

# Cytec Corporation - Case Presentation Archive - October 1999

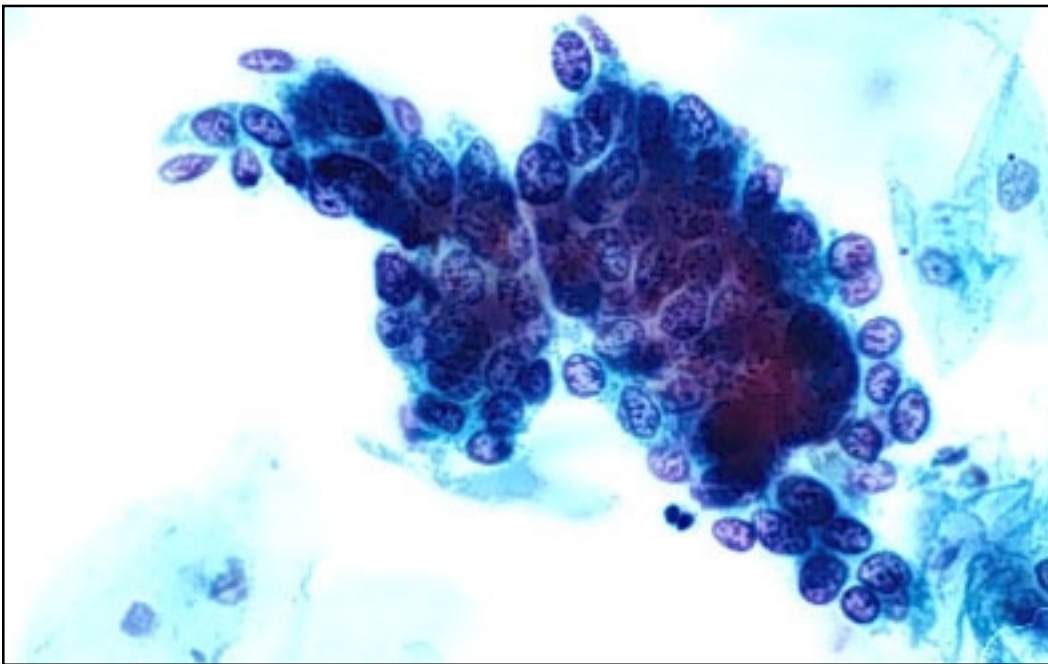
**ThinPrep®PapTest™**

**History:** 64 Years Old

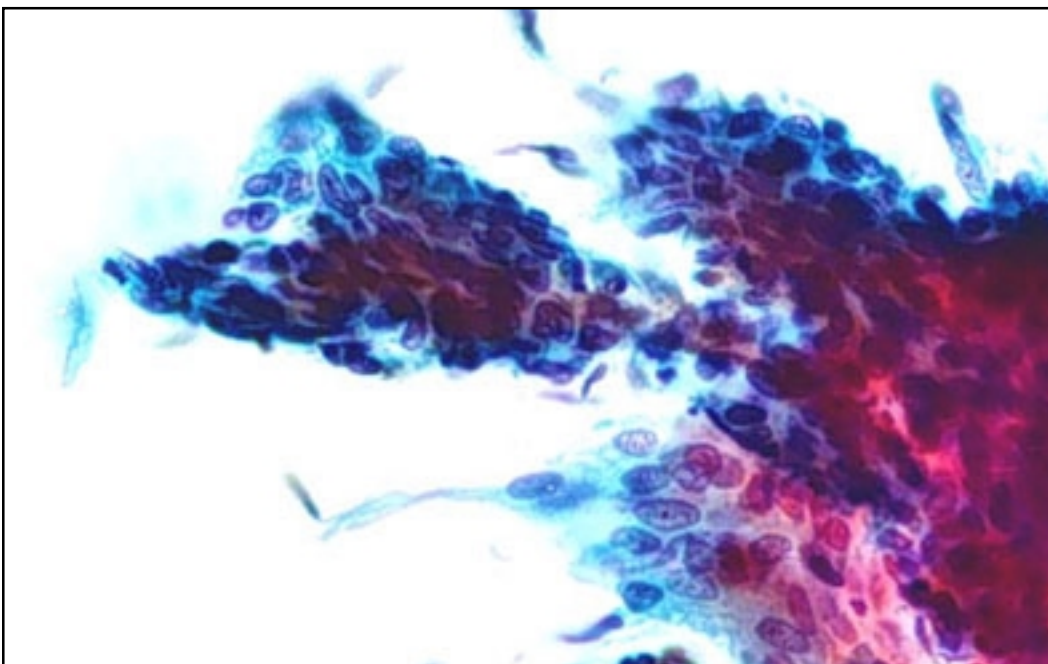
**LMP:** Menopause

Case provided by William J. Jaffurs, MD, Cytology Services of Maryland, Inc.

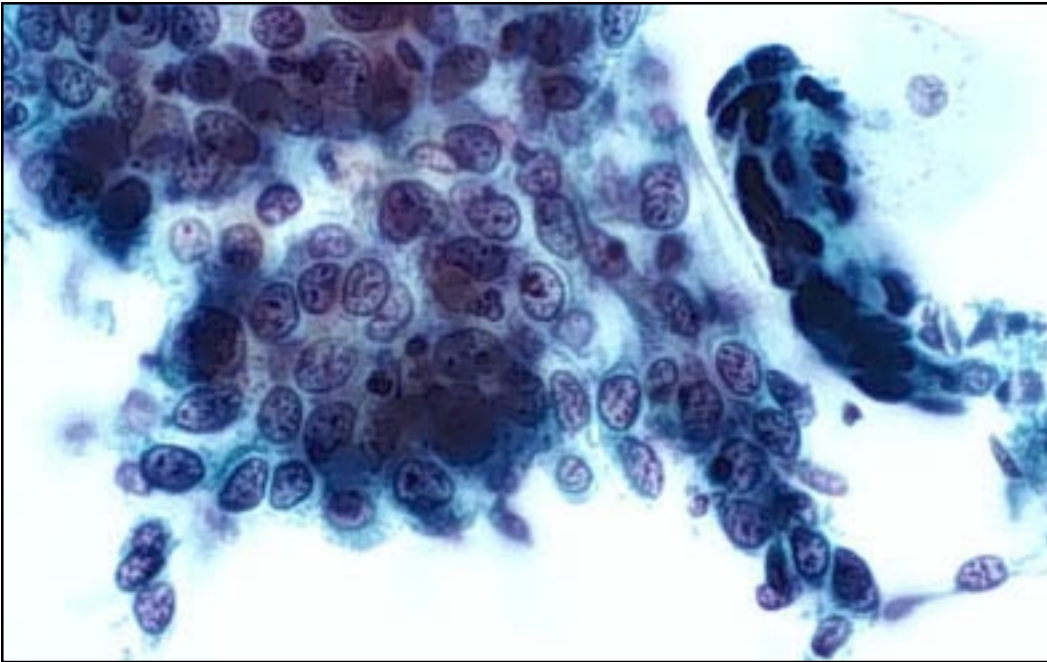
\*The images, analysis and diagnosis for this case study were provided by an independent physician. All conclusions and opinions are those of the physician and not Cytec Corporation.



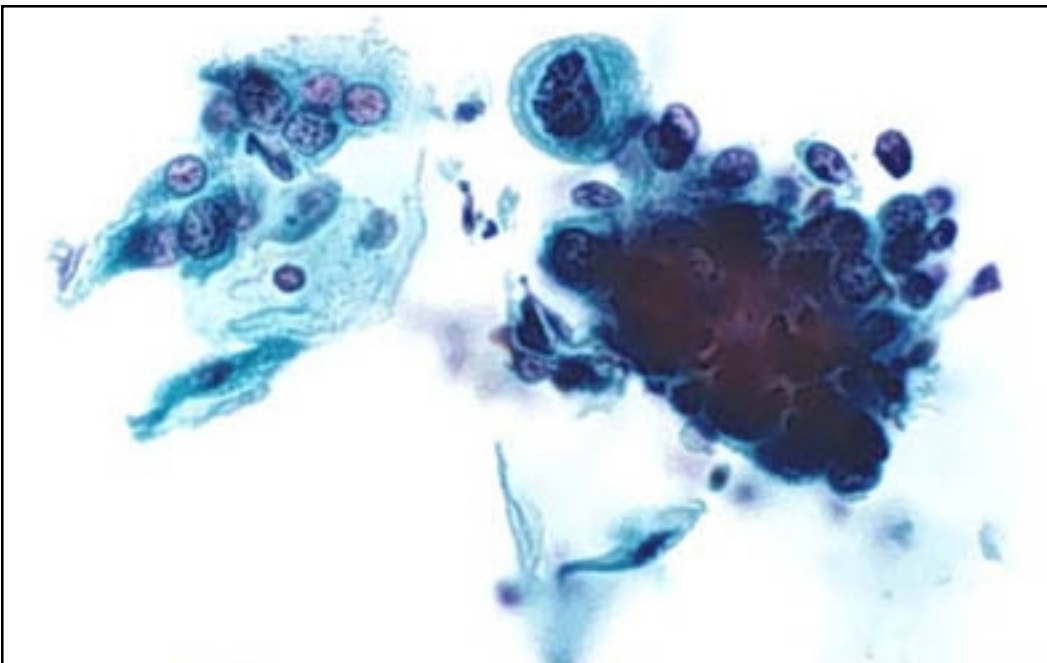
Slide 1



Slide 2

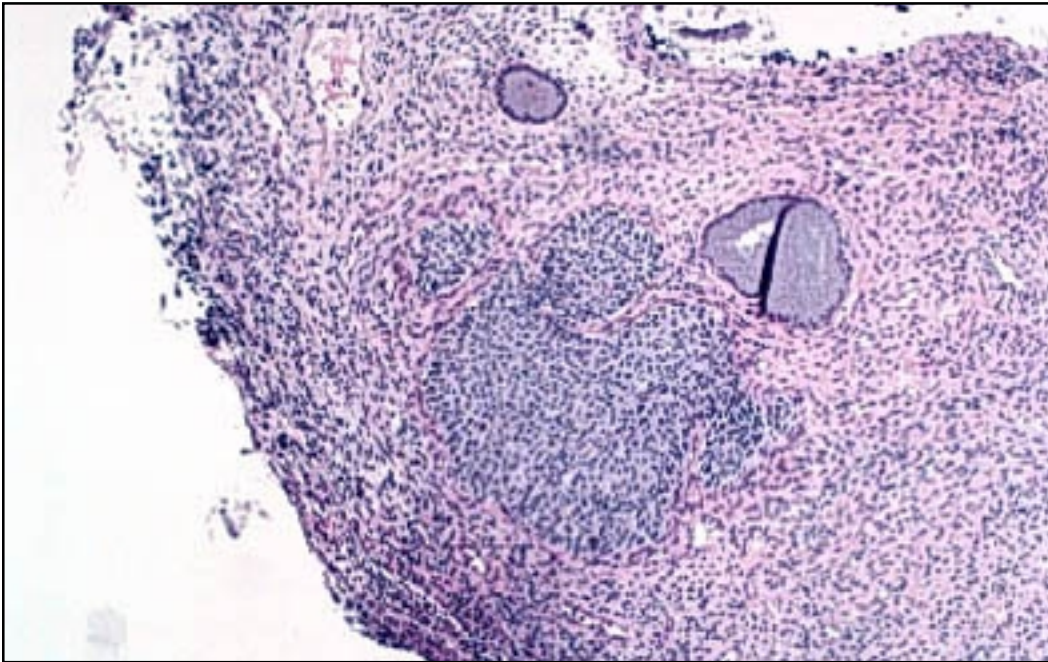


Slide 3

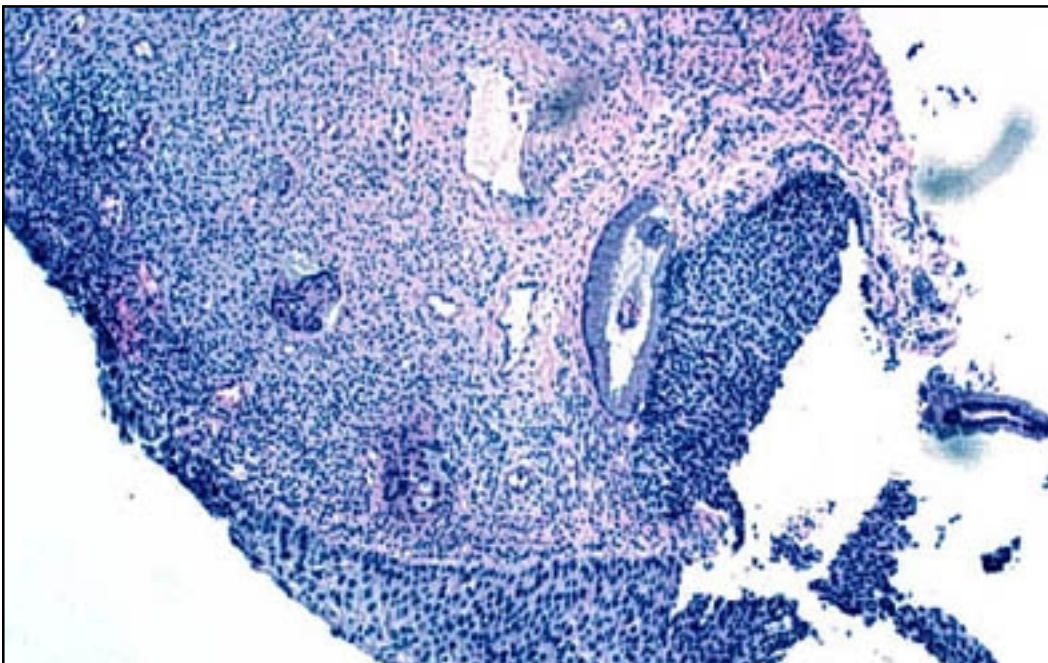


Slide 4





Slide 5



Slide 6

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## **Discussion:**

Slide 1: Crowded group of hyperchromatic cells with ovoid nuclei. Differential diagnosis includes AIS and HSIL in glands.

Slide 2: Crowded, hyperchromatic group with feather-like appearance mimicking AIS.

Slide 3: Crowded, two-dimensional hyperchromatic group with small nucleoli. Note the lack of pseudostratification and elongation of nuclei characteristic of a glandular neoplasm.

Slide 4: Dysplastic squamous cell adjacent to a crowded, hyperchromatic group.

Slide 5: HSIL.

Slide 6: HSIL filling a gland.

No further follow up was available to rule out AIS possibly found on conization. Notably absent in this case are the classic characteristic features of AIS such as pseudostratification, true feathering and rosettes along with elongate, crowded nuclei, which would definitively point towards a glandular lesion.

## **Cytologic Diagnosis:**

Specimen Adequacy: Satisfactory for evaluation.

Squamous Cell Abnormality.

Glandular Cell Abnormality

**Cytologic Findings:** Suspicious: Abnormal cells present which are highly suspicious for malignancy.

Comment: Elements of high-grade squamous dysplasia coexist with the predominantly glandular neoplasia.

**Histologic Prediction:** Adenocarcinoma-in-situ

## **Tissue Diagnosis:**

Cervical biopsies: Epidermoid carcinoma-in-situ (CIN-3, HGSIL)

Endocervical currettings: detached dysplastic epithelium, severe (CIN-3,HGSIL)