

| | | | |
|----------------|------------------------|----------------|------------|
| Pt. Name: | خديجة محمد علي الهاملي | Lab Number: | 1710-2026 |
| Pt. Age: | 50 years. | Gender: | Female |
| Received date: | | Reported date: | 2026-03-18 |
| Referred By: | د/ أنيسة الحرازي | Reported date: | 2026-03-28 |

PATHOLOGY REPORT

| | |
|-----------------------|---|
| Clinical Information. | Abnormal vaginal bleeding and cervical myoma. |
| Nature of specimen. | Endometrial curetting and myomectomy. |

GROSS:

Two samples were received:

- 1- Cervical myomectomy : one fibroid mass measured 4x3.5x3 cm, showing solid rubbery whitish cut section.
- 2- D and C biopsy : bloody soft tissue fragments collectively measured 3.5x3x1 cm, totally embedded.

MICROSCOPIC:

- 1- Myometrial tumor is a benign moderately cellular leiomyoma formed of whorly bundles of mature smooth muscles separated by a fibrous stroma. No evidence of tumor necrosis. No evidence of atypia or malignancy.
- 2- Endometrium is non-secretory and hyperplastic, it is formed of branching complex glands exhibiting focal crowding and lined by 1-3 layers of cells. Stroma is cellular. No evidence of atypia or malignancy.

DIAGNOSIS:

1- Myomectomy:

- Cellular leiomyoma.
- Negative for malignancy.

2- D and C biopsy:

- Mild adenomatous endometrium hyperplasia
- Negative for atypia.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
28-03-2026

Nerveen Tahoun