

## Cytopathology Goals and Objectives

The purpose of this fellowship program is to provide subspecialty training in Cytopathology in preparation for certification in Special Qualification in Cytopathology of the American Board of Pathology. This includes gynecologic cytology and non-gynecologic cytology including Fine Needle Aspiration (FNA), with acquisition of diagnostic competence and technical skills. These goals are consonant with the ultimate aim of optimal patient care via effective consultation with clinical colleagues.

The fellowship is structured as follows:

The main rotation (10 months)

Elective time (2 months)

Vacation (3 weeks within 12-month time frame)

Our program is an outcomes-based training program based upon the ACGME and Pathology RRC six general competencies as listed below:

**Patient care:** Residents must demonstrate a satisfactory level of diagnostic competence and the ability to provide appropriate and effective consultation in the context of pathology services.

**Medical knowledge:** Residents must demonstrate knowledge about established and evolving biomedical, clinical and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to pathology.

**Practice-based learning and improvement:** Residents must be able to demonstrate the ability to investigate and evaluate their diagnostic and consultative practices, appraise and assimilate scientific evidence and improve their patient care practices.

**Interpersonal and communication skills:** Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with other health care providers, patients, and patients' families.

**Professionalism:** Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

**Systems-based practice:** Residents must demonstrate an awareness and responsiveness to the larger context and system of health care and the ability to call on system resources to provide pathology services that are of optimal value.

The following goals and objectives are specific to the cytopathology fellowship, in the continuation of learned skills and procedures as a resident on rotation in cytology, and to that as an advanced cytopathology fellow.

### **Rotation Goals:**

**Medical Knowledge & Patient Care Competencies:** Understanding of proper collection, processing, and interpretation of gynecologic and non-gynecologic cytology specimens (including FNA).

**Interpersonal and Communication Skills & Systems-based Practice Competencies:** Knowledge of basic principles to enable transmission of the cytological diagnosis in an informative, timely, and succinct way that best serves patient and clinician needs utilizing communication skills and laboratory information systems.

**Laboratory-based learning and improvement competency:** Understanding of principles of data management for quality assurance, billing, and clinical research.

**Professionalism competency:** Understanding of the need for commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient and clinician population as well as to research.

**Fellowship Objectives:**

- The trainee should be able to view any Gyn Pap test and properly classify by The Bethesda System 2001 utilizing both conventional smear and liquid-based preparations. They should also be able to generate and communicate their opinion for proper management. If given a 10 slide quiz 80% of the slides should be able to be properly classified (within one gradation of classification). (**Competencies** **PC, MK, PBLI, IPCS, SBP**)
- Able to list the common inflammatory etiologies as well as identify them as they apply to gynecological samples. (**PC, MK**)
- Able to suggest a variety of methods for confirmation of HPV (human papilloma virus) and other infective agents utilizing histochemical, immunochemical and molecular diagnostic techniques in a cost-effective manner for both gynecological and non-gynecological samples. (**PC, MK, PBLI, IPCS, P, SBP**)
- Able to recite the criteria for unsatisfactory Pap tests and the quality indicators for the Bethesda 2001 terminology. (**PC, MK, PBLI**)
- Able to explain proper performance of a Pap test for a clinician utilizing both conventional smear and liquid-based collection methods. (**PC, MK, PBLI, IPCS, P**)
- Able to detail potential slide labeling discrepancies and list differences between conventional smear, ThinPrep® and SurePath® Pap test preparations. (**PC, MK, PBLI, SBP**)
- Able to give reasonable suggestions for clinical follow-up based upon Pap test diagnoses. (**PC, MK, PBLI, IPCS, P, SBP**)
- The trainee should be able to view any body site cytology and properly classify as negative, inflammatory, atypical/suspicious, neoplastic, or malignant for both aspiration and exfoliative specimens. They should then be able to generate and communicate their opinion for proper patient management. If given a 10 slide quiz 80% of the slides should be able to be properly classified. (**PC, MK, PBLI, IPCS, SBP**)
- Able to list the common inflammatory etiologies as well as identify them in reference to body site of the nongynecological sampling. (**PC, MK, PBLI**)
- Able to recite the criteria for unsatisfactory or limited specimens dependent on body site and be able to communicate them in a concise and cordial manner. (**PC, MK, PBLI, IPCS, P, SBP**)
- Able to explain and demonstrate proper performance of FNA to a clinician. (**PC, MK, PBLI, IPCS, P**)
- Able to recite potential FNA procedural complications to a patient. (**PC, MK, IPCS, P**)
- Will have performed a minimum of 25 diagnostic FNAs on patients. (**PC, PBLI**)
- Able to properly triage an FNA specimen based upon a "provisional diagnosis". (**PC, MK, PBLI, SBP**)
- Able to give reasonable suggestions for clinical follow-up based upon FNA or other nongynecological cytology result. (**PC, MK, PBLI, IPCS, SBP**)
- Able to list and explain choices for continuous quality assurance monitors for both gynecologic and nongynecologic cytology specimens. (**PC, MK, PBLI, IPCS, P, SBP**)
- Able to list the components of the FNA procedure and interpretations that are professionally billable by the pathologist. (**IPCS, P, SBP**)
- Able to identify a contaminant and know how to confirm it and deal with the problem for quality assurance and diagnostic purposes. (**PC, MK, PBLI, IPCS, P**)
- Able to identify and demonstrate steps in managing potential complications of FNA such as pneumothorax, arterial bleed, fainting, and needle-stick injury. (**PC, MK, PBLI, IPCS, P**)
- Able to prioritize work, dealing with urgent cases first. (**PC, PBLI, IPCS, P, SBP**)

- Able to explain the importance of routinely checking all prior and subsequent histology on cytology cases for quality assurance. (**PC, MK, PBLI, IPCS, P, SBP**)
- Able to explain and demonstrate proper triage of specimens for ancillary testing based upon rapid interpretation of cytological specimens (especially radiologically-guided FNAs but not limited to) and final preparations. (**PC, MK, PBLI, IPCS, P, SBP**)

### **Outcomes Assessment (trainee evaluations):**

**Subjective Evaluations:** The standard competency-based trainee evaluation will be completed at the end of each trainee time-period or a minimum of every 3 months by each faculty member with input from cytology fellow, cytology staff and clinicians (360 degree evaluation), simulations of FNA procedure, and oral testing. If trainee performance is perceived as unsatisfactory at anytime during the rotation it should be discussed in a timely fashion prior to the end of the rotation. We require sharing face to face with the trainee any written evaluation by the evaluator.

**Objective Evaluation of the Cytopathology Fellow:** The Fellow will be objectively evaluated in the following ways:

The Fellow will take on line the PEC (Periodic Evaluation of Cytopathology) exam provided by the American Society of Cytopathology. The Fellow will also participate in all external testing events from the ASCP and CAP in GYN and NonGYN cytology. These results will be included in the semiannual and annual review with the Fellow.

### **Resident Duties & Responsibilities (outline):**

- A. Residents and Fellow will be expected to be available for FNA aspirations and daily Gyn & Non-gyn cytology sign-out from the hours of 8:00 AM to 5:00PM Monday through Friday except with excused absences or for attendance at required conferences.
- B. Any unexpected absence or tardiness should be communicated as quickly as possible to the FNA attending of the week.
- C. The resident is responsible for reviewing one tray of abnormal Gyn cases and majority of NonGyn cases including FNA on a daily basis.
- D. The resident is responsible for verbally communicating all malignant diagnoses to the clinician of record and documenting following attending review of diagnoses. All FNA preliminary diagnoses should also be communicated at the time of "provisional" diagnosis.
- E. The resident will be responsible in working conjointly with attending for the monthly cytology Grand Round cases and monthly QA reports when a Fellow is not on service.
- F. The resident and fellow will be share responsibility with the attending staff in instruction and teaching of cytotechnologists, medical students and other technologist students.
- G. The resident and fellow are responsible for keeping the FNA cart and baskets replenished with supplies and stains filtered or replaced on a weekly basis (the person performing the FNA should replace supplies immediately following the FNA).

### **Fellow Duties and Responsibilities (outline):**

- A. The Fellow is responsible for the running of the FNA Service and is the main contact person for clinicians requesting FNAs.
- B. The Fellow is responsible for oversight and teaching of the residents and medical students rotating through the cytology elective.
- C. The Fellow will be available to cover clinical conferences including the weekly Gyn Oncology management conference as needed.
- D. The fellow is responsible for attending and reading on the selected topics for the monthly scheduled didactic cytology lectures given by the cytology staff during the entire year. The

selected lecture topics are based on the current edition of Cytology Diagnostic Principles and Clinical Correlates by Cibas and Ducatman..

E. The fellow is responsible for organizing and running the monthly Cytology Journal Club.

F. The fellow is responsible for choosing and presenting interesting cytology cases at the quarterly Interventional Radiology/Cytology conference.

^ Abbreviations for six general competencies:

**PC = Patient care, MK = Medical knowledge, PBLI = Practice-based learning and improvement, IPCS = Interpersonal and communication skills, P = Professionalism, SBP = Systems-based practice.**