

ANP.11525 Tissue Assessment Record Phase I

If a statement of adequacy, preliminary diagnosis, or recommendations for additional studies is provided at the time of tissue specimen collection, records of that statement are retained.

NOTE: Records might include a note in the patient's medical record or in the final pathology report.

ANP.11550 Specimen Retention - Grossing Phase I

Gross specimens are retained until at least two weeks after the final reports are signed and results are reported to the referring physician.

REFERENCES

- 1) Travers H. Q&A Section. Northfield, IL: College of American Pathologists CAP Today, March 1992:63
- 2) Travers H. Q&A Section. Savage RA, editor. CAP Today, November 1993:86-87
- 3) Tracey ME. Hospital takes closer look at specimen returns. CAP Today, July 1992:81
- 4) Lester SC. Manual of surgical pathology. New York, NY: Churchill Livingstone, 2001:18-20
- 5) Zhai Q, Siegal GP. Quality Management in Anatomic Pathology. Northfield, IL: CAP Press, 2017.

ANP.11600 Gross Examination - Qualifications Phase II

All macroscopic tissue gross examinations are performed by a qualified pathologist or pathology resident, or another qualified individual (see note), or under the supervision of a qualified pathologist.

NOTE: For specific tissue types only, there are other qualifications that are accepted for individuals performing tissue examination, including the following:

- For neuromuscular pathology specimens, an MD or DO licensed to practice (if required) in the jurisdiction where the laboratory is located who has completed a training program in neuromuscular pathology approved by HHS (ie, the American Academy of Neurology Committee for Neuromuscular Pathology Training Program) may qualify to perform gross examination.
- Other exceptions for dermatopathology, ophthalmic pathology and oral pathology as defined in the CLIA regulation 42CFR493.1449(f) and (g).

ANP.11605 Gross Examination - Supervision Phase II

When individuals other than a pathologist or pathology resident/fellow assist in gross examinations, the extent of their activities and the nature of supervision is defined.

NOTE: A protocol must list the specific types of specimens for which non-pathologists are permitted to assist in the gross examination. The laboratory director is responsible for this protocol. This requirement does not apply to grossing performed by other qualified individuals for specific pathology subspecialties as defined in ANP.11600.

The nature of the supervision (eg, pathologist physically present in the laboratory area versus availability by phone or electronic means for consultation) must be established for each individual. The supervision must be provided by a qualified pathologist (or other qualified individual). For example, an MD or DO dermatologist licensed to practice (if required) in the jurisdiction where the laboratory is located who is board certified in dermatology is qualified to supervise non-pathologists for dermatopathology cases, including Mohs surgery cases.

The protocol must comply with national, federal, state (or provincial), and local laws.

The following requirements apply to laboratories with California licensure:

- A pathologist assistant certified by the American Association of Pathologists' Assistants or American Society for Clinical Pathology must work under the supervision and control of a