

Pt. Name:	ريهام ناصر محمد الجمرة		Lab Number:	3738-2026	
Pt. Age:	4 years.	Gender:	Female	Received date:	2026-06-06
Referred By:	م / الحياة		Reported date:	2026-06-09	

PATHOLOGY REPORT

Clinical Information.	4-month history of purulent discharge from the right inguinal area, found on examination to have an inguinal sinus tract communicating with a purulent collection in the femoral triangle, right inguinal lymph node excision to rule out tuberculosis or other chronic infectious etiologies.
Nature of specimen.	Excision biopsy

GROSS:

Lymph nodes measured 1.6x1.3x0.8 cm, totally embedded.

MICROSCOPIC:

Lymph nodes exhibits partial architectural effacement. The nodal parenchyma and adjacent fibroadipose tissues are significantly distorted by an organizing chronic sinus tract wall, characterized by dense collagenous stroma, active fibroblastic proliferation, and a rich network of newly formed capillaries. The inflammatory process is polymorphic and dense with an abundant population of mature plasma cells, histiocytes and small lymphocytes. Interspersed throughout are focal aggregates of polymorphonuclear neutrophils forming microabscesses. Extensive deposits of coarse, brown granular hemosiderin pigment are noted both extracellularly and within macrophages, indicating chronic localized hemorrhage. Distinct caseating necrosis or well-formed Langhans giant cells are not identified. No evidence of specific granulomas. No evidence of atypia or malignancy.

DIAGNOSIS:

Right Inguinal Lymph Node and Sinus Tract, Excision:

- Chronic suppurative lymphadenitis.
- Associated skin inflammatory sinus.
- Negative for specific granuloma.
- Negative for malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
09-06-2026

Nerveen Tahoun