

## EPIDIDYMECTOMY

1. A specimen designated as X, measuring XXX cm, is received.
2. Externally, no remarkable features are identified // the specimen shows a smooth / irregular surface, without lesions // the specimen shows a superficial cystic lesion measuring XXX cm.
3. On sectioning, the lesion is unilocular / multilocular, with a brownish / yellowish / translucent lining measuring X mm in thickness, without other remarkable features // the cystic lesion contains serous / amber-coloured / haemorrhagic fluid // solid / papillary structures measuring XXX cm and showing X characteristics are identified.
4. Representative sections are submitted in blocks.

### **1st Example (Spermatic Cord Cyst):**

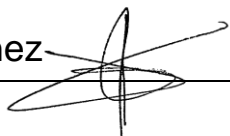
- A1 - A2: representative sections of the specimen.

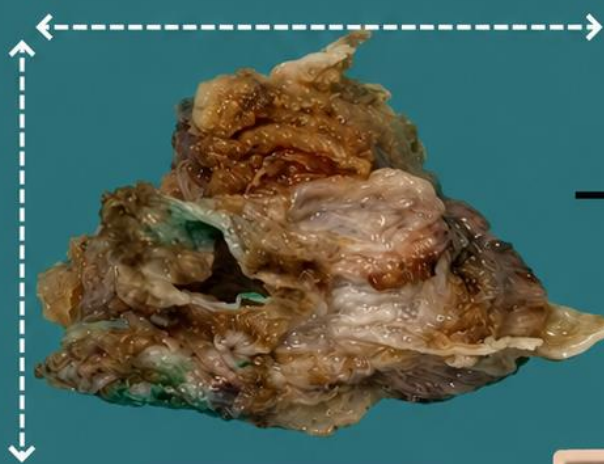
### **2nd Example (Epididymal Cyst):**

- A1 - A2: representative sections of the cyst.
- A3: representative sections of the epididymis.

## POINTS TO CONSIDER

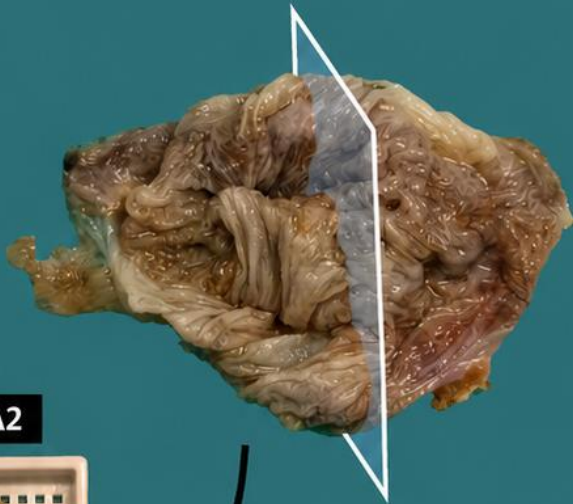
- Resections of generally benign cystic lesions, such as spermatic cord cysts or epididymal cysts; these are thought to arise secondary to obstructive causes. They are generally excised because of local symptoms.
- These specimens usually have limited histological and prognostic significance.
- Measure and describe the external surface of the specimen.
- Serially section and describe the cut surface.
- Submit sections as follows:
  - Include a couple of representative sections of the lesion.
  - Include sections of the parenchyma (if identifiable).
  - If any solid or papillary lesion is identified, submit it entirely.





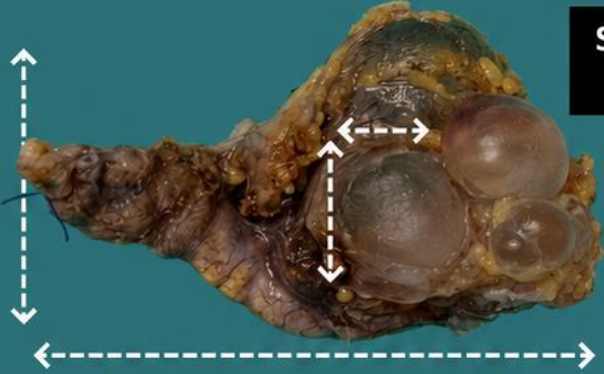
**Spermatic cord cystectomy**

**Representative sections**



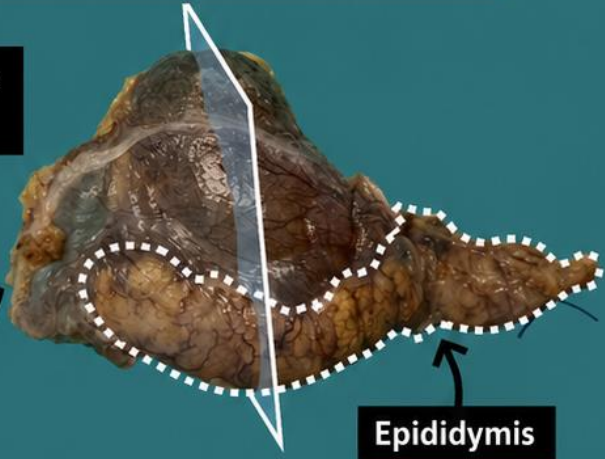
*Emilio I. Abecia*

1. Measure the specimen, indicating identifiable anatomical structures
2. Describe external surface
3. Serially section and describe cut surface
4. Include representative sections

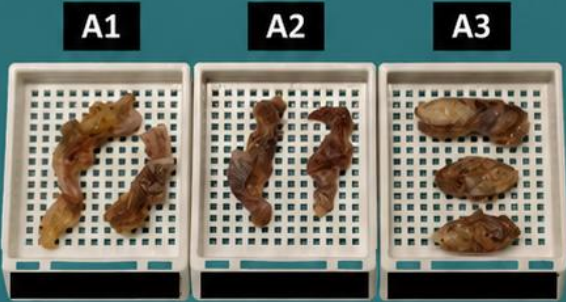


**Epididymis cystectomy**

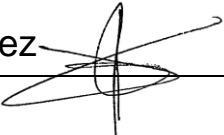
**Simple cysts**



**Epididymis**



**Representative sections**



## 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.

