

Surgical Pathology Fellowship, Goal & Objectives

In the broadest terms, the goal of the 1-year surgical pathology fellowship is to prepare the candidate for advanced practice in surgical pathology. In as much as the candidate has already completed a 4-year pathology residency (or a program with at least equivalent experience in surgical pathology), they should have already met the goals and objectives for surgical pathology as enumerated for our own residency program. It is the candidate's responsibility to be aware, through self-assessment, of any weaknesses in regard to these entry-level competencies and to address them rapidly with the assistance and consultation of the fellowship program director. As such, the fellowship is based on a model of practice under supervision, rather than a program of didactic and practical exercises. One anticipates that the practice of surgical pathology will occur in one of three major practice settings: academic practice, single-specialty (usually community hospital based) group practice, or commercial laboratory practice. Each of these settings varies in terms of their typical workloads, spectrum of case types, case complexity, and involvement in teaching and scholarly activity. This fellowship clearly takes place in the academic setting, and while we believe that the experience will adequately prepare the candidate for practice in any of the major situations, the fellow must have the variations clearly in mind to ensure full success in their chosen career situation.

The Surgical Pathology Fellowship Program at UCDCMC is available in one of four formats, and the format which the Fellow elects to follow must be declared before beginning the program.

General Surgical Pathology

Gynecological (and Breast) Pathology*

Gastro-intestinal (GI) pathology*

Informatics in combination with any of the above*

(*See the particular goals and objectives in their sections below.)

At the end of the 1-year Surgical Pathology Fellowship, the successful candidate will be expected to:

1. Provide competent diagnostic opinions in the interpretation of all surgical pathology specimens. The fellow's expertise will include the following:
 - a. intra-operative consultations
 - interpretation of frozen sections
 - interpretation of touch preparations
 - immediate gross evaluations
 - b. complete and systematic gross examination of surgical specimens
 - c. biopsy diagnosis/interpretation
 - d. appropriate work-up and reporting of cancer resections

2. Develop an analytical approach to diagnoses which includes the appropriate selection, interpretation, and integration of ancillary techniques such as electron microscopy, immunohistochemistry, and molecular pathology.

3. Recognize his/her own limitations and ask for appropriate consultations.
4. Serve as a consultant to health care providers:
 - a. effectively communicate results with clinicians in a concerted effort to better patient care
 - b. discuss cases in Pathology and Clinical conference settings as well as recognize patient care implications.
5. Have demonstrated effective teaching of medical students, residents, pathologists, and clinicians in the following settings:
 - a. Instructing junior residents in proper grossing technique
 - b. Pre-viewing surgical pathology cases with junior pathology residents to assist and guide them in their work-up
 - c. Preparing and providing teaching/slide conferences for the above named groups
 - d. Staffing of multidisciplinary conferences with a resident and offering consultative services at these conferences. There will be faculty back-up, if necessary.
6. Have demonstrated effective management of the Surgical Pathology Laboratory
 - a. Through supervision of the grossing room(s), promptly addressing any specimen backlogs, problems regarding specimen processing, or matters of working efficiency and safety
 - b. Knowledge of applicable regulations, to include participation in inspections of the Surgical Pathology Division (by the CAP, or any other agencies as they may occur) and participation in inspections performed by the department of other surgical pathology services (generally in the context of the CAP accreditation program).

Professional responsibility for patient care:

Fellow will inform the fellowship director and the attending pathologist of any unplanned absence and will make every necessary effort to ensure the transfer of cases to someone who undertakes to see to their completion

When vacation is arranged at short notice (less than 45 days in advance) the fellow will be responsible for arranging coverage of their service responsibilities in their planned absence.

Lifelong learning: The fellow is expected to attend:

- a. Department Grand Rounds (generally held on the first and third Monday of each month) and the Stowell and Vogt lectureships
 - b. Resident Presentations (generally at the end of the month)
 - c. The Residency Program Director's Meetings with the pathology residents (to facilitate communication of information related to GME)
 - d. Vet/Path Conference (generally the second Tuesday of each month) which the fellow shall organize
- Participation at other lectures and conferences at which the fellow is not presenting are considered optional

Research: In the event that the fellow is planning on a situation in the academic sector, then participation in a research project which leads (or would be expected to lead) to publication in a peer reviewed journal is strongly encouraged. This component is considered optional for those seeking a situation in other sectors of surgical pathology.

Surgical Pathology Fellowship Rotation/ Graduated Responsibilities Description

The General Surgical Pathology (SP) Fellowship rotations will be divided as follows:

Gross Room/ Biopsies & Consults Fellow -	2-4 months
“Junior Surgical Pathology Faculty” -	4-6 months
Special Surgical Pathology (Neuro, Renal, Bone/soft tissue, Transplant) -	1 month
Dermatopathology -	1 month
Elective/Research -	2 months

Gross Room/ Biopsies & Consults Fellow

Initial break-in rotations: For those fellows coming from other residency programs and new to our department, a break-in period of two cycles as a senior surgical pathology resident (a cycle consisting of a day each on frozen section, grossing, biopsy sign-out, and non-biopsy sign-out) will provide the new fellow with the setting and opportunity to learn the procedures peculiar to our department.

Those fellows continuing from our own residency program are expected to be thoroughly familiar with departmental procedures (including the EMR, the LIS, the dictation/ transcription systems, the frozen section room procedures, the internal phone system for reporting results to operating rooms, accessioning rules, grossing room procedures, histology and special histology schedules and ordering, review and sign-out routines, and quality assurance programs). As such, they can be expected to step into an augmented role in management responsibilities in the grossing room.

When assigned on the service calendar to the **gross room**, the SP fellow will be responsible for:

- the management of the gross room
 - making sure ALL cases are grossed appropriately and on time, whether by the technical support staff, the resident, or the fellow him or herself.
 - Fielding problems that may arise, resolving them in accordance with department policies and procedures if possible, and informing the Surgical Pathology Director in a timely manner of the action taken or of the problem and issues if not resolved
 - grossing of fresh and complex specimens
- teaching of junior residents on service in SP.
- frozen sections and intra-operative consultations
- retaining and working up 4-6 cases/day for sign-out with the appropriate attending faculty.
 - The SP fellow will dictate the gross and microscopic descriptions and prepare a final report for presentation to the attending faculty for sign-out.

When two or more SP fellows are on the service simultaneously, they will alternate weeks between Gross Room and Biopsies/ Consults assignments.

When assigned on the service calendar to **Biopsies/Consults**:

- The SP fellow will be expected to work up and prepare final reports on biopsies for presentation to the attending faculty.
- The SP fellow will review and develop final reports in the morning and have the cases ready for the attending faculty not later than 2:00 pm.
- Whenever a resident is assigned on biopsies on the same day as a fellow, the resident will also have the opportunity to sign-out with the attending faculty.
 - This is to be accomplished by dividing the biopsy cases between the resident and the fellow with each working up and presenting their own cases to faculty for sign-out.
 - The resident should be assigned cases first, so as to provide them with more time for work-up. The fellow takes the cases coming out later in the morning.
 - The fellow is to be available to junior (1st and 2nd year) residents for advice in working up their cases.
- the SP fellow will review and prepare final reports of up to ten (10) consult cases per day (xx:OSyyy) for the attending faculty.

“Junior Surgical Pathology Faculty”

At the end of four (4) months of assignment as Gross Room/ Biopsies & Consults Fellow (or after three (3) months with the consent of the Fellowship Director), the SP fellow will be assigned on the service calendar in rotation with a faculty member. They will act as faculty in all respects while on service in this capacity, utilizing the assigned faculty member as a consultant and co-signer for their reports. Any discrepancies discovered at the time of sign-out and co-signature by the faculty member will be brought to the prompt attention of the fellow for corrective action. If hospital credentialing allows, and the Fellowship Director concurs, the fellow may sign-out uncomplicated case on their own.

Topical assignments: At the end of the 2nd, 4th, and 6th months of rotation as Gross Room/ Biopsies & Consults Fellow and “Junior Surgical Pathology Faculty”, topics will be assigned by the Fellowship director, based in large part on the SP fellow’s performance trends to date, but also allowing for the fellow’s requests and interests as well as input from other faculty; for in-depth review by the fellow. Satisfactory completion of the topical assignment will be determined at least by discussion with the Fellowship Director, and usually with a presentation (either as a lecture or a slide conference) prepared for the residents and service faculty.

Special Surgical Pathology

The SP fellows will be expected to participate in the daily sign-out of Neuropathology, Soft Tissue and Bone Pathology, Renal and Transplant Pathology. All 4 disciplines can be serviced by the SP fellow as these services are generally light. The individual faculty members of these

areas will determine the rotation schedule. Dr. Ramsamooj (Transplant and renal), Dr Borys (Soft Tissue & Bone), and, Drs. Ellis, Jin and Greco (Neuropathology), are the attending faculty.

Dermatopathology

The SP fellow will review and prepare final reports for sign-out with the dermatopathologist in the Department of Pathology (Dr. Konia), as well as the dermatopathologists in the Department of Dermatology (Dr. Fung and Dr Barr).

Elective/Research

The SP fellow will have the opportunity to have an elective month in any of the above rotations or another rotation within or outside of the UCDHS. If an outside rotation is desired, it must be approved by the Fellowship Program Director prior to commencement.

Alternatively, for those headed for single-specialty (usually community hospital based) group practice or commercial laboratory practice, a CQI project may be undertaken. If a specific research or CQI project has not been declared by the fellow prior to the beginning of December, then a project will be assigned in consultation with the Fellowship Director.

Call Schedule

The SP fellows will be expected to remain On-Call for late cases when on service as the Gross Room Fellow and junior residents (1st & 2nd years) are On-Call. On-Call duties include assistance with the performance of frozen sections and intra-operative consultations as well as the triage and instruction of handling fresh specimens until the operating room evening cases are completed.. The fellow will be relieved of duty once these late cases are completed.

The amount of On-Call service described above is not to exceed 7 weeks.

Teaching

The fellow will be expected to teach residents and medical students during slide conferences. In addition, the fellows will be expected to present cases, in a formal setting, on at least a quarterly basis. Fellows are responsible to retain cases for Gross Conference and Vet Path Conference, where they will assist in their presentation . Lastly, except when serving as Gross Room Fellow, the SP fellow will staff assigned multidisciplinary conferences/tumor boards.

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Informatics

The informatics option requires successful completion of the following
The fellow shall audit the following core courses:

MHI210 Introduction to Health Informatics
MHI211 Telemedicine
MHI202 Computer Based Patient Records

Additional courses available for audit include:

MHI209 Clinical Data Acquisition and Analysis
MHI290 Fall Seminar in Health Informatics
MHI290 Winter Seminar in Health Informatics
MHI290 Spring Seminar in Health Informatics
MHI289f Database and Knowledge Management
MHI208 Health Informatics in Web-based Enterprise
MHI207 Medical Decision Support
MHI207P Medical Decision Support practicum
MHI215 Programming in M(MUMPS)

Clinical service assignments will be made so as to allow for attendance at the above courses.
The fellow will:

- serve as a consultant on informatics issues pertaining to surgical pathology
- gain facility with whole slide imaging and telepathology systems
- participate as a co-investigator in any active research projects involving informatics in anatomic pathology

The Informatics Surgical Pathology (SP) Fellowship rotations will be divided as follows:

Gross Room/ Biopsies & Consults Fellow -	0-4 months, (depending on prior experience and familiarity with our facilities, at the discretion of the Fellowship Director)
“Junior Surgical Pathology Faculty” -	4-12 months
Elective/Research -	up to 3 months, with approval of a project mentor and the Fellowship Director (many projects may be ongoing and concurrent with service and course work)

Gynecological Pathology

The fellow will acquire comprehensive diagnostic skill in gynecological pathology via:

- Participation in frozen section preparation and interpretation and contact in the operating room with surgeons
- Evaluation of gynecological surgical pathology cases on each day of assigned service
- Responsibility for cyto-histological correlation of Non-Gynecological and Gynecological cases in coordination with the Cytopathology fellow.
- Daily interaction with experienced gynecological surgical pathologists and clinicians
- Application of new technologies in diagnostic pathology
- Exposure to embryo, fetal, neonatal and placental pathology

The fellow will participate in the teaching programs of the department including:

- Participation and presentation at Breast tumor board and GYN tumor board
- Teaching colleagues and students via group / lecture presentations

The fellow will acquire the skills of independent inquiry and self-learning by:

- Independent work up of current cases
- Development and review of glass slide and whole-slide digital study sets
- Completion of assignments as directed by faculty

The Gynecological Pathology (SP) Fellowship rotations will be divided as follows:

Gross Room/ Biopsies & Consults Fellow -	0-4 months, (depending on prior experience and familiarity with our facilities, at the discretion of the Fellowship Director)
Elective/Research -	up to 3 months, with approval of a project mentor and the Fellowship Director (many projects may be ongoing and concurrent with service work)
“Junior Surgical Pathology Faculty” Sub-specializing in Gynecological Pathology -	5-12 months

Gastro-intestinal Pathology

The fellow will acquire comprehensive diagnostic skill in GI pathology via:

- Participation in frozen section preparation and interpretation and contact in the operating room with surgeons
- Evaluation of gastro-intestinal, liver and pancreatic surgical pathology cases on each day of assigned service
- Daily interaction with experienced gastrointestinal surgical pathologists and clinicians
- Application of new technologies in diagnostic pathology

The fellow will participate in the teaching programs of the department including:

- Participation and presentation at GI and Liver tumor boards and conferences
- Teaching colleagues and students via group / lecture presentations

The fellow will acquire the skills of independent inquiry and self-learning by:

- Independent work up of current cases
- Development and review of glass slide and whole-slide digital study sets
- Completion of assignments as directed by faculty

The Gastro-intestinal Pathology (SP) Fellowship rotations will be divided as follows:

Gross Room/ Biopsies & Consults Fellow -	0-4 months, (depending on prior experience and familiarity with our facilities, at the discretion of the Fellowship Director)
Elective/Research -	up to 3 months, with approval of a project mentor and the Fellowship Director (many projects may be ongoing and concurrent with service work)
“Junior Surgical Pathology Faculty” Sub-specializing in GI Pathology -	5-12 months

Goals and Objectives

To increase experience with the diagnosis of non-neoplastic diseases of the gastrointestinal tract and liver

To increase experience with gastrointestinal, pancreatic, and hepatic tumors, their precursors, and their mimics

To develop an understanding of special techniques in the pathologic characterization of gastrointestinal diseases

To develop an understanding of the clinical features of gastrointestinal, hepatic, and pancreatic diseases, including diagnostic evaluation of patients, treatment algorithms, and tumor staging parameters and prognostic indices

To develop an appreciation of the multidisciplinary team approach to the treatment of patients with these diseases

To enhance teaching abilities through the interaction with pathology trainees, students, and clinicians