

ERRATUM

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Light microscopic demonstration of the microlumen of ependymoma: a study of the usefulness of antigen retrieval for epithelial membrane antigen (EMA) immunostaining

Figure 1 of this article was erroneously printed in black and white. The figure is reprinted here in color. Please take the color page and affix it to page 18 of Brain Tumor Pathology volume 21, number 1.

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Fig. 1. **A** Light photomicrograph of ordinary ependymoma with abundant eosinophilic globular bodies (*arrows*); many are located within the tumor cell cytoplasm, and some are located between the tumor cells. Hematoxylin and eosin (H&E) stain ($\times 400$). **B** Epithelial membrane antigen (EMA) immunostaining reveals various morphologies of positivity in ependymoma. A dotlike positivity on the left side (“brown dot”) is a common feature. Occasionally, larger dots have an empty center, as seen in the right side of the picture ($\times 800$). **C** Immunostaining for EMA without antigen retrieval (plain EMA) on ordinary

ependymoma showing no immunoreactivity of tumor tissue ($\times 200$). **D** In the same area as in **C**, antigen retrieval pretreatment (AR-EMA) reveals abundant brown dots in the tumor tissue ($\times 200$). **E** AR-EMA immunostaining on clear cell ependymoma showing brown dots in the tumor tissue (*arrows*) ($\times 300$). **F** Tanycytic ependymoma exhibits brown dots by AR-EMA immunostaining. The dots are frequently oval in this type of ependymoma (*arrows*) ($\times 180$). **G** CD99 (synonym of MIC2) immunostaining on ordinary ependymoma showing intracytoplasmic brown dots (*arrows*) ($\times 350$)

