







**CYTO-PATHOLOGY REPORT**



Invoice No	: D2410108042	Invoice Date	: 02/10/2024 01:57 PM	Reporting Date	: 05/10/2024 12:10 pm
Patient ID	: H2410119432	Report No	:	Report Status	: FINALIZED
Patient Name	: AMATUL SAMAD TANIA			Patient Status	: OPD
Age / Gender	: 35Y 3D / Female				
Ref. Doctor	: ASSIS.DR. MOST. BILKIS FATEMA MBBS,MCPS,(SURGERY)FCPS,MS				

Test Name : USG-GUIDED FNAC(H)

**Specimen : FNA of left axillary swelling (US guided).**

Collected by : Dr. Humaira Islam.

Thank you very much for this kind referral.

**Gross Findings:**

Eight fixed slides prepared from aspirate are stained examined.

**Microscopic features:**

Smears are moderately cellular containing anaplastic epithelial cells in many clusters in a background of lymphocytes.

**Dx: FNA left axillary swelling (US guided):** Malignant cell identified.  
Suggestive of metastatic adenocarcinoma,  
poorly differentiated.  
See comment.

**Comment:** Suggest ancillary investigation to look for primary.

Verified By :

**PROF. FAROOQUE AHMED**

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**Prof. Mohammed Kamal**

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Chamber: SEL NIBASH, 30 Green Road, Dhaka 1205, Bangladesh.

Consultation ID. 924-0844

Reported on: 12-Oct-24

## SURGICAL PATHOLOGY CONSULTATION

**Patient Name:** AMATUL SAMAB TANIA

**Age:** 35 Y **Gender:** F

**Referred by:** Self

**Specimen:** USG guided FNA from left axillary swelling.

**Material Submitted:** Four cyto slides, No. D2410108042, Modern Diagnostic Centre Ltd.

**Clinical Informaion:**

### Microscopic examination:

Smears reveal malignant epithelial cells present mostly in clusters. These have large round to oval nuclei, moderate amount of cytoplasm. The background reveals blood and small number of lymphocytes.

**Diagnosis:** Positive for malignant cell.  
Metastatic carcinoma.

*NB.: Please explore possibility of carcinoma breast / GIT/Lung/etc.*

*\* Slides returned.*



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# পপুলার ডায়াগনস্টিক সেন্টার লিঃ POPULAR DIAGNOSTIC CENTRE LTD.

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## RADIOLOGY SERVICES

MRD No. :	11798074	RIS No. :	3537775
Patient Name :	Ms. Amatul Samad Tania	Age/Gender :	35 Y/F
Referred By :	ASSIST PROF. MST. BILKIS FATEMA, MBBS.MCPS.FCPS.	Bed No/Ward :	OPD
Bill Date :	11/10/2024 9:46AM	Scan Date :	11/10/2024
Report Date :	14/10/2024 8:51PM	Report Status :	Final

## MRI of Both Breast

### Clinical Information:

➤ Dx case of mastitis (left) with single duct ectasia with left axillary lymphadenopathy.

### Findings:

#### Left Breast:

- ◆ Left breast is relatively smaller than right.
- ◆ Elongated soft tissue intensity lesion is noted in upper/lower quadrant of left breast. The lesion T1/T2 hypo, not suppressed in STIR sequence, which show restriction in DWI. After I/V contrast, homogeneous enhancement is noted.
- ◆ Multiple enhancing enlarged lymphnodes are noted which show restriction on DWI. Largest one measuring about 24 x 20 mm.
- ◆ Nipple retraction & skin thickening are noted.
- ◆ Underlying pectoralis major and minor muscles are unremarkable.

#### Time intensity curve of the lesion:

- ◆ Sharp rise followed by plateau.
- ◆ Representing type-II curve considering neoplastic lesion.

#### Right breast:

- ◆ Composition of right breast is type-B.
- ◆ Unenhanced MR images shows no lesions in parenchyma or fat.
- ◆ Following contrast administration, no significant abnormal enhancement is seen.
- ◆ The skin subcutaneous tissue shows no abnormalities.
- ◆ Nipple is unremarkable.
- ◆ Few enlarged lymphnodes are seen in axilla which show restriction on DWI.
- ◆ Underlying pectoralis major and minor muscles are unremarkable.

### Impression: MRI features are suggestive of ---

- Neoplastic lesion in left breast (BI-RADS 4c).
- Bilateral axillary lymphadenopathy (possibly metastatic).
- Normal right breast.

#### **Prof. Dr. Nusrat Ghafoor**

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Fellow Cardiac MRI (NH, Bangalore)  
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