**Pathological Materials From Other Hospitals: Review Prior to Treatment or Procedures at Children’s Hospital**

**POLICY:** When therapy or surgical intervention at Children’s will be based on a histopathologic diagnosis from an outside institution, the pathologic material must be reviewed by a Children’s pathologist prior to the initiation of the therapy or surgical intervention.

**PURPOSE:** To ensure the provision of safe and effective patient care, pathologic material that has been read and assigned a diagnosis at another institution on which treatment or procedures at Children’s will be based must be reviewed by a Children’s pathologist prior to the initiation of therapy or surgical intervention. Exceptions to this policy are:

1. Cases in which the patient’s clinical outcome could be compromised by the delay necessary to obtain and review outside pathologic material. The indications for and risks of proceeding with treatment without review will be recorded in the medical record.
2. Cases in which the outside pathologic material has been lost, destroyed or otherwise unavailable. It is the responsibility of the attending physician to determine whether new pathologic material is needed prior to intervention and document this decision in the medical record.
3. Cases in which the diagnosis and/or need for proposed treatment or procedure can be reasonably established by clinical, radiographic and/or laboratory testing independent of the pathologic material. The clinical, radiographic, and/or laboratory testing used to arrive at the diagnosis must be documented in the medical record.
4. Cases in which the treatment or procedure will be undertaken for indications unrelated to outside histopathological diagnoses.

**PROCEDURE:**

I. The attending physician is responsible for obtaining and submitting any outside pathologic material to the Children’s Pathology Department prior to the planned treatment or procedure at Children’s. This includes all pertinent slides and a copy of the pathology report. When possible, the material should be submitted at least 5 working days prior to the initiation or treatment or surgery.

II. The submitted pathologic material will be accessioned, reviewed and preliminary results communicated to the attending physician as rapidly as possible.

   A. When the material received is adequate, a final report will be completed within 3 working days following receipt with copies to the attending physician and original contributing pathologist.

   B. When the material received is insufficient for diagnosis, the attending physician will be so informed. Additional tests needed to make a diagnosis along with a projected time-line for the additional testing will be discussed with the submitting physician.

III. Compliance with the policy will be monitored on an ongoing basis with results reported to the Tissue Committee quarterly.
REFERENCES:


Originated by: Tissue Committee *(Kathleen Patterson, MD, Chair)*
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Approved by Medical Executive Committee: 2/06

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