Patient Name	Mr. RAJEEV KUMAR	Client Name	R S Diagnostic	Specimen Received	15/12/2018
Age/Sex	34 YEARS/MALE			Specimen Type	Tissue
Patient ID	011812150174	Client Code	MOLQ1062CM	Collection Date	18/12/2018
Specimen ID	MOLQ/B-1405-18	Ref. Doctor	Dr. Neha Goyal	Report Date	18/12/2018

SURGICAL PATHOLOGY REPORT

Left Maxillary Swelling irt 21, 22, 23 region.

DIAGNOSIS

NASOLABIAL CYST IRT 21,22,23 REGION A Clinico-pathological co-relation.

Fig. 1

Fig. 2

Fig. 3

Fig. 4

SPECIMEN

Left Maxillary Swelling irt 21, 22, 23 region.

GROSSING

Received two bits of 10% Formalin fixed soft tissue with lumen, firm in consistency and regular margins and shape. Size: 2.0 x 1.0 cms, 0.5 x 1.0 cms.

Reference

i) Rosai and Ackerman's Surgical Pathology.

ii) Modern Surgical Pathology

iii) Shafers, 7th Edition

iv) Cawson, Oral Diseases

Neville, 3rd Edition



Tina Bhardwaj, MDS Consultant Oral Histopathologist

Report generated at MolQ Laboratory, Gurgaon

Gulshan Yadav, MD Consultant Pathologist

Microscopy

Scanner view reveals multiple bits of tissue with cystic lumen lined by epithelium, connective tissue wall and abundant hemorrhagic areas.

Low power view reveals cystic lumen lined by continuous lining arranged in crypts with irregular thickening towards the lumen (ranging from 3-10 cell layer thickness): *nonkeratinized to pseudostratified columnar epithelium* with flat interface overlying the connective tissue stroma <u>resembling nasolacrimal duct epithelium</u>. Superficial part of the epithelium contains very few *mucus producing cells (goblet cells)* and *basal cells are low cuboidal*.

Connective tissue wall (Well vascularized) bundles of collagen fibers interspersed with fibroblasts and mild and focal chronic inflammatory infiltrate. Numerous endothelial lined blood capillaries filled with RBCs along with abundant hemorrhagic areas. Deeper part of the stroma reveals presence of bony spicules.

High power view confirms the above mentioned findings nonkeratinized stratified to pseudostratified columnar epithelium resembling nasolacrimal duct epithelium, few mucous producing cells (goblet cells), collagen bundles and bony spicules. Chronic inflammatory infiltrate chiefly composed of lymphocytes and plasma cells.

Note : All biopsy specimen will be stored for 15 (fifteen) days, block and slides for 5 (five) years only from the time of receipt at the laboratory. No request for any of the above will be entertained after the due date.

Tina Bhardwaj, MDS Consultant Oral Histopathologist

Gulshan Yadav, MD Consultant Pathologist

Reference

i) Rosai and Ackerman's Surgical Pathology.

ii) Modern Surgical Pathology

- iii) Shafers, 7th Editioniv) Cawson, Oral Diseases
- v) Neville, 3rd Edition

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