

# Interesting case conference

Case #2

7/16/12

# History

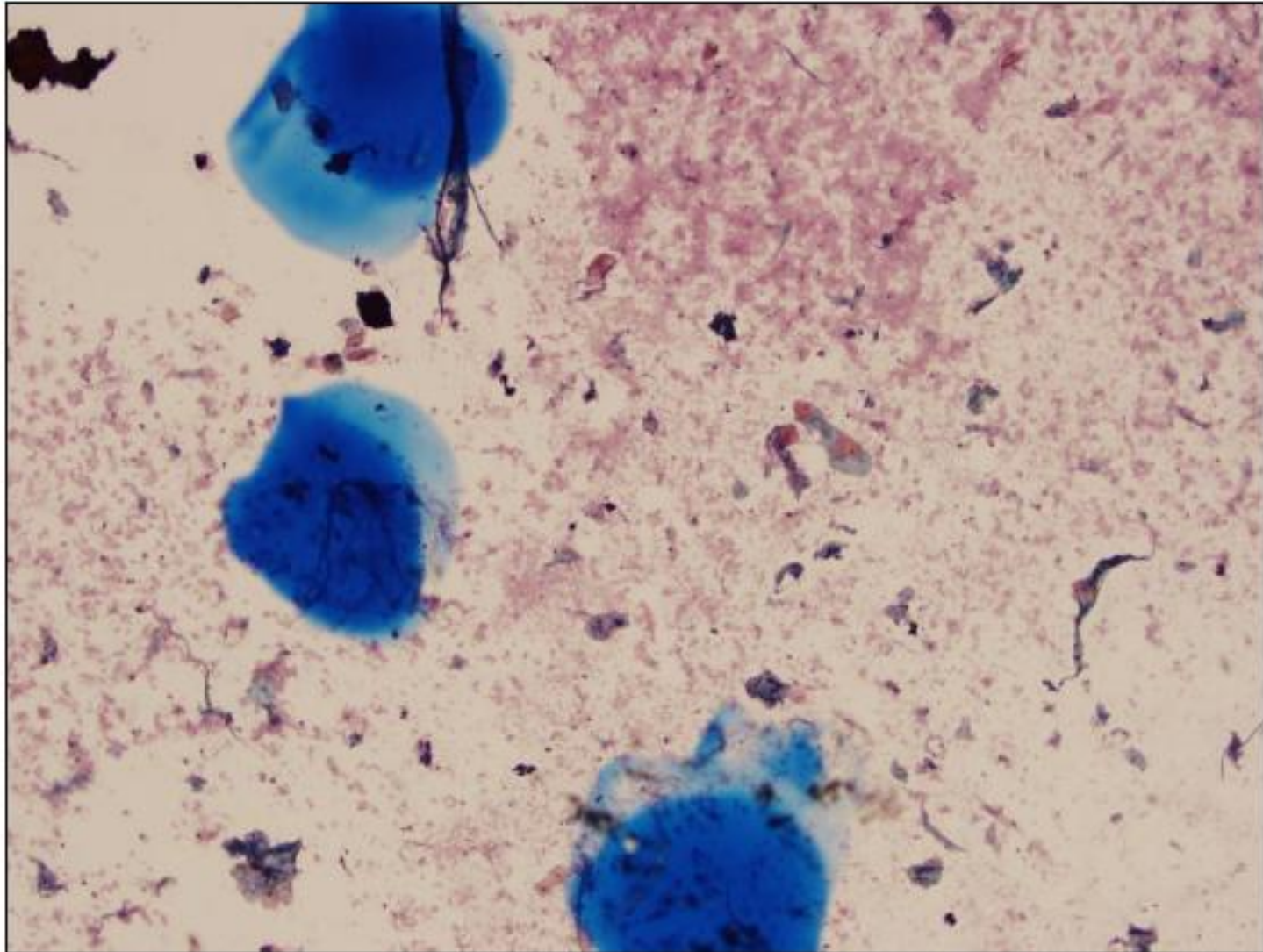
- 49 y.o. G6P4 female.
- No menstrual cycles in the past 8 months.
- However, for the past 2-3 months, she has been experiencing persistent vaginal spotting.

# Physical Exam Findings

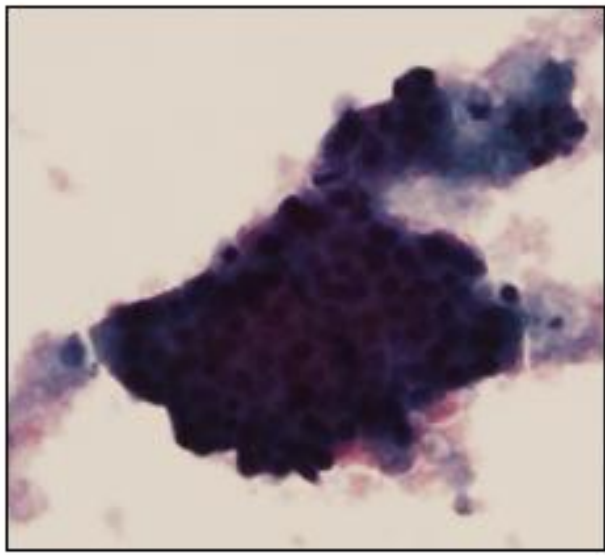
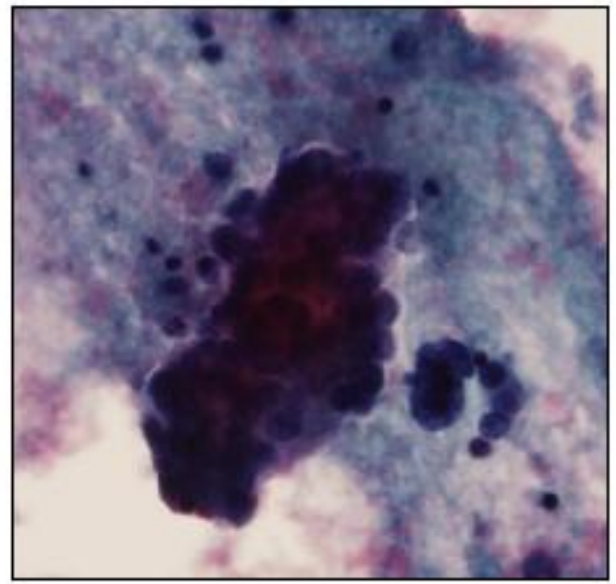
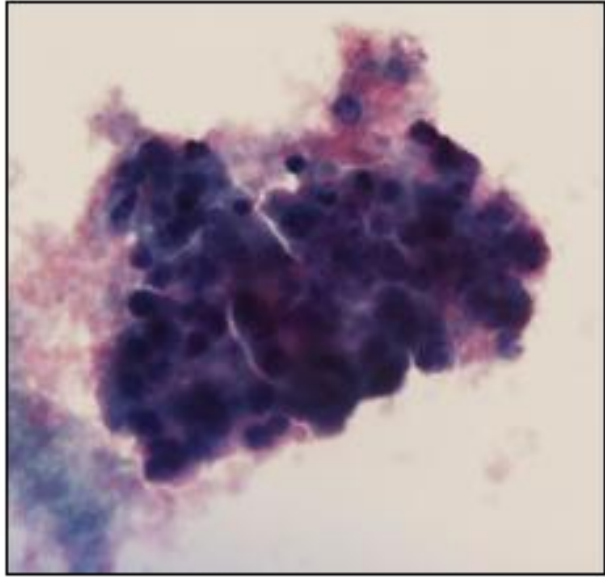
- 3 cm exophytic, irregular, soft cervical mass.
  - 1 cm portion of mass easily removed with forceps and sent to pathology as a biopsy specimen.
- Pap smear was also performed concurrently.

# ThinPrep: Bloody & few squamous cells

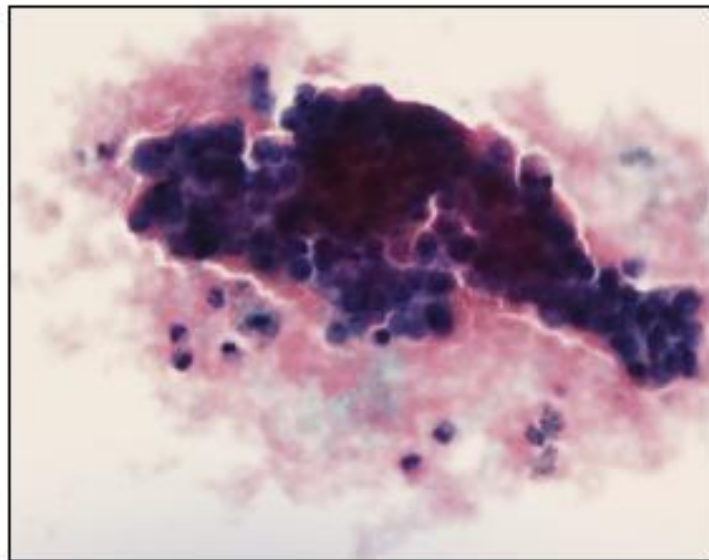
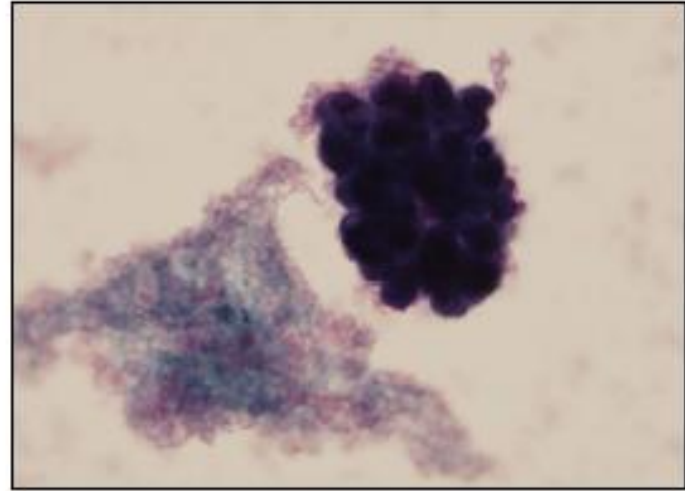
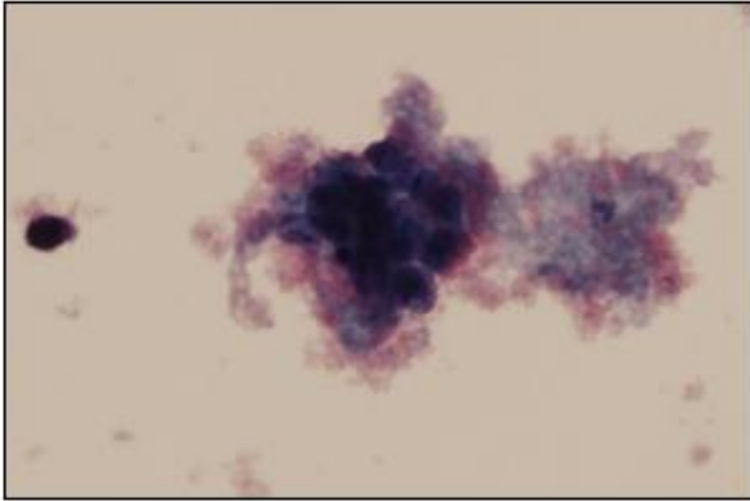
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# Hyperchromatic crowded groups



# Clinging diathesis



# Differential Diagnosis

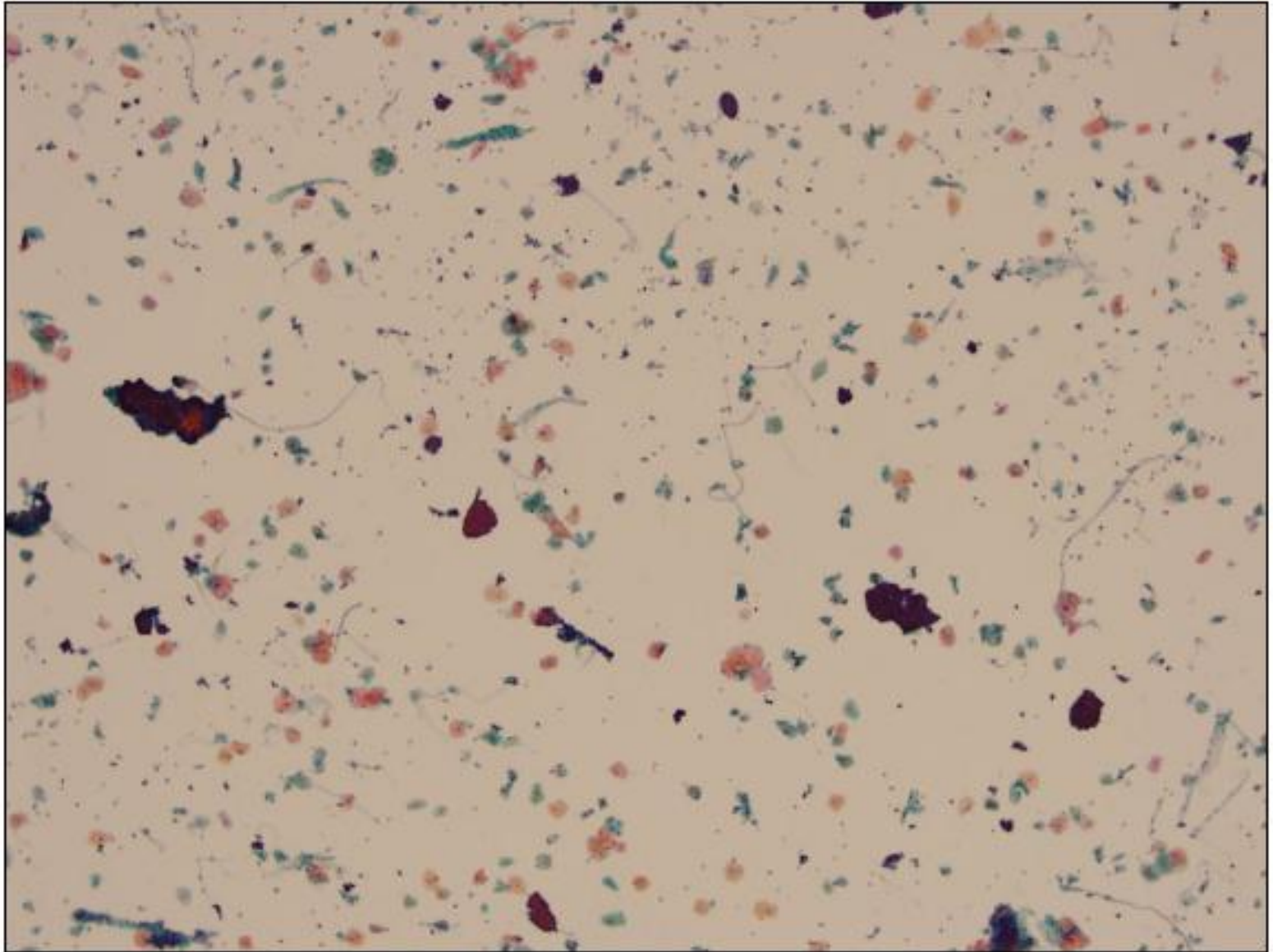
- HSIL
- Atypical glandular cells, not otherwise specified.
- Atypical glandular cells, favor neoplastic.
- Adenocarcinoma
  - Endocervical
  - Endometrial
  - Extrauterine

# Next Steps

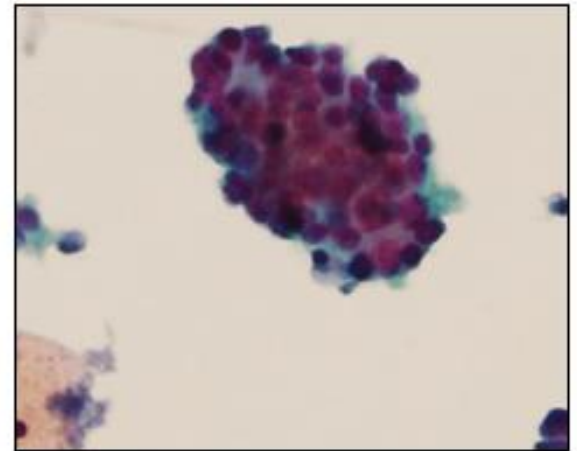
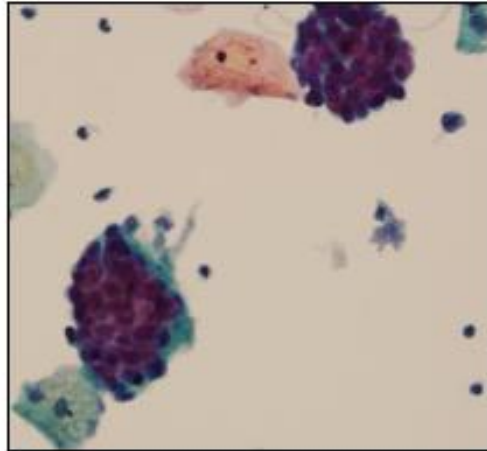
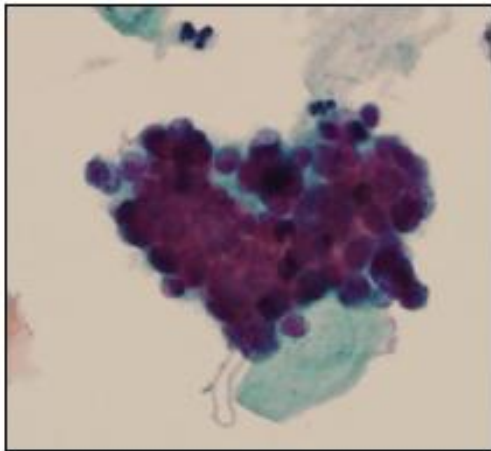
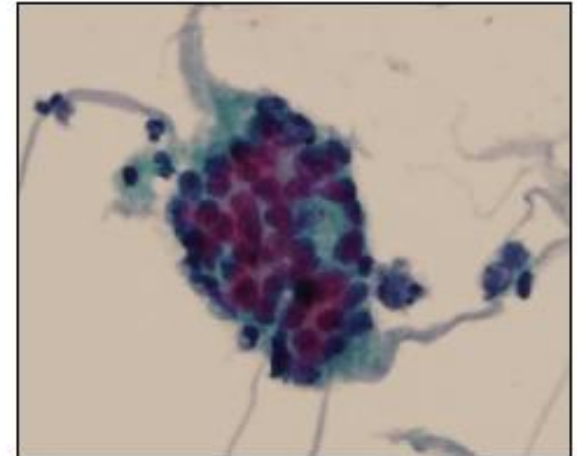
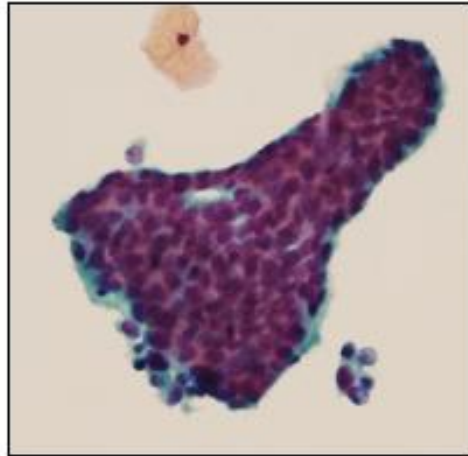
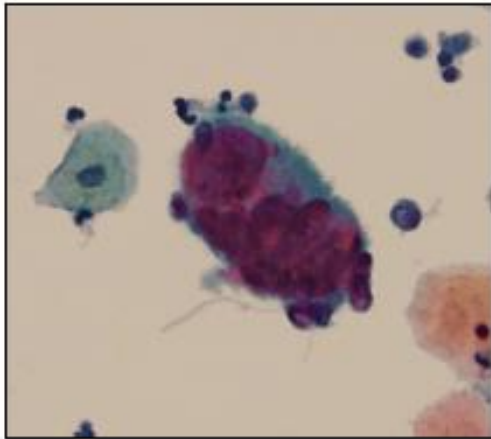
- ThinPrep vial contained abundant residual material including tissue fragments.
- Half of the residual material was centrifuged for preparation of a cell block.
- Remaining half of the residual material was treated with glacial acetic acid to prepare an additional ThinPrep slide.



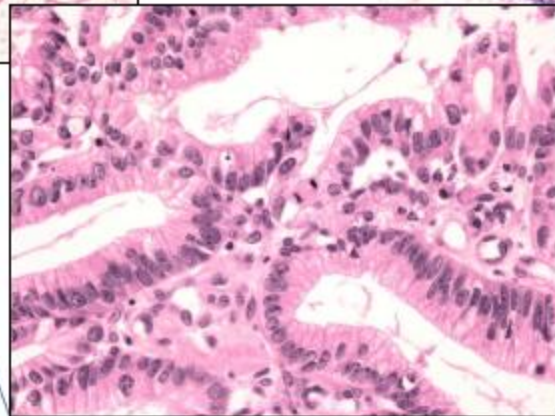
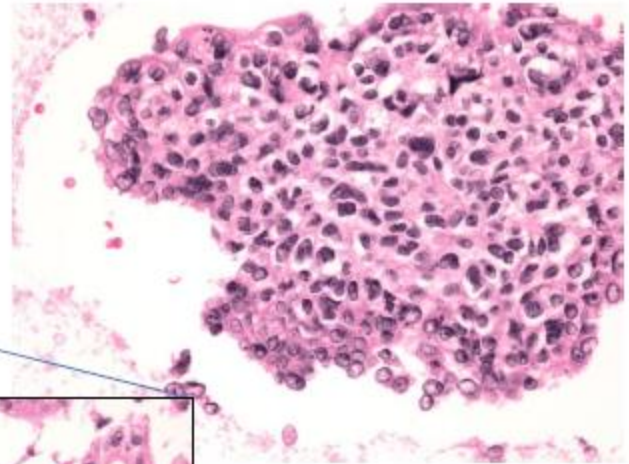
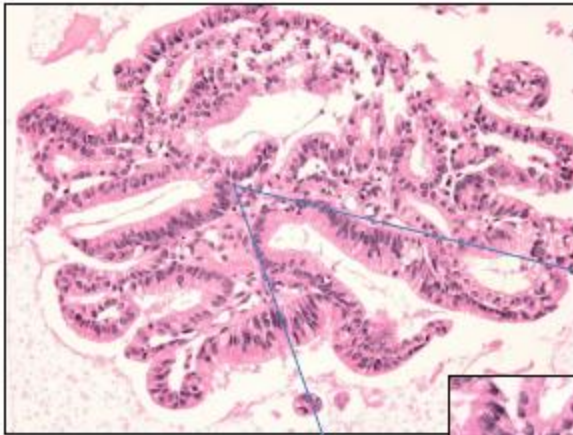
# Reprocessed ThinPrep Slide



# Reprocessed ThinPrep Slide



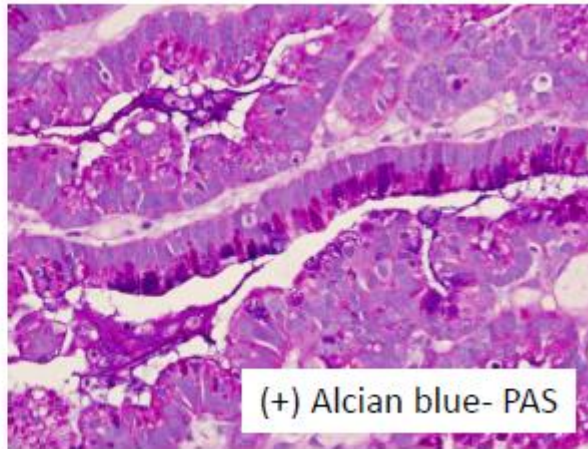
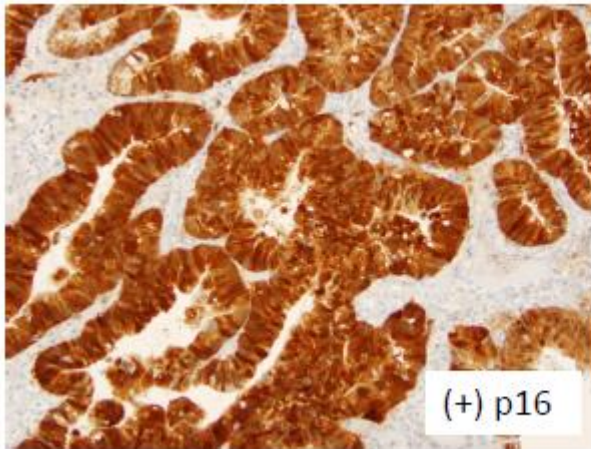
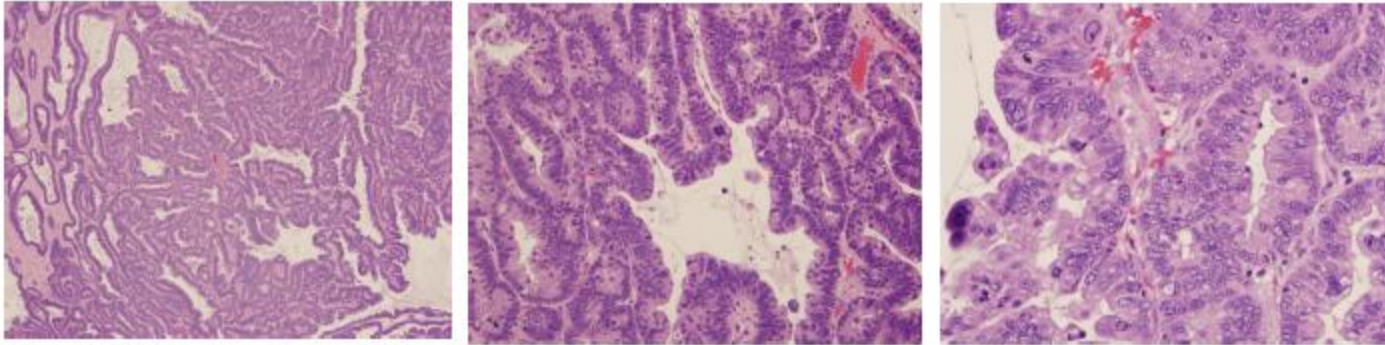
# Cell Block



# FINAL DIAGNOSIS

- Positive for adenocarcinoma.
- Concurrent biopsy was also reviewed and confirmed the diagnosis; an endocervical primary was favored based on the morphology and immunophenotype.

# Concurrent Biopsy



Immunostains for CEA, vimentin, ER, and PR were negative.

# LESSONS

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- Bloody ThinPrep specimens can be reprocessed
  - Results for this case: cleaner ThinPrep AND had a great cell block from which to do immunos if needed
- Always ask how the quality of a specimen can be improved