

**Canadian Association of Neuropathologists
L'Association Canadienne des Neuropathologistes**

CASE No 7

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In early 2006, a 54-year-old man presented with 7 weeks history of neck pain and occipital headache and 3 weeks history of unsteadiness towards the right side. MRI and CT scan of brain revealed an enhancing, intra-axial, well demarcated round lesion in the extreme lateral right cerebellar hemisphere region (greatest dimension 3.8 cm) extending to the dural surface and compressing the brainstem and fourth ventricle with signs of early hydrocephalus. A clinical and radiological workup for systemic malignancy was negative.

Patient underwent right suboccipital craniotomy. A mass in the lateral region of the posterior fossa was identified and resected. The mass was predominantly solid with glistening whitish gray colour.

Post-operative CT scans following intravenous contrast show no definite residual lesion in the cerebellum.

Material submitted: One representative H&E

Questions: Diagnosis?
 Does immunohistochemistry play an important role in diagnosis of this entity?