

BEST CASES OF THE AIRP

September 26 – October 14, 2011

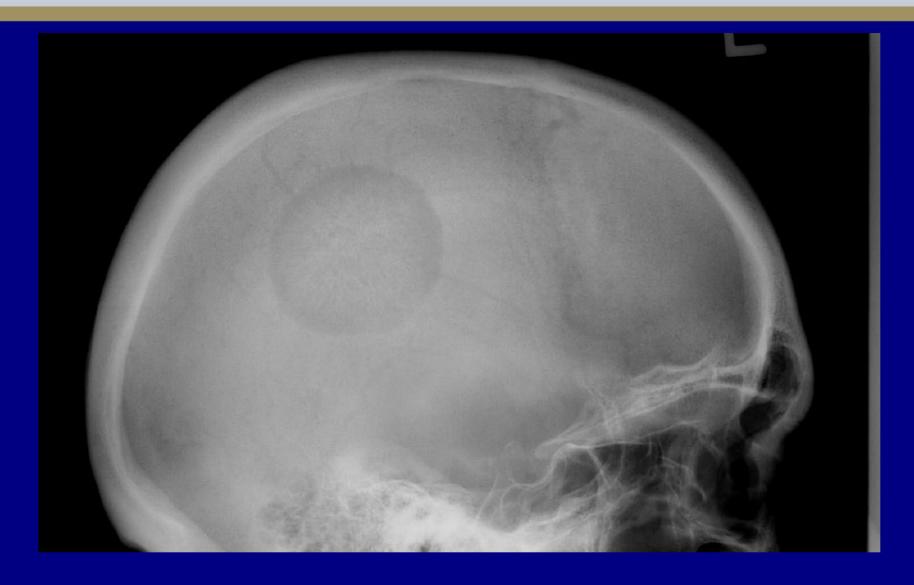


Musculoskeletal Best Case

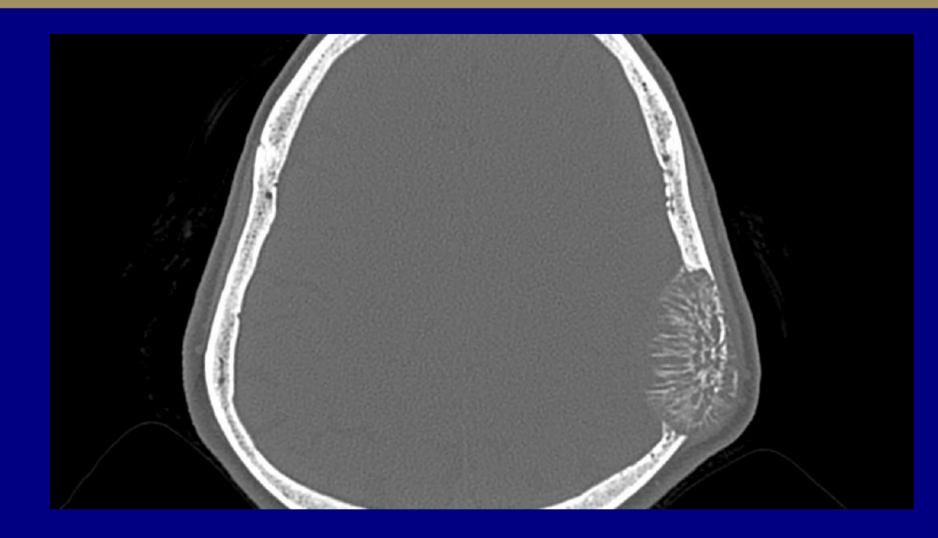


59-year-old Caucasian female with a tender, slowly enlarging mass over the left parietal region

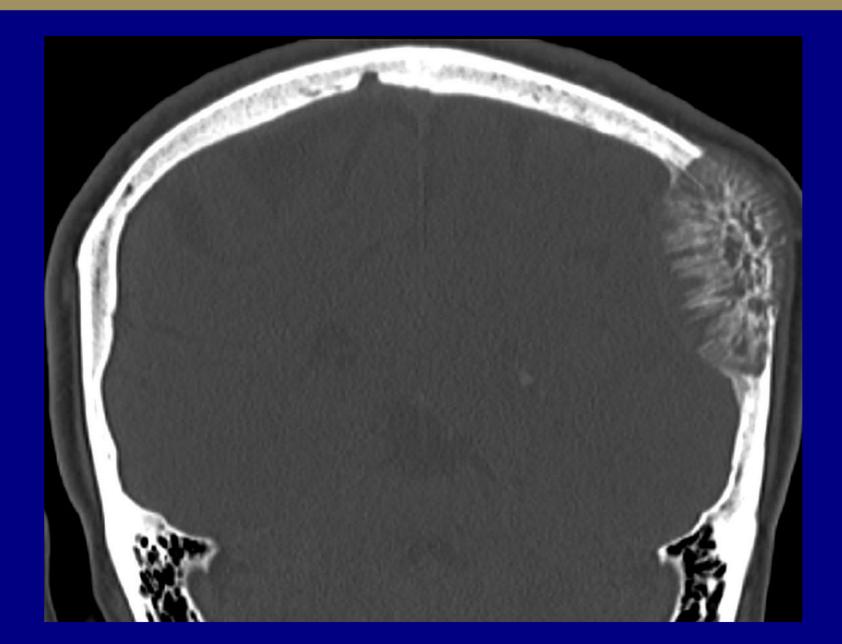




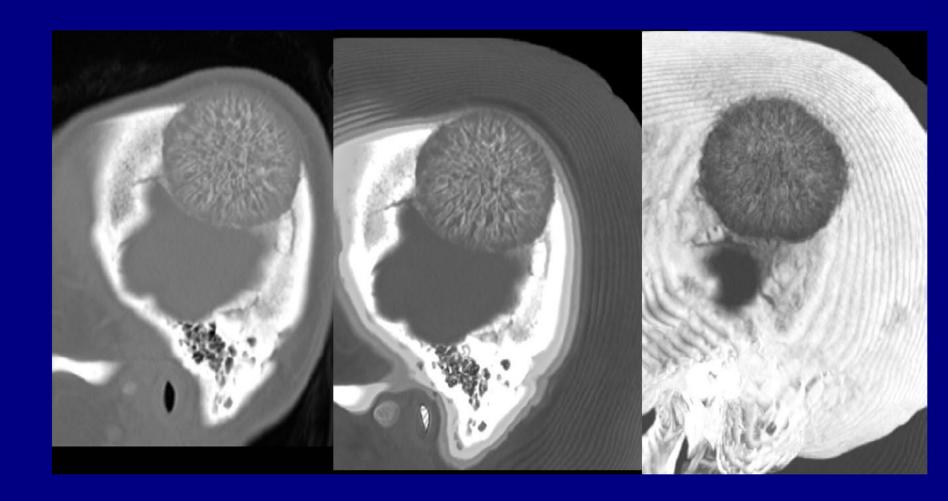




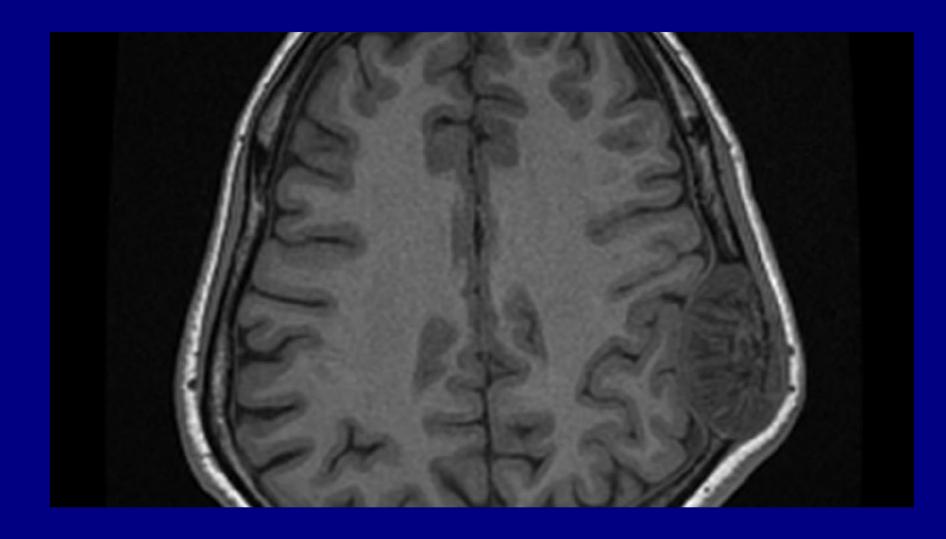




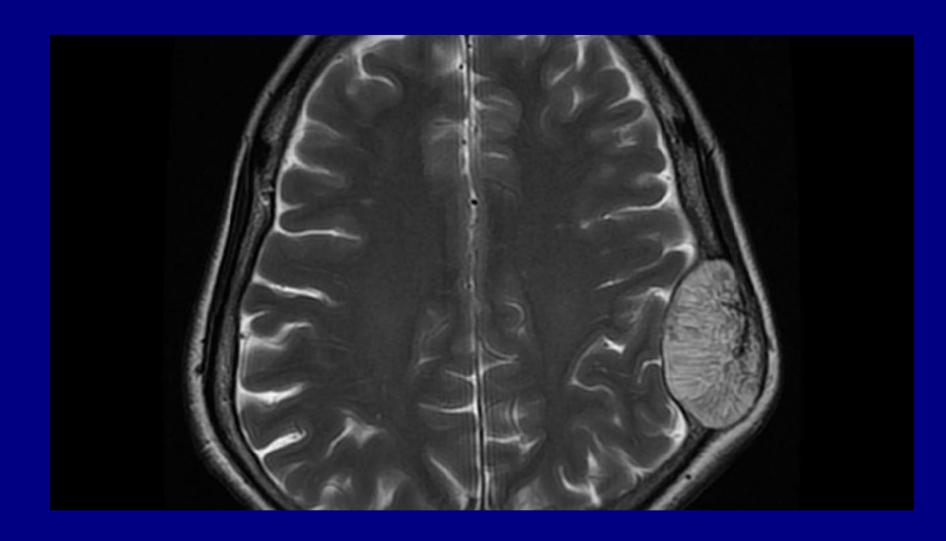




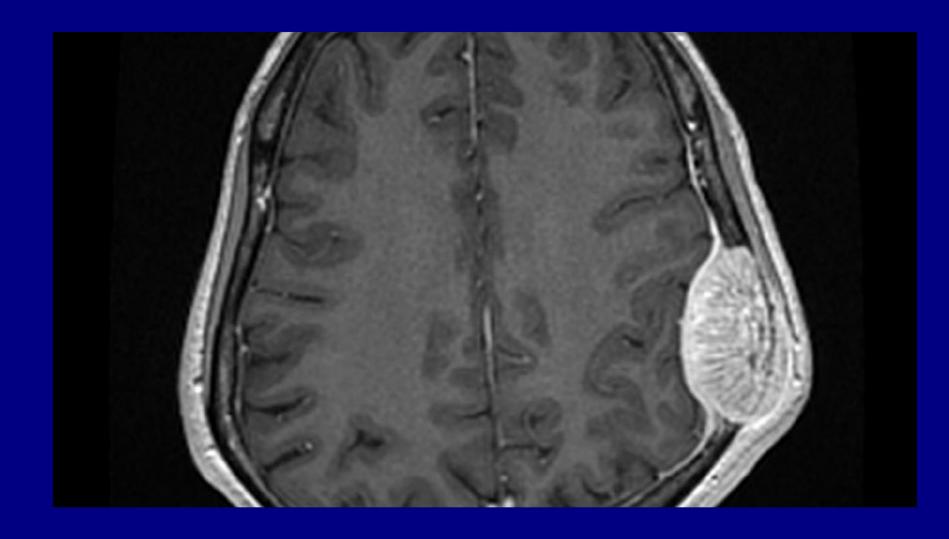




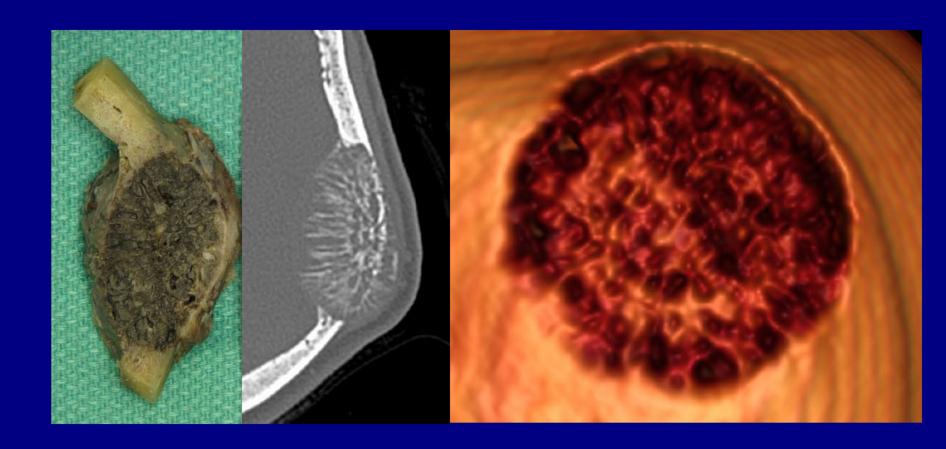




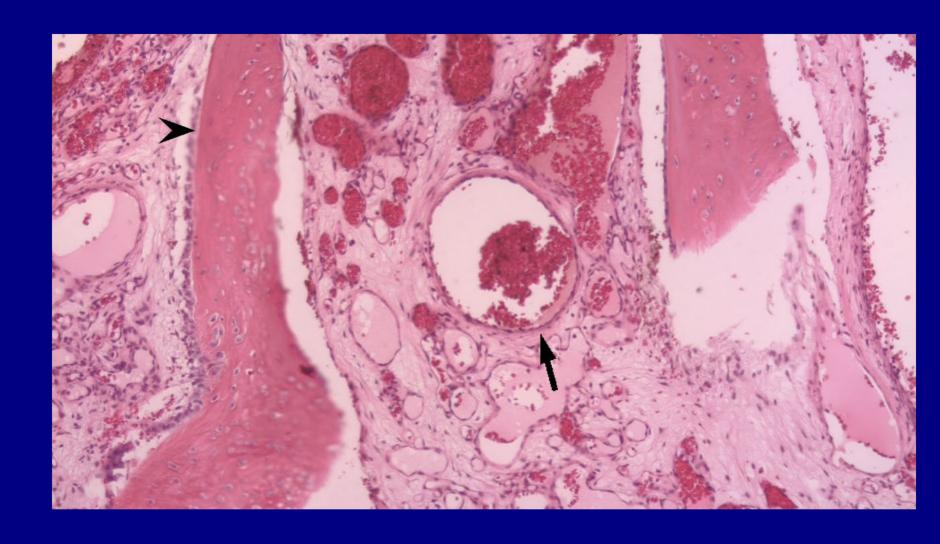




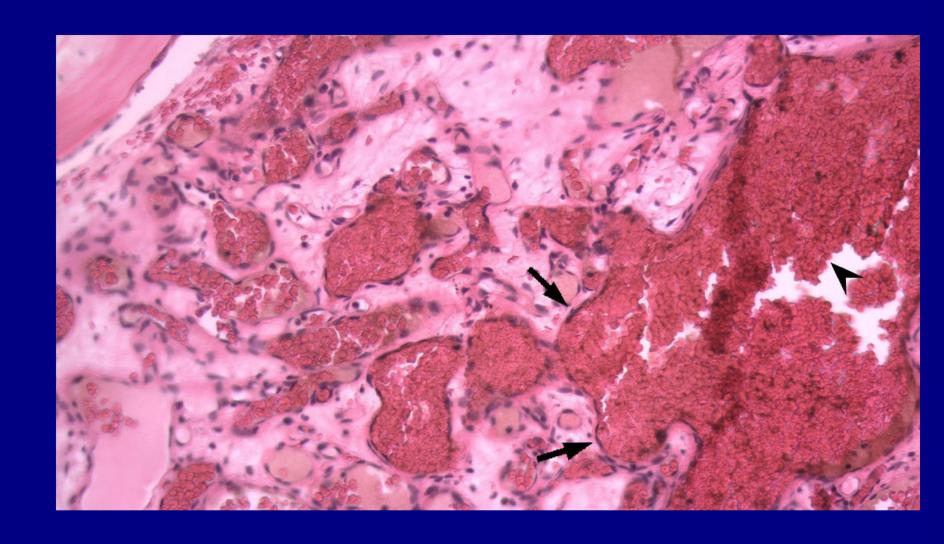














Intraosseous Hemangioma, Cavernous Subtype

Ah-Ling Cheng, MD Foothills Medical Centre Calgary, Alberta, Canada



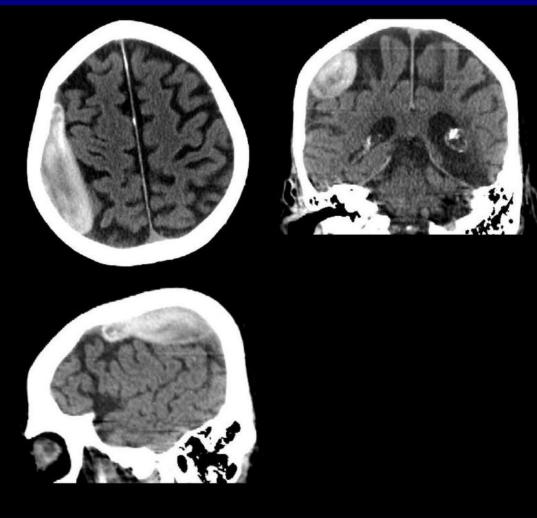
Neuroradiology Best Case



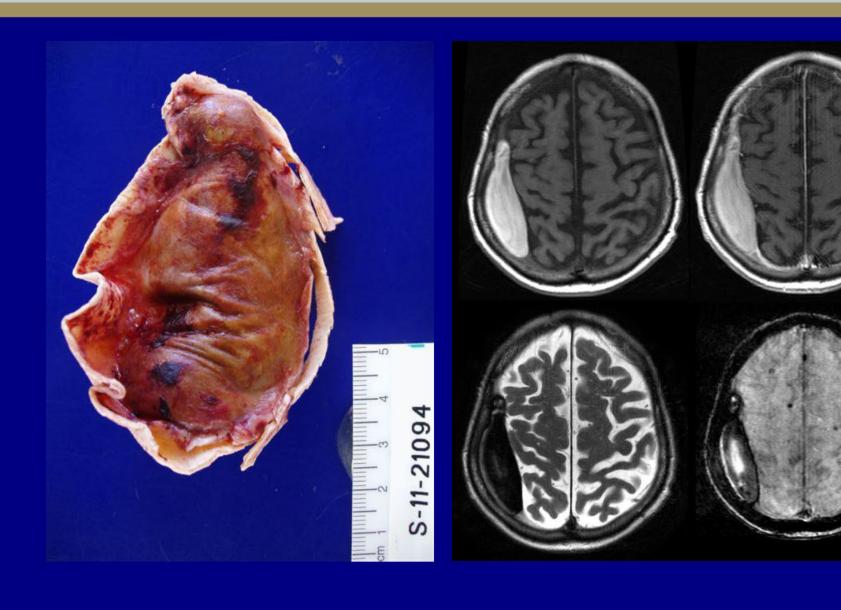
83-year-old male with history of known chronic atrial fibrillation for which he was anticoagulated with warfarin. Patient presented with c/o at least 2 weeks of increasing lightheadedness and weakness as well as gross hematuria and melena. On the morning of presentation, he had an episode of nausea and vomiting. While getting up from the toilet, he had a syncopal event and fell, striking his right side and back on the tub, associated with bowel and bladder incontinence.













Subdural Hematoma with Mature Subdural Membranes

Justin Lewis, MD

Dartmouth-Hitchcock Medical Center

Lebanon, NH



Genitourinary Best Case



58-year-old woman with history of type II diabetes mellitus presenting with nausea/vomiting and hematuria

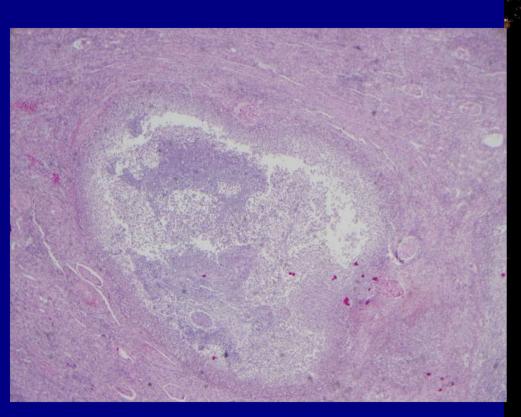


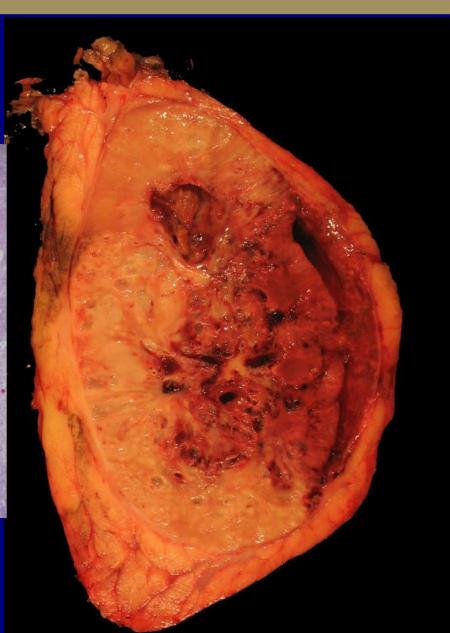












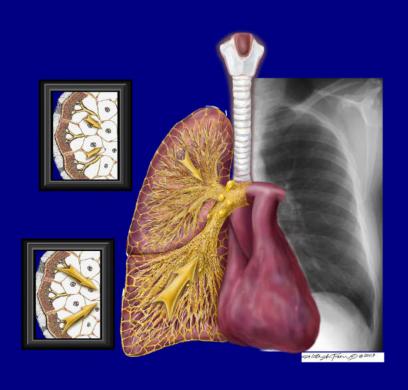


Emphysematous Pyelonephritis

Jonathan Opraseuth, MD
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Boston, MA

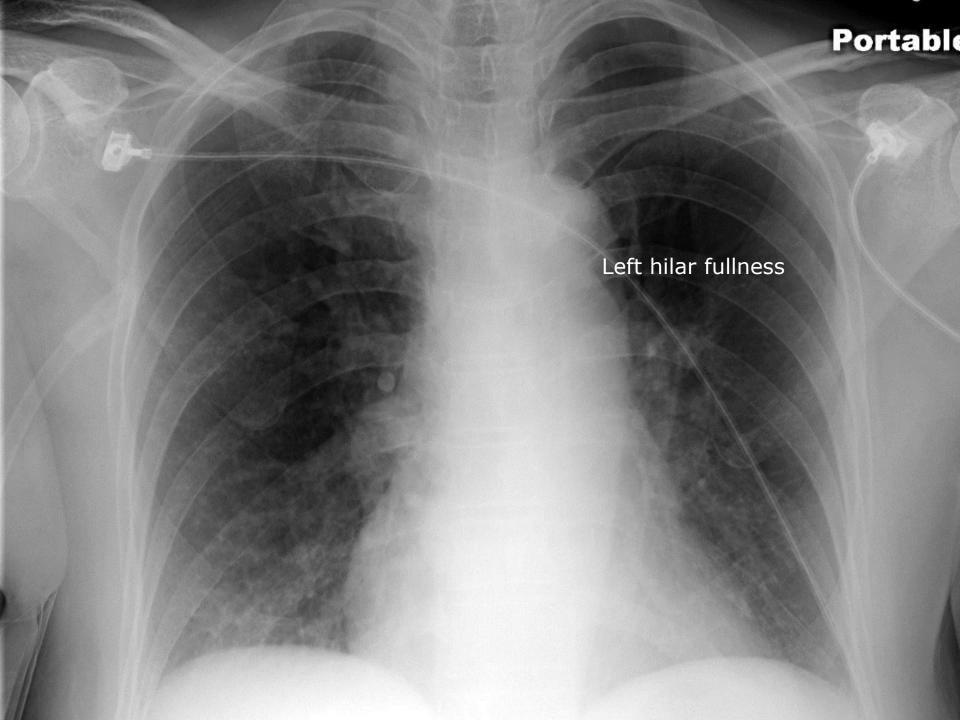


PULMONARY AND MEDIASTINAL IMAGING

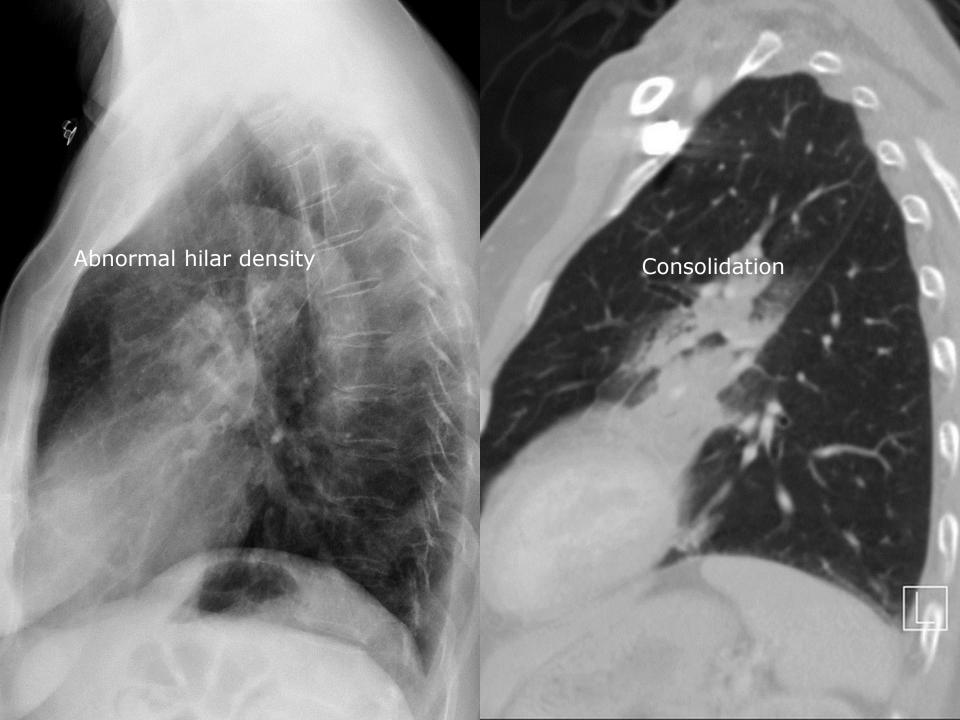


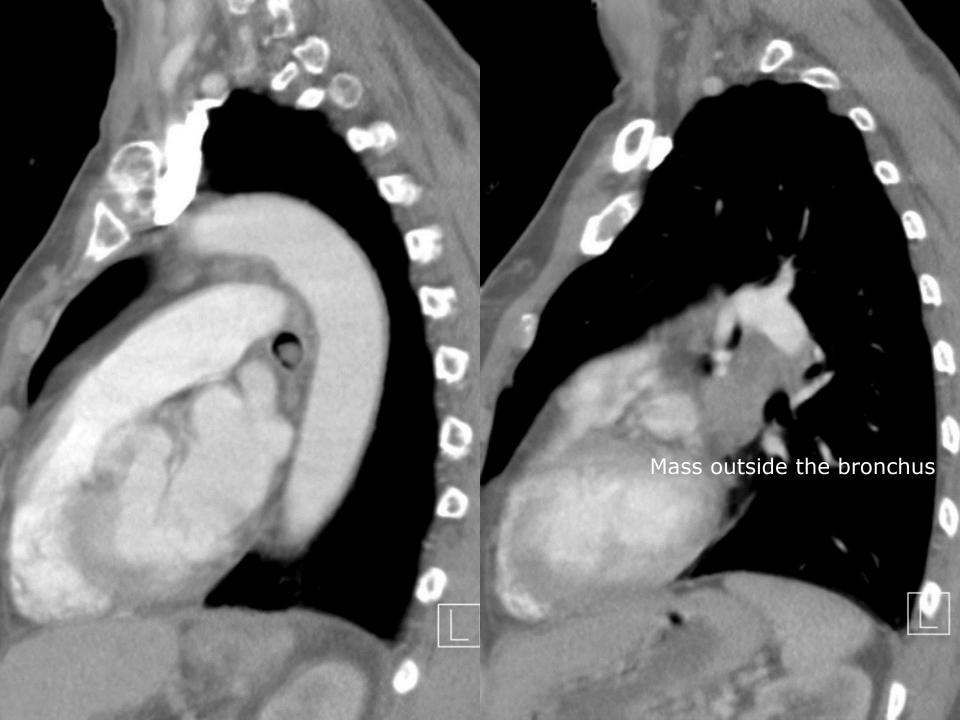


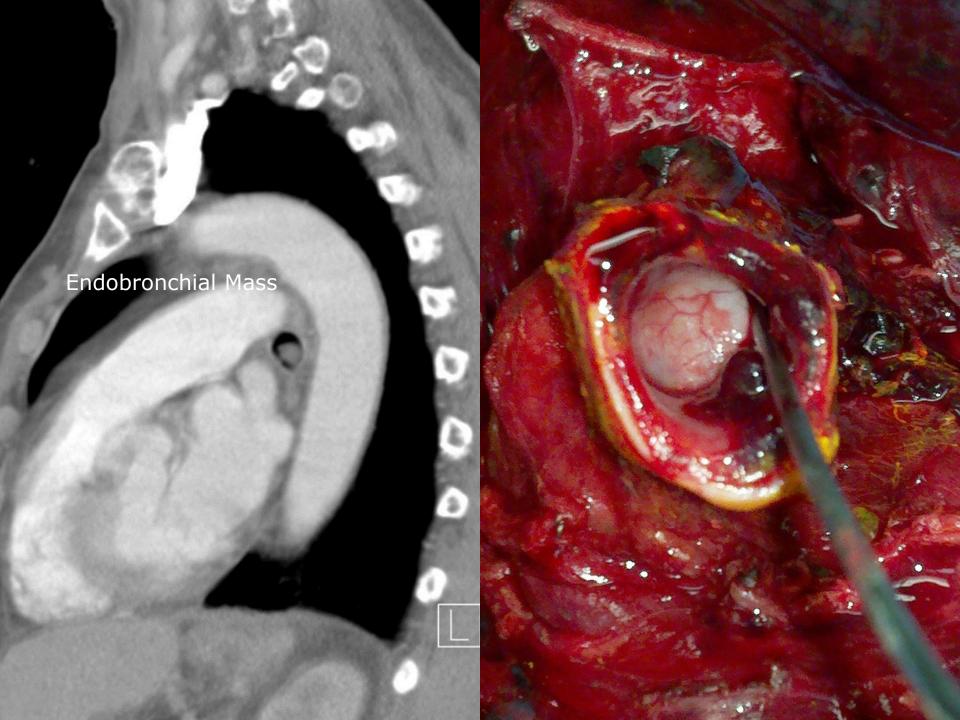
49-year-old female with progressive dyspnea over months











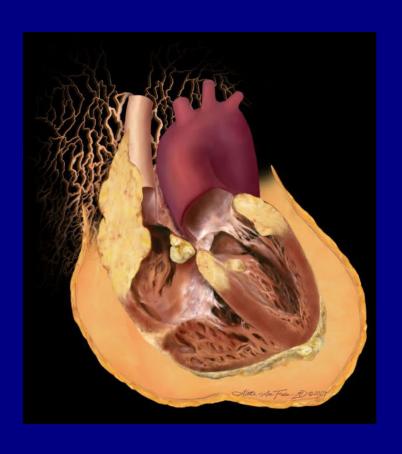


Adenoid Cystic Carcinoma (left mainstem bronchus)

Kendall Martin, MD
UCLA Medical Center
Los Angeles, CA



Cardiovascular Imaging



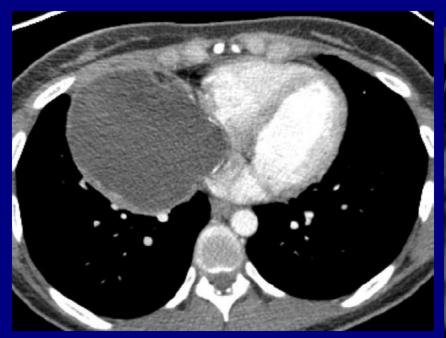


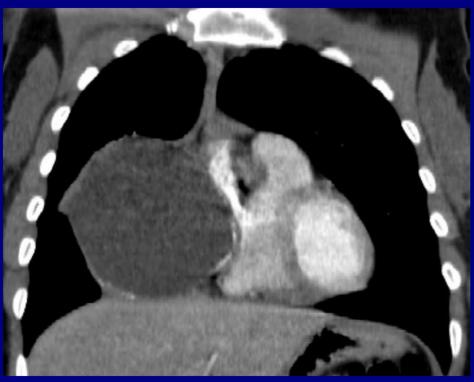
History

24 yo female with chest radiographic abnormality detected during ER work-up for a motor vehicle accident. No significant past medical history. There is a large mediastinal mass which the obscures right heart border.



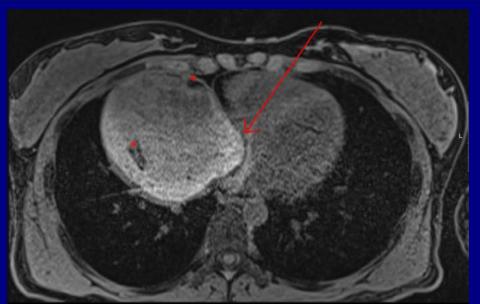
AIRP

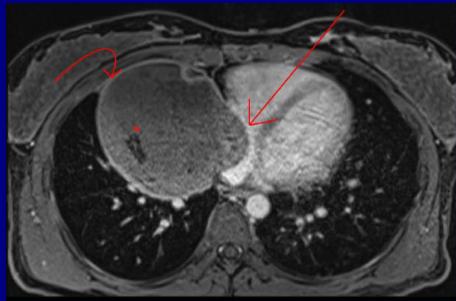




Contrast-enhanced CT images (axial and coronal) demonstrate a right-sided mediastinal mass with internal HU measuring slightly above water, compatible with proteinaceous fluid vs. hemorrhage. There are rim-like calcific densities and a small focal fat density also within this lesion.





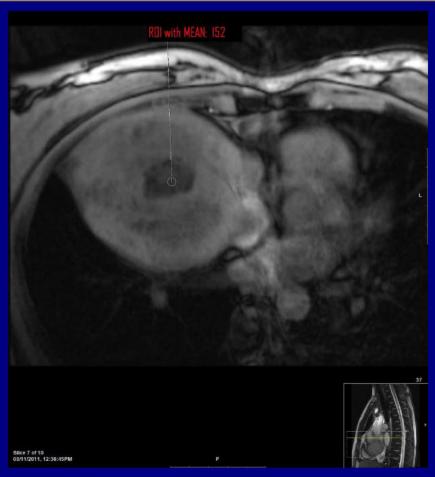


MRI T1-weighted (VIBE) pre-contrast (LEFT) shows heterogeneous internal debris of varying signal intensity (*) but largely bright, suggesting blood or proteinaceous fluild. There is mass effect on right atrium (arrow).

MRI T1-weighted (VIBE) post-contrast (RIGHT) shows only thin peripheral rim enhancement (curved arrow).



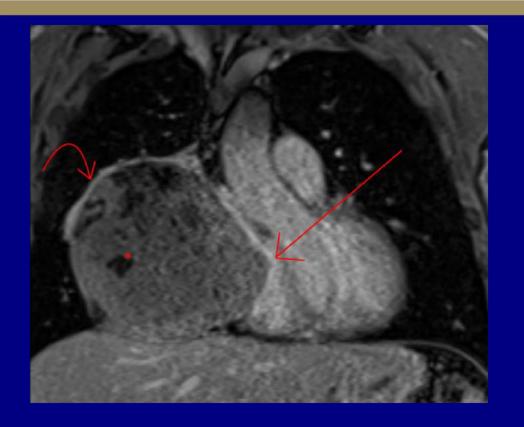




MRI In-Phase (LEFT) with ROI over fatty area.

MRI Opposed-Phase (RIGHT) with ROI over fatty area demonstrating drop in signal when compared to In-Phase imaging.







MRI T1-weighted (VIBE) postcontrast coronal image shows heterogeneous internal debris (*) with rim enhancement (curved arrow) and mass effect (arrow).

Gross resected specimen: Pericardial teratoma contains fat, calcification and hair.



Mature Cystic Teratoma of the Pericardium

Indravadan Patel, MD
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Cleveland, OH

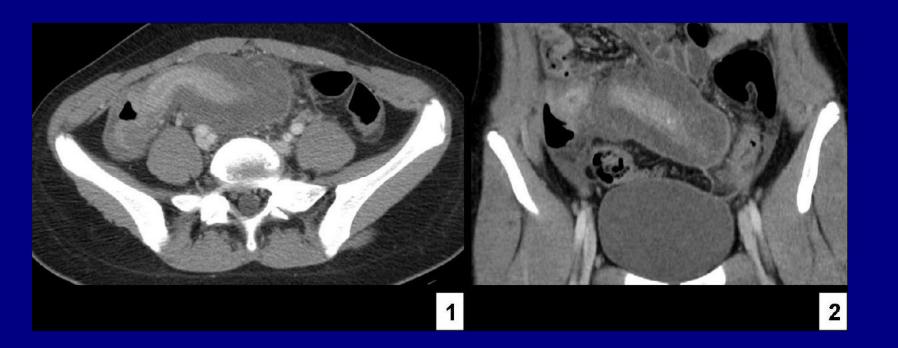


Pediatric Best Case

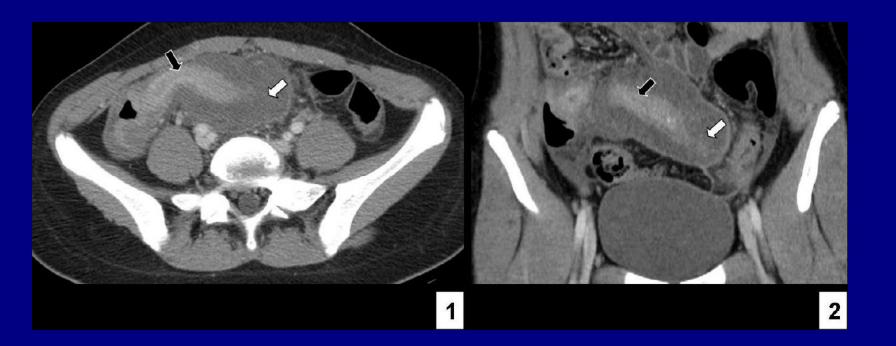


13-year-old girl with lower abdominal pain and fever













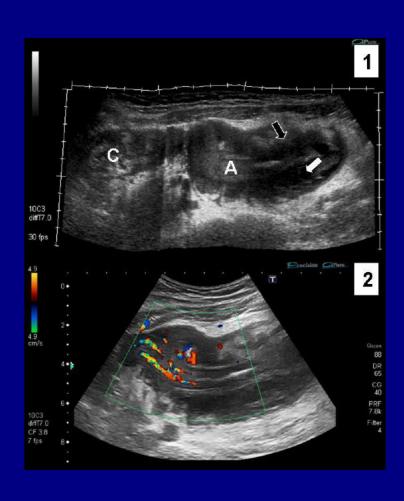




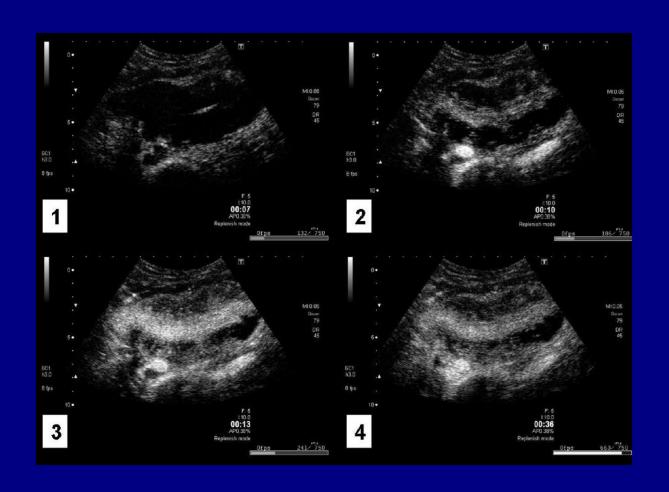




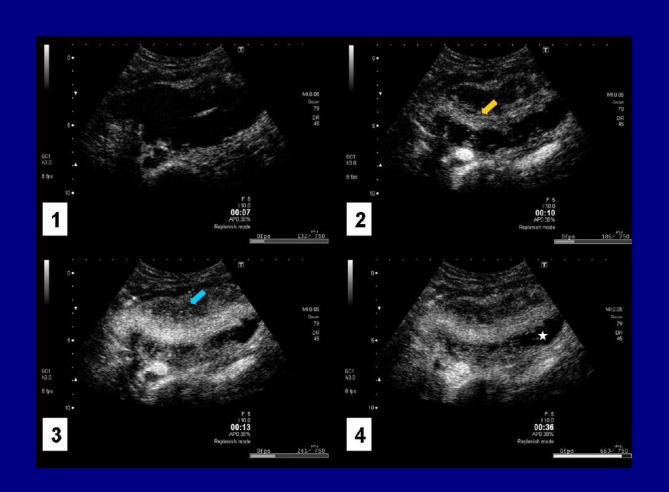




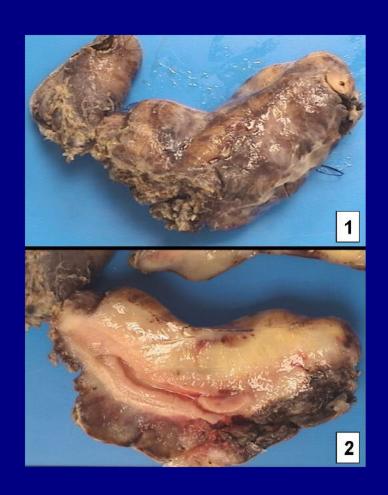








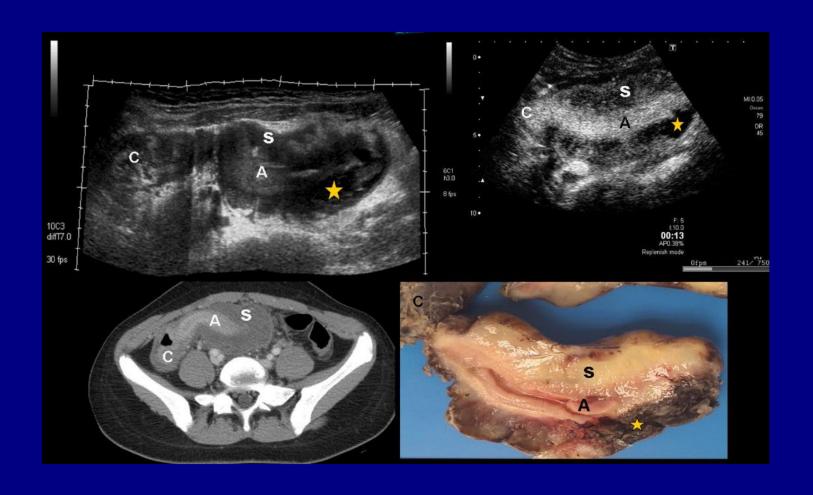














Crohn Disease of the Appendix

Maria Cerveron Izquierdo, MD Hospital Universitario Doctor Peset Valencia, Spain



Breast Best Case

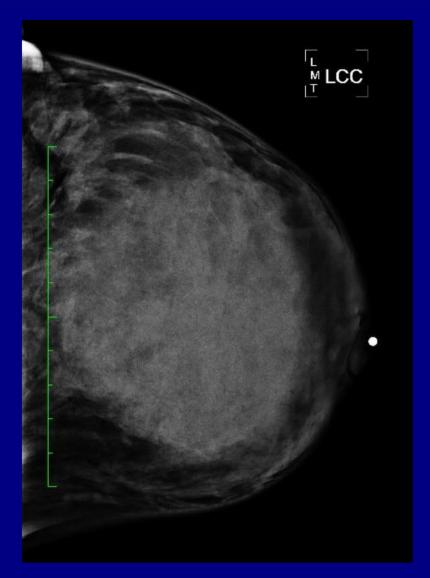


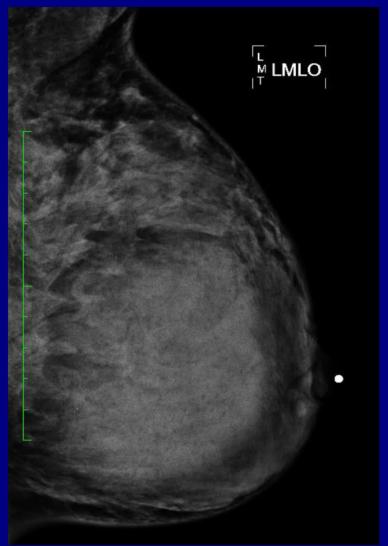
23-year-old woman had a history of 2-3 months of pain in her left breast.
She developed a mass during her pregnancy.



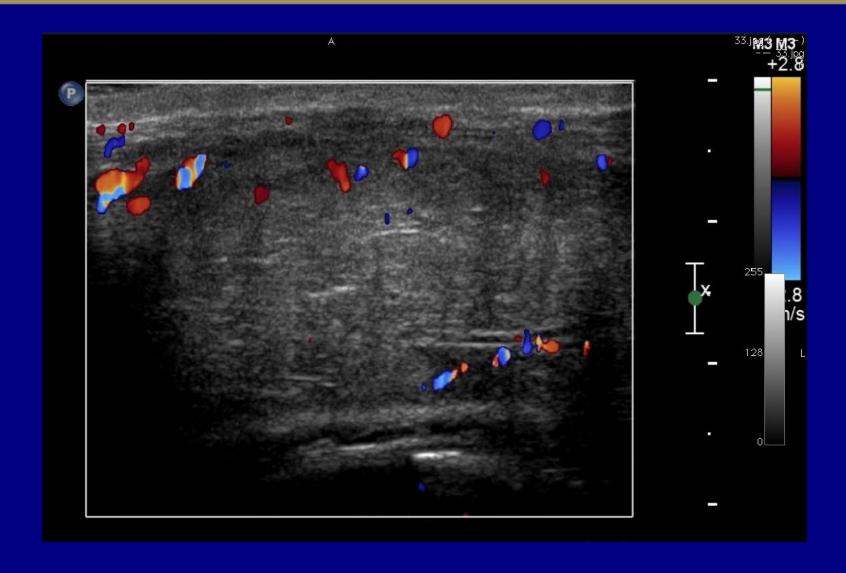
Physical examination showed a markedly asymmetric left breast filled by a soft mass and no lymphadenopathy or skin changes.























Lactating Adenoma

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University of Massachusetts
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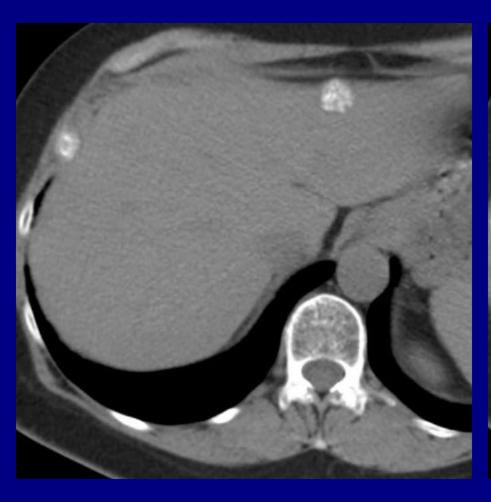


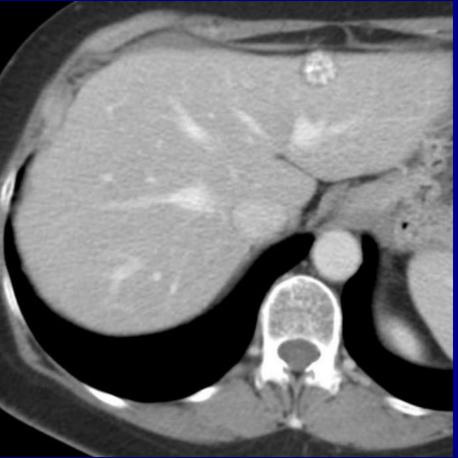
Gastrointestinal Best Case



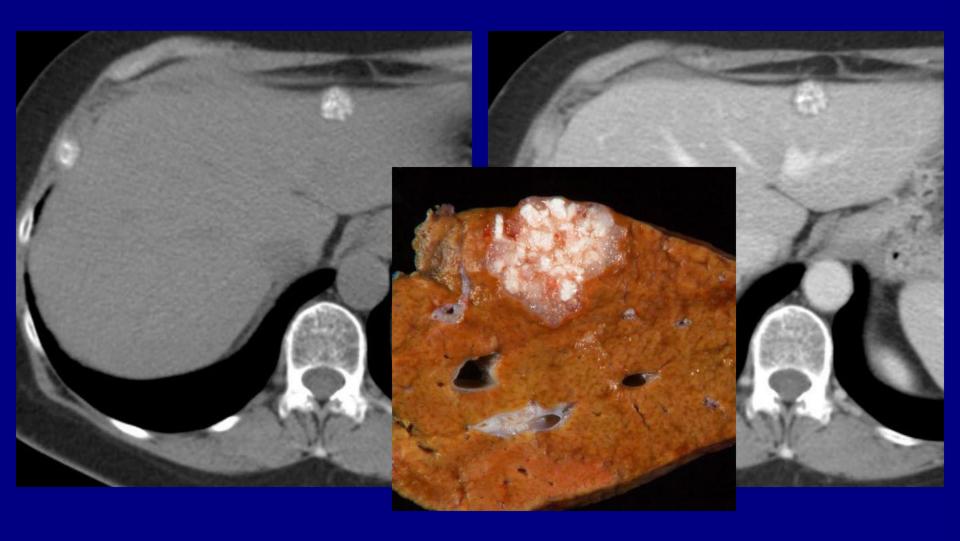
72-year-old woman with history of colon cancer, undergoing surveillance imaging





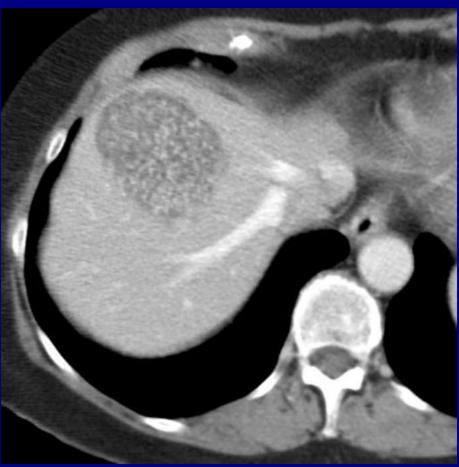




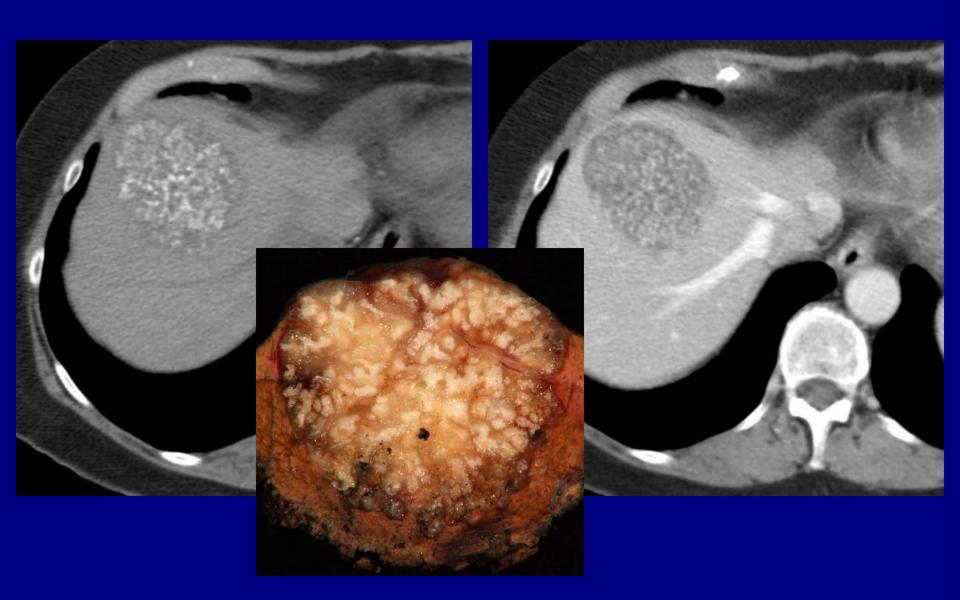














Mucinous Adenocarcinoma Metastases

David Fetzer, MD
University of Pittsburgh Medical Center
Pittsburgh, PA



Many thanks to all of you for submitting such great cases! Have a safe trip home –

From the staff of the American Institute for Radiologic Pathology