

SEM 549

CALIFORNIA TUMOR TISSUE REGISTRY
LOS ANGELES COUNTY - UNIVERSITY OF SOUTHERN CALIFORNIA
PROTOCOL
FOR
MONTHLY STUDY SLIDES
NOVEMBER 1982
TUMORS OF THE SKIN

CONTRIBUTOR: Neil Korostoff, M. D.
Bellflower, California

NOVEMBER 1982 - CASE NO. 1

TISSUE FROM: Skin, left shoulder

ACCESSION NO. 24459

CLINICAL ABSTRACT:

History: In June of 1981 this 63 year old caucasian male presented with a 6-7 months' history of two skin lesions on his left anterior shoulder. The lesions were excised. The smaller lesion was interpreted as a basal cell carcinoma; the larger as a superficial squamous cell carcinoma with an underlying undifferentiated tumor. In January of 1982, the tumor recurred at the site of the previous biopsy.

Past history: Multiple previous excisions of basal cell carcinoma arising on the facial skin had been performed.

SURGERY: (January 28, 1982)

The recurrent tumor was excised, revealing 2 subcutaneous nodules in close proximity, with several smaller satellite nodules in the surrounding fatty tissue.

GROSS PATHOLOGY:

Two well circumscribed grey-white homogeneous firm nodules were received, measuring 3 x 2.5 and 2.5 x 1.5 cm. Several smaller 0.5 cm. nodules with a similar appearance were also submitted.

FOLLOW-UP:

The patient remained well until September of 1982 when a 2-3 cm. lymph node was noted high in the left cervical region. Fine needle aspiration revealed histology similar to the January biopsy. Chest x-ray remained clear, and no additional skin lesions have developed. The patient is currently being considered for a possible neck dissection.

CONTRIBUTOR: Arnold A. Channing, M. D.
Raymond L. Lesonsky, M. D.
Canoga Park, California

NOVEMBER 1982 - CASE NO. 2

TISSUE FROM: Skin of arm

ACCESSION NO. 17192

CLINICAL ABSTRACT:

History: This 45 year old oriental male presented with multiple gradually enlarging masses on the posterior aspect of both forearms. Similar lesions had appeared 10 years previously and had been surgically removed. Past medical history was remarkable for a myocardial infarction 7 years ago.

Laboratory: Unremarkable except for a serum cholesterol of 366.

SURGERY: (December 1, 1967)

The masses were excised.

GROSS PATHOLOGY:

Six separate pieces of skin were received, each with a subcutaneous yellow-orange firm nodule. The nodules varied from 0.4 to 4.5 cm. in greatest dimension, and each exhibited a firm yellow-orange cut surface.

FOLLOW-UP:

The patient was last seen by his physician in 1977, and had no complaints other than gout. Known hypercholesterolemia documented in 1972 and smokes 1 1/2 packs a day. According to a telephone conversation with his family in October 1982, the patient is alive and well, on no medication, and has had no recurrence of his heart disease or skin lesions.

CONTRIBUTOR: Marvin Retsky, M. D.
Van Nuys, California

NOVEMBER 1982 - CASE NO. 3

TISSUE FROM: Skin above right knee

ACCESSION NO. 21543

CLINICAL ABSTRACT:

History: This 60 year old caucasian female presented with a 5 cm. suprapatellar subcutaneous mass, gradually increasing in size two years' duration. No history of prior trauma was elicited.

SURGERY: (June 1975)

The mass was excised.

GROSS PATHOLOGY:

A 4.5 x 1.1 cm. ellipital piece of centrally dimpled skin was received. Attached to the skin was a 5.3 x 4.4 x 3.6 cm. delicately encapsulated, faintly lobulated pale yellow-white nodule, which showed a few minute foci of cystic and hemorrhagic degeneration on cut section.

FOLLOW-UP:

The patient was last seen by her physician in 1979, at which time no recurrence was noted. She has since been lost to follow-up.

CONTRIBUTOR: William Cowell, M. D.
Oceanside, California

NOVEMBER 1982 - CASE NO. 4

TISSUE FROM: Scrotum

ACCESSION NO. 21195

CLINICAL ABSTRACT:

History: This 72 year old male was admitted to the hospital for surgical repair of a right inguinal hernia. A small skin lesion was noted incidentally on the scrotum.

SURGERY: (May 15, 1974)

The hernia was successfully repaired, and the skin lesion excised.

GROSS PATHOLOGY:

A grey-white, lobular, epithelial nodule, 2 cm. in diameter and 1.0 cm. in thickness, was present on the skin surface of the biopsy. Sectioning showed a grey-white resilient cut surface with a central 5 mm. in diameter cystic space.

FOLLOW-UP:

The patient was last seen in July of 1982, and was doing well with no evidence of recurrence.

CONTRIBUTOR: James M. Tenney, M. D.
Reno, Nevada

NOVEMBER 1982 - CASE NO. 5

TISSUE FROM: Skin of arm

ACCESSION NO. 22013

CLINICAL ABSTRACT:

A 14 year old female presented with an indeterminate history of a skin lesion on her arm.

SURGERY: (May 7, 1976)

The lesion was excised.

GROSS PATHOLOGY:

A 12.5 x 1.0 cm. skin ellipse, up to 1.5 cm. in thickness, was received. A 1.1 cm. rounded area was present on the skin surface. On section, firm grayish tissue extended into the subcutaneous fat.

FOLLOW-UP:

Not available.

CONTRIBUTOR: Milton L. Bassis, M. D.
San Francisco, California

NOVEMBER 1982 - CASE NO. 6

TISSUE FROM: Scalp

ACCESSION NO. 21742

CLINICAL ABSTRACT:

History: This 28 year old caucasian male presented with skin lesion over the right parietal scalp, which had been present from birth and had recently enlarged.

SURGERY: (October 6, 1975)

The lesion was locally excised.

GROSS PATHOLOGY:

A 3 x 3.5 cm. ovoid piece of skin was received, with a raised, verrucous gray-tan lesion occupying most of the central skin surface.

FOLLOW-UP:

The patient has remained alive and well, without evidence of recurrence.

CONTRIBUTOR: Dorothy Tatter, M. D.
Patrick Fitzgibbons, M. D.
Los Angeles, California

NOVEMBER 1982 - CASE NO. 7

TISSUE FROM: Skin

ACCESSION NO. 24608

CLINICAL ABSTRACT:

History: This 26 year old caucasian male presented to his physician in May of 1981 with diffuse lymphadenopathy. An axillary lymph node biopsy was performed at an outside hospital and revealed metastatic tumor. A social history was significant in that the patient was homosexual. He was treated with multiple agent chemotherapy, including Velban, Bleomycin and Adriamycin, but the disease continued to progress. He was transferred to the LAC-USC Medical Center in February of 1982.

Physical examination revealed a thin caucasian male with multiple confluent violaceous plaques over the face, chest, and arms.

Laboratory data: Hgb. 9.5, Hct. 27.7, WBC 6800 (diff. 89 Pmns, 7 lymphs, 3 bands, 1 eosinophil); cytomegalovirus titer was positive at a 1:8 dilution, and HBSAg was negative.

Hospital course: The patient was treated with 28 days of interferon therapy, which he tolerated well. Unfortunately, so did his tumor. He continued to deteriorate, and developed B-hemolytic streptococcal sepsis terminally. He expired on March 6, 1982.

AUTOPSY FINDINGS:

Metastatic tumor was found in liver, intestine, thymus, heart, retroperitoneum, and lung. Cytomegalovirus pneumonitis was also seen.

CONTRIBUTOR: Paul Jernstrom, M. D.
Los Angeles, California

NOVEMBER 1982 - CASE NO. 8

TISSUE FROM: Right face

ACCESSION NO. 22395

CLINICAL ABSTRACT:

History: This 68 year old white male had a history of multiple squamous and basal cell carcinomas of the face dating back to 1963. The largest of the tumors recurred in 1969, and necessitated surgical removal of the zygoma and subsequent skin grafts to control the tumor. In 1973, a second recurrence was noted and he was treated with high dose Methotrexate chemotherapy. A third recurrence in 1976 led to additional chemotherapy with Methotrexate, Bleomycin, and Prednisone. The lesion continued to enlarge and it was decided to attempt radical surgical removal.

SURGERY: (April 1, 1977)

A right radical orbital exenteration was performed. The tumor extended superiorly to the cribriform plate and invaded the orbital floor, laterally out through the cheek to form an ulcerating mass, medially to the nasal septum, posteriorly to the ethmoid and sphenoid areas, and inferiorly into the nasopharynx.

GROSS PATHOLOGY:

A radical orbital exenteration with attached total right maxillectomy was received. The tumor measured 5.5 x 4.5 x 3.5 cm. and exhibited a uniform, pink-yellow to tan, granular, soft cut surface. The surgical margins were free of tumor grossly and microscopically.

FOLLOW-UP:

The patient died four months and thirteen days following surgery, with recurrent tumor. Autopsy was not performed. His demise was reportedly a consequence of "...celibacy, depression, malnutrition, dehydration, and probable aspiration pneumonia ...". apparently in that order.

CONTRIBUTOR: Frank J. Vigil, M. D.
Bakersfield, California

NOVEMBER 1982 - CASE NO. 9

TISSUE FROM: Skin of public area

ACCESSION NO. 24390

CLINICAL ABSTRACT:

History: This 57 year old male presented with a four years' history of increasing reddening and scaling of the skin in the pubic area. Following a small biopsy, the patient was scheduled for surgery.

SURGERY: (September 9, 1981)

The skin lesion was widely excised.

GROSS PATHOLOGY:

An elliptical piece of skin 8.5 x 7.0 x 2.0 cm. was received. A 4.0 x 3.0 cm. area of irregular reddening was noted on the skin surface.

FOLLOW-UP:

The patient was lost to follow-up.

CONTRIBUTOR: Meyer Zeiler, M. D.
Los Angeles, California

NOVEMBER 1982 - CASE NO. 10

TISSUE FROM: Posterior neck

ACCESSION NO. 23570

CLINICAL ABSTRACT:

History: This 66 year old caucasian male was well until September of 1977 when he first noted a mass on the skin of the posterior neck. This lesion measured 1.8 cm. in greatest dimension and was removed by excisional biopsy. He was well until August of 1978, when a similar lesion, 3.5 cm. in diameter, was noted at the site of the previous excision. This mass was also excised. The tumor recurred for a third time at the same location in January of 1979.

SURGERY: (January 15, 1979)

The mass was excised.

GROSS PATHOLOGY:

An ellipse of skin with attached subcutaneous tissue measuring 5 x 2 x 2 cm. was received.

FOLLOW-UP:

The patient received a course of radiation therapy to the posterior neck following surgery. He was well until January of 1980, when he developed symptoms of prostatism. A trans-urethral resection of prostate revealed a moderately differentiated carcinoma. He was placed on Stilbesterol following surgery. He remained well until May 1980, when a skin lesion appeared on the left posterior heel. This was biopsied and interpreted as a poorly differentiated metastatic tumor. In June of 1981, numerous subcutaneous deposits of metastatic tumor appeared on his head, chest, and right forearm. X-rays and bone scan at that time demonstrated evidence of multiple bony metastases, including osteolytic right frontal and occipital skull lesions. He was given multiple courses of radiation therapy to control his metastatic disease. No follow-up is available since July 1981.

CONTRIBUTOR: Ronald S. Fraenkel, M. D.
San Francisco, California

NOVEMBER 1982 - CASE NO. 11

TISSUE FROM: Abdominal skin

ACCESSION NO. 22866

CLINICAL ABSTRACT:

History: This 94 year old caucasian female was admitted to the hospital for multiple medical problems. A smooth dome-shaped mass was noted on the abdomen in the region of McBurney's point. There was no significant laboratory finding or past medical history.

SURGERY: (February 25, 1978)

The mass was excised.

GROSS PATHOLOGY:

An ovoid piece of skin 6 x 3 cm. was received. In the center of the skin was a dome-shaped mass, 3 cm. in diameter. Cross section revealed a well demarcated partially cystic mass, 2.4 cm. in greatest diameter. The cyst contained pale amber fluid and was lined by nodular grey tissue.

FOLLOW-UP:

The patient expired 3 years later of unrelated cardiovascular disease. No local recurrence or metastasis was noted.

CONTRIBUTOR: Gene P. Burke, M. D.
Inglewood, California

NOVEMBER 1982 - CASE NO. 12

TISSUE FROM: Skin of elbow

ACCESSION NO. 24675

CLINICAL ABSTRACT:

History: This 66 year old man first noticed a 3-4 mm. lesion on the skin of the arm near the elbow in 1978. By 1981 the lesion had enlarged to 2.5 cm. in greatest dimension. He was advised by his physician to have the lesion removed, but deferred until August of 1982.

SURGERY: (August 26, 1982)

The mass was excised with a 2 mm. border of grossly normal skin.

GROSS PATHOLOGY:

A mass of firm tan tissue measuring 4.0 x 3.2 x 2.7 cm. was received.

FOLLOW-UP:

Not available.

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STUDY GROUP CASES
FOR
NOVEMBER 1982

CASE NO. 1 - ACC. NO. 24459

LOS ANGELES: Merkel cell carcinoma - 6; metastatic small cell carcinoma - 1;
small cell carcinoma - 5

SAN FRANCISCO: Merkel cell tumor - 20

MARTINEZ: Merkel cell carcinoma - 12; small cell carcinoma, metastatic - 3

SACRAMENTO: Merkel cell tumor - 3

LONG BEACH: Merkel cell carcinoma (syn. trabecular cell carcinoma of the skin)
- 7

BAKERSFIELD: Small cell undifferentiated carcinoma (sweat gland origin) - 7

SAN BERNARDINO (INLAND): Neuroendocrine (or Merkel cell) carcinoma - 11;
undifferentiated carcinoma - 1; metastatic basal cell carcinoma - 1

WEST SAN FERNANDO VALLEY: Neuroendocrine carcinoma (Merkel cell tumor) - 6

OHIO: Merkel cell tumor - 5

SEATTLE: Merkel cell tumor - 3

TUCSON: Small cell undifferentiated carcinoma metastatic - 1; Merkel cell
tumor - 1

FILE DIAGNOSIS:

Merkel cell carcinoma, skin of shoulder

2410-8041/3

REFERENCES:

DeWolf-Peters, C., et al.; "A Cutaneous APUDoma or Merkel Cell Tumor."
Cancer 46:1810-1816, 1980.

Am J. Dermatopath. 2: 101-119, 1980.

CASE NO. 2 - ACC. NO. 17192

NOVEMBER 1982

LOS ANGELES: Xanthoma tuberosum - 12

SAN FRANCISCO: Tuberos xanthoma - 20

MARTINEZ: Tuberos xanthoma - 15

SACRAMENTO: Xanthoma tuberosum - 3

LONG BEACH: Xanthoma tuberosum - 7

BAKERSFIELD: Xanthoma - 7

SAN BERNARDINO (INLAND): Xanthoma tuberosum - 11; granular cell tumor - 2

WEST SAN FERNANDO VALLEY: Xanthoma tuberosum - 6

OHIO: Granular cell myoblastoma - 3; xanthoma - 2

SEATTLE: Xanthoma - 3

TUCSON: Xanthoma - 2

FILE DIAGNOSIS:

Xanthoma tuberosum, skin of elbow

02620-55320

CASE NO. 3 - ACC. NO. 21543

NOVEMBER 1982

LOS ANGELES: Eccrine acrospiroma - 12

SAN FRANCISCO: Trichoblastic fibroma - 20

MARTINEZ: Trichofolliculoma - 7; skin adnexal tumor, benign - 8

SACRAMENTO: Trichoblastoma - 3

LONG BEACH: Trichoblastic fibroma - 4; Pinkus tumor - 2; benign adnexal tumor - 1

BAKERSFIELD: Trichoepithelioma - 7

SAN BERNARDINO (INLAND): Trichofolliculoma - 6; benign sweat duct adenoma - 3; benign hair follicle tumor - 2; benign adnexal adenoma - 2

WEST SAN FERNANDO VALLEY: Eccrine poroma - 1; trichoblastoma - 5

OHIO: Trichogenic trichoblastoma - 4; trichoblastic fibroma - 1

SEATTLE: Skin appendage tumor, probably eccrine - 3

TUCSON: Trichoepithelioma - 1; basal cell adenoma - 1

FILE DIAGNOSIS:

Eccrine acrospiroma, skin of knee

02820-8402/0

CONSULTATION: Dr. Donald L. Alcott
Los Gatos, California

"I believe it is of sweat gland rather than pilosebaceous origin and that it falls in the spectrum of Helwig's eccrine acrospiroma group."

REFERENCES:

Johnson, B. L., and Helwig, E. B.: "Eccrine Acrospiroma". Cancer
23: 641, 1969.

CASE NO. 4 - ACC. NO. 21195

NOVEMBER 1982

LOS ANGELES: Cystic basal cell tumor benign - 5, malignant - 4

SAN FRANCISCO: Eccrine poroma - 6; basal cell carcinoma - 14

MARTINEZ: Eccrine poroma - 6; cystic basal cell carcinoma - 9

SACRAMENTO: Basal cell carcinoma - 3

LONG BEACH: Basal cell carcinoma - 7

BAKERSFIELD: Basal cell carcinoma - 6; fibroepithelioma (Pinkus) - 1

SAN BERNARDINO (INLAND): Nodular hidradenoma - 7; eccrine poroma - 3; syringocyst adenoma papilliferum - 2; basal cell carcinoma - 1

WEST SAN FERNANDO VALLEY: Cystic basal cell carcinoma - 4; tricholemmoma - 2

OHIO: Eccrine poroma - 5

SEATTLE: Basal cell carcinoma, Pinkus type - 3

TUCSON: Eccrine poroma - 1; dermal duct tumor - 1

FILE DIAGNOSIS:

Basal cell epithelioma, skin scrotum
X-file: Eccrine poroma

02545-8093
8400

CASE NO. 5 - ACC. NO. 22013

NOVEMBER 1982

LOS ANGELES: Angiosarcoma - 4; sclerosing hemangioma - 8

SAN FRANCISCO: Dermatofibrosarcoma protuberans - 2; hemangiopericytoma - 4; fibrous histiocyoma - 2; sclerosing angioma - 1; storiform fibrous histiocyoma - 4; angiomatoid malignant fibrous histiocyoma - 1

MARTINEZ: Sclerosing hemangioma - 4; fibrous histiocyoma - 11

SACRAMENTO: Dermatofibrosarcoma protruberan - 3

LONG BEACH: Sclerosing hemangioma - 5; angiomatous variant of fibrous histiocyoma - 2

BAKERSFIELD: Fibrous histiocyoma, atypical - 2; hemangiopericytoma - 1; sclerosing hemangioma - 1; malignant fibrous histiocyoma - 2; Kaposi's - 1

SAN BERNARDINO (INLAND): Angiomatoid malignant fibrous histiocyoma - 10; angiosarcoma - 2; dermatofibrosarcoma protuberans - 1

WEST SAN FERNANDO VALLEY: Fibrous histiocyoma - 5; dermatofibrosarcoma protuberans (fibroblastic fibrous histiocyoma) - 1

OHIO: Sclerosing hemangioma (fibrous histiocyoma) - 5

SEATTLE: Angiomatoid fibrous histiocyoma - 3

TUCSON: Kaposi's sarcoma - 1; hemangiopericytoma - 1

FILE DIAGNOSIS:

Sclerosing hemangioma, arm

02617-8832/0

REFERENCES:

Gross, R. E. and Wolbach, S. B.; "Sclerosing Hemangiomas."
Am. J. Path. 19:533, 1943.

CASE NO. 6 - ACC. NO. 21742

NOVEMBER 1982

LOS ANGELES: Nevus sebaceous of Jadassohn - 10; nevus verrucosus - 2

SAN FRANCISCO: Nevus sebaceous - 20

MARTINEZ: Nevus sebaceous - 15

SACRAMENTO: Jadassohn nevus - 3

LONG BEACH: Nevus sebaceous of Jadassohn with basal cell carcinoma - 7

BAKERSFIELD: Nevus sebaceous - 7

SAN BERNARDINO (INLAND): Nevus sebaceous - 13

WEST SAN FERNANDO VALLEY: Nevus sebaceous - 6

OHIO: Nevus sebaceous - 5

SEATTLE: Nevus sebaceous - 3

TUCSON: Nevus sebaceous - 2

FILE DIAGNOSIS:

Nevus sebaceous of Jadassohn, scalp

02102-75750

CASE NO. 7 - ACC. NO. 24608

NOVEMBER 1982

LOS ANGELES: Kaposi's sarcoma - 12

SAN FRANCISCO: Kaposi's sarcoma - 20

MARTINEZ: Kaposi's sarcoma in a patient with AIDS - 15

SACRAMENTO: Kaposi's sarcoma - 3

LONG BEACH: Kaposi's sarcoma - 7

BAKERSFIELD: Kaposi's - 7

SAN BERNARDINO (INLAND): Kaposi's sarcoma - 13

WEST SAN FERNANDO VALLEY: Kaposi's sarcoma - 6

OHIO: Kaposi's sarcoma - 5

SEATTLE: Kaposi's sarcoma - 3

TUCSON: Kaposi's sarcoma - 2

FILE DIAGNOSIS:

Kaposi's sarcoma, skin of chest

01000-9140/3

REFERENCES:

Gottlieb, G. J., Ackerman, A. B.; "Kaposi's Sarcoma". Human Pathology 13(10):882-892, 1982.

CASE NO. 8 - ACC. NO. 22395

NOVEMBER 1982

LOS ANGELES: Sebaceous carcinoma - 12

SAN FRANCISCO: Sebaceous carcinoma - 19; sebaceous epithelioma - 1

MARTINEZ: Sebaceous carcinoma - 15

SACRAMENTO: Sebaceous gland carcinoma - 1; sebaceous gland adenoma - 2

LONG BEACH: Well differentiated sebaceous gland carcinoma - 7

BAKERSFIELD: Sebaceous gland carcinoma - 7

SAN BERNARDINO (INLAND): Sebaceous carcinoma - 13

WEST SAN FERNANDO VALLEY: Sebaceous carcinoma - 6

OHIO: Sebaceous carcinoma - 5

SEATTLE: Squamous cell carcinoma - 3

TUCSON: Sebaceous carcinoma - 2

FILE DIAGNOSIS:

Sebaceous carcinoma, face

02120-8410/3

CASE NO. 9 - ACC. NO. 24390

NOVEMBER 1982

LOS ANGELES: Extramammary Paget's disease - 12

SAN FRANCISCO: Extramammary Paget's disease - 20

MARTINEZ: Paget's disease, extramammary - 15

SACRAMENTO: Paget's disease - 2; melanoma - 1

LONG BEACH: Paget's disease - 7

BAKERSFIELD: Extramammary Paget's disease - 7

SAN BERNARDINO (INLAND): Paget's disease - 13

WEST SAN FERNANDO VALLEY: Superficial spreading malignant melanoma, Pagetoid type - 6

OHIO: Paget's disease - 5

SEATTLE: Paget's disease - 4

TUCSON: Extramammary Paget's disease - 2

FILE DIAGNOSIS:

Extramammary Paget's disease, pubic area

02503-8542/3

REFERENCES:

Jones, R. E., et. al. "Extramammary Paget's Disease" Am. J. Dermatopath. 1:101-132, 1979.

CASE NO. 10 - ACC. NO. 23570

NOVEMBER 1982

LOS ANGELES: Adnexal carcinoma, NOS - 12

SAN FRANCISCO: Eccrine carcinoma - 20

MARTINEZ: Metastatic carcinoma - 3; skin adnexal tumor, malignant - 1; sebaceous carcinoma - 9; malignant - 1

SACRAMENTO: Sweat gland carcinoma - 3

LONG BEACH: Sweat gland carcinoma - 2; adnexal carcinoma, NOS - 2; sebaceous gland carcinoma - 2; metastatic prostate carcinoma - 1

BAKERSFIELD: Sweat gland carcinoma - 5; metastatic carcinoma of prostate - 2

SAN BERNARDINO (INLAND): Eccrine sweat gland carcinoma - 8; metastatic carcinoma - 5

WEST SAN FERNANDO VALLEY: Metastatic carcinoma (prostate) - 4; eccrine carcinoma - 2

OHIO: Mucoepidermoid carcinoma - 5

SEATTLE: Metastatic prostatic carcinoma - 4

TUCSON: Melanoma, recurrent - 1; metastatic adenocarcinoma - 1

FILE DIAGNOSIS:

Eccrine sweat gland carcinoma, posterior neck
X-file: Adnexal carcinoma, NOS

02300-8400/3
8390/3

CASE NO. 11 - ACC. NO. 22866

NOVEMBER 1982

LOS ANGELES: Adenocarcinoma, probably of sweat glands - 12

SAN FRANCISCO: Hidradenoma papilliferum - 17; malignant mixed tumor - 3

MARTINEZ: Syringocystadenoma papilliferum - 13; syringocystadenoma papilliferum with carcinoma-in-situ and foci of mixed tumor - 2

SACRAMENTO: Papillary carcinoma sweat gland - 3

LONG BEACH: Sweat gland carcinoma - 5; nodular hidradenoma, clear cell type, with marked focal atypia - 1; malignant syringocystadenoma papilliferum - 1

BAKERSFIELD: Malignant hidradenoma - 5; mixed tumor - 1; apocrine gland carcinoma - 1

SAN BERNARDINO (INLAND): Syringocystadenocarcinoma - 12; malignant mixed tumor - 1

WEST SAN FERNANDO VALLEY: Mixed tumor of skin (apocrine origin) - 1; apocrine gland carcinoma - 3; carcinoma (NOS) - 1; urachal carcinoma - 2

OHIO: Mucoepidermoid carcinoma - 1; adenosquamous carcinoma - 1; mixed tumor - 2; malignant mixed tumor - 1

SEATTLE: Malignant skin appendage tumor with features of mixed tumor - 4

TUCSON: Malignant skin appendage tumor, NOS - 1, adenocarcinoma - 1

FILE DIAGNOSIS:

Sweat gland carcinoma, abdominal skin

02480-8400/3

REFERENCES:

Dissanayake, R. V. et al. "Sweat Gland Carcinomas: Prognosis Related to Histologic Type" Histopathology 4: 445-466, 1980.

CASE NO. 12 - ACC. NO. 24675

NOVEMBER 1982

LOS ANGELES: Leiomyosarcoma - 12

SAN FRANCISCO: Leiomyosarcoma - 20

MARTINEZ: Leiomyosarcoma - 15

SACRAMENTO: Leiomyosarcoma - 3

LONG BEACH: Leiomyosarcoma of skin - 7

BAKERSFIELD: Leiomyosarcoma - 7

SAN BERNARDINO (INLAND): Leiomyosarcoma - 13

WEST SAN FERNANDO VALLEY: Leiomyoblastoma - 2; leiomyosarcoma - 4

OHIO: Neurogenic sarcoma - 4; leiomyosarcoma - 1

SEATTLE: Leiomyosarcoma, low-grade - 4

TUCSON: Cutaneous leiomyosarcoma - 2

FILE DIAGNOSIS:

Leiomyosarcoma, skin of elbow

02616-8890/3