

<b>Pt. Name:</b>	عزام فيصل احمد الحميري		<b>Lab Number:</b>	3503-2026	
<b>Pt. Age:</b>	25 years.	<b>Gender:</b>	Male	<b>Received date:</b>	2026-05-18
<b>Referred By:</b>	د/ وضاح العامري		<b>Reported date:</b>	2026-05-20	

### PATHOLOGY REPORT

<b>Clinical Information.</b>	Lt. Orchiectomy for a mass. History of bilateral gynecomastia. Normal B-hCG and AFP serum level.
<b>Nature of specimen.</b>	Lt. Orchiectomy

#### GROSS:

Orchiectomy specimen 7x3x2.5 cm with attached spermatic cord 3 cm long. Cut section revealed testis 4x4 cm with an intratesticular circumscribed soft orange mass 1.7x1 .5cm. Tunica is intact.

#### MICROSCOPIC:

A circumscribed interstitial cell tumor of testis formed of sheets of large cells with abundant eosinophilic and granular cytoplasm, uniform rounded nuclei and ill-defined cell borders. Mitosis is less than 2/10HPF but no evidence of anaplasia, lymphovascular invasion nor infiltration. Residual testicular tissue shows mild to moderate reduction in the number of spermatogenic cells with thickening of their basement membranes. However, some of the tubules show evidence of active spermatogenesis. Mature sperms seen in tubules are about 5-10/tubule. Spermatic cord is unremarkable. No evidence of inflammation. Picture is consistent with interstitial (Leydig) cell tumor.

#### DIAGNOSIS:

##### Lt. Orchiectomy:

- Interstitial (Leydig) cell tumor.

#### COMMENT:

These tumors are of uncertain biological potential, however, the tumor under study is expected to behave in a benign fashion. Follow up is advised.

**Pathologist**

**Prof. Dr. Neveen Tahoun, MD, PhD**  
**20-05-2026**

*Nerveen Tahoun*