



Standard Intent:

Intraoperative consultations and frozen sections are intended to assist the surgeon in case management. The pathologist in charge of anatomical pathology through the Tissue Review committee should establish clear policy, validated process and detailed guidelines on the scheduling, request, processing and reporting of surgical pathology results.

LB.74 The anatomical pathology develops a process for intra-departmental and extra-departmental consultations.

LB.74.1 There is a process for intra-departmental and extra-departmental consultations that addresses circumstances for the inclusion of the consultation in the final pathology report.

LB.74.2 The process addresses circumstances for separate filing of the consultation report.

Standard Intent:

Intra-departmental consultations may be included in the patient's final report, or filed separately. The pathologist in charge of the case must decide whether the results of intra-departmental consultations provide relevant information for inclusion in the patient's report.

Extra-departmental consultations must be readily accessible within the pathology department. These consultations must be mentioned with the official surgical pathology reports or filed separately, so long as they can be readily linked.

LB.75 The anatomical pathology develops guidelines for compiling surgical pathology reports.

LB.75.1 There are implemented guidelines for compiling surgical pathology reports, addressing the following elements:

LB.75.1.1 Gross description (type, number, dimensions).

LB.75.1.2 Essential processing information and performed studies.

LB.75.1.3 Other relevant report elements necessary for the management of the patient.

Standard Intent:

As applicable, all of the above elements of anatomical pathology report must be available in the laboratory information system or in paper records. General laboratory results reporting requirements (LB.24, LB.25 and LB.26) apply.