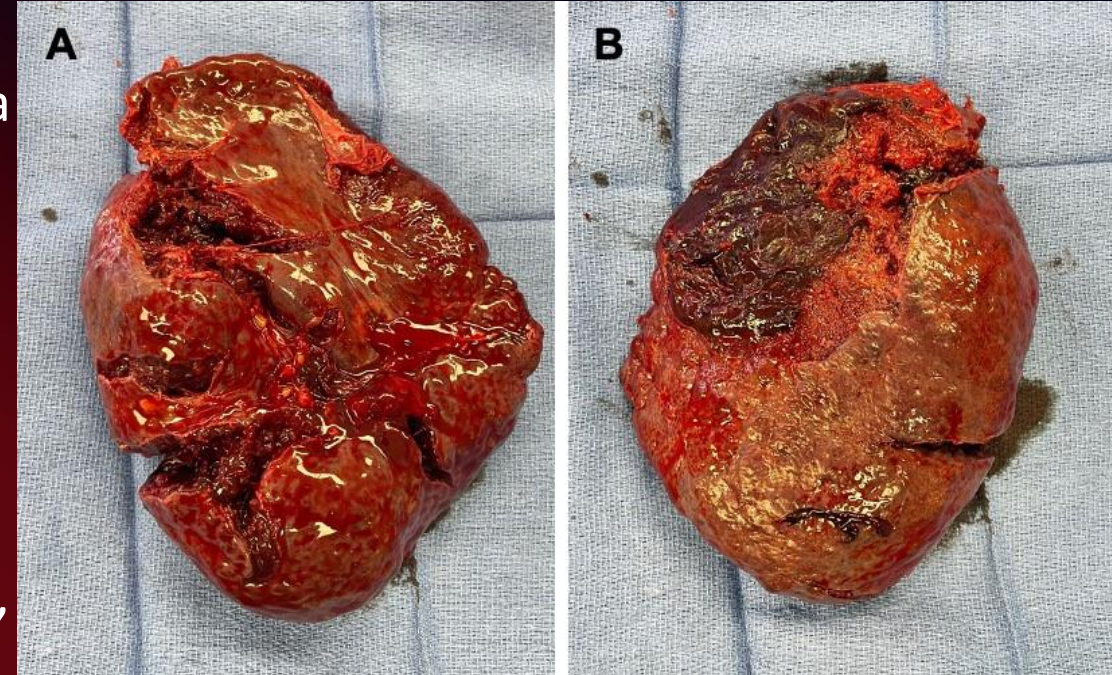


# Splenic Rupture as an Initial Presentation of Diffuse Large B-Cell Lymphoma

- HPI:
  - 64-year-old male with DM and HTN presented with a three-week history of abdominal pain, nausea, vomiting, near syncope, and a 30lb weight loss.
- PE:
  - Hypotensive, tachycardic, pale, bilateral upper quadrant pain without diffuse peritonitis. Hemoglobin of 11.5 g/dL. Lactate of 5.6 mg/dL
- Imaging:
  - CTA abdomen and pelvis showed an enlarged spleen, hemoperitoneum, & perisplenic hematoma
- Pathology:
  - Neoplastic lymphocytes positive for CD20, PAX5, CD5, MUM1, Bcl2, and Bcl6. Ki 67 with 80% index proliferation.



**Figure 1:** A. Spleen after removal. Multiple lacerations are visible on the surface extending to the posterior aspect, B. 10 cm capsular defect covered with hematoma.

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