



## Technically Speaking

C.S. Guidess, Editor

Department of Pathology  
& Laboratory Medicine

March 2012 Vol. 6, No.2

### Danbury Hospital/New Milford Hospital integration updates

The plan to integrate the Danbury Hospital (DH) and New Milford Hospital (NMH) laboratories into a regional laboratory reflecting the highest aspirations of the Western Connecticut Health Network is well underway. Key features of the plan include:

- Development of a comprehensive in-house test menu at the NMH site to maintain rapid turn-around times necessary to optimize clinical management.
- The primary reference laboratory for all tests not performed in-house at NMH is DH which keeps the work within the community and strengthens resources.
- Prospective quality assurance review is now performed for all surgical pathology and cytology cases diagnosed as atypical hyperplasia, high-grade dysplasia or malignant (same-day review in the majority of cases).
- Beginning next month, the technical component of anatomic pathology (i.e. histologic processing and most gross examinations) will be consolidated at DH. Surgical

pathology diagnoses will continue to be rendered by Dr. Rodrigues at NMH, but newly generated reports will not be entered in Meditech.

- All test results are available in DocLink, Healthlink and/or Soarian. Clinicians may access lab data regardless of testing location.
- Dr. Jeffrey West has been named Medical Director of the NMH laboratory and will work closely with Dr. Rodrigues and the NMH medical staff to ensure a smooth transition on Dr. Rodrigues' pending retirement.
- Procedures are initiated to obtain accreditation from the College of American Pathologists (CAP) at the NMH site.

Occasionally, changes may create confusion and inconvenience. Staff is committed to keeping any inconvenience to a minimum. Please feel free to contact Client Service Representative, Sandra Smith, [sandra.smith@wcthealthnetwork.org](mailto:sandra.smith@wcthealthnetwork.org) or by calling her at 203-739-7800 with any concerns or questions as process changes move forward.

## Procedural change for Helicobacter pylori gastric biopsy

Based on the collective surgical pathology practice experience at Western Connecticut Healthcare and other pathology laboratories, and in light of recent journal article publications, the laboratory will no longer perform special stains on all gastric biopsies for Helicobacter pylori detection. Going forward, gastric biopsies for H. pylori will be evaluated in the following manner:

- All serial H & E sections will be assessed for Helicobacter pylori organisms.
- If Helicobacter pylori bacteria are identified in the H & E sections, the biopsy will be signed out as “positive for Helicobacter pylori in H & E-stained sections” (these positive cases generally have at least moderate chronic gastritis).
- If Helicobacter pylori bacteria are not visualized in the H & E sections, and the biopsy shows less than moderate gastritis (or no inflammatory changes), the biopsy will be signed out as “negative for Helicobacter pylori in H & E-stained sections”.
- If H. pylori are not visualized in the H & E sections, and the biopsy shows at least moderate chronic gastritis, an immunohistochemical stain for Helicobacter pylori will be ordered and the completion of the biopsy report will be deferred until this IHC stain is evaluated (1 to 2 day turnaround time).

## Specimen labeling requirements for Anatomic Pathology and Cytology

Updated regulations require *the time of specimen collection* be included on all specimens to be tested in Anatomic Pathology or Cytology. In addition, specimens must be accompanied by a requisition. Label requirements include:

### On the Specimen Container:

- 2 Patient identifiers (full first and last name, date of birth, medical record number)
- Specimen Source (if not Thin Prep Pap)

### On the Requisition:

- 2 Patient identifiers (see above)
- Specimen Source
- **Time** and date of collection

*For breast biopsies, procurement time and time the specimen was placed in formalin are required.*

- Clinical information and history
- Check appropriate test including Pap, HPV (reflex or over 30), and GC/Chlamydia. Also include menstrual history, abnormal history, history of malignancy and treatment.
- Physician’s name and consulting doctors

Supply requisitions may be obtained by e-mail to [sandra.smith@wcthealthnetwork.org](mailto:sandra.smith@wcthealthnetwork.org) or by calling 203-739-7800.