

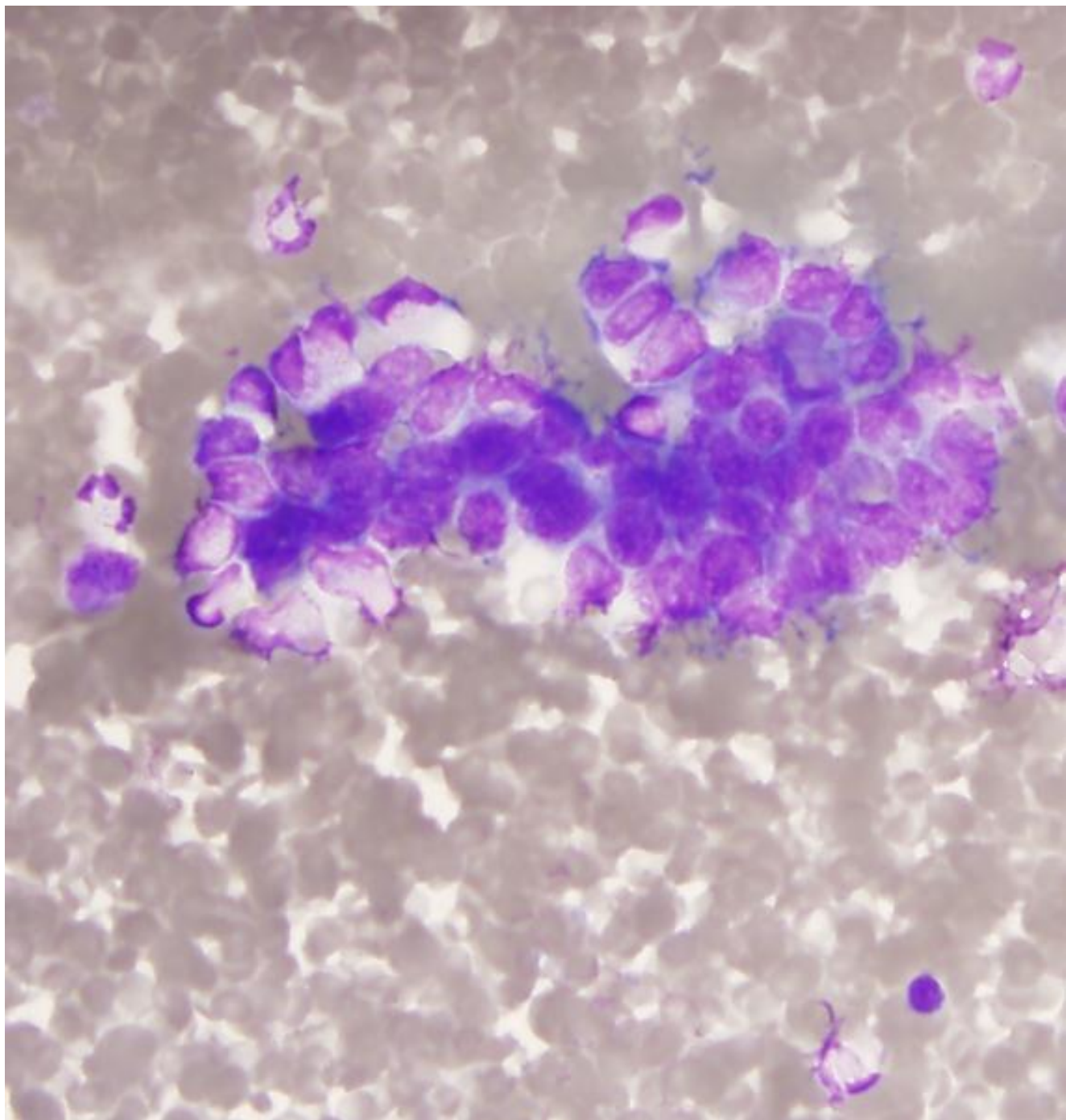
Interesting Case Conference

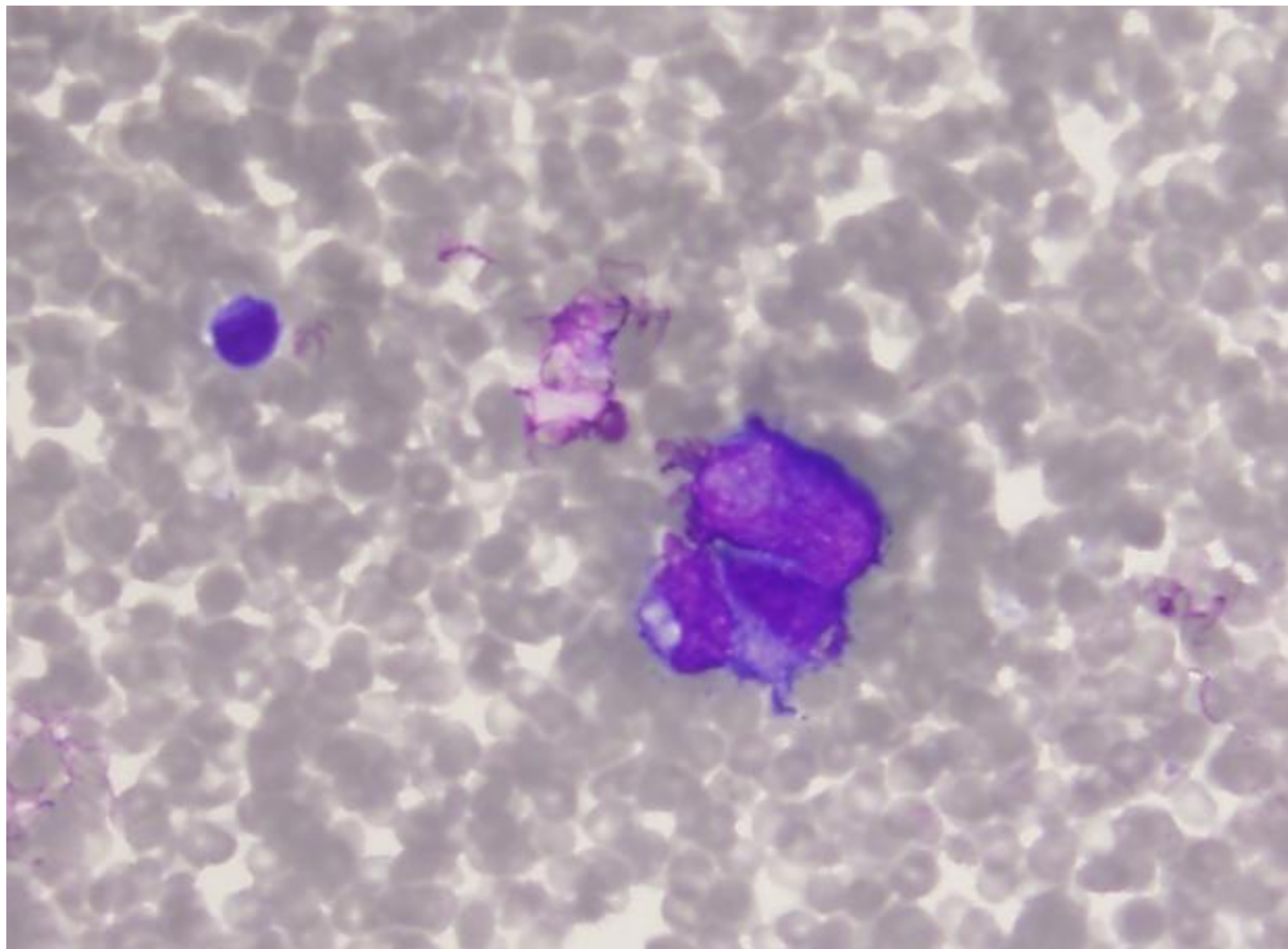
Hx

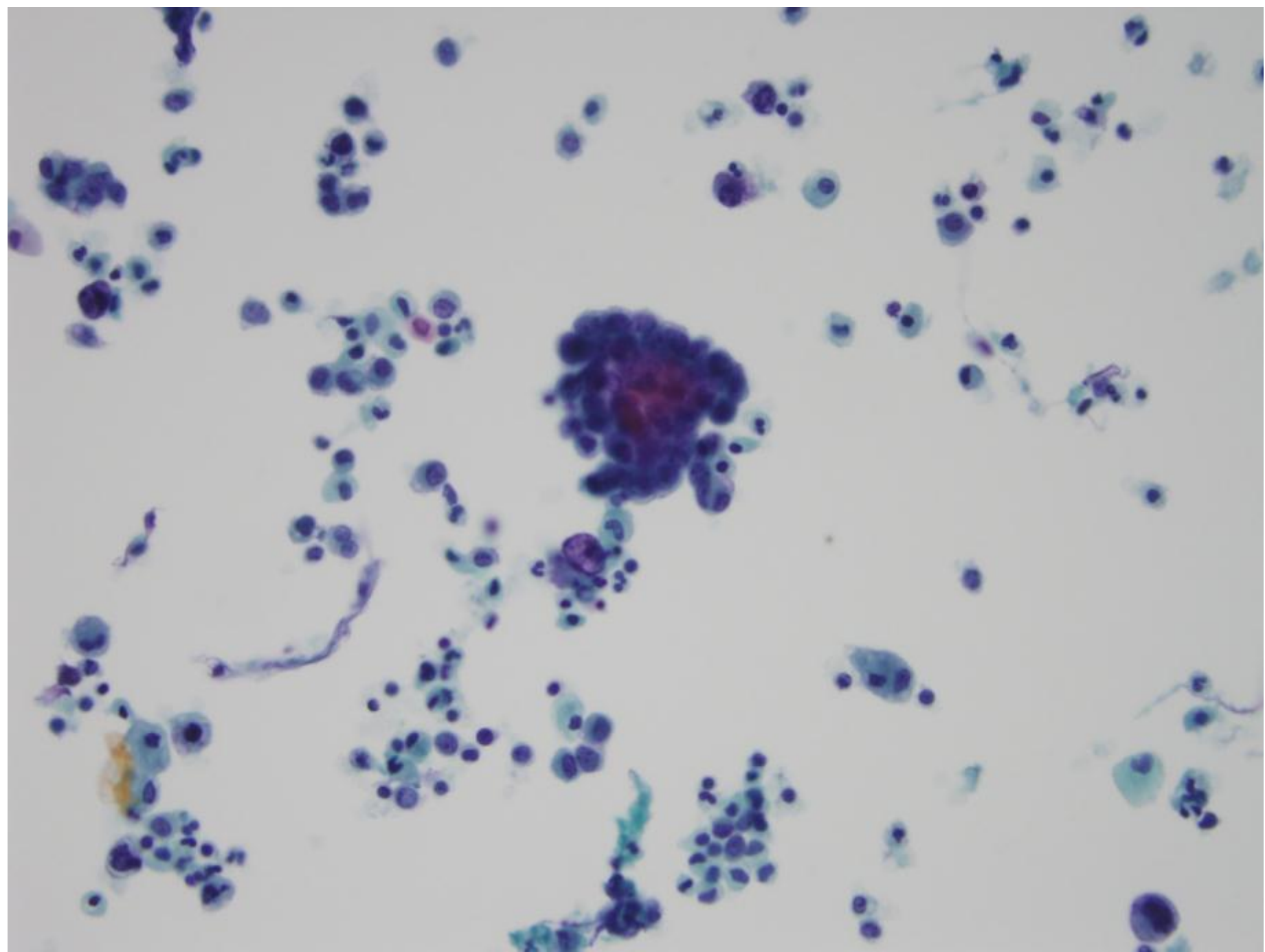
- 14 yo F with large (30+ cm ovarian mass)
- No significant hx
- Labs
 - B-HCG: 110 mIU/ml (pregnancy >25)
 - AFP: 2 ng/ml

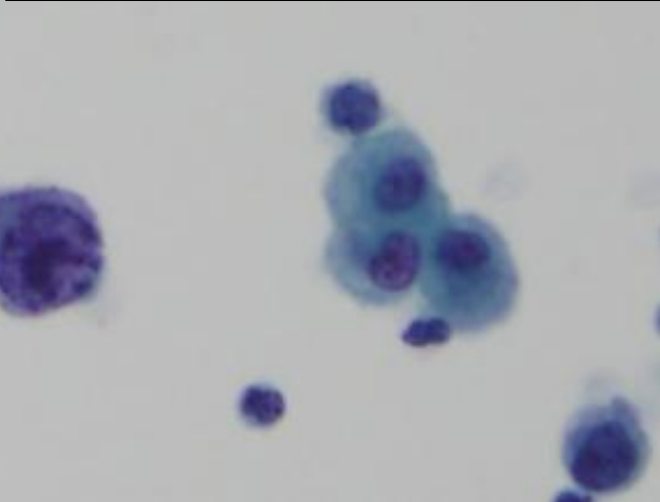
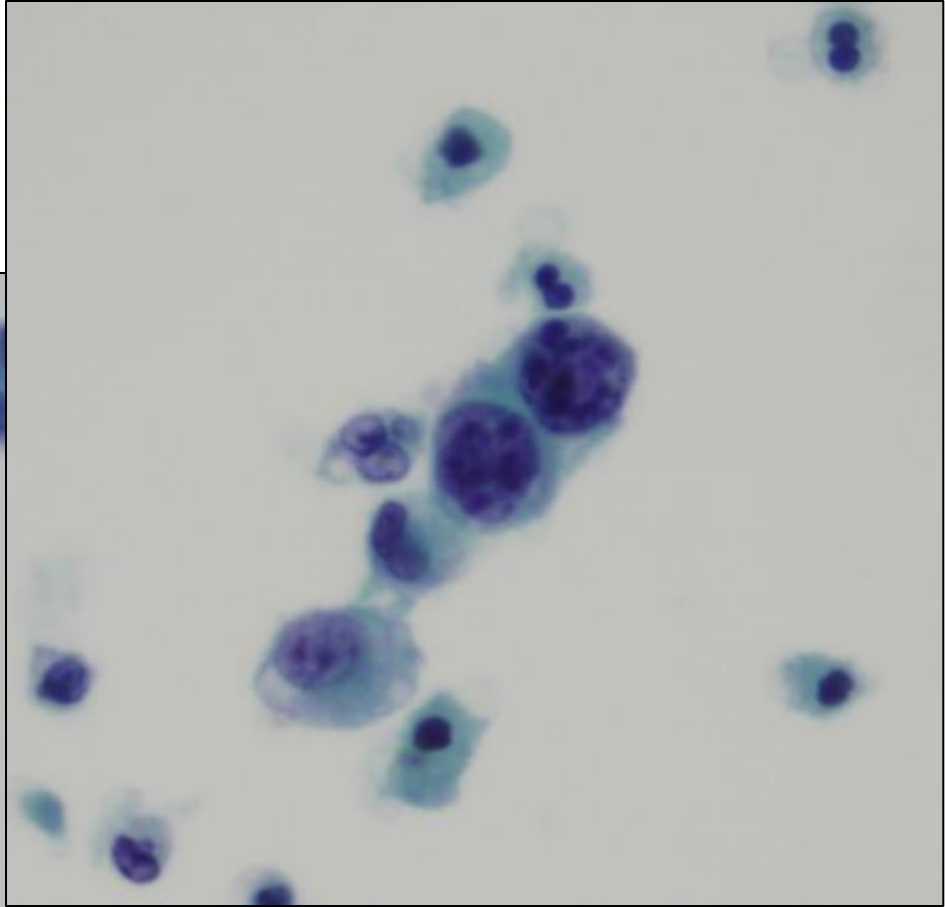
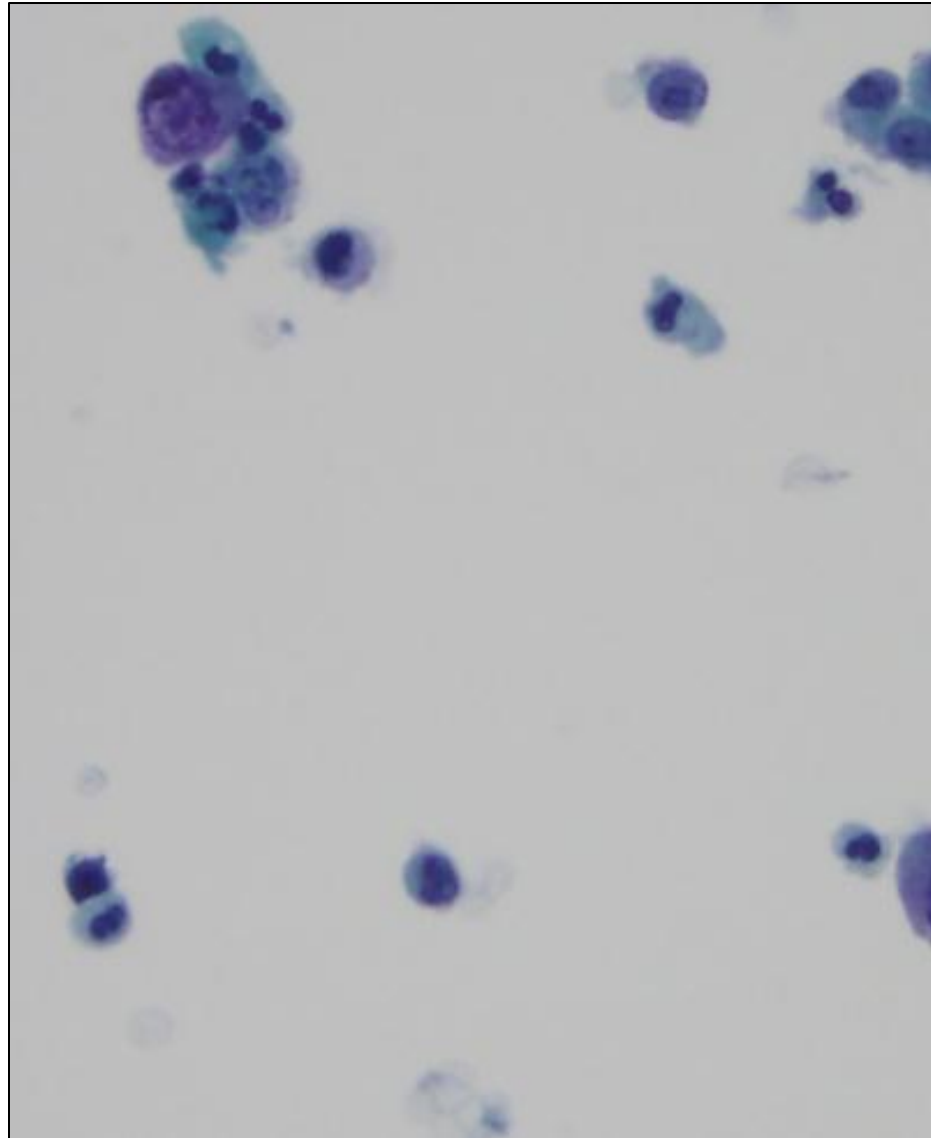


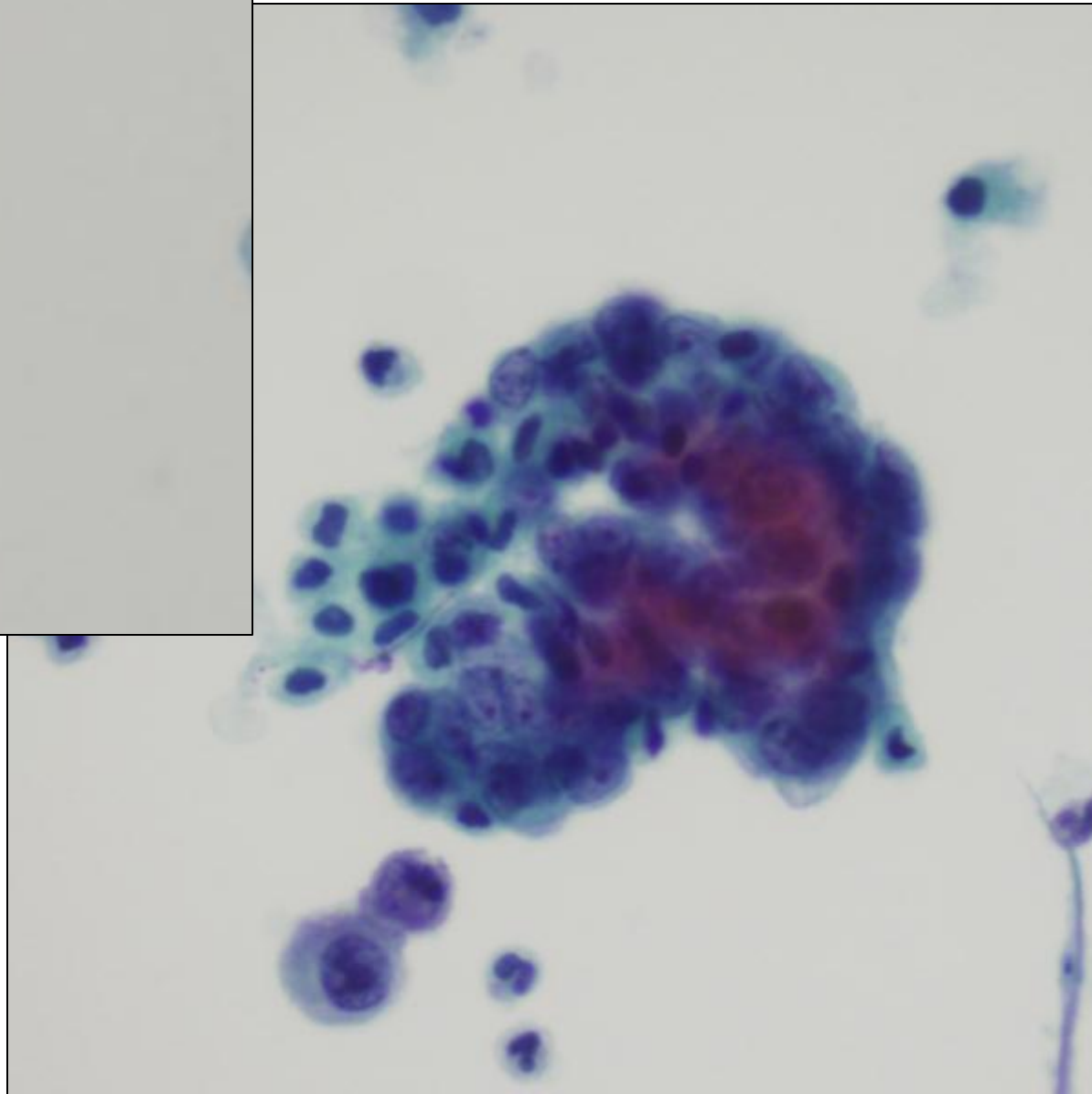
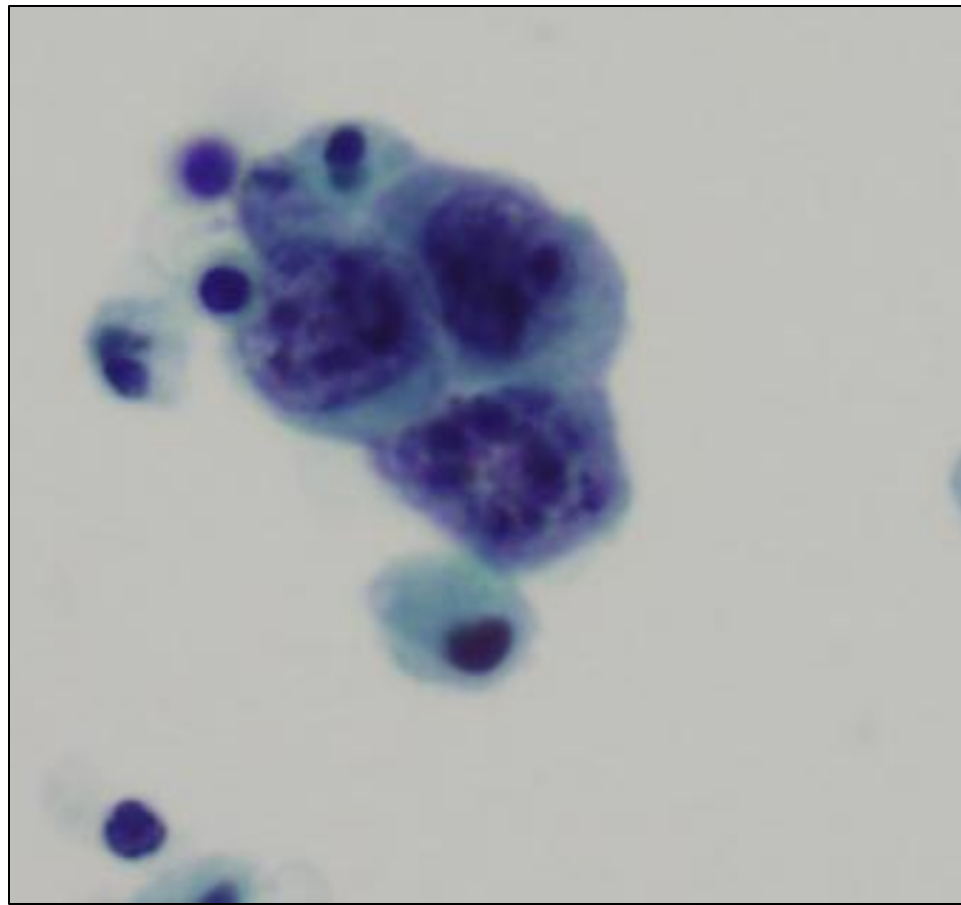
Pelvic Washing



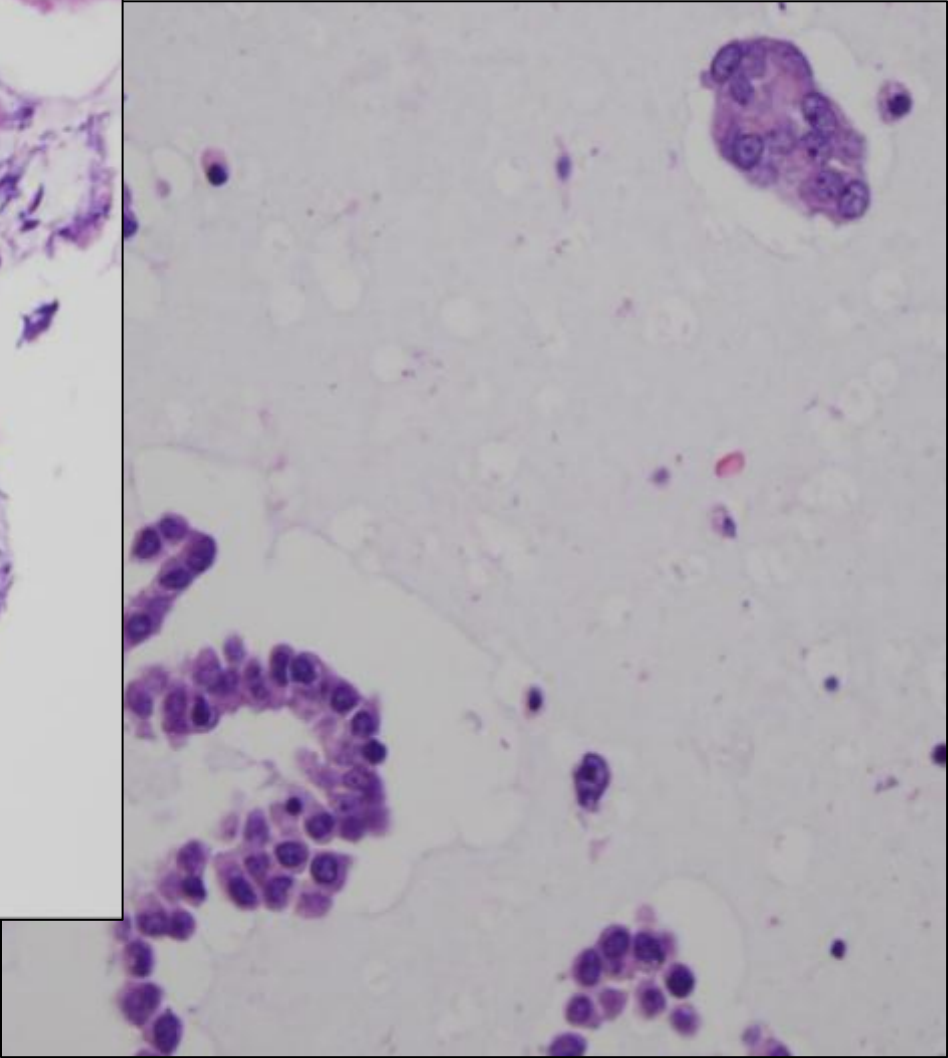
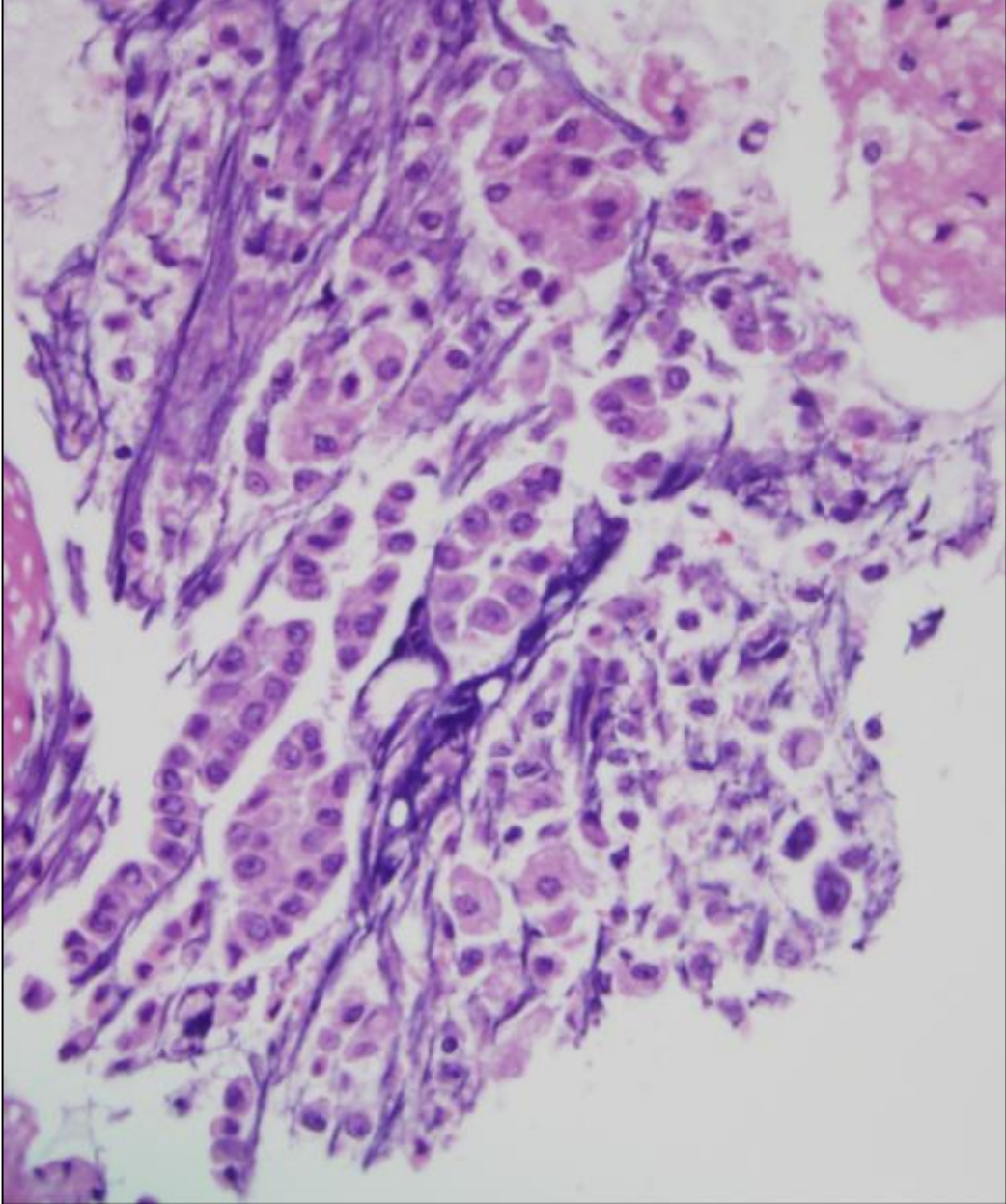








Cell Block

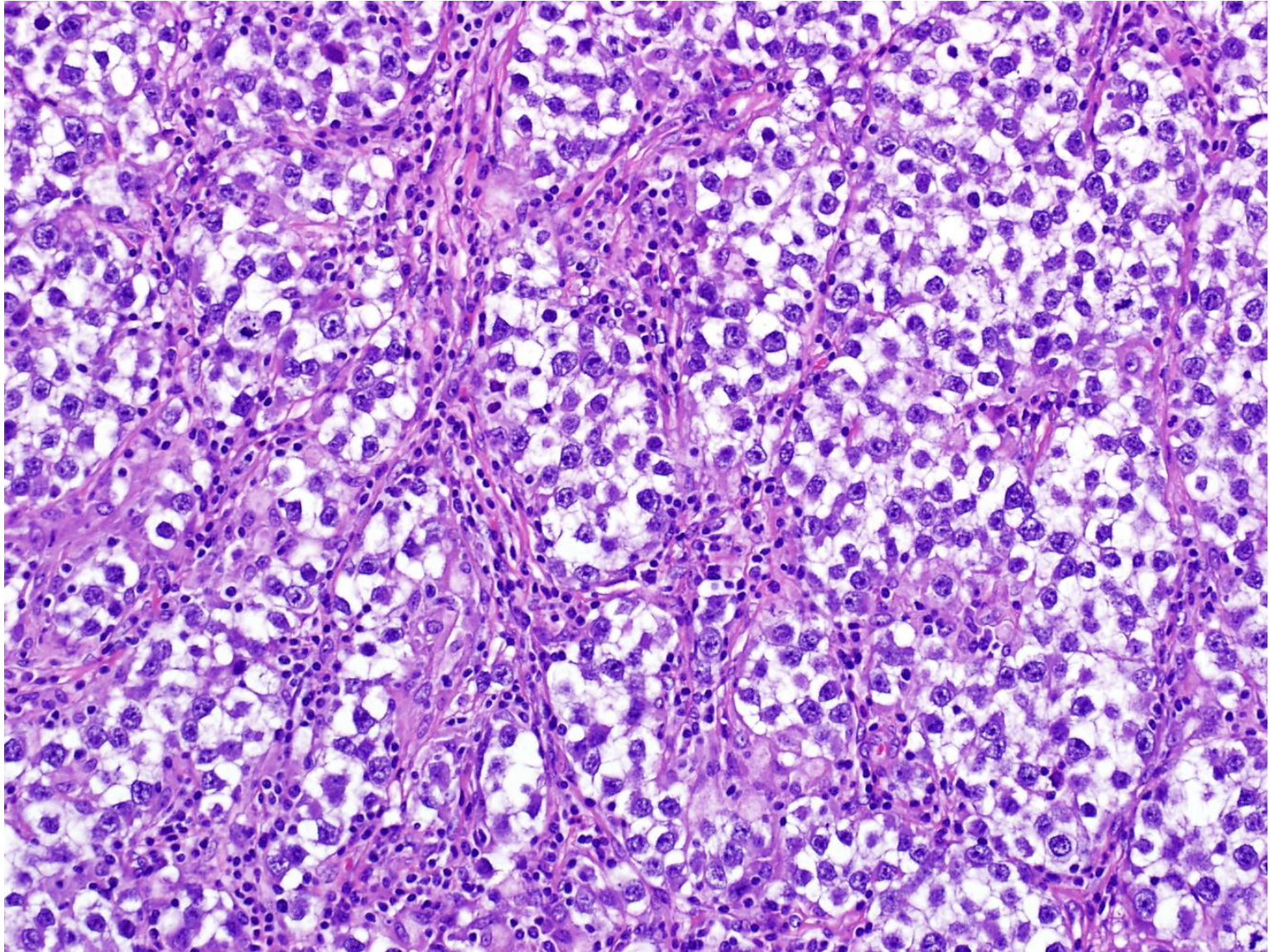


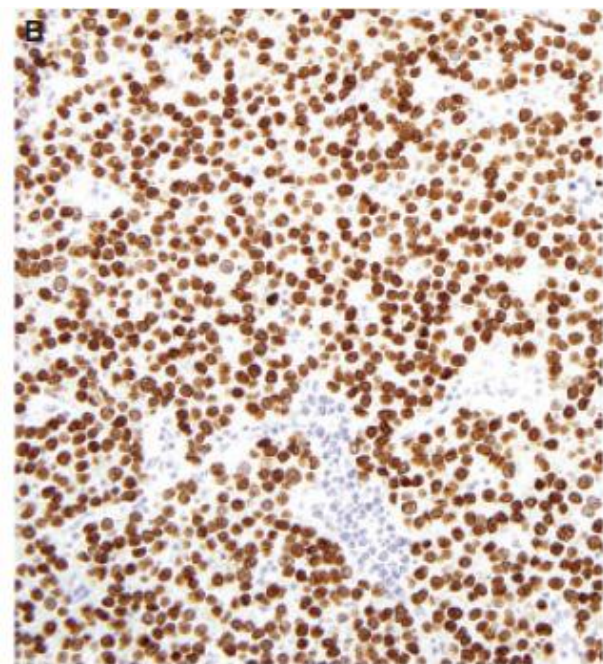
Surgical Pathology Gross



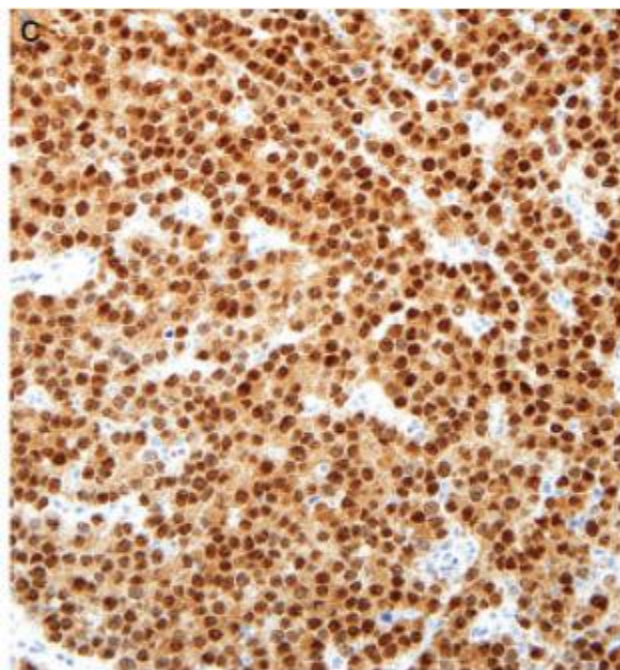
SU-14-24301

Histology - Dysgerminoma





SALL4



OCT-4



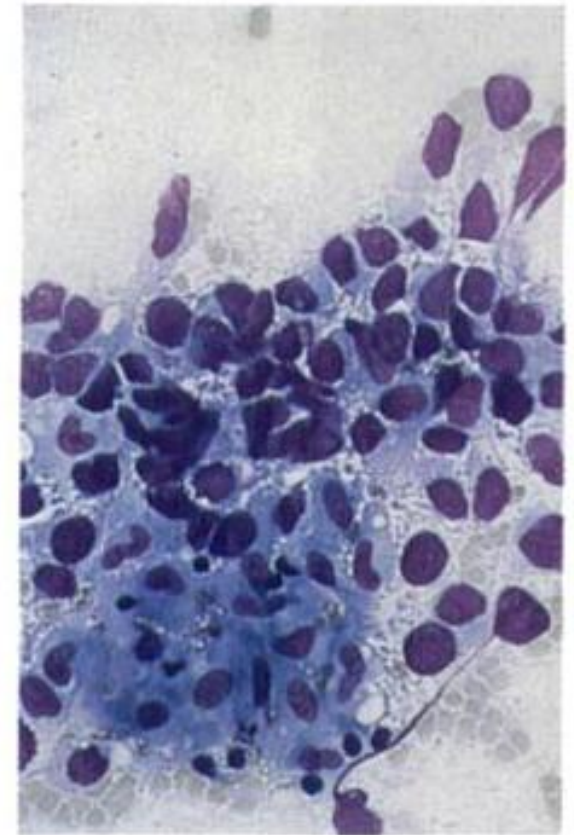
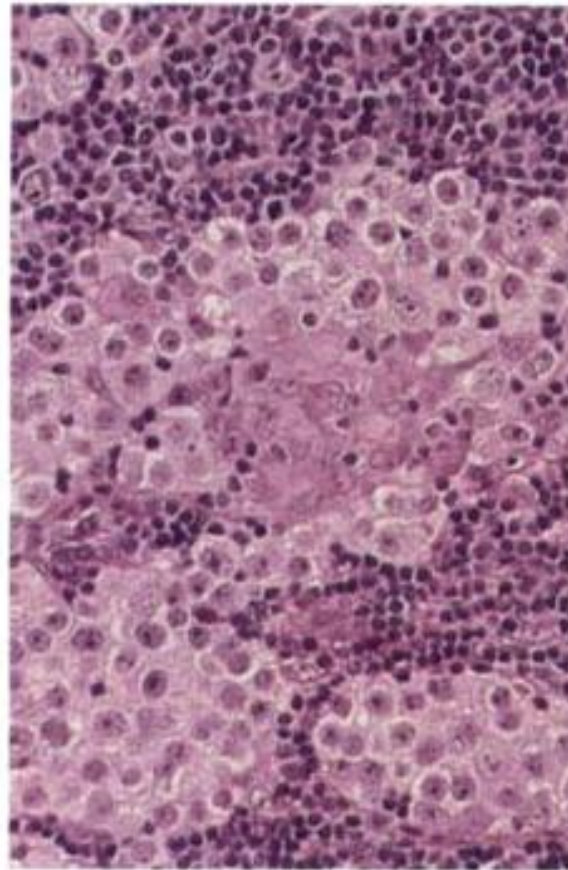
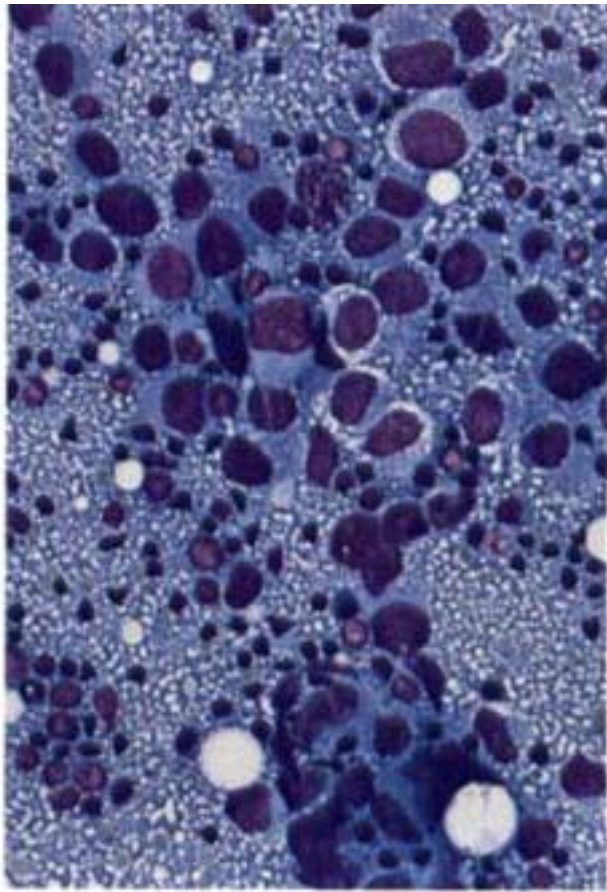
CD-117

Negative for CD30 and Pan-cytokeratin
Positive for PLAP

A practical approach to immunohistochemical diagnosis of ovarian germ cell tumours and sex cord–stromal tumours

Diagnosis

- Surgical: Dysgerminoma
- Cyto: Positive for malignant cells, consistent with dysgerminoma.



Fine-Needle Aspiration Biopsy of Seminoma and Dysgerminoma: Cytologic, Histologic, and Electron Microscopic Correlations

Mohammed Akhtar, M.D., M. Ashraf Ali, M.D., Mahmuda Huq, A.I.M.L.S.,
and Mohammed Bakry, A.A.T.B.