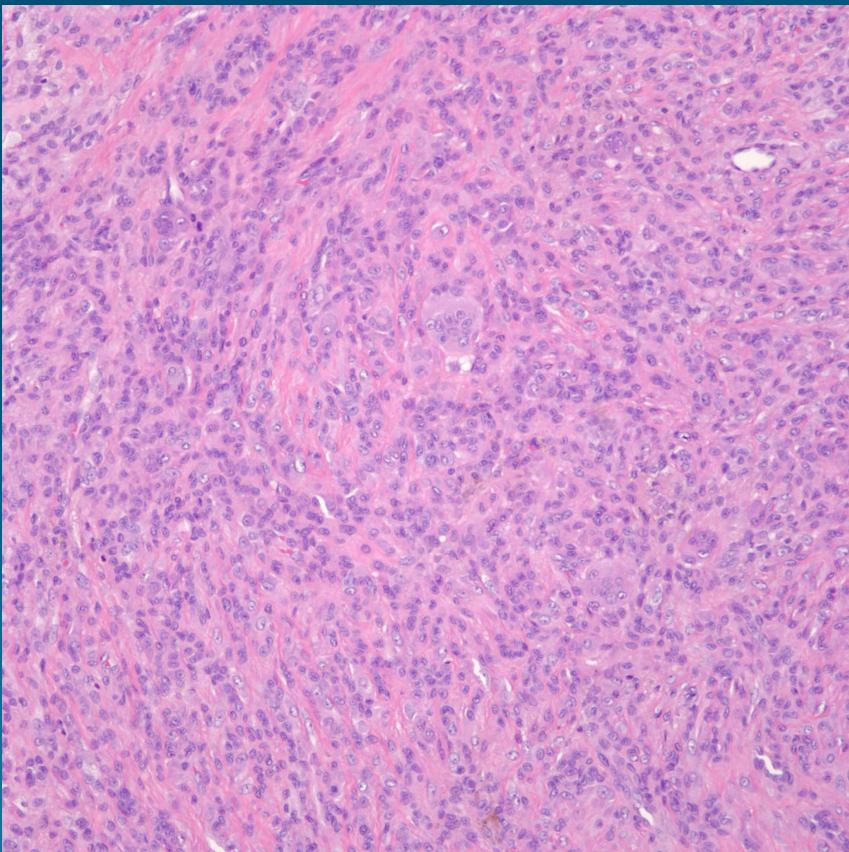


What is the best diagnosis?

- A. Tuberous xanthoma
- B. Atypical fibroxanthoma
- C. Dermatofibroma
- D. Dermatofibrosarcoma protuberans
- E. Giant cell tumor of tendon sheath

Giant cell tumor of tendon sheath

Pearls



- Circumscribed nodule connected to tendon
- Mixture of spindled and epithelioid cells with scattered multinucleated giant cells
- Variable xanthomatous changes and hemosiderin laden macrophages