

Pt. Name:	احمد نعمان مثنى تويج		Lab Number:	3732-2026	
Pt. Age:	70 years.	Gender:	Male	Received date:	2026-06-04
Referred By:	أ.د/ توفيق المخلافي		Reported date:	2026-06-06	

PATHOLOGY REPORT

Clinical Information.	Rt. hemicolectomy for adenocarcinoma. Radiologically: complex cystic lesion in the right iliac fossa involving the cecal base—radiologically suspicious for an appendicular phlegmon versus an appendiceal mucocele tumor.
Nature of specimen.	Rt. Hemicolectomy

GROSS:

Received was a right hemicolectomy specimen consisting of a terminal ileum that measured 5 x 1.5 cm with an attached, adherent appendix that measured 2.5 cm. The cecum and ascending colon measured 15 x 2 cm. The attached omentum measured 25 x 17 x 2 cm, and the attached fat measured 15 x 8.5 cm. Opening revealed an irregular, ulcerating, creamy-colored mass that measured 4.5 x 5 x 4 cm. The mass was located 5.5 cm away from one end and 10 cm away from the other end.

Dissection of mesenteric fat revealed 15 lymph nodes, the largest of which measured 2.5 cm.

MICROSCOPIC:

Procedure: Right hemicolectomy

Tumor Site: Appendix, with contiguous involvement of the cecal base.

Tumor Size: 5.7x 5 x 4.5 cm.

Histologic Type: Adenocarcinoma with possible neuroendocrine differentiation.

Histologic Grade: Pending for marker study.

Tumor Extension: Tumor penetrates the visceral peritoneum

Margins: Uninvolved.

Lymphovascular Invasion: Present.

Perineural Invasion: Not identified.

Regional Lymph Nodes:

- Number of Lymph Nodes Involved: 12.
- Number of Lymph Nodes Examined: 15.
- Extranodal Extension (ENE): Present (focal).

Pathologic Stage Classification (AJCC 8th Edition):

- pT Category: pT4a (Tumor perforates visceral peritoneum).
- pN Category: pN2 (Metastasis in four or more regional lymph nodes).

DIAGNOSIS:

Appendix, Right Hemicolectomy:

- Appendiceal adenocarcinoma with possible neuroendocrine differentiation.
- Morphologic features are suggestive of a possible neuroendocrine origin; recommended for immunohistochemical studies are recommended CK, Synaptophysin, Chromogranin, Ki-67)
- Tumor directly extends into the cecal base and penetrates the visceral peritoneum (pT4a).
- Metastatic in twelve (12) of fifteen (15) regional lymph nodes, with focal extranodal extension (pN2).
- All surgical margins are negative for tumor.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
06-06-2026

Nerveen Tahoun