findings. The patient was referred to a specialized center to perform complementary tests necessary to start the treatment.

22 Q11.2 DELETION SYDROME AND ALTERATION IN ORAL CAVITY: CLINICAL CASE REPORT. *ALEXANDRA GABRIELLY DE SOUSA BENTES, JOYCE HELENA MONTEIRO BARBOSA, CRISLYNE MENDES DA VERA CRUZ, ANTONIA PATRICIA OLIVEIRA BARROS, LEONARDO DE SOUZA LOUZARDO, LUIZA MADALENA MENDES DA VERA CRUZ and, ERICK NELO PEDREIRA*

The 22 q11.2 deletion syndrome, also known as DiGeorge syndrome, is the subject of the loss of a submicroscopic segment of DNA in the 22 q11.2 region. It presents a great variability of clinical characteristics in affected individuals. Among the clinical manifestations are fissure of the palate, nasal speech, cardiovascular problems, and dysmorphic facial features. This case report describes a 15-year-old girl, clinically diagnosed as having DiGeorge syndrome, who attended a dental service for patients with special needs presenting with malocclusion, difficulty in chewing, and suspected heart disease. The patient was diagnosed with mixed developmental disorder and epilepsy, both uncontrolled, presenting pictures of hallucinations in the dental chair. The treatment plan was established through panoramic radiography, complete blood count, and medical release. Restorations, prophylaxis, scaling with fluorine application, and exodontia of elements 74, 83, and 84 were realized. The patient is still being treated at the dental health service.

SYNCHRONIC CARCINOMAS CUNICULATUM IN THE MAXILLA - A CASE REPORT. *JOÃO PAULO STANISLOVICZ PROHNY, VIRGÍLIO GONZALES ZANELLA, ARTHUR SALGUEIRO PIAS, MÁRCIA GAIGER DE OLIVEIRA, MARCO ANTONIO TREVIZANI MARTINS, RICARDO GALLICCHIO KROEF and, VINICIUS COELHO CARRARD*

Carcinoma cuniculatum (CC) is a rare malignant neoplasm. A 66-year-old female patient presented with asymptomatic gingival swelling in the left maxilla associated with whitish pasty secretion with 3-month duration. The patient denied smoking habits and alcohol consumption and reported a recent surgical procedure in the region. At extraoral examination, there were no palpable lymph nodes. Intraoral examination revealed multiple papules in the posterior vestibular gingiva. Incisional biopsy was performed, and the histopathologic diagnosis was CC. The treatment consisted of surgical resection. After 2 months, the patient presented a swelling in the anterior region of the palatal mucosa, with secretion drainage similar to keratin. The biopsy was performed, and the histopathologic examination also rendered the diagnosis of CC. After excision, the affected area was submitted to 33 section of intensity-modulated radiation therapy (IMRT) accounting for 66 Gy. The patient remains under follow-up with no signs of recurrence.

WELL-DIFERENTIATED SQUAMOUS CELL CARCINOMA: A CASE REPORT. *DANIELA CRISTINA TIRLONI HASS, CAROLINA SIMÃO FLAUSINO, ADRIANA PARISOTTO MACEDO and, SARAH FREYGANG MENDES PILATI*

Squamous cell carcinoma (SCC) is an invasive epithelial neoplasm with varying degrees of squamous differentiation. Between the malignant tumors that affect the mouth, 94% correspond to SCC. The case reports a healthy patient without extrinsic etiology factors. However, there were SCC cases reported in family members. The injury was located in the right side of palate and alveolar region. The occlusal radiograph showed an absence of bone, and the computed tomography showed expansive/erosive injury on the alveolar process of the right maxilla with aggressive signs covering adjacent structures, such as suspicious lymph nodes with secondary neoplasm. Incisional biopsy was performed, and histopathologic analysis revealed well-differentiated squamous cell carcinoma with presence of dyskeratosis and keratin pearls. The patient was instructed and referred to a head and neck surgeon and to the city oncology center.

OSTEOGENIC DISTRACTION IN HEMIFACIAL MICROSSOMY: CASE REPORT. *SOLIMAR DE OLIVEIRA PONTES, JULIANA MARIANO BERALDO, MICHELLE BIANCHI MORAES and, FÁBIO RICARDO LOUREIRO SATO*

A 7-year-old female patient attended the oral and maxillofacial surgery service with a radiographic finding in her orthodontic documentation without symptomatology. Extraoral physical examination showed facial asymmetry on the right side and periauricular malformation, and the intraoral examination revealed occlusal irregularity with overbite. Panoramic x-ray and teleradiography demonstrated that the patient had mandibular microssomy on the right side. Based on the clinical and radiographic characteristics, a diagnosis of hemifacial microssomy was reached. As the patient had bone alteration, he was submitted to surgery for the installation of an osteogenic distractor in the right mandibular branch with vertical vector. It consisted of 7 days of latency and 13 days of retractor activation, being 1 mm per day. The retractor was removed after 3 months. The patient presented correct facial symmetry and mandibular growth, regularizing the occlusal plane.

ORAL LYMPHANGIOMA OF INFANCY: CASE REPORT. *DANIELA CRISTINA TIRLONI HASS, BRUNA GALUPPO, SARAH FREYGANG MENDES PILATI and, ADRIANA PARISOTTO MACEDO*

Lymphangiomas are benign hamartomatous tumors arising from malformation of the lymphatic vessels. The present study aims to report a clinical case of a pediatric patient whose lesion was nodular, 5 mm in its largest diameter, of smooth surface, pediculated, and of pink color in the ventral surface of the tongue near the apex; the patient's anti-HIV test was positive. Excisional biopsy of the lesion was performed in order to rule out hypotheses of fibroma of irritation, mucocele, and lymphoid hyperplasia. However, atypical proliferation of lymphatic vessels was observed histopathologically and, because of the status as an HIV+ pediatric patient, immunohistochemical tests with exclusion of human herpesvirus-8 and Ki67 were performed, with the final diagnosis of lymphangioma. There are few reports in the literature like the above, so in these cases, the pathologic examination in conjunction with other tests becomes essential for differential diagnosis and establishment of correlation of underlying diseases.