Submitted by:
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Clinical Presentation:
The patient is a 77-year-old female who first presented 11 years ago with syncope and difficulty with balance. At the time, a presumed benign, 1 cm mass was found in the cerebellum and observation was elected. Her past medical history is otherwise significant only for sarcoidosis, for which she has been treated with prednisone. Recently, she has had significant worsening of short term memory loss, severe posterior headaches, and visual hallucinations of electrical activity. She also developed bowel and bladder incontinence. Neurological exam showed generalized weakness, but no focal cranial nerve or sensory deficits. Brain MRI showed a now 2.7 cm T2 hyperintense, contrast enhancing mass in the left cerebellum. Left occipital/suboccipital craniotomy and resection were performed.

Material submitted:
One virtual H&E-stained slide of cerebellar mass.

Points for Discussion:
1. Diagnosis
2. Pathogenesis
3. Prognostic implications