

Mustafa Selman 1280 20 740198 : Mr,

37 YEAR OLD MALE. EXCISION OF NODULE IN LEFT LOWER LEG. THE PATIENT HAS A TWO YEAR HISTORY OF A LUMP IN THE MEDIAL ASPECT OF THE LEFT LOWER LEG. ON EXAMINATION, THIS IS 1X2CM IN SIZE, BUT IS WELL-DEFINED AND MOBILE IN THE SUBCUTANEOUS TISSUE. IT DOES NOT INVOLVE THE OVERLYING SKIN. IT HAS DEFINITELY BEEN GROWING, AND IS INTERFERING WITH HIS DAY TO DAY ACTIVITIES DUE TO THE SIZE. IT IS SLIGHTLY TOO SMALL TO PERFORM A CORE NEEDLE BIOPSY ON, AND THEREFORE AN EXCISION BIOPSY HAS BEEN PERFORMED. NO PREVIOUS RMH HISTOLOGY

MACROSCOPY

Nodule, left lower leg: No macroscopic description currently available, but this is an ellipse of skin containing an approximately maximally 2cm subcutaneous lesion, which appears narrowly excised.1-4) reps TR

HISTOLOGY

Sections show skin and subcutis, with dermis subcutaneous tissue containing a circumscribed lesion comprising a rim of maturing squamous epithelium with polarity and without discernible dysplasia, enclosing prominent anucleate keratin flakes and keratinous debris. The squamous epithelium of this is focally disrupted, with surrounding chronic inflammatory infiltrate. There is also surrounding giant cell reaction with cholesterol clefts, likely secondary to keratin.

The features are consistent with partially ruptured epidermoid cyst. No atypical or malignant features are seen (case also kindly seen by Dr Terlizzo (consultant skin pathologist), who agrees with the findings). The lesion appears narrowly excised, being separated from the peripheral margin by a thin layer of fibrous tissue. It is approximately 1mm from the deep margin, and clear of the longitudinal tips.

Dr Magnus Hallin/Dr Khin Thway

T: soft tissue t leg m epidermoid cyst