ROYAL MARSDEN NHS FOUNDATION TRUST - HISTOPATHOLOGY REPORT
749971: [redacted] - NHS Number: 442 797 1741

Lab No	6759/20	**Reported**	10 Jul 2020	**Pathologist**	DR HALLIN/DR THWAY
Source	Internal Operation	**Sample Received**	7 Jul 2020	**Ward**	
Sex	MALE	**Age**	38	**Branch**	FULHAM ROAD
Clinical Diagnosis		**Operation**	6 Jul 2020	**Consultant**	STRAUSS,MR D C

SITE	DIAGNOSIS
SOFT TISSUE AND OTHER CONNECTIVE TISSUE A (T1X005)	SPINDLE CELL SARCOMA (Malignant) (M88013)
B THIGH (TY9100)	SPINDLE CELL SARCOMA (Malignant) (M88013)

38 YEAR-OLD MALE, WHO NOTICED A LUMP IN THE ANTERIOR RIGHT THIGH IN FEB 2020, WHICH HAS GROWN SINCE. US: 32X32X32MM LESION IN THE RECTUS FEMORIS, WITH CYSTIC AREAS AND CALCIFICATIONS. THIS SPECIMEN: CORE BIOPSIES OF INTRAMUSCULAR SOFT TISSUE TUMOR, RIGHT THIGH. CLINICALLY ?SARCOMA ?AVM. THERE IS NO PREVIOUS HISTOLOGY FOR REVIEW AT RMH.

MACROSCOPY
Mass, right thigh: 4 cores ranging from 10-22mm, and fragments in aggregate measuring 10x4x2mm. 1-4) cores 5) fragments. AE.

HISTOLOGY

Cores comprising fibroadipose tissue and skeletal muscle, the latter with prominent infiltration by moderately to relatively cellular tumor, composed of loose fascicles or patternless arrays of moderately to markedly atypical cells with ovoid or spindle, sometimes buckled nuclei with hyperchromatic and fibrillary cytoplasm in moderately collagenous stroma. Tumor giant cells are relatively frequent. The mitotic index is focally up to 8/10hpf with atypical forms. No definite necrosis is seen. There is a scattered mild mixed inflammatory infiltrate, including focally some neutrophils, along with predominantly small lymphocytes and some plasma cells.

The tumor is diffusely and strongly positive for CD34. SMA is negative (only very scanty focal possible staining seen). The tumor is also negative for STAT6, desmin (only an occasional scanty possible dendritic-like cell shows possible staining), myogenin, S100 protein, SOX10, MUC4 and AE1/AE3. The proliferation fraction by MIB1 is relatively high.

The features are in keeping with pleomorphic and spindle cell sarcoma (NOS), grade 2 in this material. Although MPNST is a possibility, there is no specific evidence to support this. The features do not support (fibrosarcomatous change in) dermatofibrosarcoma.

Dr Magnus Hallin/Dr Khin Thway