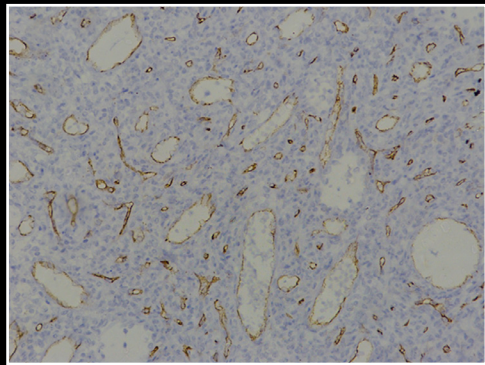
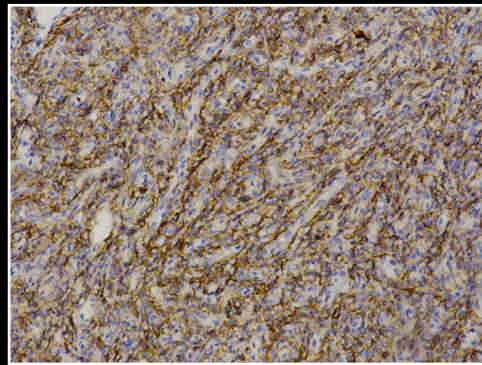


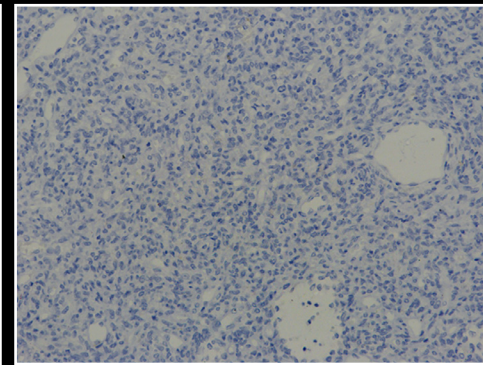
Based on the cytoarchitectural features, the differential diagnoses considered were solitary fibrous tumor (SFT), meningioma, or meningeal sarcoma (primary or metastatic). A battery of immunohistochemical panel, including pancytokeratin (CK), vimentin, epithelial membrane antigen (EMA), progesterone receptor (PgR), CD99, B-cell lymphoma 2 (bcl2), transducin-like enhancer of split 1 (TLE-1), CD34, S-100, glial acidic fibrillary protein (GFAP) and Ki-67 was performed. The neoplastic cells revealed diffuse and moderate to strong immunoreactivity for CD99 (membranous), bcl2 (membranous and cytoplasmic), TLE-1 (nuclear), and vimentin (cytoplasmic). The Ki-67 proliferation index of 10% was observed in the most proliferative zone of the tumor. PanCK was focally positive in the neoplastic cells in a cytoplasmic and membranous fashion. EMA, PgR, CD34, S-100, and GFAP were negative.



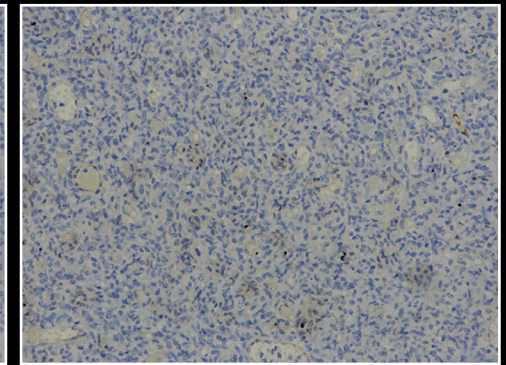
CD34



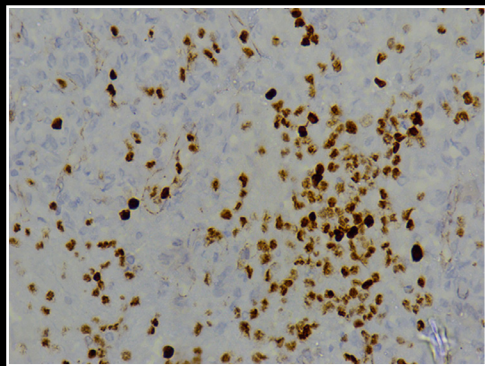
CD99



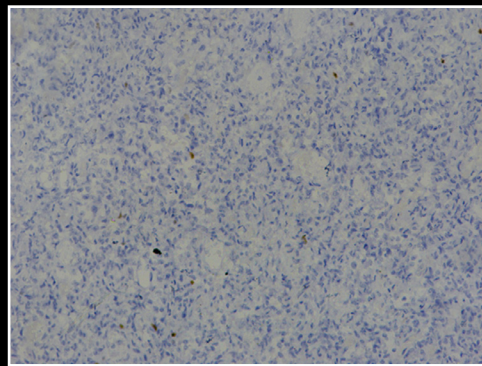
EMA



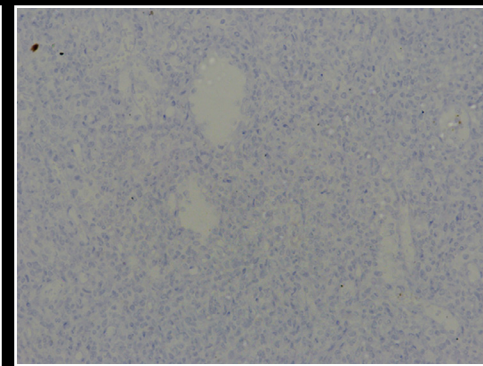
GFAP



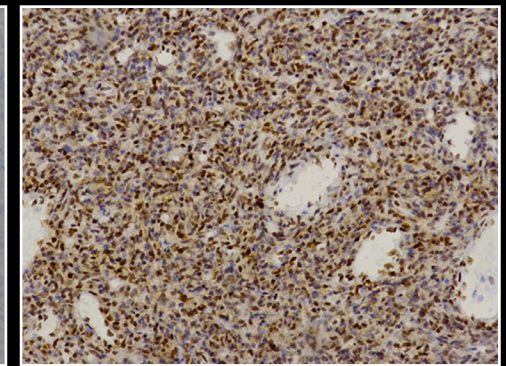
Ki67



PgR



S100



TLE-1

FINAL DIAGNOSIS

Brain, right parafalcine region: Meningeal synovial sarcoma (SS)