

<b>Pt. Name:</b>	عبد الله خرصان ناصر الوائلي		<b>Lab Number:</b>	2979-2026	
<b>Pt. Age:</b>	55 years.	<b>Gender:</b>	Male	<b>Received date:</b>	2026-05-04
<b>Referred By:</b>	د/عمار قداري		<b>Reported date:</b>	2026-05-08	

### PATHOLOGY REPORT

<b>Clinical Information.</b>	Largeb irregular heterogeneously enhancing intra-axial mass in the medial right temporal lobe associated with vasogenic edema, midline shift, and compression of the right lateral ventricle and midbrain, alongside two additional smaller non-cystic lesions in the same lobe, with a differential diagnosis primarily favoring Glioblastoma Multiforme versus metastatic disease.
<b>Nature of specimen.</b>	Subtotal resection

#### GROSS:

Soft tissue fragments collectively measured 4.3x3.7x1 cm, totally embedded.

#### MICROSCOPIC:

Cellular astroglial tumor composed of sheets of atypical gemistocytes admixed with other areas showing tumor looks fibrillary composed of irregular short bundles of proliferating spindle cells with enlarged hyperchromatic nuclei. Tumor shows Wide areas of necrosis palisaded by radially arranged viable fibrillary cells. Tumor is vascular with evidence of endothelial proliferation (glomeruloid pattern). Mitosis is markedly active. Picture is consistent with glioblastoma WHO grade 4, progressing from WHO grade 2 gemistocytic astrocytoma. Confirmatory marker study (GFAP, IDH-1, EMA, CK and Ki-67) is recommended

#### DIAGNOSIS:

##### Right temporal intra-axial brain mass, subtotal resection:

- Consistent with Glioblastoma WHO grade IV, complicating pre-existing gemistocytic astrocytoma.
- Recommended for confirmatory marker study.

**Pathologist**

**Prof. Dr. Neveen Tahoun, MD, PhD**  
**08-05-2026**

*Nerveen Tahoun*