



**Australasian Division of the International Academy of Pathology Limited**

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## **Slide Seminar**

### **Chairs of the Sessions**

#### **Ruta Gupta**

Department of Tissue Pathology and Diagnostic Oncology, Royal Prince Alfred Hospital, Sydney, Australia

#### **Anthony Gill**

Royal North Shore Hospital &  
University of Sydney, Sydney, NSW, Australia

## **Keynote Speaker**

#### **Bruce M. Wenig**

Moffitt Cancer Centre &  
University of South Florida, Tampa, FL, USA

### **CASE HISTORIES:**

#### **Case: 1**

**Clinical History:** 76/M presented with a 6 month decline in voice quality. A right vocal cord polypoid mass was identified. Vocal cord mobility was intact.

#### **Case: 2**

**Clinical History:** 25/F noted a slightly raised "lump" on her hard palate. The lump was biopsied.

**Case: 3**

**Clinical History:** 54/F with nasal obstruction and epistaxis.

**Case: 4**

**Clinical History:** 35/F with enlarged mass of the left thyroid lobe.

**Case: 5**

**Clinical History:** 31/M with unilateral conductive hearing loss.

**Case: 6**

**Clinical History:** 81/M with nasal obstruction and associated sinus pain. A maxillary sinus mass was identified and biopsied.

**Case: 7**

**Clinical History:** 56/F with nonpainful, localized submucosal swelling of the right buccal area.

**Case: 8**

**Clinical History:** 53/M with nasal obstruction, epistaxis and pain

**Case: 9**

**Clinical History:** 66/M with a left neck mass. A biopsy was performed.

**Case: 10**

**Clinical History:** 65/F with an exophytic/verruroid plaque on the gingiva.

**Case: 11**

**Clinical History:** 53/M with nasal obstruction, epistaxis and pain

**Case: 12**

**Clinical History:** 63/F under evaluation for osteopenia and osteoporosis had a thyroid ultrasound which identified a left thyroid lobe nodule. Fine needle aspiration biopsy was “positive for malignancy” with a differential diagnosis of papillary thyroid carcinoma versus medullary thyroid carcinoma. A left thyroidectomy was performed.