

Cytologist: _____ Resident: _____ Pathologist: _____ Date: _____ Service charge: _____ Bahi: _____

Comment

Cytologic Description

- ☐ (The Paris System for Reporting Urinary Cytology, _____)
- ☐ (The Milan System for Reporting Salivary gland Cytology, _____)
- ☐ (The Bethesda System for Reporting Thyroid Cytology, _____)
- ☐ (The International System for Serous Fluid Cytology, _____)
- ☐ (WHO Reporting System for Lung Cytology, _____)
- ☐ (WHO Reporting System for Pancreatobiliary Cytology, _____)
- ☐ Malignancy: _____
- ☐ Suspicious for malignancy: _____
- ☐ Neoplasm; salivary gland neoplasm of uncertain malignant potential
- ☐ Neoplasm; benign neoplasm
- ☐ Atypia of undetermined significance; nuclear other
- ☐ Benign: _____
- ☐ Negative for malignancy
- ☐ Negative for high-grade urothelial carcinoma
- ☐ Atypical urothelial cells
- ☐ Atypical
- ☐ Follicular neoplasm
- ☐ Pancreatobiliary neoplasm; low-risk
- ☐ Pancreatobiliary neoplasm; high-risk
- ☐ Suspicious for high-grade urothelial carcinoma
- ☐ High-grade urothelial carcinoma

Cytologic Diagnosis

- ☐ Unsatisfactory for evaluation due to _____
- ☐ Scant cellularity
- ☐ Air-drying artifact
- ☐ No specific epithelial cell component
- ☐ Satisfactory for evaluation with limitation
- ☐ Satisfactory for evaluation
- ☐ Adequacy of specimen
- ☐ Crush artifact
- ☐ Obscuring blood
- ☐ Obscuring inflammation
- ☐ Excessive thickness
- ☐ Clotting artifact
- ☐ Other, _____
- ☐ Poor fixation/preservation/degeneration

Staining

- ☒ PAP
- ☒ HE
- ☐ Special stain _____
- ☐ IHC _____

Preparation Technique

- ☒ Smear _____ slides
- ☒ Spin _____ slides
- ☒ Cell Block
- ☐ Liquid Based

Character of Specimen

- ☒ Fluid _____ ml
- ☒ Appearance
- ☐ Straw-colored
- ☐ Clear
- ☐ Mucous
- ☒ Serosanguineous
- ☐ Turbid
- ☐ Bloody
- ☐ Chylous
- ☐ Colloid-like
- ☐ Others _____
- ☐ Other _____
- ☐ Retained tissue in needle
- ☐ Smear _____ slides
- ☐ Fixation
- ☐ 95% alcohol
- ☐ Air-dried
- ☐ Clotted material
- ☐ (insufficient for cell block-preparation)
- ☐ Slide review No. _____

Cell Block

1-084

Imaging technique

- ☐ U/S
- ☐ EUS
- ☐ EBUS
- ☐ Fluoroscopy
- ☐ CT
- ☐ Rapid on-site evaluation

Side

- ☒ Right
- ☐ Left
- ☐ Others _____

Lymph node (Specific station/location/level)

- ☐ Lymph node (Specific station/location/level)
- ☐ Others _____

Organ

- ☐ Thyroid
- ☐ Lung, transbronchial
- ☐ Lung, transbronchial
- ☐ Liver
- ☐ Eye
- ☐ Others _____

FNA

- ☐ FNA
- ☐ Lung, transbronchial
- ☐ Lung, transbronchial
- ☐ Liver
- ☐ Eye
- ☐ Others _____

EBUS-TBNA

- ☐ EBUS-TBNA
- ☐ Lung, transbronchial
- ☐ Lung, transbronchial
- ☐ Liver
- ☐ Eye
- ☐ Others _____

Pleural fluid

- ☐ Pleural fluid
- ☐ Nipple discharge
- ☐ Washing from _____
- ☐ Other _____

Abdominal fluid (tapping)

- ☐ Abdominal fluid (tapping)
- ☐ Nipple discharge
- ☐ Washing from _____
- ☐ Other _____

Pericardial fluid

- ☐ Pericardial fluid
- ☐ Nipple discharge
- ☐ Washing from _____
- ☐ Other _____

Slide review

- ☐ Slide review
- ☐ Urine (Void, Washing, Catheterized)
- ☐ Sputum
- ☐ Brushing from _____
- ☐ Cerebrospinal fluid
- ☐ Vitreous fluid
- ☐ Other _____

Non-Gynecological Cytology Report

Department of Pathology

Signature

Signature

Resident: **Dr. N. N. N.**
Pathologist: **Dr. N. N. N.**
C24001615
Surge Hospital
16-03-24

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Case 40

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สำนักงานพัฒนาวิทยาศาสตร์และเทคโนโลยีแห่งชาติ โทร 0-2419-6504-5 โทรสาร 0-2414-1093
ศูนย์ปฏิบัติการวิจัยและติดตามผลกระทบทางสิ่งแวดล้อม โทร 0-2419-6345

0-2419-6345

0-2419-6310 หมายเลขประจำโทรศัพท์

หมายเลขงานและรหัสบัญชีเงินไทย 0-2419-6350-1 โทร 0-2419-6350

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