Case 12 clinically a pilar cyst, mid back, excised 17yr female

- The section shows a well circumscribed spindled cell lesion arranged in long fascicles in a loose stroma giving a myxoid appearance
- Scattered inflammatory cells including lymphocytes, macrophages together with extravasated red blood cells are seen.
- Occasional mitotic figures are identified
- There is no prominent vasculature seen.

**Diagnosis: Nodular Fasciitis** 

Comment: Exclude a Kaposi's sarcoma CD31, CD34 & HHV8 ?cellular myoma IHC: Vimentin +ve and SMA +ve (doesn't really help) MY9-USP6 GENE FUSION

NF affects young adults **BENIGN LESION** Rapidly growing solitary mass Associated with previous trauma Common psuedoneoplastic proliferation of soft tissue <u>Variants:</u> Intravascular, cranial fasciitis and ossifying fasciitis Tx: Surgical resection

Andrew Prodromou ST5 EoE