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| **Pt. Name:** | هدى محمود محمد الاعجم | | | **Lab Number:** | 4941-2026 |
| **Pt. Age:** | 40 years. | **Gender:** | Female | **Received date:** | 2026-07-12 |
| **Referred By:** | د/ رأفت المقطري | | | **Reported date:** | 2026-07-15 |

## PATHOLOGY REPORT

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| **Clinical Information.** | History of neck swelling, found on ultrasound to have an enlarged left thyroid lobe containing a well-defined, oval, heterogeneous, predominantly cystic TI-RADS 3 mass lesion with internal septations and an intact capsule. |
| **Nature of specimen.** | FNAC |

### GROSS:

Twelve unstained smears were submitted and pap stained.

### MICROSCOPIC:

The cytological smears show moderate cellularity on a hemorrhagic background and mild amounts of colloid. The follicular epithelial cells are primarily arranged in cohesive, monolayered sheets and macrofollicular clusters. The individual follicular cells appear small and uniform, featuring regular, round nuclei with evenly distributed chromatin and inconspicuous nucleoli. There is no evidence of significant nuclear crowding, overlapping, or the characteristic features of malignancy, such as nuclear grooves or intranuclear pseudoinclusions. No significant inflammation or necrosis is observed.

### DIAGNOSIS:

***Rt. thyroid nodule, guided FNAC:***

- **Benign cytology. Consistent with a Benign Follicular Nodule (Adenomatoid or colloid nodule).**
- **Bethesda Category II.**
- **Recommended for follow up.**

**COMMENT:**

**According to The Bethesda System for Reporting Thyroid Cytopathology, a Category II (Benign) result carries a very low risk of malignancy (typically <3%). This result aligns with the TIRADS III ultrasound classification mentioned in your earlier report, which also suggests a "probably benign" lesion.**

***Pathologist***

**Prof. Dr. Neveen Tahoun, MD, PhD**
**15-07-2026**

Neveen Tahoun