A 68-year-old man without a medical history developed 2 months of progressive weakness and cervicalgia. Examination showed quadriparesis with T10 sensory level. Spine MRI revealed an expansile intramedullary lesion from obex to T11 with peripheral nodular enhancement (Figure, A–D). H&E sections at 400× magnification show infiltrating glioma with moderately pleomorphic, hyperchromatic cells with piloid processes (E, F black arrows) and occasional eosinophilic granular bodies (F, blue arrow). H&E = hematoxylin and eosin.

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Spinal masses are classified as extradural, intradural extramedullary, or intradural intramedullary. Differential diagnosis for intramedullary cord lesions includes demyelination, paraneoplastic myelopathies (e.g., anti-CRMP5), neurosarcoidosis, infection, vascular abnormalities (e.g., dural arteriovenous fistula/malformation), nutritional deficiency, toxic insult, or tumor. Although noninvasive diagnostics should be exhausted, definitive diagnosis of neoplastic myelopathy generally requires biopsy. Novel cell-free DNA sequencing may complement or eventually supersede certain diagnostics, especially where biopsy is unsafe.

**Author Contributions**

S. Gritsch: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. Y. Aghajan: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. L. Kozanno: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. D. Chiu: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. M. P. Frosch: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. G. Shankar: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data. W. T. Kimberly: drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; and analysis or interpretation of data.

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**References**

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