

**PATHOLOGISTS' CLUB
OF NEW YORK**



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1823 EASTCHESTER ROAD
BRONX, N.Y. 10461

MEETING

Date: Thursday, June 1, 1995

Place: Veterans Affairs Medical Center
130 West Kingsbridge Road
Bronx, New York 10468
(3rd Floor - Room 3D-22)

Host: Dr. Fiorenzo Paronetto

Information: Eula Harris
(718) 579-1606

RECEPTION AND DINNER: 5:15 - 7:00 P.M.

SCIENTIFIC SESSION: 7:00 - 9:00 P.M.

Directions: See attachment

Parking: Hospital Parking lot

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CASE

DIRECTIONS TO THE BRONX VA MEDICAL CENTER

CAR

From the North (Upstate and Connecticut)

Take **Major Deegan Expressway, I-87, South** and exit at **West 230th street**; turn left at light, go over the highway make a right to next light to **Bailey Avenue**. Travel south approximately 0.2 miles to **Kingsbridge Road** and turn left. Drive for 0.5 miles to top of the hill and turn right. Entrance to Medical Center grounds is on **Webb Avenue**.

From Triboro Bridge

Take bridge to Major Deegan Expressway. Get off **Deegan at West 230th Street**. Make right off ramp and a second immediate right (Bailey Avenue). Travel south approximately 0.2 miles to **Kingsbridge Road** and turn left. Drive for 0.5 miles to top of the hill and turn right. Entrance to Medical Center grounds is on **Webb Avenue**.

From the George Washington Bridge

Cross Bridge and bear right to **Major Deegan Upstate**. Get off **Deegan at West 230th Street**. Make right off ramp and a second immediate right (Bailey Avenue). Travel south approximately 0.2 miles to **Kingsbridge Road** and turn left. Drive for 0.5 miles to top of the hill and turn right. Entrance to Medical Center grounds is on **Webb Avenue**.

From Throgs Neck or Whitestone Bridges

Follow signs to the **George Washington Bridge**. Get off exit **I-87 (Major Deegan North)**. Get off **Deegan at West 230th Street**. Make right off ramp and a second immediate right (Bailey Avenue). Travel south approximately 0.2 miles to **Kingsbridge Road** and turn left. Drive for 0.5 miles to top of the hill and turn right. Entrance to Medical Center grounds is on **Webb Avenue**.

PUBLIC TRANSPORTATION

The entrance to the Bronx VA Medical Center is located on Webb Avenue just south of Kingsbridge Road. The IRT number "4" train stops at Jerome Avenue and Kingsbridge Road, approximately a quarter of a mile from the entrance to the medical center. The IND "D" and "C" trains stop at Kingsbridge Road and the Grand Concourse -- about one half mile from the entrance to the medical center. Several buses also stop near the medical center: **City buses #9 and #3** stop at Kingsbridge Road just outside the medical center, and the **Liberty Lines #Bx M3** Sedgwick Avenue and **#Bx M4** Grand Concourse stop at Kingsbridge Road. The **Bx 32** bus makes its last stop inside the medical center.

New York Pathologists Club

Bronx VAMC

Case: 1

Invited Discussant: Neil D. Theise, M.D.
New York University Medical Center

Host Discussant: *Prodromos Hytioglou, M.D.*
Veterans Affairs Medical Center

A 33 year-old woman underwent liver transplantation for end-stage liver disease due to chronic hepatitis B infection. The liver explant weighed 1,050 grams and grossly showed macronodular cirrhosis. Sections from one of many nodules measuring over 1 cm are submitted for your review.

Case: 2

Invited Discussant: Neil D. Theise, M.D.
New York University Medical Center

Host Discussant: *Prodromos Hytioglou, M.D.*
Veterans Affairs Medical Center

A 63 year-old man underwent liver transplantation for end-stage liver disease due to chronic hepatitis C infection. The liver explant weighed 900 grams and grossly showed mixed micro- and macronodular cirrhosis. Multiple nodules with macroscopic features typical for hepatocellular carcinoma, measuring up to 4.2 cm, were present. In addition, there were several nodules, measuring 1.0 - 1.5 cm, which grossly looked more like large cirrhotic nodules than hepatocellular carcinoma. Sections from two such nodules are submitted for your review.

Case: 3

Invited Discussant: Michael J. Klein, M.D.
Mount Sinai Medical Center
New York, New York

Host Discussant: *Giorgio Perino, M.D.*
Veterans Affairs Medical Center

The patient, a 71 year old Caucasian male, was admitted to the Bronx VA Medical Center in January 1995 to evaluate a soft tissue mass in the left popliteal fossa. The pertinent past medical history was significant for a left total knee replacement in 1991 due to degenerative joint disease (osteoarthritis). Radiographs of the left knee joint revealed a large soft tissue mass located in the popliteal fossa with well delineated irregular calcifications in the posterior aspect. The lesion did not involve the adjacent bones. An incisional biopsy was performed and a representative histological slide is provided.

Case: 4

Invited Discussant: Michael J. Klein, M.D.
Mount Sinai Medical Center
New York, New York

Host Discussant: *Giorgio Perino, M.D.*
Veterans Affairs Medical Center

The patient, a 46 year old black man, was admitted to the Bronx VA Medical Center because of a painless mass in the right forearm. A CT scan revealed an intramuscular mass, measuring approximately 8 cm in diameter. A diagnostic biopsy was performed and a complete resection was done at another hospital. A representative section of the mass is provided.

Case: 5

Invited Discussant: Jaishree Jagirdar, M.D.
New York University and Bellevue Hospital
Center

Host Discussant: *Ho-Soon Choi, M.D.*
Veterans Affairs Medical Center

A 60 year old Hispanic male was presented to the Surgical Clinic of the Bronx VAMC with chief complaints of intermittent abdominal pain, anorexia, a left sided abdominal mass and constipation for 2 weeks duration. He denied nausea, vomiting or diarrhea. The patient had lost 15 lbs. over the past month. Past Medical History showed insulin dependent diabetes mellitus, there was no prior history of gastrointestinal disorders. On Physical examination he had a large soft well-defined mass with a sharp edge on the left abdomen. CT of abdomen revealed concentric thickening of the wall of splenic flexure and rectosigmoid colon. At laparotomy a large firm nodular yellow-gray mass in the mesentery of descending and sigmoid colon was found. Left colectomy was performed with mesenteric mass.