## ROCHESTER GENERAL HOSPITAL - SEMINAR, JANUARY, 1961

#### Dr. Ackerman's Diagnoses

- Case 1. Skin Sarcoma, post-irradiation
- Case 2. Parathyroid Adenoma
- Case 3. Thyroid Colloid Goiter behaven stelletal wescle [ tens
- Case 4. Larynx, Epiglottis Chronic Granulomatous Inflammation Histoplasmosis
- Case 5. Skin Psoriasiform Chronic Dermititis No SCIDE
  Lymph Node Benign Follicular Hyperplasia NODULAR MARINA
- Case 6. Thigh, Muscle Myositis Ossificans
- Case 7. Nasal Cavity, Septum ? Metastasis from Carcinoma of Kidney
- Case 8. Skin, Ankel Renal Cell Carcinoma, Metastatic
- Case 9. Breast Giant Papilloma
- Case 10. Soft Tissue, Upper Arm Reactive Fibromyositis
- Case 11. Breast Papilloma

### SEMINAR FOR RESIDENTS IN PATHOLOGY, ROCHESTER GENERAL HOSPITAL

### January 1961

- Case 1 (S.P. 60-8639) Patient is a 56 year old white female who at the age of 18 received x-ray treatments to her face for acne. Several years later she developed ulcerations and crusting over the skin of her nose. Several of the lesions were fulgurated. Three years ago she developed a persistent ulceration over the left side of her nose penetrating through the entire thickness and involving the septum. A wide excision of the area was performed. Despite this treatment the tumor recurred. The lesion was irradiated with a total tumor dose of 3627 r. A few weeks ago a nodule developed in the upper lip adjacent to the previous operative defect.

  The lesion was biopsied.
- Case 2 (S.P. 60-8784) The patient is a 30 year old woman who had an uneventful removal of a nodule of the right lobe of the thyroid gland in September, 1960. Following this and during investigation of mild hypertension, multiple osteolytic lesions were noted in the pelvic bones on x-ray films which the radiologist believed were suggestive of hyperparathyroidism. Further tests revealed serum calcium levels ranging from 15 to 17.6 mg.%, serum phosphatase 1.8 2.8 mg.%, and alkaline phosphatase 15 20 Bodansky units. Large amounts of calcium were detected in the urine.
- Case 3 (S.P. 60-8769) A section was examined from a subtotal thyroidectomy performed on a female 37 years of age. Last April a diagnosis of a hyperthyroidism was made and the patient was put on Propyl Thiourocil.
- Case 4 (ENT 50184) This 57 year old white male has a history of sore throat.

  Physical findings revealed a lesion on the tip of the epiglottis. Operation:

  Biopsy of epiglottis.
- Case 5 (S.P. 60-8595) The patient is a 40 year old white male who has not felt well for the past 3 to 4 months. He has noted a sore throat for the past 2 weeks and in July, 1960, noted pain in his hand and foot which was persistent. He was placed on ACTH and cortisone by his local doctor without benefit. Some time later he received Butizolidin which provided some relief from pain. At present, he has a poor appetite and 2 to 3 bowel movements daily whereas, 6 months ago he had only one. He also gives a history of psoriasis of one year's duration.

On physical examination there were multiple nodules in the sternocleidomastoidal regions bilaterally. A supra clavicular lymph node on the left side was palpable. No abdominal organs were palpable. The Hgb. was 13.2 grams, RBC 4.6 million, WBC 6,100 with a normal differential. Chest x-ray was essentially normal. Skin and axillary lymph node biopsies were done.

Case 6 (S.P. 60-8659) The patient is a 16 year old white female who 3 weeks before biopsy felt something snap in the left inguinal region during unusual physical exertion. For two days following she had some disconfort in the area and then no complaints. One week later persistent pain began in the area and this was followed by swelling 3 to 4 days after the onset of pain. X-ray taken 4 days before the biopsy was reported as negative except for soft tissue swelling. Br. Young (Br. Malcolm C. Young, Hackley Hospital, 1700 Clinton St., Muskegon, Michigan), questioned the radiologist who read the films concerning periosteal reaction and soft tissue calcification both of which he said were not present. At operation the lesion appeared to the surgeon to be confined to the muscle and poorly defined.

# Page 2 - Rochester Seminar

- Case 7 (ENT 49739) This 42 year old colored male with a polypoid tumor of the nasal septum entered the hospital for evaluation. It was considered clinically to be a pyogenic granuloma.
- Case 8 (S.P. 60-8521) This patient had a draining lesion on the ankle.
- Case 9 (S.P. 60-8477). This 13 year old female with a 135 gm. lobular, cystic mass in the breast appearing at menarche, had the lesion "shelled out".
- Case 10 (S.P. 60-9075) A soft tissue lesion was removed from the medial area of the upper arm of a man approximately 35 years of age. This lesion apparently became clinically evident within a period of some 2 to 3 weeks and was painful. The overlying skin was not reddened. The surgeon found this lesion adjacent to the median nerve from which it was separated with ease. Its outline was irregular but easily differentiated from the surrounding fat. In effect, it looked like an area of fat necrosis, but there were no central areas of necrosis nor was there any history of trauma. Furthermore, there is no history of this patient having received injections in the affected region. He is otherwise perfectly well and complete examination shows no other nodules anywhere in the body.
- Case 11 (S.P. 60-7864) This 56 year old white female had a mass in the right upper quadrant of the breast for 6 years. She had a benign tumor excised from the lower right breast in 1950. The mass is slowly growing, measures 6 x 8 cm. and contains brownish fluid on needle biopsy. A 3 cm. node is present in the axilla. A needle biopsy was performed.