What is the best diagnosis?

A. Keloid
B. Sclerotic fibroma
C. Erythema gyratum repens
D. Scleromyxedema
E. Morphea
F. Morpheaform basal cell carcinoma
Sclerotic Fibroma
Pearls

- Circumscribed nodule in dermis with characteristic fenestrations in the sclerotic collagen
- May occur in association with other dermal proliferations including dermatofibroma
- Most are sporadic but rare cases associated with Cowden’s syndrome
What is the best diagnosis?

A. Desmoplastic trichoepithelioma
B. Keratotic Basal Cell Carcinoma
C. Invasive Squamous Cell Carcinoma
D. Proliferating Pilar Tumor
E. Trichoadenoma
Trichoadenoma
Pearls

- Multiple pilar cysts with no connection to the epidermis
- No significant cytologic atypia of the keratinocytes
- Usually located in the superficial dermis
What is the best diagnosis?

A. Merkel cell carcinoma
B. Chronic lymphocytic leukemia
C. Diffuse large B-cell lymphoma
D. Anaplastic Lymphoma K1
E. Langherans cell histiocytosis
Diffuse Large B-cell Lymphoma
Pearls

- Diffuse replacement of dermis with large pleomorphic cells with increased mitotic activity
- Grenz zone
- Confirm with IHC stains-B cell+ (CD79a and CD20)
- Rule out Anaplastic lymphoma (CD30+), poorly differentiated carcinoma (CK+) and amelanotic melanoma (S100+)
What is the best diagnosis?

A. Morphea
B. Lichen sclerosus
C. Cryptococcosis
D. Subcutaneous T-cell lymphoma
E. Paraffinoma
Paraffinoma
Pearls

- Diffuse sclerosis with multiple pseudocystic spaces of varying size
- Polarization negative
<table>
<thead>
<tr>
<th>Option</th>
<th>Diagnosis</th>
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<tbody>
<tr>
<td>A</td>
<td>Porphyria cutanea tarda</td>
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<tr>
<td>B</td>
<td>Bullous pemphigoid</td>
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<tr>
<td>C</td>
<td>Dermatitis herpetiformis</td>
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<tr>
<td>D</td>
<td>Bullous mastocytosis</td>
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<tr>
<td>E</td>
<td>Coma blister</td>
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Porphyria Cutanea Tarda
Pearls

- Subepidermal bulla arising on sun damaged skin
- Minimal to absent inflammatory cell infiltrate
- May see festooning of the dermal papillae
- Occasional perivascular hyalinization