

Pt. Name:	أمة اللطيف عبده حسين السياغي		Lab Number:	2532-2026	
Pt. Age:	52 years.	Gender:	Female	Received date:	2026-04-21
Referred By:	د/ ذكري خليل		Reported date:	2026-04-27	

PATHOLOGY REPORT

Clinical Information.	Abnormal vaginal bleeding and valval cysts.
Nature of specimen.	Panhysterectomy & valval cysts excision

GROSS:

The specimen was received in two containers.

1. Total abdominal hysterectomy and bilateral salpingo-oophorectomy: The uterus measured 9.5 x 7.5 x 5.5 cm, and the cervix measured 2.8 cm in length. On sectioning, the myometrial wall thickness measured 2.7 cm and the endometrium measured 0.5 cm in thickness. The myometrium contained three grey fibroid masses, the largest of which measured 3 x 2.8 x 2.5 cm. An endometrial polyp was identified and measured 1.2 cm. The right and left ovaries each measured 2 x 1.5 x 1 cm, with the Lt. showing unilocular cyst measured 1 cm, and the right and left fallopian tubes measured 2 cm & 5 cm, respectively.
2. Valval cysts: Two soft tissue cysts: The first cyst measured 3.5 x 3 x 1.7 cm; it was covered by skin and was filled with gelatinous material. The second cyst measured 2 x 1.7 x 1.5 cm and was also filled with gelatinous material

MICROSCOPIC:

Polyp and endometrium are non-secretory and hyperplastic, formed of branching glands exhibiting focal moderate crowding and lined by 1-3 layers of cells. Glands show moderate complexity of their contour. Stroma is cellular. No evidence of atypia or malignancy. Some of these hyperplastic glands are seen embedded within superficial myometrium. Myometrial tumors are benign leiomyomas formed of whorly bundles of mature smooth muscles separated by a fibrous stroma. No evidence of tumor necrosis. No evidence of atypia or malignancy. Cervix shows Nabothian cysts and mild endocervicitis. Lt. ovary shows hemorrhagic corpus luteal cyst. Both ovaries show corpora albicans and cystic follicles. Both tubes are unremarkable. Vulvar cysts revealed a cyst wall lined by a single layer of mucin-secreting columnar epithelium, with no evidence of atypia or malignancy.

DIAGNOSIS:

Panhysterectomy with excision of valval cysts:

- Moderate adenomatous endometrium hyperplasia
- Superficial adenomyosis
- Leiomyomas
- Cervical Nabothian cysts and mild endocervicitis
- Lt. corpus luteum cyst
- Valval mucinous cysts.
- Negative for atypia or malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD

27-04-2026

Nerveen Tahoun