

<b>Pt. Name:</b>	سعدية محمد فائد الجبلي		<b>Lab Number:</b>	0763-2026	
<b>Pt. Age:</b>	50 years.	<b>Gender:</b>	Female	<b>Received date:</b>	2026-02-04
<b>Referred By:</b>	أ.د/ أمة الكريم الحوري		<b>Reported date:</b>	2026-02-09	

## PATHOLOGY REPORT

<b>Clinical Information.</b>	Post-menopausal bleeding.
<b>Nature of specimen.</b>	Panhysterectomy.

### GROSS:

Panhysterectomy specimen; uterus measures 7x5.5x3 cm with myometrial thickness of 1.5 cm showing and endometrial thickness of 0.3 cm. Cervix is 2.5 cm, long, with endocervical polyp measured 1 cm. Rt and Lt ovaries measured 2.5x1.5x1 cm and 2.5x1.3x1 cm, respectively, both are grossly unremarkable. Rt and Lt Fallopian tubes measured 5 cm and 6 cm in length, respectively, and are grossly unremarkable

### MICROSCOPIC:

Endometrium is non-secretory formed of hyperplastic endometrium with branching glands exhibiting moderate cystic dilatation with focal crowding. Glands are lined by 1-3 layers of cells. Stroma is compact with scattered thick walled blood vessels. Islands of these endometrial glands and stroma are seen entrapped superficial within myometrium. No evidence of complex pattern. Cervix shows hyperplastic endocervical polyp with Nabothian cysts and mild endocervicitis and squamous metaplasia. Ovaries show corpora albicans and cystic follicles. Fallopian tubes is unremarkable.

### DIAGNOSIS:

#### Panhysterectomy:

- Mild simple cystic endometrial hyperplasia.
- Superficial adenomyosis.
- Hyperplastic endocervical polyp with Nabothian cysts and mild endocervicitis.
- Ovarian cystic follicles and corpora albicans.
- Fallopian tubes are unremarkable.
- Negative for atypia or malignancy.

**Pathologist**

**Prof. Dr. Neveen Tahoun, MD, PhD**  
**09-02-2026**

*Nerveen Tahoun*