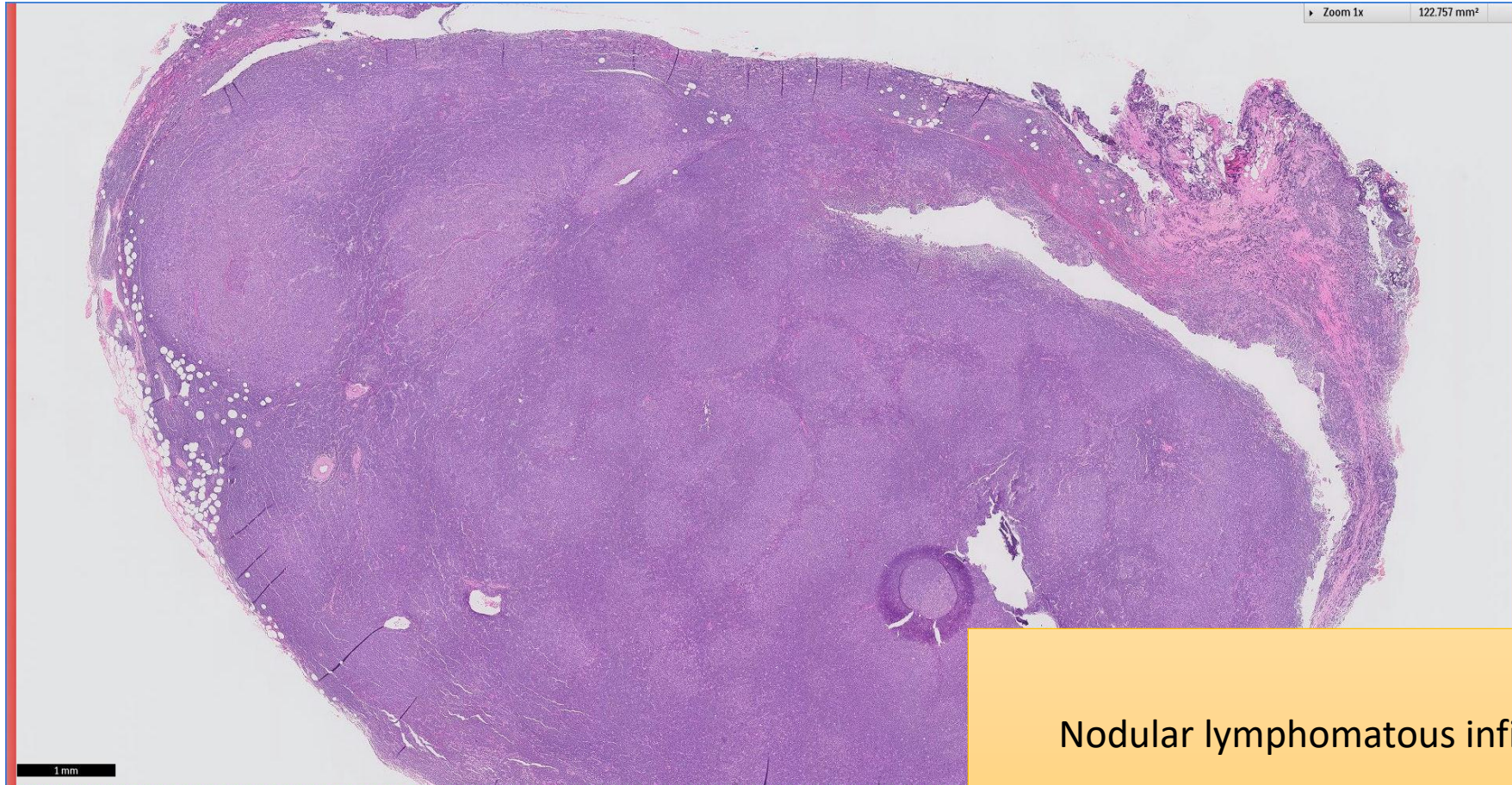


SGH CASE 34: 17RE158

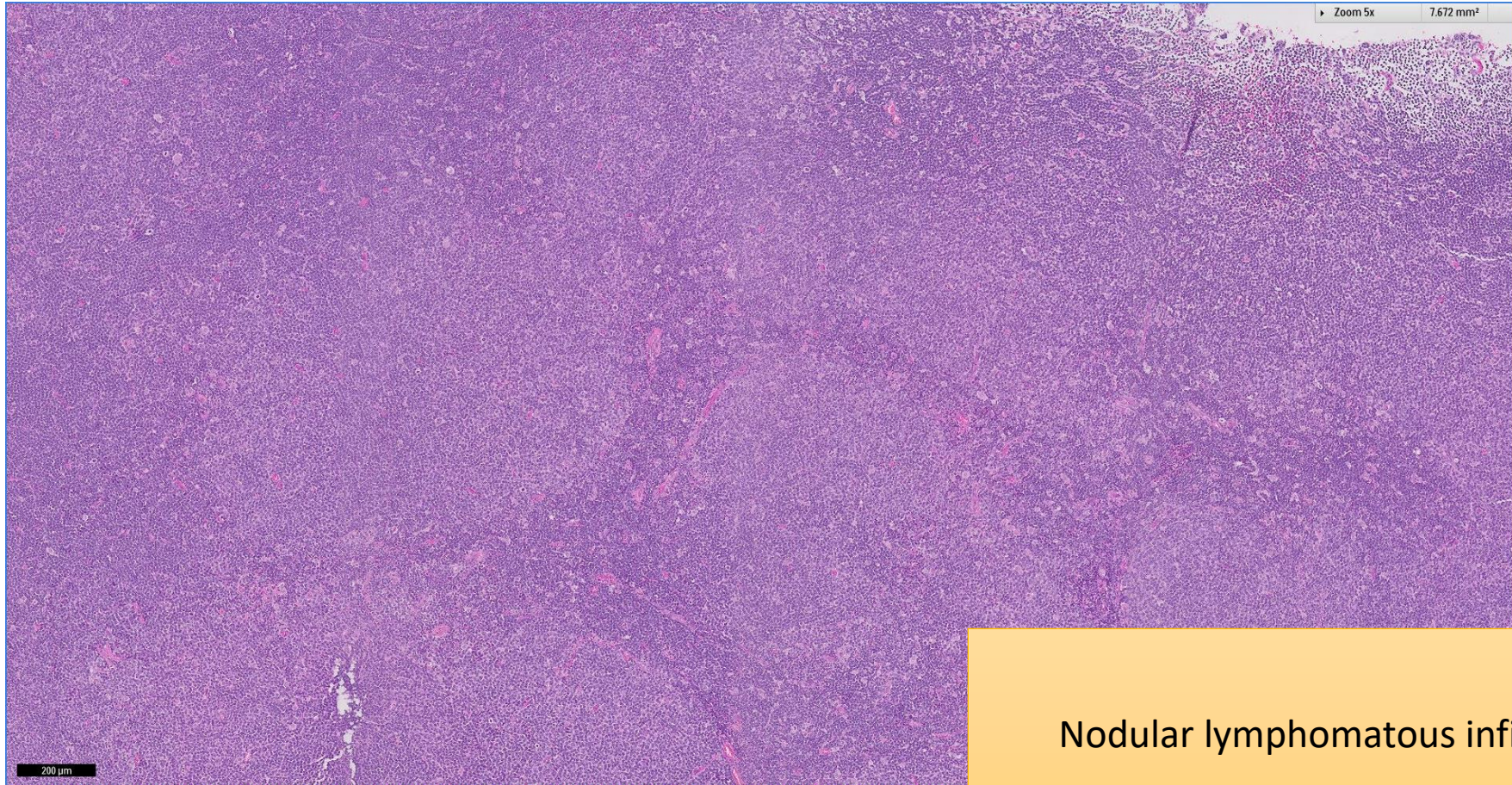
- Clinical History:
 - 70+ years old, Male. Atypical lymphocytes in peripheral blood with lymphadenopathy.
- Specimen:
 - Right cervical lymph node excision

SGH CASE 34: 17RE158 H&E



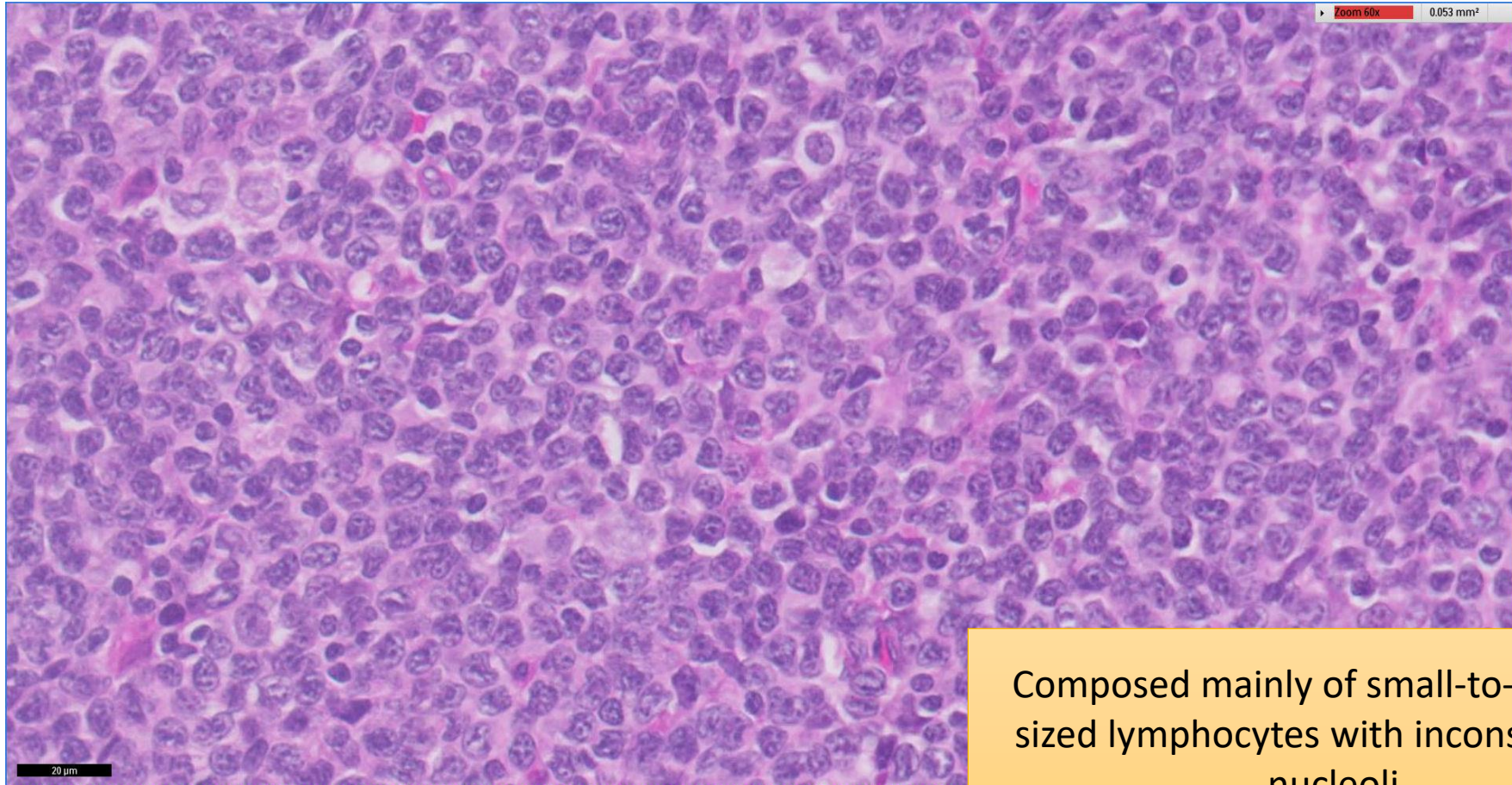
Nodular lymphomatous infiltrate

SGH CASE 34: 17RE158 H&E



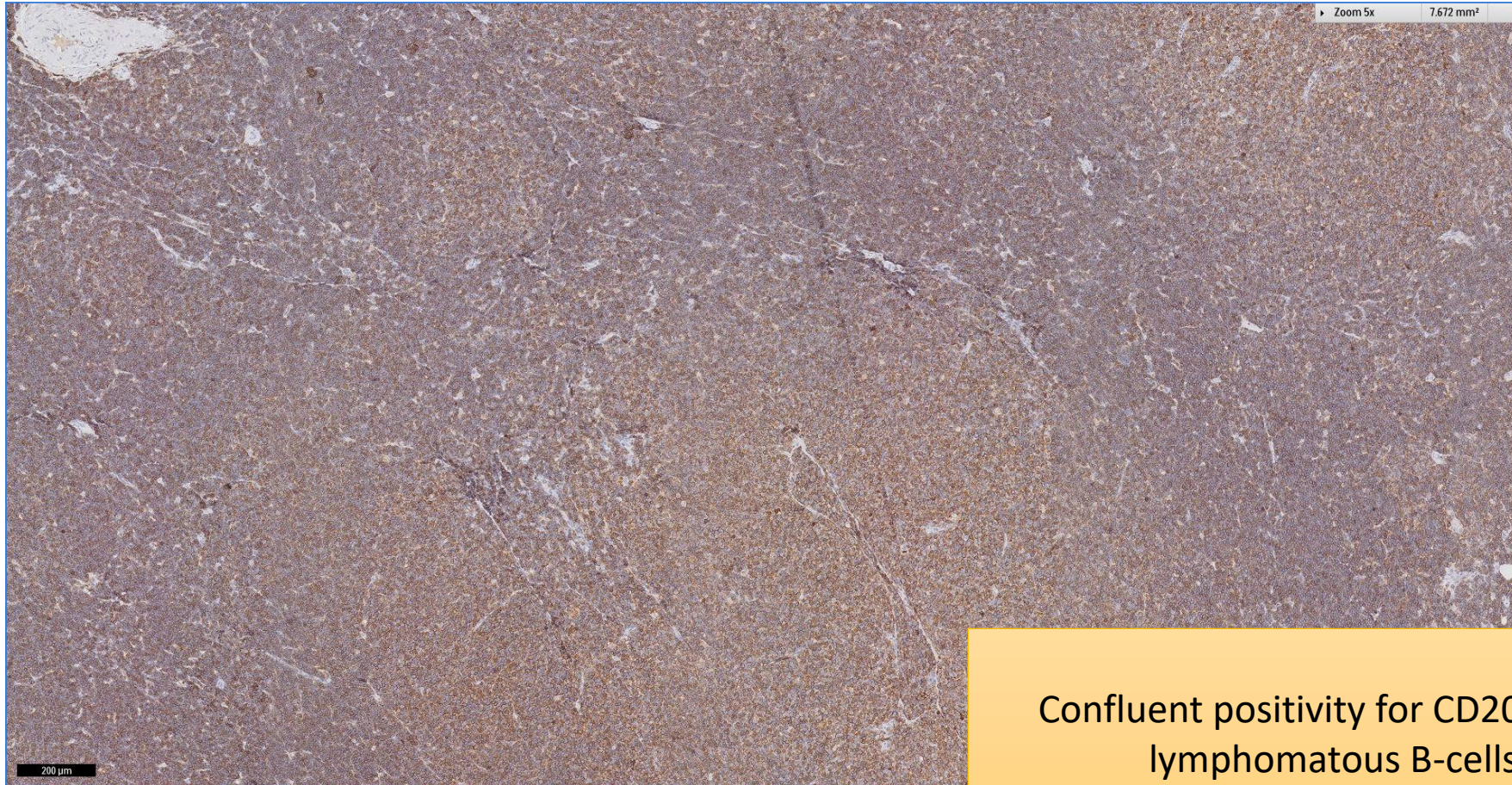
Nodular lymphomatous infiltrate

SGH CASE 34: 17RE158 H&E



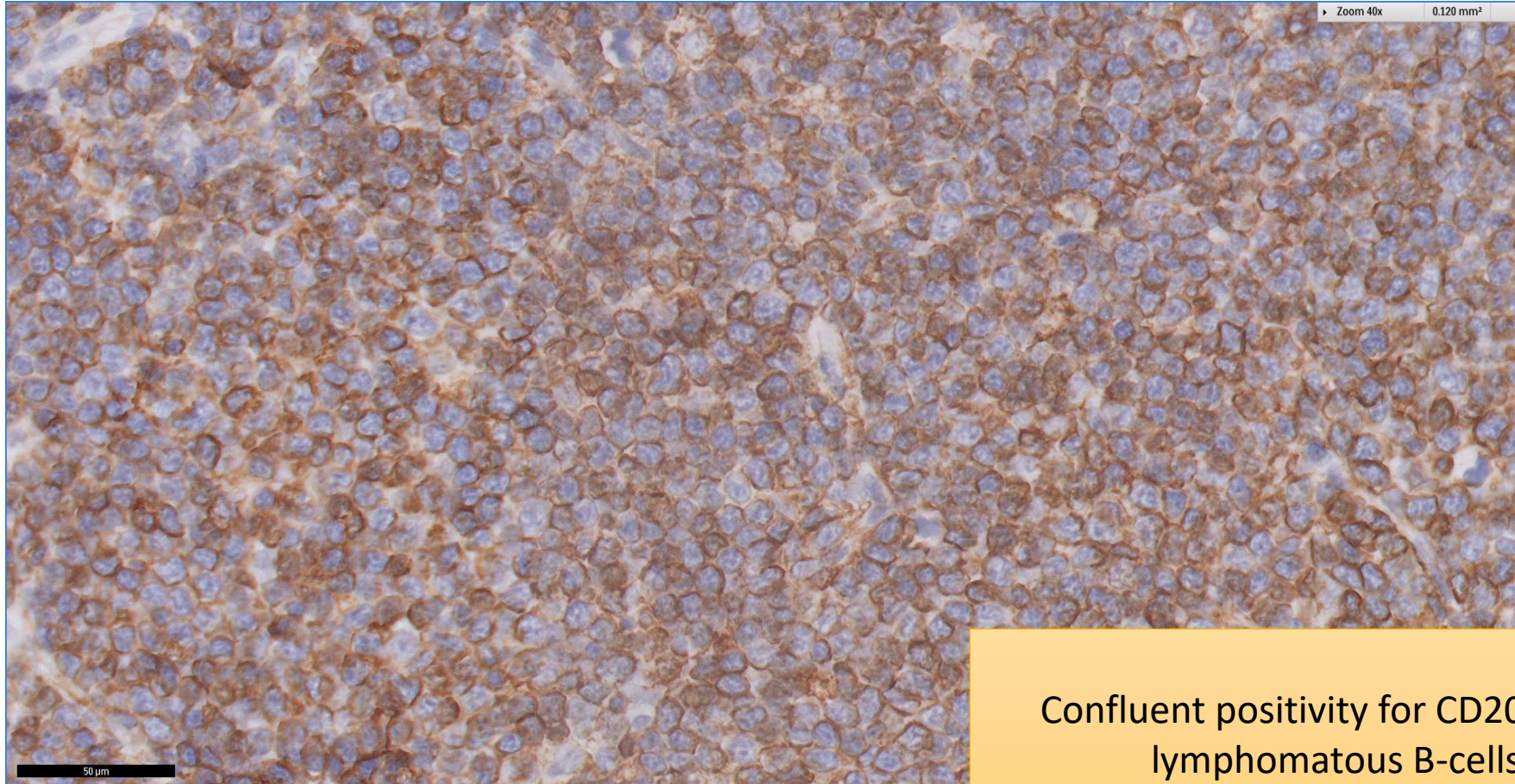
Composed mainly of small-to-medium sized lymphocytes with inconspicuous nucleoli

SGH CASE 34: 17RE158 CD20



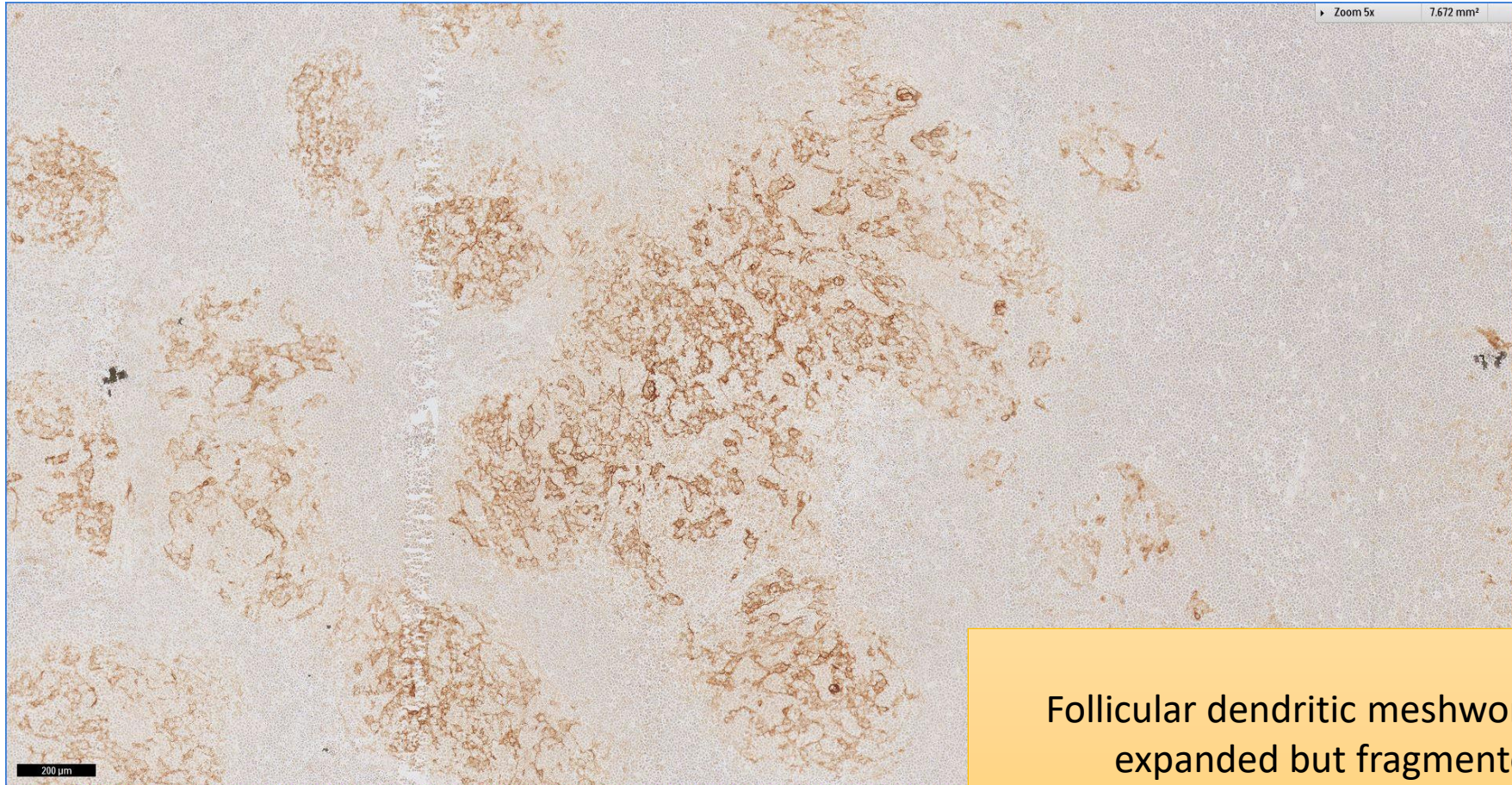
Confluent positivity for CD20 in the lymphomatous B-cells

SGH CASE 34: 17RE158 CD20



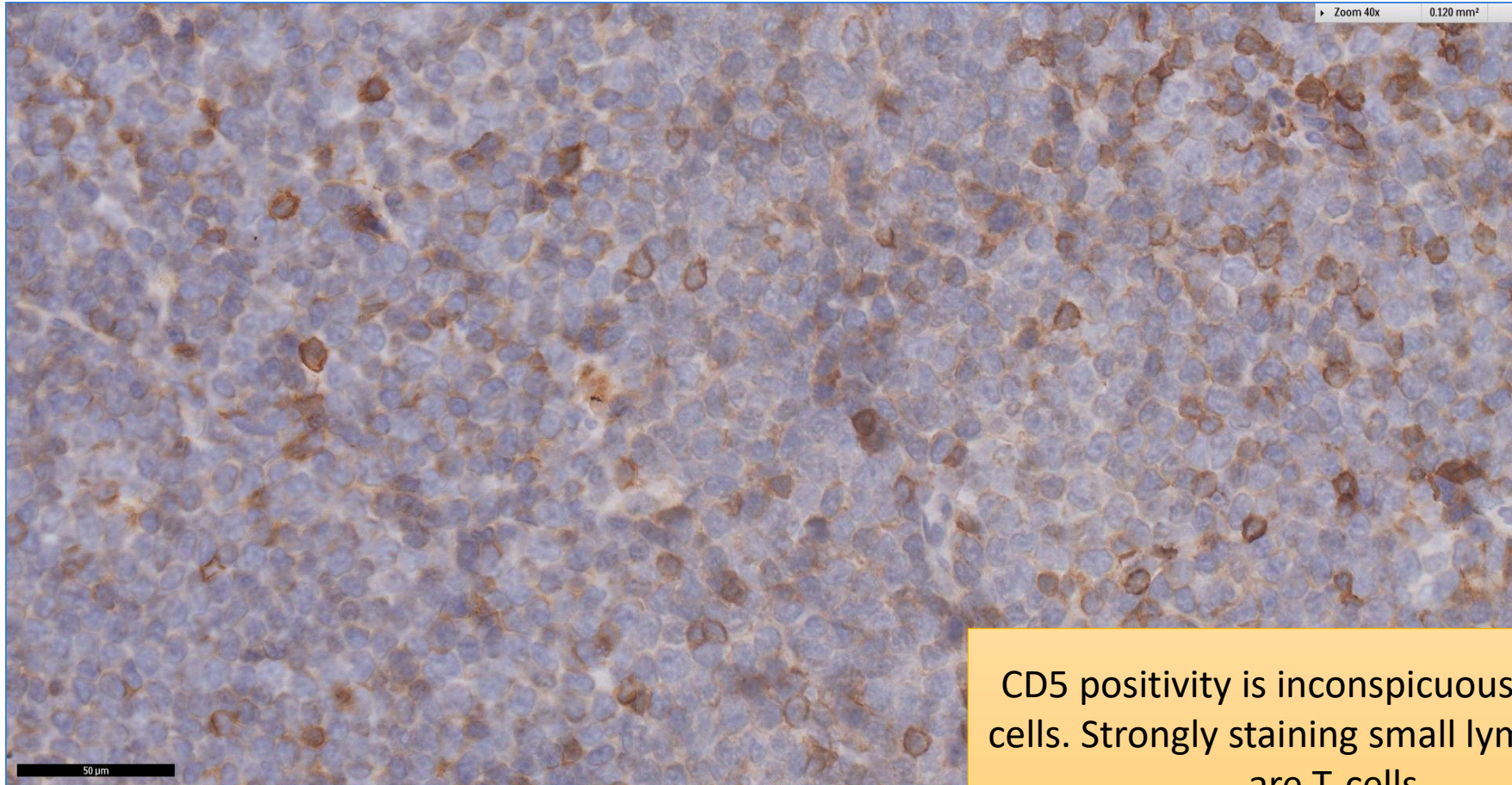
Confluent positivity for CD20 in the lymphomatous B-cells

SGH CASE 34: 17RE158 CD21



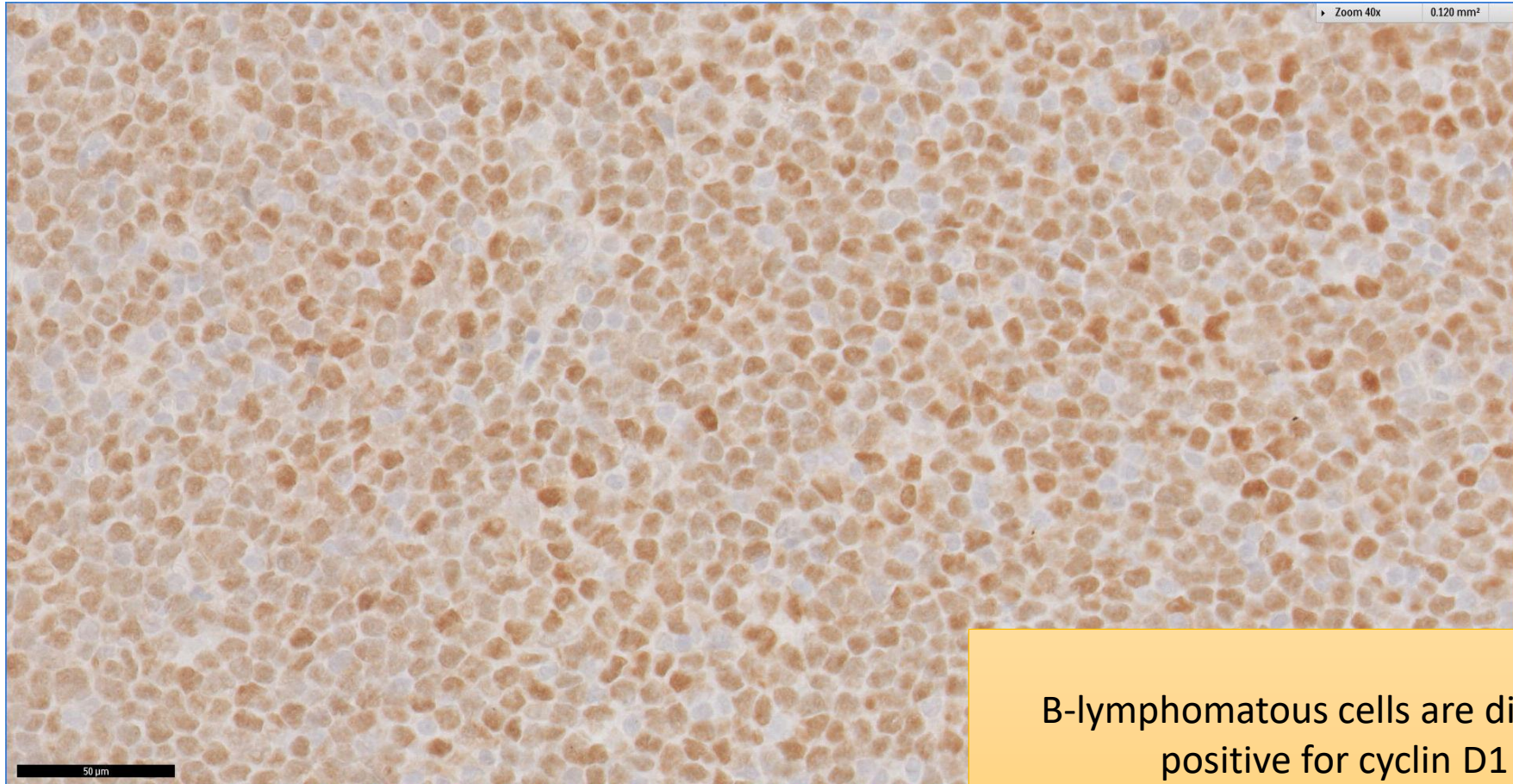
Follicular dendritic meshworks are expanded but fragmented

SGH CASE 34: 17RE158 CD5



CD5 positivity is inconspicuous in the B-cells. Strongly staining small lymphocytes are T-cells

SGH CASE 34: 17RE158 CYCLIN D1



B-lymphomatous cells are diffusely positive for cyclin D1

SGH CASE 34: 17RE158

- Diagnosis
 - Mantle Cell Lymphoma
- Flow cytometry of blood shows clonal B-lymphocytes
- CCND1(11q13)/IGH(14q23) fusion probes is positive for CCND1/IGH fusion