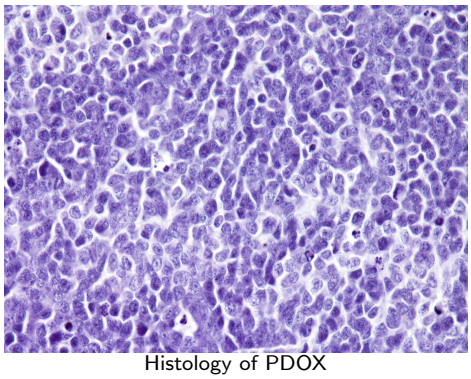
Med-1911FH

Clinical annotation:

Age:	3.5
Gender:	Male
Location:	Cerebellum
Diagnosis:	Medulloblastoma, Anaplastic/Large Cell
Pre-treatment:	None
Source:	Surgery
Stage:	M3
EFS (months):	>60
OS (months):	>60

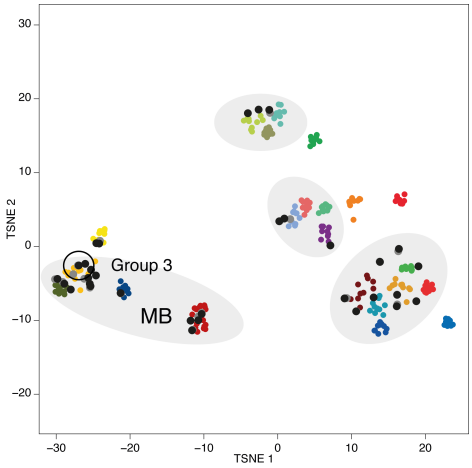


Histology of PDOX

Pathology of human tumor: *The malignant hypercellular tumor is comprised of sheets of small to intermediate sized cells that are regionally heterogeneous, partly due to cellular disassociation and geographic necrosis that includes prominent apoptosis. In many areas the neoplastic cells are small, with round to angular nuclei that contain stippled chromatin, indiscrete nucleoli and little cytoplasm; in a few foci intervening neuropil is appreciated. However, in multiple regions, including perivascular accentuation, the tumor cells are enlarged and have ovoid to angular nuclei with cleared chromatin and prominent nucleoli. Some cells in these foci have eccentric nuclei and a moderate amount of eosinophilic cytoplasm. Nuclear molding and cellular "cannibalism" is apparent in these regions as well as increased mitotic activity. Immunoperoxidase staining shows retained expression of INI-1.*

Model information:

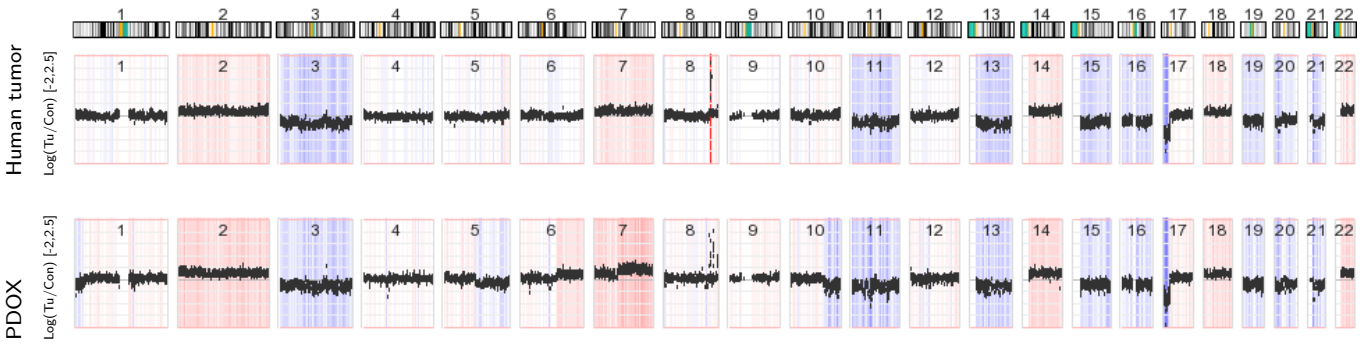
Mouse strain:	NOD scid gamma (NSG)
Site of transplantation:	Cerebellum
Protocol:	Olson lab PDOX protocol
Days to P0/P1/P2:	128/55/78
PI:	James M. Olson
Contact:	Request model at www.btrl.org



Molecular classification

Molecular information:

Entity:	Medulloblastoma
Subgroup:	Group 3
Curated lesions:	*MYC* (amplification), *KBTBD4* (missense mutation; probably rare SNP, not in hotspot!)
Detailed information:	Explore molecular data in PDX explorer
	Explore genomic data of pediatric PDOX cohort



Copy-number ratio (tumor vs. pseudo-control)

Last updated: 08/07/18