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## One year with autopsy and case reports: an immense educational experience

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Last year in February I was looking for an appropriate and related journal to submit an autopsy case report when I came across the journal "Autopsy and Case Reports" (A&CR). Ever since, it has been a great educational experience. Today, there are limited PubMed indexed journals that are open access, A&CR is one of them. The journal publishes unique and original autopsy and clinical case reports. The cases range from rare entities to unusual presentation of common entities and concise yet comprehensive reviews of common entities.

The journal has a dedicated section, "image in focus" for gross images. Being a pathology resident this section always fascinates me and I came across some wonderful images of different diseases including endomyocardial fibrosis,<sup>1</sup> holoprosencephaly,<sup>2</sup> gelatinous transformation of bone marrow,<sup>3</sup> Eisenmenger syndrome,<sup>4</sup> fibrinous pericarditis,<sup>5</sup> periprosthetic venous thrombosis,<sup>6</sup> cardiac myxoma<sup>7</sup> and punched out skull lesions of multiple myeloma.<sup>8</sup> This list goes on and on and the archives of the journal<sup>9</sup> has a great collection of images. These images come with a brief description of the diseases which is definitely a great resource for quick review of these entities.

Autopsy cases section of the journal focuses on detailed autopsy findings of rare and unusual causes of death. Thorough and intriguing discussion about a number of unusual causes of death including coronary amyloidosis,<sup>10</sup> disseminated aspergillosis,<sup>11</sup> gastrointestinal cytomegalovirus

disease,<sup>12</sup> Morquio syndrome associated with gastric adenocarcinoma,<sup>13</sup> mycotic aneurysm with aortoduodenal fistula,<sup>14</sup> miliary tuberculosis in a renal transplant recipient,<sup>15</sup> disseminated toxoplasmosis diagnosed at autopsy<sup>16</sup> and thymic teratoma causing non-immune hydrops fetalis,<sup>17</sup> can be found in this section. Again, these are just a few examples from a long list of cases available in the archives.<sup>9</sup>

Similarly, the clinical cases are also of great educational value. Only within the last volume of the journal, there were some clinical case reports of rare entities including, undifferentiated carcinoma of the pancreas with osteoclast-like giant cells,<sup>18</sup> concurrent *BRAF* V600E mutation driven hairy cell leukemia and melanoma,<sup>19</sup> spontaneous regression of a pulmonary adenocarcinoma,<sup>20</sup> phosphaturic mesenchymal tumor,<sup>21</sup> perianal Langerhans cell histiocytosis,<sup>22</sup> pulmonary placental transmogrification,<sup>23</sup> native-valve endocarditis caused by *Achromobacter xylosoxidans*,<sup>24</sup> centronuclear myopathy<sup>25</sup> and migrainous infarction.<sup>26</sup> Even if the cases are not rare entities, the intriguing discussions are always worth reading. Moreover, the image quality in all the sections of the journal is one of the finest.

Lastly, the editorial and letters to the editor are usually related to the issue of autopsies. A&CR not only provided me with the latest updates in the field of autopsy including "Diagnostic and Management Autopsy"<sup>27</sup> and "virtual autopsy"<sup>28</sup> but also offered

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me an opportunity to discuss the autopsies in relation to pathology residents.<sup>29,30</sup>

I believe A&CR will keep providing us with the latest updates in the field of autopsy and quality discussion about rare diseases.

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