

CODE: T7800 M9063/1

ID NOS: HX22268 21446.

DIAGNOSIS: SEMINOMA OF TESTIS.

CLINICAL HISTORY: M/37. The patient noticed that this testis had slowly increased in size and had become painful over the previous 6 months. On examination it felt hard and was slightly tender. The testis and spermatic cord was surgically removed. Post operatively, he was given deep Xray therapy to the para-aortic lymph nodes. He was known to be well 11 years later.

MACROSCOPIC: The body of the testis has been dissected to show a tumour which is partly necrotic and partly haemorrhagic. The epididymis is not involved. The haemorrhage into the spermatic cord occurred at the time of the operation. The variegated appearance is rather unusual for a pure seminoma.

MICROSCOPIC: The seminoma consists of large tumour cells with many foci of necrosis and scattered lymphocytes (left image). The tumour cells have vesicular nuclei with prominent nucleoli, and scattered mitoses are present (right image).

