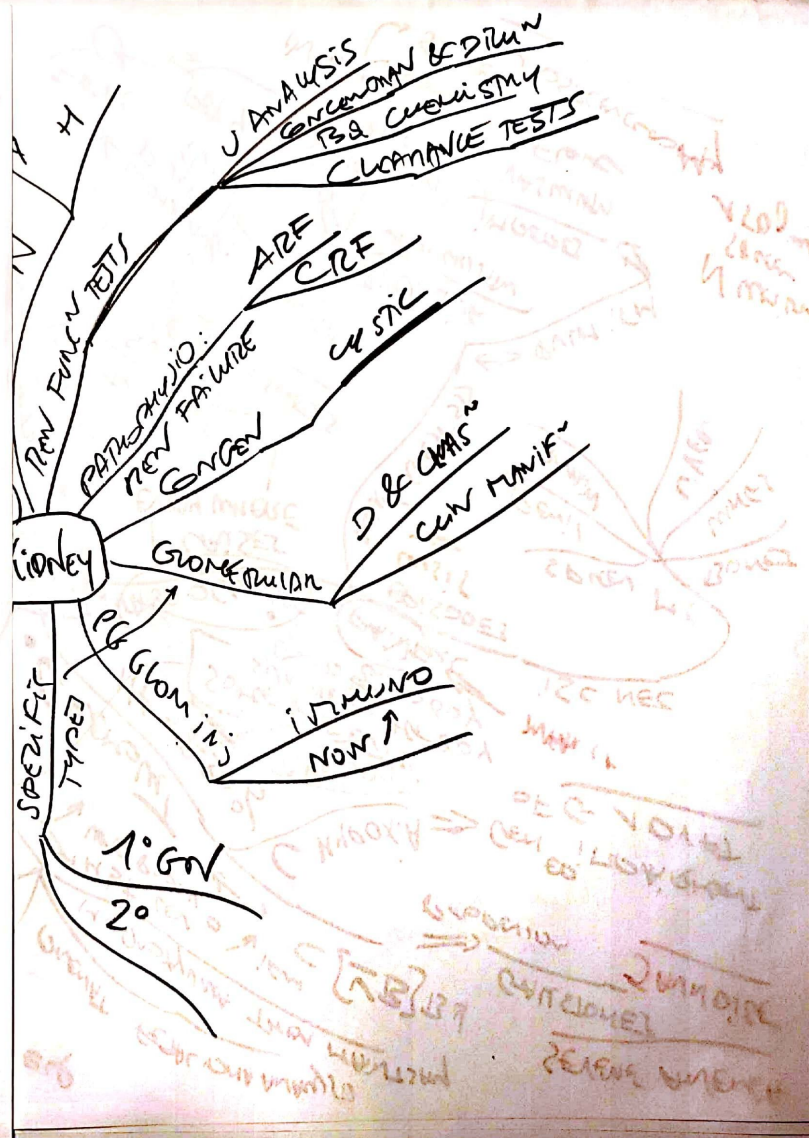
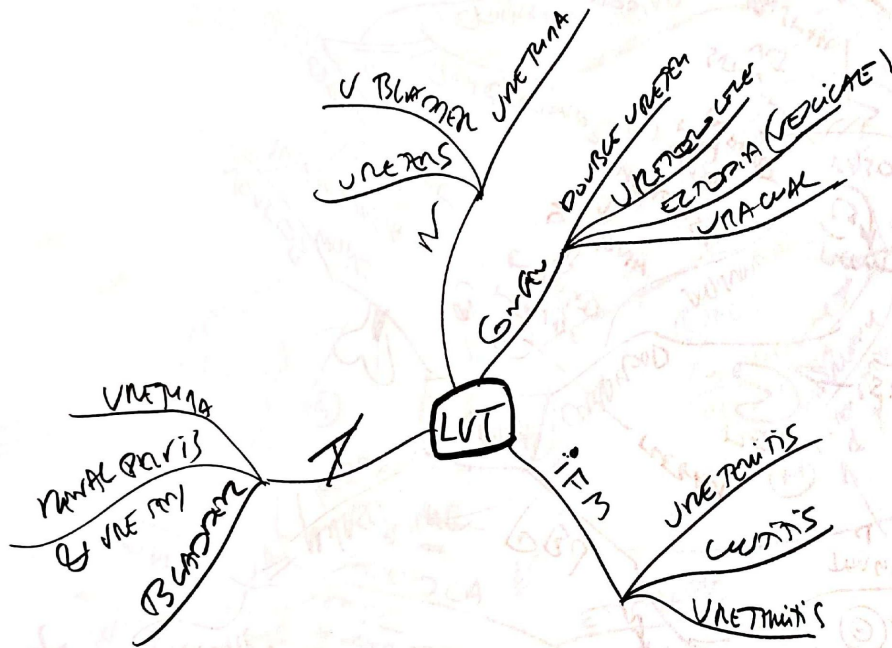
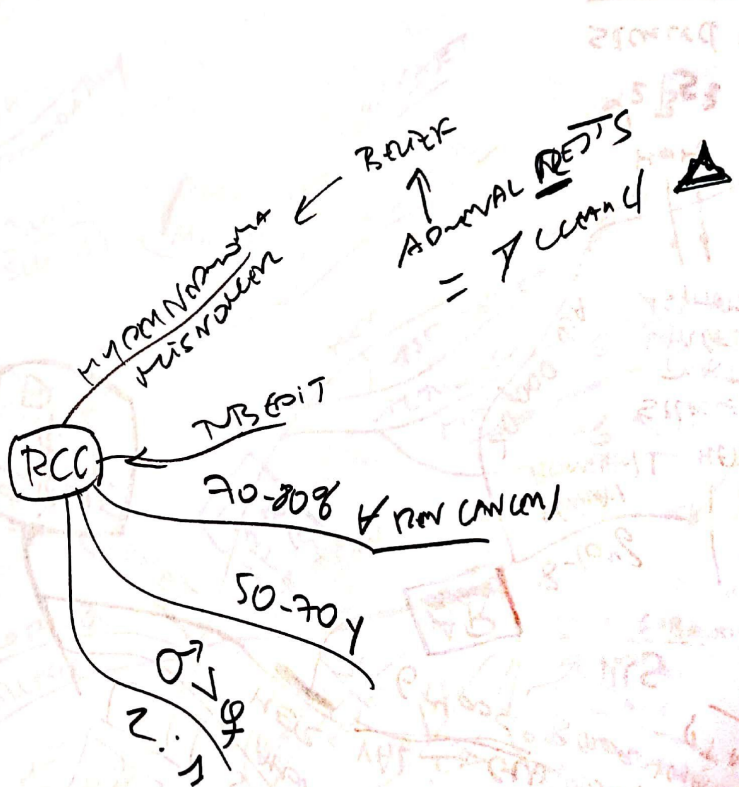


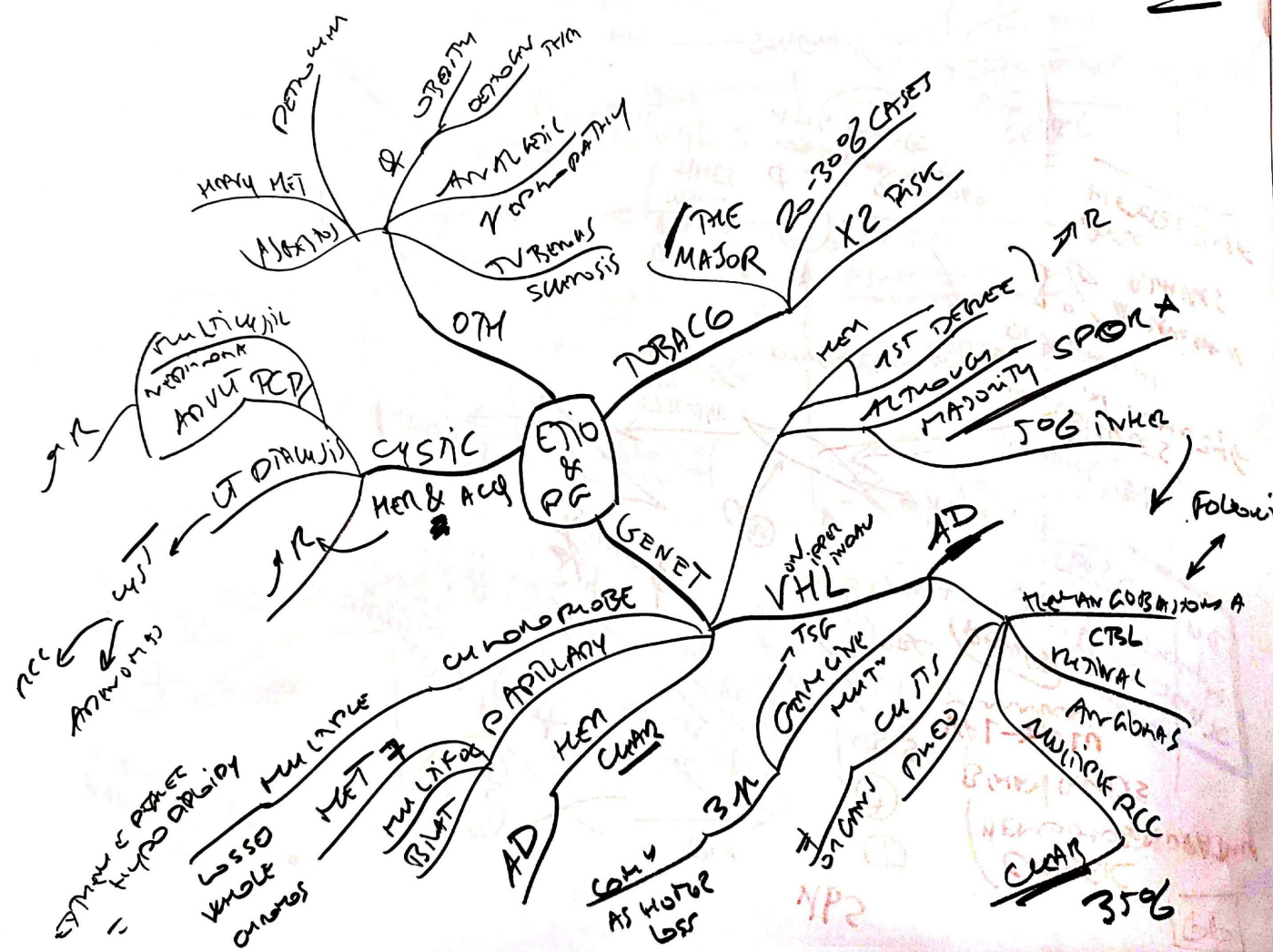
7th edition
HAN KIDNEY & LUT







RCC


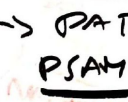

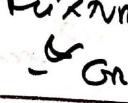




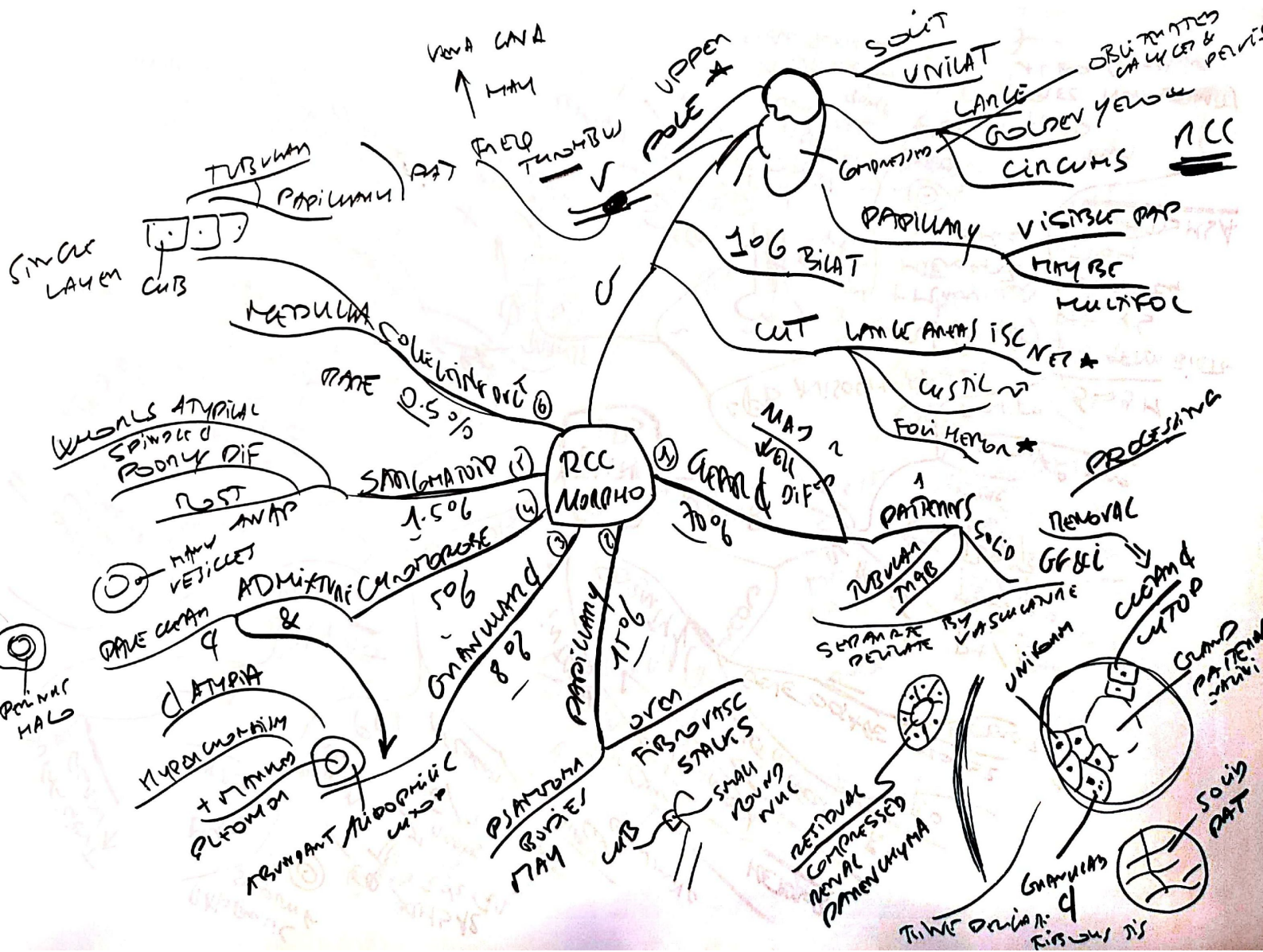
renal cell carcinoma

renal cell carcinoma

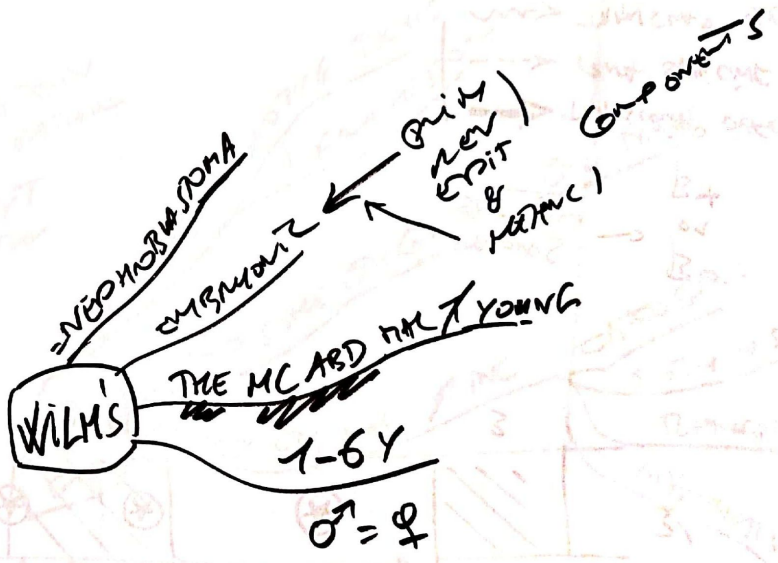
renal cell carcinoma

renal cell carcinoma

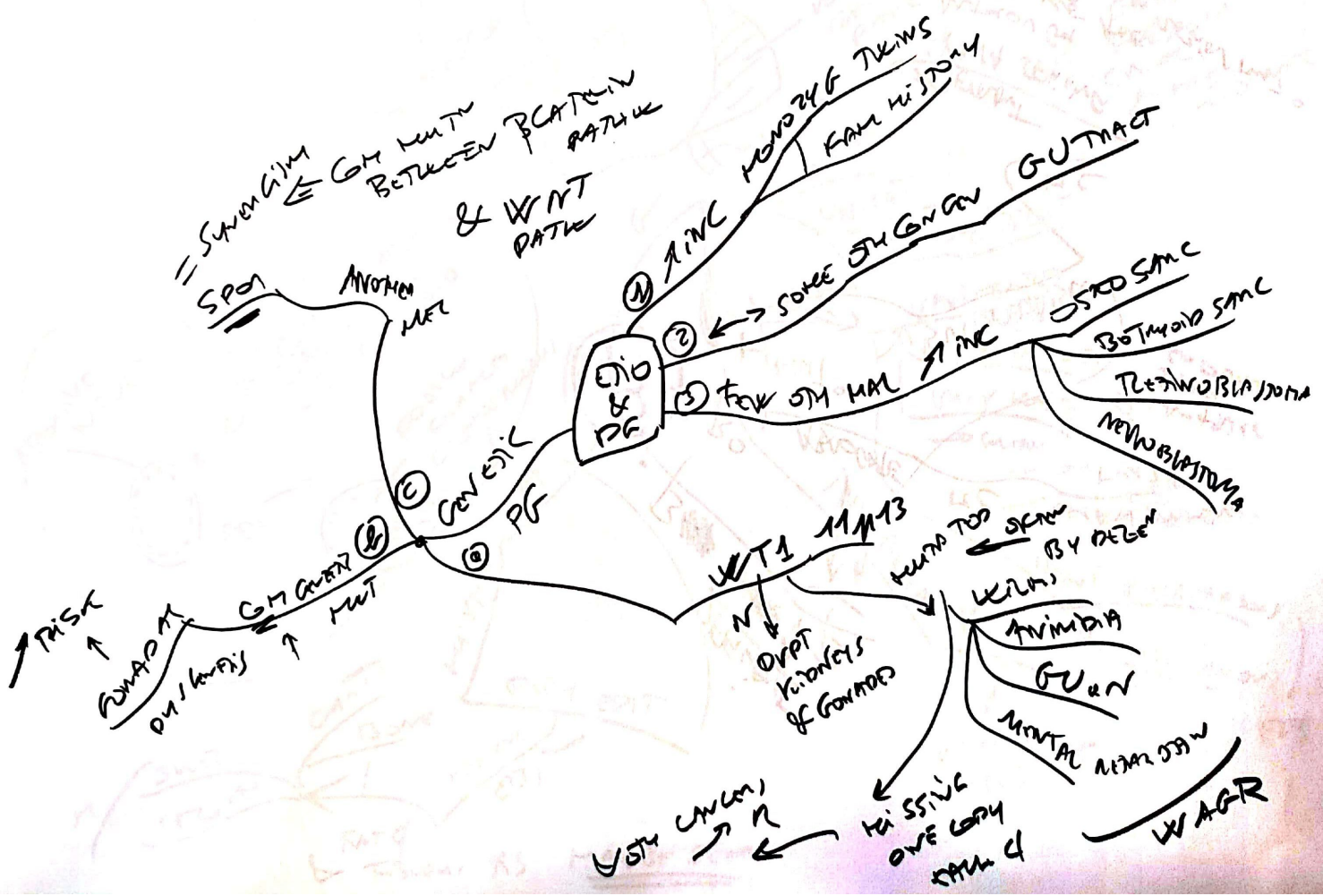
- CLEAR \square (PAP)	70%	SPOR & FAM HOMZ LOSS VHL 3	 <p>COMMON TOP OCCL - WCL DIF</p>
- PAPILLARY	15%	FAM & SPOR MET 7 TUBULE 1 LOSS Y SPOR & FAM	 <p>PAPILLARY PSAMMOMA BODIES</p>
- GRANULAR \square	8%		 <p>ABUNDANT ACIDOPHILIC - MIXED ATYPIA</p>
- CHROMOPHOBE	5%	- MULT XLOSSES - HYPODIPLOIDY	 <p>MIXTURE \odot PALE WCL \square - GRANULAR \square - PRINUC H₂O</p>
- SARCOMATOID	1.5%	-	 <p>W/ ONLY ANYPICAL ATYPICAL SPINDLE \square</p>
- ^{OVEREXP} CD117	0.5%	-	 <p>TUBULAR & PAPILLARY</p>

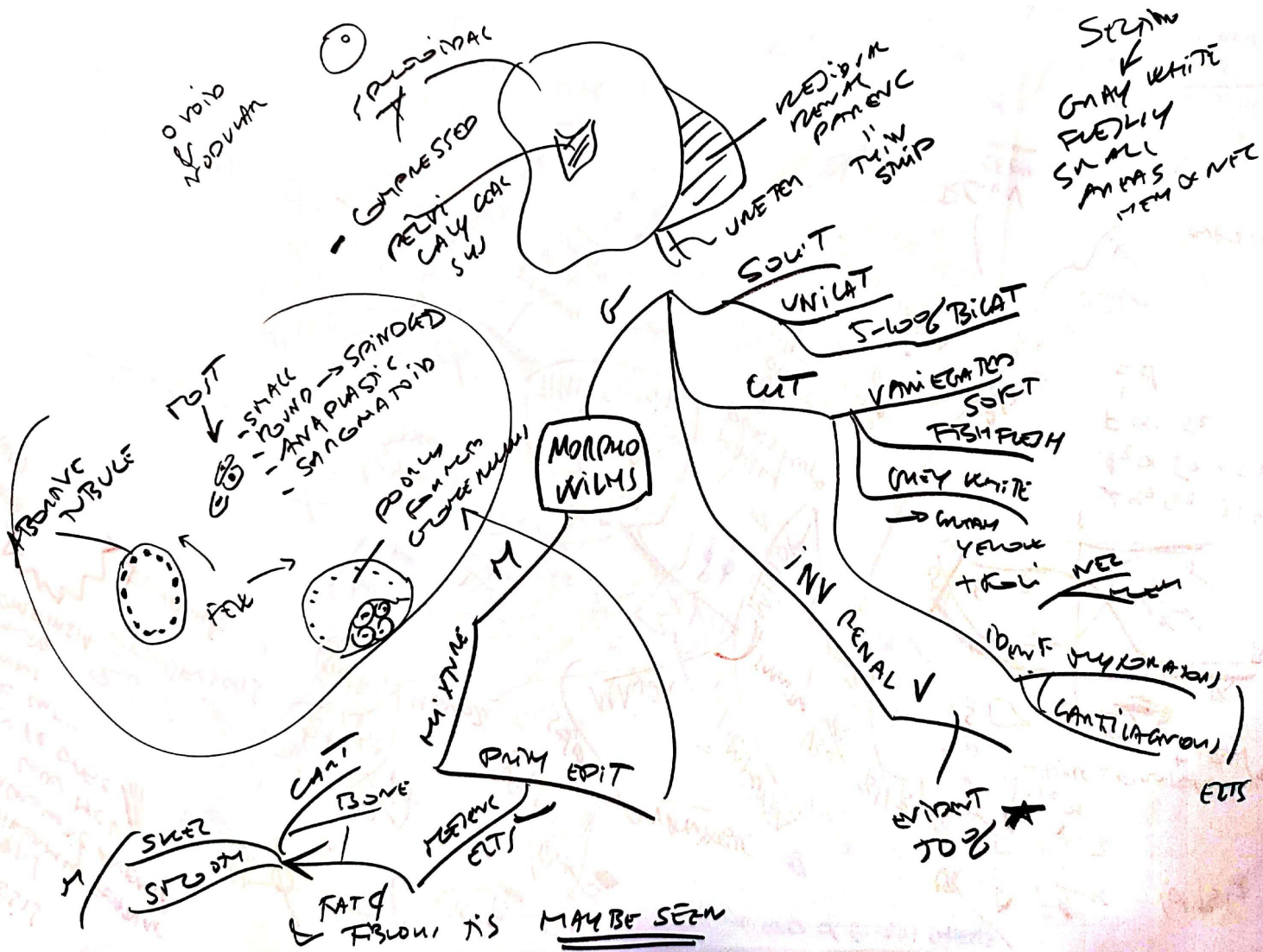


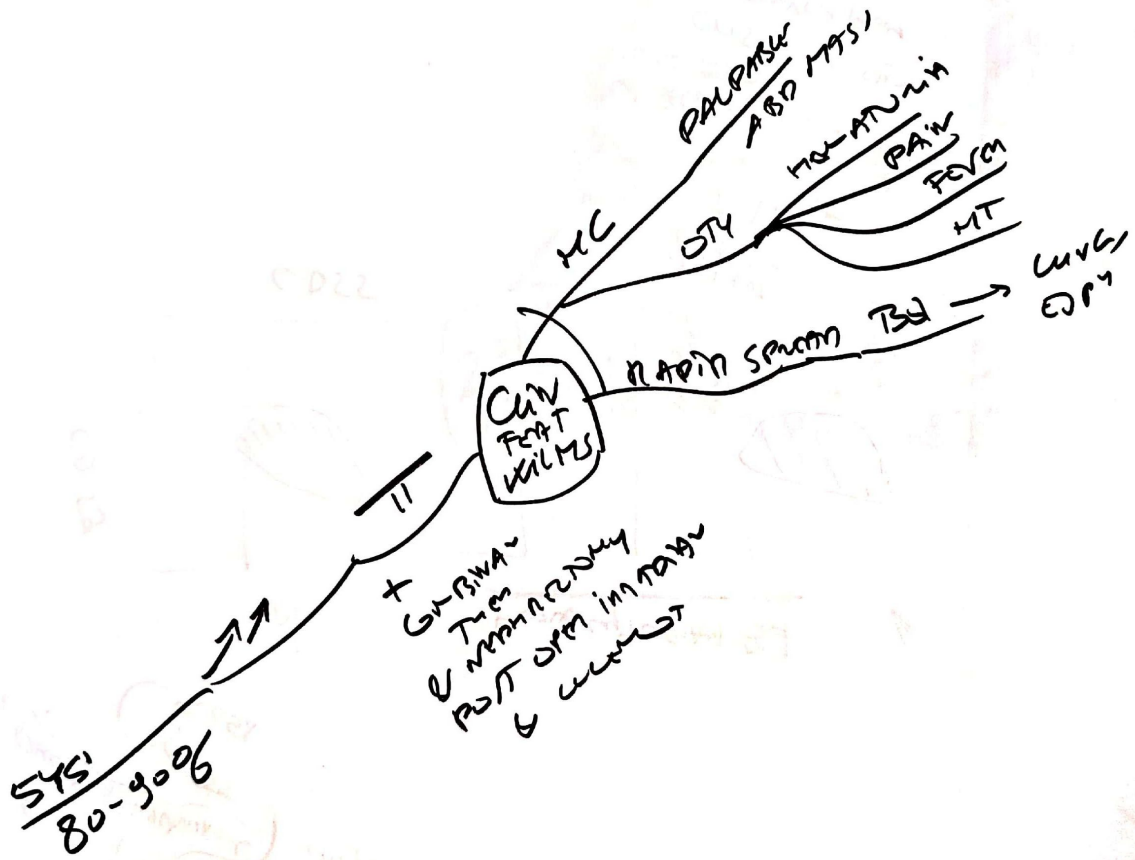


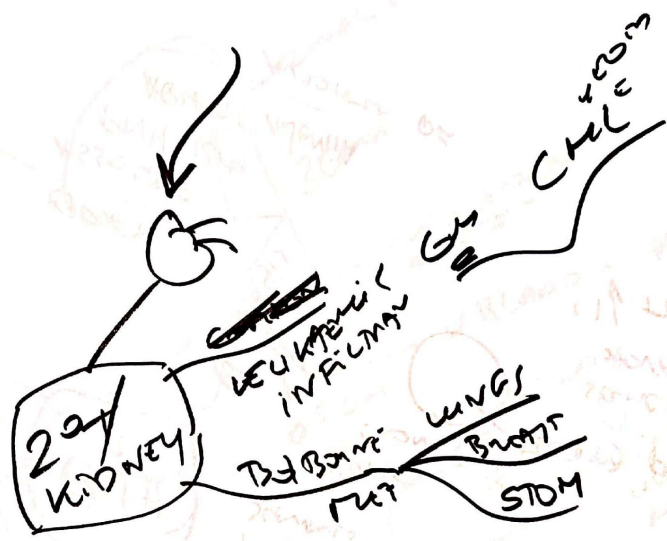


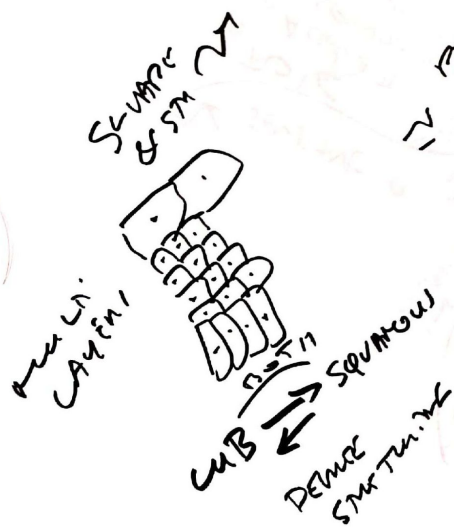
Wilms





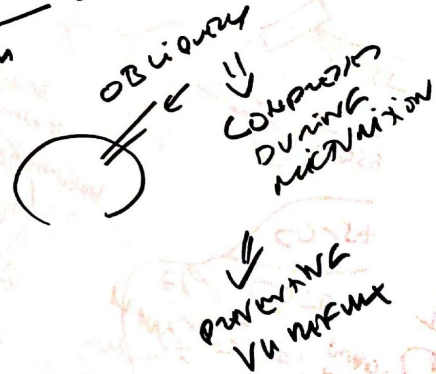
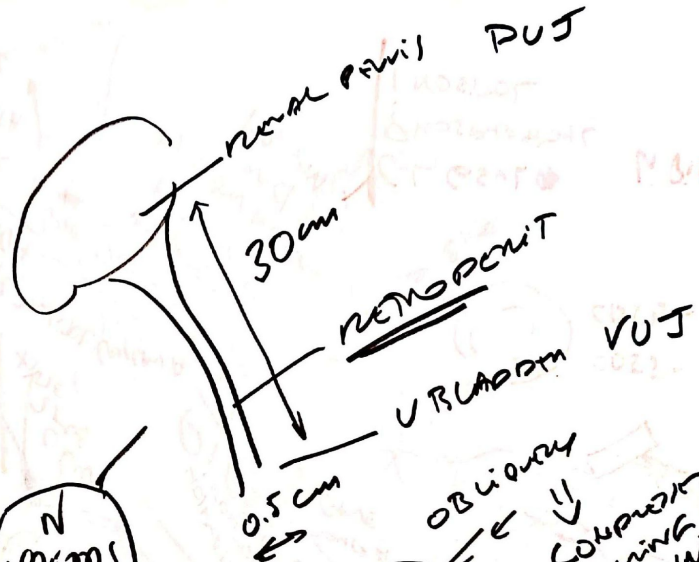
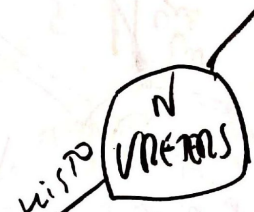






IN PELVIS & OUT FROM VENT

TRIPLOID *
PILLY MAKE LYMPH



OPEN FIBROUS I N VENTRAL LYMPH



CANCER & RISK

ABUNDANT EOSINOPHILS = URTICARIA & MISTO

BLOODEN

EXTERNAL

REFERENCES SW TO SKE

SKE PONE



2 SPES
TONGUE
BASE
↓
BLADDER NECK

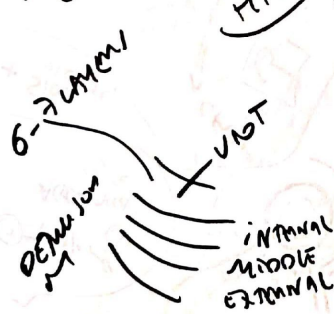
400-500ml
KIDNEY
ORBITAL

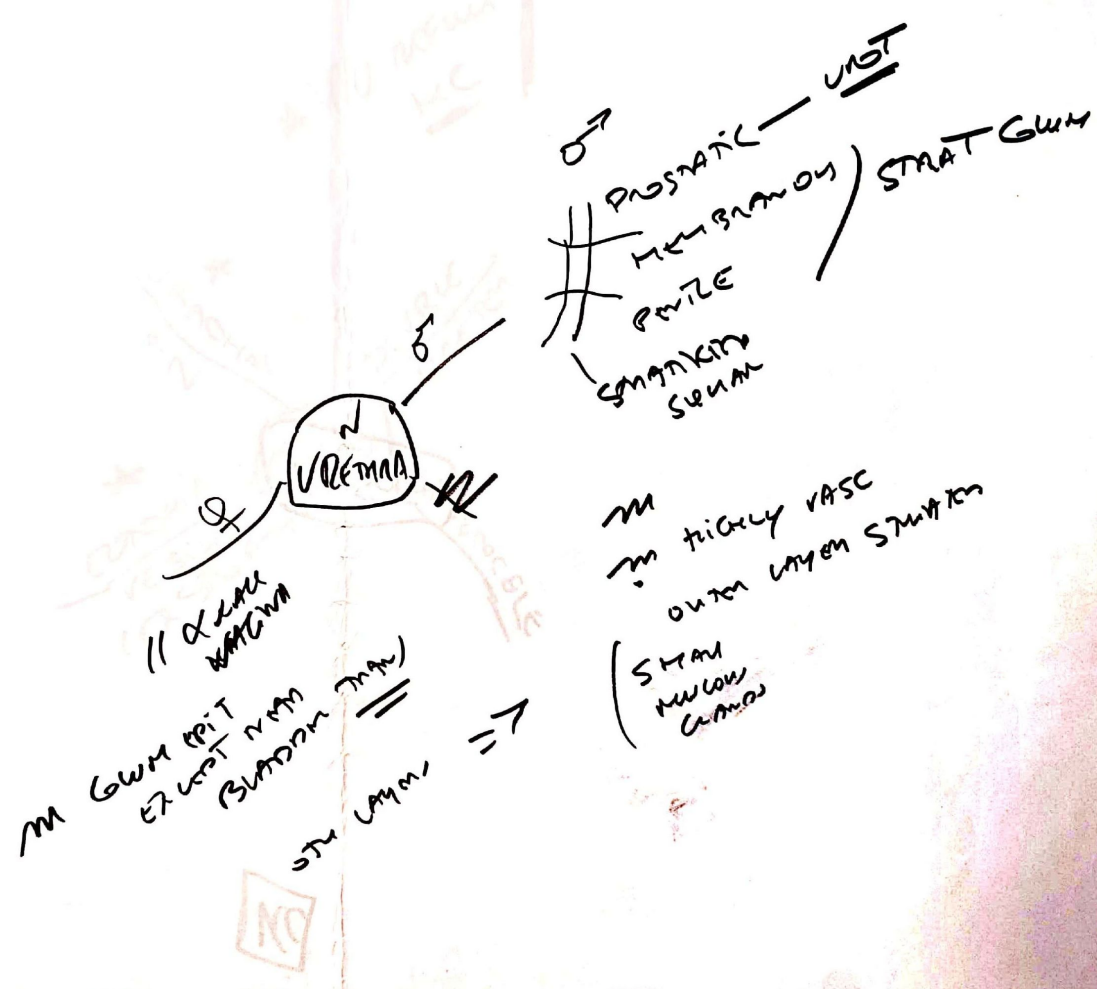
4.6g/min

PARTLY REFLECTS VOLUME

SKE X

DERIVED FROM PROLONGED
LUNG LAMP
ORAL VENTILATION





* VU reflux
MC //

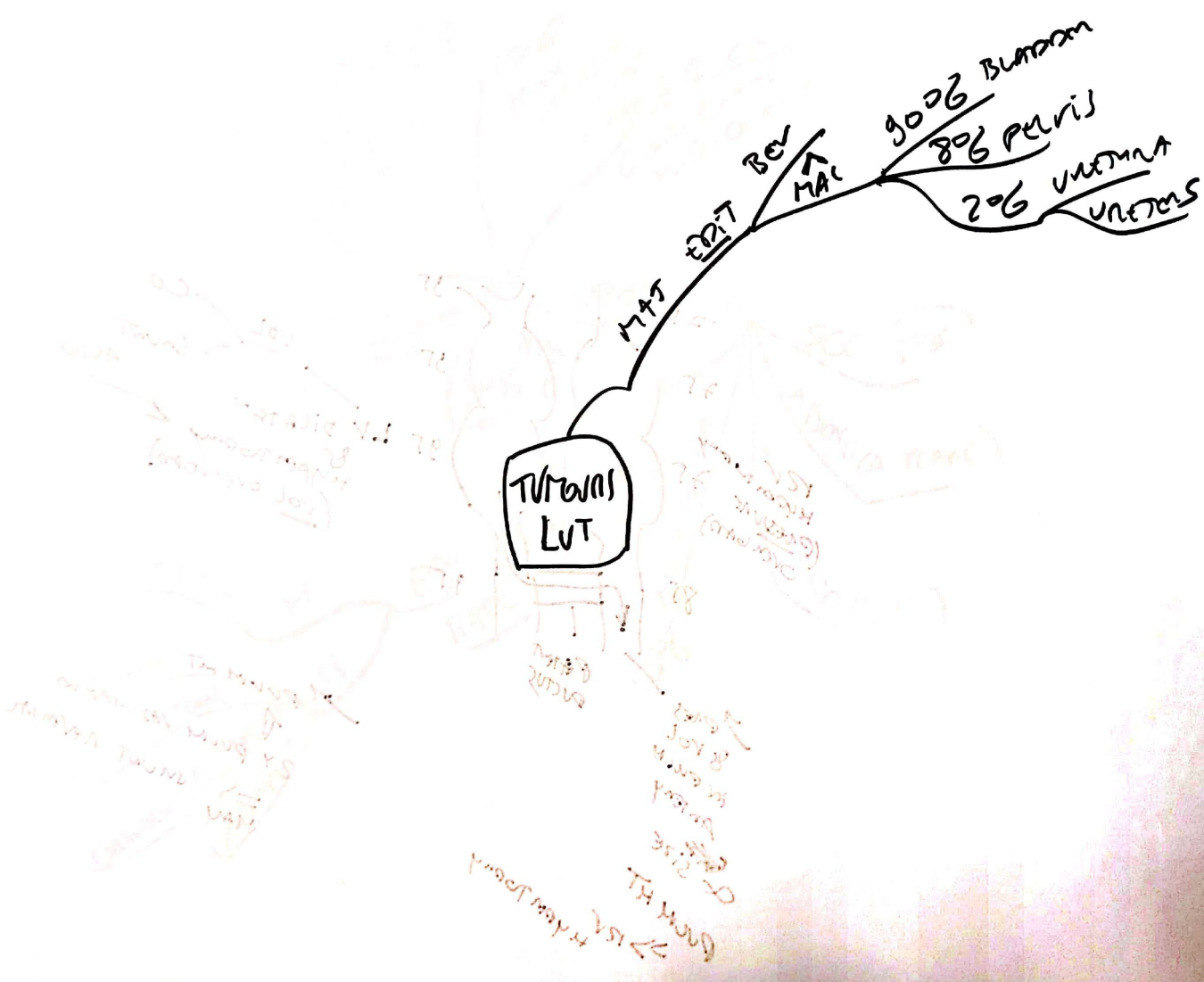
* URACHAL
2

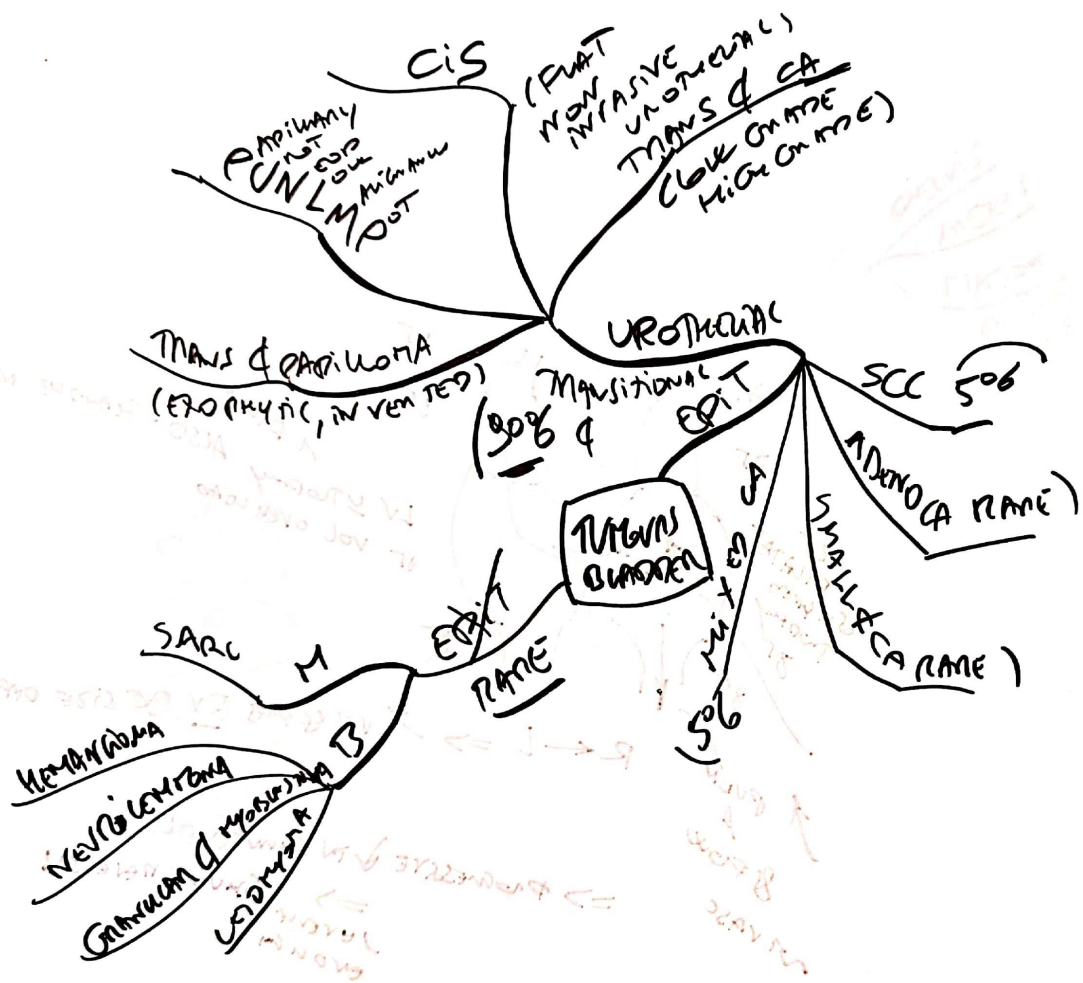
DOUBLE
URETER

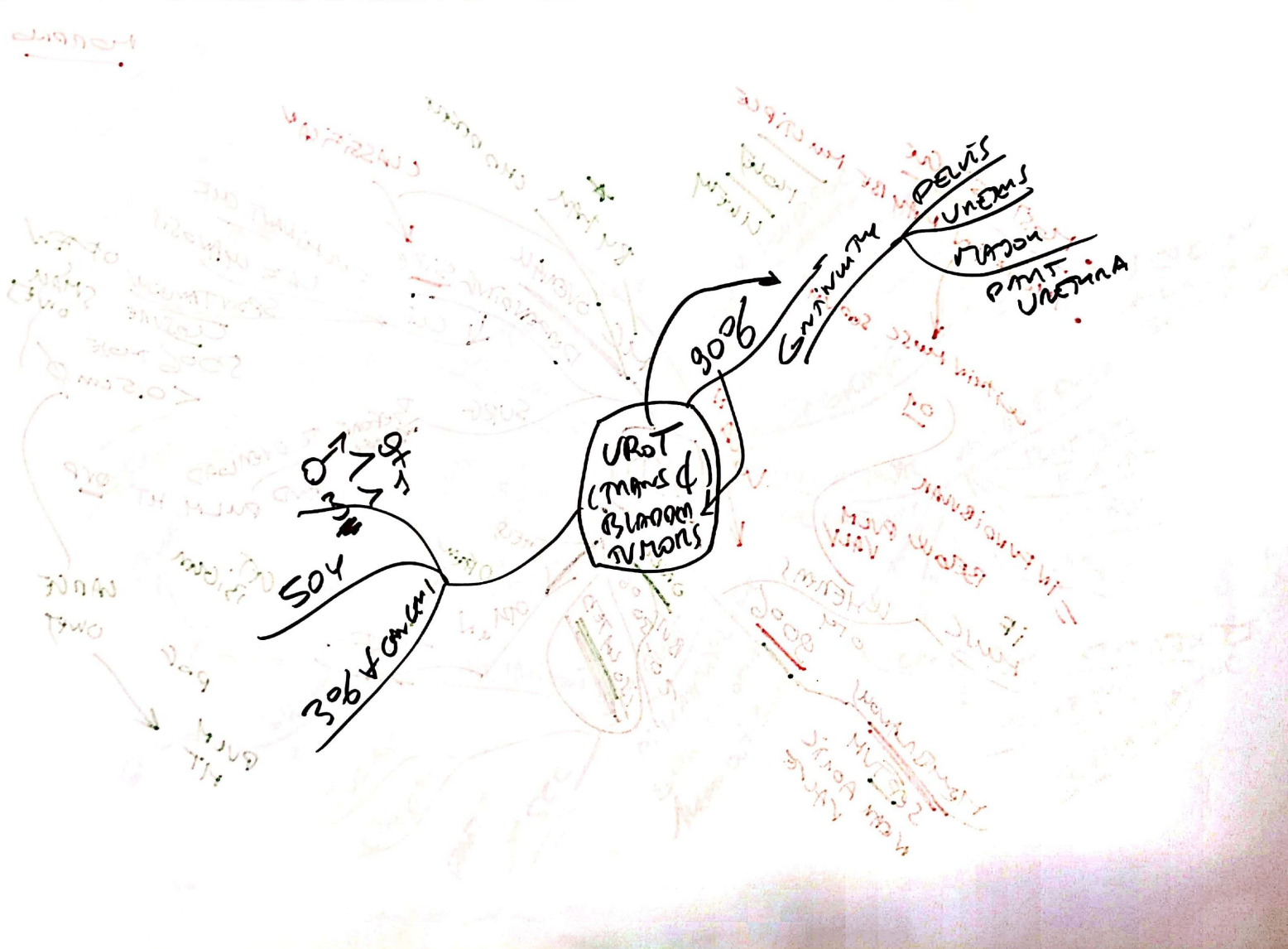
Genet

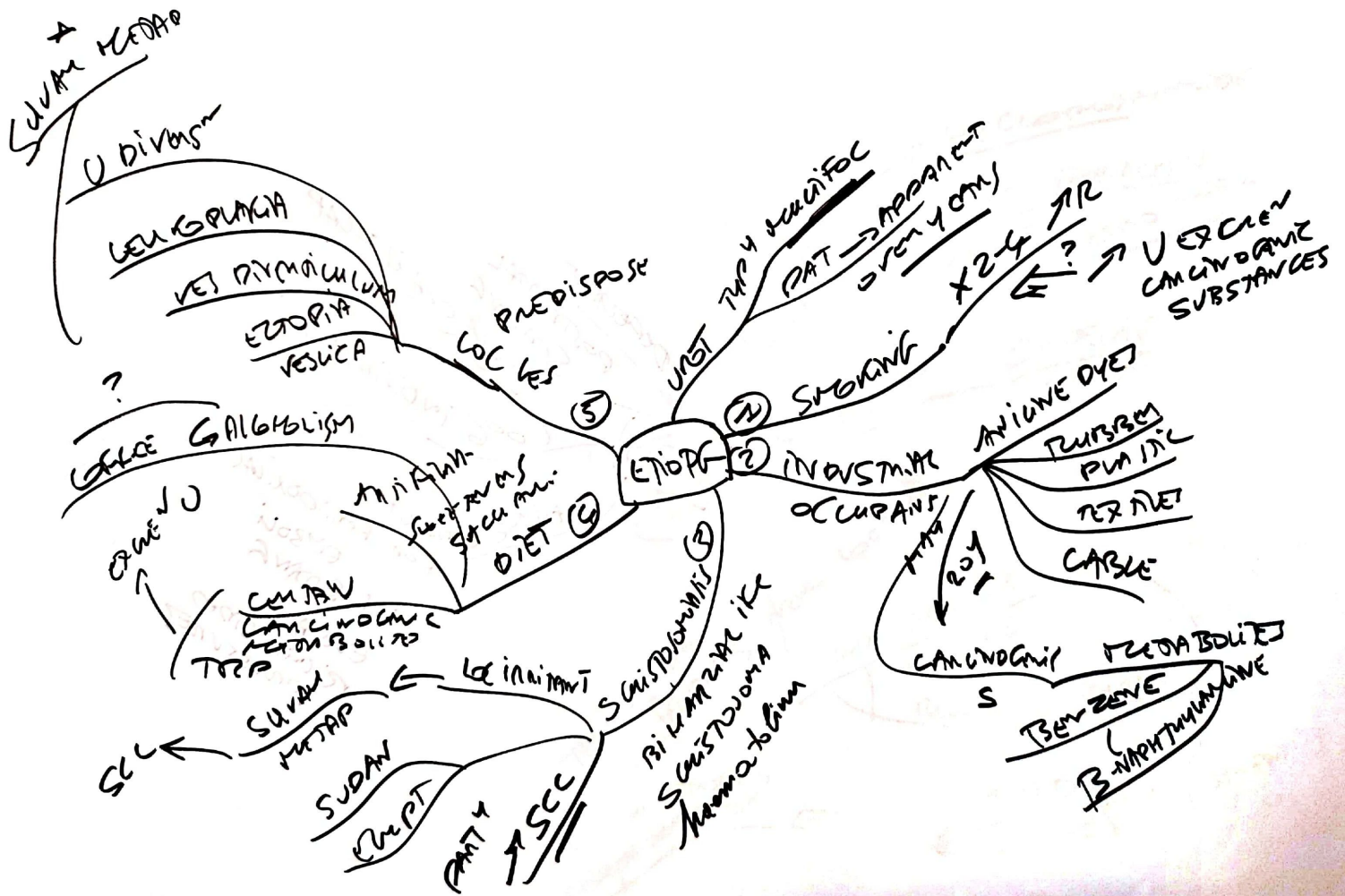
* ECTOPIA
VESICAE
(EX SUTURA)

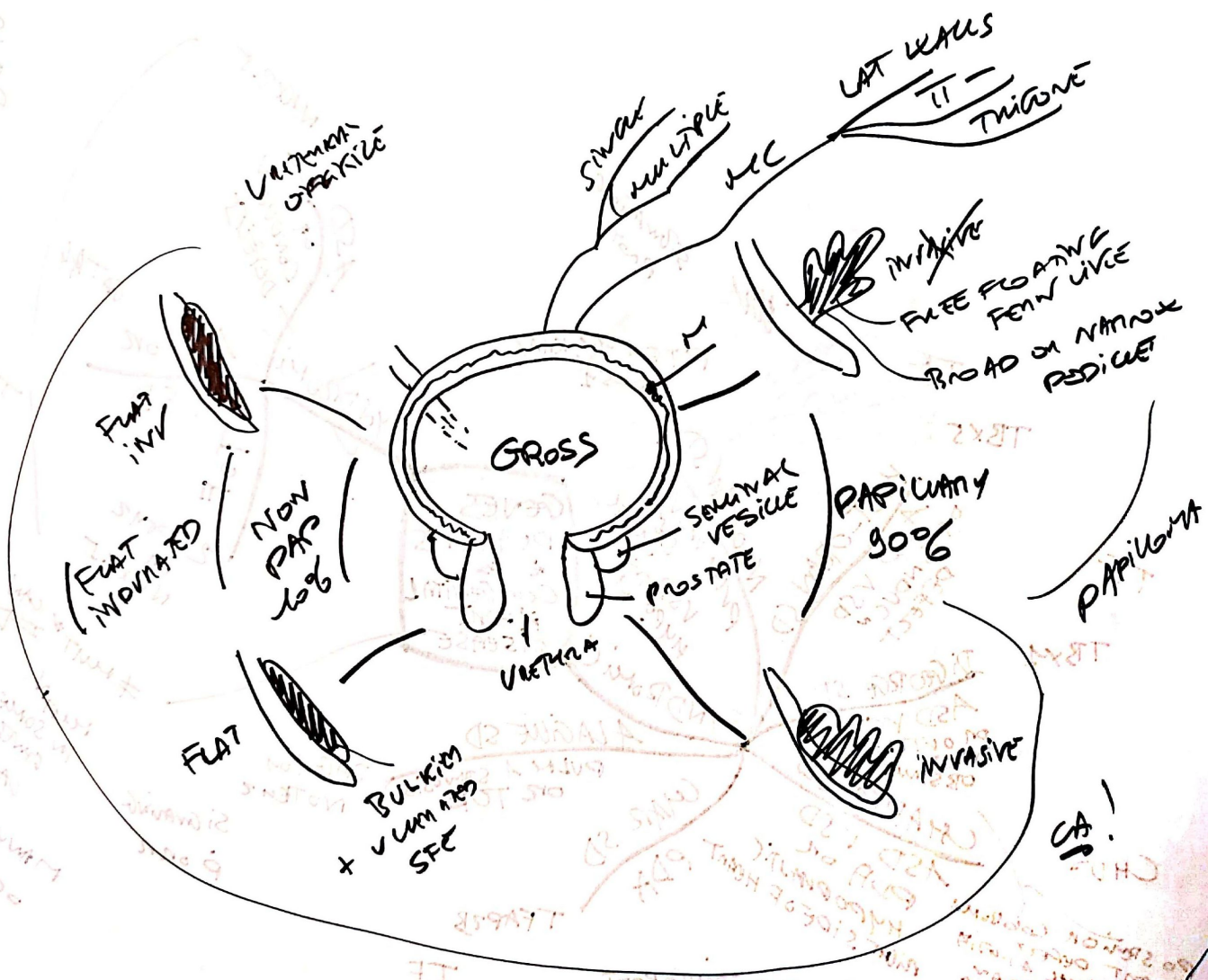
URTEROCLE







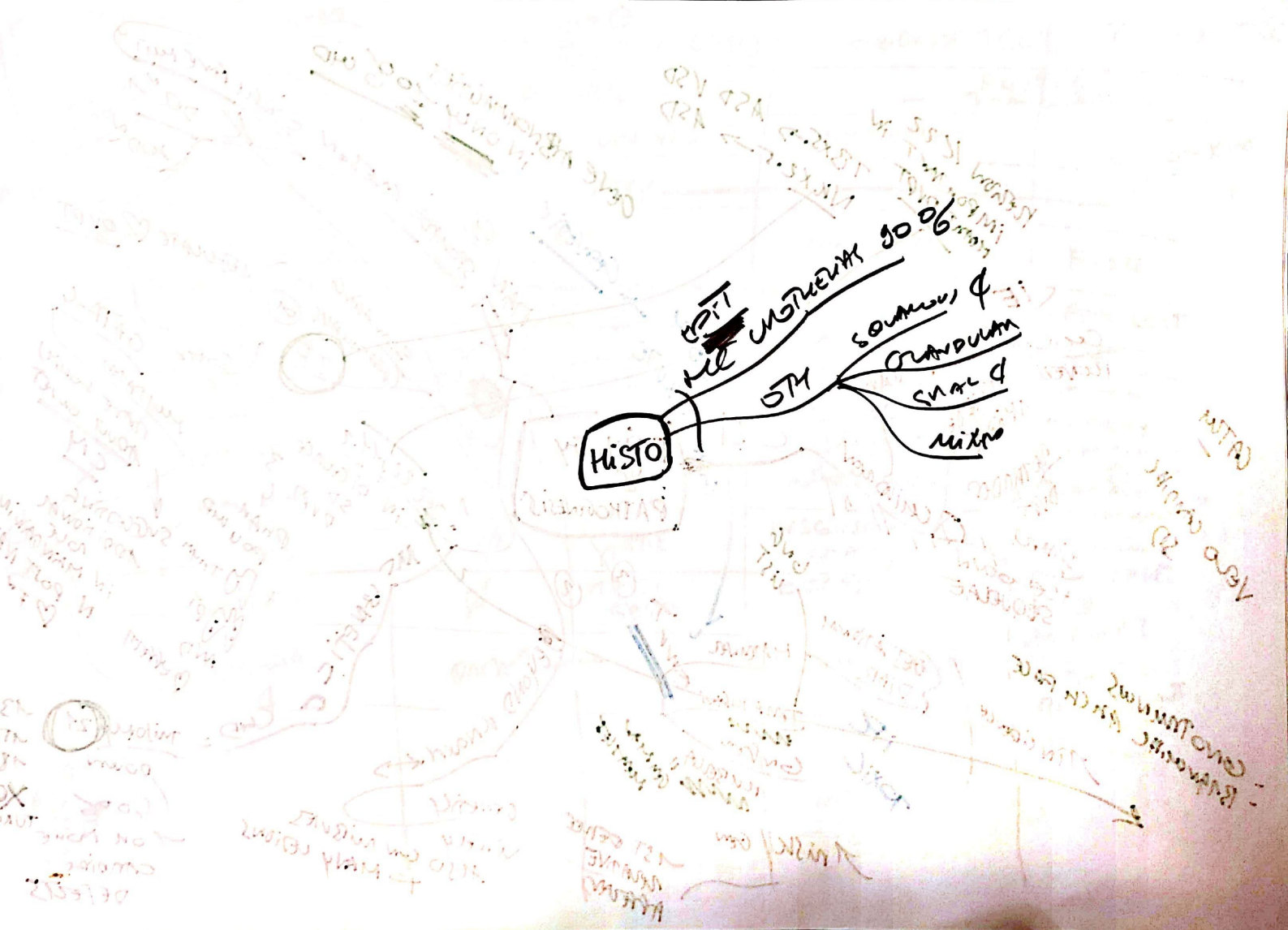




HISTO

~~CPIT~~
ME INSTRUMENT 0006
5TH

source of
granulum
sial d
nitro



PROLIFERATIVE
UNST
NEOP
LOW
MALIGNANT
POTENTIAL

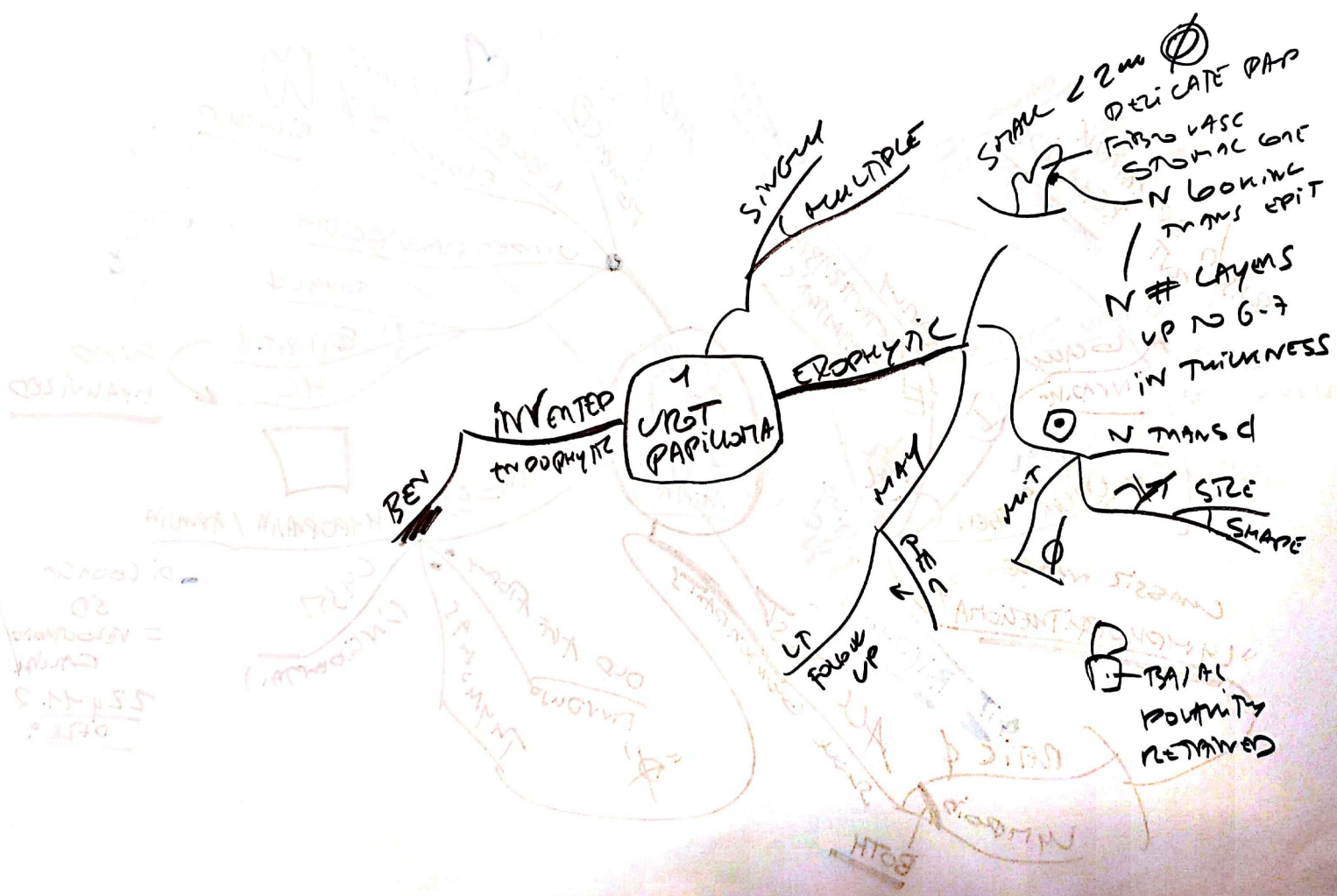
INVENTED
CYTOLOGIC

PAPILLOMA (US?) PUNLMP

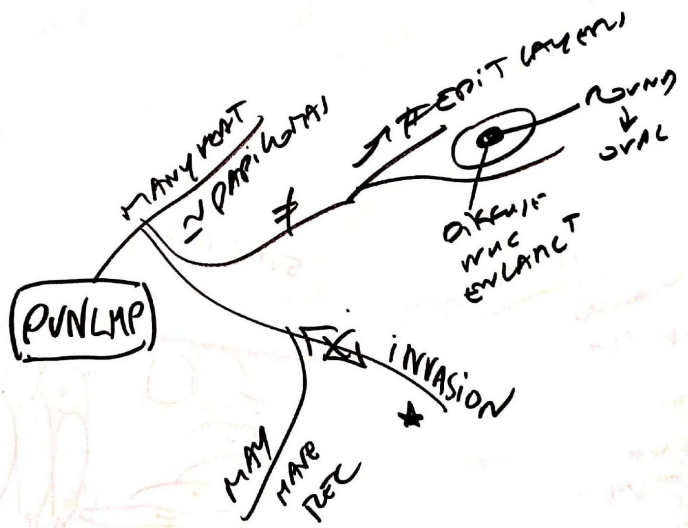
LOW GRADE TCC (6) HIGH GRADE TCC

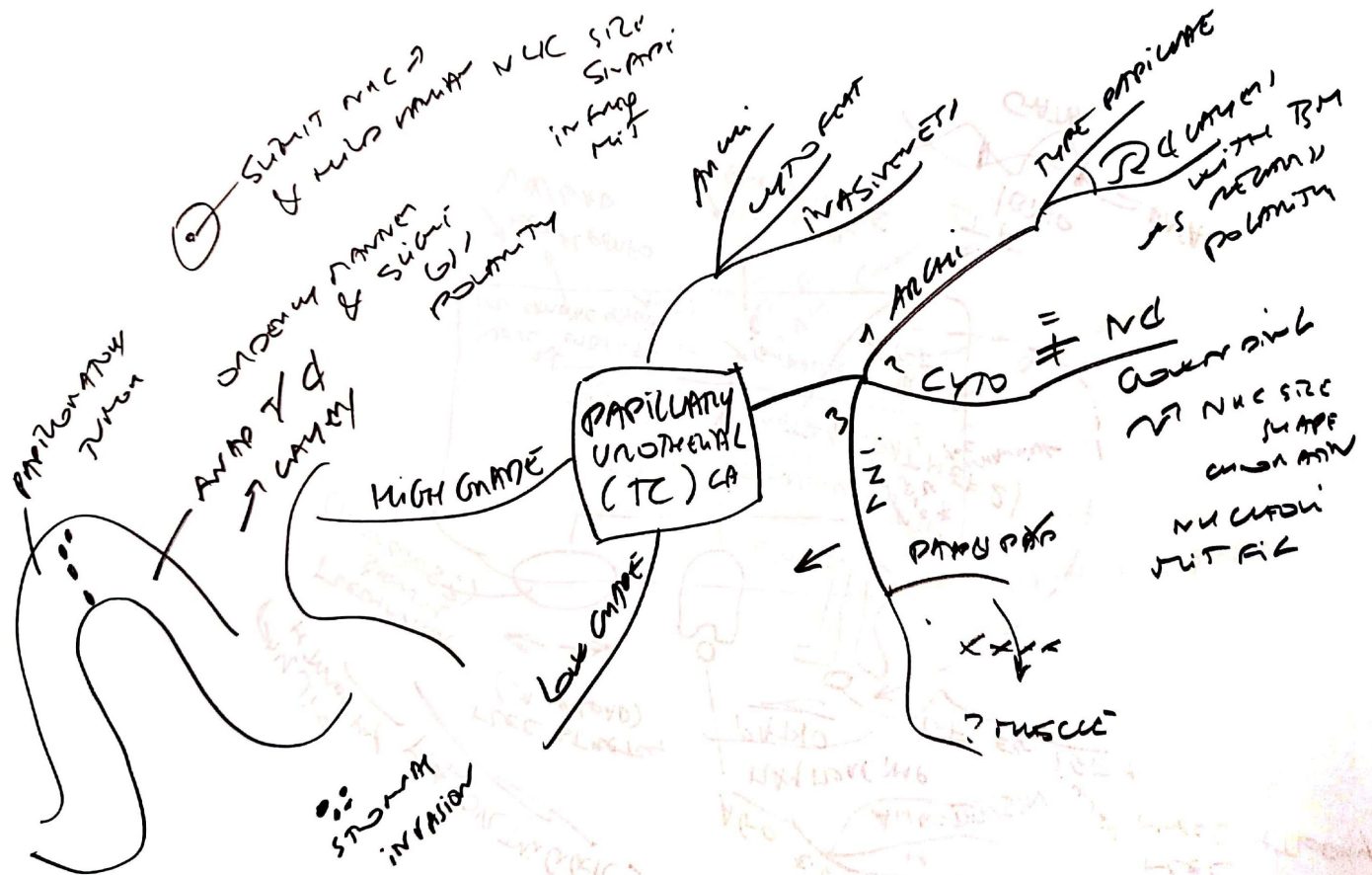
		- DELICATE -		- FUSED, BRANCHED -	
ARCHITECTURE		YES	OR YES	OR ONLY	MANY
ORG	PAPILLAE	N	ANY		
	THICKNESS	N	ANY		
	LOSS POLARITY	- NO -		MINIMAL	FREE
	GHESSTVES	- YES -			
FEAT	COUDDING	- NO -		MINIMAL	OFTEN GIST
	NUC SIZE	N	MAY BE UNIFORM	MINIMAL	YES
	NUC SHAPE	N	ELONGATED, UNIFORM	MINIMAL	YES
	NUC CHROMATIN	- FINE -		MINIMAL	YES
	NUCLEOLI	∅	RARE	INSIGNIFICANT	CONSPICUOUS
	MITOSIS	∅	RARE, BASAL	OCCASIONAL	MULTIPLE
	UMBRILLA	PRESENT		USUALLY PRESENT	MAY BE ABSENT

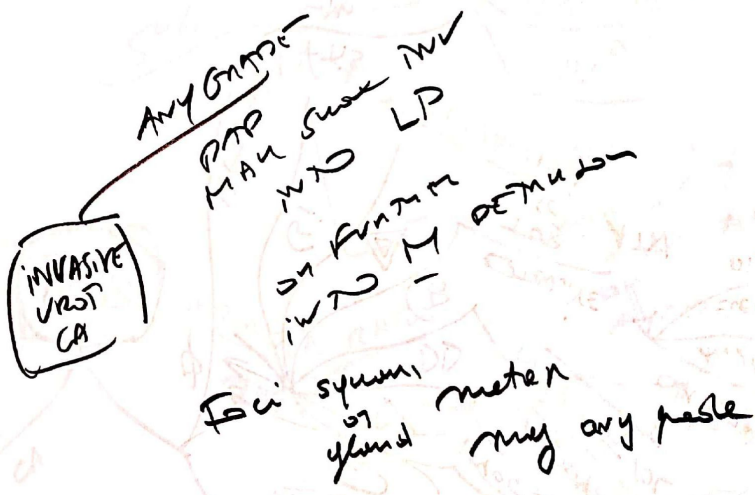
WMS
OF
SUP

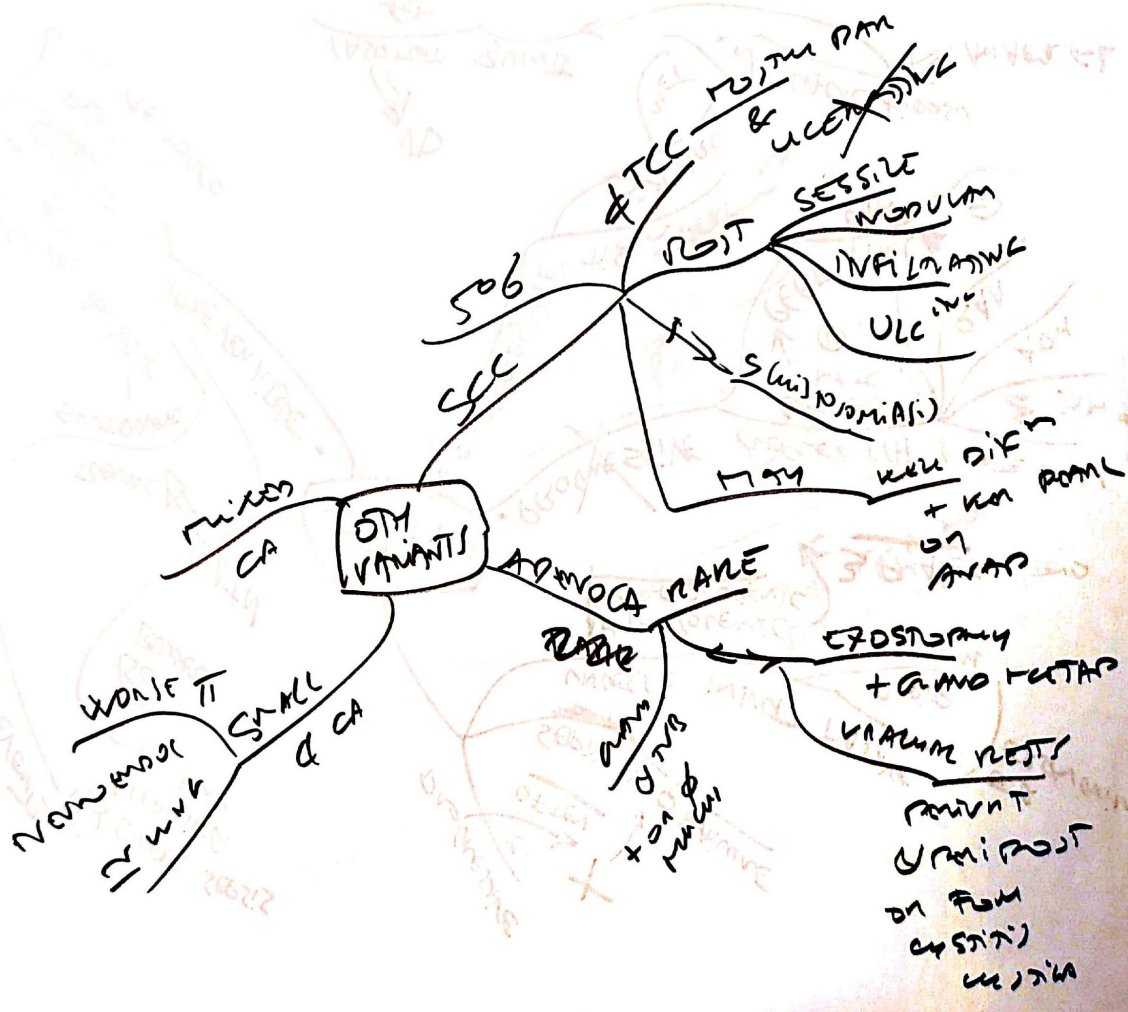


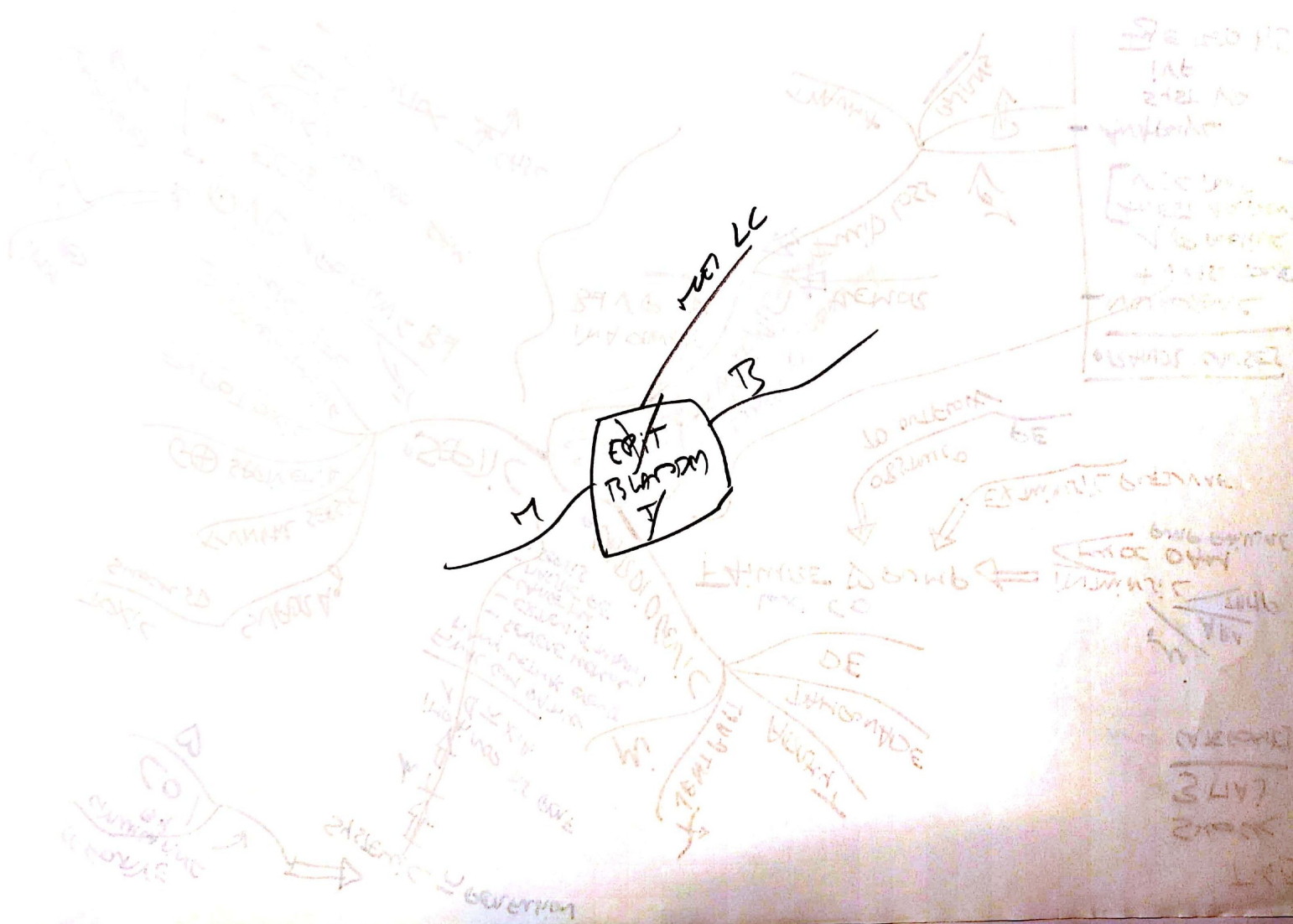


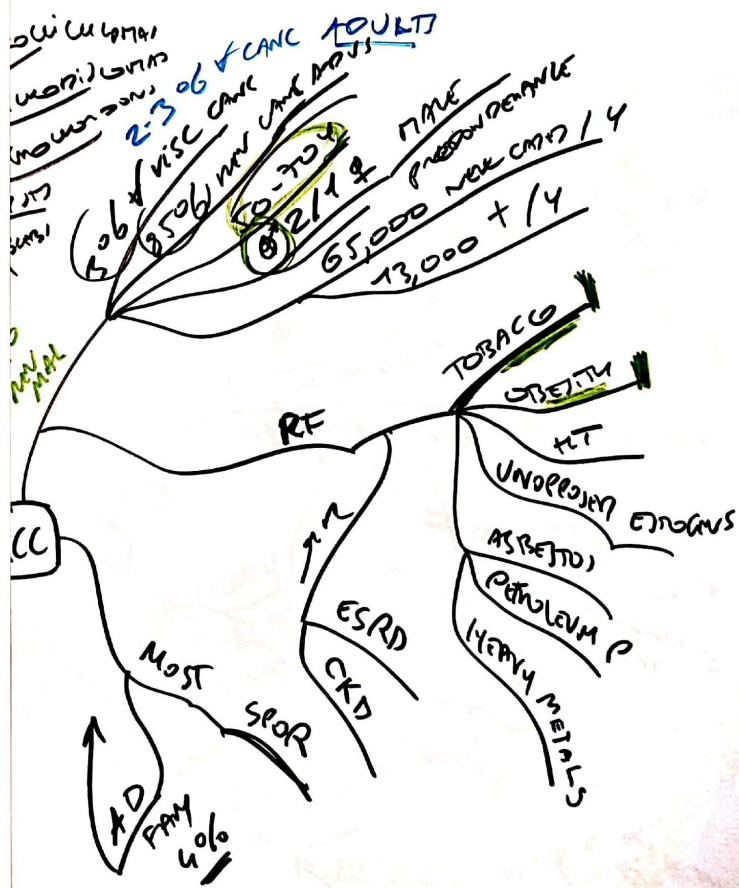




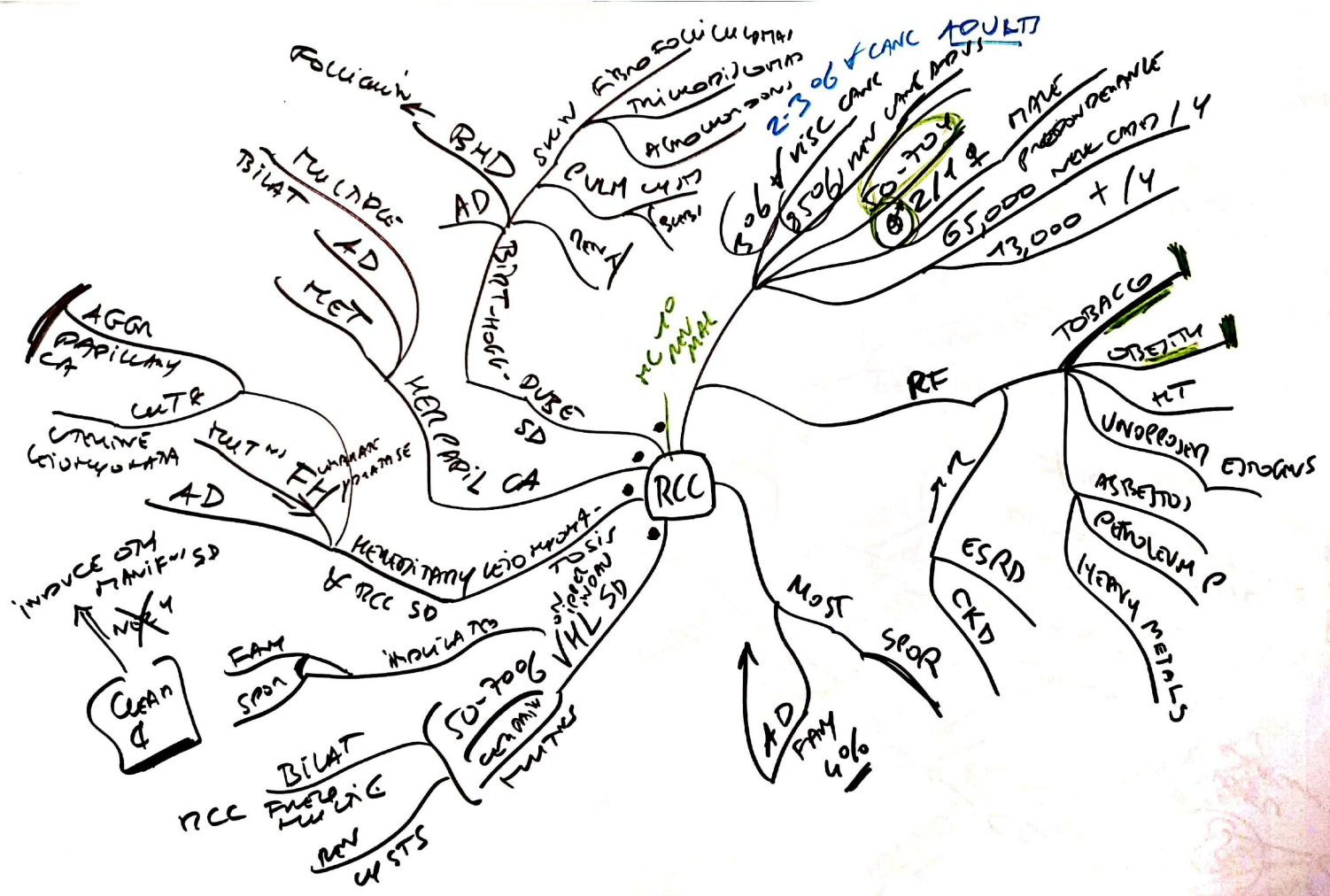


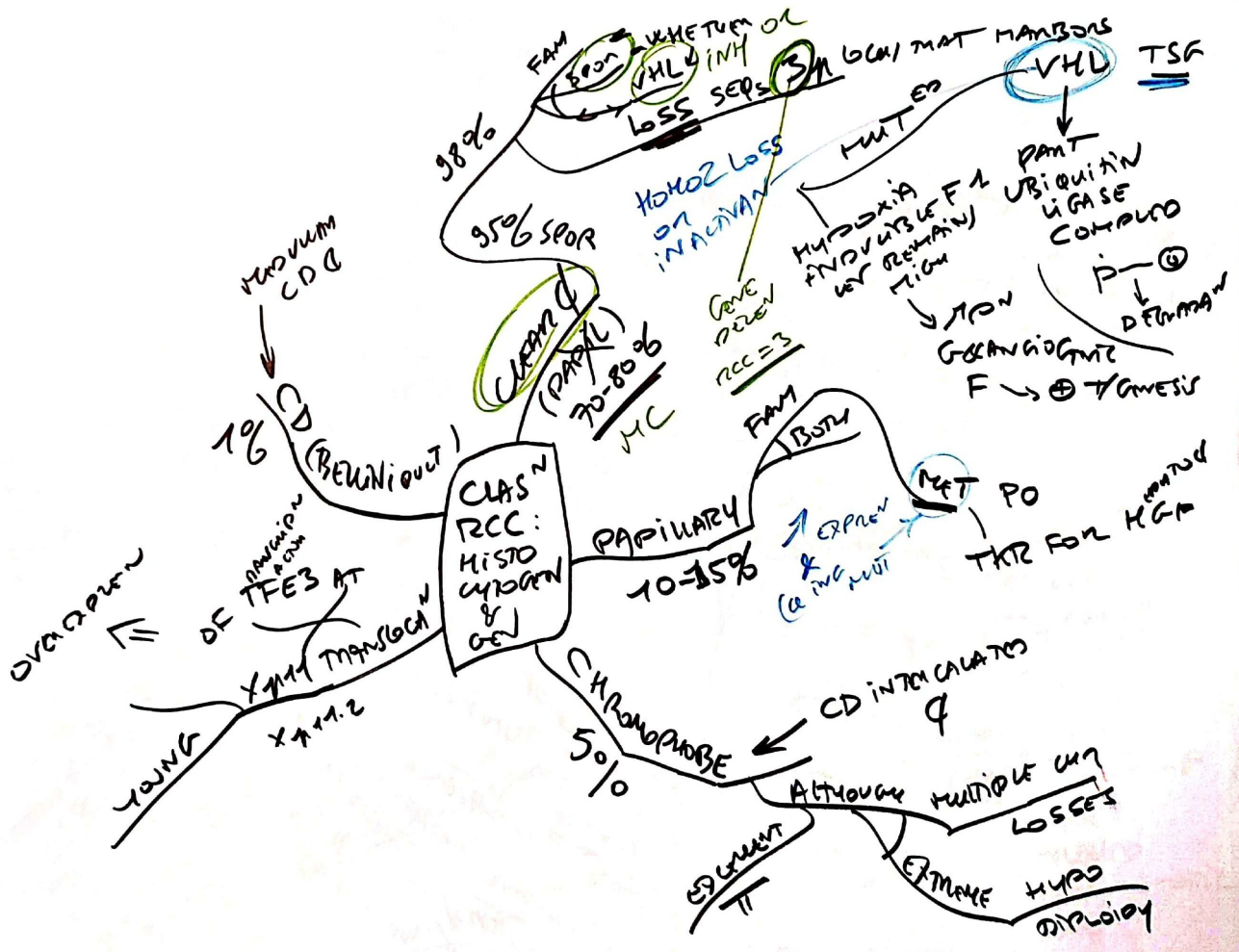


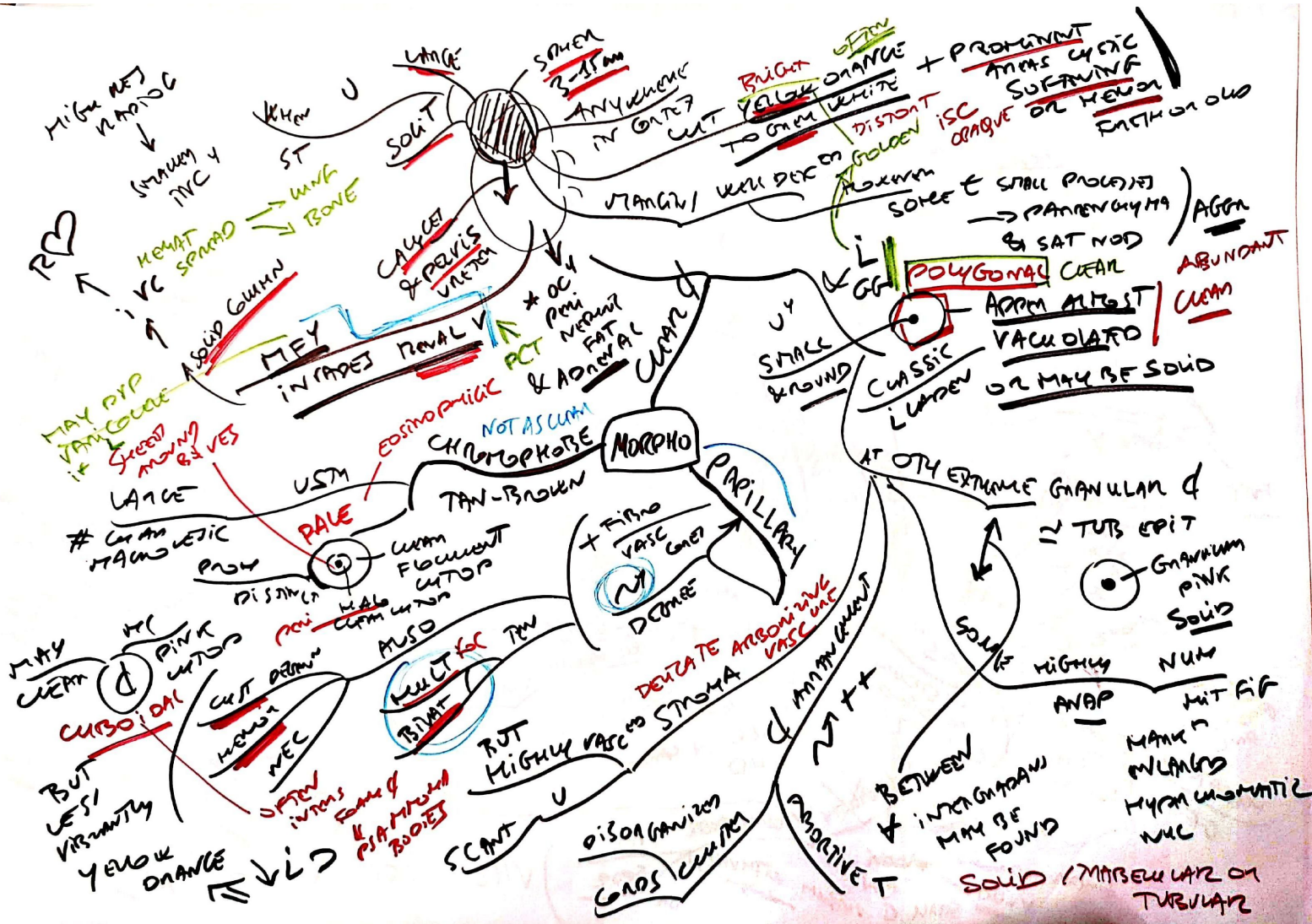


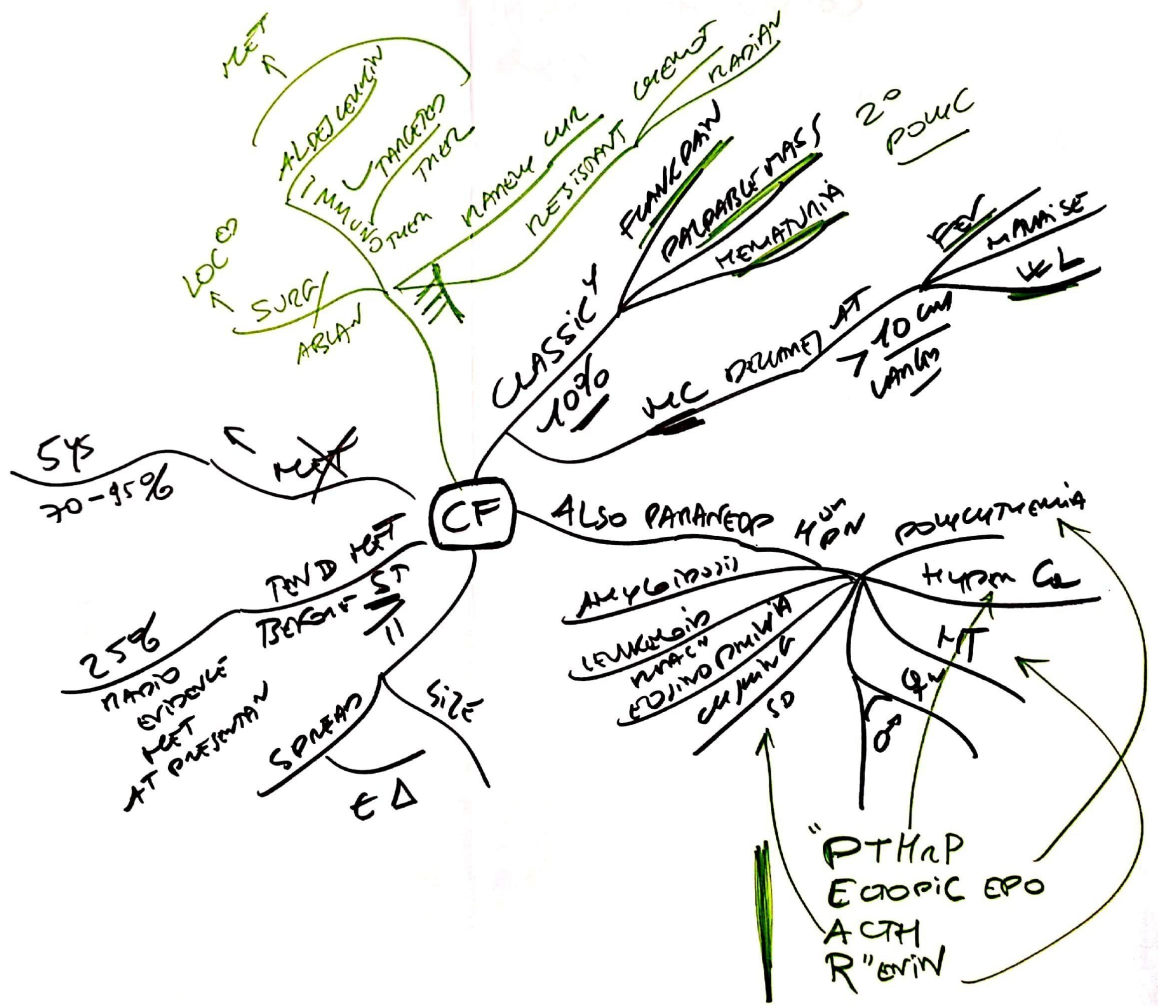


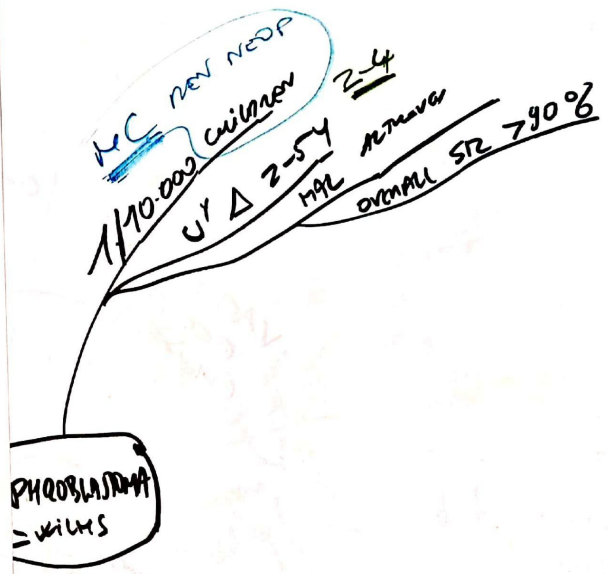
TRCC



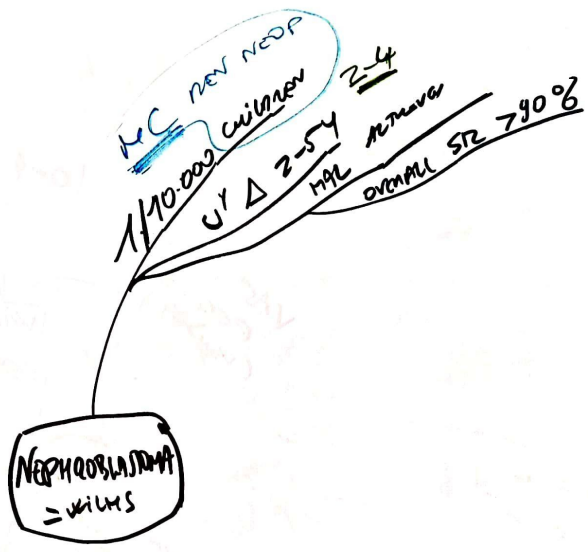


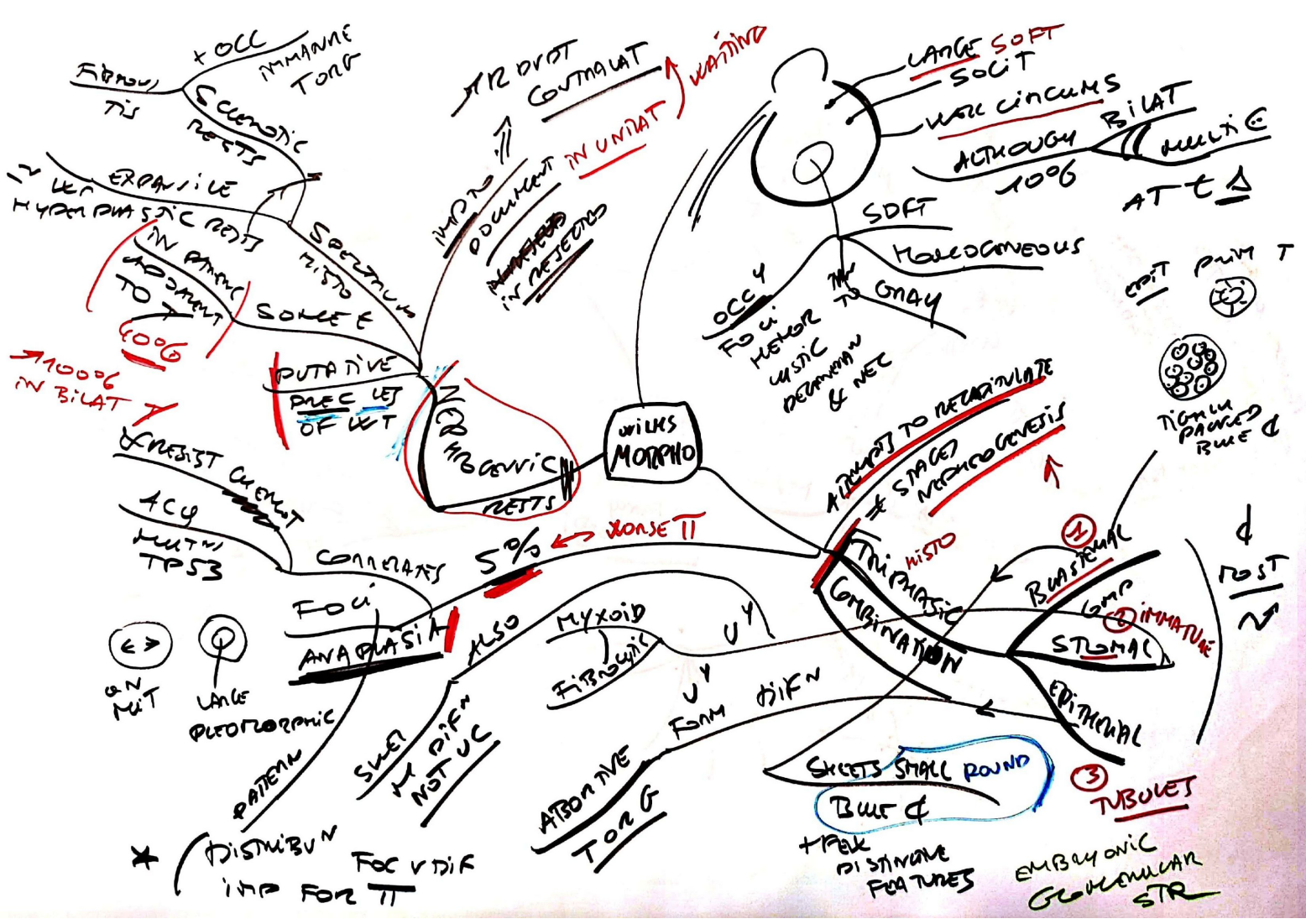


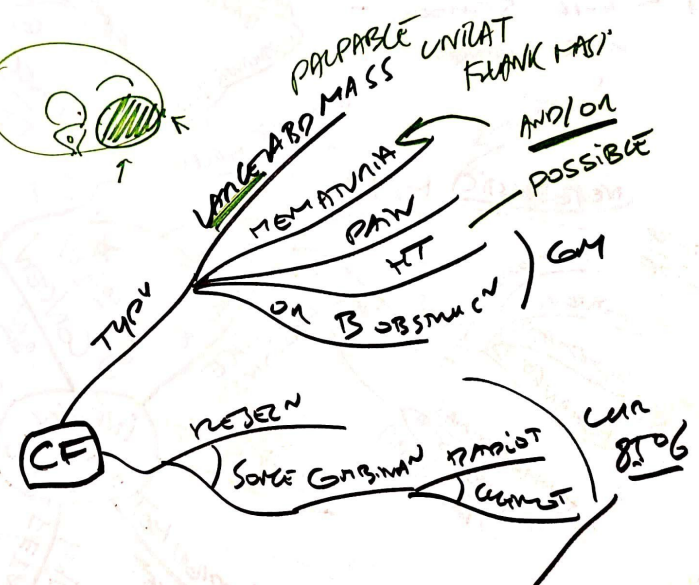




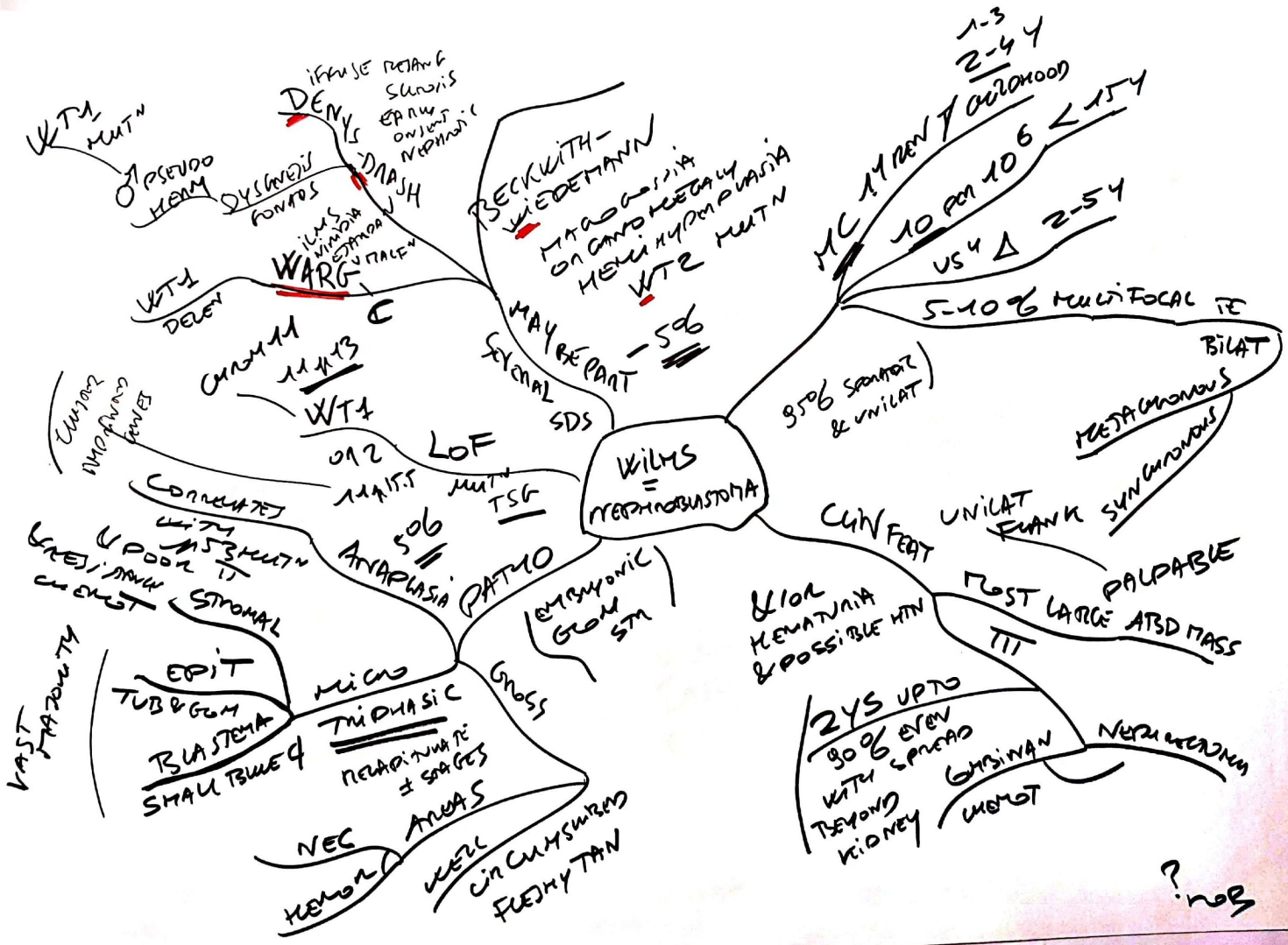
WILMS

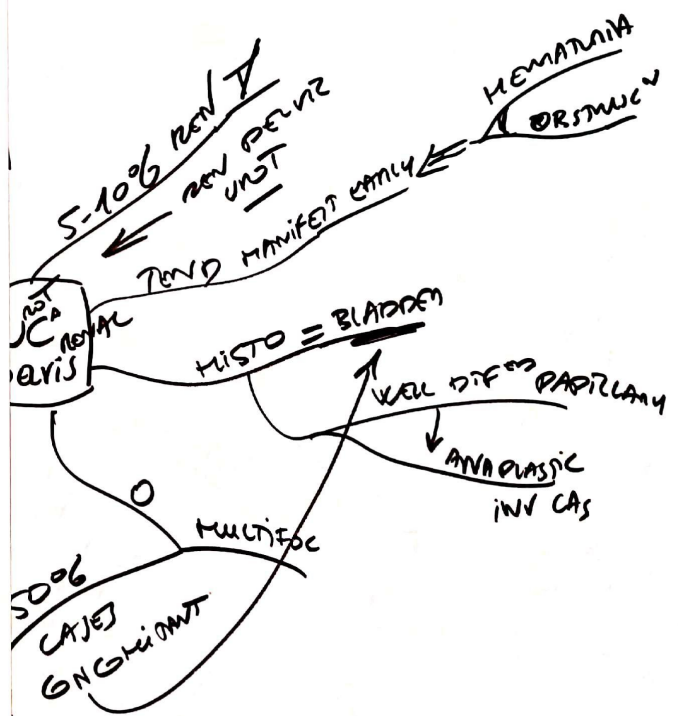




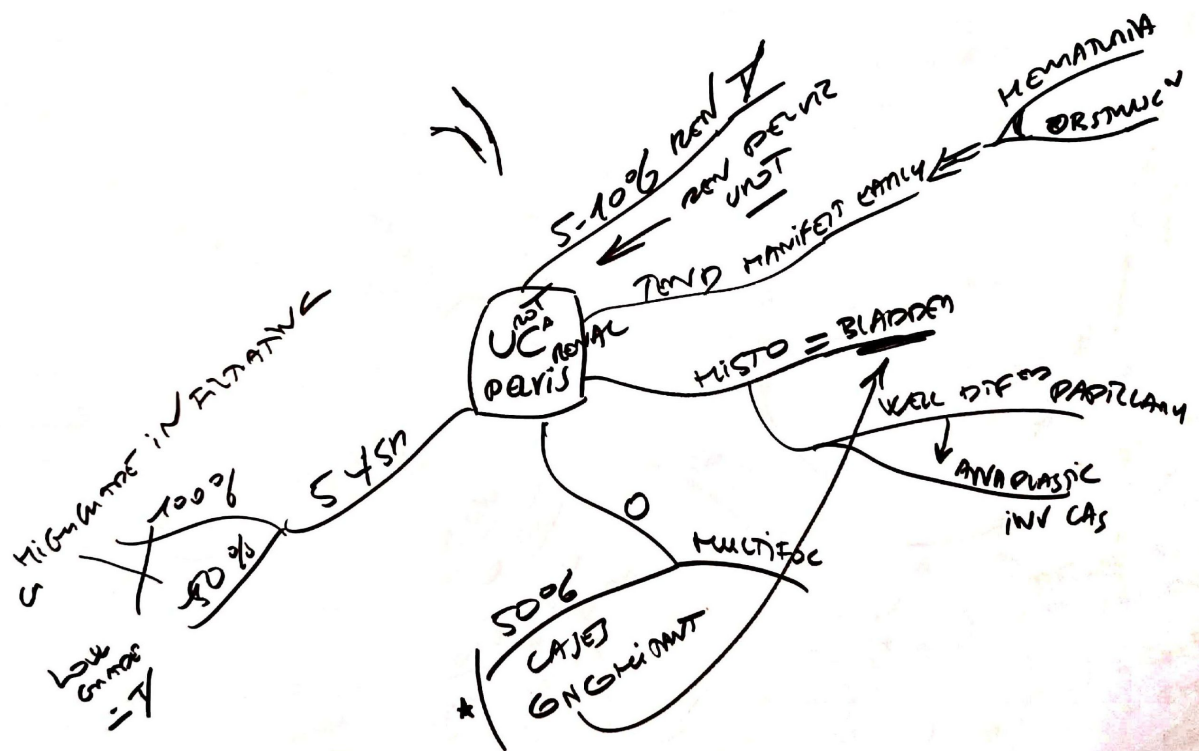


ALTHOUGH
2ND MAL
REARDS
TO GANUETI
CAN OCCUR





UC



- LP INVASION
CONTINUES IT

- M. PROPER
DEFINITION
MAY DET OUTLINE

ALGEBRA

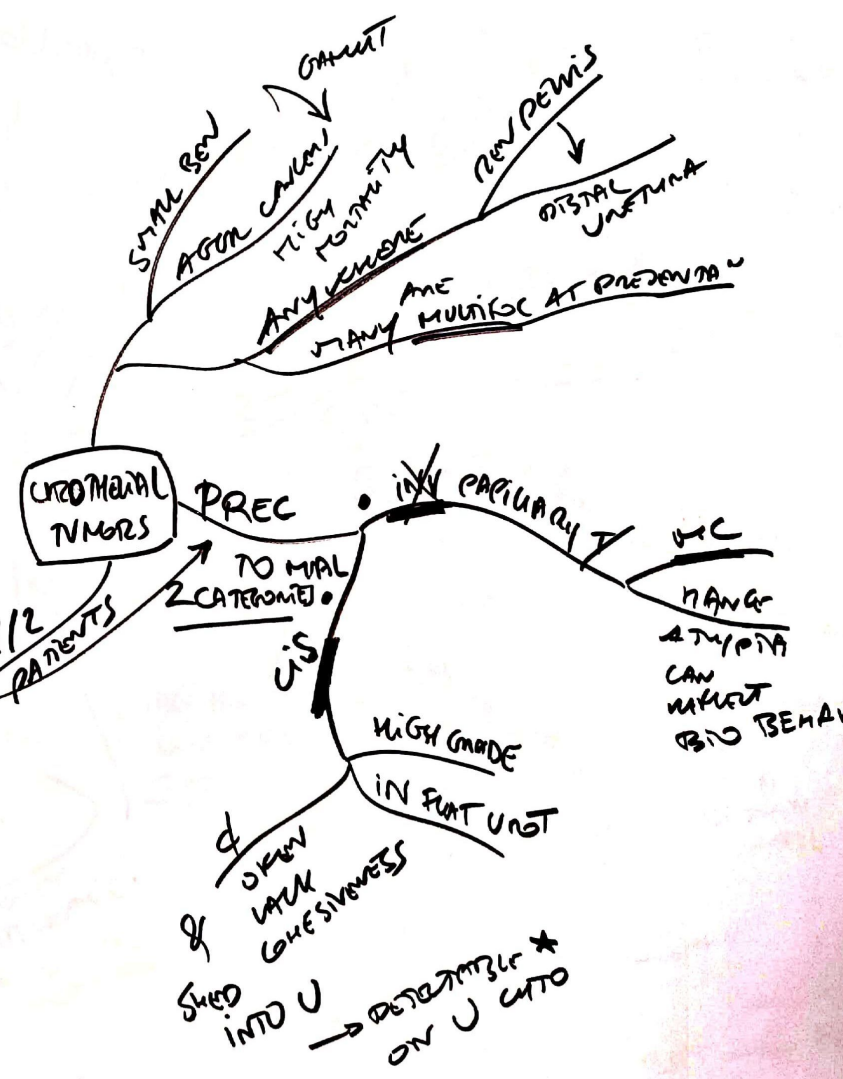
THAT 30% SYT
STAGE

SUG

SUCCESS

OBSTRUCTION
BY HIGH
GRADE
INV COMPONENT

INV WALL
AT PRESENT





MOST COMMON
 60% SE
 PAPILLARY
 CA

MOST LG
 <10% R INV

PAPILLARY REC	PROGN
1 PAPILOMA	20%
2 PUNLMP	30%
3 LGUC	45%
4 HGUC	45%

IMMUNO GP
 PAPILLARY
 → NODULAR
 OR FLAT

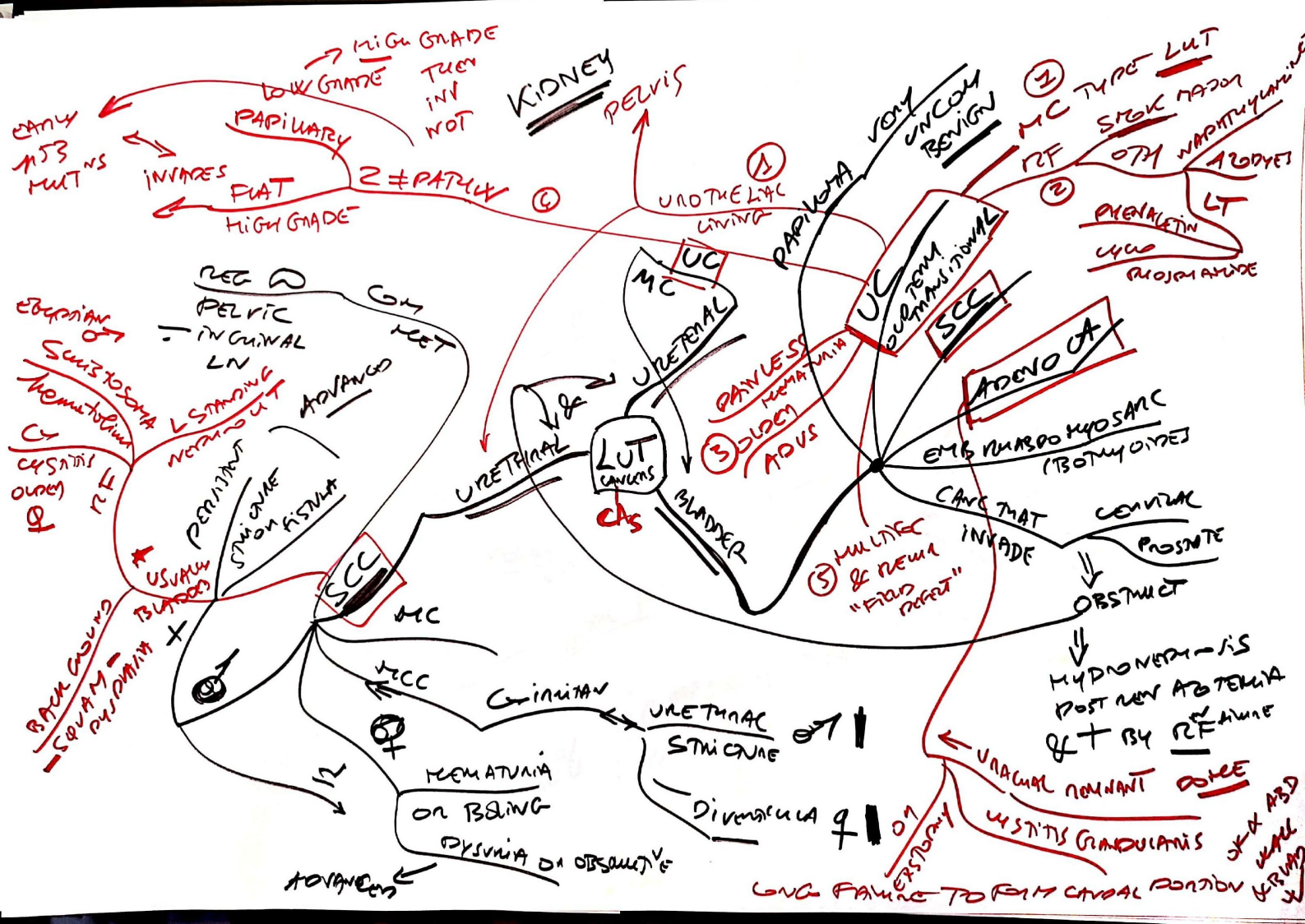


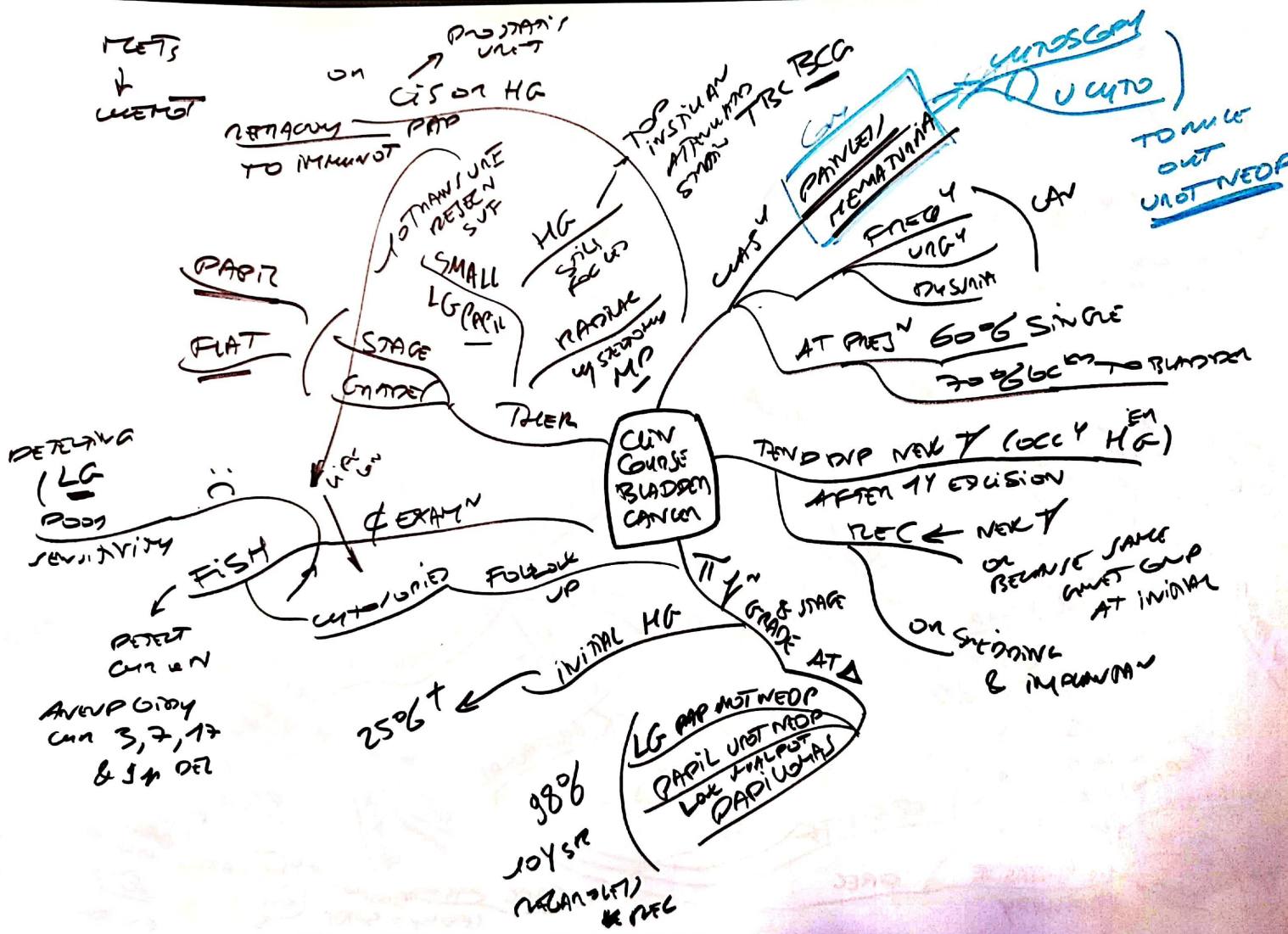
MORPHO

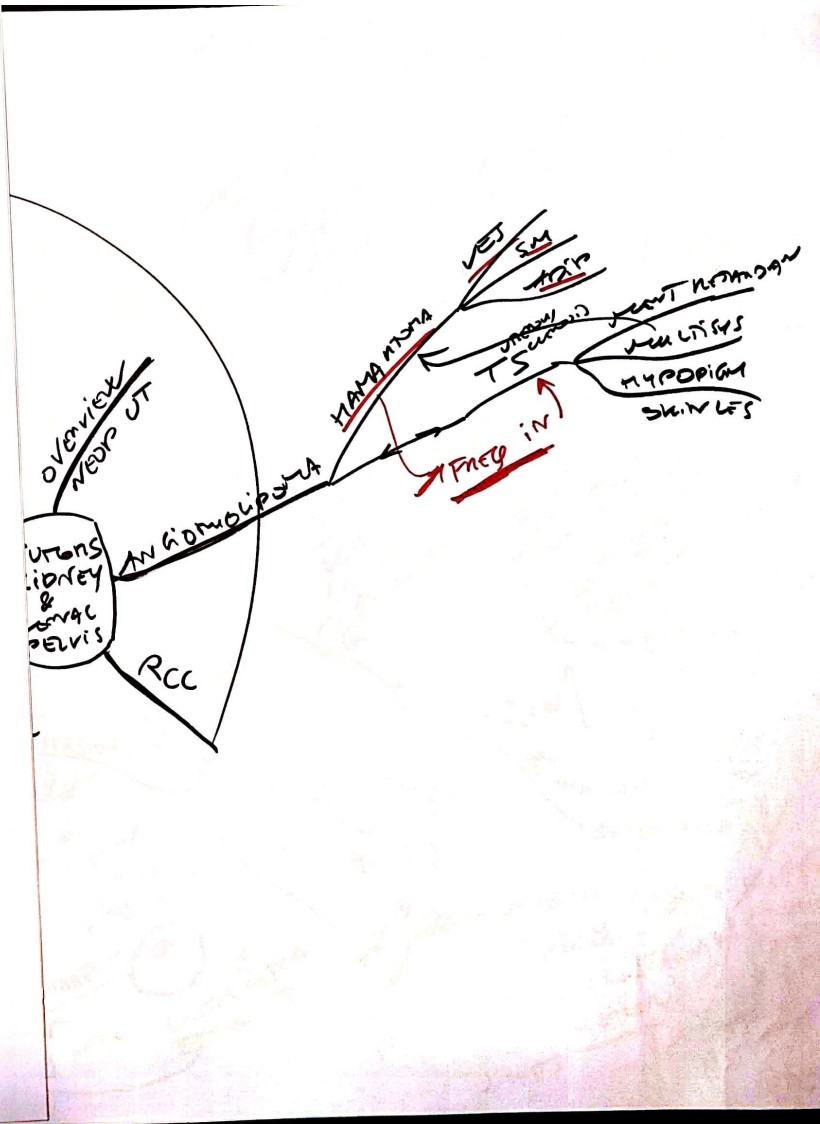
GRADE
 ANGIO + WTS
 2 DEEC UC
 5006 PREC
 FOUND
 OVERTLY MAL &
 WITHIN FLAT UROT
 CY MULTIFOC
 SOME E JUST SFE
 INV UC CAR UC (HG)
 EXTANT INV
 AT & SPREAD
 (STAGNA)
 SURVIVALLY INVOLVE LP
 OR EXTANT + DRAG
 INTO MUSCLE

UAC
 SOME
 ON
 EXTENSIVE
 INT METAP
 2 SIGNIF CANCER
 THICKEN UROT
 & OVERLAP NUC
 NAME MET
 INV
 3 ORDMY WTS & MULTI
 + MIN ATYPIC
 → LOW INV PANCREAT

EXTENSIVE
 REMNANT
 4 DISSEMINATED
 5 DISSEMINATED
 + ANGIO & MULTI
 HIGH WTS
 2006
 INV
 AN HG







GOLJAN KIDNEY

