Dermatopathology Slide Review Part 90

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What is the best diagnosis?

A. Myrmecia
B. Keratoacanthoma
C. Porokeratosis
D. Verrucous carcinoma
E. Chromomycosis
Verrucous Carcinoma
Pearls

- Verruciform proliferation extending deeply into reticular dermis or submucosa
- Cytologically bland keratinocytes
- May have numerous dyskeratotic keratinocytes
What is the best diagnosis?

A. Glomus tumor
B. Angioleiomyoma
C. Spiradenoma
D. Trichoblastoma
E. Palisaded and encapsulated neuroma
Spiradenoma
Pearls

- Circumscribed dermal neoplasm composed of basaloid cells admixed with increased capillary sized vessels
- Scattered lymphocytes present with basaloid cells
- Cytologically bland
What is the best diagnosis?

A. Mycosis fungoides
B. Langerhans cell histiocytosis
C. Urticaria pigmentosa
D. Diffuse large B-cell lymphoma
E. Lymphomatoid papulosis
Mycosis fungoides
Pearls

- Atypical intraepidermal lymphocytes with hyperchromatic and hyperconvoluted nuclear contours
- May have perinuclear halos
- Pautrier microabscesses with intercalation of basal keratinocytes with atypical lymphocytes
- Confirm with IHC
- Confirm with clinical presentation
What is the best diagnosis?

A. Chondrodermatitis nodularis helicis
B. Hidradenitis suppurativa
C. Chromomycosis
D. Gouty tophus
E. Osteomyelitis
Acute Osteomyelitis
Tissue Gram Stain
Pearls

- Devitalized bone surrounded by acute inflammation
- Clinical correlation to rule out abscess, draining sinus, gouty tophus
- Obtain special stains to rule out infectious etiology
Which is the tattoo with melanocytic nevus and which is the combined nevus (intradermal nevus with blue nevus)?
<table>
<thead>
<tr>
<th><strong>Pearls</strong></th>
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<tbody>
<tr>
<td><strong>Tattoo and nevus</strong></td>
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<tr>
<td>Dark pigment, varying shades, usually non-refractile, usually finer size than melanin</td>
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<td>May have foreign body reaction or scar from procedure</td>
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<tr>
<td><strong>Combined Nevus</strong></td>
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<td>Dark pigment with brownish hue</td>
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<td>May be admixed with epithelioid cells (type A and B nevus cells)</td>
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<td>Difficult cases may need IHC stains or Fontana-Masson</td>
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