

ROYAL MARSDEN NHS FOUNDATION TRUST - HISTOPATHOLOGY REPORT

742276: ~~ANASTAS, MIKE~~ - NHS Number: 632 113 9068

Lab No	6970/20	Reported	14 Jul 2020	Pathologist	DR HALLIN/DR THWAY
Source	Internal Operation	Sample Received	13 Jul 2020	Ward	
Sex	MALE	Age	58	Branch	FULHAM ROAD
Clinical Diagnosis		Operation	10 Jul 2020	Consultant	HAYES,MR A J

SITE

A SOFT TISSUE AND OTHER CONNECTIVE TISSUE (T1X005)
 B SHOULDER (TY1220)

DIAGNOSIS

ELASTOFIBROMA (Benign) (M88200)
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58 YEAR OLD MALE. THIS SPECIMEN: CORE BIOPSY FROM LESION ON RIGHT SHOULDER, CLINICALLY ELASTOFIBROMA. THE PATIENT WORKS IN THE BUILDING TRADE AND NOTICED A LUMP UNDERNEATH HIS RIGHT SHOULDER BLADE. HE DESCRIBES A SENSATION OF A CLUNK AS THE SHOULDER BLADE MOVES OVER IT AND IT SEEMS TO APPEAR AND DISAPPEAR BENEATH THE SHOULDER BLADE. CLINICALLY, THIS IS THOUGHT ALMOST DIAGNOSTIC OF ELASTOFIBROMA (WHICH WAS ALSO THE FINDING ON MRI). THE PATIENT HAS A HISTORY OF BYPASS SURGERY; THIS MASS CAUSES HIM NO SYMPTOMS. ON EXAMINATION, THERE IS A TUMOR JUST AT THE APEX OF THE SCAPULA. IT IS STILL POSSIBLE THAT A SARCOMA CAN APPEAR AT THIS SITE, SO FOR COMPLETENESS MULTIPLE CORE BIOPSIES HAVE BEEN TAKEN. NO PREVIOUS RMH HISTOLOGY

MACROSCOPY

Right shoulder: 5 fatty cores ranging from 11-23mm. 1-5) AE.

HISTOLOGY

Cores comprising fibroadipose tissue and an ill-defined, sparsely cellular lesion, composed of moderately collagenous fibrous tissue with numerous collagen fibrils, including prominent beading. The adipose tissue is of mature type. There is a very mild sparse chronic inflammatory infiltrate. The spindle cells are uniform and bland, with no atypia noted. No cellular atypia is noted in the biopsy, and no tumor necrosis or mitotic figures are seen.

The features would be in keeping with elastofibroma. No atypical features or other specific abnormality is identified.

Dr Magnus Hallin/Dr Khin Thway

