

## NON-NEOPLASTIC CHOLECYSTECTOMY

1. A cholecystectomy specimen measuring XXX cm is received.
2. Externally, it shows a greenish / greyish / blackish discolouration, with an intact wall and no other remarkable features // a wall defect measuring XX cm is identified // fibrino-purulent plaques measuring XX cm are present on the serosal surface.
3. On sectioning, the specimen contains greenish / blackish material. No calculi are identified within the lumen // one / several calculi are identified, showing X colour and consistency, ranging from X to X cm / measuring XXX cm in aggregate.
4. The mucosa is velvety / smooth, greenish / brownish in colour, with a wall thickness of X mm, without additional abnormalities // with a lesion measuring X cm located at X, showing X features.
5. Representative sections are submitted as follows:

### **1st Example (Cholecystectomy for cholelithiasis):**

- A1: representative sections.

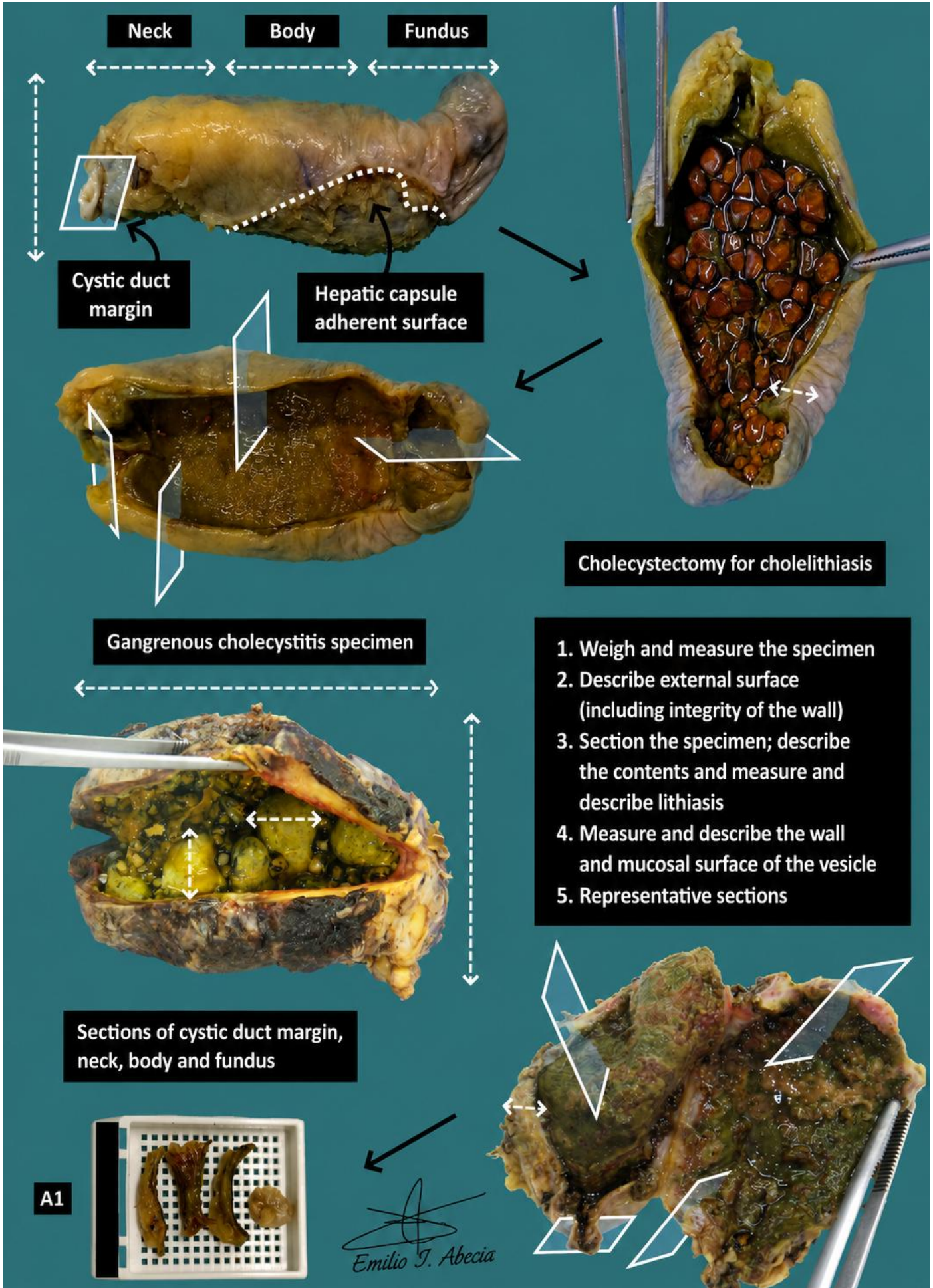
### **2nd Example (Gangrenous cholecystectomy):**

- A1: representative sections.

## TO CONSIDER

- A common surgical procedure in hospital practice, generally performed for acute inflammation of the gallbladder or electively for cholelithiasis.
- Measure and describe the external surface; indicate the presence of fibrino-purulent plaques or wall defects (perforations).
- Open the specimen and describe the contents and mucosal surface.
- Document the presence or absence of calculi.
- Submit representative sections in one block:
  - Include a section of the cystic duct (“margin”).
  - Include a section of the fundus.
  - Include a section of the body / neck of the gallbladder.
  - If any lesion / polyp is identified, submit it entirely to exclude a neoplastic process.
  - Do not submit the calculi.
- Measure and submit the pericyclic lymph node (if identified).





Neck      Body      Fundus

Cystic duct margin

Hepatic capsule adherent surface

Cholecystectomy for cholelithiasis

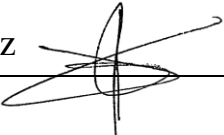
Gangrenous cholecystitis specimen

1. Weigh and measure the specimen
2. Describe external surface (including integrity of the wall)
3. Section the specimen; describe the contents and measure and describe lithiasis
4. Measure and describe the wall and mucosal surface of the vesicle
5. Representative sections

Sections of cystic duct margin, neck, body and fundus

A1

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## BIBLIOGRAPHY

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## DISCLAIMER

The image and text are provided for illustrative purposes only. The tissue sections submitted and the description provided will depend on the individual specimen characteristics, the clinical diagnostic suspicion, the experience of the dissector, and the institutional guidelines of the laboratory.

This document has been translated from the original Spanish version using AI-based tools. The text may contain typographical errors or inaccurate translations.

