

Pt. Name:	زهرة محمد يحيى بر		Lab Number:	3767-2026	
Pt. Age:	Adult.	Gender:	Female	Received date:	2026-06-07
Referred By:	د/ فريد		Reported date:	2026-06-11	

PATHOLOGY REPORT

Clinical Information.	Large bronchopleural fistula.
Nature of specimen.	Excision

GROSS:

Soft tissue fragments collectively measured 9.5x8.5x0.6 cm, largest 6x4x0.6 cm, totally embedded.

MICROSCOPIC:

The lung parenchyma shows alveolar septal thickening, type II pneumocyte hyperplasia, and focal subpleural fibrosis with a sparse chronic inflammatory infiltrate. The bronchopleural fistula communication features a lumen filled with extensive acellular necrotic debris and dense fibrinopurulent exudate. The underlying tract wall consists of highly vascular granulation tissue and organized collagenous fibrosis densely infiltrated by a mixed population of neutrophils, lymphocytes, histiocytes, and plasma cells. The adjacent lymph node shows follicular hyperplasia and dilated medullary sinuses. No granulomas, viral inclusions, or cytological features of malignancy are identified.

DIAGNOSIS:

Bronchopleural fistula, excision:

- Inflammatory bronchopleural fistula complicating underlying chronic suppurative inflammation.
- Reactive follicular lymphoid hyperplasia of regional lymph node.
- Negative for specific granulomas.
- Negative for atypia or malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
11-06-2026

Nerveen Tahoun