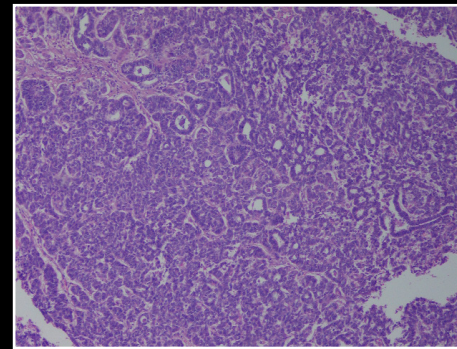
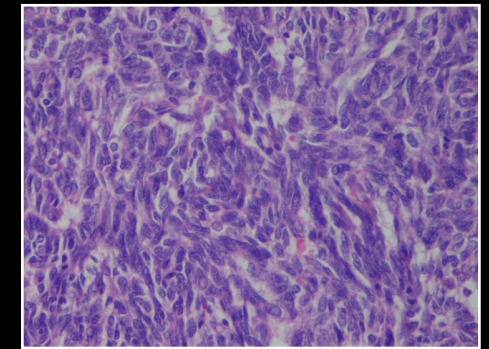


scant to moderate cytoplasm, vesicular chromatin and inconspicuous nucleoli. Occasional mitotic figures were seen. Some tubular lumina were filled with eosinophilic amorphous debris. Occasional foci of tumor cells with bizarre, pleomorphic nuclei were seen. Extensive areas of coagulative tumor cell necrosis and hemorrhage identified. A provisional diagnosis of Malignant neoplasm with extensive necrosis involving the kidney was offered and an immunohistochemical workup was strongly recommended.



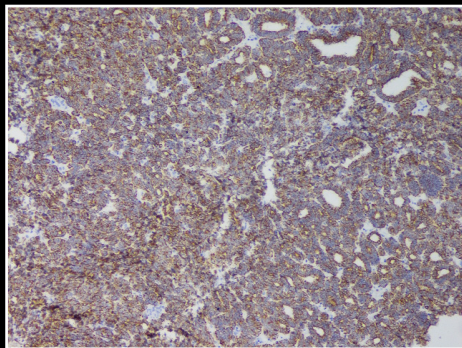
10X



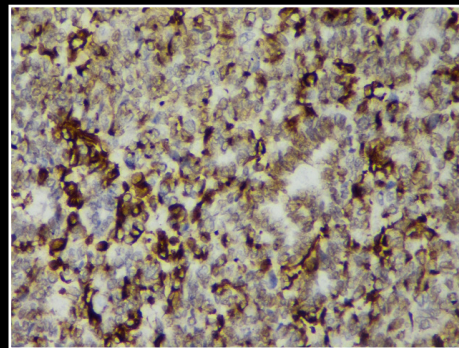
40X

IMMUNOHISTOCHEMICAL FINDINGS

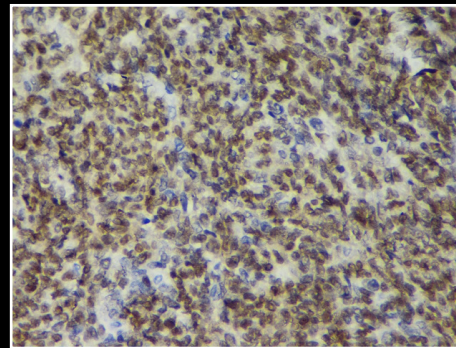
The neoplastic cells strongly expressed Cytokeratin, Vimentin, PAX8, EMA, E-cadherin and CK19, with focal immunolabeling of CK7, CD15 and GATA3. The tumor cells were negative for WT1, CD10, AMACR, Uroplakin III, Synaptophysin, OCT3/4 and ER. A final diagnosis of Renal cell carcinoma, unclassified type (4.2 cm), with extensive necrosis was given, consistent with the immunoprofile of CK, EMA, PAX8 positivity and ER negativity.



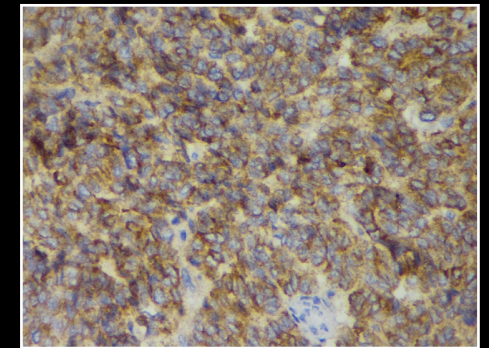
CK



VIMENTIN



PAX8



EMA