

E-cases MAPCON 2023 (Case Histories)

Herewith sharing the link for E cases

Link: <http://122.176.16.110/DSServer/Login.aspx>

Username: test

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MAPCON E-Case No	History	College	Case No
E Case No 1	30/M, multiple well defined papules all over face since 12 years. Skin biopsy taken from right cheek. Single H&E slide of skin biopsy.	D. Y.Patil Medical College, Nerul, Navi Mumbai	CASE 3 (E-case)-
E Case No 2	21 years old male with chief complaints of anaemia and fever since 8 days. On per abdominal examination splenomegaly noted. CBC report showed RBC-3.85 millions /cu.mm , Hb-5.5 g/dl, WBC-23,560/ cu.mm, platelets- 15,000/cu.mm. DLC: P-90%, L-8%,M-1%,E-1%. PS for opinion provided.	Govt Medical college, Akola	3 (E case)
E Case No 3	57 yr old female,K/C/O Ph positive ALL,post allogenic haploidentical stem cell transplant,was on immunosuppression. Now came with c/o loose watery motions and abdominal pain. Sigmoidoscopy showed rectal erythema. Rectal biopsy submitted.	Deenanath Mangeshkar Hospital & Research Center,Pune	E-Case 3
E Case No 4	72 year male. Left superficial parotidectomy specimen. C/S- well circumscribed, encapsulated tumour of size 3.5x3cm, solid grayish brown areas with multiloculated cysts containing brownish fluid.	Shri.Vasantrao Naik Government Medical College, Yavatmal	Ecase
E Case No 5	A four year old girl, presented with vomiting,headache and imbalance while walking since one month. MRI brain showed a well-defined lobulated SOL measuring 41x38x38mm involving cerebellar vermis and right cerebellar hemisphere,hyperdense on contrast. (1 HE slide- E slide provided)	Seth GSMC & KEMH,MUMBAI	3
E Case No 6	68 yr male presented with wt loss , generalised weakness and facial puffiness since 2 months . No significant past history. On general and systemic examination - P/A mild splenomegaly. CBC Hb -2.6 gm/dl, WBC - 3,890/cumm, platelets - 54,000/microlit , ESR - 58MM/hr , osteoskeletal survey WNL .	IGGMCH NGPUR	E Case

E Case No 7	54-Year-old male with complaints of heaviness and pain in abdomen since 2 months. Serum tumor markers were within normal limits. Contrast Enhanced Computed Tomography (CECT) revealed a large 8.2X 6.4 X 5.6 cm solid heterogeneously enhancing mass in the wall of the caecum; sparing the luminal aspect. No necrosis or cystic change is seen. Right hemicolectomy was performed. Images of one H & E slide from caecal growth are submitted.	TMH Mumbai	Case 2 (E-case)
E Case No 8	60 year old female presented with complaints of multiple erythematous circular plaques over malar area of face and scalp for the past 7 years. Images of incisional biopsy from the scalp lesion provided.	JIU's IIMSR, Warudi, Jalna	IIMSR 3 (E Case)
E Case No 9	76/Male, multiple hyperpigmented plaque with few papules over posterior aspect of right thigh. Sinus tract seen on USG. Punch biopsy of skin right thigh.	MAEER MIT PUNE'S MIMER Medical College and Dr BSTR Hospital, Talegaon D Pune	E Case
E Case No 10	40 years old male, presented with papular swelling over left upper arm since 3 weeks. O/E: A targetoid lesion measuring 8mm in diameter with central brownish red papule surrounded by violaceous indurating ring.	RGMC, Kalwa, Thane.	III.e-case
E Case No 11	A 32 years old female. An incidental autopsy finding in a case of sudden death.	Vilasrao Deshmukh Govt. Medical College, Latur	Case-03
E Case No 12	55 year female, c/o right-sided nasal blockage since 1 month with bleeding since 1 day. O/E swelling of right alar region and dorsum. DNS to left side with no fogging on right side. On Anterior Rhinoscopy: chocolate brown, polypoidal mass obscuring the view of floor, roof, cavity and middle turbinate on right side. On CT- PNS showing polyposis involving all paranasal sinuses with naso-ethmoidal and naso-maxillary extension. Deviation of nasal septum, towards left with bilateral inferior turbinates thickening. Grossly received multiple, friable, reddish brown, soft to firm tissue bits aggregating to 4.5 cm.	GMC Aurangabad	case 3

E Case No 13	66 years female, presented with right sided weakness with facial deviation. MRI scan – two confluent peripherally enhancing thick walled lesion showing central restricted diffusion in left fronto-parietal lobe with extensive vasogenic edema - suggestive of metastasis than abscess. Excision of SOL preformed, representative section provided.	Vivekanand Medical Foundation and Medical Research Centre, Latur	3
E Case No 14	30yr old female c/o chronic back pain, weakness and inability to walk. MRI mass in D6-D7	Dr SCGMC, Nanded	E Case
E Case No 15	82 years/ male, complaints of swelling in groin with occasional pain. Clinically inguinal hernia with varicocele. Gross: Received left orchidectomy specimen. Left testis measuring 4x 2x 2 cm and spermatic cord measuring 9 cm in length. Thickened capsule with multiple cystic areas around testis and in the spermatic cord. One H & E section provided.	BARC Hospital, Anushakti Nagar, Mumbai	Case 3 (E Case)
E Case No 16	76 year old male presented with left lower limb lymphedema. CT findings – Multiple hypermetabolic nodular lesions along the cutaneous, subcutaneous as well as submuscular planes. MRI findings – Large irregular lobulated heterogeneous T2 hyperintense mass lesion seen extending from the popliteal fossa upto the mid leg region predominantly on the dorsal aspect measuring about 30.1 x 14.3 x 15.2 cm. The lesion closely abuts the posterior tibial cortex. There are multiple smaller satellite nodules seen along the medial aspect of the leg and the antero-lateral tibial shin region.	Apple saraswati multispeciality hospital, Kolhapur	