

(Not for medico legal purpose)
G.G.S. Medical College & Hospital, Faridkot (Pb)
DEPARTMENT OF PATHOLOGY
(BFUHS)

PATHOLOGY NO. 4150/2022

Patient's Name: Simran Kaur Sandhu

Age & Sex: 12 yrs/F

Date: 03-12-2022

Ward/OPD: ENT-I

CR No: 22041373

Material Sent/ Investigation done: Hemithyroidectomy Specimen

REPORT:

Hemithyroidectomy Specimen

Gross Examination:

Received hemithyroidectomy specimen labelled as left lobe with isthmus-left lobe measures 3.5x3x2.5cm. Cut section lobe a grey white growth identified measuring 2.5x2.2cm. Isthmus measures 1x1x0.5cm. Cut section Isthmus - unremarkable.

Microscopic Examination:

Histological features are those of Non Invasive follicular thyroid neoplasm with papillary like nuclear features (NIFLTP). However, no capsular invasion identified in the multiple sections examined.

Note:

Advised clinico-radiological correlation and keep patient on regular follow up.

---End of the report---

[Signature]
Assist Professor

[Signature]
Assoc Professor

[Signature]
Professor

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INSTITUTION OF SCIENCE & TECHNOLOGY

(Not for medico legal purpose)
G.G.S. Medical College & Hospital, Faridkot (Pb)
DEPARTMENT OF PATHOLOGY
(BFUHS)

CYTOLOGY NO. C-3003/2022

Patient's Name: Simran Kaur

Age & Sex: 12yrs/F

Date: 10-11-2022

Ward/OPD: ENT-II

CR. No: 198557ORN

R. No. 22183426DI

Material Sent/ Investigation done: FNAC-Thyroid Swelling.

REPORT:

FNAC-Thyroid Swelling

On Examination:

2x2cm, diffuse

On Aspiration:

Blood Mixed aspirate.

Microscopic Examination:

Cellular smears examined shows presence of tumor cells arranged in papillary fragments, clusters and singly scattered. The individual tumor cells exhibits moderate degree of anisonucleosis, nuclear crowding, nuclear overlapping, high N:Cratio, round to oval eccentrically placed nuclei, immature granular chromatin and abundant amount of cytoplasm. Intranuclear inclusions with nuclear grooving also noted. Thick colloid noted against hemorrhagic background.

Impression:

The cytological features are highly suspicious for malignancy (Suspicious for Papillary Carcinoma Bethesda Category-V)

Advised clinico-radiological and HPE correlation for a *definitive diagnosis*

—End of the report—

B. Singh
Senior Resident

P. L.
Assist Professor

Kindly review slides &
block.

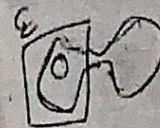
It was opened for
red swelling. Specimen

Chemistry & histology
for histopathological exam.

ARORA

• Ultrasound • Colour Doppler
• DIGITAL X-RAY

Name	SIMRAN		
Date	2 November 2022		



Real Time B Mode Sonography for Thyroid reveals as follows:

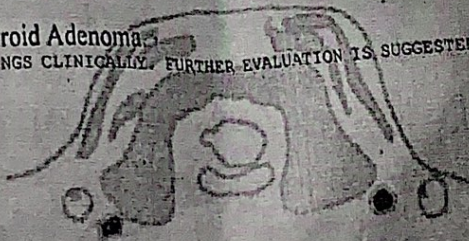
There is a fairly echogenic well defined solid mass in relation to the left lobe of the thyroid gland. It is seen to be surrounded by a thin echogenic rim probably representing capsule of the adenoma. It measures about 15 X 19 X 23 MM. Few small cystic components are visualized. No calcification is seen. Marginal vascularity is delineated on color Doppler.

IMPRESSION:

Findings are suggestive of Thyroid Adenoma.

PLEASE CORRELATE THE FINDINGS CLINICALLY. FURTHER EVALUATION IS SUGGESTED.

TIRADS?



Dr. Vikas P. Arora
M.D. Radio Diagnosis
RMC-21784

LABORATORY
15116 2010

ohed path lab



Ammanut

Ortho II

CR no - 41234

- Sample taken from the rd thigh
- n/o - Distal femur # c Ext fixation in site c & Bone cement in site

Do 2 Puncts
1
J

8/12/22

15

15

PRT PRSNL

ARORA
Doppler

DEPARTMENT OF RADIO DIAGNOSIS & IMAGING
G.G.S. MEDICAL COLLEGE & HOSPITAL, FARIDKOT


NAME	SIMRAN KAUR	AGE/SEX	11Y/F
DATE	18/11/2022	CTNO.	14249

Clinical history: papillary carcinoma of thyroid.

CECT NECK

- An inhomogenously enhancing ill defined lesion is seen involving the left lobe of thyroid measuring approx. 3.6x 2.8x2.6cm likely neoplastic. Advised FNAC correlation. Rest of right thyroid lobe appear normal in size and attenuation.
- Multiple enhancing lymph nodes are noted at level I, II, III and IV bilaterally largest measuring 12 x 10mm at level I on left side.
- Nasopharynx appear normal.
- Epiglottis, median and lateral glosso-epiglottic folds appear normal. B/I vallecula appear normal.
- Bilateral pyriform sinuses and aryepiglottic folds are unremarkable.
- True and false vocal cords are unremarkable.
- Laryngeal cartilages appear normal.
- B/ L sub mandibular, parotid and both lobes and isthmus of the thyroid gland appear normal.
- Muscular and vascular structures in neck are bilaterally symmetrical and normal in appearance.
- Visualised bones appear normal.
- Bone window - No lytic/sclerotic changes are seen in visualised spine.

To be correlated clinically.


RESIDENT
(SA)

CONSULTANT
(CT/RK)

Dr. V.H.
M.D.
By: To
SEED ON

3:53 PM
4:41 PM
PAT
Accredited
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