

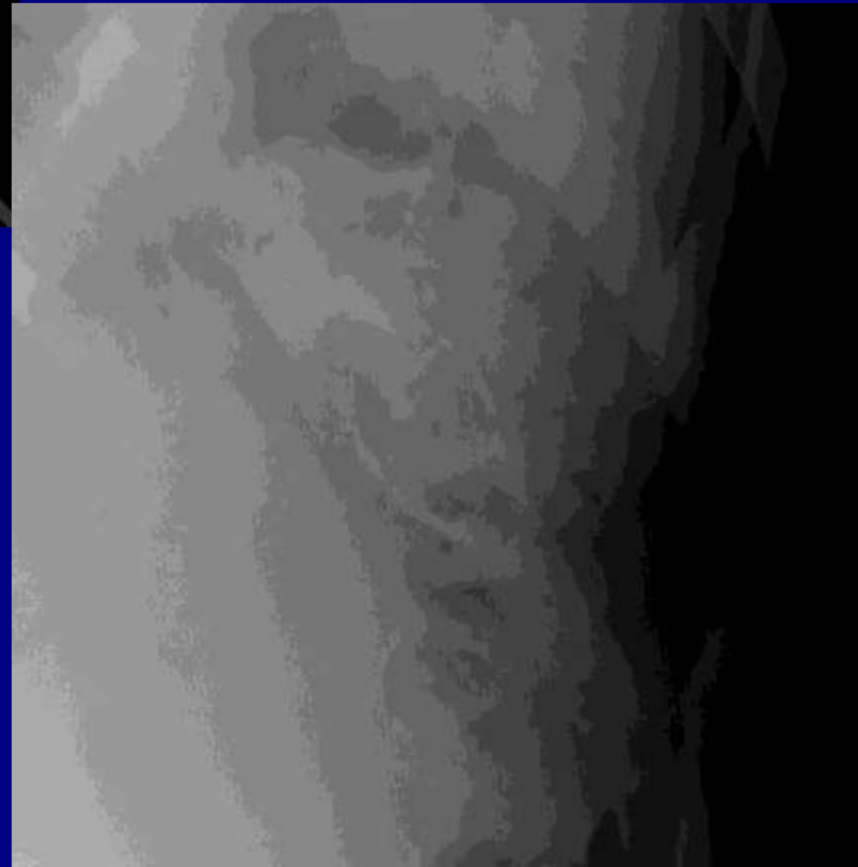
BEST CASES OF THE AIRP

September 17 – October 12, 2012

Musculoskeletal Best Case

37 year-old-male with left posterior rib pain.
Kicked by daughter while playing several months
earlier with intermittent pain since.

A



A



FR 29Hz
RS
Z 1.7
2D
81%
C 60
P Low
Res

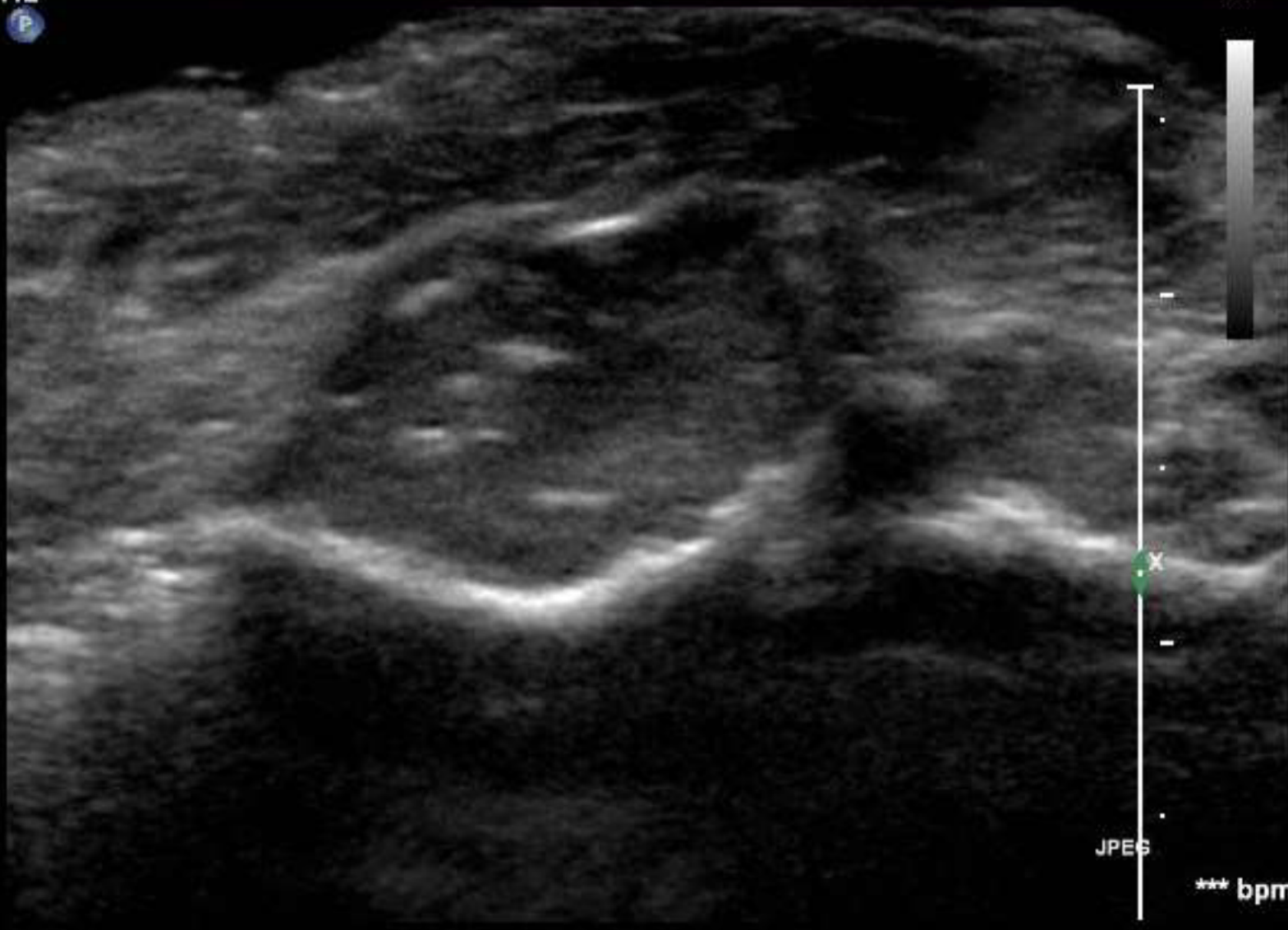


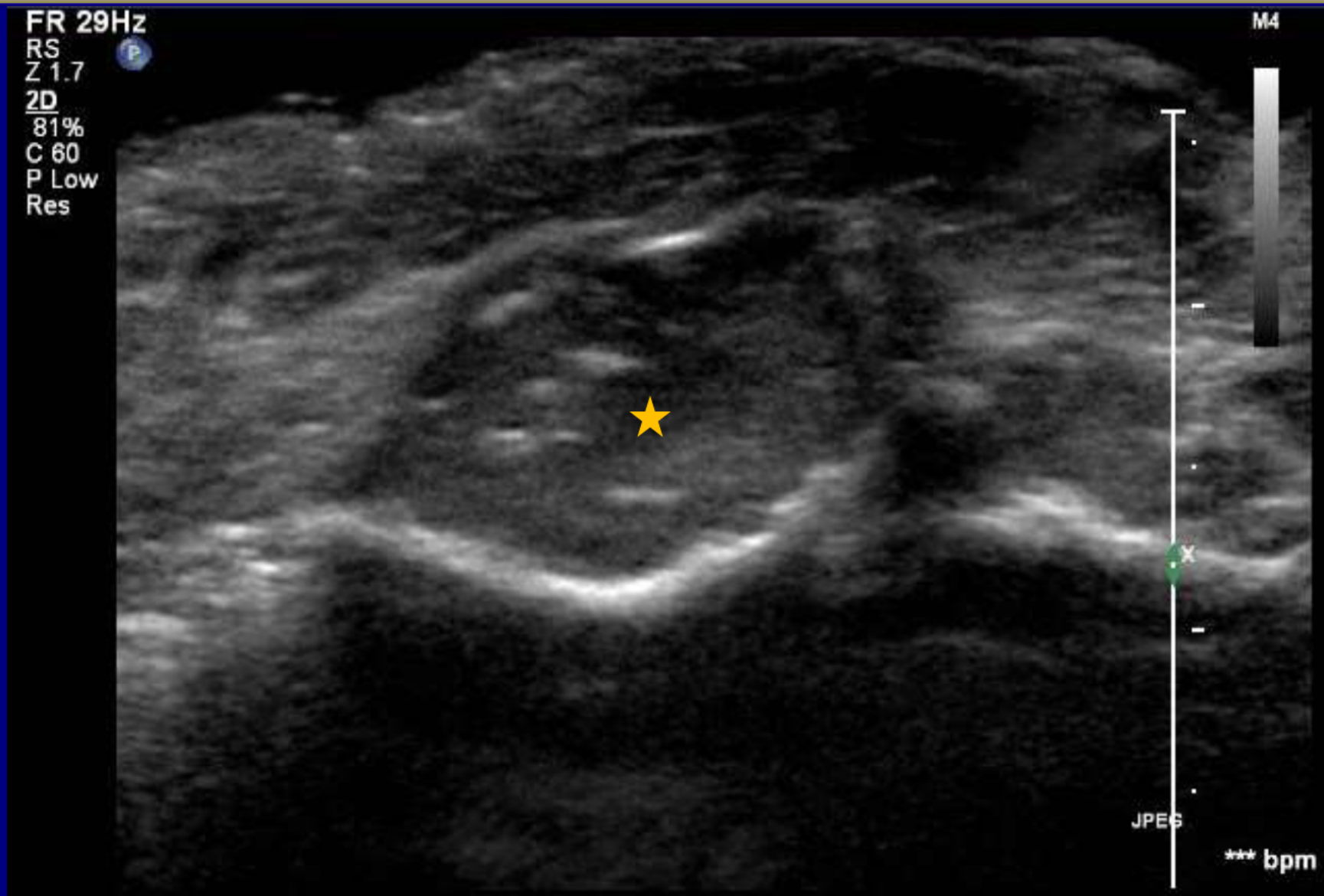
M4



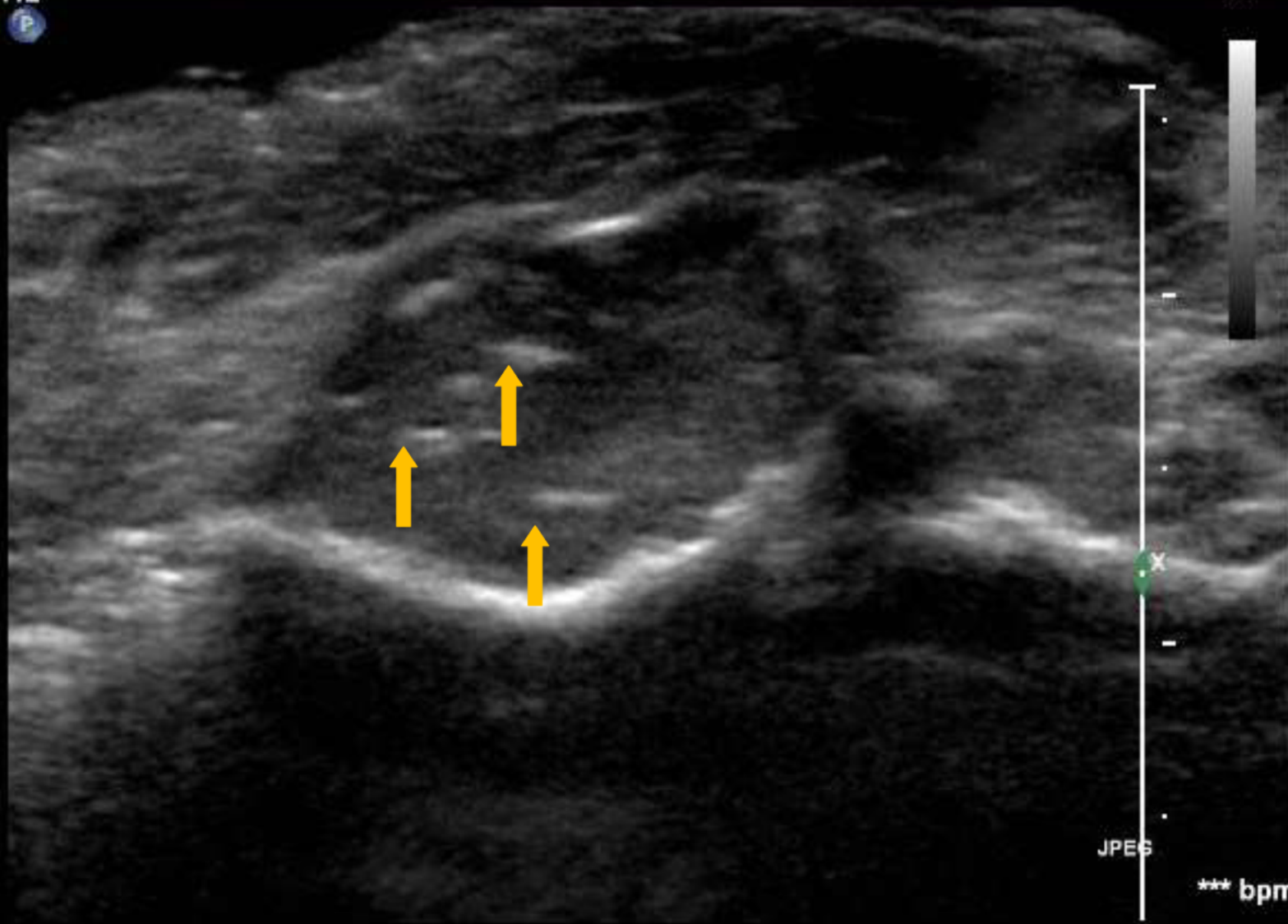
JPEG

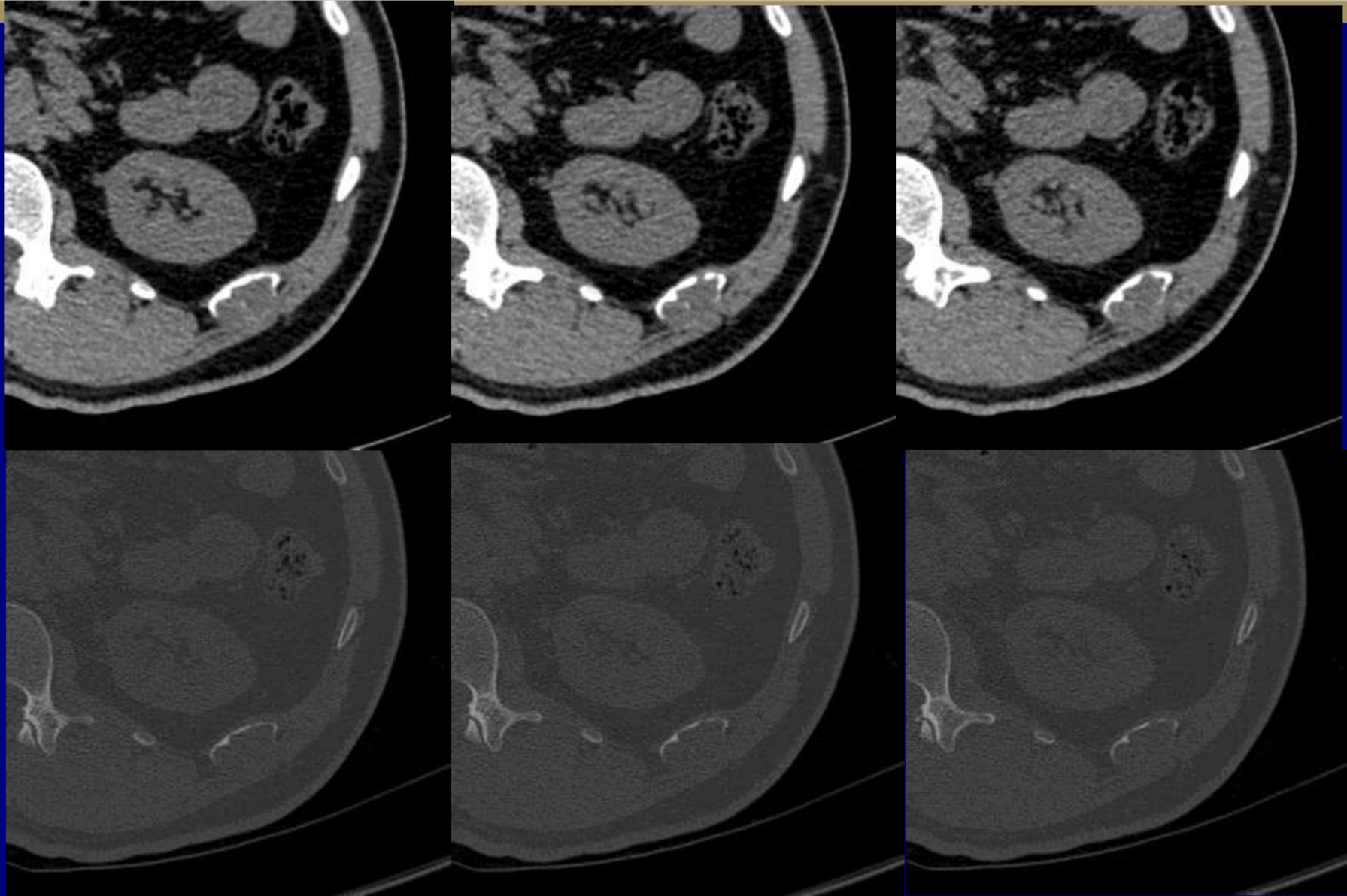
*** bpm

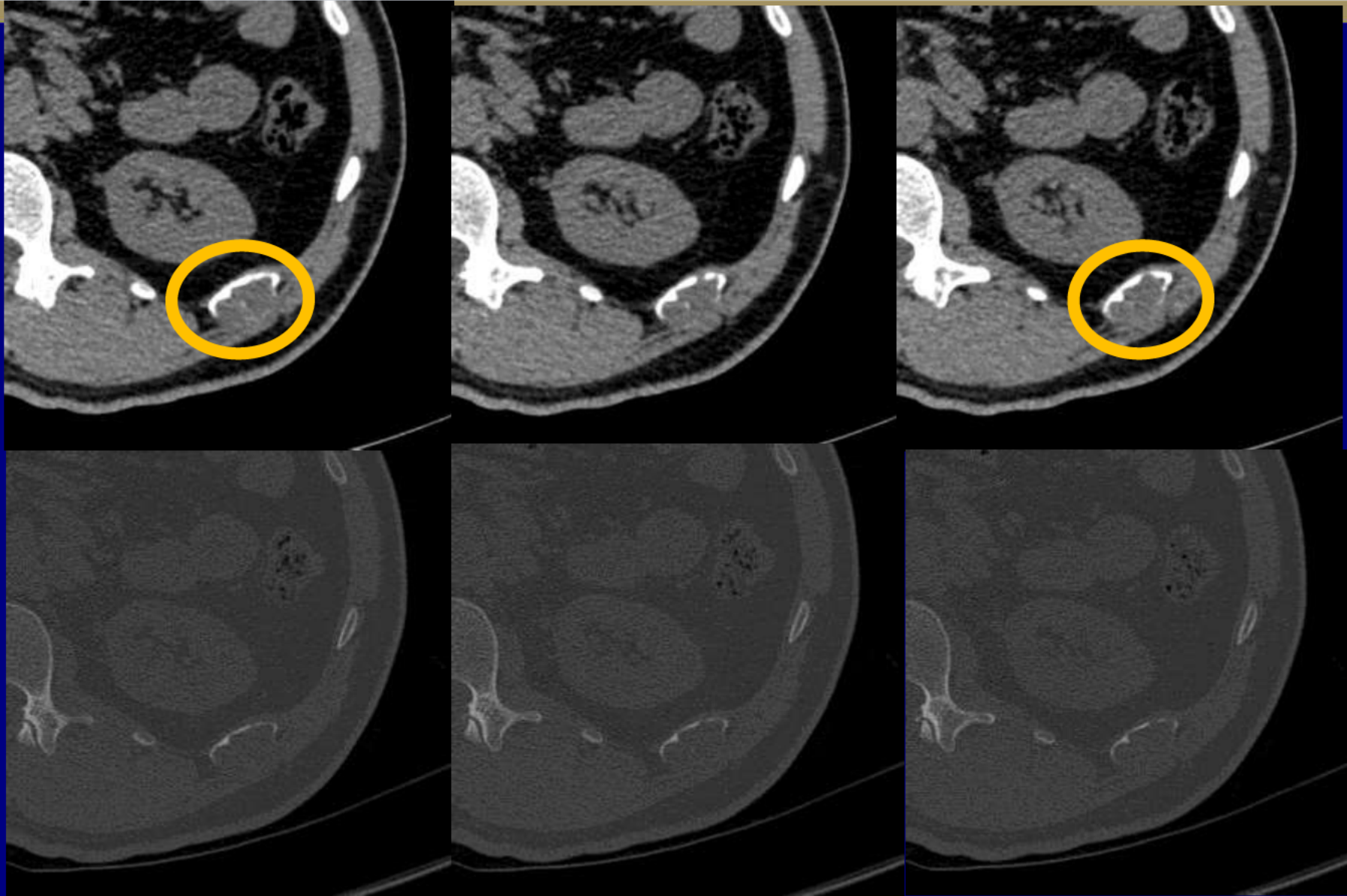


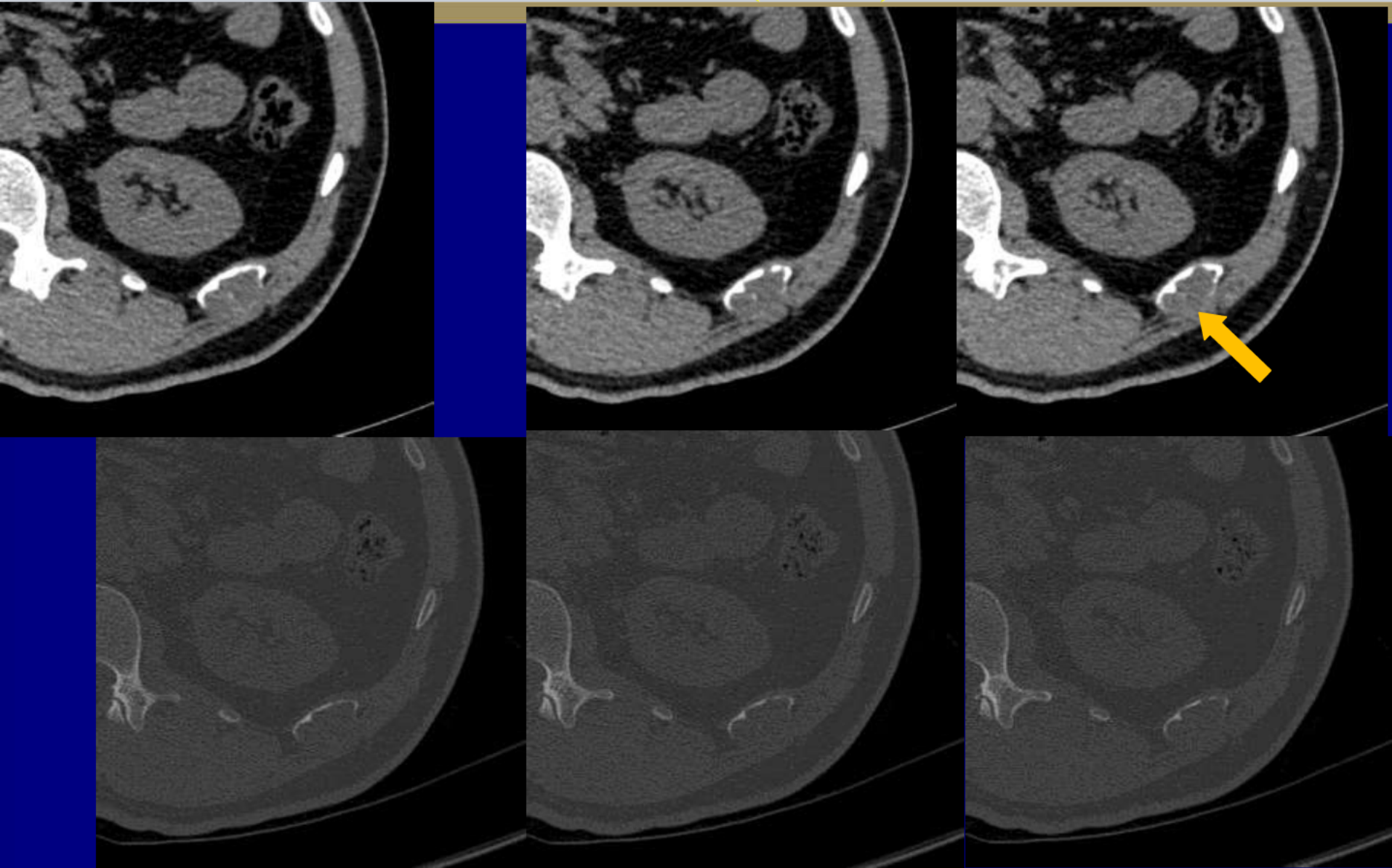


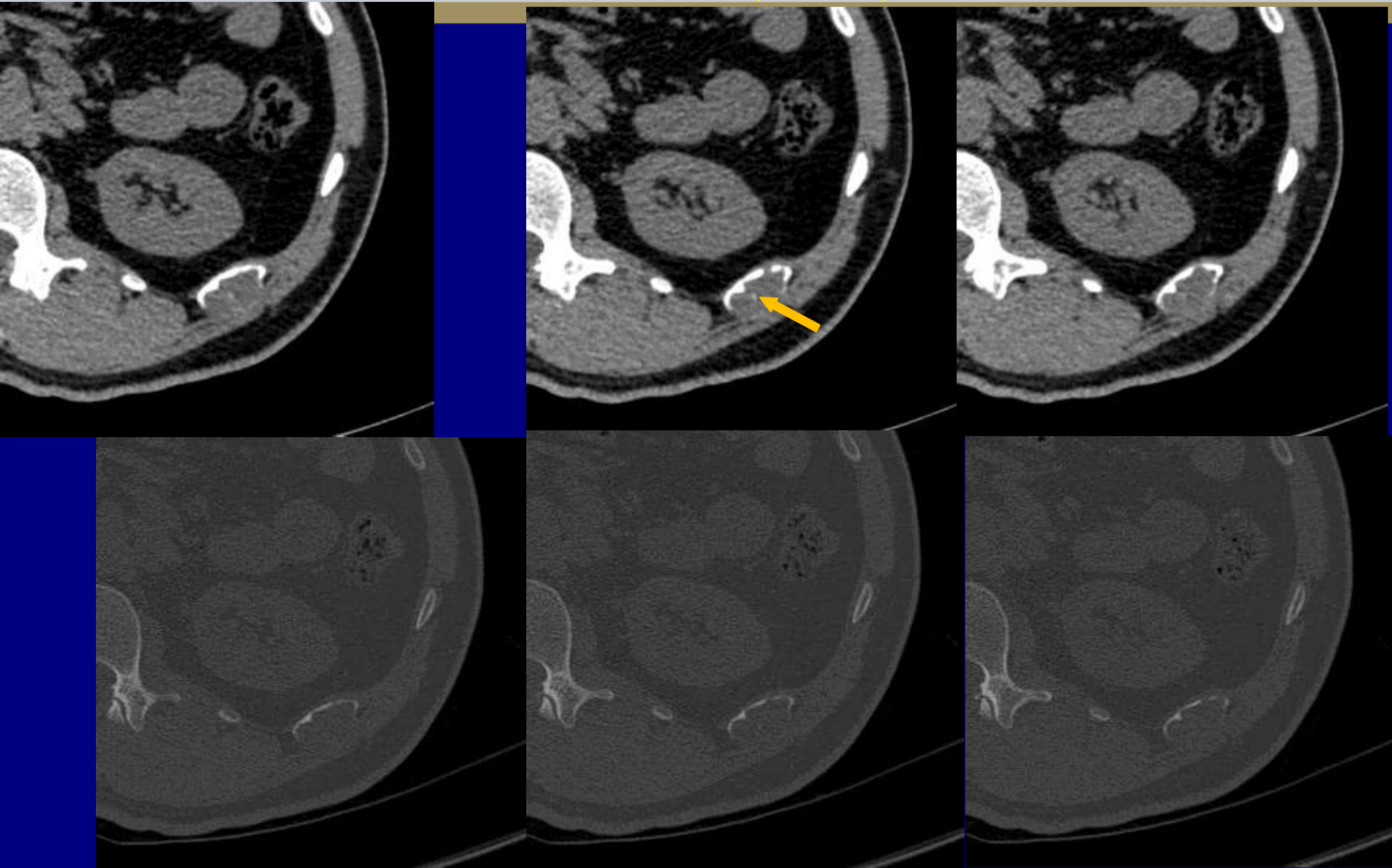
FR 29Hz
RS
Z 1.7
2D
81%
C 60
P Low
Res

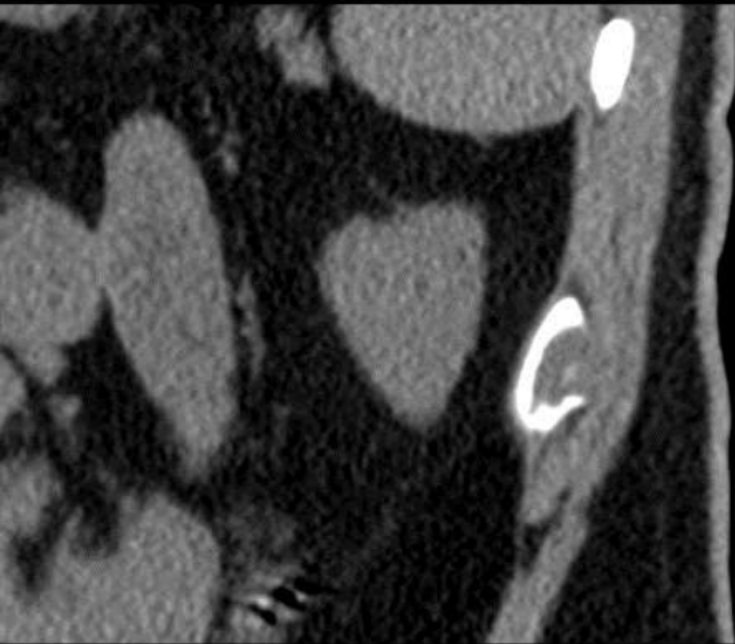




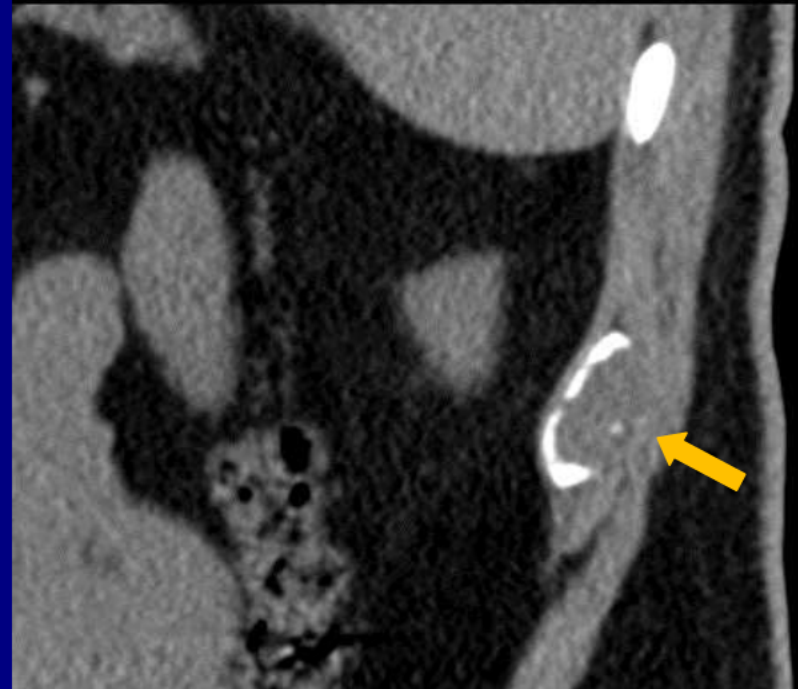






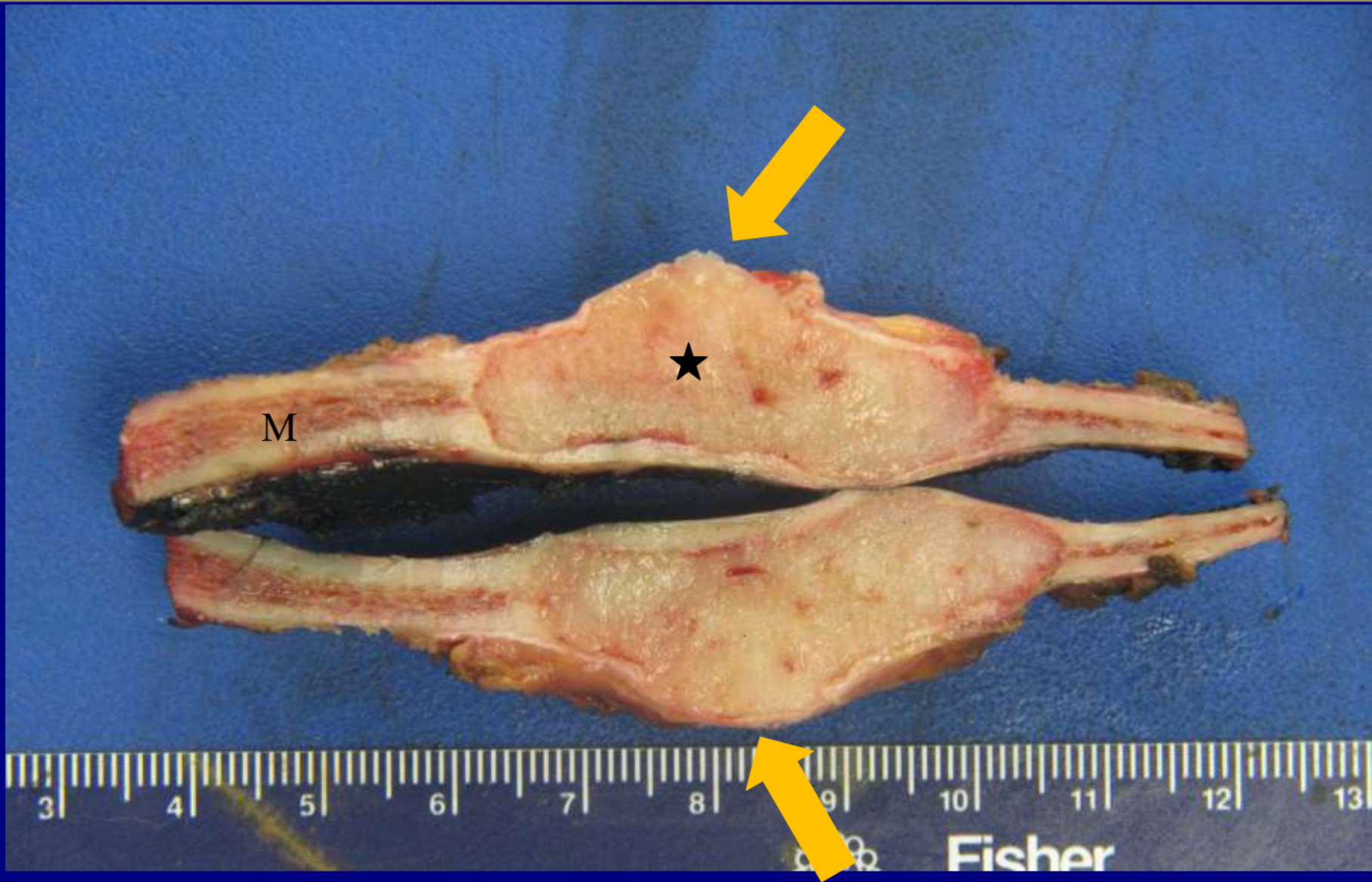


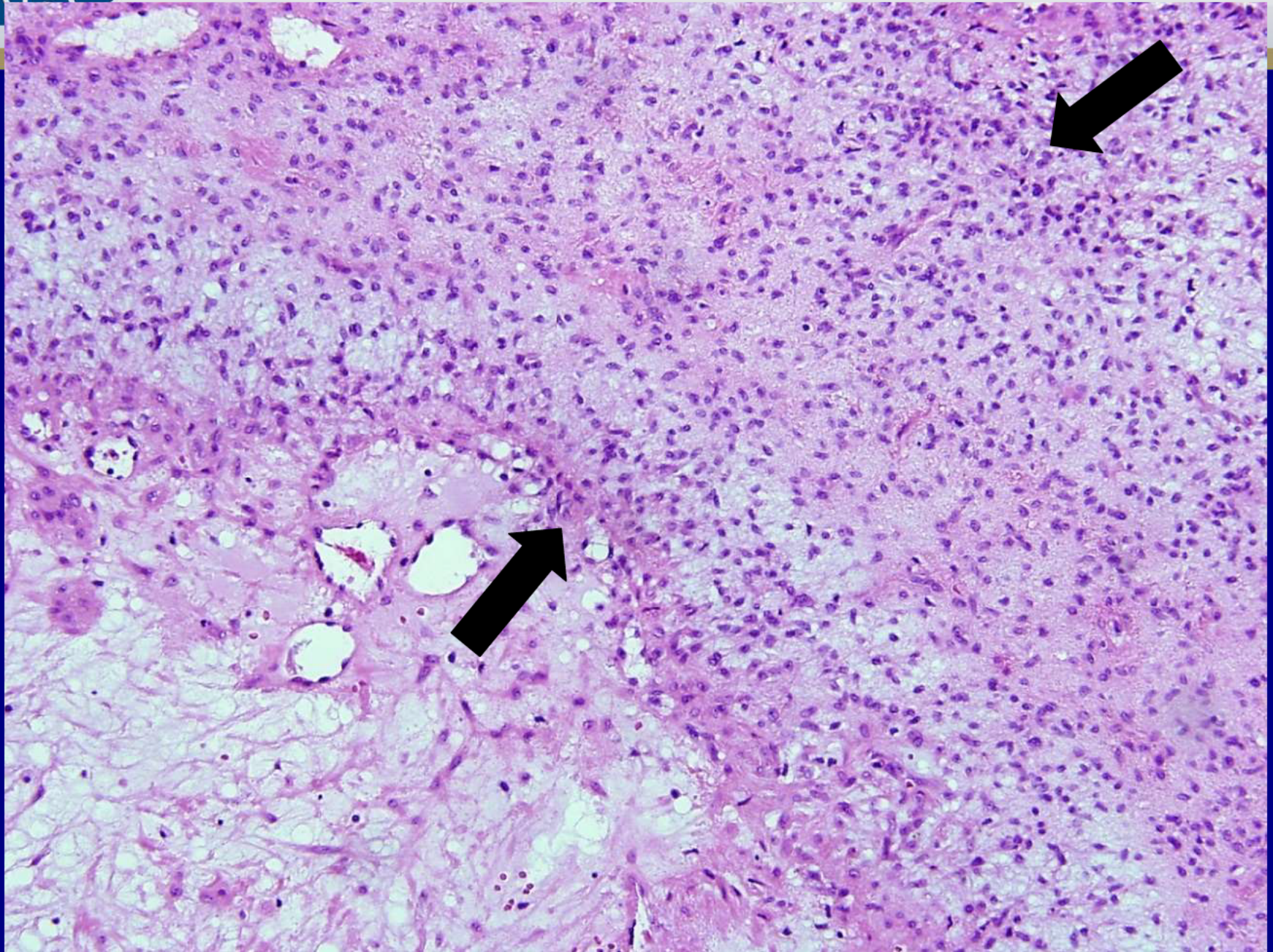
CT (sagittal)

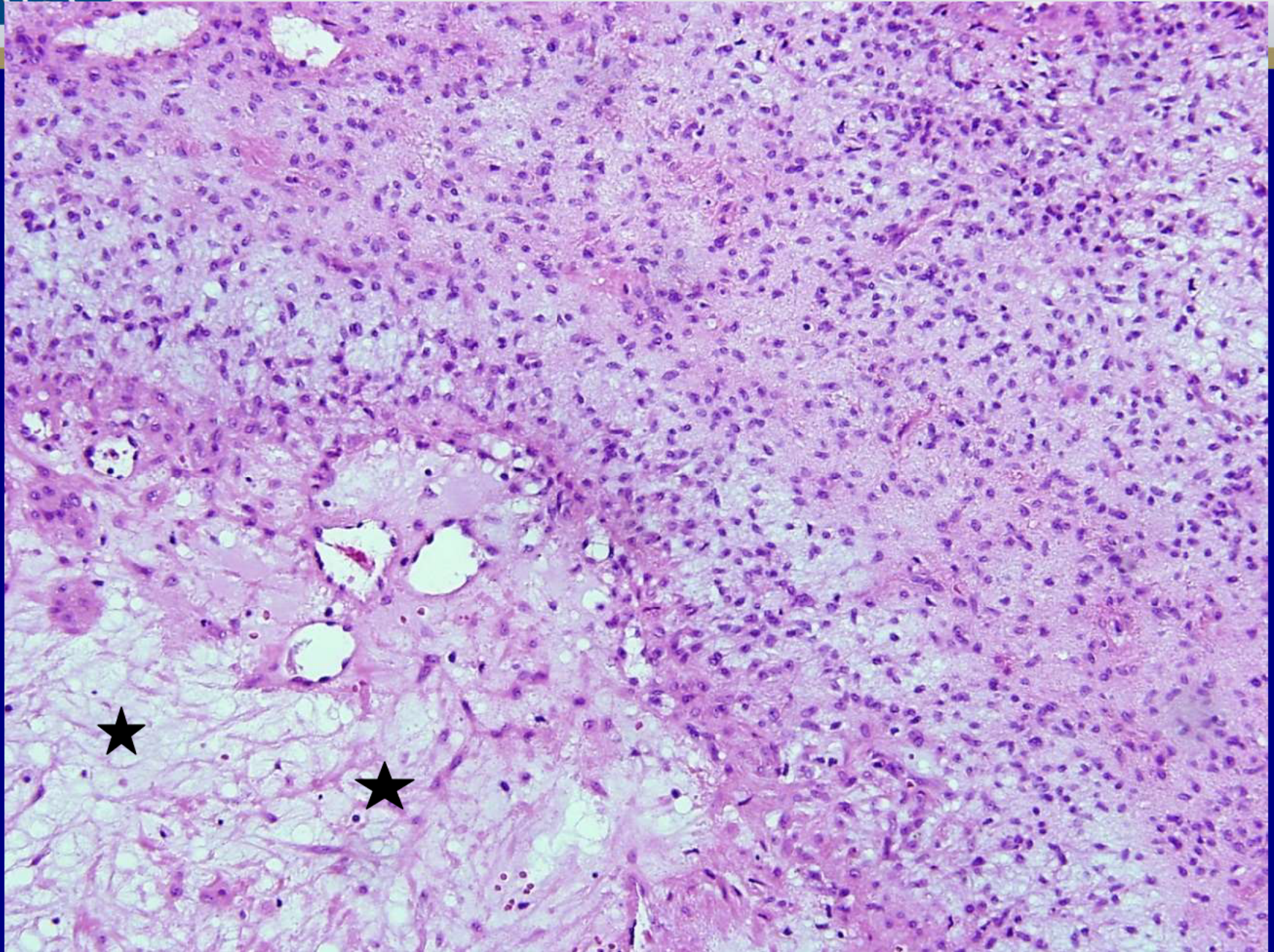


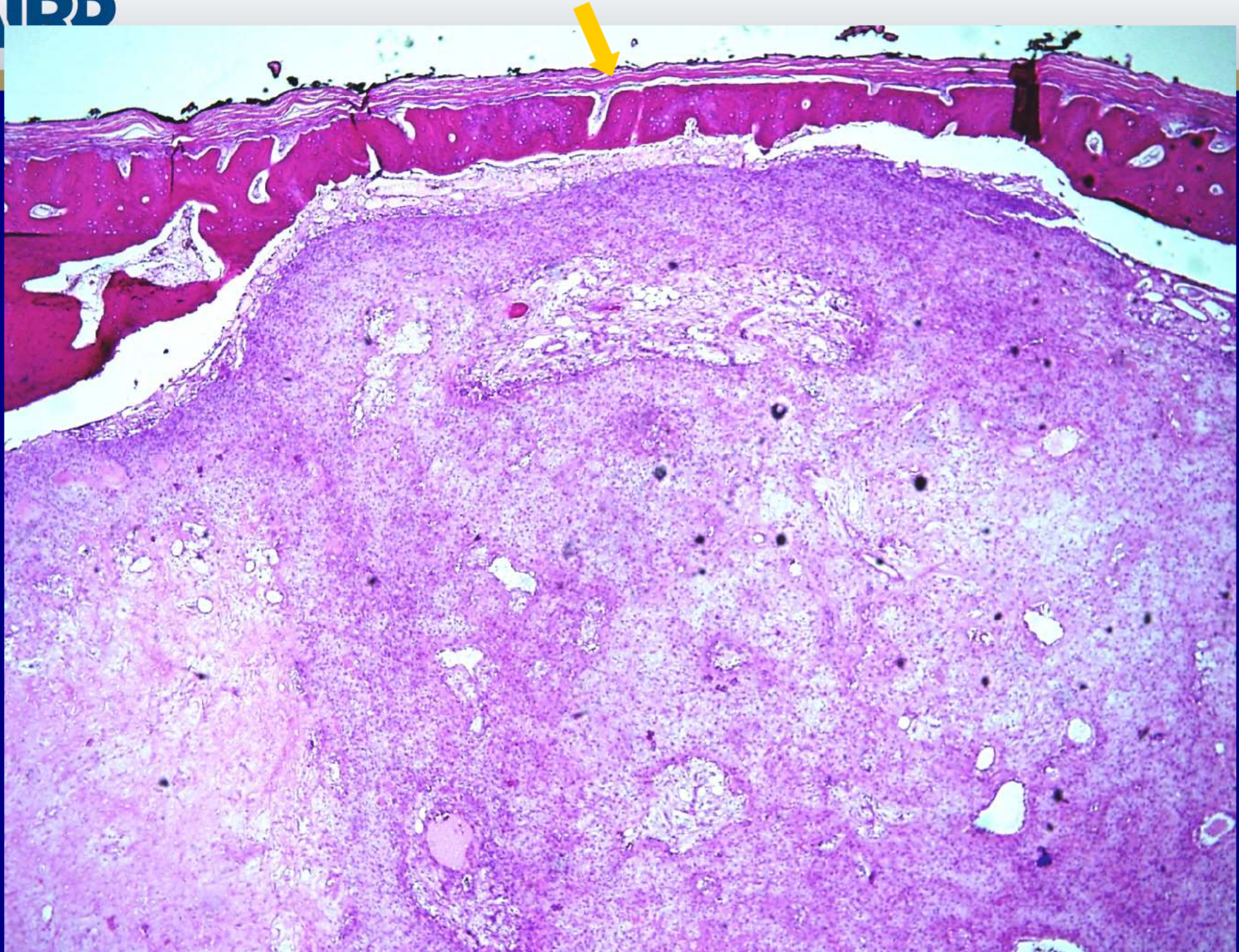












Chondromyxoid Fibroma

Andrew Moriarity, MD
Henry Ford Hospital
Detroit, Michigan

16 year-old-male who presented 9 months earlier with left radius/ulna fracture noted to have axillary mass on follow-up visits

April 2011

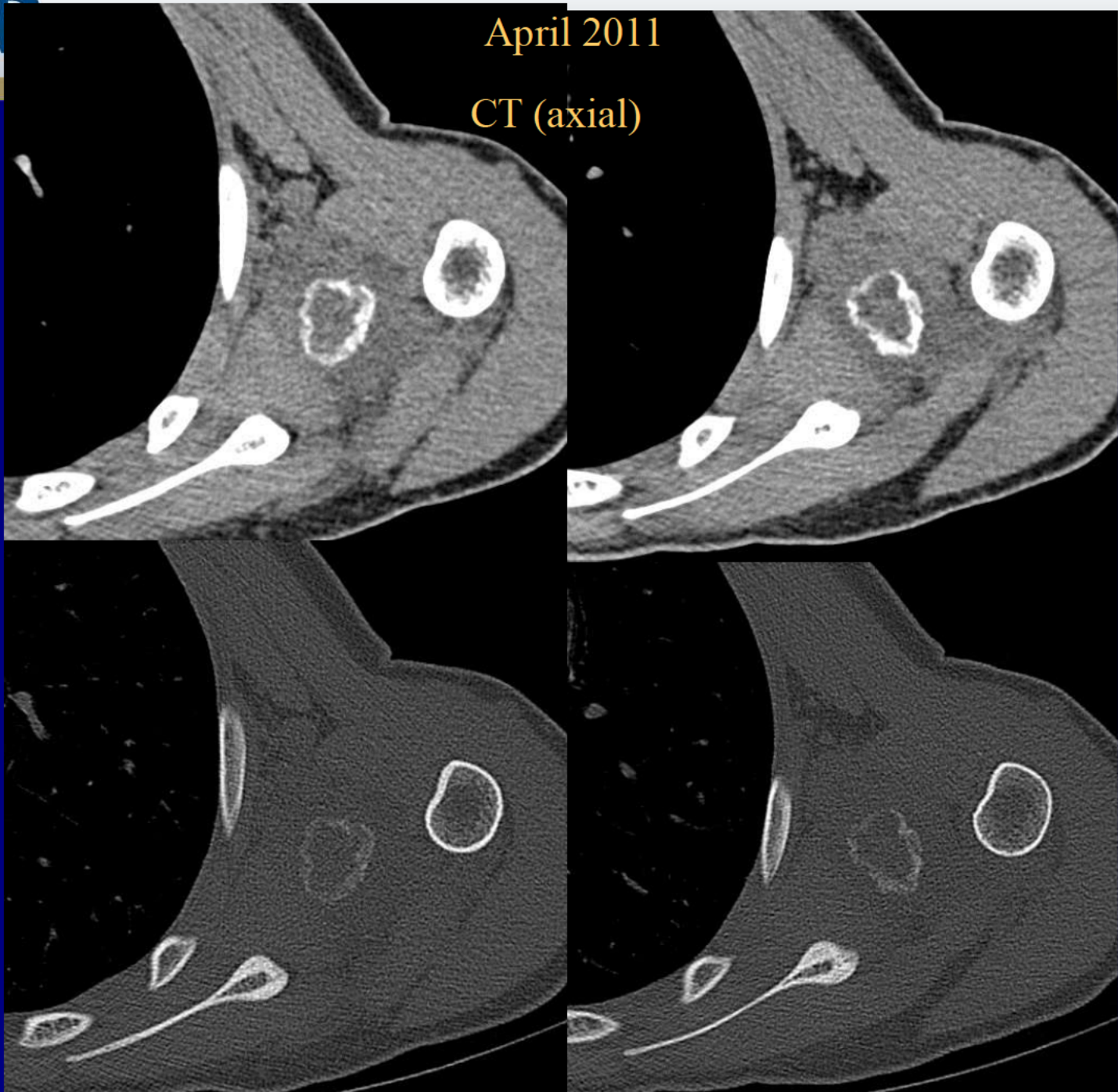


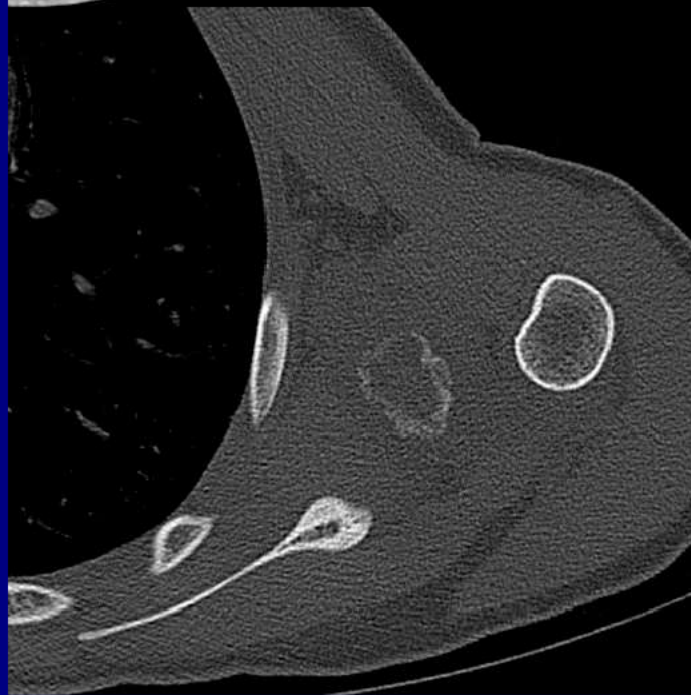
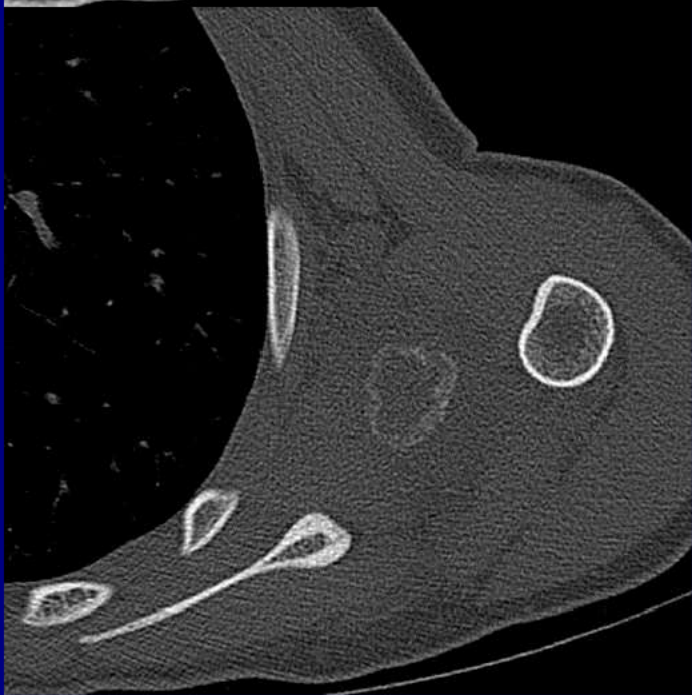
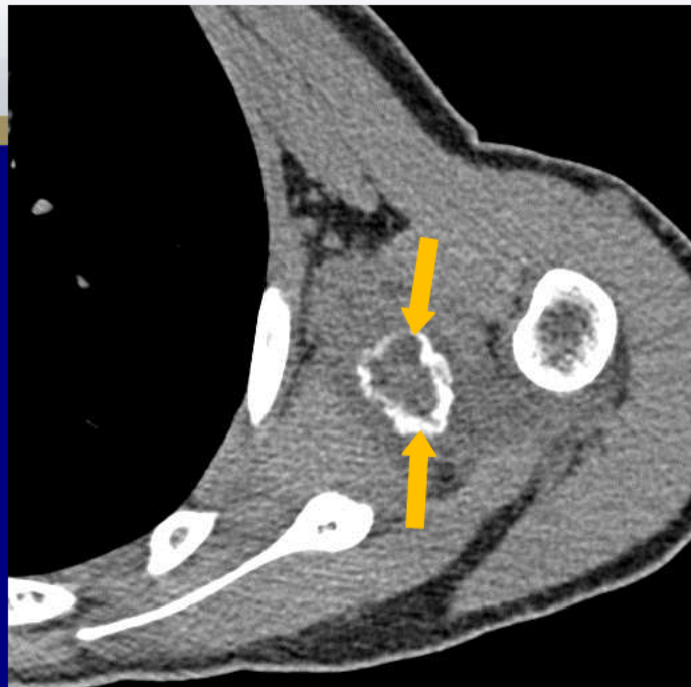
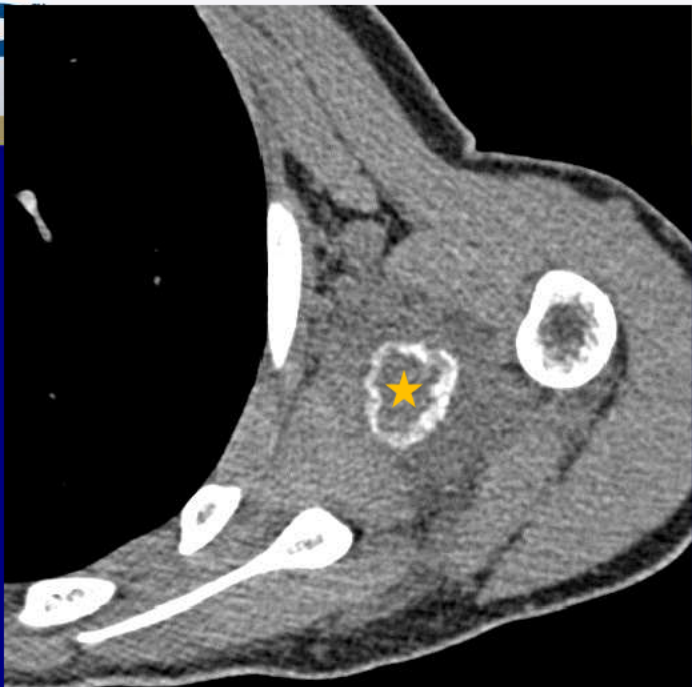
August 2011

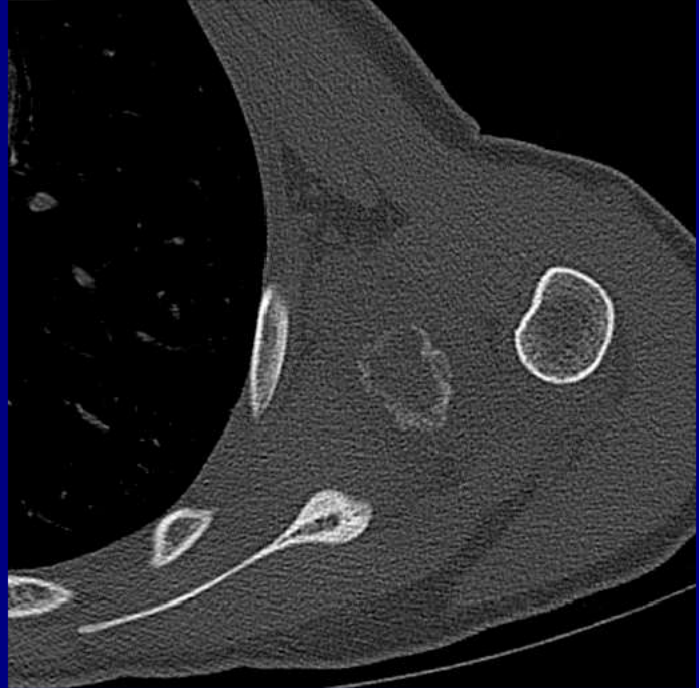
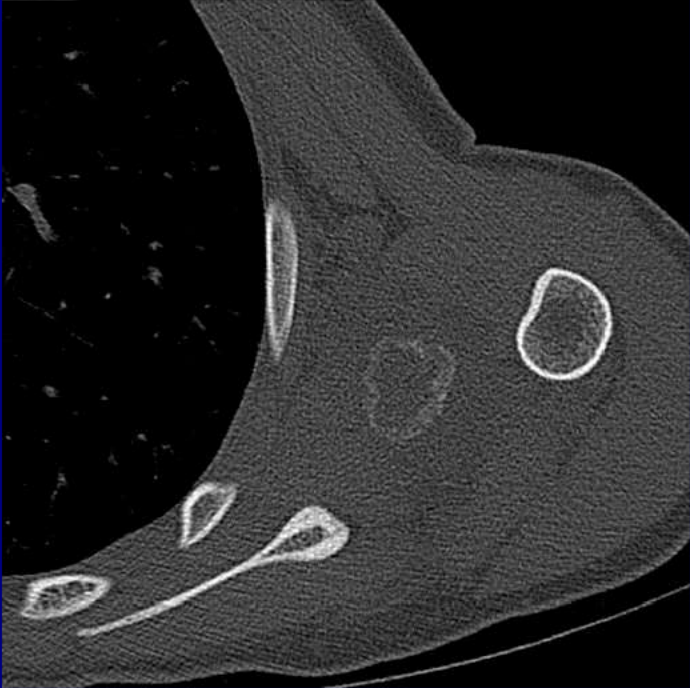
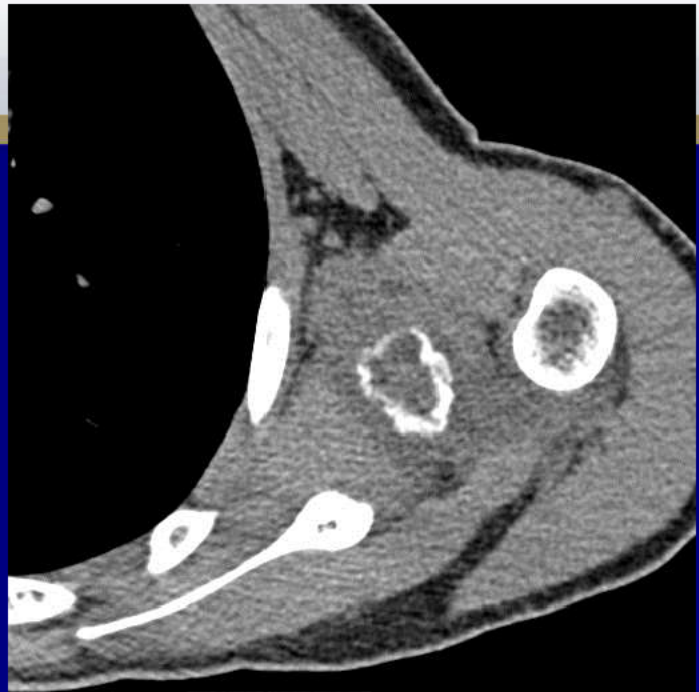
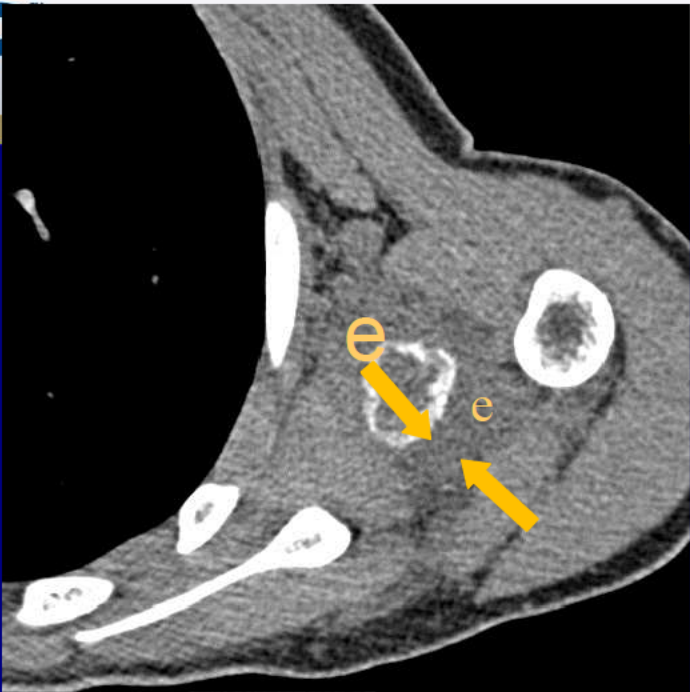


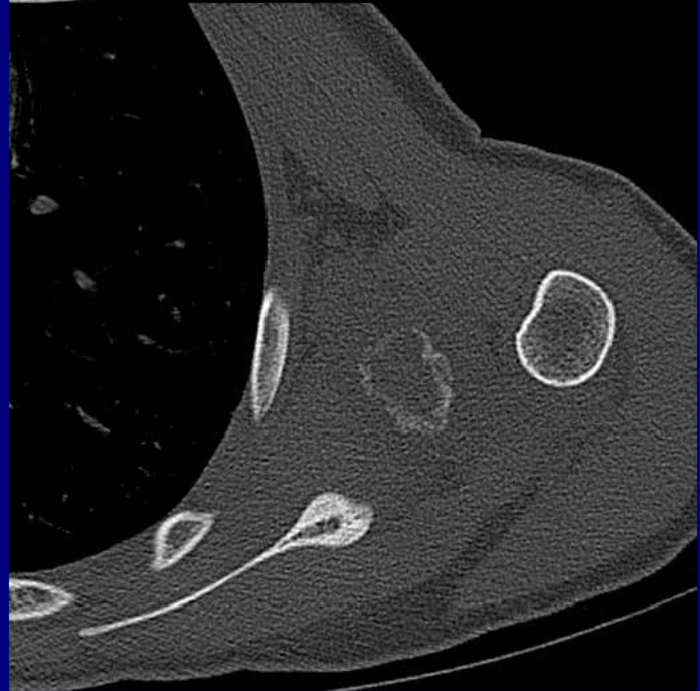
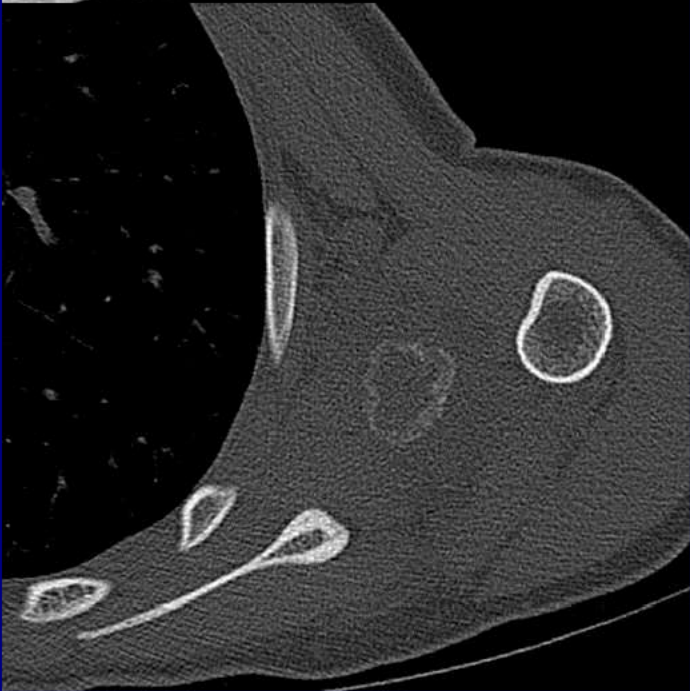
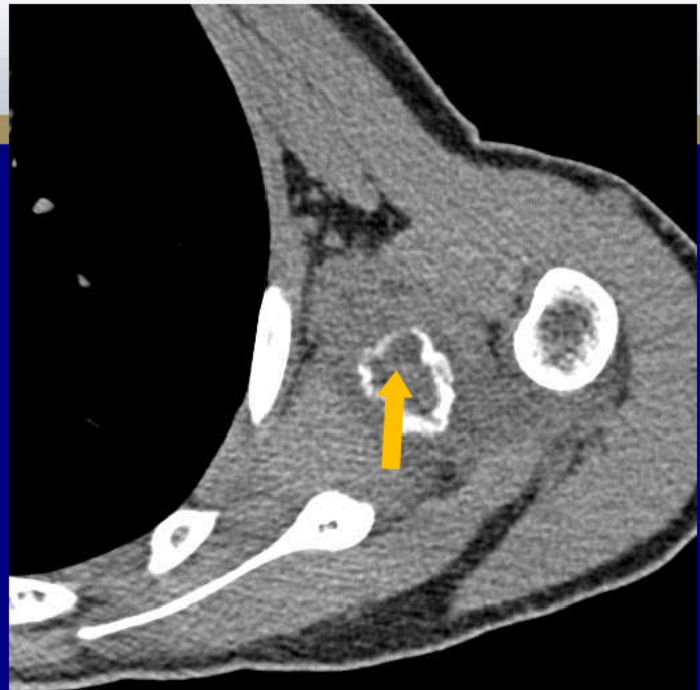
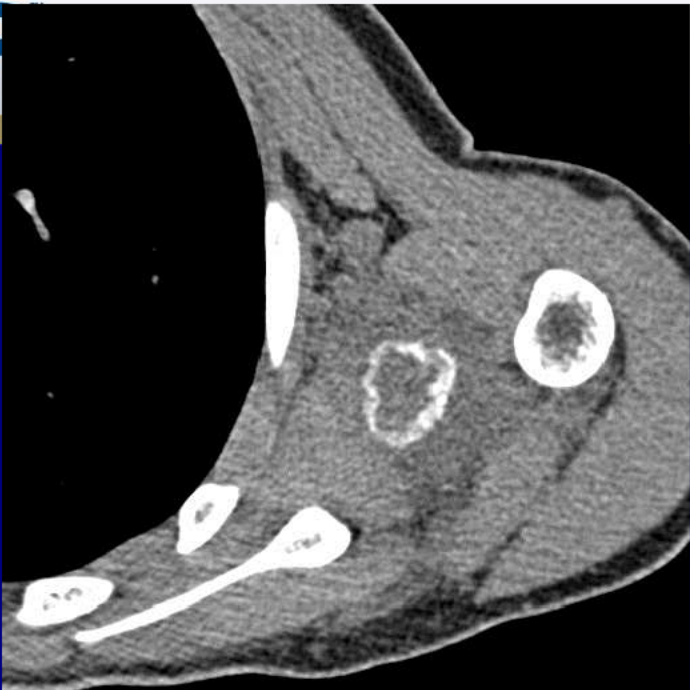
April 2011

CT (axial)









CT (Coronal)



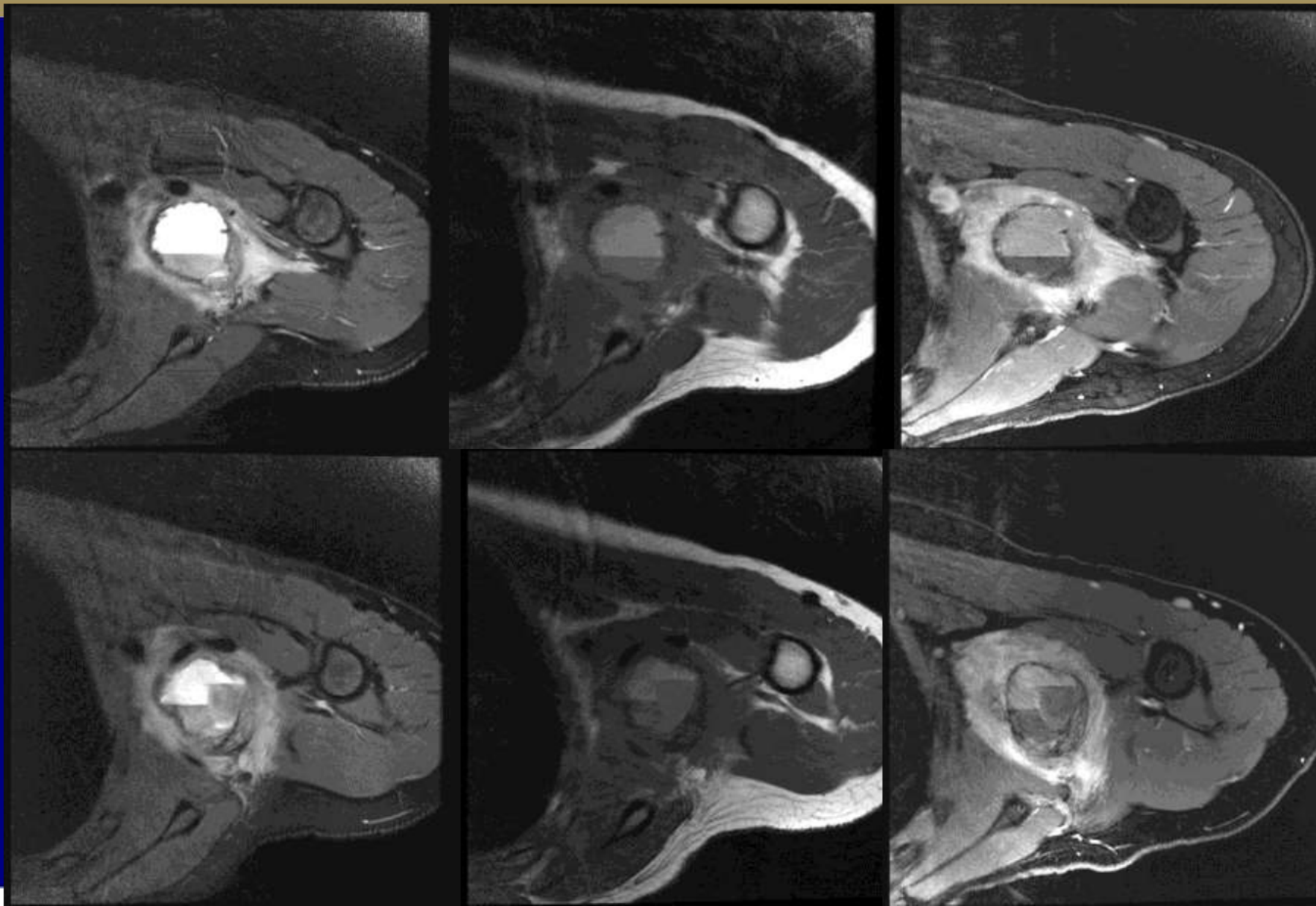
CT (sagittal)



August 2011

T1 GD

T1

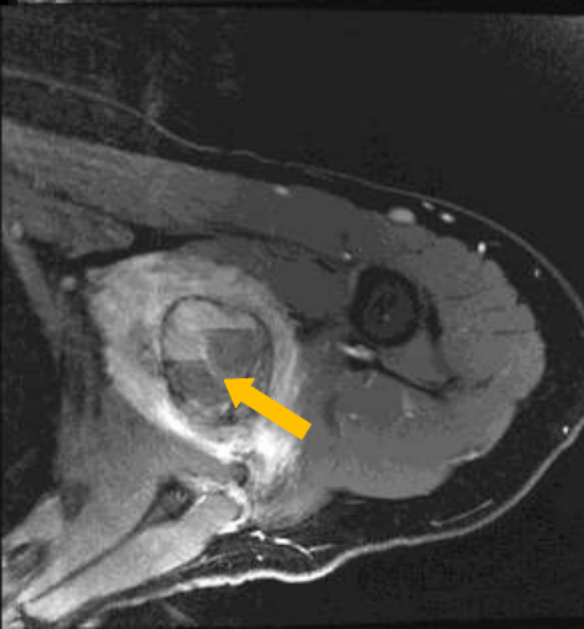
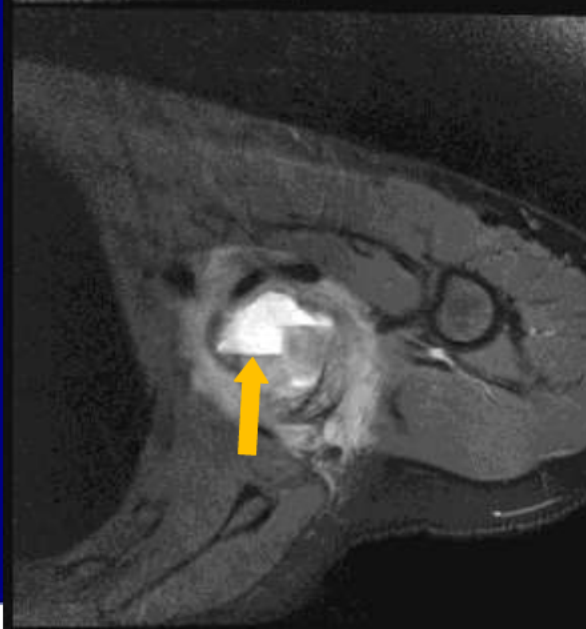
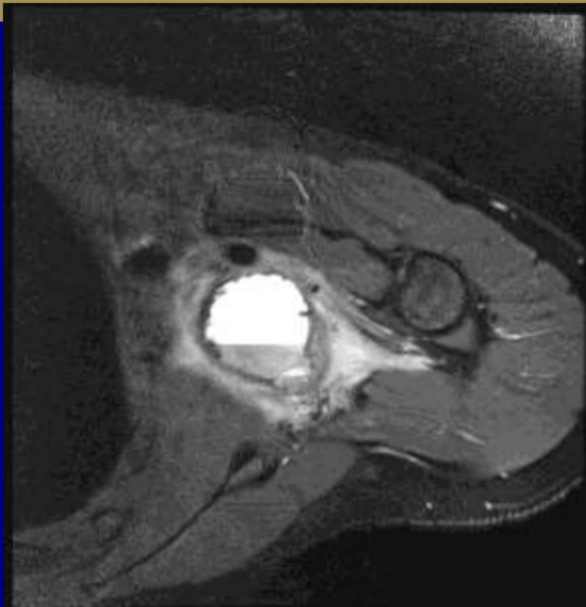


August 2011

T2

T1

T1 GD

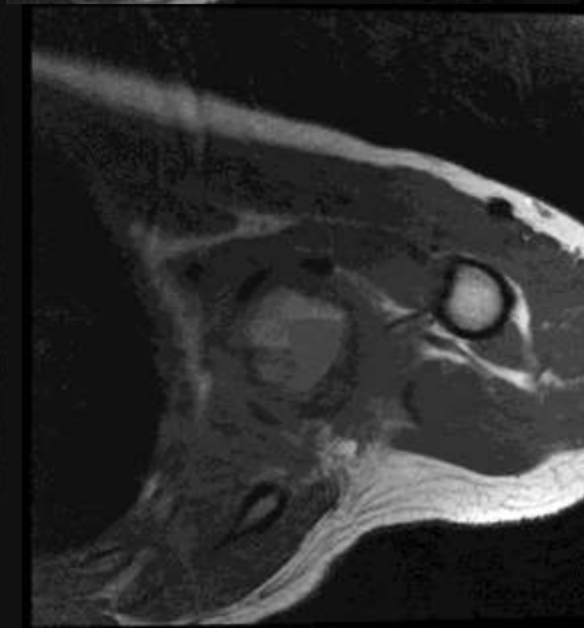
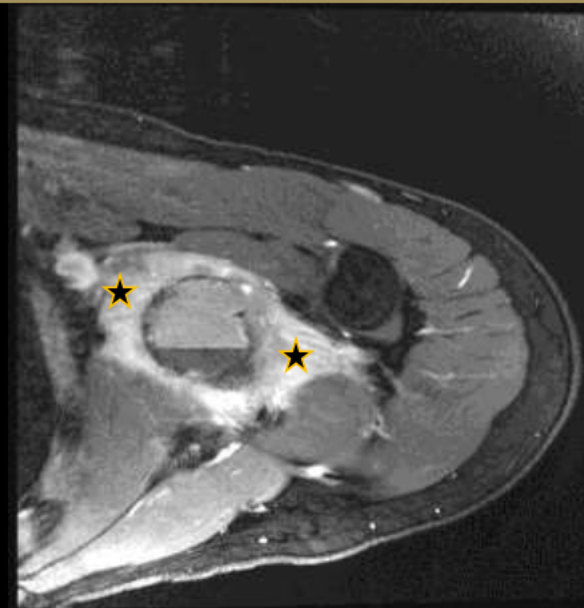
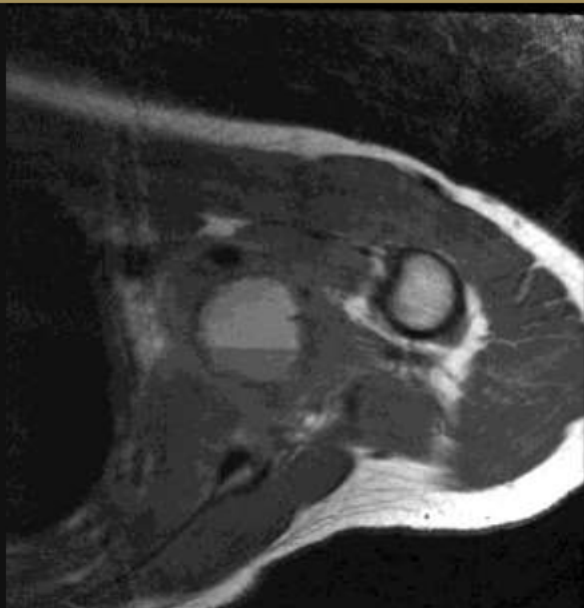
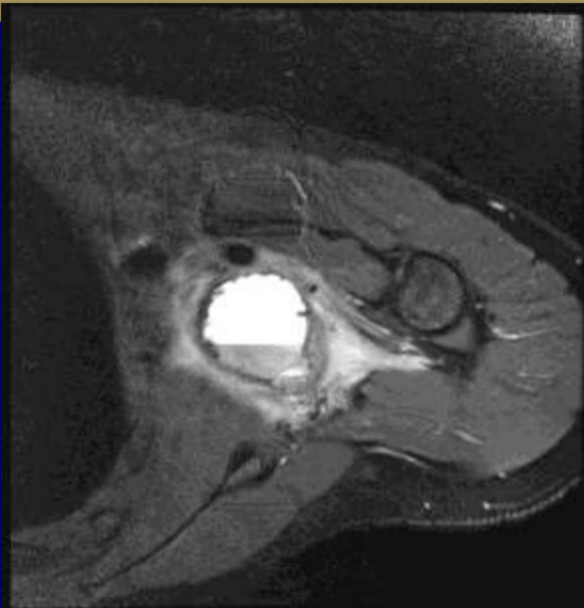


August 2011

T2

T1

T1 GD

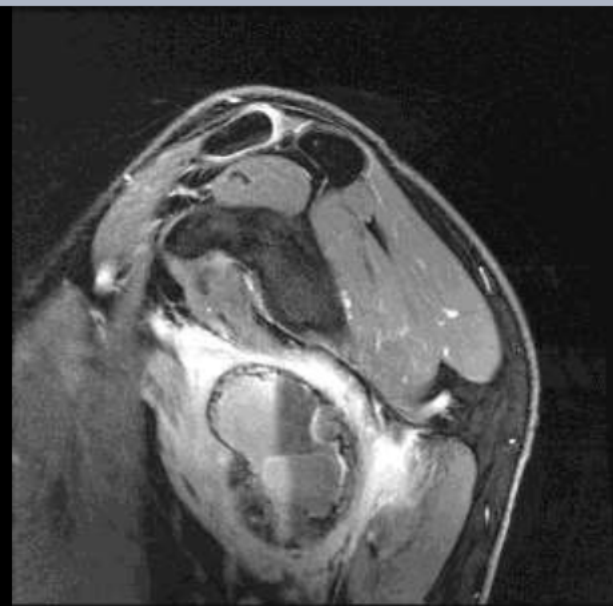
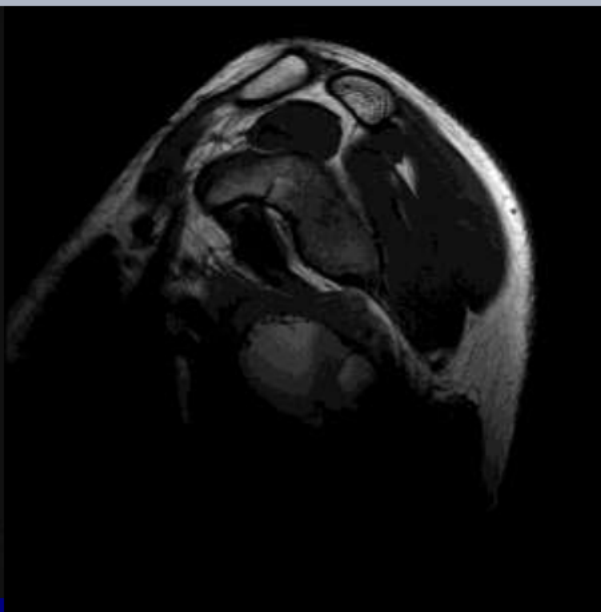
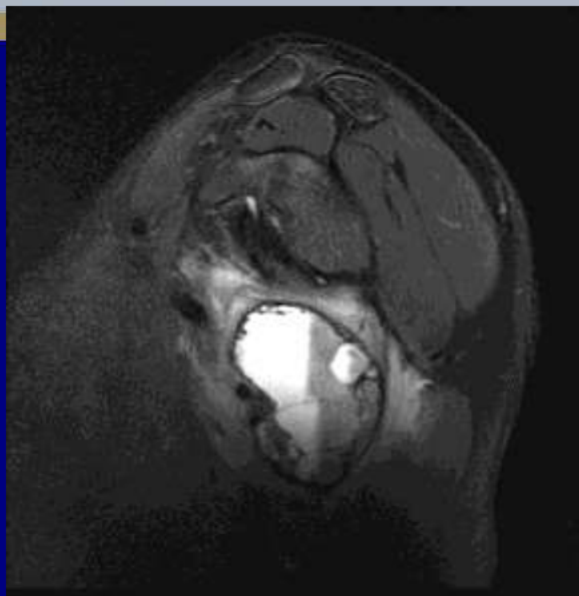


Sagittal

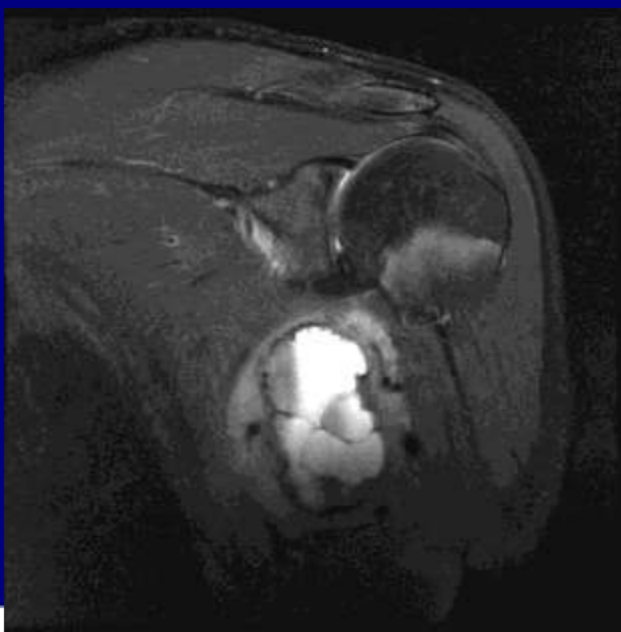
T2

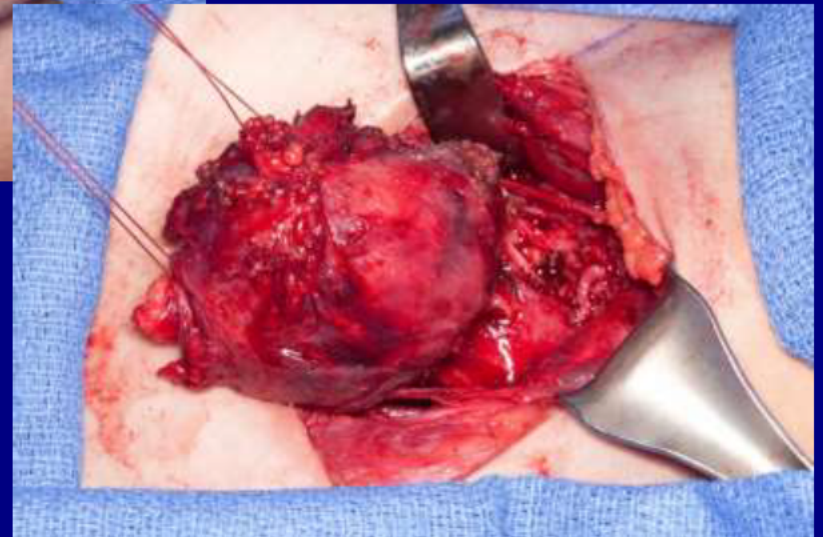
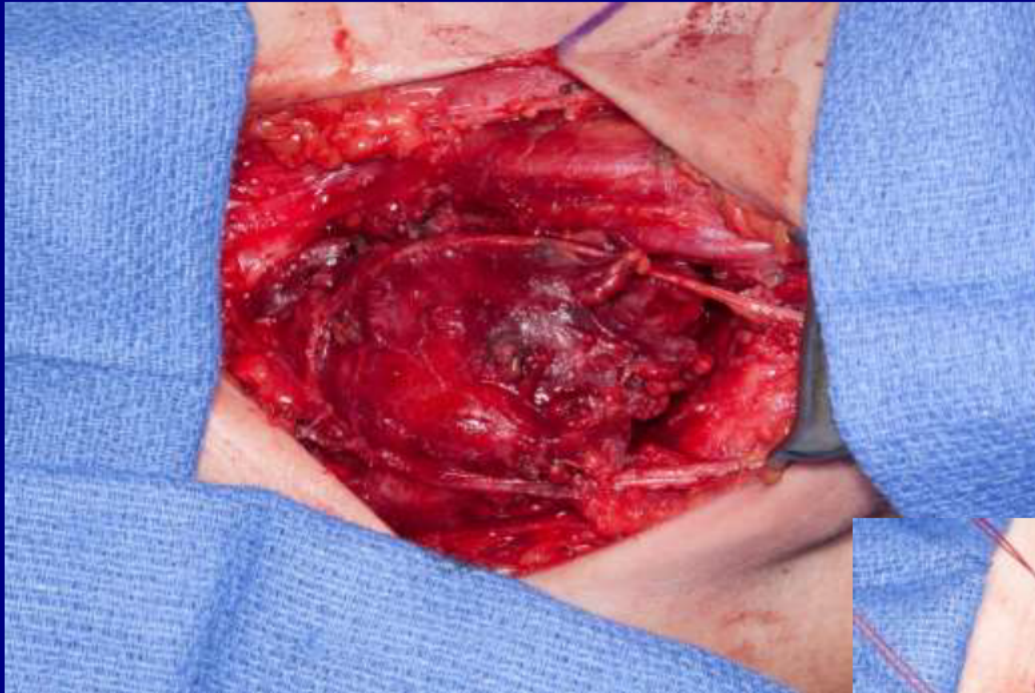
T1

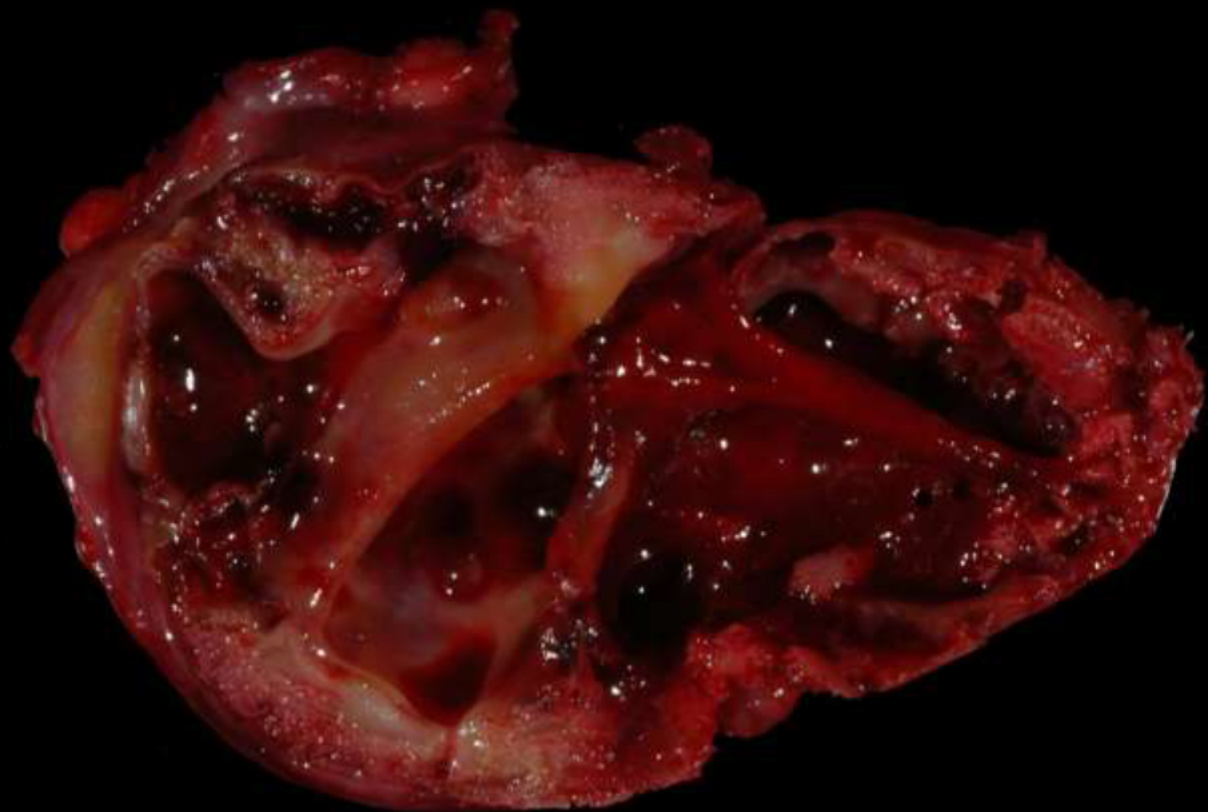
T1 GD

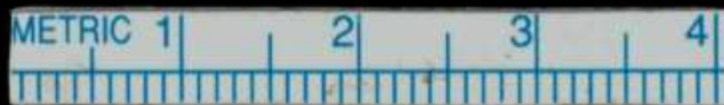


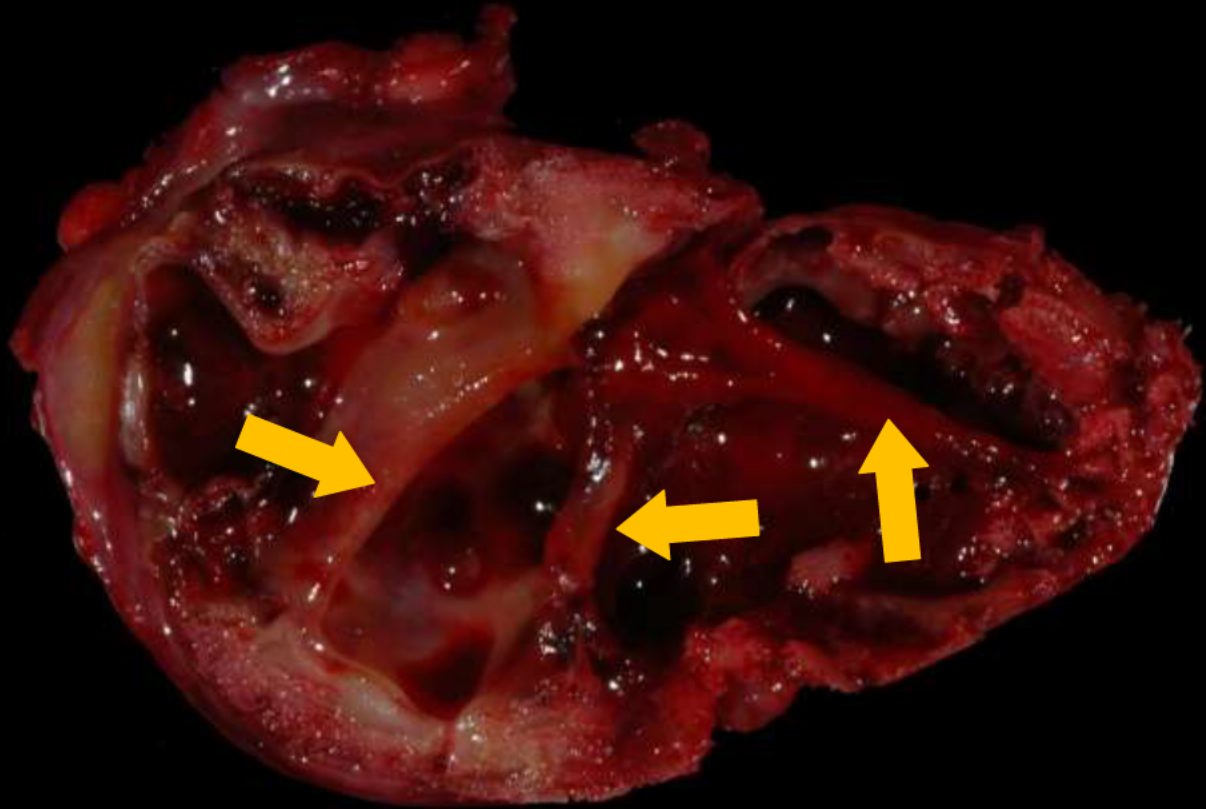
Coronal T2

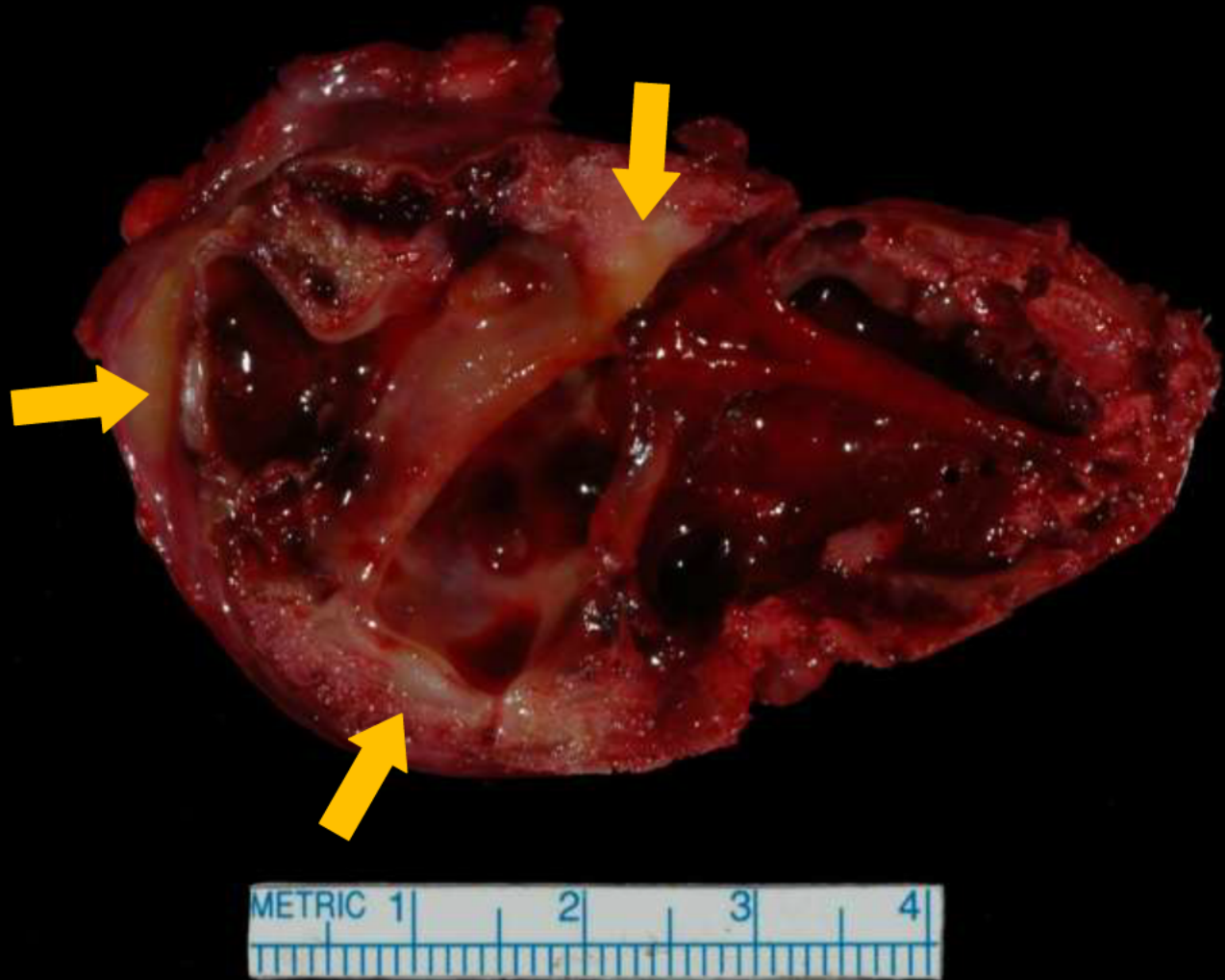


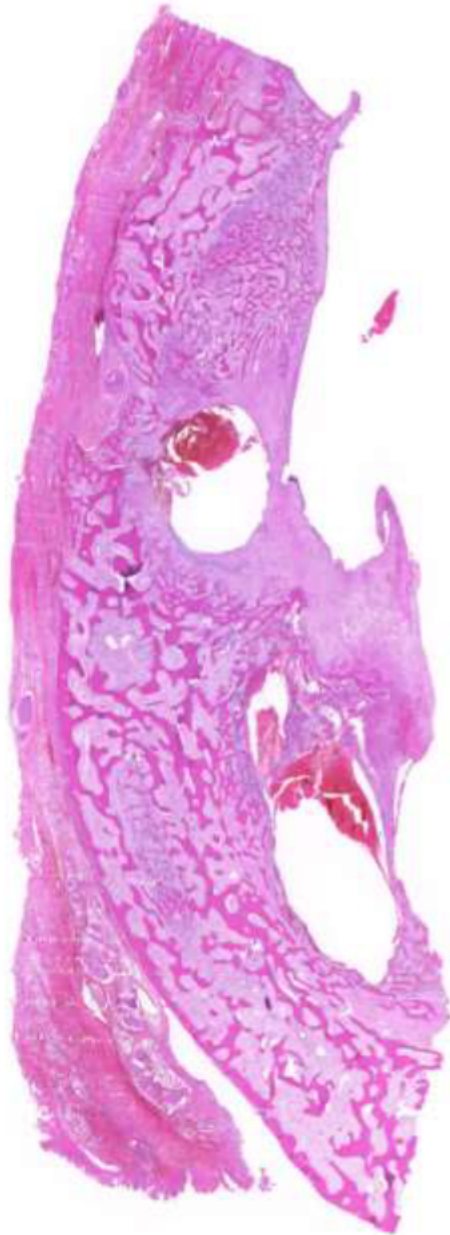


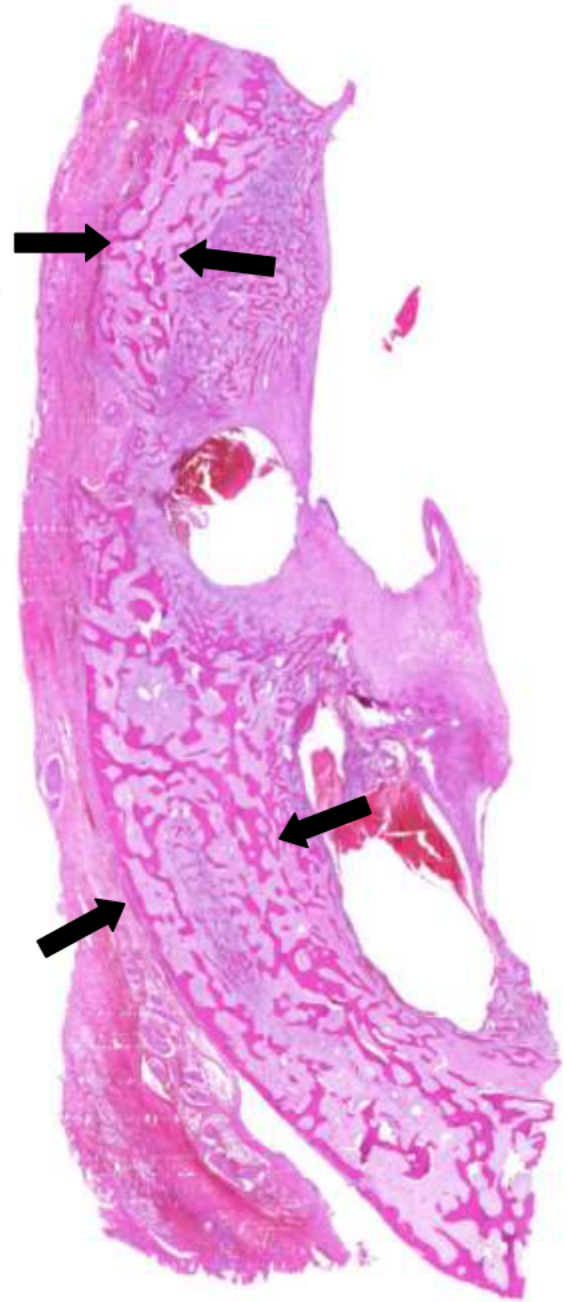
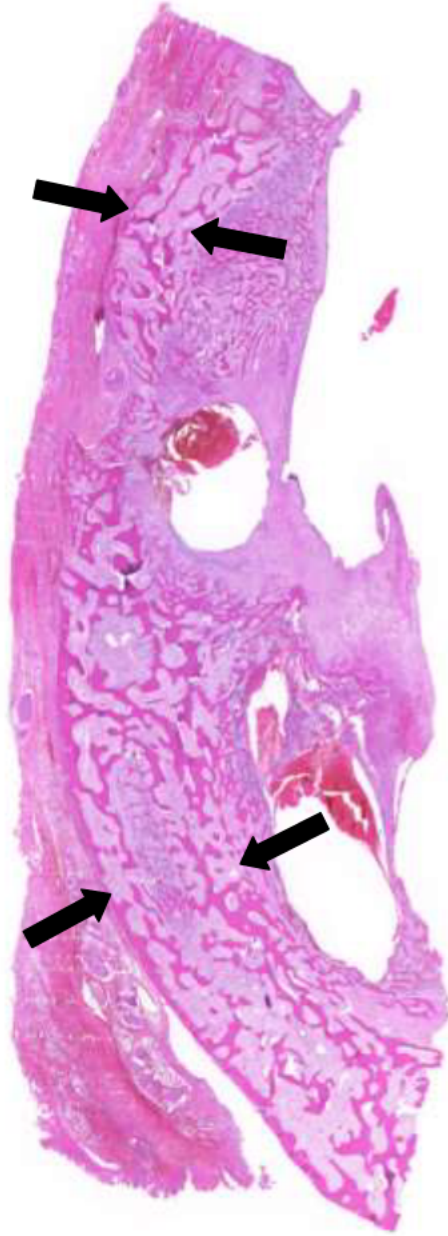












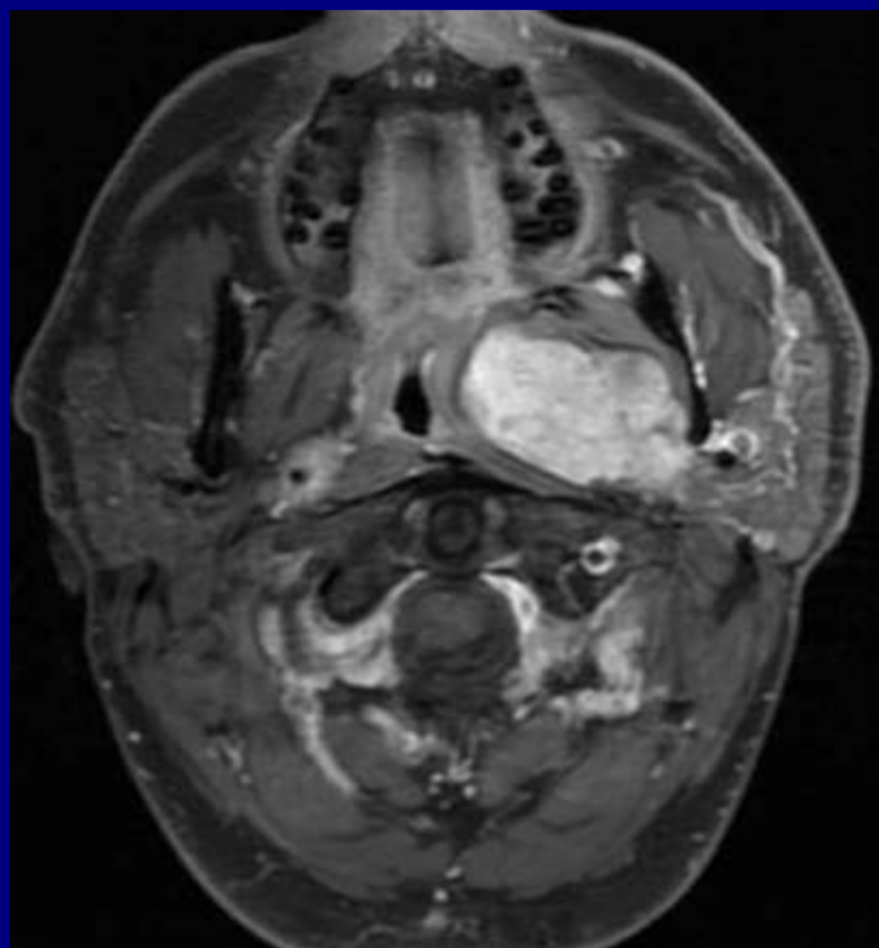
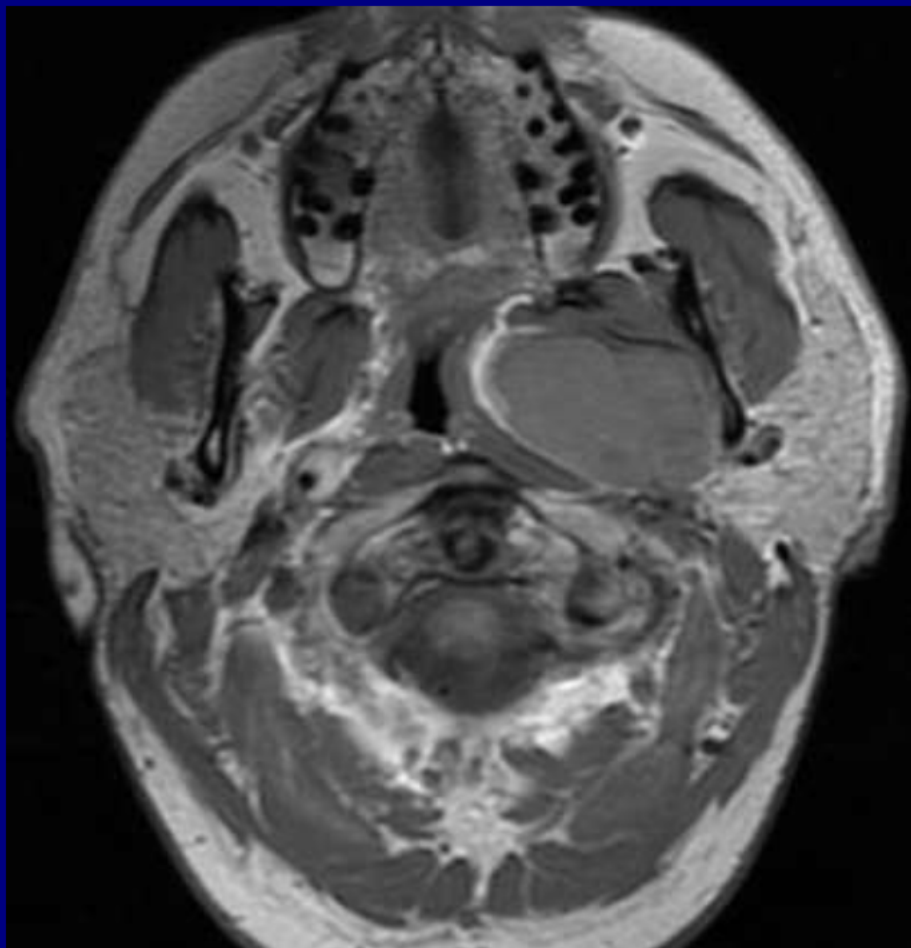


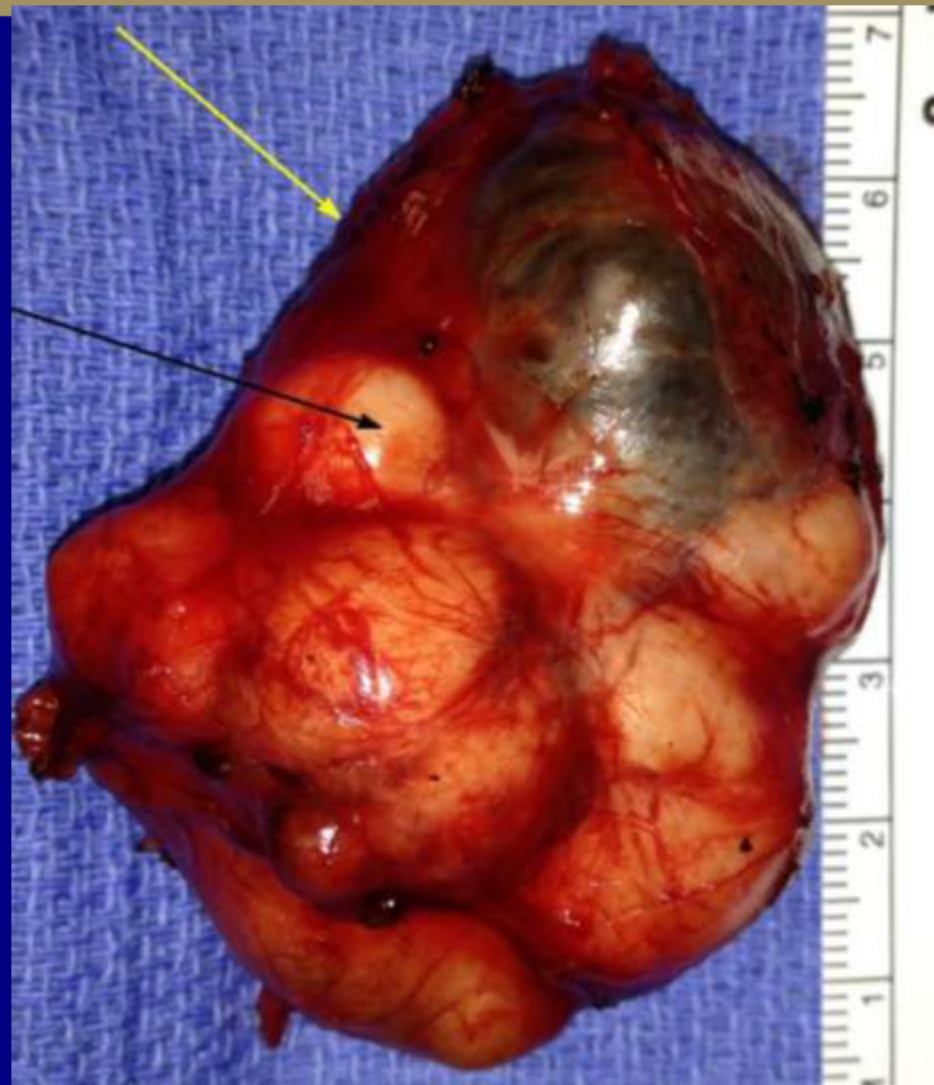
Heterotopic Ossification (Myositis Ossificans)/Liquified Hematoma

Allison Clapp, MD
Mayo Clinic
Rochester, Minnesota

Neuroradiology Best Case

47-year-old Caucasian male presents with the incidental finding of a left parapharyngeal space mass. Imaging was initially performed for headaches and periorbital pain.



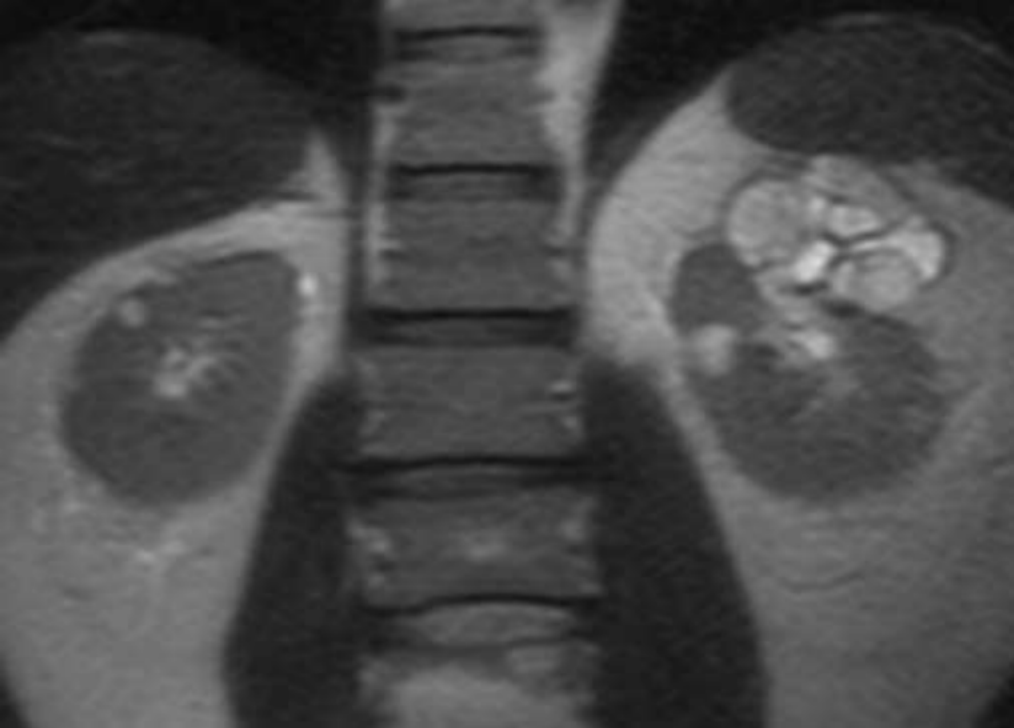


Pleomorphic Adenoma

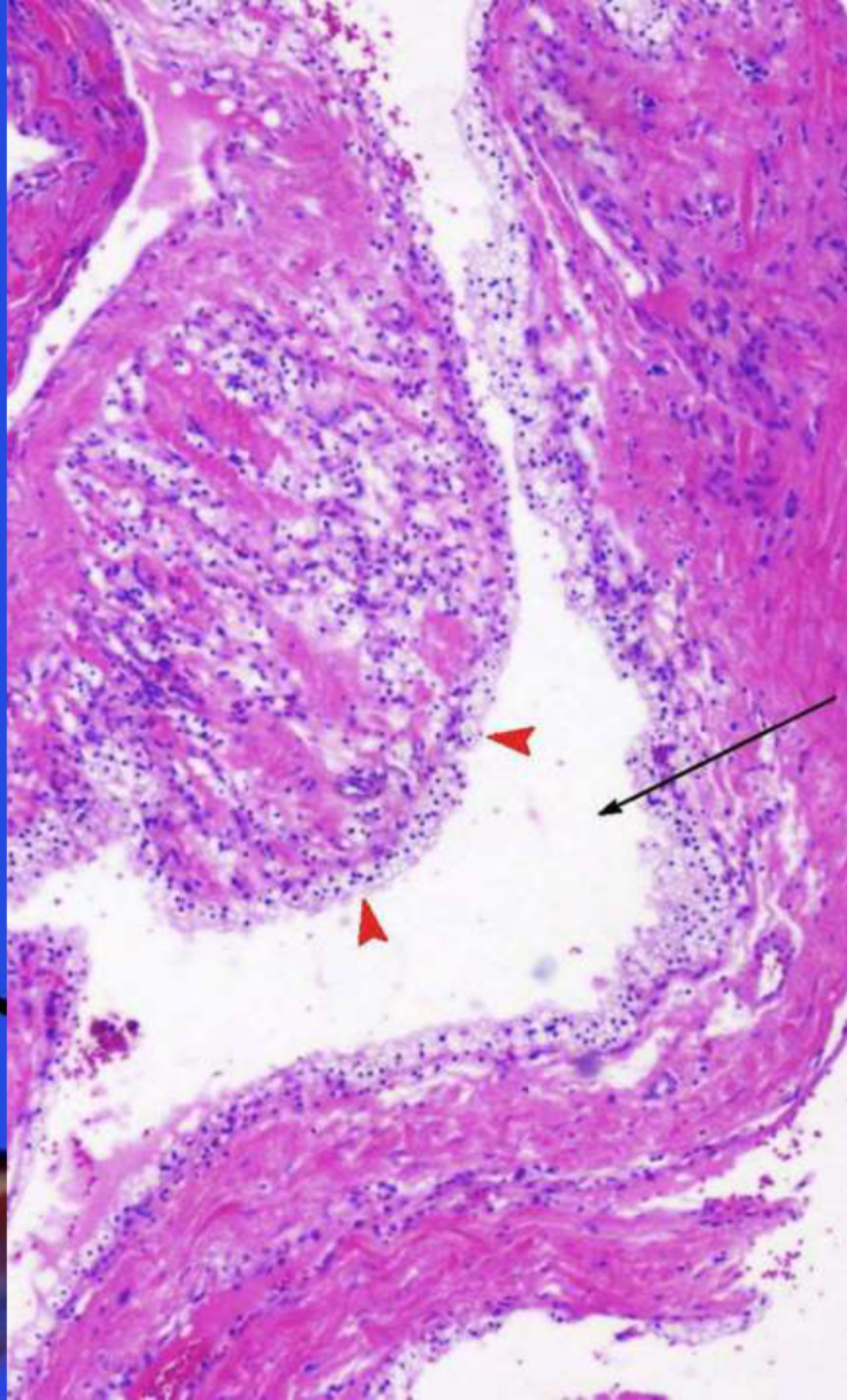
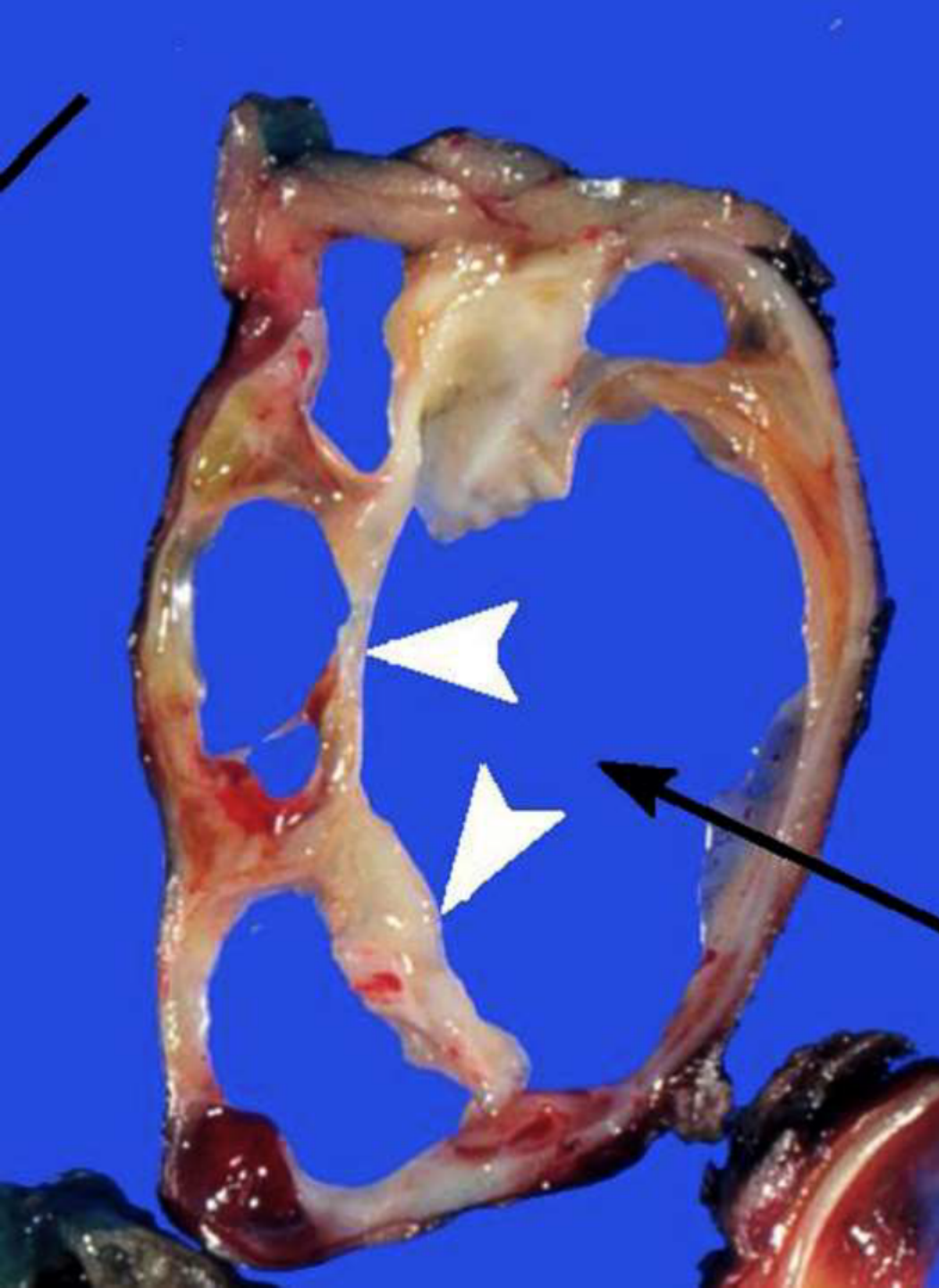
Andres Krauthamer, MD
George Washington University
Washington, DC

Genitourinary Best Case

60-year-old African American male
with history of chronic hepatitis C and
hypertension with incidentally
discovered renal mass



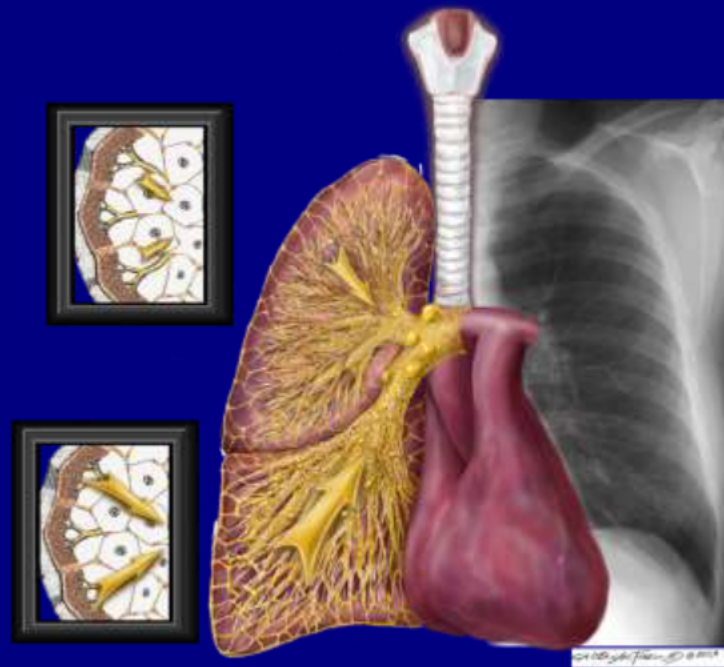




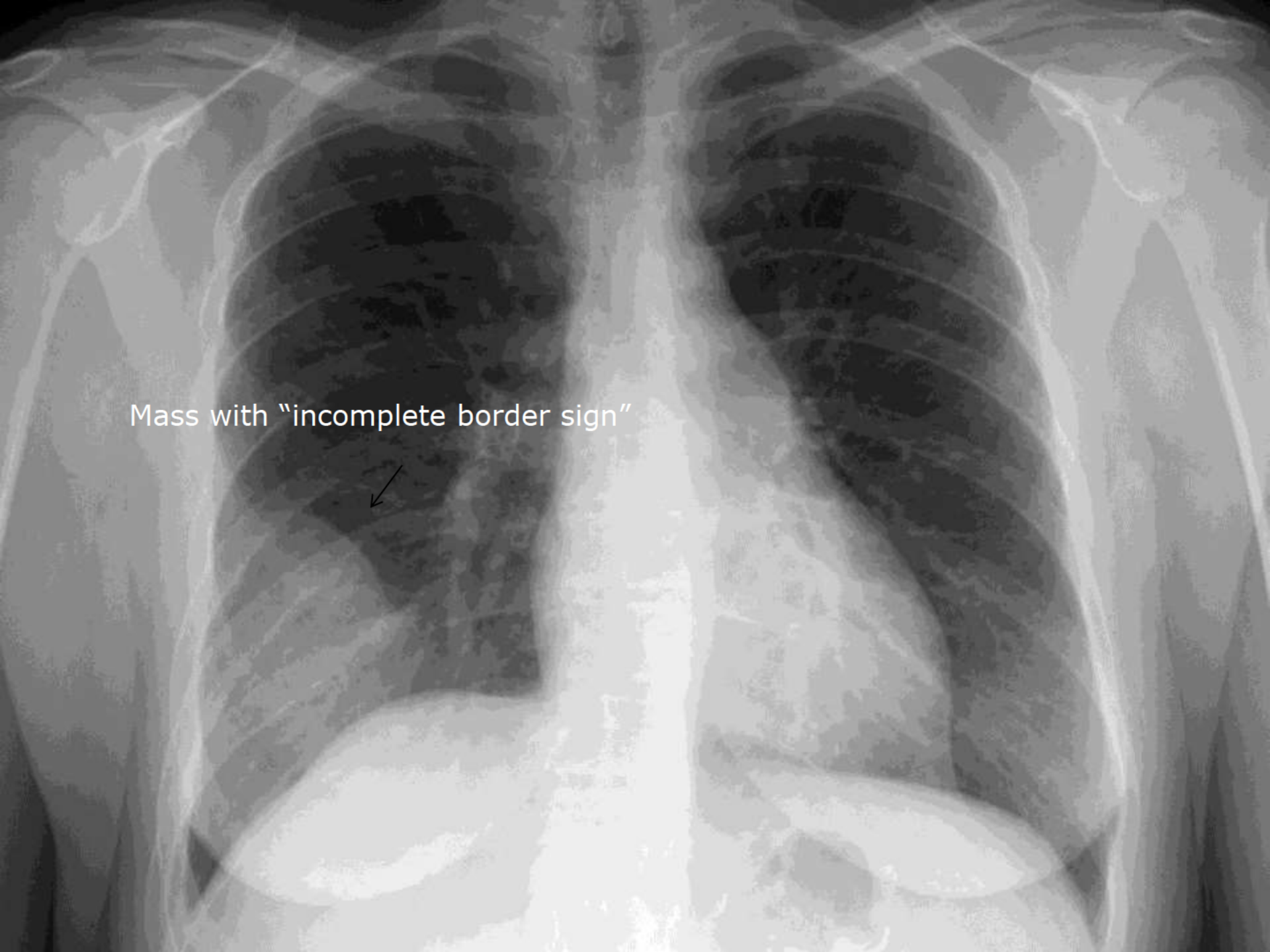
Multilocular Cystic Renal Cell Carcinoma

Ambereen Khan, MD
Wayne State University
Detroit, Michigan

PULMONARY AND MEDIASTINAL IMAGING

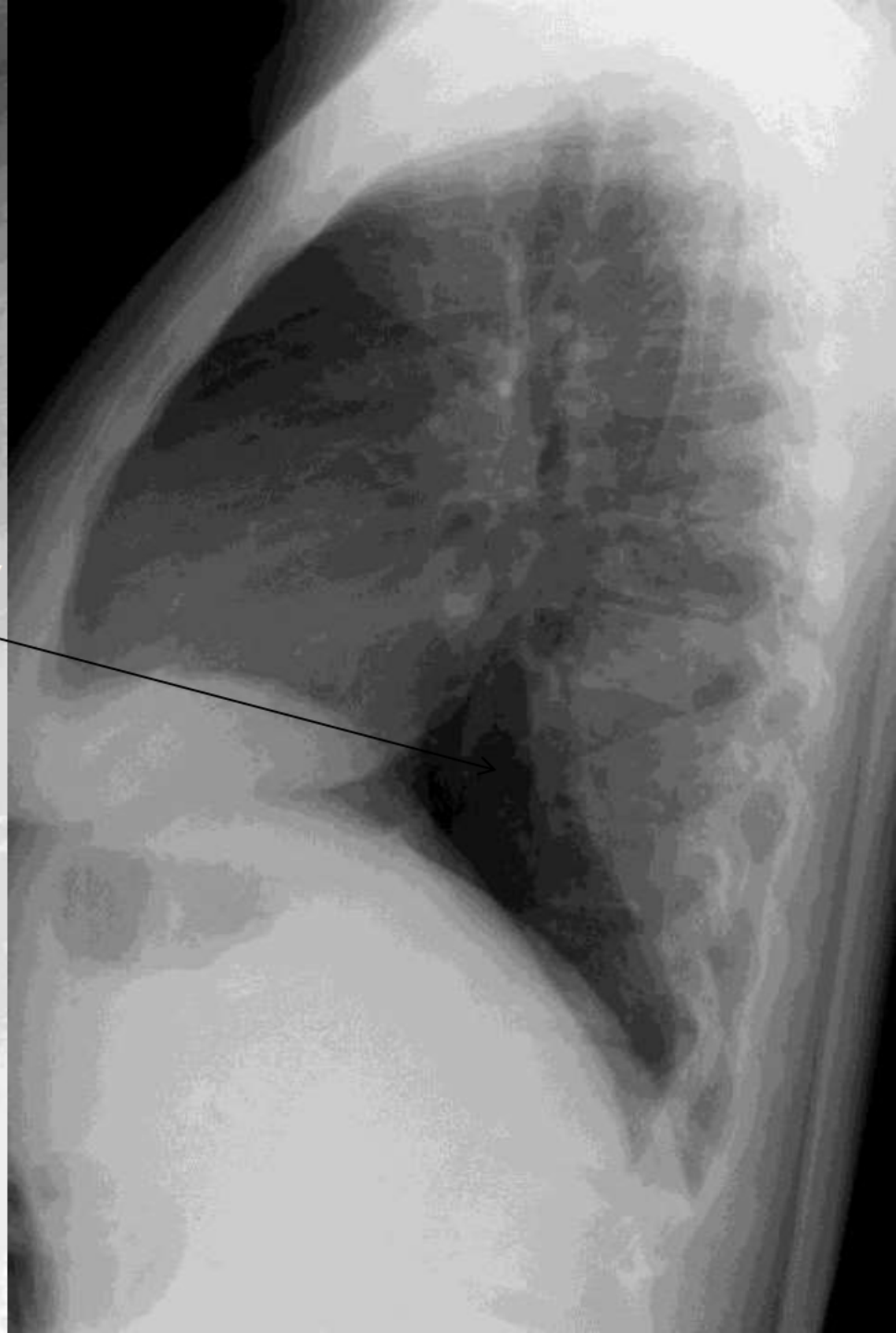
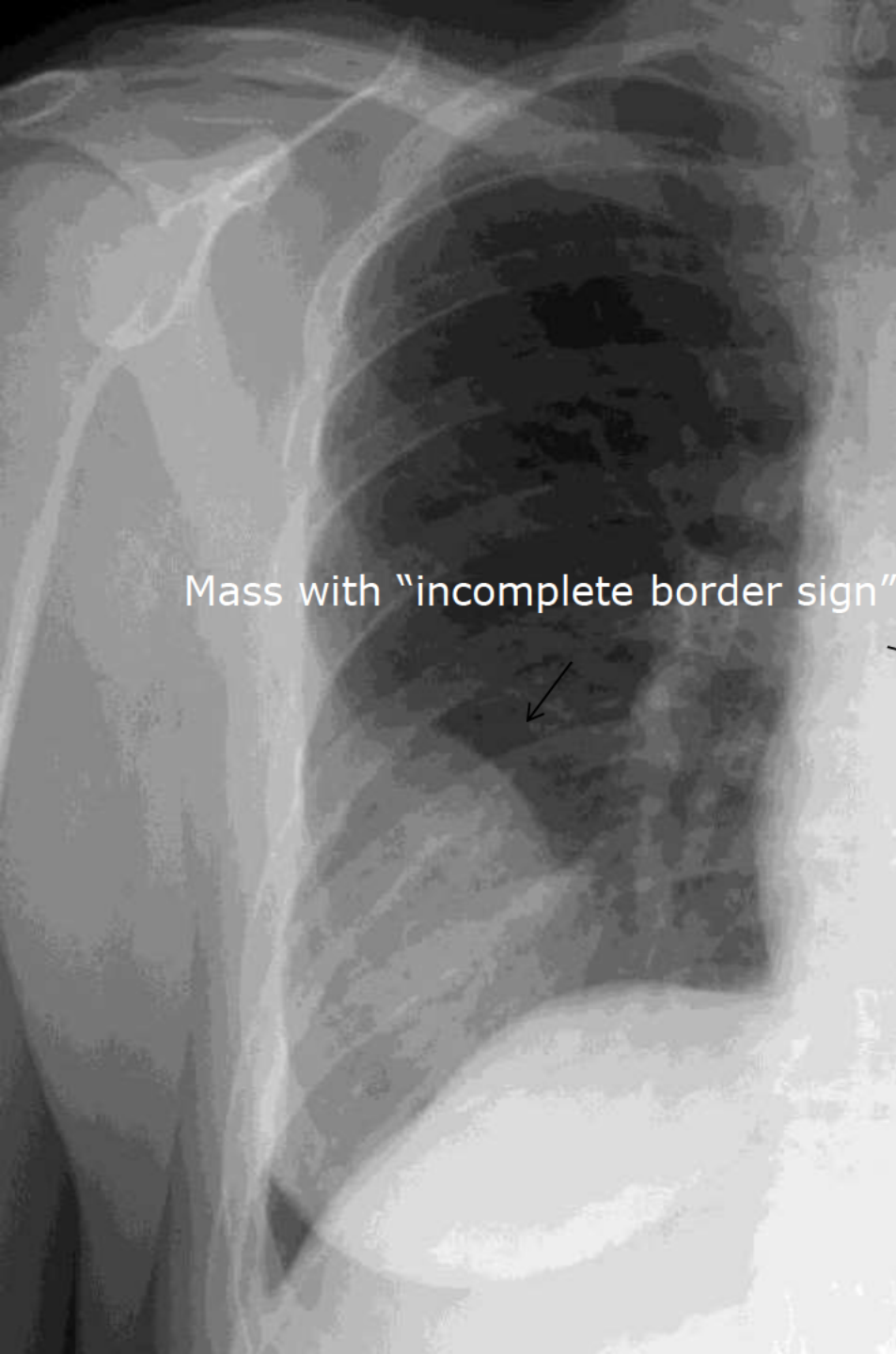


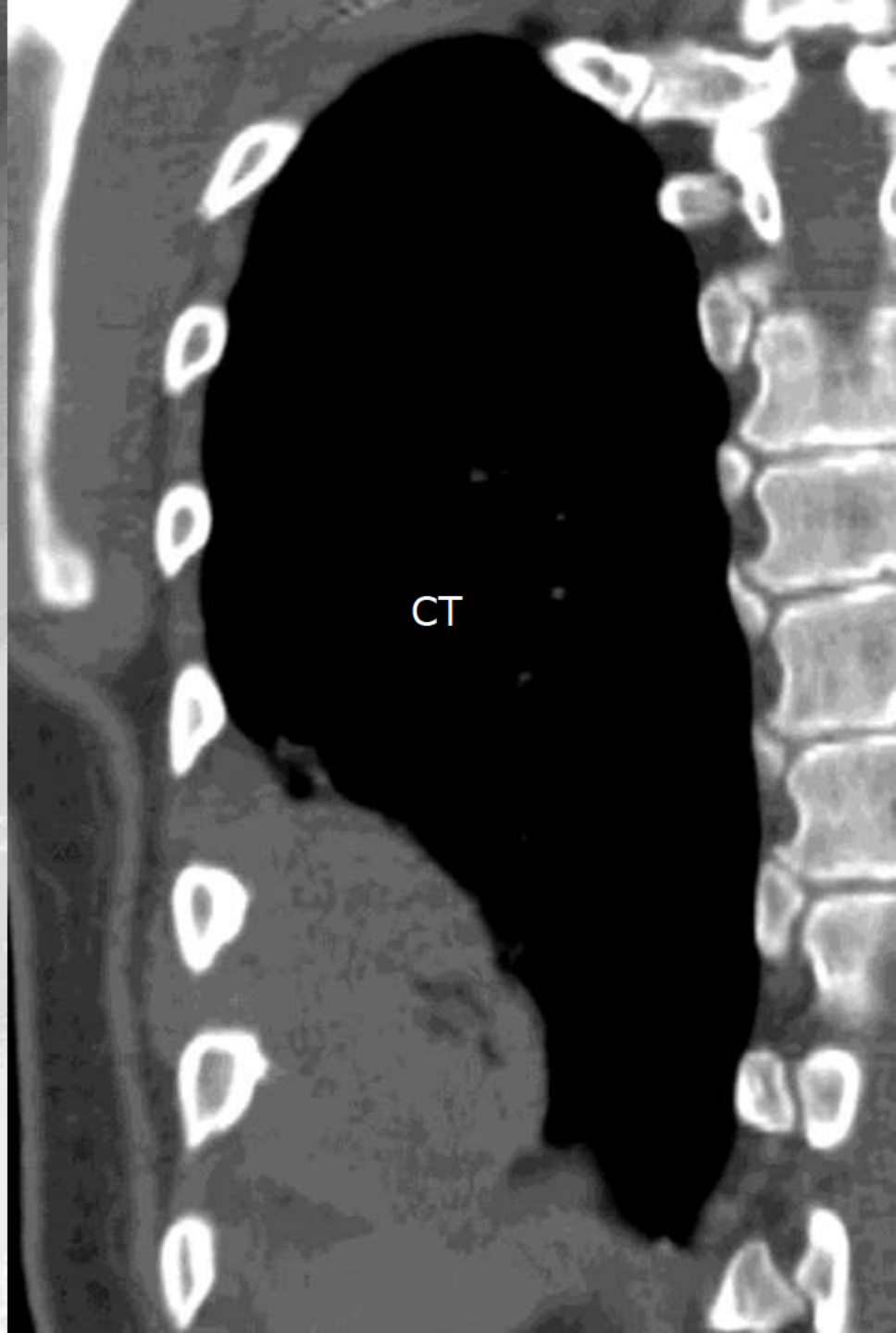
31-year-old female with right-sided
chest pain



Mass with "incomplete border sign"

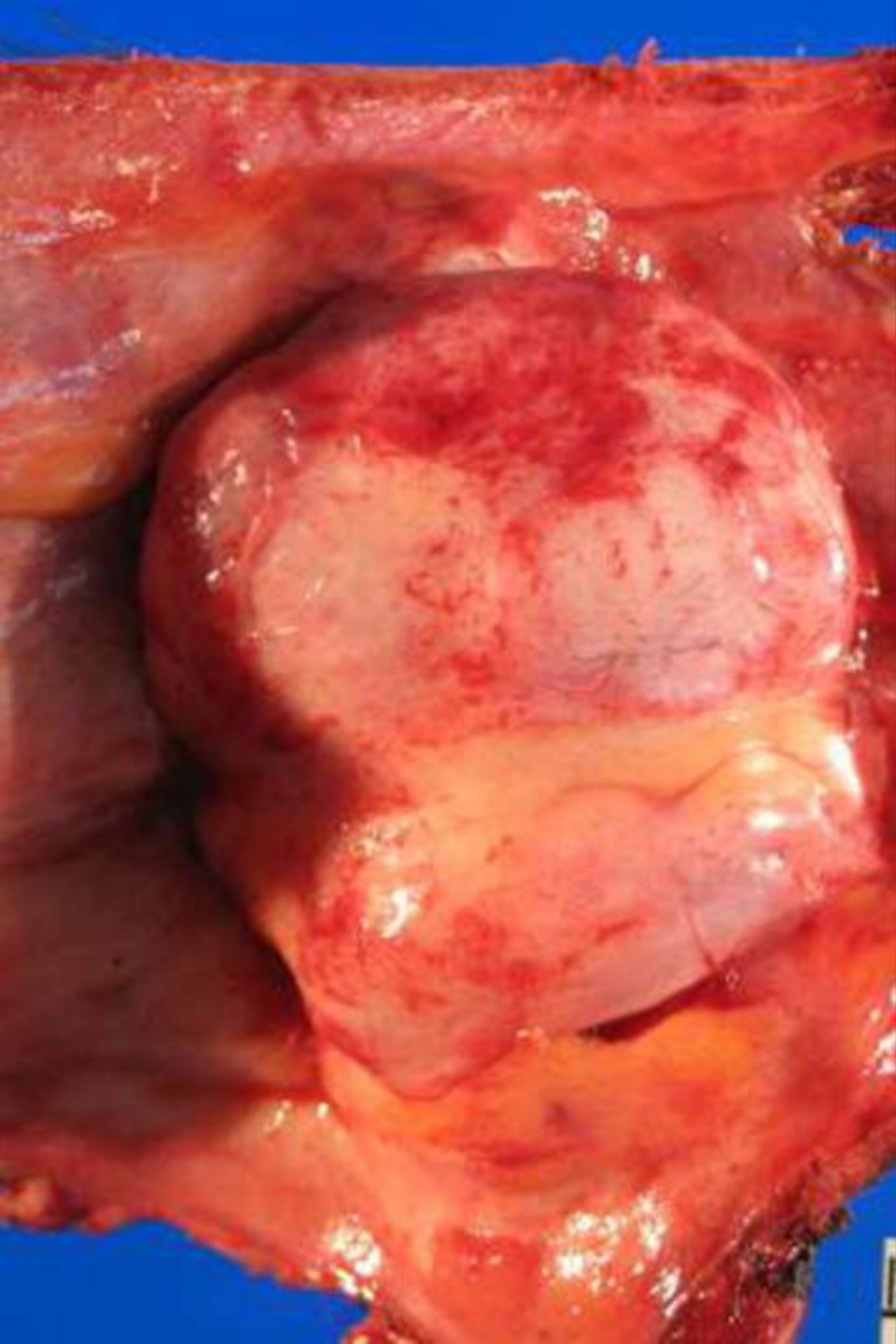


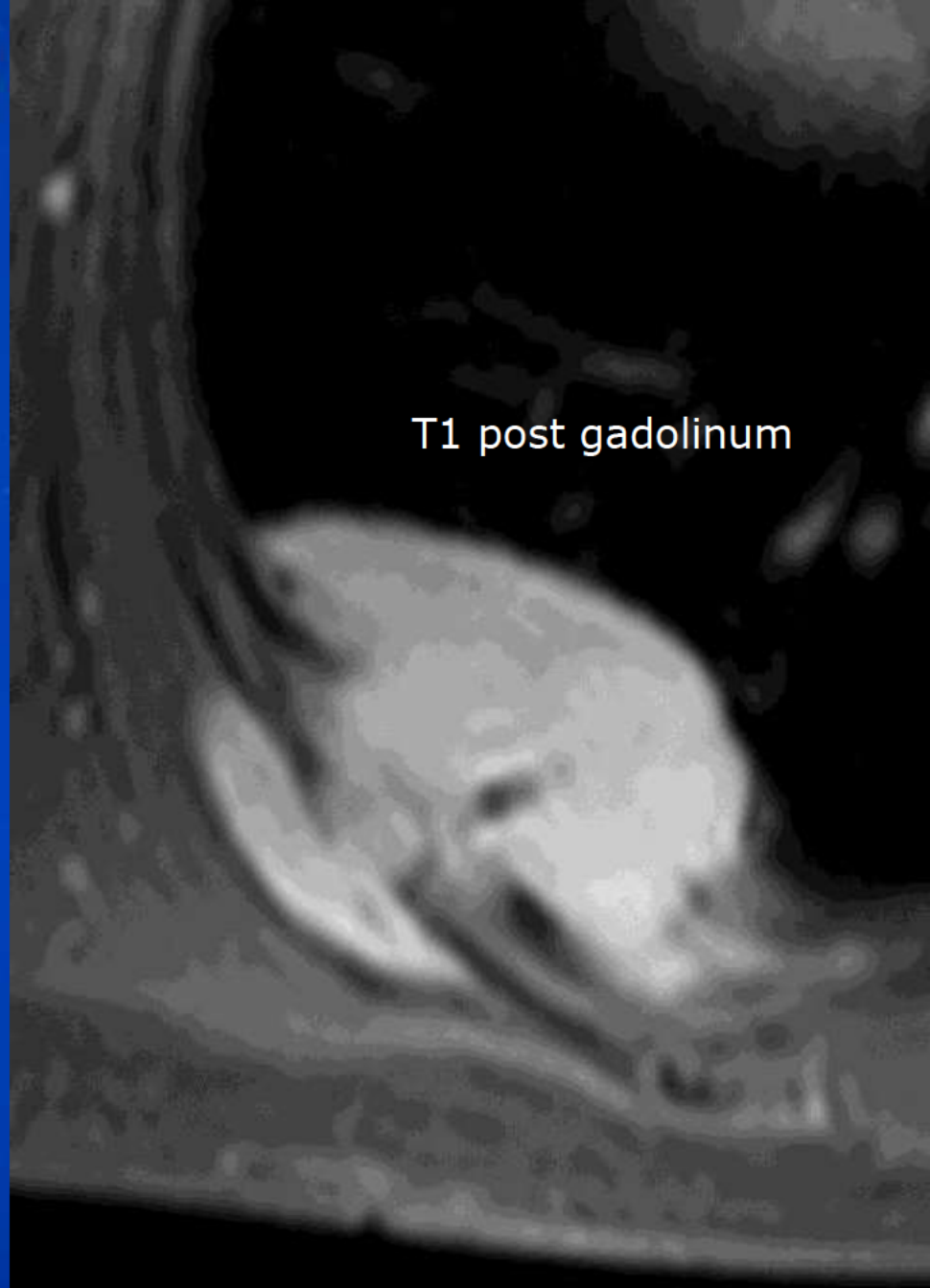


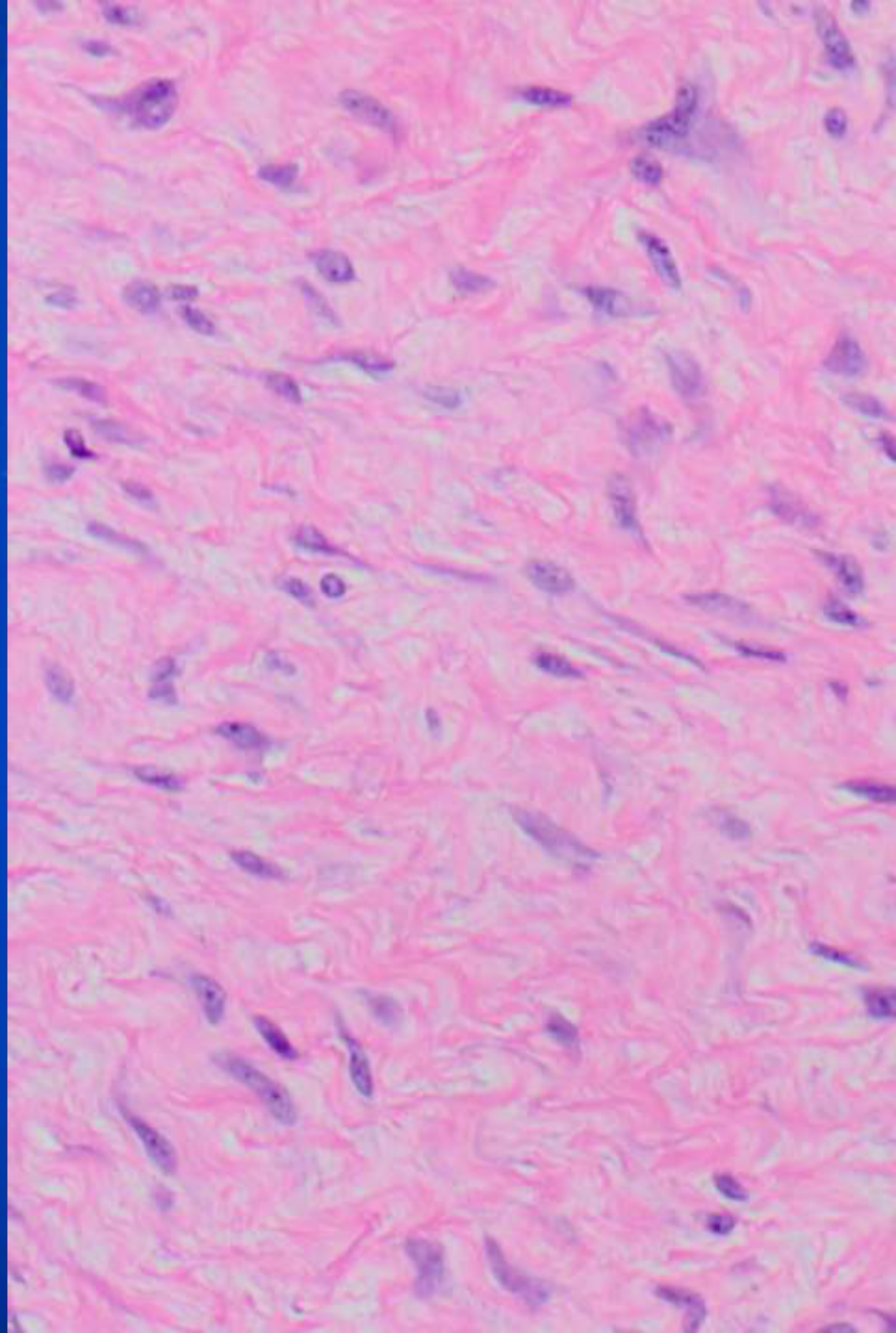
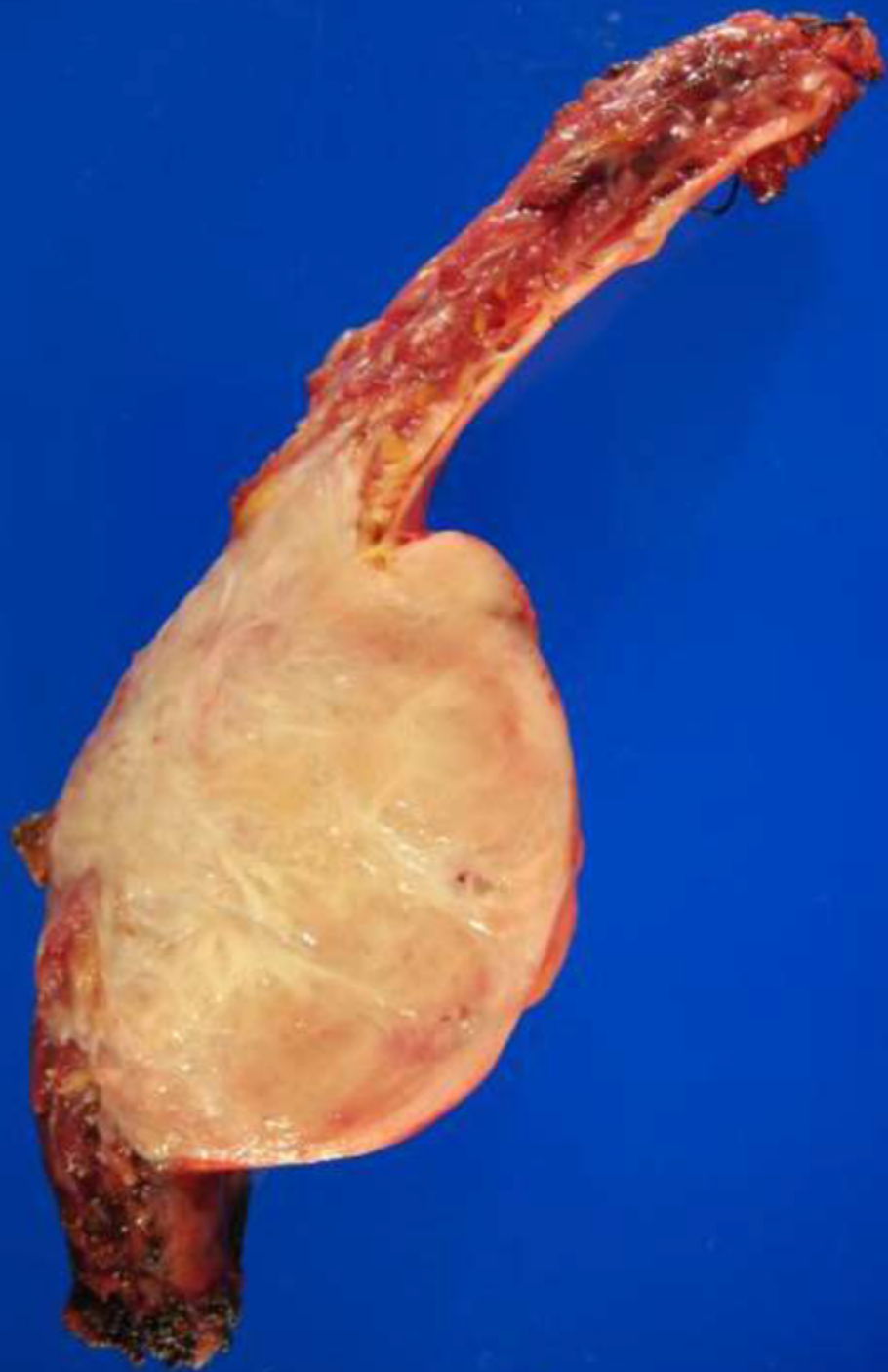








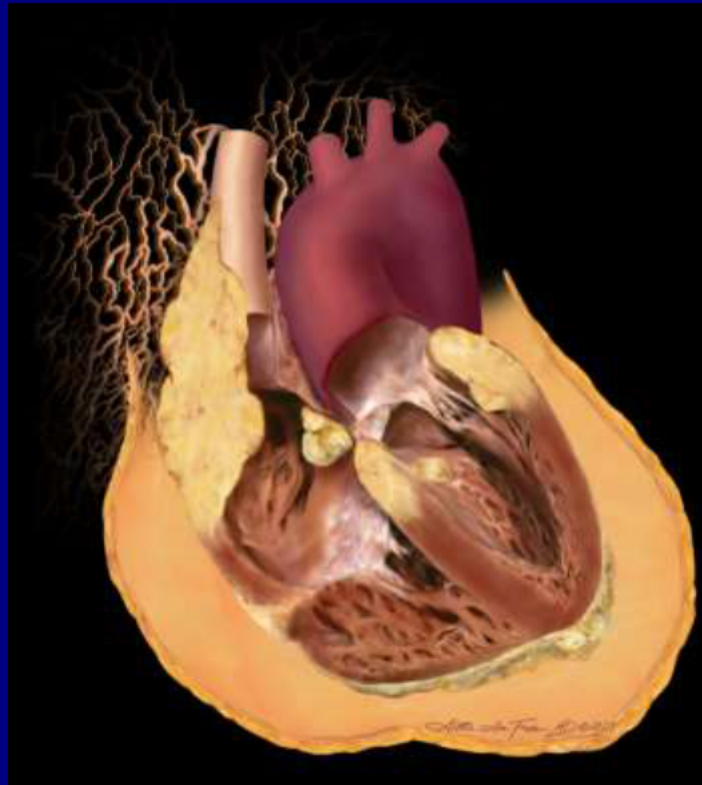




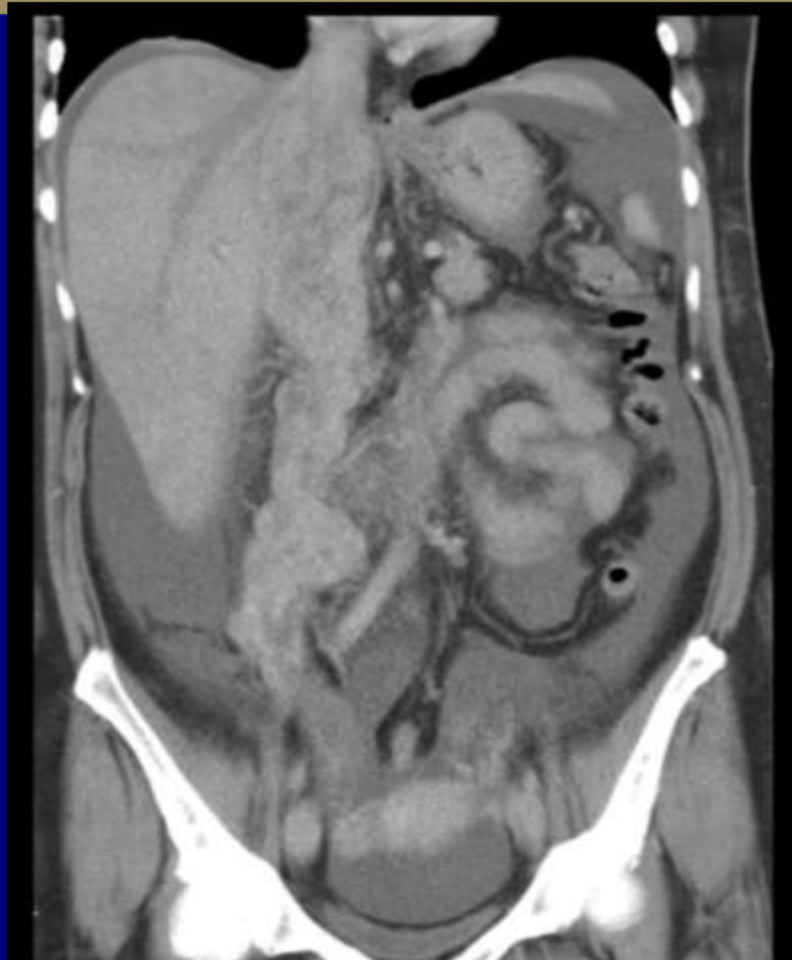
Desmoid of the Chest Wall

Kenneth Corse, MD
SUNY Upstate Medical University
Syracuse, New York

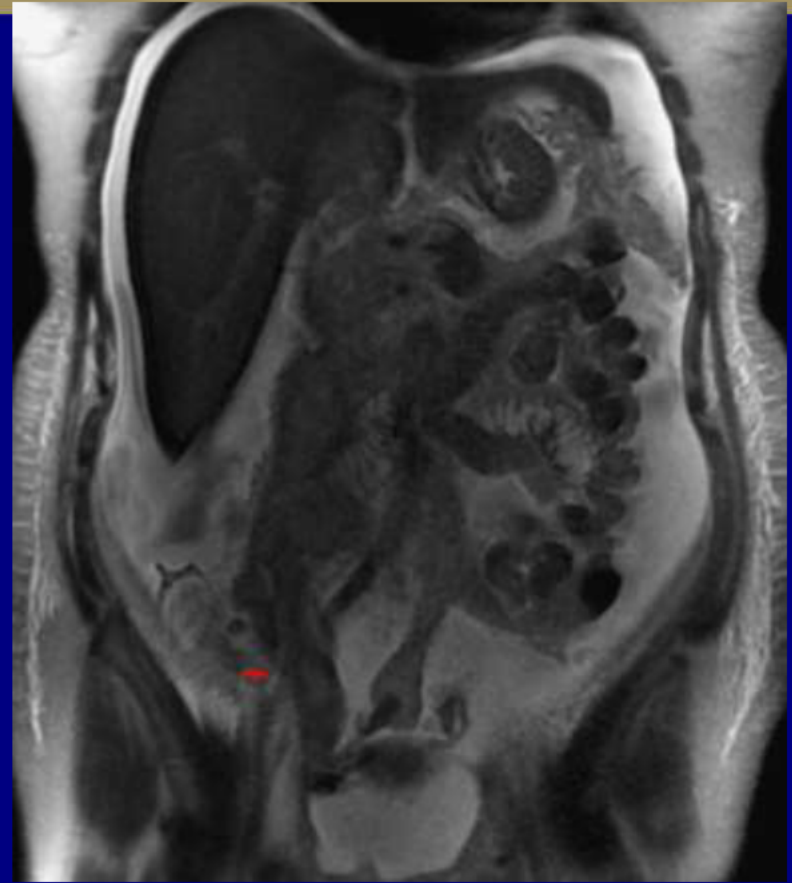
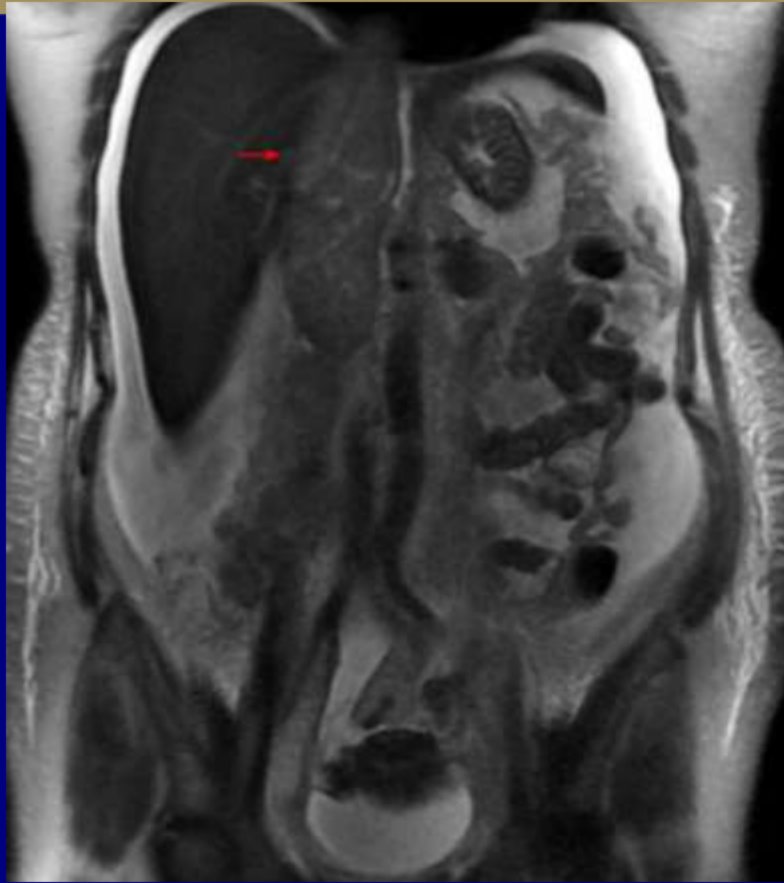
Cardiovascular Imaging



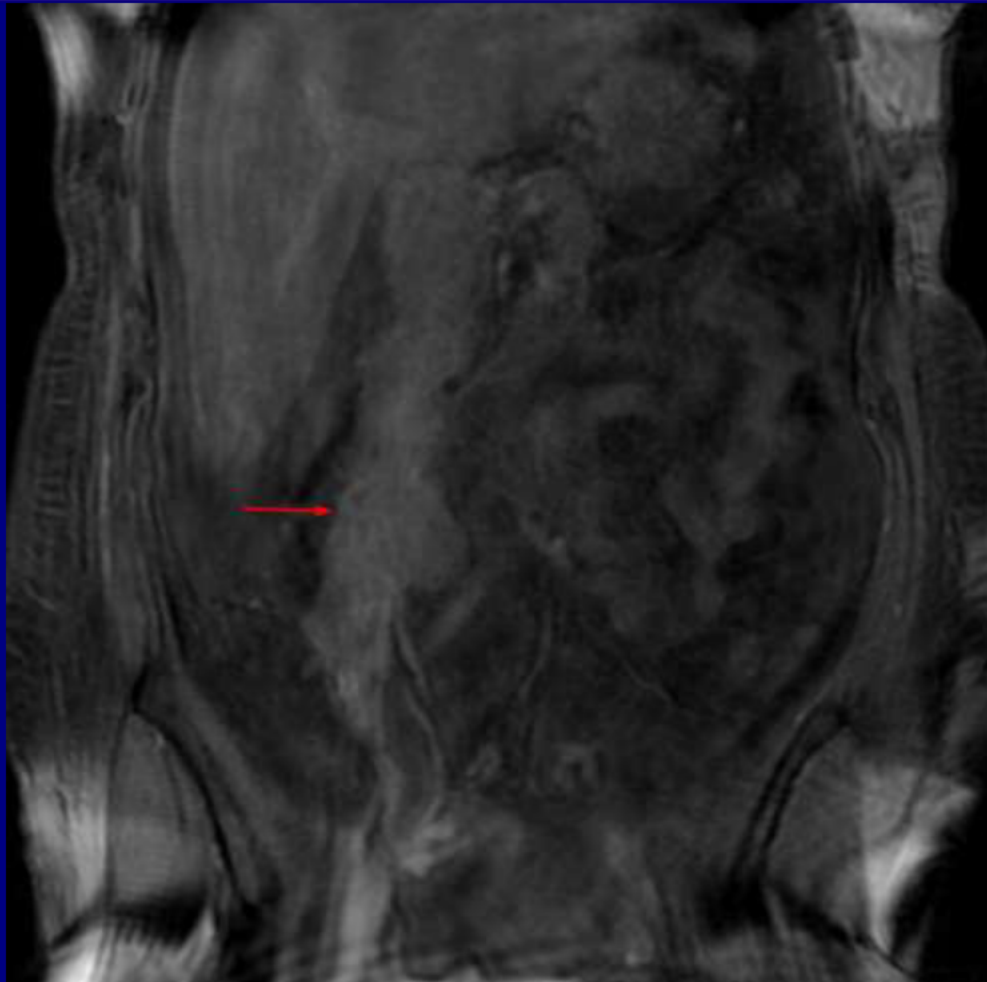
53-year-old female with two month history of epigastric pain, increasing dyspnea and weight loss



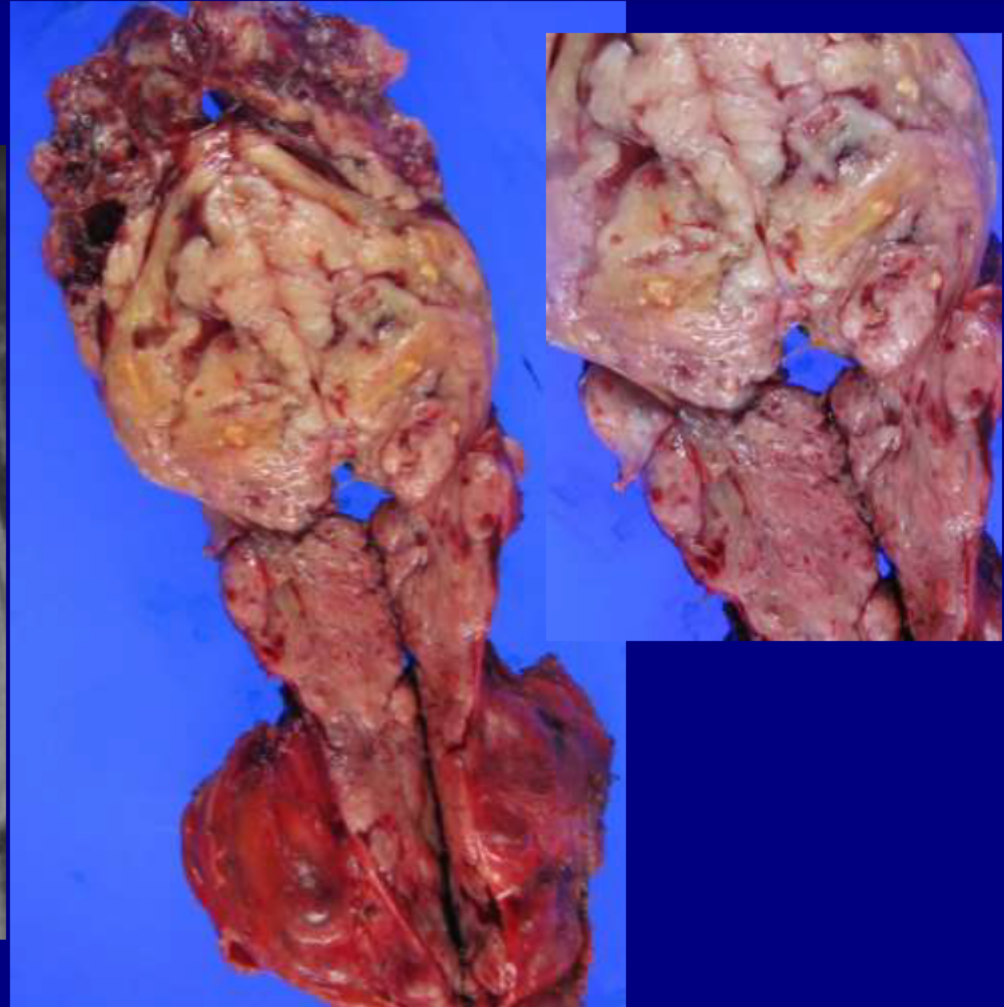
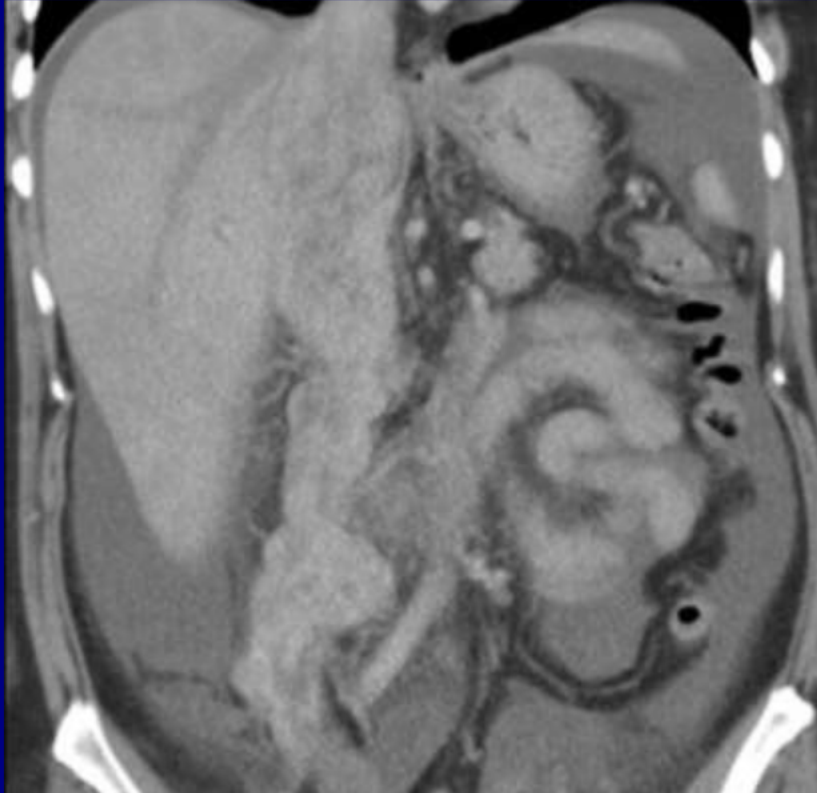
- Contrast-enhanced CT, coronal reformat, shows that the entire IVC is irregularly distended and filled with a complex, heterogeneously enhancing soft tissue mass.



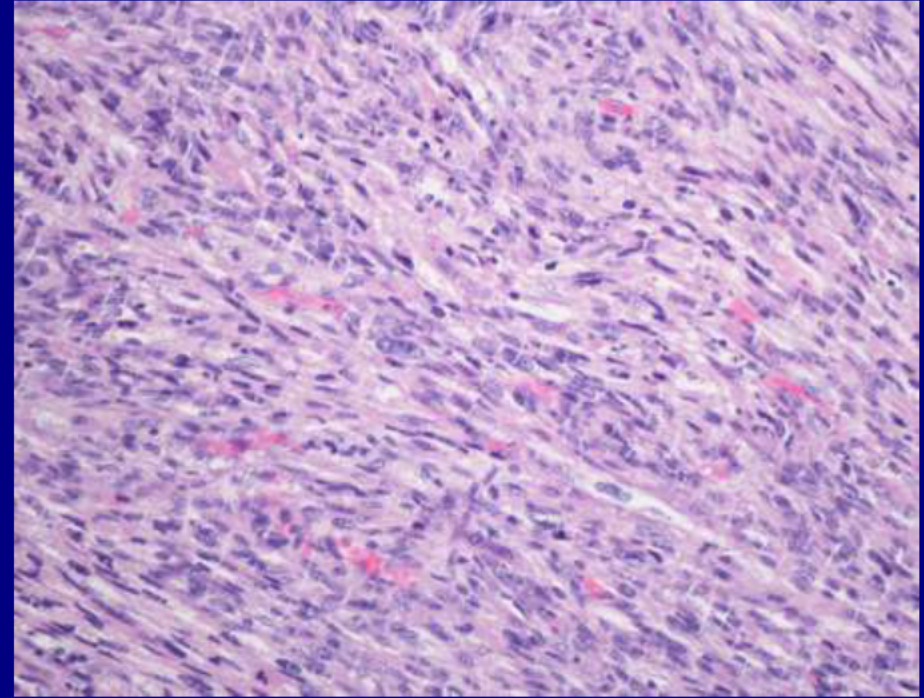
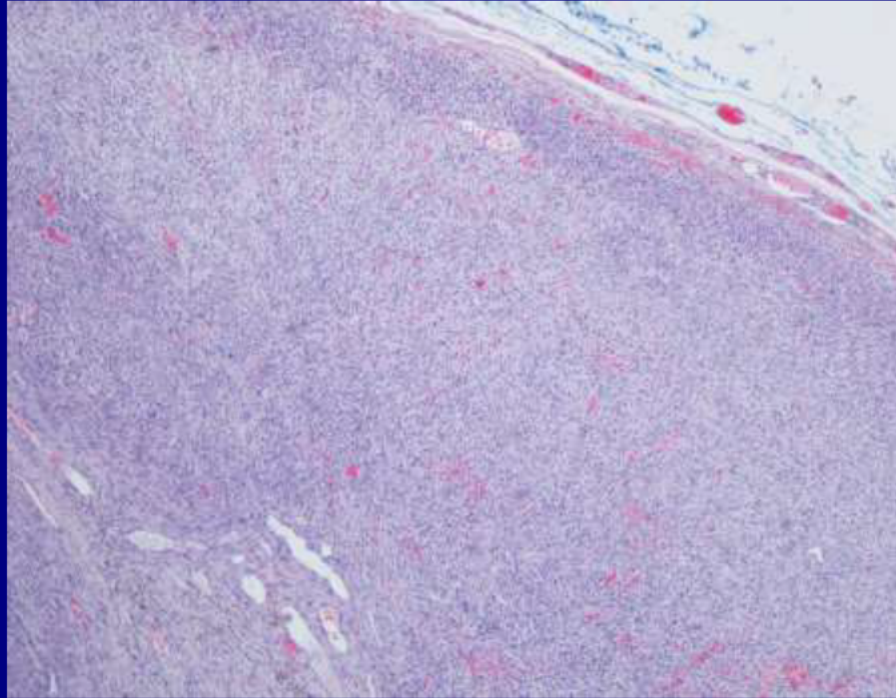
- T2-weighted MRI, coronal plane, shows the extensive intravascular lesion within the IVC is of intermediate signal intensity.



- T1-weighted MRI (fat-sat) post Gadolinium, coronal plane, shows heterogeneous enhancement within the IVC mass.



- Gross resected inferior vena cava (open) demonstrates fleshy nodules and hemorrhagic areas on the cut surface of the tumor.



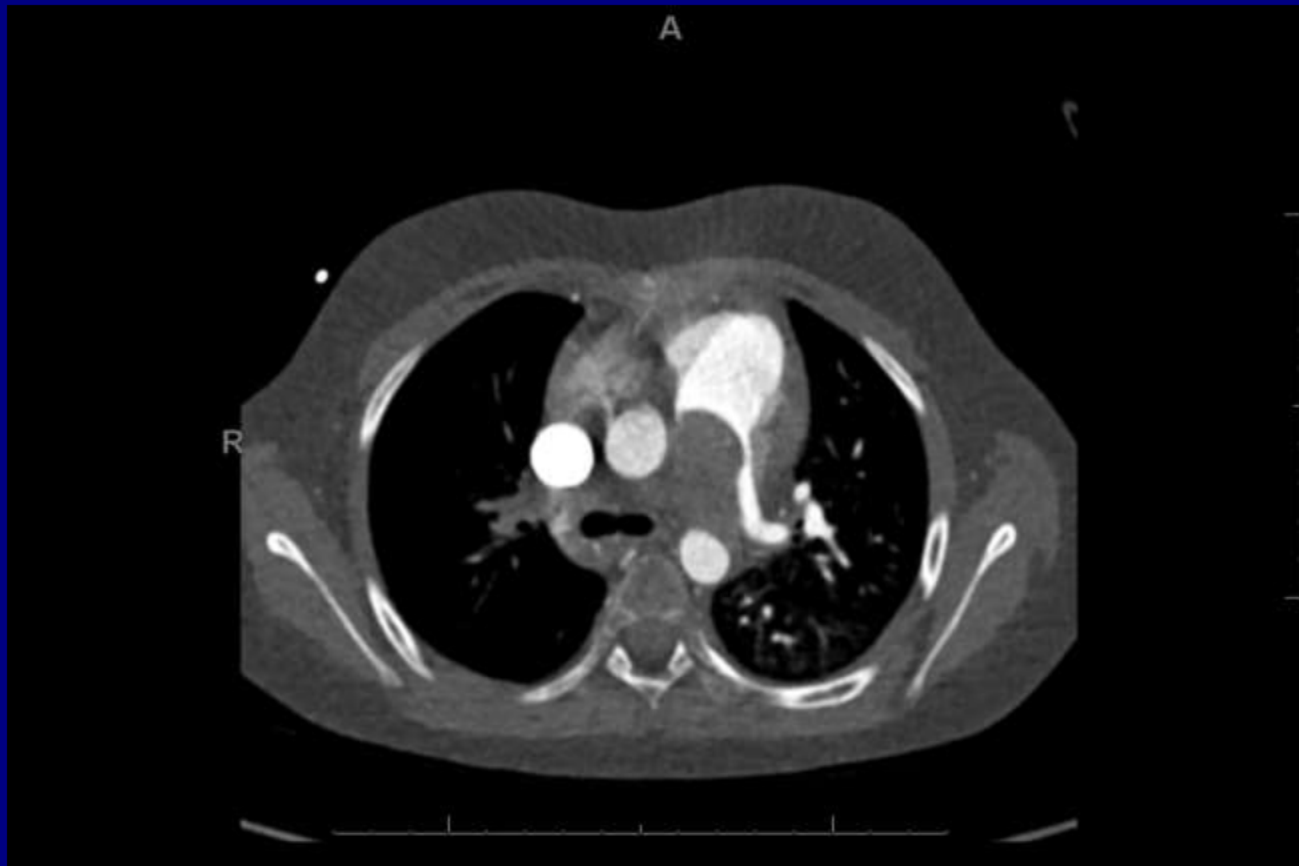
- Histology shows a highly vascular tumor demonstrating a fasciculated pattern with necrosis (<50%) and high mitotic activity.

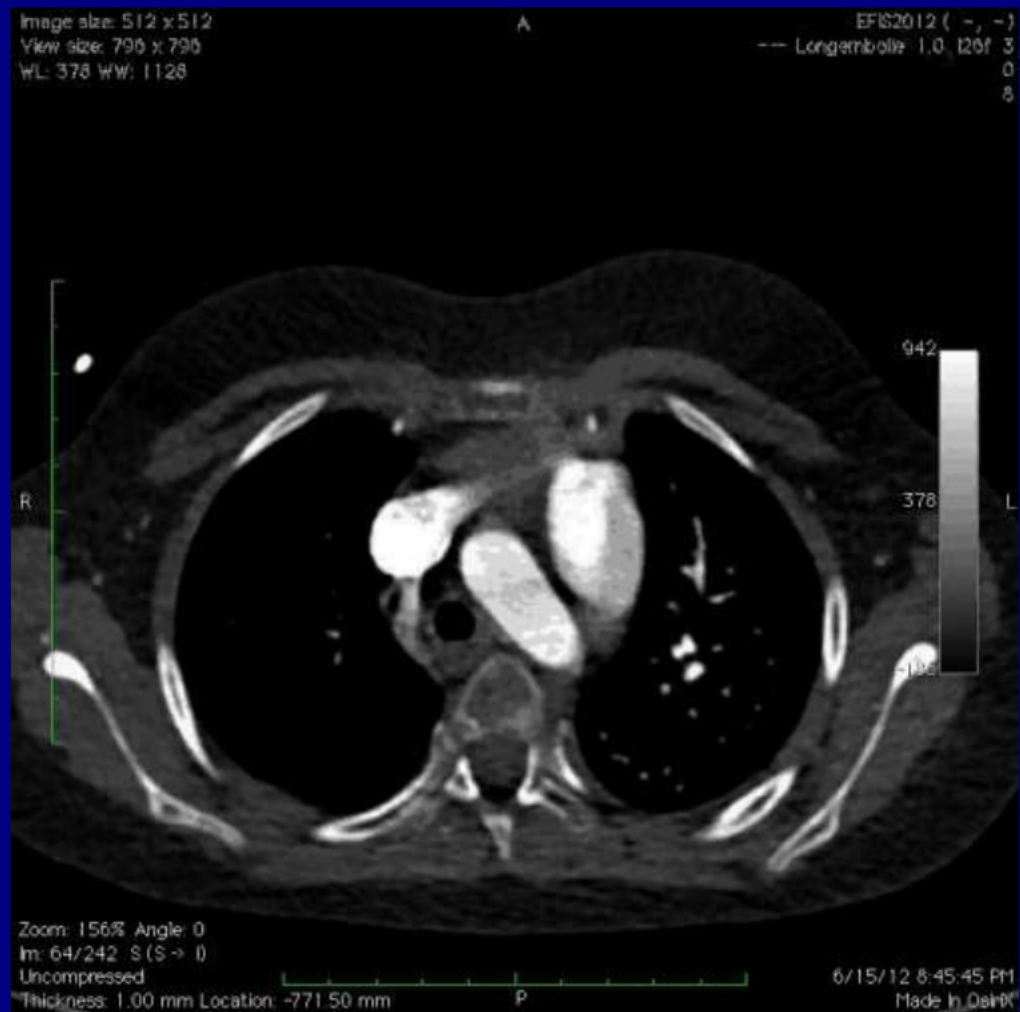
Leiomyosarcoma of the IVC

Juana Monteagudo Cortecero, MD
Hospital General y Universitario de
Alicante
Alicante, Spain

Pediatric Best Case

5-year-old male with myelodysplasia who
presents with fever and brief loss of
consciousness

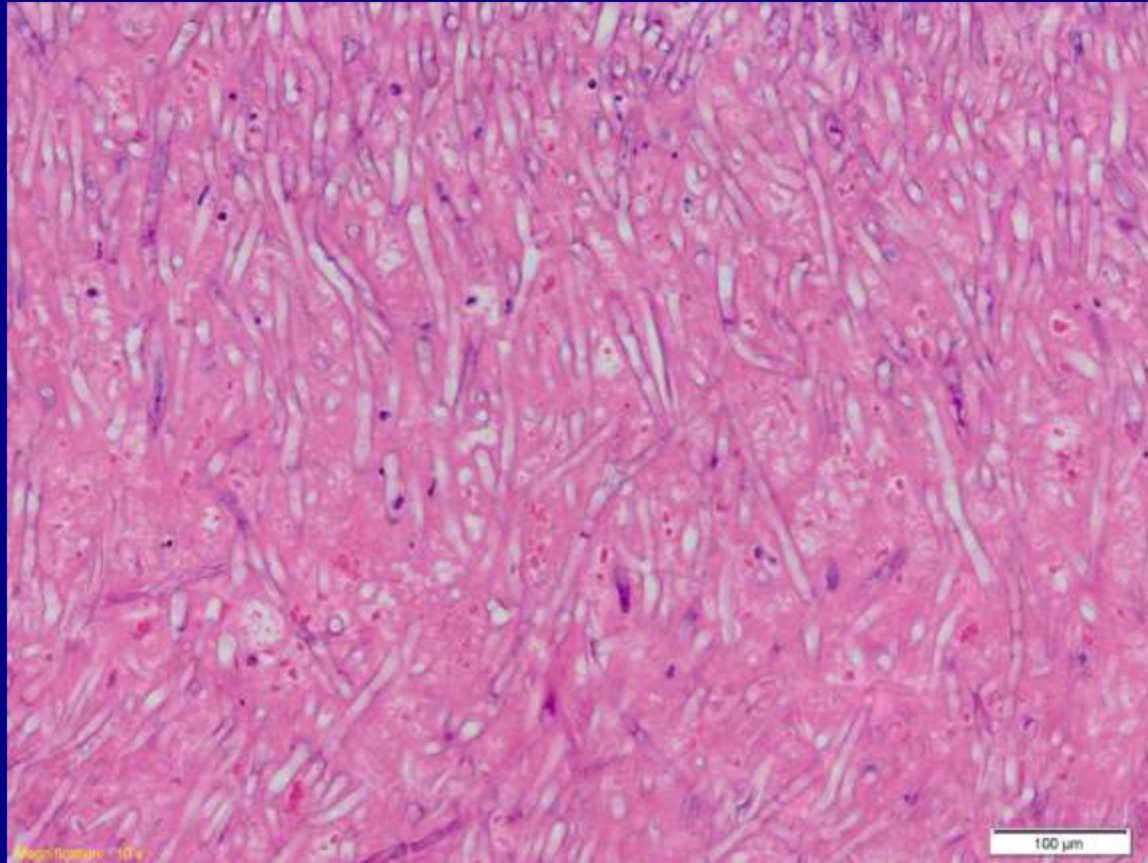




Differential Diagnosis

- Bland thrombus
- Tumor thrombus
 - Aspergillosis





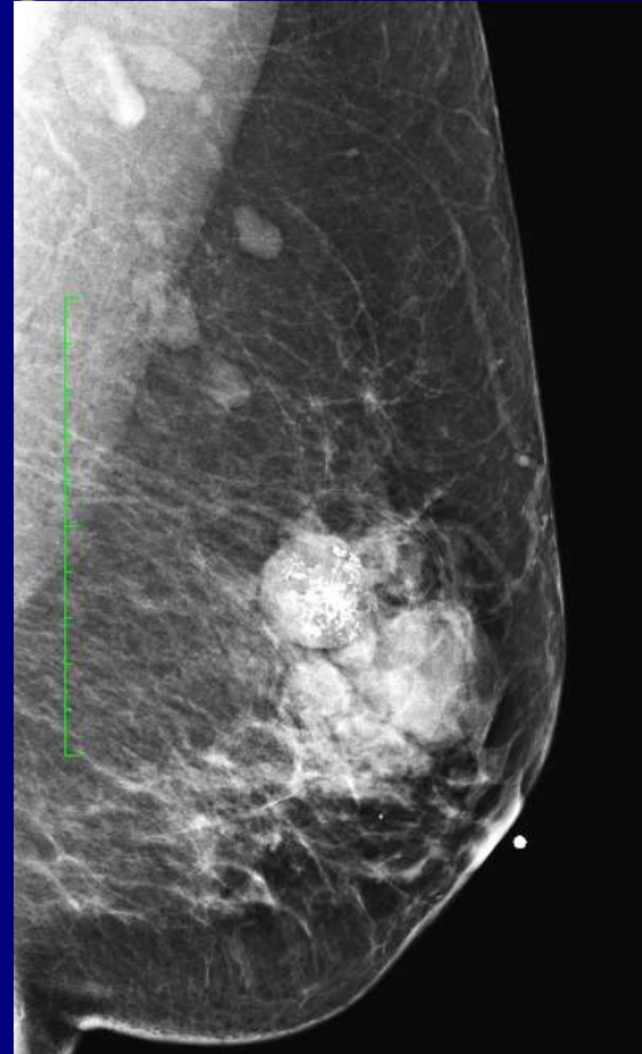
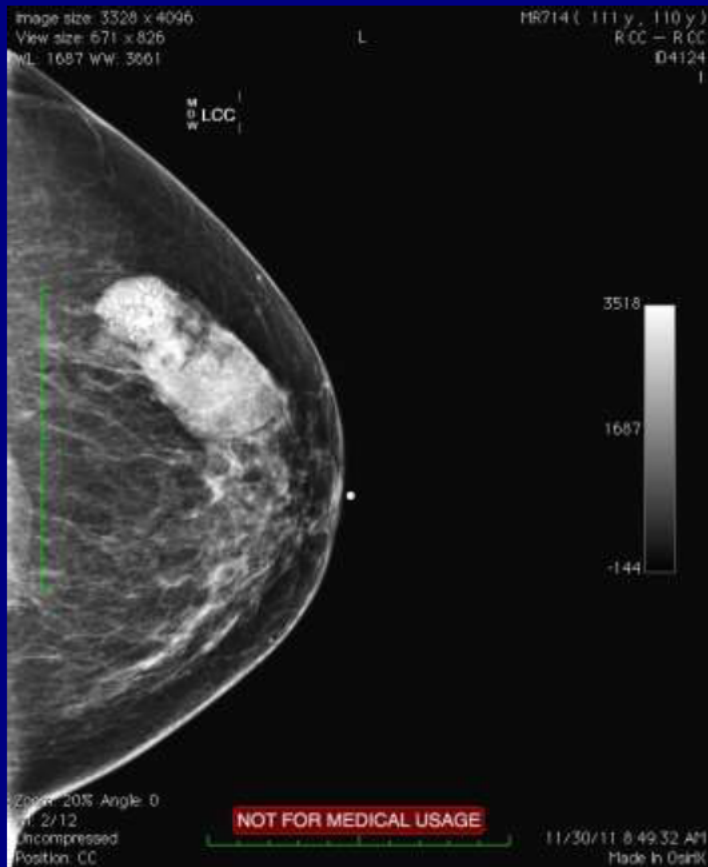
Zygomycosis (Mucormycosis)

Jacob Johannes Visser, MD, PhD
Erasmus Medical Center
Rotterdam, Netherlands

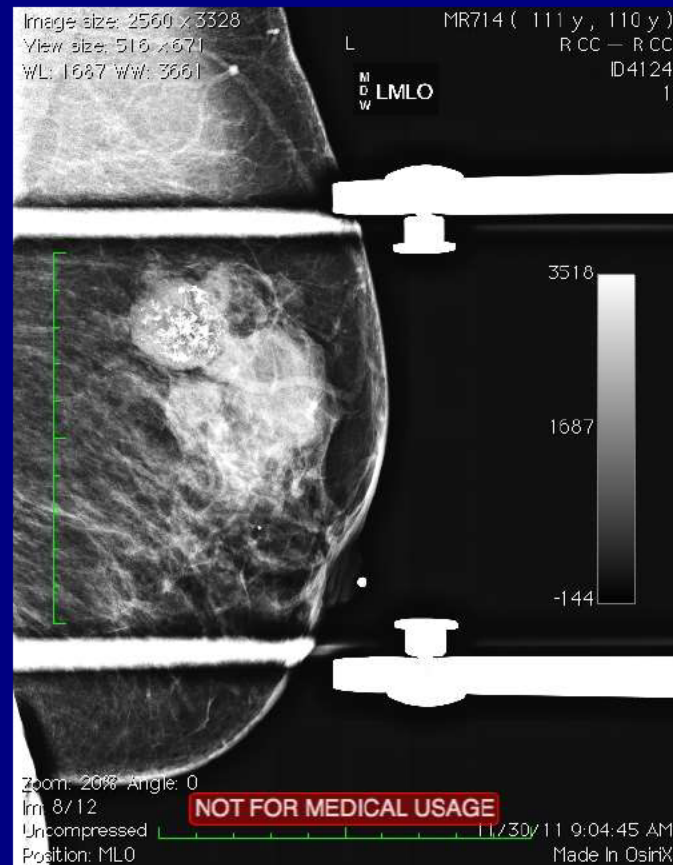
Breast Best Case

62-year-old female presented with a growing palpable mass in her left outer breast noted a few months ago and felt “full and heavy” one week prior to presentation. She denied pain, skin changes, or nipple discharge.

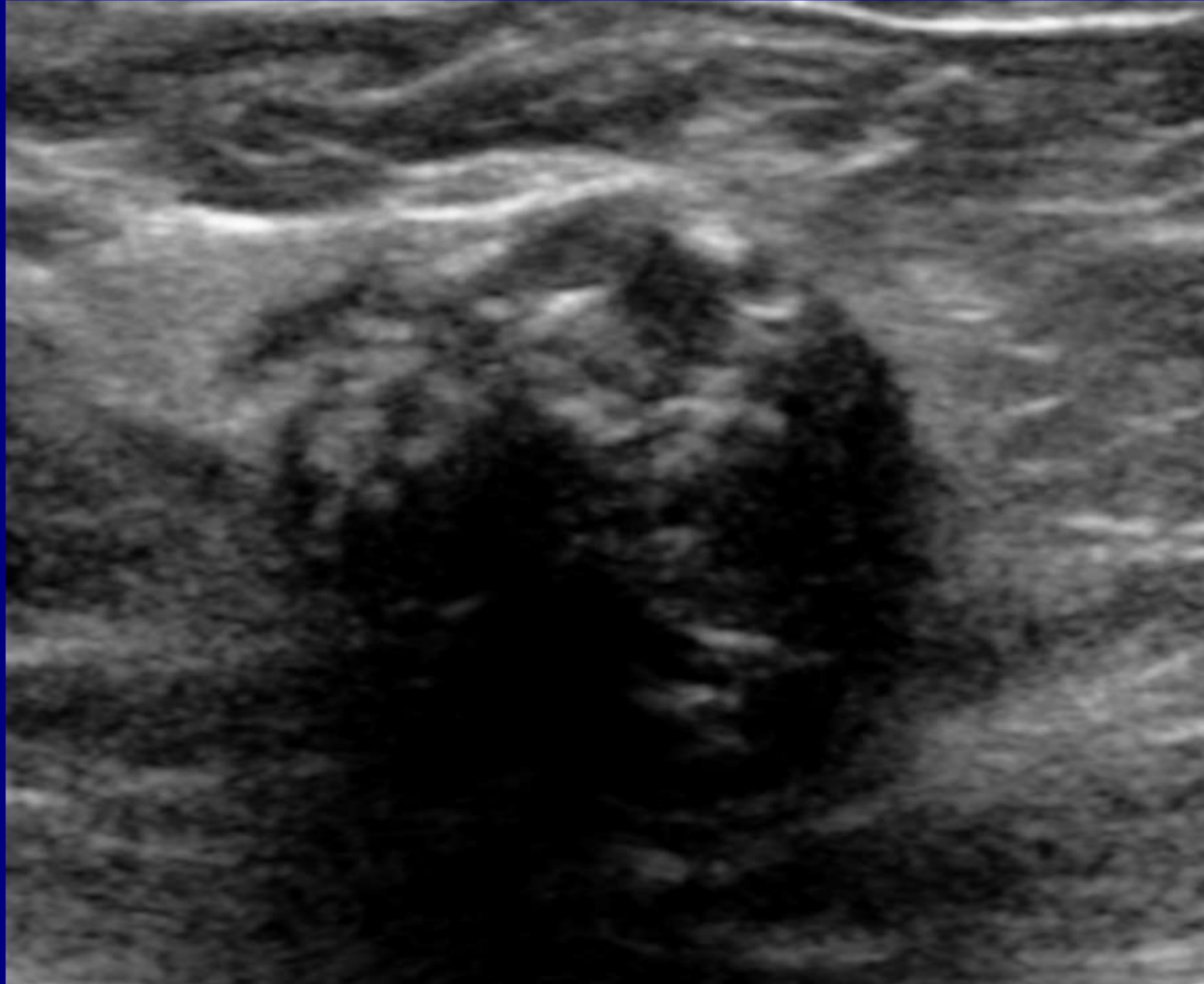
Diagnostic Mammogram LT Breast

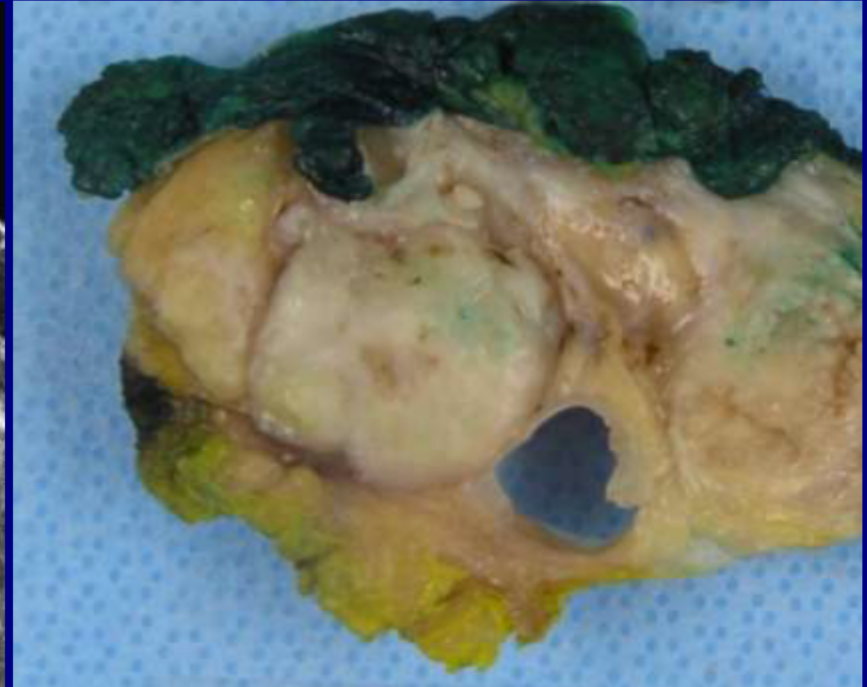
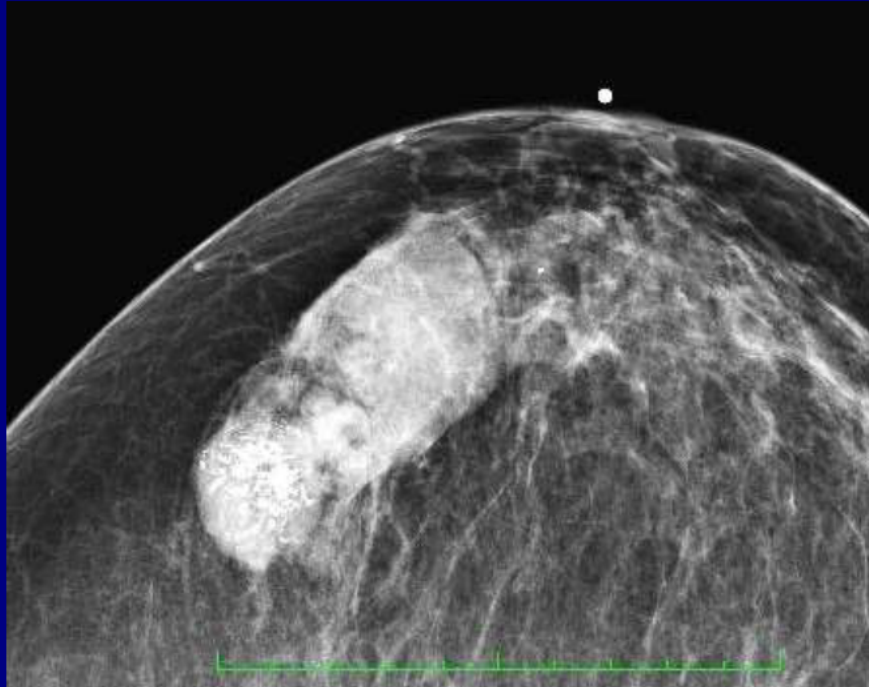


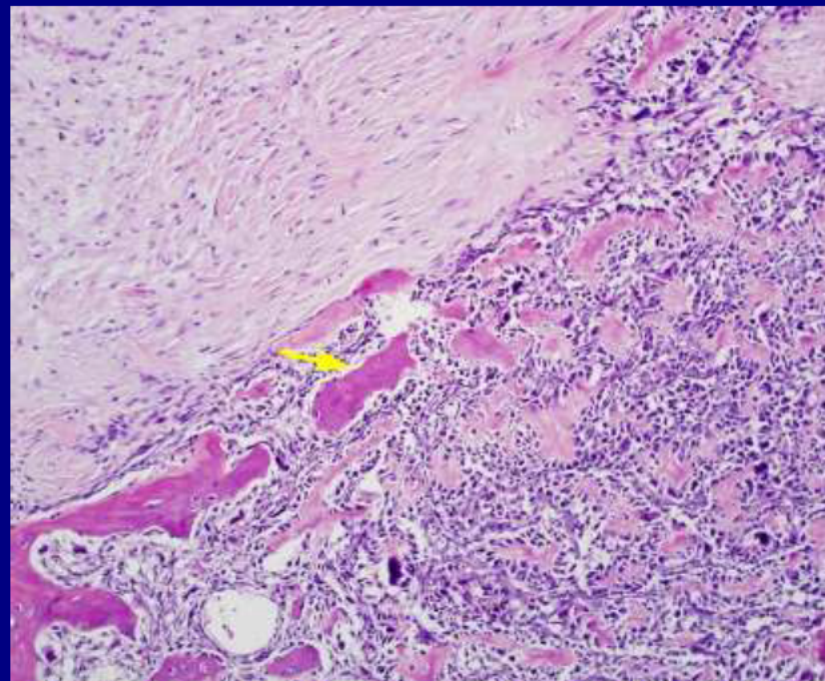
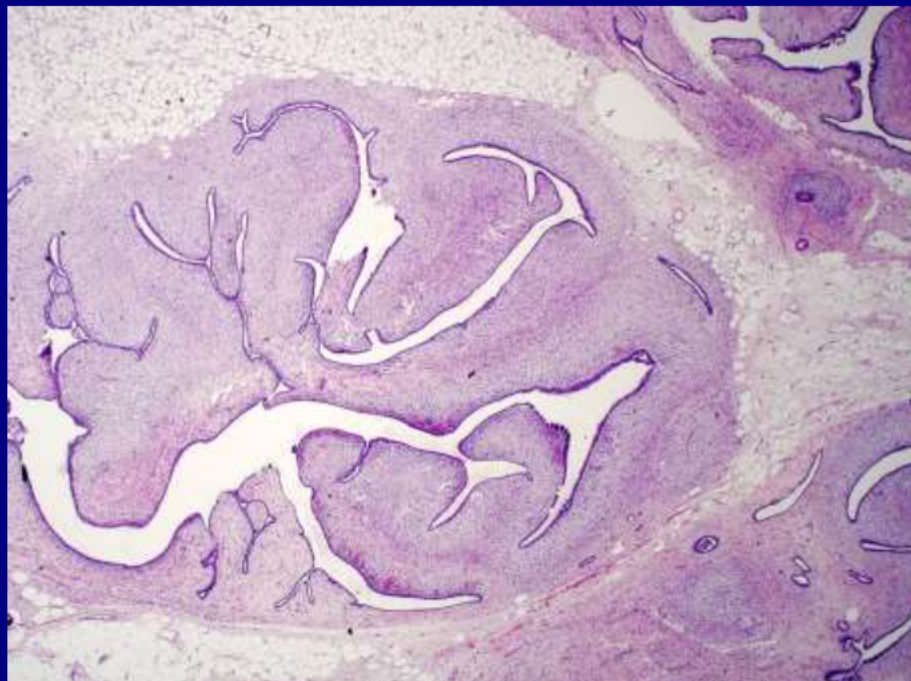
Mammographic Calcifications



Ultrasound of Palpable Area





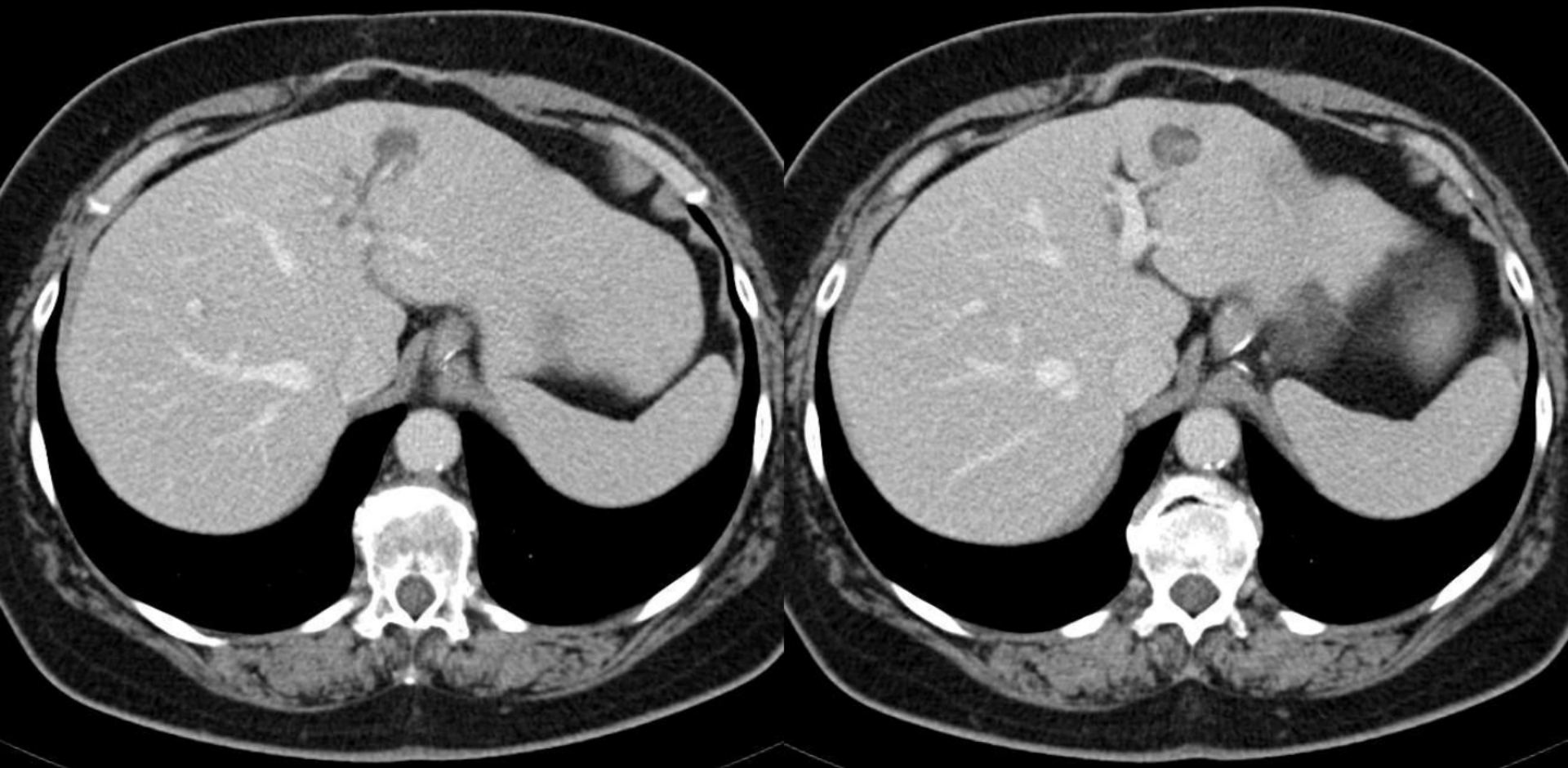


Malignant Phyllodes Tumor with Osteosarcomatous Differentiation

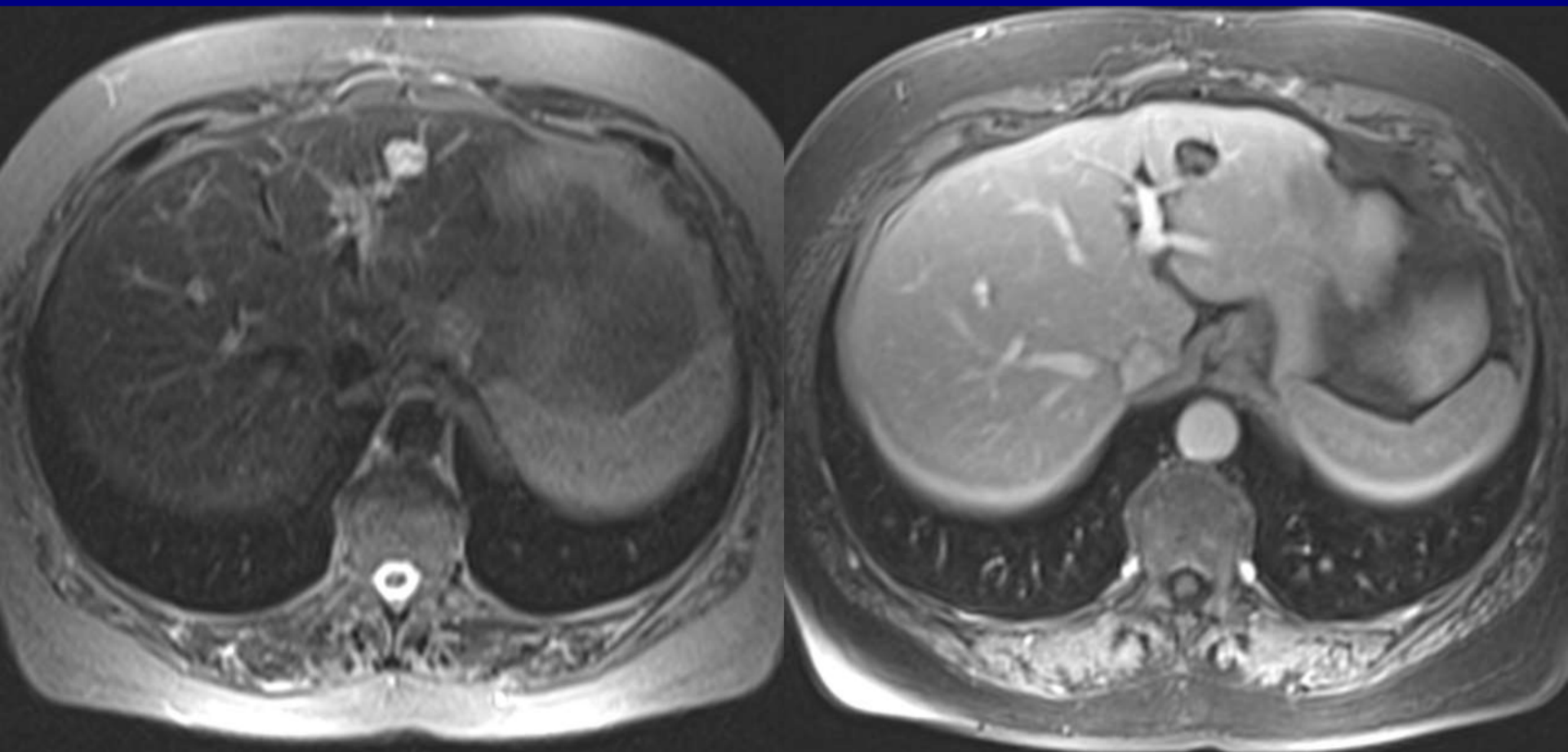
Kanchan Phalak, MD
Baylor College of Medicine
Houston, Texas

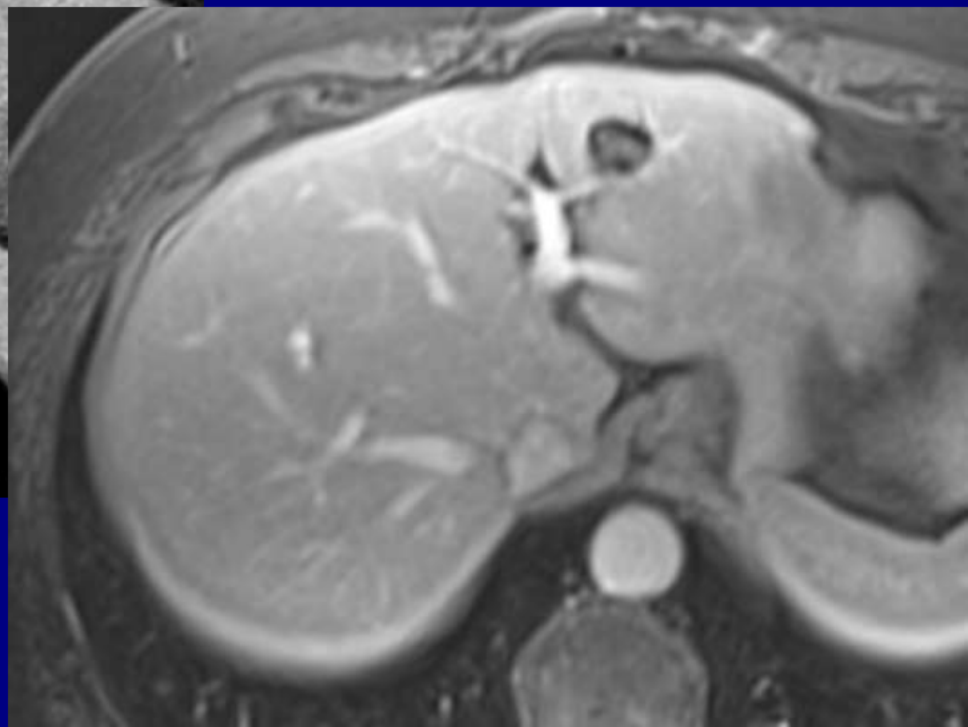
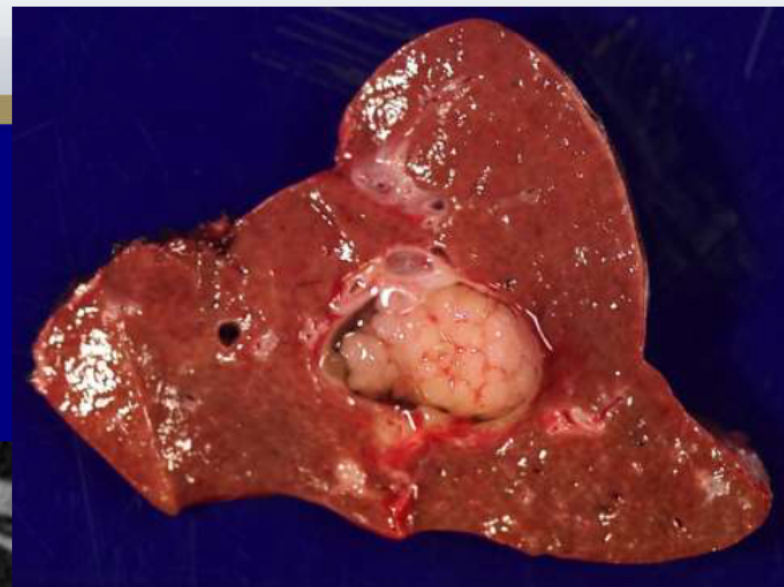
Gastrointestinal Best Case

67-year-old woman with incidental liver mass noted on CT obtained for complaint of right lower quadrant pain











Intraductal Papillary Neoplasm of the Bile Duct (Oncocytic Subtype)

Jake Theis, MD
University of Minnesota
Minneapolis, Minnesota

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