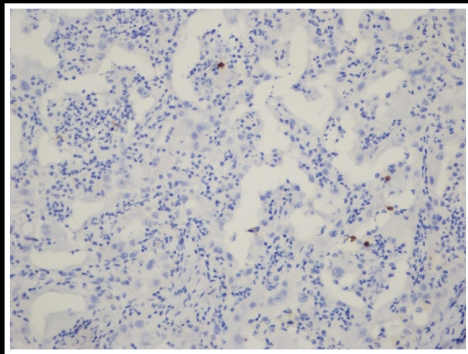


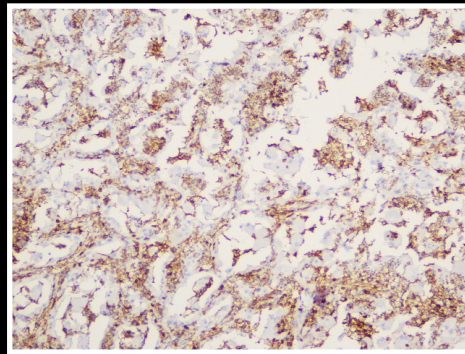
(Reed-Sternberg-like or virocyte-like) with many showing neutrophils within the cytoplasm (emperipolesis). No multinucleate forms were, however, identified.

IMMUNOHISTOCHEMICAL FINDINGS

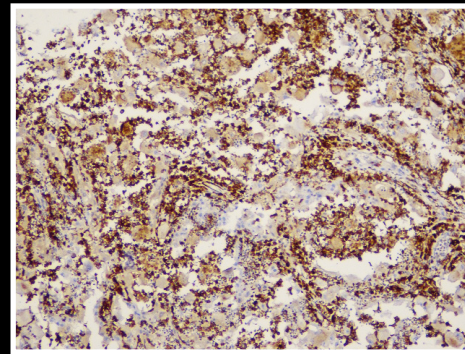
On immunohistochemistry, these large cells were strongly positive for Vimentin and NSE with weak staining for Cytokeratin and CD68 and were negative for CD45, CD99, S-100, CD1a and GFAP. CD56, showed some membranous staining in many of the larger cells and suggested a very organoid pattern of arrangement. A negative factor XIIIa in the large foam cells ruled out Juvenile xanthogranuloma. Lack of S100, CD163 excluded the possibility of a true histiocytic lesion including reticulohistiocytoma. A possibility of rhabdoid tumor was excluded in view of retained INI-1. Negative PGP stain, GFAP and HMB-45 ruled out a ganglionic differentiation, glial origin and melanocytic origin respectively. A cytomegalovirus immunostain performed was also negative. Histochemical stains of PAS and GMS were negative. Based on this extensive immunophenotyping of the larger cells with Vimentin, variable cytokeratin, CD56, NSE and no histiocytic markers led to a final diagnosis of Myxoinflammatory fibroblastic sarcoma.



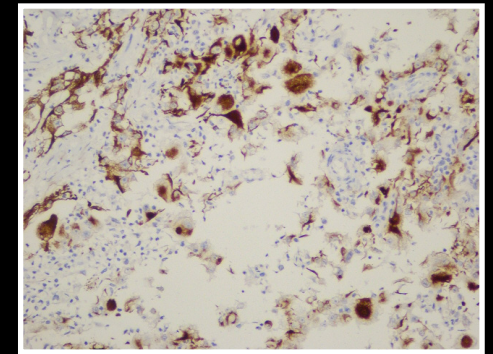
CD1A



CD45



CD68



CK