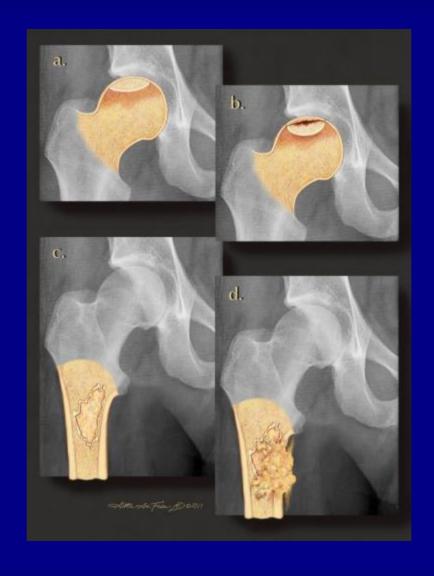


Best Cases of the AIRP

February-March, 2016



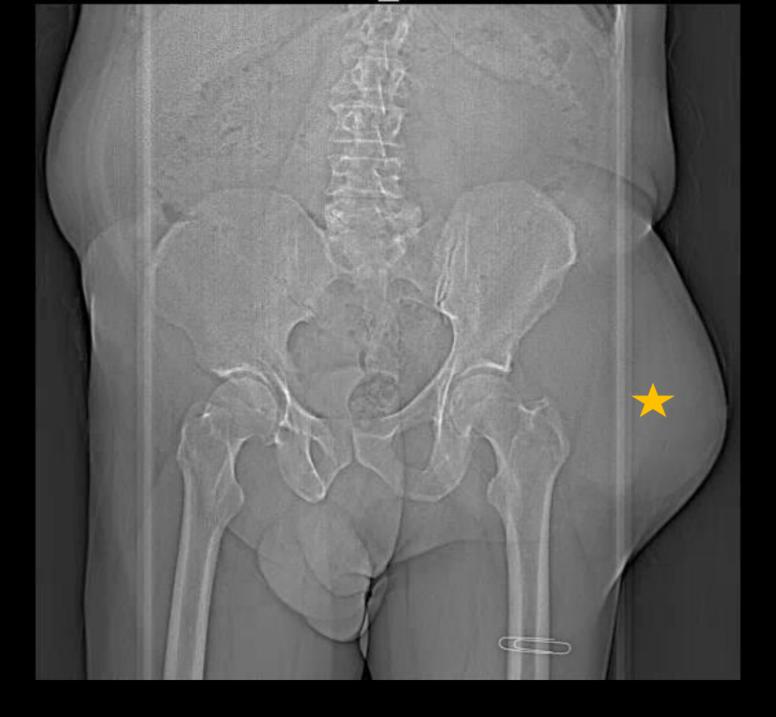
Musculoskeletal Best Case

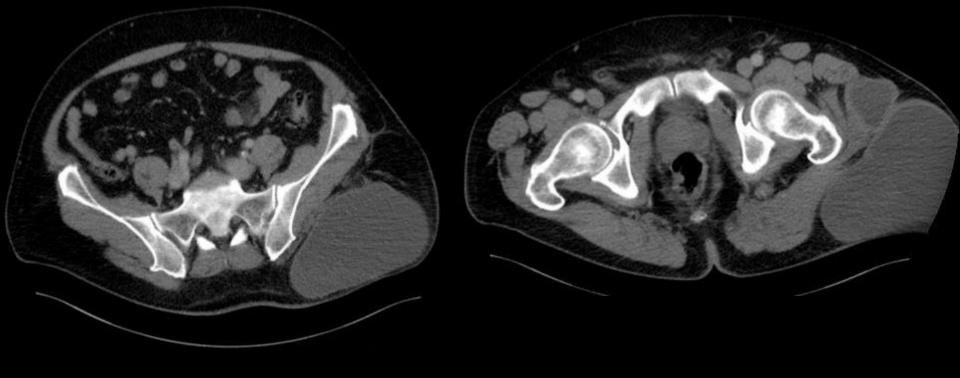


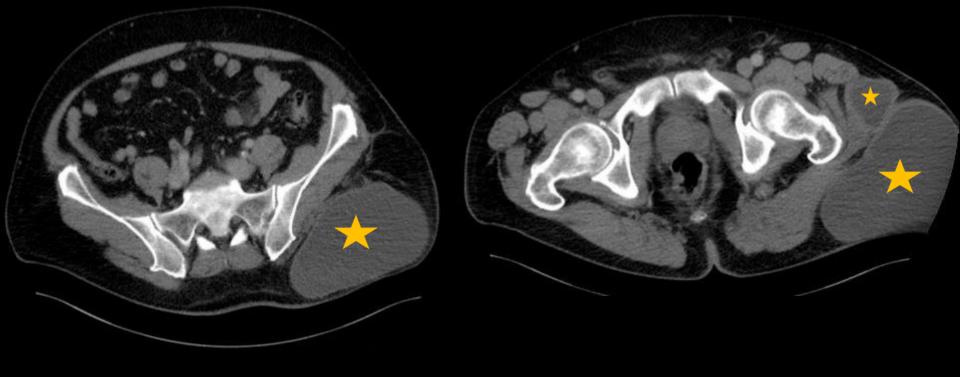


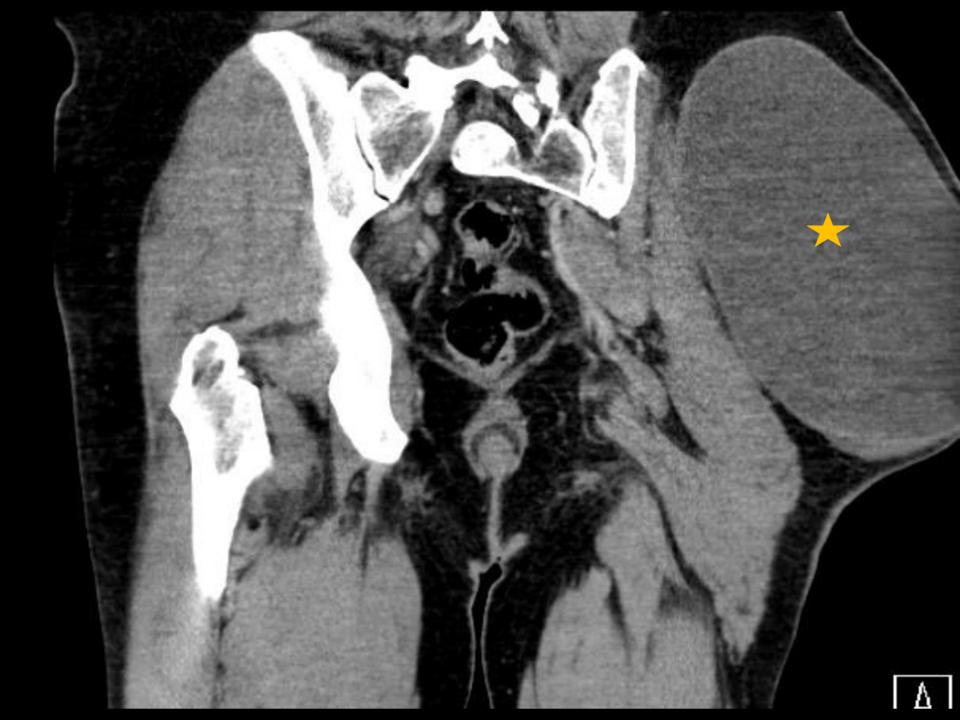
67-year-old male with enlarging left gluteal mass. Left buttock injury in MVA 25 years ago. Left buttock injury in a fall more recently







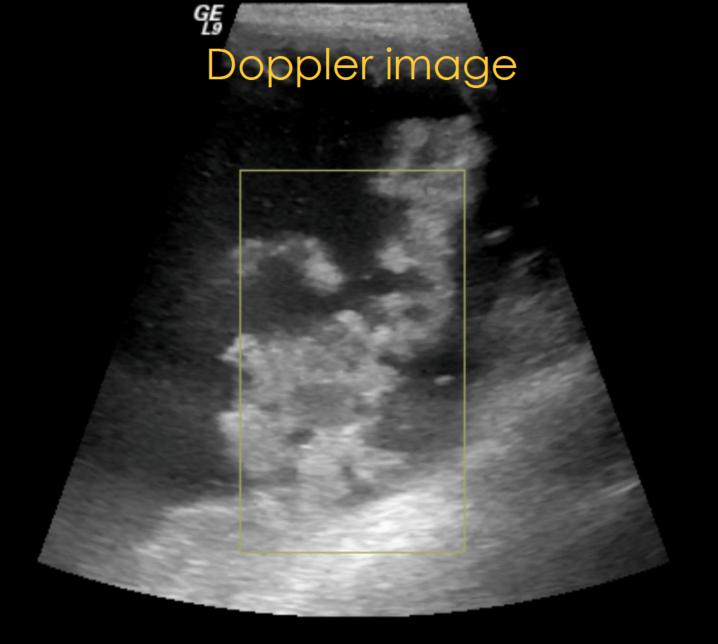




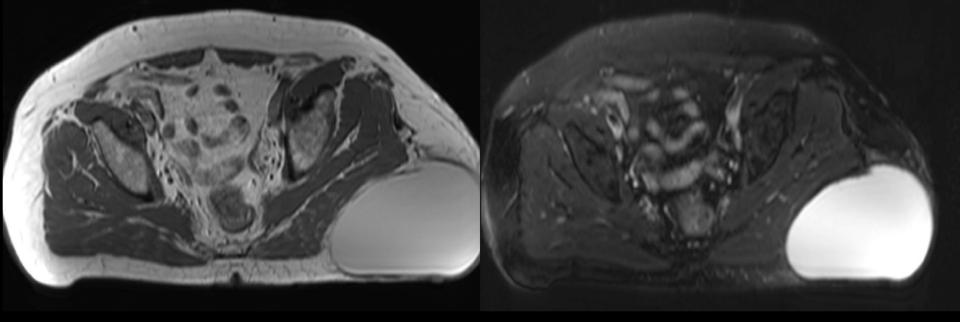






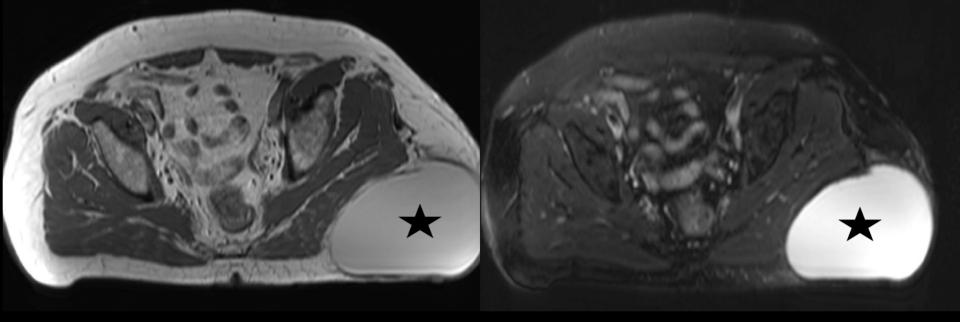


LAT LEFT BUTTOCK



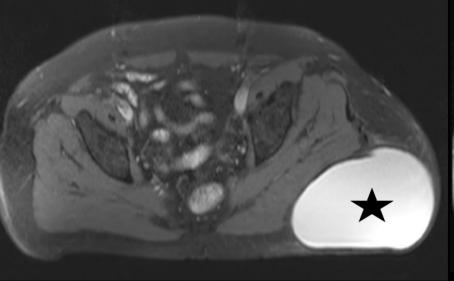
T1 non FS

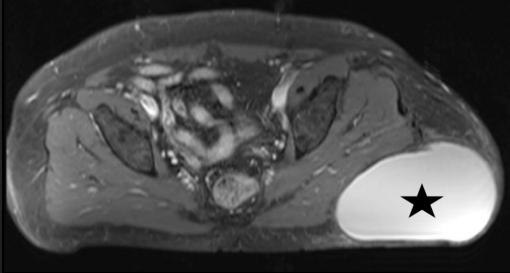
T2 FS images



T1 non FS

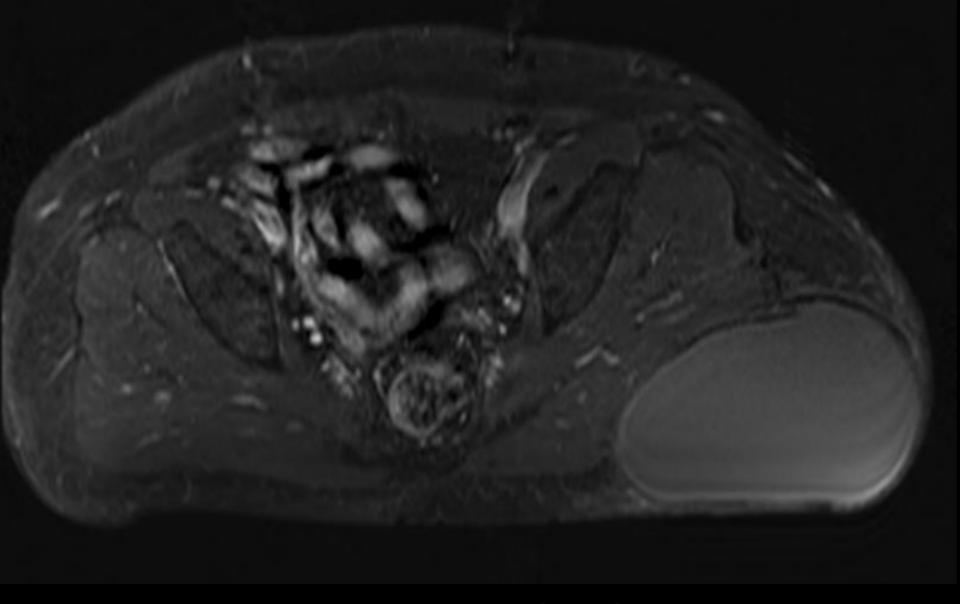
T2 FS images



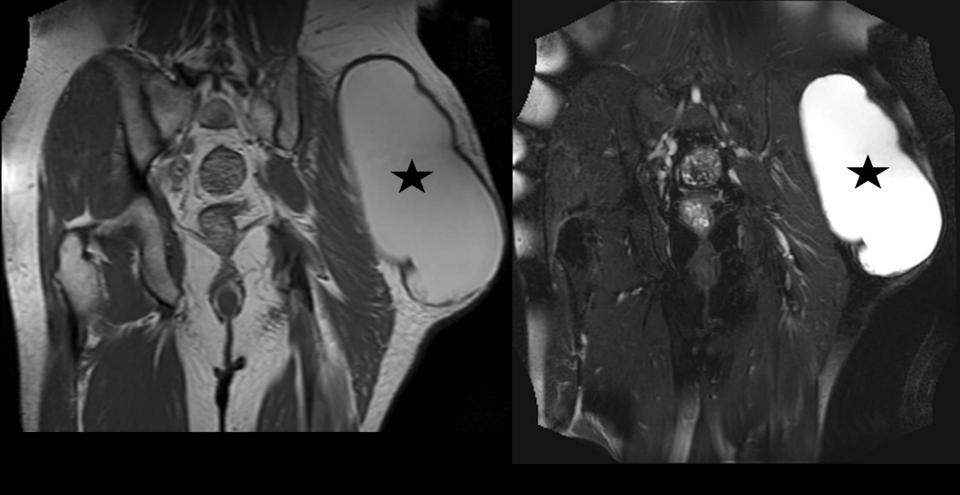


T1 FS Pre

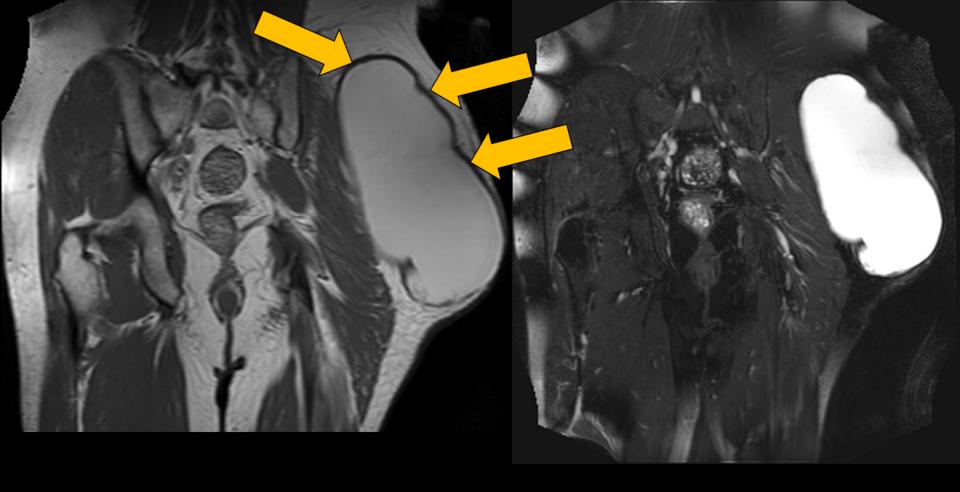
T1 FS Post



T1 FS subtraction image



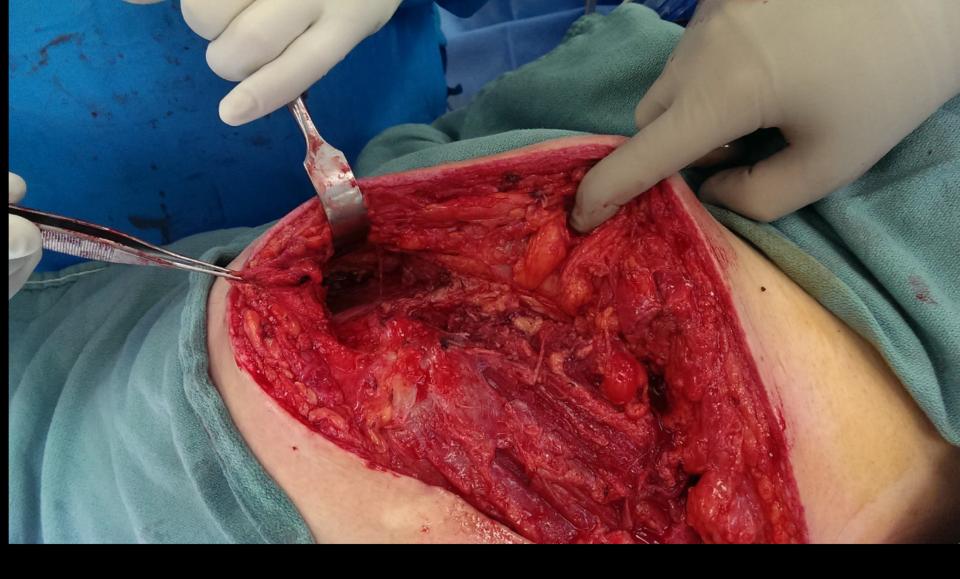
Coronal T1 and T2 FS



Coronal T1 and T2 FS



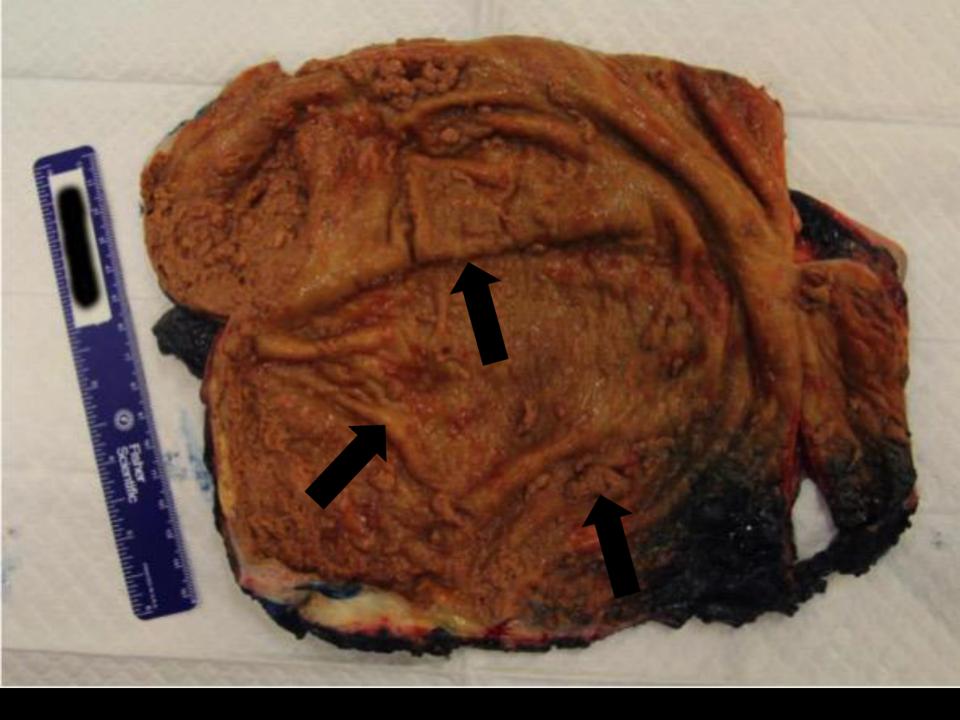
Intraoperative picture

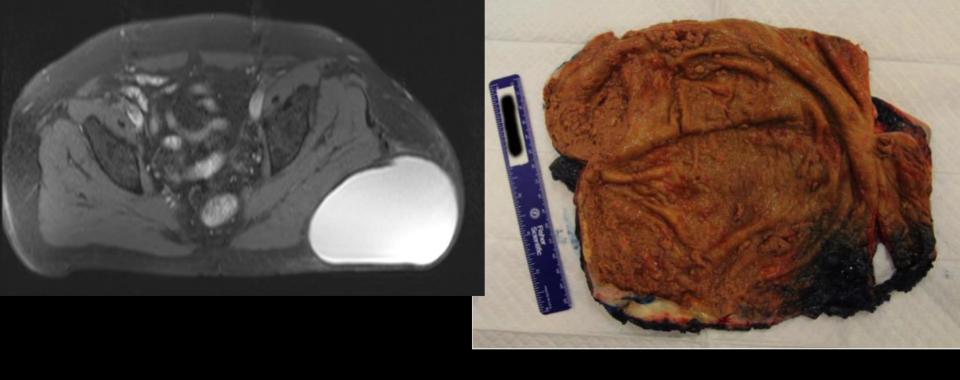


Intraoperative picture

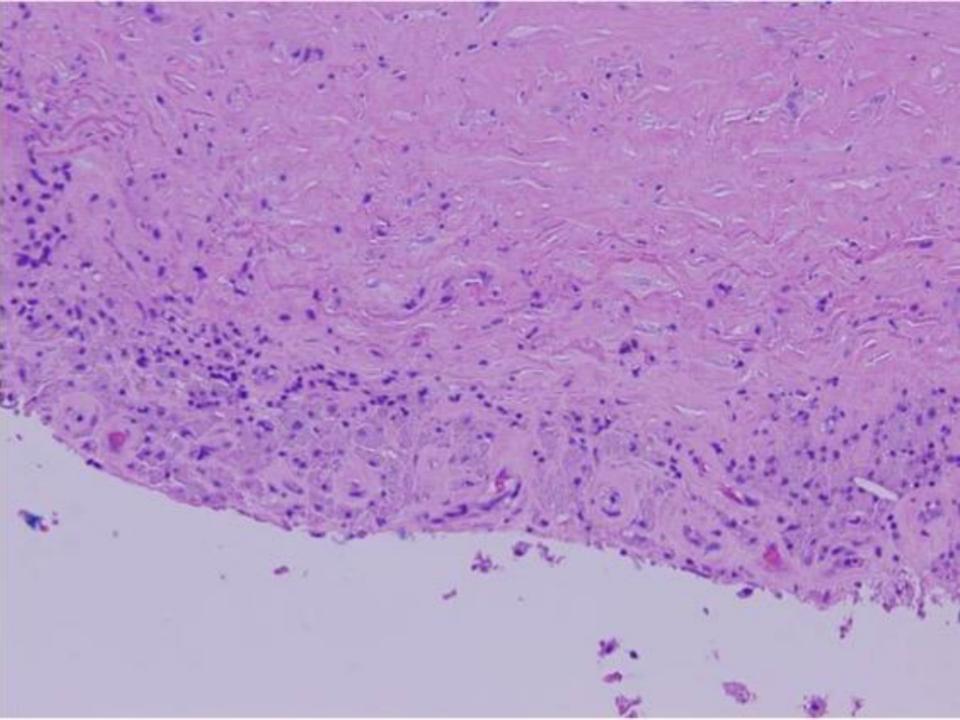


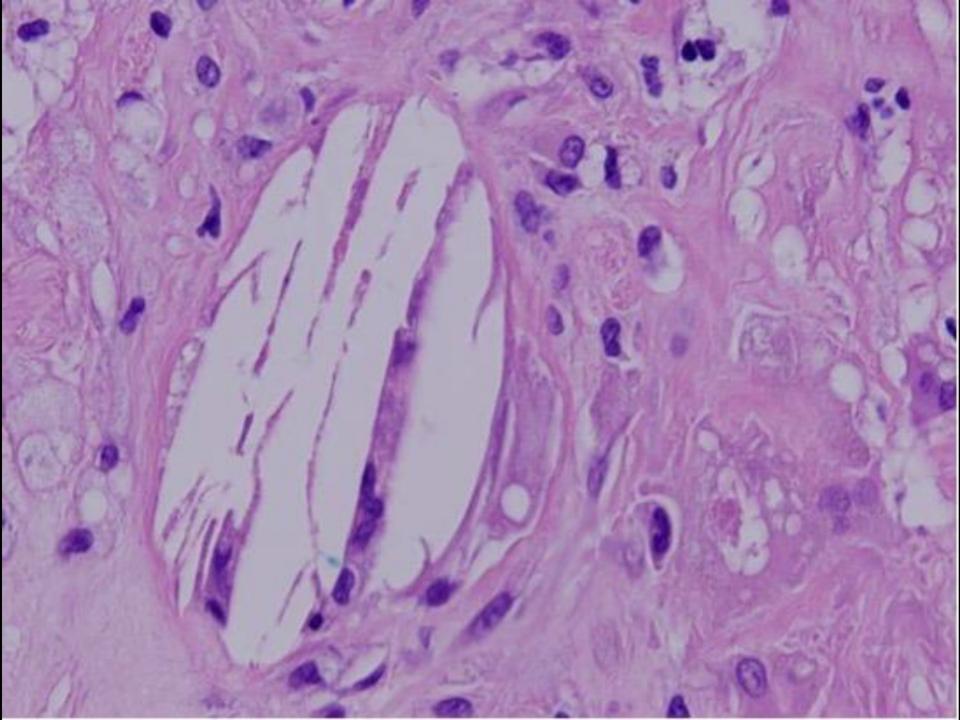






T1 FS and matched gross photograph







Morel-Lavallee lesion

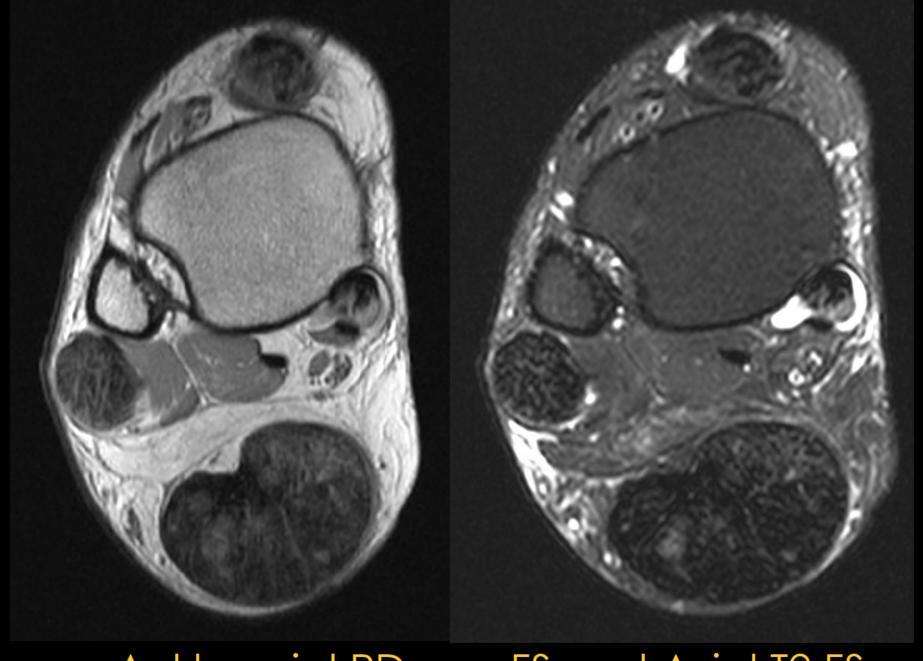
Dr. Kristopher McLean McMaster University Hamilton, Ontario Canada



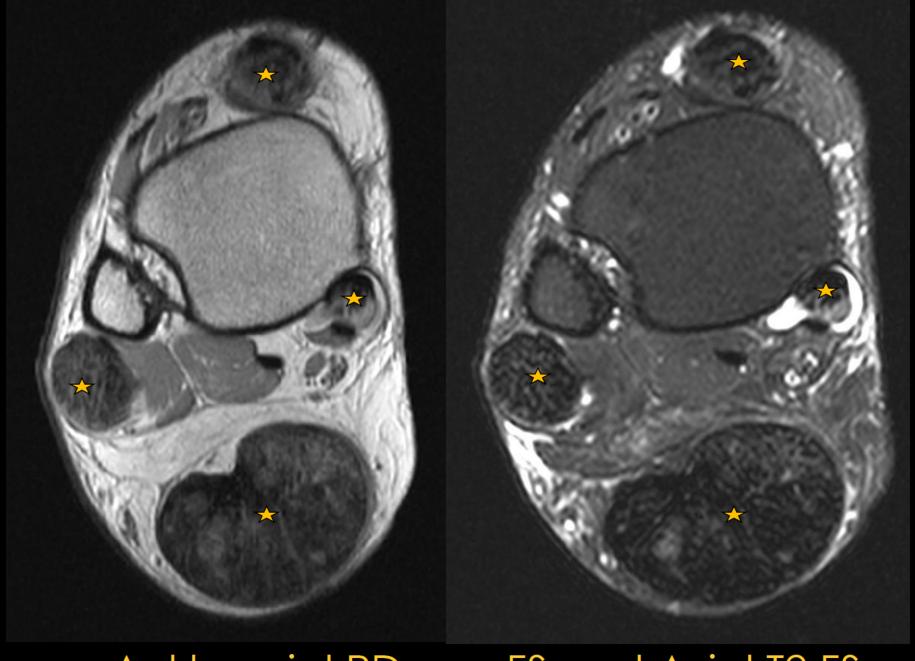
34-year-old female with worsening bilateral hand numbness and tingling, and bilateral throbbing ankle and heel pain over several years



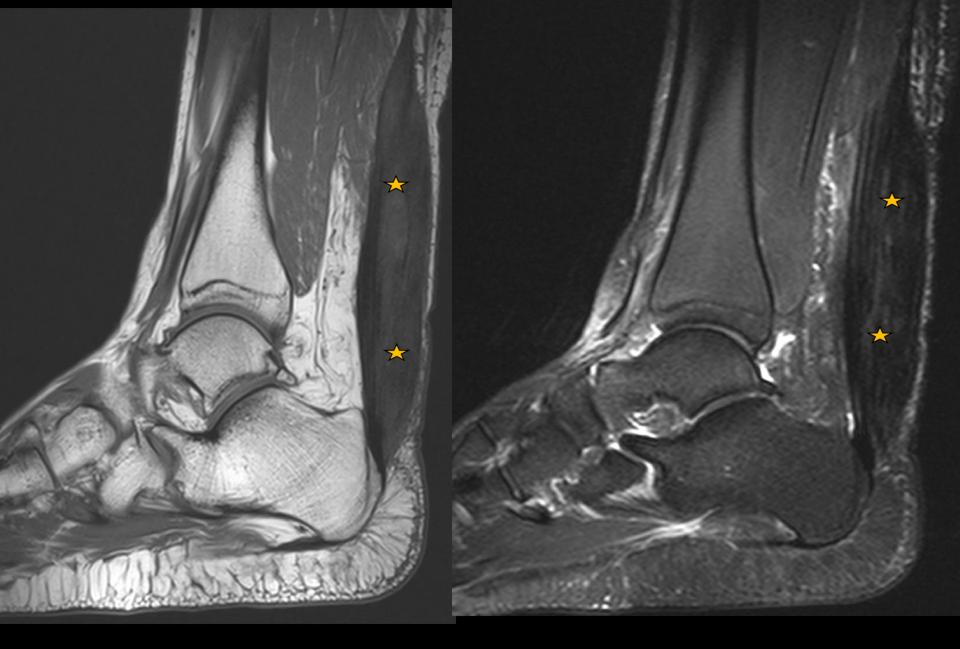




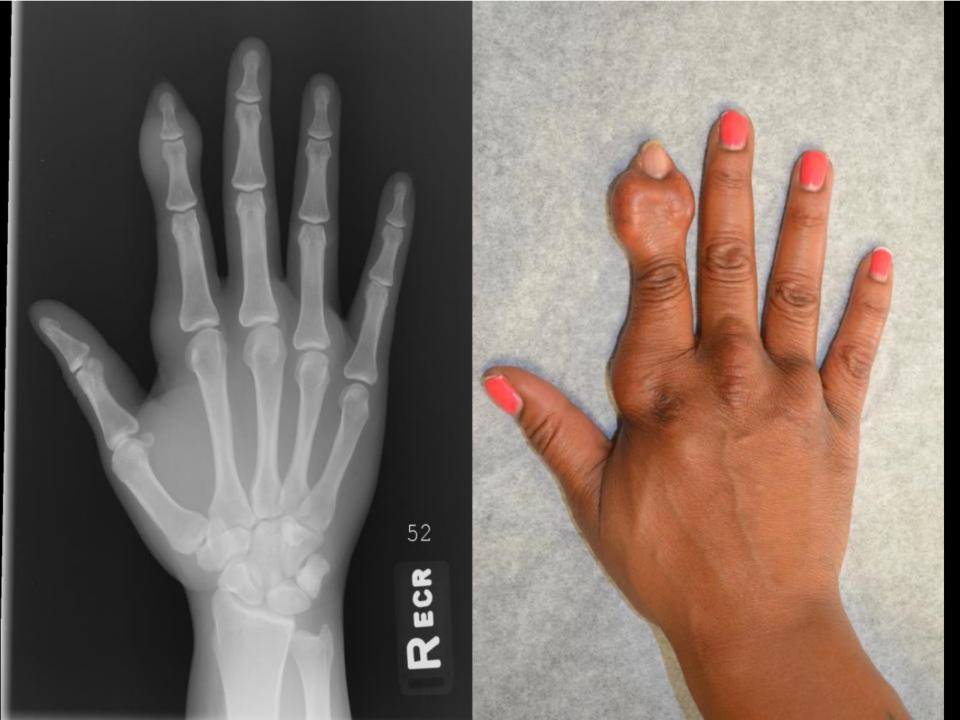
Ankle axial PD non FS and Axial T2 FS



Ankle axial PD non FS and Axial T2 FS

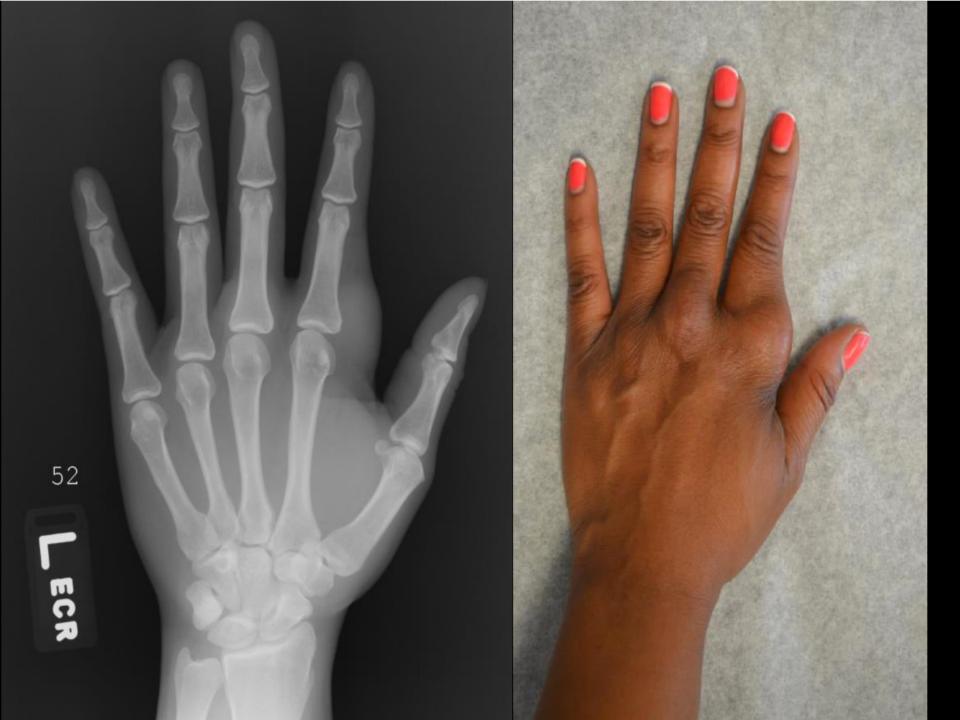


Sagittal T1 non FS and T2 FS

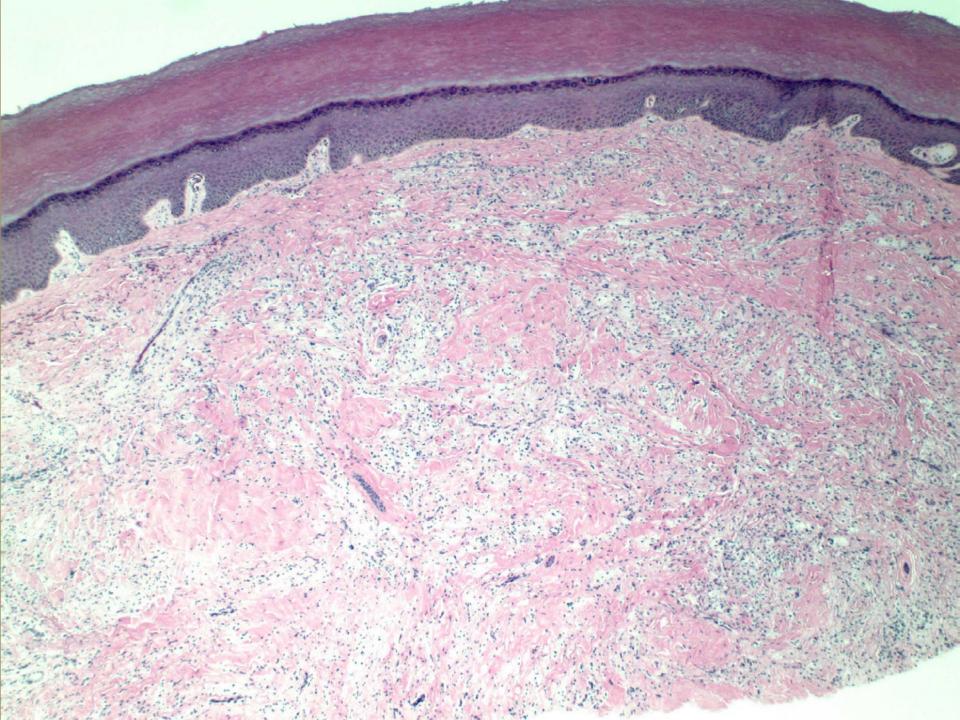


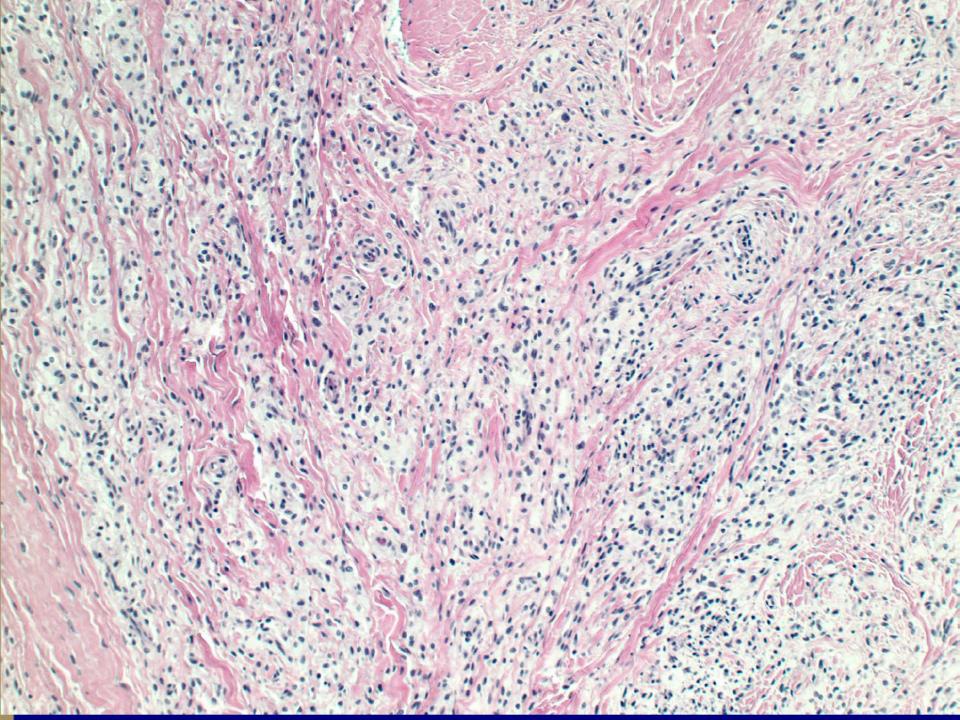


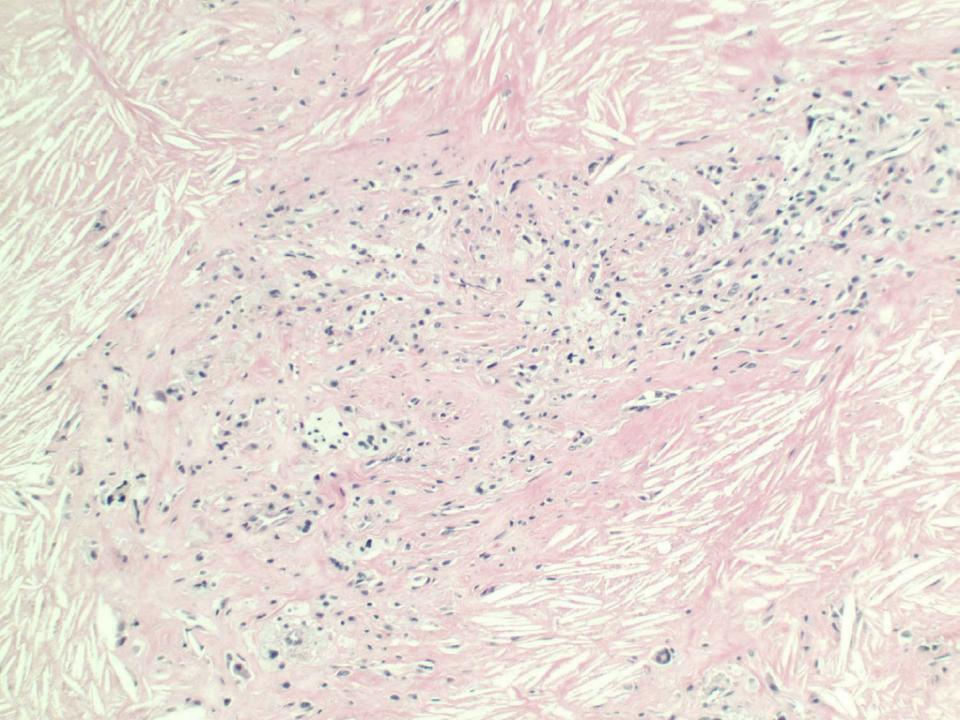


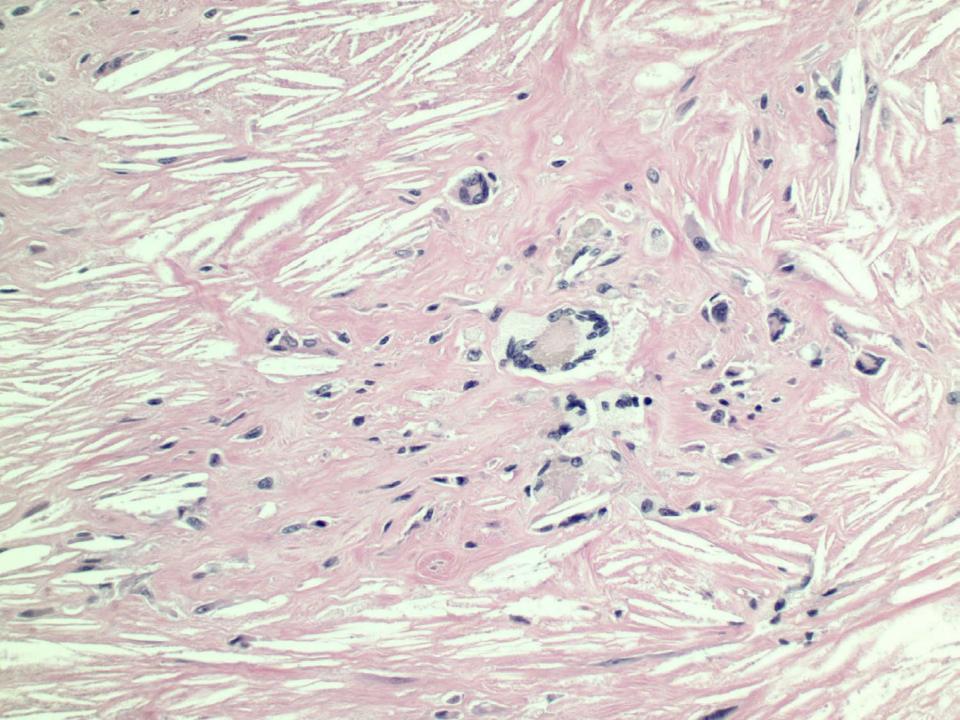












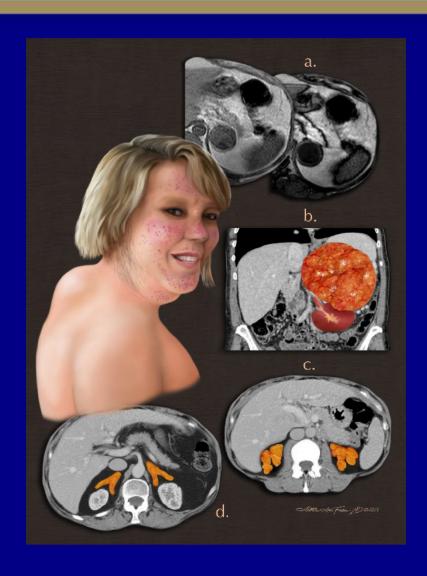


Xanthomatosis

Dr. Devrim Ersahin Yale New Haven Hospital New Haven, Connecticut



Genitourinary Best Case

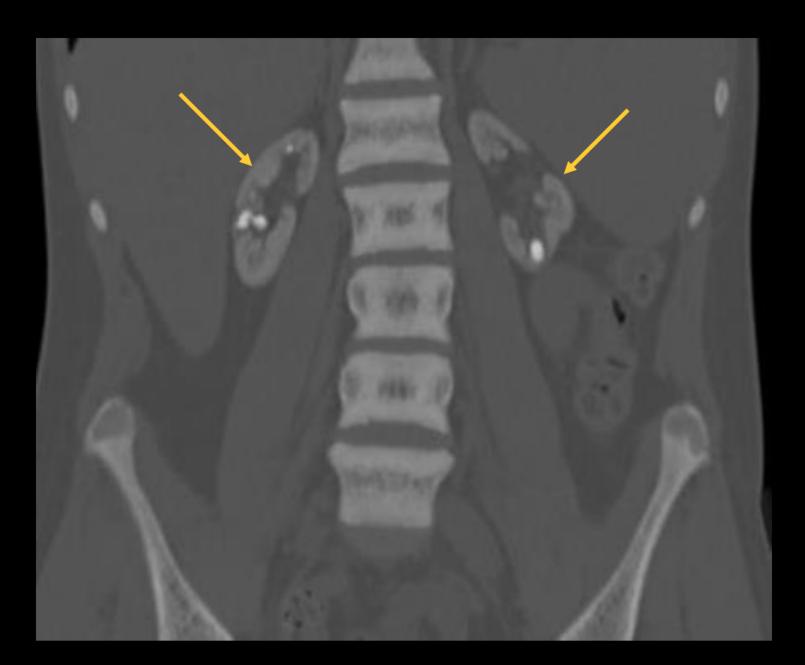


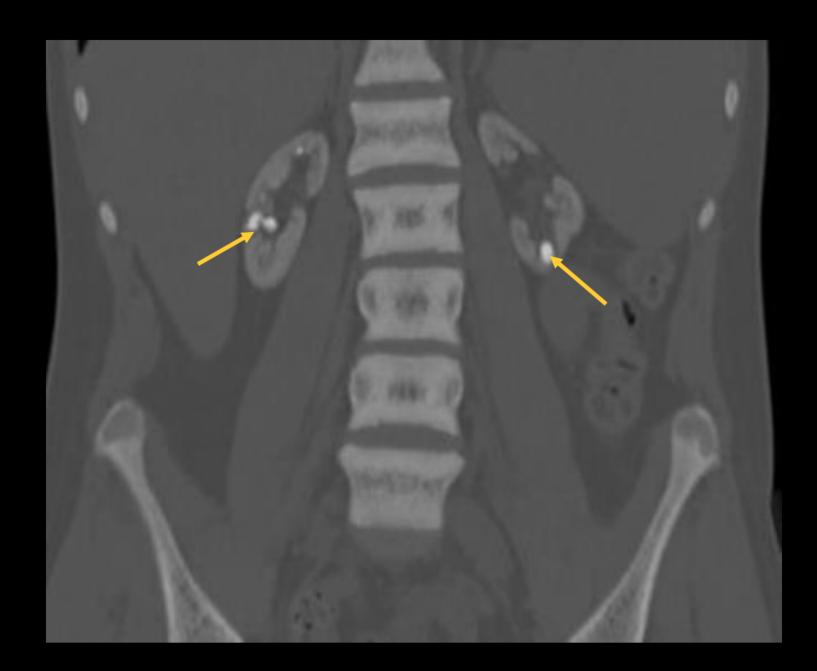


Clinical Information

Withheld.....

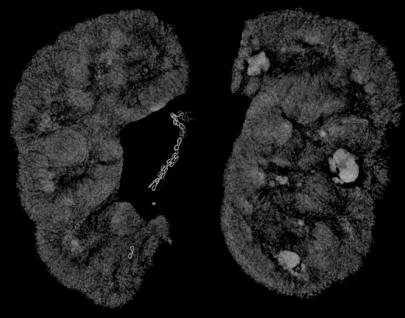




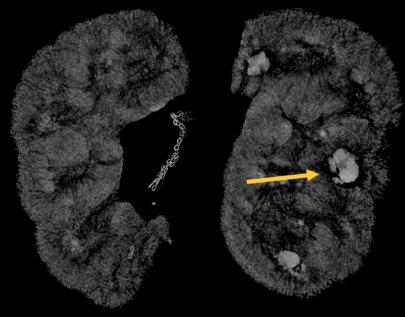




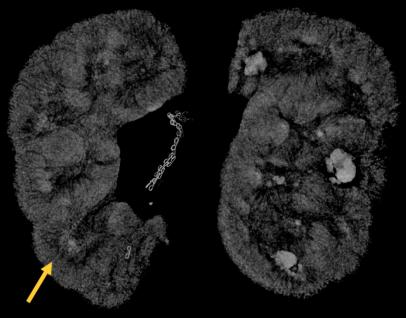


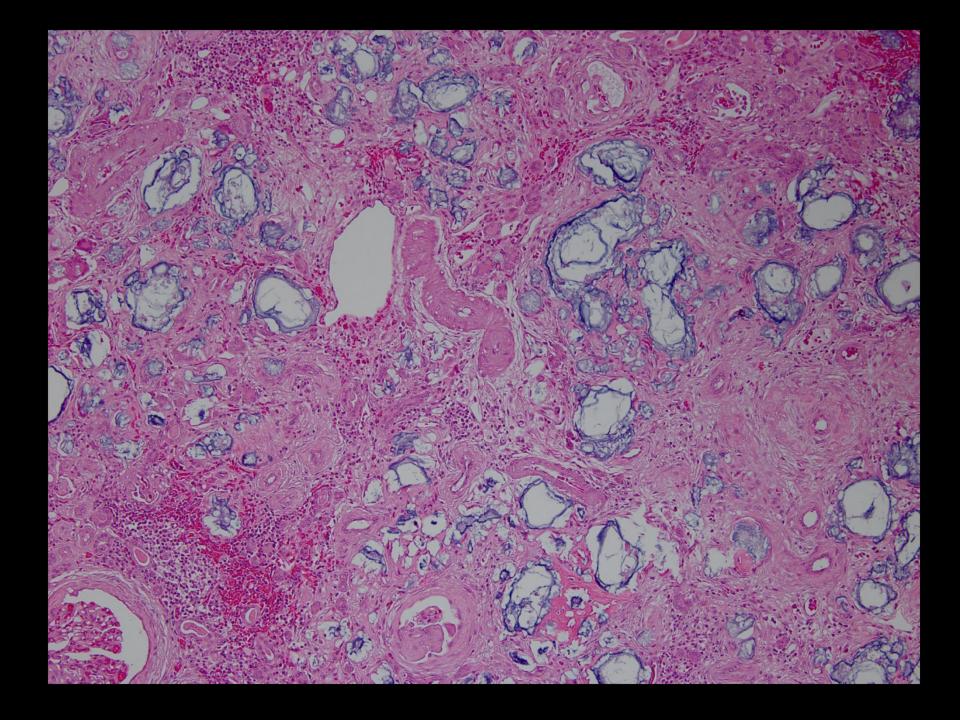


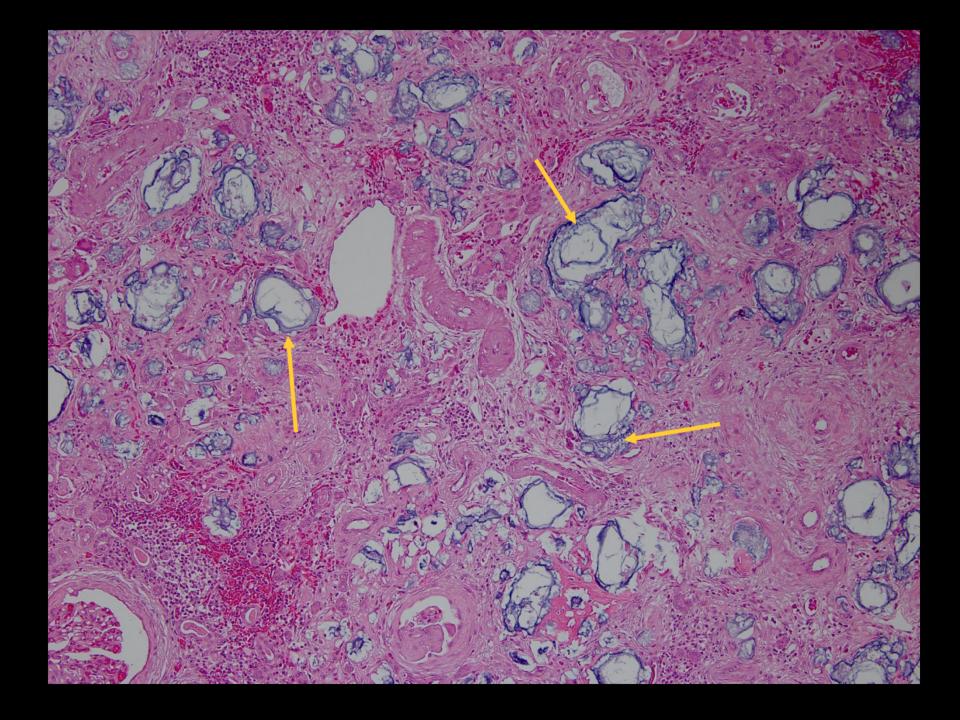


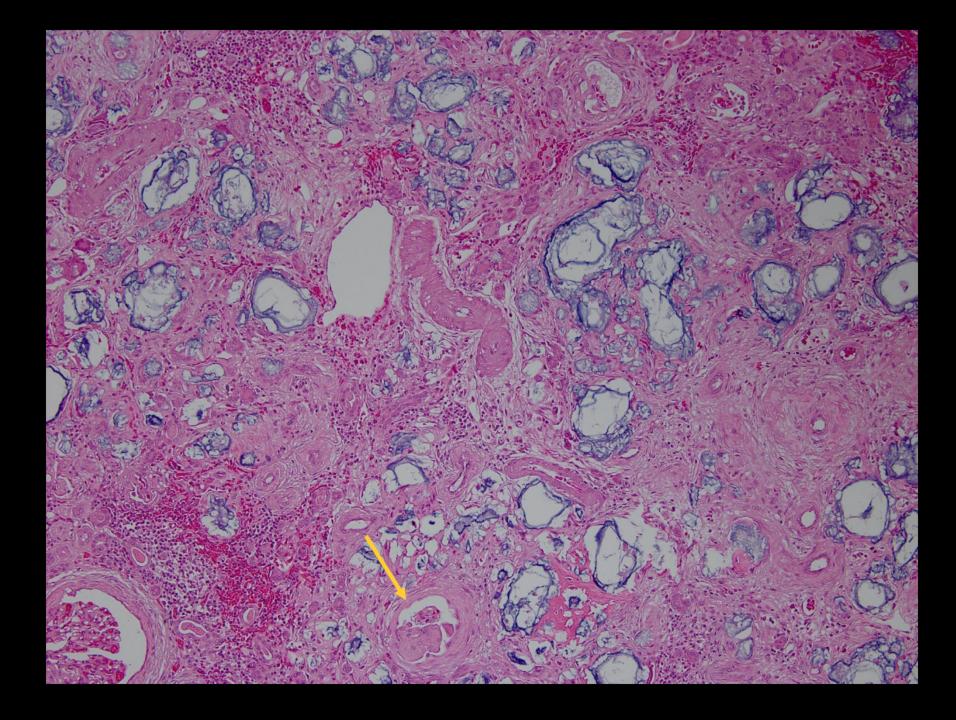


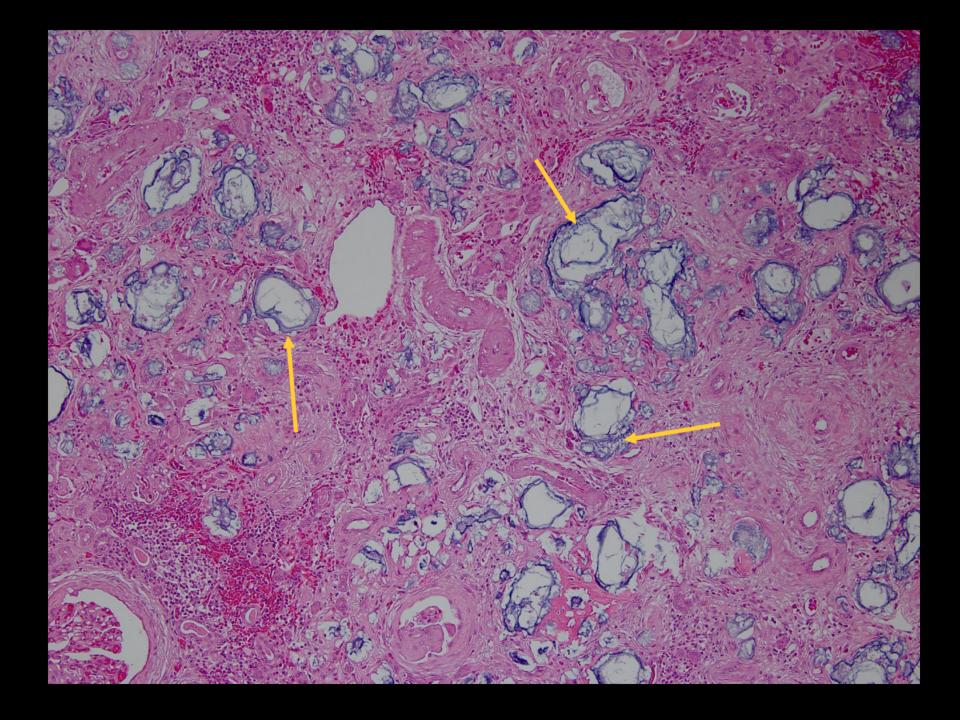














Primary Hyperoxaluria Type 1

Matthew Quirk, MD
UCLA Medical Center
Los Angeles, CA



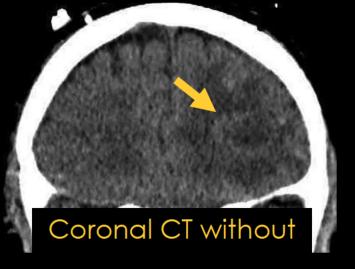
Neuroradiology Best Case

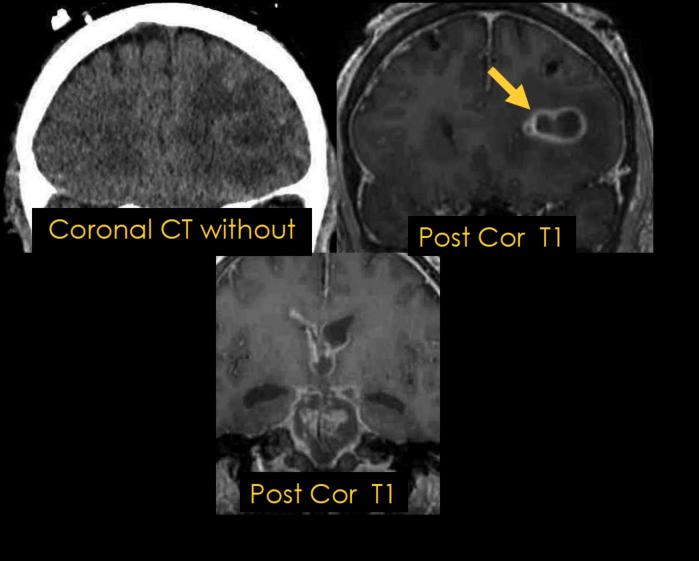


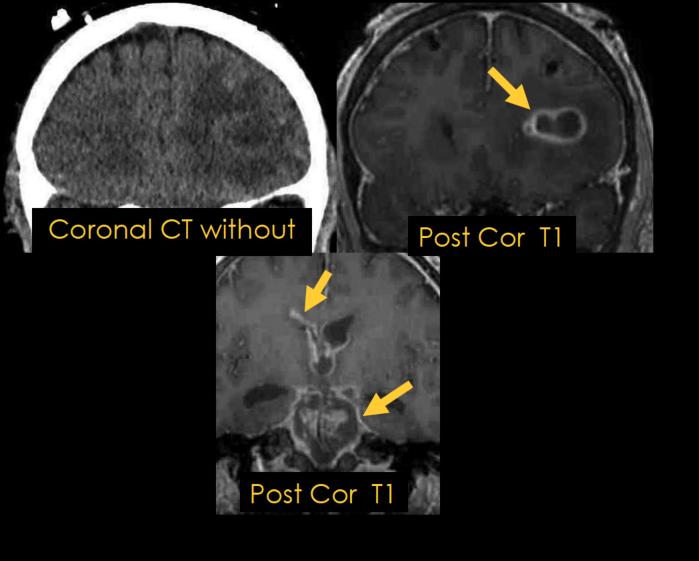


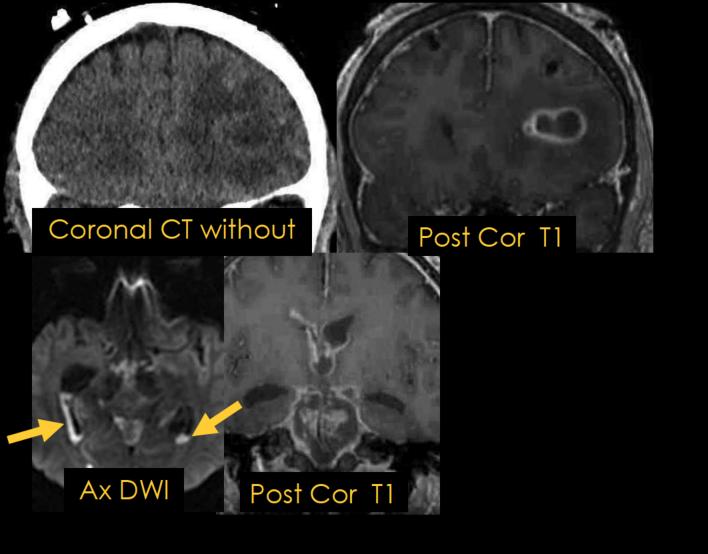
History

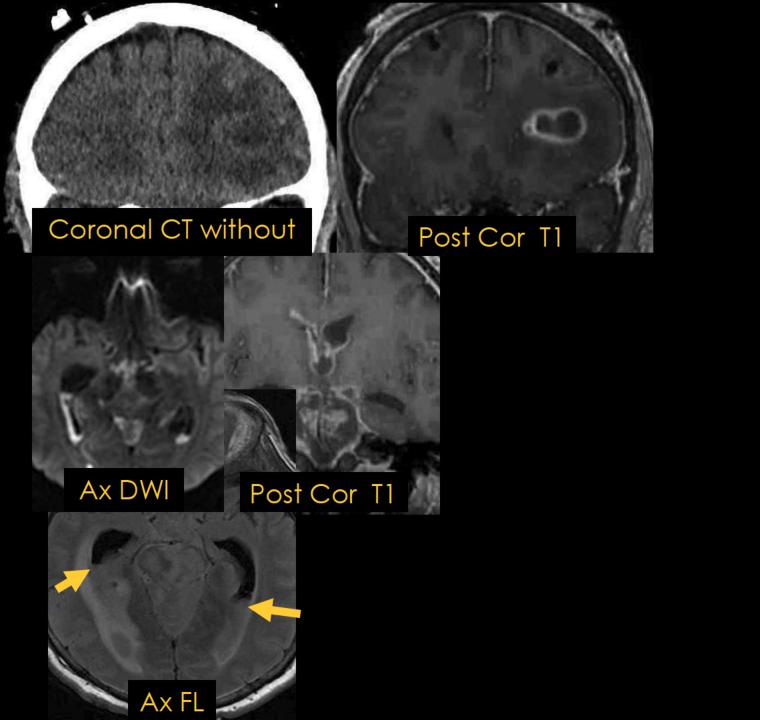
57-year-old male transferred from outside facility by sister with progressive confusion and 1-day history of fever. Physical exam shows non-reactive pupils, no brainstem reflexes and no motor activity

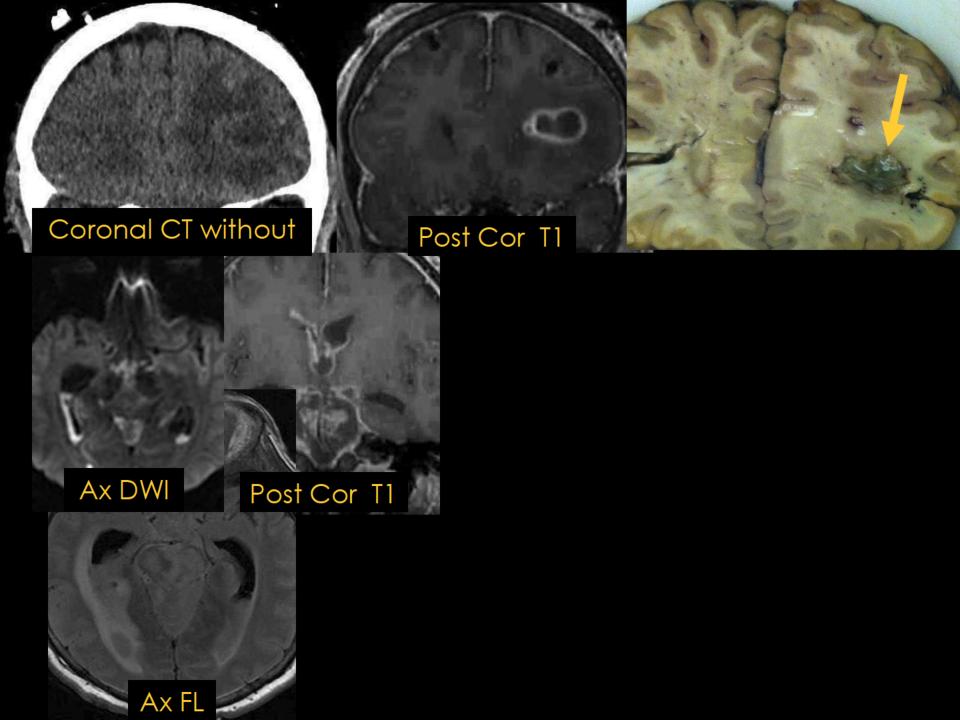


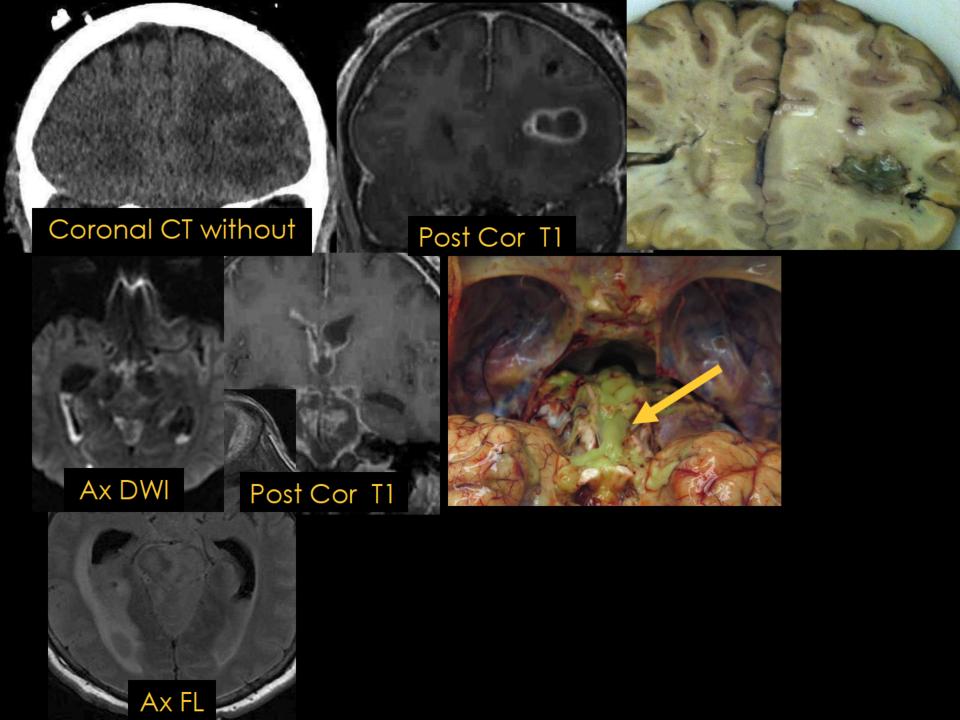


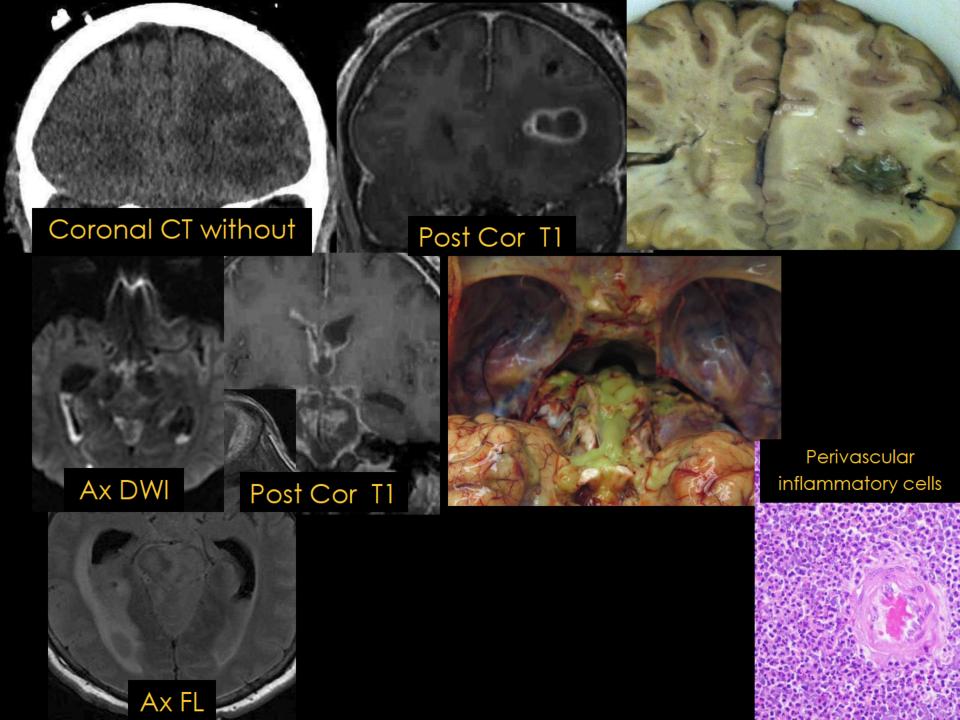












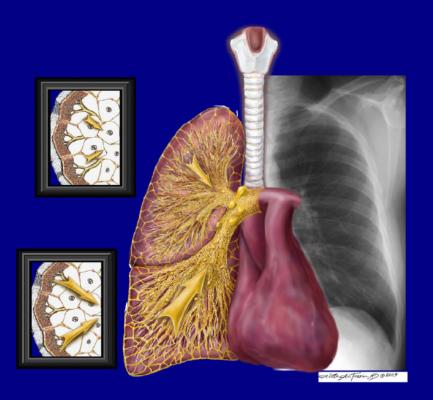


Diffuse Meningitis, Abscess, and Ventriculitis (with intraventricular rupture and fluid-debris level)

Abdelkader Mahammedi, M.D.
University of Toledo
Toledo, Ohio



Pulmonary and Mediastinal Best Case

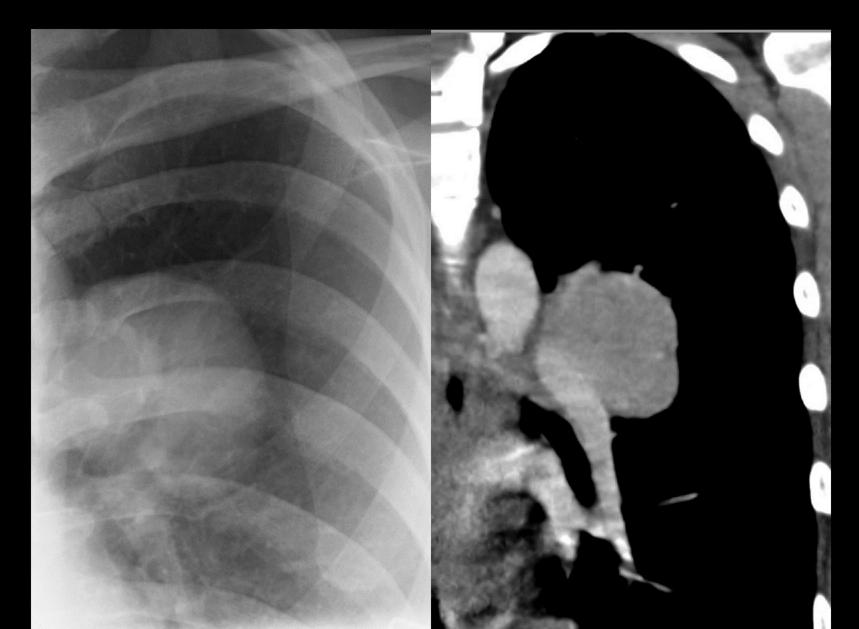




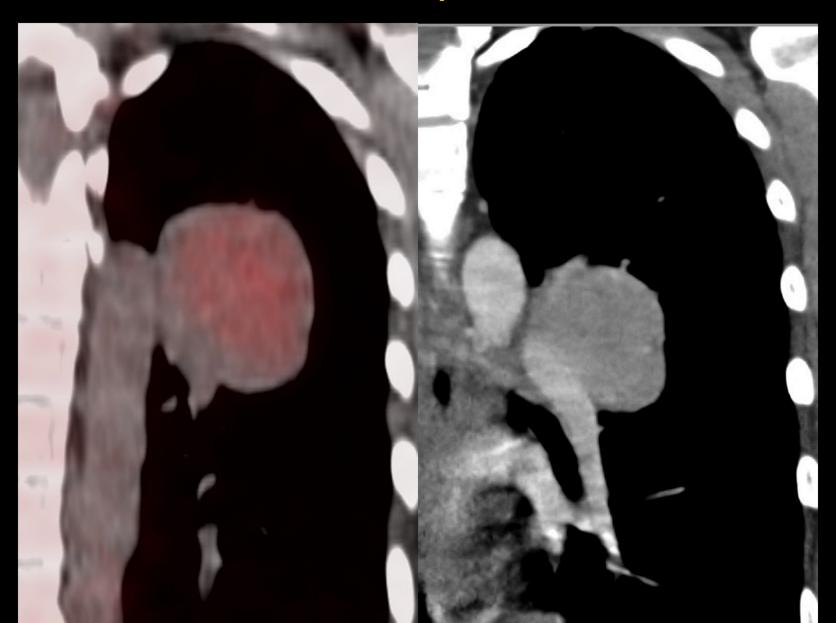
History

30 year old female with left shoulder pain found to have a left hilar mass on a shoulder study

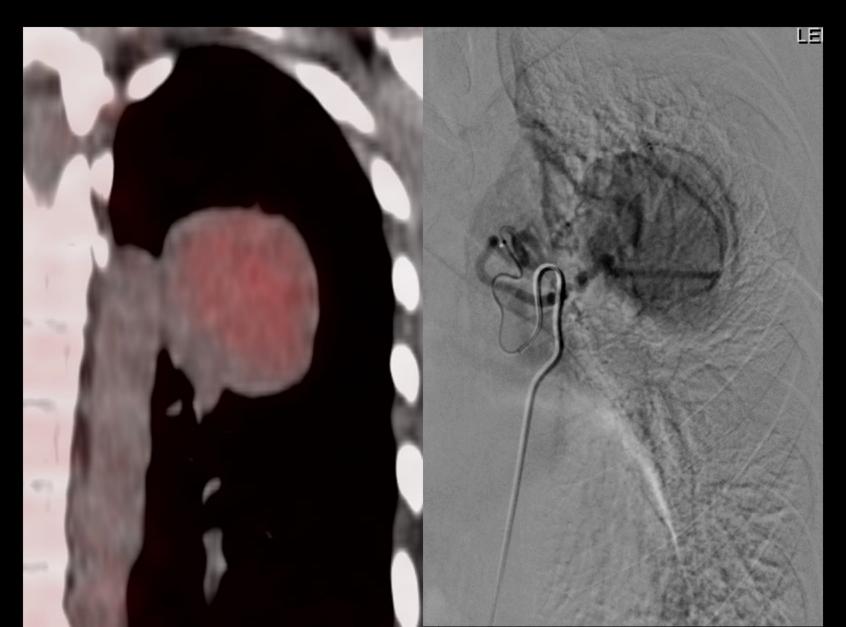
Plain film/CT



PET/CT



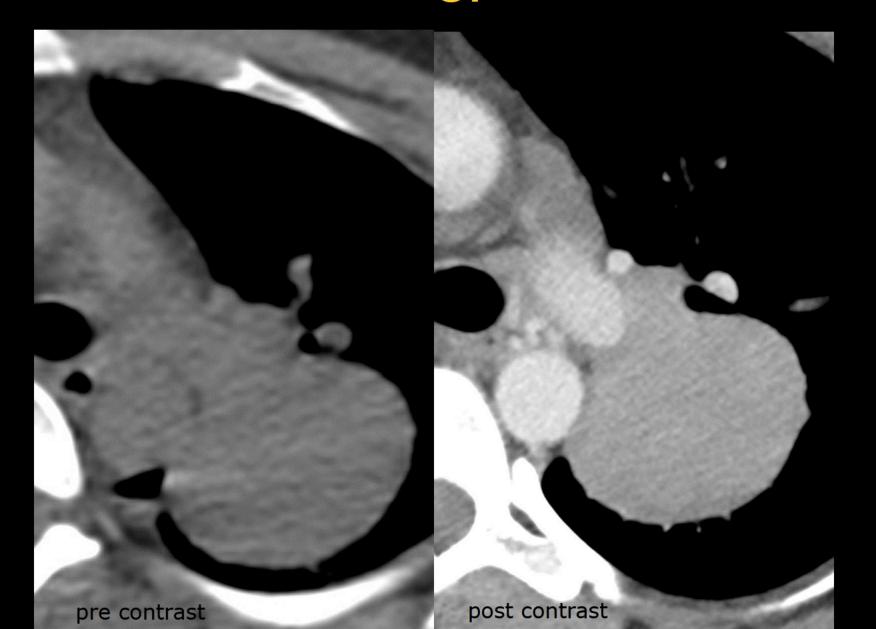
Bronchial artery supply



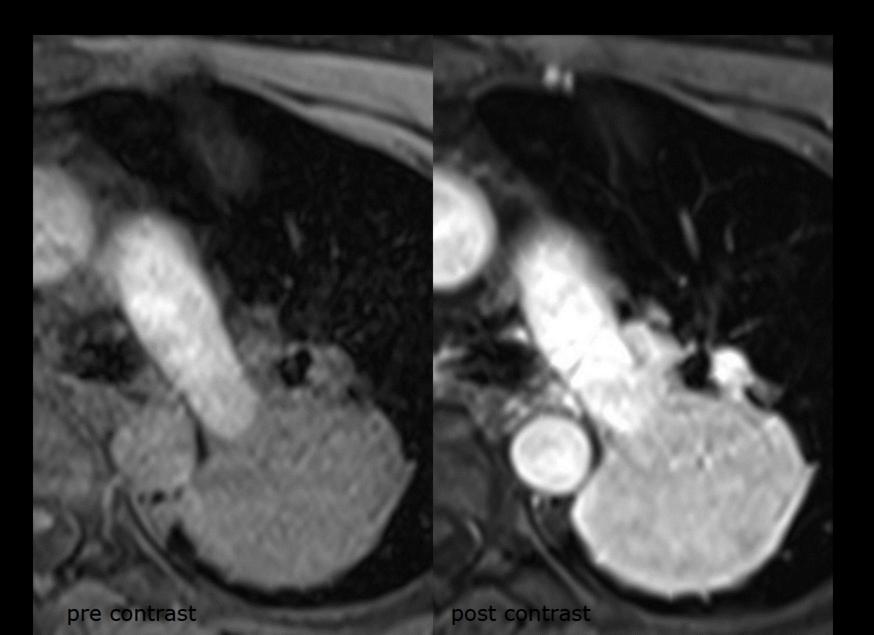
3D reconstruction



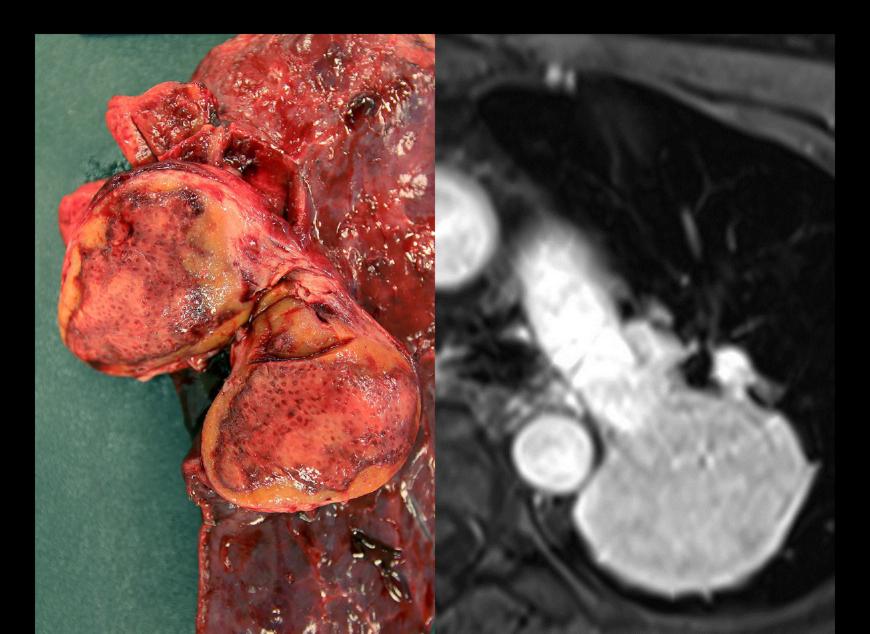
CT



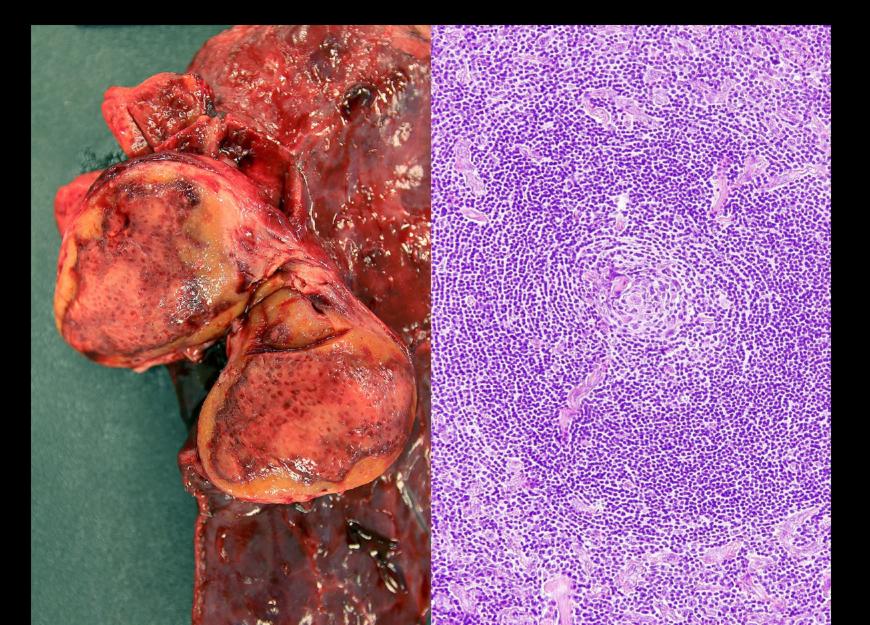
MR



Gross



Typical histology





Castleman's Disease

Gregory Bonci, MD
Brigham & Women's Hospital
Boston, MA



Cardiovascular Best Case



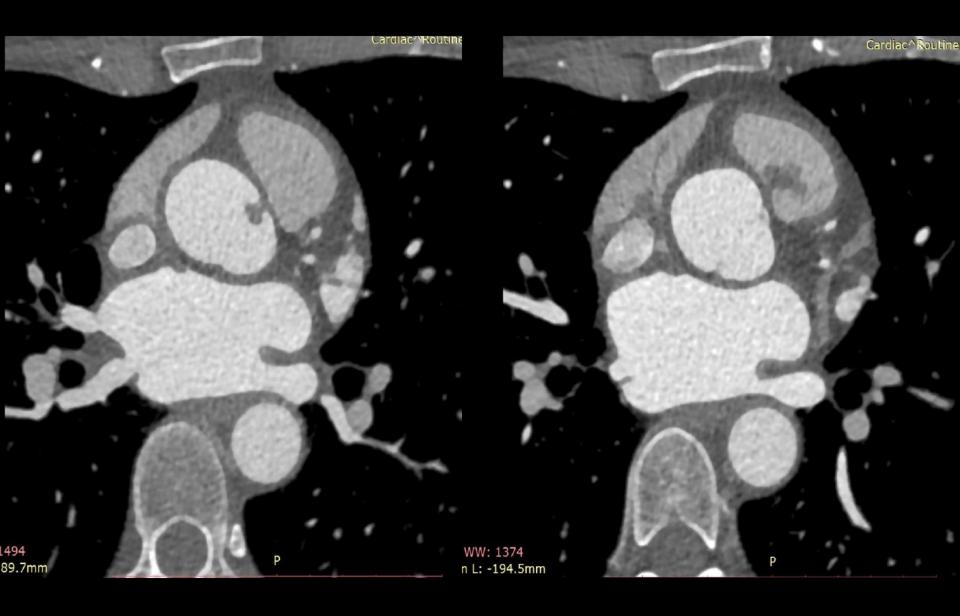


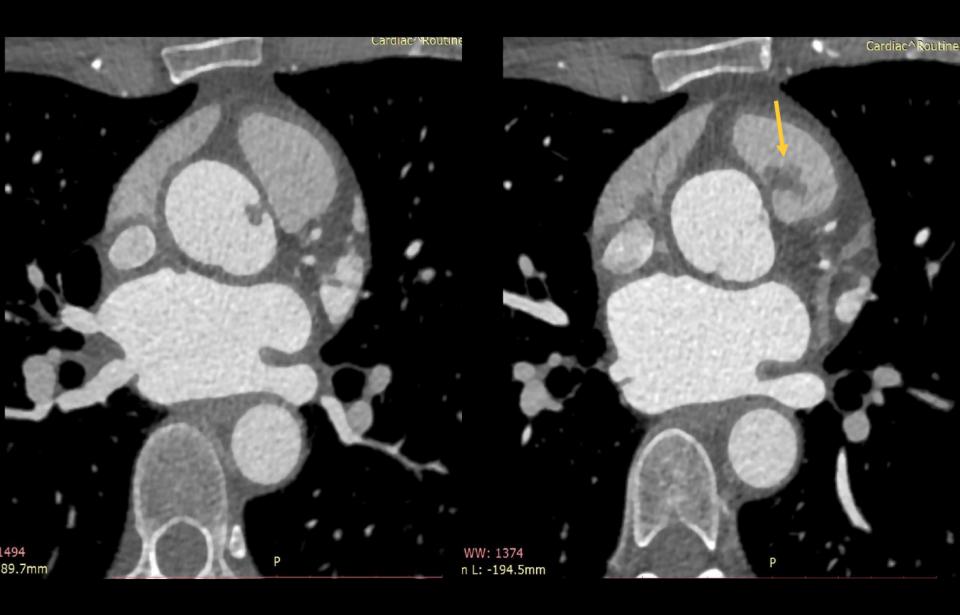
Clinical Information

48 year old female presents to ER with a pre-syncopal episode

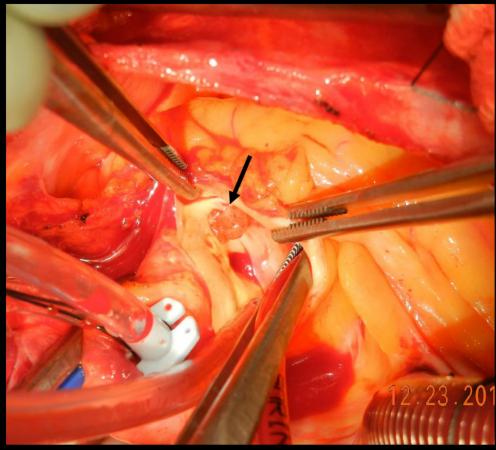




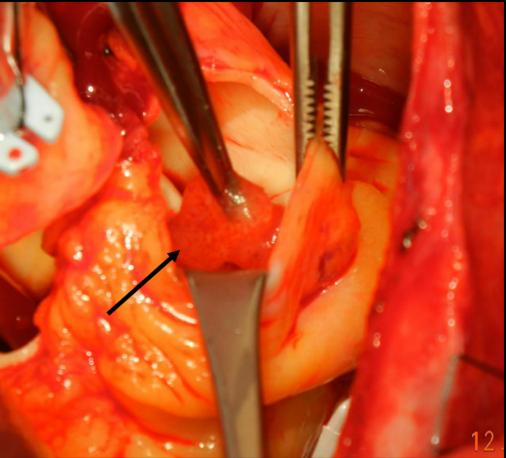


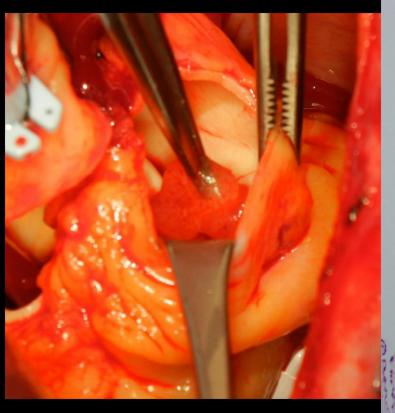


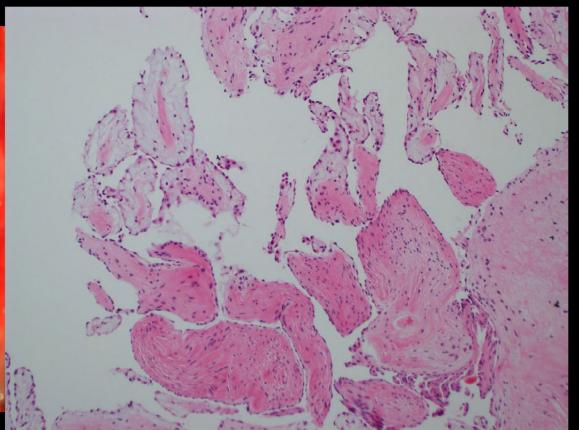


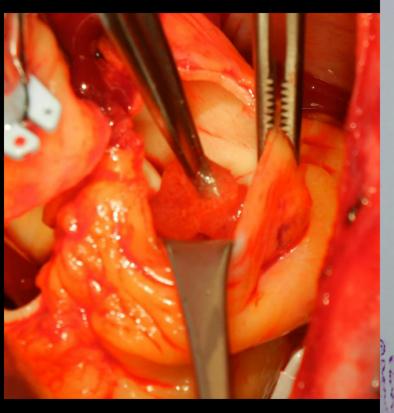


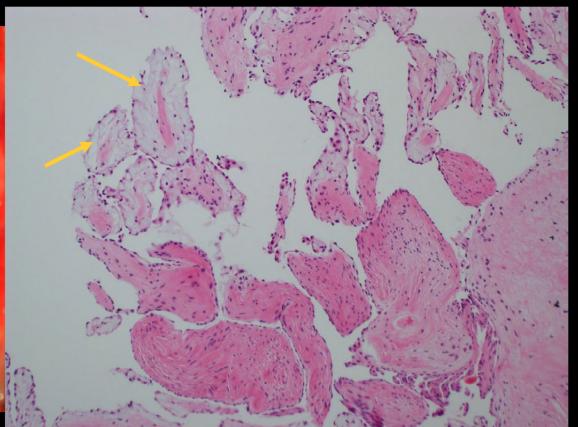


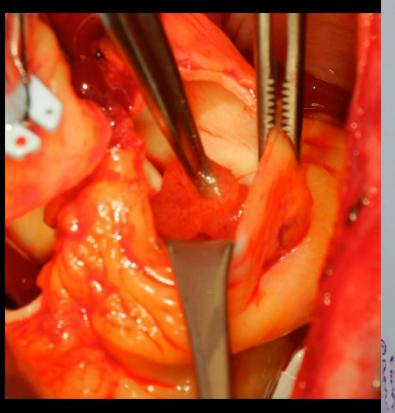


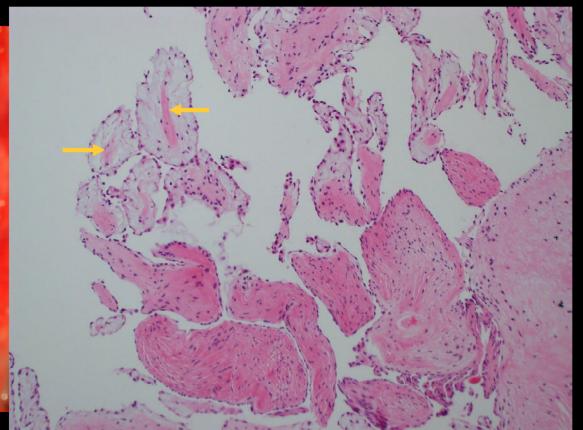












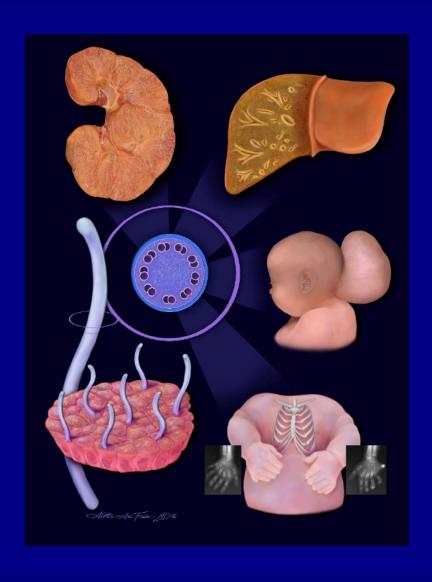


Papillary Fibroelastomas

Yanki Tumer, MD
Northwestern University
Chicago, Illinois



Pediatric Best Case



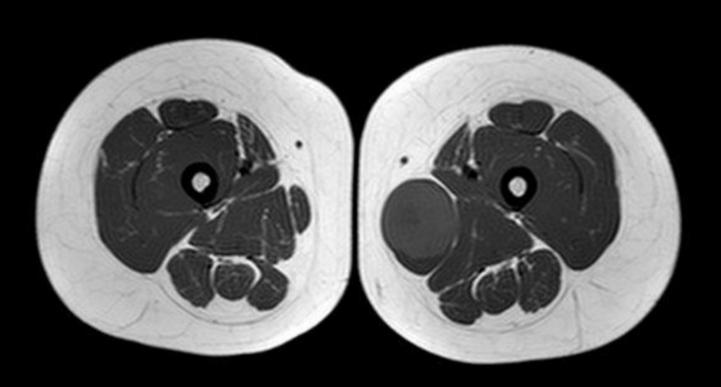


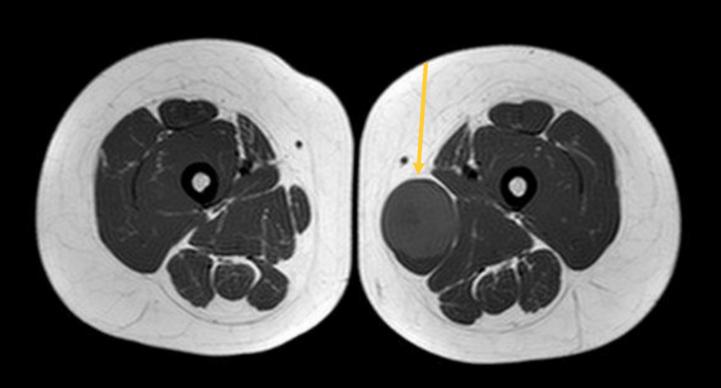
Clinical Information

9-year-old female who presented with a painless soft-tissue mass of left medial proximal thigh noticed suddenly by the patient herself 2 weeks prior





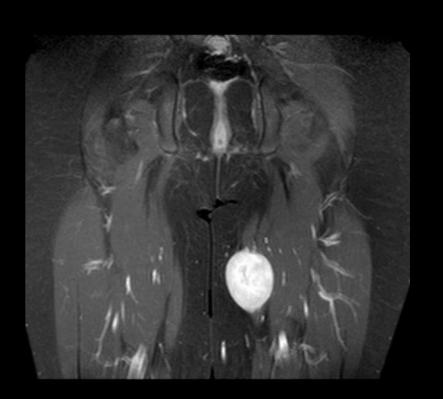


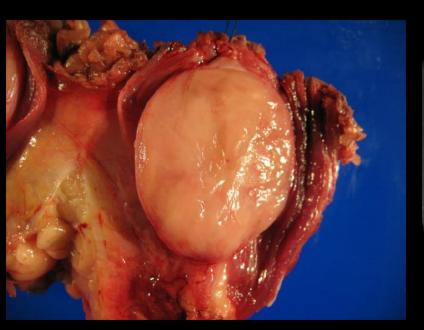


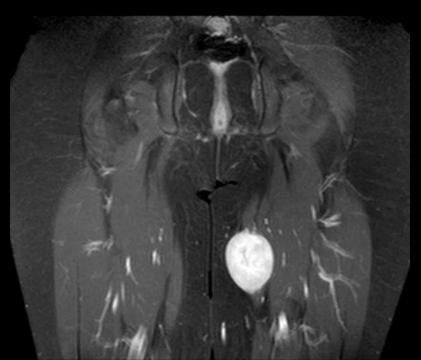












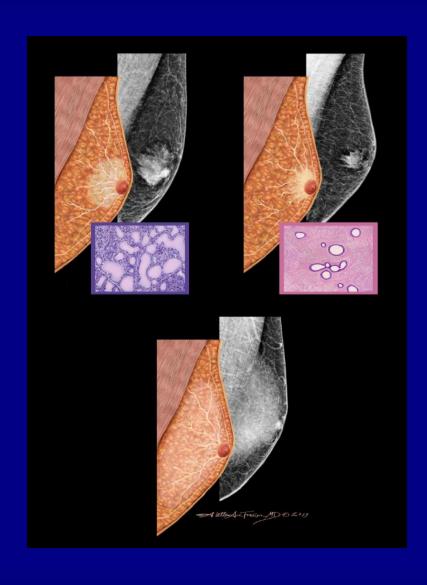


Inflammatory Myofibroblastic Tumor

Mujtaba Mohammed, MD
SUNY Upstate
Syracuse, New York



Breast Best Case





Clinical Information

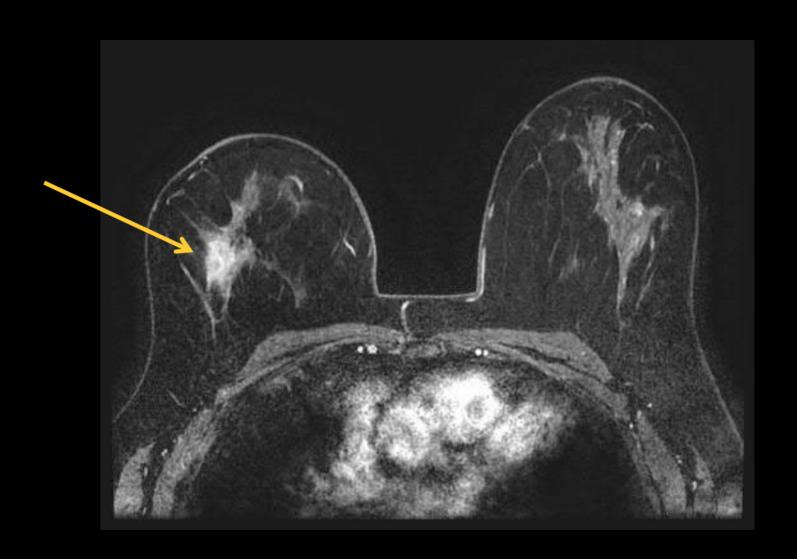
40 yo female with palpable lump in the right breast.

Prior right lumpectomy for invasive ductal carcinoma 10 years ago treated with chemotherapy and radiation therapy.

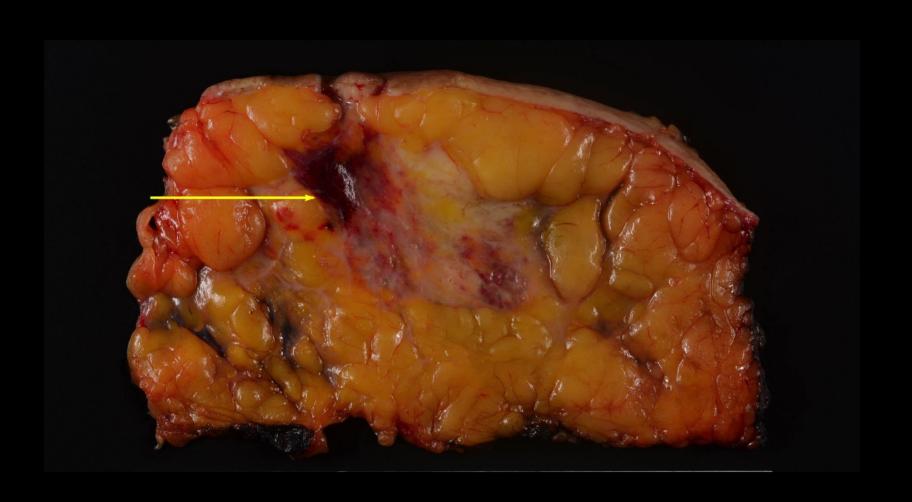
Breast MRI



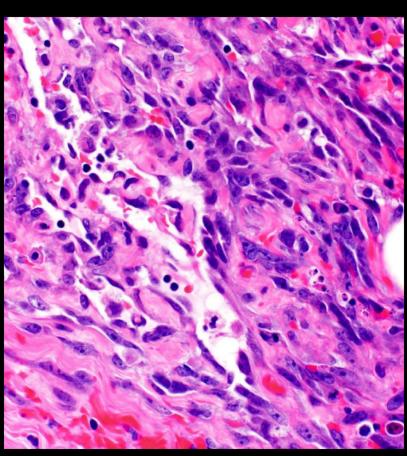
Breast MRI



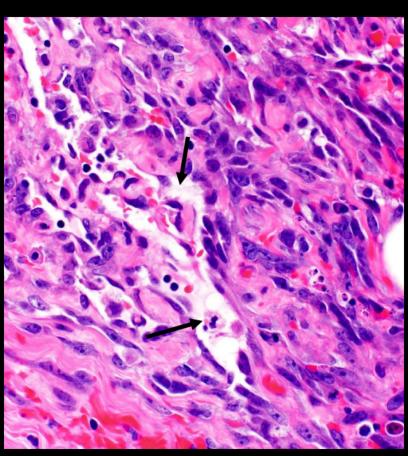
Gross



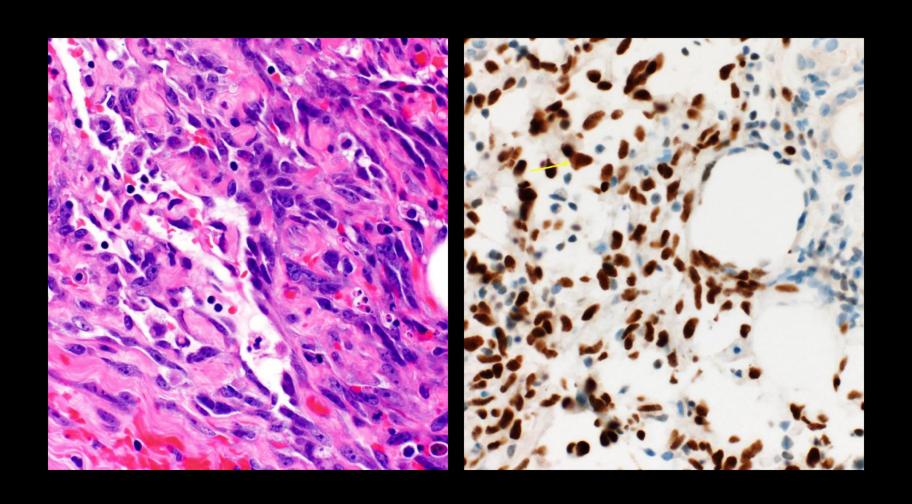
Histology



Histology



Histology





Angiosarcoma

Chris Gu, MD

Mayo Medical Center

Rochester, MI



Many thanks to all of you for submitting such great cases!

From the staff of the American Institute for Radiologic Pathology