## 60th ANNUAL DIAGNOSTIC SLIDE SESSION 2019.

## CASE 2019-9

Submitted by: J. Stephen Nix<sup>1</sup>, Lisa M. Rooper<sup>1</sup>, Analiz Rodriguez<sup>2</sup>, Murat Gokden<sup>2</sup>

<sup>1</sup>Johns Hopkins School of Medicine 600 N. Wolfe Street/Carnegie 417 Baltimore, MD 21287

<sup>2</sup>University of Arkansas for Medical Sciences 4301 W. Markham St., #517 Little Rock, AR 72205

**Clinical History:** 

A woman in her early forties presented with right-sided headache, heaviness in the head, tongue tingling and numbness, and vomiting. After an initial impression of Bell's palsy in the Emergency Department, imaging showed a mass involving the V2 division of the trigeminal nerve, eroding into the right maxillary sinus, with expansion of the right foramen rotundum. After an initial resection extending up to the foramen rotundum and subsequent gamma-knife therapy, her complaints continued and the mass was found to now extend into the cranial cavity, abutting the right internal carotid artery and involving the clivus, sphenoid body, and petrous apex. The right temporal lobe exhibited extensive surrounding vasogenic edema. A second, more extensive resection was performed. Despite subsequent radiation and chemotherapy, the tumor continued growing and the patient died as a consequence of mass effect and herniation.

Autopsy findings: N/A

Material submitted: 1 H&E-stained paraffin section

Points for discussion:

- 1. Differential diagnosis
- 2. Additional work-up