

# LSUHSC-Shreveport

Major Participating Institutions-LSUHSC-Shreveport

## RESIDENT LEVELS OF CARE DEPARTMENT of Pathology Cytopathology

Resident Level: PGY 5 or PGY 6

### Core Competencies

- |                            |   |
|----------------------------|---|
| 1) Medical Knowledge       | 4) Interpersonal and communication skills |
| 2) Patient Care Skills     | 5) Systems-based practice                 |
| 3) Practice-based learning | 6) Professionalism                        |

<p><b><u>Direct Supervision:</u></b></p> <ul style="list-style-type: none"> <li>The supervising physician is physically present with the resident and patient.</li> </ul>	<p><b><u>Indirect Supervision:</u></b></p> <ul style="list-style-type: none"> <li>With direct supervision immediately available--the supervision physician is physically within the hospital or other site of patient care, and is immediately available to provide Direct Supervision.</li> <li>With direct supervision available--the supervision physician is not physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide Direct Supervision</li> </ul>	<p><b><u>Oversight:</u></b></p> <ul style="list-style-type: none"> <li>The supervision physician is available to provide review of procedures/encounters with feedback provided after care is delivered.</li> </ul>
<p>The Resident</p> <p><u>Consult/FNA Service</u></p> <ul style="list-style-type: none"> <li>Perform fine needle aspiration (FNA) of superficial palpable masses using aseptic techniques. (1,2,3,4,5,6)</li> <li>Review the Diff Quik stained slides. (1,2,3,4,5,6)</li> <li>Determine specimen adequacy and triage specimens when necessary. (1,2,3,4,5, 6)</li> <li>Make a preliminary interpretation/diagnosis and document it on the consult form and/or in EPIC. (1,2,3,4)</li> <li>Communicate clearly the interpretation/diagnosis to the consulting physician. (1,2,3,4,6)</li> </ul>	<p>The Resident</p> <p><u>Consult/FNA Service</u></p> <ul style="list-style-type: none"> <li>Perform and document history and physical examination of the mass. (1,2,3,4,6)</li> <li>Explain how the procedure will be performed to the patient/caregiver. (1,2,3,4,5,6)</li> <li>Obtain informed consent for the procedure. (1,2,3,4,5, 6)</li> <li>Complete the "Time out Form". (2,3,4,5,6)</li> <li>Develop a differential diagnosis. (1,3)</li> <li>Prepare smears and stain slides for rapid interpretation. (1,2,3,4,5,6)</li> <li>Place mirror image smears in fixative for the PAP stain. (1,2,3,4,5,6)</li> <li>Review the entire case/slides (Diff Quik, Pap stains and cell block) and formulate a diagnosis and determine additional ancillary stains or tests needed. (1,2,3,4,5,6)</li> </ul>	<p>The Resident</p> <p><u>Consult/FNA Service</u></p> <ul style="list-style-type: none"> <li>Review the pathology data system for previous biopsies and the hospital data system for relevant laboratory and radiologic data. (1,2,3,5)</li> <li>Check the patient post biopsy for bleeding and pain. (1,2,3,4,6)</li> <li>Complete the post procedure notes in EPIC and cytology requisition forms. (2,3,4)</li> <li>Enter all completed patient related information/forms in the patient's chart/record. (2,3,4,5,6)</li> <li>Submit the procured specimen/sample and the cytology requisition form to the cytology department. (1,2,3,4,5,6)</li> <li>Submit specimen for ancillary testing (flow cytometry, molecular) to appropriate sections.</li> <li>Record the procedure in the personal and department log book. (3,4,5,6)</li> </ul>

### Gynecologic Cytology

- Pap smear diagnosis are reviewed, discussed and signed out by the pathologist in the pathology data system. (1,2,3,4,5,6)
- Discrepancies in Quality Control (QC) reviewed, discussed, and signed out by Cytopathology Faculty. (1,2,3,4,5,6)

### Non-Gynecologic Cytology

- Non-Gynecologic smear diagnosis are reviewed, discussed, and signed out by the Cytopathology Faculty in the pathology data system. (1,2,3,4,5,6)

### Teaching

- Present at Radiology Pathology conference. Faculty attends and assists if necessary. (1,2,3,4,5,6)

### Research

- Present at the Annual Pathology Resident/Fellow Research Forum. Faculty attends and assists if necessary. (1,2,3,4,5,6)

### Gynecologic Cytology

- Review pre-screened Pap smears (liquid based and conventional) and accurately classify using The Bethesda System. (1,2,3,4,5,6)
- Enter the diagnosis into the pathology data system. (1,2,3,4,5,6)
- QC (10%) of negative pap smears reviewed in second half of the year and diagnosis entered into the pathology data system. (1,2,3,4,5,6)
- Cytology-histology correlation of pap smears and cervical biopsies. (1,2,3,4,5,6)

### Non-Gynecologic Cytology

- Review pre-screened samples / slides from non-gynecologic sites and classify them as negative, atypical or malignant. (1,2,3,4,5,6)
- Enter the diagnosis into the pathology data system. (1,2,3,4,5,6)
- Review cell block and determine if additional ancillary tests (flow cytometry, molecular studies) or stains (histochemical or immunohist/cytochemical) are necessary for a more definite diagnosis or for therapy (EGFR, k-ras). (1,2,3,4,5,6)
- Cytology-histology correlation is performed. (1,2,3,4,5,6)

### Teaching

- Prepare for Radiology Pathology Conference. (1,2,3,4,5,6)
- Prepare for the Interdisciplinary Conference. (1,2,3,4,5,6)
- Consultative role in interacting with other department fellows. (1,2,3,4,5,6)

### Research

- Select a faculty advisor to mentor the project. (1,3,4,5,6)
- Review slides/cases for the research project. (1,3,4,5,6)
- Prepare abstract or paper for presentation at the Annual Pathology/Fellowship Research

### Gynecologic Cytology

- Verify patient's demographics and pathology accession number to prevent errors. (1,2,3,5)
- Review previous history, cytologic and tissue diagnosis. (1,2,3,5)
- Become familiar with the slide preparation (Thin prep and conventional) and staining methods. (1,2,3,4,5,6)

### Non-Gynecologic Cytology

- Verifies patient's demographics and pathology accession number to prevent errors. (1,2,3,5)
- Review previous history, cytologic and tissue diagnosis. (1,2,3,5)
- Become familiar with the slide preparation and staining methods. (1,2,3,4,5,6)

### Teaching

- Prepare for Book Club, Journal Club. (1,2,3,4,5,6)
- FNA performance, slide preparation and smear staining. (1,2,3,4,5,6)
- Medical student pathology labs. (1,3,4,5)

### Research

- Select a research topic early in the year and prepare abstract or paper for presentation at the Annual Pathology/Fellowship Research Forum, national meetings, and/or journal publication. (1,3,4,5,6)

<p><u>Laboratory Management</u></p> <ul style="list-style-type: none"> <li>▪ Discrepancies in QC reviewed, discussed and signed out by the Cytopathology Faculty. (1,2,3,4,5,6)</li> </ul>	<p>Forum, national meeting, and/or journal publication. (1,3,4,5,6)</p> <p><u>Laboratory Management</u></p> <ul style="list-style-type: none"> <li>▪ Performance of Quality Assurance of Gyn, Non-Gyn and FNA cases. (1,2,3,4,5,6)</li> </ul>	<p><u>Laboratory Management</u></p> <ul style="list-style-type: none"> <li>▪ Understand the work flow and operation of the cytology laboratory. (1,2,3,4,5,6)</li> <li>▪ Learn the billing process for Gyn, Non-Gyn and FNA cases (1,2,3,5,6)</li> <li>▪ Know workload limits for cytotechnologist. (1,2,3,4,5,6)</li> </ul>
<p>* A faculty physician, other than another resident, is physically present during the key portions of the procedure or is immediately available.</p>		