
	Anatomic Pathology Internal slides/cases for external review	Dept:	Pathology
		Effective Date:	8/18
		Revised Date:	
		Contact:	Pathology Department CLIA Director
Name & Title: Gregory Pomper, MD, Medical Director of Clinical Laboratories			
Signature: 		Date:	7/21/18

1) General Policy Statement:

On occasion, cases initially reviewed by WFBMC Pathology are sent externally for consultation and/or second opinion.

Scope: All WFBMC Department of Pathology faculty and staff are responsible for complying with this policy.

Responsible Department/Party/Parties:

- i. Procedure owner: Department of Pathology
- ii. Procedure: Department of Pathology
- iii. Supervision: Department of Pathology CLIA Lab Director
- iv. Implementation: Department of Pathology Chair, CLIA Lab Director and Director of Surgical Pathology.

2) Definitions:

- a) **WFBMC:** Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all on-site subsidiaries as well as those off-site governed by WFBMC policies and procedures.
- b) **Policy:** As defined in the Policy on Creating and Amending Policy, a statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities of WFBMC. A policy may help to ensure compliance with applicable laws and regulations, promote one or more of the missions of WFBMC, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors and others are expected to operate.

3) Policy Guidelines:

In general, there are three instances wherein cases originating with the WFBMC pathology department would be sent for external consultation. The recommended pathways for managing cases in these instances are as follows:

- A. WFBMC pathologist requests a case be sent for external (outside) review/ expert opinion:
 - 1. Case materials are sent to outside pathologist consultant.

- B. At the request of WFBMC treating physician –a second opinion is requested:
1. Pathology department transcription services is contacted (336-716-9819) and the request is made to send case outside.
 2. Case materials are retrieved from file, collected and along with a copy of the final report and WFBMC treating physician request, the case is delivered to the WFBMC pathologist of record for review and slide selection. If the WFBMC pathologist of record is not available, the director of Surgical Pathology or other surgical pathologist can review the case and select materials to be sent out.
 3. Additional slides cut as needed are obtained and the case is sent to outside pathologist consultant.
- C. WFBMC patient seen or referred to a different institution and WFBMC material is requested for review:
1. WFBMC pathology department transcription services is contacted (p:336-716-9819; fax: 336-716-7595) and a request for WFBMC pathology material is made.
 2. Case materials are retrieved from file, collected and along with a copy of the final report and WFBMC treating physician request, the case is delivered to the WFBMC pathologist of record for review and slide selection. If the WFBMC pathologist of record is not available, the director of Surgical Pathology or other surgical pathologist can review the case and select materials to be sent out.
 3. Additional slides cut as needed are obtained and the case is sent to requesting institution.

Regardless of the situation, a common pathway to handle extradepartmental consultation would be:

1. Once the outside case has been reviewed, the resulting outside pathology report is received by the pathology department transcription services
2. A copy of the outside pathology report is forwarded to medical records and scanned into WakeOne media tab.
3. The outside pathology report and case materials (if already received back) are delivered to the WFBMC pathologist assigned to the case.
4. For cases in which a WFBMC pathologist requested outside review/expert opinion, the consultant report findings are incorporated into the WFBMC final pathology report.
5. For the other two scenarios previously described, should the final diagnostic interpretation by the outside pathologist represent a MAJOR DISCREPANCY (ie, substantially different diagnosis): an AMMENDED report should be issued by the WFBMC pathologist of record. In some instances, at the discretion of the WFBMC pathologist, additional consultation may be needed to arrive at the final diagnosis.
6. For the other two scenarios previously described, should the final diagnostic interpretation by the outside pathologist represent a Minor discrepancy, an ADDENDED report will be issued by the WFBMC pathologist of record to document the outside pathologists opinion.
7. Major and minor discrepancy determination is per the practice judgement of the WFBMC pathologist of record in consultation with other WFBMC surgical pathologists
8. Upon reception of the WFBMC pathology material from the outside institution, the slides and paraffin embedded blocks will be filed appropriately.

9. In all cases, the pathology department transcription services will provide a copy of the outside surgical pathology report to the Director of Surgical Pathology for quality assurance purposes. Interinstitutional (external) case review provides an additional mechanism for evaluating diagnostic accuracy at the original institution. Monitoring of overall and individual discrepancy rates is performed on a quarterly basis.
- 4) **Review/Revision/Implementation:**
 - a) **Review Cycle:** This policy shall be reviewed by the Pathology Leadership every two (2) years from the effective date.
 - b) **Office of Record:** Department of Pathology
- 5) **Related Policies:**
 - *Communication of Significant or Unexpected Findings*
 - *Anatomic Pathology Quality Assurance Data Procurement Procedure*
 - *Department of Laboratory QA/QI Plan Combined*
- 6) **References, National Professional Organizations, etc.:**

Quality Management in Anatomic Pathology- Promoting Patient Safety Through Systems Improvement and Error Reduction by Raouf E. Nakhleh, MD and Patrick L. Fitzgibbons, MD
- 7) **Attachments:** N/A
- 8) **Revision Dates:**