Oral Histopathology

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Series 22 (11 cases)

Case	Features
Squamous papilloma	• Tree-like papillary branching with a well-defined stalk
Odontogenic keratocyst	• Basal palisading, 5-8 cell layers, parakeratin lining cyst lumen
Odontogenic keratocyst	• Basal palisading, 5-8 cell layers, corrugated parakeratin lining cyst lumen; cyst detaches in some areas (common finding in these cysts)
Peripheral odontogenic fibroma	• Overall, this is histologically a fibroma; the presence of multiple epithelial odontogenic rests (single to bilayered epithelial nests dispersed throughout the connective tissue) is reported by the World Health Organization as the diagnosis *peripheral odontogenic fibroma, World Health Orgnization type* and is likely of no clinical consequence, as these odontogenic rests likely represent remnants of the rests of the dental lamina (Rests of Serrez); however, peripheral odontogenic rests have been proposed in histogenesis theory as origin cells for these peripheral odontogenic tumors
Traumatic neuroma	• Haphazardly arranged nerve bundles • Mucosal *neuromas* and *palisaded encapsulated neuroma/solitary circumscribed neuroma* may be histologically similar; a history of trauma would favor diagnosis of 'traumatic neuroma' whereas absence of this history should at least raise consideration for single or multiple neuromas and/or evaluation for other diagnostic criteria for multiple endocrine neoplasia
Neurofibroma	• *Neurofibroma* may be a challenging lesion for diagnosis; often these are ill-defined non-encapsulated and contain variable amounts of fibrous connective tissue, fibroblast-like cells and spindle cells with undulating or comma-shaped or wavy nuclei; the presence of mast cells (appear as purple 'fried eggs' as in this case) may favor diagnosis of neurofibroma • Multiple neurofibromas should raise suspicion and investigation for criteria of neurifibromatosis
Submandibular gland and neurovascular bundle (removed to access a parapharyngeal mass)	• Submandibular gland is a mixed seromucus gland with either serous acini (as are frequent in this case) or serous *demilunes* capping mucus cells; numerous ducts are identified in the gland lobules; the neurovascular bundle contains three muscular arteries (lined by smooth muscle) and a single large nerve (with undulating wavy nuclei)
Benign mixed tumor	• Well-defined salivary tumor consisting of plasmacytoid to spindle shaped myoepithelial cells in nests, cords, islands and some strands in a hyalinized to chondromyxoid background; well-formed ducts are evident
Mucoepidermoid carcinoma	• Unremarkable squamous epithelium and underlying cystic to solid unencapsulated salivary tumor with mucus cells and epidermoid and intermediate cells (site: palate; tumor extends to deep margin)
Blue nevus	• A nevus or "mole" consisting of elongated spindle melanocytes/nevus cells arranged in bundles parallel to overlying epithelium; clinically these usually appear blue to gray or brown and macular (flat)
Intradermal melanocytic nevus	• Nevus or "mole" with nests or *theques* which mature from larger nests with larger cells more superficially to smaller or spindled/neural cells in deeper areas