

Pt. Name:	زيمونة حسن احمد فرج		Lab Number:	2912-2026	
Pt. Age:	47 years.	Gender:	Female	Received date:	2026-05-02
Referred By:	د/ مطهر مرشد		Reported date:	2026-05-04	

PATHOLOGY REPORT

Clinical Information.	History of ovarian cancer post-hysterectomy presenting concurrently with active erosive gastritis and a highly suspicious, ulcerated rectosigmoid mass.
Nature of specimen.	Endoscopic biopsies.

GROSS:

Two biopsies were submitted:

- 1- Gastric: soft tissue fragments collectively measured 0.6 cm, totally embedded.
- 2- Colon: soft tissue fragments collectively measured 1 cm, totally embedded.

MICROSCOPIC:

Gastric mucosa showing superficial erosions and moderate infiltration by lymphocytes and plasma cells. There is evidence of inflammatory activity manifested by some neutrophils infiltrating glands. H. pylori characteristic forms are not identified. No evidence of intestinal metaplasia, atypia or malignancy.

Partially ulcerated colonic mucosa shows underlying invasive carcinoma formed of irregular and crowded glands with lining by non-mucigenic malignant columnar cells exhibiting moderate anaplasia & mitosis. Necrosis is observed.

DIAGNOSIS:

Stomach, Endoscopic biopsy:

- Moderate chronic active gastritis with erosions
- H pylori is not identified.
- Negative for dysplasia or malignancy.

Rectosigmoid mass, endoscopic biopsy:

- Adenocarcinoma grade 2.

COMMENT:

Given history of ovarian cancer, confirmation of colonic primary by marker study (CK, CK20, SATB2, CDX2 and PAX8) is recommended before considering origin from previously diagnosed ovarian cancer.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
04-05-2026

Nerveen Tahoun