

<b>Patient Name</b>	<b>Mr. VIJAY PANDIT</b>	<b>Specimen Received</b>	15-Oct-2019
<b>Age/Sex</b>	30 Years/Male	<b>Specimen Type</b>	Tissue
<b>Patient ID</b>	011910150170	<b>Client Name</b>	Kriti Hospital, Gurgaon
<b>Specimen ID</b>	MOLQ/B-1964/19	<b>Collection Date</b>	15-Oct-2019
		<b>Report Date</b>	24-Oct-2019

## SURGICAL PATHOLOGY REPORT

Mid Jejuneal Stricture with Proximal Dilated Bowel and Normal Distal Bowel.

### DIAGNOSIS

**STRICTURE AREA: NON-SPECIFIC INFLAMMATION**

**GROWTH AREA: DYSPLASTIC EPITHELIAL LESION**

**(STRONGLY SUGGESTIVE OF WELL-DIFFERENTIATED ADENOCARCINOMA).**



Fig. 1 (Grossing)

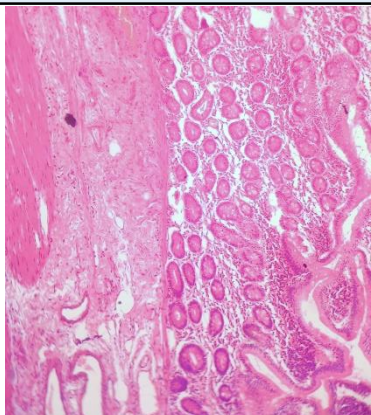


Fig. 2 (Stricture Area)

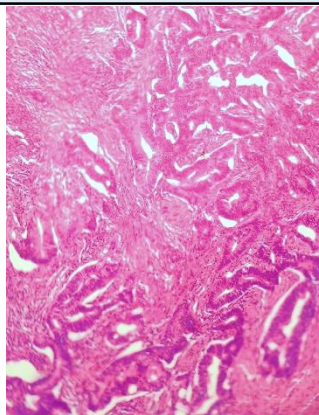


Fig. 3 (Growth Area)

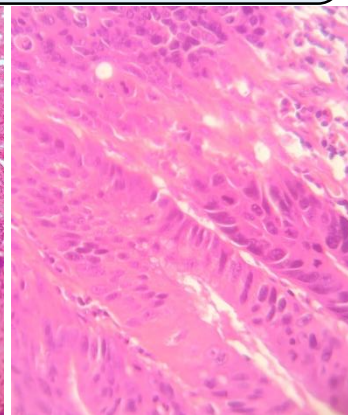


Fig. 4 (Growth Area)

### SPECIMEN

Mid Jejuneal Stricture with Proximal Dilated Bowel and Normal Distal Bowel

### Microscopy

Section examined shows

**1) Stricture Area** with villi having columnar lining epithelium with round to oval nucleus. Deeper tissue shows fibrocollagenous tissue, inflammatory cells (chiefly composed of lymphocytes, plasma cells), glands, muscularis muscles and blood vessels.

**2) Mesentric Fat** with mature adipose cells, fibrocollagenous tissue with reactive lymphnodes.

**3) Growth? area** with epithelial cells arranged in form of glands, villi and nests. These glands are of variable shapes and sizes and are lined by pleomorphic cells which are columnar and have nuclei with coarse chromatin and prominent nucleoli. Numerous mitotic figures are present. Mucin secreting malignant glands are seen. Tumor seems to invade through muscularis propria into sub serosa.

**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.

### Reference

- i) Rosai and Ackerman's Surgical Pathology.
- ii) Modern Surgical Pathology.

**Gulshan Yadav, MD**  
Consultant Pathologist