

## 65<sup>th</sup> ANNUAL DIAGNOSTIC SLIDE SESSION 2024

### CASE 2024-6

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Clinical History: A 68-year-old male patient presented with intractable vomiting and headache. Past medical history was significant for cutaneous melanoma, with lesions of the lung, left external iliac lymph node (which had been previously biopsied), and liver. Magnetic Resonance Imaging (MRI) revealed a heterogeneously enhancing 2.8 cm mass of the right cerebellum with edema and mass effect, including compression of the 4th ventricle. The right cerebellar mass was resected. Follow-up MRI at 2 months after surgery showed no residual cerebellar disease.

Material submitted:

- 1 H&E-stained slide of the right cerebellar mass
- Preoperative MRI imaging

Points for discussion:

1. Interpretation of immunohistochemical and molecular data from cutaneous, lymph node, and cerebellar lesions
2. Diagnosis