

Pathology / CAP Quality Review for the Cancer Committee

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6/12/2008

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Multiple benchmarks of quality in pathology reporting are monitored and regularly reviewed at Northwest Pathology. This report contains a summary of the pathology QA statistics for the year 2007. Overall, the quality has been excellent and the benchmarks follow a pattern similar to previous years.

Benchmarks include frozen section concordance, Tumor board review and inter-institutional review.

Frozen Sections

Frozen sections are performed generally to direct operative management and results are expected within 20 minutes, per CAP guidelines. With the average calculated each month, the annual average frozen section time is approximately 19 minutes with a range of 17-21 minutes.

Frozen sections are performed under time constraints and evaluated with suboptimal techniques for visualization and some errors are expected. Our macrodiscordance rate is 3.4%, which is comparable to published data. Four of 115 cases were found to be discordant in 2007, three due to sampling error and one to interpretation. One patient was unaffected, one minimally affected and for the other two the outcome was unknown.

Tumor Board

All malignant diagnoses are reviewed weekly for tumor board and QA. The cases are reviewed by a second pathologist and it is determined that there is concordance in the interpretation or a major discordance (ie. Benign versus malignant). There were no major discordances in 2007.

Inter-institutional Review

Any case sent to another institution for evaluation is then reviewed again at NWP for concordance. The outside review is determined to be either in concordance or have a major discrepancy. 203 cases were reviewed on the "outside" in 2007 and none were found to have major discrepancies.

CAP Reporting Protocols

The COC mandates that greater than 90% of pathology reports contain all of the scientifically validated data points relevant to that tumor and anatomic site as compiled by the CAP. We have reviewed over 10% of our cancer reports for 2006 and 2007 with 94% and 96% of reports being in compliance respectively. Reports that were amended to include all the data points were not counted.

Internal QA

Prostate biopsies (2nd review of all negative biopsies)

Sentinel nodes (2nd review if original report signed out as negative)

HER2 testing and IHC validation (over read with FISH if stated as 2+)

Histology Process