

Pt. Name:	فؤاد سعيد قاسم العامري	Lab Number:	0075-2026
Pt. Age:	55 years.	Gender:	Male
Received date:		Reported date:	2026-01-08
Referred By:	د/ بسام الصنوي		

PATHOLOGY REPORT

Clinical Information.	Suspected perforated viscous status post right hemicolectomy for rectal cancer. Abdominopelvic ultrasound revealed a moderately dilated bowel loop in the right side of the abdomen with no peristalsis with trivial free fluid collection between bowel loops and sluggish bowel peristalsis in the left side of the abdomen, a picture suggestive of intestinal obstruction.
Nature of specimen.	Segmental resection.

GROSS:

Part of the small intestine measured 7.5 cm long, with attached fatty tissue 6x3x2 cm. Careful inspection did not reveal any masses. Three lymph nodes were dissected; the largest measured 0.8 cm.

PHOTOGRAPH

MICROSCOPIC:

Sections show ulceration of small intestinal mucosa with related transmural infiltration by lymphocytes, plasma cells, macrophages, and neutrophils reaching to the serosal covering, with related vascular congestion. inflammation and suppuration extends to involve one of the resection margins. Lymph nodes are reactive and free of metastatic deposits, showing sinus histiocytosis. No evidence of specific granulomas. No evidence of malignancy.

DIAGNOSIS:

Small intestine, segmental resection:

- Active inflammatory ulcer with perforation.
- Reactive follicular lymphoid hyperplasia of lymph nodes.
- Negative for malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
08-01-2026

Nerveen Tahoun