

Pt. Name:	مريم علي أحمد عمر	Lab Number:	1662-2026
Pt. Age:	40 years.	Gender:	Female
Received date:		Reported date:	2026-03-15
Referred By:	د/ ليلي العماري	Reported date:	2026-03-19

PATHOLOGY REPORT

Clinical Information.	Perimenopausal uterine bleeding, suspected of adenomyosis and cervical polyp.
Nature of specimen.	Panhysterectomy.

GROSS:

Panhysterectomy specimen; Uterus 7x6x3.5 cm with endometrial thickness 0.6 cm and 1.7 cm thick wall showing diffuse trabeculation. Cervix is 2.8 cm long showing attached polyp 1.2x1 cm. Ovaries are 2x2 cm each, grossly unremarkable. Fallopian tubes are 3 cm long with Lt. One showing attached cyst 2x1 c, contains clear fluid with intact capsule.

MICROSCOPIC:

Endometrium is hyperplastic and non-secretory. It is formed of moderately branching glands separated by cellular stroma and lined by 1-2 layers of cells. No evidence of complex glandular pattern. Islands of these endometrial glands and stroma are seen entrapped deep within myometrium. Polypoid lesion composed of hyperplastic endocervical mucous glands and covered by focally ulcerated columnar endocervical epithelium. Stroma is fibrotic and vascular and shows focal infiltration by inflammatory cells. Lt. Paratubal cyst having a thin fibrotic wall and is lined by a single layer of tubal-type ciliated epithelium (hydatid cyst of Morgagni). Both ovaries and Rt. Fallopian tube are unremarkable. No evidence of atypia or malignancy.

DIAGNOSIS:

Panhysterectomy:

- Moderate simple endometrial hyperplasia.
- Deep adenomyosis.
- Inflamed hyperplastic endocervical polyp.
- Lt. Paratubal inclusion cyst of Morgagni.
- Negative for atypia and malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
19-03-2026

Nerveen Tahoun