WSC 2015-2016, Conference 22 Case 1. Tissue from a mouse.

MICROSCOPIC DESCRIPTION: Liver: There are multifocal (1 pt.) and randomly (1 pt.) scattered areas of necrosis (1 pt.) within the section ranging up to 1mm in diameter (1 pt.). In some areas, hepatocytes are brightly eosinophilic (1 pt.) and have lost differential staining (1 pt.) while maintaining normal plate architecture (1 pt.) (coagulative necrosis) (1 pt.). Many of these foci are bordered, infiltrated, and effaced by low to moderate numbers of viable and degenerate neutrophils (1 pt.) admixed with cellular debris (lytic necrosis) (1 pt.). Multifocally, and randomly, portal and central veins contain partially occlusive fibrin thrombi (1 pt.). Diffusely, hepatocytes are mildly expanded by a cytoplasmic accumulation of numerous discrete, clear vacuoles (1 pt.) (lipidosis) (1 pt.). Multifocally, small aggregates of immature red and white cell precursors are present within the section, most commonly adjacent to portal areas (EMH) (1 pt.).

MORPHOLOGIC DIAGNOSIS: Liver: Hepatitis, necrotizing, multifocal and random, moderate. (3 pt.)

CAUSE: Burkholderia cepaci (any gram-negative OK, except C. piliforme). (2 pt.)

O/C: (1 pt.)

WSC 2015-2016, Conference 22 Case 2. Tissue from a rat.

MICROSCOPIC DESCRIPTION: Testis: There are two neoplasms within this tissue section (1 pt.). Within blood vessels throughout the section (1 pt.), and focally extending into the adjacent testicular interstitum is an unencapsulated, moderately cellular, infiltrative, neoplasm (1 pt.) composed of lymphocytes (1 pt.). Neoplastic cells have distinct cell borders with a small amount of brightly eosinophilic granular cytoplasm (1 pt.). Nuclei are round to indented with finely clumped chromatin and 1-2 basophilic nucleoli (1 pt.). Mitotic figures are rare (1 pt.). Within the testis, compressing adjacent seminiferous tubules is a 4x2mm, wel-demarcated, unencapsulated, multilobular neoplasm (1 pt.) composed of cords and vague nests (1 pt.) of polygonal cells supported by a fine fibrovascular stroma (1 pt.). Neoplastic cells have variably distinct cell borders, abundant eosinophilic vacuolated cytoplasm (1 pt.), round to oval nuclei with finely stippled chromatin and one variably distinct nucleolus. (1 pt.) Mitotic figures are rare in this population as well. (1 pt.) The neoplasm contains several up to 1mm diameter lakes of eosinophilic, flocculent material (cystic degeneration) or hemorrhage. (1 pt.) The immediately adjacent seminiferous tubules are compressed, ectatic and atrophied, with irregular, undulant basement membranes, lined by a single layer of Sertoli cells, devoid of germ cells, spermatocytes and spermatids, and contain variable amounts of a fibrillar to homogeneous eosinophilic protein. (1 pt.) Further away from the neoplasm, tubules contain germ cells, spermatids, and multinucleated giant cell spermatids (1 pt.).

MORPHOLOGIC DIAGNOSIS: 1. Testis, blood vessels: Mononuclear cell leukemia. (2 pt.) 2. Testis: Interstitial cell tumor (Leydig cell adenoma – INHAND). (2 pt.)

O/C: (1pt)

WSC 2015-2016, Conference 22 Case 3. Tissue from a rat.

MICROSCOPIC DESCRIPTION: External ear canal (1 pt.): Arising from and focally expanding the squamous lining of the medial aspect of the external ear canal (1 pt.), there is a papillary (1 pt.) and exophytic (1 pt.), moderately cellular, well-demarcated squamous neoplasm (1 pt.). The neoplasm is arranged in thick rete ridges at the base (1 pt.) developing into long papillary fronds (1 pt.) on a moderate fibrous stroma, and demonstrates normal polarity and maturation (1 pt.). Neoplastic cells have distinct cell borders with a moderate to large amount of eosinophilic fibrillar cytoplasm with keratohyalin granules and occasionally exhibit intercellular bridges. (1 pt.) Nuclei are irregularly round with finely stippled chromatin and 1-2 large eosinophilic nuclei. (1 pt.) Mitotic figures are rare. (1 pt.) There are areas of necrosis (1 pt.) and dropout scattered throughout the stratum spongiosum on numerous fronds. The fibrous stroma is vascular with infiltration of numerous lymphocytes and plasma cells (1 pt.), with fewer macrophages and neutrophils. The neoplasm is lined and fronds separated by abundant keratotic and cellular debris with few neutrophils (1 pt.). The fibrous lining of the tympanic bulla is multifocally expanded by abundant granulation tissue. (1 pt.)

MORPHOLOGIC DIAGNOSIS: Tympanic bulla: Squamous papilloma. (4 pt.)

O/C: **(1 pt.)**

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Case 4. Tissue from a dog.

MICROSCOPIC DESCRIPTION: Pituitary gland, pars distalis (1 pt.): Expanding and replacing the normal pituitary architecture and compressing the adjacent remaining rim of normal pars distalis is an 4 x 4mm, unencapsulated, well circumscribed neoplasm (1 pt.) composed of polygonal (1 pt.) cells arranged in nests, packets (1 pt.), and trabeculae supported by a fine fibrovascular stroma and separated by variably-sized blood-filled spaces (1 pt.). Neoplastic cells have indistinct cell borders, moderate amounts of granular eosinophilic cytoplasm (1 pt.), a round nucleus with finely clumped chromatin and one distinct eosinophilic nucleolus. (1 pt.) Mitoses are rare. There is mild anisokaryosis and anisocytosis. (1 pt.)

Mammary gland: Expanding the mammary gland and compressing an adjacent ectatic duct, there is an expansile, encapsulated, well-demarcated, multinodular, moderately cellular epithelial neoplasm (1 pt.). The neoplasm is composed of lobules of variably-sized glands and acini (1 pt.) on a moderate fibrous stroma. Acini are lined by columnar epithelial cells with vacuolated cytoplasm and distinct cell borders. (1 pt.) Nuclei are apical, irregularly round, and have 1-2 small basophilic nucleoli. (1 pt.) Mitotic figures are rare. Acini are variably ectatic, with lumina filled with bright eosinophilic secretory product (1 pt.), which often compresses the adjacent attenutated epithelium. Occasionally acini contain lamellated pink concretions (corpora amylaceae) (1 pt.)which are also present within the lumen of the ectatic duct. Adjacent skeletal muscle is shrunken and atrophic.

MORPHOLOGIC DIAGNOSIS: 1. Pituitary gland, pars distalis: Adenoma. (2 pt.)

2. Mammary gland: Fibroadenoma. (2 pt.)

NAME A LIKELY ELEVATED HORMONE: Prolactin. (1 pt.)

O/C: **(1pt.)**