

Dermatopathology

I. Hours of Operation

Surgical Pathology (Dermatopathology section): 8:00 AM - 6:00 PM; Monday - Friday

II. Contact Section

Phone: 449-4630

III. Scope of Testing

Gross and histologic examination of skin, primarily to diagnose malignancy, inflammatory conditions, and to monitor or assess treatment. Tissue samples may also be examined for the presence or absence of various proteins such as immunoglobulins or tumor products. Examination may also include electron microscopy, direct immunofluorescence, intraoperative consultation, or referral to other laboratory sections (e.g. microbiology) as needed.

IV. Submission of Tissues

All tissue and materials removed surgically from any patient of the Medical Center shall be submitted to Pathology for examination and reporting. Clinically normal prepuces from newborn circumcision are exempted. The Pathologist shall determine the extent of examination.

All materials submitted shall be accompanied by a Surgical Pathology/Consultation Request with the patient's full name, hospital number, account number, location, age, sex, physician's name, specimen site and a brief clinical history, including preoperative and postoperative diagnoses. Each specimen container must be clearly labeled with the patient's name, hospital number and location, as a minimum.

As soon as possible, specimens (excluding DIF specimens and EM specimens) should be placed in at least 10 times their volume of buffered 10% formalin in plastic, opaque, tightly closed specimen containers. Special fixatives may be prescribed in special cases, such as electron microscopy and DIF.

V. Microbiologic Studies on Surgical Specimens

When microbiological studies are needed on surgical specimens, the specimen should not be placed in fixative. It should be placed in a sterile container preferably covered with sterile gauze moistened with sterile saline. A Pathologist should be called (449-4630), who will then divide the specimen appropriately for the microbiologic studies and for histologic examination. Do not place such specimens in any kind of solution (e.g., fixative, saline, etc).

VI. Operating Room Gross Consultation and/or Frozen Section

When a surgeon needs immediate examination of a gross specimen, including cutting it, opening it, etc., a Pathologist shall be called. **The surgeon should not cut or otherwise dissect gross specimens in the operating room.** When an immediate intraoperative diagnosis is needed which will impact the immediate care of the patient, a frozen section should be ordered. If a frozen section or sections are needed, the pathologist should be called and the fresh tissue taken to the frozen section room near the operating room. The pathologist shall complete a special Surgical Pathology Interpretation of Frozen Section or Gross Consultation report to be placed in the chart showing the frozen section diagnosis. At night or on weekends, as much advance notice as possible should be given so that the pathologist will be present at the required time to examine the gross specimen and/or perform frozen sections.

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VII. Electron Microscopy

The Pathologist handling the case shall be responsible for determining whether electron microscopy is diagnostically indicated. If there is a possibility that it will be done, small cubes of tissue (1 mm) should be placed in 3% glutaraldehyde for fixation as soon as possible, and preferably before formalin fixation. H & E section(s) or tissue for light microscopy must also accompany tissue submitted for electron microscopy only.

VIII. Biopsies for T and B Cell Marker Analysis

See Lymphocyte Cell Marker Analysis, T & B Cell for Immune Status, or, Lymphoma CellMarker Analysis, Immunoperoxidase (*in the alphabetic list of tests in this Manual*).

IX. Skin Biopsies for Immunofluorescence

Skin biopsies for immunofluorescence should be sent immediately to Pathology in saline soaked gauze, or if necessary, may be placed in Michel's fixative (N-ethyl maleimide), available from the Immunopathology Laboratory (449-4944). The specimen in gauze should be refrigerated as soon as possible. An H & E section or tissue for light microscopy must accompany tissue sent only for immunofluorescence.

X. Orientation of Surgical Specimens

Surgical specimens requiring special orientation, (e.g., proximal, distal, left, right, and/or o'clock), may be marked with India ink or black silk sutures. The location and nature of such marks must be specified on the Tissue Examination Request. Such indicated orientations shall be maintained throughout the tissue examination and the resulting description and diagnosis by Pathology shall take it into account.

XI. Required Review of Material from Other Institutions

Pathologic material obtained at other institutions, which is the basis for diagnosis of patients being treated at this institution, shall be requested for review by Pathology at this location. The attending physician should initiate a request using a Surgical Pathology Consultation Request form and signed patient authorization to release information for Pathology to obtain such material. The following information is necessary on the Request form: name of the institution originally obtaining the material, name and hospital number of the patient, type and date of surgery at the other institution, and pathology accession numbers, if known. Pathology shall obtain the necessary slides and referral reports. Such review should occur prior to the treatment, whenever possible. Attending physicians should not directly request pathological material from other institutions.

XII. Availability of Materials to Other Institutions and for Outside Consultations

Pathologic material from this laboratory may be referred to outside consultants chosen by the Pathology Department. If the attending physician or the patient desires additional opinions, the matter should be discussed with the pathologist handling the case. Material will be made available on request to other institutions treating patients biopsied at this institution.