KREP

2025

KARNATAKA RADIOLOGY EDUCATION PROGRAM

CASE PRESENTATION

RETROPERITONEAL MASS LESION

MENTOR: DR G C PATIL
KMCRI,HUBBALLI.

- Age : 37 Years
- Sex : Male
- Chief complaint: Pain in left upper abdomen- 6 Months
  Radiating to back

General examinations:

- Vitals:
  - Pulse – 72 beats per minute
  - BP: 100/70 mm of mercury
  - SpO2: 98 % at Room air

- Per Abdomen examination : Soft, non-tender

  No organomegaly

- Radiograph
- Blood examination
- USG
- Biochemical examination
- CT with contrast
- MRI
- HPR

LAB INVESTIGATIONS:

- Hb 10.2 G%
- TC 3500
- Plat 1.76 lac/mm^3
- INR: 1.0
- RBS 85

- Blood gp: A +

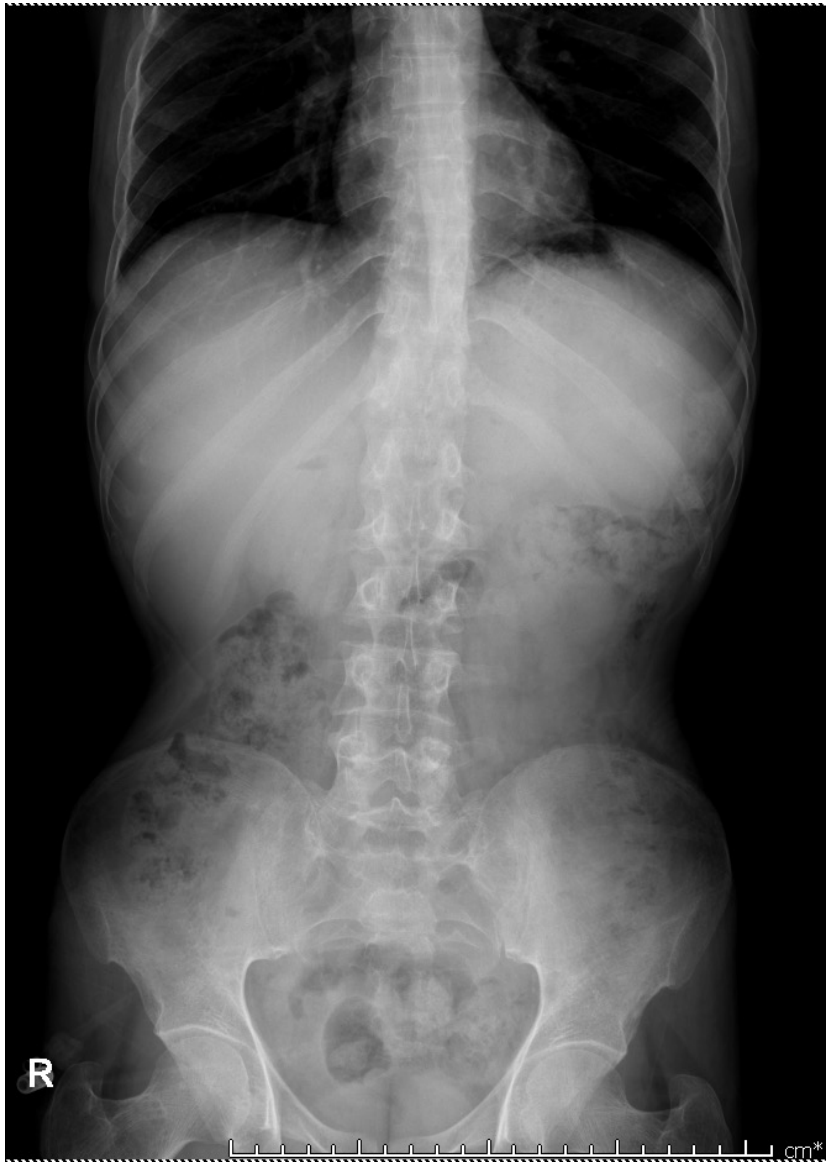
- HIV/HBsAG/HCV : Negative

- RFT : Urea 18, Creat 0.96

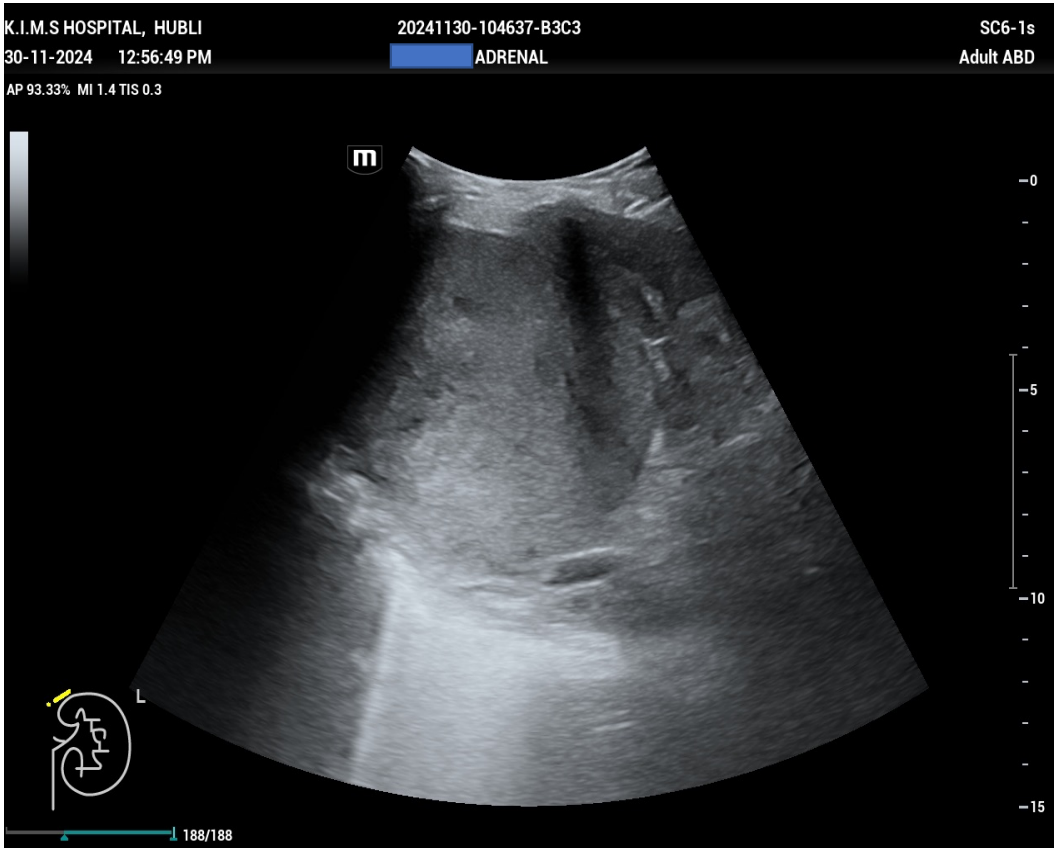
- LFT : TB 0.8, DB 0.5,Alb 2.9

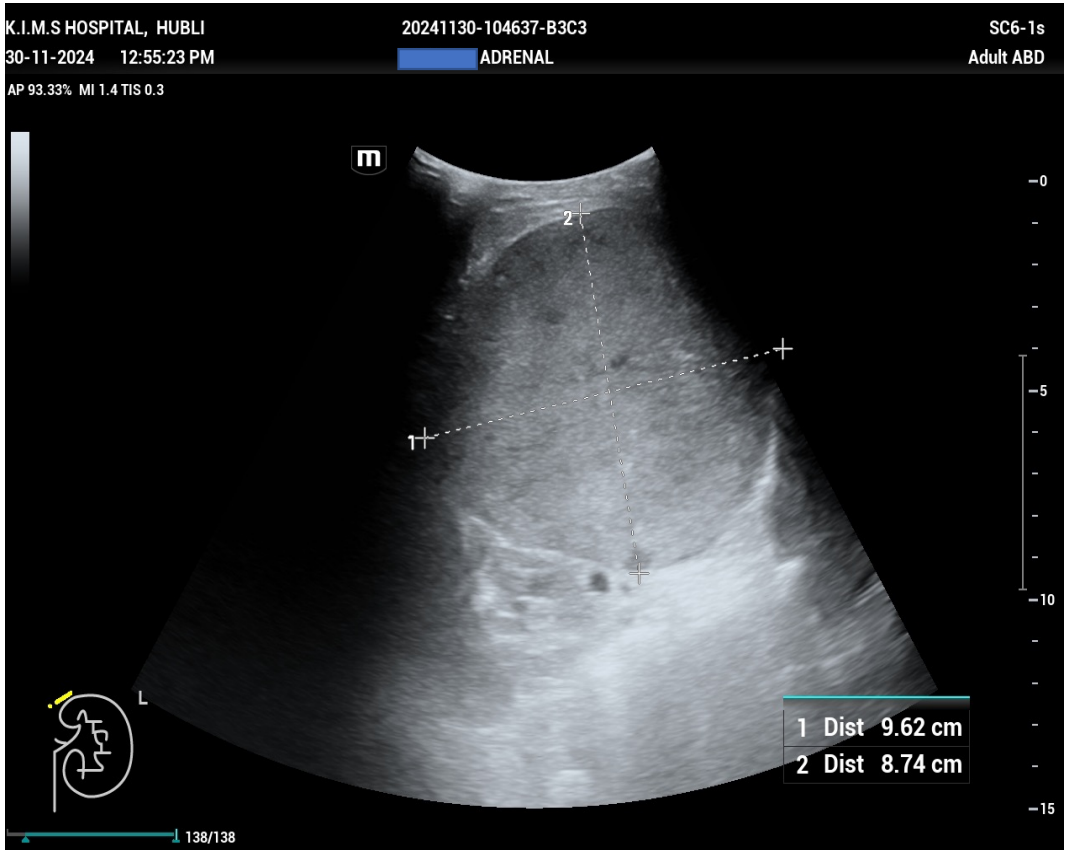
- Sr Electrolyte: Na 131, K 4.5

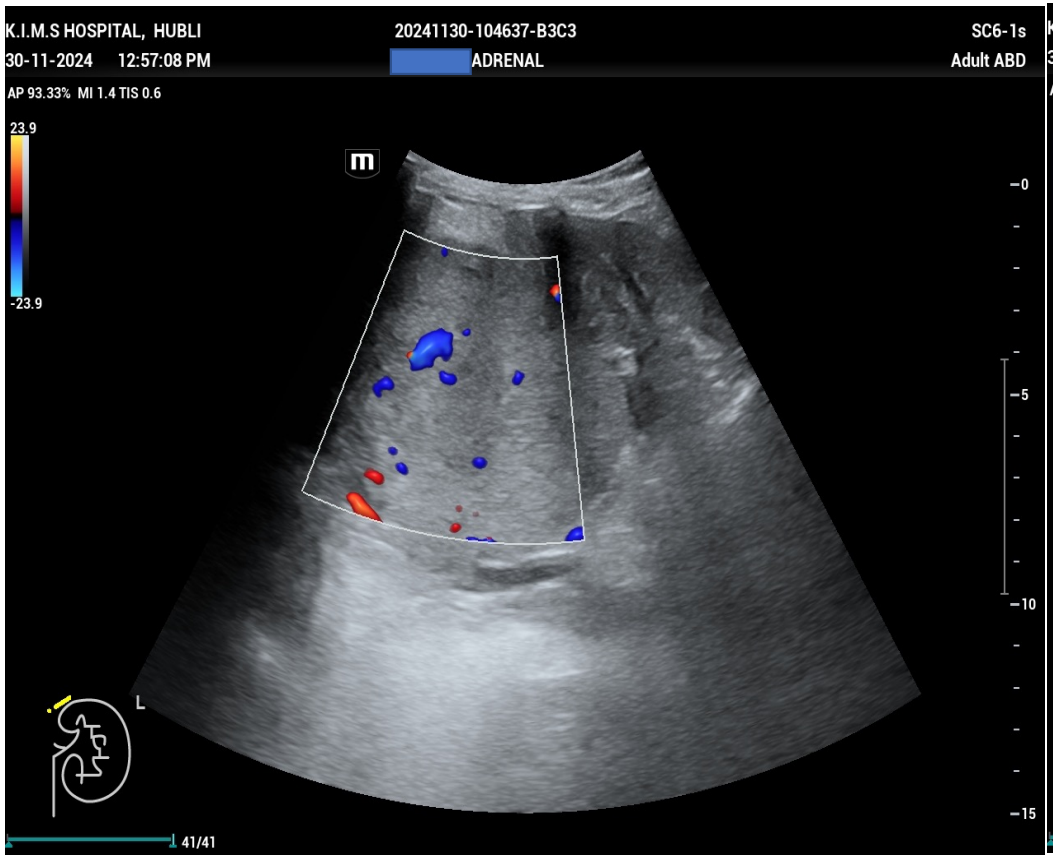
Radiograph

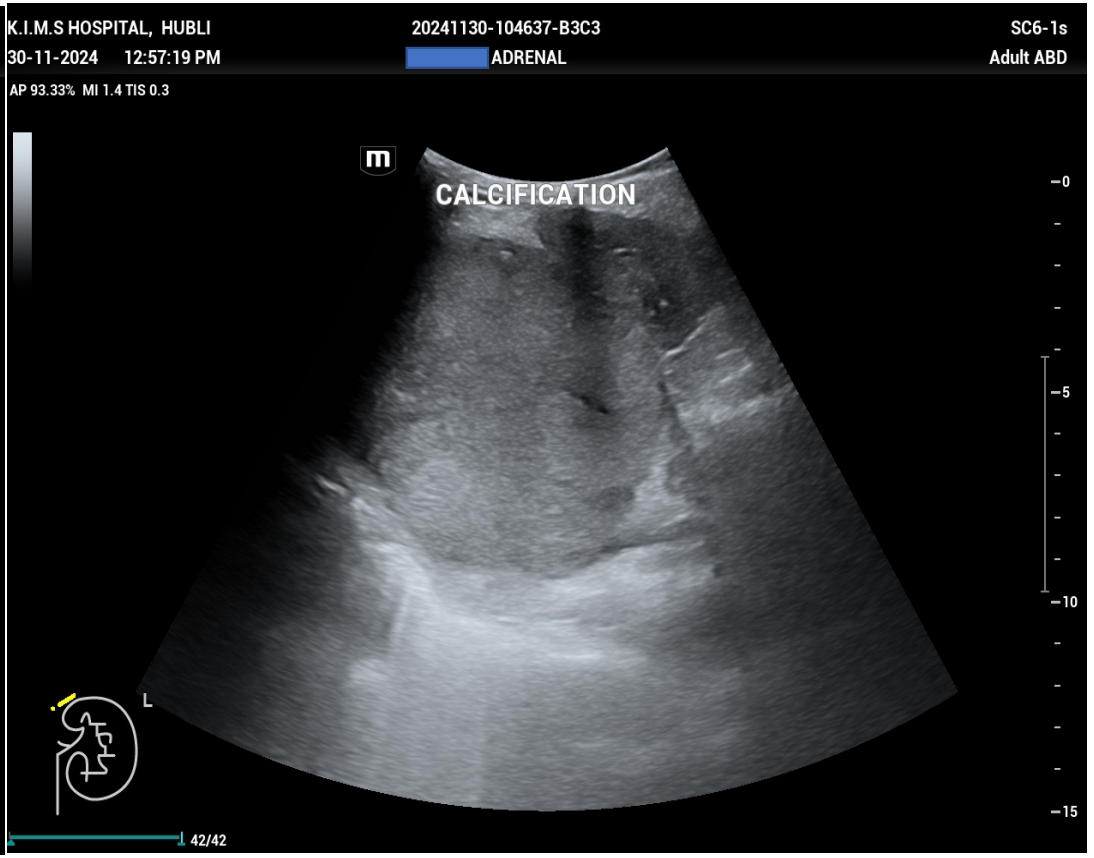


Ultrasonography





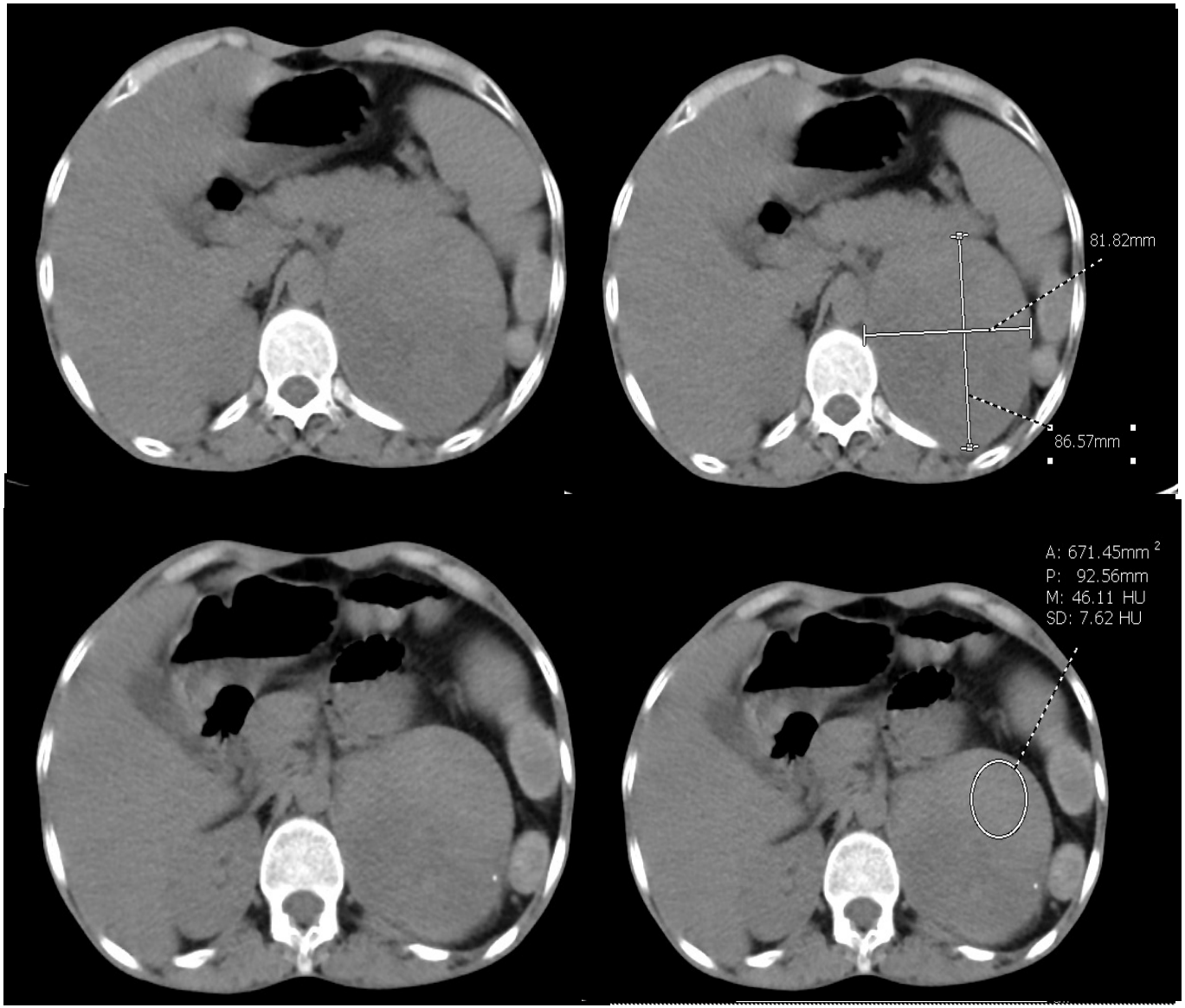

K.I.M.S HOSPITAL, HUBLI
30-11-2024 12:57:08 PM
20241130-104637-B3C3
ADRENAL
SC6-1s
Adult ABD
AP 93.33% MI 1.4 TIS 0.6
23.9
-23.9
L
41/41

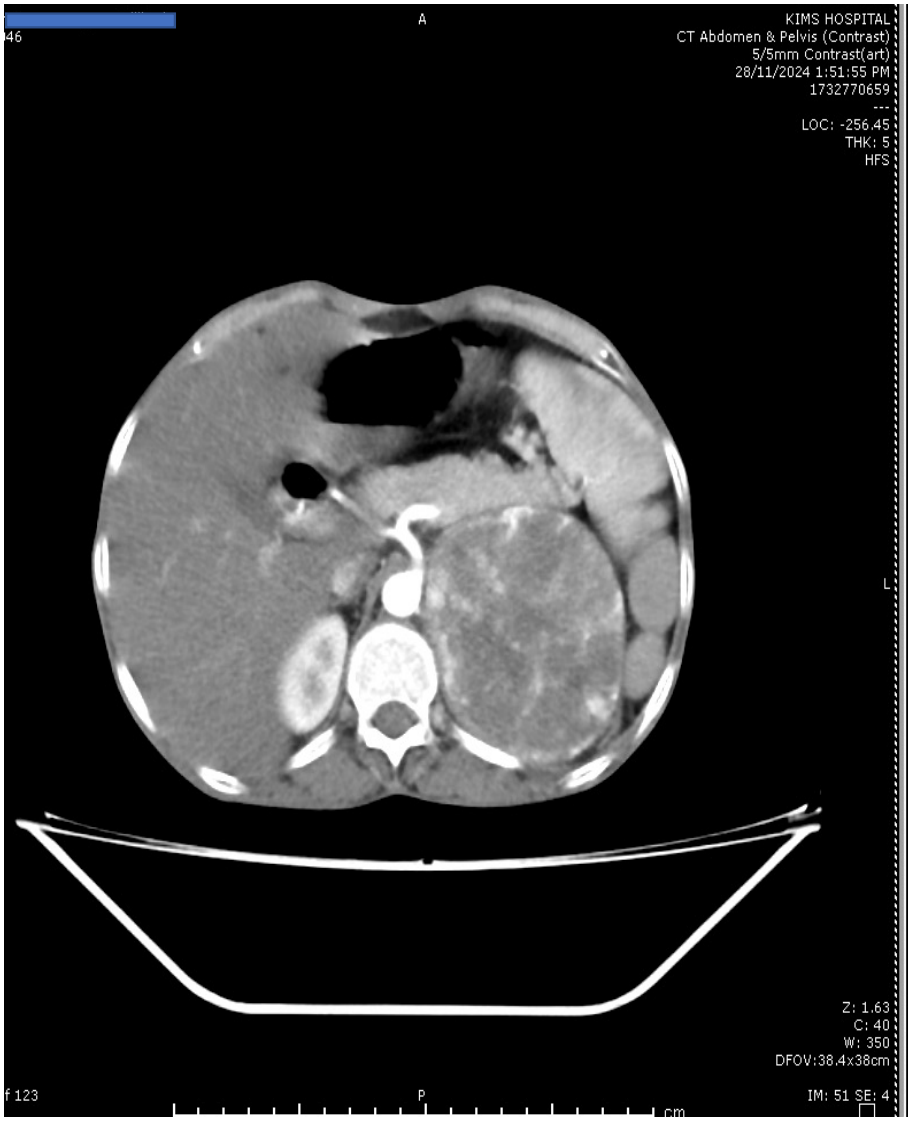

K.I.M.S HOSPITAL, HUBLI
30-11-2024 12:57:19 PM
20241130-104637-B3C3
ADRENAL
SC6-1s
Adult ABD
AP 93.33% MI 1.4 TIS 0.3
CALCIFICATION
L
42/42

BIOCHEMICAL LAB FINDINGS:

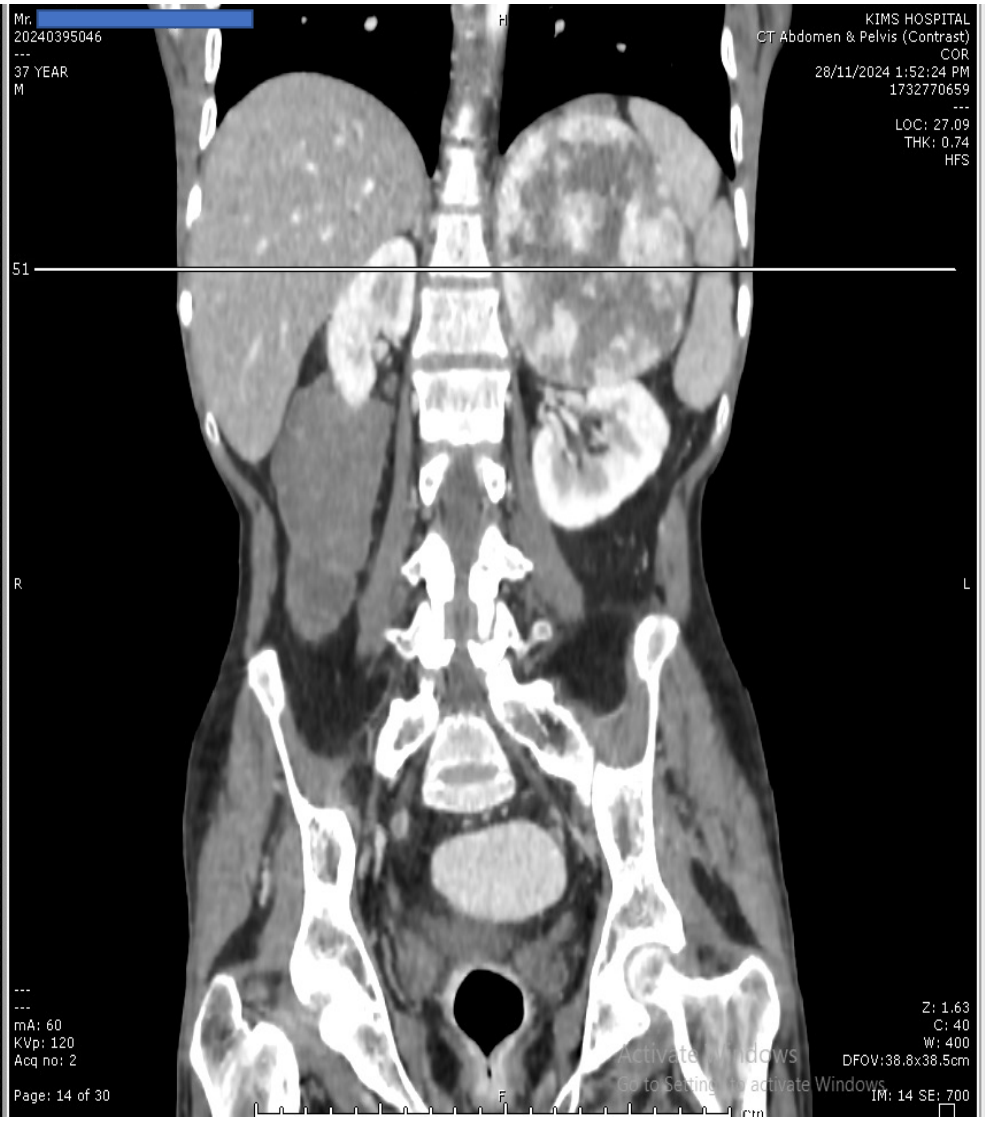
- Serum Cortisol : 11.7UG/DL(3.7-19.4)
- Serum Aldosterone: 7.8 (2.2-35.3)

- Urinary VMA: 2.91 mmol/24 hr(<68.6)
- Urinary Metanephrine: 85.2 UG/24Hr (74-297)
- **Urinary NorMetanephrine: 2560 UG/24Hr (73-808)**


81.82mm
86.57mm
A: 671.45mm 2
P: 92.56mm
M: 46.11 HU
SD: 7.62 HU

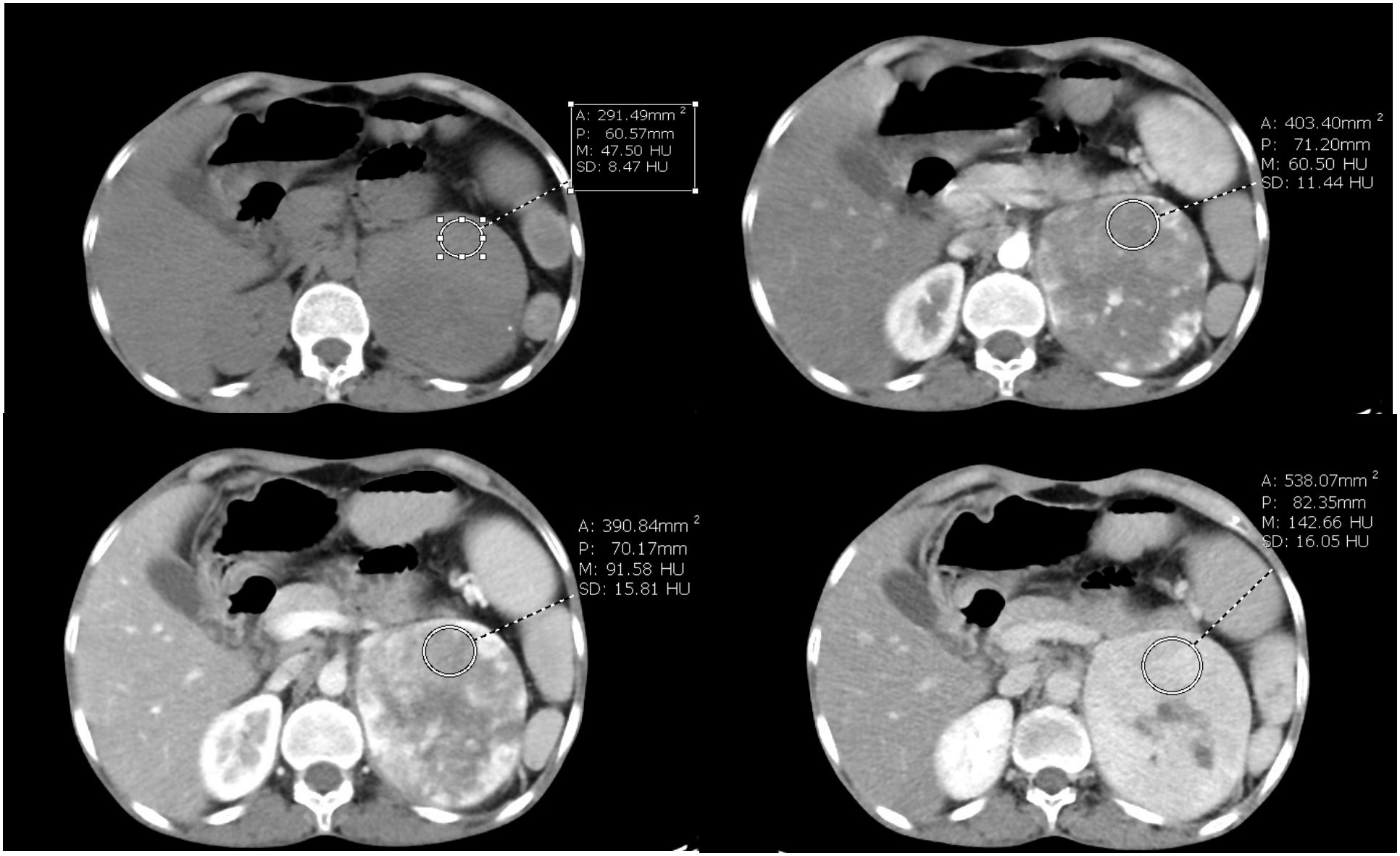

A
KIMS HOSPITAL
CT Abdomen & Pelvis (Contrast)
5/5mm Contrast(art)
28/11/2024 1:51:55 PM
1732770659

LOC: -256.45
THK: 5
HFS
L
Z: 1.63
C: 40
W: 350
DFOV:38.4x38cm
IM: 51 SE: 4
P


H
KIMS HOSPITAL
CT Abdomen & Pelvis (Contrast)
COR
28/11/2024 1:52:24 PM
1732770659

LOC: 27.09
THK: 0.74
HFS
20240395046
---
37 YEAR
M
51
R
L

---
mA: 60
KVp: 120
Acq no: 2
Page: 14 of 30
Z: 1.63
C: 40
W: 400
DFOV:38.8x38.5cm
IM: 14 SE: 700
F


A: 291.49mm 2
P: 60.57mm
M: 47.50 HU
SD: 8.47 HU
A: 403.40mm 2
P: 71.20mm
M: 60.50 HU
SD: 11.44 HU
A: 390.84mm 2
P: 70.17mm
M: 91.58 HU
SD: 15.81 HU
A: 538.07mm 2
P: 82.35mm
M: 142.66 HU
SD: 16.05 HU

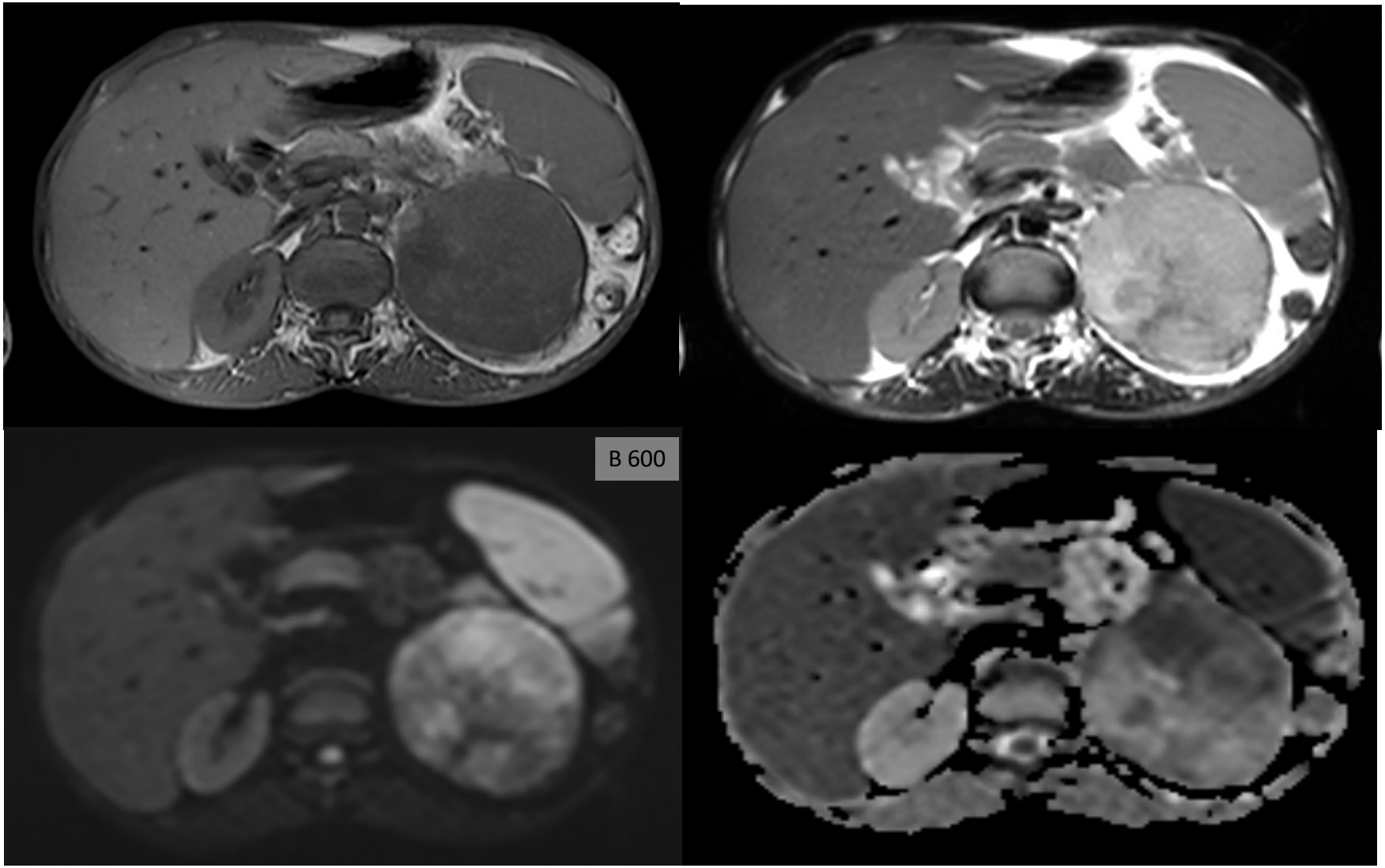
Name	[redacted]	Patient ID	20240395046
Accession No	1732770659	Study Date	28-Nov-2024
Age/Gender	37Years / M	Referred By	
Procedure	CT Abdomen & Pelvis (Contrast)	Modality	CT

IMPRESSION

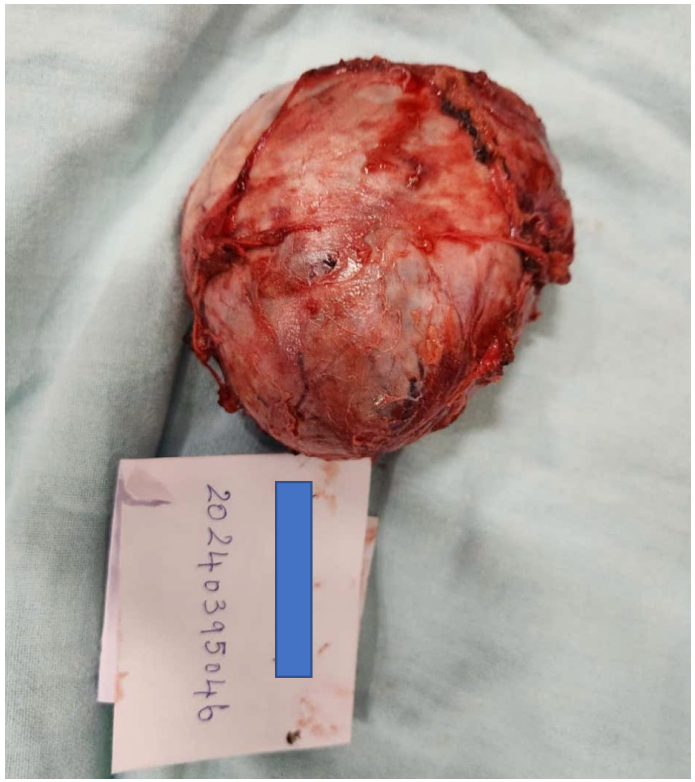
- A WELL DEFINED SOLID HETEROGENEOUSLY ENHANCING SOFT TISSUE ATTENUATING LESION WITH GRADUAL CENTRIPETAL FILLING ON DELAYED IMAGES IN LEFT SUPRARENAL FOSSA -->NEOPLASTIC

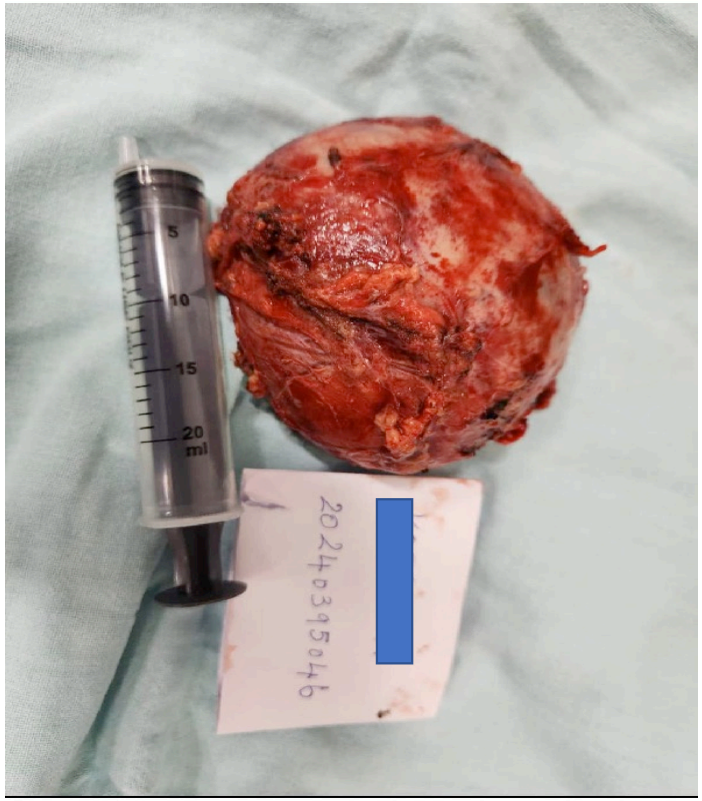
  DD'S TO BE CONSIDERED 1) ADRENAL HEMANGIOMA
  2)NON FUNCTIONING PHEOCHROMOCYTOMA (LESS LIKELY)

MRI



POST-OPERATIVE SPECIMEN





KARNATAKA MEDICAL COLLEGE AND RESEARCH INSTITUTE HUBLI KARNATAKA
Govt of Karnataka
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LABORATORY OBSERVATION REPORT

UHID:	20240395046	**Reg. Date:**	21/11/2024 03:20 PM
Patient Name:	[redacted]	**Ward Name:**	PMSSY SURGICAL ONOCOLGY WARD
Sex:	Male	**Age:**	37 years 1 month
Order By:		**Order Date:**	20/12/2024
Unit Name:		**Unit In-charge:**	
Sample Collection Date:	21/12/2024 03:20 PM	**Sample Received Date:**	21/12/2024 03:25 PM
Lab Name:	PATHOLOGY	**Lab Ref No:**	7456
Department:	SURGICAL ONCOLOGY	**Report Upload Date:**	05/01/2025 02:40 PM

Sample Details : PC-211224018 (Blood) /PATHOLOGY COLLEGE LAB Clinical Details :

Test Name : H P R Report Date : 05/01/2025 02:40 PM

SPECIEMEN:
Specimen of left adrenalectomy.

GROSS:
specimen consist of grey white to grey brown globular mass measuring 10x9cm. externally capsula is intact and areas of congestion is present. Cut surface shows grey brown to tan with intramural nodules.

MICROSCOPY:
Section studied from adrenal gland tissue shows tumour cells arranged in well defined nests (zellballen pattern). These cells are moderately pleomorphic and have moderate cytoplasm. The nuclei of these cells are round to oval with vesicular nucleus, fine chromatin and conspicuous nucleoli. Large areas shows haemorrhage and hemosiderin laden macrophages. The nuclei of tumour cells show spindling and hyperchromatic. There is no evidence of periadrenal adipose tissue invasion. There is no capsular and vascular invasion. The cellularity is low (< 150). No marked nuclear pleomorphism. No atypical mitotic figures, and number of mitotic figures are seen <3/10 HPF. No necrosis seen. No large nests or diffuse growth noted and there is no cellular monotony.

IMPRESSSION:
Features are suggestive of **PHEOCHROMOCYTOMA**
PASS score = **+ 3** (hyperchromasia), (spindling)

ADRENAL HEMANGIOMA

- Rare benign tumor
- Asymptomatic, detected incidentally.
- Often large at presentation (range :1-30cm).
- Female preponderance.

REFERENCES:

- Grainger & Allison's Diagnostic Radiology. 7th edition.
- Diagnostic ultrasound by Carol M Rumack. 6th edition.
- Adrenal Neoplasms: Lessons from Adrenal Multidisciplinary Tumor Boards: Ryan Chung, Joanie Garratt, Erick M. Remer June 22,2023
- Imaging Features of Various Adrenal Neoplastic Lesions on Radiologic and Nuclear Medicine Imaging. By: Yu Ri Shin and Kyung Ah Kim


THANK YOU