

# Pathology Report for the Cancer Committee

Aug. 9, 2007

- I. QC review for completeness of CAP protocols in cancer related pathology reports.
  - A. Standardized format in place, continually updated
  - B. All cancer cases reviewed weekly.
  - C. Approximately 750 cases appropriate to apply TNM classification yearly.
  - D. 100 random cases chosen for review for appropriate use of the CAP protocols (See chart below).
  - E. 13% (6 of 100) of cases were analyzed and 94 found to have all scientifically validated data elements. These 6 cases fell out for various reason will no adverse affects.

Year of abstracting	Annual analytic case load	#of cases reviewed	# meeting CAP protocol	% of cases
2006	750	100	94	94%
2007	750	100	96	96%

- II. Pathology QA is derived from the three primary sources.
  - A. Tumor board QA
  - B. Inter-institutional QA
  - C. Frozen section QA – Local rate (2 cases discordant in 2 months due to sampling error)
- III. Improvements in breast cancer evaluation.
  - A. Switch to rabbit monoclonal antibody for estrogen receptors.
  - B. Have moved to an FDA approved HER2 IHC test (Ventana Pathway) and have successfully completed the first round of CAP proficiency testing for HER2 with 100% (25 of 25 cases) correct.
- IV. Additional QA
  - A. Double prostate core review.
  - B. Intra and inter-departmental consultation.
  - C. Improved information/reporting system (Powerpath) which provides easier access to histories.
- V. Projects

- A. Continued addition to immunohistochemistry panel.
- B. FISH - planning to bring inhouse.
- C. Flow cytometry – planning to bring inhouse
- D. E-path to download information to the registry