

Pt. Name:	كفاء محمد سعيد الحجاجي		Lab Number:	5962-2025	
Pt. Age:	43 years.	Gender:	Female	Received date:	2025-12-30
Referred By:	م / البدر الدولي		Reported date:	2026-01-04	

PATHOLOGY REPORT

Clinical Information.	Uterine masses.
Nature of specimen.	Panhysterectomy.

GROSS:

Panhysterectomy specimen: the uterus measures 14x21x10 cm with myometrial thickness of 3 cm and endometrial thickness of 0.5 cm, showing two intramural fibroids, the largest being 20x17x5.5 cm, having a lobulated, fleshy, gray cut section, away 2 cm from inner os. The cervix is 3.5 cm long. The right ovary measured 3.5x2x1 cm, the right fallopian tube 5x0.5 cm, the left ovary measured 5x2.5x1 cm, and the left fallopian tube 5.5x0.5 cm; all were grossly unremarkable.

MICROSCOPIC:

Sections from the largest intramural mass are markedly cellular and are composed of irregular bundles of proliferating smooth muscles with scattered necrotic areas as well as necrotic individual cells. These cells show hyperchromatic and enlarged nuclei with active mitosis. In some foci tumor cellularity is relatively lower and nuclear features are more bland indicating a progression from a pre-existing cellular leiomyoma. Margins of excision are free. The smallest intramural mass revealed a benign leiomyoma formed of whorly bundles of mature smooth muscles separated by a fibrous stroma. The endometrium is non-secretory and formed of branching glands lined by 1-2 layers of cells. Stroma is cellular. Islands of such endometrium are seen entrapped within deep myometrium. The cervix shows Nabothian cysts and moderate endocervicitis.

DIAGNOSIS:

Uterine mass; panhysterectomy:

- Uterine leiomyosarcoma, grade 2. Margins of excision are free.
- Associated leiomyoma
- Mild simple endometrial hyperplasia, negative for atypia.
- Deep adenomyosis
- Cervix showing Nabothian cysts with associated moderate chronic endocervicitis.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
04-01-2026

Nereen Tahoun

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