

Pt. Name:	ماجد علي شوعي الجوهري		Lab Number:	0430-2026	
Pt. Age:	17 years.	Gender:	Male	Received date:	2026-01-21
Referred By:	أ.د/ أنيس اليحيري		Reported date:	2026-01-26	

PATHOLOGY REPORT

Clinical Information.	Axillary lymphadenopathy.
Nature of specimen.	Axillary clearance

GROSS:

Fibrofatty tissue measuring 15x8.5x6.5 cm, entangling multiple lymph nodes ranging in size from 0.8x0.7 cm to 9.5x8.5x4 cm.

MICROSCOPIC:

Sections from all lymph nodes showing almost complete replacement of nodal architecture by large nodules separated by fibrous septa. The nodules comprise expanded paracortical zones and are permeated by a fibrocellular stroma with numerous thin-walled/post-capillary venules. The nodules formed of polymorphous infiltrate formed of small lymphocytes, plasma cells and many eosinophils forming focal eosinophilic micro-abscesses. Many mononuclear, binuclear and multinuclear Reed-Sternberg cells of the lacunar and classic types are seen among this polymorphic infiltrate. Main possibility is classic Hodgkin's lymphoma (nodular sclerosis type). Confirmatory marker study (CD20, CD3, CD30, CD15, MUM-1 and OCT2) is recommended.

DIAGNOSIS:

Axillary lymph node dissection:

- Atypical polymorphic infiltrate, suggestive of classic Hodgkin's lymphoma, nodular sclerosis.
- Recommended for confirmatory marker study.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
26-01-2026

Nerveen Tahoun