Case 4.2
An 81-year-old Thai man from Bangkok
Chief complaint: A 2 year history of an asymptomatic nodule on left forearm

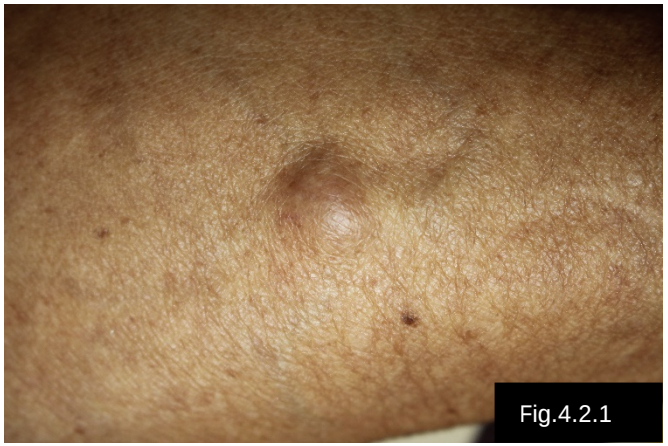
Fig.4.2.1

Present illness:
The patient developed asymptomatic nodule on left forearm for 2 years. He reported that the lesion gradually increased in size without any symptoms. No other organ specific symptoms was reported. He denied any history of trauma or fever.

Past history: Well-controlled hypertension and dyslipidemia.

Family history: There was no family history of similar lesion.

Physical examination: Other systems revealed no abnormality.

Dermatological examination:
- Solitary, non-tender, soft, movable, skin-colored nodule sized 2 cm in diameter on left forearm (Fig.4.2.1)

Histopathology (S19-008510, Left forearm):
- Well-circumscribed lobulated nodule composed of numerous vascular spaces, and nodular cell infiltrate (Fig.4.2.2)
- Vascular lumens lined by round-oval endothelial cells with abundant eosinophilic cytoplasm and oval vesicular nuclei
- The vessels surrounded by dense inflammatory cell infiltrate composed of lymphocytes and numerous eosinophils (Fig.4.2.3)

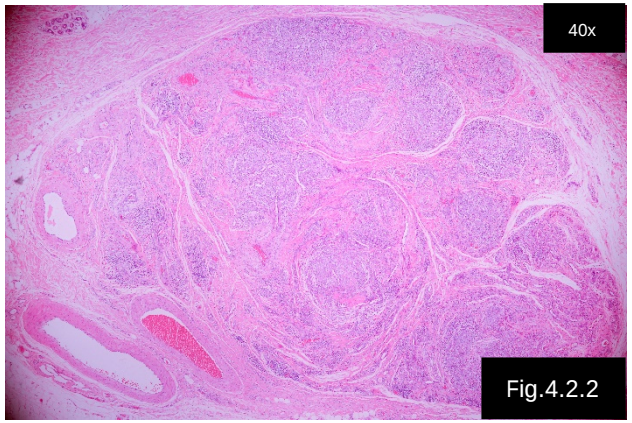

Fig.4.2.2

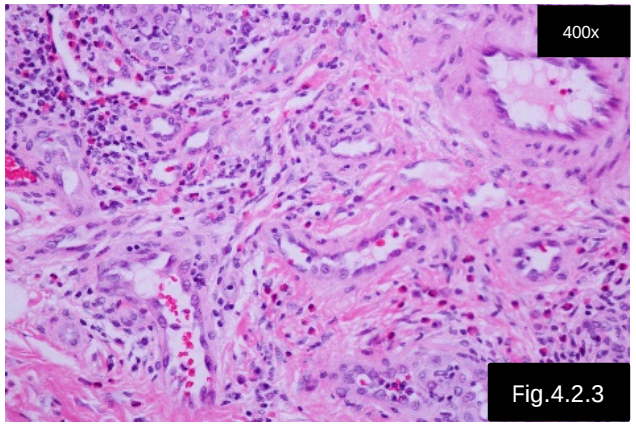

Fig.4.2.3

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